

Massachusetts Respite Innovation Grants

ARCH Respite Research Summit

October 29, 2024

Introductions



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Public
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Project Background and Evaluation Methodology

MA Respite Innovations Grants Initiative

MA leverage one-time HCBS ARPA funding to:

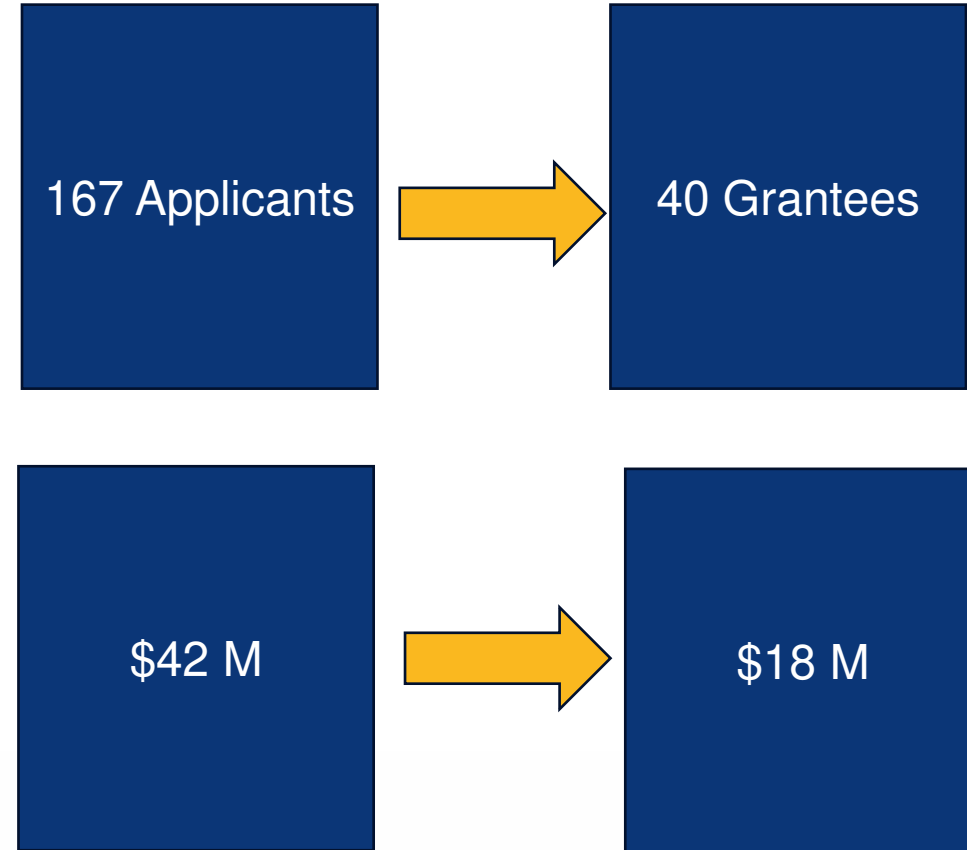
- **Enhance, improve, expand** and/or reorganize the way that Respite is currently provided
- Identify **promising practices** to relieve caregivers
- **Close service gaps**
- Provide **person-centered** respite

Evaluation can provide insight on long term policy and procedural changes



MA Respite Innovations Grants Overview

- Competitive Request for Applications
- Focus on the Caregiver, not the type of respite service provided



Respite Grantee Overview

- Develop, and implement new or enhanced **innovative models** of Respite service delivery.

- Provide innovative, **high quality, person-centered Respite services** to provide relief to Caregivers while providing a meaningful, safe, enjoyable experience for the care recipient.

- Provide an **inclusive, diverse, equitable** plan for the provision of Respite services

- **Recruit** and **retain** Respite workers in innovative ways.

- Assess programs and **evaluate outcome** measures/metrics to determine efficiency and efficacy of pilots.
-



Evaluation

Performance Reports

Numerical Data

Total Caregivers supported

Total Caregivers in the following categories:

- Caregiver is age 65 and Older
- Caregiver speaks a primary language other than English
- Receiving respite services for the first time
- Providing care to a recipient with complex health care need:
 - Providing care to a recipient ages: 0-22
 - Providing care to a recipient ages 23-55
 - Providing care to a recipient ages 56-65
 - Providing care to a recipient over 65
- Providing care to an individual with Alzheimer's Disease and Related Dementia (ADRD)
- Providing care to an individual with Developmental Disabilities
- Providing care to an individual with behavioral health needs

How much funding was spent this period?

