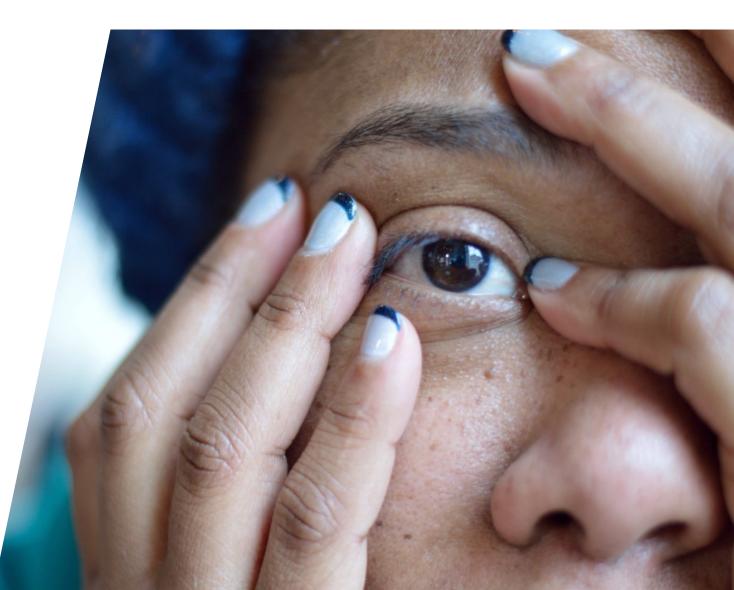


Welcome!

Before we begin...

Today's session will be recorded

Please add your name and hospital in the chat







Monday, September 11, 2023 • 11:30 am CST/12:30 pm EST Health Equity & Caregiving: Meeting the Needs of African American/Black Caregivers ECHO

Session 4: Mental Health & Caregiving

Today's Agenda



Housekeeping, Agenda Preview, and Introductions 10 minutes 4 Case Presentation: Infirmary Cancer Care Kay Jernigan, BSN, RN 5 minutes



Case Presentation Recommendations and Discussion 20 minutes



6 Post Session Poll & Wrap Up 5 minutes



Welcome to Session 4: Mental Health & Caregiving Health Equity & Caregiving: Meeting the Needs of African American/Black Caregivers ECHO



Each ECHO session will be recorded and *may* be posted to a publicly-facing website



You will be muted with your video turned off when you join the call. Use the buttons in the *black* menu bar to unmute your line and to turn on your video. **If you do not wish to have your image recorded, please turn <u>OFF</u> the video option**.



Today's materials will be made available on our ACS ECHO website



Please type your full name, the full name of your organization, and e-mail in the chat box



This ECHO session takes place on the Zoom platform. Click <u>here</u> to review Zoom's privacy policy.



Questions about Zoom? Type in the chat box @Beth Graham

This project is funded by EMD Serono





Introductions



Meet Our Health Equity & Caregiving: Meeting the Needs of African American/Black Caregivers ECHO HUB



Rachel Cannady Strategic Director, Caregiving, American Cancer Society ACS ECHO Program Lead



Siobhan Aaron, PhD, MBA, RN, FNP-BC Assistant Professor, Frances Payne Bolton School of Nursing Case Western Reserve University ECHO Facilitator



Beth Graham, MPH, CHES American Cancer Society Program Manager, Project ECHO



Allison Rosen, MS American Cancer Society Director, Project ECHO



Mindi Odom American Cancer Society Director, Project ECHO



Beth Dickson-Gavney, MS, MA American Cancer Society Senior Director, Project ECHO

Introductions



Meet Our Health Equity & Caregiving: Meeting the Needs of African American/Black Caregivers ECHO HUB Subject Matter Experts (SMEs)



Robert A. Winn, MD

Director and Lipman Chair in Oncology, Sr. Assoc. Dean for Cancer Innovation and Prof. of Pulmonary Disease and Critical Care Medicine **VCU Massey Cancer Center**



Joseph E. Ravenell, MD Assoc. Dean for Diversity Affairs and Inclusion, Director, Diversity in Research, Perlmutter Cancer Center, Assoc. Prof., Dept. of Pop. Health NYU Langone Health



