

Lifespan's Geriatric Addictions Program (G.A.P.)

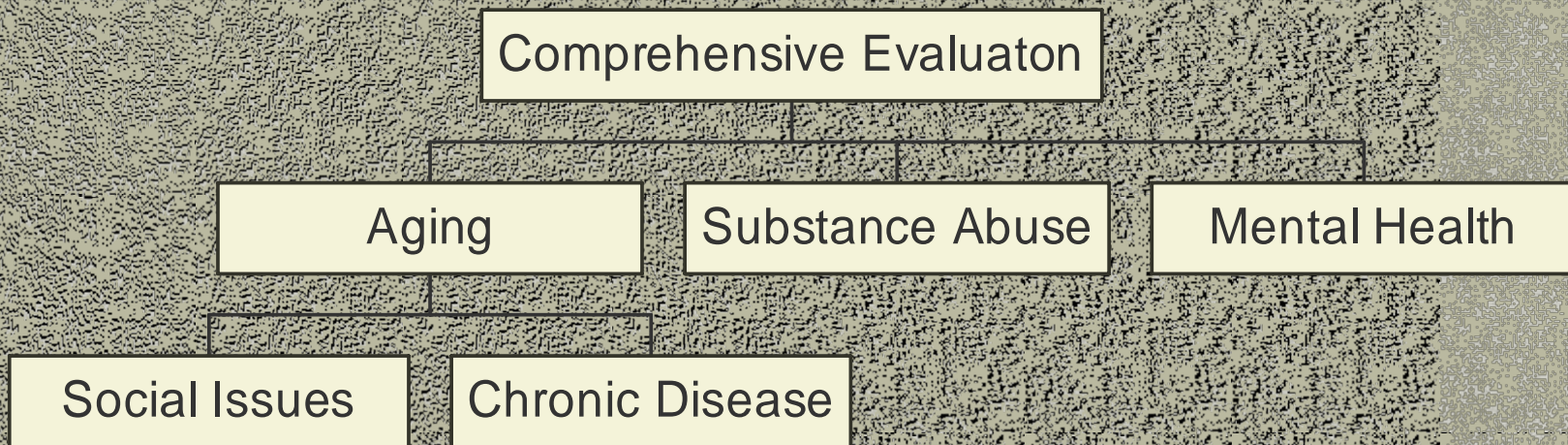
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Complex Client Profile





G.A.P. Program Design

- Community outreach model—we are *not* treatment, we are *not* licensed
- Collaboration b/t aging + mental health + chemical dependency networks + PCP's
- Clients 55+, no court mandates, no homeless
- Minimal fee for service



First Tier:

Direct Intervention/Linkage Model

- Assessment
- Motivational enhancement techniques
- 12 Step/AA – Grey AA
- Crisis intervention skills mandatory
- Powerful brokerage with CD facilities
- Geriatric care management thru CD tx



Second Tier: Risk Reduction Model

- Risk reduction strategies/psychotherapy
- Motivational enhancement
- Powerful integration with aging and mental health networks
- Linkage to CD tx *when appropriate*
- Geriatric care management (can be intensive)
- Crisis intervention skills mandatory



Third Tier: Environmental Treatment Model

- Medically/mentally fragile
- Dementia
- Never going to be appropriate for tx—sole focus on health, safety, functioning
- Intensive geriatric care management
- Use of senior living communities—

Step Down

- Geriatric neuropsychiatric evaluations
- Guardianship



Behind the Clinical Scene

- Data collection on first 120 (Journal of Dual Disorders, Fall 2005)
- Professional articles: *Addiction Professionals Magazine*, *The Counselor Magazine*
- Clinical evaluation (Un. of Michigan, Dr. Frederic Blow)
- Administration on Aging, Center for Health Aging— model program?
- May 2005 Monroe County Geriatric Substance Abuse Coalition