What was the cost per person, per type of respite?

What is the category of Respite Provided?

Describe the innovations you implemented.

Is your program based on evidence-based practices? If so, please describe.

How were you able to serve diverse communities?

What barriers did you encounter?

Qualitative Data



Additional Evaluation Methods



Quarterly Learning Communities
April 2024 – March 2025



Focus Groups
November 2025

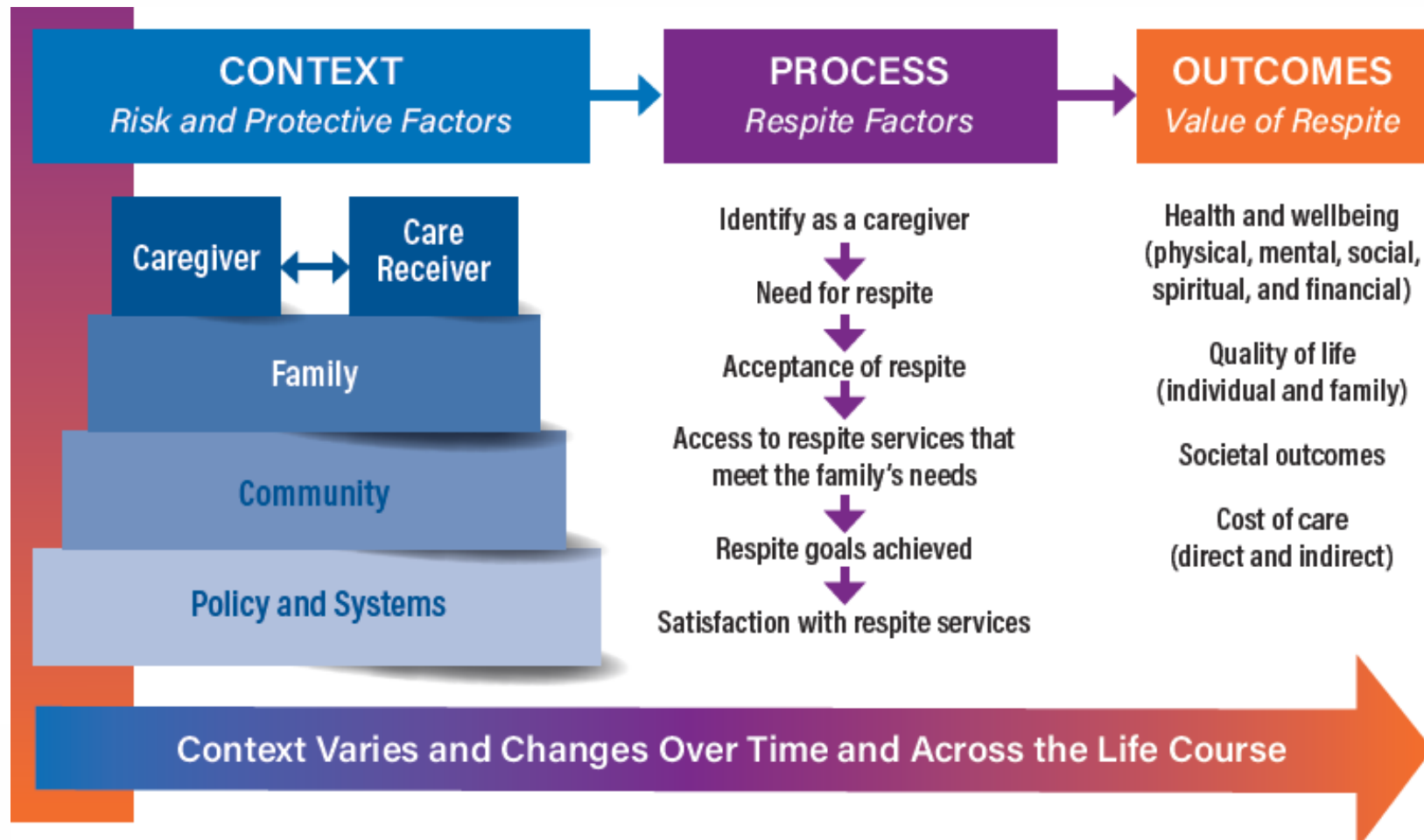


Caregiver Survey
February 2025



Value of Respite Model

The Value of Respite Model



Source: Whitmore, K., & Swanson, S. (2024). Recommended common data elements for respite research: A white paper by the ARCH Committee for Advancement of Respite Research. ARCH National Respite Network and Resource Center. Available online at <https://archrespite.org/library/cde-white-paper/>

