



## ***THE GERIATRIC MENTAL HEALTH ALLIANCE OF NEW YORK***

### **2009 GMHA Annual Report**

This past year has been filled with much activity and a number of exciting accomplishments. Our membership continued to grow with now over 3,200 members. We formed a steering committee with leading experts in geriatric mental health to help us to determine future strategic directions for the GMHA. In this difficult fiscal climate, our advocacy contributed to continued funding of NYS's geriatric mental health demonstration programs, appropriate provisions for older adults in the new clinic reimbursement methodology, continued funding of the Geriatric Mental Health Initiative in New York City, attention to mental health needs in efforts to modernize the aging services system, and more. We were also awarded an important contract from the Office of Mental Health to provide technical assistance to help the 10 geriatric mental health demonstration programs to become financially self-sufficient within the next few years.

GMHA has also expanded its educational activities through our recently formed Training and Technical Assistance Center (TTAC). This included another highly successful annual conference; another lecture series on best practices; a recently formed Speaker's Bureau, which has already been called on to help organize and have speakers at a number of geriatric mental health training initiatives; a newly launched series of webinars; assistance with planning other conferences; a monthly e-newsletter; and the first steps towards exploring opportunities for supporting family caregivers.

### **ADVOCACY**

Advocacy for improvements in law, regulation, and funding for geriatric mental health services is one of two core functions of the Geriatric Mental Health Alliance. Most of our efforts focus on changes at the state level in New York, but we also work actively on the local level in New York City and to promote and support other local alliances and coalitions in New York State. We contribute as well to promoting advocacy in other states and to changes at the federal level.

#### **New York State**

GMHA advocacy at the state level included lobbying regarding the state budget, responses to state plans, advocacy for the Behavioral Health and Long-term Care Act, participation on the NYS Interagency Geriatric Mental Health Planning Council and the NYS DOH Long-term Care Advisory, and much more.

- NYS Budget for 2009-10: In anticipation of the Governor's Budget Request for 2009-10, we met during 2008 with the Governor's staff, the Office of Mental Health, the Office for the Aging, and others to press for additional gains in 2009-10. By the fall we realized that this budget year would be difficult and that our goals had to be modest. We focused, therefore, on preserving funding for the Geriatric Mental Health Demonstrations and on additional regulatory changes that will ultimately lead to more service.

When the budget was released, we opposed the cuts to aging services, cuts to home care, decreasing the state share of the Supplemental Security Payment, deferral of cost of living adjustments and cuts to base funding for mental health and aging services, inclusion of anti-depressants in the Medicaid preferred drug program, cuts to continuing day treatment programs, cuts that will limit the availability of clinical services for older adults and more. We are pleased to report that many, not all, of these proposed cuts were rejected.

- Behavioral Health and Long-term Care Act: In an effort to address the needs of older adults with mental health problems in long-term care and their families, we proposed the Behavioral Health and Long-term Care Act. The majority of individuals served by, or in need of, long-term care and their family caregivers have behavioral health needs, but rarely are these needs addressed. This legislation is designed to force NYS to pay greater attention to these issues. The Act was introduced in the Assembly and the Senate with support from the Chairs of Mental Health, Health and Aging Committees in both houses. Over 125 agencies signed on in support. However, given the mid-year upheaval in Albany, the Act did not pass. We think the legislation has great prospects for next year.
- Clinic Restructuring: OMH is restructuring the way that services will be delivered and reimbursed in clinics. With these changes, comprehensive outpatient services (COPS) will be eliminated and replaced with an indigent care pool, which many believe will be inadequate to cover the loss of COPS. As a result of the changes, many providers are concerned about the fiscal viability of their services. As part of our advocacy efforts on the issue, we have focused on the impact of serving older adults. For instance, we advocated on removing barriers to in-home clinical services and our suggestions have been incorporated. As this process continues to unfold, we will work with OMH to ensure that clinic restructuring will incorporate the unique service needs of older adults.
- Social Work Licensing: The new social work and mental health licensing law has created significant barriers to providing social work services in NYS. Under the law, the State O agencies (Office of Mental Health (OMH), Office of Alcoholism and Substance Abuse Services (OASAS), Office of Mental Retardation and Developmental Disabilities (OMRDD), Office of Children and Family Services (OCFS)) were exempt from meeting licensure requirements but only until January 1, 2010. The purpose of the exemption is to allow government funded agencies more time to move toward compliance. Since many of these programs rely on social workers who do not yet have an LCSW as well as social work students to perform services, extension of the exemption is critical to preserving the capacity to provide mental health services in NYS. In the 2009-10 budget, the state continued the exemption for social workers and other mental health practitioners who are not LCSWs until June 1, 2010. However, we and other advocacy organizations supported an exemption until 2013 as was proposed in the 2009-10 Executive Budget Request. We

also believe that an extension may be necessary for organizations licensed by the Department of Health or that provide aging services.

