



Supporting Family Caregivers

Nursing Students as Respite Providers

July 2020



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Introduction to Caregiving Respite

Informal caregivers often suffer from the indirect consequences of caring full- or part-time for family members, while dealing with everyday responsibilities and needs. For example, in 2017, an estimated [136,000 family caregivers in Rhode Island](#) were providing approximately 114 million hours of uncompensated care with an annual market value of \$1.8 billion.

Respite care provides the unpaid caregiver a short-term break from the daily responsibility of caregiving while their loved one receives supervision and personal care from a respite provider. The primary goal of respite care is to restore the balance between caring for others and caring for yourself. View our video for more [information about respite care](#).

Catholic Social Services of RI (CSSRI) conducted a gap analysis of respite services in the State of Rhode Island, which revealed unmet needs in several areas. The analysis found that parents of disabled children eligible for respite services faced significant barriers in having to identify their own respite provider. Caregivers continue to have difficulty identifying residential placement for disabled children and young adults for the purpose of caregiver respite/emergency absence of the caregiver. Further, Rhode Island's older adult population continues to grow and is projected to expand rapidly over the next two decades. The current state respite framework and resources are inadequate to meet this approaching need. The analysis also found that caregivers across the lifespan have the following needs/issues: identifying vendors to provide emergency assistance to caregivers; affording respite when not all disabled children or adults are Medicaid eligible; and difficulty with the process for paying respite workers.

To address a key need of caregivers, we implemented a workforce development initiative to match student nurses with low to moderate income families who have no access to subsidized respite care. This model provides free respite care with an increased supply of volunteer respite providers and offers important hands-on experience for nursing students approaching career field entry.

This is an important program to bring awareness to caregiver role strain. Introducing this area in the nursing curriculum broadens a student's job search.

- Nursing Student

This toolkit is designed to assist interested nursing programs in replicating a similar respite clinical experience program. We share information about curriculum developed at each of the four participating nursing programs, models for organizing the clinical placement of nursing students as respite providers, and lessons learned. Also provided are nursing program and respite referral resources, as well as evaluation materials.

For information or inquiries, contact Aleatha Dickerson at the Rhode Island Office of Healthy Aging (email: Aleatha.dickerson@oha.ri.gov, phone: 401-462-0931). For more information on the CSSRI CareBreaks program, [please view our video](#).

Program Funding

The Nursing Student Respite Workforce Initiative was made possible by a grant funded through the U.S. Department of Health and Human Services, Administration for Community Living. The discretionary Lifespan Respite award, secured through the Rhode Island Office of Healthy Aging (OHA), has been a staple for the state unit on aging to seek innovative approaches toward addressing the notable gaps in respite offerings made available to caregivers across the lifespan. For the past decade, OHA has implemented pilot initiatives through this funding opportunity.

In fall of 2014, OHA shifted to a new model for respite delivery that not only helped family caregivers, but also served as an educational experience for nursing students to gain real-world experience in a home setting. The Nursing Student Respite Workforce Initiative presents an opportunity for the families, students, and grant partners to build a framework for new sources of respite care coordination. At a time when capacity for traditional respite is unable to keep up with demand, this initiative offers several enhancement factors.

Under the first three-year award (2014-2017), grant partners Rhode Island College (RIC) School of Nursing and the University of Rhode Island (URI) College of Nursing were tasked with developing/modifying curriculum offerings in a way that promoted in-home respite as an important health service and that also helped prepare participating nursing students for the opportunity. Both programs chose to adapt the nursing respite component of their curriculum to their respective needs and in a way that complemented current offerings. In addition to curriculum development, RIC and URI observed notable resource needs regarding clinical placement and oversight. To ensure a safe and harmonious respite environment for the student and the family, a great deal of time has been spent by both schools in the matching phase of the process. In certain situations, placement schedules and needs have resulted in some nursing students being placed with more than one family in a given term.

In fall of 2017, OHA secured a continuation grant from the Administration for Community Living to maintain and expand the Nursing Student Respite Workforce Initiative. Under this award, two additional nursing education programs were added to the project: Salve Regina University (SRU) and New England Institute of Technology (NEIT). With these new partnerships, the RI Lifespan Respite project incorporates four of the state's six nursing

2014-2015

- OHA shifted to the "Nursing Student Respite Workforce Initiative."
- This new model for respite delivery helps family caregivers and serves as an educational experience for nursing students to gain real-world experience in a home setting.
- RIC and URI developed curriculum offerings for respite care.

2016-2017

- Starting in Spring 2016, RIC and URI students provided in-home respite care as a clinical placement.

2017

- OHA secured a continuation grant from the ACL to maintain and expand the student respite initiative to nearly all nursing programs in Rhode Island.

2018-2020

- SRU and NEIT incorporated respite care into their courses and clinical placements.
- Since Fall of 2018, students from all 4 participating schools have provided in-home respite care.

education programs. As grant partners look toward the next funding opportunity, considerations for enhancement include completing the expansion to all state nursing programs and/or integrating other health professions into the student workforce initiative.

An important component for consideration is the financial costs for implementing and maintaining such an initiative. Mentioned above, the time commitment needed for successful placements is far greater than student placements at care and health facilities, where both professional staffing and a structured setting create greater efficiencies. Considering the current and previous grant funding cycles, the annual funding allotment per nursing program has ranged between \$25,000 to \$30,000. This, however, does not include personnel match requirements as part of the grant award, nor time spent by faculty outside billable hours.

One of the factors that remains to be solved is advancing an approach toward sustainability. As mentioned above, the cost for maintaining the level of oversight necessary for successful placement of nursing students into the homes of family caregivers remains high. Each of the four nursing programs has found different ways to manage these time and resource commitments, but the fact remains that that financing is a challenge. A potential long-term option relevant to some, but not all nursing partners, is to utilize graduate-level assistants to help manage and oversee student placements.

Alternatively, analysis of program delivery based on families served indicates that cost per family to receive respite support through the nursing workforce pilot as compared to the traditional state model, finds costs to be roughly equal. Put differently, under appropriate governance, the nursing program model could be absorbed into the current statewide program without negative impact to overall level of service delivery. In fact, long-term implementation could lead to greater efficiencies, with a lower cost per family placement than that required for traditional home health agencies. The un-observed benefit of this initiative is the introduction of a new generation of health providers into the field of family- and community-based care.

Partner Identification

An important first step in implementing a nursing student respite program is to identify community partners who serve as key stakeholders for respite services in your area (see **Table 1**). To demonstrate how you could structure your nursing student respite program, the following sections describe each of the nursing programs and community partners participating in Rhode Island's nursing student respite initiative.