Process – Respite Factors



Identifying as a Caregiver

Marketing and Outreach



Acceptance of Respite

Building Trust



Access to Services that Meet
the Family's Needs

Flexibility

Outcomes – Value of Respite



Individual grantees identified Custom Metrics for their programs



Metrics include program satisfaction surveys and caregiver assessments



Focus on evidence-based assessments



Final Report will identify average cost per caregiver for each respite model

Core Data Elements

Recommended Core Concepts Aligned with the Value of Respite Model

CONTEXT <i>Risk and Protective Factors</i> CAREGIVER	CONTEXT <i>Risk and Protective Factors</i> CARE RECEIVER	PROCESS <i>Respite Factors</i>	OUTCOMES <i>Value of Respite</i>
<p><i>Core concepts that help to describe risk and protective factors of the caregiver, include:</i></p>	<p><i>Core concepts that help to describe risk and protective factors of the care receiver, include:</i></p>	<p><i>Core concepts that help to describe respite factors, include:</i></p>	<p><i>Core concepts that help to describe the value of respite, include:</i></p>
<ul style="list-style-type: none"> • Caregiver Demographics • Caregiver Wellbeing 	<ul style="list-style-type: none"> • Care Receiver Demographics • Care Receiver Wellbeing 	<ul style="list-style-type: none"> • Description of Respite Model • Caregiver Experience with Respite 	<ul style="list-style-type: none"> • Caregiver Wellbeing <ul style="list-style-type: none"> • Physical • Mental • Social • Spiritual • Financial • Quality of Life

Source: Whitmore, K., & Swanson, S. (2024). Recommended common data elements for respite research: A white paper by the ARCH Committee for Advancement of Respite Research. ARCH National Respite Network and Resource Center. Available online at <https://archrespite.org/library/cde-white-paper/>



Context: Caregiver Demographics

- 21% of all caregivers served were 65 years or older.
- On average, 34% of Caregivers served by each grantee were over 65
- 2 grantees supported only caregivers over 65



