

Care partners attending rural primary care memory clinics: Service needs and self-efficacy

Julie Kosteniuk, Debra Morgan, Megan E. O'Connell, Chelsie Cameron,
Valerie Elliot, Chandima Karunanayake

University of Saskatchewan, Saskatoon, Canada



Background

- Rural family care partners may face barriers to accessing certain dementia-related services. Access may be improved by providing a point of entry to services, and education about important topics and available resources.¹
- In Saskatchewan, RaDAR memory clinics embedded in rural primary health care teams connect patients and families to local supports and offer coordinated, collaborative, and comprehensive care.²



RaDAR Rural Memory Clinics

Memory clinics provided by primary health care teams have been implemented in 10 communities in southeast Saskatchewan, (pop. 330 to 11,000).

Interprofessional teams include family physician and/or nurse practitioner, occupational therapist, home care nurse or social worker, and Alzheimer Society First Link Coordinator. Some teams include a pharmacist, physical therapist, and/or dietitian.

Clinics are held every 1-2 months or as needed in each community.

Half-day assessments of 2 new patients on clinic day involve family care partners who meet individually with team members. An end-of-day team meeting with patient and care partner includes discussion of the diagnosis/initial impression, information about available services, and recommendations.

PC-DATA™ templates have been added to teams' EMR systems for decision support during initial assessment and ongoing management (PC-DATA = Primary Care Dementia Assessment and Treatment Algorithm³).

Objectives

- To compare self-efficacy ratings and service/support needs of family care partners at initial assessment (clinic day) and 1-month post-assessment.
- To examine family care partner perceptions regarding receiving adequate information at initial assessment.

Methods

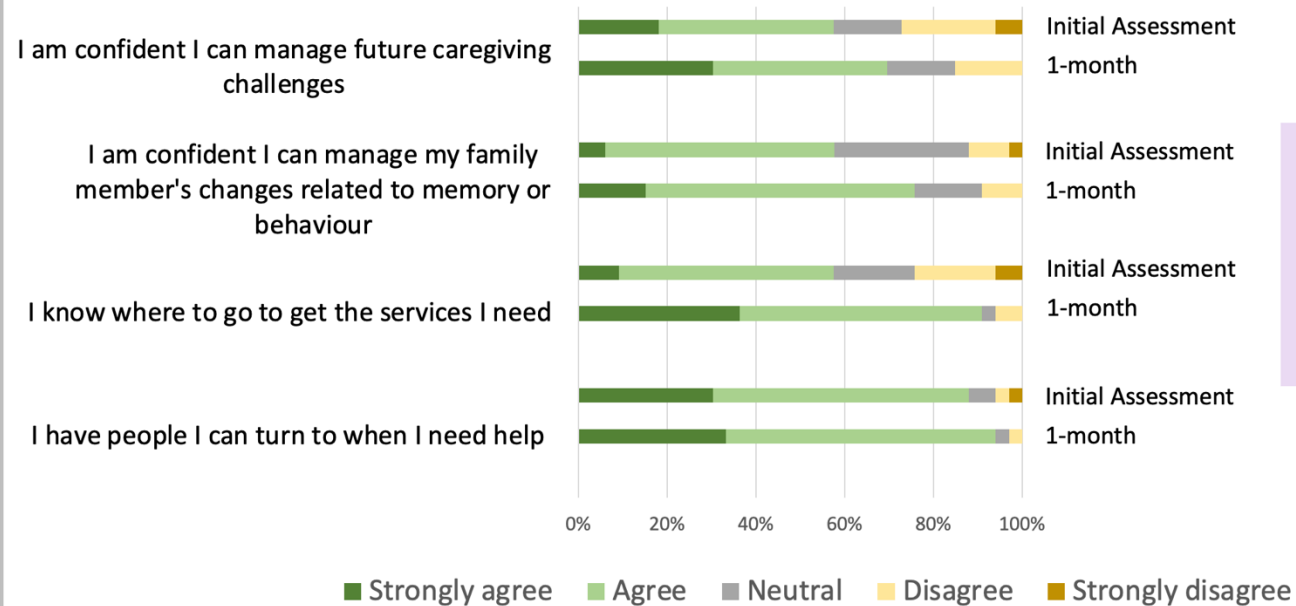
- **Semi-structured interviews with 33 care partners** from November 2019 to March 2024
 - Two timepoints: Clinic day (in-person) and 1-month (telephone)
 - 33 of 53 care partners (62%) completed both timepoints
 - 8 memory clinic teams are represented
- **Patient information on clinic day:** Sex, age, cognitive and functional scores
- **Care partner outcome measures**
 - **Self-Efficacy:** 4 items on a 5-point scale (total score 5-20) adapted from the Care Ecosystem Caregiver Self-Efficacy Scale⁴
 - **Any services/supports care partner or patient may benefit from, not yet received** (yes/no; comments)
 - **Received adequate information about particular topics or services at initial assessment:** 12 items (yes/no) informed by PC-DATA template
- **Quantitative and qualitative data analysed descriptively**
 - Self-efficacy scores and positive responses to 'any services/supports that may be beneficial but not yet received' were compared between clinic day and 1-month with a paired samples *t*-test and paired samples proportions test, respectively.

