



Caring for Caregivers of Older Adults with Dementia

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Financial Disclosures

Today's speakers have no relevant financial relationships to disclose.

Introduction



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Housekeeping



We will leave 10-15 minutes at the end of this session for Q&A. Throughout the webinar, you can put your questions into the Q&A/chat functions, and some may be answered in real time.



We will share instructions for claiming Continuing Education (CE) credit at the end of this webinar and via email within 48 hours.



You will receive the recording of this webinar via email within 48 hours



You can also access the webinar slides and recording from the Dementia Care Aware website and YouTube channel.

Dementia Care Aware Program Offerings



Warmline:

1-800-933-1789

A provider support and consultation service that connects primary care teams with Dementia Care Aware experts



Trainings:

- Online Trainings e.g., Cognitive Health Assessment training
- Monthly Webinars
- Podcasts



Interactive Case Conferences:

- UCLA and UCI ECHO (Extension for Community Healthcare Outcome) conferences



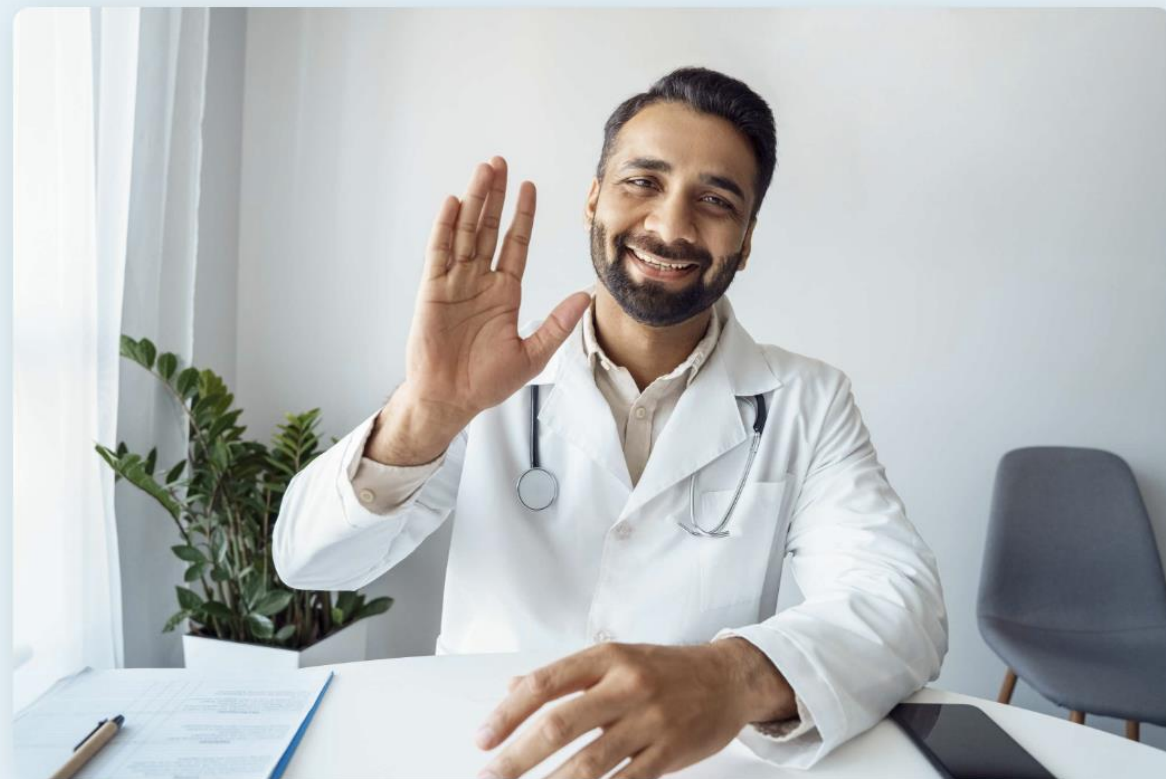
Practice change support:

- UCLA Alzheimer's and Dementia Care Program
- Alzheimer's Association Health Systems

Our Training

Welcome!

Welcome to the Dementia Care Aware (DCA) learning management system. This site provides access to the training modules for the DCA program. When you registered, you were automatically enrolled in the "*The Cognitive Health Assessment: The Basics*" course. Select Start in the "The Cognitive Health Assessment: The Basics" block below to begin.



Screening for Dementia: The Cognitive Health Assessment (CHA)

Goal: Screen patients older than age 65 annually (who don't have a pre-existing diagnosis of dementia)

Part 1



Take a Brief Patient History

Part 2



Use Screening Tools

Part 3



Document Care Partner Information

Sign Up for Upcoming Live CHA Trainings

- Dementia Care Aware offers the CHA training as a **free 1-hour live session** multiple times each month.
- Led by Dementia Care Aware partners at the Alzheimer's Association and UC, Irvine.
- Open for anyone who is interested.
- Eligible participants can claim **1 free CE/CME/MOC credit**.



