2022 National Strategy to Support Family Caregivers: Federal Actions

Developed by:

The Recognize, Assist, Include, Support, and Engage (RAISE) Act Family Caregiving Advisory Council & The Advisory Council to Support Grandparents Raising Grandchildren

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Introduction & Purpose

This document is a component of the 2022 National Strategy to Support Family Caregivers (Strategy). It was developed by the Recognize, Assist, Include, Support, and Engage (RAISE) Act Family Caregiving Advisory Council and the Advisory Council to Support Grandparents Raising Grandchildren (SGRG) (collectively referred to in this document as the Advisory Councils). It contains 345 actions that 15 agencies within the federal government will take in the coming three years that are aligned with and support the vision of the Strategy.

How the Actions Were Identified

In 2020, the RAISE Family Caregiving Advisory Council released the first-of-its-kind inventory of more than 50 federal programs to support family caregivers. For that initial inventory, each agency submitted descriptions of its own current programs, without input or review from partner agencies.

This document represents the next step. It is the result of a six-month process in which federal agencies began to come together for the first time to work on improving support for family caregivers. Each agency shared a list of its existing programs that address -- or have potential to address -- caregiving issues. Then, armed with the knowledge of other agencies' programs, each federal agency identified ways in which their own programs could be leveraged to more explicitly support family caregiving without requiring additional legal authorities or funding. This document contains those actions.

The Advisory Councils anticipate that as agencies continue to refine their actions and the Advisory Councils themselves continue their work, cross-fertilization of ideas will occur and opportunities to partner across agencies will emerge. In addition, increased visibility into actions across the government will illuminate opportunities to reduce duplication. This coordination will allow federal agencies to truly begin to harness the power of a comprehensive, streamlined strategic plan that leverages the resources of the entire federal government.

Goals of the National Strategy to Support Family Caregivers: The Strategy outlines a series of approaches to achieving key outcomes in support of the 5 goals of the Advisory Councils:

GOAL 1: Achieving greater awareness of and outreach to family caregivers
GOAL 2: Advancing partnerships and engagement with family caregivers
GOAL 3: Strengthening services and supports for family caregivers
GOAL 4: Improving financial and workplace security for family caregivers
GOAL 5: More data, research, and evidence-based practices to support family caregivers
(Note: The actions put forth by each agency are particular to existing departmental and agency functions and processes, and the respective agencies prepared their lists independently. As a result, they differ significantly in language, detail, and scope.)

**Key Examples of Federal Actions**

Below are seven examples of actions suggested by participating federal agencies. These examples show the breadth of the federal commitment to improving support of family caregivers in the coming years and reinforce the Advisory Councils’ belief that all government agencies have a role to play in supporting family caregivers. Combined with initiatives taken at the state, community, and organizational level, each of these actions, regardless of how small, has value as part of a national effort to change culture and systems over time.

- The Administration on Community Living (ACL) will continue to lead the RAISE Family Caregiving Advisory Council and the Supporting Grandparents Raising Grandchildren (SGRG) Advisory Council and support the implementation of the Strategy.
- The Centers for Disease Control and Prevention (CDC) will annually update and publish data from the Behavioral Risk Factor Surveillance System’s (BRFSS) Caregiver module and post that information on the Alzheimer’s Disease and Healthy Aging Data Portal.
- The Department of Veterans Affairs (VA) Caregivers’ Support Program will develop a survey tool to conduct a needs assessment for providers and practitioners to help identify and bridge gaps in existing services and resources.
- The Department of Health and Human Services (HHS) Assistant Secretary for Planning and Evaluation (ASPE) will assess the future risk of disability on a population level and how that affects needs for support, family caregiving, and paid long-term services and supports (LTSS).
- The Indian Health Service (IHS) will add structured fields in its electronic health record (EHR) to identify patients’ kin and grandparent caregivers.
- The Department of Labor’s (DOL) Women’s Bureau (WB) will fund educational opportunities for low-paid and otherwise marginalized women workers, including employed family caregivers. These programs will focus on topics such as employment rights, navigating and calculating benefits, and referrals to additional services and benefits as needed, with a goal to help women become local experts on caregiver rights, benefits, and assistance in their own communities.
- The National Institute on Aging (NIA) will initiate a public/private partnership to integrate data on Alzheimer’s disease and related dementia (ADRD) and caregiving to include caregivers and their experiences in clinical protocol, care teams, medical records, and other aspects of clinical infrastructure.
The Disabled & Elderly Health Programs Group (DEHPG) within the Centers for Medicare & Medicaid Services (CMS) will identify and report by fall 2023 on the ways state Medicaid agencies have expanded access to respite services under Medicaid through Section 9817 of the American Rescue Plan (ARP) of 2021.

Given that many federal programs and initiatives to support family caregivers operate independently of each other, the federal actions outlined in this document make up the first phase in what will be an iterative process by the federal government to better coordinate and improve federal recognition and support of family caregivers. Consistent with the requirement of the RAISE Family Caregivers Act that all federal actions be within existing programs, these actions are adjustments to existing processes and procedures. When taken as a whole, they represent the first time that agencies across government have surveyed their own programs to identify ways of improving consistent access to supports and services for family caregivers—a significant step in and of itself.

As the Strategy is implemented and updated, and federal agencies have more flexibility to plan and budget for programming that can assist family caregivers, the Advisory Councils anticipate that more federal actions will emerge. Members of the Advisory Councils believe in the significant benefits of an ongoing cross-government initiative to better coordinate all federal efforts supporting family caregivers.

Goal 1: Actions to increase awareness of and outreach to family caregivers

Outcome 1.1: Americans are educated about and understand the experience of family caregiving.

1. The Administration for Children and Families (ACF) will launch activities related to National Foster Care Month in May 2022 with a theme of: Supporting Relative and Kin Connections – Keeping Families Strong. The Capacity Building Center for States is developing a series of short audio stories focused on the promising practices and programs in kinship care. These short audio stories will represent best practices; including family finding, shared parenting, support services and peer mentors to achieve the goal of increasing public awareness and recognition of the diverse strengths, needs, issues, and challenges family caregivers face and of the importance of recognizing and supporting them.

2. ACF will launch activities in 2022 about disseminating best practices related to serving the needs of kinship families through a series of podcasts. The Child Welfare Information Gateway podcasts will be highlighting how state child welfare agencies are supporting kinship families in a new five-part series titled "Advances in Supporting Kinship Caregivers."
   - Also supports Outcome 3.1

3. ACF will launch activities related to National Kinship Care Month in September 2022 to disseminate best practices related to how child welfare agencies can prioritize and support the placement of children in kinship care. The National Kinship Care Month
2022 will increase awareness of the strengths and needs of kinship families. Dissemination of information is planned through the Child Welfare Information Gateway website (childwelfare.gov), the Children’s Bureau Express Newsletter and social media. Efforts will seek to improve outreach to kinship families to help them to identify their critical role as primary caregivers, so they seek access to appropriate services and supports.

♦ Also supports Outcomes 3.1, and 3.10

4. ACF’s Office of Early Childhood Development and Education plans to release in 2022 a joint letter on their commitment to ensure that all young children and their caregivers have access to high-quality resources that equitably support social-emotional development and mental health. As part of the letter, ACF is also releasing short videos around the importance of social-emotional development and one of the videos will focus on caregivers. The first video is available here.

5. ACL will form a new Family Caregiving Advisory Council in November 2022 in accordance with the requirements of the RAISE Family Caregivers Act. The Council will support the implementation of the Strategy and spearhead future updates to the Report to Congress.

♦ Supports all Outcomes under Goals 1-5

6. ACL will form a new Advisory Council to Support Grandparents Raising Grandchildren in November 2022, in accordance with the requirements of the Supporting Grandparents Raising Grandchildren Act. Members will continue the work begun by the previous Council, including updating the initial Report to Congress and collaborating efforts with the Family Caregiving Advisory Council to update and revise the Strategy.

♦ Supports all Outcomes under Goals 1-5

7. ACL will continue to work closely with Generations United and partners through 2025 to manage and oversee the development and implementation of the American Rescue Plan-funded National Technical Assistance Center for Kinship and Grandfamilies. This new resource offers government agencies and non-profit organizations in states, tribes, and territories ways to collaborate and work across jurisdictional and systemic boundaries—all to improve supports and services for grandfamilies and kinship families.

♦ Supports all Outcomes under Goals 1-5

8. ACL’s Administration on Disabilities (AoD) is establishing a community of practice (CoP) comprised of at least 10 states via the currently funded Bridging the Aging and Disabilities Network Initiative to develop a consensus regarding the scope of the needs and challenges facing individuals with developmental disabilities, their families, and their support networks.

9. The Administration for Community Living Center for Regional Operations (ACL-CRO) will disseminate information to State Units on Aging (SUAs) and regional partners, regarding the RAISE/SGRG Acts Reports to encourage public awareness, beginning in FY 2022 to FY 2024.
10. ACL-CRO, in collaboration with the Administration on Aging (AoA) will offer at least one presentation session addressing caregiving as part of the National Title VI Conference Annual Conference thus increasing awareness and recognition of caregiving regarding Tribal elders in FY 2022.

11. ACL-CRO will amplify available public awareness messaging aimed at increasing the recognition, inclusion and support of family caregivers in/by FY 2024 or as it becomes available.

12. ACL-CRO will provide technical assistance to SUAs on this topic for those SUAs that are developing state plans on aging in FY 2023 and FY 2024, as needed.

13. ACL-CRO Region II will continue to work in a pilot project in NYC called Generations Crossing by conducting a needs assessment survey and creating and disseminating a report. Generations United is a collaborative effort with ACF, Substance Abuse and Mental Health Services Administration (SAMHSA), NY State Office on Aging, NY State Respite Coalition and NY City Department on Aging as well as other partners. The project is aimed at assisting older relatives who are the primary caregivers of children in obtaining needed supports in FY 2022.

14. ACL-CRO, will conduct at least one regional session with SUAs for the purposes of peer-to-peer learning including sharing promising practices regarding the Older Americans Act (OAA) Title IIIE programs by FY 2024.

15. ACL’s Office of Elder Justice and Adult Protective Services (OEJAPS) within the Administration on Aging (AoA), will identify grandfamilies as a priority target population in the next notice of funding opportunity for ACL’s Legal Assistance Enhancement Program grants, the purpose of these grants is to strengthen and enhance the effectiveness and efficiency of legal assistance programs to improve the lives of older Americans with economic or social need through legal solutions and strategies
   ♦ Also supports Outcome 1.2, 2.5, 3.1

16. ACL’s OEJAPS will use its elder justice website to increase availability of information for caregivers:
   ♦ Identifying grandfamilies and caregivers as an outreach target audience under the National Center on Elder Abuse
   ♦ Expanding and promoting existing materials, by the National Center on Law and Elder Rights briefs, including: Legal Basics: Grandparents and Other Non-Parent Kinship Families and Grandparents and Other Non-Parent Kinship Families: Legal Rights.
   ♦ Increasing promotion of the financial planning resources available for individuals caring for a child or grandchild on ACL’s grantees website the National Resource Center for Women and Retirement’s Financial Caregiving Hub.
     » Also supports Outcomes 1.2, 2.5, 3.1, 3.8
17. ACL’s Office for Network Advancement (ONA) within the Center for Innovation and Partnership, will provide direct funding to 5 to 7 states by the end of 2022 to review their statewide access system through the lens of family caregivers to assess fragmentation, duplication, and challenges that caregivers face. Promising practices and tools will be shared more broadly for all states to replicate.
   ♦ Also supports Outcome 1.3

18. ACL’s Office of Nutrition and Health Promotion Programs (ONHPP), within AoA, will engage caregivers in evidence-based health promotion and disease prevention programs, such as chronic disease self-management education (CSDME), falls prevention, and mental health.

19. ACL’s ONHPP will provide education and resources to promote caregiver health and well-being through ACL’s National CDSME, Falls Prevention, and Nutrition and Aging Resource Centers.

20. AmeriCorps will engage AmeriCorps Seniors, Senior Companion, and RSVP programs in the near term to help increase public awareness about the challenges and needs of family caregivers and the role that older adult volunteers can play in helping to provide education and information that increases access to services and supports needed by family and other caregivers. Community-based events will be utilized to highlight needs and engage other local organizations to place volunteer family caregiver needs and the importance of integrating volunteers as integral to the continuum of care for clients and ongoing support for family and other caregivers.
   ♦ Also supports Outcome 3.6

21. AmeriCorps Seniors will use its webinar format in the near term, to recruit family caregiver experts to serve as workshop presenters who can help educate AmeriCorps Seniors grantees about new program and service innovations that could be executed by older adult volunteers to further support the needs of family caregivers.
   ♦ Also supports Outcome 3.6

22. AmeriCorps Seniors will utilize the content from conference experts in the future to develop public awareness materials about how peer-to-peer informal care intervention can be utilized to enhance services and supports for family and other caregivers. AmeriCorps Seniors will also host webinars to inform organizations about the importance of engaging older adult volunteers to support family and other caregiver issues.
   ♦ Also supports Outcomes 3.3, 3.6

23. The Director of AmeriCorps Seniors will use the monthly e-newsletter Notes from the Director’s Desk in the near term to inform grantees about the needs of grandfamilies and kinship families and ways that older adult volunteers can support them.
   ♦ Also supports Outcomes 3.6, 3.10
24. CDC will annually publish updated infographics for states regarding caregiving using data from the BRFSS Caregiver module. Additionally, these data will be updated annually on the Alzheimer’s Disease and Healthy Aging Data Portal.
   ♦ Also supports Outcomes 5.2

25. CDC will publish updated infographics for states utilizing the BRFSS Caregiving module conducted in 2021 and 2022. These infographics will provide national estimates of prevalence of caregiving and characteristics of the caregiving situation by race/ethnicity, sex, sexual orientation, veteran status, and rurality.
   ♦ Also supports Outcome 5.1

26. CDC will support the development and dissemination of communication materials regarding dementia caregiving by the Building Our Largest Dementia Infrastructure for Alzheimer’s Act (BOLD) Public Health Center of Excellence on Dementia (e.g., state-specific tweets regarding dementia caregiving), by 2025.
   ♦ Also supports Outcome 3

27. CDC will update the Aging and Health in America Data Brief on Caregiving in 2024.
   ♦ Also supports Outcome 5.1

28. CDC’s Healthy Aging Newsletter will highlight recent materials and events related to caregiving at least monthly.

29. CDC will support the creation of informational resources for caregivers in populations with a high burden of Alzheimer’s disease and related dementias (ADRD) (i.e., African American, Latino, and Indigenous populations and people with intellectual or developmental disabilities (ID/DD)) by the National Healthy Brain Initiative’s award recipients by 2025.

