

National Respite Care Provider Training: Final Evaluation Results

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Acknowledgement



RCAW
Respite Care Association
of Wisconsin



ARCH
National Respite Network
AND RESOURCE CENTER

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Presentation Overview

- Overview of the National Respite Care Provider Training
- Field Test Evaluation Results
 - Individual Learner Evaluation
 - Agency Evaluation
 - Overall Project Evaluation
- Next Steps

National Respite Care Provider Training



Project Purpose

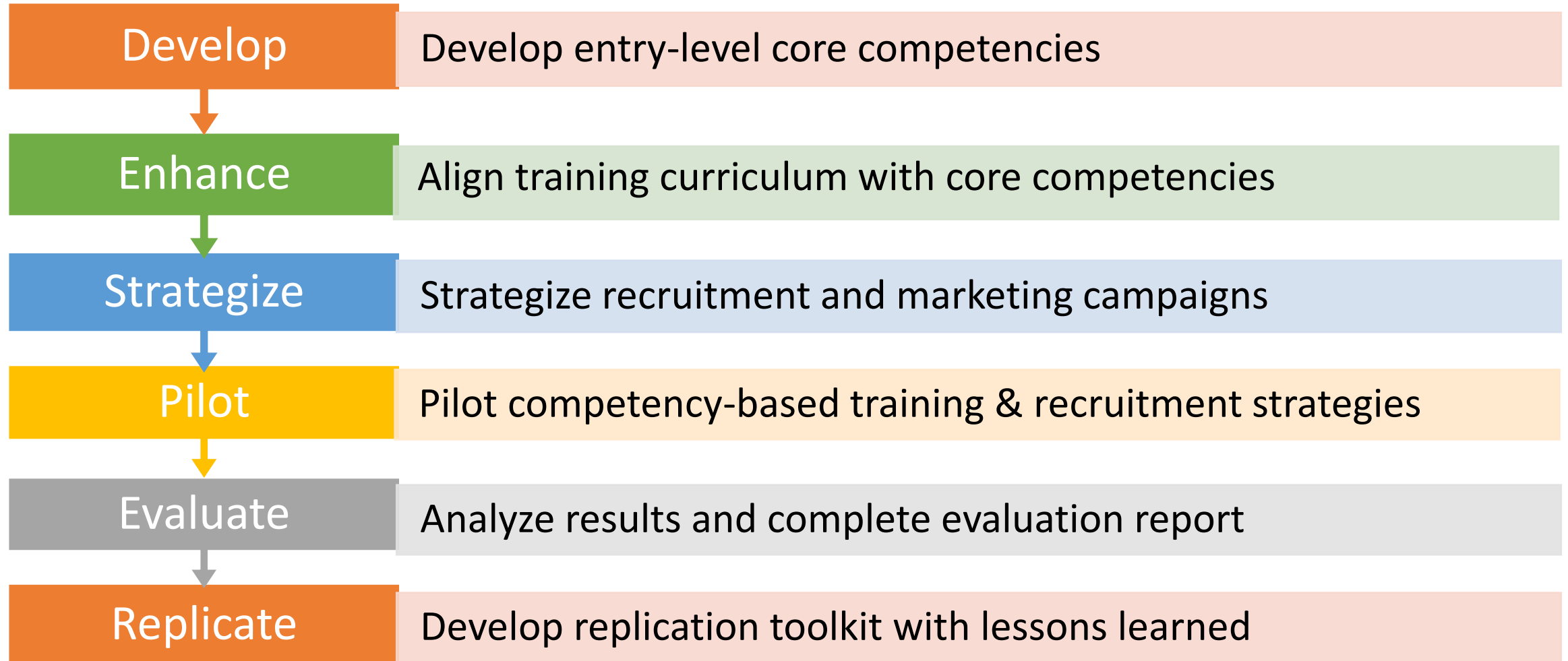
Cultivate a nationally recognized set of core competencies for entry-level respite providers

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graph LR; A[Cultivate a nationally recognized set of core competencies for entry-level respite providers] --> B[Field test a training curriculum based on these core competencies]; B --> C[Learn about and develop an innovative and specialized recruitment campaign];
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Field test a training curriculum based on these core competencies

Learn about and develop an innovative and specialized recruitment campaign

PROJECT OVERVIEW





Core Competencies

- Developed by an Expert Work Group
- Disseminated for Public Comment
- Applied to Respite Provider Training Curriculum
- *Link to Competencies:*
[https://archrespite.org/images/NASHP/Project/Respite Care Professional Core Competencies.pdf](https://archrespite.org/images/NASHP/Project/Respite%20Care%20Professional%20Core%20Competencies.pdf)



Respite Care Professional Core Competencies

The following Respite Care Professional Core Competencies are meant to serve as a baseline for entry-level respite care professionals. Additional training may be required depending on the unique needs of the care recipient and their family.

Principles of Respite

The respite care professional understands the importance of providing meaningful short breaks for family caregivers to promote the well-being of family caregivers, care recipients, and other family members.

Person and Family-Centered Care

The respite care professional provides care that is focused on, and respectful of, family caregivers' and care recipients' preferences, needs, values, and goals for respite.

Cultural Competency

The respite care professional understands and provides services and supports that are respectful of the cultural preferences, traditions, and language needs of family caregivers, care recipients, and other family members.

Communication and Relationship Building

The respite care professional builds and maintains trusting relationships with family caregivers and care recipients through active listening and respectful verbal, non-verbal, and written communication that is easily understandable.

Health and Wellness

The respite care professional supports the physical health, functional ability, spiritual, and social-emotional well-being of care recipients based on the preferences of family caregivers and care recipients and in accordance with the respite care professional's training and certification, as well as local laws and regulations.

Safety and Emergencies

The respite care professional helps protect care recipients from illness, injury, abuse, neglect, or other harm; understands how to report incidents; and responds quickly and safely during emergency situations.

Planning Respite Activities

The respite care professional works with family caregivers and care recipients to explore, define, plan, and engage in appropriate and meaningful respite activities for care recipients.

Ethics and Professionalism

The respite care professional works in an ethical and professional manner by maintaining boundaries, ensuring confidentiality, and respecting the privacy, rights, and preferences of family caregivers, care recipients, and other family members.

Professional Development

The respite care professional obtains appropriate training based on the unique needs of care recipients and seeks opportunities for ongoing education and training.

Selfcare

The respite care professional recognizes the importance of selfcare and actively engages in practices that promote their own safety, health, and well-being.



Course Descriptions

- Courses align with core competencies
- States add their own state specific modules
- *Course Descriptions:*
https://archrespite.org/wp-content/uploads/2022/09/Respite_Care_Provider_Training_Course_Descriptions.pdf
- Available in Spanish



Respite Care Provider Training Courses

The Respite Care Provider Training (RCPT) is designed for people who are interested in providing respite care to individuals with varying disabilities and ages across the lifespan. Each course in the training meets at least one of the Respite Care Professional Core Competencies.

101: What is Respite?

This course defines respite care, describes respite settings, discusses the benefits of respite, and details reasons to become a respite provider. *(Core Competency: Principles of Respite)*

102: Disability Basics for Respite Providers

This course is an introduction to general disability and aging related topics, such as understanding preferred language to be used in interactions that we have with care recipients and family caregivers. This course also briefly touches on adaptive equipment and assistive technology. The concept of person and family-centered care is also introduced. Learners will build on these principles throughout the training courses. *(Core Competency: Person and Family-Centered Care)*

103: Client Care for Respite Providers

This course discusses the different types of care support that an individual might need during respite care. A focus on person and family-centered care continues through promoting independence in different client care activities, while also taking into consideration the health and abilities of the care recipient. *(Core Competencies: Person and Family-Centered Care, Health and Wellness)*

104: Medication Awareness for Respite Providers

This course provides a general overview of medication awareness, including the seven rights of medication administration and special situations. A respite provider's role in terms of medication may differ depending on their training and/or certification, as well as local laws and regulations. *(Core Competency: Health and Wellness)*

105: Safety Procedures for Respite Providers

This course explores different emergency situations, ways to be prepared, and types of incidences to report. This course also looks at abuse and neglect laws for both children and adults/older adults in your state, along with information on how to report suspected maltreatment. *(Core Competency: Safety and Emergencies)*

106: Caring for Challenging Moments

This course provides an introduction to understanding functions of behavior and explores tools and techniques a respite provider can use to respond quickly and safely while supporting a care recipient's emotional wellbeing during challenging moments. *(Core Competencies: Health and Wellness, Safety and Emergencies)*

107: Health, Wellness, and Respite Activities

This course examines the importance of meaningful activities and how to plan activities based on the physical health, functional ability, spiritual, and social-emotional needs and preferences of family caregivers and care recipients. *(Core Competencies: Health and Wellness, Planning Respite Activities)*

108: Professional Ethics and Interpersonal Skills for Respite Providers

This course discusses the interpersonal skills that are important for respite providers. Topics covered include communication and active listening, cultural preferences and beliefs, understanding personal bias, respecting confidentiality, and maintaining professional boundaries. *(Core Competencies: Cultural Competency, Communication and Relationship Building)*

109: Meeting the Caregiver and Care Recipient

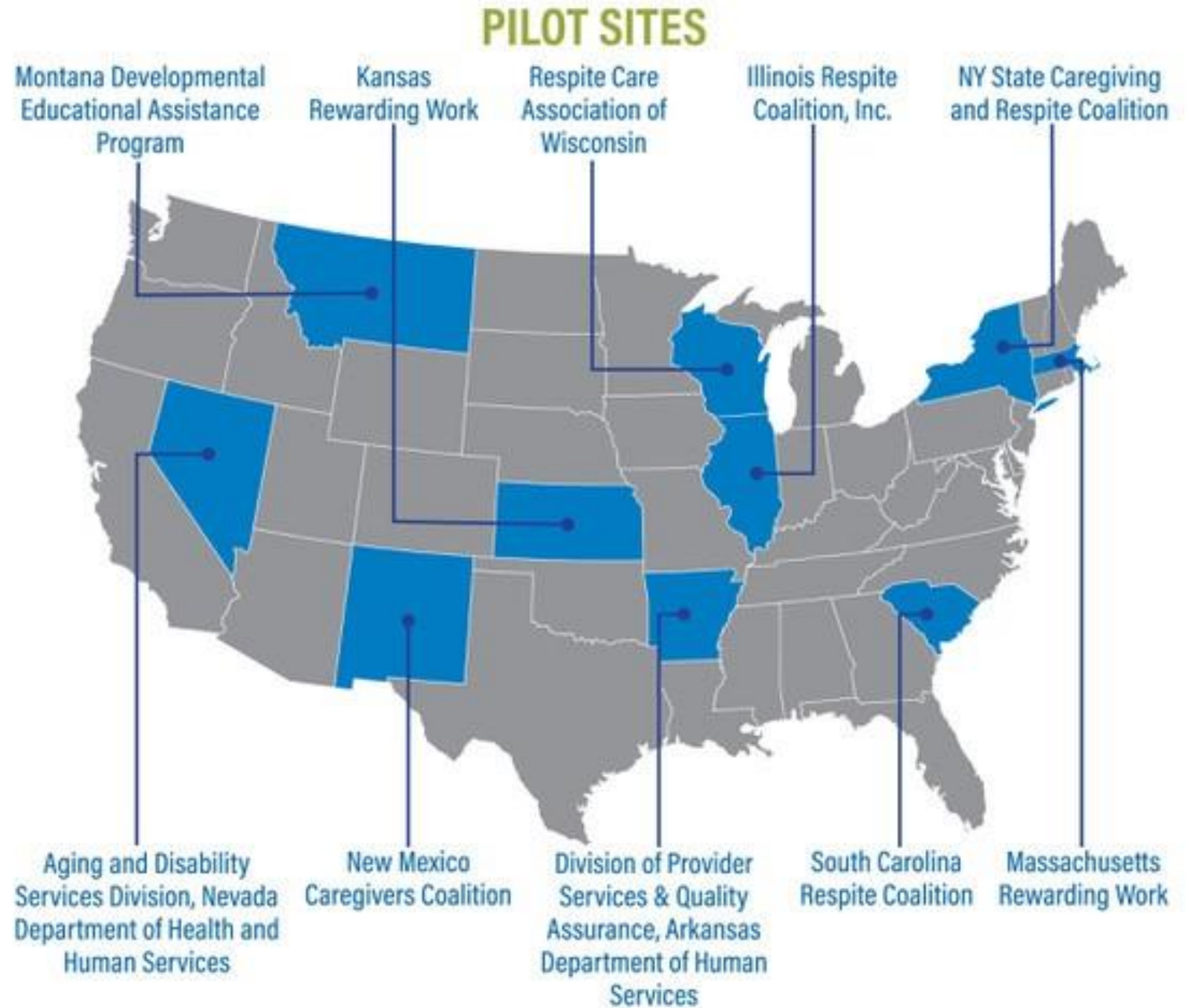
This course walks through the steps a respite provider takes when finding and starting a new respite position. This course discusses interviewing with a potential family caregiver, meeting the care recipient, training with the family, and how to build trusting relationships throughout the process. *(Core Competency: Communication and Relationship Building)*

110: Next Steps in Becoming a Respite Provider

This course turns the focus to the importance of selfcare for the respite provider, and seeking additional training. This course also identifies next steps a respite provider can take in their state to provide respite care. *(Core Competencies: Selfcare, Professional Development)*

