

Lifespan Respite Care Program: Advancing State Lifespan Respite Systems – New York

Program Evaluation Report



Office for
the Aging

December 2021



A. Title Page

Project Title: Building Long-Term Sustainability in State Lifespan Respite Programs (Lifespan Respite) – New York

ACL Grant # 90LRLI0012

Project Period: September 1, 2017 – August 31, 2020 (3 years)
September 1, 2020 – August 31, 2021 (No Cost Extension)

Report Category: FINAL PROGRAM EVALUATION REPORT

Date of Report: December 1, 2021

Project Partners:

New York State Office for the Aging (NYSOFA)
New York State Caregiving and Respite Coalition (NYSCRC)
New York State’s ADRC/NWD (NY Connects)
Monroe County Office for the Aging (MCOFA)
Lifespan of Greater Rochester, Inc. (Lifespan)

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C. Executive Summary

The Lifespan Respite Core Team (Core Team), comprised of the New York State Office for the Aging (NYSOFA), Monroe County Office for the Aging (MCOFA), New York State Caregiving and Respite Coalition (NYSCRC), and New York State’s Aging and Disability Resource Center (ADRC)/No Wrong Door (NWD) (NY Connects), built upon prior Lifespan Respite initiatives by engaging key stakeholders to increase and expand access to respite services statewide and enhance partnerships for education, outreach, and service provision to advance development of a Lifespan Respite Care System. The Project Objectives were to: (1) Increase the number of respite volunteers through additional training and recruitment activities; (2) Expand available respite services statewide through formalizing a caregiver-directed respite model; (3) Expand access to caregiver services through improved respite listings in the NY Connects Resource Directory across age and disability types; and (4) Implement and continue to update the Statewide Action Plan for Lifespan Respite sustainability. This report summarizes the extensive activities undertaken during the period of funding and the major accomplishments by the end of the no-cost extension on August 31, 2021. Some implementation challenges arose in early 2020 for the project due to the coronavirus pandemic (COVID-19) and subsequent Public Health Emergency. Respite sites across New York State had varying time periods of a “pause” on respite services, especially during the early part of the pandemic. The ongoing respite trainings and conferences had to be pivoted to “virtual” formats and webinars when in-person trainings were not an option. Despite these challenges in 2020-2021, all major grant activities, outcome reporting, and dissemination of products in support of the project objectives were accomplished by the project Core Team, stakeholders, and respite providers statewide. In addition, the Core Team continued work on sustainability planning and groundwork laid for future years funding as well as lifespan respite enhancement planning for New York State.

D. Background

Lifespan Respite Care Programs are coordinated systems of accessible, community-based respite care services for family caregivers of children or adults of all ages with care needs. Such systems bring together federal, state, and local resources and funding streams to help support, expand and streamline the delivery of planned and emergency respite services while also providing for the recruitment and training of respite workers and caregiver training and empowerment. The Lifespan Respite Care Program seeks to facilitate coordination between programs, reduce duplication of effort, and assist in the development of respite care infrastructure at the state and local level. In September 2017, New York State was awarded a Lifespan Respite Grant for enhancing and sustaining State Lifespan Respite Programs through federal funding by the Administration on Aging (AoA)/Administration for Community Living (ACL) of the United States Department of Health and Human Services (HHS). The funding provided through this grant was intended to help drive the advancement of caregiving and respite support strategies, as well as the expansion of existing programs. These efforts built upon prior successful work under the 2014-2017 “Building Long-Term Sustainability in State Lifespan Respite Programs” grant awarded to NYSOFA by the ACL, which included training respite volunteers to provide respite to caregivers across age and disability groups to help address service gaps. NYSOFA, MCOFA, NY Connects, and NYSCRC worked in partnership as part of a Lifespan Respite Core Team which has worked toward a triple aim to expanding long-term supports and services (LTSS) in New York State to provide the right care, at the right time, in the right place. The Core Team worked with key stakeholders to advance a statewide, integrated, sustainable Lifespan Respite Program that built upon a strong statewide caregiving and respite coalition to help increase access to information on caregiving and respite services for families across the age and disability spectrum. This current initiative sought to scale available respite resources across New York state through growth and expansion of trained respite volunteers, raising awareness of caregiver needs and respite sources, and through integration of respite services throughout the state LTSS. This initiative also enables New York (NY) to fully implement and conduct ongoing updates to its Statewide Action Plan for Lifespan Respite sustainability.

E. Project Overview

Project Title: Lifespan Respite Care Program: Advancing State Lifespan Respite Systems

ACL Grant # 90LRLI0012

Project Goal: To build upon prior Lifespan Respite initiatives by engaging key stakeholders to increase and expand access to respite services statewide and enhance partnerships for education, outreach, and service provision to advance development of a Lifespan Respite Care System.

Project Period: 3 Years from September 1, 2017 to August 31, 2020
(No-Cost Extension Period: September 1, 2020 to August 31, 2021)

Interventions: Expanding and enhancing the Respite Education and Support Tools (REST) model of trained respite volunteers to be available in each county in NY; partnering with faith-based organizations to bring respite into underserved communities; establishing a pilot partnership with Retired Senior Volunteer Programs (RSVP) in at least one locale to help build

the pool of respite volunteers; and establishing a new NY Lifespan Virtual Respite Resource Center (VRC) to be housed on the NYSCRC website, making available a suite of evidence-informed/evidence-based training services, the Caregiver Simulation model for education with new partners in higher education and the private sector, as well as other materials and respite-related resources. Additionally, Lifespan Respite mini-grant continuation funding to support selected faith-based and community organizations so they may further develop, maintain, and expand respite using volunteers, and NYSOFA development and implementation of caregiver-directed services under the Older Americans Act National Family Caregiver Support Program (NFCSP, Title III-E). Through the new VRC, NYSCRC conducted Caregiver Simulations to build awareness about caregiver needs in selected higher education institutions and businesses.

Grant Objectives:

Objective 1: Increase number of respite volunteers through additional training and recruitment activities;

Objective 2: Expand available respite services statewide through formalizing a caregiver-directed respite model;

Objective 3: Expand access to caregiver services through improved respite listings in the NY Connects Resource Directory across age and disability types;

Objective 4: Implement and continue to update the Statewide Action Plan for Lifespan Respite sustainability.

Key Products: NY Lifespan Respite Virtual Resource Center (VRC), housed on the NYSCRC Web site (<http://www.nyscsrc.org/>); Expanded pool of REST Master Trainers who train REST Trainers, who in turn train volunteers to provide respite; Expanded pool of REST trainers for coverage in every New York county; a Caregiver Guide for Businesses; expanded, more consistent respite listings in the NY Connects Resource Directory (<https://www.nyconnects.ny.gov>); an Executive Summary Report of the 2018 Lifespan Respite Sustainability Summit; a NYS Caregiving and Respite Coalition brochure; and a final report, including an independent evaluation of the Program..

Outcomes: (1) 100% statewide implementation of the REST training model; (2) 30% increase in REST Companion volunteers (3) Increased number of individuals that received information and assistance on caregiver supports through NY Connects; (4) Increased knowledge about caregiving through Caregiver Simulations among nine higher education institutions and three private sector business entities; and (5) Completed qualitative review of respite listings in the NY Connects Resource Directory.