- Lobby Days: In addition to its own lobbying activities, GMHA participated in the lobby days organized by the Mental Health Association in NYS, the NY Association for Psychiatric Rehabilitation Services and the joint lobby day of the NYS Coalition for the Aging and the Council of Senior Centers and Services of New York.
- NYS Interagency Geriatric Mental Health and Chemical Dependency Planning Council: GMHA members continued to play very active roles on the Interagency Geriatric Mental Health Planning Council. (Four of the six political appointments to the Council are GMHA members). This year there was much attention on the work of the demonstration grants programs, which are each operating unique and exciting models. More info about the projects can be found in the 2008 Planning Council's annual report on OMH's website: [www.omh.state.ny.us](http://www.omh.state.ny.us). There was also major focus on a project, for which the GMHA was funded, to help the demonstration programs become financially self-sustaining beyond the five year grant period. More info about the project is under 'Medicare Optimization'.
- Geriatric Mental Health Demonstration Programs: The 10 geriatric mental health demonstration programs (three community gatekeeper and seven integration of mental health and primary care programs) are in their second and a half year of operation and continue to produce important work. As part of the OMH learning collaborative, which was developed as a mechanism to enhance the quality of the demos, the programs have been receiving expert technical assistance. This year they received expert consultation from Stephen Bartels, M.D., of Dartmouth Medical School and a six month training and follow-up supervision program in Problem Solving Therapy with Zvi Gellis, PhD. GMHA, who has been an active participant in the Collaborative, has emphasized the importance of sustaining these programs. As a result, GMHA has received funding from OMH to provide expert technical assistance to the programs on optimizing revenue so that the programs may continue once the grant funding has ended. At the end of this process, we anticipate that there will be 10 different programmatic and funding models that can then be disseminated around the state and perhaps nation.
- OMH Geriatric Mental Health Planning Day: In May 2009, OMH hosted a geriatric mental health planning day at the New York State Psychiatric Institute with national experts in geriatric mental health and substance abuse and representatives from the demonstration programs. The meeting was facilitated by Susan Essock, Ph.D., Director of the Division of Mental Health Services and Policy Research at OMH, and included experts Stephen Bartels, M.D., Dartmouth Medical School; Fred Blow, Ph.D., University of Michigan; Martha Bruce, Ph.D., M.P.H., Weill-Cornell Medical College; Yeates Conwell, M.D., University of Rochester; Davangere Devanand, M.D., Columbia University; and Barnett Meyers, M.D., Weill-Cornell Medical College. Michael Friedman, GMHA Chair, was one of the invited experts and gave an overview of the mental health needs of older adults to help kick-off the event. Several OMH staff members participated in the day including Robert Myers, Ph.D., Senior Deputy Commissioner for Division of Adult Services at OMH.

- Response to OMH 5.07 Plan: The *2009-2013 NYSOMH Statewide Comprehensive Plan for Mental Health Services* was a dramatic shift from previous OMH plans with its focus on recovery, resilience, and transformation. Included in the plan was a revised mission statement that now includes older adults, however it only refers to older adults with serious mental illnesses, which we do not believe was OMH's intent. We included this in our response to the plan as well as suggestions for modifying the concept of recovery for older adults, the importance of recovery in other systems that serve people with mental illness, e.g. long-term health care, and more.
- OMH Personalized Recovery Oriented Services (PROS): The NYS Office of Mental Health is strongly encouraging CDTs, IPRTs, and vocational programs including clubhouses, to convert to PROS, a new category of programming certified by the Office of Mental Health that has a strong rehabilitation focus and is funded by Medicaid. Under the new model, clients will need to develop very concrete goals, which will be carefully monitored. With the strong emphasis on recovery, particularly work, GMHA members have expressed concern that the PROS model will not work for older adults who do not want employment as a goal. We have had follow-up conversations with OMH, and it is their intention that the PROS model work for older adults. GMHA will collaborate with OMH to develop guidance on how a PROS program can best serve elders with psychiatric disabilities.
- NY Connects Advisory: The GMHA Chair is on the Downstate NY Connects Advisory where for the past couple of years he has stressed the importance of the local information centers' ability to deal with the mental health needs of elders receiving long-term care services. Many local call centers now provide some information about mental health services but much more is needed. He was also active on a subcommittee of the Advisory that was established to discuss components of the Nursing Home Diversion Modernization Grant, where he discussed the importance of older adults being able to get access to mental health services.
- NYS Department of Health Office of Long-term Care MISCC Stakeholder Committee: For some time GMHA has recommended to NYS DOH that representatives from the behavioral health community be included on the NYS Department of Health's Long-term Care Planning and Advisory Committees. This year DOH has begun to make such appointments. Risa Breckman, Director of Social Work Programs and Education at Weill Medical College of Cornell University; Linda Holahan, Associate Director, Isabella Home Care; Glenn Liebman, Executive Director, the Mental Health Association in NYS (MHANYS); and Kim Williams, GMHA's Director were all appointed to DOH's LTC Advisory /MISCC Stakeholder Committee. The committee is charged with identifying ways that the Department can continue to help people in the long-term care system to live in the most integrated settings. Obviously, addressing the behavioral health needs of such individuals is a vital component to successful community integration.

