

INTEGRATING LONG-TERM CARE: OVERCOMING ADMINISTRATIVE BARRIERS IN INTEGRATING AGING AND ADULT SERVICES IN SAN MATEO COUNTY

Aregawie Yosef*

EXECUTIVE SUMMARY

The integration of long-term care in Aging and Adult Services of San Mateo County began 19 years ago. The rationale behind this integration was:

- a) The AB 1850 legislation to develop integrated long-term care services
- b) The relationship between the medical and disability needs of the clients served and
- c) The negative grand jury audit of the Public Guardian.

Effective streamlining of services is one of the keys in breaking down the administrative barriers between programs and having a single focus that is client centered. With this in mind, Aging and Adult Services (AAS) of San Mateo developed a centralized intake line which is known as Teamwork Insuring Elder Support (TIES). The TIES line which provides information/intake assistance serves as the main entry point for Adult Services within the Health Services Agency. As a result of this single entry system, the agency

- meets the specific needs of different client groups
- makes multiple-program eligibility determination possible
- makes speed and efficiency of client application processing a reality
- offers a coordinated service delivery system including integrated case management
- maximizes efficiency and avoids duplication of services

There are a number of elements that contribute to administrative barriers in the integration of long-term care services. The two worth noting in this case study are:

1. rigid adherence of workers to their professional identity
2. the rules and regulations that govern the different programs and their categorical definitions for the provisions of service

Overcoming the first barrier has been achieved by building trust over the years among staff. To its advantage AAS of San Mateo has a relatively small work force that makes co-location of the different programs possible. As a result, the agency has been able to:

- create a new culture in service delivery system that is client centered
- provide integrated services within the long-term care continuum
- create an easier system for family members and caregivers to
- use/access/hold accountable
- afford staff members a clearer mission

Rules, regulations, and categorically defined provisions of service continue to pit one program against another. These are big hurdles that stand in the way of integration and overcoming administrative barriers. AAS of San Mateo works with the state, other counties, consumers, and stakeholders to obtain waivers where feasible, and partners with advocates

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and elected officials both at county and state levels to effect legislative changes.

IMPLICATIONS FOR SAN FRANCISCO AGING AND ADULT SERVICES DEPARTMENT

- The new Aging and Adult Services will benefit from the streamlining of services by creating a single entry to the system. This system makes service delivery more efficient, coordinated, timely, and customer friendly.
- Co-location of different programs is a significant step in integration. It helps break down real and perceived barriers and negative attitudes that may have existed between programs.
- On-going cross training of staff will help not only bring everyone “around the same table” for common goals and objectives that are client centered but also will foster camaraderie and flexibility among the various professionals who make up the new department. This will ultimately help reduce turf and competition issues between units.
- Regular meetings and case conferences between programs will facilitate case planning and coordination within the agency.
- The new department also could develop protocols for sharing confidential information on a “need-to-know” basis and, where feasible, obtain informed consent documents from consumers.
- Developing an integrated database for the purposes of information sharing will help facilitate multi-program service coordination and data tracking.
- The new department could develop outcome measures to periodically evaluate the performance of the agency that include customer satisfaction surveys.

- Integration and overcoming of administrative barriers is a gradual process that needs to be evaluated periodically. It is also a work in progress, that requires buy-in and teamwork from managers who head the different programs.

INTEGRATING LONG-TERM CARE: OVERCOMING ADMINISTRATIVE BARRIERS IN INTEGRATING AGING AND ADULT SERVICES IN SAN MATEO COUNTY

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INTRODUCTION

The reason I selected San Mateo County's Aging and Adult Services for my BASSC internship is three-fold: 1) San Francisco's new Department of Aging and Adult Services, 2) San Mateo County's success in integrating their Aging and Adult Services Division, and 3) San Mateo County's success in implementing innovative projects.

In the past year, a new Department of Aging and Adult Services was formed in San Francisco, which has started incrementally merging some of the programs that serve low-income elders and adults with disabilities. One of the programs that will be joining this new department is the In Home Support Services Program (IHSS) carrying section that I am currently managing.

The Aging and Adult Services division in San Mateo has had great success in overcoming administrative barriers and bringing under one umbrella programs that serve the frail elderly and adults with disabilities.

Moreover, San Mateo County's Aging and Adult Services Division (AAS) has successfully undertaken innovative projects and implemented them seamlessly with the existing programs. I was fortunate enough to have Charlene Silva as a mentor, the visionary director of the agency. Ms. Silva's brilliance in organization and her passion in providing the best services possible to the community have made San Mateo County a model in this endeavor.