Evaluation Plan: See logic model *Section F* of this report for program inputs, activities, outputs, measures, and outcomes.

F. Logic Model

Goal: The Lifespan Respite Core Team (Core Team) will build upon prior and current Lifespan Respite initiatives by engaging key stakeholders to increase and expand access to respite services statewide and enhance partnerships for education, outreach, and service provision to advance development of a Lifespan Respite Care System.

Resources (Inputs)	Activities (Outputs)	Measurement	Indicators	Outcomes
NYSOFA MCOFA Lifespan of Greater Rochester NYSCRC REST Model for Training Volunteers REST Master Trainers Statewide volunteer respite companions NY Connects Higher Education Institutions Business Sector and Employers	Expand REST model of training for respite volunteers Partner with faith-based organizations for underserved communities Build Resource Center for evidence informed/evidence-based training Implement Caregiver Simulation Model Develop survey for caregiver awareness and respite needs Qualitative review of respite listings in the NY Connects Dissemination Of products with NYSCRC, ACL, ARCH	Number of REST master trainers Number of REST trainers Number of trained REST Companion Volunteers REST Post-training Survey of Volunteers Post-respite survey for caregiver recipients of respite services Respite listings in NY Connects Resource Directory Higher Education Institution knowledge of caregiving and respite needs Business sector awareness of caregiving and respite needs	<ul style="list-style-type: none"> Expanded pool of REST Master Trainers in every county of New York State Increase in the number of REST Companion volunteers statewide Expansion of REST Training in Communities with limited English proficiency Satisfaction rating of volunteers who participate in REST training Satisfaction of caregiver recipients of respite services Establishment of NYS Lifespan Respite Resource Center Increased knowledge and awareness as reported on surveys following Caregiver Simulation training Statewide Action Plan for Lifespan Respite Care for sustainability Final Program Evaluation Report and dissemination 	<ul style="list-style-type: none"> 100% statewide implementation of REST model of training for respite volunteers 30% overall increase in REST Companion volunteers Increased number of individuals that received information and assistance on caregiver supports through NY Connects Increased knowledge about respite and caregiving through Caregiver Simulations among nine higher education institutions Increased knowledge about respite and caregiving through Caregiver Simulations among three private sector business entities Completed qualitative review of respite listings in the NY Connects Resource Directory

G. Major Accomplishments

NYSCRC Newsletter Distribution

A newsletter sent via email distribution provided statewide updates and assisted in developing relationships with stakeholders. This also served to notify and invite participation in caregiver conferences and Caregiver Simulation activities. A tracking of this newsletter distribution was undertaken in grant funding years 2017 - 2021 to monitor implementation. The aims were to measure both the growth in distribution and the end-user email open rate. This NYSCRC newsletter continued through the funding period and through the present time. It represents a major component of sustainability of the project to maintain stakeholder engagement. See **Appendix A** for the NYSCRC Newsletter Distribution Data (2017-2021).

REST Training Evaluation Data

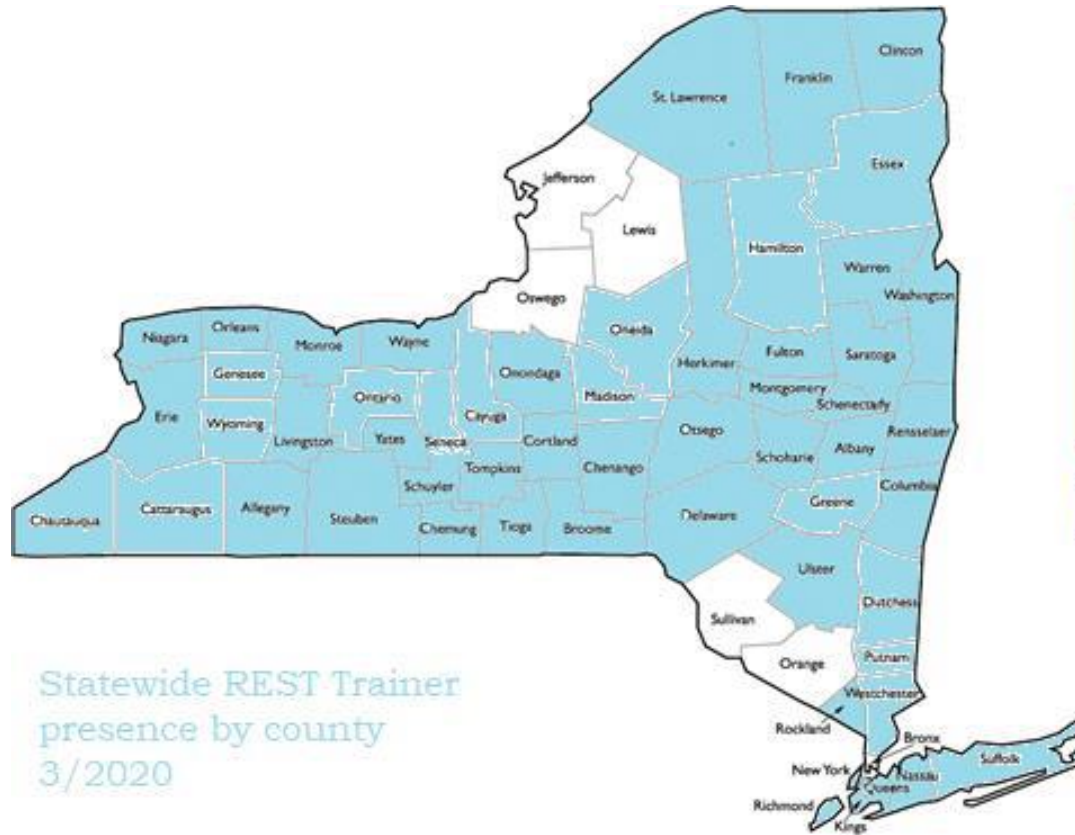
REST Training Implementation

REST (Respite, Education and Support Tools) is an evidenced-informed, professionally designed curriculum to train individuals to be **REST Companions**, also known as respite care workers, volunteers, or providers. The **Train-the-Trainer (3T)** course provides respite education to those who then go out and train others to be REST Companions. The Train-the-Trainer Course is an intensive program which provides the needed materials for trainers to then conduct their own trainings.

The goal was to have a REST Trainer in every county in NYS, however this was impacted by the COVID-19 public health emergency. In March of 2020, NYSCRC staff continued REST Train-the-Trainer classes but were limited both in the ability to conduct in-person trainings as well as the effect of workforce reduction in both REST Regional Trainers and REST training participants. NYSCRC were unable to reach the final 5 counties in NYS (Chenango, Jefferson, Lewis, Orange, and Sullivan counties).

To address the priority of REST training implementation statewide, NYSCRC took the following initiated a new request for Mini Grant proposals which stated that a priority will be given to organizations serving the 5 remaining counties (program period 1/1/21 – 8/31/21).