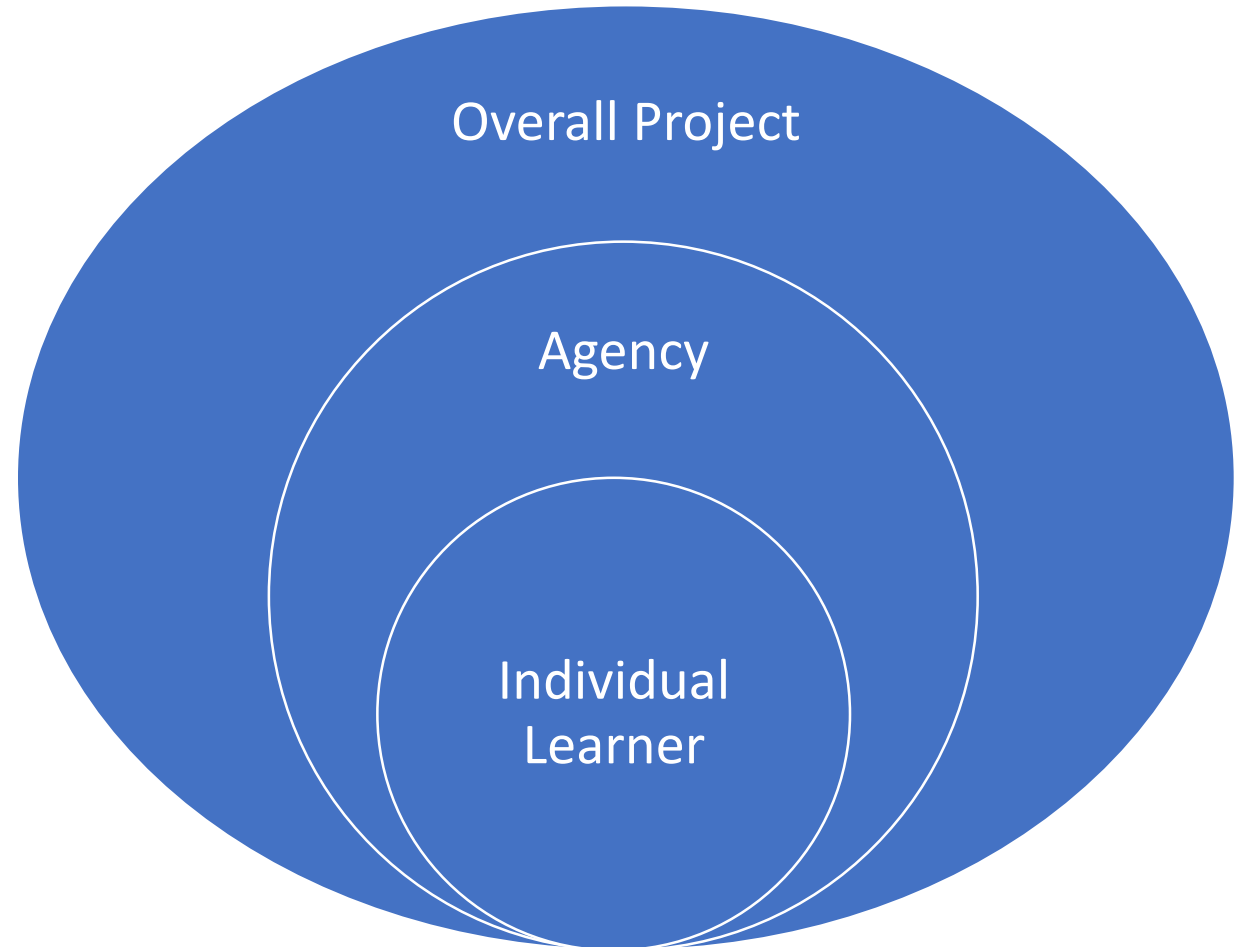
Pilot Sites

Respite Provider
Training and
Recruitment Field Test



Overall Project Evaluation

Multi-layered



Overall Project Outcomes

- **Outcome 1:** Establish a standard respite care training that aligns with the Core Competencies for Respite Care Professionals
- **Outcome 2:** Establish a strategy for recruiting respite care providers
- **Outcome 3:** Improve individual knowledge and confidence in providing respite care among training participants
- **Outcome 4:** Increase the number of trained respite care providers
- **Outcome 5:** Increase the number of people who join the respite care registry (if applicable)
- **Outcome 6:** Increase the number of people who indicate intent to provide respite care
- **Outcome 7:** Increase the number of people who are actively providing respite care (long-term)

Agency Evaluation

- Worked with evaluation consultant to identify agency-specific goals
- Data collected at
 - *Baseline*
 - *6-months*
 - *12-months (end of pilot)*
 - *6-months post follow-up*
- Social Network Analysis and Partner Mapping
- Recruitment Campaign Evaluation
 - *How many people are enrolled in training?*
 - *How many people completed the training?*
 - *How many people joined the respite registry (if applicable)?*
 - *How many people are actively providing respite care?*

Individual Learner Evaluation

Surveys built into course

Intro Survey

- *Demographic Questions*
- *Respite Experience Questions*
- *Confidence Questions*

Pre/Post Test

- *Scenario-based questions aligned with course objectives and core competencies*

Post-Course Completion Survey

- *Confidence Questions*
- *Likelihood of providing respite care in the next 6 months*
- *Potential barriers to providing respite care*
- *General course evaluation (Satisfaction and overall learning)*

Individual Learner Evaluation

6-month follow-up survey

- *Emailed survey link*
- *Are you currently providing respite care?*
- *How well did the training prepare you to provide respite care?*

Inactive survey

- *Why did you not complete the course?*

Virtual Interviews




Overall Project Evaluation

- We used the RE-AIM Framework to help guide our overall project evaluation.
- The goal of RE-AIM is to encourage program planners, evaluators, funders, and policy-makers to pay more attention to essential program elements including external validity that can improve the sustainable adoption and implementation of effective, generalizable, evidence-based interventions.

EVALUATION RESULTS

Participants who completed the RCPT
between January-December 2022



Registration and Completion (1/7/22 – 12/31/22)

**TOTAL
Registered:
2,277**

**TOTAL
Completed:
559**

Registration and Completion

After the pilot (1/1/2023 - 6/30/2024)

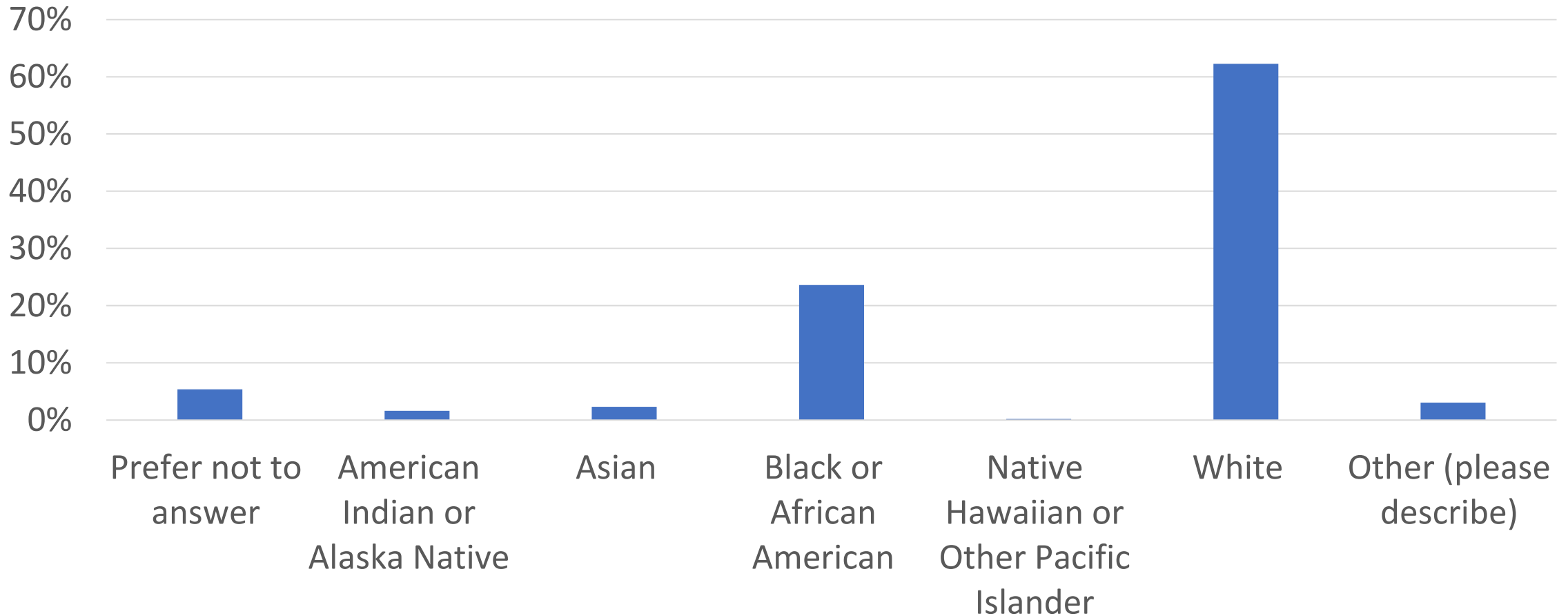
REGISTERED

Since the end of the pilot field test, an additional **3,207** registered for the training for a total to date of **5,484**.

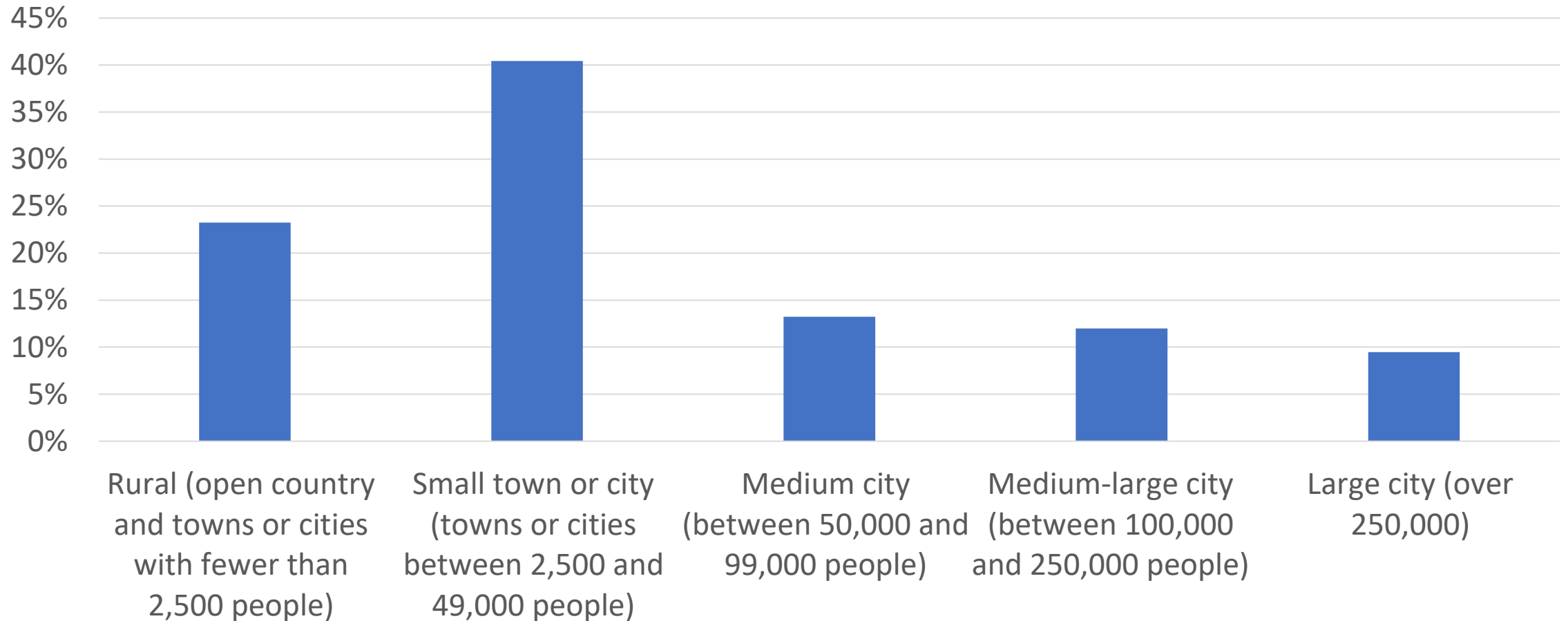
COMPLETED

Since the end of the pilot field test, an additional **1,154** have completed the training for a total to date of **1,713** newly trained respite care providers

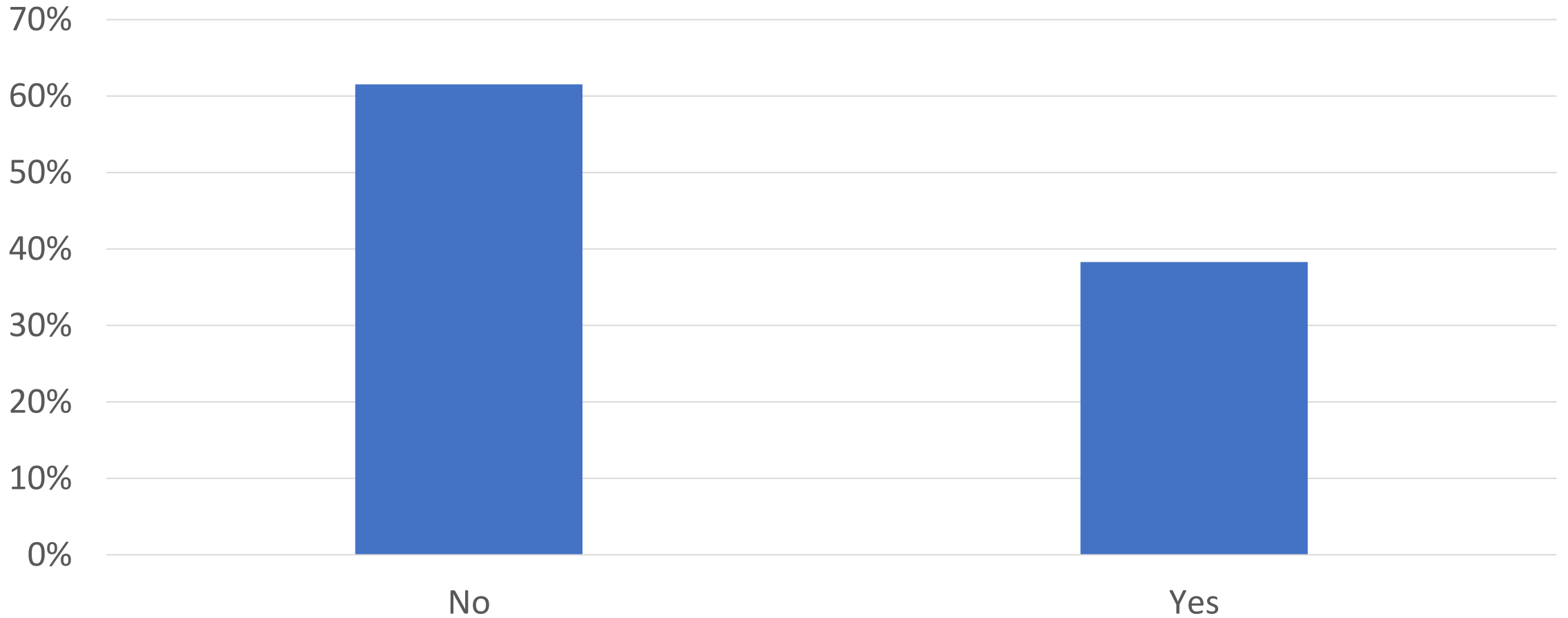
What is your RACIAL/ETHNIC background? Select all that apply (n=559)



Which of the following best describes the **COMMUNITY** in which you live? (n=559)



Have you provided respite care in the PAST? (n=559)





