

Contra Costa County MHSa Planning

Stakeholder Planning Group

Older Adults

Minutes

May 16, 2007

Present: Roberto Almanzan, Debbie Card, Barbara Whittingham, Ken Salonen, Connie Steers, Carlos Torres, Dave Kahler, Larry Vaughan, Ruth Atkin, Suzanne Tavano, Kimberly Mayer, Elvira Sarlis, Steve Ekstrom

Review May 2 meeting

New members were welcomed and apprised of the previous meeting's discussions.

A member asked again about the breakout of the \$700,000 that Hospital and Clinic Division was going to contribute. A cost sheet was passed out that was a copy of what was included in the to the State DMH. The member pointed out that this cost sheet still didn't account for what the \$700,000 would specifically pay for. After some more discussion, the point was made by some members that the issue is less about how the \$700,000 would be spent and more about a concern that CCHS Administration may not be really committed to serving older adults. There was hope that in some fashion Hospital and Clinics could get involved, perhaps with in-kind contributions.

A member asked how an older adult program would connect to the Olmstead Act. The response was that MHSa funds could be used for older adults only if they have a MH diagnosis.

Discussion of other counties' programs

Two additional counties were added to our review sheet from last meeting, Santa Clara and Stanislaus. There was a far ranging discussion that followed regarding how we might revise the older adult program proposed almost two years ago.

A member asked if we should retain the original need statement, i.e., pertaining to older adults living in the community who are isolated and with complex presentations. After some discussion, **a decision was reached that the priority population will remain the same.** Other questions were raised but not answered at this point in time. They included:

- Perhaps we could train doctors in residence.
- Do we want to serve few people with a rich array of services (e.g., a full service partnership in one county region)?
- Or do we want to serve more people with fewer services (e.g., a systems development program in three regions)?

Some other program ideas discussed included:

- A scaled down version of the original proposal, without the health component, but with linkage to an expanded MH clinic. This would include a gero-psychiatrist and a mobile team.
- A scaled down version of the original proposal, using an existing CBO health clinic and linked to an expanded MH clinic. This would also include a gero-psychiatrist and a mobile team.
- A version of the original proposal (mobile team, gero-psychiatrist) that does community outreach, and identifies and screens patients brought to the team's attention. MH needs could be addressed by the team and an associated MH clinic. Health needs could be addressed by county clinics as long as the person had Medicare, Medicare/MediCal or was BHC-eligible and could qualify for services through Contra Costa Health Plan. People with dementia or Alzheimer's could receive some services from MSSP, APS, Supportive Services, Linkages, and Adult Day Care.

Next steps

Barbara, Carlos, Ken and Suzanne will attend the Older Adult Conference in San Diego at the end of the month. Afterwards, they'll consider the above ideas as well as anything they learned at the conference and will develop a draft program proposal that this Stakeholder Group will consider at the next meeting.

Next meeting

- May 30 @ 4pm
- 2425 Bisso Avenue, Concord; upstairs conference room