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

Final Report

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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 IIIE 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
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, NYSOF

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**

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

<table>
<thead>
<tr>
<th>What Do You Want to Sustain?</th>
<th>How Will You Measure Your Progress?</th>
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<tbody>
<tr>
<td><strong>VISION AND DESIRED RESULTS</strong></td>
<td><strong>INDICATORS</strong></td>
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<tr>
<td>1) Establish NYSCRC as the leader for caregiving and respite in NYS</td>
<td>• Core Team: strategic planning and 3-year sustainability plan</td>
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<td>2) Provide trainings related to caregivers and respite statewide</td>
<td>• NYSCRC: Advisory board roles and responsibilities and revised NYCRC committee structure</td>
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<td>3) Expand access to respite services</td>
<td>• Enhanced coalition membership (expansion/diversity/reach): disability services, advocacy groups, private sector, education, health care, charitable/philanthropic, legislative, veterans/military</td>
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<tr>
<td>4) Enhance the organizational structure of lifespan respite initiative</td>
<td>• Policy: established legislative committee, increased advocacy efforts, ongoing social media activities</td>
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<tr>
<td>5) Improve upon the caregiving experience</td>
<td>• Organizational structure with embedded hub-and-spoke model</td>
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<tr>
<td><strong>CONDITIONS AND CAUSES</strong></td>
<td>• Stakeholder input from Sustainability Summit</td>
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<tr>
<td>• Large geographic coverage region</td>
<td>• Enhanced Collaborations: NY Connects, LTCCs, AAAs</td>
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<td>• Narrow focus of some stakeholders</td>
<td>• Virtual Resource Center establishment</td>
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<tr>
<td>• Maintenance of effort (staffing/funding)</td>
<td>• Dissemination: Regional, State, and National Conference participation</td>
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<td>• Value Proposition for coalition membership</td>
<td><strong>PERFORMANCE MEASURES</strong></td>
</tr>
<tr>
<td>• Risk of dilution of caregiving focus</td>
<td>➢ Coalition Building: membership #, monthly calls participation, geography, website utilization, newsletter distribution, surveys</td>
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<tr>
<td>• Caregiver identification challenges</td>
<td>➢ Trainings: pre-/post- assessment and # trained for: REST, train-the-trainer, caregiver simulation, Powerful Tools for caregiving, mindfulness</td>
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<tr>
<td><strong>STRATEGIES</strong></td>
<td>➢ Services: Volunteer (#, hours, retention), # respite programs, trainer established in every county</td>
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<tr>
<td>• Focus on value and awareness of respite</td>
<td>➢ NY Connects: # respite services listed, utilization</td>
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<td>• Formalize an organizational structure</td>
<td>➢ Mini-grants: required data metrics and progress reports</td>
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<tr>
<td>• Develop a business plan</td>
<td>➢ Funding: grant funding, foundation collaboration, revenue stream from trainings</td>
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<td>• Create accountability for service providers</td>
<td>➢ Defined future implementation strategy for evidence-based caregiver assessment (satisfaction, quality of life, and health related outcomes)</td>
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<tr>
<td>• Explore collaboration opportunities</td>
<td><strong>ACTIVITIES</strong></td>
</tr>
<tr>
<td>• Include caregivers in ongoing planning</td>
<td>1) Define coalition member roles and responsibilities</td>
</tr>
<tr>
<td>• Build capacity for dissemination</td>
<td>2) Implement trainings: REST, caregiver simulation, powerful tools, mindfulness, caregiver forums, and train-the-trainer</td>
</tr>
<tr>
<td><strong>ACTIVITIES</strong></td>
<td>3) Recruit new stakeholders, volunteers, respite sites, mini-grant (seed funding) participants</td>
</tr>
<tr>
<td>1) Define coalition member roles and responsibilities</td>
<td>4) Build a hub-and-spoke model and a virtual resource center</td>
</tr>
<tr>
<td>2) Implement trainings: REST, caregiver simulation, powerful tools, mindfulness, caregiver forums, and train-the-trainer</td>
<td>5) Explore caregiver assessment methods and evolving research</td>
</tr>
</tbody>
</table>
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.

**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)**

<table>
<thead>
<tr>
<th>INPUTS</th>
<th>OUTCOMES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>What Do We Want to Sustain?</strong></td>
<td><strong>POTENTIAL FUNDING SOURCES</strong></td>
</tr>
<tr>
<td>1) Coalition (NYSCRC)</td>
<td>• Federal (ACL, HRSA/GWEP, OAA, HHS)</td>
</tr>
<tr>
<td>2) Partnerships (Federal, State, Community Based Organizations, Academia, Aging Services Network)</td>
<td>• State (NYSOFA, AAA, DOH, OPWDD, CCF, Labor, OMH, OASAS, OCFS)</td>
</tr>
<tr>
<td>4) Network Engagement (Regional/National)</td>
<td>• Revenue Generation (Fees, membership dues, partner sponsorship, Health Systems, ACOs, private insurances)</td>
</tr>
<tr>
<td>5) Infrastructure/Governance</td>
<td><strong>Funding Levels</strong></td>
</tr>
<tr>
<td>6) Data Collection</td>
<td>Proposed Model</td>
</tr>
<tr>
<td>7) Caregiver Engagement</td>
<td>Level 1: $100,000  Resource Center</td>
</tr>
<tr>
<td>8) Advocacy</td>
<td>Level 2: $200,000  Regional Collaborative</td>
</tr>
<tr>
<td>9) NY Connects</td>
<td>Level 3: $300,000  Statewide Hub-and-Spoke Model</td>
</tr>
<tr>
<td>10) Respite Volunteers</td>
<td>Level 4: $1,000,000  National Respite Leader</td>
</tr>
</tbody>
</table>

**Environmental Scan**
- 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)

**Stakeholder Summit Recommendations**
1. Building Capacity
2. Workforce Development
3. Increasing Awareness and Utilization
4. Enhanced Collaboration
5. Enhanced Funding
6. Policy/Legislative Initiatives
7. Analysis of revenue pricing structure (fees, services, and membership dues)
8. NY Connects System Updates

**ACTIVITIES**
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

**PERFORMANCE MEASURES**
- 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