Learning Objectives

1. Discover strategies to promote engagement with caregivers of older adults
2. Identify various screening tools to assess caregiver needs
3. Determine workflow strategies for delivering assessments to caregivers
4. Formulate ways to Integrate caregiver identification, assessment and support into practice

Dementia in the U. S.

PEOPLE LIVING WITH DEMENTIA

6.9M

2024

There are 6.7 million Americans living with dementia currently. (Source: Alzheimer's Association)

14M

2060

The number of Americans that will be diagnosed with Alzheimer's Disease (AD) by 2060 "barring the development of medical breakthroughs to prevent, slow or cure AD" is 14 million (Source: NIH)

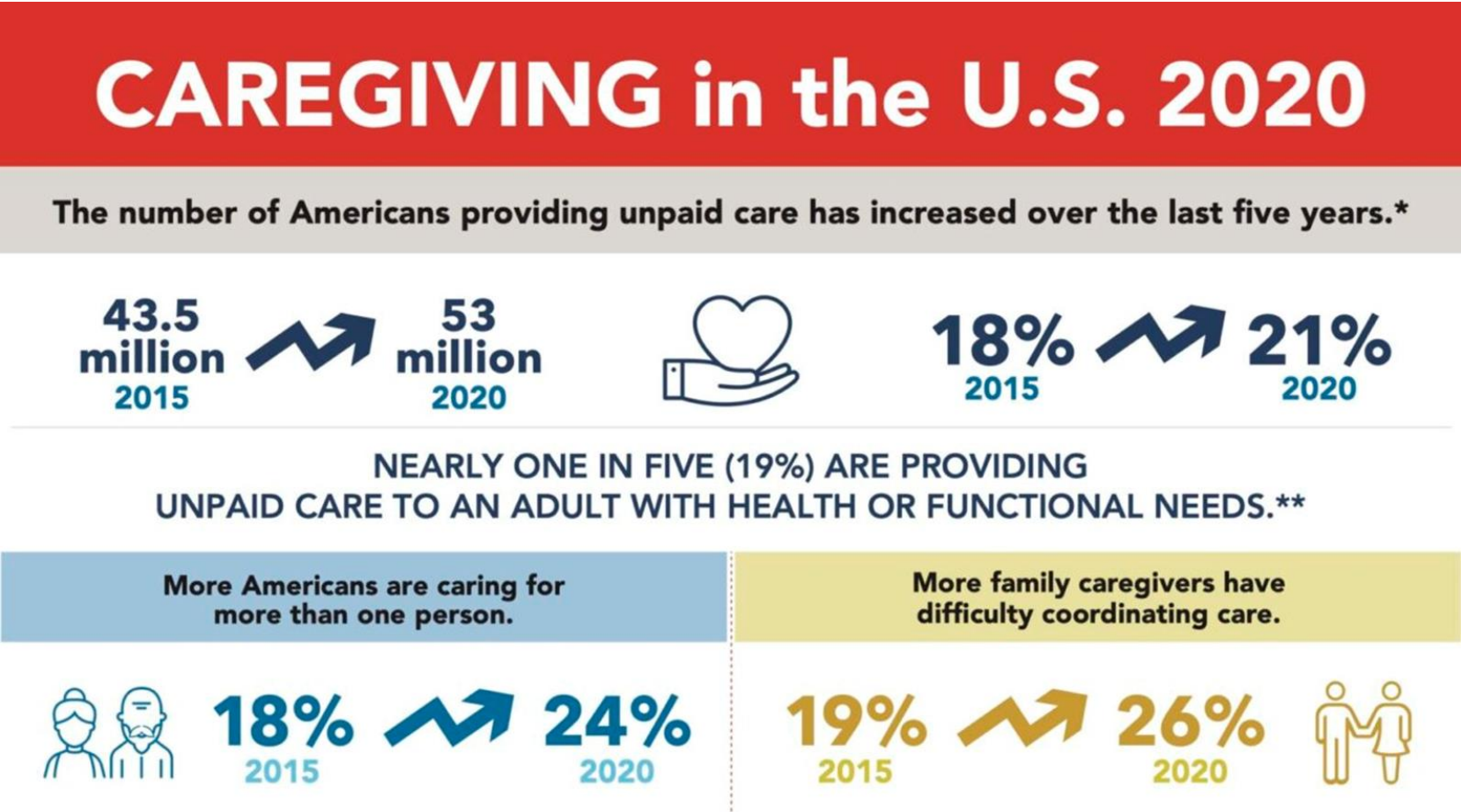
80%

**ARE
CONCERNED**

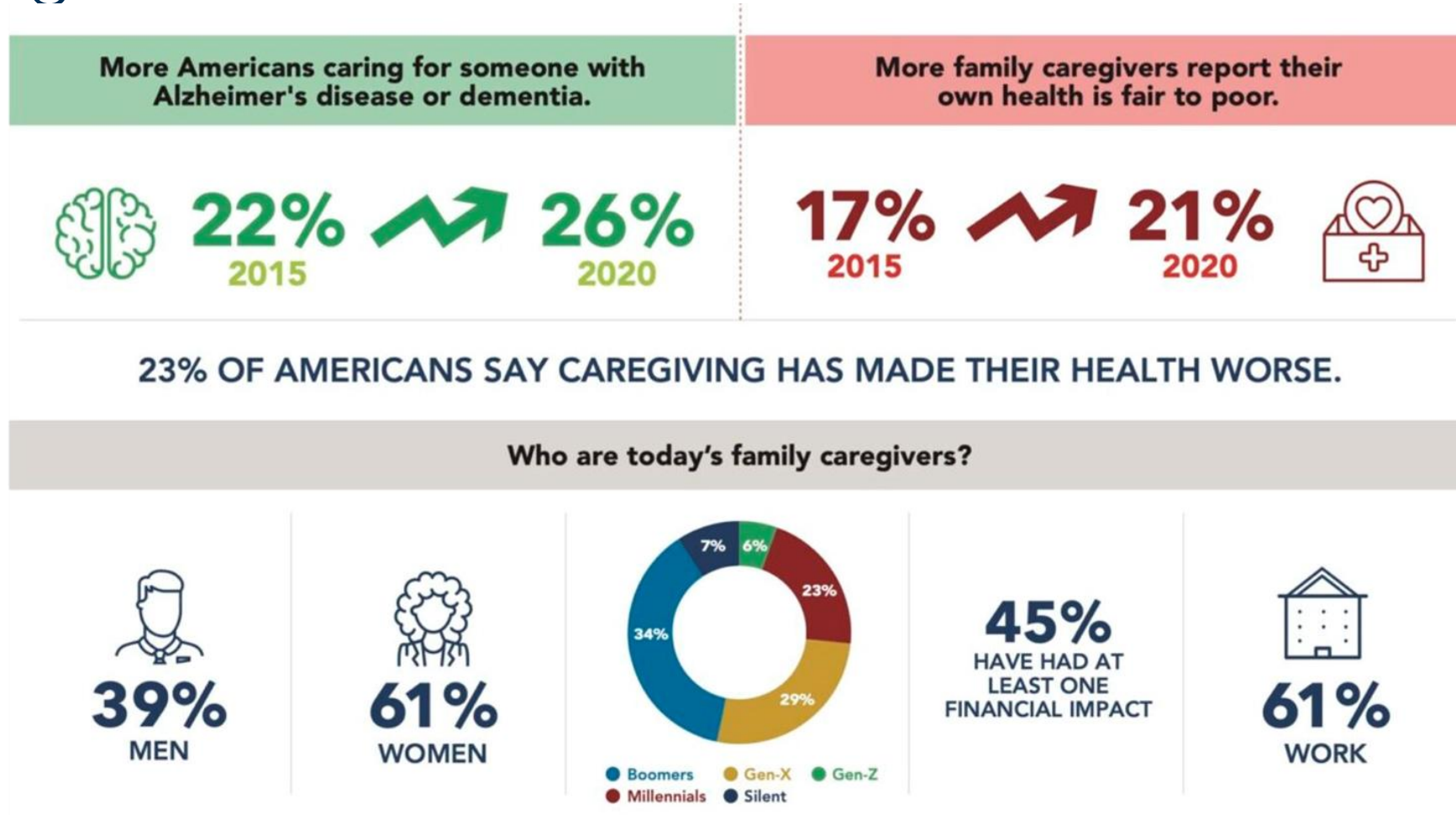
A whopping 80% of Americans are concerned about developing dementia, and 1 in 4 people think we can't do anything about it. (Source: Alzheimer's Disease International)

Transforming Life with Dementia. National Council of Dementia Minds, 2024 <https://dementiaminds.org/>

