

Advisory Council on Aging and Disability Services

Creating choices for elders and adults with disabilities in Seattle-King County

Mailing Address: PO Box 34125, Seattle, WA 98124-4215
Office Address: Seattle Municipal Tower, 700 5th Ave, 51st Floor
Tel: 206-684-0660 TTY: 206-684-0274 FAX: 206-684-0689
www.adsadvisorycouncil.org

MONTHLY MEETING FEBRUARY 9, 2007

MEMBERS PRESENT

CITY OF SEATTLE	KING COUNTY	UNITED WAY
<input type="checkbox"/> Vacancy	<input type="checkbox"/> Vacancy	<input checked="" type="checkbox"/> Midge Levy, Secretary
<input type="checkbox"/> Vacancy	<input type="checkbox"/> Vacancy	<input checked="" type="checkbox"/> Lorna Stone
<input type="checkbox"/> Vacancy	<input type="checkbox"/> Vacancy	<input checked="" type="checkbox"/> Thelma Pegues, Member-At-Large
<input type="checkbox"/> Vacancy	<input type="checkbox"/> Vacancy	<input type="checkbox"/> Dr. Jonathan Wanagat
<input type="checkbox"/> Tom Rasmussen	<input checked="" type="checkbox"/> Ann Dennis	<input checked="" type="checkbox"/> Don Moreland, Chair
<input type="checkbox"/> Vacancy	<input checked="" type="checkbox"/> Rose Finnegan	<input checked="" type="checkbox"/> Phil Pitruzzello
<input checked="" type="checkbox"/> Houston Brown, V- Chair	<input checked="" type="checkbox"/> Art Mussman	<input checked="" type="checkbox"/> Michael Miller
<input checked="" type="checkbox"/> Dr. Robert Gross	<input checked="" type="checkbox"/> Kate Slaminko	<input checked="" type="checkbox"/> Ann Ballard
<input type="checkbox"/> Candace Inagi	<input checked="" type="checkbox"/> Cathy	<input checked="" type="checkbox"/> Amy Astle-Raaen

Excused Absence Tom Rasmussen, Candace Inagi, Dr. Jonathan Wanagat

Guests Dr. Sally Fitts, Silversity Madrazo, Diane Snell, Dr. Pierre Loebel, Marta Vega, Bonnie Graves, Rebecca Hansen

ADS Staff Pamela Piering, Rosemary Cunningham, Marcy Kubbs, Karen Winston, Doug Ricker, Margaret Casey

United Way Staff Linda Woodall

King County Staff Linda Wells

MINUTES

Don Moreland, Chair, welcomed Advisory Council members, guests and ADS staff to the meeting. He asked those present to introduce themselves.

In association with the Area Agency on Aging for Seattle-King County and sponsored by:



PROGRAM : MENTAL HEALTH

Don introduced the two speakers, Karen Kent from the Geriatric Regional Assessment Team (GRAT) and Ayako Miki with the Asian Counseling and Referral Services. They shared the following comments about mental illness and older adults.

Karen Kent reports that the GRAT is a “carve out” program, meaning that King County doesn’t guarantee ongoing funding for the program. Each year they evaluate whether to fund the program. The work of GRAT is well respected however, so Karen is confident the program will continue.

GRAT provides the following services:

- Emergency Crisis Services
- Family Caregiver Counseling
- Substance Abuse Assessment Services
- Geriatric Consultation Services

Karen reported that the most common mental health diagnoses are the following

- Depression is the top issue older adults face with older women being particularly vulnerable.
- Anxiety - Panic Attacks, Obsessive Compulsive, Post Traumatic Stress Disorder
- Dementia with Alzheimer’s being the number one form of dementia. Dementia will be experienced by 10% of the population over 60 and 30% of those over 85.
- Alcohol misuse is a hidden problem as is misuse of prescription drugs, another problem they see. GRAT as a half-time employee to provide alcohol outreach services.
- Chronic Mental Illnesses such as Schizophrenia and Bipolar Disorder
- Caregiver Issues – caregivers need support

