Forum on Behavioral Health Policy:

Improving Outcomes for Older Adults and People with Disabilities in Oregon

January 9, 2019

Oregon Health Authority

Portland State Institute on Aging

Welcome and Introductory Remarks

Dawn Jagger, JD

Chief of Staff

Oregon Health Authority

Nirmala Dhar, LCSW

Older Adult Behavioral Health Project Director

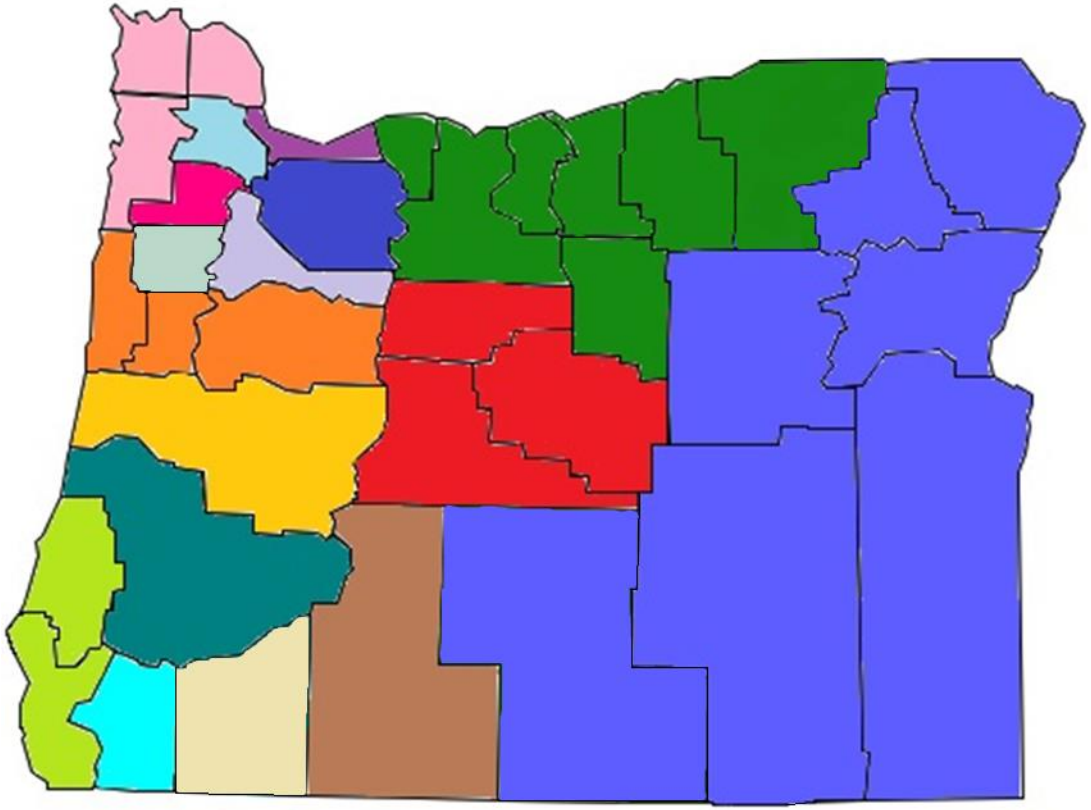
Oregon Health Authority

Changes to the PSU Evaluation Team

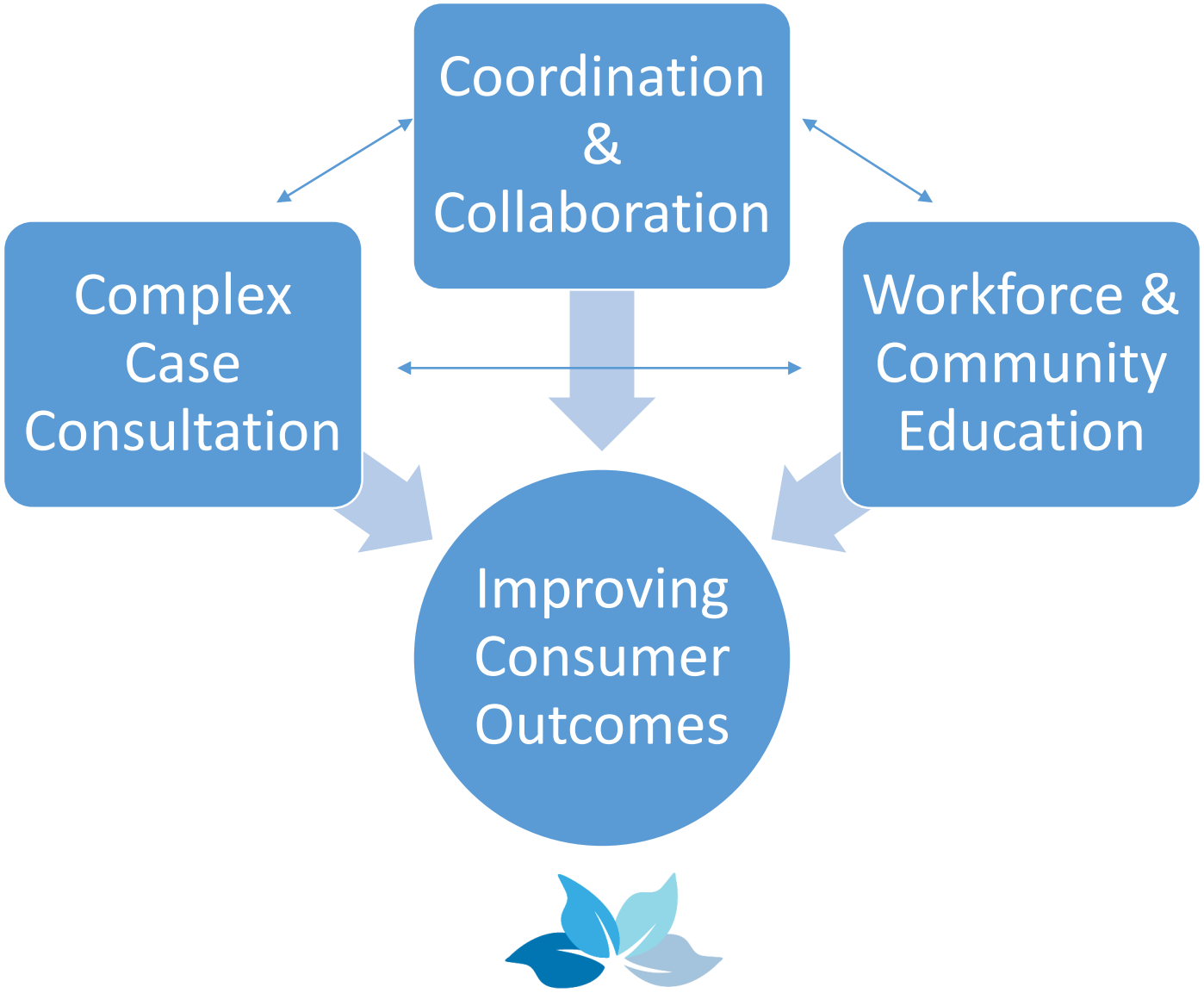
- Joining: Jessica Brooks, PhD, CRC, Licensed Psychologist (TX)
- Leaving: Diana White, PhD, MS
- Leaving: Margaret Neal, PhD, MUS

Behavioral Health Specialists

- 1 Project Director
- 25 Specialists
- Positions filled
  - May – December 2015
  - Seven new hires in 2018
- Clinical Expertise
  - Social work
  - Psychology



What Do the Specialists Do?



Goals For Today

- Discuss the extent of the problem
- Highlight findings from the evaluation, to date, of the Initiative
- Highlight programs the Specialists have implemented as part of the Behavioral Health Initiative
- Discuss recommendations to improve outcomes for older adults and people with disabilities
- Stakeholder panel discussion on recommendations and solutions for moving forward

