# SAN FRANCISCO LONG TERM CARE COORDINATING COUNCIL STRATEGIC PLANNING RETREAT SUMMARY 2018

**June 2018** 



PROMOTING AN INTEGRATED AND ACCESSIBLE LONG TERM CARE SYSTEM

# Long Term Care Coordinating Council of San Francisco Strategic Planning Retreat Summary

#### Introduction

Members of the Long Term Care Coordinating Council of San Francisco (LTCCC) met for a Strategic Planning Retreat on June 14, 2018. Following several months of preparatory work for the retreat by members of the LTCCC Steering and Finance Committees, four objectives were established to frame the retreat agenda: 1) review a draft of LTCCC strategic elements, 2) identify a framework for identifying LTCCC priorities, 3) select and identify the focus for LTCCC priorities, and 4) summarize next steps. This report presents a summary of the retreat process and details revisions to the LTCCC strategic framework (with membership feedback to guide additional modifications) and next steps for the LTCCC.

# **Draft LTCC Strategic Elements with LTCCC Member Feedback**

At the start of the retreat planning process, members of the LTCCC Steering and Finance Committee recommended revisiting the Council's purpose and work product. Examination of this issue, however, led the committee to agree to first review the LTCCC's core strategic elements, a decision consistent with the organizational practice of reevaluating an organization's mission, vision, values, and principles prior to changing an organization's strategic blueprint.

Substantive revisions to the LTCCC strategic elements (mission, vision, values, and principles) and core functions were drafted by the joint committee during the planning phase and presented to the full membership at the retreat for feedback and discussion—each is presented below with corresponding LTCCC membership feedback and discussion highlights.

## A. DRAFT Mission Statement

San Francisco's Long Term Care Coordinating Council (LTCCC) advises the Mayor and City on policy, planning, and service delivery issues for older adults and people with disabilities, to promote an integrated and accessible long-term care system\*

\*"Long-term care system" refers to the continuum of home, community-based, and institutional services and supports that help to address the medical and non-medical needs of people with limitations.

#### LTCCC MEMBERSHIP FEEDBACK

- The word "accessible" may need clarification.
- Does the LTCCC have the ability to meet the revised mission?
- Should the term "long-term care system" be replaced by "long-term services and supports?"
- The draft mission statement focuses predominantly on systems, and not on people.
- Consider including the words "dignity" and "autonomy" in the statement.

**DISCUSSION.** Feedback on the revised mission statement highlighted an important issue regarding the LTCCC's primary responsibility: Should the mission statement focus on system integration and accessibility or on older adults and adults with disabilities whose needs the Council is committed to address? Members agreed to keep the current mission statement as is, and to emphasize the

people whose needs the LTCCC addresses in the values. In response to the question about whether to replace the term *long-term care system* with *long-term services and supports*, several members recommended keeping *long-term care system* since it is used in the name of the LTCCC.

#### **B.** DRAFT Vision Statement

That San Francisco older adults and people with disabilities thrive in their homes and communities.

#### LTCCC MEMBERSHIP FEEDBACK

- Statement may alienate people who cannot achieve the "vision."
- Add the words "dignity" and/or "self-determination" to the statement.
- Remove "That," start with "Older adults," add "dignity," and move "San Francisco" from the beginning of the statement to the middle or end.

**DISCUSSION**. Several members acknowledged that achieving an organization's vision is challenging but noted that the intent of a vision statement is to be aspirational, e.g., vision statements describe what organizations would like to achieve or accomplish in the future. **In response to the above feedback, many members endorsed the following revised vision statement:** 

Older adults and people with disabilities in San Francisco thrive with dignity in their homes and communities.

#### C. DRAFT Values

- We believe in consumer choice and participation in a coordinated long-term care system.
- We believe all people should be treated fairly and with respect.
- We believe in high-quality, culturally and linguistically appropriate services.

#### LTCCC MEMBERSHIP FEEDBACK

- What does "choice" mean today? Replace "choice" with "self-determination."
- Address system inequalities related to ageism and ableism.