Results

Care Partner and Patient Characteristics, Initial Assessment

Care Partner (N = 33)	n (%) or Mean (SD, range)
Female sex	20 (60.6)
Age, years(SD, range)	66.5 (10.9, 42-88)
Relationship to family member	
Spouse	18 (54.5)
Child	13 (39.4)
Other	2 (6.1)
Patient (N = 33)	
Female sex	19 (57.6)
Age, years	79.0 (9.9, 41-94)
Cognitive and functional scores	
MMSE	23.9 (4.0, 13-30)
MoCA	17.0 (5.2, 6-24)
FAQ	13.5 (9.4, 0-30)
KATZ	5.6 (1.4, 0-6)

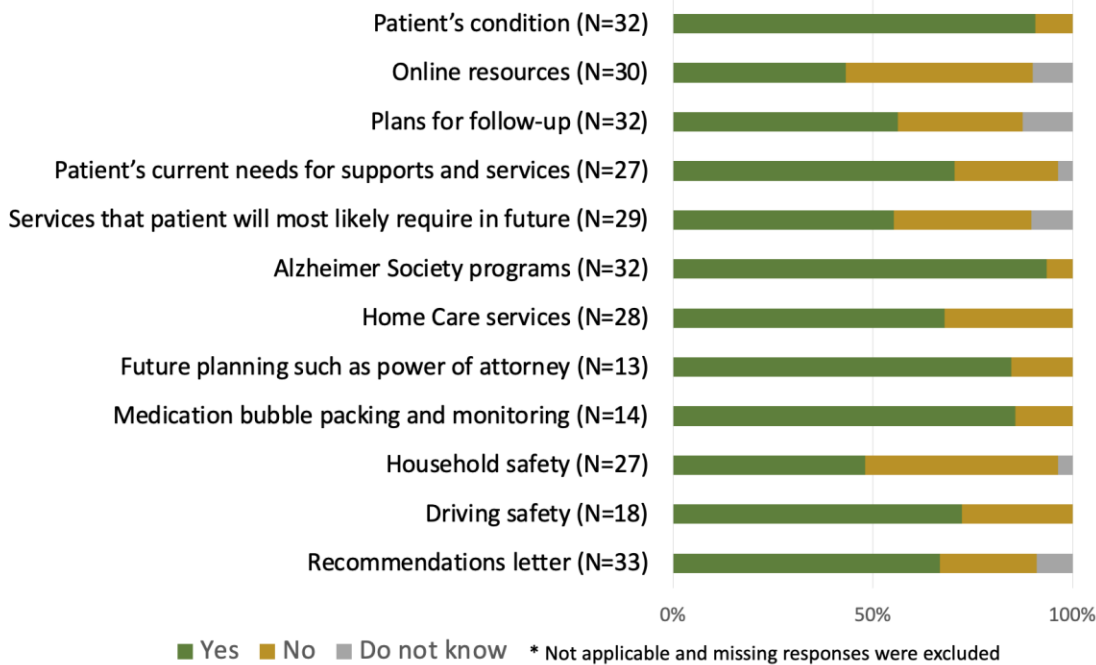
Care Partner Self-Efficacy, Initial Assessment and 1-month



- Care partner self-efficacy mean score increased significantly from 14.4 (SD = 2.8) at Initial Assessment to 16.1 (SD = 2.4) at 1-month ($t = -3.58$, $p = <.001$, Cohen's $d = -.62$).

