

CAREGIVERS CLINIC AT MEMORIAL SLOAN KETTERING CANCER CENTER

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The mission of the Caregivers Clinic at Memorial Sloan Kettering Cancer Center (MSK) is to assure that no caregiver of an MSK patient experiencing significant distress as a result of their caregiving responsibilities goes unidentified and deprived of necessary psychosocial services. This presentation will cover the steps taken and barriers faced in the development of the Clinic, including advocating for caregivers to receive their own unique medical records. Data regarding the number of caregivers seen for psychotherapy and for medication management will be presented, as will data regarding presenting complaints and average length of care. Also included is a discussion of the challenges faced in expanding and maintaining the capacity of the Clinic, especially in the setting of the pandemic during which caregivers' use of psychosocial care at MSK is notably higher than in years past. Several current adjunct approaches to address capacity needs currently being piloted will be discussed.

THE RUSH CAREGIVER INITIATIVE: A MODEL FOR CAREGIVER HEALTH AND WELLNESS IN AGE-FRIENDLY HEALTH SYSTEMS

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The Rush Caregiver Health and Well-Being Initiative (Caregiver Initiative) draws together evidence-based practices into a single framework to improve care for older adults and caregivers. The Caregiver Initiative has two components: system-level and caregiver level interventions. The complexities of system change take place within leadership, data management, and provider teams throughout the health care system, and solutions to resistance have been developed. Caregiver-level interventions start with an assessment using evidence-based tools, and offer an opportunity to participate in a Teach-Back Clinic, Family Care Planning sessions, and/or Goals of Medical Care meetings, all connected to the 4Ms of an Age-Friendly Health System. Contact and follow-up issues were addressed, and as of February 2021, 191 caregivers have enrolled. Outcomes to date show statistically and clinically significant reductions in depression, anxiety, and caregiver burden. This presentation will highlight lessons learned in the development of the model and caregiver outcomes to date.

Session 3170 (Symposium)

CHALLENGES OF IMPLEMENTING THE PRISM 2.0 TRIAL FOR SUPPORTING SOCIAL CONNECTIVITY THROUGH TECHNOLOGY

Chair: Walter Boot

Co-Chair: Sara Czaja

Discussant: Dana Plude

Following the success of the Personal Reminder Information and Social Management (PRISM) trial, which found that a specially designed computer system for older

adults can enhance social connectivity and reduce loneliness among older adults at risk for social isolation, the PRISM 2.0 trial sought to replicate and extend these results to a new technology platform (tablet rather than desktop) with expanded social features and diverse populations of older adults, including older adults living in rural areas, assisted living communities, and senior housing. This symposium discusses the aims of the trial conducted by the Center for Research and Education on Aging and Technology Enhancement (CREATE), challenges encountered (including challenges related to the COVID-19 pandemic), and solutions to those challenges. S. Czaja will begin with an overview of the PRISM 2.0 system and the trial. J. Sharit will discuss challenges encountered working within the context of assisted living facilities and with impaired participants. This will be followed by a discussion of technical challenges encountered during the course of the trial presented by N. Charness. W. Rogers will present training issues involved (both with respect to participants and assessors). Finally, W. Boot will describe challenges encountered with measuring and quantifying technology use during the trial. Lessons learned are applicable to many types of technology interventions administered in diverse contexts. D. Plude, Deputy Director in the Division of Behavioral and Social Research of NIA, will serve as discussant.

PRISM 2.0: A TECHNOLOGY SYSTEM TO SUPPORT RESOURCE ACCESS AND SOCIAL AND COGNITIVE ENGAGEMENT

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Social isolation and lack of engagement are common among older adults and present a risk for emotional, physical and cognitive decline. Technology offers the potential of remediating these risks and enhancing opportunities for connectivity. In this paper we present an overview of the PRISM 2.0 multi-site RCT, which evaluated a simple to use Personalized Reminder Information and Social Management System (PRISM) among a sample of two hundred and forty-eight adults age 65+ in diverse contexts (Rural Locations, Assisted Living Communities and Senior Housing). PRISM 2.0 is a tablet-based system, intended to provide support for access to resources and information, new learning, social and cognitive engagement, and memory. We describe the goals and content of PRISM, the user-centered design process, and measurement strategies. We also discuss the challenges of conducting the trial during the COVID-19 pandemic and the strategies used to adapt the trial protocol within the three contexts.

CHALLENGES OF IMPLEMENTING THE PRISM 2.0 CLINICAL TRIAL WITH ASSISTED LIVING AND IMPAIRED PARTICIPANTS

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