Finding the Right Fit: Choosing Dementia Caregiving Programs for your Organization and Community

Heather L. Menne, PhD
David M. Bass, PhD

Part of the National Alzheimer’s and Dementia Resource Center webinar series sponsored by the Administration for Community Living.
Readiness for Action
Key Considerations Before Launching a New Dementia Program

Heather L. Menne

January 28, 2020
Acknowledgments

- Salli Bollin, MSW, LSW, Executive Director, MemoryLane Care Services
- American Society on Aging (ASA) Leadership Institute
Background

- Growth of evidence-based programs
  - 200 + dementia interventions (Gitlin et al., 2015)
- Need for innovative and expanded programming
- Federal and foundation motivation
- Collaboration opportunities

- Challenges to implementation and delivery (Bass & Judge, 2010; Primetica et al., 2015)
Readiness for Action

- Organization Clients
- Organization Infrastructure
- Community Characteristics
- Program Characteristics
- Meaningfulness
- Marketing & Costs

Sustainability
Meaningfulness

- Organizational culture and mission
- Desired outcomes
- Purposeful engagement
Community Characteristics

- Size of target population
- Competition
- Stakeholders
- Funding streams

Sustainability
Organization Clients

- Values
- Needs
- Ability levels
- Willingness
Organization Infrastructure

- Leadership
  - Champion!
- Staff
  - Support, supervision, and training
- Openness to change/new
- Organization-Program “fit”
  - Alignment with other organization programs and the way the organization delivers services
- Availability of or access to experts
Program Characteristics

- Program-Organization “fit”
- Evidence
- Target population (e.g., early stage dementia, caregivers)
- Available manual, protocols, procedures, etc.
- Program monitoring, evaluation, quality metrics
- Possible modifications
- Implementation requirements are reasonable for the organization:
  - not too difficult, time-consuming, or costly
- Current with technology and care practices

Sustainability
Marketing & Costs

- Advertisements
- Social Media
- Reimbursement
- Payment structure
- Direct and in-direct costs
Sustainability

- **Internal**
  - Client, staff, and leadership buy-in
  - Institutionalize program long-term

- **External**
  - Large enough target population
  - Economically feasible
  - Beneficial client outcomes
  - Expanding revenue streams
Finding the Right Fit: Choosing Dementia Caregiving Programs for your Organization and Community

David M. Bass, PhD, Senior Vice President & Senior Research Scientist
Benjamin Rose Institute on Aging

- Online tool launched January 2020 as part of Family Caregiver Alliance’s Website (https://bpc.caregiver.org/)

- Goal: To increase knowledge and adoption of non-pharmacological, evidence-based programs for family and friend caregivers by healthcare and community service organizations
Builds upon a Major Advance in Caregiving

- Development and testing of many non-pharmacological programs that have proven benefits for family or friend caregivers
- Some programs also have proven benefits for persons living with dementia
- Some programs are ready for broad scale community implementation

## Examples of Assistance Programs Offer

<table>
<thead>
<tr>
<th>Task Description</th>
<th>Support Offered</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessing and/or managing symptoms and caregiving</td>
<td>Managing daily tasks and activities</td>
</tr>
<tr>
<td>Accessing or monitoring medical care</td>
<td>Providing end-of-life care</td>
</tr>
<tr>
<td>Understanding symptoms, diagnosis, and/or prognosis</td>
<td>Involving and coordinating help from family and friends</td>
</tr>
<tr>
<td>Planning for care</td>
<td>Finding, accessing and coordinating services</td>
</tr>
<tr>
<td>Communicating effectively with persons with dementia</td>
<td>Dealing with transitions in care and caregiving</td>
</tr>
<tr>
<td>Dealing with legal and/or financial issues</td>
<td>Relationship between caregiver and person receiving care</td>
</tr>
<tr>
<td>Coping with illness and/or caregiving</td>
<td>Maintaining health and wellness</td>
</tr>
</tbody>
</table>
Limited Program Availability