Statewide REST Trainer Presence by NYS County



NUMBER OF NEW REST COMPANIONS AND TRAINERS NYS (2017-2020)

<i>Year</i>	<i>Number of new REST Companions</i>	<i>Number of new REST Trainers</i>
<i>2017</i>	<i>55</i>	<i>33</i>
<i>2018</i>	<i>138</i>	<i>14</i>
<i>2019</i>	<i>66</i>	<i>27</i>
<i>2020</i>	<i>21</i>	<i>15</i>
<i>Totals</i>	<i>280</i>	<i>89</i>

REST post-training survey data was collected for 3T (Trainer) and REST Companion participants.

REST TRAIN-THE-TRAINER (3T) EVALUATION DATA (2017 – 2020)

About the **MASTER TRAINERS**

The instructors were knowledgeable in the subject matter	95% strongly agree	4% agree
The instructors were attentive to the participants needs	96% strongly agree	4% agree
The instructors adequately answered my questions	96% strongly agree	3% agree
The instructors managed time effectively	92% agree	8% agree
Overall, I felt the instructors were effective Representative Participant Comments	94% strongly agree	5% agree

- The instructors did a great job of making a comfortable learning environment that engaged the class
- Presenters were very knowledgeable of the subject matter
- Instructors well informed and experienced. Shared personal experiences, great lunch; very helpful and informative
- A lot of knowledge. Shellie was so passionate about her clients/job
- Questions were answered. They didn't have to "get back to us". They knew their subjects and gave great examples. Great job
- The trainer geared the material toward our agency's needs. She was very upbeat and easy to follow, which made the learning fun.

About the **CONTENT** of the REST Train the Trainer Curriculum

The content of the workshop was relevant to my trainer responsibilities	82% strongly agree	6% agree
The content was clear and easy to understand	70% strongly agree	24% agree
The pace of the workshop was appropriate	81% strongly agree	7% agree
The exercises and activities contributed to my learning	84% strongly agree	10% agree
The interactions with other participants contributed to my learning	90% strongly agree	7% agree

- It was the hands-on activities. They were instrumental in solidifying the ideas I learned in the workshop.

- Understanding the point of view of the clients better! I work at a nursing home and refreshing. This is so useful.
- Customizable, forms/resources/interaction with participants

About the **REST TRAINER MATERIALS**

The workshop materials were presented in a clear and organized fashion	60% strongly agree	15% agree
The presentations slides were useful and relevant	60% strongly agree	15% agree

Representative Participant comments

- The balance between visual aids and lecture. Leader was very sensitive to needs and concerns of group

REST COMPANION TRAINING EVALUATION DATA (2017 – 2021)

Results of Pre/Post Survey of REST Companions (Absolute Point Change in Pre/-Post Measures)

Rate your level of skill/knowledge/understanding in each of the following areas of respite work. (Scale of 1-5 Very Low to Very High)

Numbers reflect average **post rating** as well as **positive or negative change from pretest**

Skills/Knowledge	Average	Change
The roles and responsibilities of a respite worker	4.5	+1.92
Establishing good communication and trust with family	4.58	+1.41
Gathering information from family to set up respite arrangements	4.58	+1.75
Determining care recipients interests and abilities	4.5	+1.67
Strategies for communicating with care recipients	4.5	+1.92
Adapting activities to care recipient needs	4.58	+1.58
Understanding challenging behaviors	4.26	+1.43
Dealing with injuries and emergency situations	4.5	+2.08

Signs of caregiver stress and coping strategies	4.0	+1.5
Respecting different family situations and cultures	4.42	+.92
Keeping family information confidential	4.75	+.58
Preventing the spread of germs	4.58	+.83

Respite Mini Grant Caregiver Respite Program Expansion

A Statewide Lifespan **Respite Mini Grant Program** was initiated in 2016 and continued under this project period from 9/1/17 – 8/31/21. NYSCRC offered three cycles of Lifespan Respite Mini-Grants through a Request for Application. Sites selected for mini grants used REST (Respite Education and Support Tools) for volunteer training. Additionally, several previous mini grants continued to report respite hours representing the sustainability of mini grants beyond their initial NYSCRC funding. This data is included here for completeness. A key goal undertaken during this funding period was to develop an on-line tracking system to increase reporting of respite hours provided and caregivers served by the mini-grant awardees. A tracking system was developed through the NYSCRC website using an online data collection form. This form was implemented and launched February 2018. In March of 2021, an additional question was added to this data collection form asking, “how many of the caregivers you are reporting are new this month?” to track the unduplicated number of caregivers served.

	Year 2018	Year 2019	Year 2020	Year 2021 *	Totals
Mini Grant Respite Hours	192	230	504		926
Respite Hours	1,814	8695.5	792	4842.5	16,144
Mini Grant Caregivers Served	67	92	96		255
Caregivers Served	738	892	51	884	2565

**Mini grants under no cost extension*

Progress was made for all sites in REST training for both companions and trainers and offering powerful tools for caregivers, but many activities were either temporarily or extended time on hold at sites due to the COVID-19 pandemic.

Lifespan Respite Mini-Grant Results
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Year One					
Program Period: July 1, 2018 to August 31, 2018					
Respite Site - Region	Award Amount	Target Population	# New Respite Companion Volunteers	Estimated Hours of Respite Services Provided	Caregivers Served
Living Well - Finger Lakes	\$2,500	Early-State Dementia	18	98	4
Broome County Yesteryears – Southern Tier	\$2,635	Early-Stage Dementia	6	156	63
Year Two					
Program Period: December 1, 2018 to August 31, 2019					
Grace Lutheran – Southern Tier	\$3,500	Early-Stage Dementia	3	168	43
Living Well Paul’s Place – Finger Lakes	\$3,500	Early-State Dementia	9	62	49
Year Three					
Program Period: December 1, 2019 to August 31, 2020, with a no cost extension through 8/31/21*					
* See Challenges section of Final Report for explanation due to COVID-19					
Inter Faith Works – Central New York	\$5,000	Caregivers of Older Adults	14	425	17
Wayne County Office for the Aging – Finger Lakes	\$5,000	RSVP	-	-	12
Catskill Neighbors – Hudson Valley	\$5,000	Caregivers of Older Adults	20	11	11
Presbyterian Senior Services – New York City	\$5,000	Caregiver of Older Adults	14	68	68
Total	\$32,135		75	926	267



SUSTAINABILITY AND REPLICATION OF MINI GRANTS:

From December 2017 – February 2020, previous Mini Grantees continued to share Respite Hour reports. **(There are no requirements that these sites continue to use REST training or provide hours to NYSCRC beyond the grant period, however most sites do continue to grow, use REST, and share their data with NYSCRC due to the ongoing one-on-one contact with REST trainers and site coordinators).**

These sites include:

- Faith In Action (Give Them a Break, **second site added in September of 2017** (Initial Grant awarded 2016 -2017)
- The Living Well (Paul’s Place) (Initial Grant awarded July 2018 – August 2018) (Second grant awarded 2019) Two additional sites added.
- Home Away from Home (Initial Grant awarded 2016 -2017) Instrumental in the development of other college-based service-learning programs by serving as consultant, hosting perspective programs for site visits, and receiving an Innovative Award for Respite from ARCH 2020.
- Inter Faith Works (in-Home Respite – Senior Companions Program) (Initial Grant awarded 12/2019)
- Grace’s Place (Initial Grant awarded 2019)
- **Broome County Yesteryears Program** – (Initial Grant awarded in July 2018 and was instrumental in the creation of Grace’s Place – a site which received a mini grant in 2019)

Former Mini Grants. The cumulative hours reported by these programs for hours **outside** of their award period total using the online data entry link via the website.