### New York City

In addition to being the geriatric mental health advocacy group for New York State, the GMHA—through a sub-committee—serves as the primary geriatric mental health advocacy group for New York City. Our activities in NYC include:

- Geriatric Mental Health Initiative: GMHA has joined with other advocacy organizations including The Coalition of Behavioral Health Agencies, United Neighborhood Houses (UNH), and UJA-Federation to successfully advocate for the NYC Council Geriatric Mental Health Initiative, which has provided \$10 million for geriatric mental health services over the past five years. Advocacy includes hearing testimony, meetings with key public officials, and letter writing/phone call campaigns. Given the current economic crisis, we anticipate that very active advocacy will be essential to repeat funding in the coming year.
- NYC Budget 2009-10: Given the current economic crisis facing NYC, there have been serious threats to the aging service infrastructure. The Mayor’s Executive Budget included major proposed cuts to aging service programs, which we strongly opposed. In addition, we supported restoration of cuts to, and elimination of, programs for older adults in the previous November 2008 funding reductions including social adult day care, intergenerational programs, caregiver support, and non-core services. GMHA also joined with other NYC umbrella organizations supporting aging services - Council of Senior Centers and Services, Federation of Protestant Welfare Agencies, Human Services Council, UJA-Federation of NY, and United Neighborhood Houses - to support their NYC FY2010 Budget Priorities for Aging. We were pleased that much of the funding was restored.
- DOHMH’s Geriatric Committee: The Geriatric Committee, which was formed a couple of years ago with our help, has been focusing on successful implementation of the Geriatric Mental Health Initiative and the impact of the state’s ambulatory care restructuring on older adults. The Director of GMHA and other GMHA members are active participants. At our urging, DOHMH has begun to convene the agencies funded through the Geriatric Mental Health Initiative to provide education and address their concerns.
- Modernization of Aging Services: In anticipation of the elder boom, NYC has organized two major efforts to modernize the aging services system.
  - Senior Center Restructuring: This effort, which has been led by the NYC Department for the Aging and more recently with the help of the New York Academy of Medicine (NYAM), has focused on re-inventing senior centers to make them more relevant to the new elder generation. The core concept is to incorporate evidence-based practices to promote healthy aging. We have worked with DFTA to understand the importance of promoting mental health and of using senior centers to identify and provide screening, assessment, and treatment for mental, as well as physical, disorders.
  - Age-Friendly City: Another planning initiative in NYC is known as the “Age-Friendly City”, following terminology and a line of thought developed by the World Health Organization. NYAM is the lead on this project, which is being conducted in collaboration with the NYC Council and the Mayor’s Office. Its goal is to make NYC more responsive, engaging, and accessible to older adults. The GMHA was invited to join the committee on health and human services, which—at our urging—was re-named the committee on health, *mental health*, and human services. This year NYAM

released a report on the next stage of the initiative outlining a series of recommendations none of which included, or directly recognized, the current and growing mental health issues of elders. Unfortunately, the re-organized project does not appear to be paying appropriate attention to the mental health needs of older adults. The GMHA will continue to strongly advocate with NYAM, DFTA, the NYC Council, and the Mayor's Office that the mental health needs of older adults be adequately incorporated into this most important initiative.

- Adult Protective Services Advisory Council: The GMHA Director and other GMHA members continue to actively participate on the NYC Adult Protective Services Advisory Council. At our urging, APS has begun to improve mental health training for adult protective services workers who are generally poorly prepared to help older adults with serious mental health and behavioral problems.

