Interagency Geriatric Mental Health Planning Council

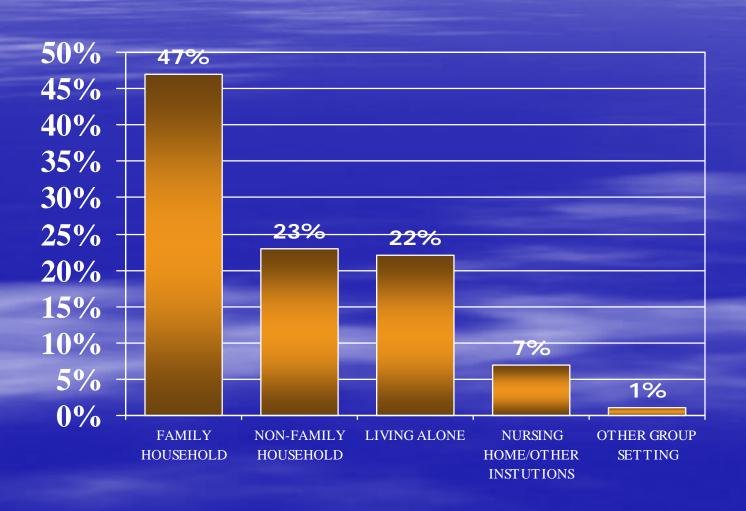


Older Adults and Mental Health

The "Elder Boom" is upon us:

- Over the next 20 years, the NYS population 65 or over will increase more than 50% (2.4 million to 3.7 million)
- The number of older adults with mental illnesses will also increase over 50%

NYS Older Adults' Residential Setting (2000 Census)



Prevalence of Depression in Older Adults

20% of older adults experience symptoms of depression

- Approximately 6 million seniors in America suffer with depression
- Only 10% receive treatment
- The recovery rate for those who receive treatment is estimated at 80%.

Depression often co-occurs with other chronic illnesses

- Many health care professionals mistakenly conclude that this is a normal consequence of the illnesses
- Factors contribute to under diagnosis and under treatment
- Persons with late-life depression are likely to have a more chronic course of illness

Risk of Suicide Among Older Adults

- Suicide rates are highest for older adults
 - Older Adults represent 13% of population, but account for 20% of all completed suicides
 - One older adult commits suicide about every 95 seconds
 - Highest suicide rates are for white males 85 and older
- 75% of older adults visited a primary care physician within 1 month of suicide; nearly 50% within 1 week.

Primary Health / Mental Health Integration

- Primary care and mental health systems are generally not coordinated
- More than half of older adults receive their mental health care from a primary care physician (PCP)
- The rate at which PCPs identify mental health disorders in this population is very low
- PCPs may attribute psychiatric symptoms to aging or other physical disorders
- Most PCPs are not sufficiently trained in mental health and geriatric assessment and care

- Geriatric Mental Health Act
 - Became effective 4/1/06
 - Goal is to create high quality, integrated services to meet mental health needs of older adults & prepare for elder boom
 - Components
 - Interagency Planning Council
 - Annual report
 - Services demonstration grants

- Interagency Planning Council
 - OMH-OFA co-chairs
 - 13 other members (OASAS, OMR, CQC, DOH, SED, OTDA, OCFS, 2 Senate appointees, 2 Assembly appointees & 2 Governors Office appointees)
 - Meet at least quarterly
- Annual report to the Governor
 - Long-term plan and recommendations to address geriatric needs

- Service Demonstration Grants
 - Community integration
 - Improved quality
 - Service integration
 - Workforce
 - Family support
 - Financing mechanisms
 - Specialized populations
 - Information clearing house
 - Staff training
- \$2 million appropriated in support of the grants

- 3 Council Work Groups
 - Screening, Assessment & Treatment
 - Community Integration
 - Workforce Development
- Target population Older adults age 65+ whose independence, tenure, or survival in the community is in jeopardy because of a behavior health problem

Services Demonstration Grants

Development of two RFPs

- Community Gatekeeper
 - Designed to proactively identify at-risk older adults in the community who are not connected to the service delivery system.
 - Gatekeepers are non-traditional referral sources who come into contact with older adults through their everyday work activities.
- Mental / Physical Health Integration
 - Co-location of Mental Health Specialists within Primary Care
 - Improving Collaboration between Separate Providers

Services Demonstration Grants

- A total of 68 Proposals were evaluated by joint teams from OMH, SOFA and DOH
 - The procurement was the largest in OMH history
- A total of 9 Grants were Awarded
 - 3 Gatekeeper
 - 6 Mental Health / Physical Health Integration
 - Awards were made to consider geographic distribution

Services Demonstration Grants

- Gatekeeper Awards:
 - St. Vincent's Manhattan
 - Family Services of Westchester
 - Onondaga County
- Mental Health /Physical Health Integration Awards:
 - Metropolitan Hospital Center
 - Flushing Hospital Medical Center
 - New York-Presbyterian Hospital
 - Warren and Washington Counties
 - University of Rochester
 - Long Island Home

GATEKEEPER PROGRAMS

St. Vincent's - Manhattan

Working in partnership with Village Care of New York and with significant help from building superintendents and Chinatown community based agencies, St. Vincent's – Manhattan Downtown Gatekeeper Program seeks to reach those at greatest risk, socially isolated mentally ill older adults. The program plans to capitalize on the clinical skills and outreach capabilities of its partners to identify, establish trust, and initiate help for socially isolated seniors with mental illness living in downtown Manhattan neighborhoods. Merchants, building superintendents, home repair volunteers, and emergency department staff will be trained as gatekeepers and receive ongoing coaching, support, and individual case feedback.