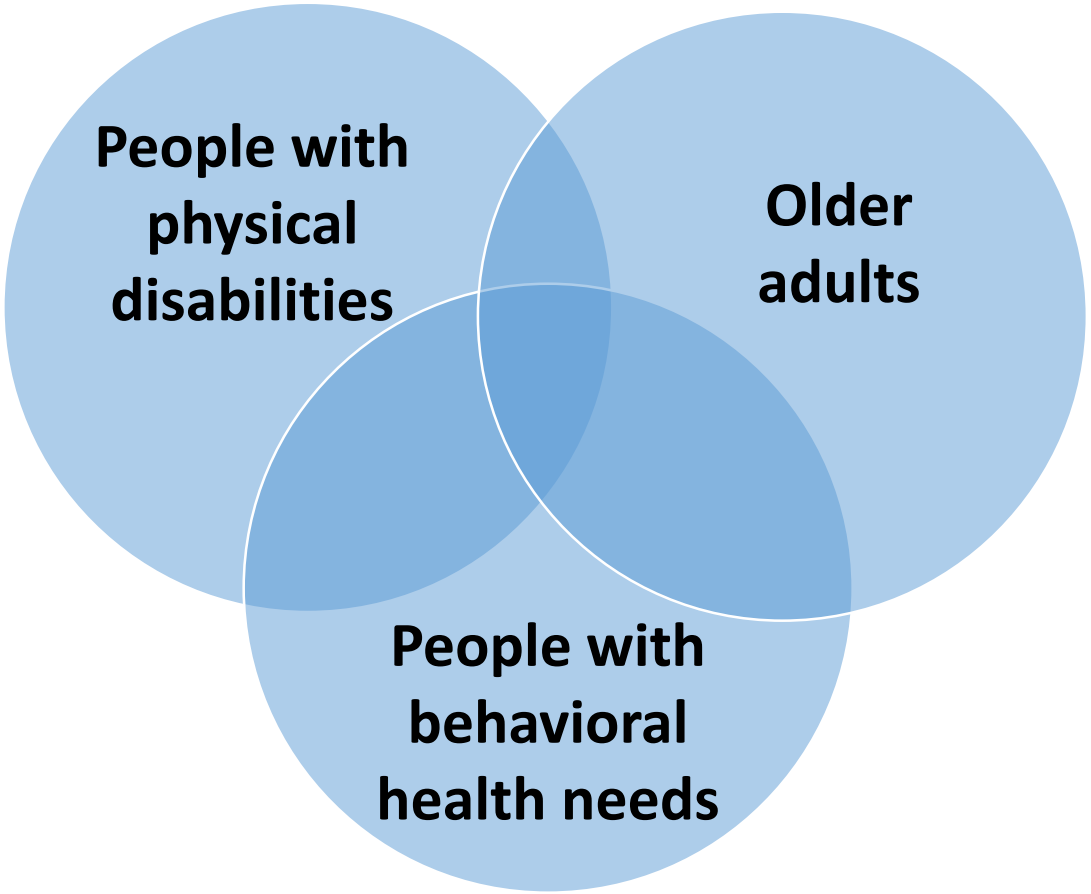
Evaluating the Initiative – Findings to Date

Ozcan Tunalilar, PhD

Institute on Aging

Portland State University

Setting the Stage



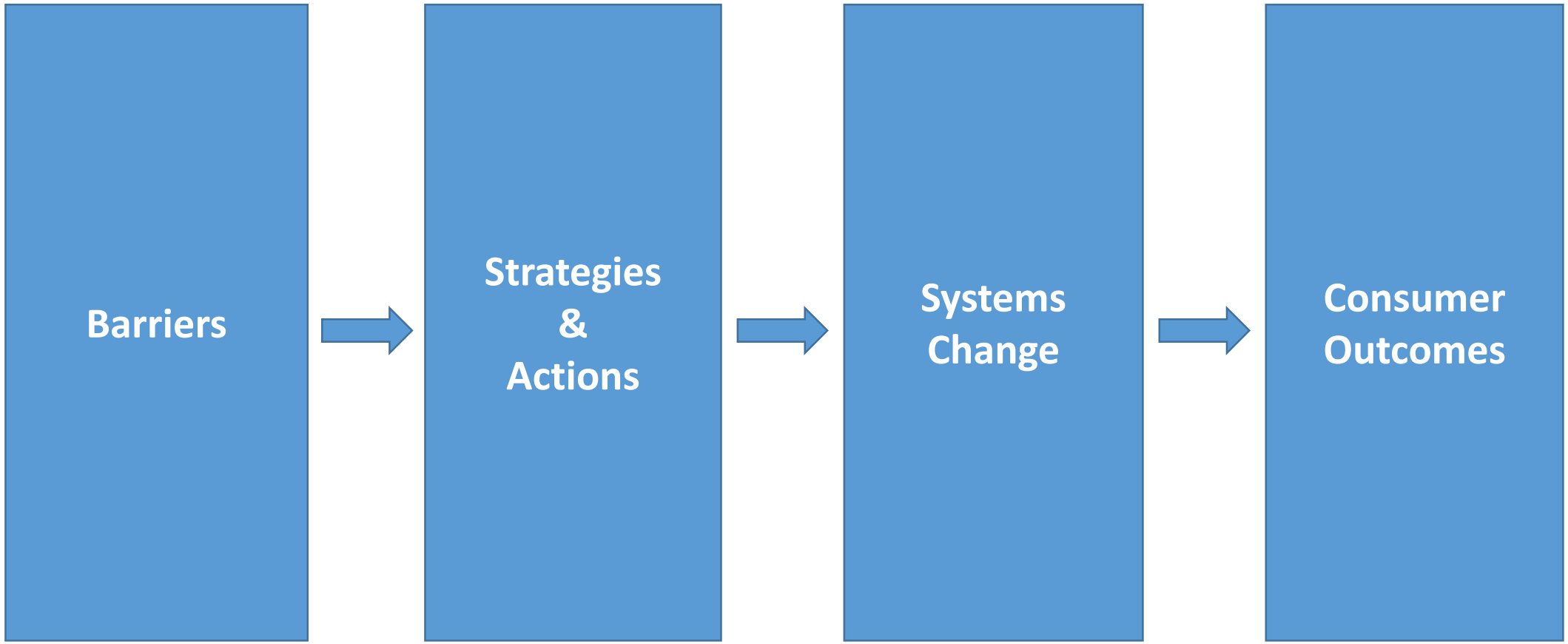
Setting the Stage

- By 2030, over 1 million Oregon residents —more than one in five— will be age 65 or older
- 11 percent of older adults (65+) experienced a mental illness in the past year
  - 56 percent of older adults (50+) with any mental illness did NOT receive mental health services
- Oregon ranks in the worst group out of four in terms of:
  - Heavy drinking among older adults (65+)
  - Lifetime diagnosis of depression among older adults (65+)
- Suicide rate among older adults
  - Oregon consistently higher compared to national average
- 22 percent of adults in Oregon experience a disability

Unique Challenges

- Older Adults
  - Complex, chronic health conditions
  - Mental health problems under-identified or overlooked
  - Stigma
  - Unique life stressors
  - Socioeconomic and geographic context
- People with Physical Disabilities
  - Difficulty accessing mental health services
  - Poor communication between mental health and physical disability services
  - Negative attitudes and stigma
  - Unique life and socioeconomic stressors

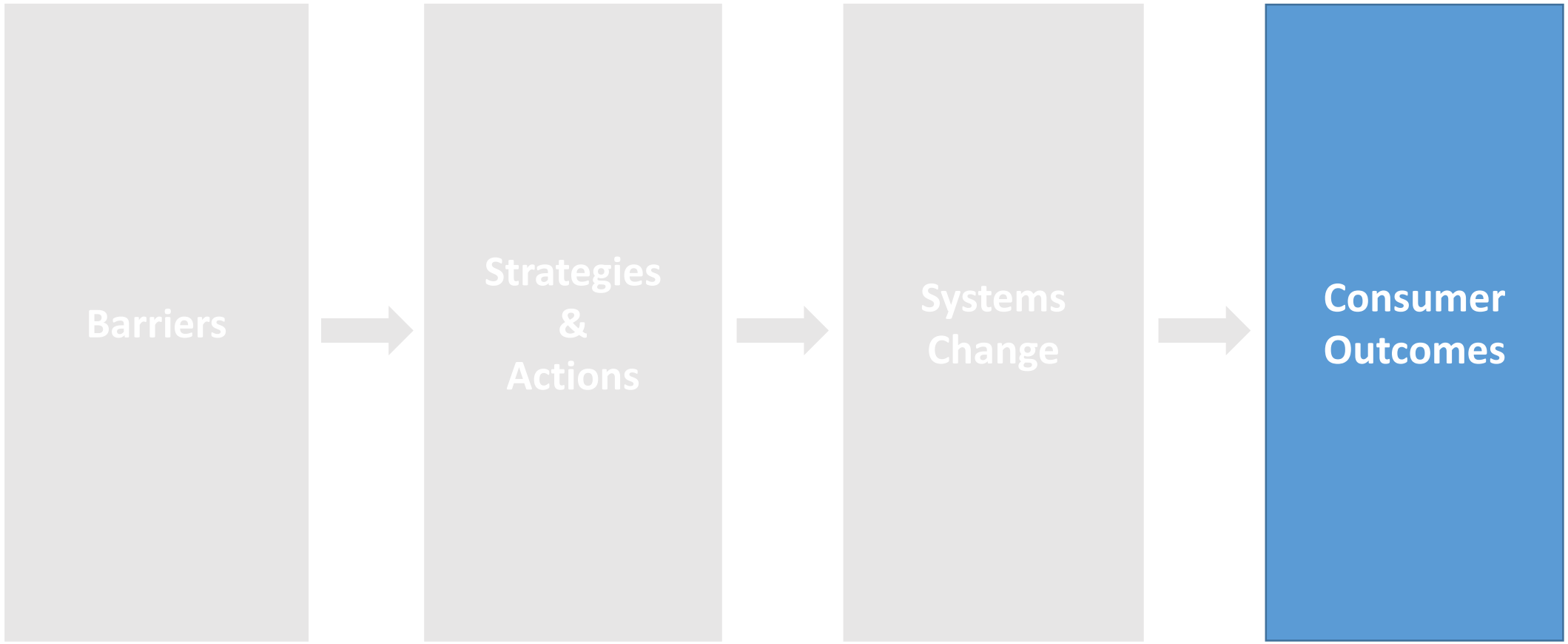
Guiding Logic Model



Evaluation Data

- Specialists' Quarterly Reports
  - Eight quarters of data (October 2016 – September 2018)
- Complex Case Consultations
  - Four quarters of data (October 2017 – September 2018)
- Training Evaluations
  - Post-training data (October 2017 – September 2018)
  - 2-month follow-up data (October 2017 – June 2018)
- 2017 and 2018 Stakeholder Surveys
  - In 2017, 234 of 700 stakeholders responded (33%)
  - In 2018, 387 of 1,213 stakeholders responded (32%)