### **Other Localities**

Local geriatric mental health alliances, coalitions, or planning groups now exist in Suffolk, Nassau, Westchester, Rockland, Orange, Ulster, Broome, Monroe (Rochester), and Warren-Washington Counties. In addition to helping these groups get started, the GMHA convenes them to share information and to press for joint advocacy. (See section on Constituency Building for more detail.)

### **Advocacy Workgroups**

Much of the policy development work of the GMHA takes place in workgroups. Active workgroups in 2009 included:

- Policy and Advocacy Workgroup: The workgroup made up of over 25 statewide advocacy groups representing the mental health, health, and aging sectors as well as other key stakeholders meets three times a year to develop the GMHA's advocacy agenda and strategic direction.
- Geriatric Substance Abuse Workgroup: In 2009, GMHA formed a geriatric substance abuse workgroup to identify the major issues facing older adults with substance abuse problems, barriers to accessing care, and policy recommendations for overcoming barriers. With feedback from the workgroup, GMHA has drafted a geriatric substance abuse briefing book and position paper, which will be finalized early in 2010.
- Mental Health and Long-Term Care: Over the past year the workgroup has been pressing for the passage of the "The Behavioral Health and Long-term Care Act of NYS." The workgroup has also been working with the Department of Health to get members of the behavioral health community appointed to various long-term care councils and to press for the review of training requirements of community based long-term care providers to ensure there are appropriate provisions regarding behavioral health. A subcommittee of our workgroup has also been formed to begin to review the training requirements.
- People with Long-Term Psychiatric Disabilities Who Are Aging: In the fall, we reconvened this workgroup to set an agenda for addressing the housing needs of older

adults with co-occurring, serious mental and physical illnesses with long-term psychiatric disabilities who are aging. We are currently reviewing the literature, interviewing providers, and visiting some housing programs in order to identify best practices which will help to inform the next steps for our advocacy on this issue.

## **Federal**

The Geriatric Mental Health Alliance of New York is an active member of the National Coalition on Mental Health and Aging and of the mental health division of the American Society for the Aging. Major developments in 2009 included:

- **Mental Health and Aging in Health Reform:** We have been monitoring, and advocating for, the inclusion of mental health and aging in health care reform over the past several months. While the details have changed much over the past few months, the fundamental goals of (1) improving access, (2) increasing quality, and (3) decreasing cost have remained the same. While the impact of reform will not be clear until a bill is finalized, there are a number of provisions, which if adopted in conference, will have a positive impact on the lives of older adults with psychiatric needs.
- **Geriatric Mental Health Foundation:** The Chair of the GMHA is on the Board of this public education organization, which is a subsidiary of the American Association of Geriatric Psychiatry. The Foundation continues to focus on educating the American public about the importance of mental health to older adults, about the various forms of mental illness, and about access to resources.
- **National Organizing:** In March, the GMHA Director presented at the 2009 Conference of the National Council on Aging and the American Society on Aging at a workshop entitled *A Mental Health National and State Policy Update*. The presentation was on the successes and current activities of the Geriatric Mental Health Alliance of New York.
- **Positive Aging Act of 2009:** GMHA signed-on in support of the Positive Aging Act of 2009 introduced by Senator Collins (R-ME). This legislation is designed to make mental health services for older adults an integral part of primary care and to extend them to other community settings where older adults reside and receive services. Components of this legislation were incorporated into the reauthorization of the Older Americans Act of 2006 but the funding was not allocated.

## **Advocacy Capability**

During 2009, the GMHA enhanced its capacity to issue advocacy alerts and to generate letters to public officials via the Internet. We have also refined our e-newsletter to help our members keep well-informed about critical geriatric mental health policy issues and developments.

## EDUCATION, TRAINING, AND TECHNICAL ASSISTANCE

### **GMHA TRAINING AND TECHNICAL ASSISTANCE CENTER (TTAC)**

With funding from the Altman Foundation, GMHA launched a Geriatric Mental Health Training and Technical Assistance Center without Walls in order to enhance the ability of mental health, health, and aging services providers and of caregivers to address the behavioral health needs of older adults. The first year, beginning in July 2008, was largely devoted to infrastructure development and to enhancing current education and training activities including:

- Enhancing the GMHA conference,
- Co-sponsoring, planning, and embedding geriatric mental health content in other conferences,
- Offering continuing education credits for the annual best practices lecture series,
- Developing a speakers' bureau,
- Enhancing our website
- And more.

