



Why Care for the Caregiver?

Evidence-based, accredited family caregiver support program
that prevents burnout through precision tailored interventions



CMS 1115 Approved
(in 4 States)



AGING-IN-PLACE
1st PLACE WINNER



**Accredited
Evidence-Based**



**Preferred
Partner**

Challenges for Programs serving Caregivers

- Limited resources and staffing
- Caregivers' needs are complex and changing.
- Caregivers' time, energy and resources are limited.
- Must strategically & efficiently identify resources that address needs and that are:
 - Available
 - Accessible
 - Acceptable

Effective Caregiver Programs-

1

Services that meet
caregivers' current needs

2

Resources that are:

- Available,
- Accessible,
- Acceptable
- Affordable

3

Measures of success

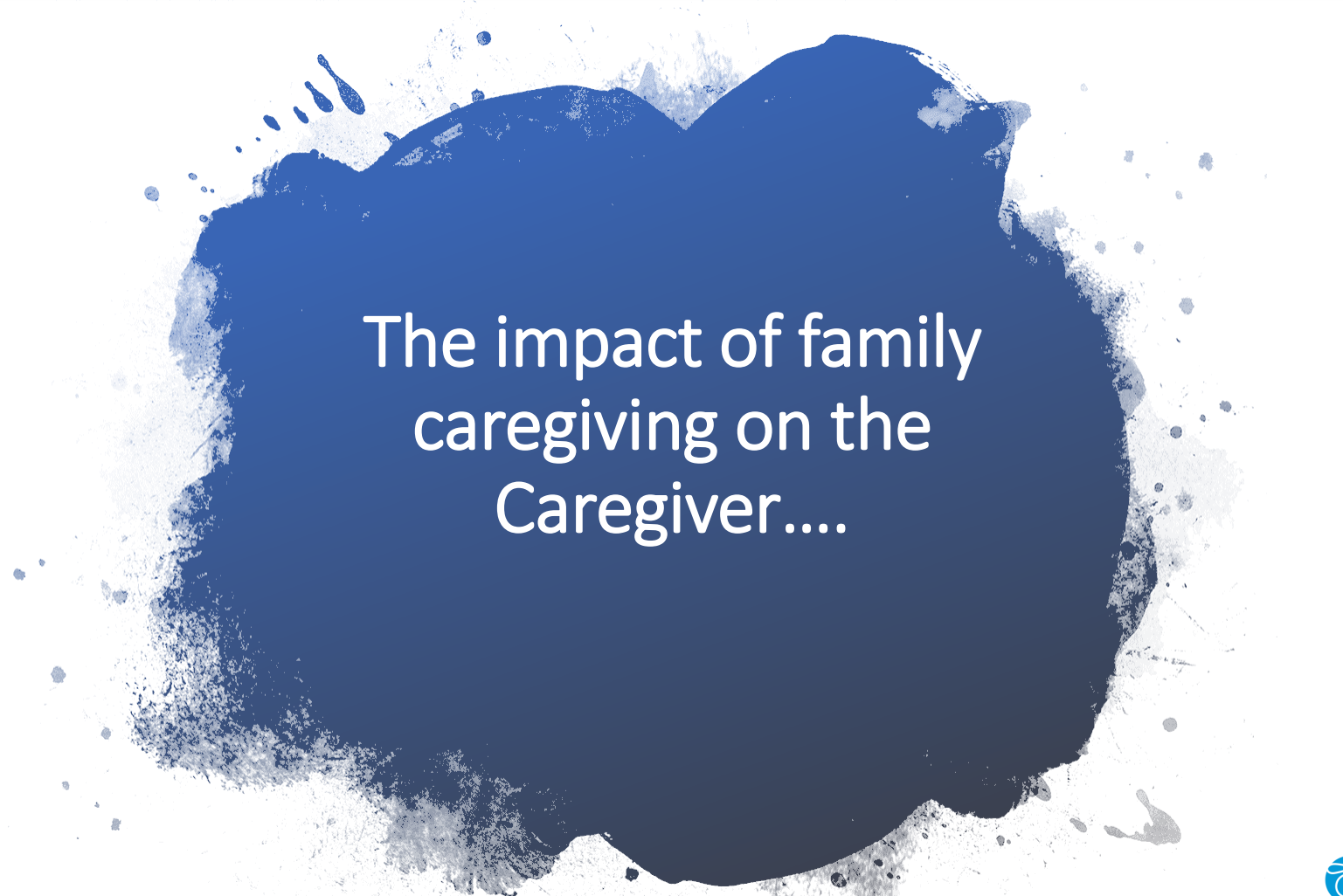
- Less depression
- Lower stress scores
- Ability to continue
- Better patient care
- Aging in place lengthened