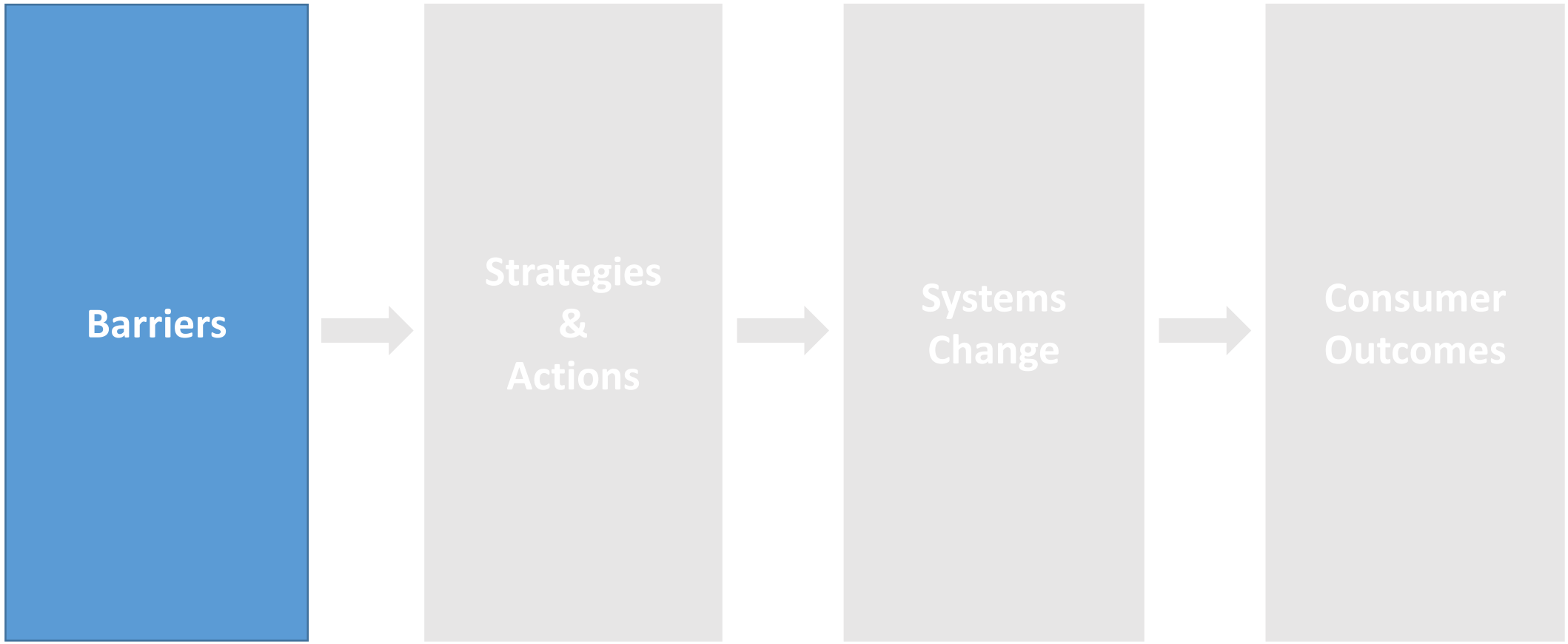
Guiding Logic Model



Tracking Consumer Outcomes: Stakeholder Survey

Outcome	2018	Change From 2017
Seeking advice increased	32%	**+6**
Community more **successful in resolving complex cases**	31%	0
Recognized as priority populations in the community	28%	-1
Signs and symptoms recognized as behavioral health issues	23%	**-6**
More likely to receive help from **knowledgeable providers**	21%	-1
More access to **effective BH programs and services**	19%	0
Lengths of stays for ED, hospitals, jails, etc. reduced	17%	0
More access to **information about mental health promotion**	17%	**+4**
Timely access to the full range of services needed	11%	+2
Evictions reduced	10%	**-4**

Guiding Logic Model



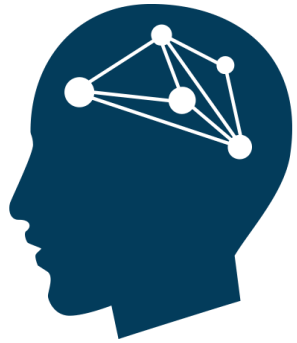
Perceived Barriers to Improving Outcomes – Top 5 Stakeholder Survey

LACK OF…

Affordable housing
94%

BH services in long-term care settings
80%

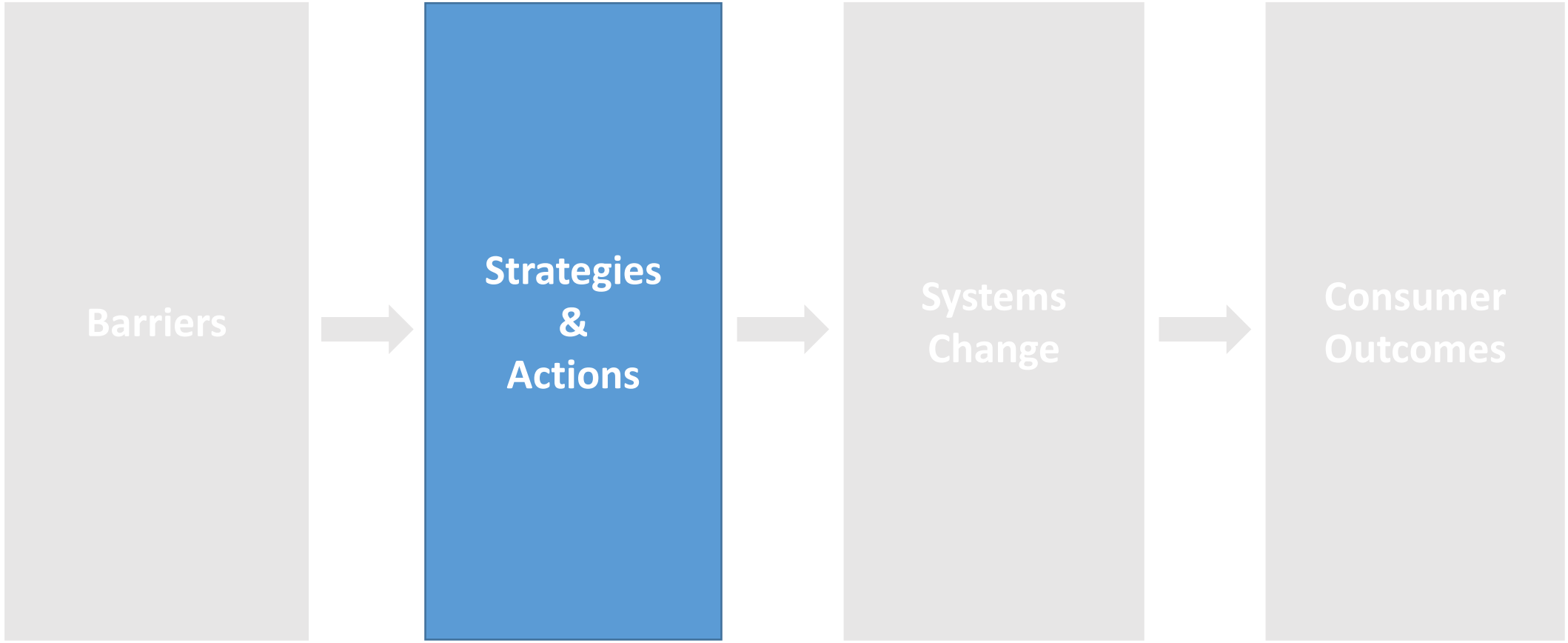
Credentialed providers willing to accept Medicare reimbursement for BH services
76%