- Despite proven benefits, most proven programs are not currently offered by healthcare and community organizations
- Most are not available to families
- **Problem** - Many professionals do not know about these programs
  - No easy-to-use comprehensive, updated information source
  - Limited and/or difficult to find information in published articles on implementation characteristics
    - ✓ Manuals
    - ✓ Characteristics of delivery staff
    - ✓ Training for delivery staff
    - ✓ Costs to deliver


Best Practice Caregiving - Part of the Solution

• Easy-to-use online tool for professionals
• 42 proven dementia caregiving programs
• For each program it includes:
  ✓ Comprehensive program profile
  ✓ Detail on implementation features
  ✓ Experiences of current delivery sites
  ✓ Overview of research studies and findings
  ✓ Complete program bibliographies
  ✓ Contact information for developers or distributors
Best Practice Caregiving – Program Eligibility

- 1 or more completed randomized or non-randomized controlled trial, or pre/post-test study with no control group
  - Sample with at least 50% dementia caregivers
  - Conducted in US
  - At least 1 statistically significant, published, beneficial caregiver outcome

- 1 or more implementations that delivered the program as part of an organization’s regular service portfolio

- Availability of permission/license to offer the program and required delivery tools (e.g., manuals, training, record keeping systems)
Guiding Principles - *Best Practice Caregiving*

- Inclusive definition of “Evidence-Based”
- Provide detailed information; not subjective ratings
- Focus on:
  - Program and implementation characteristics
  - Experiences of delivery sites
  - Basics about the research (e.g., design, outcomes)
  - All the information needed for organizations to take the next step toward adoption
- Must be an updated and sustainable online resource
- Identify gaps to guide new program development
Methodology for Program Profiling

1. Developer and Distributor Survey
2. Manuals Review
3. Delivery Site Survey
4. Studies Review
# 42 Programs for Dementia Caregivers

<table>
<thead>
<tr>
<th></th>
<th>1. Active Caregiving: Empowerment Skills (ACES)</th>
<th>15. Early-Stage Partners in Care (EPIC)</th>
<th>29. Savvy Caregiver</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>3. Adult Day Services Plus (ADS PLUS)</td>
<td>17. The Memory Club</td>
<td>31. Skills2Care®</td>
</tr>
<tr>
<td></td>
<td>5. Aging Brain Center (Collaborative Care)</td>
<td>19. Mindfulness-Based Alzheimer’s Caregiving</td>
<td>33. Stress-Busting Program for Family Caregivers</td>
</tr>
<tr>
<td></td>
<td>6. Alzheimer’s Disease Coordinated Care for San Diego Seniors (ACCESS)</td>
<td>20. Mindfulness-Based Dementia Care</td>
<td>34. Support Health Activities Resources Education (SHARE)</td>
</tr>
<tr>
<td></td>
<td>7. At the Crossroads</td>
<td>21. Mindfulness-Based Stress Reduction for Dementia Caregivers</td>
<td>35. Telehealth Education Program for Caregivers of Veterans with Dementia (SUSTAIN)</td>
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<tr>
<td></td>
<td>9. BRI Care Consultation</td>
<td>23. New York University Caregiver Intervention (NYUCI)</td>
<td>37. Tailored Caregiver Assessment and Referral (TCARE)</td>
</tr>
<tr>
<td></td>
<td>12. CALMA: Reach to Caregivers</td>
<td>26. Reducing Disability in Alzheimer’s Disease (RDAD)</td>
<td>40. Together We Can!</td>
</tr>
<tr>
<td></td>
<td>13. Care of Persons with Dementia in their Environments (COPE)</td>
<td>27. REACH Community</td>
<td>41. UCLA Alzheimer’s and Dementia Care (UCLA ADC)</td>
</tr>
<tr>
<td></td>
<td>14. Core Partners Reaching Out (CarePRO)</td>
<td>28. REACH VA</td>
<td>42. Yogic Meditation</td>
</tr>
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</table>
For 40 years the Family Caregiver Alliance (FCA) has supported and sustained the important work of families and friends nationwide who care for adult loved ones with chronic, disabling health conditions.