Olufunke Awosogba, PhD

Asst. Prof. and Vice Chair of Diversity, Equity, and Inclusion in Dept. of Psychiatry, Director, Behavioral Health Program in Hem/Onc Outpatient Clinic Parkland Hospital **UT Southwestern Medical Center**



Fawn Cothran, PhD, RN, GCNS-BC, FGSA Hunt Research Director National Alliance for Caregiving



Cardinale B. Smith, MD, PhD

Prof. of Medicine (Hem/Onc) and Prof. of Geriatrics and Palliative Medicine, Chief Medical Officer – Tisch Cancer Hospital Icahn School of Medicine at Mount Sinai



Katrina R. Ellis, PhD, MPH, MSW

Asst. Prof. Social Work and Faculty Assoc., Research Center for Group Dynamics, Institute for Social Research **University of Michigan**





Siobhan Aaron, PhD, MBA, RN, FNP-BC Assistant Professor, Frances Payne Bolton School of Nursing

American Cancer Society



Session 4

ECHO Subject Matter Expert (SME) & Participant Site Introductions

Welcome to our Participant Learning Sites



ALABAMA	GEORGIA	LOUISIANA	MISSISSIPPI	SOUTH CAROLINA	VIRGINIA
Infirmary Cancer Care	Northside Hospital Cancer Institute	Our Lady of the Lake Cancer Institute	Singing River Health System Cancer Center	Beaufort Memorial Keyserling Cancer Center	Sentara Healthcare
O'Neal Comprehensive Cancer Center at the University of Alabama at Birmingham – Wallace Tumor Institute	Phoebe Cancer Center	Woman's & Mary Bird Perkins – Our Lady of the Lake Cancer Center	St. Dominic's Comprehensive	Prisma Health Cancer Institute	VCU Massey Cancer Center
			Cancer Services University of Mississippi		
		Breast & GYN Cancer Pavilion	Medical Center Cancer Center and Research Institute		





Have a question? Don't wait to ask! Feel free to enter it in the Q&A box at any time.







Mental Health & Caregiving

Fawn Cothran, PhD, RN, GCNS-BC, FGSA Hunt Research Director National Alliance for Caregiving



National Alliance for Caregiving (NAC)



ABOUT US

Established in 1996, the National Alliance for Caregiving (NAC) is a membership-based organization catalyzing system change to build health, wealth, and equity for America's 53 million family caregivers.



OUR NETWORK



NAC's Core Strategies





We elevate national family caregiving RESEARCH by: 1) developing credible, transformative, original research; 2) providing open data sets to researchers; and 3) leading a peer-to-peer network of national and international experts.



We catalyze public and private sector actors, including regulatory bodies, to develop INNOVATIVE services and supports for family Caregivers.



We are a recognized THOUGHT-LEADER and GO-TO source for caregiving research, advocacy, and innovation insights and connections.



Our ADVOCACY work advances caregiving as a public health issue and builds awareness that fosters national conversation that will empower caregivers to thrive at home, work, and life.



Our Impact Priorities



CAREGIVERS

53 million 2020

AFRICAN AMERICAN/BLACK CAREGIVERS

ECHC

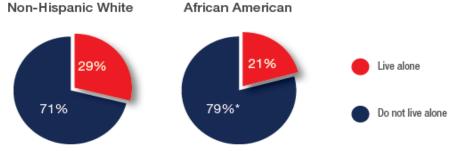
- 47.7 YEARS of AGE
- Unmarried

7%

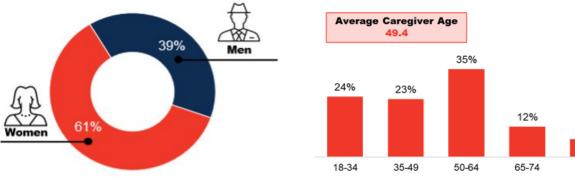
75+

- Lower household income
- 31.2 hours of care/week

Figure 5: Care Recipients Who Live Alone



*Indicate significantly different from Non-Hispanic White caregivers. Results are rounded and/or multiple response; results may not add to 100 percent.



