

The Challenges of Multiple Points of Client Engagement:



The Office on Aging HARTS Program

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Learning Objectives



Participants will:

- 1. Learn about the Office on Aging, its role as Area Agency on Aging, and the new HARTS program
- 2. Identify considerations for hospital discharge planning to medical case management
- 3. Identify challenges in client engagement and follow-through on discharge plans and post-discharge resources
- 4. Discuss the role of medical professionals in post-discharge medical case management
- 5. Learn about the Dementia Friends USA Initiative, and become a Certified Dementia Friend!

Disclosure



None of the faculty, planners, speakers, providers, nor CME committee has any relevant financial relationships with commercial interest.

There is no commercial support for this CME activity.

Riverside County Office on Aging



Serves as the Area Agency on Aging (AAA) for all of Riverside County and is one of 33 AAA's within the State of California.

≻618 AAAs Nationally

>20,000 Community Based Organizations providing services

One telephone number (1-800-510-2020) but two locations:

West County Office:

6296 River Crest Drive, Suite K Riverside, CA 92507 (951) 867-3800

East County Office:

44-199 Monroe Street, Suite. B Indio, California 92201 (760) 771-0501

Programs & Services



The Office on Aging provides over 24 different programs and services, either directly or through contracted providers, which assist older adults in remaining independent and living in their homes and communities

All Office on Aging programs and services are free to those who meet the minimum qualifications for each program

Programs & Services



General Categories of OoA programs and services Healthy Lifestyle and Wellness Programs Outreach and Community Education Social Engagement and Community Activities Advocacy and Coordination Options Counseling and Decision Support Care Coordination

Care Coordination



>A variety of home-based care options that may be an alternative to more costly institutional and nursing home care, for vulnerable older adults, persons with disabilities, and their caregivers

Family Caregiver Support Program

Care Pathways

Grandparents Raising Grandchildren

Hospital Discharge Support and Planning (CTI)

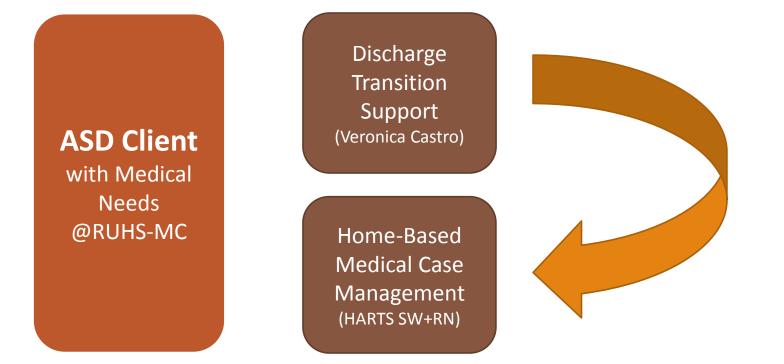
Assistance at Home Case Management Services (Access/CareLink/MSSP)



Discharge Transition Support & Home-Based Medical Case Management









Program Overview



Discharge Transition Support (Veronica Castro) Care Transitions Intervention Program (CTI)[®] / Hospital Liaison

- Office on Aging CTI Coach is embedded at RUHS Medical Center
- HARTS clients are APS-referred or Hospital staffreferred APS cases at risk of readmission
- Patient seen at hospital bedside, home visit by CTI Coach within 24-72 hours of discharge, 3 follow up phone calls, Case Conference with APS Sup/SW
- Coach addresses four pillars of CTI:
 - Medication self-management
 - Use of a personal health record (PHR)
 - Medical care follow-up
 - Knowledge of red flags

Engagement Challenges: Discharge Transition Support



Program is voluntary

APS clients may have little family/caregiver support

Discharge may occur before MediCal/IHSS has been established

Client may not accept ongoing Medical Case
Management after discharge





Home-Based Medical Case Management (HARTS SW+RN) Weekly Case Conferences w/ SW, RN, Sup (including APS/IHSS SW as needed)

Monthly Telephone Monitoring with Client

Quarterly home visit (at minimum)

Annual Alternative Discipline Visit

Engagement Challenges: Medical Case Management



Program is voluntary

APS responsibility is investigation – figuring out when to hand-off

Multiple significant concerns, in addition to medical issues

- Transportation
- Placement/Home Stability
- Poor Behavioral Health (Serious Mental Illness)
- Navigating Health Plans (MediCal/MediCare/Duals)

Engagement Challenges: How to Help



Help patients understand value of Discharge Transition Support/Medical Case Management

Help complete IHSS documents, as appropriate
 SOC 873 – Health Care Certification Form
 SOC 821 – Protective Supervision Form
 Paramedical Services – Authorization and Training

Help assess capacity questions and concerns





Client in RUHS-MC

>84 year old, female

>Admitted to RUHS-MC for UTI for second time in three months

Active APS investigation for self-neglect, and neglect of son

Client has previously failed to follow-through on doctor's orders, leaves hospital AMA

Client had been receiving income as son's IHSS caregiver, no longer receiving income





Client After Discharge

Unsavory characters in and around home

≻60-day eviction notice

Not an IHSS recipient, no active MediCal; application "in process"

Client had been receiving income as son's ISHS caregiver, no longer receiving income



What Would You Do?