- Subscribe to FCA eNewsletters
- Online support groups for caregivers
- Share your caregiver story
- WE CALL IT caregiving
- Visit FCA's 40th Anniversary page

Best Practices for Professionals
An easy-to-use, data-rich resource that offers providers detailed information on more than 40 proven dementia care giving programs located across the U.S.:

- Compare programs by feature
- Select programs that best match your client
- Learn from key research studies & real-world experiences

Visit Now
Dementia Care Programs

Best Practice Caregiving is a free online database of proven dementia programs for family caregivers. It offers a searchable, interactive, national database of vetted, effective programs that offer much-needed information and support. The database is an invaluable tool for healthcare and community-based organizations, as well as funders and policy makers to discover and share high quality programs for caregivers.

In the Best Practice database you will find detailed information about:

- focus of each program (e.g., reducing stress, understanding dementia, planning care, skill-building, health & wellness, etc.)
- program implementation
- research findings
- direct utilization experiences of delivery sites
- program developer information.

Click Here for Programs ➤
Our generous project funders include:

The John A. Hartford Foundation
Dedicated to Improving the Care of Older Adults

The Retirement Research Foundation

Archstone Foundation
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Baylor College of Medicine  
Michael E. DeBakey Veterans Affairs Medical Center

Carol Zernial  
WellMed Medical Management, Inc.
Find Evidence-Based Programs

Filter by
- Program Overview
- Types of dementia
- Other chronic conditions
- Languages
- Cost or fee to obtain license
- Program Components
- Mode of delivery
- Program recipient
- Types of Assistance
- Program Characteristics
- Type of delivery person
- Initial training provided
- Study Findings
- Caregiver Well-Being
- Support for Caregiver
- Person with Dementia Well-Being
- Support for Person with Dementia
- Person with Dementia Service Utilization and Service Costs
- Staff, Providers, Organizations, or Communities

Find Evidence-Based Programs

Filter by Program Name or Description

Showing All

Sort by: Program Name A-Z

Showing 1 - 20 of 42 Programs

Acquiring New Skills While Enhancing Remaining Strengths (ANSWERS)

6 in-person, individual education and skills-training sessions for caregivers and persons living with dementia, focused on practical coping strategies and managing symptoms based on cognitive rehabilitation principles.

Delivery Person
Professional or paraprofessional

One-on-one Format
6 in-person sessions for caregivers and persons with dementia

Languages
English

Session Length
1.5 hours

Program Length
6 weeks

Learn More

Active Caregiving: Empowering Skills (ACES)

4 in-person or telephone, group education and skills-training sessions for caregivers, focused on stress management, pleasant events, and strategies for reducing behavioral symptoms.

Delivery Person
Lay leader, Professional or paraprofessional

Group Format
4 in-person or telephone sessions for caregivers

Languages
English, Spanish, Vietnamese

Session Length
2 hours

Program Length
4 weeks

Learn More

by Katherine S. Judge, PhD

by Dolores Gallagher-Thompson, PhD

Compare (up to 3)
Active Caregiving: Empowering Skills (ACES)
4 in-person or telephone, group education and skills-training sessions for caregivers, focused on stress management, pleasant events, and strategies for reducing behavioral symptoms.

**Delivery Person**  Lay leader, Professional or paraprofessional
**Group Format**  4 in-person or telephone sessions for caregivers
**Languages**  English, Spanish, Vietnamese
**Session Length**  2 hours
**Program Length**  4 weeks

Building Better Caregivers
6 in-person, group education sessions for caregivers, focused on techniques for reducing stress, action planning, problem-solving, and decision-making.

**Delivery Person**  Lay leader
**Group Format**  6 in-person sessions for caregivers
**Languages**  English, Spanish, Chinese (includes Chinese, Mandarin and Cantonese)
**Session Length**  2.5 hours
**Program Length**  6 weeks
Find Evidence-Based Programs

Active Caregiving: Empowering Skills (ACES)
4 in-person or telephone, group education and skills-training sessions for caregivers, focused on stress management, pleasant events, and strategies for reducing behavioral symptoms.