In our second year, we are exploring the use of technology to provide education to formal and informal caregivers beginning with hosting a series of webinars and also exploring opportunities to assist family caregivers of older adults with psychiatric needs.

### **Annual GMHA Conference**

On May 15, 2009 GMHA's hosted its third annual conference, *Treatment and Beyond: Meeting the Behavioral Health Challenges of the Elder Boom* which drew over 300 participants. Dr. Cameron Camp of Hearthstone Alzheimer Care delivered an uplifting keynote address describing innovative techniques for working with older adults with dementia. GMHA honored Assemblyman Peter Rivera with the Geriatric Mental Health Leadership Award for his dedication in promoting geriatric mental health in New York State. Dr. Adam Karpati, Executive Deputy Commissioner for Mental Hygiene at the New York City Department of Health and Mental Hygiene and Dr. Lilliam Barrios-Paoli, Commissioner of the New York City Department for the Aging made brief welcoming remarks. Twenty-four workshops were offered throughout the day focusing on current best practices, research, and policy in geriatric mental health.

Save the Date!  
4<sup>th</sup> Annual GMHA Conference  
*Caregiving in the 21<sup>st</sup> Century: Complex Roles, Innovative Practices*  
Friday, May 7, 2010  
Brooklyn Marriot, NY

Keynote: Carol Levine, MA, Director,  
Families and Healthcare Project, United Hospital Fund

## **Conference Sponsorship and Planning**

The GMHA continues to co-sponsor or help in the planning of other conferences to ensure the inclusion of relevant geriatric mental health material into venues which ordinarily do not include the mental health needs of older adults.

This year, the GMHA co-sponsored and/or helped to plan the following conferences:

- *The 12th Annual Comprehensive Approach to Dementia Conference*, co-sponsored with Montefiore Medical Center. – This conference provided content on mental disorders that are commonly co-morbid with dementia, which otherwise might be overlooked during clinical assessment and treatment of older adults with cognitive loss.
- *Aging Concerns Unite Us (ACUU)* – This is the annual conference of New York State’s area agencies on aging. It draws hundreds of people from aging services from around the state. The Director of the TTAC participated on the planning committee and the GMHA Chairman gave a presentation entitled “Addressing the Unmet Mental Health Needs of Elders in Planning Livable Communities.”
- *The 14<sup>th</sup> Annual Jarvie Colloquium* – The Director of the TTAC participated on the planning committee of this event to ensure adequate representation of geriatric mental health content. This year’s Colloquium offerings included working with older adults struggling with anxiety as well as helping older adults manage stress as a result of economic uncertainty or loss.

## **Best Practices Lecture Series**

GMHA continues to organize and sponsor an annual series of presentations on best practices in geriatric mental health. The presentations are co-sponsored by the Brookdale Center on Healthy Aging and Longevity and take place at the Hunter College School of Social Work. The presentations in 2009 were:

- Models of Substance Abuse Treatment for Older Adults moderated by Robert Higgins, MPP, New York State Office of Alcohol and Substance Abuse Services with presentations from Jeffrey Borenstein, MD, The Holliswood Hospital; Laura Osinoff, LCSW, Service Program for Older People; and Brett Saarela, LMSW, Service Program for Older People
- Symptoms of Paranoia Among Older Adults presented by Robert C. Abrams, MD, Professor of Clinical Psychiatry, Weill Cornell Medical Center
- Creativity in Late Life presented by Susan Perlstein, Director of Education and Training, National Center for Creative Aging
- Understanding the Depression-Pain Dyad in Later Life presented by Cary Reid, MD, Ph.D., Weill Cornell Medical College/Irving Sherwood Wright Center on Aging
- Identifying Elder Mistreatment presented by Debra Greenberg, MSW, Ph.D, Montefiore Medical Center, Geriatrics Division

- Holocaust Survivors: Stories of Resilience presented by Carmen Morano, Ph.D. Brookdale Center for Health Aging and Longevity; Roberta Greene, Ph.D., University of Texas School of Social Work; Liz Klapman, Jewish Family Services of Metrowest; Susan Schecter, Jewish Family Services of Metrowest; Marina Layantes; Risa Liskov, Selfhelp Community Services; Adeena Horowitz, Selfhelp Community Services; Naomi Singer, DOROT; Alicia Rehl (survivor) and Gina Lanceter (survivor)

We offer continuing education units for the lecture series for long-term care administrators and social workers. We also continue to record the presentations. Please email [center@mhaofnyc.org](mailto:center@mhaofnyc.org) if you would like more information about the DVDs we have available.