30. CDC will evaluate and revise the BRFSS Caregiving Module to be fielded on the 2024 BRFSS Survey.
   ♦ Also supports Outcome 5.1

31. CDC will submit caregiving questions being fielded on the 2025 BRFSS Survey to other national surveys, such as the National Health and Nutrition Examination Survey (NHANES) or the National Health Interview Survey (NHIS) by 2024.
   ♦ Also supports Outcome 5.1

32. Consumer Financial Protection Bureau (CFPB) will integrate the Managing Someone Else’s Money financial caregiving resource into the Money Smart for Older Adults program with FDIC, thereby increasing outreach on caregiving issues to financial institutions in FY23.
   ♦ Also supports Outcomes 1.3, 4.1

33. 
34. CFPB will continue to promote its financial caregiving resources in FY23. These include: *Managing Someone Else’s Money, Considering a Financial Caregiver? Planning for Peace of Mind,* and *Planning for Diminished Capacity.*

- Also supports Outcomes 1.3, 4.1

35. The Centers for Medicare & Medicaid Services (CMS) will develop and implement a caregiver module for the National Medicare Training (NMT) Program to achieve the goal of providing targeted training to NMT attendees of CMS programs benefitting caregivers in 2022.

36. The Department of Education (ED) will partner with HHS/ACL on a social media campaign to achieve the goal of increasing awareness of the needs of family caregivers, and kinship and grandfamilies in 2022.

37. The Department of Labor (DOL) will recognize the role that family caregivers play in supporting people with disabilities who engage in competitive integrated employment (CIE) - work in settings with people without disabilities for standard wages, in carrying out a variety of activities and developing policy related to CIE.

38. DOL’s Office of Disability Employment Policy (ODEP) will acknowledge the important role of family caregivers and support them in assisting their family members in achieving CIE in FY22-24.

- Also supports Outcome 4.2

39. DOL's ODEP, through its technical assistance centers, will provide technical assistance and develop technical assistance tools such as webinars, guides, and promotional tools on meeting the leave, flexibility, and support needs of employed family caregivers to achieve the goal of expanding public awareness, recognition, and support for family caregivers in workplaces in FY22.

- Also supports Outcome 4.2

40. DOL's ODEP, through its technical assistance centers, will develop technical assistance tools such as webinars, guides, and promotional tools on the mental health of employed family caregivers, including caregivers from underserved communities, and increase awareness of ways to support family caregivers' wellbeing in FY22.

- Also supports Outcome 4.2

41. DOL's Women’s Bureau will expand a section of its website to showcase elements of the most recent American Time Use Survey Leave module. It will include subgroup analysis where possible to better understand how diverse populations responded to the survey in FY22.

- Also supports Outcome 5.2

42. DOL's Women’s Bureau will highlight the diverse needs of employed family caregivers through the release of newsletters, blog posts, tweets, op-eds, press interviews, and public facing media activities in FY22.

- Also supports Outcome 4.2
43. DOL’s Women’s Bureau will facilitate a Care Infrastructure Learning Session for advocates/researchers on how to build a stronger, better care system that works for working women in FY22.
   ❧ Also supports Outcome 4.2

44. DOL’s technical assistance centers, unless indicated specifically, may include the Job Accommodation Network (JAN), Employment Assistance and Resource Network on Disability Inclusion (EARN), State Exchange on Employment and Disability (SEED), Partnership on Inclusive Apprenticeship (PIA), Partnership on Employment and Assistive Technology (PEAT), Center on Advancing Policy and Employment for Youth (CAPE-Youth), and the National Center on Leadership for the Employment and Economic Advancement of People with Disabilities (LEAD Center).
   ❧ Also supports Outcome 4.2

45. The Health Resources and Services Administration (HRSA) will continue to support its webpage on caregiving to achieve GOAL 1 of the Strategy in 2022.

46. HRSA will continue to have a caregiver representative on its Advisory Committee on Interdisciplinary, Community-Based Linkages to achieve GOAL 1 of the Strategy in 2022.

47. The Indian Health Service (IHS) will in late 2022, publish a blog on the IHS website that addresses the role of caregivers.
   ❧ Also supports Outcome 1.2

48. IHS will identify caregiver content for the IHS Alzheimer’s Grant Program website that provides information about caregiving as well as resource links for caregivers in 2022.
   ❧ Also supports Outcome 1.2

49. The National Institute on Aging’s (NIA’s) Office of Communications & Public Liaison (OCPL) plans to review and update portions of NIA’s Health Information website based on current research findings and care practices to achieve the goal of providing relevant information that can help Caregivers to be an effective caregiver while also taking care of themselves. News of these updates will be advertised on NIA’s social media channels (i.e., Twitter) in 2022.

50. NIA’s OCPL will update the NIA-managed Alzheimers.gov Clinical Trials Finder to achieve the goal of recruiting caregivers for clinical trials focused on Dementia Care and Caregiver Interventions (including dementia care and impact of disease) in 2022.
   ❧ Also supports Outcome 5.3

51. NIA’s OCPL plans to review and update language in portions of NIA’s Health Information Caregiving section that recognizes older adults in kinship families and grandfamilies in 2022.
   ❧ Also supports Outcome 1.2
52. The Department of Veterans Affairs (VA) will increase messaging through its caregiver listservs and target specific messaging to family caregivers to increase public awareness and recognition of the diverse needs, issues, and challenges faced by family caregivers of veterans in FY22.

♦ Also supports Outcome 1.3

Outcome 1.2: Caregiver self-identification and knowledge of services is enhanced.

1. ACL’s AoD will support states participating in the Bridging the Aging and Disabilities Networks Initiative’s CoP in 2022 by assisting in the development of workplans that will leverage resources to build the capacity of state’s disability and aging networks, improve culturally competent services, and supports for individuals with ID/DD and their families to better plan for the future, and assure sustainability, self-sufficiency, and resilience.

2. ACL’s Office of Healthcare Information and Counseling (OHIC), within the Center for Innovation and Partnership (CIP), will create materials for the State Health Insurance Assistance Program (SHIP), Medicare Improvements for Patients and Providers Act (MIPPA), and the Senior Medicare Patrol (SMP) networks in 2022 to educate and assist family caregivers supporting Medicare beneficiaries. The materials will explain Medicare benefits and support caregivers and family members in making informed decisions about their care and benefits. In 2020, 62% of SHIP educational sessions included family caregivers as the intended audience and 11% of all counseling sessions included the family caregiver.

♦ Also supports Outcome 1.3.

3. ACL’s ONHPP, within AoA, will host an annual Older Adult Mental Health Awareness Day – engaging caregivers in the development and execution of the event to ensure their perspectives and needs are represented.

4. AmeriCorps Seniors will work with its grantees to help publicize the opportunity for free respite and other services in the near term that can be received by caregivers and/or for innovative projects that help increase access to services for caregivers and their families.

♦ Also supports Outcomes 3.2, 3.6

5. AmeriCorps Seniors may in the future use its grant opportunities to spur innovations that engage older and/or intergenerational volunteers to help increase access to information and services for caregivers.

♦ Also supports Outcomes 3.1, 3.6

6. AmeriCorps Seniors will offer webinars to engage caregiver experts through a Train-the-Trainer format, to educate its program directors who can then educate their volunteers and other community residents about the full range of services and supports that support kinship and grandfamilies in their communities.

♦ Also supports Outcomes 3.1, 3.6
7. AmeriCorps Seniors may seek to collaborate with one of its federal and/or nonprofit partners with a primary focus on grandfamilies and kinship families to survey its volunteer network to determine the number of volunteer grandparents raising their grandchildren and how AmeriCorps programs might better support them in the future.

   ♦ Also supports Outcomes 3.6, 5.1

8. CDC will provide ongoing support for the online Caregiving Resource library developed by the International Association for Indigenous Aging through 2025.

   ♦ Also supports Outcomes 3.1, 3.3

9. CDC will support the provision of technical assistance and education on a wide variety of topics regarding communication strategies on dementia caregiving by the BOLD Public Health Center of Excellence on Dementia by 2025.

   ♦ Also supports Outcomes 1.2, 1.3

10. CDC will support the development of the Healthy Brain Resource Center by ICF. This will have the capacity to sort specifically for caregiving resources by 2022 and updated annually.

   ♦ Also supports Outcomes 3.1, 3.3, 5.3

11. CFPB will pursue policy initiatives in FY23 to increase access to quality banking services for older adults and financial caregivers from historically underserved groups.

   ♦ Also supports Outcome 4.1

12. CFPB released a new consumer guide and accompanying bifold in FY22 on preventing elder financial exploitation in nursing homes and assisted living, thereby increasing caregivers’ ability to recognize and report financial abuse.

13. CMS’s Office of Program Operations and Local Engagement (OPOLE) will collaborate with regional executives in the Administration for Community Living in 2022 to train the states’ No Wrong Door (NWD) directors and state caregiver directors (OOAA Title III-E) on Medicare, Medicaid/CHIP, and Marketplace basics and preventive services. This training will help enlighten local agencies that work directly with caregivers and should result in caregivers getting enhanced information from entities they trust.

14. CMS’s OPOLE, in conjunction with CMS’ Center for Medicaid and CHIP Services, will develop localized public messaging and outreach/training materials in 2022 that specifically address Medicaid programs for children with disabilities and children in foster care (entitled to Medicaid until age 26) to achieve the goal of providing awareness and access to CMS programs benefitting caregivers and children in their care.

15. CMS’s OPOLE, in conjunction with CMS’ Office of Communications, will consult with the Advisory Panel on Outreach and Education (APOE) in 2022 to identify and develop effective strategies to educate caregivers about CMS’ insurance programs.
16. CMS may consider highlighting resources, including partner resources, in the 2023 “Medicare & You” handbook.

17. The Department of Education (ED) will partner with HHS/ACL in 2022 to ensure that materials for family caregivers, kinship and grandfamilies contain accurate information about available resources to achieve the goal of increased awareness and access to needed services.
   ♦ Also supports Outcome 1.2

18. The Department of Labor (DOL) Office of Disability Employment Policy (ODEP), through its technical assistance centers, will (in FY22-FY25) provide technical assistance and create resources (such as webinars, guides, and toolkits) for workforce intermediaries on linking family caregivers to support systems, such as employee assistance programs, benefits, and affinity groups, to achieve the goal of increasing employed family caregivers’ access to information, services, and supports.
   ♦ Also supports Outcome 1.3

19. DOL’s Women's Bureau will administer $2 million (FY22)/$3.5 million (FY23 proposed) in grants awarded to state and territory agencies through the Fostering Access, Rights, and Education (FARE) grant program to provide education to low-paid and otherwise marginalized women workers – including employed family caregivers – about their employment rights, assist them in navigating and calculating benefits, connect and refer women workers to additional services and benefits as needed, and help women become focal points for rights, benefits, and assistance in their own communities (i.e., a train-the-trainer model for navigation) in FY22-23.
   ♦ Also supports Outcome 3.1

20. DOL/ETA will use funding opportunity announcements and guidance to the workforce system to increase direct care workforce’s, including family caregivers’, awareness of, and access to, programs and services funded by the Workforce Innovation and Opportunity Act (WIOA), as appropriate starting in FY23.
   ♦ Also supports Outcome 3.9

21. NIA’s OCPL will provide links to federally sponsored services and supports for caregivers on NIA’s Health Information website in 2022.

22. NIA’s OCPL plans to review and update language in NIA’s Health Information Caregiving section that recognizes older adults in kinship families and grandfamilies in 2022.

23. VA’s Office of Mental Health Operations and Suicide Prevention and Caregiver Support Program (CSP) will connect veterans and caregivers with resources related to the Compact Act and increase skills of family caregivers of veterans with behavioral health challenges.

24. ACL will create materials for the SHIP, Medicare Improvements for Patients and Providers Act (MIPPA), and the SMP networks to educate and assist family caregivers supporting Medicare beneficiaries about Medicare benefits to achieve the goal of making informed decisions about their care and benefits. In 2020, 62% of
SHIP educational sessions included family caregivers as the intended audience and 11% of all counseling sessions included the family caregiver in FY23.

**Outcome 1.3: Outreach to family caregivers is improved.**

1. ACL’s AoD will identify gaps and prioritize programming with greatest potential to improve outreach to family, kin, and grandparent caregivers within the AoD by October 2023.
   ♦ Also supports Outcome 5.2

2. CDC will support the provision of technical assistance and education on a wide variety of topics regarding communication strategies on dementia caregiving by the BOLD Public Health Center of Excellence on Dementia by 2025.

3. CMS’s OPOLE, in collaboration with CMS’s Office of Communications and regional executives at ACL, will develop localized public messaging and outreach/training materials in 2022 aimed at the caregiver audience to achieve the goal of improving outreach efforts to family caregivers and promoting access to services and supports. Relevant topics include durable medical equipment, respite care, home care services, and hospice.
   ♦ Also supports Outcome 5.1

4. CMS’s OPOLE will reach out to local employers’ Employee Assistance Program (EAP) directors in 2022 and provide information related to CMS programs that benefit employees who also serve as caregivers, as part of the goal of improving outreach to family caregivers to ensure access to services and support.
   ♦ Also supports Outcome 5.1

5. ED will amplify outreach activities carried out by HHS/ACL through media to support the goal of ensuring early identification and access to services and supports in 2022.

