

LONG TERM CARE COORDINATING COUNCIL

Guiding the development of an integrated network of home, community-based, and institutional services for older adults and adults with disabilities

Age and Disability Friendly San Francisco Task Force

MEETING NOTES

Wednesday, February 8, 2017; 2:00pm to 4:00 pm
City Hall, Room 201, 1Dr. Carlton B. Goodlett Plaza, San Francisco

Co-chairs: Aneeka Chaudhry, Kelly Dearman

Present: Cassandra Chan, Pei Chen, MD, Larry Saxxon, Janet Standen, Regina Dick-Endrizzi, Al Gilbert, Anne Hinton, Mikiko Huang, Arfaraz Khambatta, Julie Klee, Deena Lahn, Shireen McSpadden, Steve Nakajo, Jesse Nichols, Sneha Patil, Michelle Venegas, Jeremy Wallenberg, Edie Yau

Staff: Valerie Coleman (DAAS), Rick Appleby (DAAS), Rose Johns (Planning)

WELCOME & INTRODUCTIONS – Kelly Dearman, Aneeka Chaudry

- Review of notes from January meeting. No comments. Send edits to Rick or Valerie

DOMAIN OVERVIEW: Community Support & Health Services - Valerie

February meeting: Community Supports; March meeting: Health Services

Review of timeline (handout), process as iterative: review of recommendations and plans in the future with modifications as needed

Task Force Timeline and Domain Schedule (Handout)

Terminology (Handout):

- “Baseline Assessment”: Current Conditions
- “Action Plan”: resultant recommendations to improve conditions
- “Domains”: Categories for inquiry
- “Criteria”: Primary evaluation factors
- “Assets”: Factors that make SF a good place to live
- “Gaps”: Areas of unmet need.
- “Recommendations”: SMART strategies.
- “Issue Brief”: Memo for Task Force providing relevant information of meeting specific Domains
- “Key Entities” (handout): LTCCC, WHO, AARP Livable Communities

Issue Brief Review – Valerie

IB represents a high level review of criteria, assets, gaps, best practice, research and initial recommendations for review by Task Force. Work for this meeting is recommendations regarding community Supports Domain.

Small Group Work: - Task Force members

Small group exercise, 10 minutes, 3 to 4 members each, Review Issue Brief, Make additional comments and/or recommendations.

Large Group Review – Task Force Members

Small group comments:

- Assessment: Look at family support as asset; how to measure family caregiving for adults with disabilities and others. Family living with and family living afar. Independent housing as “home”. How do we ensure “friendliness” in new developments?
- Assessment: Importance of employment opportunities and supportive income. What is the small business perspective and incentive? How do we measure the benefits of employment? Future domain addresses this.
- Criteria: Support should be wherever someone lives not just “home.” Often younger Disabled in senior housing. “Connection” as a criteria. Housing as health care.
- Assessment and Criteria: Need for cultural awareness, competency, language proficiency. Diversity is an asset in SF.
- Assessment: Food Security as a basic pillar of health
- Assessment: Pet Awareness, care for pet as needed, e.g. during pet’s hospitalization, taking pet with you into long term care facilities (most do not allow it), alternative plans for pets.
- Assets & gaps: ADHCs are assets; also gap in that there aren’t enough ADHCs
- Criteria: Responsible use of funding as a criteria; strategy for prioritizing and maximizing
- Recommendations: should address a gap or say why not
- Assessment: Note seniors who live alone; accessing safety net.
- Assessment: Coordination, referrals and support by public safety for people with mental illness or dementia
- Gap: Geriatric clinics, access to house calls.
- Gap in addressing MH in older adults, limited services.
- Gap: Caregivers not trained or supported esp. for adults with behavioral health issues
- Asset: Collaboration of DPH and Department of Planning Master Health Plan covering healthcare trends, facilities, etc.; results in 50+ recommendations; currently being updated
- Gaps: decrease in gerontology students; Need to pressure colleges. Find qualified workers, maintain and pay them.
- Asset: Existing planning efforts for seniors and people with disabilities

Recommendations:

- Ableism and disability training for health care providers and caregivers
- Broad definition of “caregiver”
- Broad definition of “family”

- Cultural humility emphasis. Collect data on what hospitals are doing this training and/or have policies about diversity and non-discrimination.
- Education & awareness efforts, e.g. centralized information, “Scouts,” Grass roots, volunteers
- Data Collection
- Comprehensive response when folks call in crisis
- Work with Press and media
- Public awareness of aging and disability, e.g. on the bus
- Better jobs and wages
- Family caregiver leave
- Financial navigation esp. for middle income
- Models of combining medical, social service and financial efforts, e.g. GWEP project
- Address various discrimination in the ER and medical services and the bias against pain medications
- “User experience” concept
- Single advertised central number to call for information, help learning about services and system, advice, case management to access any and all services regardless of need.
- Collaboration in planning/developing senior + disability lens
- Expand the capacity to deliver high-quality services and support

Task Force Member Comments:

- Members chosen for expertise so speak up about work being done
- Limits of discussion as mode of information sharing
- Want review of additional recommendations at each meeting; will send out before hand
- Members can share other information (send to rick, Valerie or Dropbox folder)
- Look at City data sharing efforts
- Unique San Francisco includes diversity
- Need to look at dialysis issues
- Reminders for next meeting:
 - keep conversation focused on domain
 - SMART sign – maybe post up to support recommendations conversation

PUBLIC COMMENT: None

ADJOURN: Meeting adjourned at 4:00 pm.

Next Meeting: March 8, 2017; 2:00 to 4:00pm
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 San Francisco, CA 94102