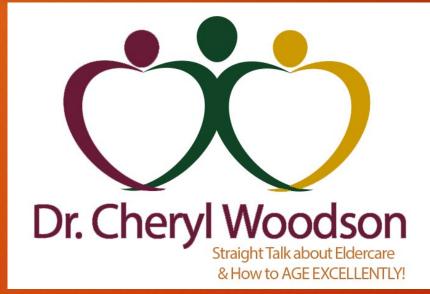
Preparing Clinicians to "R.A.I.S.E." Family Caregivers



https://www.drcherylwoodson.com

Celebrate November: National Family Caregiver Month.

Family Caregivers: Critical Healthcare Partners to Promote Wellness and Avoid Hospitals

Neither office nor hospital-based clinicianss invest in caregiver assessment and education because they lack training and fear time-burdens. This leads to caregiver insecurity and burnout, poor patient outcomes, rebound hospitalizations, early nursing home placements, and increased healthcare costs. The problem intensifies because with each generation of families.

Caregiver Reponsibility >>>> Resources

Remote past caregiving- unpaid, female relative -primary focus on caregiving, living in the home (? Possibly never married, serial caregiver or married with older children), not in workforce. Many siblings. Dependents have relatively short-term acute illnesses that result in death or recovery

Recent past caregiving-unpaid 58-year-old, partnered working woman. Several siblings, dependents with chronic conditions, longer, care needs.

Today

More older adults (Babyboomers, GenX reaches age 65 in just 8 years

Older older adults (Longevity due to medical advances)

Sicker older adults (People with previously fatal illnesses now live longer with progressive disability, ever increasing care needs

Increase in number of chronically ill younger adults (childhood fatalities also changed due to medical advances)

Still unpaid

1/4 men

Miillennial caregs

Fewer siblings, also juggle jobs/careers, long distances

Simultaneous caregiving for several generations.



The Clinician's Role: Add to what you're already doing. Doesn't add time. Gets HUGE Benefit

Office

- Put "caregiver status" on patients' problem list.
- Add caregiver assessment to new patient intake forms and updates.
- Contact Area Agency on Aging (AAA) for resource list.
- Display resource information in waiting and exam rooms.
- Instruct staff to use the same forms community services as for ordering diagnostics and consultations. Ask them to follow up with you.
- Use the same forms to order consultations to subspecialists and community resources.
- Put a clinician on your front desk and clarify the chain of command.
- Include immediate access sessions in every office schedule.
- Instruct caregivers on Panic Parameters that would trigger a call to the office before requiring ED visit (weight, BP, Blood glucose, other)

Hospital and nursing facilities

 Bring families in for pre-discharge training, make pre-discharge home visit, and/ or ensure that medical equipment and medicines are in the home by the day of discharge and order a day-of-discharge home nursing visit.

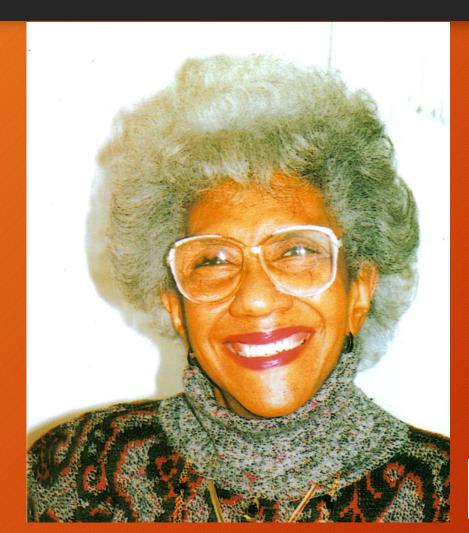
All

- Support AAA collaborations with houses of worship and civic organizations
- Be a resource to the community care networks? health advisory committee membership (This also builds practices.)



and wellness presentations (community and professional), board or

Doctor- Daughter Perspective



Dr. Cheryl taught and practiced Geriatric Medicine for almost 40 years while raising a family and walking with her Mother on a ten-year journey with dementia. In year seven, Mother asked, "Do I know you?"



DISCLOSURES

NO \$\$\$

See References



OBJECTIVES

At the end of this presentation, clinicians will be able to:

- Explain why changes in generations of family caregivers threatens their role in achieving good health outcomes and lowering health care costs.
- Add caregiver identification and evaluation to routine clinical intake processes.
- Implement time-saving protocols for distributing caregiver resource information.
- Work with communities to enrich caregiver information and support systems.



Who is a caregiver?

• Woodsonian definition: "If you regularly do anything for anyone who cannot perform the task(s) for themselves, you are a caregiver."

To Survive Caregiving: A Daughter's Experience, a Doctor's Advice-2nd edition



Who are the 21st Century caregivers?

In the past- Unpaid, middle-age, working female relative.

NOW, IT'S EVERYBODY!

25% men

60% new caregivers are GenXers and Millennials

13% > 65 with chronic health conditions.