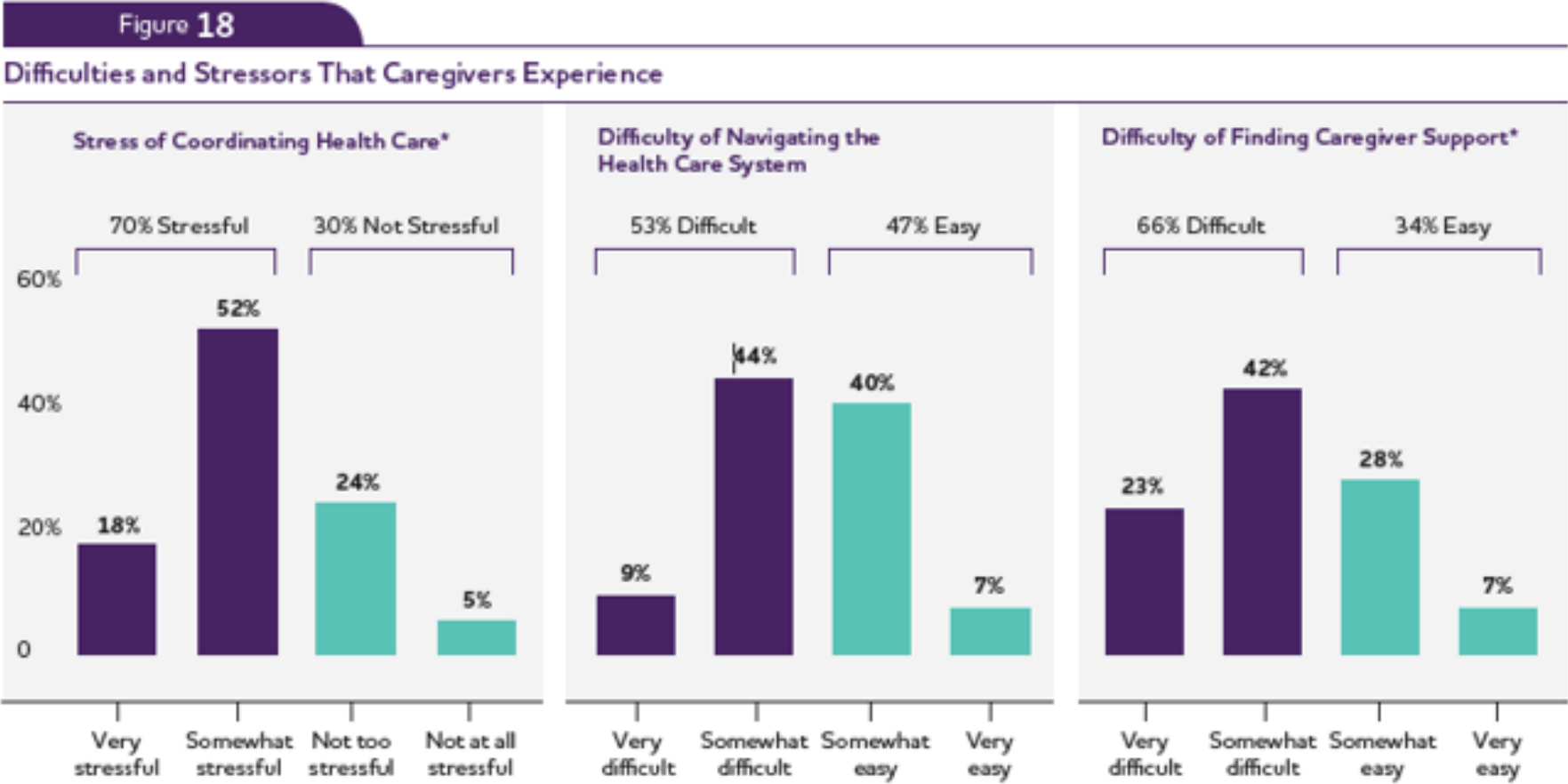
Caregiving in the U.S.



Caregiving in the U. S.



Stressors reported by caregivers of adults with dementia



Alzheimer's Association. 2024 Alzheimer's Disease Facts and Figures. Alzheimers Dement 2024;20(5).

Common challenges for caregivers

Caregivers have higher levels of stress than non-caregivers and care partners with chronic stress may be at greater risk of cognitive decline

Causes include:

- Managing multiple roles
- Adapting to new roles (complex medical, domestic)
- Isolation
- Physical demands



Common challenges for caregivers

Clinically significant signs of depressive disorder are present in 40%-70% of family or friend care partners of older adults

25%-50% of them meeting criteria for major depression

40% report experiencing two or more chronic diseases



Common challenges for caregivers

About 58% of care partners engage in medical and nursing tasks

- Administering medications
- Wound care
- Handling complex medical equipment in the home

Despite this, they are rarely asked “are you ready, willing, and able to provide this care?”



Why aren't we asking?

Less than a third (29%) of family caregivers say that a member of the care recipient's health care team has asked them about the support they need to provide care

Only 13% say a health care provider asked what they need to care for themselves



Engaging the caregiver starts with identification

Are you responsible for taking care of a family member or friend with a health condition or disability – helping with their medical care, household needs, shopping, or other help?

Does a family member or friend help you with your medical care, household needs, shopping, or other help?

- Include care questions as part of your interaction with patients
- Include care questions in the Medicare Annual Wellness Visit template
- Include care questions as part of Social Determinants of Health screening

Engaging the caregiver starts with identification

Identify caregivers via pre-visit or at visit

- Pre-visit – include a question on whether patient assists a family member or friend with a health condition or disability with their medical care, household needs, or other help in the pre-visit check-in OR if someone assists them with care
- At visit – Medical Assistant asks question above during patient rooming

Engaging the caregiver continues with assessing their needs

The What

Caregiver assessment is a systematic process of gathering information about a caregiving situation to identify the **specific problems, needs, strengths, and resources** of the family caregiver, as well as the **ability of the caregiver to contribute to the needs** of the care recipient.

The Why

Effectively assessing and addressing caregiver needs can **maintain the health and well-being** of caregivers, **sustain their ability to provide care**, **prevent or postpone nursing home placement**, and **produce better outcomes** for the care recipient.

