National Respite Care Workforce Recruitment and Training Program





2023 Home and Community-Based Services Conference

Presenters



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Project Overview

• **Goal:** To support and foster state and national efforts, including those of the RAISE Advisory Council, in promoting access to respite for family caregivers



• Thank you to our funders: Administration for Community Living (ACL) and The John A. Hartford Foundation (JAHF)

Project Overview (continued)

Objectives

- Develop, test and scale a respite workforce recruitment, training and retention program;
- Develop and field test a state-based framework and roadmap for respite system planning and development, which ties to the forthcoming National Caregiving Strategy; and
- Strengthen and test approaches to help caregivers and families develop or strengthen their own natural support systems to include respite and other supports

Outcomes

- Improve the evidence base for respite care workforce training and recruitment to better meet the respite needs of families;
- Strengthen the National Family Caregiving Strategy based on evidence-supported practices and state policies; and
- Support states in their efforts to improve and expand the long-term services and supports (LTSS) direct care and respite workforce and natural supports



NASHP Respite Webpage

- Includes interactive 50-state maps with a focus on waiver and MLTSS respite coverage, as well as respite service utilization
- Case study paper and webinar: "Emerging Respite Care Strategies in Medicaid Home and Community-Based Services Waivers for Older Adults, Adults with Physical Disabilities, and their Family Caregivers"
- State innovation blogs



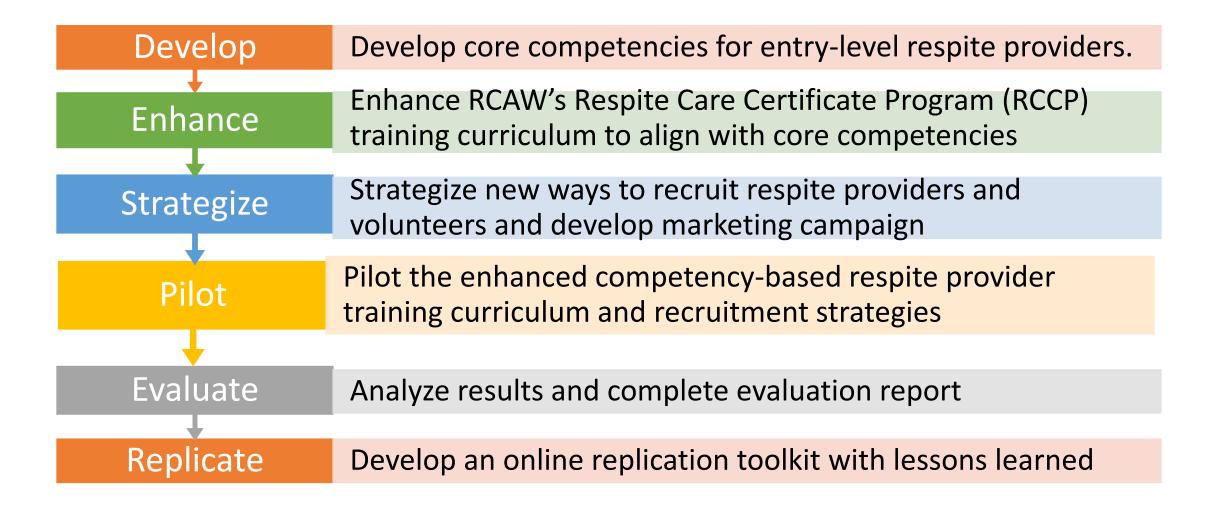


Project Purpose

The pilot project was designed to

- cultivate a nationally recognized set of core competencies for entry-level respite providers, and
- field test a training curriculum based on these core competencies, as well as
- learn about and develop an innovative and specialized recruitment campaign.

Steps To Project Completion



ARCH Expert Work Group on Respite Provider Recruitment, Training and Retention Initiative

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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 socialemotional 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.

January 7, 2021



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, Ethics and Professionalism*)

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)

Sign Up for FREE Online Respite Training Using the Links Below

Click on the link for your state to register for training. If your state does not have a training site, please use Other.



If you would like more information about creating a partnership in your state to offer statespecific training, please contact vmadsen@respitecarewi.org.

QR Code links to previous four documents



Link to page of Expert Work Group on Respite Provider Training Core Competencies

| | Work Group on Training and Retention Initiative | |
|--|--|---------|
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| (and family caregiver) | Executive Director | |
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Link to page for Respite Care Professional Core Competencies





