FEASIBILITY OF THE CARRES MODULES:
EDUCATING FAMILY CAREGIVERS OF PERSONS WITH COGNITIVE DEFICITS
ABOUT POTENTIALLY AVOIDABLE HOSPITALIZATIONS

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**Purpose and background/significance.** Family caregiving is an essential, yet understudied, factor that can hasten, delay, or prevent hospital readmissions in older care recipients with cognitive deficits. The purpose of this three month feasibility study was to examine 18 Internet-based educational CARREs (Communicate, Assist, Recognize & Report Events) Modules for family caregivers that address care recipients' potentially avoidable hospitalization (PAH) conditions, e.g. urinary tract infections.

**Theoretical/conceptual framework.** Based on Friedemann’s framework of systemic organization, the CARREs Modules may promote well-being (congruence in Friedemann’s terms) for family caregivers and care recipients with cognitive deficits caused by Alzheimer’s disease or stroke.

**Methods.** A mixed methods design was used to determine: 1) caregivers’ perceptions about the use of the CARREs Modules, 2) caregivers’ self-reported value of the CARREs Modules, and 3) potential outcomes for caregivers and care recipients. Twelve community-dwelling family caregivers were recruited from local support and education programs. Caregivers were assigned six to eight CARREs Modules based on the needs of their care recipients and emailed links to online surveys at baseline, and 30 and 90 days post-enrollment. A descriptive analysis was done on these data.

**Results/findings.** Twenty potential subjects were screened but five were ineligible and three refused to participate. The remaining 12 subjects were primarily White females who were caring for a husband or parent. They completed all the Modules they were assigned; many completed additional Modules. Subjects did not experience any difficulties answering the survey questions, but some felt disconnected during the 60 days with no correspondence from investigators. Although subjects stated completing the Modules somewhat increased their knowledge and they would participate again, they also reported feeling burdened by the Modules. Many subjects stated the Modules taught them new things about preventing hospital readmissions in their care recipient and improved their well-being as a caregiver.

**Discussion and application to health care.** In collaboration with a home care agency, the investigators will implement and test a sustainable, “real-world” Internet-based educational intervention incorporating the CARREs Modules that reaches a wide audience of family caregivers, enabling them to be more effective advocates for their care recipients and ultimately reduce hospitalization costs.