AARP Public Policy Institute, Fact Sheet 25, www.aarp.org/ppi

Screening and Assessment tools

- Patient Health Questionnaire-2/9 (PHQ-2/9)
- General Anxiety Disorder-2/7 (GAD 2/7)
- Social Determinants of Health (SDoH)
- Burden Scale for Family Caregivers - short



Burden Scale for Family Caregivers- short version

	strongly agree	agree	disagree	strongly disagree		strongly agree	agree	disagree	strongly disagree
1. My life satisfaction has suffered because of the care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	6. My health is affected by the care situation.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I often feel physically exhausted.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	7. The care takes a lot of my own strength.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. From time to time I wish I could “run away” from the situation I am in.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	8. I feel torn between the demands of my environment (such as family) and the demands of the care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Sometimes I don’t really feel like “myself” as before.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	9. I am worried about my future because of the care I give.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Since I have been a caregiver my financial situation has decreased.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	10. My relationships with other family members, relatives, friends and acquaintances are suffering as a result of the care.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Strategies for delivering assessments

If caregiver is identified and is the patient....

1. Document in their medical record

2. Assess needs

- Medical Assistant conducts PHQ-2, GAD-2, and SDoH during rooming
- Provider asks about the type of care they provide and how it impacts their physical and mental health
- Provider offers list of community-based caregiver support services and other local or national resources

When social work or care management are part of the health system:

- Provider asks if they would like a member of the healthcare team to further discuss their needs and provide information on supportive care resources and referrals

Strategies for delivering assessments

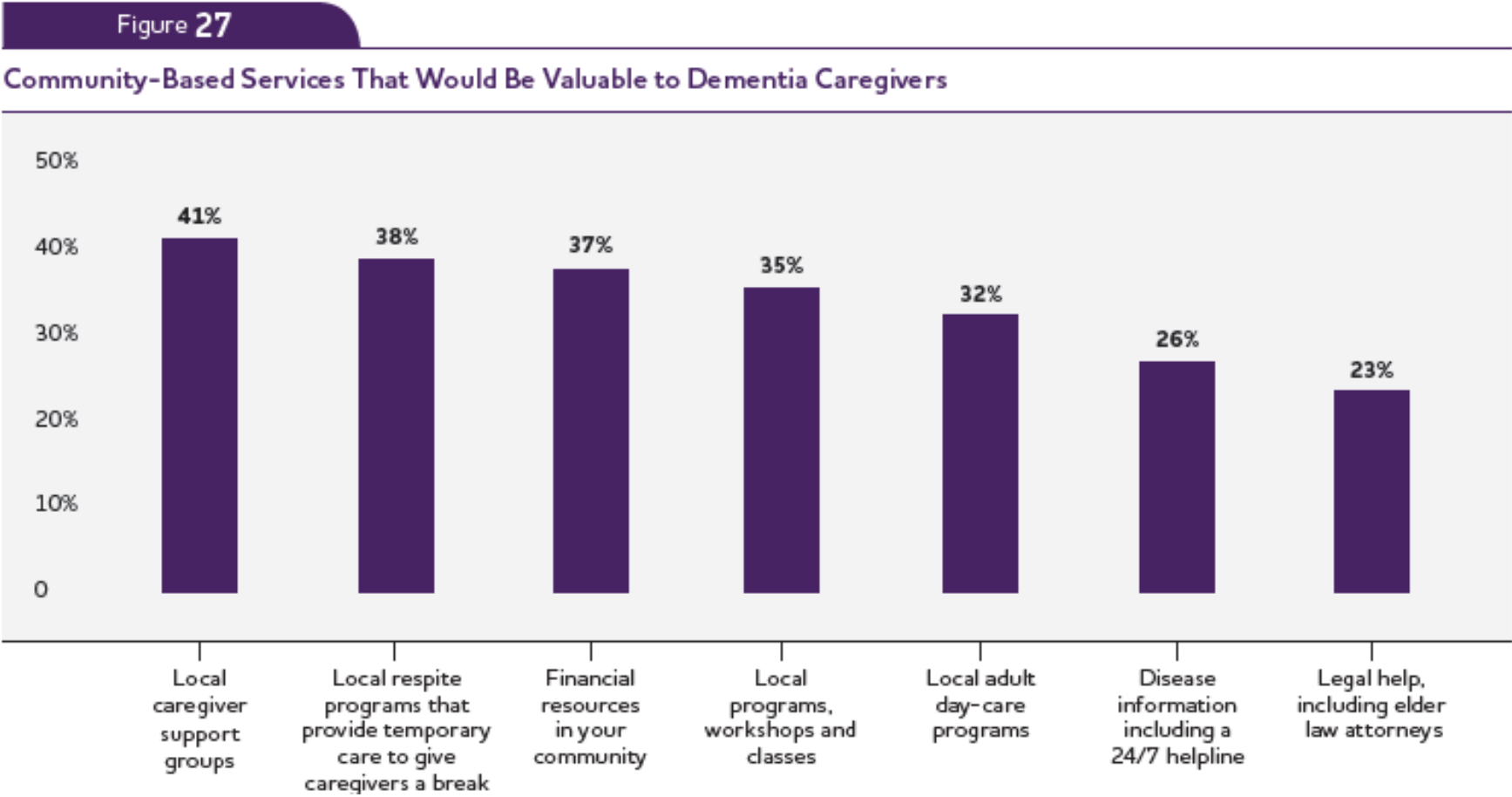
If caregiver is identified and is NOT the patient....

