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#DementiaCareSummit

LEARNING FROM THE EXPERIENCE

- Community Implementation of an array of evidence-based programs for caregivers: REACH II, NYUCI, BRI Care Consultation, Operation Family Caregiver
- Lessons Learned for Agency Fit
 - Readiness assessment
 - Quality effective training
 - Intense Technical assistance (skin in the game)

ONE SIZE DOES NOT FIT ALL COMMUNITIES

Myth: Build it and they will come

Community Fit:

- Family configurations
- Type of consumer
- Geo-cultural influence
- Workforce resources

Menu of services needed

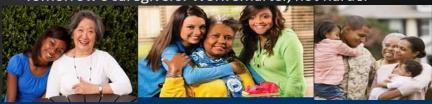
 Community population as barometer for what is needed and how delivered





MAPPING OUT WHAT'S NEXT...

- · Caregivers of tomorrow how will we train and support them?
 - · Generation Baby Boomers, X, Y, Z
- · Valuing the caregiver as a consumer as well as the care recipient
 - Technology: "Is there an APP for that?"
 - · Diversity: Be tuned in to cultural preferences
- Defining the value of technical assistance
 - Virtual platforms
 - Assess effectiveness
- Consistent Quality training and increased dissemination
 - Reduce dementia stigma among the public as well as professional and family caregivers.
 - · Monitoring and assessing training effectiveness
 - Tomorrow's caregivers: Work smarter, not harder



POLICY AND PRACTICE RECOMMENDATIONS:

- Assure Caregivers have access to Evidence-Based, Culturally Appropriate Support Services that Target Identified Needs through dissemination of Evidence Based Supports on a NATIONAL scale.
- Support standardized assessment of training effectiveness and technical assistance in caregiver programs to ensure positive and consistent outcomes for all participants.

RESEARCH RECOMMENDATION:

- Convene a national committee of experts (researchers and consumers) to study how communities (rural and urban) can assess community needs to plan for the best menu of services for caregiver support.
 - Design and pilot a replicable model for true community based participatory research, creating a partnership across all levels of interest: people living with dementia (in all settings), their family and professional care team members, funders, research scientists, translational purveyors, gatekeepers, service providers, and advocates.