Link to page for Respite Care Provider Training Courses



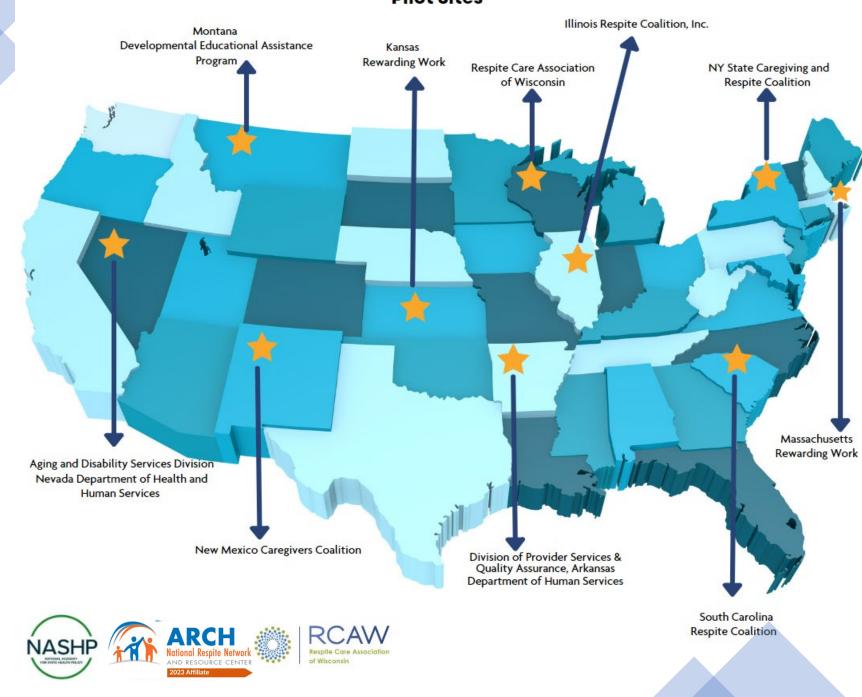


Link to page offering training in various states.



If you would like more information about creating a partnership in your state to offer statespecific training, please contact vmadsen@respitecarewi.org.

Pilot Sites



Multi-layered Evaluation







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)





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 (in progress)





Agency Evaluation

- Worked with evaluation consultant to identify agencyspecific 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?





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 policymakers 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.



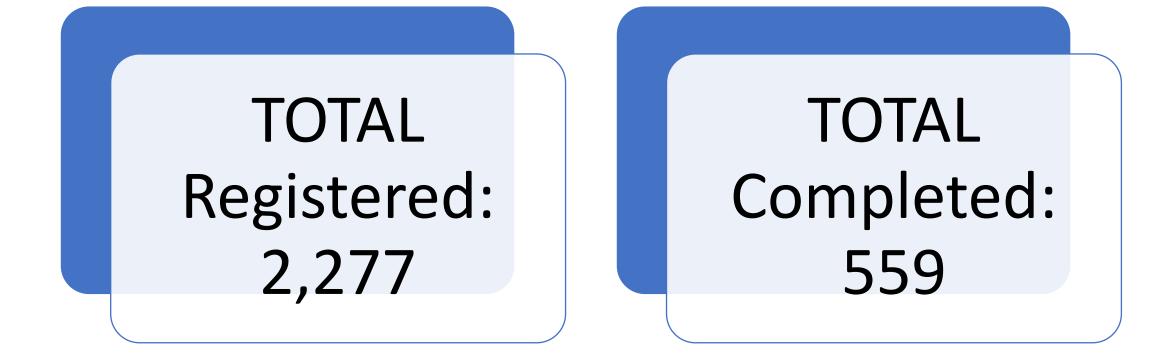
The RE-AIM Framework

- **Reach** How do I reach the targeted population with the intervention?
- Effectiveness How do I know my intervention is effective?
- Adoption How do I develop organizational support to deliver my intervention?
- Implementation How do I ensure the intervention is delivered properly?
- Maintenance How do I ensure the intervention has long-term effects over time?