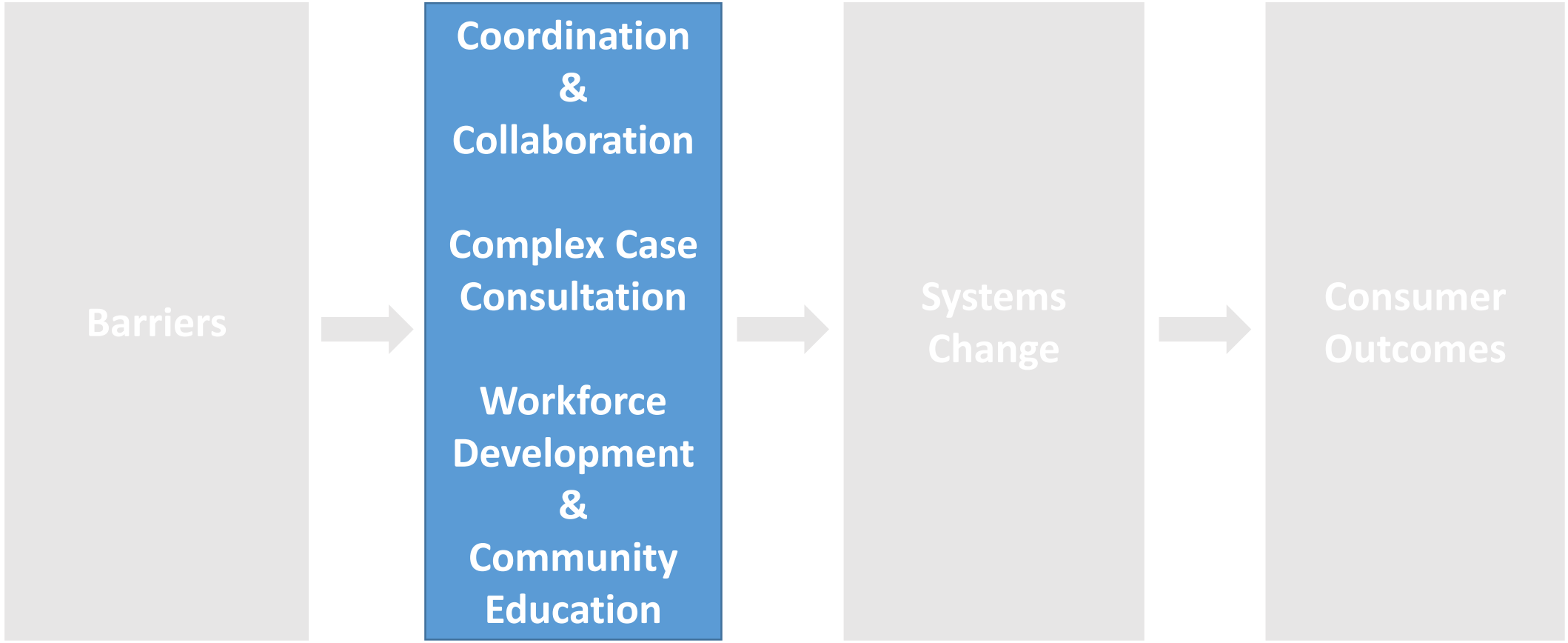
BH programs specific to this population
75%