Delivery Person: Lay leader, Professional or paraprofessional
Group Format: 4 In-person or telephone sessions for caregivers
Languages: English, Spanish, Vietnamese
Session Length: 2 hours
Program Length: 4 weeks

Care Partners Reaching Out (CarePRO)
10 in-person and telephone, group and individual psycho-educational and skills-training sessions for caregivers, focused on strategies for difficult caregiving situations, reducing stress, improving mood, and communication.

Delivery Person: Lay leader, Professional or paraprofessional
One-on-one Format: 5 telephone sessions for caregivers
Group Format: 5 In-person sessions for caregivers
Languages: English, Spanish
Session Length: 2.5 hours for In-person sessions; 30-40 mins for telephone sessions
Program Length: 10 weeks
For More Information

Developers
David M. Bass, PhD

Contacts
Branislava Primetica
11869 Fairhill Road, Cleveland, OH 44120
bprimetica@benrose.org
216-373-1662

www.benrose.org
Providers: Manuals, Training, Other Resources

Program Articles
- Outcomes for patients with dementia from the Cleveland Alzheimer’s managed care demonstration.
- The Cleveland Alzheimer’s managed care demonstration: Outcomes after 12 months of implementation.
- Findings From a Real-World Translation Study of the Evidence-Based “Partners in Dementia Care”.
- Caregiver outcomes of Partners in Dementia Care: Effect of a care coordination program for veterans with dementia and their family members and friends.
- A controlled trial of Partners in Dementia Care: Veteran outcomes after six and twelve months.
- A break-even analysis for dementia care collaboration: Partners in Dementia Care.
- Impact of the care coordination program “Partners in Dementia Care” on veterans’ hospital admissions and emergency department visits.
- Partners in Dementia Care: A care

BRI Care Consultation™
Ongoing telephone and email, individual care-coaching for caregivers and persons living with dementia and/or other chronic conditions, focused on accessing community and family resources, quality information, and emotional support.

Delivery Person
Professional or paraprofessional

One-on-one Format
Ongoing telephone sessions and email for caregivers and/or persons with dementia and/or other chronic conditions

Languages
English

Session Length
Varies

Program Length
Minimum of 3 months

Program Information
- Program Overview
- Program Components
- Program Characteristics

Survey of Delivery Sites
- Delivery Site Survey Information
- Organization and Program Information
- Site Experiences

Research Evidence
- Program Impact and Outcomes
- Study Characteristics
### Program Components

#### Conceptual or Theoretical Frameworks
- Strength-Based Approach
- Stress Process Model for Caregivers
- Stress Process Model for persons with dementia

#### Program Features

<table>
<thead>
<tr>
<th>Types of assistance program provides:</th>
<th>Provided to:</th>
<th>Direct Assistance</th>
<th>Information</th>
<th>Training</th>
<th>Referring</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessing and Monitoring Dementia Symptoms, Care, and/or Caregiving</td>
<td>PWD, CG</td>
<td>✓</td>
<td>✓</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Coordinating and/or Monitoring Care and Services *</td>
<td>PWD, CG</td>
<td>✓</td>
<td>✓</td>
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<tr>
<td>Daily Tasks</td>
<td>PWD, CG</td>
<td>✓</td>
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<td>✓</td>
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<tr>
<td>Diagnosis or Prognosis of Dementia</td>
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<tr>
<td>End-of-Life Care</td>
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<tr>
<td>Finances or Financial-Related Tasks</td>
<td>PWD, CG</td>
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<tr>
<td>Improving or Maintaining Health and Wellness</td>
<td>PWD, CG</td>
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<tr>
<td>Involving Family and Friends in Care *</td>
<td>PWD, CG</td>
<td>✓</td>
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<td>Managing or Coping with Care and/or Caregiving *</td>
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<td>Relationship of Persons with Dementia and Caregiver</td>
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<tr>
<td>Skills for Communicating with Persons with Dementia</td>
<td>CG</td>
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<tr>
<td>Transitions in Where Care is Provided</td>
<td>PWD, CG</td>
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<td>Understanding or Managing Symptoms of Dementia *</td>
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</table>