Table 1. Nursing Student Respite Program: Partner Roles and Examples

Partner	Role	Example
Nursing programs	<ul style="list-style-type: none"> - Incorporate respite into curriculum - Match students with referred families in need of respite services - Offer student respite providers 	Four RI nursing programs, including: <ul style="list-style-type: none"> - Public/private - Varying types of institutions (e.g., research, technical, liberal arts) - Students in associate's, bachelor's, and RN-to-BSN degree programs
Respite services administrator	<ul style="list-style-type: none"> - Identify respite clients - Provide/manage referrals to nursing programs 	Catholic Social Services of Rhode Island, which offers respite assistance and manages Rhode Island's copay respite program
State unit on aging	<ul style="list-style-type: none"> - Coordinate nursing programs and community partners 	RI Office of Healthy Aging, the state's sole planning and services area agency on aging
Aging and disability resource center (ADRC)	<ul style="list-style-type: none"> - Serve as the focal point for family caregivers - Provide information and assistance with accessing respite care services 	The Office of Healthy Aging's ADRC, The POINT, is housed at United Way of Rhode Island and is an accessible walk-in and call-in portal
Evaluator	<ul style="list-style-type: none"> - Develop evaluation plan and tools - Track student and caregiver outcomes 	Healthcentric Advisors, a nonprofit health care quality improvement and patient safety advisory organization

Nursing Program Partners

Rhode Island College

www.ric.edu

Rhode Island College is the oldest of the three public institutions of higher education in Rhode Island. Since its founding in 1854, Rhode Island College has been delivering an affordable, high-quality education in innovative ways. With the goal of preparing students to be engaged citizens as well as meeting the state's and region's needs for today's workforce and tomorrow's leaders, RIC ensures that students have the support, skills and opportunities necessary to learn and thrive. The College offers an extraordinary collegiate experience with top-notch academic programs, active learning in the classroom and experiential learning opportunities beyond the classroom and state-of-the-art facilities. Nearly 90 majors and programs are offered through its five distinct academic schools.

School of Nursing

The School of Nursing at Rhode Island College was first established as a Department of Nursing in 1970. Initially accredited by the National League for Nursing in 1974, the program has received ongoing Commission of Collegiate Nursing Education (CCNE) since 1974.

- **Degree Programs Offered:** BSN, RN to BSN, MSN (options include Adult Acute Care Nurse Practitioner, Adult Acute Care Clinical Nurse Specialist, Population/Public Health, and Nurse Anesthesia), Doctor of Nursing Practice (DNP)
- **Enrollment:** Fall/Spring sessions
- **Type of Terms:** traditional Fall/Spring semesters

The mission of Rhode Island College emphasizes its unwavering commitment to student-centered teaching with a strong focus on intellectual and personal growth and professional development. The School of Nursing mission relates to all of its programs and is: "educating and empowering nurses to enrich the health and well-being of all people." The School of Nursing is also guided by its vision and values statements. The vision statement is: "The RIC School of Nursing will be increasingly recognized for its excellent, highly competitive programs, leadership in inter-professional education and Valuable contribution to making a difference in people's lives. The SON will expand faculty scholarship and practice and strengthen professional and community partnerships to promote significant changes in healthcare. The School of Nursing will offer a wide array of educational opportunities to emerging student populations and communities." The School of Nursing is actively engaged in the public and private sector and works collaboratively with our communities of interest. Noting the needs of the greater community related to the paucity of respite services the school of nursing operationalized its mission of educating and empowering nurses to enrich the health and well-being of all people.

University of Rhode Island

www.uri.edu

The University of Rhode Island is a public research university that offers undergraduate, graduate, and professional student educational opportunities designed to meet the global challenges of today's world and the rapidly evolving needs of tomorrow. As the state's flagship university, the University of Rhode Island offers more than 90 undergraduate majors and more than 80 graduate programs at four campuses. The University of Rhode Island proudly notes that 76 nations are represented in its student body and has a strong commitment to international students and study abroad opportunities.

College of Nursing

The mission of the College of Nursing is to prepare nurses to excel as outstanding and compassionate clinicians, scholars and leaders who will enhance the health and health care of individuals, families, communities and populations both locally and globally.

- **Degree Programs Offered:** BS, RN to BS, MS, Doctor of Nursing Practice (DNP), PhD
- **Enrollment:** Fall/Spring sessions
- **Type of Terms:** traditional Fall/Spring semesters, online, and hybrid courses, J-term, summer sessions

The faculty from the College of Nursing incorporated the respite program into the pediatric and community nursing courses as a component of the students' clinical experience by providing in-home respite for families who have children with special needs. This experience allows the students to immerse themselves into the homes of children with special needs and their families. The students apply their knowledge into the home setting as they provide much needed respite for the family caregiver, who can then step away from the responsibilities of care for short periods of time. The students gain great appreciation for the role of the family caregiver and the challenges that families face when caring for a loved one in the home. Students eligible to participate in the respite program are currently enrolled in the Community Health Nursing and/or Nursing of Children Course, which, moving forward will be the Family Health Course. The students must have completed all clinical orientation requirements (immunizations up to date, including annual flu vaccine and negative PPD; health record must include testing for color blindness; verification of current BLS for healthcare providers certification from the American Heart Association; and criminal background check). A limited number of students have an additional opportunity to participate in the respite program during their second semester senior year leadership course, taking on a managerial role as they collaborate with nursing and physical therapy faculty and students to provide a group respite opportunity for the parents/guardians of children with special needs one Sunday afternoon each month.

Went really well. We had appropriate toys for kids to play with. I think group respite is an awesome program and allows parents that have common concerns to debrief with each other. **- Nursing Student**

New England Institute of Technology

www.neit.edu

New England Institute of Technology (NEIT) is a private, non-profit, technical university whose mission is to provide specialized undergraduate and graduate degree programs which prepare students for professional and technical careers. Through the combination of professional and technical courses and an integrated liberal arts core, academic programs emphasize the relevance of continuous learning to personal and professional growth. Upon successful completion, graduates are prepared to enter the workforce or to continue their education. As an extension of the primary mission, NEIT offers the opportunity to pursue professional and technological studies to satisfy personal interests.

As an institution primarily devoted to teaching, NEIT provides opportunities for students from diverse educational backgrounds and with varying levels of ability to study in a variety of technological fields.

Nursing Program

The NEIT Nursing Program's mission is to prepare nurses at the associate, bachelor's, and master's levels to practice holistically in today's complex and highly technological health care system. The mission of the program is to prepare individuals as professionals whose care reflects altruistic, evidence-based, and ethical practice in the nursing profession.