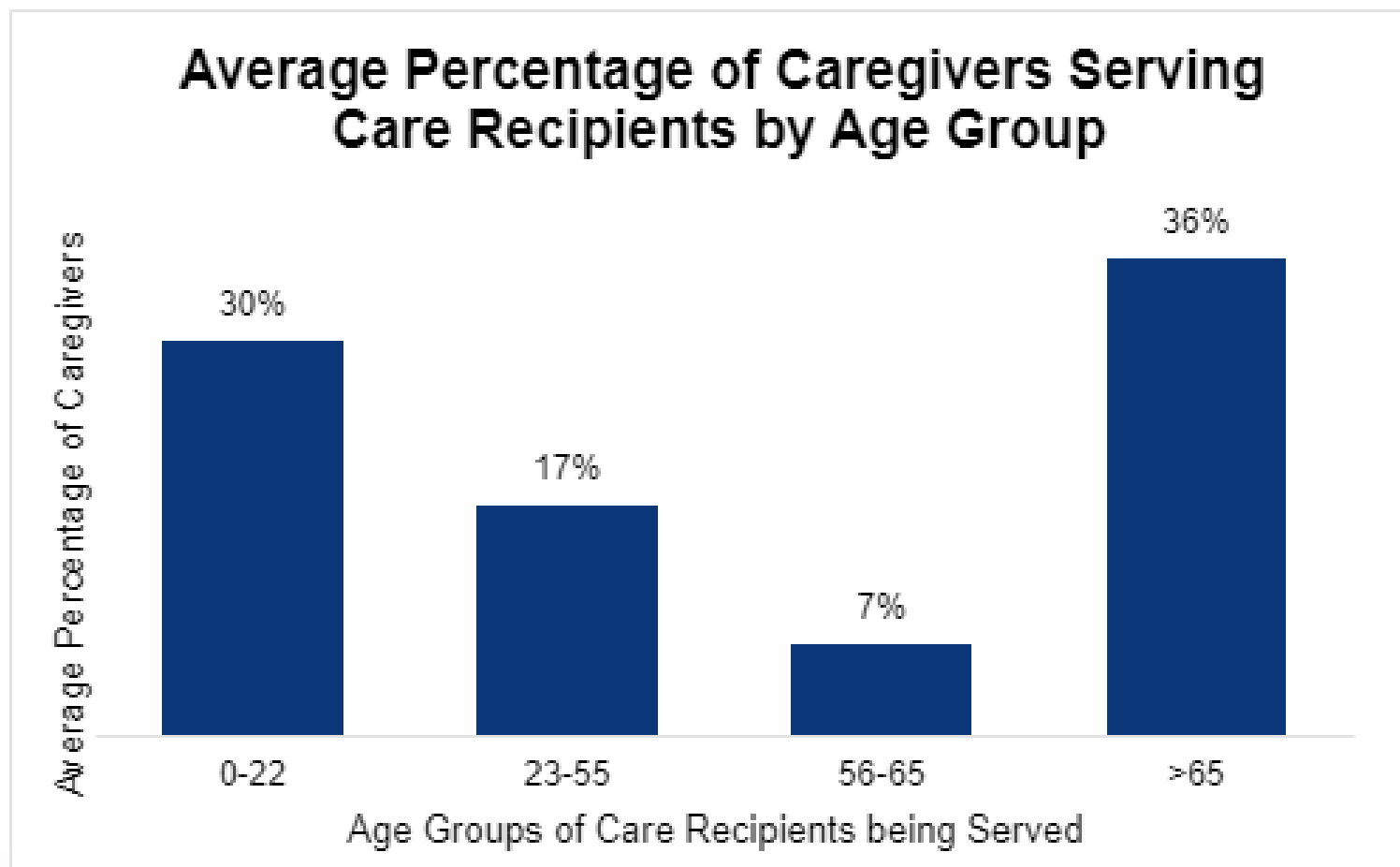
Context: Caregiver Demographics

- 12% of Caregivers supported in the most recent reporting period spoke a primary language other than English
- For 25% of grantees, more than 26% of the caregivers serves spoke a primary language other than English



Context: Care Receiver Demographics

Caregivers are supporting individuals across the lifespan.



