Implementing EBP for Family Caregivers

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Georgia Department of Human Services
Vision, Mission and Core Values

**Vision**

Stronger Families for a Stronger Georgia.

**Mission**

Strengthen Georgia by providing Individuals and Families access to services that promote self-sufficiency, independence, and protect Georgia's vulnerable children and adults.

**Core Values**

- Provide access to resources that offer support and empower Georgians and their families.
- Deliver services professionally and treat all clients with dignity and respect. Manage business operations effectively and efficiently by aligning resources across the agency.
- Promote accountability, transparency and quality in all services we deliver and programs we administer.
- Develop our employees at all levels of the agency.
IT’S EVERYWHERE!
Have you heard Evidence-Based Programs are NOT business as usual?

What does that MEAN?
Evidence-Based Programs:

- rigorous scientific evaluation
- achieve outcomes of importance to family caregivers
- published in a peer-reviewed scientific journal
- tailored to the caregiver’s specific needs and risk factors
- multicomponent
- a helper who has specific intervention protocols
- heavier “dosage”

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RCI REACH

• Six month intervention delivered in twelve sessions in the home and by phone.
• Telephone support group provides five additional sessions.
• Focuses on emphasizing positive aspects of caregiving and providing tools to improve stress management, caregiver self-care, and coping skills in managing problem behaviors.

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RCI REACH

- Interventionist knowledge of caregiving and ability to relate more important than degreed credentials.
- Caseloads: 15 to 20 depending on travel time.
- Intensity appropriate for high risk caregivers.
- Interventionists need support and stress management too.

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Care Consultation

• Twelve month program providing assessment, information and referral, and coaching to both caregivers and care recipients by telephone.
• Focuses on linking and supporting families in accessing services and resources.
• Well developed computer based intervention.

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Care Consultation

• Interventionist:
  – Bachelor level credentials;
  – Understanding of caregiver issues and resources extremely important
• Caseloads: 100 – 150 depending on administrative support
• CCIS assists in monitoring fidelity

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New York University Caregiver

• Within a Four to Six Months:
  – An individual counseling session
  – 4 family counseling sessions
  – A second individual counseling session

• Over the entire course of the disease
  – Participation in a support group
  – Telephone consultation for caregiver or family member as needed.

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Interventionists should be licensed clinicians, experienced in caregiving issues and family therapy.

Contracting with clinicians has proven to be a cost effective staffing model.

Clinical supervision is highly recommended.

Statistically significant delay in institutionalization of 1.5 years.
Challenges to implementing Evidence-Based Programs:

- Right Staff (they ARE the intervention)
- Fidelity to protocols (monitoring)
- Data (collection, management, analysis)
- Effective feedback/response loop
- Getting the right service to the people who need it most (marketing)
Evidence-Based

Implementation

Intervention

Positive Outcomes

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Evidence-Based Practices:

Implementation AND Interventions

a different breed of cat....
Evidence-Based Implementation

- Selection (Staffing)
- Training
- Coaching (Supervision)
- Delivery
- Evaluation

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Intensive Technical Assistance

Intensive TA includes all elements of Basic TA, but adds considerable on-site direction, collaboration, coaching, and evaluation strategies needed to achieve [desired outcomes].
Prior to initiating the project:
• Provide management and staff level orientation training sessions on the new project.
• Process map operational steps from beginning to end.
• Identify process quality indicators and establish data collection procedures.
• Coordinate training of interventionists and program managers
RCI Technical Assistance

After initiation of services:
Two Feedback Opportunities:
• Weekly or Bi-weekly teleconferences
  • Operational issues
  • Client issues
• Monthly site visits
  • Process Quality indicators
  • Fidelity checks
  • Debrief Interventionists

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RCI Technical Assistance

Evaluation based on data:
• Procedural Challenges and Solutions
  • Referrals
  • Enrollment/refusals
  • Time management of interventionists
  • Attrition
  • Fidelity
• Caregiver Outcomes
  • Cross sites/interventionists
  • Compared to original study
Evidence Based Wellness Programming

• Why focus on evidence based health and wellness programs?
  – According to the Centers for Disease Control and Prevention about 133 million Americans live with at least one chronic illness
  – More than 75% of health care costs are due to chronic conditions

http://www.cdc.gov/chronicdisease/resources/publications/AAG/chronic.htm
Evidence Based Wellness Programming

• Why focus on health and wellness?
  – According to the family caregiver alliance approximately one third of caregivers provide intense care to others while suffering from poor health themselves.
  – Caregivers suffer from higher levels of stress, anxiety, depression and other mental health effects.
  – Caregivers (3/5\textsuperscript{th}) report fair to poor health with one or more chronic conditions as compared to non-caregivers (1/3\textsuperscript{rd})

http://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=1822
Programs Being Implemented in Georgia

