### **After PASRR What Then?**

PASRR Technical Assistance Center Webinar

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### PASRR What Is It?

- **OBRA 87** 
  - Identify NF applicants & residents with MI and/or MR/DD
  - Assess to determine if:
    - NF appropriate
    - Specialized services are needed
- Implement PAS by January 1, 1989
  - No rules in place (Pub. Nov. 1992)
- Complete RR on current residents by April 1, 1990
  - Alternative Disposition Plan

### After Approval for Admission What Then?

- NF Decision on Admission: Can they meet the applicant's MH and/or MR/DD needs?
- Once admitted Federal regulations mandate that <u>All Needs</u>, including mental health and MR/DD needs, be addressed.
- The PASRR Level II Evaluation should play a critical role in developing the resident's care/treatment plan.
- The Level II information, and treatment outcomes, are essential to appropriate discharge planning
- If the applicant is not admitted, or is discharged from the NF, the Level II information is valuable to families and/or community or other institutional providers.

### Mental Health: A Report of the Surgeon General (1999)

"Disability due to mental illness in individuals over 65 years old will become a major public health problem in the near future because of demographic changes."

> David Satcher, M.D., Ph.D. Surgeon General

### Are Older Adults Receiving MH Care?

" It is estimated that only half of older adults who acknowledge mental health problems receive treatment from any health care provider, and only a fraction of those receive specialty mental health services."

Source: Older Adults and Mental Health: Issues and Opportunities, AOA, 2002

### Are Older Adults Getting Services?

Despite the need:

- Only ½ of older adults with an identifiable mental health problem receive treatment from mental health professionals or primary care physicians
- Less than 3 % are treated by mental health professionals (lowest of any age group)
- While being 13 % of the US Population, Older Americans account for only:
  - 7 % of all inpatient services,
  - 6 % of all community-based mental health services, and
  - 9 % of private psychiatric care.

Impact of "Baby Boomers" Rapid Growth 2010-2030

Nationally:

76 Million will reach 65 years of age
13 % Today
20 % by 2030!

# Boomers are more diverse with regard to generational cohorts:

A Women's Issue!

Women average living 7 years longer

- Age 65-69 54 % are women
- Age 85+ 71% are women
- 13 % are married (77 % widowed)
- More likely to live alone, be institutionalized, & suffer disproportionately from chronic disabilities, including mental disorders

### **Older Adults at Greater Risk**

- Persons with SMI live 25 years less!
- 20 % of persons 55 and over experience mental disorders that are not part of normal aging
- 17 % misuse and abuse alcohol and medications
- Suicide rate (65 and over):
  - <u>Twice</u> the National Average (21 per 100,000)
  - White Men (85+) <u>Six Times</u> the National Average (65 per 100,000)

### **Minority Issues**

- Minority Status
  - 16 % in 1998
  - **25** % by 2030
- Population Growth by Race
  - White 79 %
  - African Americans 130 %
  - Hispanic 341 %
  - Asian/Pacific Islander 323 %

Most Common Disorders (In Order of Prevalence)

- Anxiety Disorders
- Severe Cognitive Impairment (including Alzheimer's disease)
- Mood Disorders (including depression)
- Schizophrenia and personality disorders are less common

### The Olmstead Decision (1999)

- U.S. Supreme Court *Olmstead v. L.C. (1999)*
- Unnecessary segregation of people with disabilities in institutions is a form of discrimination that violates the 1990 Americans with Disabilities Act (ADA)
- Includes older adults with mental illnesses
- States and communities must address the problem
- Increased DOJ emphasis: As of June 2011 DOJ has joined or initiated litigation in 25 cases in 17 states.

Nursing Homes: Today's Mental Health Institutions for Older Adults!

Nursing Homes: 89% of all Institutionalized Older Adults with MI 1.6 Million Older Adults are in NHs 2/3 Have a Mental Illness or **Psychiatric Symptoms** State or County Hospitals (8%) VA or General Hospitals (3%)

### The President's New Freedom Commission on Mental Health (2002)

- Subcommittee on Older Adults
- Presentation on Aging
  - **Overview: Steve Bartels, MD**
  - **Panel:**

American Association for Geriatric Psychiatry Older Adult Consumer Mental Health Alliance National Association of State Mental Health Program Directors

National Coalition on Mental Health and Aging

### President's Commission on Mental Health Recommendations:

- Develop a National Leadership Partnership to improve the MH service delivery system for older adults
- Support outreach and integrated services
- Coordinate services
- Review current Medicare reimbursement policies
- Address stigma and cultural sensitivity
- Provide screening and focus on prevention

### Commission on Mental Health Recommendations

- Implement evidence-based practices
- Support mental health & aging research
- Promote wellness & recovery
- Develop workforce capacity in geriatrics
- Enhance caregiver and peer support programs

### 2005 White House Conference on Aging

- Held Once Each Decade Since 1961
- Focus on Baby Boomers!
- Limited to 50 Recommendations
- 400+ Listening Sessions
   73 Resolutions
- Limited to 1200 Delegates
   Appointed by Governors, Members of Congress, Federal Agencies,
   National Organizations & WHCoA
   Planning Committee.