4

Pathways to Monitor

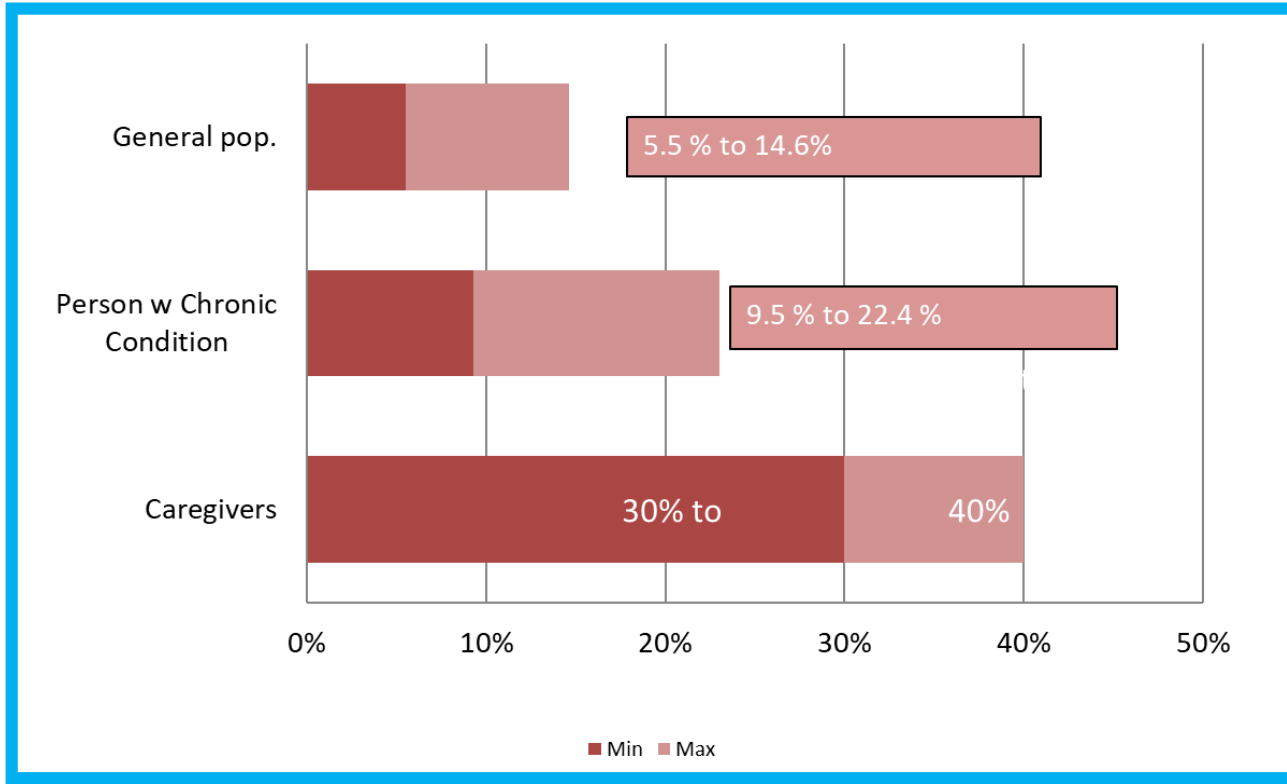
Studies show that the presence of a Family Caregiver:

- Improves compliance with medical regimens
- Reduces length of hospital stays
- Reduces number of readmissions
- Prevents unnecessary doctor and ER visits
- Prevents or delays placement into an institution or LTC
- Improves quality of life



The impact of family caregiving on the Caregiver....