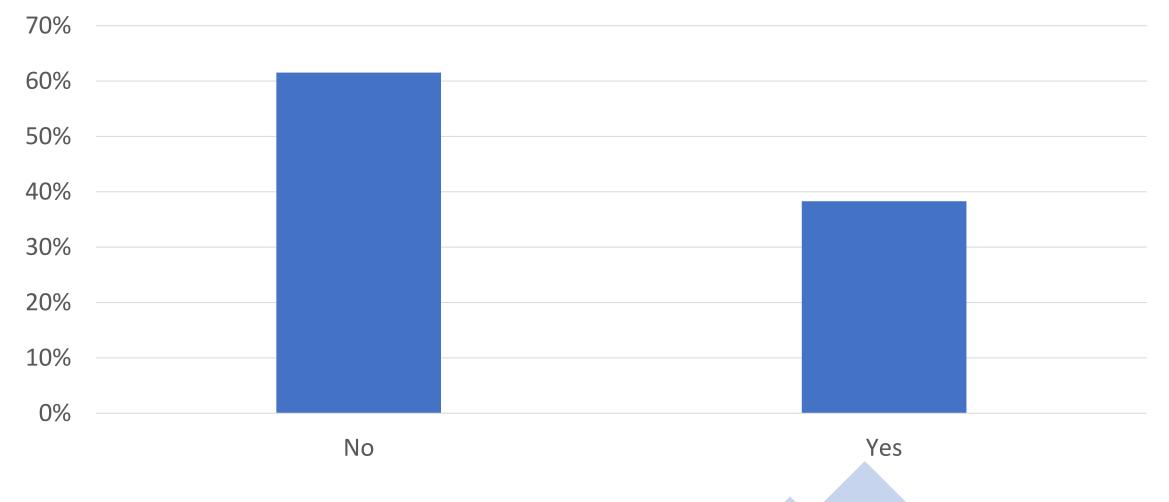




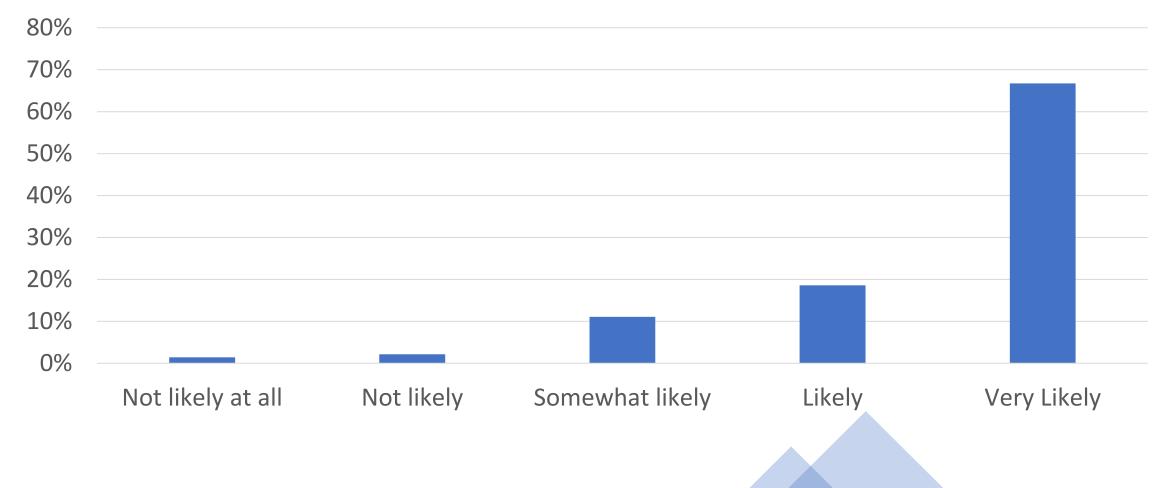
Registration and Completion (1/7/22 – 12/31/22)



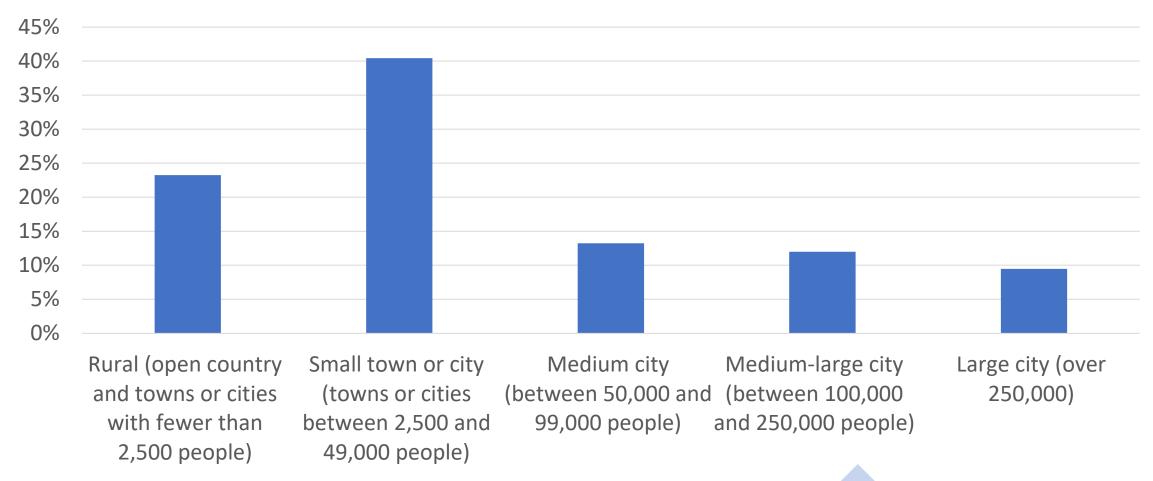
Have you provided respite care in the PAST? (n=559)



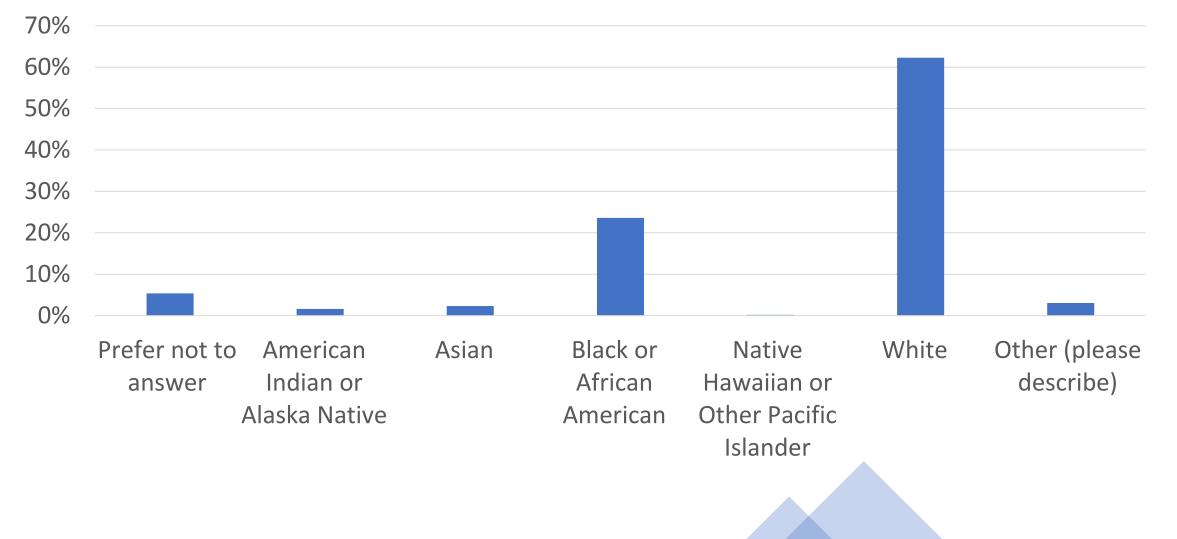
After completing the training, how likely are you to provide respite care in the NEXT 6 MONTHS? (n=559)