### The Washington Post (12/20/05)

"...the conference produced a framework for social policies that broadened the scope of aging issues from services to support the frail to opportunities for the healthy to work and serve their communities. Delegates elevated

mental health

transportation, and long-term care as priority issues."

So What's Happened? Administration on Aging Older Americans Act Reauthorized (2006) First Mental Health Content Authorized an AOA Mental Health Position Grant Opportunities-When Funded! **MH** Prevention and Treatment Services Programs for Overcoming Stigma

www.aoa.gov

## Centers for Medicare & Medicaid Services

Mental Health Parity Coverage in Medicare (2008) Increased Emphasis on PASRR Created PASRR TA Center www.pasrr.assist National Association of PASRR Professionals www.pasrr.org Developed State Self Assessment Tool Created the 1915 (i) Optional Medicaid Benefit Money Follows the Person Grants MDS 3.0 Has Increased Focus on MH

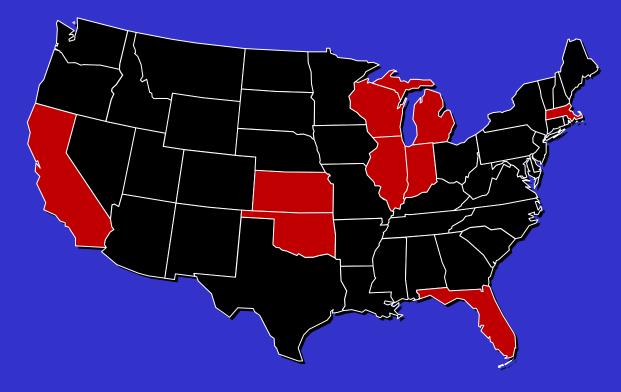
### SAMHSA / CMHS

SAMHSA/CMHS New Role as Public Health Agency (www.samhsa.gov) MH Promotion & MI Prevention! Promotion of Evidence-Based Practices www.nrepp.samhsa.gov Support of First National Conference on **PASRR** (2008) Older Adult TCE Grants **Implementation of Evidence-Based Practices Developed TA Center** 

### **Ten TCE Grantees**

#### Project Areas:

- Integrated mental health and physical health care
  - Illinois, Indiana, Wisconsin
- Outreach
  - Kansas, Michigan, Massachusetts, Florida (Sarasota)
- Systems linkages (interdisciplinary care)
  - California,
     Oklahoma, Florida (Jacksonville)



### Centers for Disease Control & Prevention (CDC)

#### Healthy Aging Program

Mental Health Conferences, Fact Sheets, Webinars, EBP Info, etc. www.cdc.gov/aging

### Health Resources and Services Administration (HRSA)

Restored Funding for Geriatric Education Centers <u>www.hrsa.gov</u>

### The Affordable Care Act

- Signed by President Obama on March 23, 2010
- Fully implemented by 2014
- 95 % of all Americans will be covered by insurance
- Medicaid will cover everyone below 130 % of FPL
- The "Class Act"
- Challenged in Federal Courts
- Threat of repeal

### Institute of Medicine Study

- Congress mandated a follow-up to "*Retooling for an Aging American Study*," the 2008 report on geriatric health care workforce issues to study:
  - Mental health needs of aging population
  - Current and projected future needs
  - Growing needs of aging ethnic populations
  - Policy recommendations for meeting workforce needs
- Report and recommendations anticipated by July 2012

### What are Evidence-Based Practices?

Services that have consistently demonstrated their *effectiveness* in helping people with mental illnesses achieve their desired goals.

Effectiveness was established by different people who conducted rigorous studies and obtained similar outcomes.

### Evidence-Based Practice GATEKEEPER (1978)

Target:

Older adults living alone in the community **Summary**:

Based on a simple idea --- That those in need are unlikely to call for help
Responds with a simple practice --- Use community members who deal with older adults as frontline assessors
After referral --- A case manager & nurse visit the home. Plan of Care developed by a multidisciplinary team

### Evidence-Based Practice IMPACT

(Improving Mood-Promoting Access to Collaborative Treatment) Target: Older adults with major depression or dysthymic disorder Summary: A stepped, collaborative care approach in which a nurse, social worker, or psychologist works with the person's primary care provider to develop a course of treatment

### Evidence-Based Practice PEARLS

(Program to Encourage Active Rewarding Lives for Seniors)

Target: Community-dwelling older adults with minor depression receiving home-based social services from community services agencies

Summary: In-home counseling sessions followed by a series of maintenance session contacts by telephone



Knowledge Informing Transformation

### Permanent Supportive Housing

An Evidence-Based Practice



## What is Permanent Supportive Housing?

Decent, safe, and affordable community-based housing that provides tenants with the rights of tenancy under state and local landlord tenant laws and is linked to voluntary and flexible support and services designed to meet tenants' needs and preferences.