2020 Base: Caregivers of Recipient Age 18+ (n=1,392)



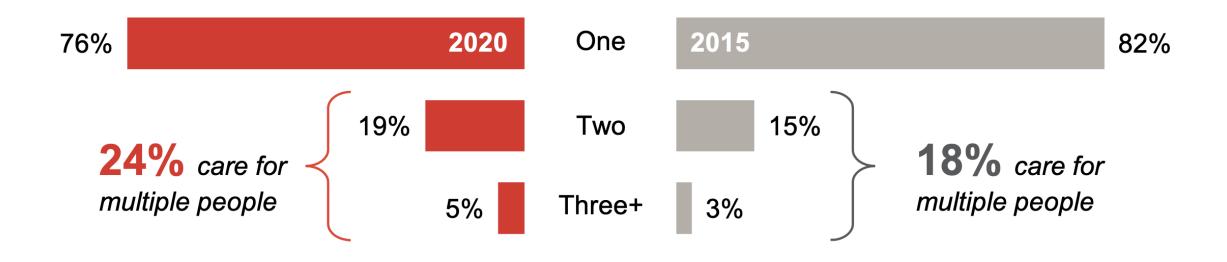


Stress & Psychosocial Functioning

CARE RESPONSIBILITIES



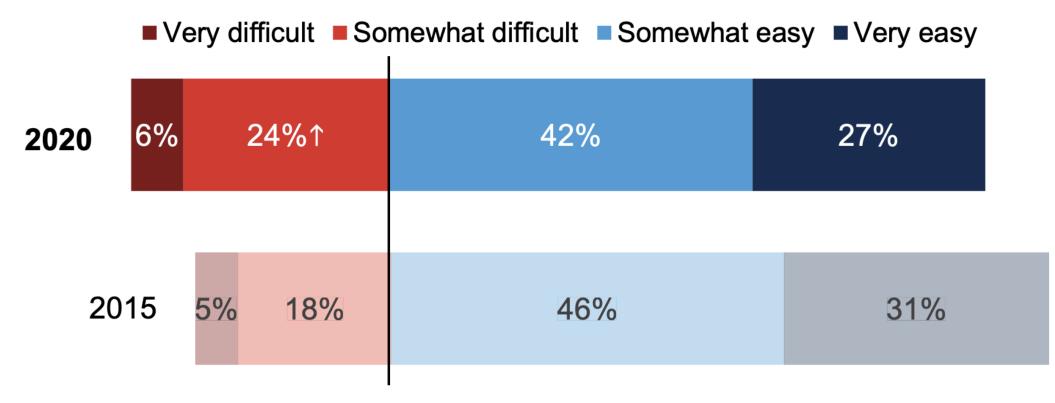
More family caregivers are *caring for more people*







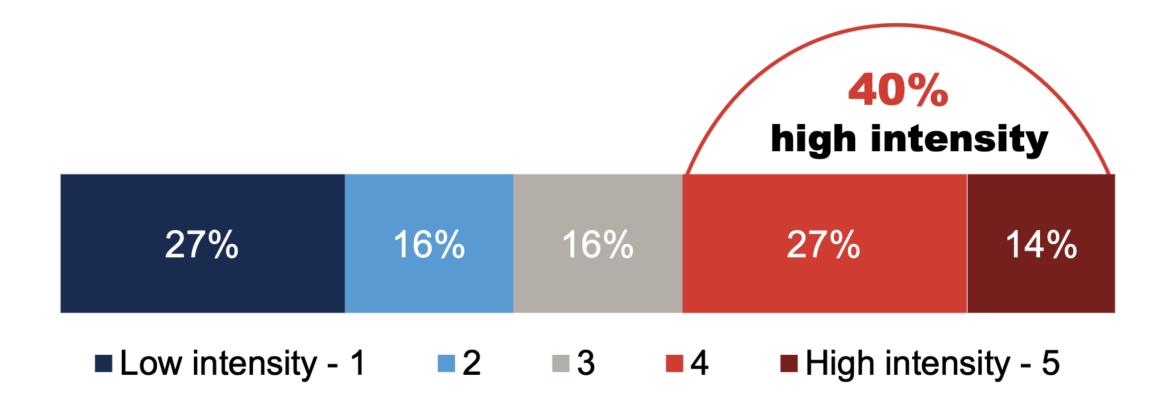
More family caregivers are finding it difficult to coordinate care for their loved ones