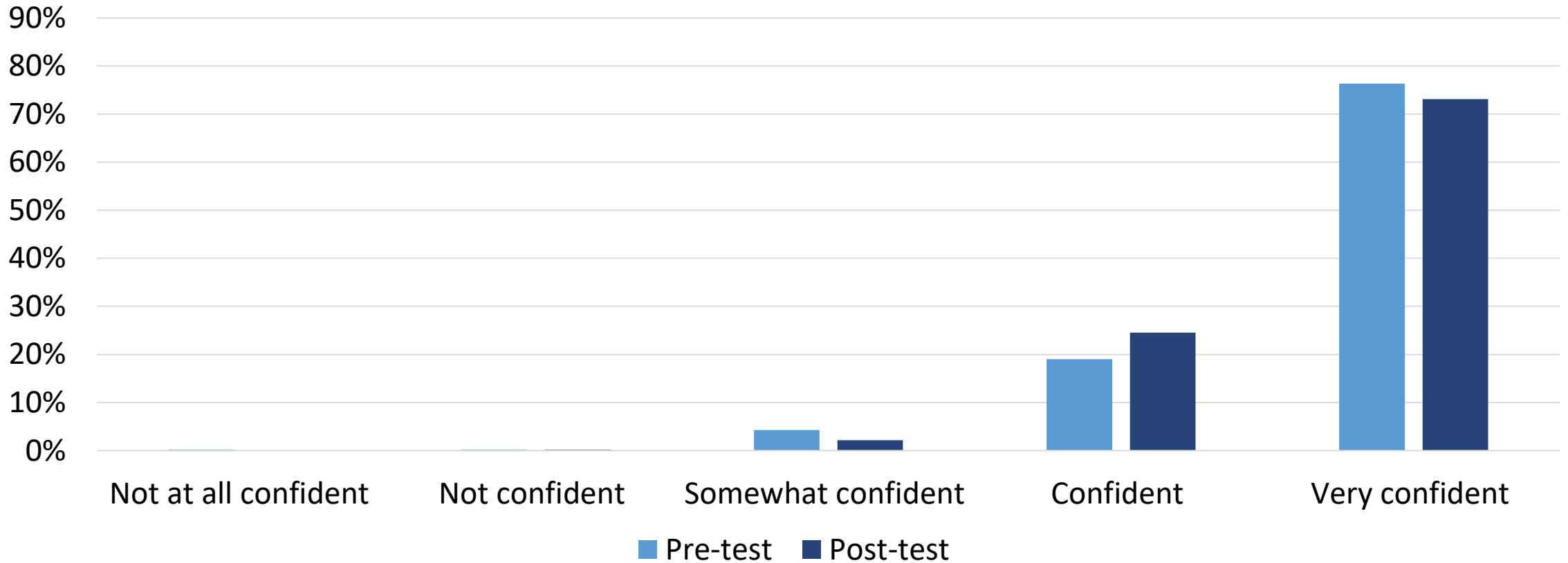
Learner Test Scores

	n=559
Pre-test	66%
Post-test	75%
Average number tries to get 100%	3.04

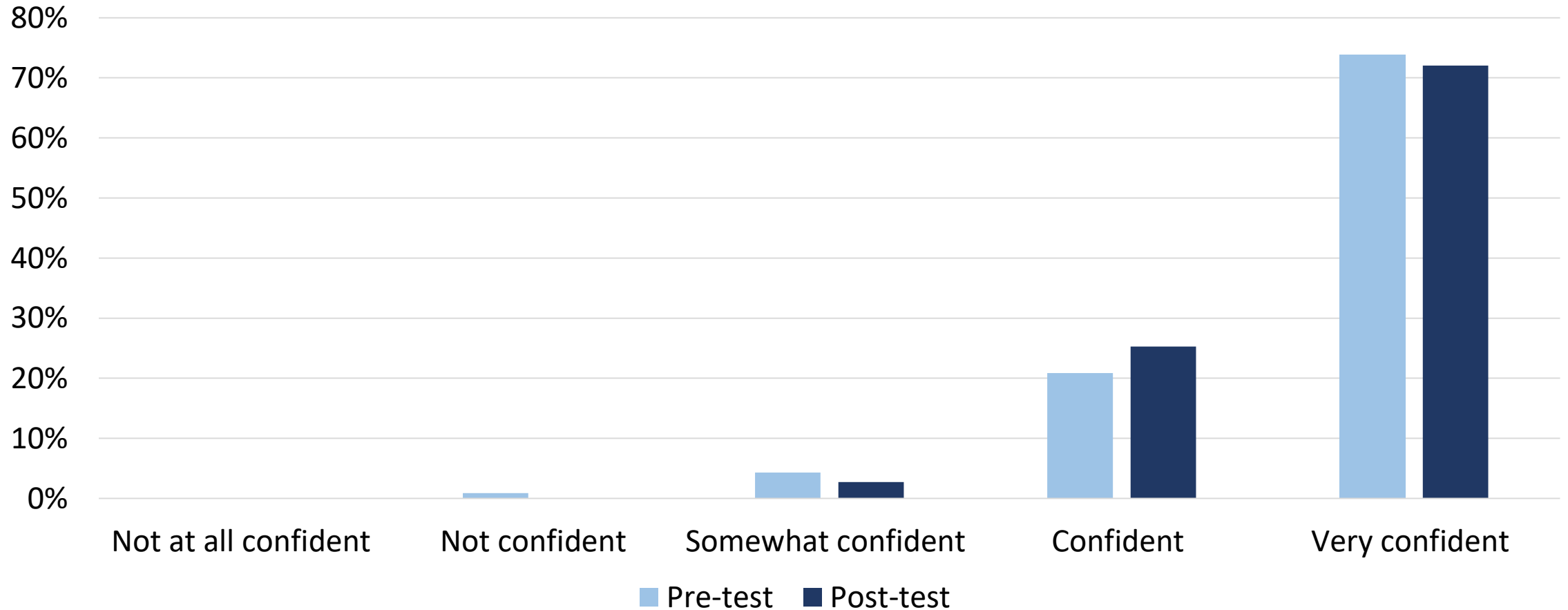
Learner Confidence

Participants who completed the
RCPT between January-
December 2022

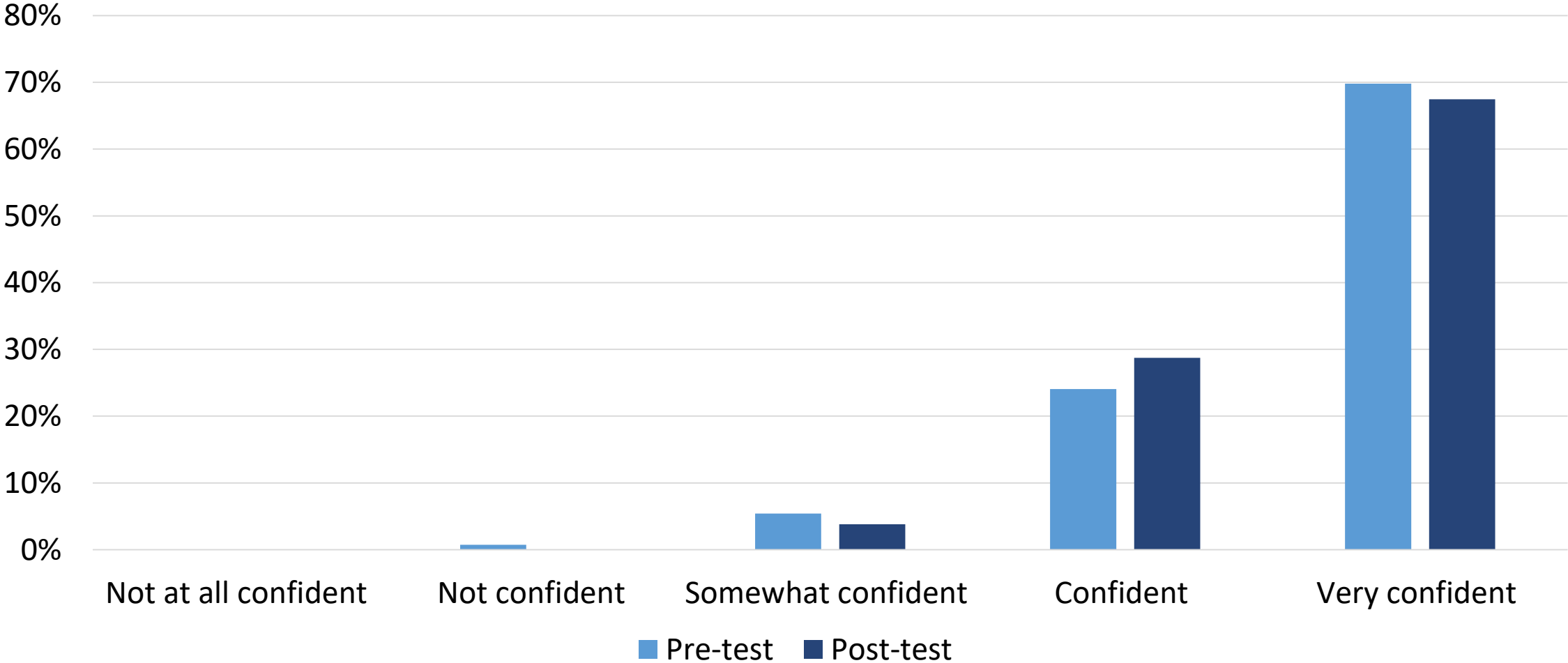
**How CONFIDENT are you in your ability in understanding the importance of providing meaningful short breaks for family caregivers to promote the well-being of family caregivers, care recipients, and other family members?
(n=559)**



How CONFIDENT are you in your ability in providing care that is focused on, and respectful of, family caregivers' and care recipients' preferences, needs, values, and goals for respite? (n=559)

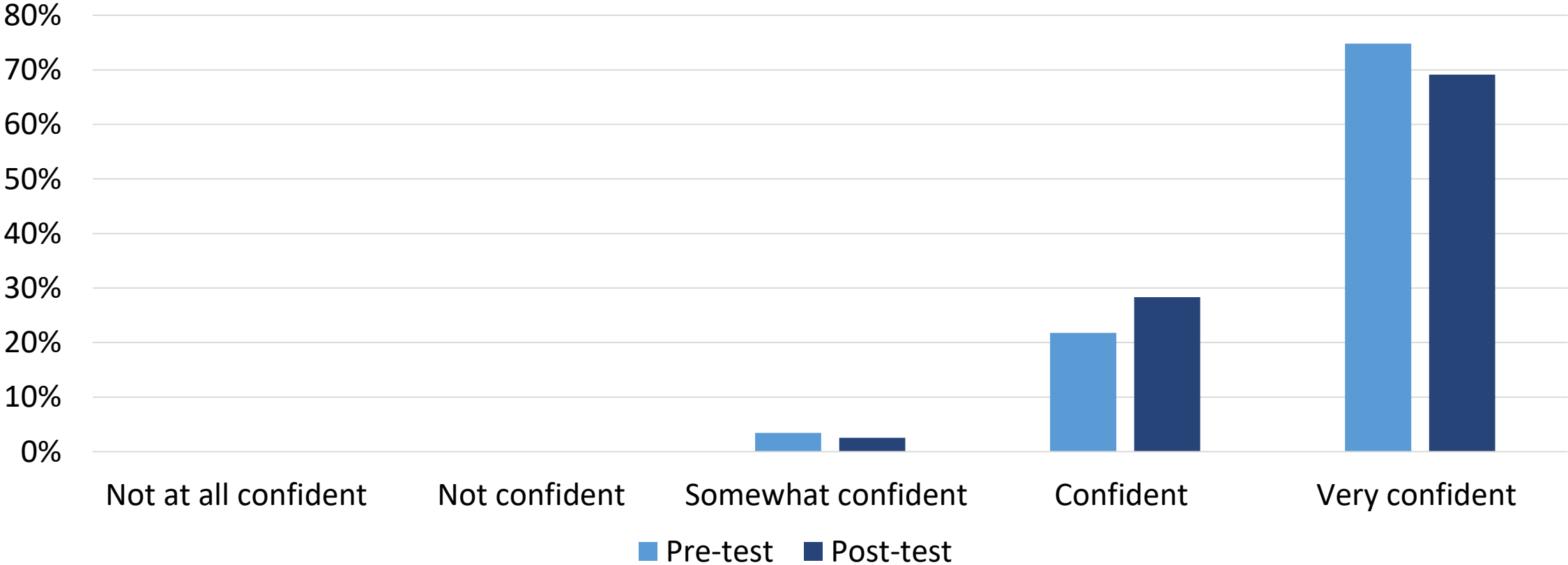


How CONFIDENT are you in your ability in understanding and providing services and supports that are *respectful*... (n=559)

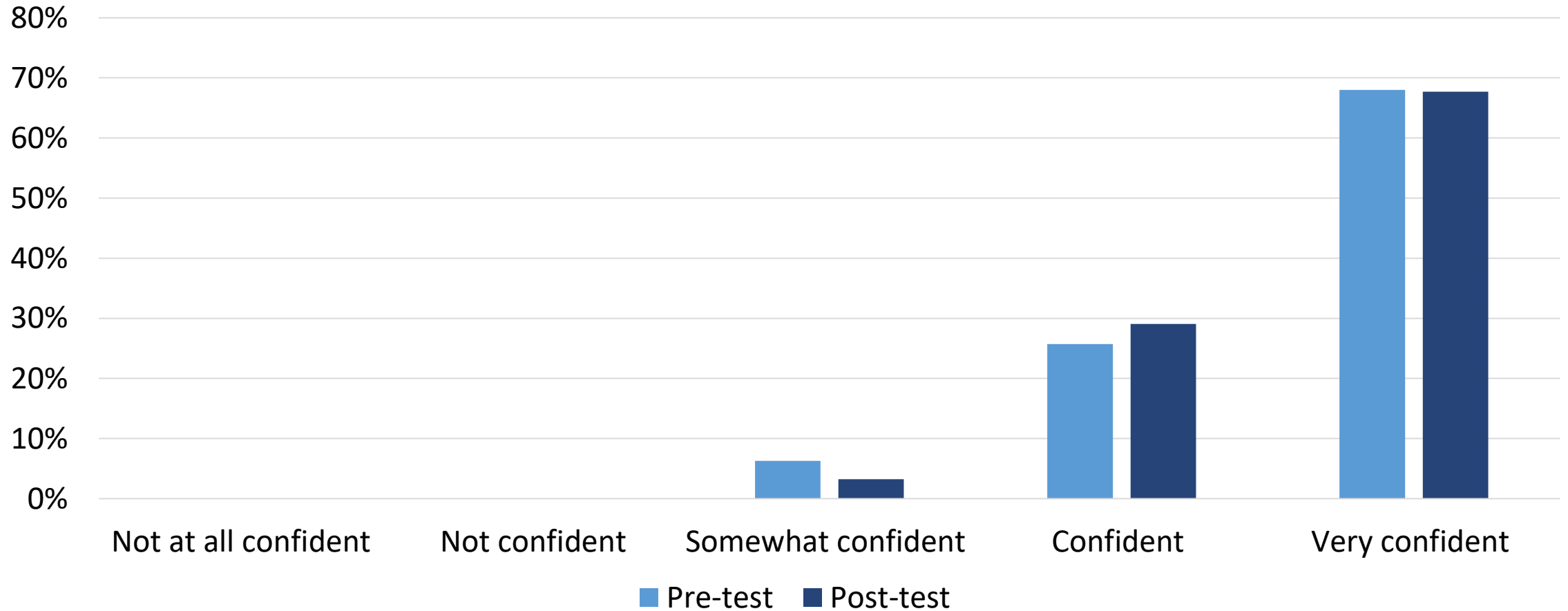


How CONFIDENT are you in your ability in building and maintaining **trusting relationships with family caregivers and care recipients through active listening and respectful verbal, non-verbal, and written communication...?**