This internship gave me the opportunity to understand the process that is involved in bringing together different programs that, before integration, were in their respective "silos" and had very little understanding of each other, yet they served the same community of people and oftentimes shared the same clients. During this period, I had the good fortune of working with an excellent team of management staff who were very generous with their time and expertise.

HISTORY

The integration of long-term care in Aging and Adult Services of San Mateo County began 19 years ago. The rationale behind this integration was:

- a) The AB 1850 legislation to develop integrated long-term care services,
- b) The relationship between the medical and disability needs of the clients served, and
- c) The negative grand jury audit of the Public Guardian.

The first phase of integration in San Mateo County took place in 1982. The senior advocates and the community, who had an interest to see things done differently were involved during this phase. The agency was comprised of Adult Protective Services (APS), IHSS and the Public Guardian and was called The Division of Long Term Care. In 1984 the county hospitals under the hospital consortium initiated the second phase of integration which included the two case management programs, Multipurpose Senior Services Program (MSSP) and Linkages.

The third phase took place in 1990 when the county approached the Commission on the Aging into integrate the Area Agency on Aging to this larger model. In 1992 the agency took a new name and became called Aging and Adult Services. The same year the New Beginning Coalition was created to oversee the integration and development activities of the long-term care merger. New Beginning Coalition is a broad-based group of consumers and providers and has a membership of 400 persons with steering and coordinating committees.

ORGANIZATIONAL STRUCTURE

Aging and Adult Services is part of San Mateo County's Department of Health Services. It has 115 employees including a director, four health service managers, a program analyst, and a fiscal manager. The Public Authority administrator is a county employee and reports to Charlene Silva, the director. The services provided by the agency are divided into three major categories that include: Commissions and Providers, Conservatorship and Protective/Support Services. Please see Attachment A for the organizational chart.

Similar to the Area Agency on Aging, the mission of Aging and Adult Services of San Mateo is to: a) ensure the safety of at-risk older adults and people with disabilities, b) provide access to services, and c) support independence and maintain dignity by providing information, assistance, case management, advocacy, planning, coordination in a client-centered, compassionate and fiscally responsible manner.

SERVICE COORDINATION/DELIVERY

Within the spectrum of long-term care, home and community based services are those that are deliv-

ered outside an institutional setting. One of the challenges any integrated long-term care agency faces is the streamlining of services. Effective streamlining of services is one of the keys to breaking down the administrative barriers between programs and having a single client centered focus. With this in mind, Aging and Adult Services of San Mateo developed a centralized intake line which is known as Teamwork Insuring Elder Support (TIES). The TIES line, which provides information/intake assistance, serves as the main entry point for Adult Services within the Health Services Agency. Individuals in the community can receive professional assessment and obtain access to all Aging and Adult Services, Mental Health, San Mateo County General Hospital as well as community based programs such as Meals on Wheels. Social workers answer questions about a wide variety of services in the county and the community as well as provide phone support and counseling. Centralized intake also investigates adult abuse allegations and ensures that all incoming calls are appropriately referred. As a result of this single entry system, the agency:

- meets the specific needs of different client groups
- makes multiple-program eligibility determination possible
- makes speed and efficiency of client application processing a reality
- offers a coordinated service delivery including integrated case management
- maximizes efficiency and avoids duplication of services

The point of entry is staffed by three social workers with MSWs. Other social work staff in the Protective/Support Service unit are also cross-trained to fill in for any one of the three MSWs when necessary.

Another key to overcoming administrative barriers among agency staff and other professionals who deal with the same clients are the interdisciplinary and multidisciplinary meetings that are held on a regular basis. For example, IHSS, MSSP and Linkages meet once every two weeks to discuss cases that are referred for case management services. At these meetings, the worker who makes the referral has a chance to explain why case management is necessary and the supervisors have the opportunity to review the merits of the referral. The multidisciplinary team of APS, the Ombudsman, Conservatorship, the District Attorney's office and Public Health Nurses meet once a month to discuss and share information on APS cases that are under investigation and other outstanding cases that need follow-up. I was fortunate enough to be part of most of these meetings as well as a meeting that the Public Guardian held with the County Council. Public Guardian meets with the County Council once a month to discuss cases and seek advice from the council on clients that need conserving.

I also attended the management team meeting that is held once a week where agency-wide issues and program-specific concerns are discussed. Issues such as staffing, space and outcome-based management are addressed at this meeting. At this meeting the team strategizes and arrives at decisions that cross program lines.

