Acknowledgments

The California Social Work Education Center (CalSWEC) wishes to thank the members of the Aging Initiative (AI) Committee of CalSWEC’s Board of Directors for their guidance and support for the 2012 Aging Initiative Summit. Our appreciation also extends to the Planning Committee members, Debbie Winters from USC; Janlee Wong from NASW; Laurie Smith from CSU, San Bernardino; David Cherin from CSU, Fullerton; and Danna Fabella and Stuart Oppenheim from the Child and Family Policy Institute of California, for their outstanding work in developing an excellent program for the day.

We also wish to express our gratitude to the co-sponsors of the event, the California Association of Deans and Directors, the National Association of Social Workers—California, and the Sierra Health Foundation. Without the financial support of these organizations, the summit would not have been possible.

Additionally, the event had a rich array of in-kind support and contributions from many organizations. We wish to thank these organizations for their work behind the scenes to make the day a success: the California Department of Social Services, the County Welfare Directors Association, the Child and Family Policy Institute, The SCAN Foundation, USC’s Roybal Institute on Aging, UCLA’s Center for Policy Research on Aging, and UC Berkeley’s Center for the Advanced Study of Aging Services.

Lastly, we were honored to have two state legislators join our event for the morning session, Assembly member Mariko Yamada from the 8th District and Assembly member Jim Silva from the 67th District. Both spoke eloquently and passionately about the need for more effective and efficient services for California’s elders. We are grateful for their attendance and their advocacy work on behalf of California’s aging and adult population.

A Brief History of CalSWEC’s Aging Initiative

The leadership and Board of Directors of the California Social Work Education Center (CalSWEC), a nationally recognized model for social work education and training, recognized through the development of California’s Master Plan for Social Work Education published in 2004 the significant unmet need for social work education, training, and employment opportunities for social workers serving aged adults and their families.

In February 2004, the CalSWEC board established the AI Committee under the auspices of its Curriculum Committee. The intent of the AI was to build upon successes and lessons learned
through the CalSWEC Child Welfare initiative and to apply them to building the capacity for workforce development in geriatric social work by promoting a Model for Social Worker Practitioner Preparation in Aging Services statewide.

The AI was launched with the goal of creating a statewide coalition of key stakeholders representing the academic community and providers from the public and private sectors. The vision for the group was to develop a statewide plan with specific strategies to address the need for building the training and education capacity, creating incentives for attracting students, and improving the diversity of the workforce. To reach these goals the committee's work from 2004 to 2009 centered on:

- Creating and sustaining a statewide coalition
- Developing core competencies for geriatric social work
- Developing workforce development strategies
- Developing sustainability strategies

The successes of that period include the development of a coalition of stakeholders which now constitutes CalSWEC's AI Committee; the development of competencies for geriatric social work that have been disseminated to all schools of social work in California; testing financial models for funding stipends for student who wish to pursue careers in social services for aging populations; support for the delivery of statewide APS training; and training for IHSS workers through the Institute for Geriatric Social Work Center’s on line training.

Coming off of the successes of the previous period, the AI convened a strategic planning group in early 2011 to develop a strategic direction that would inform the work of the AI into the new decade. The outcome of this convening was a set of System Improvement and Outcomes to guide the annual work plan of the AI, which includes:

- **Healthy aging focus.** Promote the development of ‘Aging in place’ services, less restrictive services based on healthy aging instead of illness. Use of the “whole patient model” engaging family & community which utilizes a continuum of care approach that promotes active living in communities.
- **Workforce capacity development.** Promote social work as one of the core professions that serves older adults. Examine how Social Work is funded in healthcare reform. Connect Social Work values and practice to Healthcare reform.
- **Competency and Standards of Practice.** Develop a well-educated workforce that is trained to agreed-upon competencies and minimum standards of practice. Develop a shared definition of “good practice.” Ongoing skill upgrade is met by training opportunities
- **Collaborative Team Care.** Case Management and cross system collaboration in service delivery that utilizes an interdisciplinary approach offering more comprehensive services and practices that insure access to care, engagement in treatment, and insures people are valued.
- **Adequate and sustained funding.** Examine and develop new ways to bill for services; greater fiscal investment from government, the private sector, and philanthropy. Work to increase public support measured by increased investment.
- **Systematic Evaluation.** Develop a shared systematic evaluation process. Utilize the assessment tools for healthy aging and promote services that aid in a better quality of life as defined by the consumer.