Although unpaid caregivers provide 75% of all care, professional health teams can no longer assume that "the family will do it,"



21st Century Caregiving is Different

CARE NEEDS

MORE older adults
OLDER older adults
SICKER older adults
DISABLED younger people



CAREGIVERS' RESOURCES

Fewer siblings

Competing responsibilities
Other caregiving
Job/career

Longer distances

Caregiving season:

More Difficult

More Lengthy

Impaired Caregivers



The Clinician's Role - Office Protocols

- Contact the AAA to develop resource file.
- Post resource information in waiting and exam rooms
- Add Caregiver Info to routine intake and uptake forms (find forms in AARP, caregiver organizations, VA) or ask
 - Patient
 - · Whom would you call if you needed help to dress, bathe, clean your house, get groceries and meals, drive to the doctor, manage your money, or anything else
 - Does anyone help you now? What do they do for you? How often do they help?
 - Caregiver
- Do you take care of any (of the above activities) for anyone?
- What do you do for them? How often do you help?
- How does helping affect your sleep, health, attitude, job, school, relationships, recreation?
- How are you taking care of yourself?
- Offer standard depression screen to caregiver



The Clinician's Role - Office Protocols -2-

Educate Caregivers with the Level of Care Prescription-LOCRx©

Define the Problem

Ten Questions

Outline the Care Plan

What is wrong?

Why is it wrong?

How much is fixable?

How do we fix what we can?

What do we do with the nonfixable?

What kind of care?

How much care?

How often?

For how long?

How much training does the caregiver need?

The Clinician's Role - Office 2 Increase caregiver confidence

Educate caregivers

- LOCRx©
- List PANIC VALUES- what changes in BP, pulse ox, glucose, symptoms, other parameters should generate a call? ED visit?
- Clarify medication regimens

Increase access

- Put a clinician on the front desk (for accurate triage).
- Build URGENT ACCESS visits into the schedule.
- Clarify office chain of command and communication protocols (whom to ask which questions. How best to communicate usual response times.
- Schedule family conferences (Families will pay for this. LTC and supplemental insurance might cover. Medicare and other payors do not.)

The Clinician's Role - Office Protocols -3-

- Same form to order blood work, xrays, subspecialty consultations, AND caregiver resources
- Same form to consult subspecialists AND caregiver services.
 - Why have you requested the consultation?
 - Give information that may help the consultant/service.
 - Request that they follow up with you.

The Clinician's Role-Hospital/ Nursing Facility

- Contact AAA ro develop information library and display resources prominently
- Bring families onsite for hands-on demonstration of care techniques.
- Arrange pre-discharge home visits.
- Ensure that medical equipment and medications are in the home on day of discharge.

AND/OR

Arrange day-of-discharge home health visit.



May not be feasible

Every Clinician's Role

- Support AAA collaboration with houses of worship and civic organizations, sororities, fraternities, tribal councils with which you are involved.
- Volunteer to give presentations to caregiver support agencies, and other partners civic organizations and other networks (houses of worship, clergy, Kiwanis, Rotary, VFW, sororities and fraternities, tribal councils

(This also brings new patients and their families into the practice.)



Every Clincian's Roll -2-Encourage Caregivers to Take Care of Themselves. The Five Keys to Caregiver Survival©

Caregivers must do flight attendents instruct passengers to do in an airplane emergency?

#5 Put your mask on first.



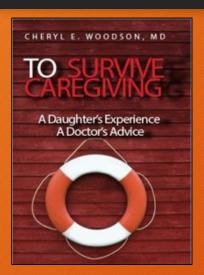
Caregivers can't partner with you to take care of the PATIENTS if they don't take care of THEMSELVES.



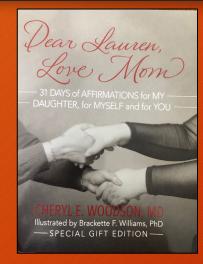
Every Clinician's Role -3-Encourage Caregivers to Take Care of Themselves.

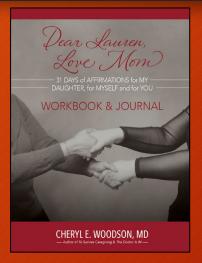
- The Caregiver Survival Kit <u>www.drcherylwoodson.com</u>
 - The Five Keys to Caregiver Survival©
 - LOCRx©
 - You Should Know These Numbers Like You Know Your Social Security Number
 - Dr. Cheryl's Medication Management Form
 - Bernie Ryan's Health Information Binder.

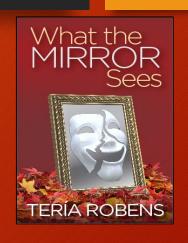
Dr. Cheryl's Caregiver Survival Kit Available at www.drcherylwoodson.com



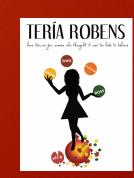








Have FUN



Take Care of THEM





Take Care of their CAREGIVER Self-CARE is not Self-ISH

All books available on Amazon.com



@drcherylwoodson





References

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- Caring for Family and Friends: A Public Health Issue 2019 https://www.cdc.gov/aging/caregiving/caregiver-brief.htm
- VA Caregiver Assessment Tool https://www.va.gov/GERIATRICS/docs/caregiver_self_assessment.pdf



Some US Caregiver Statistics

- About 40 million Americans are informal (unpaid) caregivers for adults. They provide >70% of the care received by Americans who need assistance in caring for themselves. Family caregivers form the main pillar in the foundation of long-term care for Americans who cannot care for themselves.
- Spouses—adult children---other relatives
- >70% middle age working women
- ¼ are men
- 23.7% of 40-60-year-old Americans are caregivers
- 12% of caregivers are >age 65 are caregivers and have at least 2 chronic illnesses
- Most give care for 2-5 years and assist with more than 2 activities of daily living
- 20% of Americans are new caregivers, 60% of these are GenZ and Millennials

