Georgia Aging and Disability Resource Connection (ADRC) Evaluation Report

Evaluation Report from Boston University
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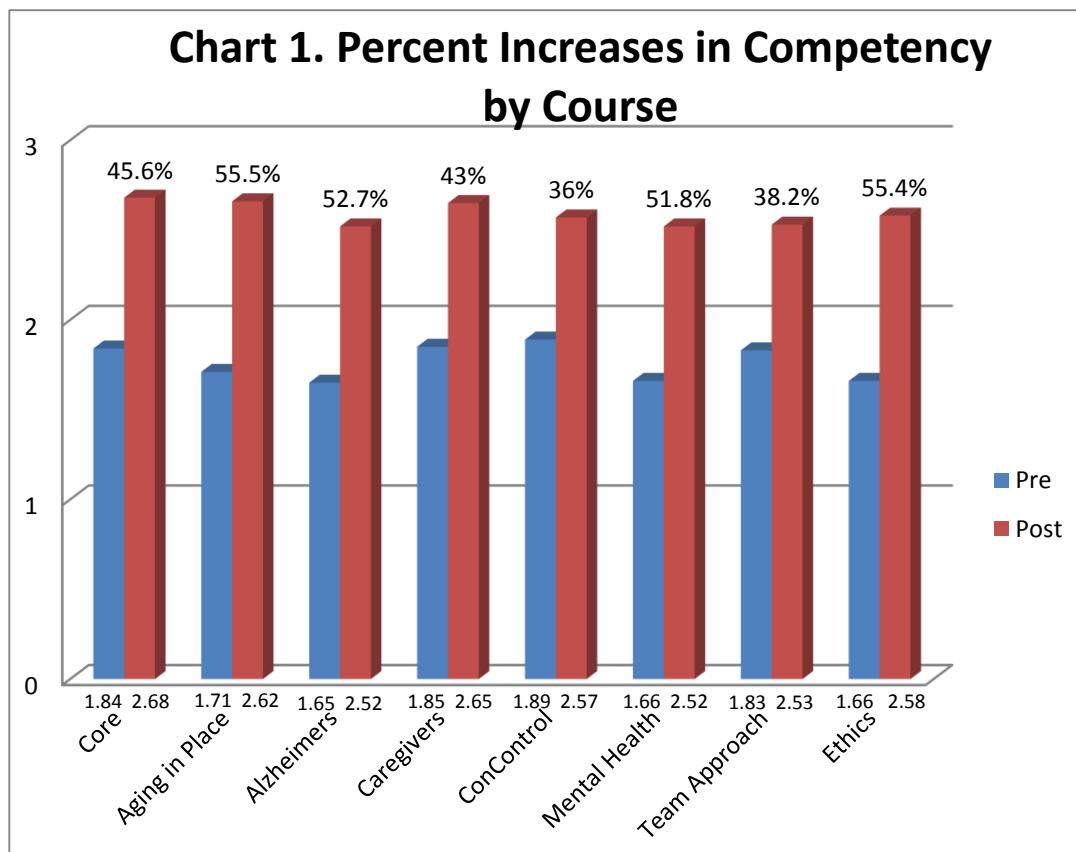
Executive Summary

The Center for Aging and Disability Education and Research (CADER), is dedicated to workforce development in both the aging and the disability fields through educational innovation, workforce change, and research. Located at Boston University School of Social Work, CADER builds upon the School's historical commitment to aging and disability research and practice.

CADER's Georgia Aging and Disability Resource Connection (ADRC) Program is designed to provide ADRC staff with competency-based training that addresses the core knowledge, skills and values needed for effective work with older adults and people with disabilities.

Curriculum Includes

- ➢ Course 1 - Core Issues in Aging and Disabilities - 5 hours/CEUs
- ➢ Course 2 – Aging in Place - 4 hours/CEUs
- ➢ Course 3 – Alzheimer's Disease and Other Dementias - 4 hours/CEUs
- ➢ Course 4 – Working with Informal Caregivers - 4 hours/CEUs
- ➢ Course 5 – Consumer Control, Choice and Direction in Options Counseling - 3 hours/CEUs
- ➢ Course 6 – Mental Health Training in Options Counseling – 4 hours/CEUs
- ➢ Course 7 - Team Approach: Working Across Disciplines – 4 hours/CEUs
- ➢ Course 8 – Ethics in Practice with Older Adults – 4 hours/CEUs

Key Findings

Chart 1. Percent Increases in Competency by Course

Course	Pre	Post	% Increase
Core	1.84	2.68	45.6%
Aging in Place	1.71	2.62	55.5%
Alzheimers	1.65	2.52	52.7%
Caregivers	1.85	2.65	43%
ConControl	1.89	2.57	36%
Mental Health	1.66	2.52	51.8%
Team Approach	1.83	2.53	38.2%
Ethics	1.66	2.58	55.4%

- Participants' competency scores were measured from a self-identified skill level on a scale of:
    - 0 - Not skilled at all
    - 1 - Beginning skill
    - 2 - Moderate skill
    - 3 - Advanced skill
    - 4 - Expert skill
- Participants' competency scores for the certificate demonstrated statistically significant increases between pre and post training assessments in all eight courses. The highest competency increases in each course were:
    - **Core Issues in Aging and Disabilities**, "*Describe the most common causes of disability through the life cycle,*" increased 67% in mean score.
    - **Aging in Place**, "*Discuss the capacity-risk model when addressing the issue of aging in place,*" increased 123% in mean score.

- o **Alzheimer's disease**, "*Understand how to conduct psychosocial interventions in order to help caregivers manage and/or decrease stress*," increased 83% in mean score.
- o **Working with Informal Caregivers**, "*Understand methods for reducing caregiving stress and maintaining their mental and physical health*," increased 57% in mean score.
- o **An Options Counselor's Guide to Consumer Control, Consumer Choice, and Consumer Direction**, "*Understand the history of Disability Rights Legislation and the Independent Living Movement*," increased 53% in mean score.
- o **Options Counseling Mental Health Training**, "*Understand recovery and the recovery movement*", increased 73% in mean score.
- o **Team Approach: Working: Working across Disciplines**, "*Understand how different professional disciplines perceive their roles when working in teams*," increased 67% in mean score.
- o **Ethics**, "*Discuss how the law and public policy influence ethical decisions,* " increased 79% in mean score.

