# Building State Capacity to Address Older Adult Mental Health & Substance Use

Focusing attention, building capacity, supporting action
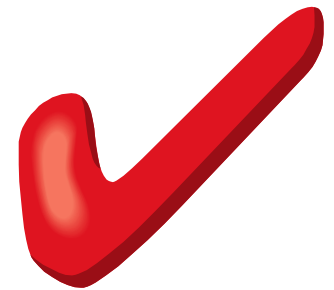
# **Acknowledgements**

- Slides developed by:
  - Rebecca H. Hunter, M.Ed.
    - NC Healthy Aging Research Network
    - Center for Health Promotion and Disease Prevention
    - University of North Carolina at Chapel Hill
- Permission granted for use; kindly provide attribution.

# Objectives

- Describe strategies, programs & policies to address older adult mental health needs.

-  Review key components to viable state system of care.

# Assess & Plan

- Use the planning template to analyze gaps in North Carolina.

# We can't look to the other guy…

- Growing numbers, growing needs, growing challenges
  - *MH/SU health care delivery is inadequate and of poor quality for most older adults*, p. 23
  - *The geriatric MH/SU workforce: too few and not prepared,* p. 6
  - The primary care workforce: poor preparation in geriatric health and MH/SU care

National Research Council. *The Mental Health and Substance Use Workforce for Older Adults: In Whose Hands?*. Washington, DC: The National Academies Press, 2012.

**The bottom line….**

**We are ALL in this TOGETHER…**

**Let's get to work….**
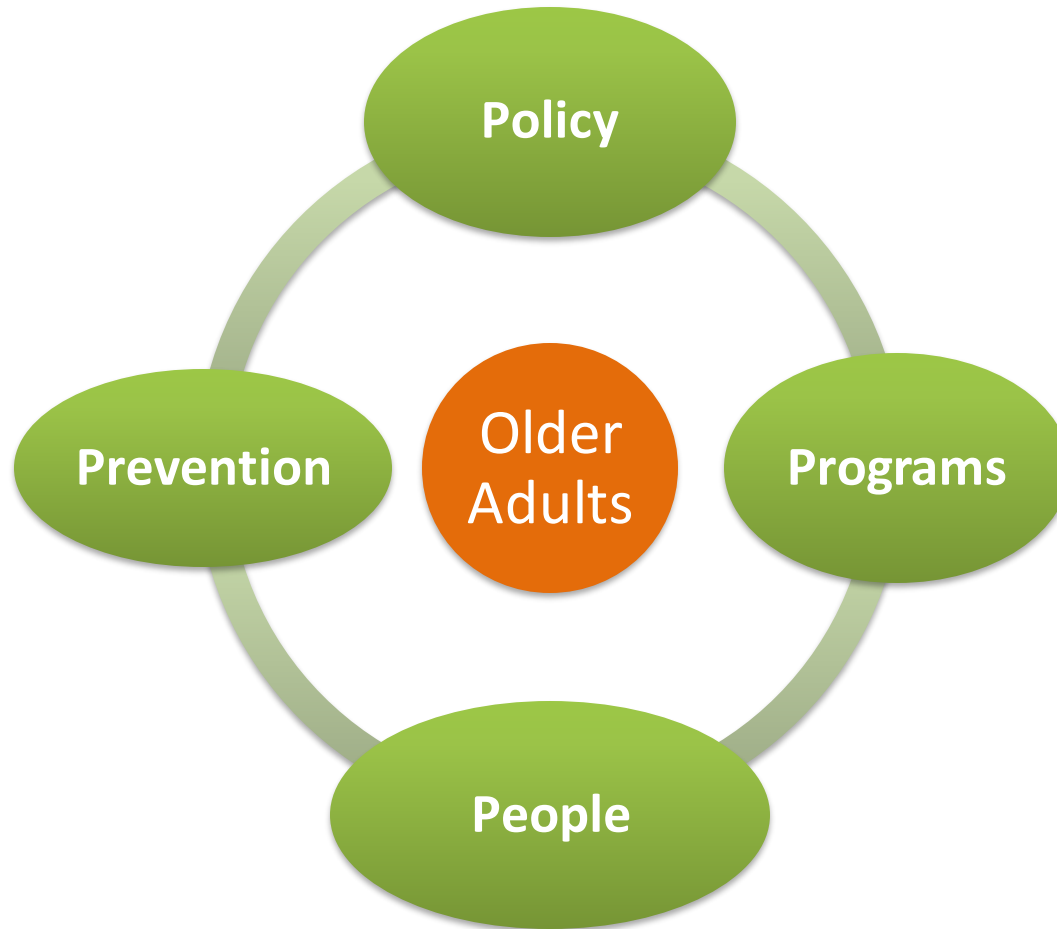
# BUILDING CAPACITY

# Core Components

- Policies & prevention strategies
- Coalition &/or care partnerships
- Data & data monitoring
- Community education & provider development
- Screening & assessment for MH/SU risk & needs
- Programs & interventions