In-home services
74%

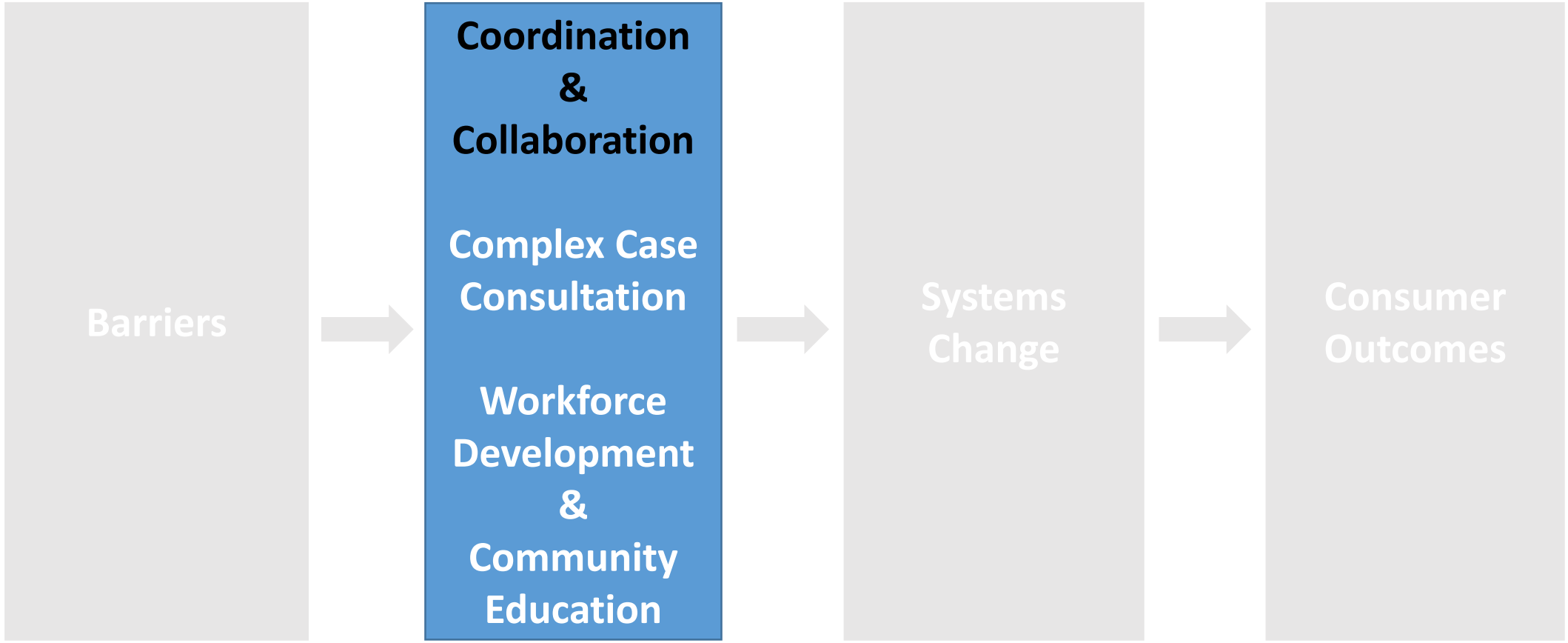
Guiding Logic Model



Guiding Logic Model

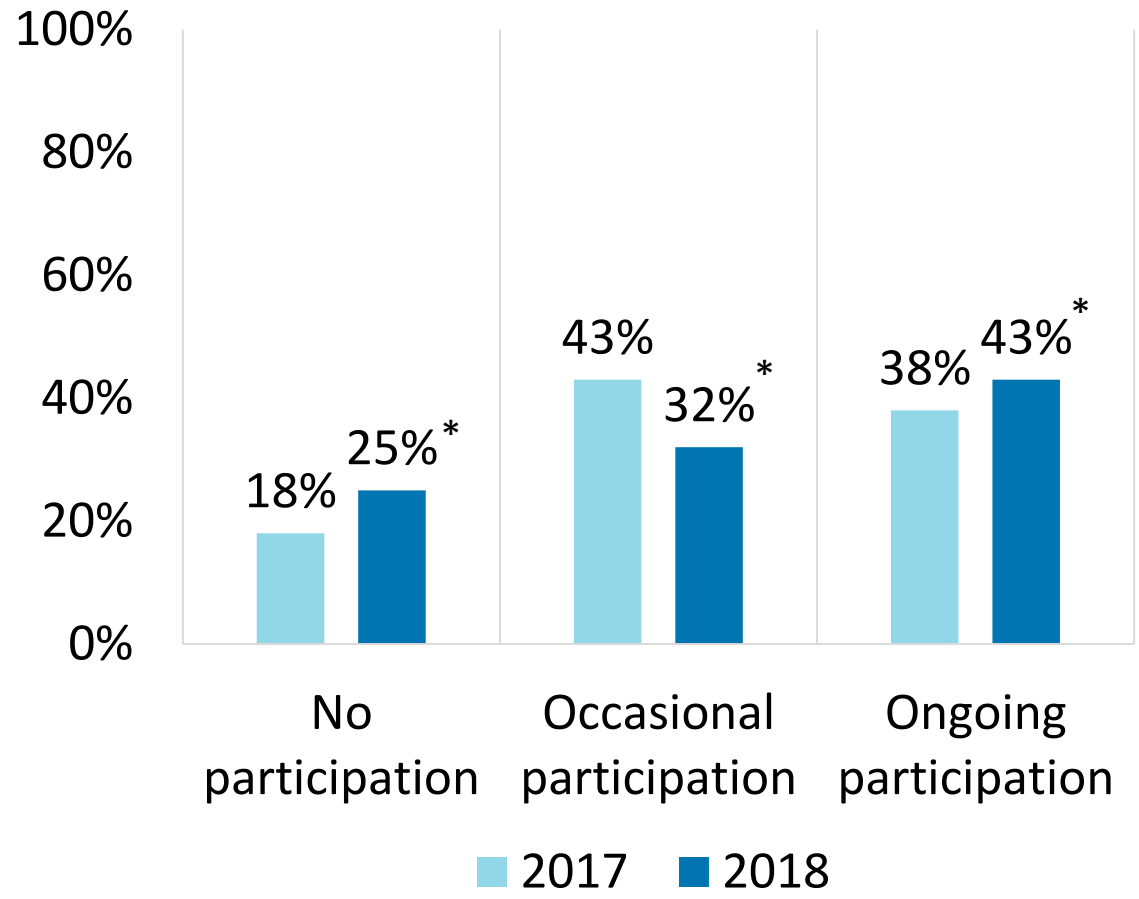


Guiding Logic Model



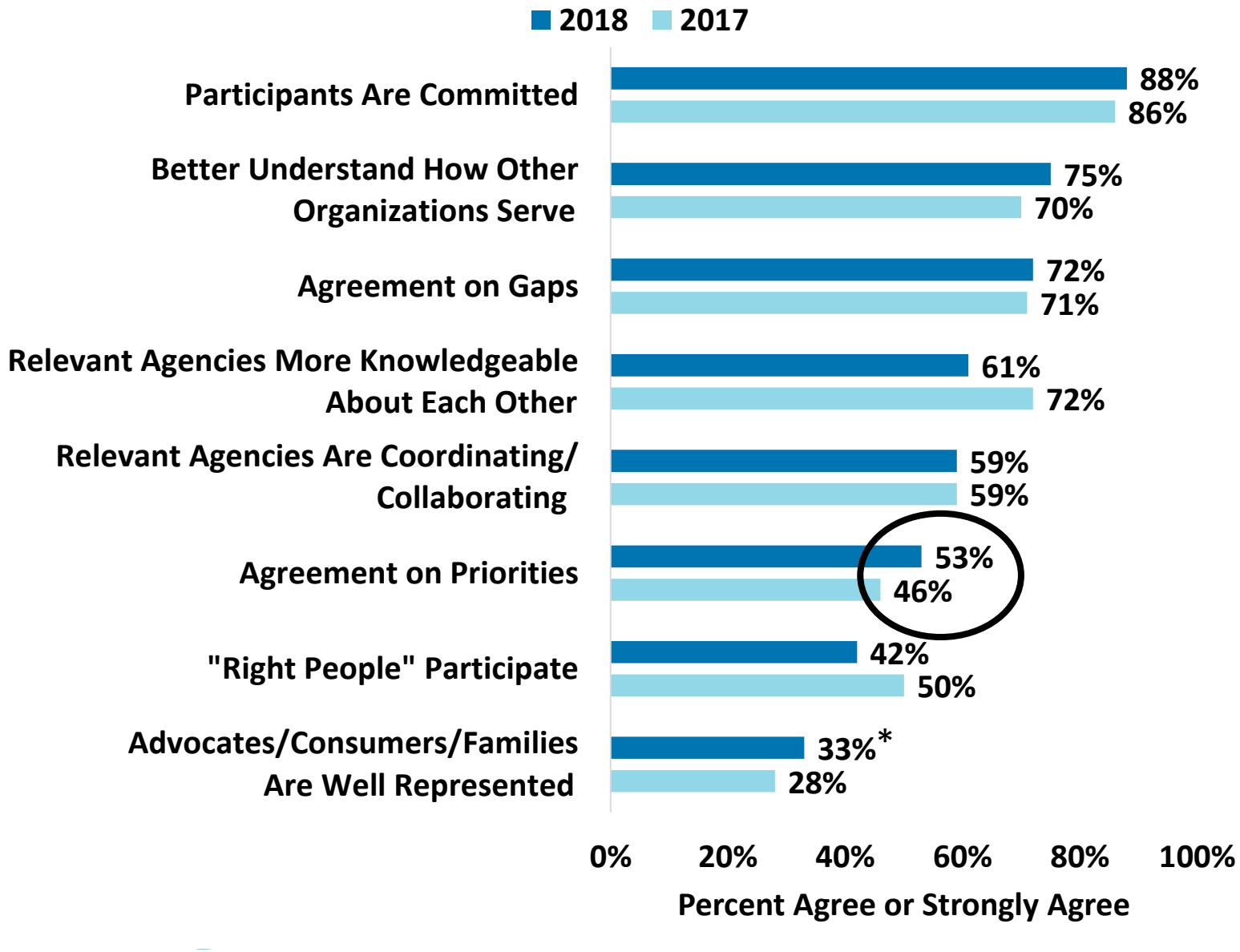
Coordination and Collaboration: Stakeholder Survey

- 75% participate at least occasionally
- Ongoing participation appears to have increased
  - Accompanied with a decline in occasional participation



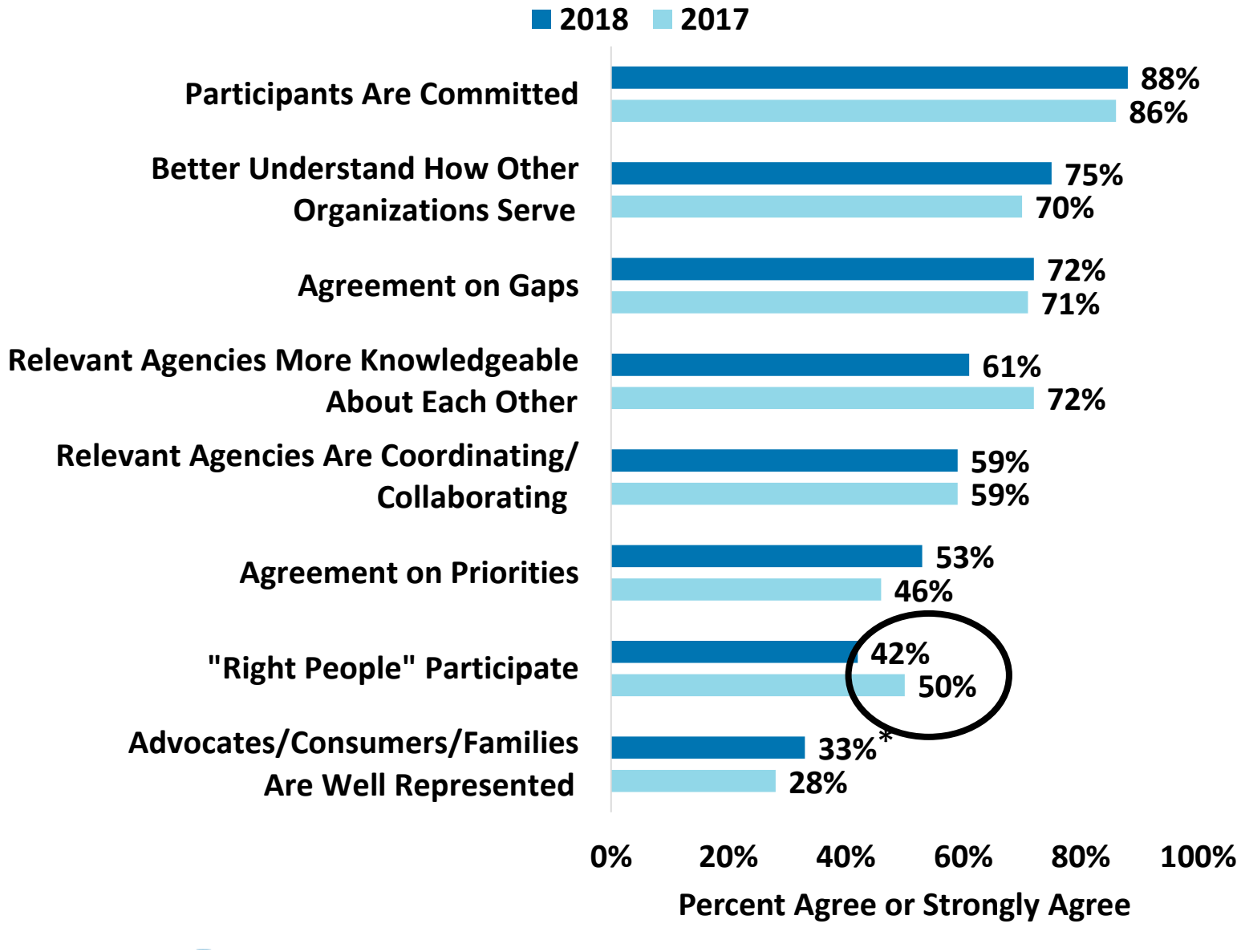
Collaboration and Coordination: Stakeholder Survey

- Stakeholders who attend collaboration and coordination meetings and discussions report that…