- Of learners who completed course evaluations, at least 93% felt that learning objectives were met.

- Across the eight courses, 91.1% of participants who responded to the course evaluations either agreed or strongly agreed that the courses would help them apply skills in their work in the topic area.

- Also across the eight courses, 80% of participants who responded to course evaluations agreed or strongly agreed that they would recommend the course to a colleague.

- Of the 43 participants enrolled in the certificate, 40 completed the certificate (93.0%).

I. Introduction

The Georgia Aging and Disability Resource Connection (ADRC) Program is a coordinated system of partnering organizations that are dedicated to: providing accurate information about publicly and privately financed long-term supports and services; offering a consumer-oriented approach to learning about the availability of services in the home and community; alleviating the need for multiple calls and/or visits to receive services; and supporting individuals and family members who are aging or living with a disability. CADER worked with the Georgia to develop a training program designed to provide ADRC staff with competency based training

that addresses the core knowledge, skills, and values needed for effective practice with older adults and people with disabilities. All participants initially completed the CADER Competency- Based Assessment of Training Needs. This combined with a DAS organizational review of existing training, led to the creation of the GA ADRC online training program.

II. Participant Profile

Of the 43 participants enrolled in the certificate program, 40 (93.0%) completed the certificate. Each participant was asked demographic questions. The vast majority, 91%, of enrolled participants identified as female, while only 9% identified as male. The average age of enrolled participants was 45 years old. All (100%) of the enrolled participants worked in an ADRC.

Chart 2 below indicates that 65% of enrolled participants self-identified as White/Non-Latino, and 35 % identified as Black/African American.

Chart 2. All Enrolled Participants' Race

- 35% — Black
- 65% — White
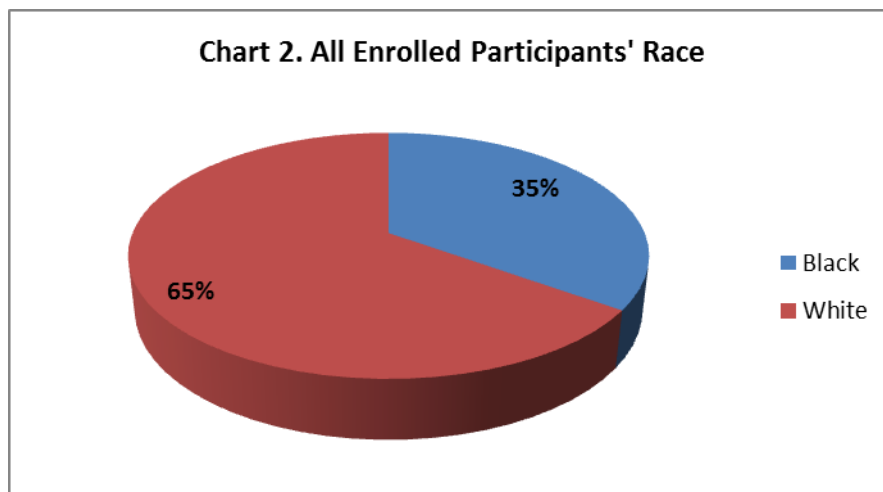
Many participants (33%)did not report on their education level by degree received, but 32% reported having a bachelor's, 26% a master's and 9% an associate's. Seventy-five percent (75%) of participants indicated that they had taken courses on aging as part of their degree program; two percent (2%) had not taken courses on aging as part of their degree; 23% did not respond (see Chart 3).

Chart 3. Enrolled Participants' Who Took Courses on Aging as Part of a Degree Program