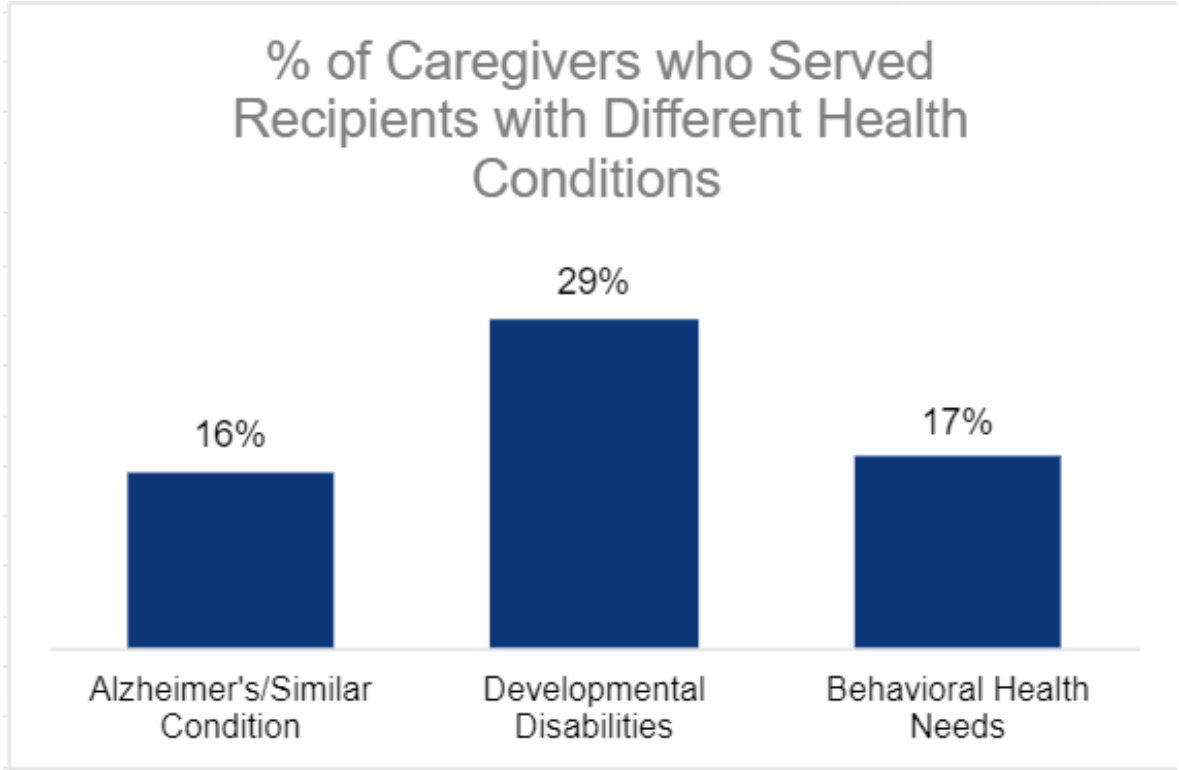
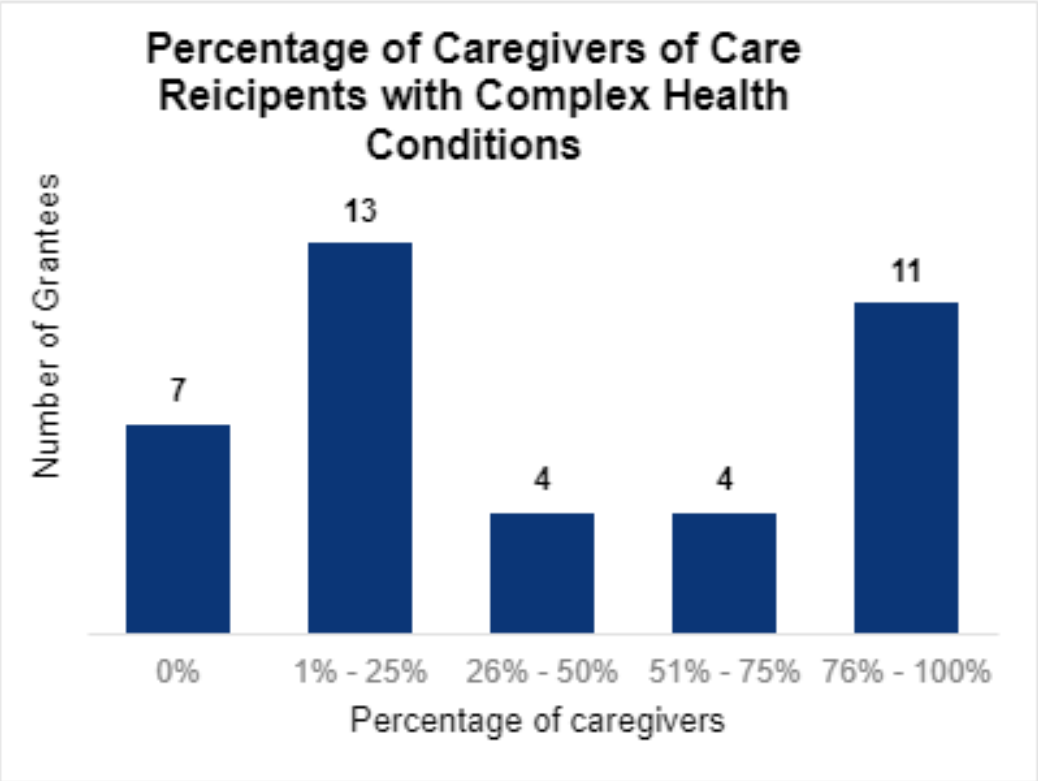
Grant Period: 2/1/24 – 7/30/24

