



Lifespan Respite Sustainability Retreat II – August 14-15, 2019

Final Report

Thomas V. Caprio, MD, MPH, MS



Retreat Partners/Participants:

New York State Office for the Aging (NYSOFA)

New York State Caregiving and Respite Coalition (NYSCRC)

Monroe County Office for the Aging (MCOFA)

Lifespan of Greater Rochester, Inc. (Lifespan)

ARCH National Respite Technical Assistance Center

New York Lifespan Respite Program:

Deana Prest

NY State Office for the Aging

2 Empire State Plaza

Albany, NY 12223

Phone: (518) 486-2719

Deana.Prest@aging.ny.gov

State Respite Coalition:

Doris Green, MPA

NYS Caregiver and Respite Coalition

Lifespan of Greater Rochester

1900 S. Clinton Avenue

Rochester, NY 14620

Phone: 585-287-6393

dgreen@lifespan-roch.org

Respite Program Evaluator & Retreat Facilitator:

Thomas V. Caprio, MD, MPH, MS

Finger Lakes Geriatric Education Center

University of Rochester Medical Center

Phone: (585) 568-7795

Thomas_Caprio@urmc.rochester.edu

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EXECUTIVE SUMMARY

Lifespan Sustainability Retreat

Overview: The **Lifespan Respite Sustainability Retreat II** convened in Rochester, New York on **August 14-15, 2019** under a partnership with the NYS Caregiving and Respite Coalition (NYSCRC) managed by Lifespan of Greater Rochester, Inc., the New York State Office for the Aging (NYSOFA) and the Monroe County Office for the Aging (MCOFA).

Goal: The **Retreat** was aimed to connect statewide partners to exchange knowledge, expertise, and ideas; leading to the development of proposed financial strategies and building organizational capacity and community support for sustaining the respite care system for all individuals and caregivers, across the lifespan.

Purposes: Strengthen state and community partnerships to sustain Lifespan Respite activities; develop strategies to maximize use of existing respite resources; identify and leverage new respite funds; engage in sustainability planning; and generate innovative activities for future development.

Methods/Framework: Facilitated discussion with stakeholders in attendance at the Retreat to serve as a core **Sustainability Planning Workgroup**. A modified Delphi approach was conducted utilizing the ARCH Respite (and The Finance Project) toolkit as part of the **Sustainability Planning Project** (http://www.lifespanrespite.memberlodge.org/Sustainability_Tools). The August 2018 Sustainability Retreat I utilized the first two modules of this toolkit (Module I - Building a Sustainable Initiative and Module II -Developing a Vision and Results Orientation). The **Sustainability Retreat II** utilized Module III - Creating a Strategic Financing Plan and Module IV – Building Organizational Capacity and Community Support

Objectives:

1. To examine the effort in Coalition Building through NYSRC, including opportunities for membership expansion and enhanced engagement
2. Develop Action Steps toward a statewide Sustainability Plan with the develop of funding level scenarios
3. Identify potential challenges to sustainability

Outcome: Development of a Lifespan Respite Sustainability Financing Strategies LOGIC MODEL (**Appendix 3**)

Follow-up: Planning for the second **Lifespan Respite Sustainability Summit scheduled for May 2020** to reconvene a broad group of stakeholders from across New York State to inform the next steps in the sustainability planning process.

BACKGROUND

This emphasis on collaborative planning and the formation of a sustainability planning workgroup was the genesis for the Lifespan Respite Sustainability Retreat first held in August 2018 this “Part II” focuses on expanding upon the groundwork from Retreat Part I to engage in developing a proposal for a strategic financing plan and to continue to build organizational capacity and community support for the sustainment of statewide respite programs across New York State for individuals across the lifespan. This sustainment underscores planning for both fiscal support and ongoing equitable access to respite services. The goals of this retreat were to develop a sustainability work plan that

1. Is true to the mission and articulated vision for New York State Lifespan Respite services
2. Includes clear goals and objectives and specify strategic and practical actions to achieve
3. Specifies performance measures that measure progress toward the achievement of goals and objectives

The Respite Retreat 1 examined what sustainability would look like and is summarized as follows:

1. Scale

Statewide

2. Scope

REST training, caregiver simulation, mini-grants, faith-based organizations, train the trainer, dissemination, expand reach of program, VRC