We will be hosting additional lectures in the spring. The topics include *Practical Strategies for Addressing Medical Safety Issues among Older Adults*, *Meeting the Mental Health Needs of Older Veterans*, and *Best Practices for Working with Black Elders*. We will announce the dates shortly.

### **Webinars**

In the fall of 2009, GMHA began to explore the use of distance learning by kicking off a series of webinars on mental health and aging. We hope the webinars will enable us to reach a broader audience of GMHA members from around the state and the nation. The webinars we have hosted thus far are:

- Geriatric Mental Health 101 presented by Michael Friedman, GMHA Chair
- The Challenges and Opportunities of Working with LGBT Elders presented by Bobbi Williams, Ph.D., Rainbow Access Initiative
- Substance Abuse Among Older Adults presented by Frederic C. Blow Ph.D., Director, Department of Veteran Affairs, National Serious Mental Illness Treatment Research and Evaluation Center in Ann Arbor, Michigan

We will be hosting additional webinars in the spring. The topics include *Hoarding among Older Adults*, *Suicide and Suicide Prevention among Older Adults*, and *Anxiety among Older Adults*. We will announce the dates soon.

### **Speakers' Bureau**

In 2008-9, the GMHA established its Geriatric Mental Health Speakers Bureau, comprised of a diverse group of professionals with expertise in a range of geriatric mental health topics. Since its establishment, the Speakers Bureau has fulfilled requests to present on a variety of topics related to mental health and aging.

In addition to arranging for speakers on particular topics, The Speakers' Bureau can design, organize, and implement overall geriatric mental health training programs. Currently, it has contracts to provide multi-session programs in Orange and Delaware Counties in NYS.

If your program/organization is interested in having a speaker present on a geriatric mental health topic, contact Lisa Furst at [furstl@mhaofnyc.org](mailto:furstl@mhaofnyc.org).

### **Training and Technical Assistance**

- **Medicare Optimization** – In 2009, GMHA was awarded a one year contract from the NYS Office of Mental Health to provide technical assistance to the state’s geriatric mental health demonstration programs to help them optimize Medicare and other revenue so the programs may become self-sustaining beyond the grant period. We anticipate that this work will result in the development of as many as 10 models for generating revenue to support integrated geriatric health and mental health services and community gatekeeper programs. During 2010-11, the GMHA plans to disseminate these models and offer consultation services to help organizations to implement them.
- **NYC Elder Abuse Center**: In the fall of 2009, The NYC Elder Abuse Center, which is being piloted in Brooklyn, was officially launched. The Director of GMHA is on the Executive Council and will be working with the Center to identify medical and mental health providers in Brooklyn who want to work with the Center to provide assessment and intervention on elder abuse cases.
- **Orange County**: The Chairperson of the GMHA has been providing technical assistance services to Orange County’s local geriatric mental health coalition to assist with the development of mental health programming specifically addressing the mental health needs of older adults. GMHA’s Speakers’ Bureau was also called on by Orange County to organize a series of trainings regarding geriatric mental health.
- **SOFA Prevention Institute**: In May 2009, the State Office for the Aging hosted an institute on interventions to prevent chronic illnesses among older adults. The Director of GMHA, who was the only representative from the mental health community invited to the event, spoke about monitoring the lessons learned from the state’s geriatric mental health demo programs.
- **Other Advisory Roles**: The GMHA is a member of a few coalitions where our role is to provide guidance and/or technical assistance regarding geriatric mental health. Coalitions where we are active members include:
  - Statewide Caregiving & Respite Coalition of NY Advisory Committee
  - Village Care of NY’s Downtown Seniors Prevention Planning Project

### **Presentations**

The GMHA staff has provided numerous presentations throughout the year, including those delivered to the following organizations or events:

- **Ageing Concerns Unit Us (ACUU) Annual Conference**: “Addressing the Unmet Mental Health Needs of Elders in Planning Livable Communities”

