

NEBRASKA RESPITE NETWORK

WESTERN AREA LOGIC MODEL UPDATED MAY 2016

VISION: The Western Area of the Nebraska Respite Network has a well-developed system to support high-quality planned and emergency respite care across the lifespan for all families caring for a loved one at home, regardless of the family member’s disability and/or chronic illness diagnosis, special needs, family circumstances and location within the 11 counties in the Panhandle of Nebraska

What do We Want to Sustain?	How Will We Measure Progress?
<p>ULTIMATE OUTCOMES</p> <ul style="list-style-type: none"> ▪ The Western Area will support the State Plan to assist with understanding the needs, available resources and high-quality respite care through caregiver stories. ▪ Secure additional funding to sustain respite in the Panhandle of Nebraska. ▪ Respite will be marketed in a variety of ways to reach multiple target audiences. ▪ Trained providers will be available in all areas of the Panhandle. ▪ Local businesses will have increased respite awareness for employees as caregivers. 	<p>INDICATORS OF ULTIMATE OUTCOMES</p> <ul style="list-style-type: none"> ▪ By providing caregiver stories to the State Coordinator we will be assisting in helping to improve understanding of the needs, available resources and benefits of high-quality respite care. ▪ Families who are caring for a loved one with a disability in the Panhandle will have access to respite funding either through state programs or through funds obtained by the local network. Respite Days will offer up to \$500 per year in respite to family caregivers. The source of funding for families will be tracked. ▪ Families calling in for respite services will be asked how they heard of respite and will be tracked and reported so we know the most effective media we use. ▪ The providers who participate in the REST training will be tracked on eLifespan Respite. Providers with some other form of training will also be tracked on a separate spreadsheet. (C.N.A., Med Aid, Online course) ▪ 10 additional area businesses will receive respite information based on input from the business evaluation being conducted in May 2016. Similar numbers of new businesses will be targeted in FY18.

INTERIM OUTCOMES/CONDITIONS AND CAUSES THAT MUST CHANGE	INDICATORS OF INTERIM OUTCOMES
<ul style="list-style-type: none"> ▪ Lack of appropriately trained Network-approved respite providers. <ul style="list-style-type: none"> ○ Specifically in our area we see “pockets” that do not have any respite providers. ○ We need to define “appropriate training” since Caregivers are able to choose and train their own providers. ▪ We will continue to address the lack of awareness of respite services and how to access respite. ▪ Lack of easily accessible information on the personal needs, available resources and benefits of respite care across the lifespan and lack of accessible services to support family caregivers in need of respite. Accessibility is limited by: <ul style="list-style-type: none"> ○ Limited providers in some areas. ○ Limitations on respite funding options. ○ Information not distributed through as many sources as needed. 	<ul style="list-style-type: none"> ▪ By the end of FY 18 we will have increased our trained providers by 30%. Trained providers will include: <ul style="list-style-type: none"> ○ REST Trained ○ Licensed (C.N.A., Med Aide, LPN, RN) ○ Completion of online course tbd by local network ○ As of the end of FY 16 we have 29% of our individual providers (12 out of 42) with some sort of training. The Long Term Care Facilities are obviously trained. ▪ The number of callers calling about respite each month will increase showing a higher awareness of respite resources. At the end of each month the active callers will be documented. ▪ Respite providers will continue to be recruited through the area. ▪ Families learning about respite through outreach efforts will be documented in eLR. ▪ Due to our frontier population, we realize that some respite needs must be met outside of the Panhandle.
<p>STRATEGIES AND ACTIVITIES</p> <ul style="list-style-type: none"> ▪ Utilize various marketing avenues to promote respite. <ul style="list-style-type: none"> ○ Commercial ○ Facebook ○ Newspaper ○ Radio ○ PPHHS Listserv ▪ Seek funding to provide respite for those who “fall through the cracks”. <ul style="list-style-type: none"> ○ United Way ○ Snow Redfern Foundation ○ Alzheimer’s Foundation ○ Region I DD Council ○ C.A. Story Foundation ○ Golden Halo ▪ Review information on respite website 	<p>PERFORMANCE MEASURES</p> <ul style="list-style-type: none"> ▪ A baseline report will be prepared at the end of FY 16 (June 30, 2016) to determine the most utilized marketing strategy. Funding will be aimed at the method year 2 and 3. ▪ At least 5 families who do not qualify for any other respite source will receive funding through local sources. As of the end of FY16 we have 4 families funded by Respite Days who were over resources for the subsidy – one by only \$755.00. Two additional families are funded who do not qualify for respite funding due to adoptions. ▪ Respite information will be kept current on an ongoing basis and can be

<p>once a month to assure information is current.</p> <ul style="list-style-type: none"> ▪ Conduct 4 REST Trainings in the Panhandle in FY17. ▪ Begin using RELIAS as an online training available to providers. ▪ Partner with the Community Action Partnership of Western Nebraska to reach out to minorities. ▪ Utilize our Influential person in quarterly marketing efforts. ▪ Increase the number of families participating in the Lifespan Respite Subsidy Program to support the use of eligible services. ▪ We will work to increase the number of respite providers recruited, screened, trained and retained by at least 10% per year, however with the amount providers make per hour providing respite this is difficult. We also have a limited pool of people to draw from. ▪ Conduct annual background checks on providers through Adult Protective Services, Child and Abuse Central Registry, Nebraska Sex Offender website, and Criminal History on all prospective and current providers. 		<p>determined by viewing the site at www.panhandlepartnership.com and clicking on workgroups and then Lifespan Respite</p> <ul style="list-style-type: none"> ▪ We will document the number of trained providers and the type of training they have to use as a baseline. As of the end of FY16 we have 12 trained providers. ▪ Request the CAPWN allow their minority programs coordinator to become a member of our advisory committee. A minimum of 2 new providers will be obtained who are from a minority group by the end of FY 2016. ▪ Our Key Champion will continue to do quarterly outreach efforts in various methods. ▪ Documentation in eLR will show that we have at least an increase of 10% per year for the next 3 years of trained providers. ▪ All providers will have proper background checks documented in eLR.
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