Presence of Clinical Depression



Health & Costs of Health Care

- Caregivers have higher rates of:
 - Diabetes
 - High Cholesterol
 - Hypertension
 - COPD
 - Heart Disease
 - Depression

Collaborative Development & Testing

TCARE team led by Dr. Rhonda Montgomery

- Researchers at University of Wisconsin
- Thousands of Caregivers
- Hundreds of Care Managers & Administrators representing
 - State Units on Aging
 - Area Agencies on Aging
 - Alzheimer's Association
 - Home Care Organizations
 - Senior Care programs



Impact in Washington (2,300 caregivers)

20% + 21 mo. = \$20M

Less likely to
use Medicaid LTSS
service usage

Delay in nursing
home/ALF placement

Annual
savings



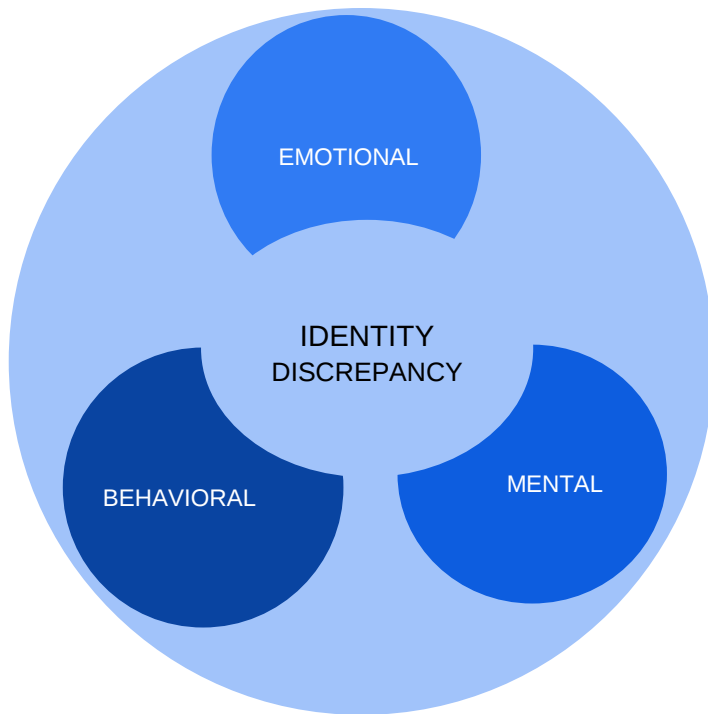
[RDA-Report 8.31 "Expanding Eligibility for the Family Caregiver Support Program in SFY 2012"](#)
Bridget Lavelle, PhD, David Mancuso, PhD, Alice Huber, PhD, Barbara E.M. Felver, MES, MPA



What do you think leads to caregiver burnout and intention to place?