**DISCUSSION**. Several members confirmed that the word "choice" (in the first value) is increasingly used in some areas of the government to mean "less choice." In light of the multiple uses and interpretations for this word, several members suggested replacing it with "self-determination." A replacement for the first value might be:

 We believe in consumer self-determination and participation in a coordinated long-term care system.

It was also suggested that the values address system inequities for older adults (ageism) and for people with disabilities (ableism).

#### D. DRAFT Principles

- Promoting and protecting a consumer-directed long-term care system enables all San Francisco older adults and adults with disabilities to live in the least restrictive setting appropriate to their needs.
- Continuous quality improvement in the long-term care system enhances consumer quality of life and satisfaction.

 Ensuring the efficiency, cost-effectiveness, and growth of the long-term care system is imperative to meeting consumer needs.

#### LTCCC MEMBERSHIP FEEDBACK

- Missing the word "advocating."
- Cost-effectiveness included in the third principle is too loaded a term.
- Collectively, the principles sound too "business-y."
- What about ensuring the adequacy of the safety net in the principles?
- What about referencing the collection of interrelated services?

**DISCUSSION**. In response to the draft principles, an important debate emerged about whether or not to include the word "advocating" or "advocate" in the principles. Several members recommended adding either word because the LTCCC does advocate for older adults and adults with disabilities. Others noted that because the LTCCC is primarily a policy body, specifying an advocacy role could confuse consumers and other stakeholders.

Additional concerns about the revised principles centered on the following: the word "cost-effectiveness," the tone of the draft principles, and the removal of several previous principles. For some, the word "cost-effectiveness" elevates economy over need, i.e., an economical long-term care system over a responsive one designed to meet consumer needs. Regarding the tone of the draft principles, one member noted they sounded too business-like and were additionally missing the previous LTCCC principles that reference "an adequate **safety net** of home and community-based services and long-term services and supports (LTSS) as a collection of **interrelated** services."

Members of the LTCCC Steering and Finance Committee acknowledged the importance of all the feedback. Providing context for how the principles had been revised, they noted that while the LTCCC does provide aspects of advocacy (embedded in its policy-making role), because it is not a core function of the Council, and because other organizations and entities that focus exclusively on advocacy exist, including advocacy as a specific focus in the principles might be confusing. They did however, acknowledge that the tone and emphasis of the draft principles could be improved by placing the focus on consumers at the beginning of each principle. **The proposed revisions are:** 

- To enable all San Francisco older adults and adults with disabilities to live in the least restrictive setting appropriate to their needs, promote and protect a consumer-directed long-term care system.
- To enhance consumer quality of life and satisfaction, promote continuous quality improvement in the long-term care system.
- To meet consumer needs, ensure an efficient, cost-effective, and growing long-term care system.

#### **E. DRAFT LTCCC Core Functions**

The LTCCC is a policy body that advises the Mayor and the City on policy, planning, and service delivery issues for older adults and people with disabilities.

■ **Policy:** Make policy recommendations about how to improve coordination across the continuum of home, community-based, and institutional services and supports. (For a list of specific domain areas, see the Long-Term Care Integration Strategic Plan.)

- Planning: 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.
- **Service Delivery Issues**: Advise, implement and evaluate issues relating to long term care.

#### LTCCC MEMBERSHIP FEEDBACK

- How do we actively support our values and principles through these core functions?
- How do we implement a plan based on these core functions?

**DISCUSSION**. Members responded to the core functions with questions about how they support the revised LTCCC values and principles, and how they would lead to implementable policy or plans. These questions provided an opportunity for the Council to discuss and confirm its core responsibility as a policy making body with a planning, service delivery oversight, and advocacy role. With this clarification, LTCCC members agreed to begin developing priority areas—a preparatory step to developing specific policies and plans for each priority area.

