Introduction to GRAT

Geriatric Regional Assessment Team
Brief History

• Previously operated out of Evergreen Health until it was discontinued in 2017

• Its absence was felt by the community and providers suddenly had no one to refer clients to who weren’t necessarily appropriate for 911/Emergency Room/DCR/APS and whose cases were too severe for light case management

• King County brought the program back with the Veterans, Seniors, and Human Services Levy (VSHSL) funding and Sound Generations was awarded the contract

*GRAT receives funding from the King County Veterans, Seniors & Human Services Levy and the MIDD Behavioral Health Sales Tax
GRAT Comes to Sound Generations!

• Team provides **in-home biopsychosocial assessments** of people aged 55 and older who meet criteria for eligibility, as well as **assistance with referrals** to service providers and resources when consent is given

• **Early intervention** can effectively stem crises, and divert from costlier services, such as inpatient psychiatric hospitalization, emergency rooms, and skilled nursing facilities

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Who to Refer

Adults who are 55+ and:

• Live in **King County**

• Experiencing an **acute non-crisis event in which mental health, substance use, and/or cognitive issues** may be a contributing factor and/or exacerbating the situation

• **Isolated from services** and/or facing barriers to engagement due to above behavioral issues

• **Priority given** to older adults from communities underserved due to historic and ongoing systems of oppression

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Example of Acute Non-Crisis

67- yo single, housed, retired woman with history of alcohol abuse, substance use, and bipolar disorder, who lives alone in her own apartment. She currently has no caregiving support and has recently experienced an increasing number of falls and subsequent ER visits, including a recent fracture to her left arm that needs additional follow-up care. She does not drive and has no local familial supports, as her family lives out of state. Her neighbors will occasionally help her grocery shop, but this is intermittent. As such, she reports having difficulty taking care of herself and accessing community support services for basic needs. She appears to need additional support with problem solving, getting connected in the community, maintaining medical appointments, and possibly transportation assistance as well.

✓ GRAT will outreach client for assessment interview and hopefully finds her willing to engage and identify goals for improving her situation. With her consent, the GRAT clinician can consult with her primary care team, contact responsive family or neighbors, assist with referrals to support services, and provide information about community resources.

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Example of Acute Non-Crisis

83-yo widowed, housed, retired woman seen by fire department multiple times due to falls and medication issues. She expresses possible paranoia about her pacemaker shocking her at night, though no evidence of this in medical chart. Family is concerned about dementia and they are struggling to provide adequate and sustainable support for her. She is not able to self-supervise medications and had an incident of taking too much of her blood thinner medication. Family describes her as impulsive and is concerned about her safety in the community if she were to leave home during the day when family is not available to supervise. Currently family provides check-ins twice per day as able.

➢ GRAT will contact family to coordinate outreach and assessment. Hopefully, client willingly collaborates in identifying goals, accepts offer of support services, and consents to GRAT clinician further coordinating with family and PCP to enhance protective factors.

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Example of Acute Non-Crisis

72-yo single, housed, retired man who is described by his primary care team as medically frail due to chronic COPD and at risk given his frailty and isolation. He has history of mental health issues and prior diagnosis of Bipolar D/O. He reports not sleeping as well as low appetite and food intake. He has not been connecting with PCP and has not been seen in person for over a year. He has had telehealth appointments since then but when last contacted to schedule an appointment, he refused: "I'm unable to cope with all my medical issues. I won't be scheduling anymore tests."

➢ GRAT will assist primary care team with outreach to hopefully re-engage client and assess his presenting situation. Assessment information can then be used by primary care team to better tailor treatment plan.

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Who Is Not Eligible

• GRAT *would not* accept:
  • Suicidal or homicidal older adults with a *plan and intent*
  • Those currently served by behavioral/mental health providers
  • Older adults in Assisted Living Facilities, Adult Family Homes, or Skilled Nursing Facilities
  • *Unhoused* older adults
  • Those able to self-refer and navigate services *independently*

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Reasons for Ineligibility

• The crises merit Designated Crisis Responder (DCR) involvement
• Ineligible due to medical acuity or current hospitalization
• Concerns are primarily medical
• Duplication of services (i.e., clinical assessment is redundant)
• Resource needs only (i.e., clinical assessment is not needed)
• Client has been previously served, with no new changes to clinical presentation

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GRAT Interventions

- Building rapport and trust
- Exploring client priorities and motivation
- Providing biopsychosocial assessment
- Safety planning
- Psychoeducation
- Connecting with family members and neighbors (resource mapping)
- Referring to and coordinating with service providers

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Examples of GRAT Interventions

• Assist older adults with referrals to support services such as behavioral health treatment, transportation, socialization, and meals

• Link to medical staff for further diagnosis and treatment as well as advocating on the client’s behalf

• Rally family or supportive contacts in elder’s informal resource network to increase care and safety

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Who Can Make Referrals

- EMS and First Responders
- Family, friends, or neighbors
- Primary Care Physician or other health care provider
- Social Service Providers
- Other programs at Sound Generations
- Adult Protective Services
- Crisis Clinic

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Frequently Asked Questions

• Once deemed eligible and accepted as a client, contact with clients will be within 1-5 business days

• GRAT serves all of King County

• There is **no charge** for GRAT services

• GRAT is **not** intended to serve as a long-term care option, with cases closing in less than two months

• Sound Generations is contracted with: Tele Interpreters and intends to eventually contract with in-person interpreters

• There is no waitlist for GRAT

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Contact Information

How to send referrals to GRAT:

• Fax: 206-737-0375
• Phone number: (206) 448-5730 **if not answered live, leave a message**
• Email: GRAT@soundgenerations.org **to ensure privacy, only send referrals here if you can encrypt the information on your end**

How to reach Pathways Information and Assistance:

• Phone number: (206) 448-3110 or 1-888-435-3377

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