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



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

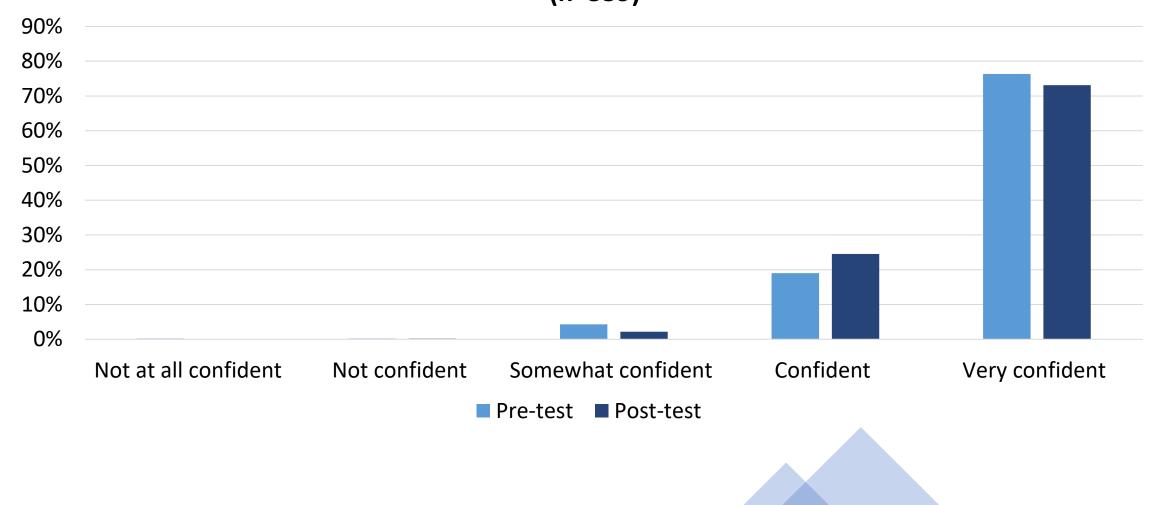


Learner Test Scores

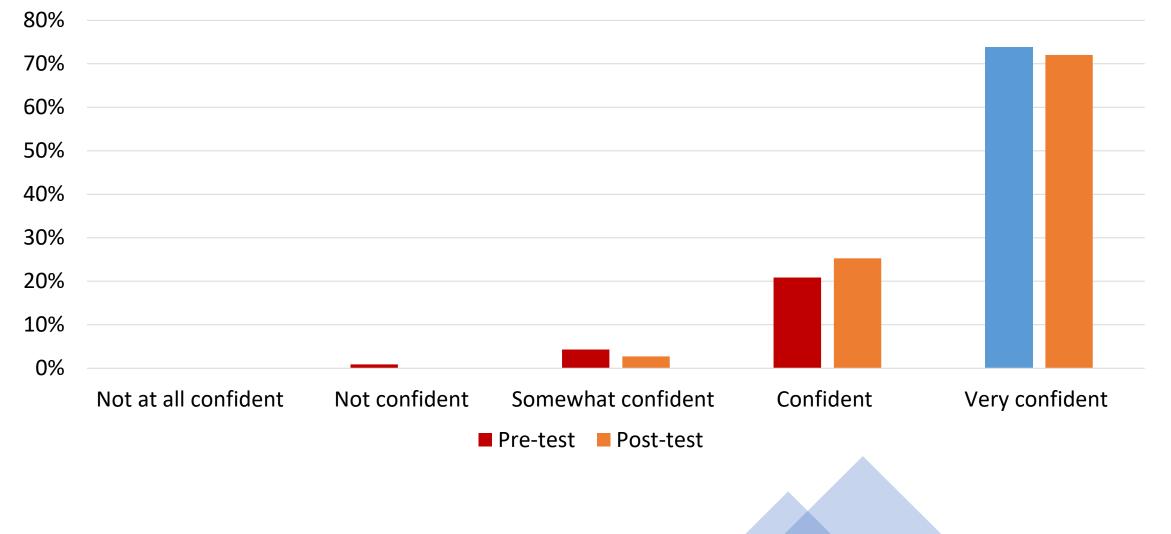
| | n=559 |
|-------------------|-------|
| Pre-test | 66% |
| Post-test | 75% |
| | |
| Average number | |
| tries to get 100% | 3.04 |

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)



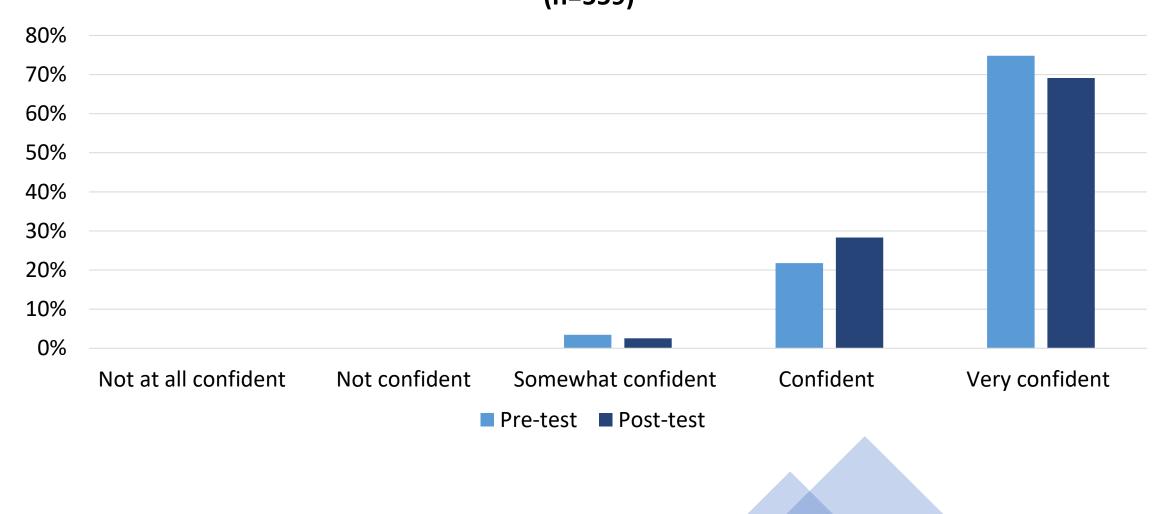
How CONFIDENT are you in your ability in providing care that is focused on, and respectful of, family caregivers' and care recipients' preferences, needs, values, and goals for respite? (n=559)