Did not Respond 23%

No 2%

Yes 75%
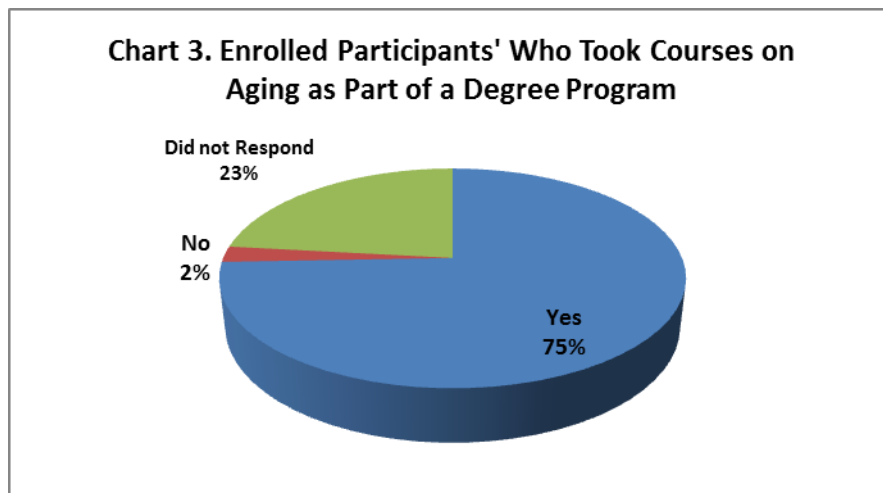
III. Competencies

CADER programs and courses apply a competency-based approach. Social service practice with older adults and people with disabilities is complex. It requires competence, professional judgment, and critical thinking to translate knowledge, skills, and values into effective practice behaviors. The purpose of such an approach is to enhance the application of a specific skill set to your professional practice.
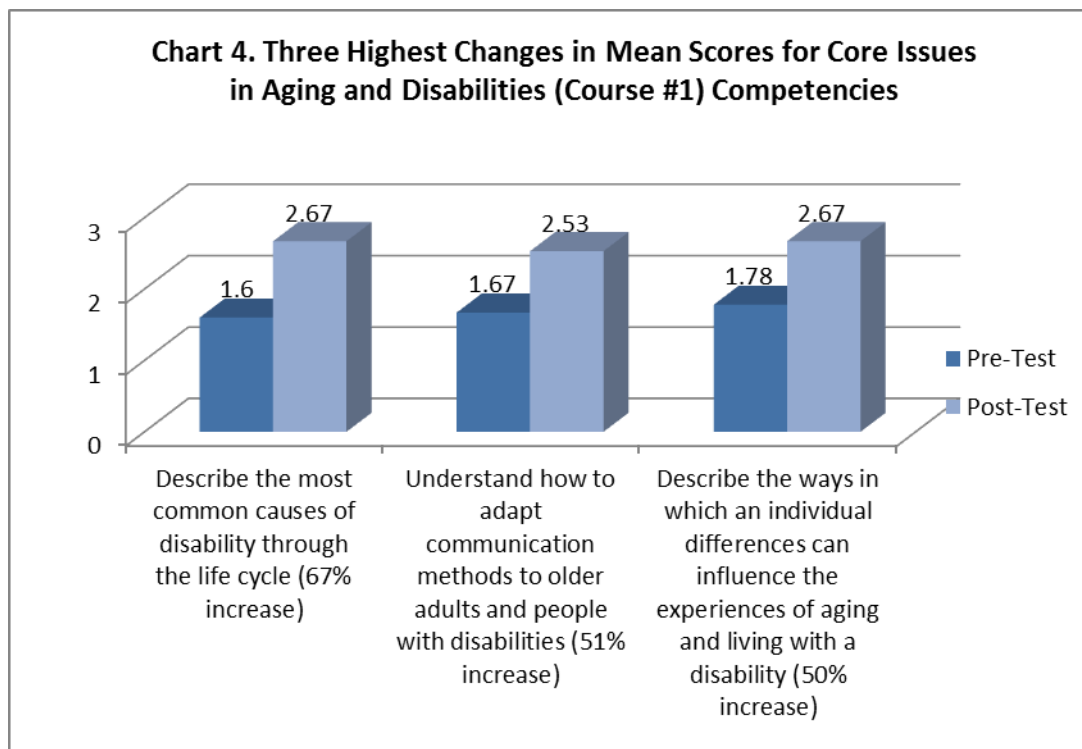
Competency Score Results

There were 69 competencies analyzed for this certificate program, focused in the domains of knowledge, skills, and values. A list of all 69 competencies can be found in **Appendix A**. For participants who completed both the pre and post competency assessments, there was a statistically significant increase in self-reported competence levels for 67 out of the 69 competencies from when participants took the pre-test to when they took the post-test ($p </= .013$). The average increase in scores across all competencies was 43.9%, with increases in 67 competencies ranging from 14% to 123%. Competency gains for each of the eight courses in this certificate program are discussed below.

Course 1 - Core Issues in Aging and Disabilities

This course had eight competencies. At pre-test, the mean score in this domain was 1.84, and at post-test, the mean score was 2.68, an average increase of 45.6% from pre to post-test. Chart 4 highlights the three largest changes from pre-test to post-test in questions within this course (competencies 5, 6, and 8).

- Competency 5, asked participants to "*Describe the most common causes of disability through the life cycle.*"
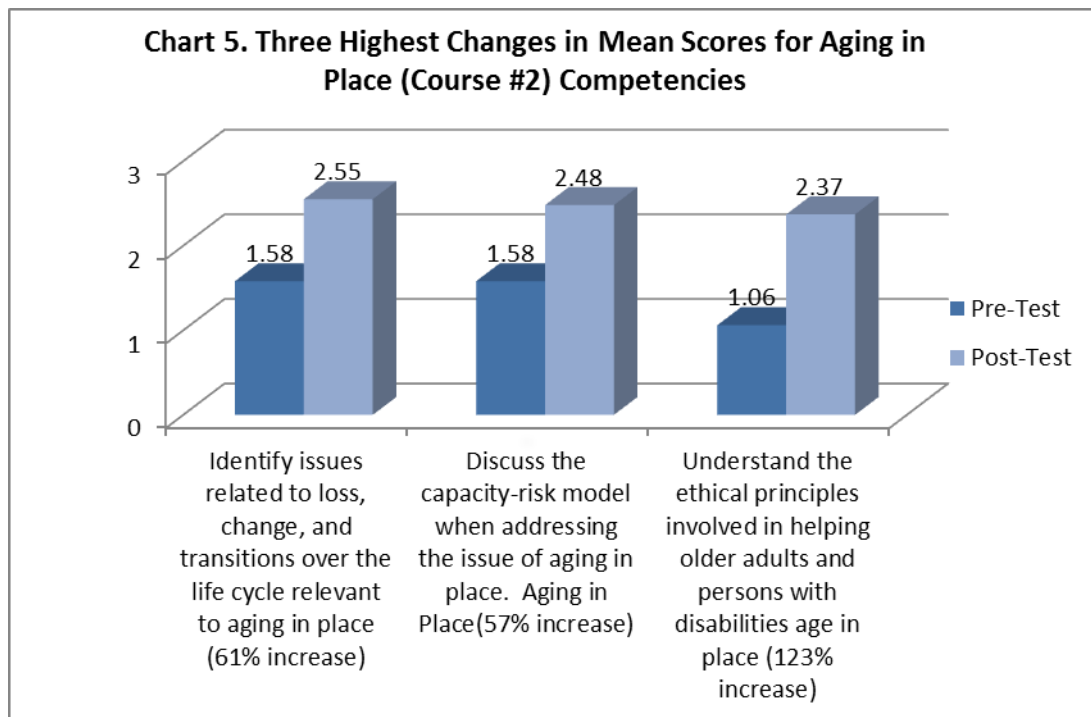
- Competency 6, asked participants to *"Understand how to adapt communication methods to sensory, verbal, physical, and cognitive abilities of older adults and people with disabilities."*
- Competency 8, asked participants to *"Describe the ways in which an individual's cultural, ethnic, religious background or sexual orientation can influence the experiences of aging and living with disability."*

Chart 4. Three Highest Changes in Mean Scores for Core Issues in Aging and Disabilities (Course #1) Competencies

	Pre-Test	Post-Test
Describe the most common causes of disability through the life cycle (67% increase)	1.6	2.67
Understand how to adapt communication methods to older adults and people with disabilities (51% increase)	1.67	2.53
Describe the ways in which an individual differences can influence the experiences of aging and living with a disability (50% increase)	1.78	2.67

Course 2 – Aging in Place

This course had eight competencies. At pre-test, the mean score in this domain was 1.71. At post-test, the mean score was 2.66. The average score increase was 55.5% from pre to post-test. Chart 5 highlights the three largest changes from pre-test to post-test within this domain (competencies 1, 7, and 8).

