

TRAINING OF IN-HOME SUPPORTIVE SERVICE CAREGIVERS ON OLDER ADULT CARE

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Background/Aim: The older adult population in Orange County, Southern California has fast growing from 16.5% of the total population in 2010 to projected approximately 24.4 % by 2020. Our current healthcare delivery system is ill-equipped to meet older adult care needs, especially among underserved populations. The Orange County Social Services Agency's In-Home Supportive Services (IHSS) program has over 14,000 caregivers of underserved clients over 65 years of age. IHSS caregivers provide personal care for individuals who are unable to live at home safely without help. Given that the IHSS caregivers receive little practical training, our intervention aimed to enhance the geriatric knowledge and skills of IHSS caregivers to improve health outcomes and quality of care for older adults.

Methods: Nursing students under the supervision of nursing faculty developed curriculum for two-hour training sessions for IHSS caregivers on topics prioritized by the IHSS leaders, including diabetes management, bowel and bladder care, communication skills, dementia care, and fall prevention. Pre-post anonymous education surveys including questions related to training content were performed in each session.

Results: We held a total of five two-hour interventional sessions to IHSS caregivers over a year. A total of 101 IHSS caregivers participated in one or more training sessions. There were significant differences of pre-post knowledge tests in bowel and bladder, fall prevention, and dementia care sessions (all p-values <.05), showing increasing knowledge after training. The overall training evaluation including content, methods, presenter effectiveness, and satisfaction with the training for each session showed more than 4.5 of 5 (1= very poor, 5=excellent). Some participants requested that education materials be available in other languages such as Spanish, Chinese, Korean, Vietnamese, or Farsi. IHSS caregivers wanted additional training in areas including wound care, late stage dementia care, end-of-life care, disability care, substance abuse, and stress management.

Conclusion/Implications: Overall, the pre-post evaluation showed improved comfort levels in performing basic caregiver skills. The findings identified specific educational needs for caregivers, validated the nursing-student model of education, and established priorities for future education of those caring for our vulnerable geriatric populations.

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