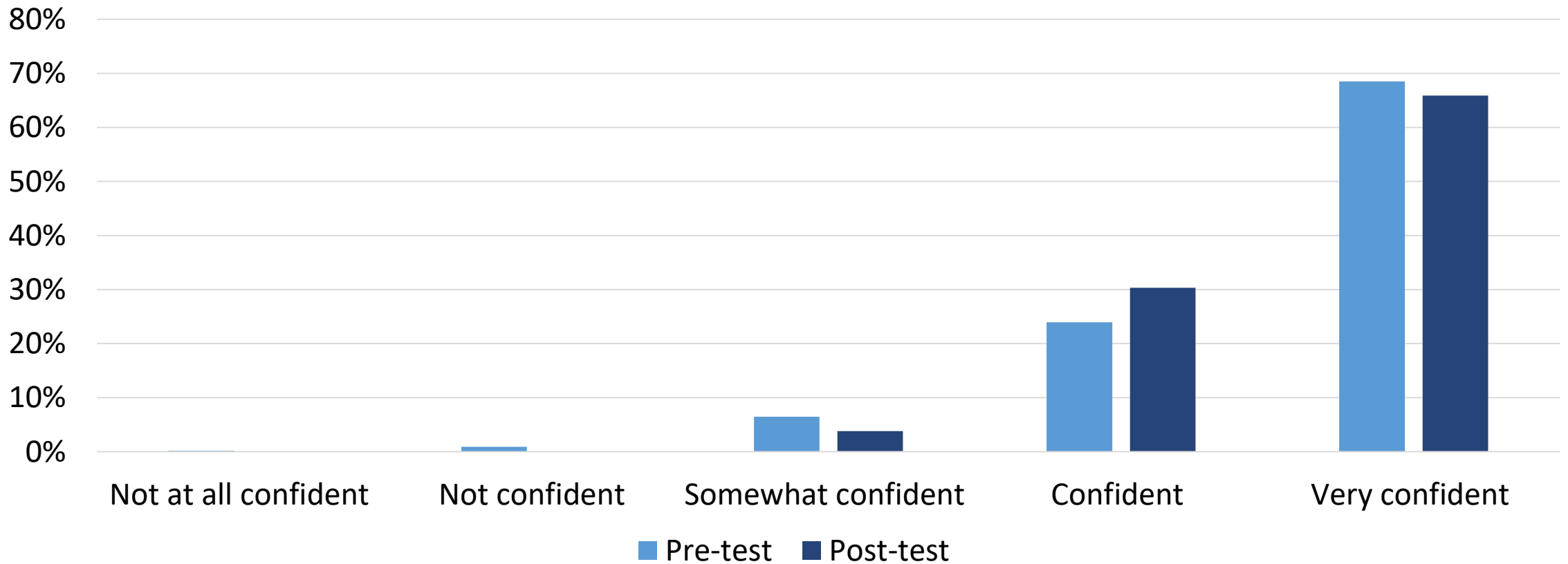
(n=559)



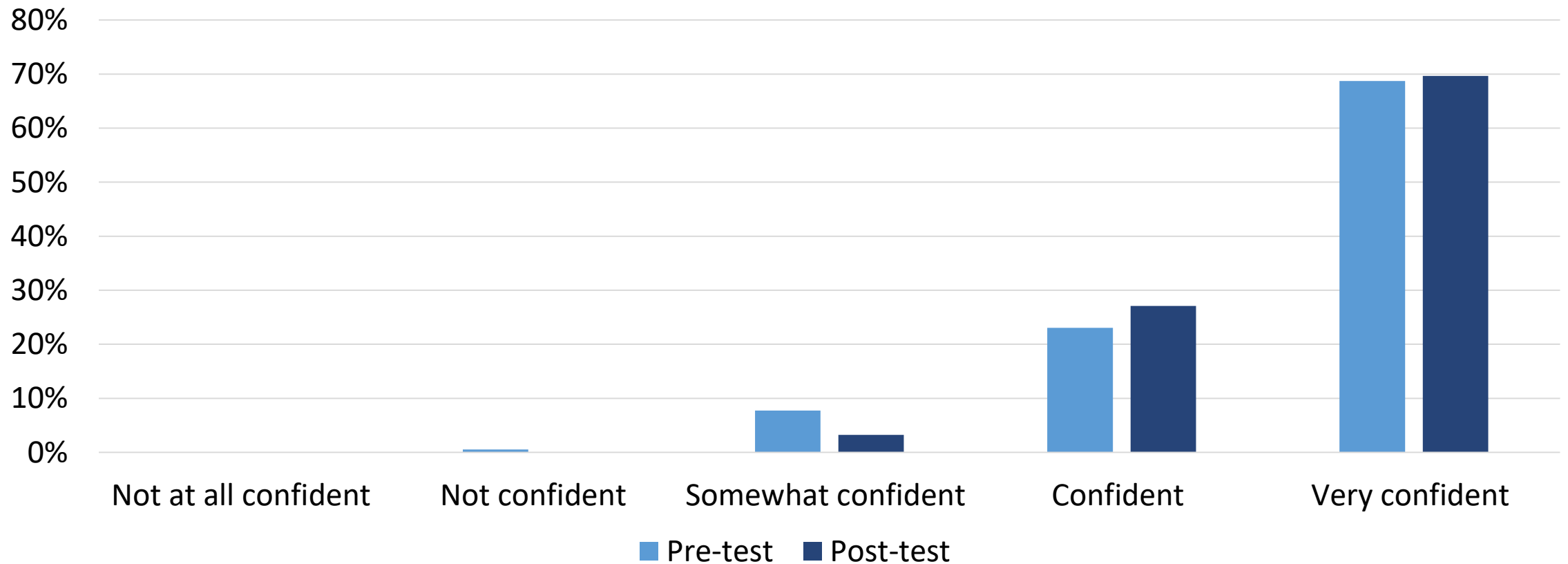
How CONFIDENT are you in your ability in supporting the physical health, functional ability, spiritual, and social-emotional well-being of care recipients based on...? (n=559)



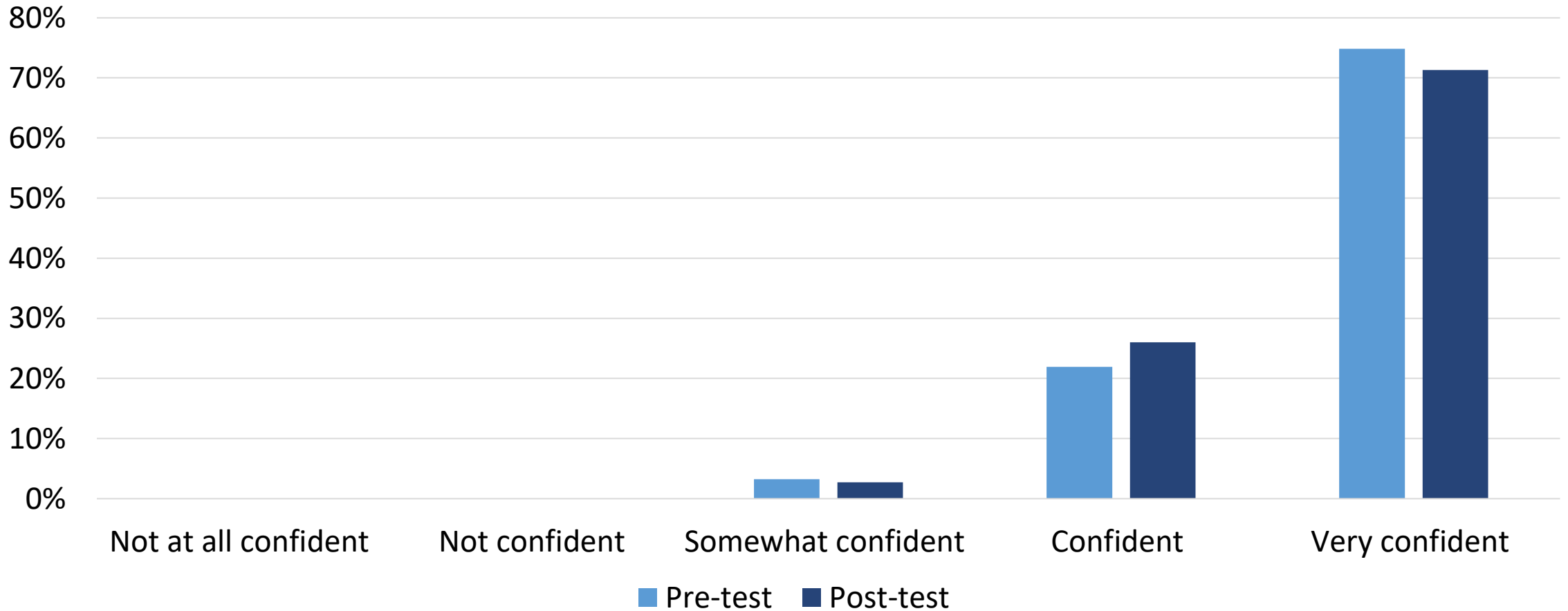
How CONFIDENT are you in your ability in helping protect care recipients from illness, injury, abuse, neglect, or other harm; understanding how to report incidents; and responding quickly and safely during emergency situations? (n=559)



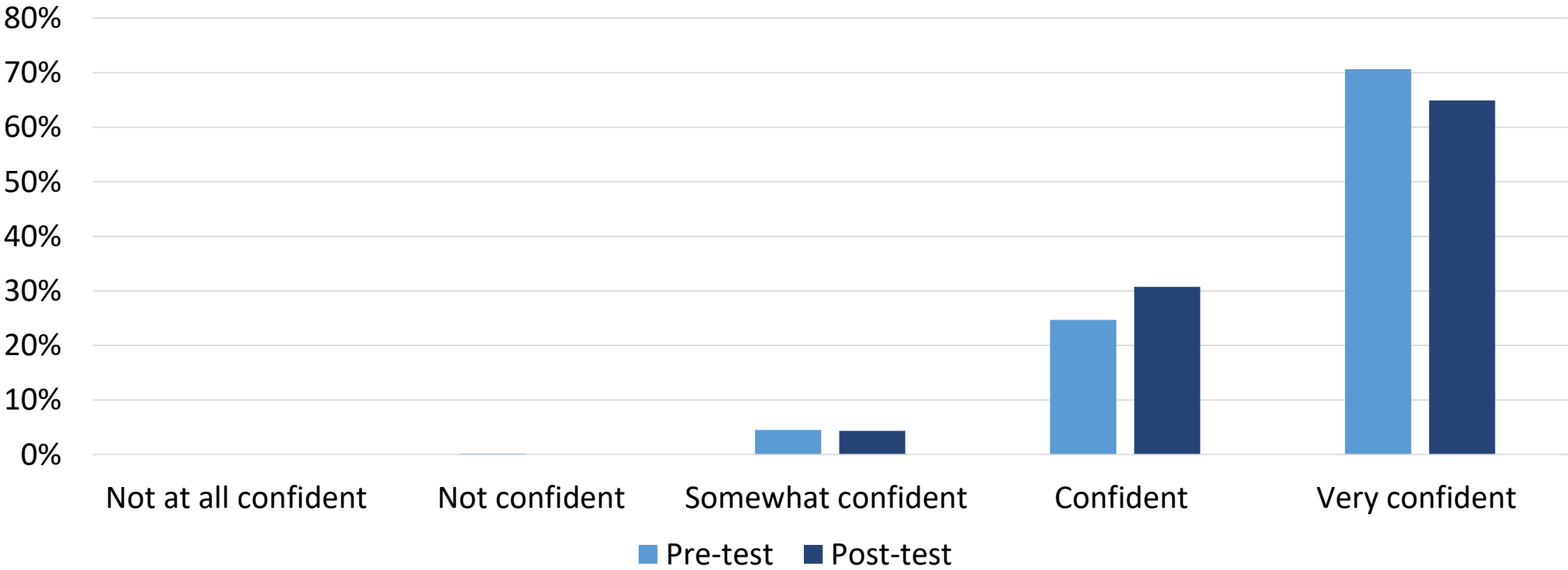
**How CONFIDENT are you in your ability in working with family caregivers and care recipients to explore, define, plan, and engage in appropriate and meaningful respite activities for care recipients?
(n=559)**



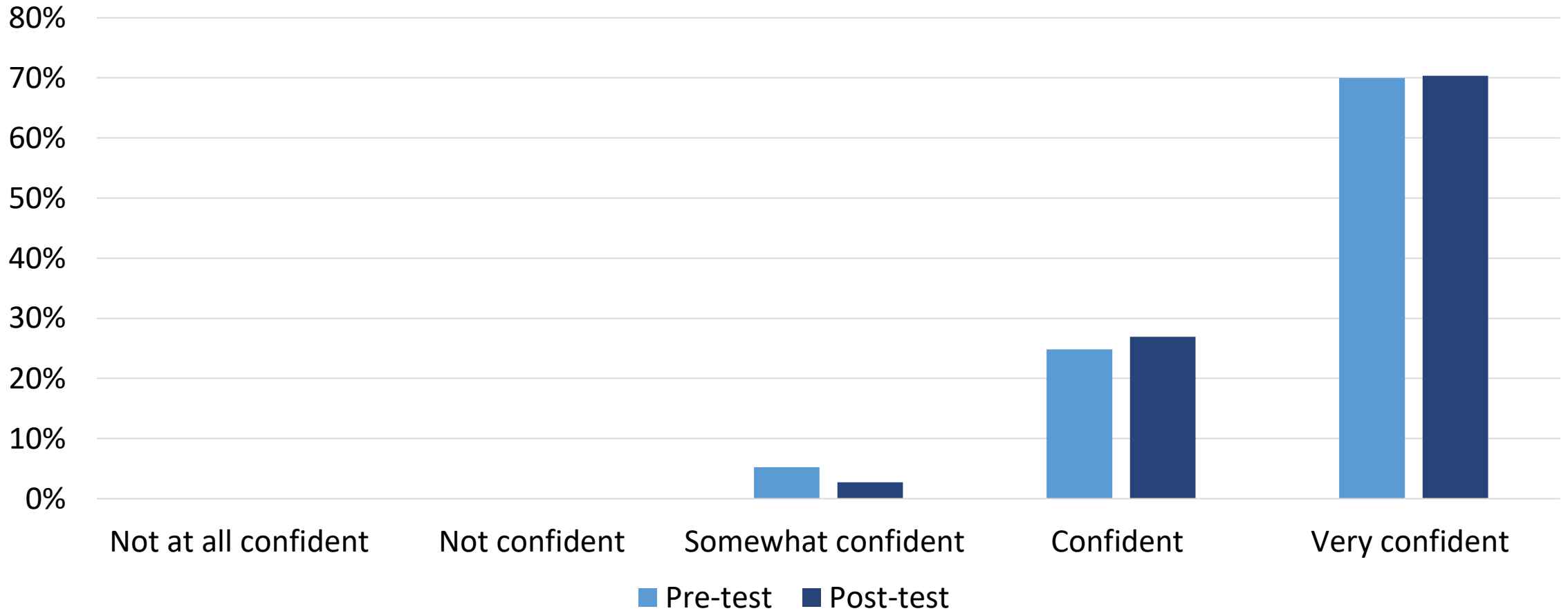
How CONFIDENT are you in your ability to work in an ethical and professional manner...?
(n=559)