Year	Number of Caregivers	Number of Hours
2017-2018	6	485
2018-2019	377	5655.5
2019-2020	186	2729
Totals	569	8869.5

Non-Mini Grant Respite Hours reported from REST Trainers (CareFirst Homecare and Hospice, Delaware County Legacy Corp, “Our Gang” New Paltz)

Year	Number of Caregivers	Number of Hours
2017-2018	2	3
2018-2019	51	321.5
2019-2020	6	72
Totals	59	396.5

Post-Respite Care Survey Evaluation Data

A **Post-Respite Survey** was created/modified from prior ARCH Respite Tools in the public domain. (See **Appendix B** for a copy of the survey). This survey was implemented among mini-grant awardee sites using a purposive sampling strategy of respite recipients. There were 72 respite recipients who accessed the survey and completed survey results were obtained from 70 respondents across 8 mini-grant sites. The full survey results appear in **Appendix E**. In summary, the majority of post-respite survey respondents reported being satisfied with the

respite services. There was 99% of the survey respondents who were aligned with common key responses:

- Felt a reduction in caregiving stress because of having respite care available
- Considered respite as making a positive difference to them and their family
- Given the opportunity would use respite services again

All respondents (n=70) had a significant mean reduction in self-reported stress level (using scale 1 – 7 with 1 corresponding to lowest stress level and 7 highest stress level). The mean score prior to respite care was 7.76 and this declined to 3.59 following the receipt of respite services.

The Caregiver Simulation

NYSCRC hosted the first Caregiver Simulation in June of 2017. From September 2017 – November 2019 NYSCRC offered 9 simulations to a wide variety of audiences including: the NYSCRC Statewide Conference, the State University of New York at Brockport, the Chemung County Office for the Aging, the ARCH National Conference, Open Doors (Nursing Home Transition Agency), and the University of Rochester. Two additional simulations were cancelled in April and June of 2020 due to COVID. Over 300 people have participated in the simulation, with each simulation including the host support of 20 -30 volunteers (approximately 200 in total volunteers).

During the National ARCH Conference, held in Buffalo, NY in May of 2019, over 150 attendees participated in 3 separate and simultaneous simulations. NYSOFA used this experience as an opportunity to capture the power of the simulation by creating a video of the day.

https://youtu.be/6_g6vRciXjo. This video has been used as a marketing tool to promote the benefits of the simulation for providers, agencies, and policy makers.

A pre- and post-test was used to capture the effectiveness of this empathy raising experience. A Caregiver Simulation Training Manual was developed in prior funding periods to replicate the simulation and provide structure and guidance to agencies and organizations wishing to host their own Caregiver Simulation. The simulation includes 5-6 standard scenarios. For some organizations, like Open Doors, the scenarios and stations were customized to the population by working with their planning team to develop scenarios relevant to caregivers’ transitioning someone home from the nursing home.

<p>Please rate yourself on the concepts and issues below by placing a check in the box that best fits your understanding.</p> <p>1 Completely Disagree – 4 Completely Agree</p>	<p>Change in Pre-Post Ratings</p>
<p>I understand the financial pressures faced by caregiving families</p>	<p>+ .33</p>

I understand the difficult choices people with a limited income need to make	+ .38
I understand the cost of caregiving and medical services	+ .29
I understand the time commitment required to meet basic need of the care recipient	+ .38
I understand the emotional frustrations and stresses that created by caregiving	+ .23
I understand the rewards that families receive from caregiving	+ .4
I understand the positive and negative impact of service providers (agencies) and the network/systems impact on caregiving families	+ .45

Powerful Tools for Caregivers Training Implementation

The Powerful Tools for Caregivers classes help caregivers take better care of themselves while caring for a friend or relative. In six weekly classes, caregivers learn self-care tools to reduce stress, manage emotions, build self-confidence, and increase use of local resources. The post-session evaluations were obtained from 24 participants in the Powerful Tools for Caregivers classes. The summary of this evaluation information from respondents is summarized below.

Powerful Tools for Caregivers Class Evaluation Data

Summary of Course Evaluations of the NYSCRC Powerful Tools for Caregivers 6-week Class
September 1, 2020 - August 30, 2021 (N=24)

Week rating 1-10 with 1 = Poor and 10 = Excellent	
Week 1	9.42
Week 2	9.4
Week 3	9.5
Week 4	9.83
Week 5	9.83
Week 6	10
Overall rating	9.8
Rating of instructors	10

Powerful Tools for Caregivers Leader Training Evaluation Data

Summary Course Evaluations of the NYSCRC PTC Leader Training
September 1, 2020 - August 30, 2021 (N=45)

Quality of Instruction	4.78
Master Trainers were Organized	4.78
Training Met Expectations	4.72
Online Software was easy to use	4.5
There was an opportunity for participation/questions	4.94
Overall, this training was...	4.72
How confident are you that you will be able to implement the PTC program? (1-10)	9.63

1 = Poor, 5 = Superior

What did you like most about the training?

Practicing and receiving feedback from the group
Meeting people from around NYS
Well organized and interactive
Master trainers very knowledgeable on material, class was interactive
I learned new tools to support not only the caregivers in my community but myself
I enjoyed that there was plenty of opportunities to participate as a caregiver and lots of opportunities to ask questions throughout the training
Being able to practice and rehearse the teaching
Interacting with other participants
Sharon and Doris knew what they were doing, and they were supportive
The trainers were very competent with the zoom technology and made it look very easy for us to do as future class leaders in the online format
I liked being able to practice teaching, it was fun and learnative
Great interaction, tools that I can incorporate into my personal and professional life. Online ran very smooth!
Learning new tools and techniques that I can utilize in my own life
I liked the interaction and the ability to use technology
The brainstorming as a group and learning from each
Personable instructors, easy-to-digest materials, new and interesting information
Worked well despite the fact that it was not 'in person'. I felt the instructors and participants did very well in a virtual setting
I liked the relaxation modules, and the slides were user friendly.
I liked how engaging the training was despite being a virtual format there were still lots of opportunities for participation.
The amount of information that was provided with kindness and caring in an organized way
Everything ran smoothly. Learned a lot about how to present in a virtual setting. Looking forward to offering the program virtually and eventually in person

NYSCRC Webinars

NYSCRC hosted a series of Webinar trainings on caregiving and respite for professionals during the no-cost extension period (2020-2021) in lieu of the annual NYSCRC Conference, which was cancelled due to COVID. Attendees of certain professional backgrounds were able to claim Continuing Education Units (CEUs) for attending the Webinars. Post-Webinar evaluation data was collected via an online platform. There was a total of 477 attendees at the webinar series with 149 respondents to the survey (31% response rate).