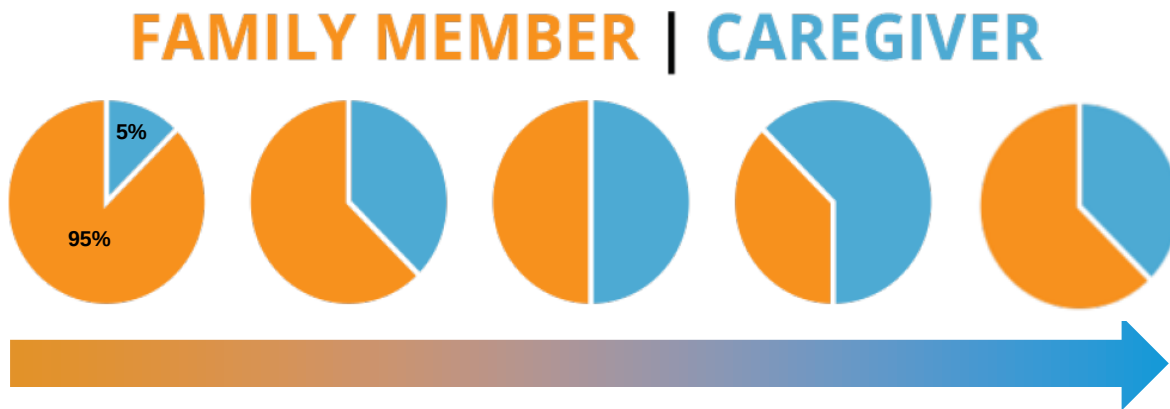
**Caregiving
Activities ≠
Predict Intention
To Place**



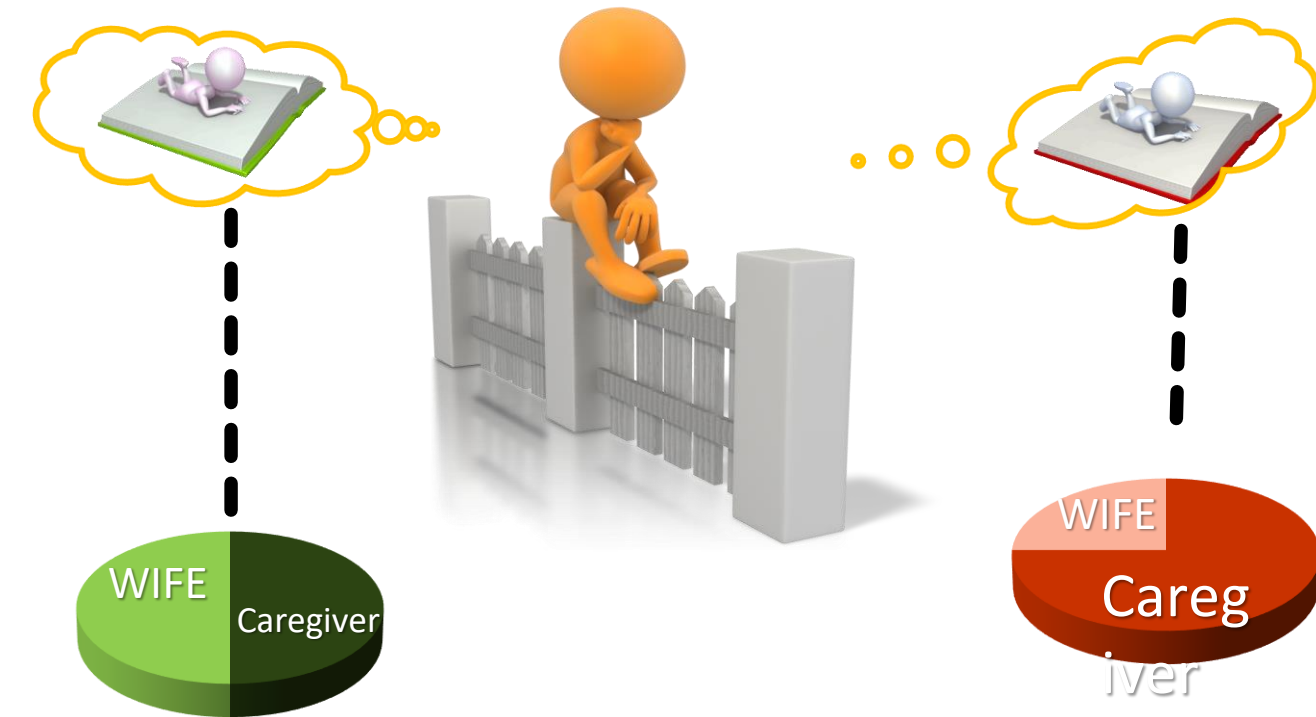
**Hours of Care ≠
Caregiver
Burnout**

Identity Discrepancy is central to understanding burnout

“Am I her **daughter** or her **caregiver**?”