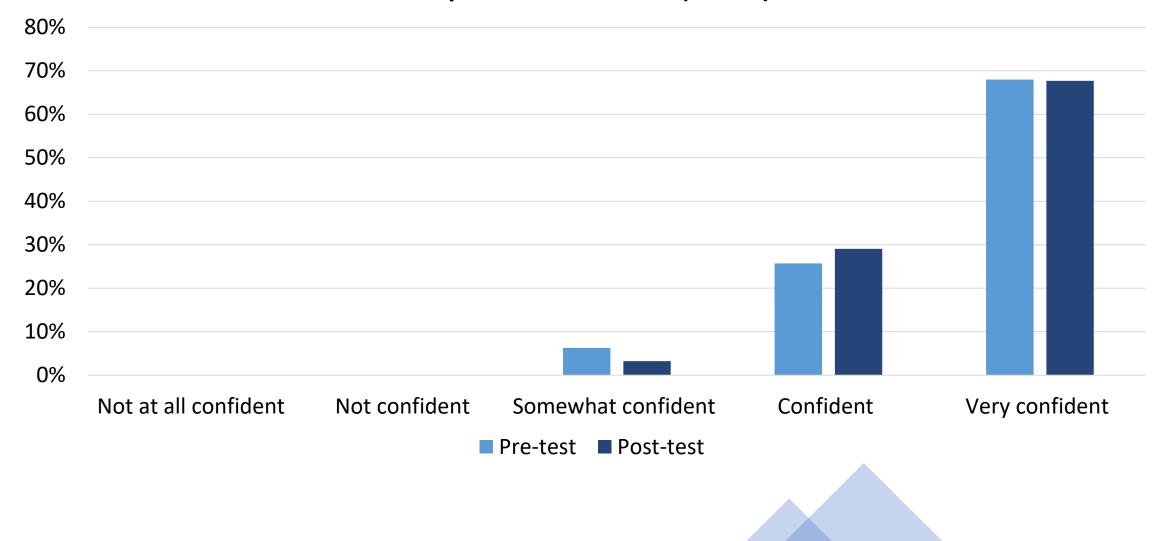
How CONFIDENT are you in your ability in understanding and providing services and supports that are respectful... (n=559)

| 80% | | | | | |
|-----|----------------------|---------------|--------------------|-----------|----------------|
| 70% | | | | | |
| 60% | | | | | |
| 50% | | | | | |
| 40% | | | | | |
| 30% | | | | | |
| 20% | | | | | |
| 10% | | | | | |
| 0% | | | | | |
| | Not at all confident | Not confident | Somewhat confident | Confident | Very confident |
| | | | Pre-test Post-test | | |
| | | | | | |

