

OMHSAS OLDER ADULT ADVISORY COMMITTEE WORKPLAN Goals 1 - 4

1/4/2010

Goal #1: Continue to assure appropriate behavioral health services are available to older adults with dementia who also have psychiatric, behavioral and/or physical health needs.

✓	OBJECTIVES & TASKS (O = ongoing; √ = complete)	FY 2009-2010						FY 2010-2011					RESPONSIBLE PARTY
		NOV	DEC	JAN	FEB	MAR	APRIL	May	June	JULY	AUG	SEPT	
1. Continue to monitor complaints or concerns regarding access to care.													
	Draft letter to counties w/ letter sent by November 30 th responses back by December 12 th . County entities include AAA, MHMR (Behavioral Health), Managed Care Services, Crisis Intervention Services, Single County Authorities		●	●									Wrkgrp
2. Engage in educational efforts with public and managed care partners.													
	Receive responses from objective 1 and then evaluate systems in place.			●	●	●							OA Committee; OMHSAS; OLTL
	Develop process in AAA, Behavioral Health and Managed Care							●	●				OA Committee; OMHSAS; OLTL

Goal #2: Develop collaboration with physical health partners, stakeholders, and other pertinent groups (hereafter referred to as *collaborative partners*) to promote behavioral health screenings for older adults.

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1. Identify Collaborative Partners (Including but not limited to: DPW –the SMI Project that is uniting medicaid and MH; PA Medical Society – Educational Scientific Trust; PA Medical Society – Continuing Education Programs; Senior Centers – AAA; Latino Senior Centers; PFAA; VNA; Home Health; The Moose Lodge; Golden Kiwanis; County Health Departments; State Health Departments; Federal Qualified Health Clinics; Associations: PANFA, PACA, and County Afil; Insurance Companies: Aetna, Cap BC, UPMC; Dept. of corrections; Hospital Association ; Single County Authorities; and The VA)													
	Develop a database of partners and targeted institutions with which OMHSAS and this work group would collaborate to increase use of behavioral health screenings for older adults.		●	●									Wrkgrp
	Review database, add missing partners, and fill in missing individual contact information and emails as is necessary				●	●							OMHSAS - OLTL
2. Review available behavioral health screening instruments													
	Review available behavioral health screening instruments and check into the UPMC ATTC – training modules – IRETA curriculum				●	●							Wrkgrp; OMHSAS; OLTL
	Select 15-20 possible instruments to be presented for collaborative partners review such as the <i>Geriatric Depression Screening</i> and others					●	●						Wrkgrp; OMHSAS; OLTL
3. Hold a collaborative partners’ meeting in May of 2010 to coincide with Older Adult Mental Health Week (the last week in May 2010) in which the Workgroup will present to the collaborative partners the case for including behavioral health screenings for older adults in their routing procedures. The Workgroup will present 15-20 instruments that could be employed and request feedback from collaborative partners as to promising practices, feasibility, and other issues.													
	Set date and venue for collaborative partners’ meeting (during the last week of May)		●										OMHSAS - OLTL
	Determine fiscal agent for meeting (If OMHSAS cannot accept sponsorships etc, seek a non-profit partner)		●	●									Wrkgrp; OMHSAS;

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														OLTL
	Write grant/sponsorship requests to support the stakeholder’s meeting expenses, advertisements promoting use of behavioral health screenings, and other promotional materials. e.g.: http://www.bms.com/responsibility/grantsandgiving/Pages/default.aspx		●	●										Wrkgrp
	Email “save the date” invitations to collaborative partners	●												OMHSAS - OLTL
	Email registration and sponsorship forms to collaborative partners				●	●	●	●						OMHSAS - OLTL
	Other meeting details	●	●	●	●	●	●	●						OMHSAS - OLTL
	Record outcomes from the meeting: a) screening instruments to be used; b) individuals to write components of promotional email and attachments.							●						Wrkgrp
4. Develop promotions														
	Set up SIMPLE online survey: (Do you already employ BH screening as SOP with consumers over 50? Yes/no If so, what do you use?_____ If not, do you plan to begin using the attached BH screening instruments as part of your SOPs with consumers over 50? Yes/no If no, why?_____)									●	●	●		Wrkgrp
	E-mail promotion consisting of: a) one SHORT cover-email that cites cost/benefit advantage of preventive treatments and requests the individual click the link to the survey; b) attached one page with the names of the screenings promoted and SHORT description of each; c) attached screening instruments									●	●	●		Wrkgrp
	Contact state Nemenda or other Pharma reps to see if they would distribute printed promotional materials along with their drug samples. If so, items for printer									●	●	●		Wrkgrp
	Develop announcements for free promotion using Commonwealth, corporate, and nonprofit websites									●	●	●		Wrkgrp

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5. Launch promotions to coincide with October 2010 National Depression Awareness Month													
	Send email promotion to entire collaborating partner database October 1 st October 2010												OMHSAS - OLTL
	Distribute printed materials if sponsored October 2010												OMHSAS - OLTL
	Post announcements on PA websites October 2010												OMHSAS - OLTL
	Re-send to those that did not use weblink October 14 October 2010												OMHSAS - OLTL
	Re-send to those that did not use weblink October 30 th October 2010												OMHSAS - OLTL
6. Evaluate progress toward Goal #2													
	Process evaluation – quarterly reports at Older Adult Advocates Meeting				●			●			●		Wrkgrp
	Output evaluation – track the # of records, emails, hours, participants				●			●			●		Wrkgrp
	Outcome evaluation - track the # of respondents that use the survey link October 2010												Wrkgrp
	Impact evaluation utilizing the self-reported counterfactual method - # of reports from collaborative partners that they incorporated the BH screenings in their SOPs and would not have done so otherwise. October 2010												Wrkgrp

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Goal #3: Monitor mobile outpatient and other models for home and community based behavioral health services¹ to assess effectiveness in serving older adults

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1. Develop plan for implementation of Mobile Mental Health.													
✓	Obtain CMS approval for Mobile Mental Health												
	Determine the role of the County MH offices, AAAs and SCAs related to mobile mental health and other models for home and community based services			●									State Depts. ²
	Include in the upcoming MOU Update that county reports address mobile mental health and other models for home and community based services for older adults. Target date: Dec 2010												State Depts.
2. Monitor utilization of Mobile Mental Health and other models for home and community based services for older adults													
	Determine the number of individuals actually participating in MMH and other models.					●							State Depts.
	Perform quality assessment study of Mobile Mental Health program. Target date: June 2012												State Depts.
3. Ensure that staff from MMH and other models for home and community based services are cross trained on SUD in older adults													
	Update OMHSAS bulletin to require counties to provide cross training on SUD and older adults or otherwise ensure that treatment team for MMH and other models for home and community based services has this expertise. Target Date: December 2011												State Depts.
4. Advocate for Medicare coverage for MMH													
	Draft letter to CMS asking for coverage and addressing: a. Value added					●							State Depts. & Advisory

¹ Mental Health and Substance Use Disorders (SUD)

² Include BDAP in process

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	b. Cost benefit c. EBP d. Appropriate credentialing													Committee
	Lead agencies to endorse letter								●					State Depts. & Advisory Committee
5. Request that an older adult consumer or family member from PA be appointed to the Medicare Advisory Committee														
	Request made through Regional Philadelphia office									●				State Depts. & Advisory Committee

Goal #4: Review the impact of dual eligibility on services provision.

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1. Determine impact of dual eligibility on services provision														
	To be determined (Suggested action step from 3.1.07 OA Advisory meeting: information campaign—how do we share information on coordination of services?)													OA Committee OMHSAS/PDA
2.														