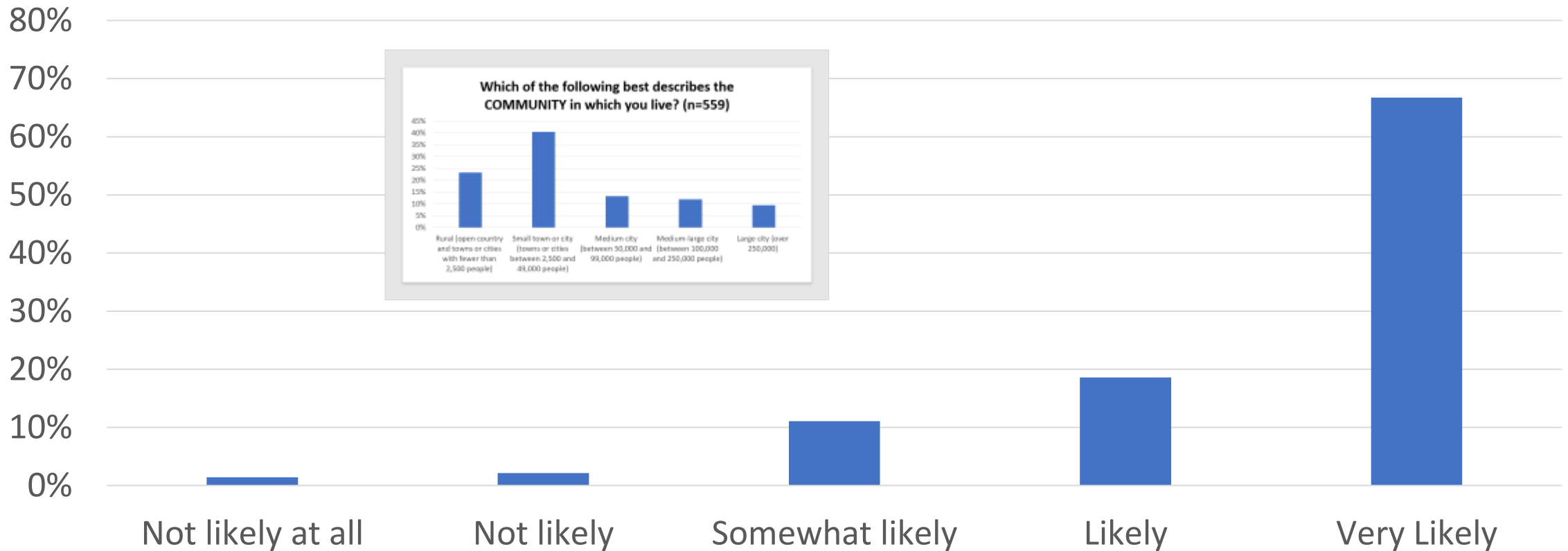
How CONFIDENT are you in your ability in **obtaining appropriate training based on the unique needs of care recipients and seeking opportunities for ongoing education and training?
(n=559)**



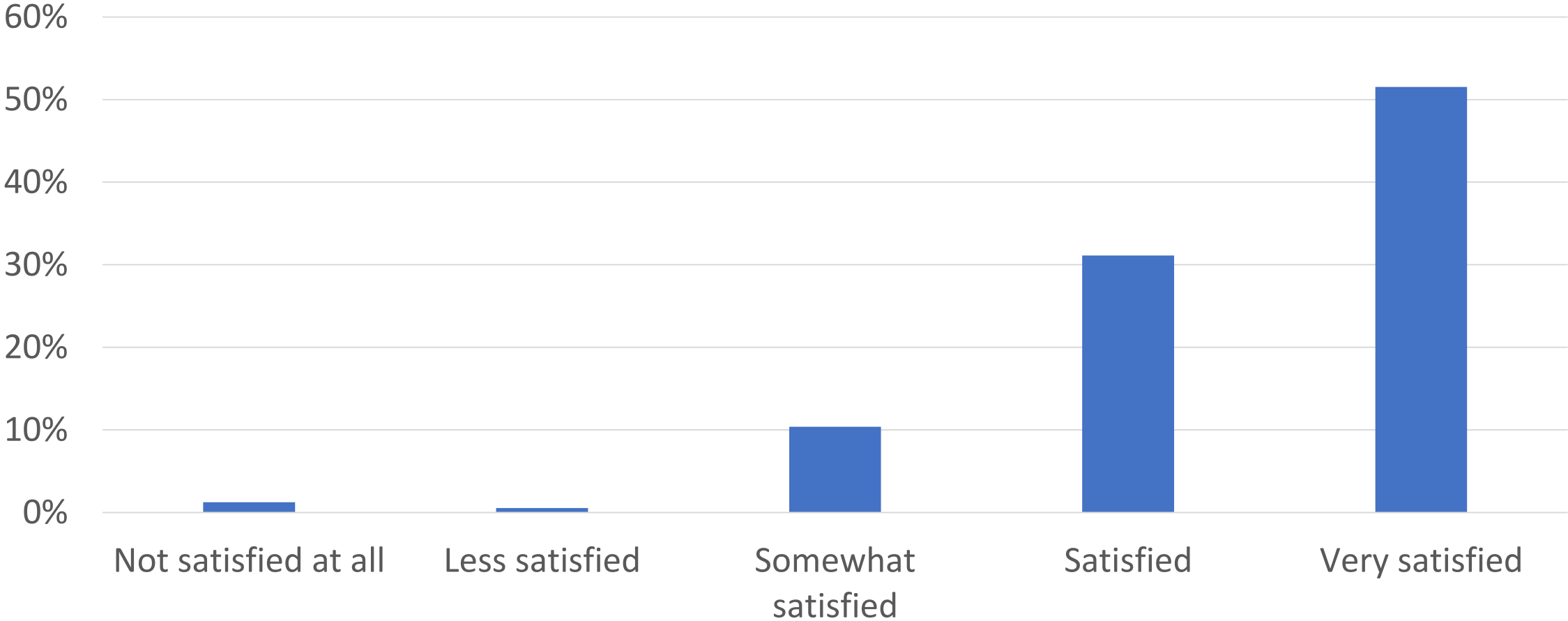
How CONFIDENT are you in your ability in recognizing the importance of selfcare and actively engages in practices that promote their own safety, health, and well-being? (n=559)



After completing the training, how likely are you to provide respite care in the NEXT 6 MONTHS? (n=559)



Overall, how SATISFIED are you with the Respite Care Provider Training? (n=559)



What is the MOST IMPORTANT thing you learned from the training?

- *“To be respectful and try and understand the situation from the client or family's point of view. also, to be compassionate and empathetic to the situation.”*
- *“The most important thing that I have learned was to stay calm during any situation and to be professional. Make sure that I know what the care recipients' needs and wants. Develop a relationship with the care recipient so that they will be comfortable enough to trust me. I will have to make sure that I have all safety rules and company rules in order to keep the care recipient safe at all cost.”*
- *“There is no one size fits all. There is something new to learn each day. It is important to continue to be proactive and to participate in continuing education.”*
- *“Self care is the most important part of respite care for everyone involved.”*

LEARNER INTERVIEWS



METHOD

An **interview guide** was structured to obtain feedback on the following:

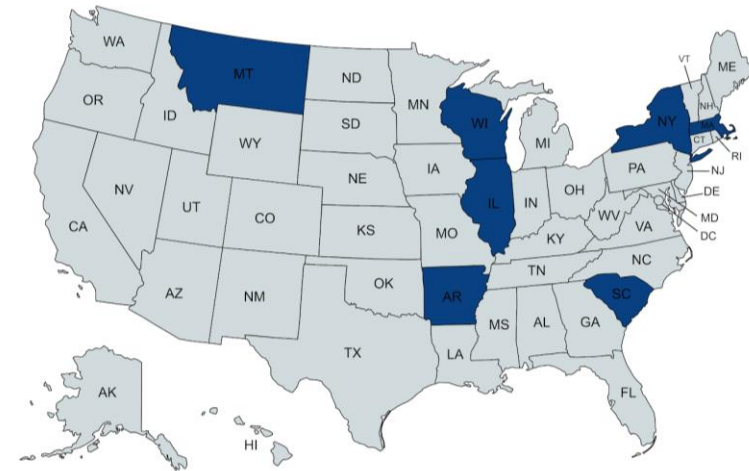
- Motivations for completing the training
- Impact of training on likelihood of starting/continuing/increasing respite care
- Strengths of the training
- Recommendations for improvements to the training
- Overall experiences and barriers as a respite provider
- Overall feedback related to the training

RECRUITMENT

- People who completed all modules of training were eligible to participate
- Recruitment conducted via email
- Interviews conducted in English via Zoom for a maximum of one hour
- Respondents received \$100 gift card

RESULTS

- 14 interviews completed from April-July 2023
- High no-show rate impacted interviewee pool
- Respondents from geographically diverse states



- Respondents represented a spectrum of experience providing respite care—some were brand new to the field and hadn't yet provided care and others had been respite care providers for years

Motivations for Completing the Training

Personal/career growth

- *“To learn more about respite care across the lifespan. I know a lot about the age I serve and personally with my sister. But I didn't know much about respite for specifically the older population.”*

Fulfill a requirement

- *“Required...but thought it would be good experience that is applicable to the field I'm going into. I hadn't heard of respite care prior to this point, so thought it'd be a great opportunity.”*

Skills refresher

- *“Had wanted to get a refresher--hadn't been a CNA in a while, hadn't done by the books stuff (that Medicaid would look at). Wanted to make sure there wasn't anything new. Easier to get Medicaid compensation if I had the training.”*

Impact of training on likelihood of providing respite care

- Most indicated it was **very likely** they would begin or continue providing respite care in the next six months
- Most indicated the training **positively impacted** their confidence in providing respite care

“I felt more qualified now that I had an official training. Prior to the training, I felt that I didn't have the same qualifications”

“[The training] impacted my confidence in the way that I already knew a lot of the things-the training helped me have the assurance that I had a lot of what I already needed to know. If I hadn't provided respite care already, it would have helped since it provided a great overview across the lifespan.”

Strengths of Training



Content

Focus on care across the lifespan was helpful and relevant

Communication an important topic across many modules

“The biggest thing is how to communicate with the family about the family--making sure it is open, that I'm doing exactly what I should be doing when it comes to their health. Communication [is the most important thing I learned from the training].”



Accessibility

Appreciated the online, free, self-paced format

“Previously [to the offering of the training] there was a 4-5 hour live course on Saturday morning-- people would complain about it and the dense information. When I did it online, I was able to comprehend content more easily than having to take it all in at once.”



Design

Different modalities of learning were creative and engaging

“The videos, scenarios, resources I could go back to. Especially the scenarios--it made me think outside the box. I could see everybody's side and can think through the best ways to be respectful to the family unit and provide care to the individual. Too often, the individual receiving care isn't involved in their own care plan.”

Recommendations for Improvements

Desire for
additional training

“A little more on the individuals with disabilities and mental illness. In respite care, a lot of focus is on the elderly. But we have a lot of individuals with disabilities and dual diagnosis and mental health issues and family members need that break as well.”

Additional information on the logistics of becoming a respite care provider and how to get reimbursed by Medicaid for the work

“Provide detailed instructions on the process for becoming a respite provider and getting on to the registry prior to the training. Make it easy for those who just completed the training to take the next step. You don't want to lose prospective caregivers. And timeline for recertification. I want to see more trained respite care workers out there--it's more than just babysitting, it's about engagement.”

Overall Experiences and Barriers

Barriers

Stress of working in a field with much more need than providers
Injuries sustained while providing care
Navigating financial/insurance logistics

Positive experiences

Rewarding field full of passionate providers
“So far I’m really liking [the respite care field]. I’ve become family with the person I’m caring for. I do my job but it’s not like a clock in/clock out situation--it’s like come in and do something for my little sis.”

Overall Feedback

- All respondents would “recommend” or “highly recommend” the training

“Everybody should have it to start with, it should be a required course.”

“I do recommend [the training] often”

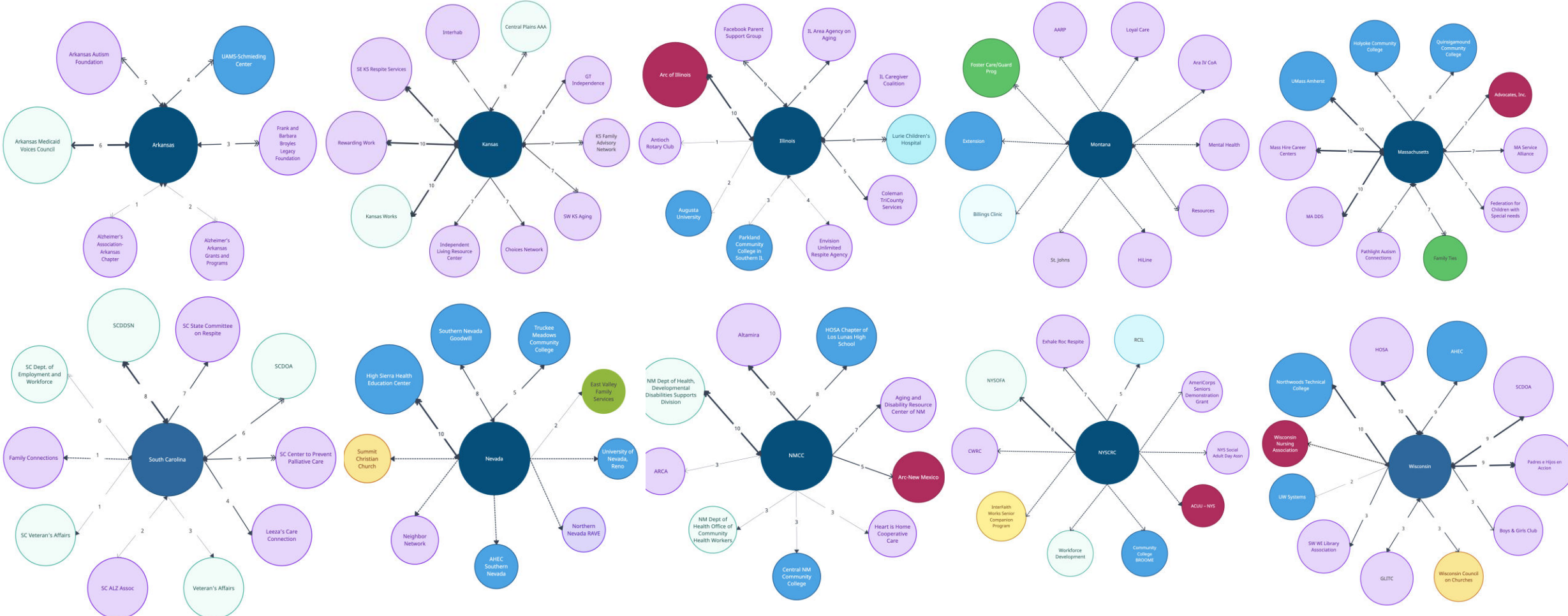
“Overall, it was an extremely good training--the information wasn't redundant, the scenarios were great and I learned a lot and I incorporated some of the things I learned into my own job.”

