1. Has your county applied or been approved to participate in the Whole Person Care Pilot Program? Yes\_\_x\_\_\_\_\_  
     
   If so, will older adults be served in your county’s program? Yes\_\_x\_\_\_\_ No\_\_\_\_\_\_\_
2. In a prior Data Notebook (2014), counties provided examples of efforts to ensure integrated physical health care with behavioral health care. Please check which services or activities your county provides for older adults.   
   1. Procedures for referral to primary care C:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png
   2. Procedures for screening and referral for substance use treatment C:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png
   3. Program or unit focused on the Older Adult System of Care (AOSOC) C:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png
   4. Linkage to Federally Qualified Health Care Center (FQHC) or similar
   5. Links to Tribal Health
   6. Case management/care coordination to other social services e.g. housing, CalFresh, Meals on Wheels, In-Home Supportive Services (IHSS) C:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png
   7. Health screenings, vital signs, routine lab work at Behavioral Health site C:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png
   8. Health educator or RN on staff to teach or lead wellness classes
   9. Training primary care providers on linking medical with behavioral health C:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png
   10. Use of health navigators, *promotores*, or peer mentors to link to services C:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png
   11. Other, please specify \_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Is your county doing any advanced planning to meet the mental health and substance use service needs of your changing older adult population in the coming years? YesC:\Users\sgruendl\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\S2OOZ6SN\300px-U2713.svg[1].png No\_\_\_   
   BHRS works with current vendors to address the treatment needs of older adults, which currently there is a demand for opioid and other prescription medication abuse. BHRS currently operates OASIS (Older Adult System of Integrated Services). OASIS is a program available to San Mateo County residents, age 60 and over, dealing with mental health issues that impact their day to day functioning. Clients come into the program with multiple co-occurring conditions related to physical health, cognitive impairment, substance use, functional limitations and social isolation, in addition to their serious mental health conditions. This requires more hands-on case management, and greater collaboration between psychiatrists and primary care providers to ensure proper medication management and preventative medicine to enable and support the clients to remain in a community based setting. Last year, OASIS served more than 700 clients, aged 74 on average, who are increasingly fragile and medically complex. A key component of OASIS treatment is providing in-home evaluation and support, which includes consultation services to empower families and care givers throughout treatment – an overarching strategy of BHRS.
4. Are there groups in your county who are at significant risk of being unserved or underserved due to limited English proficiency?

Yes\_\_\_ No\_X\_\_

If yes, please list the top three major language groups or communities in greatest need of outreach for behavioral health services in your county.

1. Describe one strategy that your county employs to reach and serve various cultural and/or race-ethnicity groups within your population of older adults?   
     
   The Office of Diversity and Equity, our Mental Health First Aid Training Entity, partners with Adult and Older Adult Services to offer Mental Health First Aid annually to providers and staff in specific languages such as Spanish and Chinese dialects, neither offered by the creator of the original program and developed exclusively by BHRS to meet the needs of underserved populations.

OASIS has bilingual/bicultural case workers for 60+ SMI patients, home-bound, and on Medi-Cal. These caseworkers are specifically allocated to the older adult populations and have language capacity for all non-English languages represented in the older adult caseload.

A multi-disciplinary, multi-lingual Senior Mental Health Services team consisting of licensed clinical staff (social workers, psychologists, psychiatric nurse, and psychiatrist) exists for older adult clients. The team provides in-home evaluation, treatment, consultation services to families, care givers, board and care operators and anyone concerned with the welfare of this population.

1. Are there other significant barriers to obtaining services for older adults in your county? Yes\_\_\_ No \_X\_\_ If yes, please check all that apply.

\_\_\_Transportation

\_\_\_Geographic Isolation

\_\_\_Lack of awareness of services

\_\_\_Mobility issues due to co-occurring physical conditions or disabilities

\_\_\_Lack of geriatric-trained practitioner

1. One of our goals is to identify unmet needs for substance use treatment in older adults. Based on local community needs assessments or other reports, what substance use treatment services are available in your county for older adults?

Please check all that apply.

\_X\_Outpatient NTP (narcotics treatment program (methadone, etc)

\_X\_\_Outpatient (non-NTP)

\_X\_\_Detoxification

\_X\_\_Residential Treatment

\_X\_\_Dual Diagnoses Programs

\_\_\_Workforce licensed/certified to treat co-occurring MH and SUD disorders

\_X\_Safe housing options for clients working to be clean and sober (also applies to dual diagnosis clients)

\_\_\_SUD Treatment program designed for older military veterans

\_\_\_Other, please specify.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Based on either the data or your general experience in your county, do you think your county is doing a good job of reaching and serving older adults in need of mental health services?

Yes\_X\_\_ No\_\_\_

If ‘No,’ then what strategies might better meet the MH needs of older adults?

1. Does your county have resources to provide mental health crisis services designed specifically to meet the needs of older adults?

Yes\_x\_\_ No\_\_\_ If yes, please check all that apply below.

\_x\_\_Mental health providers trained in MH needs of older adults  
\_x\_\_Crisis Intervention Teams have someone trained in the needs of older adults

\_\_\_Provide training and work more closely with law enforcement in handling MH crisis of older adults

\_\_\_Crisis Drop-In Center with ability to serve older adults

\_\_x\_Services for older adults at risk for suicide

\_\_\_23-Hour Crisis Stabilization Services for older adults

\_\_\_Crisis residential treatment for older adults

\_x\_\_Psychiatric hospital or unit able to take older adults with complex medical needs, when mental health crises are too serious to be met by other services

1. Does your county have specific services or programs to support older adults who provide extensive care for dependent family members, so that caregivers can meet their own mental

health and other needs? Yes\_x\_\_ No\_\_\_

If yes, please check all that apply below.

\_\_x\_Group therapy or support groups

\_x\_\_Counseling/parenting strategies

\_\_\_Respite care services

\_\_\_In-home supportive services (IHSS)

\_\_\_Stress management program

\_\_x\_Mental health therapy, individual

\_\_\_Other, please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_.

1. Does your county have a special program(s) to address the needs of older adults with chronic mental illness who also begin to be affected by mild cognitive impairment or early dementia? Yes\_\_\_ No\_X\_

BHRS is starting discussions in this area. BHRS is part of a health system that includes a clinic operated by our county hospital that we partner with on a small scale in this area.

1. Does your community train and/or utilize the skills and knowledge of older adults as peer counselors, and/or health navigators? Yes\_x\_\_ No\_\_\_

If yes, then please provide one example of how this occurs.

There are peer support workers throughout the county, for this particular question there is one in the OASIS program (our older adult mental health services program). This peer worker is extensively involved in the OASIS program.

In the Whole Person Care Program there are navigators with older adult experience and training.

BHRS and our partners (NAMI, Heart & Soul, and California Clubhouse)are just launching the HOPE (Helping Our Peers Emerge)Program, which includes peer support workers and family partners with prior inpatient hospitalization experience that work to manage patients across the levels of care, specifically to help those who are inpatient return to the community. There is the intent to have peer workers and family partners in this program with older adult experience, as well as multi-lingual. BHRS just hired the full time staff that will supervise the program and is working with the partners to fill out the staffing so that HOPE can launch.