Results

Received adequate information about particular topics and services during initial assessment*



- More than 50% of care partners reported receiving adequate information on 10/12 topics/services.
- The proportion of care partners who reported receiving adequate information about particular topics or services during a memory clinic assessment ranged from 43.3% (online resources) to 90.6% (patient's condition and Alzheimer Society programs).

Any services/supports considered beneficial but not yet received, Initial Assessment and 1-month

	Initial Assessment n (%)	1-month (%)	p value
Yes	16 (48.5)	8 (24.2)	.02
No	14 (42.4)	22 (66.7)	
Do not know	3 (9.1)	3 (9.1)	

- At Initial Assessment, 48.5% of care partners reported they had not yet received services/supports they considered beneficial. This decreased significantly to 24.2% at 1-month ($p = .02$).

Services/supports considered beneficial but not yet received Illustrative Quotations

Initial Assessment

Information/education /support group

Well I think there's some education, because I did speak with (staff) from the Alzheimer's Society. My sister and I did last Thursday. And she had suggested looking up on the website, and some information that way. And somebody shared something on Facebook too. And so I did a little looking that way. And there are definitely some virtual sessions I would like to attend with her, no doubt.

I'm looking forward to talking more to the Alzheimer's Society and seeing if — I know they've got lots of good information.

Housecleaning or yardwork

She'd likely get somebody in to clean house, but I don't know if there's anybody around. She doesn't usually mess up much, and I just clean that up.

Yard work, we talked about...and maybe getting a housecleaner in, or something. So that 'cause Dad enjoys cooking and he does all of the cooking.

Home care/bathing assistance/medication check/meal prep

I think homecare, checking on meds. (CP1) Yeah, that's a big one, is the meds. (CP2)

We would benefit from- Well that's got to do with the bathing at the, they pick him up, and he had that opportunity but he wouldn't go.

Lifeline/safety check

I can't leave her for ... an extended period of time. She's ok if she's overnight, a couple days, and as long as I have everything set out. Freezer meals, everything done, I'm good...But it's that after the two or three days that it is when I have to have somebody make sure that she's still on the same day as on her packs.

Respite

Just to get away ...that's why I got home care. I went in once for a lunch with my girlfriends and once for a massage. But I should do it at least once a week.

1-month

Home care exercises/Occupational therapy

I think once they participate in some of the Home Care exercises and whatnot, that would be beneficial for mom, particularly. But that is kind of already on the list and we've already been in discussions, so I don't know that that's necessarily new.

Housecleaning

Well we could have somebody come in and house clean. But we're doing okay. We'll use services when we need them.

Counselling

[...] Just to talk with someone, I guess

Lifeline

Yes, and one that we're looking into, it's the helpline. You know, if you fall and it records.

Respite

Well, like I said, it would be wonderful to have the day hospital on the days that I do cards.

Conclusions

Rural primary care memory clinics may promote care partner confidence and knowledge of services

- Care partners demonstrated moderate improvement in caregiving self-efficacy related to managing caregiving challenges and knowledge of services.
- By 1-month after assessment, care partners were less likely to have unmet needs for services/supports.
- The majority of care partners reported receiving adequate information on 10 of 12 key topics/services during the assessment.



References

1. Bayly M. et al. Dementia-related education and support service availability, accessibility, and use in rural areas: barriers and solutions. *Canadian Journal on Aging*. 2020;39(4):545-585.
2. Morgan D. et al. Factors influencing sustainability and scale-up of rural primary healthcare memory clinics: perspectives of team members. *BMC Health Services Research*. 2022;22:148.
3. Seitz D. Primary Care – Dementia Assessment and Treatment Algorithm (PC-DATA) Manual.
4. Merrilees J. et al. The Care Ecosystem: Promoting self-efficacy among dementia family caregivers. *Dementia*. 2020;19(6):1955-1973.