

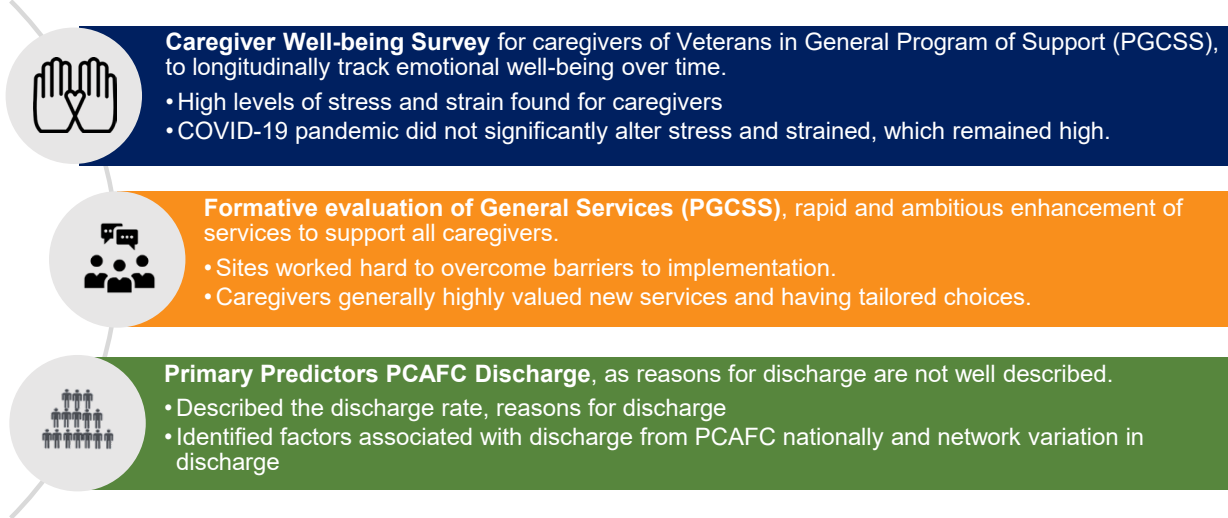
# VA Caregiver Support Program Partnered Evaluation Initiative



## Rapid feedback to VA Caregiver Support Program on Value of its Services

The overarching goal of this partnered evaluation initiative is to work closely with our partners to ascertain the value of VA's caregiver support services. We do this by evaluating the impacts of the Caregiver Support Program (CSP) on Veterans, caregivers, and the VA Health Care System using multiple and mixed-methods approaches and rich data sources.

## Multiple Methods Assess Value to Caregivers, Veterans, VAHCS



## VA CARES

The Caregivers and Veterans Omnibus Health Services Act of 2010 (Public Law: 111-163) enacted legislation to ensure services and supports for family caregivers of Veterans through two landmark programs: the Program of Comprehensive Assistance for Family Caregivers (PCAFC), and the Program of General Caregiver Support Services (PGCSS). In 2021 PCAFC was expanded to more eras of Veterans. These two programs—referred to as the Caregiver Support Program—serve to enhance support and services for family caregivers for qualifying Veterans, including education and training and respite care.

VA CARES partners with VA Caregiver Support Program to design and execute rigorous policy evaluation projects, informing best practices for improving and targeting its interventions so that they are optimally Veteran and caregiver-centered. The results of the evaluation contribute to the implementation of evidence-based treatments or programs designed to improve quality of care for Veterans.

Nearly **5.5 million caregivers assist Veterans in their daily lives**. Stress among caregivers can decrease caregiver well-being, impede quality of care of the Veteran and increase healthcare costs to VAHCS, including nursing home entry.

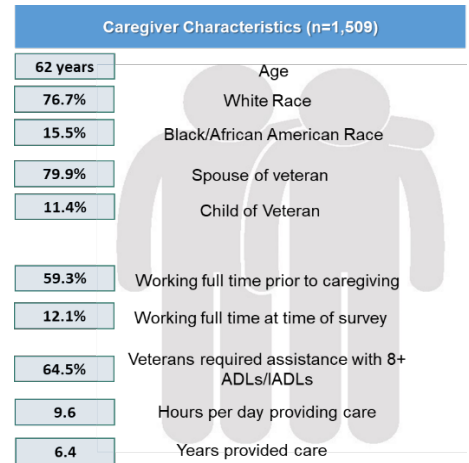
**“To know you can reach out to the facilitator afterwards to help move forward/clarify something, you don’t just get a book and go through a class and are done.”**  
**“Knowing you are not alone, that makes all the difference in the world.”**



# Caregivers of Veterans Experience High Levels of Strain

**CHASE Survey.** VA CARES collected baseline data on **1,743** caregivers who participate in the Program for General Caregivers Support Services and may be eligible for PCAFC under program expansion (Nov 2017 and Sept 2020). **1,509** surveyed in first wave and 234 in the second wave. 33% recruitment rate for baseline.

**COVID-19 Wellbeing.** Caregivers surveyed at the pre and post pandemic time points, experienced **slight improvements in measures of wellbeing** during the pandemic. However, levels of distress remain high. Findings differ from other early evaluations of pandemic for caregivers perhaps partly because VA maintained supports through virtual delivery.



## Formative Evaluation of Enhanced PGCSS Services and Supports Implementation

To help VA CSP assess value of its PGCSS services, focusing on REACH VA and S.A.V.E. training, the team collected **observational data** in the form of ethnographic fieldnotes from VISN and national level PGCSS calls and interviewed PGCSS staff (caregiver interviews ongoing). **Interim results show:**

- Uneven pacing in implementing new programs: sites lagging to implement made strong efforts to catch up to deliver these trainings and meet minimum standards.
- Rapid and ambitious enhancement of a program is challenging given competing priorities: Implementation was challenged by (1) PGCSS staff being drawn to help process the overwhelming number of PCAFC applications, (2) onboarding of new staff at start of FY21 who were not always aware of the minimum standards and needed certification to deliver REACH VA trainings, (3) competing PGCSS priorities as staff tried to execute many different programs, and (4) limited time for caregiver engagement.

## Primary Predictors of Discharge from PCAFC

### Rate and Predictors

40.5% of all participants discharged.

Non-spouse caregivers and those applying in later years had the highest rates of discharge  
Spouse caregivers and those applying in earlier years had lowest rates of discharge.

### Network Variation

Substantial variability in rates of discharge was also observed across Veteran Integrated Service Networks.

Black Veterans faced higher rates of discharge in 4 of 18 networks, lower in 1 of 18 networks.

### Quality Improvement

Tier 3 caregivers least likely to be discharged, as expected, but relationship and race should not predict discharge.

National training on clinically appropriate discharge criteria could improve practice and increase equity in all regions.

For more information, check out:  
<https://www.queri.research.va.gov/>

If you would like to learn more or partner with us, please contact, Nadya Majette at [nadya.majette@va.gov](mailto:nadya.majette@va.gov).

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