**Goals and Purpose of the Summit**

In September 2011 the AI Committee convened its fall tri-annual meeting in Sacramento, where the Affordable Care Act (ACA) and its impending implementation were discussed at length. The committee acknowledged that this policy reform would have far-reaching impact on elders and the social and medical services that they need to thrive. As a result of this discussion, the AI called
upon its members and CalSWEC to support a statewide summit that would examine social work in relation to the ACA and the implications it would ultimately have on the development of a workforce that would meet the needs of elders in California.

The initial goal for the summit identified by the committee was to “to exchange ideas about the role of social work in the aging field as it relates to the ACA and recognize how social workers as ‘care coordinators’ can potentially provide better access to services and outcomes for older adults and cost benefits to the healthcare system”.

The committee also decided that the audience should be a broad-based group that would include social work educators; practitioners; public and private service providers in the aging and adult services sector; and federal, state and, local health care and aging services policy officials and researchers.

During a six-month planning process, the Planning Committee developed a program that would address the central goal and further refined the goals for the day. They were to:

- Articulate a vision of the Workforce of the Future that is needed to respond to the changing landscape of service delivery for older adults in a health care-driven system
- Highlight collaborative environments where social workers are effective members of cross-disciplinary teams serving older adults

On September 19, 2012, a broad cross-disciplinary group gathered in Sacramento for the Aging Initiative Summit that mirrored the initial intended audience identified by the AI Committee. The summit participants consisted of representatives from 25 county adult services agencies, 14 university schools of social work, 4 mental health representatives, 2 healthcare representatives, 6 community based providers, 4 policy leaders, and 2 state legislators.

**Summit Proceedings**

The following outlines the agenda for the day and provides links to the audio of the presentations and the PowerPoints that were utilized in the presentations.

**Plenary Session/Keynote Addresses**

- **Brave New World: The Future of Care Coordination and the Role of Social Work**—Bruce Chernof, President and CEO, The SCAN Foundation
  
  🎧 For audio, go to [https://vimeo.com/49945968](https://vimeo.com/49945968)

- **Successful Aging in Place: How Do We Attain It?**—William Vega, Provost Professor and Executive Director, USC Edward R. Roybal Institute on Aging
  
  🎧 For audio, go to [https://vimeo.com/49948592](https://vimeo.com/49948592)
  🗂️ For the PowerPoint presentation, go to [http://calswec.berkeley.edu/2012-aging-initiative-summit](http://calswec.berkeley.edu/2012-aging-initiative-summit)

**Panel Presentations: Social Work and Care Coordination**

*Presentation of three different models of care coordination where social workers are key to successful client outcomes:*

**Moderator:** Gretchen Alkema, Vice President, Policy and Communications, The SCAN Foundation
• Martha Haas, LCSW, Adult Protective Services Planner, Sacramento County Health and Human Services
• Jean Friedman, LCSW, Manager of Medical Social Work Services, Kaiser Foundation Health Plan, Roseville
• Jackie Wong, LCSW, Director of Social Services, On Lok Lifeways
• W. June Simmons, MSW, CEO and President, Partners In Care Foundation  

For audio go to https://vimeo.com/49953199
For the PowerPoint presentations go to http://calswecl.berkeley.edu/2012-aging-initiative-summit

Moving the Field Forward

• During this part of the day, the participants broke out into four break-out groups to have structured conversations to create ideas for action. The groups were cross-disciplinary and were led through a three-step process that 1) identified best practices that are already being implemented, 2) developed ideas and vision for the future, then 3) identified recommended actions for the future. The recommendations are in the section below “Call to Action”.

Final Keynote

• A New Framework and Paradigm Shift in Social Work for Aging Populations—Fernando Torres-Gil, UCLA, Professor of Social Welfare and Public Policy, and Director, Center for Policy Research on Aging

For audio and visual model go to https://vimeo.com/50017651

Closing Remarks

• Call to action—David Cherin, Director, CSU, Fullerton School of Social Work, and President, the California Association of Deans and Directors

Dr. Cherin closed the day by conveying that social work is now one of the eight professions that has been identified by the Office of Statewide Planning and Development (OSHPD) to be included in workforce development efforts in healthcare. He urged the group to take action locally and as part of the CalSWEC consortium to implement the actions articulated below.

