

Long Term Care Coordinating Council of San Francisco Policy Agenda 2017

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The Long Term Care Coordinating Council (LTCCC) advises the Mayor on **policy, planning and service delivery issues** for older adults and people with disabilities. Established in 2004, the 40 mayoral-appointed member Council's mandates are to:

- Advise, implement and **evaluate** all issues relating to long term **care and supportive services**, including how different service systems interact.
- Guide the **development of a network** of home, community-based, and institutional long term services and supports - in the **most integrated settings** - for older adults and adults with disabilities.
- Make **policy** recommendations about how to **improve coordination** within different settings (home-based, community-based and institutional care) and **service sectors** (health, supportive services, housing, transportation, et al.)

LTCCC POLICY AGENDA FOCUS AREAS

- #1 Support the development of San Francisco's **Age and Disability Friendly** action plan, guided by the World Health Organization.
- #2 Support universal access to inter-professional **palliative care** services and a system that follows patients' health-related values and wishes.
- #3 Support increasing the availability of a range of safe, affordable, accessible and adaptable **housing options**.
- #4 Support increasing services and quality care for individuals **aging with HIV**.
- #5 Support increasing access and capacity so all seniors and adults with disabilities can meet their **basic needs with dignity**.
- #6 Support addressing the shortage of long term care **work force**.
- #7 Support for individuals with **dementia** living in the **community**.

Support the development of San Francisco's Age and Disability Friendly (ADF) action plan, guided by the World Health Organization.

Background

As a member of the World Health Organization's (WHO) Global Age Friendly Cities and the American Association of Retired Persons (AARP) Network of Age-Friendly Communities, the LTCCC supports San Francisco's participation, including expertise, resources, and an exchange with other cities within the network and throughout the world.

Policy Development Plan

1. Mayor's ADF Task Force is convening to produce a **baseline assessment and action plan** that will include measurable, tangible and actionable **recommendations**, focused on the following areas:
 - » Community Support & Health Services » Engagement & Inclusion Communication, Information, & Technology » Employment & Economic Security » Housing » Transportation » Outdoor Spaces & Buildings » Resiliency & Emergency Preparedness
2. **Implementation** of the ADF Action Plan recommendations over the course of three years (2018-2021), which may include:
 - Partnering with community based organizations, City agencies, residents and local universities on key initiatives;
 - Ongoing community engagement to ensure resident participation, feedback, stewardship, and workgroup membership; and
 - Advocacy for policy, program and/or funding recommendations.
3. **Evaluation** of the ADF Action Plan following the implementation period, which will include:
 - Report on the status of the recommendations;
 - Analysis of the outcomes of the assessment;
 - Develop the next iteration of the San Francisco ADF Action Plan.

Support universal access to inter-professional palliative care services and a system that follows patients with serious illness' health-related values and wishes.

1. Palliative care **education and healthcare training** for healthcare providers, direct care staff, front line workers, patients and their family members.
2. Promotion of **high quality** palliative care in acute care **hospitals** with payers focusing on **quality measures**.
3. Develop a **data driven understanding** of the palliative care needs of SF residents.
4. Community **engagement** to make San Francisco a conversation-competent community that **honors and respects the diversity** of people with serious illnesses.

Support increasing the availability of a range of safe, affordable, accessible and adaptable housing options.

1. Explore options to **increase housing options** for all seniors and adults with disabilities, especially with **very low-incomes**.
2. Advocate for **expansion of housing subsidies** to reduce and prevent homelessness (2017 recommendation: 100 currently housed and 100 currently homeless people).
3. Explore opportunities to **increase** the availability of **emergency shelters** for seniors and people with disabilities.
4. Protect and **expand funding** for access to housing for low-income seniors and people with disabilities at the **federal, state and local levels**.
5. Ensure that housing units have **basic accessible features**.
6. Ensure that seniors and people with disabilities live in **integrated community housing** when appropriate, rather than institutions.
7. To **prevent evictions and homelessness**: provide tenant outreach, education and legal services specifically for those who are aging with HIV, with cognitive impairments and other chronic conditions, particularly for those who will age out of their private disability policies at age 65.

Support increasing services and quality care for individuals aging with HIV.

1. Advocate for **additional funding** for the Ward 86 program, Golden Compass, to serve both the **medical and psychosocial needs** of people over 50 living with HIV.
 - Through focus groups, older adults living with HIV identified: the need for **social support and services** that facilitate a sense of community, management of other chronic conditions and **medications**, and support to **navigate** the healthcare system and other services.
2. Support **research** in older adults with HIV.
3. Ensure the **wellness** of the older adult population with HIV.
 - Increase availability and access to **legal, financial, and employment** services.
 - Increase **availability and access** to mental health and psychosocial services, including information and referral, emotional support, client advocacy, care navigation, **volunteer peer support** matches, and services for clients' emotional support animals.
4. Support transgender **inclusion**.
5. Support **training** for geriatricians for both medical and non-medical providers.

Support increasing access and capacity so all seniors and adults with disabilities can meet their basic needs with dignity.

1. Support local, state and federal budget requests to fund **Older Americans Act** Nutrition Programs at a level that meets the growing need, including Department of Aging and Adult Services' **congregate and home-delivered meal** programs.
2. Support Older Americans Act policies and programs that ensure the continuance of **social and preventative services** to isolated and vulnerable Americans.
3. Support access to affordable **healthcare**.

Support addressing the shortage of long term care work force.

1. IHSS (In-Home Supportive Services) to pilot a robust multi-tier, multi-track career lattice as a replacement for the existing single, minimum wage tier to **increase recruitment and retention**.
 - **Create a pilot** with Homebridge and Public Authority Registry Program workforces, and share as a **learning model** for other larger county and state IHSS programs.

Support for individuals with dementia living in the community.

1. Support the improvement of **transitional services** from a hospital or SNF (skilled nursing facility) to **home care services** for people with dementia.
 - Develop a pilot program that can address the issue of better management of difficult behaviors and care through a **mobile unit or team response**.
 - Address the lack of support options for people with cognitive impairment at hospital emergency rooms and short-term skilled SNF stays who may need a **place to recover** with a higher level of care, such as home or assisted living or residential care settings.
2. Support **effective responses** for people with dementia living alone and without support.
 - Develop a **policy and plan** for sustained funding for the Alzheimer's Association *Live Alone Project*.
 - **Support DAAS funded programs** that serve individuals, their partners and circle of friends to better meet the needs of those living with dementia.
3. Support the development of **transportation options**: maintain current programs for people living with dementia, such as the peer support programs and trainings for escorts and drivers, and explore **new alternatives** that may serve this population more effectively.