INTENSITY OF CAREGIVING



4 in 10 family caregivers are in high-intensity situations



AFRICAN AMERICAN/BLACK CAREGIVERS



More often in high intensity care situations





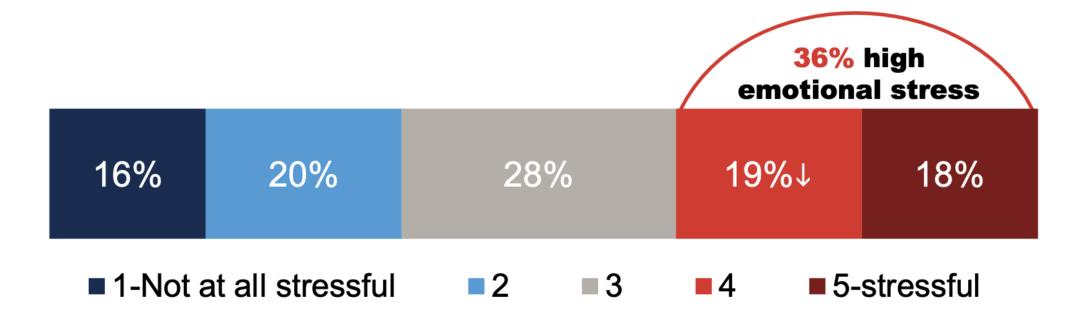
Provide more ADLs, IADLs, and medical/ nursing tasks



EMOTIONAL IMPACTS



Nearly 4 in 10 family caregivers experience high emotional strain

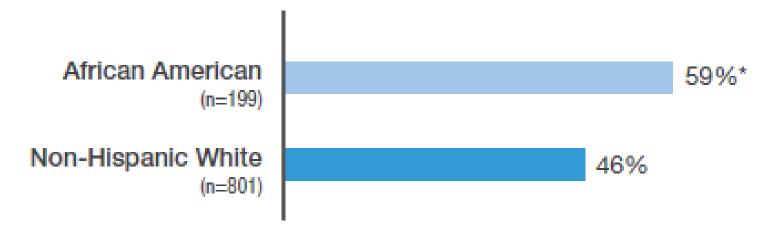


AFRICAN AMERICAN/BLACK CAREGIVERS



HOWEVER, African American caregivers report less emotional strain and caregiving brings more meaning to their lives

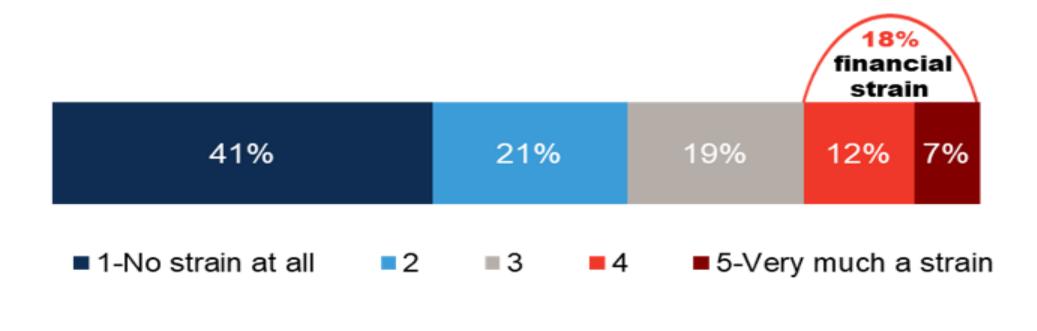
Figure 8: Being a Caregiver Gives Meaning to My Life