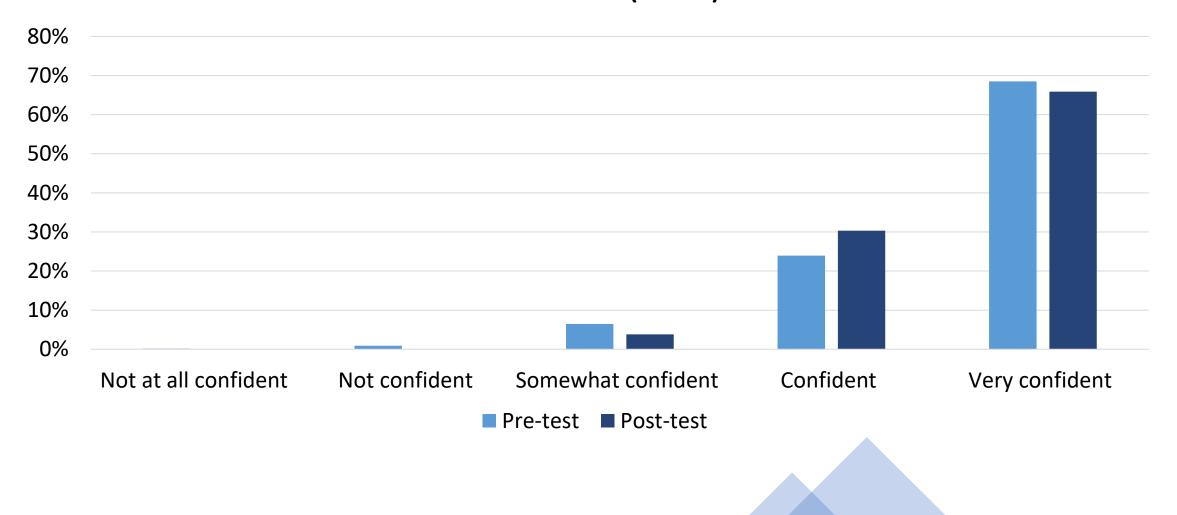
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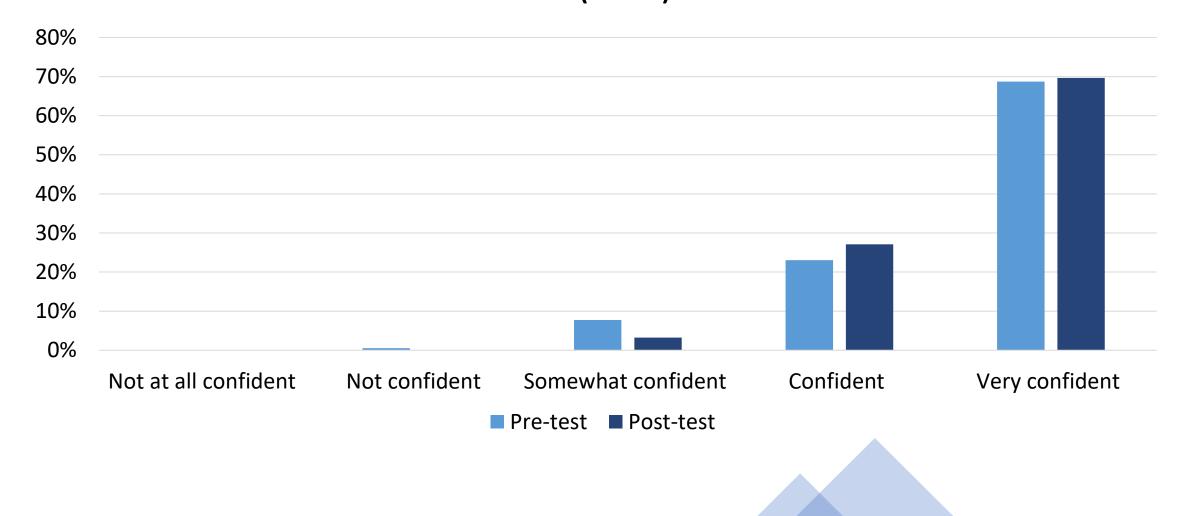
How CONFIDENT are you in your ability in supporting the physical health, functional ability, spiritual, and social-emotional well-being of care recipients based on...? (n=559)



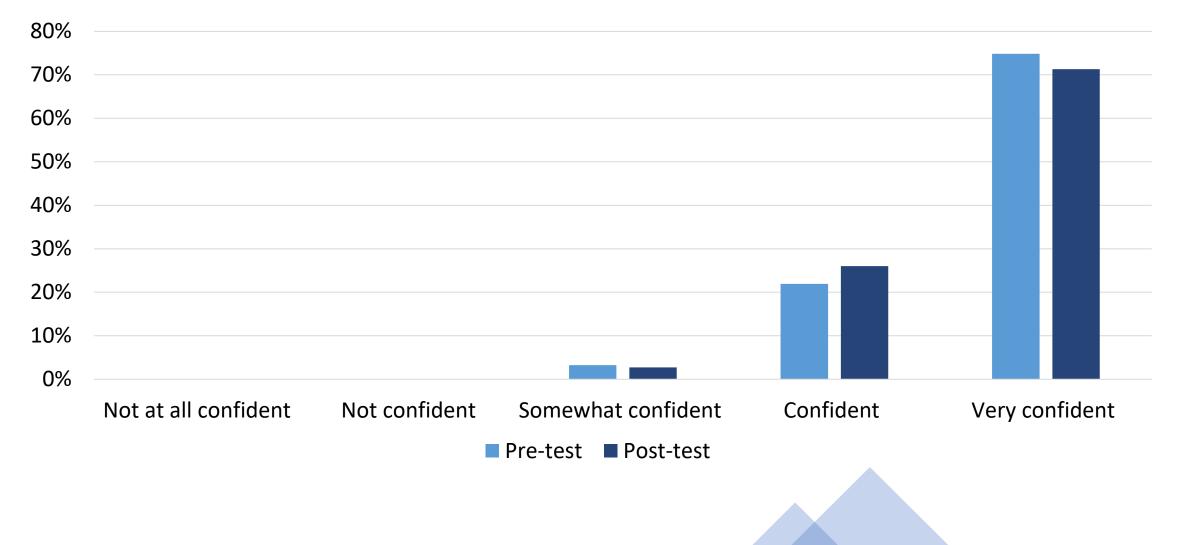
How CONFIDENT are you in your ability in helping protect care recipients from illness, injury, abuse, neglect, or other harm; understanding how to report incidents; and responding quickly and safely during emergency situations? (n=559)



