

Budget Request FY2022–23

Building Partnerships and Expanding Capacity to Meet the Goals of the California Master Plan for Aging

The Association of California Caregiver Resource Centers (CRCs) request an increase of \$20 million annually to the current California Caregiver Resource Center budget allocation.

The California Caregiver Resource Centers will:

- Update caregiver support programs and expand respite grants to families.
- Expand and strengthen community partnerships with underserved communities.
- o Deliver culturally appropriate services to under-served groups.

This request directly supports the Master Plan on Aging goals of: *Inclusion and Equity, Not Isolation* through targeted DEI framework program; *Caregiving That Works* by increasing education and training on direct care and care coordination issues; *Health Reimagined* through partnerships and special projects with health care and public health; *and Affording Aging* by providing respite, legal and financial planning information, and linkage to community services.

This increase in funding will support the CRCs to:

- Reach over 700,000 Californians with education about their CRC and caregiving.
- Increase number of clients accessing intensive caregiver support services from 16,000 to 30,000.
- Double respite grants delivered to Californians providing complex care, ensuring that 6,000 Californians a year receive a break (250,000 total hours) from caregiving.
- Expand delivery of evidence-based interventions for caregivers to decrease stress, increase confidence and decrease isolation.
- Provide intensive education and training to 80,000 family caregivers.
- Provide professionally led support groups to 4,000 caregivers.
- Develop strategic ongoing partnerships with diverse communities to better serve these groups.

This funding further supports the California Master Plan for Aging efforts by weaving a Diversity, Equity and Inclusion (DEI) framework into all services.

The CRCs will expand partnerships and capacities by:

- Creating a CRC DEI Advisory Council of consumers, community organizations, social and health care systems, researchers, and community leaders to guide this initiative.
- Expanding partnerships with community organizations and health systems serving diverse populations.
- Reviewing and updating internal CRC operations (such as information services, clinical assessments, interventions and training materials) for culturally appropriate approaches and language.
- Hiring diverse staff and developing strategies and technologies to share diverse staff within the CRC system to ensure effective and appropriate services to smaller diverse communities within each CRC region.
- Developing and delivering CRC staff training in cultural diversity, outreach, service delivery and clinical practice.

California Caregiver Resource Center Budget Request FY2022–23

Department of Health Care Services; Local Assistance

Building Partnerships and Expanding Capacity to Meet the

Goals of the California Master Plan for Aging

The CRC system requests an ongoing augmentation of \$20M/year to the current CRC appropriation to meet the demand expected from health and social service systems for partnerships to provide culturally appropriate services and supports to family caregivers.



FY 2021 Stats*

SERVICES

16,000

caregivers accessed intensive CRC services

6,100 intakes

4,300 assessments

25,546 consultations

3,259 received respite

135,652 respite hours

1,993 attended support groups

67,148 attended education events

1,250 education events

4,927 outreach events

488,462 individuals reached

SATISFACTION

4.8 out of 5 overall

4.2 out of 5 online services

* CRC Client Satisfaction Questionnaire

This augmentation request proposes a pragmatic approach to expand and strengthen existing partnerships with community services, review and revise CRC practice and interventions, and find innovative ways to provide culturally appropriate services to under-resourced areas of the state. It also includes collecting meaningful data for evaluation to best determine caregiver risk, services, and interventions to meet the needs of diverse caregiving families and examines elements of system change to expand and meet the needs of these caregivers.

In FY2019-20, the CA Caregiver Resource Center (CRC) System received an augmentation to expand and retool the system to recognize the changing demographics of California family caregivers and the complexity of care needed by their family members. In the almost three years since, the system has met or exceeded service expansion goals while installing a digital infrastructure of secure, client-facing client records, digital service and training delivery, quality assurance standards and yearly evaluation. This mature system is now strongly positioned for additional service growth to meet increasing awareness from health care and social services of the need to support family caregivers.

Background The CRCs were established in 1984 to have a broad reach across age, income, and diagnosis to provide statewide services to unpaid family caregivers. Those targeted for this program included adults with difficult to manage chronic health conditions resulting in cognitive impairment, including Alzheimer's Disease and Related Disorders (ADRD); degenerative disease which cause both physical and cognitive impairment, including cerebrovascular diseases such as stroke, aneurysm, and multi-infarct disease; brain injury; brain tumor and any other brain impairing condition. While the conditions may be diverse, the similarities are striking for the types of services and support needed by families. Instead of building specialized silos of care, we need to create interconnected partnerships to make sure no caregiving family is left behind.

In FY 2021 the CA CRCs served a diverse family caregiver population who are in significant need of assistance. Compared to state and national caregiver data, caregivers served by the CRCs provided more complex and intense care, with 90.4% providing a high level of care (based on weekly care hours and number of ADL and IADL supports). Most caregivers (78.6%) assisted with at least one medical/nursing task and 72.9% spent more than 40 hours per week caregiving. Despite these heavy demands, 70% received no paid help. Many caregivers experienced their own physical and mental health issues, with over 30% reporting fair or poor health and 35% reporting worsening of health over the past year. About 20% reported moderate to severe depressive symptoms and 35% reported loneliness. Forty eight percent (48%) of current clients served

by the CRCs are non-White and were most likely to identify as Black non-Hispanic, Hispanic/Latino, Asian American/Pacific Islander, Native American/Alaska Native or multi-racial/other. Many live below the federal poverty level. Others do not have income high enough to private pay for services. All are caring for an adult with Alzheimer's or related disorder. *The economic value of this care by 4.7M unpaid caregiving families is estimated to be over \$63B per year.*

<u>Service Expansion Projections</u> This request supports the MPA goals of Inclusion and Equity, Not Isolation; Caregiving That Works; Health Reimagined; and Affording Aging, would more than double the current budget amount and would in turn:

- increase new clients accessing services from 16,000 to over 30,000
- ▶ double respite to over \$7M assuring that 5,000 to 6,000 mid- to low-middle income families who are not eligible for MediCal HCBS services, receive a break from caregiving
- ▶ increase diverse staff to provide culturally appropriate evidence-based and informed interventions to decrease stress, increase confidence and decrease isolation
- provide education and training to over 60,000 family caregivers
- provide professionally led support groups to over 4,000 caregivers
- ▶ increase staff to each CRC to conduct outreach and develop 20+ partnerships in diverse communities that invest in meeting local or regional needs

<u>Diversity Equity and Inclusion (DEI) Within Service Expansion</u> This augmentation supports the CA Master Plan for Aging (MPA) efforts to weave a DEI framework into all services and supports for older Californians (Goal 3: Inclusion & Equity, Not Isolation). Currently 48% of CRC clients are non-white and there has been an emphasis on hiring diverse staff across the system. While a good foundation, the CRCs propose expanding statewide partnerships and capacities through:

- ► creation of a CRC DEI Advisory Council of consumers, community organizations, social and health care systems, researchers, and community leaders to guide efforts
- expansion of partnerships with community organizations and health systems serving diverse populations
- review of internal operations such as information services, clinical assessments, interventions and training materials for culturally appropriate approaches and language
- hiring diverse staff and developing strategies and technologies to share diverse staff within the CRC system to ensure effective and appropriate services to smaller diverse communities within each CRC region
- partnering with organizations and individuals to provide CRC staff training in cultural diversity, outreach, service delivery and clinical practice
- evaluating these efforts together with caregiver data to drive discoveries, service improvements and to add service experience data to the MPA dashboard

The population of Californians over age 60 years in 2030 is projected to increase to 25% of the total adult population with the majority being diverse elders. Now is the time to expand a tested and mature system of care to meet this growing need.

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