

# **Getting CAPABLE**

**An Evidenced-based Program That Improves Function and Reduces Cost** 



## "My pain is down and I can take a bath by myself for the first time in 5 years. It's like winning the lottery!"

-Mrs. B., Age 67
CAPABLE Participant

## **Home Is Where Our Health Is**

Supporting the health of older adults is less about managing specific chronic conditions and more about promoting and improving functional capacity.

Challenges with function — including activities of daily living, such as bathing, dressing, and getting in and out of a chair — threaten our independence, strain family and care partners, and dramatically increase health care costs.

CAPABLE, developed at Johns Hopkins University and now in 25-plus sites around the country, has shown that we can improve function. It's a comprehensive, participant-driven model that provides five months of in-home support by an occupational therapist, registered nurse, handy worker and the primary care team—all in close collaboration with an older adult.

CAPABLE gets results. The program can cut disability in half, and an independent evaluation showed that it resulted in more than \$20,000 in savings (more than 7x ROI) in dual-eligible beneficiaries, driven by reductions in both inpatient and outpatient expenditures.

Working with the John Hopkins University (JHU) CAPABLE team, you and your team can implement and sustain CAPABLE and continuously improve its quality. JHU provides documents, tools, forms, and checklists that give practical details and technical support on:

- · Building budgets, workplans, and local partnerships
- Receiving comprehensive technical assistance that includes an Implementation Manual, as well as regular and helpful contact with the JHU CAPABLE team
- Organizing OT and RN training schedules, packages and resources
- Working with handy workers, including recruitment and oversight of handy workers/agencies, as well as strategies for working with landlords
- · Arranging training schedules
- · Arranging licensing payments and options

All of this support, which comes with a CAPABLE license, helps you implement the program efficiently and effectively, while keeping your start-up costs down. This partnership anchors your work in consistent practices and approaches. These ensure fidelity to the award-winning CAPABLE program and reliably generate positive health and cost outcomes for older adults.

## **How a CAPABLE Implementation Package and License Works**

- Initial CAPABLE license runs for two years.
- Site pays an initial, one-time Implementation Package fee that covers start-up logistics (see "Technical Assistance, Clinician Training, and Resources" section).

Your initial fee will be determined primarily based on your local market and program size. Questions about pricing may be discussed with Dr. Szanton or a senior member of the JHU CAPABLE team.

Once the initial fee is paid, clinicians will receive instructions on how to access the online training videos. After clinicians successfully complete the post-training assessment, the site will receive a CAPABLE provider (site) license.

Starting in Year 3, your site switches to a lower annual license fee to cover model fidelity, relicensure and implementation support.

- Annual fee provides ongoing access to site staff training (with future updates, as well as interaction across teams), access to updated training materials, recruitment and outreach approaches, case studies/ best practices and measurement tools.
- A senior member of the JHU CAPABLE team will review site outcomes and will evaluate each site for program fidelity and re-licensure.

Some sites may wish to design and implement a robust evaluation beyond the basic CAPABLE support package. If so, a separate fee structure may be discussed with a senior member of the JHU CAPABLE team or Director of Implementation and Evaluation.

## **CAPABLE: How It Works**

**CAPABLE** delivers five months of in-home support provided by an occupational therapist (OT), registered nurse (RN), handy worker and the primary care team-all in close collaboration with an older adult. The interdisciplinary team uses motivational interviewing, active listening, and coaching communication methods to enable the participant to achieve goals they develop and prioritize themselves.

#### Intake

Potential participants are interviewed by telephone by a knowledgeable CAPABLE team member. They are asked about their readiness to change, as well as their willingness to set goals and work with CAPABLE clinicians to achieve those goals. The CAPABLE team member assesses cognitive ability, identifies challenges with at least one ADL, and ensures the participant can schedule home visits over five months.

#### **Team Roles**

Once the participant is enrolled and a first meeting scheduled, each of the CAPABLE team members have important and complementary responsibilities, which are described to the right.

## Wrap-Up

During the final OT and nurse visits, clinicians review progress on the participant's action plans and successes and help them think about general solutions and approaches that may be used to address functional issues in the future.