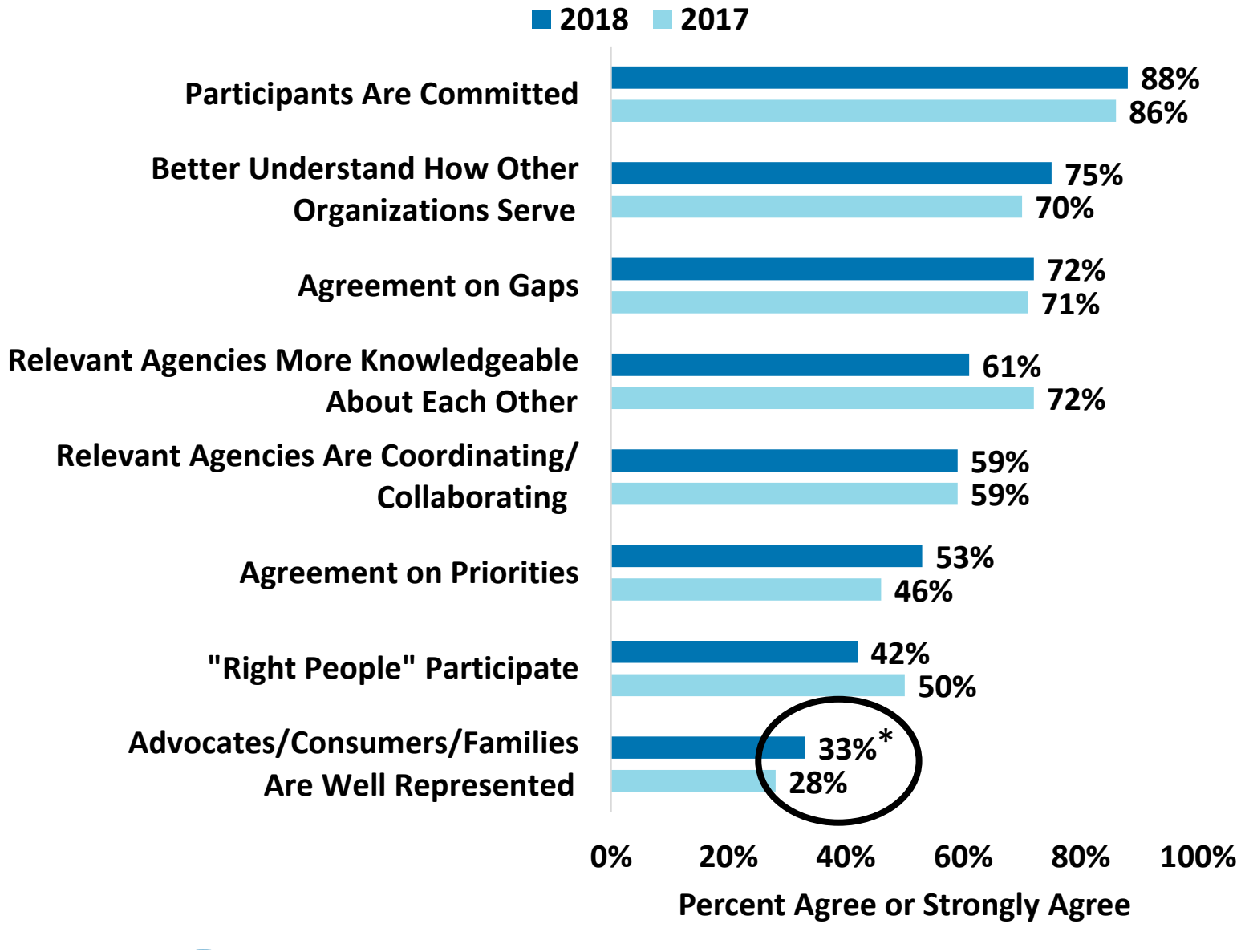
Collaboration and Coordination Stakeholder Survey

- Stakeholders who attend collaboration and coordination meetings and discussions report that…

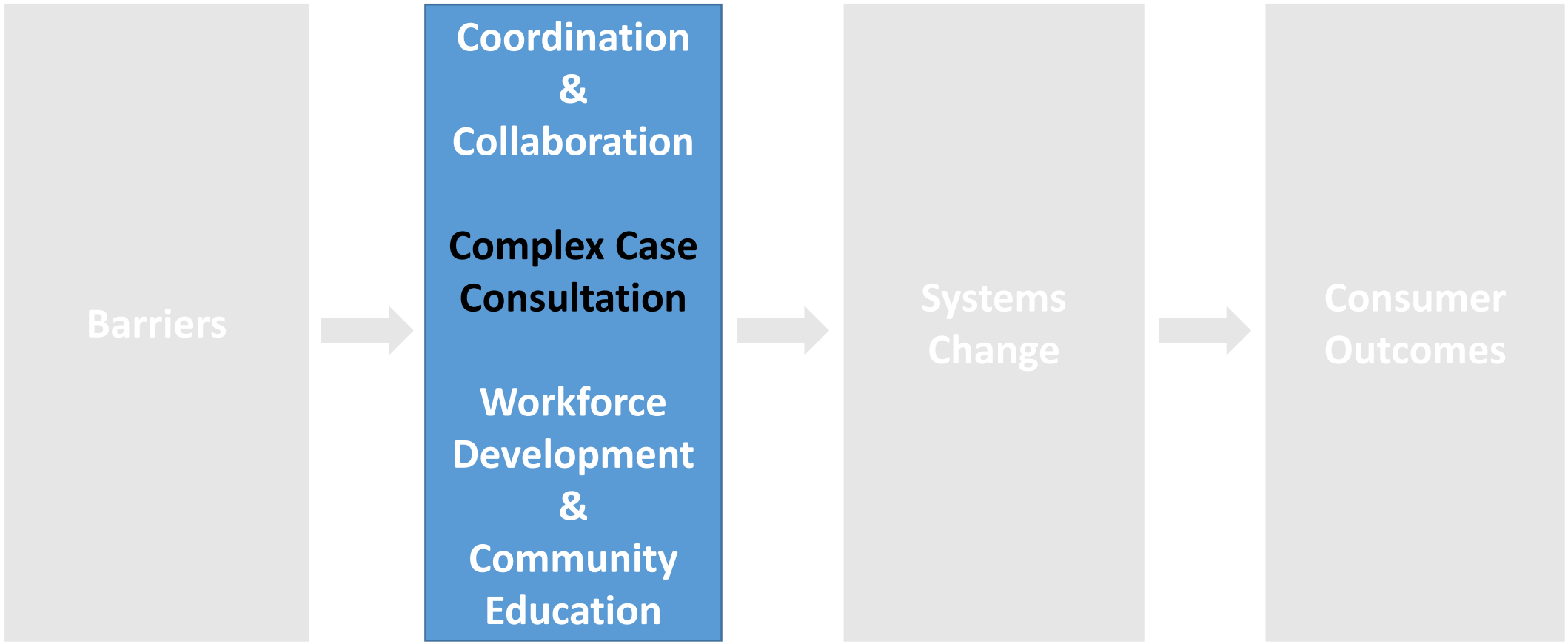


Collaboration and Coordination Stakeholder Survey

- Stakeholders who attend collaboration and coordination meetings and discussions report that…