6. DOL’s ODEP, through its technical assistance centers, will provide resources such as webinars, guides, and toolkits for workforce intermediaries on linking family caregivers to support systems, such as employee assistance programs, benefits, and affinity groups, to achieve the goal of increasing employed family caregivers’ access to information, services, and supports in FY22-25.
   ♦ Also supports Outcome 1.2

7. DOL’s ODEP, through its technical assistance centers, will create technical assistance tools such as webinars, guides, and toolkits and conduct social media campaigns on the needs of employed family caregivers, to improve employers’ and other organizations’ outreach efforts around family caregiving in FY22-25.

8. HRSA will support training of family caregivers by Geriatrics Workforce Enhancement Program (GWEP) and Geriatrics Academic Career Awards (GACA) Program in 2022. This training will show family caregivers how to be a central component of the interdisciplinary care team and how to access long-term services and supports in order to achieve the goal of RAISE GOAL 1 in 2022.
   ♦ Also supports Outcome 3
9. IHS will collaborate in 2022 with the CDC-funded New York University BOLD Center of Excellence on Early Detection of Dementia on the adaptation of an early recognition toolkit for use in IHS, Tribal, and Urban Indian Health Programs with the goal of improving early detection of dementia and identification of caregivers.

10. SAMHSA will explore opportunities to improve outreach to caregivers to ensure early identification of caregivers who may need a mental health or substance use disorder screening, or brief intervention, referral to treatment, and/or treatment for a mental health or substance use disorder, or co-occurring disorders.

♦ Also supports Outcome 2.2

Outcome 1.4: Family caregiving—and caregivers—are embedded in state, territorial, tribal, and local planning.

1. The Administration for Native Americans (ANA), within ACF, will continue to fund community-based projects for environmental, language preservation, and the Social and Economic Development Strategies (SEDS) program. SEDS Notice of Federal Opportunities (NOFO) is focused on community-driven projects designed to grow local economies, strengthen Native American families including the preservation of Native American cultures and decrease the high rate of current challenges caused by the lack of community-based businesses, and social and economic infrastructure in Native American communities including American Indian tribes (federally-recognized and non-federally recognized), Alaskan Natives, Native Hawaiians, and Native American Pacific Islanders.

♦ Also supports Outcome 4.3

2. AmeriCorps Seniors may seek to work through AAAs to develop ways that volunteers can support caregivers, specifically those caregivers in Tribal communities, given the vast number of AAAs that administer AmeriCorps Seniors projects.

♦ Also supports Outcome 3.6

3. CDC will assist the Association of State and Territorial Health Officials (ASTHO) to provide technical assistance and materials throughout FY23 to enhance the development of jurisdictional plans that align with the CDC Healthy Brain Initiative Road Map Series and the National Family Caregiving Strategy.

4. CDC will support the implementation and evaluation of the Healthy Brain Initiative’s Road Map Series, which includes actions regarding dementia caregivers, by the 23 BOLD Program Core and Advanced award recipients by 2023.

5. CDC will update the Healthy Brain Initiative 5-Year Road Map by 2024. This Road Map establishes national priorities for public health that include actions regarding dementia caregivers and are woven into National Healthy Brain Initiative and BOLD award recipients.

6. CDC will support the development or revisions to Alzheimer’s disease and related dementias (ADRD) strategic plans for jurisdictions, which includes support for
dementia caregivers, by state and jurisdictional public health departments of BOLD Program Core and Enhanced award recipients by 2023.

- Also supports Outcome 3.1

7. CDC will support the provision of technical assistance and education on a wide variety of topics regarding communication strategies on dementia caregiving consistent with the National Family Caregiving Strategy by the BOLD Public Health Center of Excellence on Dementia Caregiving, by 2025.
- Also supports Outcomes 1.2, 1.4

8. CMS’s DEHPG will identify and report, by fall 2023, on the ways state Medicaid agencies have expanded access to caregiver supports under Medicaid through ARP section 9817.

9. CMS’s DEHPG will conduct, by July 2023, a national training on the Home and Community-Based Services funded through Medicaid that could be of benefit supporting family caregivers.

10. CFPB plans to increase collaboration in FY23 with tribal communities through groups such as National Indian Council on Aging and the Diverse Elders Coalition.

11. DOL’s ODEP, through its technical assistance centers, will provide targeted technical assistance to state governments on state-level planning to support employed family caregivers, including family caregivers for veterans, to achieve the goal of incorporating employment concerns in local family caregiving strategies in FY22-FY25. The specific topics of technical assistance to state governments will depend on the center’s area of expertise and assistance.
- Also supports Outcome 4.4

12. DOL’s WB, in partnership with ETA, HHS, Treasury, and elected officials, will work to support investments in rebuilding care infrastructure and strengthening the care workforce in order to expand access to child care, elder care, and disability care. Multiple regional events will follow in FY22-23.

13. DOL’s Women’s Bureau will host an engagement event in FY22-23 with women elected officials (at all levels) to provide talking points, educational materials and other relevant information and resources needed to make a strong and unified case for expanded child and elder care access and investments, and to promote equity in implementation should federal policies and spending be passed.

14. IHS will award up to 5 Tribal grants and up to 3 IHS Program Awards in 2022 to develop a comprehensive approach to addressing dementia in Tribal communities, including attention to the needs of caregivers.

15. VA will meet with Tribal leaders to increase awareness of services VA provides to family caregivers in FY22.
Outcome 1.5: Public-private partnerships at all levels help drive family caregiver recognition and support.

1. ANA will identify other federal agencies to collaborate with and develop a strategic plan and/or visionary board to address all the resources needed. ANA addresses and supports the collaboration of intergenerational activities for youth and elders within Indian Country and this initiative regarding supporting family caregivers and older relative/kinship caregivers.

2. ACL’s AoD will identify examples of successful public/private partnerships within the AoD program grantees by FY23.
   ♦ Also supports Outcome 5.2

3. ACL’s Office of Network Advancement (ONA), within CIP, will provide direct funding to 5-7 states to develop plan/strategy to ensure that family caregiver diverse needs, issues and challenges are embedded within a state’s No Wrong Door (NWD) Governance structure and part of the NWD state access plan. Promising practices and tools will be shared more broadly for all states to replicate by FY23.
   ♦ Also supports Outcome 5.3

4. ACL’s National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR) will fund the Rehabilitation Research and Training Center (RRTC) on Family Support at the University of Pittsburgh to present in 2022 at the National Academies of Science, Engineering, & Medicine’s Public Workshop on Caregiving for Cancer and Other Serious Illnesses on 1) implementation programs to meet cancer caregiver needs and 2) COVID-19’s influence on the caregiving landscape. This will help achieve the goal of increasing public awareness of caregiver needs, interventions and policies to help meet those needs, and research and policy gaps in supporting family caregivers.
   ♦ Also supports Outcome 1.1

5. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh in 2022 to analyze sociodemographic and health correlates of current non-caregivers’ perceptions of the likelihood of becoming a family caregiver using nationally representative BRFSS data to inform a caregiver education strategy.
   ♦ Also supports Outcome 1.1

6. AmeriCorps Seniors, through its RSVP grant competition, may prioritize support in the future for and engaging family caregivers and other activities aligned with the National Family Caregiving Strategy as a priority in its grantmaking.
   ♦ Also supports Outcome 3.6

7. CDC will support the facilitation of collaborations between public health agencies and other partners by the BOLD Public Health Center of Excellence on Dementia Caregiving (e.g., webinars, conference on dementia caregiving as a public health issue, development of the Center’s website as a connection point for resources and access to technical support) by 2025.

8. CFPB and the Federal Deposit Insurance Corporation (FDIC) will increase collaboration with financial institutions on caregiving issues by making Managing
Someone Else’s Money and the CFPB’s fraud prevention placemats a part of the Money Smart for Older Adults curriculum.

♦  Also supports Outcome 4.1

9. CMS will continue to host Caregiver Workgroup meetings with key stakeholders in 2022.

10. HRSA will continue to include language in GWEP NOFO in 2023 to instruct applicants to develop reciprocal partnerships between academia, primary care clinics and community-based organizations (CBOs) that recognize, assist, include, support, and engage family caregivers in support of GOAL 1 of the Strategy.

11. HRSA will continue to include language in the GACA NOFO in 2023 to educate and train caregivers in caring for older adults, caring for themselves, and ways to be part of the interprofessional care team in support of GOAL 1 of the Strategy.

12. HRSA will continue to include a caregiver representative on its Advisory Committee on Interdisciplinary, Community-Based Linkages in 2022 in support of GOAL 1 of the Strategy.

13. IHS will continue to collaborate with the Northwest Portland Area Indian Health Board in a once-monthly ECHO session aimed at increasing the effectiveness of caregiver support.

♦  Also supports Outcomes 3.1, 5.3

14. IHS will collaborate with the CDC-funded New York University BOLD Center of Excellence on Early Detection of Dementia on the adaptation of an early recognition toolkit for use in IHS, Tribal, and Urban Indian Health Programs with the goal of improving early detection of dementia and identification of caregivers in 2022.

♦  Also supports Outcome 1.3

15. VA’s CSP in partnership with the Veteran Experience Office will develop a survey tool to conduct a needs assessment to help identify and bridge gaps in services and resources.

♦  Also supports Outcome 5.3

16. VA will expand its Veteran-Directed Care Program in partnership with the ACL and local Area Agencies on Aging to 70 additional sites to increase services to both veterans and their caregivers.

♦  Also supports Outcome 3

17. VA’s Veteran Community Partnership (VCP) Program in collaboration with the Caregiver Support Program Office in 2022 will continue to integrate VA and community caregiver supports and awareness of caregiver issues into current programming.
Goal 2: Actions to advance partnerships and engagement with family caregivers

Outcome 2.1: Family caregivers are recognized as essential partners in the care teams of the person(s) to whom they are providing support.

1. ACL-CRO will continue to advocate for family caregivers and kinship care families in regional HHS workgroups.

2. ACL’s AoD will speak to the importance of family caregivers and coordinate with AoD program grantees by October 2022 to disseminate and share information broadly on federally funded initiatives.

3. ACL’s AoD will identify by October 2022 grantees with successful training programs on family caregiving for medical or other professionals on family caregiving.

4. AmeriCorps Seniors, in the future, as part of its access to care volunteer outreach strategy, may seek to develop ways that family caregivers can volunteer to help educate community residents about the health care needs of family caregivers, i.e., through work with its volunteer Ombudsman and/or SHIP program volunteers.

   ♦ Also supports Outcome 3.6

5. HHS’ ASPE will use multiple data sources and sophisticated econometric techniques to project the future risk of disability, need for support, and use of family caregiving or paid LTSS. Using the Urban Institute’s dynamic microsimulation of income model (DYNASIM4), ASPE is able to incorporate future population characteristics, project financial resources, disability status, cognitive status and use of caregiving. In 2022, ASPE will release four reports to inform policies that support older adults:

   ♦ Future Changes in Caregiving Networks: How Family Caregivers and Direct Care Workers Support Older Adults with Needs for Long-Term Services and Supports at Present and in the Future.

   ♦ The Economic Value of Unpaid Care Provided to Older Adults Who Need Long-Term Services and Supports.

   ♦ Diversity in Caregiving Needs and Networks: Differences by Race-Ethnicity in the Care Older Adults Receive.

   ♦ Change in Caregiving Networks Over the Course of Disability

      » Also supports Outcomes 3.9, 5.1

6. CMS’s DEHPG will publish, by fall 2023, the proceedings of state summit, convene a technical experts workgroup, and disseminate action briefs that communicate strategies for supporting individuals with intellectual disabilities as well as their aging caregivers.

7. CMS’s OPOLE will collaborate with ACL’s regional executives to co-host localized listening sessions in 2022 with caregivers (grandfamilies, kinship care, and caregivers of disabled individuals), State Directors of OAA Title III-E caregiver programs, and No Wrong Door Directors to Directors in order to hear directly from
caregivers and the agencies that serve them how CMS policies and practices have impacted caregivers in health care settings in 2022.

8. IHS will assess the potential impact on family caregivers of grants and program awards made through the IHS Alzheimer’s Grants Program in 2022.

9. IHS will identify requirements for EHR capability that will support the caregiver role through the IHS Health Information Technology (HIT) Modernization Initiative in 2022.
   ♦ Also supports Outcomes 3.5, 5.1

10. NIA will solicit new research focused on policy and payment models, health insurance, and/or the ability of people and families to pay for and access needed services and support to achieve the goal of addressing the impact of policy and payment models and insurance on persons living with dementia, their care partners, and health care systems as well as economic and organizational factors associated with uptake of health care services by 2022 (See: NOT-AG-21-046/NOT-AG-21-047: NOSI: Dementia Care Research: Programs and services for persons with dementia).

11. NIA will develop research initiatives with the goal of supporting research on the ethical implications of inclusion of the care partner in the care team for the person living with AD/ADRD, dependent upon sufficiently successful applications and our future appropriations by 2025 contingent upon National Institutes of Health (NIH) appropriations and the submission of a sufficient number of meritorious applications.
   ♦ Also supports Outcome 5.2

12. NIA will continue to solicit and fund research on early-stage intervention development to achieve the goal of addressing the care needs and promote the health, function, and well-being of persons with Alzheimer’s disease (AD) and Alzheimer’s disease-related dementias (ADRD) and of those providing their care in 2022 (See: PAR-21-307: Dementia Care and Caregiver Support Intervention Research), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.
   ♦ Also supports Outcome 5.2

13. VA’s CSP in partnership with the VA’s CSP Partnered Evaluation Center (VA CARES) will conduct research studies related to the Program of Comprehensive Assistance for Family Caregivers (PCAFC) on the health and well-being of veterans and caregivers and evaluate best practices for scaling up interventions for national dissemination.
   ♦ Also supports Outcome 2.3

**Outcome 2.2: Where appropriate, identifying services and supports for caregivers consistently starts with a review of family caregiver strengths, needs, and preferences using evidence-based assessments.**

1. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to implement identification and goal setting procedures for one or more unpaid care partners of older adults involved in the Community Aging in Place-Advancing Better
Living for Elders (CAPABLE) Program by December 2023. This initiative will demonstrate that such procedures can be included as part of the standardized CAPABLE program and will achieve the goal of supporting the identification and inclusion of family caregivers as essential members and partners in the care recipient’s care team.

2. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to implement a program to identify, assess, and support the primary family caregiver for every patient diagnosed with gynecologic cancer in a large health care setting to achieve the goal of supporting the identification and inclusion of family caregivers as essential members and partners in the care recipient’s care team by 2023. This initiative will also identify successful implementation strategies to establish a blueprint for national cancer care delivery dissemination.

3. CFPB will promote its Managing Someone Else’s Money guides with a goal of assisting family financial caregivers to better understand and carry out their role.

   ♦ Also supports Outcome 5

4. CMS will update the final discharge rule (CMS3317-F and CMS 3295-F) and Conditions of Participation for Discharge Planning at 42 CFR.482.43 and 485.642 to include caregivers in the discharge planning process, as applicable.

5. ED will engage in projects that are designed to improve students’ social, emotional, academic, and career development, with a focus on underserved students. This effort is through the Secretary of Education’s Proposed Priority 6 – Strengthening Cross-Agency Coordination and Community Engagement to Advance Systemic Change.

6. HRSA will continue to support its GWEP and GACA grant recipients in their training initiatives in 2022 of training interprofessional teams to deliver patient centered care that includes family caregivers as essential members and partners in the care recipient’s care team in support of Goal 2 of the Strategy.

7. IHS will work through the IHS Health Information Technology (HIT) Modernization initiative in 2022 to identify family and kin caregivers in structured fields in the EHR of individuals receiving care.

   ♦ Also supports Outcome 5.1

8. SAMHSA will seek opportunities to expand case management services to women and kinship (family caregivers/grandparents) or foster care providers with reunification support. This will be in addition to referrals of kinship or foster care providers in need of mental health and/or substance use disorder services.

9. VA’s CSP will continue to advance the principles of the Campaign for Inclusive Care (CIC) as a minimum standard for the Program of General Caregiver Support Services (PGCSS). The CIC is an education and awareness campaign initiated to establish a system-wide approach to care that integrates caregivers as partners in veteran care and as members of VA healthcare teams.

   ♦ Also supports Outcome 1.1
Outcome 2.3: Where appropriate, family caregivers are included and considered in the development of care recipients’ plans of care across a range of settings and circumstances.

1. ACF’s ANA will provide competitive funding for community-based projects and interventions that arise directly from the needs or ideas of each community. Many of ANA’s projects highlight the importance of culture as a protective factor to intergenerational and historical trauma. This inclusion of culture through programming that involves language, foods, dance, song, art, games, community traditions, and others often involve elders as they are the cultural and knowledge bearers in the communities.

2. ACL’s OEJAPS will increase availability of information for caregivers by identifying grandfamilies and caregivers as a target audience for outreach by the National Center on Elder Abuse.
   ♦ Also supports Outcome 1.3

3. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh in collaboration with UPMC Hillman Cancer Center to implement an evidence-based family caregiver assessment whose responses are linked to a determination of caregiver risk of poor outcomes and recommendations for strategies to mitigate risk by 2023. The assessment and risk determination will achieve the goal of engaging family caregivers using evidence-supported and culturally sensitive family caregiver assessments to determine the willingness, ability, and needs of family caregivers to provide support.

4. CFPB will continue to promote its resource Considering a Financial Caregiver? to help consumers understand the willingness and ability of potential caregivers to provide support.

5. CMS’s DEHPG will explore Medicaid home and community-based services measure development focused on caregiver support and access to resources by fall 2023.

6. CMS will continue to support cognitive assessment code 99490 (non-complex chronic care management), which is payable under Medicare for beneficiaries with signs of dementia. Providers can use this code for reimbursement for services that include caregiver identification, knowledge, needs, social supports, and willingness of caregiver to take on caregiving tasks.

7. CMS will continue to recognize code 96161 (administration of caregiver-focused health risk assessment instrument), for use of a standardized instrument to screen for health risks in the caregiver for the benefit of the patient under Medicare.

8. HRSA will continue to support its GWEP and GACA grant recipients in 2022 in their training of the primary care workforce to use evidence-supported and culturally sensitive family caregiver assessments to determine the willingness, ability, and needs of caregivers in support of Goal 2 of the Strategy.

9. VA’s CSP in partnership with VA CARES will conduct evaluations on CSP assessment tools and their impact on the PCAFC and health and well-being of Veterans and caregivers.
Outcome 2.4: When policies are proposed or revised, the potential impact on family caregivers are anticipated and understood.

1. ACL’s Office of Network Advancement (ONA) will develop by the end of 2023 technical assistance resources that feature strategies to include family caregivers in all relevant care coordination and care transition activities.

2. AmeriCorps Seniors, through its Senior Companion and RSVP programs and as part of its training, in the near term, will educate its programs about the need to include family caregivers in planning when delivering client services that help older adults live independently in their homes.
   ♦ Also supports Outcome 3.6

3. CDC will support the facilitation of collaborations between public health agencies and service provider organizations by the BOLD Public Health Center of Excellence on Dementia Caregiving by 2025.

4. CMS’s Medicare’s chronic care management and complex care management services focus on characteristics of primary care such as patient and caregiver engagement and require a person-centered, electronic care plan based on a physical mental, cognitive, psychosocial, functional and environmental (re)assessment, and resource inventory (comprehensive plan of care for all health issues, with focus on the management of chronic conditions).

5. HRSA will continue to support its GWEP and GACA grant recipients in 2022 in their training initiatives for interprofessional teams to deliver patient centered care that includes family caregivers as essential members and partners in the care recipient’s care team in support of Goal 2 of the Strategy.

6. VA’s CSP will expand efforts to integrate caregivers in the EHR for both PCAFC and PGCSS programs in 2022, increasing integration of the caregiver in relevant care coordination of the veteran.
   ♦ Also supports Outcome 3.5

Outcome 2.5: The education curricula of professions who will potentially work with family caregivers include specific topics and coursework designed to ensure they have the skills to do so effectively.

1. ACF, through the CB Kinship Navigator Constituency Group, will provide technical assistance to state and tribal Kinship Navigator programs by September 2022 of how child welfare agencies can maximize kinship caregiver and youth voices throughout the design and implementation of their programs, including strategies for family caregiver engagement and referrals to services in the community.

2. ACL’s AoD will explore funding national training initiatives to strengthen the training of health care, social service, and allied professionals to maximize family caregiver engagement and referrals to services in the community of training by 2023.

3. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh in collaboration with the University of Pittsburgh Geriatric Certificate Program (GCP) to create a 15-credit Family Support Track in the GCP by 2023 to meet the goal of
strengthening the training of health care, social service, and allied professionals to maximize family caregiver engagement and referrals to services in the community.

4. ACL’s NIDILRR will fund the RRTC on Family Support’s educational webinar series (i.e., Scholarship Series and Family Support Series) by 2023 to meet the goal of strengthening training of health care, social service, and allied professionals to maximize family caregiver engagement and referrals to services in the community.

5. ACL’s OEJAPS will create and promote new and existing materials by the National Center on Law and Elder Rights targeted to legal professionals, including: Legal Basics: Grandparents and Other Non-Parent Kinship Families, Grandparents and Other Non-Parent Kinship Families: Legal Rights.

6. AmeriCorps Seniors will include education of kinship families and grandfamilies in volunteer orientations through its Foster Grandparent program.
   ♦ Also supports Outcome 3.6

7. CDC will support the provision of technical assistance to public health agencies regarding communication strategies on dementia caregiving for health care providers by the BOLD Public Health Center of Excellence on Dementia Caregiving. This includes the development of a curriculum on caregiving for public health professionals by 2025.

8. CDC will support the development of educational and training materials for professionals about supporting dementia caregivers in populations with a high burden of ADRD (i.e., African American, Latino, and Indigenous populations and people with ID/DD) by the National Healthy Brain Initiative’s award recipients by 2025.

9. CFPB will continue its collaboration with our stakeholders on financial caregiving issues to learn key policy areas to explore in FY23.
   ♦ Also supports Outcome 4

10. DOL's ODEP, through its technical assistance (TA) centers, may conduct research, convene think tanks, and provide TA on career ladders, training, and retaining direct care workers to achieve the goal of expanding the availability and stability of direct care for family caregivers in FY 22-25.
   ♦ Also supports Outcome 3.9

11. DOL’s ODEP will develop performance indicators for the success and reach of the above technical assistance on caregiving will reflect standard ODEP measures for technical assistance. These include the numbers and types of events or tools provided or developed, the number of users, readers, or attendees for each tool/event, survey data of TA recipients, and qualitative feedback from stakeholders.
   ♦ Also supports Outcome 1.3

12. DOL’s ODEP will continue to work with direct support providers to identify policies to improve funding, staffing, and stability in the direct support workforce. Many of these efforts have a direct impact on family caregivers for people with disabilities; this impact could be highlighted in technical assistance and policy development.
materials. Many family caregivers work with direct support professionals to care for and support competitive, integrated employment for people with disabilities.

♦ Also supports Outcomes 3.9, 4.2

13. DOL’s Women’s Bureau, though its regional offices and in collaboration with DOL/WHD, will hold listening sessions with a diverse set of stakeholders including employed family caregivers in various industries and workers in the care industry specifically to gather information on needs and strategies for improving wages and working conditions for employed family caregivers and direct care workers in FY22.

♦ Also supports Outcome 3.9

14. HRSA will continue to support its GWEP and GACA grant recipients in 2022 in their initiatives to train interprofessional teams to deliver patient-centered care that includes family caregivers as essential members and partners on the care recipient’s care team in support of Goal 2 of the Strategy.

15. IHS training plan in support of the Alzheimer’s Grants Program will include training and education in support of caregivers and the caregiver role as an essential component of care for individuals living with dementia in 2022.

16. NIA’s OCPL will add resources as they become available in 2022 to NIA’s webpage dedicated to Resources for Health Care Professionals to achieve the goal of providing updated materials that health care professionals can use in their practices and to share with their patients and communities.

17. NIH will continue to solicit and fund meritorious career development applications that propose research and training activities focused on caregiving, to achieve the goal of building capacity of medical and other professionals in the issues and needs of family caregivers and the development and implementation of strategies to support caregiver engagement in clinical encounters, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

18. VA’s CSP will host an annual conference for health care, social service and allied professionals focusing on providing outstanding support to veterans and caregivers while also increasing knowledge of available community resources.

Goal 3: Actions to strengthen services and supports for family caregivers

Outcome 3.1: Person- and family-centered, trauma-informed, and culturally appropriate caregiver services and supports are accessible for all family caregivers.

1. ACL’s OEJAPS will increase promotion of the financial planning resources available for individuals caring for a child or grandchild on ACL’s grantee website the National Resource Center for Women and Retirement’s Financial Caregiving Hub.

2. ACL’s ONHPP will provide education and resources to promote caregiver health and well-being through ACL’s National Chronic Disease Self-Management Education
(CDSME), Falls Prevention, and Nutrition and Aging Resource Centers starting in 2022.

♦ Also supports Outcome 1.1

3. ACL’s Office of Supportive and Caregiver Services (OSCS) will issue, in 2023, pending the availability of federal funding, a notice of funding opportunity to continue developing and operating the Eldercare Locator. The Locator is a nationwide service that connects older adults and their caregivers with trustworthy local support resources, including meals, home care or transportation, or a caregiver needing training, education or a well-deserved break from caregiving responsibilities. The grantee will develop initiatives targeted to family caregivers to better connect them to community resources.

♦ Also supports Outcomes 1.2, 1.3 and 2.3

4. ACL’s OSCS will issue, in 2023, pending the availability of federal funding, a notice of funding opportunity to continue support for the Alzheimer’s Call Center. The Call Center provides 24/7 information, expert advice, care consultation, and referrals at both national and local levels. They will develop initiatives targeted to family caregivers of persons with dementia to better connect them to community resources.

♦ Also supports Outcomes 1.2, 1.3 and 2.3

5. ACL-CRO will conduct at least one Regional Meeting with SUAs to discuss progress and promising practices associated with each recommendation under Goal #3 to be shared with ACL National Family Caregiving Strategy leadership in support of all Goal 3 outcomes

♦ Also supports Outcomes 3.2, 3.3, 3.4, 3.5, 3.6, 3.7, 3.8, and 3.9

6. ACL-CRO will continue to spread awareness and encourage the use of the Eldercare Locator and the Disability Information and Access Line (DIAL) to connect family caregivers with local services and supports in/by FY 2024.

7. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to begin national dissemination of evidence-based family caregiver guides and resources through a national advocacy organization to meet the goal of increasing access to meaningful and culturally relevant information, services, and supports for family caregivers by 2023.

♦ Also supports Outcome 5.3

8. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to complete analyses of nationally representative survey data on family caregivers, including caregiving context; activities and stressors; and physical, mental, social, and financial health outcomes across the caregiver lifespan to inform profiles of caregivers most in need of services and supports. These profiles of caregivers will inform interventions to meet the goal of increasing access to meaningful and culturally relevant information, services, and supports for family caregivers by 2023.

♦ Also supports Outcome 5.1
9. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh will develop adaptive mHealth caregiving apps containing culturally appropriate education materials tailored to different caregiver populations to increase access to information, services, and supports by 2024.

♦ Also supports Outcome 1.3

10. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to create guidelines and develop technologies that can enhance communications between extended families to meet the goal of enhancing meaningful and culturally relevant supports for family caregivers by 2024.

♦ Also supports Outcome 3.5

11. ACL’s NIDILRR will fund the RESILIENCE RRTC at Johns Hopkins School of Nursing to develop and disseminate a caregiver adaptation to achieve the goal of increasing access to relevant information and caregiver-centric support services for family caregivers of older adults with functional disabilities by 2025.