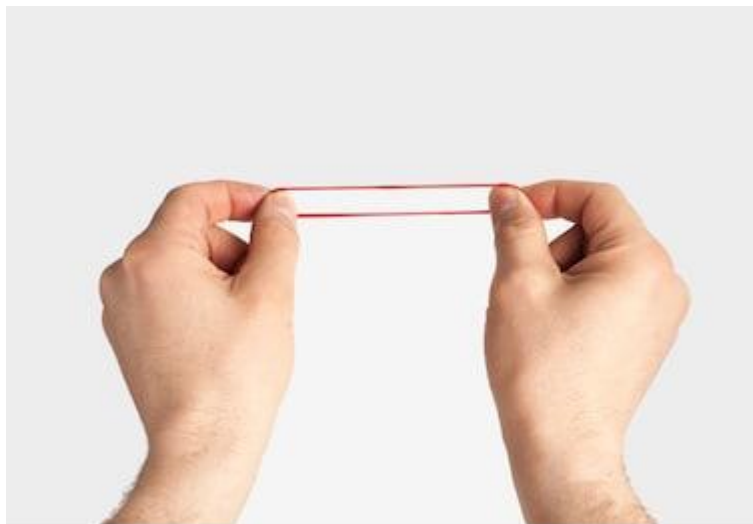
TCARE reduces burnout by identifying the goal, strategy, and resources needed to close the gap between how a caregiver self-identifies and how they clinically measure.



Caregiving Journey: Systematic Change Process

- Change in *activities*
- Change in *relationship* with care receiver
- Change in *identity* of caregiver

Identity Discrepancy



View of Self vs. Personal Expectations

TCARE reduces burnout by identifying the goal, strategy, and resources needed to close the gap between how a caregiver self-identifies and how they clinically measure.