# Mind your "Ps"….

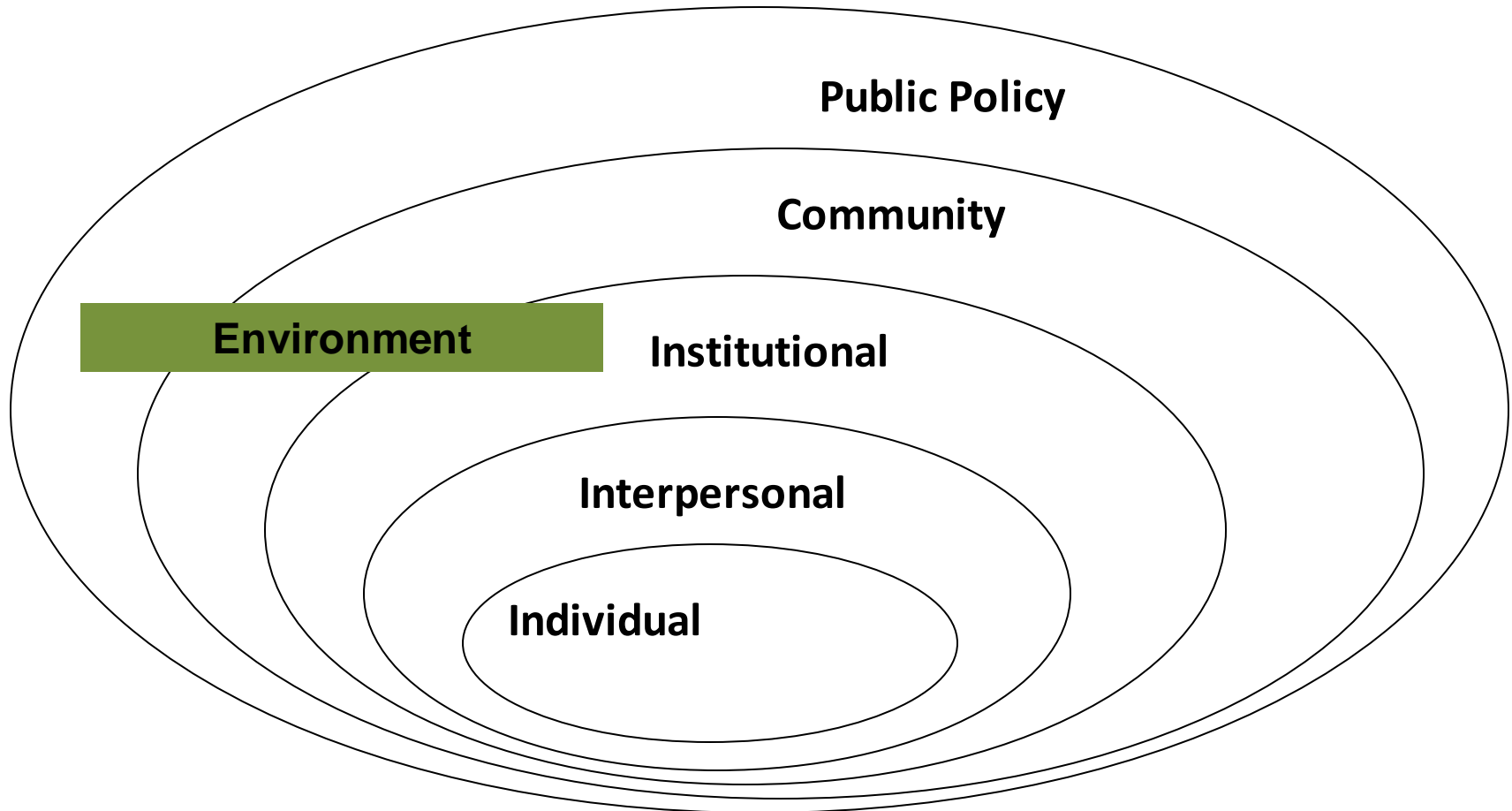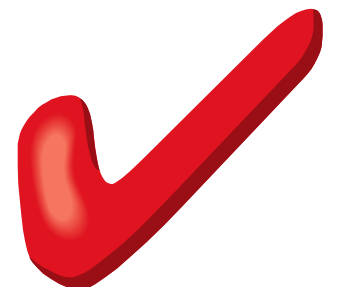**Capacity building….**