“Yes. I have already told another person about [the training]--in the nail salon!”

Recommendations from Learners

- **Advertise** the training more widely, with a focus on social media networks
- Provide more concrete linkages between the training and state/local respite care organizations that can help people **navigate** becoming respite care providers
- Keep the module format and content organization the same, including the self-paced design and **free** cost
- Add an optional **Medicaid reimbursement navigation** component to the training
- Add on a **refresher** training

Social Network Analysis & Partner Mapping



METHOD

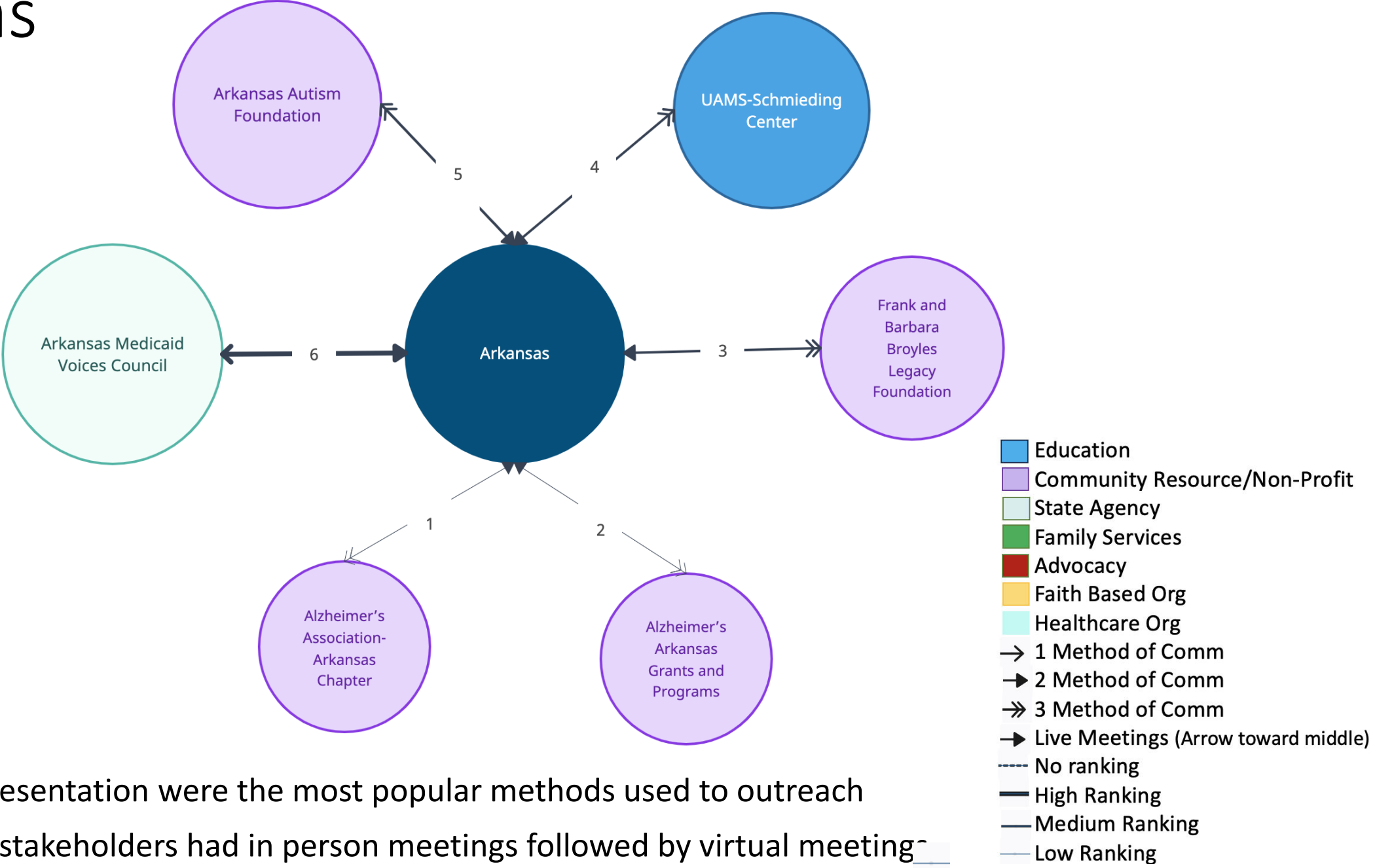
- Agencies were asked to complete a **worksheet** to identify partners they outreached to as part of the marketing and recruitment for the pilot project
- Agencies **described** type of partner, outreach methods, frequency of outreach, if additional connections were made, and rated helpfulness of partner (1=least to 10=most)
- Worksheets used to create sociograms or “partner maps” that provide **graphic representation** of social links, including strength and value of relationships

Social Network Analysis Worksheet

Complete the following table for **at least 10 stakeholders** (individuals, organizations, businesses, groups, etc....) that you outreached to as part of the marketing and recruitment for the pilot project. This information will be used to conduct a social network analysis that results in the creation of a sociogram or “partner map” that provides graphic representation of social links, including the strength and value of those relationships that will help assess the success of the recruitment campaign strategy.

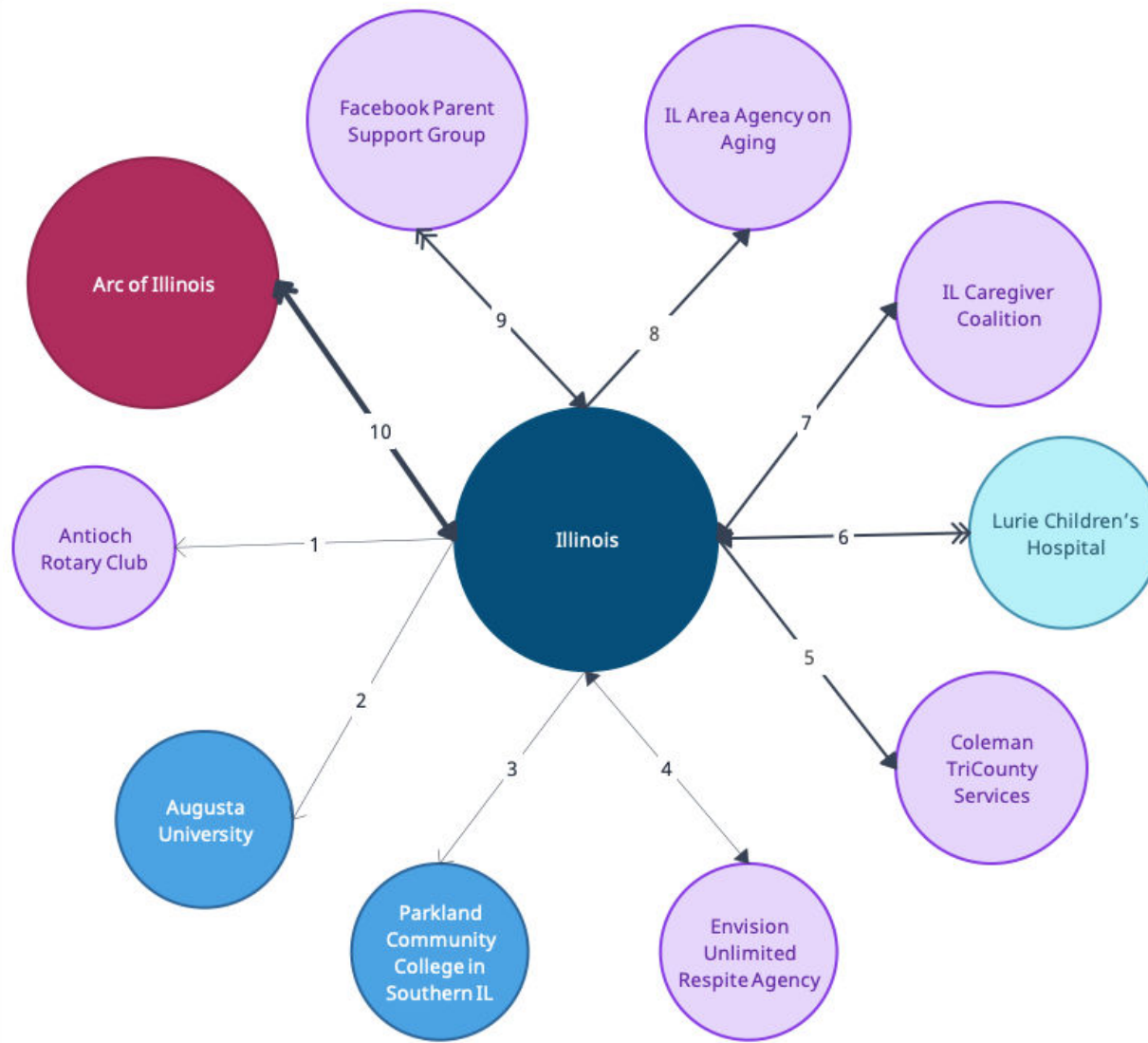
Stakeholder NAME	Brief DESCRIPTION of stakeholder (include link to website, if applicable)	What METHOD(s) did you use to outreach to this stakeholder? (Phone call, email, webinar, fliers, presentation, newsletter, virtual or in-person meeting, etc...)	How OFTEN did you outreach to this stakeholder? (once, twice, quarterly, monthly, weekly, etc...)	Did outreach to this stakeholder result in any additional CONNECTIONS to other stakeholders? If so, please describe.	Please RANK on a scale of 1 to 10 (or more if you include more than 10 stakeholders) how helpful this stakeholder was in advancing your marketing and recruitment efforts. Please describe. 1 = Least helpful 10 = Most helpful

Arkansas



- Webinar and presentation were the most popular methods used to outreach
- Highest ranked stakeholders had in person meetings followed by virtual meeting

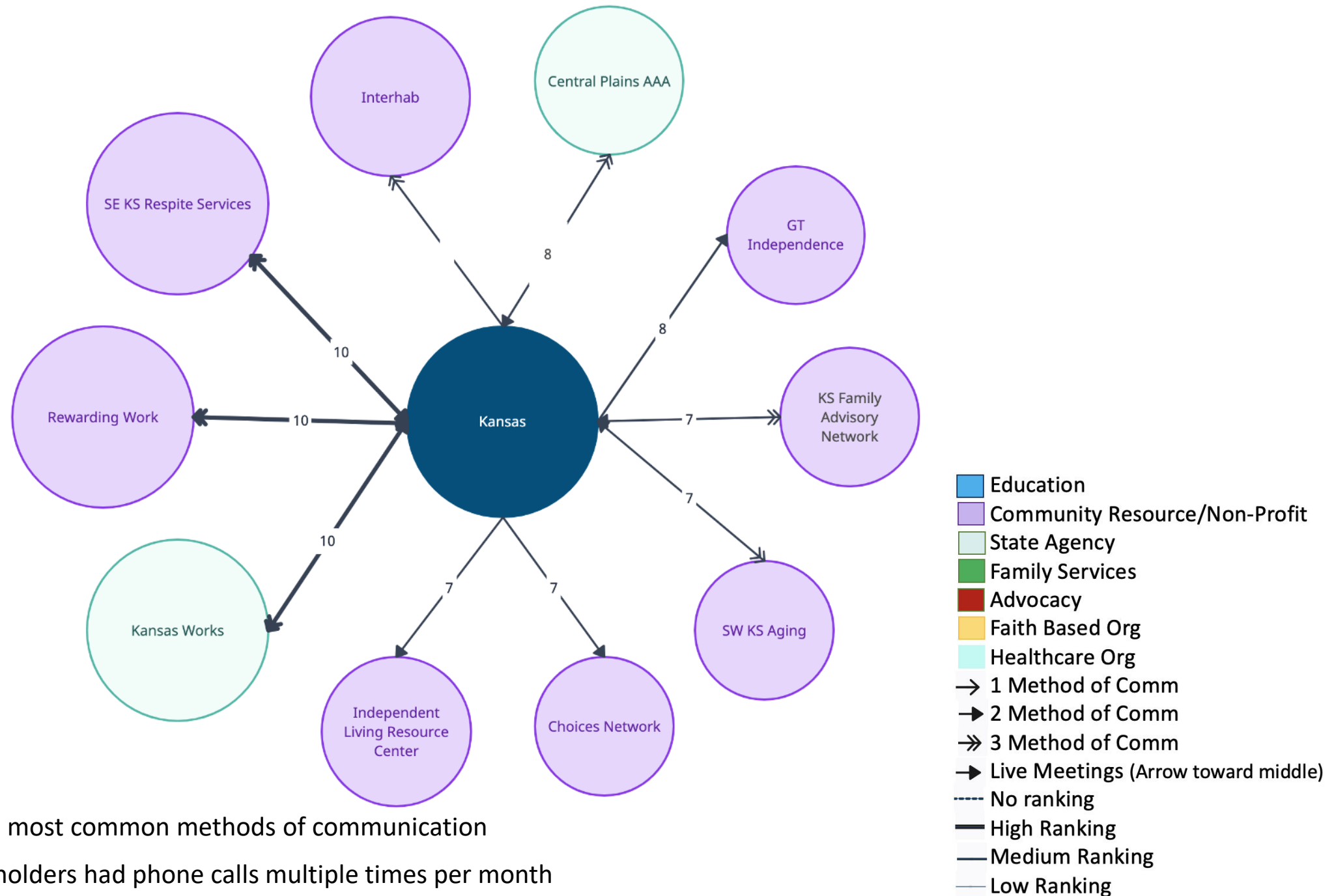
Illinois



- Education
- Community Resource/Non-Profit
- State Agency
- Family Services
- Advocacy
- Faith Based Org
- Healthcare Org
- 1 Method of Comm
- ➔ 2 Method of Comm
- ➞ 3 Method of Comm
- ➞ Live Meetings (Arrow toward middle)
- No ranking
- High Ranking
- Medium Ranking
- Low Ranking