### The participant:

- · Does a self-assessment, sets her/his own goals and determines her/his priorities
- · Brainstorms options/solutions as an active team member
- · Makes progress between each visit, creating an Action Plan in her/his own words
- · Exercises, reads material, practices skills within the home
- · Learns tips for safe independent living
- · Uses new skills and equipment regularly



### The occupational therapist makes up to six visits and:

- · Conducts a functional/mobility assessment
- · Identifies home risks, as well as needed modifications & equipment
- · Provides fall prevention and equipment guidance
- · Develops action plans with the participant for each participant-identified goal



### The registered nurse makes up to four visits:

- · Takes a health history and reviews current healthcare providers
- · Identifies key health issues/risks
- · Reviews pain issues and medications
- · Develops action plans with the participants for each participant-identified goal



## The handy worker joins the team in the first month and:

- · Receives a work order for home modifications/ household items and confers with the participant and the occupational therapist
- · Obtains supplies and installs needed home improvements over about one day of work in the home
- · Average cost for all home improvements and supplies is about \$1,300 per participant

## **Getting Started:** 10 Steps to Implementing CAPABLE

Interested in getting CAPABLE? In addition to obtaining a CAPABLE Implementation Package and a license\* to be a CAPABLE provider, here are 10 things you'll need to do to get ready to run a high-quality CAPABLE program:

Get connected to the JHU **CAPABLE** team

> If you haven't already, we can provide you with the guidance and resources you need.

**Confirm your lead organization** 

What local group will lead the program? You will need the commitment from leadership to explore and ultimately implement CAPABLE.

Identify a program champion

This is the person (maybe you) who will lead the effort through its initial stages.

**Find your partners** 

If you're like most organizations, you'll need help implementing CAPABLE. What partners do you need to ensure that all parts of CAPABLE will be effectively and professionally addressed?

**Secure funding for start-up** 

The CAPABLE team can provide guidance on identifying the internal and/or external resources you will require.

Scale your initial implementation/ start-up to match your capacity and funding

> For every 1,000 adults over 65 in your system, program, or catchment area, about 250 may be appropriate for CAPABLE. You may need to start modestly in order develop the infrastructure you will need to sustain the program as it grows.

Establish a pilot workplan

This includes a timeframe, milestones, what and how data will be collected, and key metrics to evaluate how the initial pilot/work goes.

**Hire/contract for staff** 

This includes OTs, RNs, handy workers, and any administrative support you will need.

Train your local interprofessional site team with the JHU CAPABLE team

> A CAPABLE Implementation Package enables you train RNs, OTs and handy workers in the skills they need to implement the program safely and effectively.

Do a "dry run" to test workflow and communication and ensure readiness

> This will help you understand any gaps or issues to address before you go live.

## Technical Assistance, Clinician Training, & Resources

## The many benefits of a CAPABLE Implementation Package and License from Johns Hopkins University

### **A CAPABLE Implementation Package**

and License enables you to receive interactive online training and certification for nurses and occupational therapists, take advantage of a rich package of technical support, documents, and templates, and ultimately run a successful CAPABLE program. Collaboration with the JHU CAPABLE Team steeps your work in tested, standardized approaches. These ensure fidelity to the CAPABLE program and reliably generate positive health and cost outcomes for older adults. The JHU CAPABLE team is with you every step of the way.

## Readiness and Initial Implementation Support

Once your site has decided to move forward with CAPABLE, a written agreement between the lead organization for your site and JHU is signed. This agreement outlines expectations, payment for the initial Implementation Package, training and licensure

A CAPABLE Implementation Package entitles you to practical guidance from the JHU CAPABLE team, which helps you understand what it will take to get your program started, including funding, team member skill sets, partnerships, and evaluation. Specifically, your organization receives:

- Up to 3 one-hour conference calls with JHU CAPABLE team members for individualized technical assistance and pre-implementation support
- Implementation manual, slide decks, scientific references, web links you can use within your organization to help others understand how CAPABLE works
- · Readiness checklists
- Fidelity guidelines that help you implement CAPABLE and ensure you get the same kinds of results that other sites have