# POLICY AND PREVENTION

# Targeting Approaches

Public Policy

Community

Environment

Institutional

Interpersonal

Individual

Modified/ Sources: McLeroy et al., 1988, *Health Educ Q*; Sallis et al., 1998, *Am J Prev Med*

# Big "P" & Little "p" Policy

- Big "P"
  - Credentialing body requires geriatric MH/SU continuing education to maintain license
- Little "p"
  - Local organizations have MOA to share patient/client data to facilitate care coordination
  - Organizations engage older adults in positions of leadership
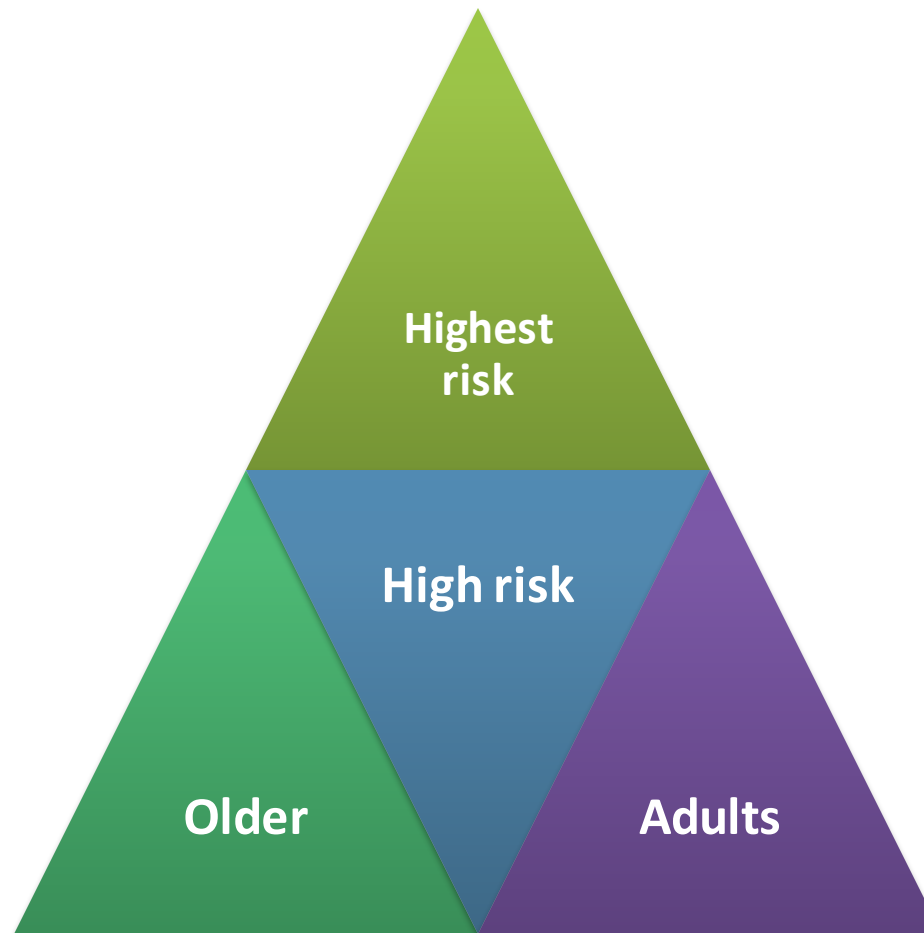  - Ageism actively & strongly discouraged
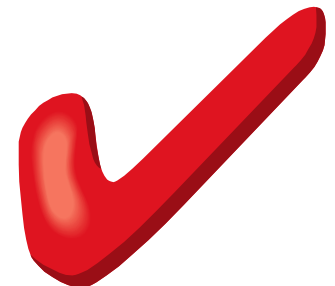
**Capacity building….**

# PEOPLE AND PROGRAMS

# Resources at All Levels

# Partnerships & Coalitions

- State/community/regional partnerships
  - Multi-discipline/multi-sector
  - Public & private sector
- Functions
  - Planning & monitoring
  - Service coordination
- Characteristics
  - Shared mission
  - Well-defined & coordinated roles
  - Clear communication