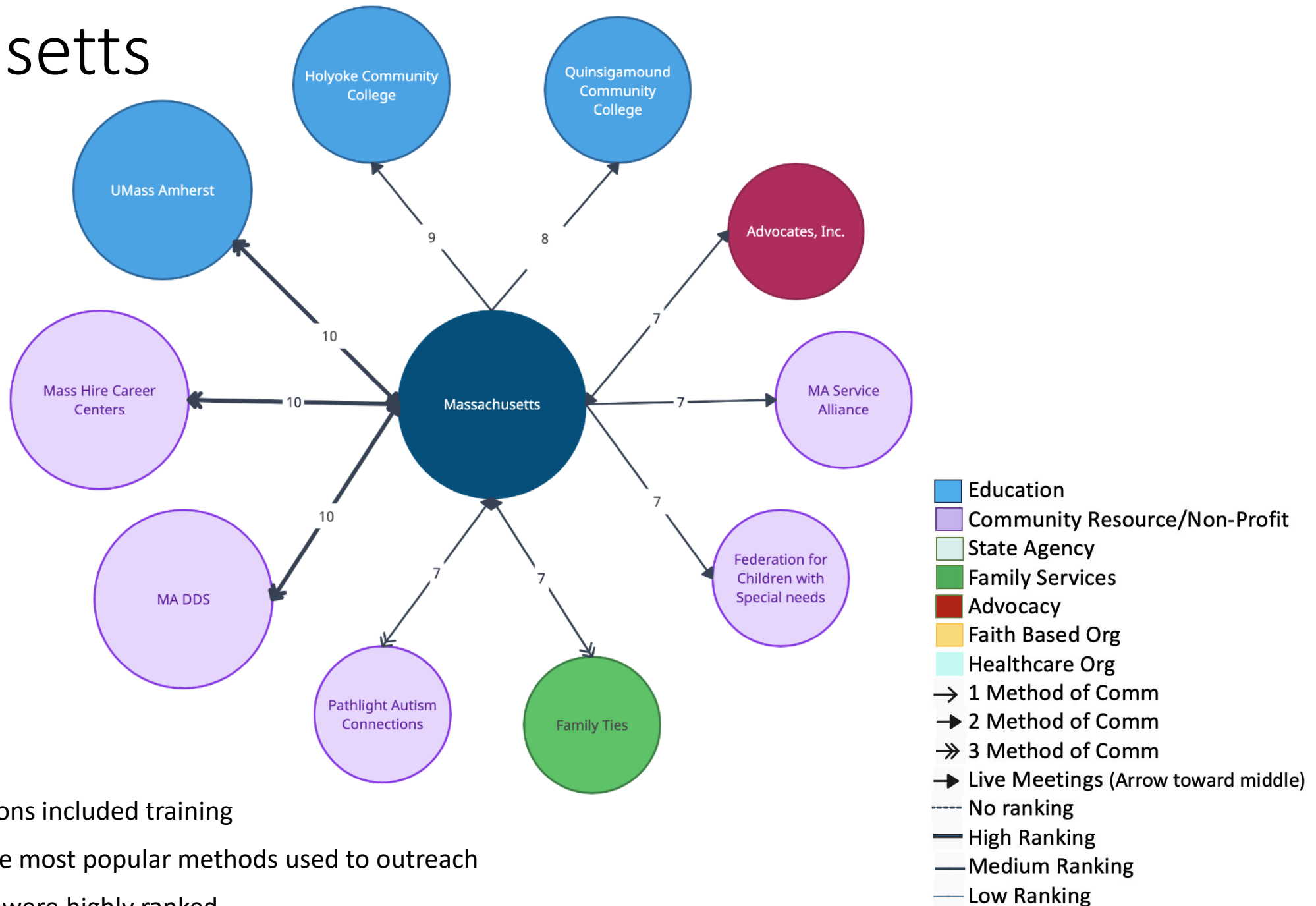
- Email was the most popular methods used to outreach
- Highest ranked stakeholders had phone or live meetings
- Only state to have Facebook group as Stakeholder

Kansas



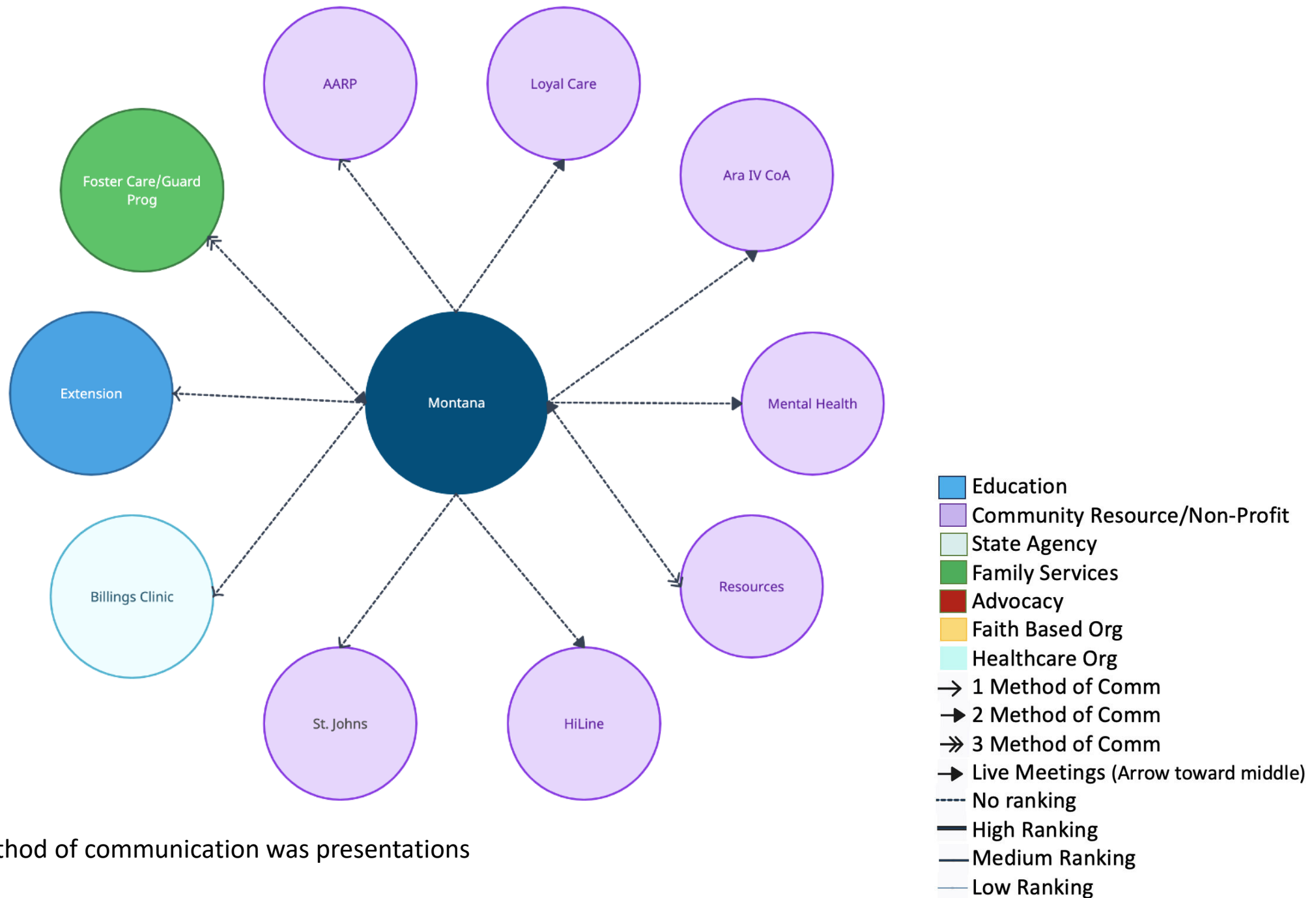
- Email and flyers were most common methods of communication
- Highest ranked stakeholders had phone calls multiple times per month

Massachusetts



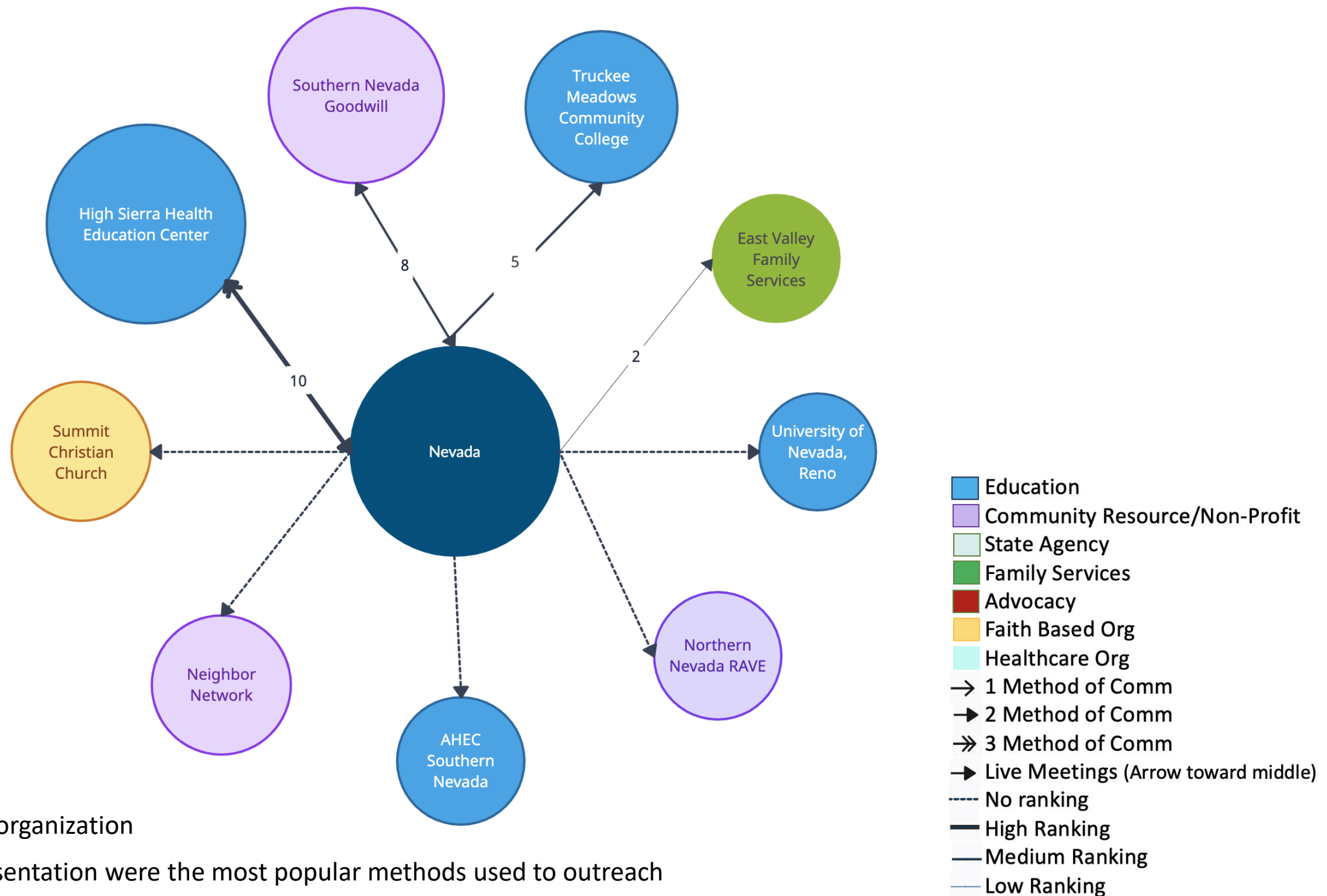
- Highest rated organizations included training
- Email and flyers were the most popular methods used to outreach
- Education organizations were highly ranked

Montana



- The most common method of communication was presentations

Nevada



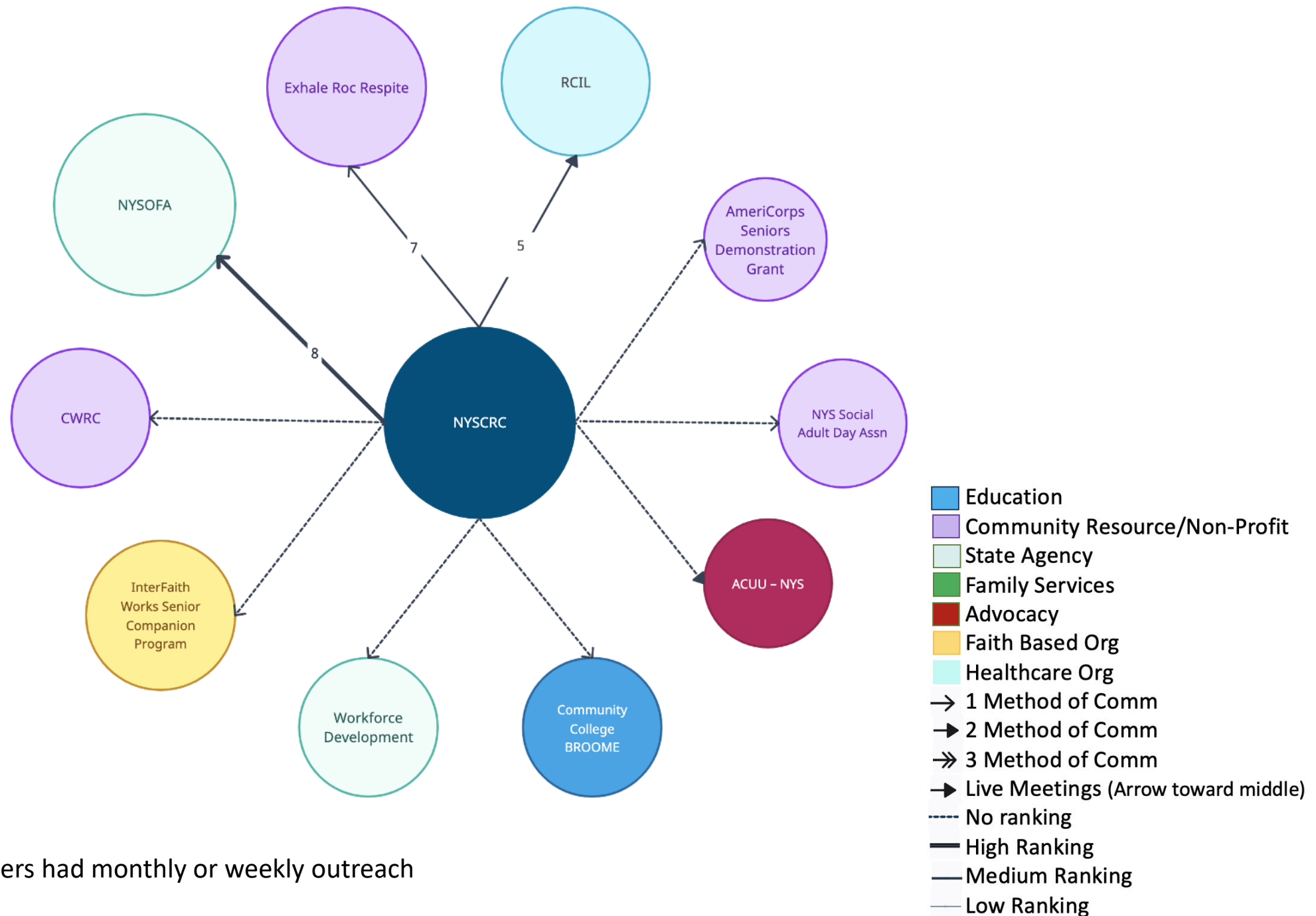
- Engaged faith-based organization
- Email and virtual presentation were the most popular methods used to outreach