3. Coalition Building

This group is initial workgroup how do you propagate further? Building partnerships with DOH, OPWDD, VA, OCFS, Higher Ed, businesses/workplace, Alz Assoc, AARP, health care, MLTC

4. Priority Areas

From sustainability self-assessment, areas we scored lowest (C/C+)
Financing, adaptability to changing conditions, development of internal systems (refinement)

5. Measuring Success

Indicators and performance measures on logic model.
Thinking about numbers (participants, counties, # of respite hours)
Connections made to have representation within coalition
Website hits, # of people receiving newsletter
Qualitative measures, family scenarios, details of how coalition helped them
Advocacy
NY Connects, requests for info, LTCC
How are we capturing how we reach caregivers?

Concerns expressed about data collection- so much data can't analyze

- Messaging and marketing to healthcare systems to not reinvent wheel
- Vision/Desired Results
 - Establish NYSCRC as leader for caregiving and respite in NYS
 - Provide trainings related to caregivers on respite statewide
 - Expand respite services
 - Enhance the organizational structure of lifespan respite initiative
 - Improve upon the caregiving experience

Retreat Discussions

Stakeholder/Participant Recommendations from the Respite Sustainability Summit (October 2018)

Lifespan Respite Sustainability Summit (October 2018) Stakeholder/Participant Recommendations

-see executive summary

1. Building Capacity

Expansion of REST model particularly in rural areas
Engaging more volunteers
Faith-based communities

2. Workforce Development

Volunteers, growing volunteer workforce
Trauma informed care
Behavioral health training
Outreach to students, engagement of educational institutions
Career opportunities, pay scales for direct care workers
Service delivery model-consumer/caregiver directed

3. Increasing awareness and service utilization

Broader marketing
Eligibility
Greater engagement of medical community
Educate public on NWD approach for increased utilization of NY Connects

4. Enhanced collaboration

Respite services are fragmented
Update NY Connects resource directory
Care coordination
Team-based care

5. Enhanced funding (today's focus)

Increased NY Connects staff
Cost-savings provided by respite to reinvest in system to expand respite services

Need to better track outcome data, focus on health outcomes for caregivers
Vouchers
Mini grants

6. Policy/Legislative Initiatives

More focus on developing respite as entitlement
Finance reform
Medicaid reform initiatives
Remove barriers for dual-diagnosis
Opportunity for changes

Based on summit recommendations, any changes need to be made to our vision/desired results? Both go hand in hand and recommendations can support our vision/desired results.

How can we be proactive so caregivers are not looking in a crisis?

What has been accomplished so far?

- In WNY and Finger Lakes 30 opportunities/month for drop-in respite
 - National Conference gave “leg-up” in spotlight, now we are on radar in state
 - 2 mini grants wrapping up and \$22,000 for next year for REST training
 - 3 of 4 committees organized and scheduled Outreach, Development, Training (legislative missing)
 - Ongoing REST trainings
 - Tracking # of hours of respite
 - Caregiver simulations have gotten a lot of interest (Alabama came up with based off poverty simulation and allowed NYSCRC to take it)
 - Huge opportunity for NYSCRC
 - Changes with REST, no longer offering support tools. NYSCRC will take on doing quarterly national support calls to keep engagement, more flexibility with training, story-telling, changed trainings from 2 days to 1 day, more accessible for professionals (Would cost \$350,000 to purchase REST)
 - Have access to all materials, website
 - Should think about MOU or rights to product, what if Marklund changes mind and does not want NYSCRC to continue doing trainings?
 - Want to use Wisconsin caregiver/workplace survey to then offer things to businesses like caregiver simulation, lunch and learn, etc.
 - Do caregiver simulation with HR, managers so they can understand needs of employees
 - Doing test of survey at lifespan

Financing for what?