Guiding Logic Model

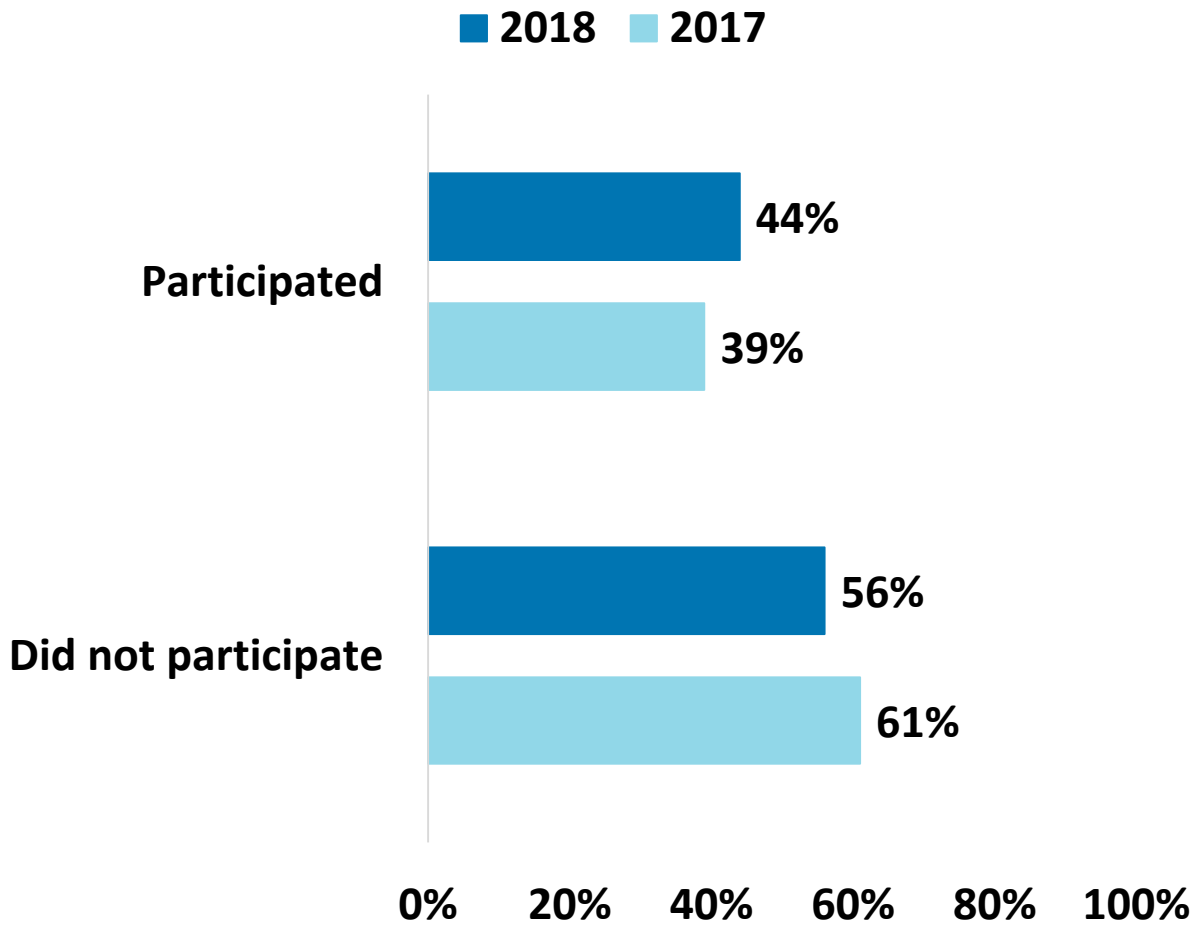


Complex Case Consultation

July 2016-September 2018

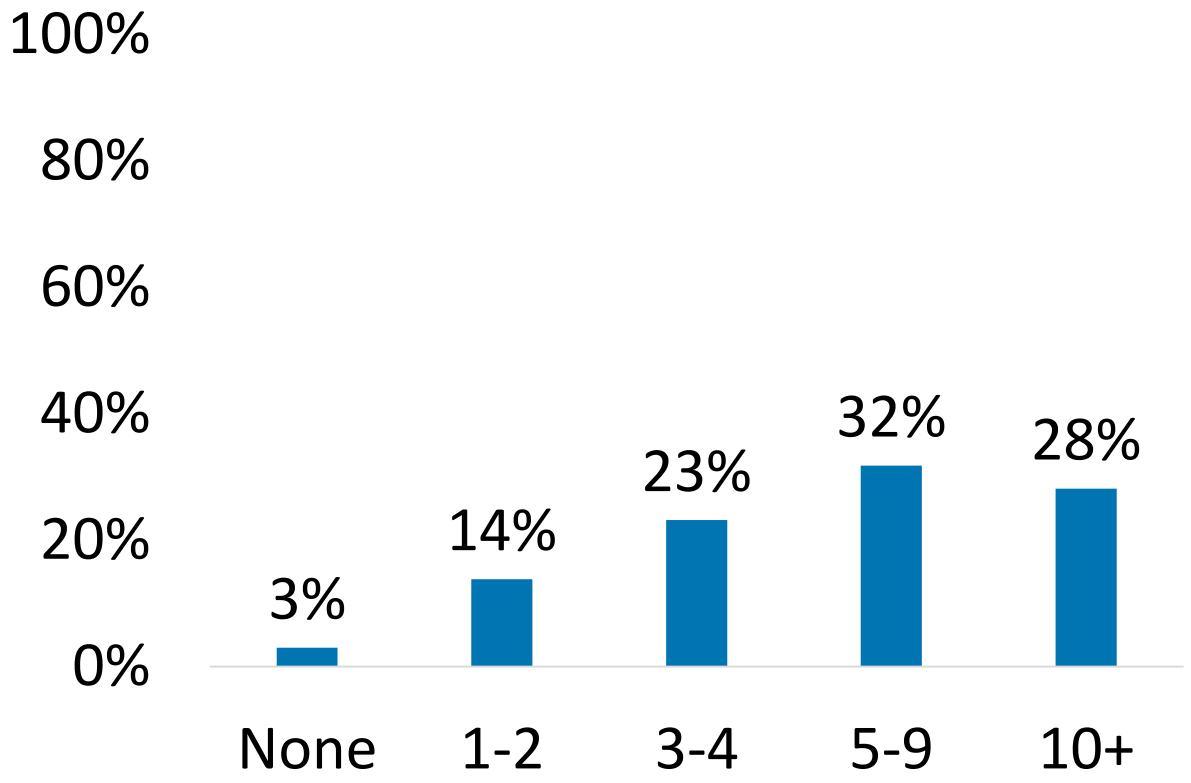
(Quarterly Reports)

- An average of 163 consultations each month
  - 2,123 unplanned
  - 2,244 regularly scheduled or planned
  - 41 unknown



Complex Case Consultation: Quarterly Reports

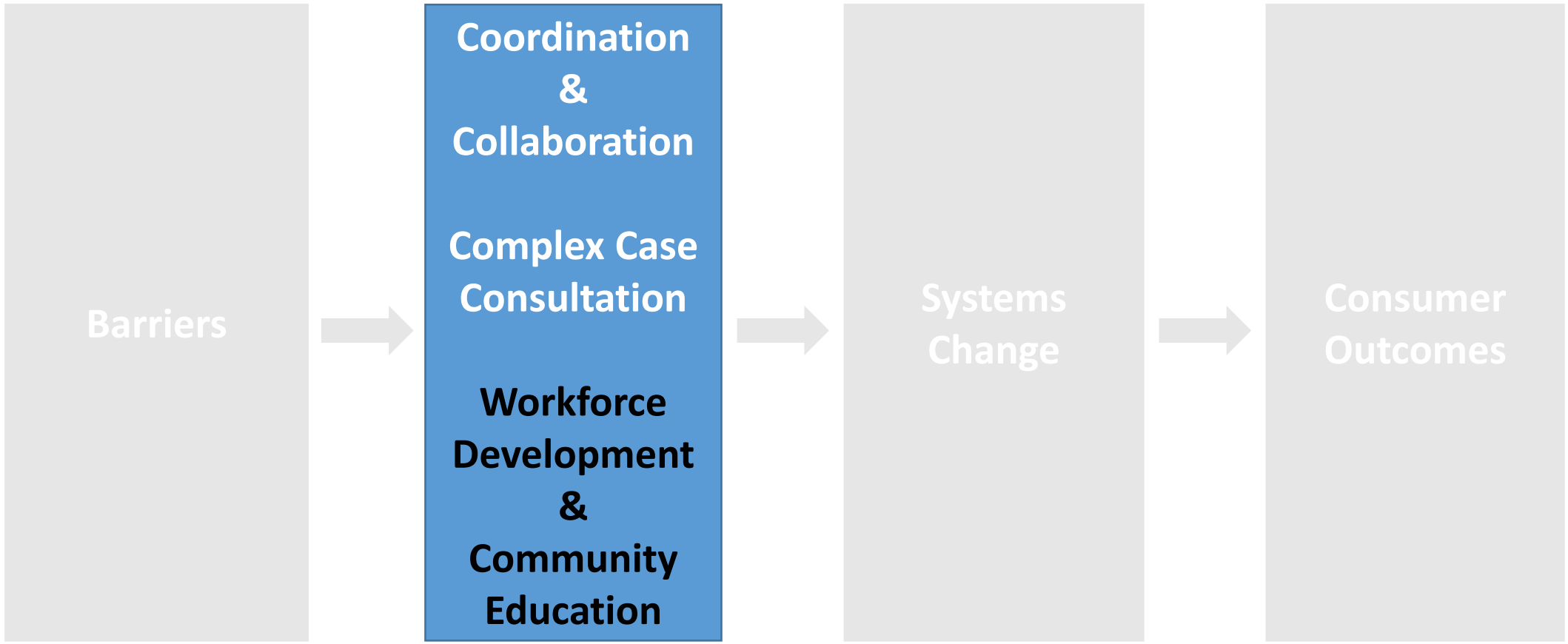
- On average, consumers had <u>seven or more issues</u>, including:
  - Neurological/cognitive
  - Physical/medical
  - Psychiatric/mental health
  - Social/individual
  - System



Complex Case Consultation: Frequently-Cited Issues (2018 Quarter 3)

- Neurological/Cognitive
  - Lack of capacity/competence for decision making (29%)
  - Dementia (21%)
- Physical/Medical
  - Complex and/or co-occurring medical conditions (45%)
  - ADL and other functional limitations (36%)
- Psychiatric/Mental Health
  - Mood disorders (e.g., depression, anxiety) (43%)
  - Serious mental illness (35%)
- Social/Individual
  - Homelessness (50%)
  - Isolation/loneliness (36%)
- System
  - System navigation (48%)
  - Understanding eligibility (33%)