FINANCIAL IMPACTS



1 in 5 family caregivers experience financial strain



African American/Black Caregivers' Self-Reported Financial Impacts

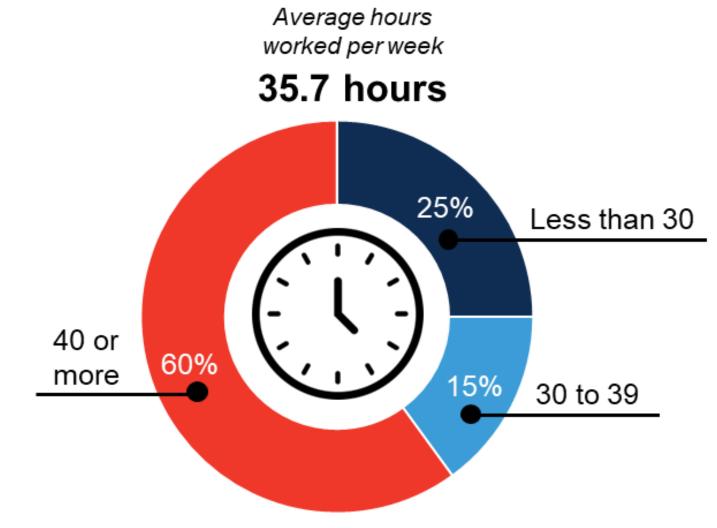


	Non-Hispanic White (n=801)	African American (n=199)	
Any of these	42%	55%*	
Took on more debt (credit cards, loans, lines of credit)	21%	30%*	
Missed or was late paying for a student loan	4%	11%*	
Borrowed money from family or friends	12%	24%*	
Filed for bankruptcy (medical or personal)	2%	8%*	
Been unable to afford basic expenses like food	9%	14%	
Left bills unpaid or paid them late	14%	31%*	
Used up your personal short-term savings	21%	23%	
Used long-term savings, like retirement or education, to pay for other things	10%	16%*	
Stopped saving	26%	35%*	
Moved to a less expensive home, apartment, or otherliving arrangement	5%	8%	
Was evicted or had a home foreclosed	2%	5%	
Put off retirement or deciding to never retire	9%	11%	
Had to start working, work more, or find a second job	8%	20%*	

WORKING CAREGIVERS



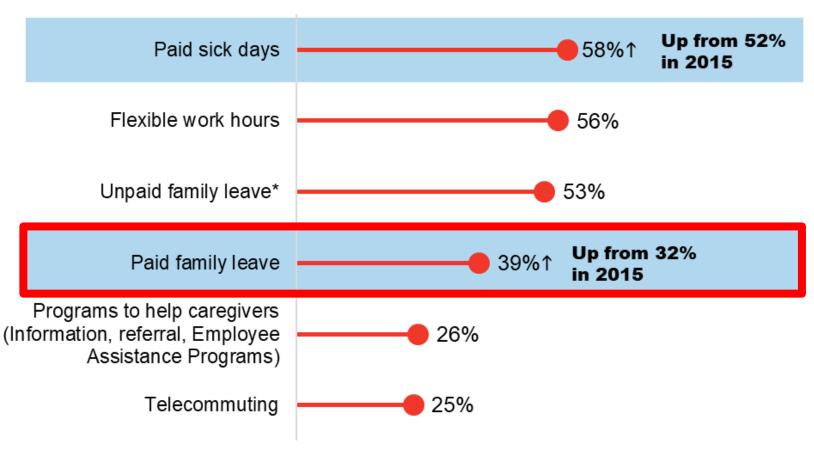
Most caregivers work full-time



WORKING CAREGIVERS



Most have no paid leave

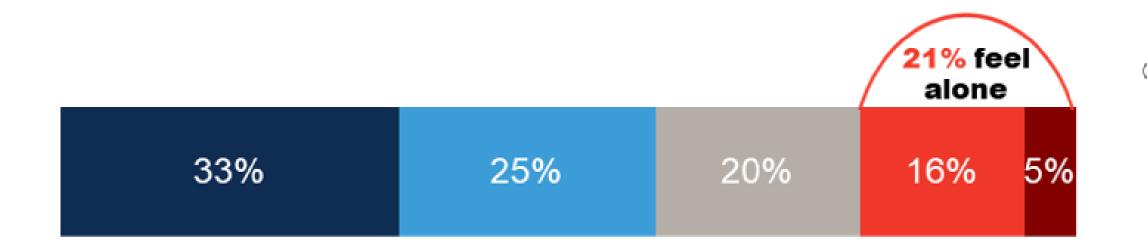


% Yes

MENTAL HEALTH IMPACTS



Loneliness is a key factor in caregiver mental health



1-Strongly disagree 2-Disagree 3-Neither 4-Agree 5-Strongly agree

AFRICAN AMERICAN/BLACK CAREGIVERS



More likely to...





