

**Lifespan Respite Financing Strategies Logic Model 8-15-19 (DRAFT)**

INPUTS	OUTCOMES										
<p><b>What Do We Want to Sustain?</b></p> <ol style="list-style-type: none"> <li>1) Coalition (NYSCRC)</li> <li>2) Partnerships (Federal, State, Community Based Organizations, Academia, Aging Services Network)</li> <li>3) Programs: REST Training, Caregiver Simulation, Mini-Grants, Annual Caregiver Conference</li> <li>4) Network Engagement (Regional/National)</li> <li>5) Infrastructure/Governance</li> <li>6) Data Collection</li> <li>7) Caregiver Engagement</li> <li>8) Advocacy</li> <li>9) NY Connects</li> <li>10) Respite Volunteers</li> </ol>	<p><b>POTENTIAL FUNDING SOURCES</b></p> <ul style="list-style-type: none"> <li>• <b>Federal</b> (ACL, HRSA/GWEP, OAA, HHS)</li> <li>• <b>State</b> (NYSOFA, AAA, DOH, OPWDD, CCF, Labor, OMH, OASAS, OCFS)</li> <li>• <b>Private</b> (HFWCNY, Ralph C. Wilson, NYSHF, GRHF, Cabrini, Hartford, RWJ, Weinberg, Golisano, Guardian Society, Community Foundations, United Way, AARP)</li> <li>• <b>Revenue Generation</b> (Fees, membership dues, partner sponsorship, Health Systems, ACOs, private insurances)</li> </ul>										
<p><b>Environmental Scan</b></p> <ul style="list-style-type: none"> <li>• Demographic imperative</li> <li>• Uncertain Federal funding landscape</li> <li>• State priorities areas (Women, Labor, DOH, OPWDD, Children, Kinship Care)</li> <li>• State Initiative: "Health Across All Policies"</li> <li>• Health System Recognition (readmissions)</li> <li>• Caregiver identification/awareness challenge</li> <li>• Potential for Technology support/reach</li> <li>• Large geographic coverage region (+Rural)</li> <li>• For-Profit Incursion (private sector)</li> </ul>	<table border="0"> <tr> <td><b><u>Funding Levels</u></b></td> <td><b><u>Proposed Model</u></b></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"> <li>• Current ACL Funding: through August 2020</li> <li>• Proposed No-Cost Extension: December 2020/March 2021</li> <li>• Current HRSA Funding: through June 2024</li> </ul>	<b><u>Funding Levels</u></b>	<b><u>Proposed Model</u></b>	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
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<p><b>Stakeholder Summit Recommendations</b></p> <ol style="list-style-type: none"> <li>1. Building Capacity</li> <li>2. Workforce Development</li> <li>3. Increasing Awareness and Utilization</li> <li>4. Enhanced Collaboration</li> <li>5. Enhanced Funding</li> <li>6. Policy/Legislative Initiatives</li> </ol>	<p><b>PERFORMANCE MEASURES</b></p> <ul style="list-style-type: none"> <li>➤ Coalition Building: membership #, monthly calls participation, geography, website utilization, newsletter distribution, surveys</li> <li>➤ Trainings: pre-/post- assessment and # trained for: REST, train-the-trainer, caregiver simulation, Powerful Tools for caregiving, mindfulness</li> <li>➤ Services: Volunteer (#, hours, retention), # respite programs, trainer established in every county</li> <li>➤ NY Connects: # respite services listed, utilization</li> <li>➤ Mini-grants: required data metrics and progress reports</li> <li>➤ Funding: grant funding, foundation collaboration, revenue stream from trainings, membership dues revenue</li> <li>➤ Defined future implementation strategy for evidence-based caregiver assessment (satisfaction, quality of life, and health related outcomes)</li> <li>➤ Assessment of the caregiver experience as a result of respite participation</li> </ul>										
<p align="center"><b>ACTIVITIES</b></p>											
<ol style="list-style-type: none"> <li>1) Build coalition support and expand NYSCRC representation/participation</li> <li>2) Scale through partnerships, parallel state funding, and aligning activities</li> <li>3) Utilize website, social media, and existing marketing materials to raise awareness</li> <li>4) Engage employers in caregiving needs</li> <li>5) Analysis of revenue pricing structure (fees, services, and membership dues)</li> <li>6) NY Connects System Updates</li> </ol>											