- Think about state and federal funding
 - Entering year 3 of 3-year grant (9/1/19) state

- Submitted on Friday for supplement award (need to be spent on direct services) so going to use mini-grants (award should be issued by 9/1) state
- CRCs doing reporting each year. Qualitative measures built in to gauge relationship with NYSCRC and how they can partner to strengthen connections (state)
- Plan for grant but can't count on it. Lots of money returned from other states, makes it seem like respite not needed (federal)
- talk about DOH Alzheimer's grant taking away from use of III E funds, that's why there is carryover of funds
- worst case scenario-no funding, carryover to dec 2020 and until march 2021 for wrap-up work
 - compressed timeline. Sustainability should start 2 years from proposed end-date to get financing in place.
- best case scenario-new funding available with 20% cut since states are giving money back
- preplanned opportunities to consider funding sources, be mindful of what is available

What strategies and activities do you want to sustain?

- REST training
- **Coalition (virtual and presence) and its ability to be focal point in state on caregiving and respite across lifespan
 - Newsletter, website, advisory board
- Annual caregiving conference
- Caregiver simulation
- **NY Connects resource directory kept up-to-date
- Network engagement (local/state/national)
- Mini-grants to allow expansion and faith-based work to test different pilots
- Data collection
- Advocacy (use data collection and stories to help advocate)
- Partnerships between state, federal, CBO, academic, aging network
- Caregiver involvement/story-telling (testimonial)
- Infrastructure (Staff, lifespan)
 - NY Connects and coalition will not go away without funding, how can we sustain the rest?

What would sustainability look like? (Scale, Scope, and Duration)

Review Sustainability Budget Level (Draft)

- Level 1: Bare bones (\$100k-low) Hub
 - \$150k-in between, not where we're at now
- Level 2: Ideal (\$200k-ideal) Regional
 - \$300k-ideal, robust model
- Level 3: Aspirational (\$1 million-high) National
- See draft sustainability retreat funding levels
- 2020 is 10 year anniversary of coalition, what does this mean?
 - Powerful story for funders, look at what we have done over 10 years
- Want to aim towards funding between \$100k-\$300k

-Sources for Funding

Public- ACL, NYSOFA (OAA), State CRC, HRSA (Geriatric Workforce Enhancement Program) [focused on health professional training age friendly health system, now focusing on caregivers and respite, trauma informed care, elder abuse, outreach to rural areas], EISEP, AAA, DOH, OPWDD, DDPC, CCF, DOL, OMH, OASAS, OCFS (Kinship navigator), ??HHS??

-HRSA is currently in 5 year grant, will provide with some overlap

Private-Health foundation (western/central NY), Ralph C. Wilson foundation, NYS Health foundation, Greater Rochester Health Foundation, Cabrini, Hartford Partnership, RWJ, Weinberg, Guardian Society, Community Foundations, United Way, Golisano, AARP, philanthropy

Other-fees/income/revenue generation, sponsorship for events, health systems/ACOs, private insurance, employers, fee-based membership, faith-based communities

We should Look at what other state coalitions are doing

Not a lot of money in big scheme of things, but there are a lot of opportunities based on the funding sources we came up with

Current Resources

-What are the existing resources?

Available Resources: AAA, ACL, HRSA, Lifespan, MCOFA, NYSOFA, NYSCRC

Potential Resources: other state agencies/offices, Alzheimer's Association, VA, foundations, revenue generators (fees, membership, income sources)

-Where are future funding opportunities?

-Identify: In-kind contributions, restrictions, timeframes

Over what time do you need to sustain them?

Environmental Scan

Think of trends, opportunities, and threats

What is the current status and what do we anticipate for the near future?

-Political Conditions: Uncertainty Federal funding sources (opportunity and threat), excess funds affecting the future (trending), "on the radar" for state planning, long term planning, and agency collaboration, increases in OAA funding, OAA not reauthorized, 2-year federal budget, federal political uncertainty, immigration policies, care management tools

-Inherently great opportunity at federal level but also uncertainty

-Optimistic because on radar and congruent with other initiatives and interests

-Aware current state of funding

-Economic Conditions: economy strong, unemployment low yet caregivers are leaving work at record numbers, workforce shortages for formal paid caregivers, beginning to value caregivers (health system recognition of caregivers), employer opportunity, women's issue, for-profit services

-Demographic Changes: caregiver demographic-women, aging and need for caregivers, opioid crisis and kinship care, child caregivers, shift in age, rural caregivers, cultural competency and diversity, immigrant families, social media,

internet, formalized caregiving sites, technology, consumer-directed care, male caregivers are on the rise