♦ Also supports Outcome 3.10 (formerly SGRG 3.9)

12. ACL’s NIDILRR will fund the RESILIENCE RRTC at Johns Hopkins School of Nursing to develop and disseminate a caregiver adaptation to achieve the goal of increasing access to meaningful and culturally relevant information and support services for family caregivers of children with social, emotional, or behavioral disabilities by 2025.

13. ACL’s NIDILRR will fund the RESILIENCE RRTC at Johns Hopkins School of Nursing to develop and disseminate a caregiver adaptation to achieve the goal of increasing access to relevant information and support services for caregivers with functional and/or sensory disabilities by 2025.

14. AmeriCorps Seniors, through its diversity, equity, and inclusion (DEI) activities, will in the near term educate its grantees on the need to develop and provide more culturally appropriate volunteers services to benefit all older adults, especially those in underserved geographic areas and those from historically underserved communities.

♦ Also supports Outcome 3.6

15. CDC will support the collection, dissemination, and creation of tools and materials for public health agencies regarding dementia caregiving by the BOLD Public Health Center of Excellence on Dementia Caregiving by 2025.

♦ Also supports Outcomes 3.3, 5.3

16. CDC will support the provision of technical assistance on dementia caregiving and cultural awareness/adaptation by the BOLD Public Health Center of Excellence on Dementia Caregiving, by 2025.

♦ Also supports Outcome 5.3

17. CDC will support the development and implementation of jurisdictional public health plans for ADRD, including support for dementia caregivers, by state and
jurisdictional health department BOLD Program Core and Enhanced award recipients, by 2023.

♦ Also supports Outcome 1.4

18. CDC will support the development and dissemination of public health strategies to support dementia caregivers in populations with a high burden of ADRD (i.e., African American, Latino, and Indigenous populations and people with intellectual or developmental disabilities (ID/DD)) by the National Healthy Brain Initiative’s award recipients by 2025.

19. CDC will support the development of the Healthy Brain Resource Center by ICF by 2022 and updated annually. This will have the capacity to sort specifically for caregiving resources.

♦ Also supports Outcomes 1.1, 1.2

20. CDC will provide ongoing support for the online Caregiving Resource library developed by the International Association for Indigenous Aging through 2025.

♦ Also supports Outcomes 1.2, 3.1

21. CFPB will continue to develop its collaborations with legal services groups as well as ethnic affinity groups like the Diverse Elders Coalition and the National Black Caucus on Aging to learn more about older consumers’ experiences.

♦ Also supports Outcomes 3.3, 3.4, 3.8

22. CFPB will examine long-term care issues to understand consumers’ experiences with financing options in FY23.

♦ Also supports Outcomes 3.3, 3.4, 3.8, 4

23. CFPB will continue in FY23 to promote resources for older adults (including caregivers) who have experienced the death of a loved one.

♦ Also supports Outcomes 3.3, 3.4, 3.8

24. ED’s Statewide Family Engagement Centers and Parent Training and Information Centers will develop outreach materials in 2022 specifically for kinship and grandfamilies about the services they can provide to support them to achieve the goal of increasing access.

♦ Also supports Outcome 1.2, 4.3

25. DOL’s ODEP and its technical assistance centers will provide technical assistance to federal agency partners and state intermediary organizations in FY22-25 to produce targeted, culturally relevant information for employed family caregivers from different populations, including military families, on rights, laws, and workplace flexibilities, to achieve the goal of effective outreach to and access to information for employed family caregivers.

♦ Also supports Outcome 4.2
26. DOL’s Women’s Bureau will administer, $2 million (FY22) and $3.5 million (FY23 proposed) in grants to state and territory agencies through the Fostering Access, Rights, and Education (FARE) grant program. These funds will be used to provide education to low-paid and otherwise marginalized women workers – including employed family caregivers – about their employment rights, assist them in navigating and calculating benefits, connect and refer women workers to additional services and benefits as needed, and help women become focal points for rights, benefits, and assistance in their own communities (i.e., a train-the-trainer model for navigation).

♦ Also supports Outcome 1.2

27. HRSA will support its GWEP and GACA grant and recipients in 2022 to provide meaningful and culturally relevant information, services and supports for family caregivers in their trainings to support Goal 3 of the Strategy.

28. IHS will develop a training program over the next year for caregiver coach/support provided by public health nursing and community health representatives, based in the evidence of REACH (Resources to Enhance Alzheimer’s Caregiver Health).

29. SAMHSA will focus efforts through the VA/SAMHSA Governor’s Challenge to Prevent Suicide Among Service Members, Veterans, and their Families, SAMHSA, and the VA partner to support the implementation of a public health approach for the prevention of suicide among service members, veterans, and their families. These efforts help states, and communities develop the capacity to implement interagency action plans grounded in evidence-based suicide prevention practices. A component of the Governor’s Challenge includes technical assistance on the unique need of military and veteran caregivers. Specifically, we have partnered with American Red Cross’ Military and Veteran Caregiver Network, Blue Star Families, Caregivers on the Homefront, the Elizabeth Dole Foundation Caregiver Fellowship program, and others. The Governor’s Challenge is currently in 35 states; there is a goal to reach the remaining 15 states and 5 of the territories by FY23.

30. SAMHSA will also promote access to the recently developed VA S.A.V.E. Preventing Caregiver Suicide training during FY22 as part of the Governor’s Challenge. This course was designed to develop an understanding of the increased risk for suicide that is seen in military and Veteran caregivers, identify the signs of an at-risk Veteran caregiver, and learns steps that can be taken to help a veteran caregiver.

31. SAMHSA’s Service Members, Veterans, and Families (SMFV) Technical Assistance (TA) Center is conducting a three-part learning community series entitled “Promoting Financial Wellness Among Service Members, Veterans, and their Families” during FY22. Economic stability is one of the key social determinants of health. According to the 2020 Military Family Lifestyle Survey, financial issues are among the top five stressors for military families. This series includes targeted resources to promote financial wellness among military spouses and children, veterans, and caregivers.

♦ Also supports Outcome 4.3

32. VA’s CSP will engage in efforts to expand the availability of resources in languages other than English in FY22.
Outcome 3.2: Family caregivers can obtain respite services that meet their unique needs.

1. ACL’s Office of Supportive and Caregiver Services (OSCS), within AoA, launched a new grant program within the Alzheimer’s Disease Program Initiative (ADPI) in FY 2022. *Innovations in Dementia-Specific Respite* will assess the current landscape of dementia-cable respite options and pilot new respite services in states and communities.
   ♦ Also supports Outcome 5.3

2. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to address the goals of unpaid care partners of older adults through an adaptation of the Community Aging in Place-Advancing Better Living for Elders (CAPABLE) by 2024. Pittsburgh Area Agencies on Aging piloted CAPABLE to meet the goal of increasing the availability of high-quality, setting-appropriate, and caregiver-defined respite services to give caregivers a healthy and meaningful break from their responsibilities.

3. AmeriCorps Seniors will educate its grantees in the near term and the future on new evidence-based best practices and curriculums that provide the ultimate respite experience for caregivers and best experiences for the client.
   ♦ Also supports Outcomes 3.6, 5.3

4. AmeriCorps Seniors will engage its older adult volunteers, who are grandparents, to help determine supports that may provide higher quality services for kinship and grandfamilies.
   ♦ Also supports Outcomes 3.6, 3.10

5. CMS’s DEHPG will identify and report by fall 2023 on the ways state Medicaid agencies have expanded access to respite services under Medicaid through ARP section 9817.

6. CMS’s DEHPG will conduct a national training by July 2023 on Medicaid funded services for individuals that benefit caregivers, including respite services.

7. CMS Medicare’s hospice benefit includes limited respite care services through a Medicare-certified inpatient facility.

8. CMS Medicare Advantage organizations have to option to elect to furnish respite care and/or adult day health services to certain beneficiaries.

9. CMS’s OPOLE, in collaboration with CMS’s Office of Communications, will develop localized public messaging and outreach/training materials in 2022 detailing coverage for Respite Care and Home Care Services (for caregivers who want to be their family member’s home attendant). This will help achieve the goal of providing practical information to caregivers who desire a meaningful break from caregiving responsibilities.

10. HRSA will encourage its GWEP and GACA grant recipients to provide training to primary care professionals in 2022 to inform caregivers about the availability of high-quality, setting-appropriate, and caregiver-defined respite services to give caregivers
a healthy and meaningful break from their responsibilities to support Goal 3 of the Strategy.

11. VA will increase communication to enhance awareness of respite services that are available to veterans and caregivers in partnership with the Elizabeth Dole Foundation and CareLinx.

♦ Also supports Outcome 1.2

Outcome 3.3: A range of evidence-based education, counseling, and peer support services are available to caregivers.

1. ACL’s NIDILRR will fund the RESILIENCE RRTC at Johns Hopkins School of Nursing to a) Develop and disseminate a caregiver adaptation to achieve the goal of increasing availability of counseling and education opportunities for family caregivers of older adults with functional impairment; b) Identify unmet needs of caregivers with physical and/or sensory disabilities and develop an intervention for the caregivers and disseminate findings from the intervention which will increase the availability of high-quality, person-centered interventions to support caregivers with physical or sensory disabilities caring for individuals with disabilities; c) Increase the availability of high quality, person-centered intervention that support caregivers raising young children with social, emotional, or behavioral disabilities to achieve the goal of increasing availability of counseling and education opportunities for family caregivers of young children with social, emotional, or behavioral disabilities.

♦ Also supports Outcomes 1.1, 3.1, 5.3

2. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to address the goals of unpaid care partners of older adults through an adaptation of the Community Aging in Place-Advancing Better Living for Elders (CAPABLE) piloted with Pittsburgh Area Agencies on Aging to meet the goal of increasing the availability of high-quality, setting-appropriate, and caregiver-defined respite services to give caregivers a healthy and meaningful break from their responsibilities by 2024.

3. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh will scale up and implement an mHealth-supported tiered intervention into standard of care clinical practice in oncology to meet the goal of increasing the availability of diverse counseling, training, peer support, and education opportunities for family caregivers, including evidence-informed interventions, by 2024.

♦ Also supports Outcome 5.3

4. CDC will support the collection, dissemination, and creation of tools and materials for public health agencies regarding dementia caregiving by the BOLD Public Health Center of Excellence on Dementia Caregiving by 2025.

5. CDC will support the provision of technical assistance to public health agencies on identifying, implementing, and sustaining evidence-based interventions and programs for dementia caregiving by the BOLD Public Health Center of Excellence on Dementia Caregiving, by 2025.

♦ Also supports Outcomes 3.1, 5.3
6. CDC will support the development of the Healthy Brain Resource Center by ICF. This will have the capacity to sort specifically for caregiving resources, by 2022 and updated annually.

   ♦ Also supports Outcomes 1.2, 3.1, 5.3

7. CDC will provide ongoing support for the online Caregiving Resource library developed by the International Association for Indigenous Aging through 2025.

8. CMS’s OPOLE in collaboration with ACL will host a national presentation in 2022 that highlights best practices, model approaches and evidence-based interventions to achieve the goal of increasing the awareness and availability of model approaches and evidenced based interventions for kinship families and grandfamilies.

9. DOL’s ODEP will, through its Employee Assistance and Resource Network on Disability Inclusion (EARN), provide technical assistance on and create or update informational material such as webinars, guides, and toolkits that include information about creating EAPs and other workplace mental health initiatives that are supportive of employed family caregivers, to achieve the goal of increasing the availability of evidence-based counseling and peer support for family caregivers in their workplaces in FY22-FY25.

   ♦ Also supports Outcome 1.3

10. DOL will provide downstream impacts to include improvements to the mental health of employed family caregivers and more effective service design and delivery for broader workplace mental health initiatives.

11. IHS will develop a training program for caregiver coach/support provided by public health nursing and community health representatives, based in the evidence of REACH over the next year.

12. VA will continue to offer support services, such as the Peer Support Mentoring Program and Caregiver Support Line. The Peer Support Mentoring Program provides an opportunity for caregivers to receive guidance and to share their experiences, wisdom, skills, and passion with other caregivers. The Caregiver Support Line offers monthly telephone education calls for caregivers.

**Outcome 3.4: Caregivers and families have safe places to live, nutritious food, and adequate transportation.**

1. ACL’s Center for Innovation and Partnership (CIP) in collaboration with Housing and Services Resource Center partners—including CMS, ASPE, SAMHSA and the Department of Housing and Urban Development (HUD)—will host by 2023 a learning collaborative with a group of states and communities to increase partnerships across disability, aging, health and housing sector to increase access to affordable, accessible housing and services.

2. ACL’s CIP and the HUD will host a community of practice (COP) with public housing authorities through the Housing and Services Resource Center in 2022 to increase access to housing vouchers.
3. ACL’s Office of Interagency Innovation (OII), within CIP, in collaboration with the Coordinating Center to Address Social Isolation, will host an affinity group that will replicate a social isolation intervention in at least one additional community by the end of 2022.

4. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh by 2024 to: a) Create and disseminate a policy brief leveraging the insights from analyses of large national datasets to inform relevant policy related to encouraging and expanding the use of technology, including assistive technology, as a means of supporting family caregivers; b) Develop digital interventions targeting both caregivers and care recipients with cross-cutting modules agnostic to care recipient diagnosis and templates for adapting disease-specific modules to meet the goal of expanding the use of technology as a means of supporting family caregivers; c) Develop caregiver risk assessment apps for dissemination to the public through app stores to meet the goal of expanding the use of technology as a means of supporting family caregivers.
   ♦ Also supports Outcomes 1.1, 2.2

5. AmeriCorps Seniors, through its RSVP and Senior Companion programs that provide peer-to-peer support, will work in the near term to ensure volunteers educate caregivers about the full range of counseling, housing and other services in their communities.
   ♦ Also supports Outcome 3.3, 3.6

6. AmeriCorps Seniors, through its grant opportunities, may seek in the future to prioritize its funding to those programs that engage older adult volunteers in evidence-based interventions.
   ♦ Also supports Outcome 3.6

7. ASPE will continue to explore homelessness among older adults (defined as those over the age of 50) in order to understand what services and supports such as housing, safe living accommodations, food, and transportation that adults and their caregivers need to maintain their health and independence. In recent years there has been an increase in homelessness among older adults. The project will explore HHS services that families may be accessing prior to homelessness, and during periods of housing instability. Research has indicated that for many individuals, family disruptions including death of a spouse or divorce may precede homelessness, indicating that caregivers may be an important component to housing stability for older adults. The project will identify ways that HHS programs can better serve individuals (and their caregivers) who are homeless or at risk of homelessness. The final report is expected to be released in late 2022.
   ♦ Also supports Outcomes 4.1 and 5.1

8. CMS’s Medicare Advantage organizations may continue to elect to furnish home-delivered meals under certain circumstances, and disease-tailored benefits, to certain beneficiaries with chronic conditions such as food and produce, and meals.
9. HRSA will encourage its 2022 GWEP and GACA grant recipients to educate primary care professionals to counsel caregivers about locally available high-quality, setting-appropriate, and caregiver-defined respite services to give caregivers a healthy and meaningful break from their responsibilities to support Goal 3 of the Strategy.

10. VA’s CSP will continue to expand partnerships and referral networks with internal and external departmental programs and community services which support the health and independence of veterans and caregivers.

Outcome 3.5: Family caregivers have innovative tools and technology to assist them in their roles.

1. ACL’s Office of Interagency Innovation (OII), within CIP, will work with State Assistive Technology (AT) programs by the end of 2023 to develop information regarding assistive technology solutions that support people with disabilities to carry out functions independently or with minimal supports ultimately supporting the family caregiver.

2. CMS and Medicare have continued to expand access to services through telehealth modalities; in 2022 for behavioral health, eliminating geographic barriers and allowing beneficiaries to access telehealth services for diagnosis, evaluation, and treatment of mental disorders from their homes.

3. HRSA will encourage its GWEP and GACA grant recipients in 2022 to continue to support patients, families, and caregivers during teleconferencing and telemedicine visits to support Goal 3 of the Strategy.

4. NIH's Basic Behavioral and Social Science Opportunity Network (OPPNET), NIA, the Office of Research on Women's Health (ORWH), National Institute of Dental and Craniofacial Research (NIDCR), and the National Cancer Institute (NCI) will in 2022 solicit basic and/or methodological research projects that seek to illuminate or measure independent and interdependent health-related effects within caregiver and care-partner dyads (See: PAR-21-281: Dyadic Interpersonal Processes and Biopsychosocial Outcomes), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

5. The National Institute on Minority Health and Health Disparities (NIMHD), NIA, and NCI, will solicit caregiving research in 2022 that examines the impact of leveraging health information technology (HIT) to reduce disparities in access to and utilization of health care services, patient-clinician communication, and health outcomes for populations that experience health disparities in the U.S. basic and/or methodological research projects that seek to illuminate or measure independent and interdependent health-related effects within caregiver and care-partner dyads (See: PAR-22-145: Leveraging Health Information Technology (HIT) to Address and Reduce Health Care Disparities), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

6. The National Institute on Nursing Research (NINR) will continue in 2022 to solicit and fund research in 2022 that will develop and test technology tools to achieve the goal of addressing caregiver symptoms and quality of life, including assistive medical devices, remote communication and monitoring tools, sensors (wearables, in-home
devices), mobile technologies, alert systems (See: PA-19-024/ PA-19-023: Addressing Caregiver Symptoms through Technological Tools), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

♦ Also supports Outcome 5.2

7. NCI and the NIA will continue to solicit and fund innovative, high-risk/high-reward research on caregivers in 2022 and 2023 through a collaborative interagency funding opportunity between the NIH and the National Science Foundation to achieve the goal of achieving disruptive transformations in biomedical research (See: NOT-OD-21-011: Smart Health and Biomedical Research in the Era of Artificial Intelligence and Advanced Data Science), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

♦ Also supports Outcome 5.2

8. NCI, The National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK), and NIA will solicit and fund Small Business Innovation Research Grant Applications in 2022 focused on the development of assistive technology, devices, and mobile applications for older adults and caregivers and the development of health information technologies to achieve the goals of promoting independence and aging in place, patient engagement, enhancing communication and/or decision support with clinicians, and supporting interaction with caregivers (see PHS 2021-2 SBIR/STTR Program Descriptions and Research Topics for NIH, CDC, and FDA and PA-21-259/ PA-21-260/PA-21-261/ PA-21-262: PHS 2021-2 Omnibus Solicitation of the NIH, CDC and FDA for Small Business Innovation Research Grant Applications], contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

9. VA’s CSP will continue to leverage various technological platforms, such as Building Better Caregivers, to educate and improve skills for caregivers.

Outcome 3.6: Volunteers of all ages and abilities are trained, vetted, and ready to assist family caregivers.

1. ACL’s OSCS, within AoA, will issue, in 2024, pending the availability of federal funding, a notice of funding opportunity to continue developing the Community Care Corps Program. The Community Care Corps program works at the community level to foster innovative models that leverage volunteer engagement to support caregivers and provide older adults and people with disabilities with non-medical care.

♦ Also supports Outcome 3.1

2. VA will continue to offer support services, such as the Peer Support Mentoring Program. The Peer Support Mentoring Program provides an opportunity for caregivers to receive guidance and to share their experiences, wisdom, skills, and passion with other caregivers.
Outcome 3.7: Family caregivers’ and care recipients’ needs are a key consideration in emergency response efforts.

1. ACL’s AoD will review existing emergency preparedness planning not only for its impact on people with ID/DD but explore ways to support family caregivers by October 2022. Recent COVID-19 impact reports show gaps and areas for improvement.

2. CDC will update Search.Find.Help.org with additional resources by 2022. This searchable database includes evidence-based interventions for caregivers and others during public health emergencies.  
   ♦ Also supports Outcome 5.3

3. CFPB will continue to offer its disaster preparedness and fraud prevention resources to caregivers and continue to collaborate on federal pandemic relief efforts.  
   ♦ Also supports Outcome 4

4. CMS’s DEHPG will provide ongoing outreach and technical assistance for states experiencing natural disasters regarding the opportunities to make temporary changes to enlarge provider capacity, use alternate settings and add specific focused services to mitigate needs generated by an emergency/disaster.

5. CMS will continue to respond to Medicare beneficiary needs as it has during the COVID-19 pandemic, through establishment of the Nursing Home Resource Center, and surveyed beneficiaries through a supplement to the Medicare Current Beneficiary Survey to assess the impact of the public health emergency on beneficiaries.  
   ♦ Also supports Outcome 3.8.

6. The Federal Emergency Management Agency (FEMA) will hold a national-level stakeholder call (at the time of the National Family Caregivers Month in November 2022) and promote on social media and in external e-communications resources and information for family caregivers on helping children with disabilities before, during and after disasters.

7. SAMHSA will focus efforts to develop an emergency preparedness training tailored for SAMHSA Systems of Care and Statewide Family Network Program grantees during FY22. These caregiver networks will include caregivers for children, youth, and young adults (birth to age 26) who have or are at risk of having a serious mental illness.

8. SAMHSA will focus efforts to pilot an emergency preparedness training in FY22 for Systems of Care and Statewide Family Network Program grantees.

9. SAMHSA will focus efforts in FY 23 to further develop the emergency preparedness training models (based on lessons learned from Systems of Care/Statewide Family Network Program Grantee pilot) for stakeholder groups led by people with lived experience navigating behavioral health services systems, inclusive of caregiver groups.
10. VA’s CSP will work with the Office of Emergency Management to develop contingency planning guidance related to various emergent situations (i.e., pandemics, natural/manmade disasters) to better support veterans and caregivers.

**Outcome 3.8: Family caregivers have the skills and tools necessary to prepare for the future needs of the person they support.**

1. ACL’s AoD will continue to fund the Bridging the Aging and Disabilities Networks Initiative increase the uptake of policies in participating states/territories that would sustain future planning for family caregivers by October 2023.
   ♦ Also supports Outcomes 3.1, 4.3, 5.3

2. AoD’s currently funded initiative, Bridging the Aging and Disabilities Networks, will provide technical assistance by October 2023 to participating community of practice (COP) states that focus on building the capacity of states to better support adults with ID/DD and their families with future planning needs

3. NIA’s OCPL will review and update NIA’s Health Information webpage on long-term care and advance care planning by 2023 to achieve the goal of educating readers about future care needs and planning strategies for addressing them.
   ♦ Also supports Outcome 1.1

4. VA’s CSP will continue to participate in VA’s strategic planning to advocate the needs of veterans and caregivers.

**Outcome 3.9: An agile, flexible, and well-trained direct care workforce is available to partner with and support family caregivers.**

1. ACL’s OII, within CIP, will develop a plan to increase and strengthen the paid LTSS and direct support workforce by the end of 2022.

2. ACL will launch a new technical assistance resource center to support the strengthening of the direct care workforce in late 2022. Over the course of this 5-year project, ACL will collaborate with a broad range of federal and non-federal partners and stakeholders to foster improvements in the recruitment, hiring and retention of direct care workers who support older adults, people of all ages with dualities and their family caregivers.
   ♦ Also supports Outcomes 1.2, 2.5, 5.3

3. ASPE is examining past and current state policies and programs to identify those with the best potential for improving compensation for direct care workers (DCWs). This will include identifying policies that may create barriers to improved wages and address the knowledge gap. The project will also explore the role of Medicaid rate-setting approaches that target direct care workers’ compensation. Finally, it will synthesize findings related to all these issues in order to identify promising next steps for research. Results of this project will be released in late 2022 or early 2023.
   ♦ Also supports Outcome 4.5
4. ASPE will release a report on barriers to wider adoption of AT and home modifications to support care provided in the home to people with disabilities in 2022.
   ♦ Also supports Outcome 5

5. CMS will identify and report on, by fall 2023, the ways state Medicaid agencies have expanded access to strengthen the direct support workforce.

6. CMS will work with states that wish to continue with the option of paying family caregivers by providing technical assistance, reviewing, and approving 1915(c) Home and Community-Based Service (HCBS) waiver applications to do so within 6 months of the close of the public health emergency.
   ♦ Also supports Outcome 4.1 and 4.4

7. DOL’s ODEP and its technical assistance centers, may conduct research, convene think tanks, and provide TA in FY22-25 on providing career ladders, and training and retaining direct care workers to achieve the goal of expanding the availability and stability of direct care for family caregivers.
   ♦ Also supports Outcome 2.5

8. DOL’s ETA will, depending on Congress’ FY23 appropriation for grants to support the direct care workforce, design and award grants to eligible entities to address the recruitment, education, and training, retention, and career advancement of direct support workers in the States. Should the appropriation not include this grant program, DOL/ETA will work with DOL’s ODEP, Women’s Bureau and other federal agencies as necessary to disseminate information to the direct care workforce about the employment and training services available through the public workforce system.

9. DOL’s ETA will develop grant programs to provide supportive services, including transportation, child care, dependent care, workplace accommodations, and workplace health and safety protections, to the direct support workers served by the grant that are necessary to enable such workers to participate in the activities supported by the grant, depending on Congress’ appropriation for grants to support the direct care workforce, starting in FY 2023.

10. DOL’s Women’s Bureau, through its regional offices and in collaboration with DOL/WHD, will hold listening sessions with a diverse group of stakeholders including employed family caregivers in various industries and workers in the care industry specifically to gather information on the needs of workers and strategies for improving wages and working conditions for employed family caregivers and direct care workers in FY22.
    ♦ Also supports Outcome 2.5

11. NIA will solicit research applications in 2022 that focus on (1) how economic and policy factors and demands as well as features of the work environment drive the composition and quality of the dementia care workforce; (2) demographic and familial factors that influence demand for and supply of dementia care workers; (3) training and certification effects on quality and retention of dementia care workers; and (4) the development of data resources required to study these issues, to achieve
the goal of promoting behavioral and social research on the dementia care workforce and the impact of workforce factors on outcomes for persons living with AD or ADRD and their families. (See: NOT-AG-21-049: NOSI: Dementia Care Workforce for Those Living with Alzheimer’s Disease (AD) and Alzheimer’s Disease-Related Dementias (ADRD)), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

♦ Also supports Outcomes 4.1, 5.1

Outcome 3.10: Kinship families and grandfamilies are recognized, supported, and valued within the child welfare system.

1. ACF through the Capacity Building Center for States’ Kinship Navigator Constituency Group will provide technical assistance by September 2022 to state and tribal Kinship Navigator programs on best practices related to prioritizing relative placement, and ways that child welfare agencies can provide training and supports to kinship families to improve children’s safety, placement stability, and well-being.

2. ACF’s Children’s Bureau plans to issue a Notice of Proposed Rulemaking (NPRM) during FY 2022 to allow Title IV-E agencies to adopt licensing or approval standards for all relative foster family homes that are different from the licensing standards used for non-related foster family homes. This will remove a barrier to licensing relatives, many of whom are more likely to be older, single, African American, living in poverty, and less well educated. Additional information is available and may be found in the Office of Management and Budget’s Fall Unified Agenda.

Goal 4: Actions to ensure financial and workplace security for family caregivers

Outcome 4.1: Family caregivers can provide care without negative impacts to their near- and long-term financial health.

1. ACL-CRO will conduct at least one Regional Meeting with SUAs to discuss progress and promising practices associated with each recommendation under Goal #4 to be shared with ACL National Family Caregiving Strategy leadership in support of all Goal 4 outcomes.

♦ Also supports Outcomes 4.2, 4.3, 4.4

2. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to complete analyses of nationally representative survey data of family caregivers, including income, employment, out-of-pocket spending, and health care utilization; caregiving context; activities and stressors; and physical, mental, social, and financial health outcomes across the caregiver lifespan to inform profiles of caregivers at high risk for negative financial impacts. These profiles will inform the development of interventions to meet the goal of decreasing the negative financial impacts for family caregivers on both a short- and long-term basis.