During my internship, the Commission on Aging (COA) and the Commission on Disabilities (COD) each held their individual monthly meetings. COA is a 21-member citizen volunteer group which acts as an advisor to the San Mateo County Board of Supervisors and the Division of Aging and Adult Services on all matters pertaining to seniors. The members are divided into subcommittees or focus groups such as the Minority Elders Committee, the

Legislative Committee, the Continuum of Care Committee, and the Nutrition Program to discuss and reach a consensus on the kinds of actions they intend to take.

The members of the COD are comprised of professionals, people with disabilities, family members and others who act as advisors to the San Mateo Board of Supervisors. The commission seeks to identify unmet needs, strengthen existing services and coordinate the planning and development of new services. The COD also has subcommittees that deal with issues of persons with disabilities, such as ADA Compliance Committee, the Legislation and Advocacy Committee and a joint COA/COD housing taskforce which seeks housing for those displaced by eviction.

This internship afforded me the opportunity to attend these meetings and observe the interactions that took place. I was involved in some of them, especially those that were held within the agency, and witnessed others that were held in collaboration with other professionals and stakeholders. Information in these meetings is shared on a "need-to-know" basis insuring that client confidentiality is not compromised. The different programs also secure signed consent documents from consumers. Please see Attachment B.

OBSERVATION

There are a number of administrative barriers in the integration of long-term care services. The two worth noting in this case study are:

1. rigid adherence of workers to their professional identity
2. the rules and regulations that govern the different programs and their categorical definitions for the provisions of service

Overcoming the first barrier has been achieved by building trust over the years among staff. To its advantage, AAS of San Mateo has a relatively small work force that makes co-location of the different programs possible. Workers of the different programs not only sit in close proximity to one another but also recognize their shared commitment to the clients they serve. Not only does such acknowledgment bridge the gap and misunderstanding that existed prior to the integration effort, it also brings mutual respect and appreciation. However, there are those who want to retain old identities and resist change. Fortunately these individuals are a minority. I cannot emphasize strongly enough the effort that Ms. Silva and her management team have exerted to consistently break down the barriers. As the result, the agency has been able to:

- create a new culture in service delivery system that is client centered
- provide integrated services within the long-term care continuum
- create an easier system for family members and caregivers to
- use/access/hold accountable
- afford staff members a clearer mission

This is a clear manifestation that the agency's client centered goals and objectives take precedence over all other matters.

Rules, regulations, and categorically defined provisions of service continue to pit one program against another. These are big hurdles that stand in the way of integration and overcoming administrative barriers. AAS of San Mateo works with the state, other counties, consumers, and stakeholders to obtain waivers where feasible, and partners with advocates and elected officials both at county and state levels to effect legislative changes.

IMPLICATIONS FOR SAN FRANCISCO AGING AND ADULT SERVICES DEPARTMENT

As the new Aging and Adult Services Department incorporates other programs, it will benefit from streamlining of services into a single-entry to the system. San Mateo County's experience shows that this system has made service delivery more efficient, coordinated, timely, and customer friendly.