-Related Organizations (Partners): increased participation from OMH, DOL, and OPWDD, more potential on CCF and kinship, local coalitions, employers, AARP, RSVP/FGP (office of national & community service), VA, “tele-support”, GRAPE, REST (no longer organization so creating opportunity and liability), faith-based organizations

-Bring back to summit recommendations and vision/desired results, all related

Strategies Related to Adaptability to Changing Conditions

SWOT Analysis

Strengths: NYSCRC, infrastructure (core team), partnerships, ACL funding, programs/established trainings (REST and other evidence-based), momentum, Doris/leadership/staff (champions), awareness of brand (aging network), marketing materials, experience (10 years), mini grants, track record/reputation, long term care councils

Weaknesses: keeping NY Connects resource directory for respite current, gaps in data (collection, management, analytics), multiple definitions of respite (no uniform definition), general public unaware of respite and coalition, public marketing across lifespan, eligibility requirements are different for every funding source, geography

How to turn weaknesses into opportunities/strengths

- NY Connects-can be addressed

- Respite definition/service parameters/eligibility criteria-hard to change, understand and communicate

- Geography- can't change, but can be addressed through expansion

- Data Collection/Analytics- staff for data collection for programs (particularly REST); NY Connects- # services, utilization; caregiver-surveys, testimonials, health outcomes; mini-grants-# trained, # caregivers, # respite hours, retention of volunteers;

 - If you think about financing from sustainability a lot of it comes from outcome data, so Tom sees this as a big issue.

- Public Marketing-If there is no awareness, no utilization. Do statewide marketing campaign to identify real people as caregivers. Identifying as a caregiver is the first step, then get them access to services, market a caregiver center in crisis places like hospitals (like Westchester), caregiver champions

 - Populations: Target audience, public (to increase awareness), volunteer base

Opportunities: upcoming changes to improve resource directory, demographics, REST, Caregiver Simulation, workforce survey, demand, hub & spoke model, health systems, advocacy, collaboration, state priority, faith-based, mini grants, revenue

generation, expansion of coalition, agility/nimbleness/growth potential, track record, permanency of funding, local long term care councils and AAA

Threats: federal funding, outcome data (lack of), for-profit incursion, competition/redundancy with similar services, expansion, prioritization (internally, shifting landscape), turnover (succession planning)

How do the opportunities map to potential funding sources?

Potential Strategies

Resources Needed

Financing Strategies for Lifespan Respite Programs and State Respite Coalitions

1. **Make Better Use of Existing Resources (low effort, high yield)**
Approaches: redeployment, operating more efficiently, reinvestment, embed lifespan respite activities into ongoing state efforts
Scale, coalition/NY Connects, partnership and alignment with activities, use of volunteers, web (VRC), marketing resources (videos), growing social media presence, NYSOFA
2. **Maximize Federal and State Revenue (high effort)**
Approaches: grant writing, leveraging, refinancing, administrative claiming
Legislative mandates/allocation, OPWDD (family support dollars), DOH, ACL Supplement, HRSA (GWEP) Funding
3. **Flexibility in Resources (low effort)**
Approaches: Coordination, pooling, and de-categorization (eligibility requirements)
REST Flexibility, consumer-directed model, pricing structure for training programs, mini-grants, programs and services available
4. **Building Public-Private Partnerships (high effort)**
Approaches: leveraging, leadership, technical assistance, grassroots/community engagement, foundation funding
Employer interest/funding, networking, University of Rochester, Health Foundation WCNY, RCW, faith-based communities,
5. **Create New Dedicated Revenue Streams (high effort)**
Approaches: Fundraising, charging fees for service, generating unrelated business income, advocacy/education, special taxing districts, special tax levies, fees and narrow-based taxes, lotteries and gaming
Pricing structures, revenue pricing structure, flexible price points for programs, charge employers

Concentrate on high effort areas-are they worth the trade-off?

Legislative mandates/allocation: will be difficult, priority area but not operational

Employer Interest and Funding

New Revenue Streams: should be in action plan

Recommendations: looking at new revenue streams, continue doing what we are already doing

Need for outcome assessment in terms of data, public marketing piece also important

We are in a good place, partners, funding, programs. Now how do we move to next level and be agile when funding opportunities come through.

