Executive Summary: Alameda County Care Partners
Nominated for the California State Association of Counties (CSAC) Challenge Awards, June 2018

Overview: Alameda County Care Partners offers unique, culturally relevant palliative care coordination that supports low-income older adults in end-of-life planning and access to hospice care.

Challenge: Racial and ethnic disparities in health care have been well documented among low-income communities of color and are cumulative over the lifecourse, resulting in older populations diagnosed with late-stage illness having poorer outcomes and increased suffering. As the older population grows exponentially—current projections are for a 100% increase by 2030—this generation is the most diverse the County has ever seen, with increased longevity, more widely dispersed families, and more racial and ethnic diversity making their needs much different from those of previous generations. At the same time, older adults are facing increased poverty and economic stress, as the Bay Area has become one of the most expensive places to live in the U.S. As a result, these populations do not have equitable access to palliative and hospice care; therefore, the County’s older adult population is at high risk for medical compromise, lack access to the end-of-life (EOL) care they desire, and often end up utilizing unwanted, high-cost health service interventions.

Innovative Solution: Care Partners is a collaboration among Alameda County’s Health Care Services Agency (HCSA), Social Services Agency (SSA), and community-based organizations. It is designed to address racial and cultural disparities in access to EOL planning and care among the County’s low-income older adult population. SSA social workers and HCSA public health nurses partner with staff from Comfort Homeshake, a professional advocacy and training organization, and the Alameda County Hospice Providers Coalition to identify and train In-Home Support Services (IHSS) Chore Providers to become allies in initiating conversations that increase advance health care planning activities and hospice utilization among the terminally ill clients they serve. Care Partners has enabled the County to offer new services to county residents and fill critical and growing gaps in EOL Care.

Care Partners provides direct support to IHSS consumers with serious illnesses to make decisions about their healthcare treatment wishes through discussion, planning, and documentation, as well as health care coordination services that connect the dots between healthcare experiences and healthcare wishes. Consumers learn about EOL planning, complete advanced care directives, identify their needs through evidence-based assessment tools, and get support to access a range of palliative care and hospice services, when indicated.
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Originality: Dr. V.J. Periyakoil, Director of the Stanford Palliative Care Education & Training Program, and a leading expert in ethno-geriatrics, has praised the program's originality. Care Partners is the first, and to date, only community-based palliative program in operation in the Bay Area, according to separate assessments by the San Francisco Palliative Working Group and the Alameda Alliance for Health/LifeCourse Strategies. The program demonstrates the potential for county agencies and collaborative partners to share responsibility with hospice providers for institutionalizing what will be a transformative change—shifting from culturally neutral to culturally relevant, whole person, coordinated care. These changes can reduce admissions and readmissions, allow people to stay in their homes, and deliver quality palliative and hospice services.

Cost Effectiveness: Care Partners' program budget of approximately $320,000, supports 4 FTE county and contracted staff to provide program administration, training, referral, and one-on-one consultation for EOL planning. An additional $70,000 is provided by in-kind services. With just this small staff and budget, the unique program is reaching nearly 4,000 chore providers and clients a year. Beyond these direct effects, the improved palliative care and care coordination is generating systemic savings by reducing utilization of unwanted, high-cost acute care, including 911/ambulance calls, emergency departments, and hospitals, making this a very cost effective and valuable effort.

Results: Throughout implementation, the pilot has achieved great success. To date, Care Partners has provided EOL Care trainings to over 3,300 chore providers and 100 clinical professionals, as well as providing palliative home visits to more than 150 IHSS clients in their own homes. After an initial ramp-up period, the program is now training about 100 chore providers a week in English, Spanish, Cantonese, Farsi, Tagalog, Vietnamese, and Cambodian, expanding its potential reach within the IHSS consumer population of 23,000 plus.

Project Contacts: Alameda County Health Care Services Agency, 1000 San Leandro Blvd., San Leandro, CA 94577;
Dr. Kathleen Clanon, Medical Director, Kathleen.Clanon@acgov.org, (510) 346-1074; Marilyn Ababio, Care Partners Coordinator, Marilyn.Ababio@acgov.org, (510) 667-7415.

Optional Submissions: video, brochures, testimonials