

A CALL TO PARTNERSHIP

to Improve Care Coordination for Older Californians

ENHANCING TRAINING



Better training will ensure health and social service care teams work together at their highest level.

This is one of three documents describing Archstone Foundation's theory of change around integrating health and social services to improve the health and well-being of older Californians and their caregivers. We will pursue this goal through coordinated investments in our core strategies of promoting Teams, enhancing Training, and improving Technology.



Our Vision for Better Care

Archstone Foundation's mission is to improve the health and well-being of older people and their caregivers throughout California. Our vision is for all older Californians to have access to high-quality coordinated care that effectively integrates health and social services. We believe these integrated services should be culturally competent, client-centered, comprehensive, collaborative, coordinated, connected, and compassionate. We envision that care for older adults places them and their families at the center of a care team, to ensure their care preferences and goals are met. Central to our mission, vision, and core work is a commitment to justice, equity, diversity, and inclusion and a belief that addressing the intersecting issues of ageism, racism, sexism, and ableism is the only way to achieve high quality, integrated care for all people.

Understanding Our View of Training

Our Teams, Training, and Technology approach recognizes that each area relies on the others and must act together to create top-quality care for older persons. Improved training is one avenue, for example, for achieving the goal of creating an adequate supply of skilled, highly functional coordinated team care. Additionally, technology can be used to deliver training at scale, while leveraging the full benefits of technology requires training among teams and across disciplines.

Team Care and Training

Delivering comprehensive, efficient, and person-centered models of care requires health and social service providers to work together to address the complex care needs of older people and the systems needed to support them. Likewise, professionals and paraprofessionals – including direct care workers, community health workers, promotores, and care navigators – as well as patients and families, need to take on new and expanded roles, and to work collaboratively as care teams.

Still a Need for Retooling

“[Retooling for an Aging America](#),” a 2008 report funded in part by Archstone Foundation, called out the need to redesign models of care based on these three principles, which remain urgent today, 15 years later:

- The health needs of older people need to be addressed comprehensively.
- Services need to be provided efficiently.
- Older people need to be active partners in their own care.

New Models Require Training

New and efficient models of care will likewise require training. Social service and health care providers cannot collaborate effectively without learning from and about one another, the values of their services, the skills each brings to the team, and the formal processes of teamwork. All team members must understand the complex needs of older people and the importance of client-centered care. And they must actively work to reduce health disparities across race, gender, physical ability, socioeconomic class, sexual orientation, and gender identity.

How Training Enhances Care Coordination

*Achieving patient-centered coordination requires training across disciplines and agencies. An example for why this is so important is the **UCLA Alzheimer’s and Dementia Care Program** (also detailed in our Teams strategy Call to Partnership). Its comprehensive treatment plans support both patients and caregivers, involving a team of nurse practitioners, geriatric specialists, and coordination with community resources. This model succeeds because clinicians and practitioners receive training in disease management and come to deeply understand the critical resources and support that others on the team bring to the table. The team works together across agencies to ensure not only that referrals are made, but also that connections to community resources and supports are successfully put in place.*

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Imagining a New Way Forward

Gains in life expectancy and declining fertility rates mean one in four Californians – 10.8 million – will be older than 60 by the end of the decade.¹ The professional workforce of geriatricians, primary care physicians and other health professionals is insufficient to meet the complex health care needs of this rapidly growing population.² More clinicians with training in geriatric care are needed, but augmenting the professional workforce will not be sufficient.³ Other members of care teams must be trained to extend the reach of clinical care and provide complex coordination of tasks and services.

Our older adult population will not only be larger, but also more racially and ethnically diverse.⁴ These demographic shifts – along with racial and ethnic disparities and the impact they have on health and health outcomes – are compelling health care and aging service providers to look for ways to meet the needs and understand the cultural norms and languages of all they serve. Providing care that is culturally competent and provided with cultural humility will require training attuned to the needs of a diverse population. In addition to clinicians, direct care workers and community health workers are key to improving care for older adults. And specific training is needed to fully realize their potential.

Direct Care Workers

California's direct care workforce is one of the most diverse in the country. More than half a million personal attendants, home health aides, and nursing aides help provide essential daily living services and support to those with disabilities and chronic care needs. Seven in 10 of these caregivers are from communities of color and almost half are foreign-born.⁵ They are responsible for between 70 percent and 80 percent of paid hands-on care and yet lack sufficient training.⁶ Hands-on care includes assistance with activities of daily living (eating, dressing, bathing, toileting, walking, getting in and out of bed or a chair) and the instrumental activities of daily living (housekeeping, chores, meal preparation). Direct care workers also provide skilled care such as managing medical conditions, monitoring health status, or helping with such health-related tasks as changing bandages, taking blood pressure, and assisting with range-of-motion exercises. An intentional focus on improving the necessary skills of direct care workers will allow them to better attend to the care needs of older adults, promoting their health and preventing or delaying additional, more costly care.

Community Health Workers

Community health workers hold additional potential for improving care for older adults. They provide navigation that helps older people access medical and social services. They serve as a link among health services, social services, and the community.⁷ They seek to be trusted partners in care in the communities they serve and in improving quality of life. Community health workers can make vital connections to needed resources that can address social determinants of health, such as nutritious and healthy food, a way to transport groceries home or have them delivered, and the means to cook or get assistance with meal preparation. To fully realize the potential that community health workers hold for improving care, they must be trained to ensure that this vision of quality care becomes a reality.

Interweaving Justice, Equity, Diversity, and Inclusion Principles

Archstone Foundation is committed to integrating principles of justice, diversity, equity, and inclusion (JEDI) into its grantmaking strategies. This commitment is essential to our mission, because diverse population needs must match available services and active strategies must be put into place to reduce health disparities. Training grants will focus on reducing racial and ethnic health disparities by measuring differences in health outcomes across different demographic characteristics including race and ethnicity, gender, LGBT identity, and ability.

