

Introduction to G.R.A.T. 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: many providers had no where else to refer at-risk clients who weren't quite appropriate for emergency services or crisis response yet were displaying complex behavioral health issues.
- King County brought the program back with the Veterans, Seniors, and Human Services Levy (VSHSL) funding and Sound Generations was awarded the contract.



GRAT at Sound Generations

- Team works collaboratively to provide in-home assessments of cognition, mental health, medical status, substance use, safety, psychosocial and functioning abilities for people aged 55 and older who meet criteria for eligibility.
- We respond to acute non-crisis situations, such as life or health transitions and corresponding changes in mental health, substance use, and cognition, to assist with referrals to support services and resources.
- Early intervention can effectively stem crises and divert from costlier services, such as inpatient psychiatric hospitalization, emergency rooms, and skilled nursing facilities.

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



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.



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 receiving a higher level of care while residing in an assisted setting (ALF/AFH/SNF) or an inpatient setting (hospital care, psych or detox program).
- <u>Unhoused</u> older adults.
- Those able to self-refer and navigate services *independently*.



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.



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



Case Example

- 67-yo single, housed, retired woman with history of alcohol abuse, substance use, and bipolar disorder, who lives alone in her own apartment, referred by ED Social Worker.
- 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 with infrequent contact. Her neighbors will occasionally help her grocery shop, but this is intermittent. 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.



How Do We Succeed?

- Collaboration with referral source to clarify the purpose of assessment and desired outcomes.
- Building rapport with clients and exploring their goals/concerns to develop a plan that they endorse.
- Active communication and coordination with other service providers, especially medical providers.
- Drawing on informal supports in family and community.
- Identifying strengths and protective factors that can reduce safety issues.
- Following up to ensure continuity of care and a "warm hand-off."



Who Can Make Referrals

- EMS and First Responders
- Family, friends, or neighbors

- Pathways Information & Assistance
- Adult Protective Services
- Primary Care Physician or other health care provider
- Social service providers

Community-based organizations

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Additional Information

- We decide to accept or decline new referrals in 3 business days; when assigned, we contact clients (or a person coordinating outreach) within 1-5 <u>business</u> days.
- GRAT serves all of King County.
- There is **no charge** for GRAT services.
- We do not keep a waitlist and must sometimes stop accepting new referrals to reduce existing caseloads.

- GRAT is <u>not</u> intended to serve as case management or provide mental health treatment.
- We work within a short timeline, typically less than two months, and we usually meet a client in-person one time.
- We use various language service providers for telephone or in-person interpreters and to translate documents to a client's preferred language.



Frequently Asked Questions

• Why not crisis?

We are a small team of clinical social workers, and we are NOT set up for active emergency or crisis work. Our intended response time (up to 8 days total) is not appropriate for someone who needs immediate help. We focus on early intervention and prevention.

• Can exceptions be made to eligibility criteria?

No, we are contractually obligated to uphold our eligibility criteria, so we cannot serve anyone under the age of 55, not living in King County, living unhoused, already receiving a higher level of care or existing behavioral health services.



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: <u>GRAT@soundgenerations.org</u> ** 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