♦ Also supports Outcomes 1.1, 5.2
3. CFPB will study the financial impacts of caregiving, with a long-term goal of releasing information that highlights the trends and potential solutions.

4. DOL’s ODEP will acknowledge the important role of family caregivers and support them in assisting their family members in achieving CIE in FY22-24. Family caregivers play a key role in supporting people with disabilities who engage in CIE - work in settings with people without disabilities for standard wages. This will be achieved by carrying out a variety of activities and developing policy related to CIE.
   ♦ Also supports Outcome 1.1

5. DOL’s Office of Federal Contract Compliance Programs (OFCCP) will explore methods for identifying and addressing in compliance evaluations employer policies and practices that create risk factors for caregiver discrimination, to achieve the goal of advancing equal employment opportunity for caregivers in FY23-25.

6. DOL’s Women’s Bureau will release research contracted through the Urban Institute on the opportunity costs and economic effects of caregiving in order to update understanding of the lifetime effects of providing family care to account for current data and trends with additional analysis by race and ethnicity in FY22.
   ♦ Also supports Outcome 5.2

7. VA’s CSP will implement Financial and Legal Services support for veterans and caregivers who participate in the Program of Comprehensive Assistance for Family Caregivers.
   ♦ Also supports Outcome 1.1, 3.1, 4.3

Outcome 4.2: Family caregivers have access to employee-centered flexible workplace policies and practices that support work/life balance and professional performance when personal circumstances change.

1. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to disseminate a policy brief on caregiver employment status across the lifespan by 2024.
   ♦ Also supports Outcomes 1.1, 5.2

2. DOL’s ODEP, through its technical assistance centers, will provide technical assistance and develop technical assistance tools such as webinars, guides, and promotional tools on meeting the leave, flexibility, and support needs of employed family caregivers to achieve the goal of expanding public awareness, recognition, and support for family caregivers in workplaces in FY22-FY25.
   ♦ Also supports Outcome 1.1

3. DOL’s ODEP, through its technical assistance centers, will develop technical assistance tools such as webinars, guides, and promotional tools on the mental health of employed family caregivers, including caregivers from underserved communities, such as employer assistance programs, benefits systems, and affinity
groups to increase awareness of ways to support family caregivers’ well-being in FY22-FY25.

♦ Also supports Outcomes 1.1, 1.3

4. DOL’s ODEP released a brief on Paid Family Leave in FY22, outlining the benefits and potential beneficiaries of such a policy, and the demographics of the target population. This initiative could be revitalized with the addition of FMLA and other leave policies, targeting employed caregivers specifically.

5. DOL’s Women’s Bureau will host a roundtable with workers and stakeholders on expanding access to child and elder care in FY 22-23.

6. DOL’s Employee Benefits Security Administration (EBSA) and ODEP will collaborate to update the Secure Your Financial Future toolkit, which is aimed at people with disabilities, to include considerations for family caregivers. This toolkit was released in 2021. The information in the toolkit covers financial education applicable for people with disabilities that can also help family caregivers.

7. In FY22-FY25, DOL/EBSA will develop joint webinars, guides, and promotional tools that address the challenges family caregivers face and help them make informed decisions to achieve a secure retirement. EBSA will work with relevant agencies to provide one-stop comprehensive information to assist caregivers by creating awareness and understanding of their rights, so they are prepared to make informed decisions.

Outcome 4.3: Family caregivers have access to and use of financial education and advance planning tools.

1. ACL’s AoD will provide technical assistance in 2022 to CoP states that focus on building capacity of states to better support adults with ID/DD and their families with future planning needs. This effort is part of the Bridging the Aging and Disabilities Networks initiative. Topics covered can include future planning kits, financial education, and promising practices regarding strategies, policies, and practices within the aging and disability networks that support individuals with ID/DD and their families.

♦ Also support Outcome 3.8, 5.3

2. ACL’s OEJAPS, within AoA, will increase promotion of the financial planning resources available for individuals caring for a child or grandchild on ACL’s grantee website the National Resource Center for Women and Retirement’s Financial Caregiving Hub.

3. ACL’s OEJAPS will collaborate with its resource centers to present caregiver specific content on topics such as financial management, alternatives to guardianship, prevention of abuse, neglect, and exploitation in/by FY 2023. Use existing resources with greater emphasis and outreach to caregivers.

4. ACL’s OEJAPS will secure funding and implement a national initiative by FY 2023 for all adults age 18+ to prepare advance directives in recognition that all adults may be or need caregivers.

♦ Also supports Outcome 3.1
5. CFPB will continue to make available its Managing Someone Else’s Money guides and accompanying materials mentioned above.

6. CFPB will continue to promote resources for older adults (including caregivers) who have experienced the death of a loved one in FY23.
   ♦ Also supports Outcome 1.1

7. DOL’s Employee Benefits Security Administration (EBSA) and ODEP could collaborate to update the Secure Your Financial Future toolkit, aimed at people with disabilities, to include considerations for family caregivers. This toolkit was released in 2021; much of the information covers financial literacy applicable both for people with disabilities and family caregivers.

Outcome 4.4: Long-term services and supports are more affordable, allowing family caregivers to reduce their out-of-pocket costs.

1. ASPE will undertake a project in 2022 to describe and compare three reform proposals designed to address the need for, and costs of, LTSS: the Washington State Long-Term Care Trust Act, the Well-Being Insurance for Seniors to be at Home (WISH) Act, and the Medicare Long-Term Care Services and Supports Act. Several states are implementing programs to finance LTSS. Each of these have been proposed (or in the case of the Washington program, established) in the last four years, and take very different approaches to mitigating the risk of long-term care. The project will describe each proposal in detail, compare major program features (target population, coverage/benefits, eligibility triggers, and financing), estimate costs and distributional impacts, and model changes to the baseline (core) proposals. Separately, findings will be included in the Urban Institute’s dynamic microsimulation of income model (DYNASIM4) to estimate distributional impacts on payers and users of program benefits.
   ♦ Also supports Outcomes 1.1, 5.3

Goal 5: Actions to expand data, research, and evidence-based practices to support family caregivers

Outcome 5.1: A national infrastructure will exist to support the collection of population-based data, using standardized wording of the definition of family caregiving, and standardized wording of questions that address the core characteristics of the family caregiving experience.

1. ANA will continue analysis of data collection toward elders and youth programs, but we contend to move toward solutions and strategies to recruit and maintain a measurable progress toward this community, when applicable.

2. ACL’s OSCS will foster a new collaboration between its ADPI program and ACL’s OAA Title VI program (Programs for Native Americans, Alaskan Natives and Native Hawaiians) to develop and deliver training programs for family caregivers in Indian
Country beginning in FY 2022. This effort will include a robust evaluation component to demonstrate impact on the family caregivers and elders served.

♦ Also supports Outcome 3.1

3. ACL’s Office of Performance and Evaluation (OPE) will pilot test the addition of a new question as part of the redesign of the 2023 National Survey of OAA Participants. It will ask if recipients of OAA services such as congregate meals, home-delivered meals, transportation services, case management, and homemaker services are also caregivers.

♦ Also supports Outcome 1.1

4. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to summarize the measurement approaches and the strengths and weaknesses of existing nationally representative datasets and will make recommendations for a standard set of caregiving questions to address family support across the lifespan that should be included in all national surveys to achieve the goal of establishing a national caregiving data infrastructure by 2023.

5. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh to disseminate a policy brief on the prevalence of families receiving paid LTSS across the lifespan by 2024.

♦ Also supports Outcome 3.9

6. ACL’s NIDILRR-funded RRTC on Family Support at the University of Pittsburgh in collaboration with PA-DHS and University of Pittsburgh Medicaid Research Center (MRC) will collect data on Community Health Choices (CHC) family caregivers to inform strategies for program efficiencies, which will improve the affordability of providing LTSS by 2024.

♦ Also supports Outcome 4.4

7. CDC will support robust data collection from the Caregiver Module of the BRFSS across US states and territories in 2021 & 2022.

♦ Also supports Outcome 1.1

8. CDC will publish annual updated infographics for states regarding caregiving using data from the BRFSS Caregiver module. Additionally, these data will be updated annually on the Alzheimer’s Disease and Healthy Aging Data Portal.

♦ Also supports Outcome 1.1

9. CDC will publish updated infographics for states utilizing the BRFSS Caregiver module conducted in 2021 & 2022 in FY23. These infographics will provide national estimates of prevalence of caregiving and characteristics of the caregiving situation by race/ethnicity, sex, sexual orientation, veteran status, and rurality.

♦ Also supports Outcome 1.1
10. CDC will evaluate and revise the BRFSS Caregiving Module to be fielded on the 2024 BRFSS Survey by 2024.
   ♦ Also supports Outcome 1.1

11. CDC will submit caregiving questions being fielded on the 2025 BRFSS Survey to other national surveys, such as the National Health and Nutrition Examination Survey (NHANES) or the National Health Interview Survey (NHIS) by 2024.
   ♦ Also supports Outcome 1.1

12. CDC will update the Aging and Health in America Data Brief on Caregiving by 2024.
   ♦ Also supports Outcome 1.1

13. CFPB will study the financial impacts of caregiving, with a long-term goal of releasing information that highlights the trends and potential solutions.
   ♦ Also supports Outcomes 5.2, 5.3

14. NIA will initiate at least one public-private partnership to support the development of AD/ADRD data and clinical infrastructure and harmonization processes that can allow for the integration of AD/ADRD data and clinical infrastructure and harmonization processes that allow for the integration of health care, formal and informal caregiving, and other care-related data from multiple sources (e.g., EHR, claims, surveys, patient-reported outcomes) to achieve the goals of enabling analyses of care disparities among diverse populations, making such infrastructure resources available to the research community, and incentivizing its use, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications by 2025.

15. NIA will support the development of methods and measures for capturing expanded definitions of “family” and related concepts relevant to informal caregiving for people living with AD/ADRD, and the testing of these measures in populations underrepresented in AD/ADRD research and implementation of these measures in new and existing studies by 2023, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications (see: RFA-AG-23-022/RFA-AG-23-023: Measures and Methods for Research on Family Caregivers for People Living with Alzheimer’s Disease (AD) and Related Dementias (ADRD) (R01 Clinical Trial Not Allowed).

16. NIA will support the establishment of standard protocols for harmonizable data collection to achieve the goal of establishing data infrastructure for the study of dementia caregiving by 2025, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.

17. SAMHSA will explore adding “are you a caregiver,” “are you a grandparent caregiver” to the agency’s Government Performance and Results Act (GPRA) performance monitoring data collection tool, across all SAMHSA programs.
   ♦ Also supports Outcome 1.1
Outcome 5.2: Family caregiver research facilitates the development and delivery of programs and services that support and enhance the health and well-being of the family caregiver and the person receiving support.

1. ACF’s Children’s Bureau will fund a 3-year grant with a project period from Sept 2021- Sept 2024 titled: “The Family Connections Grant: Building the Evidence of Kinship Navigator Programs” to support research for the primary purpose of building credible evidence of the effectiveness of Kinship Navigator (KN) programs in improving child welfare outcomes.
   ♦ Also supports SGRG 3.9

2. ACF’s Children’s Bureau has awarded five grants with a project period from Sept 2021- Sept 2026 titled: Improving Child Welfare through Investing in Family." The purpose of the grants is to implement and evaluate an array of kinship preparation services to support placement stability and maintain children’s important connections with families. These grants will meaningfully engage parents, relatives, kin caregivers, youth, foster parents, and alumni of foster care throughout the grant to improve outcomes for children living in kinship families in foster care.
   ♦ Also supports SGRG 3.9

3. ACF will facilitate the sharing of quality data within ACF and within Indian Country for the use and benefit of directing needs for the Native American caregivers and/or grandparents raising grandchildren families.

4. ACL’s OSCS, within AoA, will institute new performance reporting for the Lifespan Respite Care Program grantees beginning in 2024 and pending approval. This new reporting framework will provide ACL and the field of respite care with critical information on the numbers of family caregivers served by the program as well as advancements being made by grantees in the development of state Lifespan Respite systems.
   ♦ Also supports Outcome 3.2

5. ACL’s OSCS, in collaboration with the Office for Performance and Evaluation (OPE) within the Center for Policy and Evaluation (CPE), will assess the feasibility of undertaking a retrospective evaluation of the ADPI from 2018 forward beginning in FY 2023. The evaluation will assess the impact of the grants and focus on improving the quality and effectiveness of programs and services for individuals aging with ID/DD and ADRD or those at high risk of developing ADRD.