Opportunities in the Field

Identifying state and federal opportunities on which to build is important to leveraging our grantmaking dollars and meeting the health care and social services needs of all older Californians. These are three of the most important aspects of state government defining our opportunities.



California Master Plan for Aging

Released in January 2021, the [plan](#) seeks to build “a California for all Ages” by 2030. To that end it identified five goals and outlined more than 100 initiatives – some providing areas for Archstone Foundation funding to shine a light on opportunities to enhance training. The CalGrows program, for example, provides grants to support novel approaches to training, recruiting, and retaining in-home and community-based caregivers for older adults and those with disabilities. In addition, a training inventory, referred to as the Learning and Innovations Institute, will be designed to offer consistent information about accessible training opportunities. Also, Gov. Gavin Newsom has committed to recruiting and training 25,000 community health workers by 2025. And a set of initiatives for 2023-24 includes a focus on promoting innovative models for community health workers to serve older adults and people with disabilities in home and community-based settings.⁸

CalAIM

California Advancing and Innovating Medi-Cal ([CalAIM](#)), an overhaul of the state’s Medicaid program launched in 2022, supports two initiatives to assist people with complex health and social care needs. The first, Enhanced Care Management, addresses the clinical and non-clinical needs of the highest-need Medi-Cal enrollees through intensive coordination of health and health-related services. The other, Community Supports, offers housing aid, medical respite care, personal care, medically tailored meals, and peer assistance paid for by managed care plans and provides cost-effective alternatives to more traditional services or settings. As CalAIM is expanded to include high-cost dual eligibles, opportunities might include grants for training care managers so they can better provide Community Supports to older adults.

The State Budget

Funding opportunities may also be identified through the annual California general budget. As an example, in his [2023-24 budget](#), Gov. Newsom proposed allocating \$65 million in both 2024-25 and 2025-26 for the California 25x25 Initiative to recruit, train, and certify 25,000 community health workers by 2025. These workers bring a unique skill set to health care teams and have trusted relationships with communities they serve, but care of older adults has not been their traditional focus. Much can be done to build on the state’s momentum, such as educating health plans on the value of these workers, understanding the needs of health plans and how community health workers can support them and their business model, and exploring how other states and health systems pay for and use these workers effectively.

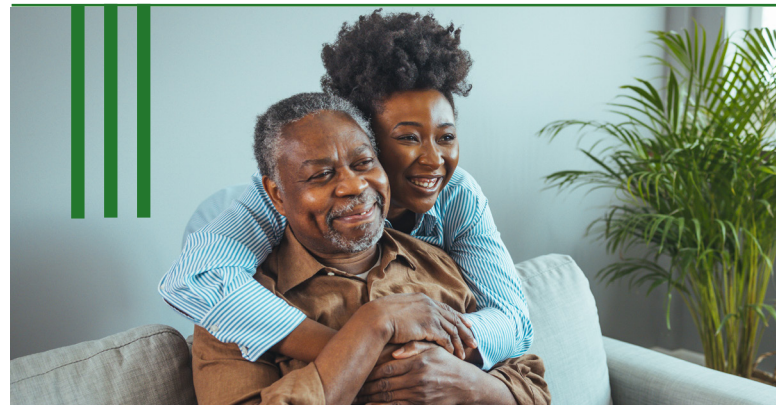
Funding Principles and Opportunities

With new models of team care, changing demographics, an increased need for home-based care, and other workforce shortages, the need to influence practice and systems change is great. Archstone Foundation will support projects that train health and social service care teams to work together at their highest level.

Opportunities for future Training grants may come from organizations proposing to:

- *Improve care coordination across health and social service providers and settings, with a focus on training that supports such collaboration and advances care integration for older Californians.*
- *Advance care integration by bringing siloed health and social services together to create a more seamless patient experience, by helping providers understand one another, communicate more effectively, and master tools such as new technologies for more effective teamwork.*
- *Meet the needs of newer team members filling gaps in traditional care (including community health workers, promotores, and other direct care workers) and raise awareness of their value among health care providers, creating demand for training through targeted communication with health providers and health systems.*
- *Support pilot training programs to improve the ability of older adults and caregivers to participate effectively in directing care and being members of their own care teams.*
- *Increase the capacity of all care team members to address racism, sexism, and ageism and interweave equity and justice principles from program inception.*

By joining with a wide range of thought partners and grantees and turning these plans into programs and initiatives, we will improve care coordination, reduce health disparities, and make a measurable difference to the health and well-being of older Californians and their caregivers. We look forward to partnering with community-based nonprofits, local and state entities, health systems, and others to bring Archstone Foundation's vision of integrated care to fruition.



¹ California Department of Aging. <https://mpa.aging.ca.gov/>

² American Geriatric Society. www.AGS.org

³ Retooling for an Aging America: Building the Health Care Workforce (2008). <https://www.ncbi.nlm.nih.gov/books/NBK215401/>

⁴ Public Policy Institute of California

⁵ PHI Quality Care Through Quality Jobs, "State Facts". <https://Phi.org>

⁶ PHI Quality Care Through Quality Jobs, "State Facts". <https://Phi.org>

⁷ Partners in Care Foundation, <https://www.picf.org/partners-in-action/lavc-chw-training/>

⁸ PHI Quality Care Through Quality Jobs, "State Facts". <https://Phi.org>



We Want to Hear from You!

If you are changing long-established policies and practices needed to address the complex care needs of older adults — through training inclusive teams and translating knowledge into training programs for current practitioners in health care and social services — please [visit our website](#) to learn how you can partner with us.