The post-survey results are summarized below:

Webinar	Date	# Attending	# Respondents	Webinar Presentation Survey Ratings				
				Rating - Excellent	Rating - Good	Increased Knowledge A lot # (%)	Increased Knowledge Somewhat # (%)	Recommend Presentation Yes # (%)
Die-A-Logue	8/26/2019	45	14	10 (76.92%)	2 (15.38%)	11 (84.62%)	2 (15.38%)	12 (92.31%)
MOLST	9/16/2020	41	26	25 (100%)	0	24 (100%)	0	25 (100%)
Exemplary	10/21/2020	22	5	5 (100%)	0	4 (80%)	1 (20%)	5 (100%)
Daphne Johnston	10/22/2020	21	5	5 (100%)	0	4 (80%)	1 (20%)	5 (100%)
Medicaid	11/18/2020	43	14	9 (64.29%)	5 (35.71%)	11 (78.57%)	3 (21.3%)	13 (92.87%)
Pooled Trust	12/26/2020	73	22	20 (90.91%)	2 (9.09%)	16 (76.19%)	5 (23.81%)	22 (100%)
Self-Care - Battisti	1/20/2021	89	23	19 (82.61%)	3 (13.04%)	15 (65.22%)	7 (34.35%)	20 (90.91%)
Grief and Loss	2/27/2021	39	17	16 (94.12%)	1 (5.88%)	14 (82.35%)	3 (17.65%)	No data
ProActive Caring	3/17/20	56	13	5 (38.46%)	8 (61.45%)	6 (46.15%)	7 (53.85%)	No data
Webinar on Webinars	4/21/2021	48	10	8 (80%)	2 (20%)	9 (90%)	1 (10%)	10 (100%)

A specific webinar series was also implemented focusing on “Diverse Elders” as part of a new **Diversity, Equity, and Inclusion** Initiative integrated into the project. The information and post-webinar survey evaluation data is summarized below:

Webinar	Date	# Attending	#Survey Respondents	Webinar Presentation Survey Ratings				
				Rating - Excellent	Rating - Good	Increased Knowledge	Greater Understanding how culture impacts caregivers and their health outcomes	Cultural competency about organization, communication, and policy best practices increased
Asian American/Pacific Islander	5/6/21	43	32	29/94%	2/6%	27/84%	28/87%	21/68%
Southeast Asian American	5/13/21	41	25	19/76%	6/24%	19/76%	21/84%	17/68%
Black and African American	5/20/21	52	21	16/76%	5/24%	15/71%	16/76%	16/76%
Latino/Latina Caregivers	5/27/21	84	13	10/77%	3/23%	9/69%	10/77%	8/62%
LGBTQ Caregivers	6/3/21	90	34	27/77%	7/23%	30/89%	33/94%	32/91%
Native American	6/10/21	54	23	20/87%	3/13%	23/87%	19/86%	20/87%

H. Sustainability Planning

During this Lifespan Respite grant, two **Lifespan Respite Sustainability Retreats** were held in Rochester, NY in collaboration with NYSCRC, Lifespan of Greater Rochester, Inc., NYSOFA, and MCOFA. The retreats utilized facilitated discussion with stakeholders in attendance to serve as a core **Sustainability Planning Workgroup**. A modified Delphi approach was conducted utilizing the ARCH Respite (and The Finance Project) toolkit as part of the **Sustainability Planning Project**.

Lifespan **Sustainability Retreat I** was held **August 23-24, 2018** and the Lifespan **Sustainability Retreat II** was held **August 14-15, 2019** with the common objectives to: (1) examine the effort in Coalition Building through NYSCRC, including opportunities for membership expansion and enhanced engagement, (2) review sustainability self-assessment core elements and score the progress indicated in the self-assessment, (3) discuss performance measures to evaluate progress in planning and implementation, (4) develop Action Steps toward a statewide Sustainability Plan, and (5) identify potential challenges to sustainability.

Appendices C and D in this report contain the **Lifespan Respite Sustainability Logic Model (Appendix C)** and the Financing Strategies Logic Model (**Appendix D**) which were products from the Sustainability Planning Workgroup across the activities of these sustainability retreats during the funding period.

LIFESPAN RESPITE SUSTAINABILITY SUMMIT

On **October 18, 2018**, over 100 stakeholders from across NYS and across systems gathered to address respite in the state. This summit was hosted by NYSCRC, supported by AARP NY and the Albany Guardian Society. Planning and support came from Lifespan of Greater Rochester, New York State Office for the Aging, the ARCH National Respite Network and the Finger Lakes Geriatric Education Center.

The purpose of the Sustainability Summit was to:

- Strengthen state and community partnerships to sustain Lifespan Respite activities;
- Develop strategies to maximize use of existing respite resources and identify and leverage new respite funds;
- Engage in sustainability planning; and
- Generate innovative activities for future development.

Key Findings:

New York State has a rich array of resources for caregivers and has built a coordinated system for Lifespan Respite through collaboration with stakeholders, leveraging of the NY Connects (New York's ADRC) as a "No Wrong Door" resource for caregivers and through the statewide engagement and dissemination of initiatives through NYSCRC.

Recommendations from Summit Participant/Stakeholders

Through discussion with Summit participant stakeholders the following themes emerged as recommendations for sustainability planning:

1. **Building Capacity:** Participants identified the need to increase the availability of respite services, including expansion of the REST model particularly to rural areas across the state, engaging more volunteers (see workforce below), increasing outreach in a culturally sensitive manner to communities, and seeking greater engagement of faith-based communities and human services providers.
2. **Workforce Development:** There is an identified need for improved trauma-informed care training for direct care workers, as well as enhanced behavioral health training for both caregivers and professionals. Participants advocated for greater outreach to students to participate in respite care, including creating incentives for nursing and social work students such as service-learning experiences and encouraging the receipt of college credits for working with respite programs. Student loan forgiveness for respite work and looking at direct care workers to have career opportunities including career ladders, enhanced pay scales, and training programs will benefit respite services.

3. **Increasing Awareness and Service Utilization:** Participants recommended that broader marketing was needed to increase awareness of and eligibility for respite programs. There is also the need for greater engagement with the medical community, as many clinicians and health systems are unaware of resources to connect in the community. There is the recommendation to educate the public as to the “No Wrong Door Approach” to greater utilize NY Connects.
4. **Enhanced Collaboration:** There was a general perception that respite services across systems are fragmented and this creates a perception by consumers that it is difficult to navigate. Along those lines, recommendations were for the NY Connects Directory to be more consistently updated with resources. Participants recommended a greater focus on care coordination activities across state, aging services, and community service providers.
5. **Enhanced Funding:** Participants recommended increased staffing within NY Connects, focus on areas in which cost-savings to the system provided by receipt of respite care can be subsequently reinvested in the system to support expansion of respite services. A consistent theme was the need for better tracking outcome data, including the focus on health care outcomes for caregivers to support the ongoing expansion of respite care.
6. **Policy/Legislative Initiatives:** Participants recommended more focus on developing respite as an entitlement program as well as participation in health care financing reform to integrate into evolving systems (including Medicaid reform initiatives). Also recommended was the removal of barriers for dually diagnosed (medical/behavioral) children, teens, and adults.