Provide care in isolation







Few caregivers have been asked what they need for self-care

13%↓



Had a doctor, nurse, or social worker ask you about what you need/needed to help care for yourself

A FEW WORDS OF CAUTION...

3



More research is needed

2 Enhanced infrastructural support

Unequal and complex caregiving





Assessing Caregiver Distress

DISTRESS THERMOMETER



National Comprehensive NCCN Guidelines Version 2.2023 NCCN Guidelines Index Table of Contents NCCN Cancer **Distress Management** Discussion Network[®] NCCN DISTRESS THERMOMETER PROBLEM LIST Have you had concerns about any of the items below in the past Distress is an unpleasant experience of a mental, physical, social, or spiritual nature. It can affect the way you think, week, including today? (Mark all that apply) feel, or act. Distress may make it harder to cope with having **Physical Concerns** Practical Concerns cancer, its symptoms, or its treatment. Pain Taking care of myself Instructions: Please circle the number (0–10) that best Sleep Taking care of others describes how much distress you have been experiencing in Work Fatigue the past week, including today. Tobacco use School Substance use Housing Memory or concentration Finances Sexual health Insurance 10 Extreme distress Changes in eating Transportation 9 Child care Loss or change of physical abilities Having enough food **Emotional Concerns** 8 Access to medicine Worry or anxiety Treatment decisions Sadness or depression 7 -Loss of interest or enjoyment Spiritual or Religious Concerns Grief or loss Sense of meaning or purpose 6 Fear Changes in faith or beliefs 5 -Loneliness Death, dying, or afterlife Anger Conflict between beliefs and 4 cancer treatments Changes in appearance Relationship with the sacred Feelings of worthlessness or being a 3 Ritual or dietary needs burden Social Concerns Other Concerns: 2 -Relationship with spouse or partner Relationship with children 1 -Relationship with family members Relationship with friends or coworkers No distress Ω Communication with health care team Ability to have children

Cut off Score - 4

Implementation

- Initial visit
- Important time points
- New changes

Note: All recommendations are category 2A unless otherwise indicated. Clinical Trials: NCCN believes that the best management of any patient with cancer is in a clinical trial. Participation in clinical trials is especially encouraged.

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PREPAREDNESS FOR CAREGIVING SCALE



The Preparedness for Caregiving Scale

YOUR PREPARATION FOR CAREGIVING

We know that people may feel well prepared for some aspects of giving care to another person, and not as well prepared for other aspects. We would like to know how well prepared you think you are to do each of the following, even if you are not doing that type of care now.

Not at all prepared	Not too well prepared	Somewhat well prepared	Pretty well prepared	Very well prepared
0	1	2	3	4
0	1	2	3	4
0	1	2	3	4
0	1	2	3	4
0	1	2	3	4
0	1	2	3	4
0	1	2	3	4
0	1	2	3	4
repared for?				
MEANICOO	BF of the sec			
	all prepared 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	all well prepared prepared 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0 1	all prepared well prepared well prepared 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2 0 1 2	all prepared well prepared well prepared well prepared well prepared 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3 0 1 2 3

A series provided by The Hartford Institute for Geriatric Nursing. NYU Rory Meyers College of Nursing INAL: nursing.hign@nyu.edu HARTORD INSTITUTE WEISTIC: WWW.hign.org CLINEAL NURSING WEBSITS: WWW.ConsultGerLorg

CAREGIVER SELF-ASSESSMENT QUESTIONNAIRE



Caregiver Self-Assessment Questionnaire

How are YOU?

Caregivers are often so concerned with caring for the relative's needs that they lose sight of their own well-being. Please take just a moment to answer the following questions. Once you have answered the questions, turn the page to do a self-evaluation.

During the past week or so, I have ...