Measurable Predictors of Burnout

Relationship
Burden

Objective
Burden



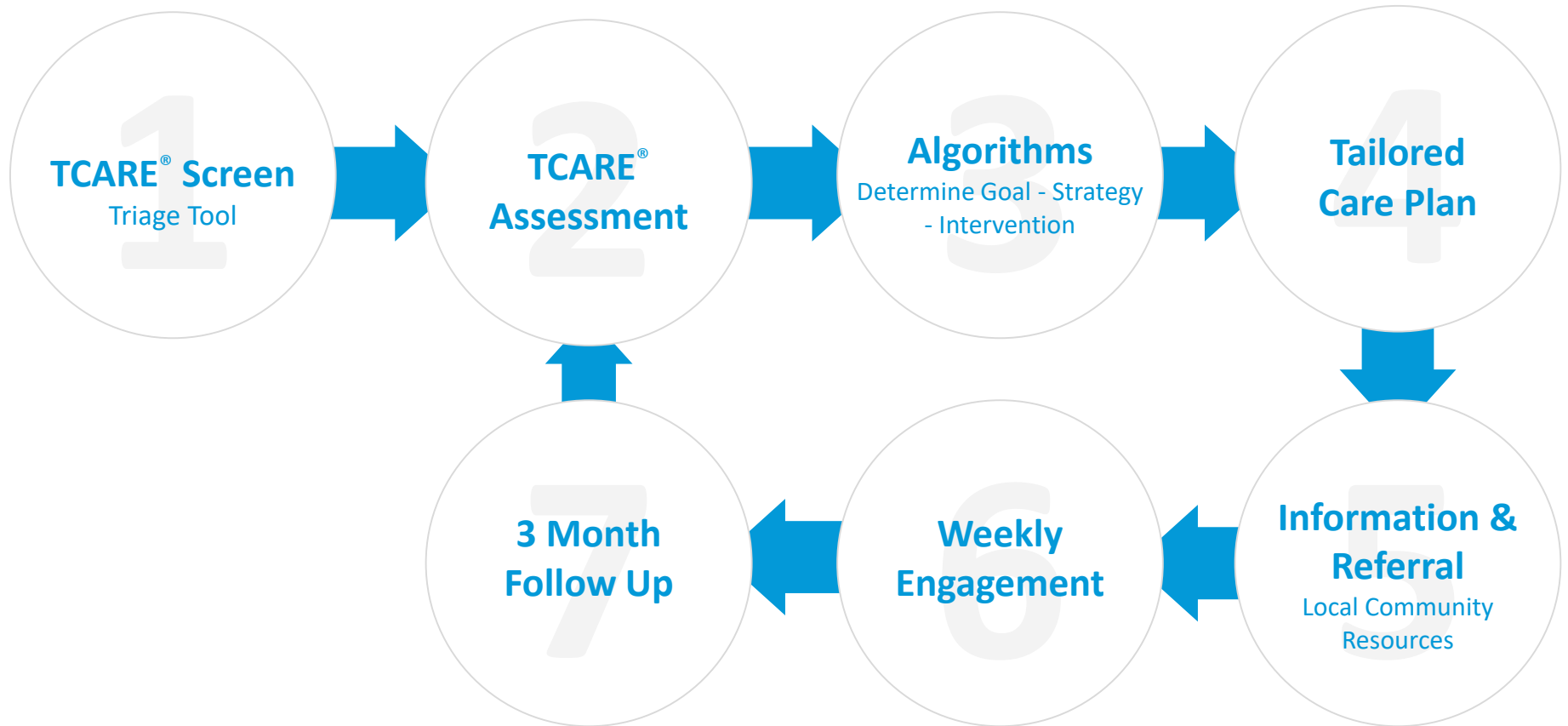
Depression

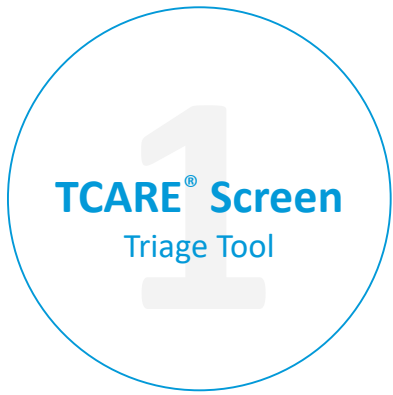
STRESS

Identity
Discrepancy

TCARE Solution

TCARE[®] Protocol Map





TCARE® CAREGIVER SCREENER

2 of 8

As a result of assisting the care receiver, have the following aspects of your life changed?

3. Have your caregiving responsibilities...

	Not at All	A Little	Moderately	A Lot	A Great Deal
(a) caused conflicts with your grandmother?	☐	☐	☒	☐	☐
(b) decreased time you have to yourself?	☐	☐	☒	☐	☐
(c) created a feeling of hopelessness?	☐	☐	☒	☐	☐
(d) given your life more meaning?	☐	☐	☐	☒	☐
(e) increased the number of unreasonable requests made by your grandmother?	☐	☐	☐	☒	☐
(f) kept you from recreational activities?	☐	☐	☐	☒	☐
(g) made you nervous?	☐	☐	☒	☐	☐

STRESS BURDEN : **HIGH** IDENTITY DISCREPANCY: **HIGH**

OBJECTIVE BURDEN : **MEDIUM** DEPRESSION : **HIGH**

RELATIONSHIP BURDEN : **HIGH** INTENTION TO PLACE : **YES**

Within five minutes, TCARE screens and categorizes caregivers as either low, medium, or high risk of burnout—completed online, over the phone, or face-to-face.



TCARE[®] Assessment

*Have your caregiving responsibilities
given your life more meaning?*

A little...