Guiding Logic Model



Workforce Development Community Education (Quarterly Reports)

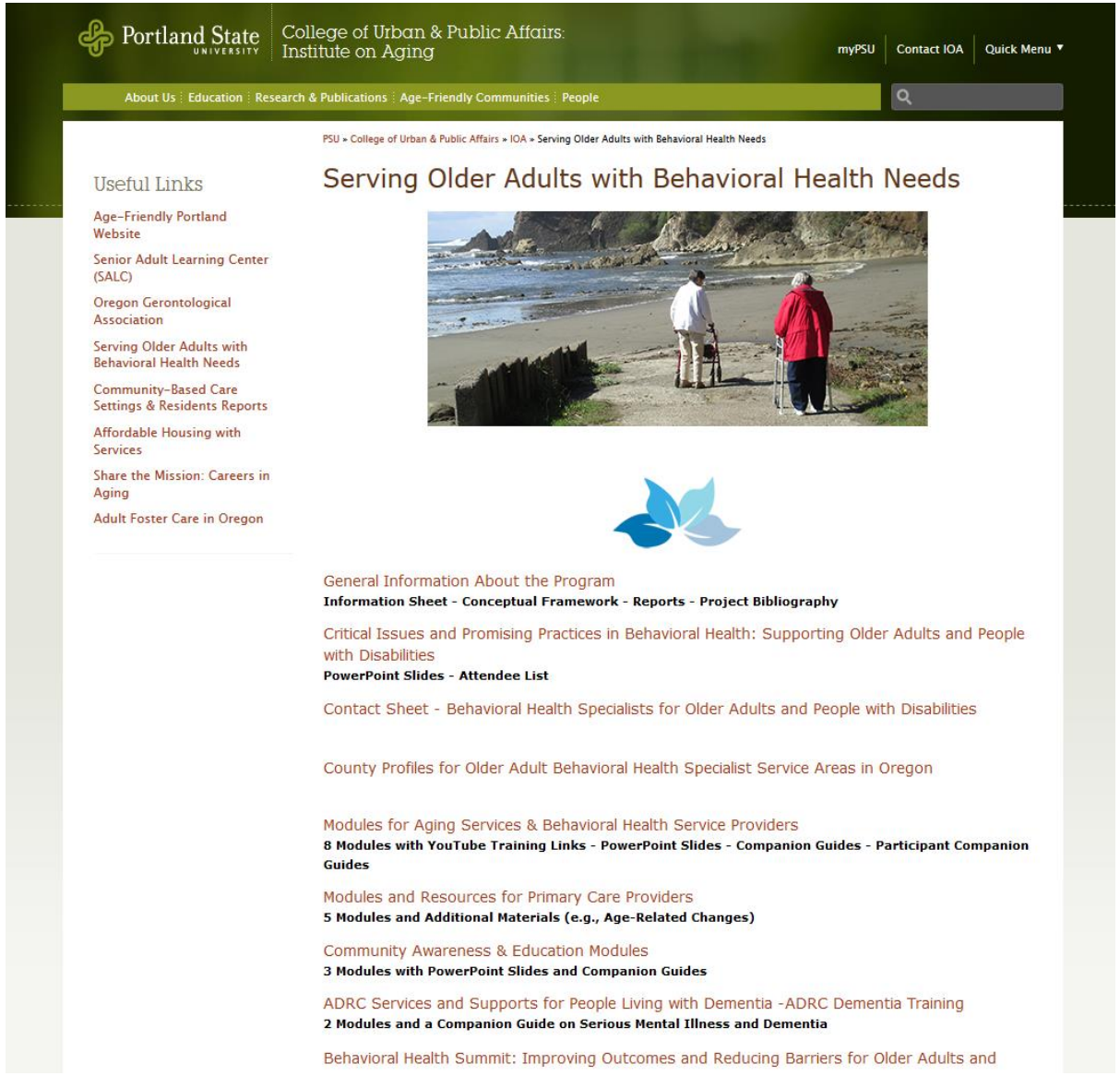
- Between July 2016 and September 2018, Specialists…
  - Conducted an average of 38 workforce development or community education events each month.
    - 1000+ events in total
    - Attended by 26,000+ participants
- Training participants were from a variety of agencies and professions.
- Training topics covered a wide range of issues.

Initiative Website

- More information on the Initiative

- Final reports, data summaries, infographics, county profiles

https://www.pdx.edu/ioa/



And Now…

Panel of Behavioral Health Specialists: Spotlight on Programs

Panel of Behavioral Health Specialists: Spotlight on Programs

Angela Jensen

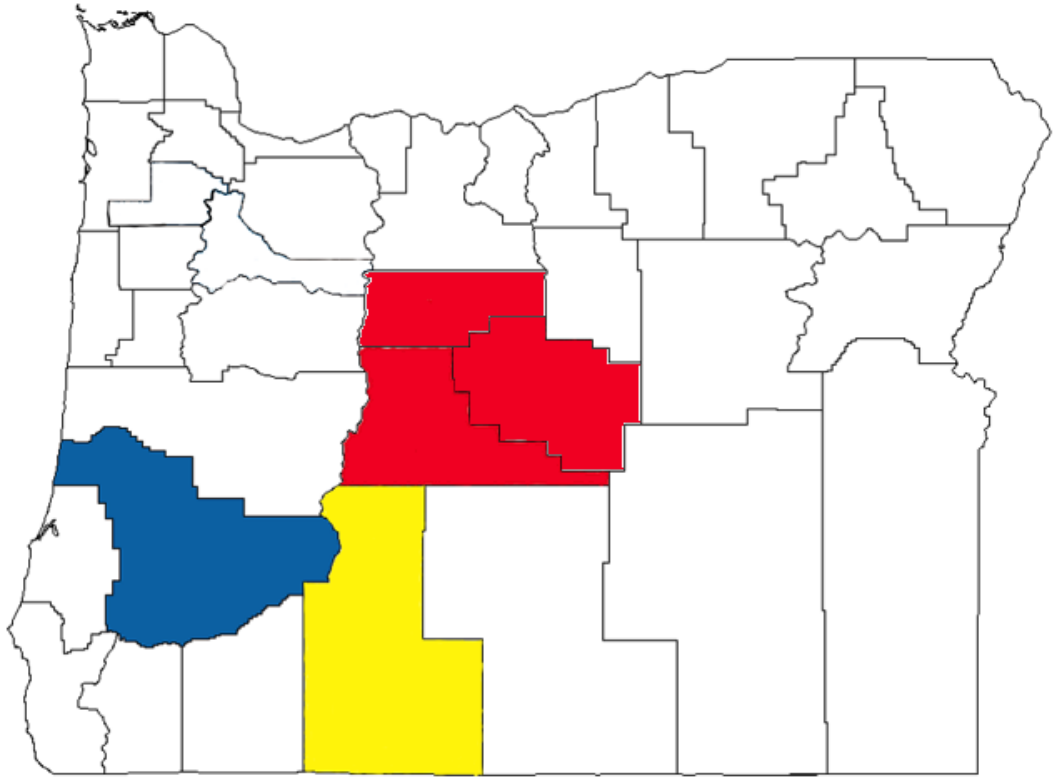
Deschutes, Jefferson, Crook Counties

Kathleen Rutherford

Klamath County

Adam Jones

Douglas County



Recommendations

Synthesis of recommendations from Stakeholders and Behavioral Health Specialists

Margaret B. Neal, Ph.D.
Institute on Aging
Portland State University

1. **Integrate behavioral health (OHA) and aging services (DHS) for older adults and people with disabilities with cross-system care needs**

- Acknowledge shared responsibilities for services by executing MOUs at the state and local levels
- Use “braided” or blended funding strategies so that each agency contributes to the needed array of services
- Prioritize building bridges between local agency leaders and their respective staff to reduce state agency siloes

2. Elevate older adults and people with disabilities as a priority population in state-sponsored behavioral health initiatives

- Allocate funding for appropriate services
- Support and invest in a knowledgeable and skilled workforce
- Promote program development to enhance access to services and specialized housing

3. Increase Medicare literacy and promote structural changes

- Allocate funding for technical assistance for providers

- Educate providers on behavioral health billing codes and alternative strategies

- Advocate for increased reimbursement rates and a larger group of qualified professionals who can provide billable mental health services for this population

What's Next? Reflections and Solutions

Cherryl Ramirez, MPH, MPA

Executive Director, Association of Oregon Community Mental Health Programs

Jim Davis, EdD

Advocate for Older Adults and People with Disabilities

Jane-ellen Weidanz, BA

Long Term Services and Supports Administrator, DHS, Aging and People with Disabilities

Concluding remarks

Nirmala Dhar, LCSW

Older Adult Behavioral Health Project Director

Thank you!

https://www.pdx.edu/ioa/older-adults-with-behavioral-health-needs

Oregon Health Authority

Portland State Institute on Aging