# **LTCC Context Map**

To assist the LTCCC with developing its priority areas, members completed a context map detailing the current environment in which LTCCC functions: trends, technical factors, economic climate, consumer needs, and uncertainties. (Only one uncertainty was noted: San Francisco's new mayor.)

TRENDS	TECHNOLOGY FACTORS	ECONOMIC CLIMATE	CONSUMER NEEDS	POLITICAL FACTORS	TRENDS
<ul> <li>Expanding older adult/ adults with disabilities populations:         <ol> <li>workforce challenges;</li> <li>people need LTC can't afford it;</li> <li>more volunteers/ employees;</li> </ol> </li> <li>Service waitlist</li> </ul>	<ul> <li>Disparity in access:         wealthy/poor</li> <li>Lack of consideration by tech world for seniors and persons with disabilities in design</li> </ul>	<ul> <li>Low-employment</li> <li>Cost of housing/care</li> <li>Stagnant wages</li> <li>People need to work longer</li> <li>Lack of services and safety net for middle income older adults and persons with disabilities</li> </ul>	<ul> <li>Decline of RCFEs and SNFs*</li> <li>Lack of a system navigation map</li> <li>Importance of addressing needs upstream and realigning services to match these needs</li> </ul>	<ul> <li>Federal policy impacts</li> <li>Erosion of the Affordable Care Act and funding cuts (2019-2020)</li> <li>San Francisco Board of Supervisors shift</li> <li>Possibility of universal health care in California</li> </ul>	<ul> <li>Gentrification and displacement</li> <li>Increase in street homelessness</li> <li>Focus on aging in place</li> <li>HIV survivors aging, many with chronic health issues and disabilities</li> <li>Increase in dementia</li> </ul>

Legend: LTC: long-term care; RCFE: Residential Care Facilities for the Elderly; SNF: skilled nursing facility

# **LTCC Proposed Priority Areas**

Open to exploring a new approach to defining LTCCC's focus, LTCCC members formed three small groups to review the three proposed LTCCC principles as potential priorities for the Council. Each group was encouraged to review and edit, as needed, the wording of the priority before discussing and completing a worksheet addressing priority area gaps/barriers, what needs improvement/expansion, and opportunities through the lens of LTCCC's primary responsibility as a policy making body. Members were given an LTCCC hand-out guide, "What is a Policy Body?" They were also asked to prepare a statement summarizing the importance of the priority.

Highlights from each small group's priority worksheet are presented below.

# Priority #1: Promote and Protect a Consumer-Directed/Person-Centered LTC System

#### **Gaps/Barriers:**

Not a user-friendly LTC system; disparities in services, especially in certain communities; silos; lengthy waiting lists for services; lack of transitional care; challenges with LTC staff-recruitment, training, retention; and need for greater cultural competency and a navigation system.

#### What needs expansion?

Policy that addresses LTC rights for San Francisco residents; support at home; expanded services for middle income older adults; transition programs (supporting individuals as they move from one care setting to another); information about wait lists for different services; and free MUNI and expanded paratransit for older adults and adults with disabilities.

# What needs improvement?

Mental health services; accessible and affordable housing; personal assistance services; education about the LTC system for consumers and law makers; accessible and affordable transportation; more funding to raise LTC worker wages; and coordination of LTC system needs and an assessment with the Department of Homelessness and Supportive Housing.

# **Opportunities:**

Explore alternative living options (e.g., group, multigenerational, and community living); support consumers as agents of change.

#### **Summarizing Statement:**

To ensure a meaningful role for consumers in a consumer-directed long term care system, create an easily navigable system of coordinated care and supports that crosses all City and County departments and community agencies to enable consumers to make informed choices about services that will be guaranteed to be available.

This navigable and coordinated consumer-directed long term care system will include a necessary expansion of service providers in the community, covering home care, communal living options, transportation, training and habilitation, etc., plus education on what consumer-direction means to consumers and systems.