Call to Action

During the afternoon session the participants broke into four cross-disciplinary groups to develop three to five recommended action steps for CalSWEC and its constituents. The action steps that are summarized below were reported out in the summit’s final general session.

Group One

• Recommendation #1: Put together elements of a funding proposal that would eventually go to a healthcare workforce development board, which would fund several things: getting more SWs, enhancing curriculum for aging, and helping agencies develop placements and infrastructure for this kind of new workforce. Agencies need to prepare as well and need to work to create supervision systems. One of the steps is to develop some
means of recruiting more students and more field placements specific to the field of aging to show the workforce development board that an interest exists.

- **Recommendation #2:** Curriculum work on aging has already occurred (CalSWEC, GSWEC, CSWE). Bring these together and disseminate what’s already been done. All ideas cost money. One idea: some sort of funded position coming out of the Aging Initiative to help push these curriculum out to university faculty who teach the social work courses. Need to do a better job of connecting research with curriculum.

**Group Two**

- **Recommendation #1:** Promote and build collaborations between social service and healthcare agencies as well as interagency to build models of care coordination for serving older populations. Collaborations should also occur at the universities and training academies, in pre- and post-training across disciplines. California State University, Chico has an Interdisciplinary Institute on Aging.

- **Recommendation #2:** Building or defining meaningful, measurable outcomes that can measure the quality of life beyond reducing hospital stays and other existing measures. Define these outcomes, and have the tools to measure them.

- **Recommendation #3:** Educate and build support among policy makers on aging issues. For example, caseloads are high, and time and staffing are needed to develop care coordination. Community services are also important for keeping the aged safe in their own communities.

**Group Three**

- **Recommendation #1:** Educate ourselves as social workers and look at what we’re doing today. Aging is new to social workers, and social workers don’t know a lot about the ACA. Social workers need to learn about this to effectively educate social work students. Early discussion with high school students to get them interested in aging, and not wait until graduate school to recruit potential entrants to the field.

- **Recommendation #2:** Data creation: let the data speak to the work that social workers do, and create social work data systems. Not an area of expertise, and not necessarily something that can just happen in the schools; needs to include micro/mezzo/macro and be useful across agencies.

- **Recommendation #3:** Multi-disciplinary models for schools, communities at-large, and agencies. Use older adults as mentors and have them return to the agencies to be part of teams. “Coming of Age” is a project where elders contribute to nonprofit agencies; they do work for the nonprofits and get meaningful life experience at an older age.

- **Recommendation #4:** Need to better involve families in decision making related to elder care. Team decision making in child welfare brings the providers and families together to agree on a plan, but medical decision making is top-down and brief. Involving families will help them own care decisions long-term, using models from child welfare.
**Group Four**

- **Recommendation #1:** More marketing of what social workers do as a profession; communicate with community and other agencies about what we know, what we can do, and how we differ from other professionals.

- **Recommendation #2:** As educators, ensure that students actually know the what we think are part of the usual curriculum. Every student should come out with an understanding of human development over the lifecycle and the cultural elements of human development. This development should include family and policy context. Every student needs to be able to think about policy research and evidence-based practice. More gerontology content should be added to curriculum, along with “bilingualism” of working with other disciplines. Change terminology of care coordination so that we do not call it something that is too reductive.

- **Recommendation #3:** More stipends to support students. Include business models of understanding the money flow of providing services. How to reduce readmissions, more info on ACA, and how to supervise other social workers – and other professionals.

- **Recommendation #4:** Systemwide, place-based service delivery models that are appropriate to do different geographical settings, e.g., in a rural community this would be different than in other communities. One county has developed community care centers, but other areas don’t have this. Statewide broadband so that outreach can be delivered to baby boomers using online programs.