- Competency 1, asked participants if they could *"Identify issues related to loss, change, and transitions over the life cycle relevant to aging in place."*
- Competency 7, asked participants to assess their ability to *"Discuss the capacity-risk model when addressing the issue of aging in place."*
- Competency 8, asked participants to assess their ability to *"Understand the ethical principles involved in helping older adults and persons with disabilities age in place."*
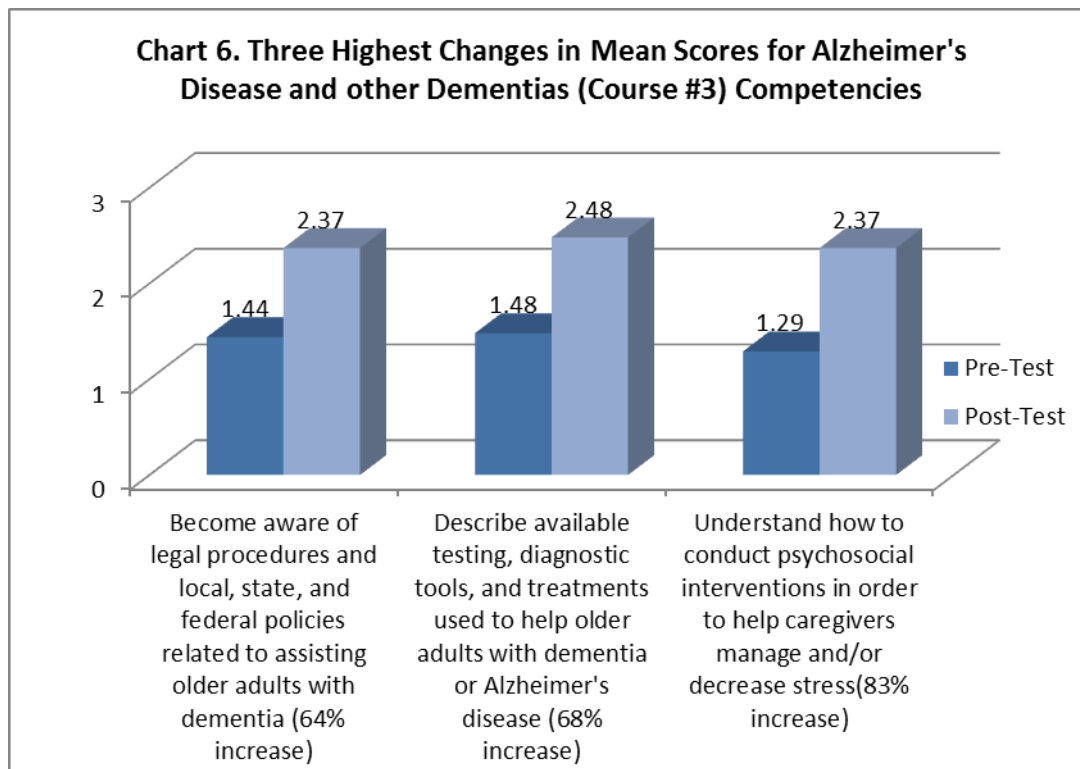
Chart 5. Three Highest Changes in Mean Scores for Aging in Place (Course #2) Competencies

A 3D bar chart comparing Pre-Test and Post-Test mean scores across three competencies:
- Identify issues related to loss, change, and transitions over the life cycle relevant to aging in place (61% increase): Pre-Test 1.58, Post-Test 2.55
- Discuss the capacity-risk model when addressing the issue of aging in place. Aging in Place (57% increase): Pre-Test 1.58, Post-Test 2.48
- Understand the ethical principles involved in helping older adults and persons with disabilities age in place (123% increase): Pre-Test 1.06, Post-Test 2.37

Course 3- Alzheimer's Disease and Other Dementias

This course consisted of nine competencies. At pre-test, the mean score for this domain was 1.65, and at post-test, the mean score was 2.52, an average increase of 52.7% from pre to post-test. Chart 6 highlights the three largest changes from pre-test to post-test within this domain (competencies 3, 4and 7).

- Competency 3, asked participants to rate their ability to "*Become aware of legal procedures and local, state, and federal policies related to assisting older adults with dementia.*"
- Competency 4, asked participants to rate their ability to *"Describe available testing, diagnostic tools, and treatments used to help older adults with dementia or Alzheimer's disease."*
- Competency 7, asked participants to rate their ability to "*Understand how to conduct psychosocial interventions in order to help caregivers manage and/or decrease stress.*"

Chart 6. Three Highest Changes in Mean Scores for Alzheimer's Disease and other Dementias (Course #3) Competencies

