Hospital Interventions to Decrease Family Caregiver Stress, Hospital Admissions and Hospital Readmissions While Improving Patient Satisfaction Scores

More than 40 million individuals care for a family member in the U.S. These family caregivers deliver hands-on care, provide emotional support, advocate for the best care possible, manage and oversee care, make health care decisions and choose health care providers.

These family caregivers also experience stress. According to CareGiving.com's ongoing Family Caregivers Stress Survey, 1,044 family caregivers rate their stress level at 4.14 on a scale of 1 to 5, with 5 being the most stressed. Of these 1,044 family caregivers, 72% indicate that they miss their lives, 63% say they don't sleep well at night and 61% say they haven't had a break.

These stressed-out family caregivers interact with the health care system regularly. With an effective hospital intervention, family caregivers can receive support and resources to reduce their stress which in turn can lead to lower hospital admission and readmission rates for their carees and higher patient satisfaction surveys for the hospitals.

We would like to pilot an intervention within a hospital system that measures how well we can:

- reduce family caregiver stress.
- lower hospital admission rates by effectively referring to community support and resources.
- lower readmission rates by effectively supporting the family caregiver after a discharge.
- improve hospital patient satisfaction scores.

**Intervention**

Family caregivers complete assessments about their caree's medical condition regularly within the health care system. These assessments, though, often miss the challenges family caregivers face. We believe overwhelmed and stressed-out family caregivers need a conversation about their situations to uncover their problems. A conversation with a health care professional trained to facilitate these conversations can positively impact the family caregiver's stress.

Through her Certified Caregiving Consultant training program, Denise M. Brown, founder of CareGiving.com, teaches an effective communication process that builds from three skills – listening, asking and validating. In addition, she created simple conversation starters called Caregiving Wheels to build trust between family caregivers and health care professionals. When family caregivers trust health care professionals, an honest and concise conversation about the true challenges occurs. From this honest conversation, referrals to effective resources and support happen.

**Pilot Program**

The pilot program includes:

- Five Research Assistants who receive training to become Certified Caregiving Consultants
- Five Research Assistants (RAs) who receive training to assess the control group
- 30 family caregivers who experience the intervention
- 30 family caregivers who compromise the control group

Five RAs each will consult with six family caregivers of admitted high-risk patients over two months.

CareGiving.com
The intervention includes four touch points: initial conversation in the Emergency Room (ER), 48 hours later, one week after discharge and three weeks after discharge. Family caregivers will receive information about the study, hospital resources and community resources at the first consultation. Family caregivers will answer a one-question survey about stress levels at the beginning of the first consultation and at the end of each follow-up consultation. In addition, we would follow up on readmission rates and patient satisfaction survey results.

Control group
Five RAs each will assess six family caregivers of admitted high-risk patients. Family caregivers will answer a one-question survey about stress levels in the ER, 48 hours later, one week after discharge and three weeks after discharge. In addition, we would follow up on readmission rates and patient satisfaction survey results.

The Impact of Caregiving Stress on the System
In order to introduce an effective intervention, we'd like to also determine:

- The impact of a stressed-out family caregiver on the Emergency Department (ED) staff and on the hospital admission decision.
- How the ED staff determines who is a family caregiver.
- How to effectively use the Electronic Health Record to trigger a need for an intervention to support the stressed-out family caregiver.
- When and how to introduce an intervention to a stressed-out family caregiver in the ER.
- Community resources which can become partners to support the family caregiver in the community after discharge.
- How to educate ED staff about a family caregiver intervention.
- The successful replication of a pilot program within a hospital system and which professions, such as Chaplains, case managers and social workers, could integrate the intervention into their existing services.

Team
We've assembled a team to participate in a planning process in order to successfully launch a pilot program, tentatively entitled Caring Conversations for Better Health. Team members include:

- Leaders in local community resources (to be identified)
- An Emergency Room doctor and staff
- Denise, who founded CareGiving.com and the Certified Caregiving Consultant training program. You can learn more about her here: [https://www.caregiving.com/about-and-contact/denise-brown-speaker-facilitator-moderator/](https://www.caregiving.com/about-and-contact/denise-brown-speaker-facilitator-moderator/)

If you'd like to help us launch the pilot program as a funder and/or site host, please contact Denise at [denise@caregiving.com](mailto:denise@caregiving.com) or 773-343-6341.