* = Primary type of assistance delivered by program
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<tr>
<td>Coordinating and Monitoring Home and Community Services and Other Community Resources</td>
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<td>Creating or Updating Plans for Care</td>
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<tr>
<td>Making Advanced Directives and Other Legal Planning (Not related to end-of-life)</td>
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### Target Populations

**Types of dementia**
- All types of dementia

**Other chronic conditions**
- Adults with a physical, mental, or cognitive health conditions or disabilities (e.g. arthritis, diabetes, cancer, depression, anxiety, physical frailty, developmental disabilities)

### Program Costs

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost or fee to obtain license</th>
<th>Base or certification cost</th>
<th>Included in cost</th>
<th>Number of delivery persons included in cost</th>
<th>Length in years of license or certification</th>
<th>Renewal cost</th>
<th>Additional costs</th>
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<tbody>
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<td>License/certification to deliver the program</td>
<td>Yes</td>
<td>$10,200</td>
<td></td>
<td>3</td>
<td>1</td>
<td>$3,300</td>
<td>$500 for each additional licensed individual beyond three per year; Optional $1,200 per year fee for secure data-hosting by Benjamin Rose Institute on Aging; Replacement training costs; Additional costs for software modification</td>
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<tr>
<td>Additional information</td>
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<td></td>
<td></td>
<td>Record-keeping system is cloud-based at no additional cost</td>
</tr>
</tbody>
</table>
## Program Information

<table>
<thead>
<tr>
<th>Section</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Overview</td>
<td></td>
</tr>
<tr>
<td>Program Components</td>
<td></td>
</tr>
<tr>
<td>Program Characteristics</td>
<td></td>
</tr>
<tr>
<td>Staffing</td>
<td></td>
</tr>
<tr>
<td>Disciplines and degrees of delivery persons</td>
<td>Social Work - Baccalaureate, Social Work - Degree not specified, Nursing - Baccalaureate, Nursing - Degree not specified, Other related fields - Baccalaureate</td>
</tr>
</tbody>
</table>

### Staffing

#### Disciplines and degrees of delivery persons
- Social Work - Baccalaureate
- Social Work - Degree not specified
- Nursing - Baccalaureate
- Nursing - Degree not specified
- Other related fields - Baccalaureate

### Initial Training for Delivery Persons

**Initial training provided**
- Yes

**Total time**
- 10 hours

**Number of sessions**
- 3 sessions

**Mode**
- Telephone
- Webinar or online

**Procedures for demonstrating mastery**
- Practice cases or mock cases with quality monitoring

### Refresher Training for Delivery Persons

**Refresher training provided**
- Yes

**Total time**
- 8 hours
## Survey of Delivery Sites

### Delivery Site Survey Information

### Organization and Program Information

#### Delivery History

- **Average number of months site has delivered the program**: 31.7
- **Percent of sites that stopped delivering program in past 12 months**: 10%

#### Program User Characteristics

**Number of participants (average in past 12 months)**

<table>
<thead>
<tr>
<th>Category</th>
<th>Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>All participants</td>
<td>145.1</td>
</tr>
<tr>
<td>Persons with a dementia diagnosis</td>
<td>32.7</td>
</tr>
<tr>
<td>Persons with memory problems without a dementia diagnosis</td>
<td>8.8</td>
</tr>
<tr>
<td>Persons with chronic illnesses or disabilities, other than dementia or memory problems</td>
<td>15</td>
</tr>
<tr>
<td>Family or friend caregivers of persons with a dementia diagnosis</td>
<td>63.7</td>
</tr>
<tr>
<td>Family or friend caregivers of persons with memory problems without a dementia diagnosis</td>
<td>16.5</td>
</tr>
<tr>
<td>Family or friend caregivers of persons with chronic illnesses or disabilities other than dementia or memory problems</td>
<td>8.3</td>
</tr>
</tbody>
</table>