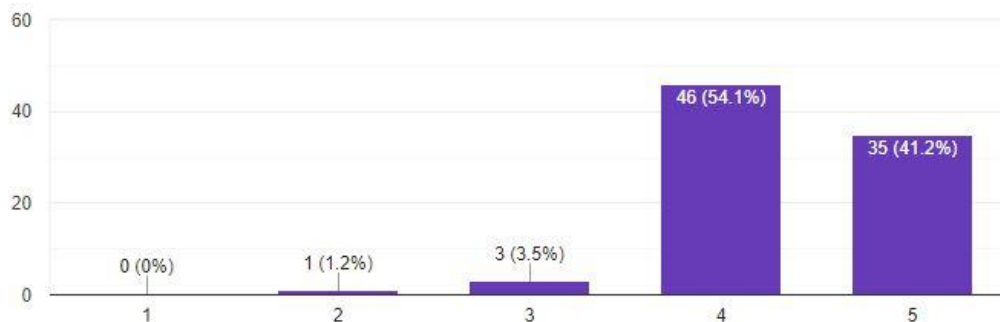
Sustainability Summit Evaluation Data:

Post-Summit Survey of Participants – Meeting Summit Objectives

Objective 1: Did the summit meet the objective to Identify state-level policy program needs and goals related to respite care services for children, adults, and an aging population

Summit Objective 1

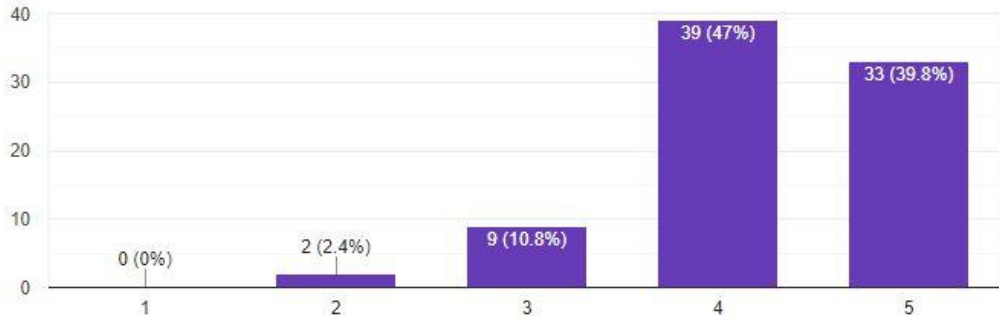
85 responses



Objective 2: Did the summit meet the objective to strengthen state and community partnerships to sustain Lifespan Respite activities

Summit Objective 2

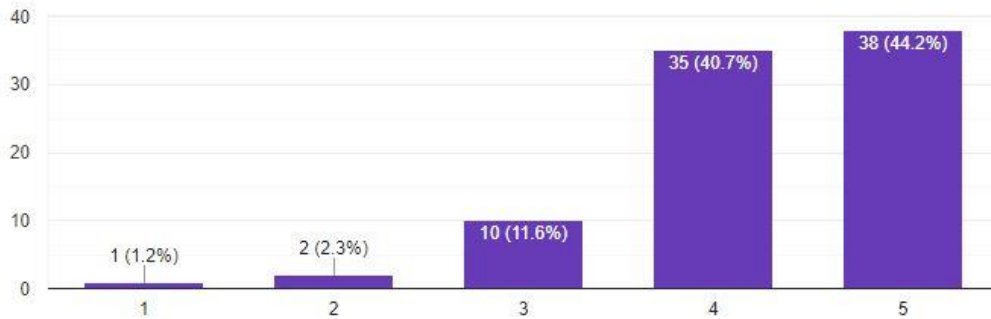
83 responses



Objective 3: Did the summit meet the objective to develop strategies to maximize use of existing respite resources?

Summit Objective 3

86 responses



Presenter/Segment	Average Rating (1 Poor – 5 Excellent)
Jill Kagan/ARCH National Respite Network	4.48
NYSOFA/NYSCRC Update	4.57
Respite Options within the System Panel	4.67
Small Group Brainstorming #1	4.48
AARP – Statewide Director Beth Finkel	4.33
Caregiver Panel	4.89
Small Group Brainstorming #2	4.52
Met Objectives of Summit	4.35
Logically sequenced presentations	4.6
Pace of Presentations	4.46
A/V – Technology	4.57
Handouts	4.60

Sustainability Summit Participant Comments:

- Excellent caregiver perspective panel - so courageous!
- Excellent, stimulating day - so glad I was part of it. Venue terrific. Speaker choice good. Like the format very much. very well planned. I would have liked more time to interact outside my table. More time for state panel would have been helpful. Please send table notes to all participants
- Excellent conference. Thank you so much for putting on such a helpful and worthwhile event.
- Caregiver Panel - Very insightful!
- Goosebumps at end of Plenary - Rally! If there is a need for help creating info brochures, fliers, etc. I can definitely help with this
- Great day! Thank you!
- Caregiver Panel was excellent.
- You got a lot of great suggestions from participants. Excellent summit - networking. Very powerful Caregiver Stories. So important to have at summits, meetings, and conferences. we were all touched. I hope to do much more with Lifespan and NYSCRC to help ease the life of caregivers!
- Caregiver Panel was awesome, special, thought provoking and touching.

- What an inspiration Doris is!! Caregiver Panel - very impactful. Very well done. The Caregiver Panel was amazing.
- Really awesome (Caregiver panel). Great conference. Would be interested in hearing from other states or county specific innovative programs that may be replicated.
- I had great expectations for today, you far exceeded them.
- Really great experience. I learned a lot of info.
- Good summit - lots of great information through the speakers and the handouts.

I. Program Analysis

1. What measurable outcomes did you establish for this project and what indicators did you use to measure performance? To what extent did your project achieve the outcomes?

The project tracked a number of outcomes including process measures (newsletter distribution), training metrics/evaluation (REST trainings and PTC classes knowledge and satisfaction), and respite outcomes (number of hours respite provided and number of caregivers served). The mini-grant recipient sites now reported via written progress reports and via web portal the services they provided. Finally, survey data was obtained for 70 post-respite participants demonstrating significantly positive reported impact on receipt of respite care and self-reported well-being. This multilayered approach allows for a more complete understanding of the project implementation and relevant outcomes necessary for ongoing work, replication, and enhancement/expansion.

2. What, if any, challenges did you face during the project and what actions did you take to address these challenges?

The most significant challenge was the COVID-19 Pandemic which altered the landscape of the final year of the funding and the additional year under the no-cost extension period. The project Core Team adapted quickly to pivot trainings to online/virtual format but the impact the pandemic had on respite sites across the state and new sites under the mini grants cannot be underestimated. The progress reports from respite mini-grant sites indicate projects that were paused due to the uncertainty of the pandemic, however as evidenced by the number of hours and caregivers served, sites were still able to provide services during this challenging time as the need for respite by caregivers continued (and in some cases intensified) due to the pandemic. The project Core Team focused effort ongoing in sustainability planning. A robust sustainability plan, developed through the lens of the pandemic, is likely to be more robust due to this planning and discussion.