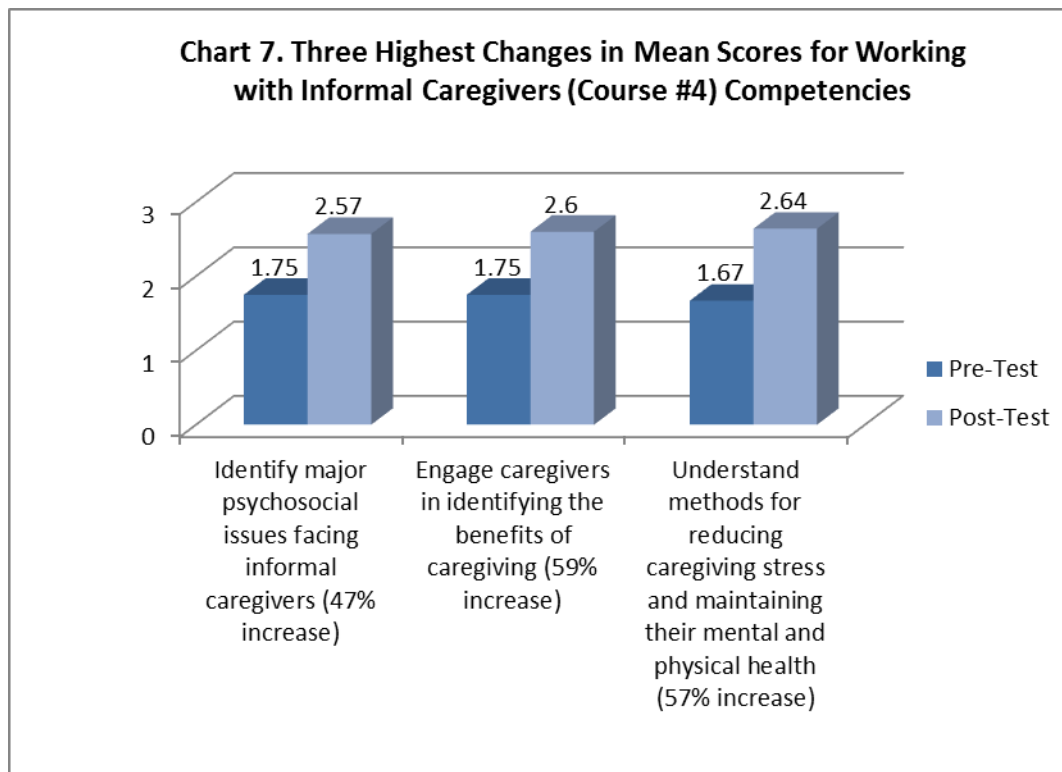|	Pre-Test	Post-Test
Become aware of legal procedures and local, state, and federal policies related to assisting older adults with dementia (64% increase)	1.44	2.37
Describe available testing, diagnostic tools, and treatments used to help older adults with dementia or Alzheimer's disease (68% increase)	1.48	2.48
Understand how to conduct psychosocial interventions in order to help caregivers manage and/or decrease stress (83% increase)	1.29	2.37

Course 4 – Working with Informal Caregivers

This course had seven competencies. At pre-test, the mean score for this domain was 1.85, and at post-test, the mean score was 2.65, an average increase of 43% from pre to post-test. Chart 7 highlights the three largest changes from pre-test to post-test within this domain (competencies 3, 5 and 6).
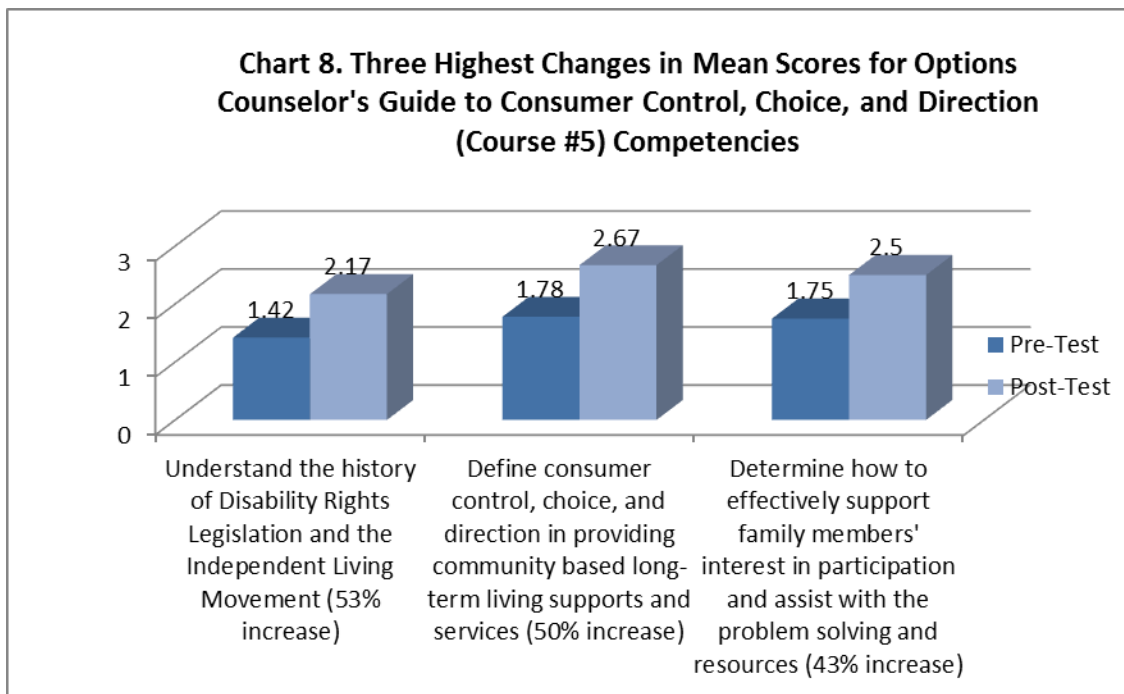
- Competency 3, asked participants to rate their ability to *"Identify major psychosocial issues facing informal caregivers."*
- Competency 5, asked participants to rate their ability to *"Engage caregivers in identifying the benefits of caregiving."*
- Competency 6, asked participants to rate their ability to *"Understand methods for reducing caregiving stress and maintaining their mental and physical health."*

Chart 7. Three Highest Changes in Mean Scores for Working with Informal Caregivers (Course #4) Competencies

The chart shows Pre-Test and Post-Test mean scores for three competencies:

- Identify major psychosocial issues facing informal caregivers (47% increase): Pre-Test 1.75, Post-Test 2.57
- Engage caregivers in identifying the benefits of caregiving (59% increase): Pre-Test 1.75, Post-Test 2.6
- Understand methods for reducing caregiving stress and maintaining their mental and physical health (57% increase): Pre-Test 1.67, Post-Test 2.64

Course 5 – Consumer Control, Choice and Direction in Options Counseling
This course had 10 competencies. At pre-test, the mean score for this domain was 1.89, and at post-test, the mean score was 2.57, an average increase of 36% from pre to post-test. Chart 8 highlights the 3 largest changes from pre-test to post-test within this domain (competencies 1, 2 and 6).