# Data

- Relevant data regarding…
  - MH/SU incidence/characteristics
  - Available interventions
  - Outcomes
- Answers three key questions
  - Where are we?
  - Where do we need to go?
  - What have we accomplished?
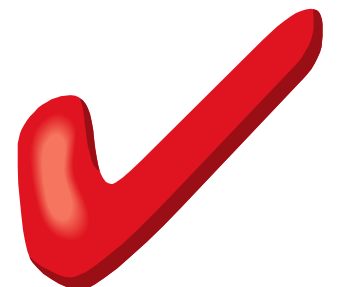
# Provider Development

- Address knowledge & practice gaps
  - Health providers
  - MH/SU providers
  - Aging services
  - Public health
  - Recreation & more
- Let's put the puzzle together!
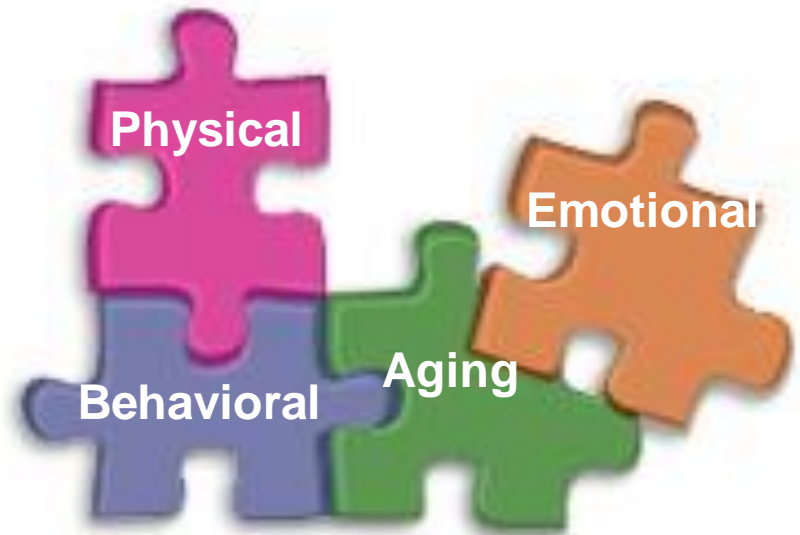
# Community Education

- Older adults & caregivers
  - Healthy, not at risk
  - At risk for MH/SU issues
  - Already with problems
- The community as a whole
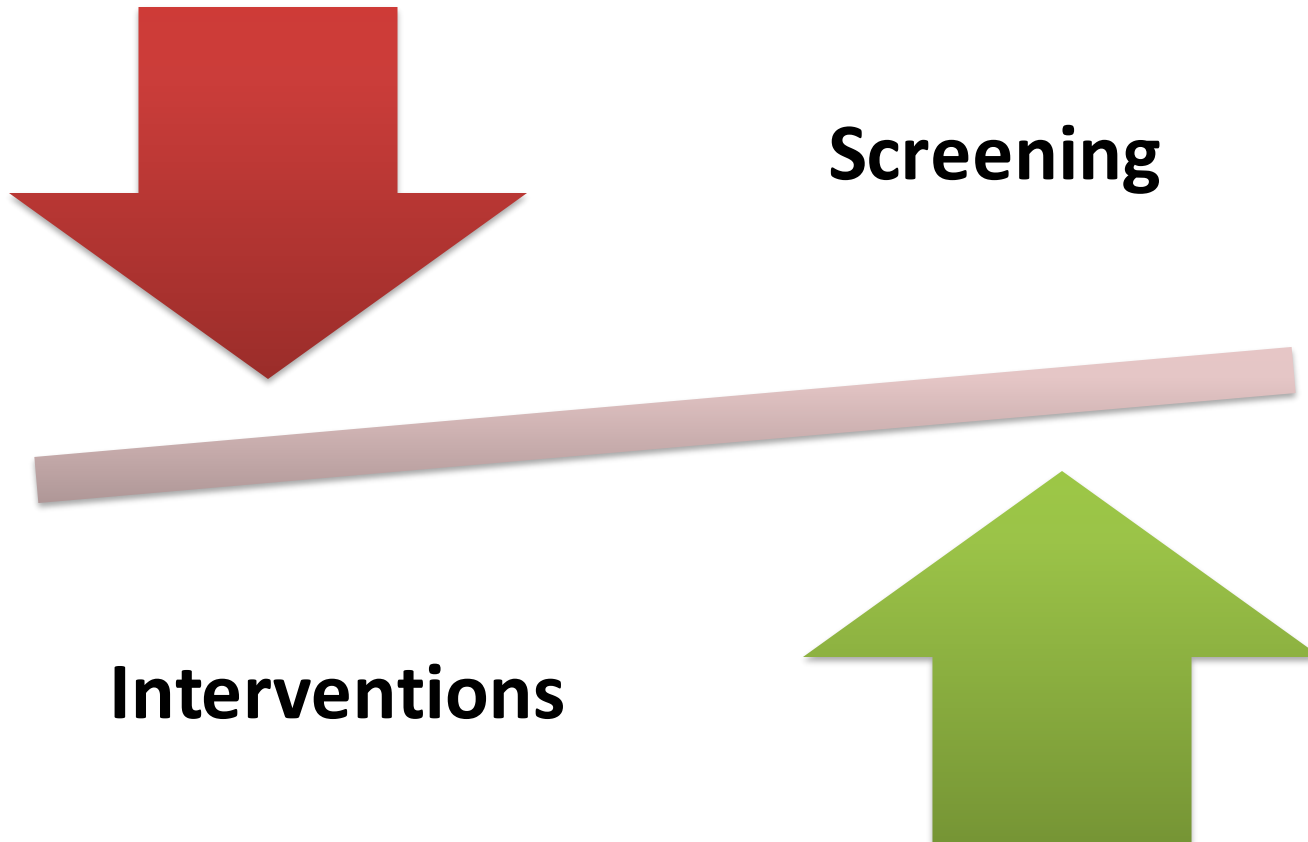  - Public & private sector
  - Citizens
  - Champions