3. What impact do you think this project has had to date? What are the lessons you learned from undertaking this project?

It is clear from the data obtained that the integration of trainings was well received in terms of both being useful but also filling in knowledge gaps and increasing confidence. For the first time there is also tangible evidence in growing numbers of impact on recipients of respite care (caregivers) through the post-respite survey process underscoring not only the perceived benefit but the likelihood to access these services again. The expansion of respite sites is evidenced by the increasing hours and caregivers served, despite a drop in 2020 there has been a subsequent increase in 2021 to nearly 50% of the pre-pandemic levels.

4. What will happen to the project after this grant has ended? Will project activities be sustained? Will project activities be replicated? If the project will be sustained or replicated what other funding sources will allow this to occur? Please note your significant partners in this project and if/how you will continue to work on this activity.

Extensive discussion was undertaken by the Core Team on sustainability planning during this funding period with the formation of a Sustainability Planning Workgroup which met across two separate planning retreats for sustainability to develop a formal Sustainability plan as discussed in this report and summarized in the logic models contained in Appendices C and D.

5. Over the entire project period, what were the key publications and communications activities? How were they disseminated or communicated? Products and communications activities may include articles, issue briefs, fact sheets, newsletters, survey instruments, sponsored conferences and workshops, websites, audiovisuals, and other informational resources.

Over the project period, the NYSCRC newsletter became the primary vehicle used to reach out on a regular basis to NYSCRC members and caregivers across the state. Through the newsletter, members were also directed to the NYSCRC website for information and resources. Conference presentations and webinars were a key to presenting information to a variety of caregiving and respite stakeholders across the state. The NYSCRC website contains a variety of materials, including the caregiver self-assessment survey developed in this project, additional training resources, respite care summary descriptions, a volunteer respite summary description, and a description of key elements of successful respite programs.

J. Appendices

Appendix A: NYSCRC Newsletter Distribution Data

NYSCRC Newsletter Distribution Data (2019-2021)

Month	# Sent	# Opened	Open Rate (%)
September 2017	775	183	25%
October 2017	752	253	21%
November 2017	768	189	25%
December 2017	756	199	25%
January 2018	752	207	28%
February 2018	812	205	26%
March 2018	816	207	26%
April 2018	814	221	28%
May 2018	848	248	31%
June 2018	880	263	32%
July 2018	914	236	28%
August 2018	865	238	27%
September 2018	896	235	27%
October 2018	902	244	27%
November 2018	930	293	32%
December 2018	899	268	30%
December 2018 (Special Edition)	900	268	18%
January 2019	898	275	31%
February 2019	902	266	30%
March 2019	886	274	31%
April 2019	886	254	20%
May 2019	888	219	25%
June 2019	872	221	25%
July 2019	910	233	27%

August 2019	921	177	19%
September 2019	888	243	28%
October 2019	934	249	27%
November 2019	923	230	26%
December 2019	969	246	26%
January 2020	958	279	30%
February 2020	973	248	26%
March 2020	977	258	28%
April 2020	916	214	24%
May 2020	963	235	25%
June 2020	930	236	25%
July 2020	919	215	24%
August 2020	919	186	22%
September 2020	948	227	24%
October 2020	963	196	21%
November 2020	975	225	32%
December 2020	979	224	24%
January 2021	1006	228	31.8%
February 2021	1031	238	24.2%
March 2021	1036	225	29.7%
April 2021	1045	226	22.8%
May 2021	1070	245	33.2%
June 2021	1120	213	26.1%
July 2021	1153	228	25%
August 2021	1097	230	25%

Appendix B: Post-Respite Survey

Post-Respite Care Survey

Please complete this form **at the conclusion** of the Respite Program provided by <Provider Name>. All surveys are confidential. We do not need your name on this form.

1. Have you felt a reduction in care-giving stress because of having respite care?

Yes No

2. Regarding the use of respite services, do you feel ...? (Check all that apply)

- More comfortable accepting help from others
 - More comfortable having respite workers provide support at home
 - More comfortable with respite support outside of home
 - That respite workers have provided competent care
 - That I should have used respite supports earlier
 - Other (Please Describe)
-

3. How much do you agree with the following statement: I used my respite plan to do something I enjoyed and felt that the respite was “time well spent”?

Completely Disagree

Completely Agree

1	2	3	4	5	6	7
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Has respite allowed you to spend time in the various activities that you enjoy (e.g., going to religious services, socializing with others, going out for a meal) or spend time on hobbies or activities you like to enjoy alone (e.g., reading or gardening)? Yes No

5. Has the use of respite made a positive difference to you and your family? Yes No

6. If given the opportunity, would you use respite services again? Yes No

7. I feel (Check all that apply)

- A sense of relief that someone else is available to provide care
- More confident about asking for help or assistance with care

- More balance in my life in giving care and also trying to take care of myself
- I have regained some enjoyable activities I had lost in caregiving
- I am taking better care of my own health (physically and emotionally) through respite
- Getting respite breaks was worth my time and effort in arranging them
- The quality of the care during respite was competent and adequate for our needs
- I am able to continue in my caregiving role for the foreseeable future
- That the care recipient has benefited from the interaction with the respite worker/provider
- More confident about finding/identifying/selecting a respite provider
- More confident about preparing/training a respite provider to give care
- More confident about how to use respite breaks effectively
- More convinced of the benefits received from respite

8. BEFORE receiving respite, how “stressed” were you as a result of caring for your family member?

Low Stress					High Stress				
1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. NOW that you have received respite services, how “stressed” are you as a result of caring for your family member?

Low Stress					High Stress				
1	2	3	4	5	6	7	8	9	10
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

10. Do you have someone now you can call on in an emergency to fill in for you as a caregiver? Yes No

11. Please indicate your overall level of satisfaction with the respite services you recently received

Completely Dissatisfied

Completely Satisfied

- 1 2 3 4 5 6 7
-

Is there anything else that would help you in your caregiver role? Please explain:

Let's finish with some basic background information about you:

What is your 5-digit zip code? _____

Gender: Female Male

Your Race/Ethnicity: (Check all that apply)

- American Indian/Native Alaskan
- Asian
- Black, Non-Hispanic
- Native Hawaiian/Other Pacific Islander
- Other Race
- 2 or More Races
- White, Not Hispanic
- Hispanic

What is your relationship to the person receiving care?

I am the...