### Evidence-Based Practice HEALTHY IDEAS

(Identifying Depression, Empowering Activities for Seniors)

Target: Community-dwelling, frail, high-risk, older adults receiving case management services

Summary: Integrates depression awareness & management into existing case management services. Fosters relationships between community aging service providers & mental health professionals

### Exemplary Practice PATCH

- (Psychogeriatric Assessment and Treatment in City Housing)
- Target: Public housing residents with depression or other mental health disorders

Summary: Outreach model that provides training to public housing staff to identify residents with MH issues, on site assessment by a psychiatric nurse, home visit by a psychiatrist & development of a treatment plan. Initial treatment is provided by the nurse with backup from the psychiatrist.

#### Older Adult, Family, and Caregiver Guide

on Depression

The Treatment of Depression in Older Adults

EVIDENCE-BASED PRACTICES

Knowledge Informing Transformation Guide to EBPs



G. ULPARTINI, Y. CITILIALI, AND HUGAS SERVICES CONTRACTOR STREET, CAMPACTURE OF A CONTRACTOR STREET, CONT

## Get Connected!



Linking Older Adults With Medication, Alcohol, and Mental Health Resources



Community Integration for Older Adults with Mental Illnesses: Overcoming Barriers and Seizing Opportunities



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration Center for Mental Health Services www.samhsa.gov Promoting Emotional Health and Preventing Suicide: A Toolkit for Senior Living Communities

> U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES Substance Abuse and Mental Health Services Administration www.samhsa.gov

2011

FRVICE

Staff Workshop 1 *"Understanding Suicide Prevention in Senior Living Communities"* 

Covers:

- How to recognize the warning signs of suicide
- What to do if we think a resident is showing the signs
- How we can promote emotional health of all of our residents

Staff Workshop 2 *"Implementing Strategies to Prevent Suicide in Senior Living Communities"* 

#### Covers:

- Warning signs of suicide
- Understanding suicide risk
- What to do after a suicide crisis
- How "whole population activities" can reduce suicide risk and promote mental health and general well-being for all residents

### Family and Resident Workshop

*"Promoting Emotional Well-Being of Residents in Senior Living Communities"* 

Covers:

- Common challenges facing older adults
- Depression
- Warning signs
- Activities to improve emotional well-being

# Access to Mental Health Services for Residents

- Depending on type of license the facility may be responsible to provide or arrange for services to meet resident needs
- The facility can:
  - Provide the MH services themselves
  - Contract with a qualified MH provider
  - Refer to a CMHC
  - Refer to qualified MH provider

# Access to Mental Health Services for Residents

How can MH services be paid for?

Consumer

Private pay

Medicare (Part B)

Medicaid

Medicaid Rehabilitation Option (MRO)

Other

## National Coalition on Mental Health and Aging (1991)

#### Purpose:

To work towards improving the availability and quality of Mental health services to older Americans and their families through education, research and increased public awareness.

#### Participants:

- Members: 80 + federal agencies and national consumer, family, advocacy, and professional organizations
- Other interested agencies, organizations & individuals

## NCMHA (www.ncmha.org)

Chair: Alixe McNeill, NCOA alixe.mcneill@ncoa.org (202) 479-6671

- The Coalition Meets 3 Times a Year at the American Psychological Association, Washington, D.C.
- An Educational Organization!
- No Membership Fees
- Coalition Building Assistance is Available Debbie DiGilio, APA

ddigilio@apa.org (202) 336-6135

Willard Mays <u>wlmays1@att.net</u>

## Allies and Key Contacts Back Home!

NCMHA Website, <u>www.ncmha.org</u>
 State and Local Mental Health, Substance Abuse, and Aging Coalitions

State and Local Affiliates of NCMHA Members

State Olmstead Coalitions

 NASMHPD Older Persons Division State Contact, <u>www.nasmhpd.org</u>

### Allies and Key Contacts Back Home!

 Aging Network, <u>www.aoa.gov</u> State Unit on Aging Area Agencies on Aging Multi-Purpose Senior Centers

 State Mental Health Planning and Advisory Councils, <u>www.namhpac.org</u>

 Mental Health Transformation Working Groups, <u>www.samhsa.gov</u>



### **National Resources**

- American Society on Aging <u>www.asaging.org</u>
   Mental Health and Aging Network (MHAN)
   Aging in America Conference, March 28-April 1, 2012
   Washington, DC
   Webinars, publications, education & training, etc.
   National Council on the Aging <u>www.ncoa.org</u>
   Public Policy
- American Association for Geriatric Psychiatry <u>www.aagp.org</u>
- Many more at <u>www.ncmha.org</u>