While the mental health system is using the “Recovery Model” to treat clients, it is not a model useful in working with older adults where the focus is on improving the quality of life rather than helping someone return to work. Also, physical issues can complicate mental recovery making it harder for example to stabilize someone with depression. More appropriate goals for older adults include:

- Increasing the support system
- Increasing pleasant activities
- Providing good health care (many are without a primary care physician)

In addition, older adults avoid the mental health system for a variety of reasons including:

- Clinics are not set up to serve older adults
- Fear of being put away
- Difficulty in sharing feelings
- “Pull ourselves up by the bootstraps” generation – raised to do it themselves rather than rely on others

- State mental health system primarily serves primarily young Medicaid clients
- Transportation issues

Karen indicated unmet mental health needs include:

- Treatment for substance abuse & mental health issues
 - Crisis Services – GRAT is the only program in the state targeting substance abusing older adults.
 - On-going treatment in the home – Increase the number of community mental health experts who can provide services in the home. Currently it can take 6-12 weeks to be seen following referral to a community mental health center.
 - In-patient treatment designed for older adults providing medical, mental health, and substance abuse services. There are few geriatric psych beds in the county primarily because of limited funding. Medicare funding is not a good resource as few clinicians will accept mental health clients.
- More respite care services for caregivers who always need extra support
- Increased ability to help demented older adults who live alone and refuse services – APS currently doesn't have the right to do anything for them if they don't want services.
 - More lenient involuntary detention laws may be the best way to do this.
 - Allow APS to do more without the person's consent

Ayako Miki, supervisor of Aging & Adult Services at the Asian Counseling and Referral Services (ACRS), indicated that her agency serves a number of Asian and Pacific Islander cultural groups such as Japanese, Cambodian, Vietnamese, Laos, and Samoan. For some within these groups, English is their first language. Others may be limited or non-English speaking. As a result the needs of their clients are quite diverse. To serve these clients it is important to be:

- Bilingual service provider; and,
- Bi-cultural service provider

Post Traumatic Stress Disorder (PTSD) is a common issue particularly among Southeast Asian groups such as the Vietnamese who may have survived Communist rule before immigrating to the U.S. Cambodians served by ACRS have also experienced a lot of trauma. In fact, 95% of the Cambodians they see lost a family member, and 60% were robbed and tortured. Among Vietnamese they work with, 50% were robbed and tortured. These experiences are in addition to the adjustments they must make as an immigrant.

Other issues related to serving Asian-Pacific Islanders (API) include the following:

- Western psychotherapy is not understood. Often times their language has no words for mental health terms such as “depression” which may commonly be expressed as somatic problems.
- Stigma is associated with mental health issues
- API are family oriented and getting help outside the family may be interpreted as the family being neglectful.

ACRS's Mien (Laos) Embroidery Group is a support group that:

- Provides opportunities for story telling
- Expressing oneself
- Healing

To provide services to API the most important to understand the following:

- What community are they from?
- Why did they come to the U.S.?
- What are they suffering from?
- Provide services that are bilingual and bicultural.

BUSINESS MEETING

Minutes

Action Taken: It was moved/seconded and passed that the December 8, 2006 minutes be approved as written.

COMMITTEE AND TASK FORCE REPORTS

Sponsor's Meeting

Pamela Piering reported that in January the Sponsors discussed Emergency Preparedness and the need for more planning for vulnerable adults. She mentioned the power outages late in December as an example of a situation where day shelters needed to be in place to assist older adults. King County will have two-year funding for a position to assist in planning for the emergency needs of vulnerable adults. While it is County Health Department funding, the position will be located in the Human Services Department.

Planning & Allocations Committee

Karen Winston reported that because of the number of new members the committee had an orientation session. The work plan for the next Area Plan was discussed along with the 2007 budget.

Outreach and Advocacy / Health Care Task Force

Michael Miller reported the joint committees met earlier in the day to plan for the Senior Lobby Day coming up next week. Eldercare Alliance issues were reviewed in preparation for the event. Peter Greenfield attended the meeting and gave an update on the Public Guardianship bill which requests \$2 million for a pilot project. He is hopeful the bill will pass and include adequate funding.

Communications Committee

Don Moreland reported that ADS staff, Maria Langlais continues to do a wonderful job preparing the *Seniors Digest*.