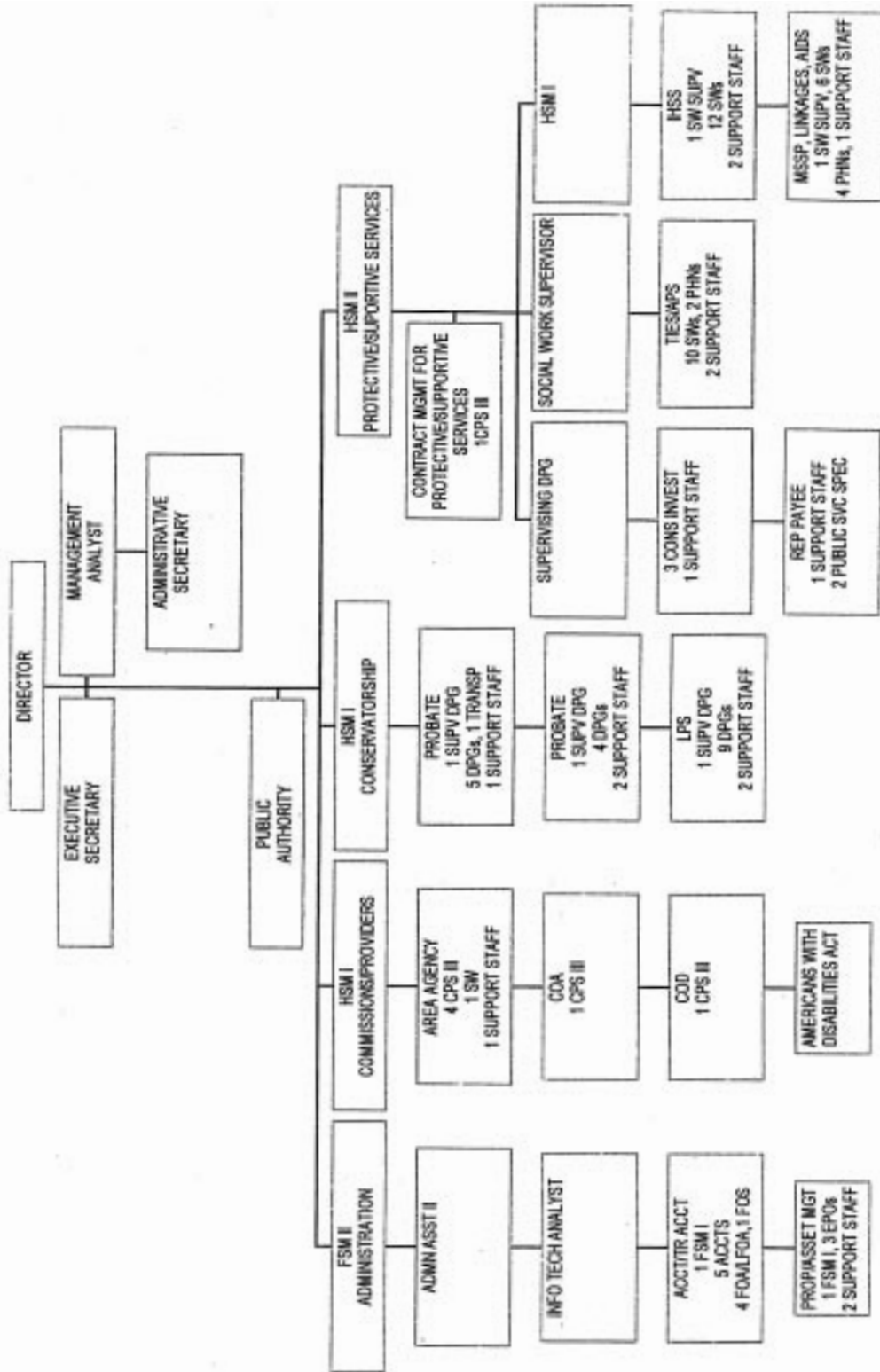
- Co-location of different programs is a significant step in integration. It helps break down real and perceived barriers and negative attitudes that may have existed between programs.
- On-going cross training of staff will help not only bring everyone "around the same table" for common goals and objectives that are client-centered, but will also foster camaraderie and flexibility among the various professionals who make up the new department. This will ultimately help reduce turf and competition issues between units.
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- Integration and overcoming of administrative barriers is a gradual process that needs to be evaluated periodically. It is also a work in progress, which requires buy-in and teamwork from managers that head the different programs.

ACKNOWLEDGEMENTS

I would like to extend my gratitude to my mentor Charlene Silva for hosting me during this project. Thanks to Lisa Mancini for identifying the meetings I attended and graciously scheduling all my appointments. I would also like to thank the management staff of Aging and Adult Services of San Mateo County for sharing their time and expertise.

SAN MATEO COUNTY HEALTH SERVICES AGENCY
AGING AND ADULT SERVICES



03/22/2001

Attachment B

**AUTHORIZATION TO OBTAIN AND TO SHARE PARTICIPANT INFORMATION AMONG
THE CONSORTIUM OF SAN MATEO COUNTY ADULT SERVICE PROVIDERS**

Participant Name: _____

Participant Number: _____

I have been advised that _____
is a service provider in San Mateo County. I understand that in the course of coordinating my
care, _____ may need to share
information with and obtain information from other San Mateo County Adult Services,
including the following service providers:

	<u>Initial</u>	<u>Date</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

By intialing after one or more of the above agencies, I consent to the sharing of information
between _____ and the
designated service provider(s).

I understand that the information disclosed/obtained shall be limited to the following types of
information:

_____ Intake _____ Health Assessment
_____ Screening _____ Other (specify): _____

Exclusion: Do Not Share the following information: _____

This consent is subject to revocation by the undersigned at any time to the extent that action
has been taken in reliance hereon, and if not revoked earlier, it shall terminate one year from
_____ (date or event).