# Priority #2: Promote Continuous Quality Improvement in the LTC System

# **Gaps/Barriers:**

Limited money to fund quality improvement incentives; regulatory drivers across the LTC system are not the same; LTC workforce shortage results in a desperation of workers and reduced quality in services; limited/no feedback from consumers about the quality of LTC services, e.g., lack of a consumer voice; LTC regulations and measures have not changed or been adjusted to match the changing climate; lack of a common instrument to assess quality and a lack of data sharing across services; data needed for all populations (e.g., transgender data).

## What needs expansion?

Increase weekend and evening programs/services for older adults and adults with disabilities and mental health services; promote electronic health record sharing and access; address social determinants of health through data sharing and coordination; improve integration of services; promote integrated and shared care plans and person-centered care; reduce social isolation; focus on the human element and consumer voice.

# What needs improvement?

- Housing: There is a lack of housing and understanding of upstream causes of marginal housing and homelessness
- Consumer voice: LTC system lacks feedback from consumers
- Palliative care services: Increase understanding of and use of palliative care services to promote consumer choice and goals of care
- Quality: A lack of customer service and customer empathy
- Accessibility: Enhancing physical access to home; capital improvements to home; limited funding sources for rehab so consumers don't lose functionality
- Education: Educate clients about what insurance (Medicare and Medi-Cal) covers in LTC and how or where to access resources, health preventive measures, chronic disease management
- Staffing/Workforce (across LTC): Provide geriatrics training "101" to increase basic understanding of older adults and disabilities, educate providers about LTC system services
- What's Upstream: Collect information about multiple upstream issues (e.g., health, housing, service needs, etc.)
- Disease Specific Data: Collect information about the needs of patients with specific diseases, e.g., care coordination, transportation, appointment needs of end stage renal disease patients
- Care Coordination: Increase care coordination between providers and increase incentives to align care and outcomes.

#### **Opportunities:**

- Palliative Care and Chronic Conditions. Develop community provider network; encourage
  caregivers to speak with clients about chronic care management and palliative care; educate/train
  physicians in discussing advance care planning/advance directives with patients; develop citywide
  palliative care campaign; establish a right to palliative care policy statement.
- Partnership with Other Entities. Promote LTC system quality improvement by connecting with universities for research, and continuing care organizations for solutions to challenges.
- Improve Customer Surveys. Make personal contact with customers via phone, paper surveys, and other metrics and approaches to assess quality of LTC services and supports.
- Building Community. Promote social inclusion opportunities through community events, i.e., connect people to services.
- Dashboards. Track data on key performance indicators and metrics that measure success and quality outcomes in the LTC system.

## **Summarizing Statement:**

Promote continuous quality improvement in San Francisco's LTC system by:

- Including consumer feedback and voice in quality improvement efforts
- Educating clients, providers, and workforce about LTC
- Coordinating care services
- Mandating and ensuring LTC dashboards and data are available to track trends and outcomes
- Conducting continuous data evaluations to assess LTC service quality and efficiencies

# Priority #3: Ensure an Efficient, Cost-Effective, and Growing LTC System

# Gaps/Barriers:

- Workforce: Shortages limit LTC system growth and services
- Housing: Need to redirect focus back to affordable, accessible, and creative housing options within the long-term care system (e.g., accessible and affordable RCFE's) not the general housing shortages; waitlists and wait times are barriers to a system that should be responsive to growth, efficient, and cost-effective; wait times/lists need consistent definitions and communications; consumer confusion about what a LTC system is; lack of LTC system coordination.

# What needs expansion?

Data sharing and data evaluations. Data-driven decisions will ensure LTC system efficiency, responsiveness to growth, and cost-effectiveness.

# What needs improvement?

LTC services waitlist and wait times, coordination across the LTC system; data outreach (connecting to existing data sources) and data sharing (promote shared access to data to increase LTC system efficiency and cost-effectiveness).