- Competency 1, asked participants to rate their ability to *"Understand the history of Disability Rights Legislation and the Independent Living Movement."*
- Competency 2, asked participants to rate their ability to "*Define consumer control, consumer choice, and consumer direction in providing community based long-term living supports and services.*"
- Competency 6, asked participants to rate their ability to "*Determine how to effectively support family members' interest in participation and assist with the problem solving and resources.*"

Chart 8. Three Highest Changes in Mean Scores for Options Counselor's Guide to Consumer Control, Choice, and Direction (Course #5) Competencies

Competency	Pre-Test	Post-Test
Understand the history of Disability Rights Legislation and the Independent Living Movement (53% increase)	1.42	2.17
Define consumer control, choice, and direction in providing community based long-term living supports and services (50% increase)	1.78	2.67
Determine how to effectively support family members' interest in participation and assist with the problem solving and resources (43% increase)	1.75	2.5

Course 6 – Mental Health Training in Options Counseling

This course consisted of ten competencies. At pre-test, the mean score for this domain was 1.66, and at post-test, the mean score was 2.52, an average increase of 51.8% from pre to post-test. Chart 9 highlights the three largest changes from pre-test to post-test within this domain (competencies 5, 7 and 8).
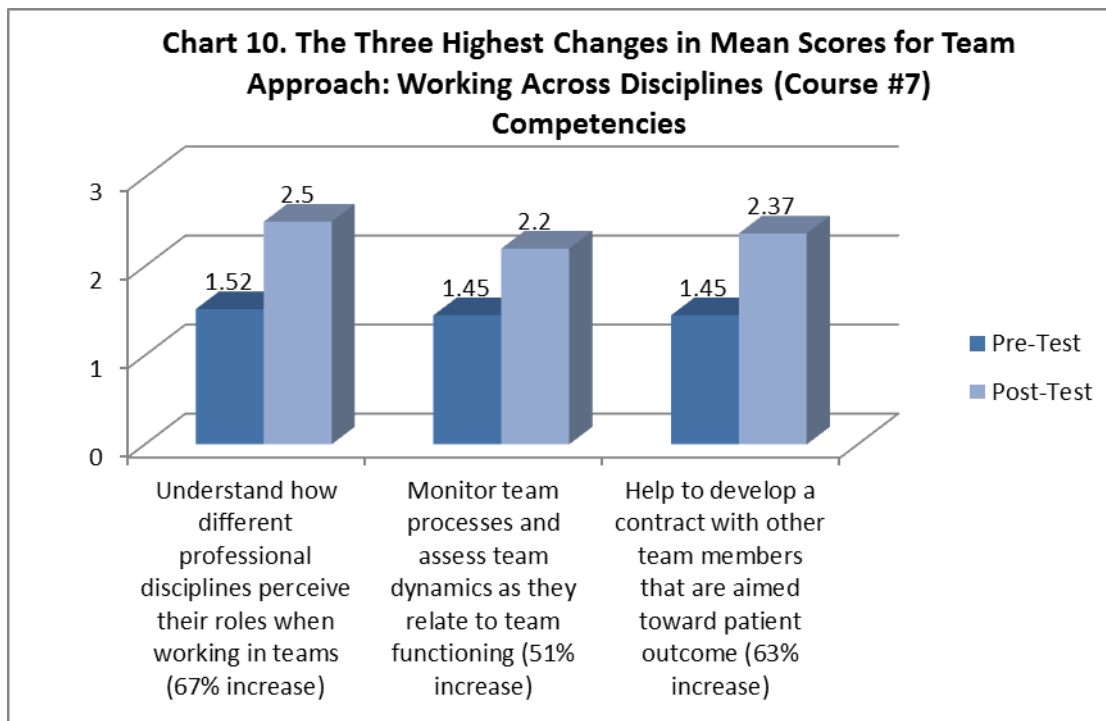
- Competency 5, asked participants to rate their ability to "*Understand recovery and the recovery movement.*"
- Competency 7, asked participants to rate their ability to "*Explain the importance of the environment when working with consumers with mental health issues.*"
- Competency 8, asked participants to rate their ability to "*Exhibit cultural humility and inclusion when working with consumers with a mental health issue.*"

Chart 9. Three Highest Changes in Mean Scores for Mental Health Training (Course #6) Competencies
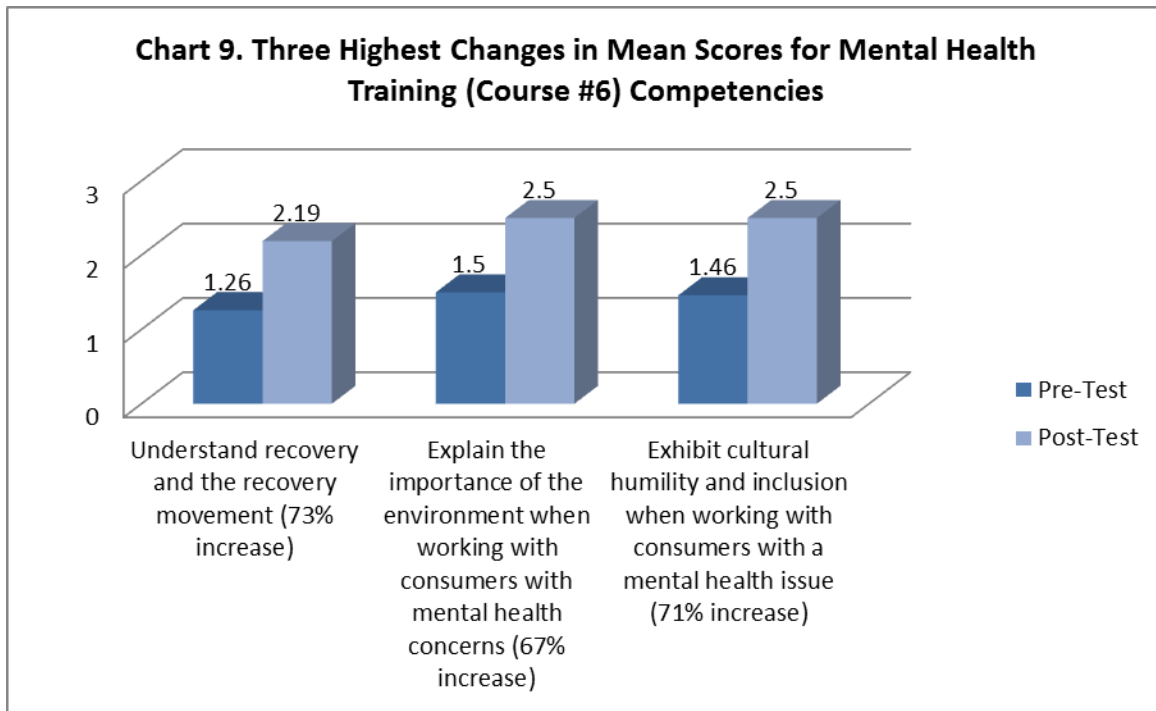
Course 7 - Team Approach: Working Across Disciplines
This course had 10 competencies. At pre-test, the mean score for this domain was 1.83, and at post-test, the mean score was 2.53, an average increase of 38.2% from pre to post-test. Chart 10 highlights the three largest changes from pre-test to post-test within this domain (competencies 1, 6 and 8).