New Mexico



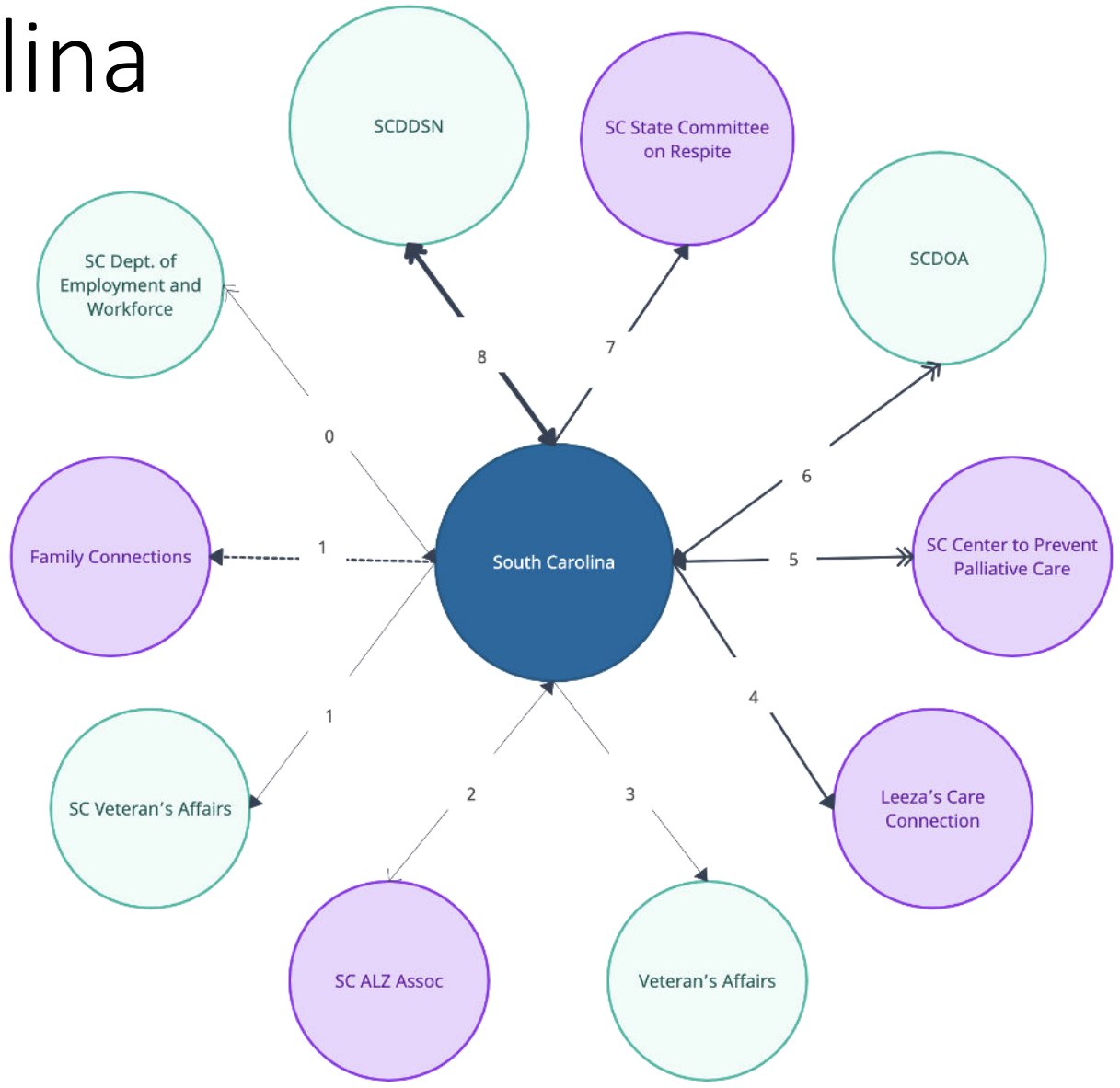
- Highest rated organization included weekly meetings
- Email and newsletter were the most popular methods used to outreach
- Engaged multiple state agency stakeholders

New York



- Multiple grant partners
- Highest ranked stakeholders had monthly or weekly outreach

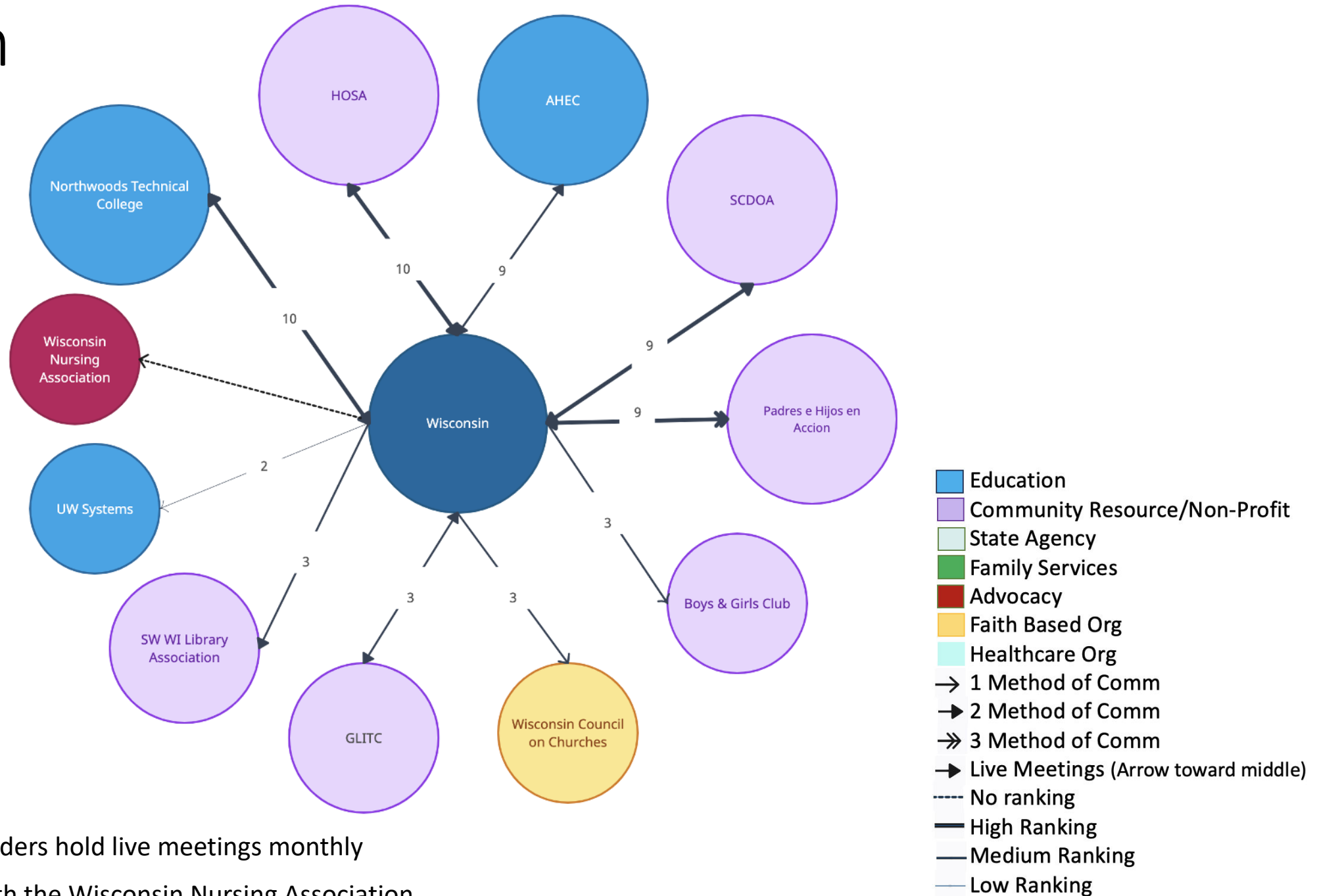
South Carolina



- Education
- Community Resource/Non-Profit
- State Agency
- Family Services
- Advocacy
- Faith Based Org
- Healthcare Org
- 1 Method of Comm
- 2 Method of Comm
- 3 Method of Comm
- Live Meetings (Arrow toward middle)
- No ranking
- High Ranking
- Medium Ranking
- Low Ranking

- Utilized multiple government agencies
- Highest ranked stakeholders hold live meetings monthly

Wisconsin



- Highest ranked stakeholders hold live meetings monthly
- Marketing campaign with the Wisconsin Nursing Association

Findings Across ALL States



**HIGHEST RANKED
STAKEHOLDERS HOLD
LIVE MEETINGS AT LEAST
MONTHLY**



**EDUCATION AND
COMMUNITY
RESOURCE/NON-PROFIT
WERE MOST COMMON
STAKEHOLDERS**



**HIGHEST RANKED
STAKEHOLDERS HAD 3
METHODS OF
COMMUNICATION**

AGENCY EVALUATION

Agencies were most successful when they:

- Had **dedicated staff** time to work on marketing and outreach on an ongoing basis
- Established and maintained **strong relationships** with key collaborators
- Had a **provider registry** or a way to connect learners to opportunities to provide respite

**FOR MORE
INFORMATION
AND TO TAKE
THE TRAINING**



<https://archrespite.org/provider-resources/provider-training-resources/#TrainingAccordion-1>



CLICK ON THE ICONS BELOW TO VIEW TOOLKIT CONTENTS



National Respite Care Provider Training Toolkit

A complete guide to help support the recruitment and training of respite care providers



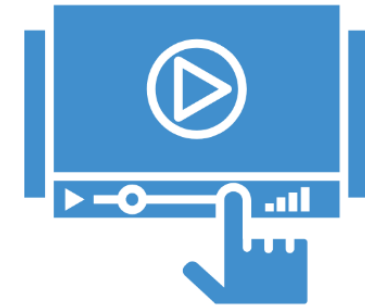
Executive Summary

Learn more about the Respite Provider Recruitment, Training, and Retention Project.



Assessing Readiness

Questions to Consider



Course Content

Course Content and Helpful Tips



Marketing & Recruitment

Effective Strategies



Evaluation

Evaluation Methods and Dissemination

- Designed to help organizations replicate the National Respite Care Provider Training

HOW TO ACCESS THE NRCPT TOOLKIT

States, providers, and other entities are encouraged to utilize the **FREE online NRCPT Toolkit**.

To request access to the Toolkit that contains the training curriculum, sample recruitment strategies, and how to implement them, you must first complete a form that includes **Terms of Conditions of Use**.

Those making a request to access the NRCPT Toolkit must have **authority** to sign off on the Terms of Conditions for their organization or agency.

Once the form is submitted and approved, **a link will be sent** to the web-based toolkit.

National Respite Care Provider Training (NRCPT) Toolkit Request Form

B I U  

To request access to the FREE online NRCPT Toolkit, please complete the following form. Your request will be reviewed and, if approved, you will receive an email confirmation with a link to access the online Toolkit that includes a link to the Training Curriculum. The review may take up to three business days. We appreciate your patience!

Email *

Valid email

This form is collecting emails. [Change settings](#)

Today's Date *

Month, day, year



What is your **NAME**? *

Short answer text

What is your current **ROLE**? *

Short answer text

If applicable, what is the name of your **agency, corporation, government, entity, or organization**? *

Short answer text

Briefly describe **WHY** you are requesting access to the NRCPT Replication Toolkit. *

Long answer text

Do you have the authority assigned by your agency to sign off on both the Terms of Agreement below and the [Terms and Conditions of Use](#) (available at this link to read). *

NRCPT TOOLKIT REQUEST FORM



bit.ly/ReplicationToolkitRequest

Since the release of the Replication Toolkit, we have received over 156 requests to access the Replication Toolkit!


HOW TO PROMOTE THE NRCPT TOOLKIT

NRCPT Promotional Rack Card

Contains a link and QR code to a Request Form that must be submitted to access the toolkit.

Rack Cards are available from the Respite Care Association of Wisconsin for FREE to distribute at in-person events

National Respite Care



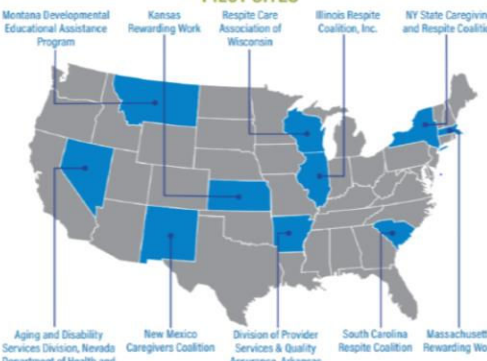
Provider Training

The National Respite Care Provider Training (NRCPT), a new competency-based online training for entry-level respite providers, is available to learners at no charge.

The curriculum was piloted in 10 states and evaluated. The evaluation found that learner knowledge related to core competencies improved after completing the training. Also, after completion, 70 % of learners indicated they are very likely to provide respite in the next six months.

A newly developed recruitment campaign was also developed and evaluated to monitor its effectiveness and reach.

PILOT SITES



Montana Developmental Educational Assistance Program
Kansas Rewarding Work
Respite Care Association of Wisconsin
Illinois Respite Coalition, Inc.
NY State Caregiving and Respite Coalition
Aging and Disability Services Division, Nevada Department of Health and Human Services
New Mexico Caregivers Coalition
Division of Provider Services & Quality Assurance, Arkansas Department of Human Services
South Carolina Respite Coalition
Massachusetts Rewarding Work

National Respite Care Provider Training


Core Competencies

An expert workgroup conducted an extensive review of existing core competencies and evidence-based frameworks developed by national and state organizations, governmental entities, and universities for training curriculums for direct support professionals and respite providers. The workgroup then identified core competencies specific to respite providers. The training curriculum meets this set of nationally recognized core competencies.

Project Evaluation

The pilot project was evaluated using a multi-layered approach that involved individual learners, agency, and overall project data collection. The RE-AIM Framework was used to help guide our overall project evaluation.

NRCPT Toolkit Request



States, providers, and other entities are encouraged to utilize the **FREE** online NRCPT Toolkit. To request access to the Toolkit, complete the NRCPT Toolkit Request Form by scanning the QR code.

SCAN HERE

You can also request access to the Toolkit by visiting: bit.ly/ReplicationToolkitRequest

For more information, please contact: info@respiteprovidertraining.com

Next Steps

- Received funding from ACL to strengthen and advance the NRCPT
- Project Partners: RCAW, ARCH, NASHP, PHI, and Ujima United

PROJECT OBJECTIVES

- Support **greater uptake and use** of the NRCPT in new and emerging respite service delivery areas (e.g., states and local communities), nationwide
- Develop and test **approaches for connecting** trained providers to family caregivers and those they support, across the age and disability spectrum
- Develop, assess, and implement **methods for retaining respite providers**, including opportunities for career advancement and upward mobility
- Adapt the NRCPT for use **among limited English-speaking populations**, for whom career options are often limited
- Develop a framework for establishing a **base of evidence** for the effectiveness of the NRCPT



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Lifespan Respite Technical Assistance Center

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