**The TCARE assessment is a guided counseling session that is the behavioral intervention itself—
not merely a question and answer session**

Scientifically Validated Algorithms

Determine Goal - Strategy
- Intervention

 TCARE

Summary for Molly Smith
taking care of Mother

Caregiver Phase :
Phase 3-Phase 3 message

Intention to Place :
No-

My Caregiving Burdens

Relationship Burden : LOW

Objective Burden : LOW

Stress Burden : LOW

Uplifts : HIGH

Depression : HIGH

Identity Discrepancy : HIGH

My Caregiving Obligations

Personal Care Hours : 1

Household Care Hours : 0

Other Assistance Hours : 0

Total Dependents : 1

Mother's Needs

ADL : LOW

IADL : LOW

Problem Behaviors : HIGH

Memory : No

Questionnaire

1. Does caregiver accurately understand care receiver's level of need?
Answer : Yes

2. Currently is caregiver able to provide necessary care in a safe manner?
Answer : Yes

3. Are there services/resources available to the caregiver that would enable the caregiver to provide care in a safe manner?
Answer : Yes

TCARE will identify the root causes of burnout, stress and more!

4 Tailored Care Plan

Over 99+ categories of services...

Information & Referral Local Community Resources



Community Resource Finder



Health Goal

D. Reduce generalized stress

✓ (15) Medical or Behavioral Health Related Services

E. Improve overall health

✓ (15) Medical or Behavioral Health Related Services

Goal 2: Embrace Caregiver Identity

A. Change personal rules for care

✓ (3) Counseling or (4.2) CG Education psycho-social

✓ (4.1) Education for caregiver to obtain information about services and assist with planning for the future

⬆ (4.3) Education to build caregiving skills (e.g. direct care and communication)

Skills for responding to mood and behavior changes **

PRIMARY CARE CLINIC
20 UNION ST N
MORA

Amount/Frequency

1x Week

PRIMARY CARE CLINIC
20 UNION ST N
MORA

Amount/Frequency

✓ (15) Support Groups (Expand and sustain networks of support)

B. Reduce or minimize work load

✓ (1) Adult Day Services (Experience time away from care responsibilities)

✓ (2) Assistive Technologies (Promote safety and functional abilities of care receiver)

✓ (4.1) Education for caregiver to obtain information about services and assist with planning for the future

Care plan is generated with defined goals and strategies that are well-targeted interventions addressing the root causes of burnout

TCARE[®] Continuous Engagement System

Weekly
Engagement

3 Month
Follow Up

MONTH 3

MONTH 6

MONTH 9

MONTH 12

WEEKLY TEXT-BASED TOUCHPOINTS

TCARE prevents crisis through timely data driven interventions—crisis prevention, not crisis management.

TCARE[®] is a gateway to your existing programs



Overwhelming number
of options



Systematic distribution of your existing
programs



MILITARY

**OLDER ADULTS
/DEMENTIA**

**DEVELOPMENTALLY
DISABLED (IDD)**



TCARE Outcomes

Impact in Washington (2,300 caregivers)

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Less likely to
use Medicaid LTSS
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TCARE Footprint

500+

Certified TCARE
Specialists

Reduced levels of stress
in as little as

3mo.

Caregivers
Impacted

100,000+

84%

Report lower levels of
stress & depression

79%

Engagement at the 3 mo.
follow up ; 54% at 12 mo.

TCARE SUMMARY

Comprehensive Assessments

1

Identify a caregiver's true needs

Helps support staff with proper identification of those in greatest need

Person Centered Care Plans

2

Resources are driven to those identified as greatest risk:

- Available,
- Accessible,
- Acceptable
- Affordable

3

Continuous Engagement and data collection delivers outcomes:

- Validated Less depression
- Lower stress scores
- Ability to show lengthened aging In place
- Lower program cost to LTC

4

Pathways to Monitor

Where your dollars are going
Caregiver Demographic
Outcomes to seek \$\$\$\$

TCARE[®] Implementation