- American Psychiatric Association's Annual Meeting of the Institute of Psychiatric Services: Instructor during session entitled "Essentials of Geriatric Psychiatry" where the presentation was on "Meeting the Mental Health Challenges of the Elder Boom"
- American Society for the Aging/National Coalition on Aging Conference: "The Geriatric Mental Health Alliance of New York: Successes and Current Activities"
- Bronx GRECC: "Geriatric Mental Health 101"
- Council of Senior Centers and Services Annual Conference: "Geriatric Mental Health 101"
- Downstate NY Connects Advisory: "Behavioral Health and Long-term Care"
- East Side Council on the Aging (ESCOTA): "Meeting the Mental Health Challenges of the Elder Boom"
- GMHA 2009-10 Webinar Series: "Geriatric Mental Health 101"
- JASA Elder Abuse Conference: Panel Presenter: "The Interfacing of Elder Abuse and Adult Protective Services (APS): Working with the Mentally Ill Elder Abuse Offender"
- Joint Public Affairs Committee for Older Adults: "Geriatric Mental Health and Health Reform: A Time For Action"
- Mental Health Association in New York State Annual Conference: "Reflections on Geriatric Mental Health since New Freedom Commission"
- Mental Health Disparities in Rural New York Conference: "Geriatric Mental Health Disparities"
- New York Association for Psychiatric Rehabilitation Services Annual Conference: "Recovery in Long-term Care"
- New York City Long-term Care Ombudsman's Office: "Geriatric Mental Health 101"
- New York Public Welfare Association Annual Conference: Panel Presenter on "Engaging the Mentally Ill PSA Population"
- New York State Rehabilitation Association Conference: "Increasing Access to Behavioral Health Services for Older Adults"
- NORC Director's Meeting: "Geriatric Mental Health in Aging Service Programs: Opportunities for Sustainability"
- NYIT Center for Gerontology & Geriatrics Annual Conference on Aging and Society: "The Long Term Care Puzzle and Mental Health"

- NYS Assembly Legislative Staff: “Meeting the Mental Health Challenges of the Elder Boom”
- NYS Assembly’s Annual Legislative Disabilities Awareness Day (LDAD): “Geriatric Behavioral Health for the 21<sup>st</sup> Century: Challenges, Agenda, and Action”
- State Society on Aging Student Event: “Working with Older Adult Caregivers of Mentally Ill Adults”
- United Hospital Fund Annual Medicaid Conference: “Behavioral Health Is Key to Long-Term Care Reform”
- United Neighborhood Houses Presentation: “Geriatric Mental Health in Aging Service Programs: Opportunities for Sustainability”
- Westchester Department of Senior Programs and Services Conference on Livable Communities: A Vision for all Ages Connecting People and Places: Presenter as part of a panel on Mental Health and Health Care Reform

## **Publications**

Printed Reports: The GMHA designed and printed four reports that we have written over the past few years:

- “Housing in the Mental Health System for Aging People with Serious Psychiatric Disabilities”
- “Mental Health is Key to Long-Term Care”
- “Meeting the Challenges of Aging People with Serious, Long-Term Psychiatric Disabilities”
- “Geriatric Mental Health: The Need for Change—Focus Group Findings”

If you would like a copy of any of the reports mailed to you, please email [center@mhaofnyc.org](mailto:center@mhaofnyc.org).

Over the past year, staff of the GMHA have authored the following publications:

- *Addressing the Mental Health Needs of Older Adults in “Age Friendly Communities”*: A Guide for Planners
- “Cognitive Camouflage – How Alzheimer’s Can Mask Mental Illness” with Gary Kennedy, Director of Geriatric Psychiatry at Montefiore Medical Center in the January/February 2009 edition of *Aging Well Magazine*
- “Case Management for Older Adults in Disasters” in *Geriatric Mental Health Disaster and Emergency Preparedness: Evidence-Based Care Practices*, John A. Toner, EdD, PhD, Editor. Forthcoming

- “How about Recovery for People with Psychiatric Disabilities in Long-term Care?” published in the Summer 2009 edition of *Mental Health News*

## CONSTITUENCY BUILDING

The GMHA membership has grown substantially since we formed in January 2004. We now have over 3,200 members. The diverse membership includes professional and paraprofessional providers, academics, researchers, advocates, public officials, consumers, older adults, and family members.

Most of our members continue to be from New York State, but we have members from nearly 40 additional states.

In 2009, The GMHA formed a steering committee to provide leadership continuity and strategic direction for the GMHA, and to assist with the development of a business and marketing plan for the TTAC. The membership consists of some of the leading experts in geriatric mental health as well as members of MHA of NYC’s board.

### **Local Geriatric Mental Health Coalitions**

The GMHA has helped to stimulate the development of local geriatric mental health coalitions/alliances around the state. Currently local alliances exist in 10 counties. The coalitions operate independently of the GMHA, but we have provided technical assistance to many regarding coalition development and the selection of goals and plans. The leadership and membership of the coalitions varies by County, but many are a partnership between local not-for profit and government agencies.