- **Degree Programs Offered:** AS, RN to BSN, MSN
- **Enrollment:** Winter, spring, summer, and fall terms
- **Type of Terms:** Winter, spring, summer, fall terms, summer intersession, on-ground, online, and hybrid programs

NEIT was invited to participate in the Nursing Student Respite Workforce Initiative in 2017. The Nursing Department at NEIT invites first-term nursing students to participate in client respite care as part of their clinical hours. This happens four times/terms per year. The students visit client homes in groups of two for five weeks per term. Students have an adjunct nursing instructor that meets with the client first, and then visits the client again with the students, prior to their first respite visit.

This respite rotation allows the nursing students to participate in the community and develop skills in problem solving and in thinking logically, flexibly, and critically, thus preparing them to enter the workforce in their role as a professional registered nurse.

Salve Regina University

<https://salve.edu>

Since Salve Regina University's founding by the Sisters of Mercy in 1934, it has grown to a community of more than 2,700 undergraduate and graduate students who proudly carry forward its mission in their personal and professional lives. Fully accredited by the New England Commission of Higher Education, Salve Regina is committed to fueling the imagination and encouraging the academic ambitions of its bright and curious students.

At Salve Regina, tradition blends seamlessly with progress. Salve Regina University empowers students to explore their talents through diverse academic offerings, student organizations, service initiatives and athletic teams. The collaborative learning environment and vibrant campus community inspire the pursuit of excellence and breach the limits of personal potential.

- **Degree Programs Offered:** BSN, RN to BSN, MSN FNP, Doctor of Nursing Practice DNP
- **Enrollment:** Fall/Spring sessions and summer sessions for graduate students
- **Type of Terms:** traditional Fall/Spring semesters, online, and hybrid courses

Department of Nursing

The Salve Regina University Department of Nursing supports the University's mission with a focus on the critical concerns of the Sisters of Mercy. The Department of Nursing seeks to create a supportive learning community for students from all backgrounds and beliefs. The Department of Nursing endeavors to develop professional nurses who are liberally educated, ethically grounded, clinically competent, providers of health care committed to human service and social justice regardless of the race, ethnicity or religion of the population served. Committed to patient-centered care, graduates recognize and include the patient or their designee as a full partner on the health care team. It is expected that graduates will become lifelong learners, continuing to develop as health care providers and members of the global health partnership crafting the role of the nurse of the future.

Salve Regina University was invited to participate in the Respite Care Program in 2017. The nursing department initially offered this program to senior students on a volunteer basis. The program evolved to be an extension of the Aging and End of Life course as well as Service Learning. Students involved are asked to commit to a minimum of eight hours per semester. If the student wishes, they are excused from one clinical day after minimum requirements have been satisfied. The students provide respite in the home for the elderly and pediatric populations. One faculty member does site visits prior to student involvement to ensure good fit and a safe environment. The students and respite care families are at liberty to create schedules that may best suit their needs.

Community Partners

Catholic Social Services & CareBreaks

<https://dioceseofprovidence.org/elder-services>

Catholic Social Services of RI (CSSRI) is an agency of the Secretariat for Catholic Charities and Social Ministry of the Roman Catholic Diocese of Providence. As a member organization of Catholic Charities USA, CCSRI provides services to those in need regardless of religious affiliation. CCSRI has offered respite assistance for more than 20 years and currently manages the Rhode Island Office of Healthy Aging's (OHA) CareBreaks program, the state's copay respite program for people of all ages, which serves as the referral source for nursing student placements. Annually, CareBreaks provides approximately 322 clients with respite assistance and information for daily and after-hours home care, adult day services, and planned and emergency nursing home days. Part of the funding of CareBreaks is derived from the Lifespan Respite Grant, allowing Rhode Islanders of all ages to receive assistance.

Caregivers are informed of the nursing school student respite option when applying for respite through the RI OHA's CareBreaks. Referrals for the nursing school program are sent, with caregiver approval, to the participating colleges by CareBreaks staff. Applicants who may not have checked off the nursing respite option are often contacted if review of their application and use of services indicates a possible need for additional respite care. For referrals which cannot be met by the college chosen, a referral will be made to another participating college nursing school.

United Way of Rhode Island & the Family Caregiver Alliance of Rhode Island

<https://www.uwri.org> | <https://fcari.org>

The United Way of RI (UWRI) develops and provides resource oversight for the Family Caregiver Alliance of Rhode Island (FCARI).

Under the 2014 Lifespan Respite award and with guidance from OHA, UWRI developed the FCARI as a standalone entity operating underneath the umbrella of UWRI non-profit status. In this role, FCARI serves a coordinating and advocacy role, bridging efforts under this project with other state-community initiatives. One notable example includes a recently awarded Alzheimer's Disease Program Initiative grant, secured by OHA, also from the Administration for Community Living. Under this new award, FCARI serves as a central platform offering connection between RI primary care practices and other health professionals looking to link persons with dementia and their caregivers to the full suite of services and supports available, such as the nursing school caregiver respite option, from state and community providers, in an effort to serve these families in the most effective and person-centered approach possible.

Rhode Island Office of Healthy Aging

www.oha.ri.gov

The Rhode Island Office of Healthy Aging (OHA), formerly known as the Division of Elderly Affairs, serves as the State Unit on Aging, the sole Area Agency on Aging for the State, as prescribed under the Older Americans Act. OHA, with an annual budget of just over \$20 million in SFY 2020, is primarily a grant making agency, sending nearly 80% of its state and federal funding back out into the community. Since the inception of the Lifespan Respite grant, OHA has successfully sought and received funding under this discretionary award. OHA serves as a unified source of coordination and collaboration for the project. Tasked with bringing the seven project partners together, OHA ensures milestones in the award are met, including the completion of this Replication Toolkit. As the agency solely funding the CareBreaks program administered by CSSRI, and overseeing information and referral services provided by the POINT/FCARI, OHA continues to use its oversight role delivering community supports to family caregivers as a platform to better leverage and coordinate efforts among community partners.

Healthcentric Advisors

www.HealthcentricAdvisors.org

Healthcentric Advisors is a nationally-recognized nonprofit health care quality improvement and patient safety advisory organization, providing clients with effective education, consulting, research, analytical, evaluation, project management, and other technical assistance services. Healthcentric Advisors has served as a partner to the Rhode Island Office of Healthy Aging on their Lifespan Respite since 2011, providing services that range from outreach to the medical community, website development, evaluation plan development, data collection, and analysis.