If there is not federal/state dollars, leverage respite hours through faith communities and grant applications/funding through foundations. Need outcome data to justify when grant opportunities arise.

**Prioritize Strategies Related to Community Support and Organizational Capacity
Adaptability to Changing Conditions
Broad-Based Community Support
Key Champions
Strong Internal Systems**

At right point to take hard look at sustainability. Look at outcome data, support. System is ready because it has good leadership, infrastructure, experience, core team, etc.

Key cautionary note: if there is another round of ACL funding still need to focus on sustainability.

Anything that we're not doing now that we did in the past?

- used to sustain more partners (staffing issues)
- think group (may help to have others looking at what we have and where we need to go)
- don't have council anymore
- no mechanism to bridge at state level
- Summit is example of what can be done
- Another summit to engage health systems?
- Retreat Part III at end of funding?

Action Plan

	Immediate (Dec. 2019)	Short-Term (Aug. 2020)	Long-Term (Jan. 2021)
What do we need to know?	-Comparison (cross-walk) of forum and	-Seeking funding opportunities	-Advisory group outcomes: legislative

	<p>summit recommendations</p> <p>-Long term planning project (caregiver) recommendations</p>	<p>-Outcome assessment for Year 3 close-out... no cost extension?</p> <p>-Advisory group outcomes: development, training, marketing/outreach</p>	<p>-Consumer-directed</p>
<p>What do we need to do? (activities)</p>	<p>-Examine (market test) price points for fee-based services, start w/ employers/workplace*</p> <p>-Mini grant metrics and funding new sites</p> <p>-Prior mini-grantee assessment</p> <p>-Advisory committee formations/development</p> <p>-Summit II planning</p>	<p>-Full training package developed and client recruitment/retention</p> <p>-HRSA/GWEP data reporting</p> <p>-Fall Conference Planning</p> <p>-Sustainability Retreat III</p>	<p>-Protocol in place for updating NY Connects (based on updated inclusion/exclusion and respite taxonomy)</p> <p>-Develop a permanent hub-and-spoke model</p> <p>-Advocacy strategy</p> <p>-Marketing strategy</p> <p>-Examine federal landscape of funding</p> <p>-HHA Training</p>

			-Caregiver assessment
What do we need to measure?	-Any gaps across stakeholders -Coalition membership value proposition and criteria	-Outreach and outcome assessment of prior grantees and existing programs -Membership recruitment, criteria, fees -Ongoing build of virtual resource center	-Data management: staff, collection, and analysis

*marketing plan needs to be a part of this. Show to employers that this is lost productivity. Employers may not know that their employees are in fact caregivers. Market to employers the importance and response to an issue.

Highlight=priority focus areas

Recommendations from Caregiver Forums

1. Enhance access to services in supports so caregivers can do their job well.
2. Increase access to services and supports
3. Develop strategies that help caregivers advocate within the healthcare system on behalf of their family/friends
4. Improve availability of respite to provide caregivers with breaks to prevent burnout
5. Enhance strategies for providing access to home modifications so older adults can remain safely in their own homes with the help of a caregiver

Forum recommendations are in line with what we've been talking about in action plan/sustainability plan

Summit/Conference Planning

Summit II

Location: Albany, Hearst Media Center?

Date: Mid-May 2020.... will NYSOFA do ½ day session for AAA caregiver coordinators day before or after summit?

Invite DOH participants (AnnMarie will talk to Mark K.)

Purpose from Summit I still on target w/ Summit II

Share edited sustainability plan

Invite Jill from ARCH

Assign people to tables with similar backgrounds for table topic questions- recommendations for policy change

What do we want to do?

- Start w/ Summit I recommendations/caregiver forums

- Share some data

- Mark K. (DOH) present on long term planning council re: caregiving/respite (partnership w/ NYSOFA)

- Caregiver panel

- Advocating and legislative priorities (maybe get people to serve on legislative committee)

- Share financing strategy (not specific, broad overview of sustainability plan)

- Share everything on left-hand side of logic model, and that we are looking for other sources to sustain. Need advocacy at federal & state level

Come up w/ new objectives

Ask of participants: identify legislative priorities and people to be involved

Facilitate group discussions, break out tables to focus on federal and statewide advocacy (questions have to be very specific, have facilitator at each table)

Conference

10-year Celebration (cake!!) focus on highlighting success

Honor Renee Benson and her work with coalition before it was NYSCRC and maybe past directors

Location: Albany

Date: Fall 2020 (October?)