- Competency 1, asked participants to rate their ability to *"Understand how different professional disciplines perceive their roles when working in teams."*
- Competency 6, from Core Training, asked participants to rate their ability to *"Monitor team processes and assess team dynamics as they relate to team functioning."*
- Competency 8, asked participants to rate their ability to *"Help to develop a contract with other team members that are aimed toward patient outcome."*

Chart 10. The Three Highest Changes in Mean Scores for Team Approach: Working Across Disciplines (Course #7) Competencies

	Pre-Test	Post-Test
Understand how different professional disciplines perceive their roles when working in teams (67% increase)	1.52	2.5
Monitor team processes and assess team dynamics as they relate to team functioning (51% increase)	1.45	2.2
Help to develop a contract with other team members that are aimed toward patient outcome (63% increase)	1.45	2.37

Course 8 – Ethics in Practice with Older Adults

This course had 7 competencies. At pre-test, the mean score for this domain was 1.66, and at post-test, the mean score was 2.58, an average increase of 55.4% from pre to post-test. Chart 11 highlights the three largest changes from pre-test to post-test within this domain (competencies 1, 3 and 6).

- Competency 1, asked participants to rate their ability to *"Define an ethical dilemma."*
- Competency 3, asked participants to rate their ability to "*Discuss the ethical dilemmas that may be caused by differences between the clinician's goals and the client's goals.*"
- Competency 6, asked participants to rate their ability to "*Discuss how the law and public policy influence ethical decisions.*"

Chart 11. Three Highest Changes in Mean Scores for Ethics in Practice (Course #8) Competencies
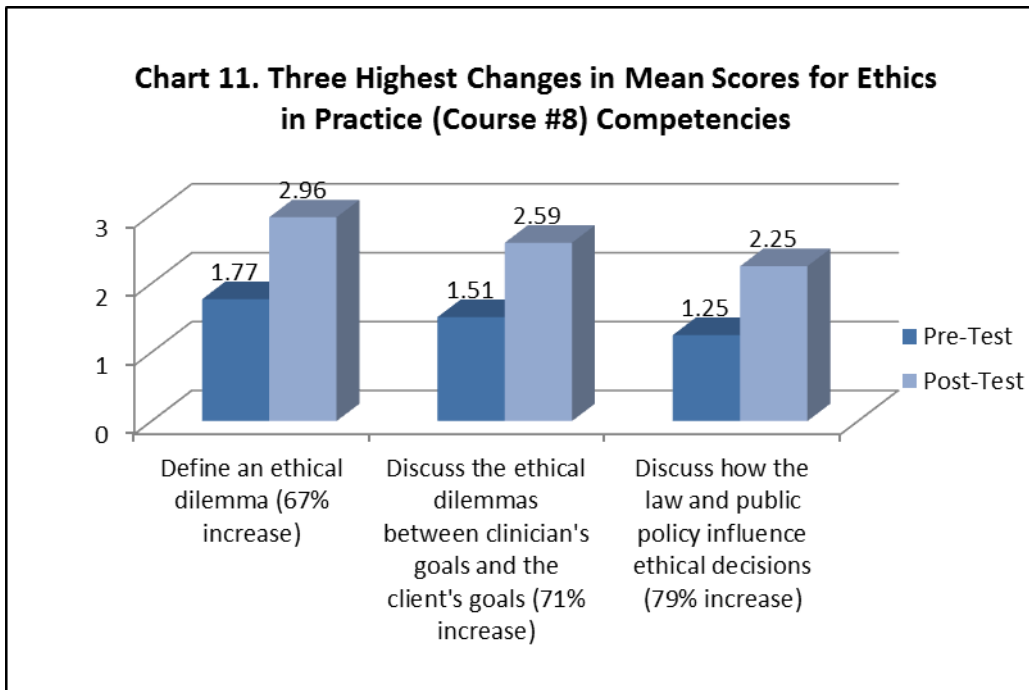
IV. Course Evaluations

At the end of each course within the certificate program, students were asked to complete a course evaluation, in order to gauge whether they felt that the training benefitted them and their practice. Participants rated their satisfaction level with each course using a scale of one to five (1, strongly disagree; 2, disagree; 3, neutral; 4, agree; 5, strongly agree). Participants are also asked for their opinions on course improvements and what other types of courses they would like to see offered through CADER.

Overall, responses across all courses were very good when asked questions about whether the training expanded their knowledge and understanding of the topic area and if they believed that the training would help them apply practice skills within the topic area. Across all courses evaluated, 91.1% of respondents agreed or strongly agreed the training would help apply practice skills. For *Options Counseling in Mental Health Training*, *Ethics in Practice*, *Alzheimer's disease and other Dementias'*, 100% of respondents agreed or strongly agreed that the course expanded knowledge of the topic area, with an average 86% agreeing or strongly agreeing for *Core Training, Aging in Place* and *Team Approach*, respectively.

Further, users provided positive feedback in their comments for different courses within the certificate, stating:
- *"The material was very useful and informative." (Core Training)*

- *"Good Course to review periodically." (Ethics)*
- *"All the case studies were excellent, and it allowed me to use several thought processes." (Options Counseling in Mental Health Training)*

V. Summary

A high percentage (93.0%) of participants completed all the courses necessary to receive the Georgia Aging and Disability Resource Connection Certificate. Results from the certificates' pre-to-post competency tests showed increases in the average self-rated scores for all 69 competencies. Statistical analysis suggests that the average increase in scores for 67 of these competencies were statistically significant. These results imply the certificate program significantly increased participants' knowledge in the topic fields of the eight courses they completed. Further, competency increases were particularly high regarding understanding *Aging in Place*, *Alzheimer's Disease and Other Dementias*, and *Core Training in issues and Disabilities*. Finally, respondents who completed course evaluations indicated the courses expanded their knowledge and understanding of the given topic area and the training would help them apply practice skills within the topic area.