Models for Incorporating into your Nursing Program

Our initiative includes four higher education nursing programs, with varying levels of students serving different populations of care recipients. Each nursing program used its own model for incorporating respite care. In this section, we describe the four models, which can be customized to fit the needs of your nursing program.

Model 1 – Rhode Island College

Course Syllabus

Lifespan Respite Grant – Summer 2019

Nursing 370/Nursing 376/Nursing 390

PREREQUISITES: Unrestricted Rhode Island Registered Nurse License

FACULTY: Lynn Blanchette PhD., RN lblanchette@ric.edu

Donna Huntley-Newby PhD., RN dhuntley@ric.edu

OFFICE HOURS: By appointment

COURSE DESCRIPTION: Undergraduate RN-BSN students will engage in respite care through the Lifespan Respite Program in collaboration with the Rhode Island Office of Healthy Aging.

COURSE OUTCOMES: Upon completion of the ACT on Alzheimer's Dementia Curriculum, Clinical Simulations and journal group discussion activities the student will be able to:

Disease Curriculum

- Gain understanding of normal aging and cognitive functioning
- List potential causes of dementia and memory loss
- Identify the Impact that Alzheimer's disease and other dementias have on the human brain and its function.
- Demonstrate knowledge of Alzheimer's disease including stages and categories, symptoms, diagnosis, risk factors, and disease duration.

Demographics

- Identify the demographics of people affected by Alzheimer's disease
- Gain insight of the anticipated increase and impact of Alzheimer's disease in the future

Societal Impact

- Identify challenges that families and caregivers experience when caring for someone with dementia
- Gain insight into the costs, risks and stressors that affect families and caregivers.

I enjoyed my experience with respite care. It increased my awareness on the topic and the major need for respite care and care giving.

- Nursing Student

Effective Interactions

- Understand the principle of person-centered care and the importance of recognizing each person as a unique individual.
- Articulate verbal and non-verbal communication that people with cognitive impairment may display.
- Reframe what is traditionally labeled difficult behaviors to expressions of needs, desires and distress, and understand how these expressions are manifested in specific behaviors.

Cognitive Assessment and Early Detections

- Identify tips for detecting cognitive impairment and using evaluation as an assessment tool.
- List and describe a variety of cognitive tools for conducting assessments and demonstrate an understanding of the recommended course of action when cognitive impairment is identified.

Screening

- Gain insight into the screening, including tips, measures and recommendations
- Summarize screening measures used for assessing cognitive function.

Disease Diagnosis

- Identify screenings and examinations used to diagnose and assess current state of cognitive functioning
- Gain an understanding of the benefits of early diagnosis
- Understand the steps involved in identifying and diagnosing Alzheimer's and related dementias.

Quality Interventions

- Gain a basic knowledge of pharmacological and non-pharmacological interventions.
- Identify interventions that can be used with a person diagnosed with Alzheimer's disease.
- Gain insight on how physical, cognitive, and social activities, along with diet, can be used as positive interventions.

Dementia: Organizing Principle of Care

- Gain an understanding of the unique care needs of individuals with dementia when co-morbid conditions are present.
- Demonstrate an understanding of dementia as the organizing framework for care, including how it affects assessment, treatment planning, care management and overall quality of life for individuals with dementia.
- Identify evidence-based transitional care models.

Caregiver Support

- Identify the difficult aspects of caring for someone who has dementia
- Demonstrate an understanding of activities of daily living and instrumental activities of daily living and how they differ.
- Gain insight into the cost, risks and stressors that affect caregivers, including the correlation between a caregiver's health and well-being of the person for whom they are caring.
- Recognize services that can be used to decrease stressors

REQUIRED READINGS AND ACTIVITIES:

Rose, M.S., Noelker L.S., & Kagan, J. (2015). Improving policies for caregiver respite services. *The Gerontologist*, 55(2), 302-308 doi:10.1093/geront/gnu120.

Stirling, C., Dwan, C., & McKenzie, A. (2014). Adult day care respite: caregiver expectations and benefits survey. *BMC Health Services Research*, 14:245 doi:1186/1472-6963-14-245

Evans, D. (2013) Exploring the concept of respite. *Journal of Advanced Nursing*, 69(8), 1905-1916. Doi:10.1111/jan.12044

Evans, D. (2013) The provision of health and social care services for older people by respite providers. *Contemporary Nurse*, 45(2), 255-263.

Doig, J.L., McLennan, J.D., & Urichuk, L. (2009). 'Jumping through hoops': parents' experiences with seeking respite care for children with special needs. *Child: Care, Health and Development*.35(2), 234-242

Gringer, A., Payne, S., & Barbarachild, Z. (2010). Issues of power, control and choice in children's hospice respite care services: a qualitative study. *International Journal of Palliative Nursing*, 16(10), 505- 510

Strunk, J. (2010) Respite care for families of special needs children: a systematic review. *Journal of Physical Disabilities* 22: 615-630 doi 10.007/s10882-010-9190-4

Thomas, S., & Price, M. (2012). Respite care in seven families with children with complex care needs. *Nursing Children and Young People*. 24(8).

Harper, A., Dyches, T., Harper, J., Roper, S., & South, M. (2013) Respite care, marital quality, and stress in parents of children with autism spectrum disorders. *Journal of Autism and developmental Disorders*, 43:2604-2616 doi 10.1007/s10803-013-1812-0.

Lifespan Respite Program: Caring for the respite patient and family PowerPoint presentation. <https://actonalz.org/dementia-curriculum>

CLINICAL EVALUATION

- Respite Care – Satisfactory clinical performance – P/F
- Participation in Clinical Simulations – P/F

- Completion of Independent Study/Public Policy Presentation/Focus Project

POLICIES: Please refer to the Handbook for Undergraduate Students in Nursing for detailed information on policies.

ATTENDANCE: Please refer to the Handbook for Undergraduate Students in Nursing for information on attendance and the cancellation of classes.

STUDENT WITH DISABILITIES: Rhode Island College is committed to making reasonable efforts to assist individuals with documented disabilities. If you are seeking reasonable classroom accommodations under the American with Disabilities Act, and/or Section 504 of the Rehabilitation Act of 1973, you are required to register with the [Disabilities Services Center](#) in Rm. 127 in Craig-Lee Hall. Contact at 456-2776.