**Persons with dementia characteristics (average percent in past 12 months)**

<table>
<thead>
<tr>
<th>Category</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 60 years of age</td>
<td>4%</td>
</tr>
<tr>
<td>Living in rural area</td>
<td>37%</td>
</tr>
<tr>
<td>Veteran</td>
<td>21%</td>
</tr>
<tr>
<td>Male</td>
<td>40%</td>
</tr>
<tr>
<td>Living alone</td>
<td>4%</td>
</tr>
<tr>
<td>Program Impact</td>
<td>Perceived improvement rating (1=Strongly Disagree to 5=Strongly Agree)</td>
</tr>
<tr>
<td>----------------</td>
<td>---------------------------------------------------------------------</td>
</tr>
<tr>
<td>Caregiver well-being, strain and capacity to provide care</td>
<td>4.2</td>
</tr>
<tr>
<td>Person with dementia well-being</td>
<td>4.1</td>
</tr>
<tr>
<td>Family/friend support for caregiver and person with dementia</td>
<td>3.8</td>
</tr>
<tr>
<td>Perceived decreased rating (1=Strongly Disagree to 5=Strongly Agree)</td>
<td></td>
</tr>
<tr>
<td>Hospital, emergency department, and nursing home services</td>
<td>3.5</td>
</tr>
<tr>
<td>Person with dementia depression</td>
<td>3.6</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Organizational Strategies and Challenges</th>
<th>Getting needed non-financial resources and support for program delivery</th>
<th>6.7</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strategies for successfully obtaining resources and support (percent of sites; open-ended narrative responses)</td>
<td>Get support for program from high level administrators</td>
<td>22%</td>
</tr>
<tr>
<td></td>
<td>Submit proposals to the Area Agency on Aging for funding</td>
<td>11%</td>
</tr>
<tr>
<td></td>
<td>Educate internal intake staff to ensure prospective clients are referred</td>
<td>11%</td>
</tr>
<tr>
<td></td>
<td>Publicize program</td>
<td>11%</td>
</tr>
</tbody>
</table>
## Program Impact and Outcomes

<table>
<thead>
<tr>
<th>Category</th>
<th>Study 1</th>
<th>Study 5</th>
<th>Study 9</th>
<th>Study 10</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregiver Well-Being</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Symptoms of Depression</td>
<td>+</td>
<td>+</td>
<td></td>
<td>*</td>
</tr>
<tr>
<td>Care-Related Stress, Strain, or Burden</td>
<td>+</td>
<td>+</td>
<td></td>
<td>+</td>
</tr>
<tr>
<td>Efficacy, Skills, or Confidence in Caregiving and/or Symptom Management</td>
<td></td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Quality of Relationship with Person with Dementia</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Unmet Need</td>
<td>+</td>
<td>+</td>
<td></td>
<td>+</td>
</tr>
<tr>
<td>Health</td>
<td>+</td>
<td>+</td>
<td></td>
<td>+</td>
</tr>
<tr>
<td><strong>Support for Caregiver</strong></td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td><strong>Person with Dementia Well-Being</strong></td>
<td>+</td>
<td>+</td>
<td></td>
<td>+</td>
</tr>
<tr>
<td><strong>Support for Person with Dementia</strong></td>
<td></td>
<td>+</td>
<td></td>
<td>+</td>
</tr>
<tr>
<td><strong>Person with Dementia Service Utilization and Service Costs</strong></td>
<td>+</td>
<td>+</td>
<td></td>
<td>+</td>
</tr>
</tbody>
</table>

**Legend:**

+ = Beneficial  
* = No effect  
- = Adverse
Study 1 - Cleveland Alzheimer's Managed Care Demonstration

- Randomized controlled trial
- Individual Level randomization
- 210 Persons with dementia
- 210 Caregivers
- 2 data points: Baseline and 12 months post-baseline
- No major differences between the study and the original program