Breakout-sessions

Will NYSOFA do ½ day with AAA caregiver coordinators

Need keynote speaker (ideas: Joseph Lugo [ACL], Daphne?, Greg Link [ACL])

Send out request to coalition members that want to present success. Only coalition members can apply to speak (call for submissions)

Appendix 1 – Lifespan Respite Sustainability LOGIC MODEL

What Do You Want to Sustain?		How Will You Measure Your Progress?
<p>VISION AND DESIRED RESULTS</p> <ol style="list-style-type: none"> 1) Establish NYSCRC as the leader for caregiving and respite in NYS 2) Provide trainings related to caregivers and respite statewide 3) Expand access to respite services 4) Enhance the organizational structure of lifespan respite initiative 5) Improve upon the caregiving experience 	↔	<p>INDICATORS</p> <ul style="list-style-type: none"> • Core Team: strategic planning and 3-year sustainability plan • NYSCRC: Advisory board roles and responsibilities and revised NYCRC committee structure • Enhanced coalition membership (expansion/diversity/reach): disability services, advocacy groups, private sector, education, health care, charitable/philanthropic, legislative, veterans/military
<p>CONDITIONS AND CAUSES</p> <ul style="list-style-type: none"> • Large geographic coverage region • Narrow focus of some stakeholders • Maintenance of effort (staffing/funding) • Value Proposition for coalition membership • Risk of dilution of caregiving focus • Caregiver identification challenges 		<ul style="list-style-type: none"> • Policy: established legislative committee, increased advocacy efforts, ongoing social media activities • Organizational structure with embedded hub-and-spoke model • Stakeholder input from Sustainability Summit • Enhanced Collaborations: NY Connects, LTCCs, AAAs • Virtual Resource Center establishment • Dissemination: Regional, State, and National Conference participation
<p>STRATEGIES</p> <ul style="list-style-type: none"> • Focus on value and awareness of respite • Formalize an organizational structure • Develop a business plan • Create accountability for service providers • Explore collaboration opportunities • Include caregivers in ongoing planning • Build capacity for dissemination 	↔	<p>PERFORMANCE MEASURES</p> <ul style="list-style-type: none"> ➤ Coalition Building: membership #, monthly calls participation, geography, website utilization, newsletter distribution, surveys ➤ Trainings: pre-/post- assessment and # trained for: REST, train-the-trainer, caregiver simulation, Powerful Tools for caregiving, mindfulness ➤ Services: Volunteer (#, hours, retention), # respite programs, trainer established in every county ➤ NY Connects: # respite services listed, utilization ➤ Mini-grants: required data metrics and progress reports ➤ Funding: grant funding, foundation collaboration, revenue stream from trainings ➤ Defined future implementation strategy for evidence-based caregiver assessment (satisfaction, quality of life, and health related outcomes)
<p>ACTIVITIES</p> <ol style="list-style-type: none"> 1) Define coalition member roles and responsibilities 2) Implement trainings: REST, caregiver simulation, powerful tools, mindfulness, caregiver forums, and train-the-trainer 3) Recruit new stakeholders, volunteers, respite sites, mini-grant (seed funding) participants 4) Build a hub-and-spoke model and a virtual resource center 5) Explore caregiver assessment methods and evolving research 		

Appendix 2 – Sustainability Levels

Bare Bones- one staff - \$100,000

NYSCRC website maintenance/VRC

NYSCRC monthly newsletter

Public speaking/Annual Conference

Maintenance of REST initiative

Minimal training options

Funding Development

Ideal – 2 staff - \$200,000

NYSCRC website maintenance/VRC

NYSCRC Monthly Newsletter

Public Speaking

Annual Conference

Faith Community development / Mini Grants

Continued growth of REST initiative

Community and Employer Engagement using Caregiver Simulation

Continued development of “toolbox” trainings and support for professionals (Mindfulness, PTC, STC)

Presence in the community through advocacy and events and webinars

Continued development of working advisory boards (Legislative, Training, Outreach, Development)

National Lead for REST through quarterly calls to all REST Trainers and Master Trainers to develop a national network of support.