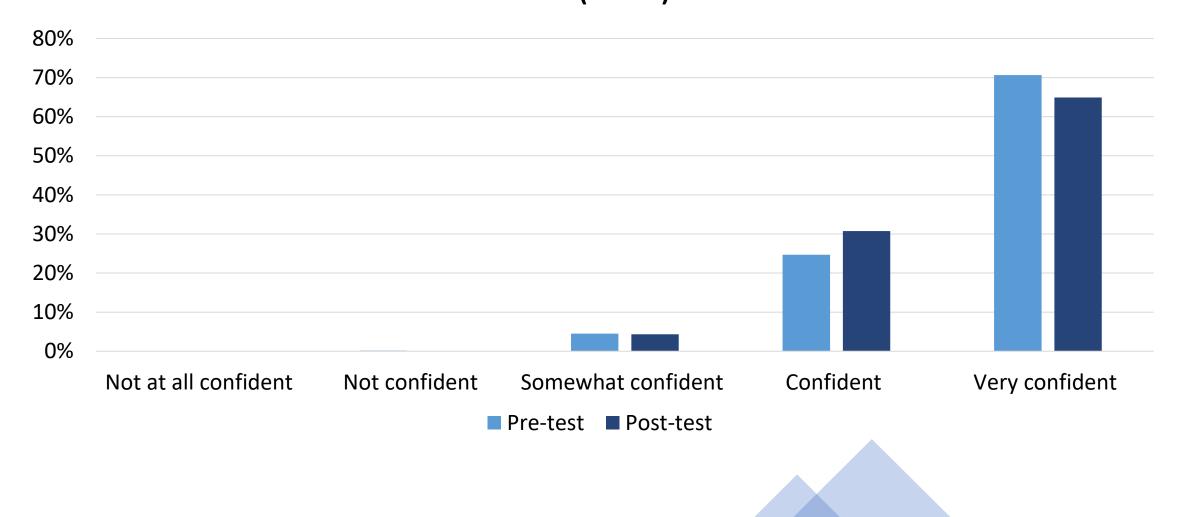
How CONFIDENT are you in your ability in working with family caregivers and care recipients to explore, define, plan, and engage in appropriate and meaningful respite activities for care recipients? (n=559)



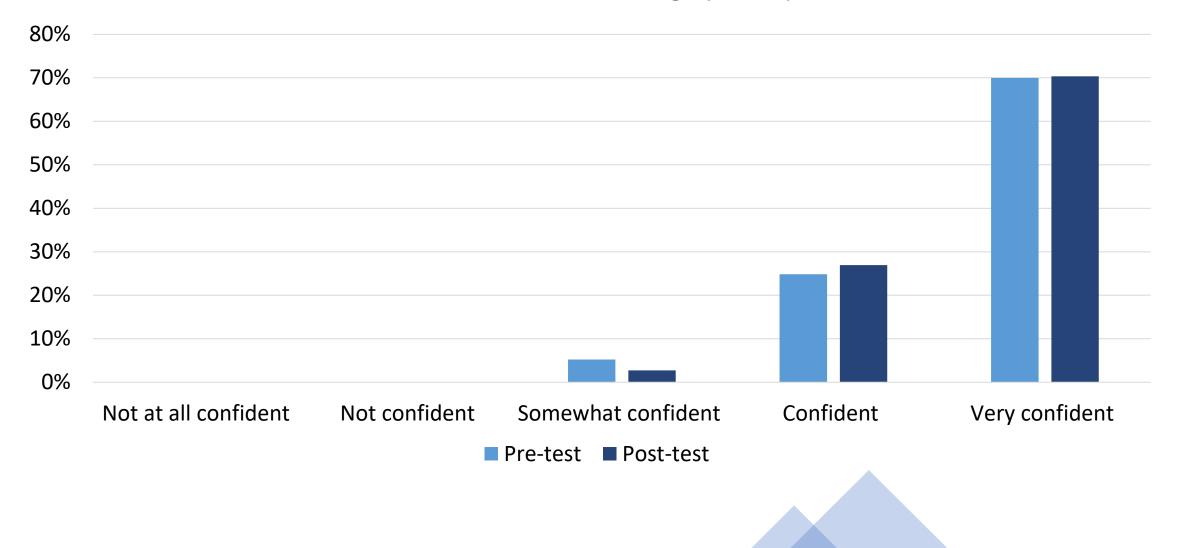
How CONFIDENT are you in your ability to work in an ethical and professional manner...? (n=559)



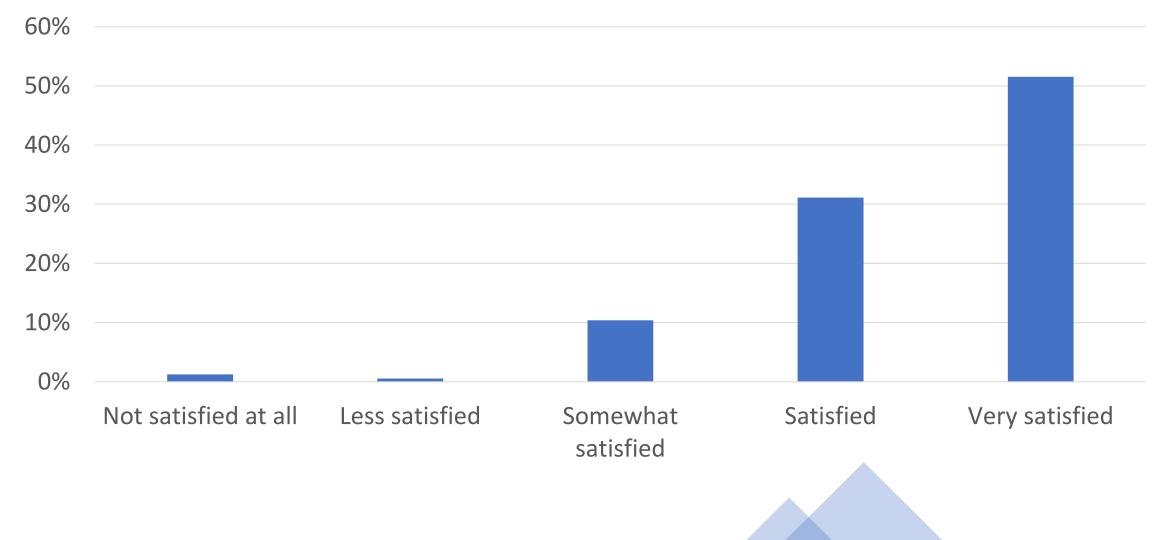
How CONFIDENT are you in your ability in obtaining appropriate training based on the unique needs of care recipients and seeking opportunities for ongoing education and training? (n=559)