How would you help while the client was in the hospital?

What would be your approach after the client had left the hospital?





HARTS Activities

- Assisting with SSI/MediCal application: IHSS, General Relief, CalFresh
- Connecting with RUHS-Behavioral Health partners
- Active collaboration with APS
- Efforts to maintain current housing/find other housing
- SW+PHN Collaboration Weekly OoA Case Conferences





Outcome

Client was evicted, but has a friend she can stay with 'indefinitely'

>Another friend has been providing care (cooking, transportation)

Working with client to complete MediCal application for IHSS, establish friend as IHSS provider

>HARTS MCM still engaged (SW+PHN) to assist as needed



Dementia Friends USA

Developed by the **Alzheimer's Society** in the United Kingdom, the Dementia Friends initiative is underway in the USA.

By helping everyone in a community understand what dementia is and how it affects people, each of us can make a difference for people touched by dementia.





What is a Dementia Friend?

Someone who learns about what it's like to live with dementia and then turns that understanding into action.

From telling friends about the Dementia Friends program to visiting someone who is living with dementia, every action counts.





Dementia Friends USA

A movement to remind all members of a community to be **good neighbors** and to look out for each other in ways both large and small.



Dementia/Age Friendly Communities



Health care that promotes early diagnosis and uses dementia care best practices along the care continuum

Dementia-aware and responsive legal and financial planning

Businesses with dementiainformed services and environments for customers and employee caregivers



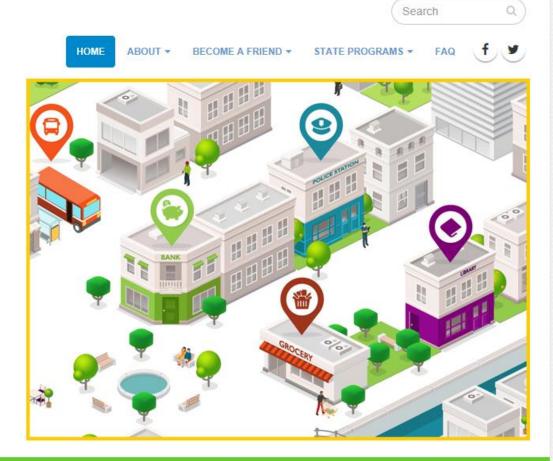
Dementia-friendly public environments and accessible transportation

Dementia-aware emergency responses





Registered Friends in the USA 22,154





Become a Dementia Friend →

Learn more and follow the steps to become a Dementia Friend.

Become a Dementia Friend Today!







DFA **Overview Video**



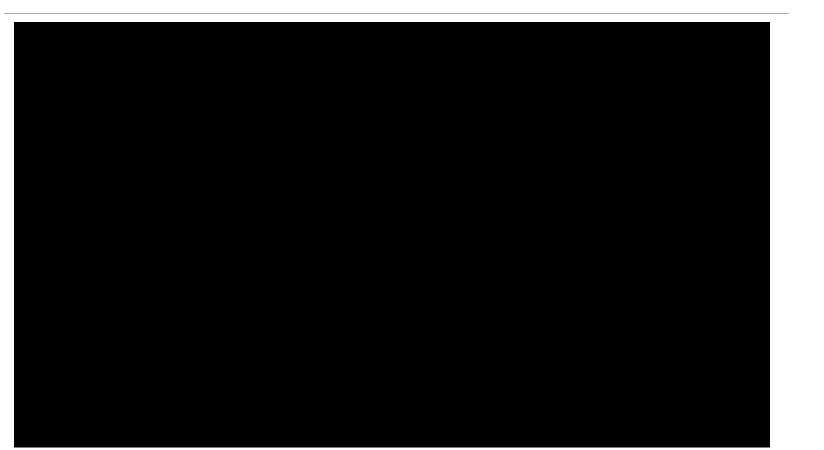
DFA In Your Community Video





DFA Pharmacy Video







Questions?



Riverside County Office on Aging 6296 River Crest Drive, Suite K

Riverside, CA 92507

1-800-510-2020

Thank you!

Please feel free to contact Alicia with an questions you may have:

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