ACADEMIC HONESTY: The School of Nursing at Rhode Island College recognizes that the nursing profession is based on a standard of honesty and personal and professional integrity. In order to achieve the missions of the College and the School of Nursing and develop the high ethical standards required of nursing practice, academic honesty is an integral part of the nursing program. Students and faculty are jointly responsible for maintaining an honest environment and all must work together to ensure the success of the academic honesty policy. All students within the School of Nursing are expected to maintain the code of academic honesty. This means that all academic work is done without plagiarism, cheating or unauthorized assistance. Please refer to the Handbook for Undergraduate Students in Nursing for the goals of the Academic Honesty Policy.

PROFESSIONAL CONDUCT AND CONFIDENTIALITY: Rhode Island College School of Nursing students are expected to be familiar with and incorporate the [American Nurses Association \(ANA\)](#) Code for Nurses into their professional behavior and conduct. Nursing students are expected to respect the values and needs of students and faculty.

HEALTH REQUIREMENTS: Please refer to the Handbook for Undergraduate Students in Nursing for health requirements.

Student Profile

Students that participate in the Respite Program are RN – BSN students engaged in completing their baccalaureate degree. They are enrolled in either the NURS 370 – Public and Community Health Nursing or NURS 376 – Contemporary Nursing Practices: Issues and Challenges. Students participate in completing the pre and post student surveys describing their experiences and clinical hours.

Faculty Experiences

Clinical Options

Rhode Island College clinical options are focused on the adult. Referrals are received from CareBreaks and families are contacted by the faculty to explain the program and activities that the RN –BSN student will provide. A mutually agreed upon home visit is conducted with the family caregiver, the patient/client, student and faculty. The program activities are reviewed and expectations of all parties are discussed. A mutually developed schedule

and contact information is shared to all parties. Pre and post caregiver surveys are explained and given.

Clinical faculty provide site visits and also communicate via text or email. Evaluations are done by the clinical faculty.

Model 2 – University of Rhode Island

Lifespan Respite Program at URI is integrated in the Nursing Care of Children and the Community Health/ Public Health Nursing Practicum courses.

FACULTY: Christine McGrane, MS, RN, CNE cmcgrane@uri.edu

Diane C. Martins, PhD, RN, FAAN dcmartins@uri.edu

NUR434: Practicum in Nursing of Children

COURSE DESCRIPTION

The emphasis of this course is the synthesis of pediatric content knowledge and the application of the nursing process in the care of ill children and their families. (Lab. 3)

COURSE GOALS & OVERVIEW

This course will provide students with the clinical background to care for ill children and their families, as well as promote the health of clients as they experience normal growth and development.

COURSE OBJECTIVES

Knowledge and Inquiry: Demonstrates knowledge of concepts, theories, evidence-based practice and develops a sense of inquiry.

1. Utilize skills of inquiry and analysis to address practice issues.
2. Integrate knowledge from nursing and other disciplines to inform decision-making and establish best practice.

Nursing Practice: Provides care to clients across the lifespan and in a variety of settings, and shows an ability to skillfully assess strengths as well as health needs, identify problems, formulate outcomes, design and implement interventions and evaluate outcome effectiveness.

1. Prioritize health care needs of clients in order to implement independent nursing care for families.
2. Assess learning needs and provide client education to promote and restore family health.
3. Evaluate the effectiveness of nursing care strategies and patient teaching and modify based on individual needs.

Professionalism: Demonstrate ethical and professional behaviors, and engage in the process of self-directed learning.

1. Discuss ethical dilemmas impacting the delivery of care for children and families.
2. Demonstrate initiative and self-directedness in providing quality nursing care and promoting professionalism within the health care team.

Leadership: Integrates leadership principles, quality improvement and patient safety into design, management and coordination of care.

1. Apply criteria for safe and effective delegation of care.
2. Examine the roles and responsibilities within the healthcare system and supporting agencies and their effect on patient care quality, workplace safety and nursing practice.

Communication and Collaboration: Communicate effectively and interact collaboratively with clients, health professionals and other colleagues in the provision of comprehensive health services.

1. Collaborate with members of the interdisciplinary health care team to competently manage the care of children and families.
2. Report and document pertinent findings to members of the interdisciplinary health care team.
3. Apply the principles of and barriers to effective communication with children and families.

Societal and Global Issues: Demonstrates knowledge of the impact of societal and global issues on health and health care.

1. Analyze the social determinants of health that impact the delivery of individual and family care.

**Companioned with NUR444: Community Health/Public Health Nursing Practicum
COURSE DESCRIPTION**

Application of the nursing process in community with emphasis on vulnerable and high risk populations. In depth analysis of a selected population including utilization of epidemiological public health principles.

COURSE GOALS/OVERVIEW

This course enables the student to apply the nursing process and to further develop communication and interpersonal skills necessary for working effectively with families, groups, organizations and larger population within a selected community. Students will work collaboratively in one geographic area. Students are involved in developing and implementing a community health project.

Knowledge and Inquiry: Demonstrates knowledge of concepts, theories, evidence-based practice and develops a sense of inquiry.

1. Utilize research findings to improve the health of populations in the home or community aggregate settings.
2. Recognize areas of need for evidence based research to improve the health of the community.
3. Apply theoretical concepts as a basis for nursing strategies to caring for vulnerable populations in the home or community aggregate settings.
4. Utilize epidemiological principles and process in analyzing health problems of vulnerable populations.

Nursing Practice: Provides care to clients across the lifespan and in a variety of settings, and shows an ability to skillfully assess strengths as well as health needs, identify problems, formulate outcomes, design and implement interventions, and evaluate outcomes

1. Utilize the nursing process to manage populations in the home and community settings.

Communication and Collaboration: Communicate effectively and interact collaboratively with clients, health professionals, and other colleagues in the provision of comprehensive health services.

1. Collaborate with professionals and community leaders, individuals and groups for the health of communities.
2. Initiate appropriate referrals for clients in the home or community aggregate settings.
3. Report and document pertinent findings to appropriate health care personal.
4. Modify communication strategies when appropriate to meet the specialized needs of children, elderly, and vulnerable populations.

Professionalism: Demonstrates ethical and professional behaviors, and engage in the process of lifelong learning.

1. Apply standards of practice related to interventions for population health in the home or community aggregate settings.
2. Recognize legal and ethical accountability in the provision of care especially to vulnerable populations.

Societal and Global: Demonstrates knowledge of societal and global issues on health and health care.

1. Analyze emerging concepts and evolving trends in public health and community-centered nursing as they influence nursing practice and healthcare delivery.
2. Utilize knowledge of major health issues in analyzing population health issues in the home or community settings.
3. Utilize knowledge of cultural, social, economic and political concerns to provide comprehensive care in community settings.
4. Effectively utilize community resources to improve population health outcomes.

