

Long Term Care Coordinating Council: Behavioral Health Work Group

6/14/21

2:30-3:30pm

Attendees: Scott Arai, Susie Smith, Carley Clemons, Alicia English, Alexander Jackson, Nora Martin-White, Benson Nadell, Bernadette Navarro-Simeon, Arielle Plastunovich, Michelle Roberts

1. Workgroup Wrap-Up (Susie)

- a. Summary of accomplishments to date
 - i. When we started this workgroup, we focused adults with disabilities and the continuity of care, and each month's meeting was a deep dive into each of those populations
 - ii. Then we paused due to COVID
 - iii. When we restarted, we heard about an acute need regarding the mental health of those in SNFs. So we switched gears to study the state of mental health in SNFs. Carley Clemons, graduate student from UC Berkeley, conducted a study of this issue. The report surfaced recommendations and next steps, including:
 1. Systems level change (e.g. staffing shortage and ratios)→next step: advocacy.
 - a. Susie and DPH partner will continue to look for state level opportunity to advocate, along with Shireen's participation in AAA; up to us all to own the systems level change recommendations
 2. Evidence based therapeutic practices in SNFs → next step: identifying SNFs that can partner with us and then fundraising so we can pilot one or more interventions
 - a. Susie, Nora meeting with Jewish Home on 6/15 to explore this step; shared report with all SNFs in City
 - b. **all:** if anyone knows a SNF or other congregate setting that may be interested in a mental health pilot, please reach out to Susie, Nora
- b. As of June 2021, we are sunsetting this workgroup in its current permutation

2. Next Steps (Susie)

- a. **All: Help us socialize report!**
 - i. Carley was able to send document to all SNFs, as well as stakeholders
 - ii. **Nora/Carley will post list of report recipients** to SharePoint after the call
 - iii. **Nora will re-share final report** with cover letter and final slide deck with group, along with some introductory text about the report embedded in email text
 - iv. **Susie** will present at Leading Age meeting in July. Also, in the fall legislators typically build their legislative agenda for next season; we recommend sharing

this report with behavioral health association or whoever from SFDPH sits on that group

- v. Bernadette: very active group within residential care facilities that may also like to see report because probably share the same issues (Rachel is heading that group – majority in Napa and Sonoma but Bay Area wide)
- vi. Benson: are we soliciting feedback when we share? Susie: we already solicited and incorporated feedback from various stakeholders; now we are sharing the finalized report to share the findings and solicit partnership to explore pilot ideas
- vii. Benson: Laguna Honda is rolling out new behavioral team (possibly as a result of dual diagnosis clients); may be beneficial to look at funding opportunities that focus on this and CNA training, using new tool to assess aggressive behavior; Janet Guillen at Laguna Honda can let us know current status
 - 1. As far as particular SNFs, may focus on those that have a nonprofit component (Sequoias e.g.); also share the report with the **California Association of Healthcare**, in case any members would be interested in partnering to implement some of these policy recommendations
 - 2. Activities may be easier to pilot than more regimented clinical recommendations (e.g. friendship line, other activities)
 - 3. Any feedback from Senior and Disability Action? Yes, overall positive
- viii. Scott Arai: may be more efficient or impactful to also share with the parent corporations that own the more corporate SNF franchises in SF; an important service to enrich business; there may be 501 c 3 arm of these corporations
- ix. Benson: SNFs could be incentivized to participate if: raise MC reimbursement rate; OR encourage rehab residents to leave under Medicare. If some of these pilots improve quality of life to the point of smoothing over transition back to community
 - 1. Age creep concept and serious behavioral health needs
- x. Will share report with CANHR, Leading Edge, AAA, Behavioral Health Association
- xi. This work will definitely continue in some form, and create spinoff memos or update addendums can be created as research and initiatives evolve
- b. Discuss spinoff steps and owners to move the recommendations and this work forward
 - i. Susie and Nora will follow up individually after this meeting in other channels
 - 1. Scott Arai had indicated interest in trauma-informed care training
 - 2. Cathy Spensley had indicated interest in residential facility pilots
 - c. SharePoint site will continue to be live

Thank you to all for participating in this group! Your support and expertise was invaluable in this process. We will follow up individually after this meeting with any spinoff steps.