Signature of Participant Date Signature of Family Member Date

Signature of Witness Date



HEALTH SERVICES AGENCY

Board of Supervisors:

Mark Church • Rose Jacobs Gibson • Richard S. Gordon • Jerry Hill • Michael D. Nevin

Health Services Director: Margaret Taylor

AGING AND ADULT SERVICES PUBLIC GUARDIAN
225 37TH AVENUE, SAN MATEO, CA 94403
PHONE (650) 573-3900 TDD (650) 573-2220 FAX (650) 573-2310
800-675-TIES (24 hour line to report abuse) TDD 800-994-6166
<http://www.smhealth.org>

Participant Number _____

Participant Name _____

I have been advised that San Mateo Multipurpose Senior Services Program is a service provider in San Mateo County. I understand that in the course of coordinating my care, San Mateo MSSP may need to share information with and obtain information from other San Mateo County Adult Services, including the following service providers.

	<u>Initial</u>	<u>Date</u>
<u>Medi-Cal</u>	_____	_____
<u>Social Security</u>	_____	_____
<u>Supplemental Security Income</u>	_____	_____
<u>ADHC</u>	_____	_____
<u>(IHSS) Aging & Adult Services</u>	_____	_____
<u>Adult Social Day Program</u>	_____	_____
<u>Meals On Wheels</u>	_____	_____
_____	_____	_____
_____	_____	_____

By initialing after one or more of the above agencies, I consent to the sharing of information between San Mateo MSSP and the designated service provider(s).

I understand that the information disclosed/obtained shall be limited to the following types of information:

- Intake Health Assessment
- Screening Other (specify): _____

Exclusion: Do not share the following information: N/A

This consent is subject to revocation by the undersigned at any time to the extent that action has been taken in reliance hereon, and if not revoked earlier, it shall terminate two years from _____ today's date (date or event).

Signature of Participant Date Signature of Family Member Date

Signature of Professional Requesting Information Date

2/14/01 Aging & Adult Services

SAN MATEO COUNTY
AGING AND ADULT SERVICES
MULTIPURPOSE SENIOR SERVICES PROGRAM (MSSP)
AUTHORIZATION TO RELEASE RECORDS

Federal and State law requires your specific authorization for MSSP to obtain or release to appropriate parties any information about your treatment for certain conditions. Please read the second page of this form and then complete all pertinent sections below.

I authorize _____
(Individual or Agency)

Address _____

to disclose to Aging and Adult Services / MSSP records relating to my
(Individual or Agency)
diagnosis or treatment for:

CHECK ALL THAT APPLY

- Physical injuries, illnesses or conditions
- Mental (psychological or psychiatric) illnesses or conditions
- Alcohol abuse and/or drug abuse
- Cash assistance, Medi-Cal benefits or other social and health services received
- Other: ADHC, Adult Day Program, Meals on Wheels

This information is required for MSSP eligibility determination, case management purposes, health/psychosocial assessment and home nursing care. This information is limited to use by MSSP staff only in their administration of the program.

I may revoke this authorization at any time. In any case, this authorization automatically expires two years from the date of this authorization.

(Client Signature/Authorized Representative) (Date Signed)

(Print Client's Name)

(Place of Birth) (Date of Birth)

(Staff Signature) (Date Signed)

_____ Initial here if you wish to have a copy of this authorization.

SAN MATEO COUNTY
AGING AND ADULT SERVICES

The State of California Information Practices Act of 1977, effective July 1, 1978, Civil Code Section 1798.17, requires the Multipurpose Senior Services Program (MSSP) to provide the following statement to individuals who are asked to provide information about themselves.

The principal purpose for requesting this information is to legally comply with your request to obtain or send medical records so that your eligibility for MSSP services can be established. Welfare and Institutions Code Sections 9401 and 9538, authorize maintenance of this information.

Furnishing all of the information on this form is voluntary. Failure to provide this information may delay or even prevent completion of the action for which the form is being filled out. Information furnished on this form may be used by other agencies if they maintain records pertinent to this request.

You have the right to access the information in this record as it pertains to yourself.

The official responsible for maintaining the information on this form is:

MULTIPURPOSE SENIOR SERVICES PROGRAM
AGING AND ADULT SERVICES DIVISION
HEALTH SERVICES AGENCY
225 37TH AVENUE, BOX 5892
SAN MATEO, CA 94403
(650) 573-3900