Leadership: Integration of leadership, quality improvement, and patient safety into the design, management, and coordination of care.

1. Advocate for access and equity for all clients within healthcare delivery systems.

Group Respite

In addition to in-home respite, faculty and students from URI's nursing and physical therapy programs collaborate to provide a group respite opportunity for the parents/guardians of children with special needs one Sunday afternoon each month. The group respite events are held at the Physical Therapy building at URI's Kingston campus. This building is fully handicap accessible and URI's respite providers are able to provide therapeutic activities for children with a variety of special needs.

Student Profile

Students participating in the respite care program are second semester juniors and first semester seniors. It is not required, but some are Certified Nursing Assistants (CNA); Student Nurse Interns (SNI); and Home Based Therapeutic Service (HBTS) workers. Some students are participating in the program as part of their clinical section with the lead faculty for the pediatric clinical practicum. However, the increased interest among students and the

need among families has expanded the program to additional clinical sections on a volunteer basis.

Faculty Experiences

The lead faculty for the pediatric clinical practicum supervises the students in the respite care program. Students and families are matched through an interview process. Students attend an initial introductory home visit with the lead faculty, where the family caregiver and student plan a schedule for respite visits. The respite care visits by the students are independently carried out based on family need and student availability. The lead faculty conducts telephone or in-person check-ins with the family throughout the semester and an end of semester evaluation visit with the family. The students maintain weekly timesheets and debrief the experiences with the lead faculty on an as needed basis, in addition to end of semester evaluation. The students are provided with the lead faculty's cell phone and email contact. At the start of the program, this was on a volunteer basis for the lead faculty. It is now incorporated into workload as a clinical section and a stipend provided as compensation.

Model 3 – New England Institute of Technology

Course Description

This clinical experience provides students with knowledge and experience as a partner in community health. Students will expand their knowledge in respite care and understand caregiver strain and mechanisms to reduce their stress. Students will learn about respite services that provide short-term relief to a typical care provider and/or guardian. This clinical experience is designed to provide respite care to the caregiver supporting their psychosocial needs in the home.

Respite Program Objectives

1. Understand the role of respite care providers.
2. Demonstrate communication with the client and caregiver/s.
3. Discuss safety in the home.
4. Differentiate the multiple healthcare related issues r/t the client and the caregiver.
5. Support the needs of the caregiver in the home setting.

Course Objectives – from the National League for Nursing (NLN)

1. Develop an understanding of common symptoms of caregiver strain.
2. Utilize standardized tools to evaluate caregiver strain.
3. Recognize the encompassing implications of caregiver strain for both the caregiver and the patient.

The entire experience went very well, and better than I expected. I didn't know anything about respite prior to the program, so this was an eye-opening experience as a student.

I felt like I learned a lot about gait assessment, home assessment, and keeping a patient safe, as well as what different interventions could be used to help the patient and the patient's caregiver.

- Nursing Student

4. Develop interventions applicable to addressing caregiver strain.
5. Investigate available specific community resources to support the person caring for the patient with Alzheimer's dementia.
6. Articulate the impact of stress on the multidisciplinary team caring for a patient with Alzheimer's dementia.
7. Better understand the transitional adjustment of all caregivers in coping with the insidious decline of the patient with Alzheimer's dementia.

Student Profile

The Nursing Department at NEIT invites first-term nursing students to participate in client respite care as part of their clinical hours. This happens four times/terms per year. Some students may be licensed Certified Nursing Assistants (CNAs); the majority are pre-licensure registered nursing students.

Faculty Experiences

Adjunct faculty (part-time faculty) offers supervision for respite rotation as follows:

1. Initial review of patient list from CSSRI for home visits.
2. Visit client homes and determine if appropriate for students.
3. Work with the Lead faculty and Clinical Coordinator to assign the students in pairs for their clinicals weeks 6-10.
4. Do client home pre-visit/orientation with students.
5. Deploy the Student and Client pre-respite surveys with results to be sent to Healthcentric Advisors.
 - a. Students fill out the Pre-Survey and hand results to the adjunct faculty for respite rotation at home orientation visit # 1.
 - b. Clients also fill out the Pre-Survey and hand results to the adjunct faculty for respite rotation at home orientation visit # 1.
6. Follow-up with students and clients during at the end of the respite rotation.
 - a. Deploy and collect the post-respite surveys from the students and the client around the last day of respite care with results to be sent to Healthcentric Advisors.

Model 4 – Salve Regina University

Service Learning Course (NUR 371)

Course Description

In this course, students initiate their involvement in processes of health promotion, illness prevention and risk reduction in a collaborative and tangible way within a community. Students connect what they have learned in the classroom to real problems in the world as

actively contributing citizens. Service learning emphasizes collaboration in the development of the goals and objectives of the experience, reciprocal learning between participants, and critical reflection.

Course Objectives

Upon the completion of **Service Learning course (NUR 371)**, the successful student will be able to:

1. Initiate the process of a collaborative partnership with an organization or community and provide leadership at the microsystem level.
2. Collaborate within a partnership while integrating evidence-based interventions into a service-learning project.
3. Identify ways to advocate effectively for the application of health and wellness concepts within the service-learning project.
4. Utilize effective communication within the service-learning partnership.
5. Identify age appropriate interventions that will enhance the application of health and wellness concepts of the selected population.
6. Employ greater initiative and confidence in taking on a professional role within a service-learning partnership.
7. Analyze the inherent values and benefits of connecting what is learned in the classroom to real problems in the world as actively contributing citizens.

Care of Families in Transition (NUR 436)

Care of Families in Transition: Aging and End of Life Care (NUR 436) course is offered to senior students.

Course Description

This course presents the knowledge and skills necessary to provide holistic nursing care of families challenged by the loss of abilities of family members due to aging and the need for end-of-life care, with special attention to issues of quality of life of the patient and family members. Emphasis will be placed on assessment of function, physical, cognitive, psychological, and social changes common in old age, and the complex symptomatology, pain management, and risk factors associated with decline in health status. Attitudes and values that affect care to the aged and the dying process will be explored. Content related to end of life issues for the elderly, including communication, evidence-based practice, cultural expectations, spiritual and religious values and planning advanced directives will be explored (Pre-requisites: 300 level nursing courses. Co-requisite NUR437).

Students will be able to:

1. Impart and expand knowledge necessary to provide holistic nursing care to vulnerable aging patients and those facing end of life.

2. Develop clinical skills and utilize critical thinking processes to assess individual and family responses and organizational systems that impact quality of life for older adults and those at end of life.
3. Demonstrate mission values of respect for human dignity through incorporation of cultural and ethical principles in the care of vulnerable older adults and those

Student Profile

Students offering respite care are in their junior and senior year.