 Had trouble keeping r mind on what I was d 		I3. Had back pain □Yes □No	
 Felt that I couldn't lear relative alone 	·	 Felt ill (headaches, stomach problems or common cold) □Yes □No 	
 Had difficulty making decisions 	Yes No	 Been satisfied with the support my family has given 	
 Felt completely overwhelmed 	Yes No	me	
 Felt useful and needed 	🛛 Yes 🗍 No	16. Found my relative's living situation to be inconvenient or a barrier to care □Yes □No	
6. Felt lonely	🛛 Yes 🗍 No	 On a scale of I to 10, with I being "not stressful" to 10 	
 Been upset that my re has changed so much his/her former self 	from	being "extremely stressful," please rate your current level of stress.	
 Felt a loss of privacy a personal time 		 On a scale of I to 10, with I being "very healthy" to 10 being "very ill," please rate your current health 	
9. Been edgey or irritab	e 🛛 Yes 🔲 No	compared to what it was this time last year.	
 Had sleep disturbed b of caring for my relati 		Comments: (Please feel free to comment or provide feedback.)	
 Had a crying spell(s) 	Yes No		
 Felt strained between and family responsibility 			

SOCIAL NEEDS SCREENING TOOL



AMERICAN ACADEMY OF FAMILY PHYSICIANS

HOUSING

- Are you worried or concerned that in the next two months you may not have stable housing that you own, rent, or stay in as a part of a household?¹
 - Yes
 - No
- Think about the place you live. Do you have problems with any of the following? (check all that apply)²
- Bug infestation
- Mold
- Lead paint or pipes
- Inadequate heat
- Oven or stove not working
- No or not working smoke detectors
- Water leaks
- None of the above

FOOD

- Within the past 12 months, you worried that your food would run out before you got money to buy more.³
- Often true
 Sometimes true
- Never true
- L
- Within the past 12 months, the food you bought just didn't last and you didn't have money to get more.³
 <u>Often true</u>
 Sometimes true
- Never true

TRANSPORTATION

- Do you put off or neglect going to the doctor because of distance or transportation?¹
 Yes
- L No

UTILITIES

- 6. In the past 12 months has the electric, gas, oil, or water company threatened to shut off services in your home?⁴
 Ves
 No
- Already shut off

CHILD CARE

 7. Do problems getting child care make it difficult for you to work or study?⁵
 Yes
 No

Social Needs Screening Tool

EMPLOYMENT

B. Do you have a job?⁶
 Yes
 No

EDUCATION

9. Do you have a high school degree?⁶ Yes No

FINANCES

10. How often does this describe you? I don't have enough money to pay my bills:²
Never
Rarely
<u>Sometimes</u>
<u>Often</u>
<u>Always</u>

PERSONAL SAFETY

- 11. How often does anyone, including family, physically hurt you?^a

 Never (1)

 Rarely (2)

 Sometimes (3)

 Fairly often (4)

 Frequently (5)
- 12. How often does anyone, including family, insult or talk down to you?^e
 Never [1]
 Rarely (2)
 Sometimes (3)
- Fairly often (4)
- Frequently (5)



