

### FAMILY CAREGIVING IN THE CONTEXT OF INTENSE AND COMPLEX CARE

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Approximately four in ten family caregivers experience high intensity care, based on the number of caregiving hours, activities of daily living (ADLs) and instrumental ADLs supported for the care recipient. Using the 2015 Caregiving in the U.S. Survey, we examined outcomes associated with high (compared to low or medium) intensity of care. High intensity was positively associated with emotional stress (OR=2.10; 95%CI: 1.52-2.91); financial strain (OR=1.69; 95% CI: 1.210-2.36); physical strain (OR=3.09; 95% CI: 2.21-4.34); and declines in caregiver health (OR=2.14; 95% CI: 1.56-2.93). High intensity was also associated with greater difficulty coordinating recipient care (OR=1.96; 95%CI: 1.42-2.71), higher odds of performing complex medical/nursing tasks (OR=6.85; 95% CI: 5.27-8.90) and, among task performers, greater difficulty performing tasks (OR=2.10; 95% CI: 1.43-3.08). High intensity of care impacts caregiver health and the caregiving role in multiple domains; new clinical and policy approaches are needed to mitigate risks and ensure adequate support.

### AN ACADEMIC-HEALTH SYSTEM COLLABORATION TO DEVELOP A PROGRAM FOR FAMILY CAREGIVERS OF PERSONS WITH DEMENTIA

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Hospitalization of persons with dementia can pose specific challenges for family caregivers, with post-discharge issues in managing acute clinical care needs coupled with dementia-related care that can exacerbate caregiver fatigue and capacity. We established an academic-practice collaboration to develop an evidence-based and innovative multi-component health system-level program to support family caregivers of persons with dementia in transition from hospital to community. Using an implementation science approach aimed to decrease the gap in translation of caregiver research into practice, we co-designed the program/implementation plan as a quality improvement initiative reflecting an integration of evidence from family caregiving literature and the health system's unique context, workflows, stakeholder perspectives, resources, and values/priorities. This paper highlights insights gained and lessons learned in establishing a successful academic-practice collaboration, including time/investment to establish a shared project vision and identify/leverage existing organizational capacity to successfully deliver a program to improve the health and wellbeing of family caregivers.

### STRENGTHENING FAMILY CAREGIVING THROUGH INNOVATIVE TECHNOLOGY SOLUTIONS

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Technology has the potential to enhance the repertoire of tools for family caregiving to address the complexities of caring for older adults. There are examples of technology-enabled interventions helping older adults remain independent and safe in their home; easing the financial, physical, and psychological challenges of family caregiving; assisting in the management of chronic illness; improving socialization and support; offering information and resources on a "just in time" basis; and improving the quality of care and quality of life for both older adults and their family caregivers. This session will review eight evidence-based, technology-enabled solutions for family caregivers, including technology solutions that address medication adherence, falls prevention, personal emergency response, remote monitoring, telehealth, dementia tracking, social engagement, and care training. Key drivers for successful application of these interventions (e.g., technology, analytics, user experience design) as well as barriers to scaling (e.g., accessibility, affordability, regulation) will be reviewed.

### SESSION 2300 (SYMPOSIUM)

#### SUCCESSES IN THE TRANSLATION OF CAREGIVER INTERVENTIONS IN COMMUNITY-BASED ORGANIZATIONS AND HEALTH CARE SYSTEMS

Chair: Jinmyoung Cho, *Baylor Scott & White Health, Temple, Texas, United States*

Discussant: Alan B. Stevens, *Baylor Scott & White Health, Temple, Texas, United States*

Family caregiving of an older adult has become an essential element of the U.S. health care system, with 83 percent of long-term care provided to older adults coming from family members or other unpaid helpers. With the amount and type of care provided by families expected to increase, caregiving demands should be coupled with community and health care systems-based supports. While scientific research has demonstrated the value of providing education, skills training and support to family caregivers, health care and social service providers do not systematically include these interventions in their services. Thus, for the vast majority of family caregivers, caregiving support services remain extremely fragmented, if not elusive. This symposium provides four examples of how health care systems that frequently see patients with dementia and community-based organizations who provide ongoing supportive services to family caregivers, have adapted evidence-based caregiver interventions into branded service programs. Dr. Jinmyoung Cho will present racial/ethnic comparisons on the impact of community-based implementation of a caregiver education program, REACH-TX. Dr. Leah Hanson will introduce the implementation of Mindfulness-Based Dementia-Care (MBDC) within a health care system. Dr. Christine Jensen will address how caregivers can benefit from evidence-driven