Eligibility Criteria for Study Inclusion of Persons With Dementia

- 55+
- Living in the Cleveland Alzheimer's Association Chapter service area
- Living outside a residential care facility
- Kaiser Permanente member

Source of data

- Structured questionnaire, survey, scale-CG

Funded by

- The Cleveland Foundation, The Elisabeth Severance Prentiss Foundation, Abington Foundation, Eva L. and Joseph M. Bruening Foundation, Administration on Aging and the Ohio Department of Aging, and Laura Horn Trust

Study Dates

- 1998 - 2001

Articles

- Caregiver Well-Being
- Symptoms of Depression
  - Results: Beneficial
  - Data type used for result: Difference Treatment-Control
  - Significance level: p<.05
Compare Evidence-Based Programs

**Support Health Activities Resources Education (SHARE)**
by Carol Whittatch, PhD, Steve Zarit, PhD, Ella Fernando, PhD, and Silvia Orsulic-Jeras, MA

5 in-person, individual care-planning sessions for caregivers and persons living with early-stage dementia, focused on managing symptoms, communication, and care values and preferences.

See Program

**Building Better Caregivers**
by Kate Long, DPh

6 in-person, group education sessions for caregivers, focused on techniques for reducing stress, action planning, problem-solving, and decision-making.

See Program

**UCLA Alzheimer's and Dementia Care (UCLA ADC)**
by David Reuben, MD

Ongoing in-person, telephone, email and online, individual dementia care management for caregivers and persons living with dementia, focused on medical, behavioral, and social needs.

See Program
## Support Health Activities Resources Education (SHARE)

**Resources Education (SHARE)**

**Program Overview**

- **Description of Conceptual or Theoretical Frameworks**: Stress Process Model of Caregiving
- **One-on-one format**: 5 in-person sessions for dyad plus 1 optional family session
- **Group format**: 6 in-person sessions for caregivers
- **Session length**: 1 - 1.5 hours
- **Program length**: 8 to 12 weeks
- **Total sessions**: 5
- **Optional or add-on sessions**: 1 group in-person session for family
- **Mode of delivery**: In-person
- **Program recipient**: Family/Friend Caregiver, Other Family or Friends, Person with Dementia

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## Building Better Caregivers

**Building Better Caregivers**

**Program Overview**

- **Description of Conceptual or Theoretical Frameworks**: Self-Efficacy Theory and Stress and Coping Theory
- **One-on-one format**: 6 in-person, group education sessions for caregivers, focused on techniques for reducing stress, action planning, problem-solving, and decision-making
- **Group format**: 6 in-person sessions for caregivers
- **Session length**: 2.5 hours
- **Program length**: 6 weeks
- **Total sessions**: 6
- **Optional or add-on sessions**: 0
- **Mode of delivery**: In-person
- **Program recipient**: Family/Friend Caregiver

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## UCLA Alzheimer’s and Dementia Care (UCLA ADC)

**UCLA Alzheimer’s and Dementia Care (UCLA ADC)**

**Program Overview**

- **Description of Conceptual or Theoretical Frameworks**: Chronic Care Model and Collaborative Care Model
- **One-on-one format**: Ongoing in-person, telephone, email and online, individual dementia care management for caregivers and persons living with dementia, focused on medical, behavioral, and social needs
- **Group format**: Varies
- **Session length**: Ongoing
- **Program length**: Ongoing
- **Total sessions**: 0
- **Optional or add-on sessions**: Email, In-person, Webinar or online, Telephone
- **Mode of delivery**: Email, In-person, Webinar or online, Telephone
- **Program recipient**: Family/Friend Caregiver, Person with Dementia
Next Steps for *Best Practice Caregiving*

Beginning a two-year dissemination grant

- Implement marketing and dissemination campaign
- Update program profiles
- Add newly identified and newly eligible programs
- Implement a financial sustainability plan
- Evaluate impact and refine content

Explore possible expansions

- Develop a consumer version
- Expand focus areas (e.g., non-US program, programs only for persons with dementia, programs for non-dementia caregivers)
More Information

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Best Practice Caregiving
https://bpc.caregiver.org/