See the matrix of the breakout groups’ complete work on identifying current practices, vision, and actions steps: [http://calswec.berkeley.edu/files/uploads/side_by_side_matrix_breakouts.docx](http://calswec.berkeley.edu/files/uploads/side_by_side_matrix_breakouts.docx)

**Next Steps: The Aging Initiative Work Plan**

As a result of the summit, CalSWEC’s AI will begin work on implementing many of the ideas that were generated by the participants. The work plan that follows is in the process of being put into place by the CalSWEC team. This work plan will be reviewed and revised on an annual basis.

**Communications**

- A Communications Committee was convened since early 2012. During the summit, video production was occurring behind the scenes and several presenters were interviewed. This footage is now being edited for production.

- This committee will continue its activity in collaboration with Merced County on the development of social worker recruitment video(s) and communications brochure, including but not limited to:
  - one all-purpose video and several videos for several audiences (prospective students, students, policy makers, etc.)

- The Communications Committee will identify avenues of distribution of communications materials.

- Dissemination of video and other communication materials should begin in spring 2013 to identified high school, college, agency, community, and political sources.
Funding

- A strategy for the development of stipends for current employees in county adult services agencies is already underway. It is currently called the “Ladder of Learning Pilot”.
- In a partnership with CalSWEC, CFPIC, and the Institute for Geriatric Social Work at Boston University, a Planning Committee is working on a proposal for CSU, San Bernardino to develop a Pathway Program to serve current employee of adult services in San Bernardino and Riverside Counties.
- The proposal will be discussed with current Coordinated Care Pilot Counties as a way to support workforce development as part of the statewide CCI one or more CCI Pilot Counties.
- The proposal will also be disseminated to other potential funding sources. If the proposal is funded, work will begin to implement the Pilot in fall 2013.
- This partnership will also work with additional counties/university partnerships to identify additional pilot venues.

Advocacy

- Work to define the role of social workers and workforce development for social workers in the medical, dual eligible, and CCI environments is required. To address this, a convening with leadership from CDSS, CWDA, SCAN, OSHPD, and Region IX will be explored.
- This work must incorporate the rural perspective and perhaps a regional model of development that ultimately succeeds at securing stipend funding as well as bringing existing training and education together to incorporate the person/participants/consumers perspective.
- This is ongoing development work that has a somewhat longer timeline than other activities. Activities will include finalizing the white paper for CCI Pilot funding and meeting with CCI Pilot Counties to explore allocation of CCI funding to social work workforce development.

Curriculum Development

- Curriculum development that includes the following content and perspective: helps us improve services; supports the “whitespace” or the social sphere of needs for elders, translational, cross-disciplinary, cost-saving services that keep elder in their home and community; promotes a better quality of life and healthier behavioral health models, i.e., fall prevention, etc.; IHSS—CSU Sacramento training; use existing agencies/orgs that are doing curriculum development.
- Distance learning and regional model of curriculum dissemination need to be incorporated in order to serve rural needs and perspectives.
- Curriculum is now being identified and a curriculum hub will be created on CalSWEC’s website as a resource for agencies. Will go live in January 2013.
- Work with committee of university faculty to identify barriers to using existing curricula.
- Provide T/A to universities to help address barriers to implementation of existing curricula.

Best Practices in Research and Dissemination

- As curriculum is identified the dissemination of the curriculum and best practices will be required.
- Work with the AI Committee and Adult Services to identify specific best practices interests.
• Research Best Practices in areas identified by the above groups.
• Host a series of webinars for agencies and university faculty to disseminate information about curriculum products and best practices that may include: Family Engagement strategies; use of measurable outcomes for program effectiveness; counties’ existing use of data to guide program improvements.

Reference Materials
• Access all the materials that participants received in preparation for the event and at the event: http://calswec.berkeley.edu/2012-aging-initiative-summit
• Download or view a list of all summit attendees: http://calswec.berkeley.edu/files/uploads/ai-finalattendeeslist.xls
• Download or view a list of CalSWEC’s Aging Initiative Committee members: http://calswec.berkeley.edu/files/uploads/aging_committee_directory_0.pdf

CalSWEC’s Aging Initiative Team
The CalSWEC Aging Initiative Team works together on the many aspects of the Aging Initiative work plan. If you should have any questions, please do not hesitate to ask any one of us.

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