APPENDIX A

Competencies of the Georgia Aging and Disability Resource Center Certificate Program:

Listed below are the competencies covered in each of the courses.

Core Issues in Aging and Disabilities
1) Describe the concepts of consumer choice, self-determination, and participation and their importance to long-term living programs.
2) Understand the demographics of aging and disability in the United States.
3) Understand the major biological, psychological, and social issues involved in the aging process and for those living with disabilities.
4) Describe the major health conditions that cause impairment in older adults.
5) Describe the most common causes of disability through the life cycle.
6) Understand how to adapt communication methods to the sensory, verbal, physical, and cognitive abilities of older adults and people with disabilities.
7) Describe the major ways that anxiety and stress may influence how older adults and people with disabilities communicate with providers of health and social services.
8) Describe the ways in which an individual's cultural, ethnic, religious background or sexual orientation can influence the experiences of aging and living with a disability.

Aging in Place
1) Identify issues related to loss, change, and transitions over the life cycle relevant to aging in place. Aging in Place
2) Use educational strategies to provide older persons and their families with information related to aging in place. Aging in Place
3) Define the concept and implications of aging in place. Aging in Place
4) Understand how to apply a strengths-based approach when working with those who wish to age in place. Aging in Place
5) Identify available services and resources as well as barriers to aging in place. Aging in Place
6) Provide older persons and their families with current information related to aging in place. Aging in Place
7) Discuss the capacity-risk model when addressing the issue of aging in place. Aging in Place
8) Understand the ethical principles involved in helping older adults and persons with disabilities age in place. Aging in Place

Alzheimer's Disease and Other Dementias
1) Describe the major features and course of Alzheimer's disease and other dementias.
2) Utilize effective communication skills that can promote positive relationships, and decrease the stress of Alzheimer's disease and other dementias.
3) Become aware of legal procedures and local, state, and federal policies related to assisting older adults with dementia.
4) Describe available testing, diagnostic tools, and treatments used to help older adults with dementia or Alzheimer's disease.
5) Monitor and reassess older adults with dementia on an ongoing basis and adjust service plans accordingly.
6) Assess caregivers' needs and stress levels.
7) Understand how to conduct psychosocial interventions in order to help caregivers manage and/or decrease stress.
8) Identify the community resources available for those with Alzheimer's disease and other dementias and their caregivers.
9) Discuss the impact of culture and diversity in relations to Alzheimer's disease and other dementias.

Working with Informal Caregivers
1) Understand how demographic and family changes affect caregiving.
2) Understand the influence of aging on family dynamics
3) Identify major psychosocial issues facing informal caregivers.
4) Demonstrate knowledge of community resources available to assist caregivers.

5) Engage caregivers in identifying the benefits of caregiving
6) Understand methods for reducing caregiving stress and maintaining their mental and physical health.
7) Understand how family structures vary across different ethnic groups and how they may affect caregiving and utilization of services.

An Options Counselor's Guide to Consumer Control, Consumer Choice, and Consumer Direction

1) Understand the history of Disability Rights Legislation and the Independent Living Movement An Options Counselor's Guide to Consumer Control, Consumer Choice, and Consumer Direction
2) Define consumer control, consumer choice, and consumer direction in providing community based long-term living supports and services Consumer Control
3) Describe how to recognize one's own personal bias and judgments in an Options Counseling session Consumer Control
4) Develop strong interpersonal communication skills to support the consumer in the decision-making process, including decision-making support, effective ways to ask questions while providing resources, active listening, and paraphrasing Consumer Control
5) Demonstrate creative ways to research services and supports as an options counselor Consumer Control
6) Determine how to effectively support family members' interest in participation and assist with the problem solving and resources Consumer Control
7) Understand the consumer's right to consumer control, consumer choice, consumer direction, dignity of risk, and self-determination Consumer Control
8) Recognize the impact of one's own values and biases on one's ability to provide quality options counseling related to aging and disabilities Consumer Control
9) Understand the value of cultural inclusion and cultural humility when working with consumers
10) Understand professional sense of self, the importance of self-care, and the boundaries and limits of Options Counseling

Options Counseling Mental Health Training

1) Understand the impact of history on mental health services and supports.
2) Recognize common mental health conditions that can affect older adults and people living with disabilities.
3) Know the range of referral resources and organizations available for consumers and families who are in need of mental health services.
4) Describe peer supports.

5) Understand recovery and the recovery movement.
6) Describe the role of the options counselor with consumers with mental health concerns.
7) Explain the importance of the environment when working with consumers with a mental health issues.
8) Exhibit cultural humility and inclusion when working with consumers with a mental health issue.
9) Understand the value of choice and self-determination in options counseling.
10) Develop skills to engage consumers with mental health concerns including establishing rapport and developing trust when doing options counseling.

Team Approach: Working Across Disciplines
1) Understand how different professional disciplines perceive their roles when working in teams. Team Approach: Working Across Disciplines
2) Understand how professional education and perceptions can influence team performance. Team
3) Respect the opinions and expertise of others when working in teams. Team
4) Use listening and communicating skills when working in teams. Team
5) Work sensitively with clients and colleagues when working in teams. Team
6) Monitor team processes and assess team dynamics as they relate to team functioning. Team
7) Recognize and address obstacles to effective team performance. Team
8) Help to develop a contract with other team members that are aimed toward patient outcome. Team
9) Identify and use conflict resolution strategies when working in teams. Team
10) Create a work culture conducive to problem solving when working in teams. Team

Ethics in Practice with Older Adults
1) Define an ethical dilemma.
2) Describe some of the key ethical dilemmas present in work with older adults.
3) Discuss the ethical dilemmas that may be caused by differences between the clinician's goals and the client's goals.
4) Identify and assess one's own values relating to ethical practice.
5) Describe how values may differ in diverse cultures.
6) Discuss how the law and public policy influence ethical decisions.
7) Understand the application of ethical principles to decisions on behalf of older clients, with special attention to those with limited capacity.