Faculty Experiences

A faculty member serves as the supervisor for the Respite Care Program. The supervisor coordinates with the course instructors, and meets with families before the students are introduced to ensure a safe environment and a good fit.

Models for Student Orientation

Following from each nursing program's model for incorporating respite care into their curriculum, the four programs use different approaches to student orientation. Several orientation approaches and training resources are outlined below.

National Training Resources

The ARCH (Access to Respite Care and Help) National Respite Network and Resource Center shares a variety of respite provider [training resources and ideas on their website](#).

Model 1 – Rhode Island College

Respite Care Simulations

As part of the clinical orientation, students are expected to review specific respite resources, such as the National Respite Guidelines and a slide deck describing the importance of respite and the problem of respite access.

Orientation for RIC students also includes a respite care simulation scenario of a patient with dementia and caregiver stress, followed by time for debriefing and guided reflection. The objectives of the simulation experience are:

1. Develop ability to understand the health-illness caring system of the caregiver and respite recipient (this includes values, beliefs, norms and role caring practices).
2. Conceptualize the caring processes of knowing, being with, doing for, enabling and maintaining belief.
3. Demonstrate understanding of the world from the caregiver and respite recipient's point of view.
4. Survey the environment to support the concepts of safety and quality within the respite care environment.
5. Demonstrate the concept of presence within the respite environment.

Model 2 – University of Rhode Island

Nursing Student Respite Orientation

Students participating in the program are emailed the link to the respite training and expected to view it at the start of the semester.

In addition, students attend a clinical orientation: pediatric skills stations to introduce them to equipment, circumstances they may encounter in the home setting, and expectations in the provision of respite care. Students also participate in an unfolding simulation experience involving a child with special needs.

Model 3 - New England Institute of Technology

Nursing Student Respite Orientation

Students are notified of the respite information at new student orientation, via e-mail and with respite orientation and again with the adjunct faculty for the respite rotation.

Student participants also have access to the recorded Respite Training Website with video links. This is available in their Canvas course.

Students review the recorded Respite Training Videos as assigned in the NUR113 course prior to first home visit. Another optional video for students to view is:

[“Respite Care: Caring for the Caregiver.”](#)

Pre-respite education by adjunct faculty for respite rotation includes:

- Discuss the roles with students
- Review safety in the home environment (Including living areas inside/outside)
- Learn to listen to cues from the caregiver and client with respect to stress and safety
- How to support the caregiver when at home
- Who to call for emergencies



Respite Training class with Catholic Social Services of RI

Model 4- Salve Regina University

In 2019, the students were able to attend the Orientation to Respite Care provided at NEIT (described above) by CSSRI. Faculty provide students with copies of the CSSRI PowerPoint presentation. Faculty meet with students to offer additional information about respite care, this particular clinical opportunity, and what is and is not part of respite care.

Once a student and family are matched, a mutual schedule is made. Students inform faculty (via email or text) of the schedule made with their prospective respite families. In case of emergencies, the students have faculty members' cell phone number for these situations.

Evaluation

Healthcentric Advisors developed a project evaluation plan for the entire Lifespan Respite contract, inclusive of measures to evaluate overall goals of the student respite initiative. The evaluation plan includes key tracking metrics (e.g., number of nursing students trained, number of families served) as well as measures of caregiver and nursing student satisfaction (**Table 2**). The following measures were collected through project tracking logs and surveys administered to both participating students and caregivers pre- and post-services (**Figure 1**).

Table 2. Sample Evaluation Measures Table

Targeted Outcome	Measure	Score	Numerator	Denominator
Student training	Number of nursing students recruited as clinical course placement	Count	# of nursing students recruited at each school	n/a
	Number of nursing students who complete respite training	Count	# students trained to provide respite services at each school	n/a
	Respite training completion rates for students	%	# students who complete respite training at each school	# students who begin respite training at each school
Student provision of respite services	Number of nursing students who provide respite services	Count	# of nursing students who provide respite services at each school	n/a
	Respite provision rates for students	%	# of nursing students who provide respite services at each school by semester	# of nursing students trained to provide respite services
	Number of families referred to nursing programs for respite	Count	# of families referred to each school for respite services	n/a
	Rates of referred families successfully contacted by nursing programs	%	# of families who were able to be contacted by each nursing program	# of families referred to each school for respite services
	Number of families who accept respite services from nursing students	Count	# of families served by nursing students from each school	n/a
	Acceptance rates (families who accept respite services from nursing students)	%	# of families served by nursing students at each school	# of families referred to each school for respite services

Targeted Outcome	Measure	Score	Numerator	Denominator
	Reasons for acceptance/denial of services	Qualitative	n/a	n/a
	Amount of time nursing student volunteers provided respite services	Count	# of hours nursing students provided respite services (track individually, report totals by school)	n/a
Satisfaction	Caregiver satisfaction with the nursing student respite initiative	Count	# of caregivers satisfied	# of caregivers
	Nursing student satisfaction with the nursing student respite initiative	Count	# of students satisfied	# of students

Figure 1. Clinical Placement Survey Administration for Lifespan Respite Evaluation

Pre-Clinical Placement Surveys	Post-Clinical Placement Surveys
<ul style="list-style-type: none"> • Nursing Student Pre-Clinical Placement Survey: Administered to all students at the start of their semester. • Pre-Program Caregiver Survey: Administered to each caregiver, unless the caregiver has received respite services from a nursing student in the last year. If they have received services and completed a pre-program survey within the last year, a second is not needed. 	<ul style="list-style-type: none"> • Nursing Student Post-Clinical Placement Survey: Administered to all students at the completion of their placement/semester. If a student cared for more than one individual in the same household, there is a field to identify their demographic information. • Post-Program Caregiver Survey: All caregivers complete this survey at the end of the nursing student's semester, even if they have received respite services from another nursing student previously. If they are continuing with the same student through another semester (under the clinical placement), the caregiver does <i>not</i> need to complete the post-survey until ending services with that student.

Evaluation Results Summary

During the pilot student initiative, 53 students from RIC and URI participated, serving over 20 caregivers (some caregivers continued for multiple semesters or received respite services from multiple students during the same semester). During the expansion grant, an additional 116 students have participated through the Fall 2019 semester.