State Council on Aging

Don Moreland attended the last State Council on Aging (SCOA) meeting. He indicated Joanne Brekke plays an important role on the council because of her past experience as a State Legislator. The SCOA is studying mental health issues and older adults, and is concerned about the closure of facilities and lack of adequate funding. This topic will be on future agendas for the council.

NEW BUSINESS

Senior Lobby Day

The Washington Association of Area Agencies on Aging (W4A) is a member of the Eldercare Alliance along with a number of organizations including the Long Term Care Ombudsman Program, Alzheimer's Association, ElderHealth Northwest, and the Resident Council of Washington. Jerry Reilly is the lobbyist for the Alliance. Of the seven items in the Eldercare Alliance \$31,210,400 budget request, the top four of interest to the Advisory Council include the following:

1) Fund equitable vendor rate increases for all community-based Eldercare providers - \$13.7 M.

All DSHS Long Term Care programs provide important services on behalf of the State and deserve to receive fair wages.

2) Fund Family Caregiver services as requested by DSHS - \$894,000

With two thirds of the long-term care in the state being provided at no cost to the state by family caregivers, it is time to help these families with respite so they can continue to provide this care and maintain their family members as independently as possible.

3) Expand the Chronic Care Case Management as requested by DSHS - \$7 M

This would expand the program successfully piloted in Pierce and Yakima Counties to all parts of the state.

4) Restore Senior Citizens Services Act (SCSA) funding to the same per capita level that existed in FY 1998 -\$7,990,000

This program is central to the services and programs provided to elders who are not participating in Medicaid. This would restore previous cuts made to the program.

Michael Miller urged the council to consider supporting the "McCleary Fix", a bill that would restore the definition of disability used in the state for many years until a State Supreme Court decision restricted the definition so that it now resembles that used at the federal level.

Director's Report

Pamela Piering, reported on the following items.

- 1) Because of a previous decision of the Planning and Allocations Committee regarding the use of unspent funds, ADS was able to award a 2.5% Cost of Living allowance to subcontracting agencies at the end of December.
- 2) The Local Care Management grant which ADS recently received, will coordinate the care of Medicaid clients with chronic conditions in the community. These are not long-term care clients. Planning related to the program's startup is challenging and intense, but rewarding.
- 3) Phase II of a Senior Center study commissioned by Tom Rasmussen and the Seattle City Council is in progress. Andrea Cohen, study consultant, is reviewing demographic trends, changing needs of Baby Boomers, and what changes need to take place to prepare senior centers for the future.
- 4) Pam will miss the March Advisory Council meeting as she will be in Chicago presenting at a conference.
- 5) Planning has begun for the next Area Plan 2008-2011. A series of four forums will be held in the next few months on a variety of topics. They include the following:

Community Design and Health Promotion- Dr. Larry Frank

February 20, 2007

10:00 a.m. to noon

Seattle City Hall, Bertha Landes Room

600 – 4th Ave. (Use 5th Avenue entrance)

Baby Boomers and Aging Demographics

March 1, 2007

10:00 a.m. to noon

Mercer Island Community Center

8236 SE 24th St., Mercer Island

There's No Place Like Home: Long-Term Care

March 15, 2007

1:00 to 3:00 p.m.

Tukwila Community Center

12424 – 42nd Ave. S., Tukwila

There's No Place Like Home: Housing

April 5, 2007

10:00 a.m. to noon

Bellevue City Hall, Room 108

450 – 110th NE, Room, 108, Bellevue

Working to Build a Disaster-Resilient Community

April 19, 2007

2:00 to 4:00 p.m.

Times Square Conference Center

660 – 39th St. SW, Renton (Across from Ikea)

6) In response to a question from an Advisory Council member, Pam reported that SEIU supports a bill that would raise the level of required training for family caregivers receiving funds from the state from 28 hours to 128 hours.

The meeting was adjourned at 2:00 pm.

NEXT REGULAR MEETING

Friday, March 9, 2006

Noon – 2:00 p.m.

6070 Conference Room

Seattle Municipal Tower

700 – 5th Avenue

Seattle, WA 98124

www.adsadvisorycouncil.org