# **Opportunities:**

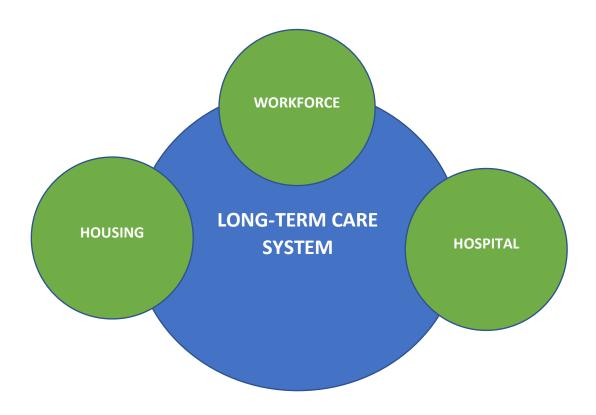
Utilize the LTCCC principle of "Growth, Efficiency, and Cost-Effectiveness in the Long Term Care System" to prioritize LTCCC activities and plans; study examples of integrated LTC systems that will work in San Francisco (e.g., San Mateo County's "no wrong door system" is a great system but may not be replicable to San Francisco because they are a County Organized Health System) and develop a coordinated LTC system policy for San Francisco; identify past or existing efforts and create a visual map of an integrated LTC system (see graphic example of the LTC system below- Figure 1); explore public-private partnerships that support a coordinated LTC system; promote improved coordination across San Francisco departments and services; build relationship with new Mayor.

#### **Summarizing Statement:**

To ensure an efficient, cost-effective, and growing LTC system:

- Map resources for consumers across San Francisco departments and community agencies
- Promote consumer coordination feedback and voice in quality improvement efforts
- Evaluate consumer experiences in the LTC system and other models of services
- Prioritize LTCCC activities based on target population needs
- Bring policy priorities and timeline to Mayor

FIGURE 1. LONG TERM CARE SYSTEM



# **LTCCC Next Steps**

Significant progress was made at the retreat developing the LTCCC's strategic framework (see Revised Strategic Framework). The following are next steps for the Council.

- 1. The LTCCC or LTCCC Steering and Finance Committee (open to LTCCC full membership) to:
  - Review feedback to the proposed LTCCC strategic framework (strategic elements, core functions) and the Revised Strategic Framework; finalize the framework (by August 31, 2018).
  - b. Review and finalize draft LTCCC priority statements (by August 31, 2018).
- 2. The LTCCC or LTCCC Steering and Finance Committee (open to LTCCC full membership) to:
  - a. Establish a standardized structure and process for LTCCC priority areas, e.g., how the priority areas will be addressed within the LTCCC structure, how policy activities will be developed, implemented, and concluded, etc. (by September 30, 2018).
  - b. Develop LTCCC policy-driven activities, implementation plan, and timeline for **each** priority area, adhering to the formalized priority structure and process (by October 31, 2018).
- 3. The LTCCC should ensure that the finalized strategic framework and all future activities of the Council are in alignment with the LTCCC mission and vision.

# **LTCCC Retreat Meeting Attendance**

Shireen McSpadden, Co-Chair Anne Quaintance- Co-Cha	Anne Quaintance- Co	. Co-Chair	en McSpadden.	Shireen
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Margot Antonetty	Ana Ayala	Margaret Baran	Michael Blecker
Mark Burns	Cassandra Chan	Valerie Coleman	Patty Clement-Cihak
Jacy Cohen	Vince Cristosomo	Ramona Davies	Cathy Davis
Joanna Fraguli	Jesus Guillen	Amie Haltman-Carson	Kelly Hiramoto
Mivic Hirose	Marie Jobling	Dan Kaplan	Cindy Kauffmann
Laura Liesem	Melissa McGee	Benson Nadell	Anne Romero
Cathy Spensley	Victoria Tedder	Valorie Villela	Jennifer Walsh
Annette Williams	Mike Wylie	Ruth Zaltsmann	

Retreat Ice Breaker: "What I appreciate about San Francisco."

LTCC Membership Word Cloud Response