Student Experiences

Overall, responses to the program's pre- and post-survey for students indicated the program increased students' knowledge of and interest in respite care. For example, interested students were willing to provide respite during the winter break, beyond their course expectations, in order to ensure continuity for families in between school semesters. Students also expressed that they achieved their goals of making a positive difference for caregivers and that they enjoyed building relationships with the families. One student commented that "this is an important program to bring awareness to caregiver role strain. Introducing this area in the nursing curriculum broadens a student's job search." Another student said "I want to be a home health nurse so the experience was a great precursor to that role."

Other students are continuing with the program as part of their nursing leadership practicum and one student's positive experience and connection with a family led to a paid respite position at the completion of the clinical placement.

Students also provided comments for improving the program. Some students expressed the need for additional education specific to the care recipient, more training prior to beginning respite care, and clarifying with both students and families about what type of services students can provide (e.g. patient care, cleaning, etc.). Also, while some students described positive scheduling flexibility, others said that the families wanted specific times that did not always work for the students.

Caregiver Experiences

The majority of responses to the program's pre- and post-survey expressed caregivers' positive experiences appreciation with respite services provided by nursing students. Caregivers value the additional assistance in caring for their loved ones and express confidence in having trained nursing students do so, which provides them time to socialize, spend time with family, complete chores, and more. Many of the caregiver's free-text responses called out their students by name. One caregiver described a "peace of mind knowing my sister was with someone I could trust." Others described the students as professional, knowledgeable, and caring.

Caregivers also appreciated the autonomy in creating their respite schedules with students; caregivers are able to obtain respite when they need it, rather than being told when they will receive it and students appreciate the flexibility of the hours for their clinical placement. Two caregiver comments suggested improvements. One noted the amount of paperwork and coordination for limited hours was a challenge and another suggested the students should commit and be required to adhere to a specified number of hours per semester.

This was a good experience. I want to be a home health nurse so the experience was a great precursor to that role.

- **Nursing Student**

We valued the expertise of the student. He would appreciate the services of another respite student.

- **Caregiver**

Lessons Learned & Challenges

As the Nursing Student Respite Workforce Initiative was a new program for all partners, we faced a few challenges that were addressed during the development and implementation of the initiative. The following is a description of challenges faced and lessons learned related to program development and/or ongoing implementation:

- **Recruitment of Caregivers:** Recruitment and placement of caregivers/families for the student respite pool differs from recruitment for those typically served through the CSSRI's CareBreaks program. Students in the respite pool have a clear timeframe for providing services that aligns with their respective school semesters, with defined weeks for vacation. Due to course requirements, students must register ahead of time for respite placement and faculty need to know whether or not students will have respite placements. Yet, families in need of respite care require immediate services and cannot wait until the start of a student's semester or have needs that change before or during the semester (e.g., passing of care recipient or nursing home placement). To mitigate these challenges, Catholic Social Services worked to identify families that may have already been receiving services, yet required additional support that could be offered through the student respite initiative. This was an ongoing discussion throughout the first year of the program, but is now more streamlined as other sources of referrals have been and continue to be identified.

Please keep this program going, it benefits all: parent, child and student. The in house visit relieved stress and enriched my son who has anxiety outside the home.

- Caregiver
- **Scheduling Difficulties:** Family phone numbers often change without notification to Catholic Social Services, creating difficulties in identifying caregivers for respite services and in scheduling visits. Ongoing, bidirectional communication between Catholic Social Services and faculty at the nursing schools has helped to mitigate issues and to alert Catholic Social Services when referred respite clients have not been reached.
- **Faculty Workload:** Additional faculty time was needed to prepare for and launch this initiative. In addition, this clinical placement requires ongoing time from faculty for home visits to potential sites to assess the environment and care recipient, as well as for the coordination required to schedule the initial visit. As the number of students in the clinical placement and families served increases, the workload also increases for faculty. This differs from the traditional facility-based clinical placement that does not require faculty to make individual visits for each student to homes throughout the state. Streamlining the referral/identification process has helped to mitigate this challenge, namely through ensuring that faculty are not chasing down multiple potential caregivers for one placement.
- **Diverse Caregivers/Care Recipients:** The ability to provide services to non-English speaking clients is an ongoing challenge, due to a lack of students with fluency in a

second language or hesitancy from the families in receiving care from a student. There have been a few bilingual students to serve these families, although this remains a challenge.

- **Diverse Students:** Some families have been reluctant to receive services from a male student or from individuals with religious beliefs that differ from their own. Catholic Social Services discusses this upfront with all referrals: that nursing students come from various backgrounds, and are both male and female.
- **Data Collection/Evaluation:** Survey completion was a challenge during the early stages of the student initiative. To improve data collection, Healthcentric Advisors sends frequent email reminders to the nursing faculty to ensure completion and receipt of paper or electronic responses. We also found that many caregivers receiving services continued through multiple semesters, which prompted us to refine the process for survey completion.

Future Outlook

The Nursing Student Respite Workforce Initiative is a successful workforce development initiative that offers student nurses clinical experience and course credit while being matched with low to moderate income families who have no access to subsidized respite care.

Long-term, the goal for sustainability is that each nursing program can continue this initiative at little to no cost. A key area that we are exploring is streamlining the process for matching nursing students with family caregivers to reduce the administrative burden for nursing faculty.

Resources

Below are links to additional resources from our Nursing Student Respite Workforce Initiative, including nursing programs resources, respite referral resources from Catholic Social Services' CareBreaks program, and examples of evaluation materials.

Nursing Program Resources

1. [Liability Form](#) (Word document)
2. [Informational Letter to Professors](#) (Word document)
3. [Time Sheet for Nursing Students](#) (Word document)
4. [RIC Unfolding Case Respite Care Simulation Design \(PDF\)](#)
5. [NEIT Nursing Student Respite Orientation](#)
6. ["Respite Care: Caring for the Caregiver" Video](#)

Catholic Social Services - CareBreaks Program

Materials in English

1. [CareBreaks Flyer](#) (PDF)
2. [CareBreaks Application](#) (PDF)
3. [Frequently Asked Questions](#) (PDF)
4. ["CareBreaks - Nursing Students as Respite Providers" Video](#)

Materials in Spanish

5. [CareBreaks Flyer](#) (PDF)
6. [CareBreaks Application](#) (PDF)
7. [Frequently Asked Questions](#) (PDF)

Evaluation Materials

1. [Caregiver Pre Survey](#) (Word Document)
2. [Caregiver Post Survey](#) (Word Document)
3. [Student Pre Survey](#) (Word Document)
4. [Student Post Survey](#) (Word Document)
5. [Clinical Placement Survey Administration 1 Pager](#) (Word Document)
6. [Nursing Student Initiative Data Tracking Worksheet](#) (Excel Document)