

Pilot Pragmatic Clinical Trial to Embed Tele-Savvy into Health Care Systems



Principal Investigator

Richard H. Fortinsky, PhD
UConn Center on Aging, University of
Connecticut School of Medicine

Health Care Systems

- UConn Health
- Emory Healthcare

“Our multidisciplinary study team is excited about the prospect of improving care for people living with ADRD and their caregivers by pragmatically linking health care systems with well-tested caregiver educational and skill-building programs.”

RATIONALE: Efficacious interventions offering meaningful benefits to family and other informal caregivers of older adults with Alzheimer’s disease and related dementias (ADRD) would be attractive to office-based practitioners if a pragmatic linkage could be made between interventions and these types of health care settings.

OBJECTIVE: We aim to embed a pragmatic caregiver identification and invitation strategy into the daily workflow of two outpatient clinics, enabling caregivers to complete the efficacious online psychoeducational Tele-Savvy program. We also aim to evaluate Tele-Savvy effectiveness, assess implementation of the caregiver identification and invitation strategy, and determine viability of routinely collecting and storing caregiver outcomes data into the clinics’ electronic health record systems.

SETTING: Geriatric and dementia care outpatient clinics in two health care systems.

POPULATION: 100 family and other informal caregivers of older adults living at home with ADRD who are patients in the two outpatient care settings.

DESIGN: At each clinical site, caregivers will be recruited in three sequential cohorts. Within each cohort, caregivers will be randomly assigned to join a Tele-Savvy program or to access an online self-guided program about caregiving during crisis. We also will carry out an implementation evaluation to determine clinical staff acceptability and willingness to adopt Tele-Savvy as a routinely-offered caregiver psychoeducational program.

OUTCOMES: Primary outcome is self-reported caregiver mastery. Secondary outcomes are self-reported caregiver reactions to memory and behavior problems, and self-reported perceived stress. All of these outcomes were used in the Tele-Savvy intervention efficacy trial.

IMPACT: If this pilot study successfully achieves its objectives, we will be poised to design a large embedded pragmatic trial engaging sites from the large pool of geriatric and dementia care clinics nationwide. Our long-term goal is to routinely offer Tele-Savvy to caregivers, and to routinely store caregiver outcome data, in health care systems that provide outpatient care to people living with ADRD and their families.