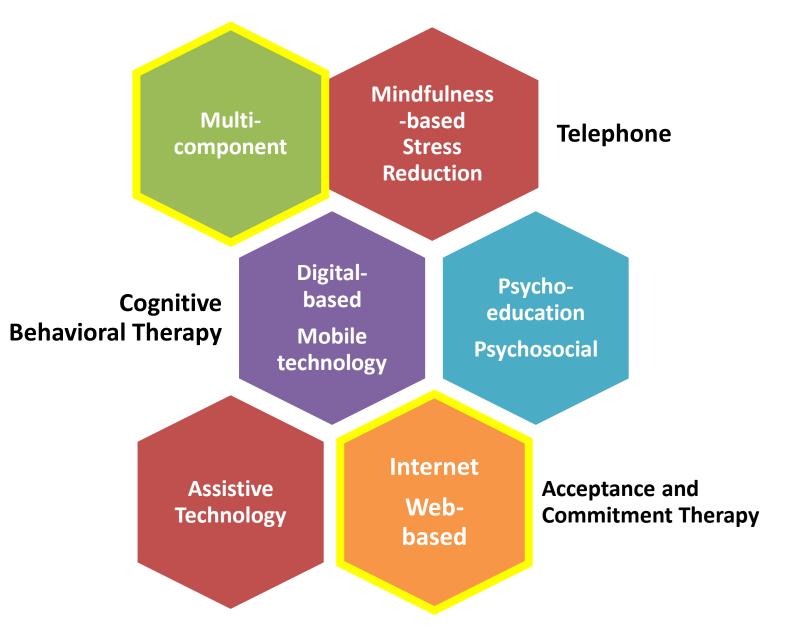




Evidence-Based Interventions

CLINICAL INTERVENTIONS





INFRASTRUCTURE

CMS CY 2024 Physician Fee Schedule



THANK YOU

fawn@caregiving.org







Questions? Please come off mute



KayJernigan RN, BSN Infirmary Cancer Care, Infirmary Health Mobile, AL







Session 4

Case Presentation Infirmary Cancer Care

Session 4 Case Study

Provided by: KayJernigan RN, BSN Infirmary Cancer Care, Infirmary Health System Focus: Patient/Caregiver Case

Patient Hx

- 68 YO female
- Diagnosed with endometrial cancer in Feb of 2022
- Recurrence in Jan 2023
- Chronic kidney disease, hypertension, anemia, ongoing abdominal pain (abscess)
- Caregiver for 3 YO and 12 YO of a recently deceased family member (from brain tumor)
- Does not have legal guardianship of minor children
- Adult daughter unable to assist as caregiver

Key Elements

- Cancer treatments on hold due to fatigue & not being able to care for children
- Threatened with eviction for non-payment of rent
- Financial application
 assistance needed
- Mistrust/distrust of local agencies
- Older child struggling emotionally
- Unable to reach by phone
- 1st funding assistance was lost in mail

Barriers/Challenges

- Mistrust/distrust of local agencies
- Embarrassment-would only ask for assistance as a last resort
- No social worker currently on our team, Nurse Navigator assisting
- Miscommunication between team and patient
- Recognize need sooner
- Monitor missed/canceled
 appointments
- Resources for patient for older child who is struggling emotionally



Session 4 Case Study

American Cancer Society

Provided by: KayJernigan RN, BSN Infirmary Cancer Care, Infirmary Health System Focus: Patient/Caregiver Case

Discussion & Questions

- Caregiver What to do when the patient is also a caregiver, and their treatment plan is suffering.
- Young Caregiver Best practice sharing for supporting a dependent acting as the caregiver
- Trust What are the strategies your teams use to gain the trust of patients who are mistrustful of the medical system/community?

Barriers/Challenges (reference)

- Mistrust/distrust of local agencies
- Embarrassment-would only ask for assistance as a last resort
- No social worker currently on our team, Nurse Navigator assisting
- Resources for patient for older child who is struggling emotionally
- Recognize need sooner
- Monitor missed/canceled appointments





Wrap up

ECHO Participation Post-Session Survey



Health Equity & Caregiving ECHO Session 4 Survey



How to Use a QR Code



Turn on your phone camera
 Aim the camera at the code
 A link will show up
 Tap the link to go to the survey

Upcoming Sessions





Date/Time	Topic	Presenters
October 12 11:30-12:30 CST 12:30-1:30 EST	Integrating the Family Voice in Palliative Care	<u>Didactic</u> : Cardinale Smith, MD, PhD Icahn School of Medicine, Mount Sinai <u>Case Study</u> : Jimmie Wells, MSN, RN, OCN St. Dominic Jackson Memorial Hospital
November 6 11:30-12:30 CST 12:30-1:30 EST	Practicing Cultural Humility While Providing Support to African American/Black Caregivers	<u>Didactic</u> : Katrina Ellis, PhD, MPH, MSW <i>University of Michigan</i> <u>Case Study</u> : Denise Bradford, MSN, RN <i>Our Lady of the Lake Regional Medical Center</i>





Slides, Recordings, & Resources will be made available within one week. All resources will be available on the <u>ACS ECHO Website</u>.



Register Today for **Session 5**

October 12, 2023 11:30-12:30 CST/12:30-1:30 EST



Topic: Integrating the Family Voice in Palliative Care Didactic Presenter: <u>Cardinale Smith, MD, PhD</u> Case Presenter: Jimmie G Wells, St Dominick Hospital





Thank You



Survey QR Code

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