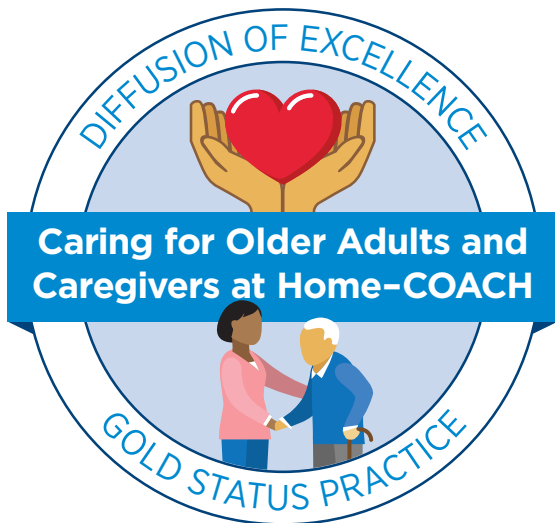


CARING FOR OLDER ADULTS & CAREGIVERS AT HOME—COACH OVERVIEW



MISSION AND GOALS

COACH has been successfully implemented at two VA medical facilities and has developed a number of supportive resources that are tailored for dissemination at VA Medical Centers. The mission of the program is to improve the quality of life of veterans living with dementia as well as their caregivers.

The goals of the program include:

- Improve dementia care management in the home
- Reduce caregiver burden
- Increase patient safety
- Delay or prevent patient institutionalization

The Innovation

COACH is a home based dementia care program that offers support, education, skills-building in dementia care, and assistance in obtaining resources to both Veterans with dementia and the Veterans' caregivers. It is a consultative interdisciplinary dementia model with a holistic-patient-centered approach.

COACH IS DESIGNED TO:

- Improve quality of life for veterans living with dementia and their caregivers
- Help Veterans with dementia live at home as long as possible
- Reduce caregiver burden

ELIGIBILITY CRITERIA:

- Veterans age 65 or older
- Moderate to severe Dementia
- Lives at home with unpaid caregiver
- Lives within 50 miles of a VA Medical Center

COACH Resources

- **COACH** Program Manual
- Home Safety Evaluation
- Comprehensive Patient Assessment
- Caregiver Assessment
- Dementia training curriculum

STEPS TO THE PROGRAM

STEP 1: At the initial visit, the **COACH** team conducts a comprehensive assessment in the home which includes the following:

HOME SAFETY EVALUATION

The **COACH** team assesses the patient's environment for safety concerns and advises caregiver by offering recommendations to avoid or minimize those dementia related safety hazards.

PATIENT ASSESSMENT

This includes patient's cognition, behaviors, physical review, functional assessment, review of medication administration and compliance. Patients are reassessed annually.

CAREGIVER ASSESSMENT

Assesses caregiver stress level and burden, screens for caregiver depression, evaluates caregiver coping skills and strategies.

STEP 2: After the assessment, the interdisciplinary **COACH** team develops a customized treatment plan for each veteran enrolled into the program.

STEP 3: The nurse and social worker implement the treatment plan using evidence based practices in dementia care. Care plans address areas of behavioral management, safety concerns, caregiver stress/burden, dementia related medical issues, and advance care planning. The team conducts home visits and telephone calls periodically with at least quarterly encounters. Veterans remain in the program as long as they live at home and meet criteria for the program.