- Stanford Chronic Disease Self Management Program (CDSMP)
- A Matter of Balance
- Tai Chi Moving for Better Balance
- Evidence Based Nutrition Education
Stanford’s CDSMP

- Pilot project with grant funding from AoA and NCOA to implement the Stanford Model of Chronic Disease Self Management, a widely recognized evidence-based health promotion program.
- Currently working with all Area Agencies on Aging to disseminate CDSMP. Capacity in 39 counties and expanding.
- On line version Better Living Better Health
- Future goals to expand to DSMP, Tomando, and PSMP
A Matter of Balance

• Holding Master Training Early in 2013
• Working with AAAs to develop Volunteer Recruitment Strategies
• Adding another Evidence Based Program to the Title III D Menu of Services
Tai Chi Moving for Better Balance

- Holding Master Training Early 2014
- Working with AAAs to Train Senior Center Managers, Volunteers and Community Partners
- Adding a Third EBP to the Title III D Menu of Services
Evidence Based Nutrition Education

- The Stanford Nutrition Action Program (SNAP)
  - Has a low literacy focus
  - Goal is to reduce heart disease
  - Can be led by lay leader

- DASH (Dietary Approach to Stop HTN)
  - Has been shown to lower blood pressure in just 14 days
  - Focused on plant based diet but not vegetarian
  - Lay educator materials to be developed by GSU

- Vitamin D and B for Older Adults
  - Lay educator materials to be developed by GSU
• Goals
  – Provide training and technical assistance for a menu of evidence nutrition and wellness programs
  – Focus on topics of greatest need within each region
  – Partner with community (organizations and individuals) to expand beyond the traditional aging network
  – Empower older Georgians and their Caregivers
Why Focus on Family Caregivers?

• Key partners in long-term care system
  – 80% of long-term care for older adults
  – If we work with them things go well
  – If we ignore them or treat them as servants our job is hard

• Key to quality elder care
  – They do the work
  – Make critical decisions about care of older adults

• Key to public purse
  – Delays or prevents the use of nursing home care
  – Affect length of hospitals stays & readmission
Dilemmas for Supporting Caregivers

- Caregivers don’t know they are caregivers.
- Caregivers seek help too late.
- Caregivers will not use services that service providers believe will benefit from them.
- Service providers are often unable to demonstrate benefits of services relative to costs.
What Is TCARE®?

- Systematic approach to serving family caregivers
- Evidence-based process
  - Grounded in the caregiver identity theory
  - Reflects current knowledge of research about caregiver interventions
  - Seeks to ensure quality and equality
TCARE® Helps Identify:

- Presence of depression
- Types and levels of stress
- Appropriate goals for supporting caregivers
- Strategies to meet goals
- Array of services consistent with goals and strategies
Why is a structured Caregiver assessment process useful?

- A standardized process helps ensure equal level staff expertise when:
  - Assessing caregivers needs
  - Creating care plans

- Increases validity & credibility of
  - assessment process
  - care plans

- Can demonstrate to policy makers
  - Use of evidence-based practices as basis for making decisions in allocating scarce resources
Findings on TCARE

- Caregivers receiving TCARE experienced lower levels of:
  - Depression
  - Stress burden
  - Objective burden
  - Identity Discrepancy
  - Intention to place
TCARE Implementation

- Statewide Implementation:
  - 121 Care managers certified in TCARE
  - TCARE Screen in AIMS
  - TCARE Assessment going into AIMS
  - ADRC staff trained to use TCARE Screen
TCARE Implementation

• Regularly scheduled Conference Calls for HCBS and Medicaid-Waiver Care Managers

• Care Managers go to the UWM website to complete TCARE protocols
Of 264 caregivers screened for TCARE:

- 184 have moderate or high levels of depression
- 162 have moderate or high stress burden
- 193 have moderate or high objective burden
- 220 have moderate or high identity discrepancy
- 46 indicate they “definitely would” or “probably would consider placing the care receiver in a different type of care setting, given the care receiver’s current condition
Powerful Tools for Caregivers

• The PTC six week evidence-based education program for family caregivers has been shown to improve:
  • Self-Care Behaviors (increased exercise, relaxation, and medical check-ups)
  • Management of Emotions: (reduced guilt, anger, and depression)
The PTC six week evidence-based education program for family caregivers has been shown to improve:

- **Self-Efficacy**: (increased confidence in coping with caregiving demands)
- **Use of Community Resources**: (increased utilization of local services)
Statewide Implementation with funding through ACL Systems Integration Part B Grant:

- All 12 AAAs will receive funding to recruit and train class leaders
- Class leaders will teach the course to family caregivers
"I think we can get the votes if we call it 'The Faith-Based Family Caregivers Mental Health Initiative for Homeland Security Act.'"