# Educational Tools/Strategies

- Systematically disseminate information
  - Older adults & caregivers in various settings
    - Low literacy
    - Foreign-born
- Directly address stigma & disabling norms
- Promote engagement & action
- Use available resources
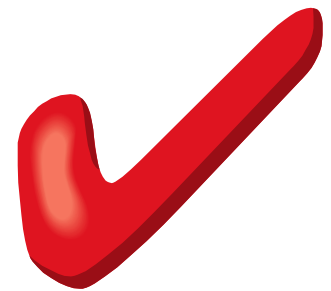
# Ensuring Balance

**Screening**
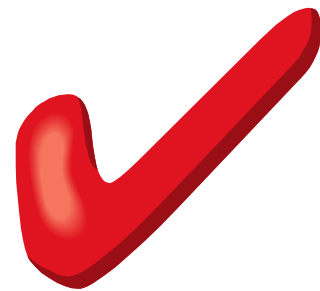
**Interventions**

**Prevention**

# Screening & Evaluation

- Routine screening for MH/SU risk?
    - Healthy lifestyles/behaviors
    - Medical issues that increase risk or cause problems
    - Medication review
    - Screening for depression, dementia, substance use
- Screening by primary care, MH/SU, aging services, older adults, others?

# Screening & Evaluation

- Pathways for evaluation when indicated?

- Pathways to appropriate programs or interventions?

- Pathways not only exist, but are formalized with clear algorithms

# Core Programs & Interventions

- Health promotion, e.g.,
  - Physical activity
  - Social engagement
  - Self-care, e.g., CDSMP
- Risk reduction, e.g.,
  - Grief support groups
  - Peer support
  - Respite care
  - Other support services
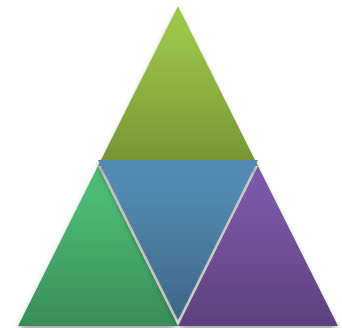
# Core Programs & Interventions

- Programs integrated into other services
  - Aging services
    - Healthy IDEAS
    - PEARLS
  - Primary care
    - IMPACT
    - Telehealth
    - SBIRT
- Co-located services or coordinated, collaborative care
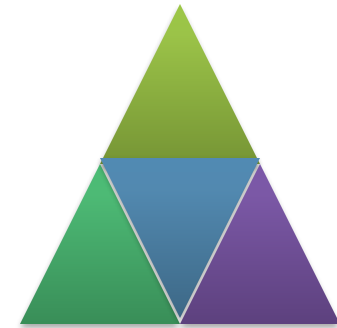
# Core Programs & Interventions

- High risk/severe conditions
  - Clear pathways to care
  - Coordinated, integrated health <u>&</u> mental health intervention

**Let's get busy…**

# TOGETHER WE CAN MAKE IT HAPPEN!

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