Workplace Caregiver Initiative program developed from University of Wisconsin Survey

Aspirational – 10 staff

All of the Above

Coalition staff in in all 9 regions of the state – hub and spokes approach to Coalition building

Strong presence in Albany seeking monetary and legislative support for respite

Active REST Trainers in every county of the state

Robust data collection for REST

Provide National support for Master Trainings in REST

Appendix 3 – Lifespan Respite Financing Strategies Logic Model LOGIC MODEL

Lifespan Respite Financing Strategies Logic Model (rev. 8-31-19)

INPUTS	OUTCOMES										
<p>What Do We Want to Sustain?</p> <ol style="list-style-type: none"> 1) Coalition (NYSCRC) 2) Partnerships (Federal, State, Community Based Organizations, Academia, Aging Services Network) 3) Programs: REST Training, Caregiver Simulation, Mini-Grants, Annual Caregiver Conference 4) Network Engagement (Regional/National) 5) Infrastructure/Governance 6) Data Collection 7) Caregiver Engagement 8) Advocacy 9) NY Connects 10) Respite Volunteers 	<p>POTENTIAL FUNDING SOURCES</p> <ul style="list-style-type: none"> • Federal (ACL, HRSA/GWEP, OAA, HHS) • State (NYSOFA, AAA, DOH, OPWDD, CCF, Labor, OMH, OASAS, OCFS) • Private (HFWCNY, Ralph C. Wilson, NYSHF, GRHF, Cabrini, Hartford, RWJ, Weinberg, Golisano, Guardian Society, Community Foundations, United Way, AARP) • Revenue Generation (Fees, membership dues, partner sponsorship, Health Systems, ACOs, private insurances) 										
<p>Environmental Scan</p> <ul style="list-style-type: none"> • Demographic imperative • Uncertain Federal funding landscape • State priorities areas (Women, Labor, DOH, OPWDD, Children, Kinship Care) • State Initiative: “Health Across All Policies” • Health System Recognition (readmissions) • Caregiver identification/awareness challenge • Potential for Technology support/reach • Large geographic coverage region (+Rural) • For-Profit Incursion (private sector) 	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%;"><u>Funding Levels</u></td> <td style="width: 50%;"><u>Proposed Model</u></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"> • Current ACL Funding: through August 2020 • Proposed No-Cost Extension: December 2020/March 2021 • Current HRSA Funding: through June 2024 	<u>Funding Levels</u>	<u>Proposed Model</u>	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
<u>Funding Levels</u>	<u>Proposed Model</u>										
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Level 3: \$300,000	Statewide Hub-and-Spoke Model										
Level 4: \$1,000,000	National Respite Leader										
<p>Stakeholder Summit Recommendations</p> <ol style="list-style-type: none"> 1. Building Capacity 2. Workforce Development 3. Increasing Awareness and Utilization 4. Enhanced Collaboration 5. Enhanced Funding 6. Policy/Legislative Initiatives 	<p>PERFORMANCE MEASURES</p> <ul style="list-style-type: none"> ➤ Coalition Building: membership #, monthly calls participation, geography, website utilization, newsletter distribution, surveys ➤ Trainings: pre-/post- assessment and # trained for: REST, train-the-trainer, caregiver simulation, Powerful Tools for caregiving, mindfulness ➤ Services: Volunteer (#, hours, retention), # respite programs, trainer established in every county ➤ NY Connects: # respite services listed, utilization ➤ Mini-grants: required data metrics and progress reports ➤ Funding: grant funding, foundation collaboration, revenue stream from trainings, membership dues revenue ➤ Defined future implementation strategy for evidence-based caregiver assessment (satisfaction, quality of life, and health related outcomes) ➤ Assessment of the caregiver experience as a result of respite participation 										
ACTIVITIES											
<ol style="list-style-type: none"> 1) Build coalition support and expand NYSCRC representation/participation 2) Scale through partnerships, parallel state funding, and aligning activities 3) Utilize website, social media, and existing marketing materials to raise awareness 4) Engage employers in caregiving needs 5) Analysis of revenue pricing structure (fees, services, and membership dues) 6) NY Connects System Updates 											