6. ACL will partner with the DOL and ED to provide grants for colleges and universities that offer studies in gerontology and family services to encourage research and expand those programs to increase the number of professionals in the aging network in/by FY 2024.
   ♦ Also supports Outcome 2.5

7. ACL will partner with DOL to update job codes and other policies needed to support use of federal job training funds for caregiving-related careers in/by FY 2024.
   ♦ Also supports Outcomes 2.5, 3.9
8. ACL will require state grants for BRFSS to include the Caregiving module as an ongoing mandatory module, with related funding by FY24. States will review modules and add any questions that will give better outcome data on use of supportive caregiver interventions.
   ♦ Also supports Outcome 5.1

9. ACL’s OPE will analyze data from the COVID-19 module of the 2021 National Survey of Older Americans Act Participants to better understand how the pandemic has disrupted and changed service delivery for OAA clients including caregiver support clients in fall 2022. The findings from this study will be presented in a final report to ACL leadership to support ongoing work and to facilitate discussion on potential new research, demonstration, and evaluation opportunities.
   ♦ Also supports Outcome 3.7

10. ACL’s NIDILRR will fund the RRTC on Family Support at the University of Pittsburgh in collaboration with established community and academic partners for a completed data collection, analysis and dissemination of all center-based projects focused on increasing family caregiver research that facilitates the development and delivery of programs and services that support and enhance the health and well-being of the caregiver and care recipient by 2024.
   ♦ Also supports Outcome 3.1

11. ACL’s NIDILRR will fund the RESILIENCE RRTC at Johns Hopkins School of Nursing to train early career scientists on best practices for designing interventions or technologies for supporting family caregivers that are person-centered, effective, and scalable (Building for Scale Scholars Program) to achieve the goal of increasing family caregiver research that support and enhance the health and well-being of caregivers by 2025.
   ♦ Also supports Outcome 3.1

12. ASPE will release an issue brief on the unique needs of people supporting someone with a behavioral health condition for family members and friends to increase awareness in 2023. The types of supports and assistance needed by families and friends of a person with a behavioral health condition, such as a serious mental illness or a substance use disorder, often differ from the types of supports that caregivers of people with functional limitations need.
   ♦ Also supports Outcomes 1.1, 3.1

13. CDC will publish peer-reviewed studies examining the current landscape of dementia caregiving in the United States focusing on the health and well-being of caregivers by 2024.
   ♦ Also supports Outcome 1.1

14. DOL’s ODEP and its technical assistance centers will expand its research on workplace mental health considering COVID to include family caregiving, to achieve the goal of identifying best practices to support the mental health and well-being of family caregivers in the workplace in FY22.
   ♦ Also supports Outcomes 1.1, 3.1, 4.3
15. DOL’s Women’s Bureau will release in FY22 research contracted through the Urban Institute on the opportunity costs and economic effects of caregiving in order to update understanding of the lifetime effects of providing family care to account for current data and trends with additional analysis by race and ethnicity.

♦ Also supports Outcome 4.1

16. DOL’s Women’s Bureau will build out a section of our website to showcase elements of the most recent American Time Use Survey Leave Module in FY 22-23. It will include subgroup analysis where possible to better understand how diverse populations responded to the survey.

♦ Also supports Outcomes 1.1, 3.1

17. NIA and NINR will continue to solicit research that will develop and test technology tools to achieve the goal of addressing caregiver symptoms and quality of life, including assistive medical devices, remote communication and monitoring tools, sensors (wearables, in-home devices), mobile technologies, alert systems in 2022. (See: PA-19-024/ PA-19-023: Addressing Caregiver Symptoms through Technological Tools).

♦ Also supports Outcome 3.5

18. NIA will continue to solicit research applications focused on dementia care and caregiver support intervention development research to achieve the goal of laying the groundwork for the implementation of AD/ADRD care and caregiving interventions that can be delivered with fidelity in the real world.(See: PAR-21-307: Dementia Care and Caregiver Support intervention Research and that can produce results that can be directly adopted by healthcare providers, patients, or caregivers for rapid dissemination and implementation (See: PAR-21-308: Pragmatic Trials for Dementia Care and Caregiver Support, contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications in 2022.

19. NIA will continue to solicit and fund research applications focused on high-priority Alzheimer's disease (AD) and AD-related dementias (ADRD) care partner/caregiver research areas as set forth by the NIA’s Division of Behavioral and Social Research to achieve the goals of funding research that can inform the development of successful interventions for caregivers and that can address priority areas guided by the AD/ADRD research implementation milestones, expert discussions from the NIH 2020 Dementia Care Summit, and recommendations from the National Academies of Sciences, Engineering, and Medicine (NASEM) Decadal Survey of Behavioral and Social Science Research on AD/ADRD (see: NOT-AG-21-047: Notice of Special Interest (NOSI): Behavioral and Social Science Priority Areas in Dementia Care, Partner/Caregiver Research), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications by 2024.

20. VA’s CSP in partnership with VA CARES will conduct research on programs and services targeted to enhance the health and well-being of the veteran and caregiver. Research topics will be identified based on assessment of needs reported by veteran and caregivers through surveys, listening sessions, etc.

♦ Also supports Outcomes 3.1, 5.3
Outcome 5.3: Promising and evidence-informed practices are promoted, translated, and disseminated to support family caregivers in the delivery of health care and social services.

1. ACL’s AoD will disseminate promising practices and translated materials developed by its grantees, including State Councils on Developmental Disabilities by October 2023.
   ♦ Also supports Outcome 1.1

2. ACL-CRO will assist in the promotion and dissemination of promising practices to support caregiving in/by FY 2024 or where available.

3. ACL will offer grant opportunities by FY 2023 for researching the effectiveness of evidence-supported practices to support family caregivers and the aging network.
   ♦ Also supports Outcome 3.1

4. ACL’s OPE will analyze data in late 2022 on caregivers from the National Survey of Older Americans Act Participants to examine the prevalence of health disparities that impact access to care and services for many groups, including racial and ethnic minorities and people living in rural communities. The findings from this study will be submitted to a peer-reviewed journal with the goal of building a greater understanding of caregivers’ differing needs and providing insights that may help increase the development and delivery of programs and services that support and enhance the health and well-being of the caregivers and care recipients.
   ♦ Also supports Outcome 1.1

5. ACL’s NIDILRR will fund the Shepherd Center to produce scientific evidence regarding the comparative effectiveness of two interventions that offer support to caregivers of patients with acquired brain injury (ABI) during the transition home from inpatient rehabilitation by 2023. This project examines two interventions, Building Better Caregivers (BBC) and Problem-Solving Training (PST), and measures their impact on (1) caregiver stress/burden and depression, (2) caregiver self-efficacy in their ability to manage their loved-one’s care needs, and (3) health care utilization (i.e., hospitalization, emergency room, and doctor office visits) by patients and caregivers in the first six months after discharge from the rehabilitation hospital. It supports Goal 1 by providing evidence of best practices for improving family caregiver physical and emotional well-being.
   ♦ Also supports Outcomes 1.1, 3.1

6. ACL’s NIDILRR will fund RRTC on Family Support at the University of Pittsburgh will host a national biennial State of the Science on Family Caregiving Research Conference to meet the goal of increasing promotion, translation, and dissemination of promising and evidence-supported practices to support family caregivers in the delivery of health care and LTSS by 2022.

7. ACL’s NIDILRR will fund RRTC on Family Support at the University of Pittsburgh will begin nationwide dissemination activities for evidence-based interventions in family caregiving targeting health care providers to increase their knowledge and capacity to implement these interventions to meet the goal of increasing promotion,
translation, and dissemination of promising and evidence-supported practices to support family caregivers in the delivery of health care and LTSS by 2024.

8. ACL’s NIDILRR will fund RESILIENCE RRTC at Johns Hopkins School of Nursing will promote, translate, and disseminate promising practices and approaches for scaling evidence-based programs to support caregivers and care recipients in the delivery of health care and LTSS by 2025.

9. CDC will support the collection, dissemination, and creation of tools and materials regarding dementia caregiving by the BOLD Public Health Center of Excellence on Dementia Caregiving by 2025.
   ♦ Also supports Outcomes 3.1, 3.3

10. CDC will support the provision of technical assistance on identifying, implementing, and sustaining evidence-based interventions and programs for dementia caregiving by the BOLD Public Health Center of Excellence on Dementia Caregiving by 2025.
    ♦ Also supports Outcome 3.3

11. CDC will support the development of the Healthy Brain Resource Center by ICF by 2022 and update it annually. This tool will have the capacity to sort specifically for caregiving resources.
    ♦ Also supports Outcomes 1.2, 3.1, 3.3

12. DOL’s ODEP Performance indicators for the success and reach of its technical assistance on caregiving will reflect standard ODEP measures for technical assistance. These include the numbers and types of events or tools provided or developed, the number of users, readers, or attendees for each tool/event, survey data of TA recipients, and qualitative feedback from stakeholders (cross-listed multiple times).
    ♦ Also supports Outcomes 1.1, 1.2, 1.3, 1.4, 2.5, 3.1, 3.3, 3.8, 3.9, 4.2

13. HRSA will ask its GWEP and GACA grant recipients in 2022 to promote, translate and disseminate promising and evidence-supported practices to support family caregivers in the delivery of health care and LTSS to support Goal 5 of the Strategy.

14. NIA will solicit and fund research grants in 2022 and 2023 to support pragmatic trials to achieve the goals of addressing practical comparative questions faced by AD/ADRD patients, clinicians, and caregivers (both paid and unpaid) from broad and diverse populations; improving the quality of life for persons with dementia and their informal caregivers, delivering more patient-focused, cost-effective care across multiple settings; and/or reducing disparities in dementia care (See: PAR-21-308: Pragmatic Trials for Dementia Care and Caregiver Support [R61/R33 – Clinical Trial Required]), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.
    ♦ Also supports Outcome 2.1

15. NIA and NIMHD will solicit caregiver-relevant applications in 2022 to conduct efficient, large-scale pragmatic or implementation trials to improve health and care delivery, with a particular focus on health care systems (HCS) with less historical
involvement in research studies focused on improving health outcomes for US patient populations (See: RFA-AT-22-001: NIH Health Care Systems Research Collaboratory - Pragmatic and Implementation Trials of Embedded Interventions (UG3/UH3, Clinical Trials Optional), contingent upon NIH appropriations and the submission of a sufficient number of meritorious applications.)
Acronyms and Abbreviations

- ACF: Administration for Children and Families
- ACL: Administration for Community Living
- ACL-CRO: ACL’s Center for Regional Operations
- ADPI: Alzheimer’s Disease Program Initiative (ACL)
- ADRD: Alzheimer’s disease and related dementias
- ANA: Administration for Native Americans (ACF)
- AoD: Administration on Disabilities (ACL)
- APOE: Advisory Panel on Outreach and Education (CMS)
- ARP: The American Rescue Plan of 2021
- ASPE: HHS’ Assistant Secretary for Planning and Evaluation
- ASTHO: Association of State and Territorial Health Officials
- AT: Assistive technology
- BRFSS: Behavioral Risk Factor Surveillance System
- CAPABLE: Community Aging in Place-Advancing Better Living for Elders Program
- CAPE-Youth: Center on Advancing Policy and Employment for Youth
- CBO: Community-based organization
- CDC: Centers for Disease Control and Prevention
- CDSME: Chronic Disease Self-Management Education
- CFPB: Consumer Financial Protection Bureau
- CHIP: Children’s Health Insurance Program
- CIC: Campaign for Inclusive Care (VA)
- CIE: Competitive integrated employment
- CMS: Centers for Medicare & Medicaid Services
- CoP: Community of practice
- CSP: VA’s Caregiver Support Program
- DCWs: Direct care workers
- DEHPG: Disabled and Elderly Health Programs Group (CMS)
- DEI: Diversity, equity, and inclusion
- DOL: U.S. Department of Labor
- DYNASIM4: Dynamic microsimulation of income model
- EAP: Employee assistance program
- EARN: Employee Assistance and Resource Network on Disability Inclusion
- EBSA: Employee Benefits Security Administration
- ED: Department of Education
- EHR: Electronic health record
- FARE: Fostering Access, Rights, and Education program
- FDIC: Federal Deposit Insurance Corporation
- FEMA: Federal Emergency Management Agency
- GACA: Geriatrics Academic Career Awards
- GCP: Geriatric Certificate Program
- GWEP: Geriatrics Workforce Enhancement Program
- HCBS: Home and community-based services
- HHS: Department of Health and Human Services
- HIT: Health information technology
- HRSA: Health Resources and Services Administration
- HUD: U.S. Department of Housing and Urban Development
- ID/DD: Intellectual and developmental disabilities
- IHS: Indian Health Service
- JAN: Job Accommodation Network
- KN: Kinship Navigator
- LEAD Center: National Center on Leadership for the Employment and Economic Advancement of People with Disabilities (LEAD Center).
- LGBTQIA+: Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex, Asexual, and others
- LTSS: Long-term services and supports
- MIPPA: Medicare Improvements for Patients and Providers Act
- NASEM: National Academies of Sciences, Engineering, and Medicine
- NCI: National Cancer Institute
- NHANES: National Health and Nutrition Examination Survey
- NHIS: National Health Interview Survey
- NIA: National Institute on Aging
- NIDCR: National Institute of Dental and Craniofacial Research
- NIDDK: National Institute of Diabetes and Digestive and Kidney Diseases
- NIH: National Institutes of Health
- NIMHD: National Institute on Minority Health and Health Disparities
- NINR: National Institute of Nursing Research
- NOFO: Notice of Funding Opportunity
- NMT: National Medicare Training
- OAA: Older Americans Act
- ODEP: Office of Disability Employment Policy (DOL)
- OEJAPS: ACL’s Office of Elder Justice and Adult Protective Services
- OFCCP: Office of Federal Contract Compliance Programs (DOL)
- OHIC: Office of Healthcare Information and Counseling (ACL)
- ONHPP: Office of Nutrition and Health Promotion Programs (ACL)
- OPOLE: Office of Program Operations and Local Engagement (CMS)
- OPPNET: NIH’s Basic Behavioral and Social Science Opportunity Network
- ORWH: NIA’s Office of Research on Women’s Health
- OSCS: Office of Supportive and Caregiver Services (ACL)
- PCAFC: Program of Comprehensive Assistance for Family Caregivers (VA)
- PEAT: Partnership on Employment and Assistive Technology
- PGCSS: Program of General Caregiver Support Services (VA)
- PIA: Partnership on Inclusive Apprenticeship
- RAISE: Recognize, Assist, Include, Support, & Engage (Caregivers Act of 2017)
- REACH: Resources to Enhance Alzheimer’s Caregiver Health
- RRTC: Rehabilitation Research and Training Center (funded by ACL’s NIDILRR)
- SAMHSA: Substance Abuse and Mental Health Services Administration
- SEDS: Social and Economic Development Strategies program
- SEED: State Exchange on Employment and Disability
- SGRG: The Supporting Grandparents Raising Grandchildren Act
- SHIP: State Health Insurance Assistance Program (funded by ACL)
- SMVF: Service Members, Veterans, and their Families (technical assistance center)
- SMP: Senior Medicare Patrol (funded by ACL)
- VA: Department of Veterans Affairs
- VCP: Veteran Community Partnership (VA)
- WB: Women’s Bureau (DOL)
- WISH: Well-Being Insurance for Seniors to be at Home