

COUNTY OF LOS ANGELES - DEPARTMENT OF MENTAL HEALTH
OFFICE OF THE CHIEF DEPUTY DIRECTOR, CLINICAL OPERATIONS

2.6 PARAMETERS FOR SPECIAL CONSIDERATIONS OF OLDER ADULTS
APRIL 2019

PRINCIPLES

Within 24 hours prior to changes in service delivery, every older adult consumer should have a specific structured assessment to determine level of functioning and associated needs.

PROCESS

- A. Assessment and planning should occur in a timely fashion. Any discharge planning should begin at admission.
- B. Assessment and planning should involve clinicians with appropriate levels of clinical skill, and should involve collaboration and consultation with other individuals and agencies when necessary.
- C. The older adult consumer, caregivers, outside healthcare providers, and other agencies involved with the welfare of the person should have appropriate input into assessment and discharge planning.

ELEMENTS

Based on history, reports, and direct evaluation, assessments and discharge plans should involve the following elements:

- 1. Cognitive level
- 2. Psychiatric diagnoses
- 3. General medical conditions
- 4. General functional level
- 5. Neuro-motor functional level (e.g. fall risk, gait balance)
- 6. Specific disabilities
- 7. Environmental risks assessment (e.g., wandering, driving, fire, sanitation)
- 8. Ability to use appliances and services
- 9. Ability to manage medication
- 10. Ability to obtain services (e.g. medical, social, transportation, other)
- 11. Need for and availability of caregiver support
- 12. Financial resources
- 13. Legal status (e.g. decision making capacity)
- 14. Older Adult wishes
- 15. Caregivers wishes (e.g. family, providers, agencies)
- 16. Communication among caregivers
- 17. Nutritional screening (e.g. medical diet and preferences)
- 18. Prognosis

INSTRUMENTS

Use of direct instruments to measure various aspects of older adults include:

1. Mini-Mental Status Examination, Folstein (MMSE)
2. Geriatric Depression Scale, Yeasavage (GDS)
3. Activities of Daily Living, Kel (ADL)
4. Instrumental Activities of Daily Living (IADL)
5. Get Up and Go Test

SPECIAL CONSIDERATIONS

Older adults have similar considerations overall as other age groups but apply specific consideration in assessing:

1. Alcohol and Substance Use (CAGE, Bush, MAST-G)
2. Hearing and Vision functioning
3. Literacy and Language changes, Speech changes
4. Suicide Risk (Lettieri Risk Assessment)

COMMON FEATURES

Common features that would not change when working with older adults include:

1. Consistent capacity with level of cognitive ability at time of assessment or discharge
2. Consistent capacity with level of functional ability at time of assessment or discharge
3. Address concerns of safety issues
4. Address caregiver needs, skills, and availability
5. Address fiscal resource issues
6. Address fundamental guardianship and other legal issues
7. Address future mental health needs
8. Address future health needs or anticipated follow up time frames

DOCUMENTATION

- A. All components of assessment, planning and discharge should be comprehensively documented in the medical record, including informants, dates, involved individuals and agencies, and assessors.
- B. Copies of the discharge assessment and planning component of the medical record should be available to appropriate individuals and agencies at time of discharge.