- Evaluation and measurement considerations that will help you start with the end in mind
- · Outreach and referral considerations
- Sample invitation letter to potential CAPABLE participants
- · Sample program budget approaches
- · Sample OT and RN job descriptions
- · Workflow example
- Development of a more comprehensive evaluation plan and analysis (additional fee tailored to site)
- Individual help with grant writing or making the case to stakeholders (additional fee tailored to site)

#### **Online Clinician Training**

A critical benefit of the CAPABLE Implementation Package is access to high quality training for the clinicians practicing in the program. This starts with 10-14 total hours (1-2 days) of online content including:

- Nine videos (45-60 minutes each)—an overview for all clinicians, Four for OTs and Four for RNs that cover:
  - What each clinician does on each CAPABLE visit, including how to prepare, what to bring to the home, and what materials to leave behind;
  - How to use the C-CAP assessment tools and other basic measures, such as the Readiness to Change tool; and
  - How to use motivational interviewing and open-ended questions, build rapport and relationships, and address challenges that may arise.
- · Short white boards on additional topics
- Two interactive simulations that provide cases with questions and process examples.

Following review of these online training materials, clinicians complete a short assessment. If they successfully complete the assessment, they become certified as a CAPABLE clinician.

In addition, there is an online site for ongoing peer support and Q&A. These are supplemented by calls with a member of the JHU CAPABLE team, noted below. If a CAPABLE site decides it would like more time, clinicians can receive more calls for an additional fee.

### **Training Materials and Ongoing Clinician Support**

The following materials are provided to support clinicians after they receive their initial training (all are electronic unless otherwise indicated). In addition, your organization and clinicians will receive up to 3 one-hour training assistance calls with a CAPABLE Clinical Training Specialist.

- · Training manuals
- OT and RN initial assessment forms\*
- Documentation forms for all ten home visits\*
- · Brainstorming and action planning forms\*
- · CAPABLE exercise book, Health Passport, medication calendar and items for participant's folders
- · Tip book for participants (ordered separately by each organization or the JHU CAPABLE team can order and ship it to you for a fee)
- · Access to Yammer, Teams or other social networking platforms, to keep site participants connected and collaborating, and to webinars for additional training and information sharing. These are offered live and recorded and archived by topic for later access
- · Office hours so trained clinicians, program administrators and construction partners can ask questions, discuss challenging cases, share equipment solutions and participant successes
- · Review of up to 3 work orders for each CAPABLE trained OT during office hours
- · Access to Vimeo video clips of visit scenarios
- · Access to other CAPABLE sites' outcomes and experience through an online user group

#### **Post-training, Implementation Technical Assistance**

In addition to support for clinicians, the JHU CAPABLE team continues to provide site administrators technical assistance once the program is up and running.

The following will be provided:

- · Up to 3 additional one-hour conference calls with JHU CAPABLE team member/s (includes follow up checklist for self-monitoring)
- · Implementation Manual
- · Handy worker training/orientation outline and basic expectations
- Template for Business Associates Agreement (e.g., for a health organization or handy worker organization)
- · HIPAA resources to guide information exchange and protection (national resources link)
- · Data collection tracking examples will be shared so it will not be necessary to begin from
- · Evaluation and measurement of CAPABLE examples
- · JHU CAPABLE team guidance on protocol for fidelity monitoring
- · Annual data reporting (required for all sites. The JHU CAPABLE team reviews, evaluates, and provides feedback.)
- · Examples of how to best coordinate with primary care providers, communicate with stakeholders, and conduct outreach and recruitment
- · Case examples that demonstrate implementation lessons learned, initial and sustainability funding approaches, and effective value proposition statements.

### **Evaluation and Sustainability Support**

This includes up to 3, one-hour calls with the CAPABLE Director of Implementation and Evaluation. Additional calls may include:

- · Data analysis (additional fee tailored to implementing sites)
- · Write up of results (additional fee tailored to implementing sites)

<sup>\*</sup>The cost of copying these materials is the responsibility of each organization.

## **Contact Us**

CAPABLE promotes older adults' ability to age in their homes and communities.

Johns Hopkins School of Nursing CAPABLE Program CAPABLEinfo@jhu.edu

Dr. Sarah Szanton PhD, ANP, FAAN nursing.jhu.edu/capable