- Ask your patient if they want caregiver documented in their patient's medical record
- Ask caregiver if they would like information on resources available
 - Provide list of community-based care partner support services and other local or national resources

OR, when social work/care management are part of the system:

- Ask caregiver if they would like a member of the healthcare team to discuss their needs and provide information on resources available
 - CHW, Social Worker, or Care Manager conducts assessments, asking What Matters to the caregiver and identifying their strengths, during follow up call and discusses supportive care resources and referrals

Resources and supports for caregivers



Alzheimer's Association. 2024 Alzheimer's Disease Facts and Figures. *Alzheimer's Dement* 2024;20(5).

Resources and supports for caregivers

- Best Programs for Caregiving
- Alzheimer's Association
- Area Agency on Aging
- Department on Aging
- Department on Veterans Affairs
- Family Caregiver Alliance
- National Alliance for Caregiving



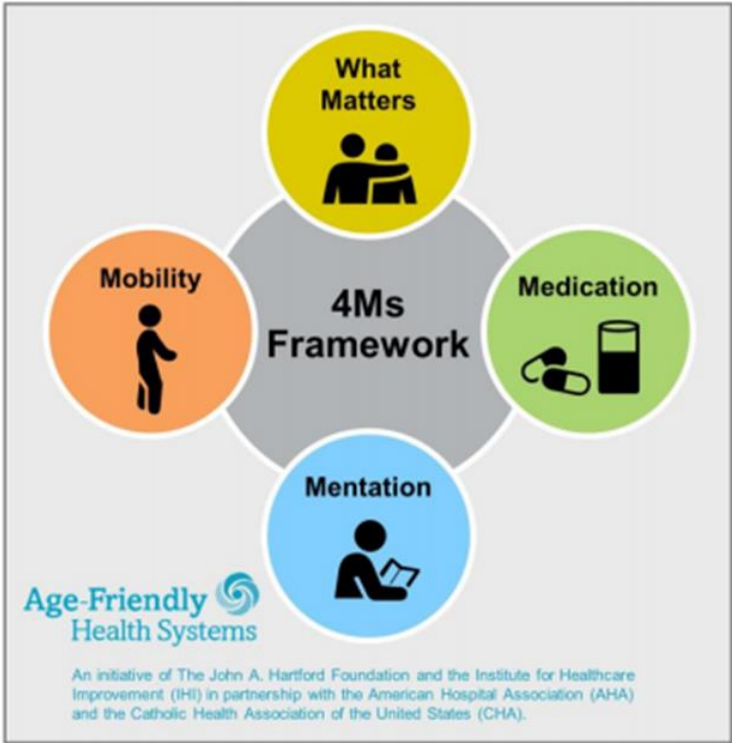
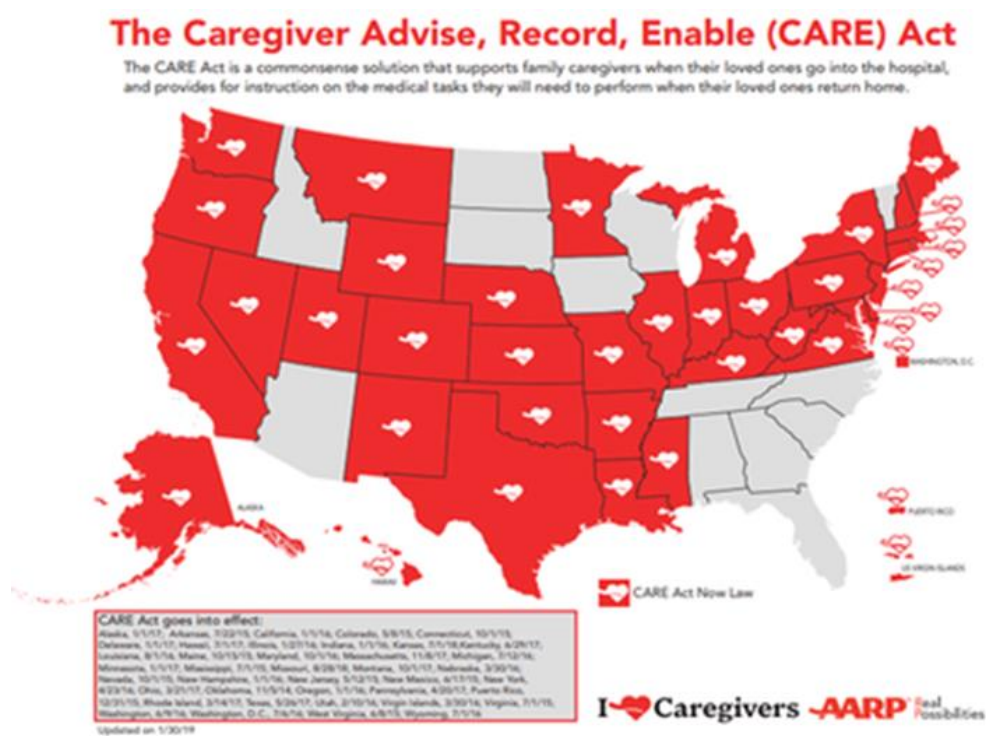
Best Programs for Caregiving



Best Programs for Caregiving is a free, online directory of top-rated programs that support family and friend caregivers of individuals living with dementia. <https://bpc.caregiver.org/>

Caring for Caregivers Model

Rooted in the CARE ACT and the 4Ms of an Age-Friendly Health System



What Matters

Know and align care with each older adult's specific health outcome goals and care preferences including, but not limited to, end-of-life care, and across settings of care.