N = 39



Process: Type of Respite Support Provided

18% of Caregivers served recipients with complex health issues

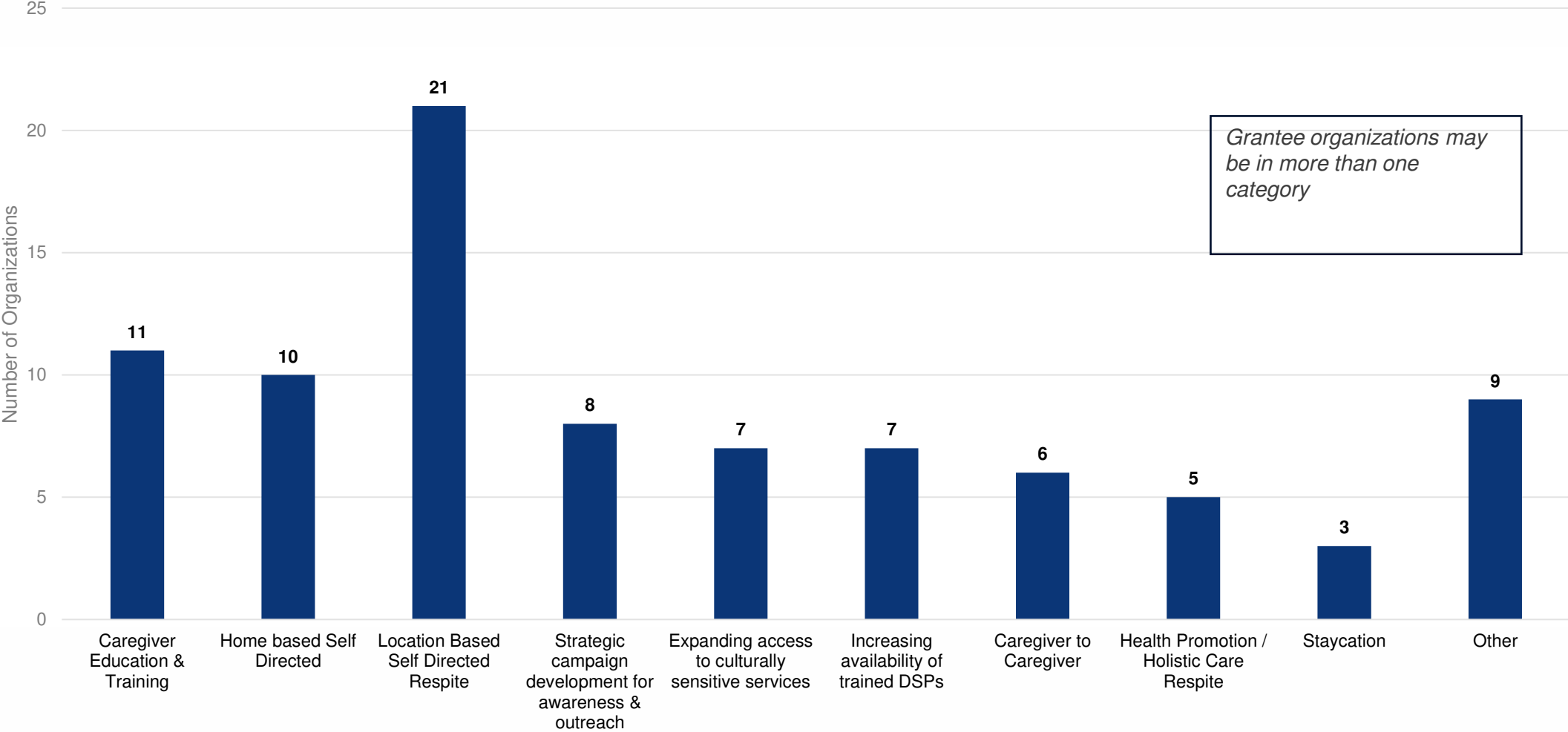


Grant Period: 2/1/24 – 7/30/24

N = 39



Process: Respite Innovation Categories



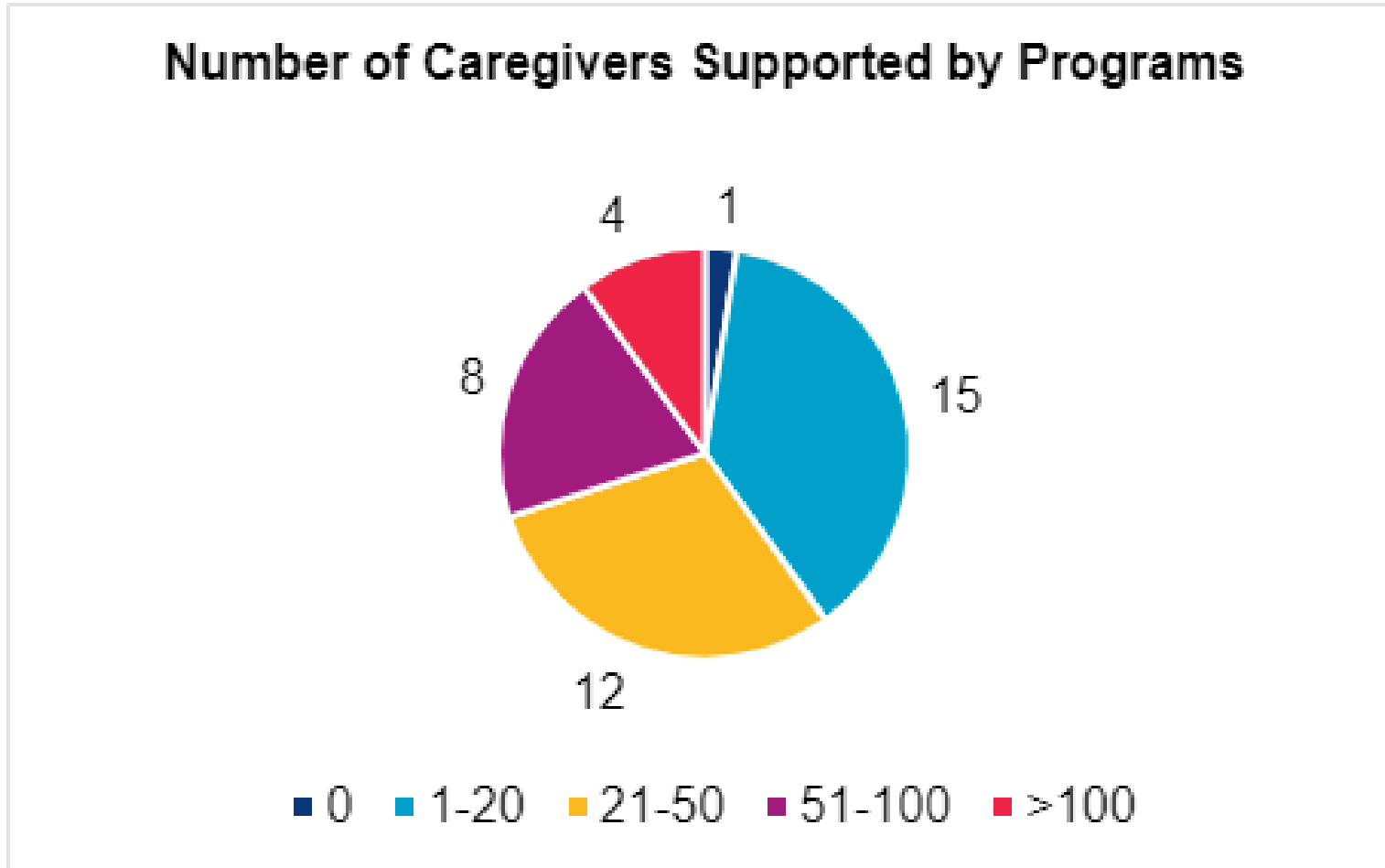
Grant Period: 2/1/24 – 7/30/24

Categories of Respite Innovations **N = 39**



Total Number of Caregivers Supported

3,159 caregivers were served during the second contract period



Grant Period: 2/1/24 – 7/30/24

N = 39



Caregivers Receiving Respite for the First Time

- 22% of all caregivers served during the grant period were receiving services for the first time.
- For 61% of grantees, at least half of the caregivers served were accessing respite for the first time



Next Steps

Evaluation Process

Focus Groups	November 2024
Caregiver Survey	February 2025
Final Performance Report	April 2025
Evaluation Results	June 2025

Long Term Impacts

- Incorporate findings into future grant planning
- Inform future budget requests
- Distribute the actionable findings through the MLRC
- Leverage the MLRC to build on networking and learning collaboratives initiated through innovations grants



Questions and Discussion