Here are brief updates on their activities:

- Broome: The Taskforce has been meeting for over a year. Last fall, they hosted a kick-off conference keynoted by Michael Friedman. Recently, United Way awarded them a grant for a community gatekeeper program. In addition, they have submitted a PAR application to OMH to develop a specialty clinic for older adults where they hope to expand their capacity to provide in-home services.
- Nassau: In the summer of 2009, The Geriatric Mental Health Alliance of Nassau Co consulted with GMHA on future directions for the alliance. They have since developed an education, awareness, and training workgroup to foster the development of effective educational activities including a special mental health resource guide and campaign.
- New York City: For the past five years, GMHA and other umbrella organizations have advocated for the New York City Council to fund geriatric mental health services (totaling \$10 million). The NYC Department of Health and Mental Hygiene has formed a geriatric committee, of which the GMHA Director and other GMHA members are participants, in order to better understand the needs of elders with mental disorders and to address current issues. The GMHA is also a participant in an effort to develop an Age Friendly NYC, which continues to not adequately address mental health issues.

- Orange: The Geriatric Wellness Coalition, which has been meeting for about a year, is organized by the County Department of Mental Health and Local Office for the Aging with membership from various mental health, substance abuse, health, and aging organizations. They have consulted with GMHA's Training and Technical Assistance Center to organize a series of lectures on geriatric mental health. They are also conducting local planning; to which Michael is serving as a consultant.
- Monroe County: The Greater Rochester Regional Geriatric Mental Health Alliance has begun working on a project to prevent and better manage emergency room admissions and involvement of law enforcement for older adults with complex behaviors. The Coalition has begun monitoring the frequency of admissions to area emergency departments and has started discussing possible options to more adequately address the issue. The Coalition plans to work with community based residential settings including assisted and independent living facilities as well as emergency services personnel to provide education and consultation around managing challenging behavioral issues.
- Rockland: Rockland County has two groups—a planning workgroup organized by the County Department of Mental Health and its Office for the Aging and an advocacy group called The Rockland County Geriatric Mental Health Alliance, chaired by The MHA of Rockland. MHA of Rockland was recently awarded a community empowerment grant from NYSOFA to promote lifelong mental wellness and cognitive engagement. The project, entitled Strong Brain, Smart Brain, Fit Brain: A Mental Wellness Awareness, Education, and Brain Strengthening Initiative, will provide funds to install brain strength and cognition software in libraries, senior centers, and other public venues for use by older adults.
- Suffolk: The Coalition, which has representation from a few government and not-for-profit agencies, hosted its third annual conference in November. South Oaks Hospital, a leader of the Coalition, has one of the geriatric mental health demonstration programs to integrate physical health and mental health, where they are collaborating with private health and mental health practitioners in the community.
- Ulster: The coalition began meeting last November as an ad-hoc group with representation from the mental health, health, and aging sectors. They are very interested in training and hosted a series of workshops last year. On November 5<sup>th</sup>, they hosted an event to share information about available services and resources for older adults with mental disorders. They are also partnering with a local primary care practice on mental health screening.
- Warren/Washington: The Wisdom Coalition, led by the Office of Community Services for Warren and Washington Counties, oversees the multi-site implementation of one of the geriatric mental health demonstration grants on integrating health and mental health services. Services provided under the grant include depression and anxiety screening for adults 65 years old and older, mental health assessment and treatment when indicated, care coordination services, and educational services for professionals as well as community members.

- Westchester: The Coalition, which meets monthly, has recently developed two subgroups on caregivers and education. The education group is planning to develop curriculum for providers. In the fall, the Coalition hosted a workshop on documenting elder abuse with presenters Mark Lachs and Jackie Berman. Family Services of Westchester, a member of the Coalition operates one of the geriatric mental health demo programs. The Coalition is working collaboratively with the Westchester Livable Community model, which hosted a conference on October 2<sup>nd</sup>, where GMHA Chair Michael Friedman presented.

## FUNDING FOR THE GMHA

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- Year 2 of a 3-year grant from the Altman Foundation to support the development of the Training and Technical Assistance Center.
- A 1-year grant from FJC: A Foundation of Philanthropic Funds to support advocacy for geriatric mental health.
- A 1-year grant from The Jarvie Commonweal Service to support the GMHA's advocacy efforts in Albany.
- A 1-year grant from the Office of Mental Health for a project on Medicare Optimization.
- Year 3 of a 3-year grant from the van Ameringen Foundation for general support.

The Mental Health Association of New York City continued to provide financial support for The GMHA's advocacy activities in 2009.

We are also grateful to organizations and individuals who have provided financial support for the annual conference and/or who have made contributions to our annual fundraising campaign.