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)



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

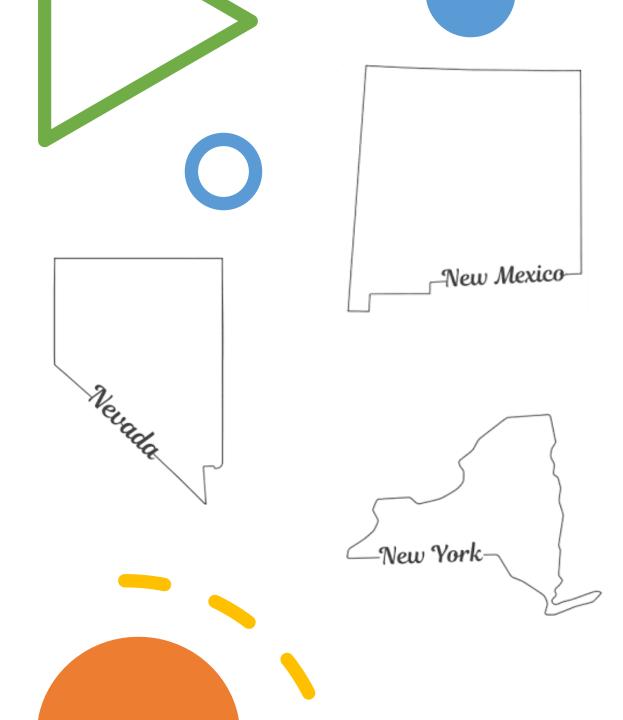


What is the MOST IMPORTANT thing you learned from the training?

- To be respectful and try and understand the situation from the client or families 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.

Insights from 3 States

- New Mexico
- Nevada
- New York



New Mexico – Implementation



- Attempted cold calls to random businesses as suggested in marketing workshop pilot grantees attended
- Training portal announced in monthly e-newsletters
- Hosted monthly informational sessions to provide an introduction and virtual demo of the training portal
- NMHU intern contacted hospitals, care coordinators, social workers and churches to share flyer and training portal
- Partnered with So'Tsoh Foundation on the Navajo Nation to distribute information on the training portal
- Made contacts with high schools

New Mexico – Impact

• Trainee Numbers:

- Registered: 147
- Completed: 113

During the pilot grant period, the impact was limited

- New Mexico did not have a registry available during the pilot grant
- NMCC did not receive support from the state of NM to engage the respite training portal and launch a registry
- Trainees reported the training was helpful, but they hoped for jobs from it that they have not gained

Post pilot grant period, the impact is still less robust than hoped for

- NMCC now has a Respite Care Registry which we financed and modeled on Wisconsin's respite registry
- Unfortunately, the State of New Mexico is behind schedule in implementing the lifespan respite care grant award. As such, NMCC has not yet announced the built-out Respite Care Registry to the public.
- NMCC is contacting training completers and encouraging them to add a provider profile to the Respite Care Registry so that they'll be ready when it launches

New Mexico – Lessons Learned

- Outreach and recruitment for a pilot program is difficult.
 - Mass marketing/generalized marketing does not work (mass emails, cold calls/emails, random flyer posting etc.)
 - It takes lots of education before folks understand the positive potential of the program
 - They need to see a personal connection to the program before they understand why its important (either a direct connection to themselves or to someone they care about)
- Launching a respite training portal with no registry for completers to list themselves on, leads to loss of interest in starting/completing the training
 - An 11-module training course is a large commitment for folks with limited time to spare
 - An online self-paced training portal is not easily accessible to everyone
 - People with low technology skills lose interest when they struggle with the online format
 - People without regular internet connections or high-speed internet cannot complete the training in an efficient manner
- Trainees require "hand-holding" to register and complete the training

Nevada -Implementation



Organizational Recruitment

- Existing partners pilot training
- Many had their own training curriculum already.

Individual Recruitment

- Flyers, presentations, and word of mouth
- English and Spanish flyers

• NV Lifespan Respite Care Coalition

- Help to spread the word.
- Provide reports on progress

Nevada - Impact

- Target Population rural/frontier, minority groups, and tribal communities
 - Minority Group focus Hispanic population
- Numerous New Connections
 - Higher Education institutions
 - Faith-Based organizations
 - New Community Based Organizations
- Small pilot, room for expansion and growth during reset.

Nevada – Lessons Learned

- Management Involvement needed higher level leadership to help set the stage for the project.
- **Community Buy-In** need a more formal assessment of training needs and opportunities.
- Customized Content develop customized content to be specific to different populations (i.e. Individuals with I/DD, Dementia, etc).
- **Registr**y must establish the registry first for tracking and future engagement.

New York – Implementation

-New York

- Outreach to existing partners
- Marketing strategies
- Embedding RCPT into existing NYSCRC respite programs
- Establishing new relationships with workforce development

New York - Impact

- Recognized as a comprehensive training for respite providers
- Included in NYS Master Plan for Aging and NYSOFA Four Year Plan
- Embedded in two NYS AmeriCorps Seniors programs
- Increased interest

New York -Lessons Learned

- **Registry** is an essential component
- Increased marketing will increase impact
- Pilot group resulted in many new ideas and approaches and contributed to the success of the RCPT in New York

Acknowledgement

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RCAVV Respite Care Association of Wisconsin





Thank you!



2023 Home and Community-Based Services Conference