



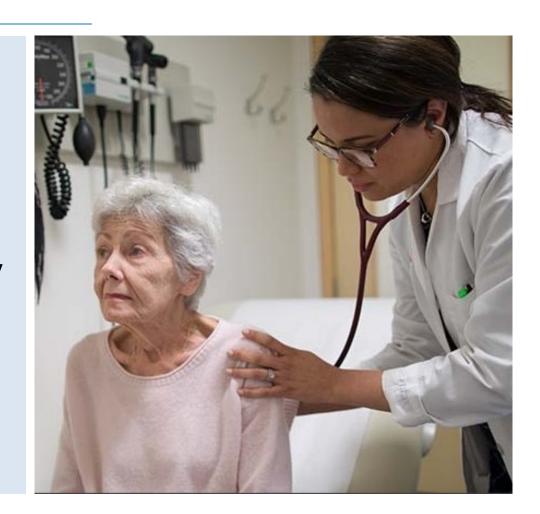


LifeLong Medical Care

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Who Are We?

- Federally Qualified Health Center
- Started by the Gray Panthers in 1976
- Now: 16 health centers and 45+ programs in three counties
- Over 28,000 patients in Alameda County 6,000 seniors (65+);
 4,000 aged 56-64
- Over 60 Health Center: 2,300 patients



Supporting Seniors with LTC Needs

Program Name	Program Description
Medical Social Work / Case Management	SW Case Managers @ 2 Clinics
Care at Home	Primary Care in the Home
Care Transitions	RN Care Coordination at Hospital D/C
Permanent Supportive Housing	On-Site Case Management
Care Neighborhood	Enhanced Care Management/ECM
Other: Food pantry & food deliveries, free supplies & DME, Zoom Tai Chi, walking groups, Lunch & Learn, etc.	

Roadblocks

Shared by Clinicians

- Long list of medical recommendations, so follow-through is difficult without support
- Translation challenges, especially if hearing impaired
- Lack of coverage for needed services (transportation, equipment, caregiving support, urgent SNF stays)
- Inadequate memory care options (lack of affordable day programs/housing)
- Services take too long or are hard get (IHSS, DME, home health, wound care support, etc.)

Shared by Case Managers

- Lack of coverage for transportation, adult day care, ADHC, some equipment, etc.
- Critical programs have wait lists: Meals on Wheels, Telecare
- Access challenges: transportation services are limited and flawed; online applications or setting up an account limits access; lack of specialized services for unhoused older adults; delays in approval for IHSS (and lack of IHSS providers)
- Housing!
 Lack of accessible, affordable housing with needed services

Successes

- Case Managers on the Care Team
- Care at Home (in-home primary care)
- Close Collaborations with Community Resources:
 - VitalLink
 - Midtown Pharmacy (med delivery)
 - Meals on Wheels
 - Legal Assistance for Seniors & HICAP
 - Bay Area Legal Aid
 - AC Care Alliance
 - DME providers
 - Some dialysis clinics



"What would make your job easier?"

Case manager for EVERY patient aged 65+

Better communication and resource sharing; uniform referral system

Quicker response times from health plans; verbal authorizations

Better collaboration with discharge planners

Adequate services: transportation, housing, IHSS, food, etc.

How can we do better, together?

More Case Managers

- Maximize the ECM benefit
- Make ECM feasible and sustainable for FQHCs and CBOs

Expand the Workforce

- CalGrows funding for direct care provider training
- More student programs/internships/PT jobs working with seniors
- More paid internships for MSW students & others at FQHCs, seniorserving non-profits, etc.

Streamline referrals and resource sharing

 Fully develop & maintain an up-to-date, easily accessible resource directory

How can we do better, together?

Continue to push the needle on our biggest challenges

- Housing
- Assisted Living
- Transportation
- Affordable supports outside of Medi-Cal
- Financial stability for service providers and staff
- Take care of ourselves and each other