Medication

If medication is necessary, use Age-Friendly medication that does not interfere with What Matters to the older adult, Mobility, or Mentation across settings of care.

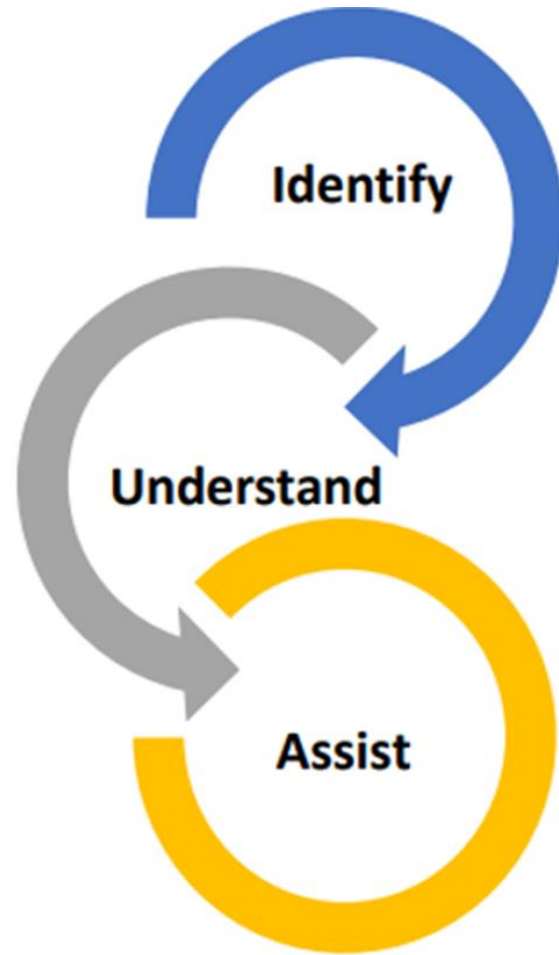
Mentation

Prevent, identify, treat, and manage dementia, depression, and delirium across settings of care.

Mobility

Ensure that older adults move safely every day in order to maintain function and do What Matters.

Caring for Caregivers key areas



Identify and record family caregivers in the older adult's health record in compliance with the Care Act

Understand and assess the needs of the dyad: family caregiver and care recipient utilizing a strengths-based approach

Based on "What Matters", work with the family caregiver to identify resources and develop a individualized, person-centered, customized plan

Caring for Caregivers intervention components

Planning for What Matters Sessions

Brief psychotherapy sessions based on What Matters to the caregiver and care recipient

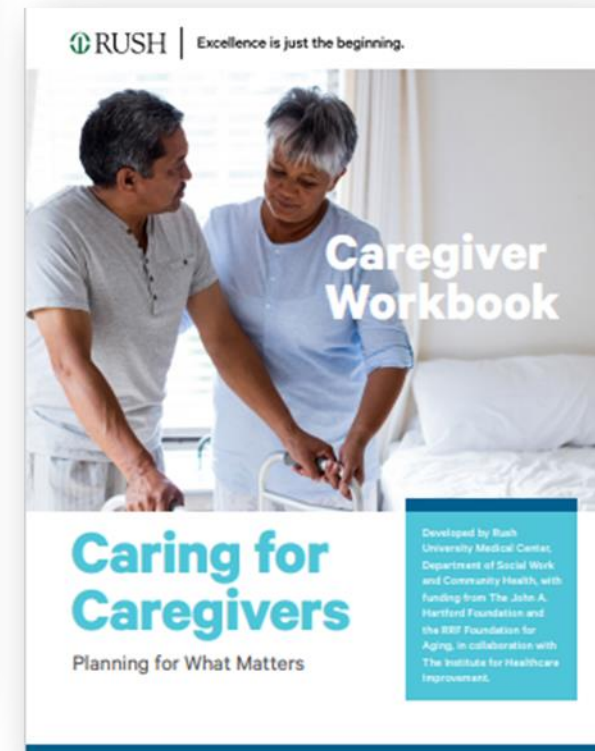
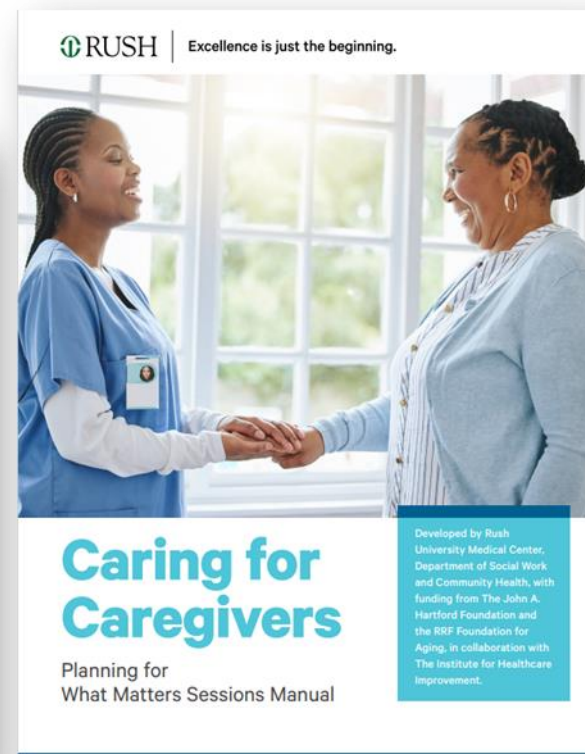
Skill-Building Meetings