Family Services of Westchester

Family Services of Westchester is the lead agency representing the Westchester Geriatric Mental Health Coalition, whose key partners are Westchester Jewish Community Services; Weill Cornell Institute of Geriatric Psychiatry; and the Westchester County departments of Senior Programs and Services, Public Safety, and Community Mental Health. The program plans to train police officers and senior center staff as gatekeepers to recognize, identify, and refer adults with behavioral health problems so that they may be assessed and linked with needed services. The approach is based on a successful Westchester County interdepartmental training initiative on elder abuse. Full-time staff dedicated to the program will receive referrals, ensure linkages, and oversee the community response system.

Onondaga County

The Onongdaga County Department of Aging and Youth/Office for the Aging and the Onondaga County Department of Mental Health are partners in establishing a Gatekeeper program replicating the original Gatekeeper Program in a county with both rural and urban populations. Building on prior initiatives to identify high risk elderly populations, the project has developed partnerships with agencies and businesses whose daily work brings them into contact with older adults, including major local cable and public utility providers, law enforcement, and apartment and mobile home court managers. The program plans to establish a formal process enabling gatekeepers to complete a referral with one phone call.

Mental / Physical health Integration

Metropolitan Hospital Center

In partnership with the Jewish Board of Family and Children's Services, Metropolitan Hospital Center will co-locate mental health with physical health services in the hospital's new geriatric outpatient center to primarily serve the underserved, socio-economically disadvantaged, mostly minority communities within its East Harlem, Northern Manhattan, South Bronx, and West Queens service area. Mental health services will include pharmacological interventions, as needed individual and family counseling, and group counseling to assist seniors in dealing with chronic diseases, alcohol abuse, and depression. The program plans to employ a coordinated chronic care management model to facilitate integration of care and evaluate treatment outcomes.

Flushing Hospital Medical Center

The Department of Ambulatory Care and the Department of Psychiatry and Addiction Services at Flushing Hospital Medical Center will expand the integration of mental health care within the hospital's primary care clinic to co-locate culturally appropriate services, provide on site case management and support services, and implement outreach and educational programs. The program expects that the provision of culturally competent integrated health care will better serve and help establish a medical home for the culturally diverse geriatric population that lives in the eight unique racial and ethnic neighborhoods in Queens that comprise the hospital's service area .

New York-Presbyterian Hospital

On the Weill Cornell Medical Center campus of New York-Presbyterian Hospital, the Irving Sherwood Wright Medical Center on Aging will co-locate mental health screening, assessment, and treatment services with its existing outpatient geriatric primary care services. The program also plans to integrate mental health services in the Wright Center's geriatric medical housecall program, which provides primary care for homebound older adults, and to implement a case consultation approach for assessing and addressing the mental health needs of elder abuse victims referred by the Weinberg Center for Elder Abuse Prevention, a shelter providing services to elder abuse victims.

Mental / Physical health Integration

Warren and Washington Counties

The Office of Community Services for Warren and Washington counties will oversee the multi-site implementation of a health integration program that combines both integrated and coordinated models of care in two rural counties covering an area of 1,775 square miles. Contracting with a network of federally qualified health centers, the program will increase the capacity to provide site based integrated primary and mental health care and create the capacity to provide mobile integrated primary and mental health care for older adults living in the community. The program also plans to conduct cross systems care coordination meetings for individuals with particularly complex physical and mental health needs, provide consultation to community providers, and conduct in-kind home based mental health assessments.

University of Rochester

To address the physical and mental health needs of homebound elders in Rochester and its suburbs, the Older Adults Service of the Geriatric Psychiatry Program at the University of Rochester established partnerships with the Jewish Home of Rochester and Jewish Family Service of Rochester to deliver integrated physical and mental health assessment and/or treatment to homebound elderly in their own homes. Training and resources provided by the Older Adults Service and Jewish Family Service will be added to the Jewish Home's new geriatric primary care home visit practice to improve the mental health case finding skills of primary care providers, mobilize psychiatric assessment, bring treatment to the home, and provide continued counseling, care coordination, and outcome monitoring.

Long Island Home

Long Island Home, d/b/a South Oaks Hospital and Health Partners of New York, plans to work with Eastern Long Island Hospital, the Town of Southold, and the Mental Health Association in Suffolk County to increase access to mental health services and improve the integration of physical and mental health care for older adults on the North Fork of Long Island. The program will hire a mental health practitioner to provide screening, assessment, and referral to mental health services for residents in their homes, primary health care offices, Eastern Long Island Hospital, and the Town of Southold Senior Services Center. Contracts with partners will support project marketing, senior center transportation, and a support group.