- Husband
- Wife
- Domestic Partner, including civil union
- Son/ Son-in-law
- Daughter/Daughter-in-law
- Sister
- Brother
- Grandmother
- Grandfather
- Mother
- Father
- Other Relative
- Non-Relative

Appendix C: Lifespan Respite Sustainability LOGIC MODEL

What Do You Want to Sustain?	How Will You Measure Your Progress?
<p>VISION AND DESIRED RESULTS</p> <ol style="list-style-type: none"> 1) Establish NYSCRC as the leader for caregiving and respite in NYS 2) Provide trainings related to caregivers and respite statewide 3) Expand access to respite services 4) Enhance the organizational structure of lifespan respite initiative 5) Improve upon the caregiving experience 	<p>INDICATORS</p> <ul style="list-style-type: none"> • Core Team: strategic planning and 3-year sustainability plan • NYSCRC: Advisory board roles and responsibilities and revised NYCRC committee structure • Enhanced coalition membership (expansion/diversity/reach): disability services, advocacy groups, private sector, education, health care, charitable/philanthropic, legislative, veterans/military • Policy: established legislative committee, increased advocacy efforts, ongoing social media activities • Organizational structure with embedded hub-and-spoke model • Stakeholder input from Sustainability Summit • Enhanced Collaborations: NY Connects, LTCCs, AAAs • Virtual Resource Center establishment • Dissemination: Regional, State, and National Conference participation
<p>CONDITIONS AND CAUSES</p> <ul style="list-style-type: none"> • Large geographic coverage region • Narrow focus of some stakeholders • Maintenance of effort (staffing/funding) • Value Proposition for coalition membership • Risk of dilution of caregiving focus • Caregiver identification challenges 	<p>PERFORMANCE MEASURES</p> <ul style="list-style-type: none"> ➤ Coalition Building: membership #, monthly calls participation, geography, website utilization, newsletter distribution, surveys ➤ Trainings: pre-/post- assessment and # trained for: REST, train-the-trainer, caregiver simulation, Powerful Tools for caregiving, mindfulness ➤ Services: Volunteer (#, hours, retention), # respite programs, trainer established in every county ➤ NY Connects: # respite services listed, utilization ➤ Mini-grants: required data metrics and progress reports ➤ Funding: grant funding, foundation collaboration, revenue stream from trainings ➤ Defined future implementation strategy for evidence-based caregiver assessment (satisfaction, quality of life, and health related outcomes)
<p>STRATEGIES</p> <ul style="list-style-type: none"> • Focus on value and awareness of respite • Formalize an organizational structure • Develop a business plan • Create accountability for service providers • Explore collaboration opportunities • Include caregivers in ongoing planning • Build capacity for dissemination 	<p>ACTIVITIES</p> <ol style="list-style-type: none"> 1) Define coalition member roles and responsibilities 2) Implement trainings: REST, caregiver simulation, powerful tools, mindfulness, caregiver forums, and train-the-trainer 3) Recruit new stakeholders, volunteers, respite sites, mini-grant (seed funding) participants 4) Build a hub-and-spoke model and a virtual resource center 5) Explore caregiver assessment methods and evolving research

Appendix D: Lifespan Respite Financing Strategies Logic Model

INPUTS		OUTCOMES										
<p>What Do We Want to Sustain?</p> <ol style="list-style-type: none"> 1) Coalition (NYSCRC) 2) Partnerships (Federal, State, Community Based Organizations, Academia, Aging Services Network) 3) Programs: REST Training, Caregiver Simulation, Mini-Grants, Annual Caregiver Conference 4) Network Engagement (Regional/National) 5) Infrastructure/Governance 6) Data Collection 7) Caregiver Engagement 8) Advocacy 9) NY Connects 10) Respite Volunteers 		<p>POTENTIAL FUNDING SOURCES</p> <ul style="list-style-type: none"> • Federal (ACL, HRSA/GWEP, OAA, HHS) • State (NYSOFA, AAA, DOH, OPWDD, CCF, Labor, OMH, OASAS, OCFS) • Private (HFWCNY, Ralph C. Wilson, NYSHF, GRHF, Cabrini, Hartford, RWJ, Weinberg, Golisano, Guardian Society, Community Foundations, United Way, AARP) • Revenue Generation (Fees, membership dues, partner sponsorship, Health Systems, ACOs, private insurances) 										
<p>Environmental Scan</p> <ul style="list-style-type: none"> • Demographic imperative • Uncertain Federal funding landscape • State priorities areas (Women, Labor, DOH, OPWDD, Children, Kinship Care) • State Initiative: "Health Across All Policies" • Health System Recognition (readmissions) • Caregiver identification/awareness challenge • Potential for Technology support/reach • Large geographic coverage region (+Rural) • For-Profit Incursion (private sector) 		<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><u>Funding Levels</u></td> <td style="width: 50%;"><u>Proposed Model</u></td> </tr> <tr> <td>Level 1: \$100,000</td> <td>Resource Center</td> </tr> <tr> <td>Level 2: \$200,000</td> <td>Regional Collaborative</td> </tr> <tr> <td>Level 3: \$300,000</td> <td>Statewide Hub-and-Spoke Model</td> </tr> <tr> <td>Level 4: \$1,000,000</td> <td>National Respite Leader</td> </tr> </table> <p><u>Funding Timelines:</u></p> <ul style="list-style-type: none"> • Current ACL Funding: through August 2020 • Proposed No-Cost Extension: December 2020/March 2021 • Current HRSA Funding: through June 2024 	<u>Funding Levels</u>	<u>Proposed Model</u>	Level 1: \$100,000	Resource Center	Level 2: \$200,000	Regional Collaborative	Level 3: \$300,000	Statewide Hub-and-Spoke Model	Level 4: \$1,000,000	National Respite Leader
<u>Funding Levels</u>	<u>Proposed Model</u>											
Level 1: \$100,000	Resource Center											
Level 2: \$200,000	Regional Collaborative											
Level 3: \$300,000	Statewide Hub-and-Spoke Model											
Level 4: \$1,000,000	National Respite Leader											
<p>Stakeholder Summit Recommendations</p> <ol style="list-style-type: none"> 1. Building Capacity 2. Workforce Development 3. Increasing Awareness and Utilization 4. Enhanced Collaboration 5. Enhanced Funding 6. Policy/Legislative Initiatives 		<p>PERFORMANCE MEASURES</p> <ul style="list-style-type: none"> ➤ Coalition Building: membership #, monthly calls participation, geography, website utilization, newsletter distribution, surveys ➤ Trainings: pre-/post- assessment and # trained for: REST, train-the-trainer, caregiver simulation, Powerful Tools for caregiving, mindfulness ➤ Services: Volunteer (#, hours, retention), # respite programs, trainer established in every county ➤ NY Connects: # respite services listed, utilization ➤ Mini-grants: required data metrics and progress reports ➤ Funding: grant funding, foundation collaboration, revenue stream from trainings, membership dues revenue ➤ Defined future implementation strategy for evidence-based caregiver assessment (satisfaction, quality of life, and health related outcomes) ➤ Assessment of the caregiver experience as a result of respite participation 										
ACTIVITIES												
<ol style="list-style-type: none"> 1) Build coalition support and expand NYSCRC representation/participation 2) Scale through partnerships, parallel state funding, and aligning activities 3) Utilize website, social media, and existing marketing materials to raise awareness 4) Engage employers in caregiving needs 5) Analysis of revenue pricing structure (fees, services, and membership dues) 6) NY Connects System Updates 												

Appendix E: Post-Respite Survey Results