

SWOT Analysis SAMPLE
Caregiver Programs and Supports for Alabama
Completed 8/20/15 SJR 73 Caregiver Task Force

Strengths	Weakness
<ul style="list-style-type: none"> • Taskforce members here to influence policy • Legal awareness by passing SJR73 • Work of Lifespan Respite over the years • Patchwork of assistance • Family support groups by designated groups • The strength of family caregivers • Faith-based interest • We all will experience in our lives some way being a caregiver • 2 more years of LR funding • Regional offices MR/DD • HHS infrastructures • Health Human Service agencies communication and partnerships • Caregivers at the table • Resources in educational community • Family support-passionate-low money-good help • Opportunity to get information out with collective list • ADRCs (Aging and Disability Resource Centers) “no wrong door” • AARP Prepare to care national coordinator/Alabama specific • Bring in more chronic health, self-prevention programs 	<ul style="list-style-type: none"> • Family resources/support for head injury • No adult day care certification • Financial ruin • Low natural supports • No healthcare worker certification/standards • Not adequate qualified backup home care help for family caregiver • Family supports separated in money, programs, and communication • Family caregivers do not identify as caregiver and they do not know of services • Caregivers do not ask for help • Unemployment issues for family and paid caregivers • Not awareness that many times it is grandchildren taking care of grandparent • Lack of insurance (average/TA/caregiver support) • Lack of communication to some people in their homes, isolation • Families do not stay in one place anymore • Inadequate/untrained case management system • High need groups with no services • Alzheimer taskforce-report stalled • Lack of way to connect people to the right resource/barriers they experience • Family has no way to review what resources available • Not using educational resources to expand opportunities for high school students to increase health workforce • Caregivers don’t call until a crisis • Caregivers do it all-never ask for help for fear of what will happen • Waiver wait list forces families into crisis before they get help • Not a long-term plan • Lack of support from policy makers • Access to information and services • Connecting people to the wrong resource • Gaps in resources for severe disabilities and behavior issues • No autism waiver

SWOT

Opportunities

- Connecting people to resources that are available
- a qualified paid caregiver registry established
- Jr college certification/career path/training
- Changes-RCO, LRC, etc. and advocating for caregiver support
- Faith-based support
- Win-win situations among all financial interests working/advocating together
- Healthcare groups providing support
- To drill down what resources, we have and share
- Unified way to address issues
- A campaign to reach out to caregivers “encourage them to ask” for help
- Health and Human Service system has opportunities with growth
- Job readiness
- Individual family support-utilize-expand resources
- LTC facilities expansion of support to caregivers
- Assistive technology
- On-line training for caregivers/more broadband
- Better training for case management/focus on
- Understanding role as caregivers, providing support for caregivers
- Pulling a resource base together that is accessible/friendly/known to public
- High school program-that leads to useful paid employment and further education opportunities
- Educate caregivers about resources.
- LRC planning to include caregivers supports/education
- AARP Prepare to care/train all end of life issues
- This taskforce ability to make systems change
- RCO/LRC will need resource development/collaboration for access
- RCO/LRC need good case management support
- Greater coordination/use of Education/community college curricula for support

Threat

- Caregivers aging out
- No resources for gap populations with severe disability and behavior issues
- Not enough paid/trained caregivers
- Quality of information for caregivers and care recipients
- Family units falling apart
- Financial interest conflicts
- Legislature not acting on budget responsibly to solve health care and social service issues
- more healthcare going to cost more money
- More in numbers put in institutional LTC than in Community based
- Abuse and neglect
- Numbers over 65 increasing dramatically
- Caregivers aging out/dying with no resource for care recipient
- Not asking for help leads to big problems
- Policy makers/legislature do not understand the issues of caregiving
- Caregivers stopping what they do and shifting their burden on the state/federal government out of lack of support- lost billions. Walking away from Caregiving.
- A generation who does not care