Referrals to PTs, OTs, pharmacists, dietitians, and social workers to support caregiver well-being and increase confidence in providing care

Care Team Planning Meetings

Care team, caregiver, and care recipient meet to discuss goals of care that incorporate What Matters to the care recipient and caregiver

Caring for Caregivers implementation materials



Sharing Caring for Caregivers **nationwide**

Support for implementation is provided at no cost and includes:

- Training on the C4C model
- Educational materials to assist sites with implementation
- Technical assistance with adapting the model to your setting, customizing for specific populations and funding streams

Caregivers and the 4Ms



¿Brinda atención o apoyo a un adulto mayor?

Muchas personas no se dan cuenta de que son cuidadores, incluso si están asistiendo a un adulto mayor con las siguientes tareas:

- hacer mandados o proporcionar servicios de transporte;
- ayudar con las tareas domésticas o las finanzas;
- administrar la atención médica, como organizar medicamentos o programar citas con el médico.

Estos son solo algunos ejemplos de la asistencia que puede estar brindando como cuidador. Brindar atención puede ser tan abrumador como significativo, y es posible que este rol no haya sido una elección propia. Esta guía ofrece maneras de fortalecer el cuidado de un adulto mayor, al mismo tiempo que mantiene el cuidado de sí mismo.

Este folleto fue codiseñado por cuidadores de adultos mayores en colaboración con Rush University Medical Center.




Do you provide care or support for an older adult?

Many people don't realize they are caregivers, even if they are supporting an older adult by:

- Running errands or providing transportation
- Assisting with household chores or finances
- Managing health care, such as organizing medicine or making doctor appointments

These are just some examples of support you may be providing as a caregiver. Providing care can be as overwhelming as it can be meaningful, and you may not be in this role by choice. This guide offers ways to strengthen an older adult's care, while also maintaining care for yourself.

This brochure was co-designed by caregivers of older adults in partnership with Rush University Medical Center.




您是否为老年人提供护理或帮助?

许多人即使做了以下事情为老年人提供帮助,但并未意识到自己是护理者:

- 跑腿办事或运送货物
- 协助做家务或提供财务援助
- 管理医疗护理事务,例如组织医疗或预约医生

以上只是您作为一位护理者可能提供的帮助的一些示例。提供护理可能会让人不知所措,但却很有意义,并且您可能并非自愿担任护理者角色。本指南提供了加强老年人护理的方法,同时也有助于您保持自我护理。

本手册由老年人护理者与拉什大学医学中心联合设计。



- Ask about What Matters to the patient and to the care partner and assess caregiver readiness, willingness and ability to be in a care partner role
- Assure that the care partner understands the importance of the 4Ms for the older adult care recipient
- If the care partner is also an older adult, the 4Ms should be explored for themselves as well
- Assure that the care partner is screened for any issues of their own that may interfere with care provision

Thank you!





Have more questions? Get answers through our
Warmline @ **1-800-933-1789** or our [support page](#)!

Here are some examples!

What
do I prioritize if
my patient
tests positive
for cognitive
impairment?

What
medications
should I avoid if
my patient has
cognitive
complaints?

What cognitive
assessment should I
use for a Spanish
speaking patient
experiencing
homelessness?

Open your phone camera and scan
the QR code to submit questions:



Or visit: www.dementiacareaware.org

Dementia Care Aware on Social Media



Follow us and get updates delivered to your favorite social media channel:

- LinkedIn
- Facebook
- YouTube

How to claim Continuing Medical Education (CME) credit

Step 1. Please complete our evaluation survey using the link provided in the chat and a post-webinar email. Please select the correct link based on the credit type you are claiming.

- For this activity, we provide **CME credits** for MDs, NPs, APPs and PAs including **AAFP** (for family physicians)
- **ABIM MOC** (for internal medicine physicians).
- We also provide **CAMFT credits**, which in the state of California is approved, for Licensed Clinical Social worker, Licensed Professional Clinical Counselor, Marriage and Family Therapist, and Licensed Educational Psychologist

Step 2. Upon completing the evaluation survey, please scan a QR code or link to claim credit directly on the UCSF continuing education portal. :

- Use your phone camera to scan a QR code and tap the notification to open the link associated with the CME portal.
- Enter your first name, last name, profession, and claim **1 CE credit** for the webinar