

Q&A with David Bass, PhD

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What was the impetus for your early studies that ultimately led to the development of BRI Care Consultation™?

In the late 1980s, we were involved in research on barriers to service use: why didn't people use them, or why did they stop using them? Did people turn to providers or self-manage? How did they go about getting information? If you took that step, what happened? Could you sign up? Could you afford it?

What did those early studies reveal?

Those early studies revealed many barriers to service use and problems for families, such as: service fragmentation; services not attending to family caregiver needs; providers not communicating with people with dementia; too much assessment of problem areas and too few practical solutions to problems. The problems reported by study participants prompted us to create BRI Care Consultation, a telephone and e-mail based care-coaching program for individuals with chronic conditions, and their family or friend caregivers.

How were the findings of these studies used to develop BRI Care Consultation?

Guiding principles were established leading to the program's design. BRI Care Consultation would: provide ongoing and dynamic assistance for both a person with a chronic condition and their caregivers; coordinate health care, community services and family support; empower families to take an active role in their care; address medical and non-medical needs; and link to and monitor services. This would be most easily, and cost-effectively, performed by telephone or e-mail, eliminating costs and inconveniences associated with in-person visitation.

The program was intended to help families take small steps towards finding simple and practical solutions to problems that are important to them. To do this, the program relies on a trained Care Consultant who conducts brief, but holistic, assessment and reassessment, and creates an evolving Action Plan with simple steps that move families toward solutions. Care Consultants build rapport with families, and establish an ongoing relationship. This relationship is developed and sustained through a standardized protocol that dictates regular telephone and/or email contacts between Care Consultants and families. As an evidence-based program, BRI Care Consultation is protocol driven.

After the program was developed, what did the research on the implementations of the program reveal?

Since 1997, 10 research studies with over 4,000 families have been funded, utilizing BRI Care Consultation. Many positive outcomes from these studies have been published, and include: decreased hospital re-admissions, decreased emergency department visits, increased satisfaction with care, and improved support from family.

How has the program evolved over time?

When we conducted our first research studies, Care Consultant documentation of family contacts, number of calls, and action steps was done on paper. This later progressed to an Excel spreadsheet, and then to an Access database. The first BRI Care Consultation licensed implementation sites utilized the Access database version of the Care Consultation Information System (CCIS) to deliver the program to their clients. In 2014, Benjamin Rose Institute on Aging invested in the program and transformed the Care Consultation Information System into a web-based version that was ready for broad-scale implementation to sites across the US. This version also has tools to monitor program fidelity to be sure it is being correctly delivered, and makes it easier to deliver for social workers, nurses and other professionals who serve as Care Consultants.

What sets BRI Care Consultation apart from other telephone-based interventions?

BRI Care Consultation is a consumer-driven program. Most other similar programs are focused on medical issues and are designed for people with high risk. BRI Care Consultation is more holistic and attends to both medical and nonmedical issues. It also focuses on both caregivers and the person with chronic health problems, and is intended to be a longer-term program.

Why is BRI Care Consultation so effective?

The process is very simple. The Care Consultant helps people make Action Plans and take steps toward solutions to problems they feel are important. They'll say, "I'm a coach, you tell me what you want and I'll help you get there." The Care Consultant checks-in regularly, does routine follow-ups, and gives gentle reminders so things get done.

We wanted a program that helps people find and access services. We wanted a program that monitors services over time. We wanted a service that helps families organize themselves for caregiving. And we wanted a program that focuses on solutions rather than only assessment.