



2022 WI Respite Summit Summary & Feedback

July 13-14, 2022

Poplar Hall, Appleton, WI



Day 1 - Insights

- Find out their contact preference from those on the registry to increase connectivity with family caregivers. Options could include:
 - Email
 - Text
 - Phone
- Have those on the registry identify other languages spoken – have to check boxes for options
- Added slide about specialty training
- Consider adding the following resources to the Resource Page –
 - Family Wall
 - Trualta
- Event Calendar
 - If you have an event you want to be listed, fill out this form (**need the form**)
- “It was amazing and had everything you’d need to start a respite business.” (quote about BRYC)

- Feature new providers in the newsletter
- Can we do tiers on the registry?
 - [CLTS Care Level Form](#)

Federal Grant Feedback

Outcome 1: An increased number of training opportunities available to respite providers throughout the state.

Themes

What's Good

- The trainings are very well done.
- Great resources you have
- The stipend process is really cool and beneficial.
- Specialty training is very beneficial regarding steps and processes to provide care for people in specific client groups.
- A good number of opportunities & good use of \$\$.
- Lots of outside resources online are great!

Retention

- Reaching out to current providers
- Helping places with high turnover.

Build the Pipeline / Recruitment

- State XXX and offer training / College internships
- Partner with DWD, NWCEP, Workforce Resources, Employment programs, etc., to help provide, introduce, and utilize trainings.
- High School students/internships

Mentorship (Related to BRYC)

- Provide more mentorship (1:1)
- Mentoring
- Mentorship / Follow up course to BRYC

Translation/Interpreters

- International translators (expand to other languages)
- Interpreter options/resources listed on the website

- Language barriers
- Provide training in Spanish and other languages

Information/Education/Resources

- What is respite? Most people are unaware of it. Have Zoom recordings of what respite is.
- Respite 101 for general populations
- 30-minute video/zoom meeting defining and explaining what 'respite' actually is.
- Continue to expand outreach for resources, even to other countries. European systems for respite care.

Training

- Grow training, so they are more frequent.
- State certify training
- Consider incentives for completing training

Awareness / Access

- Portal (for caregivers)
- Make the information more readily available.
- A care recipient/manager portal to assign trainings, communicate, and provide resources.
- Internet issues – offer training in person, paper downloads, etc.
- Reaching out to providers more.
- Reaching out to resource hubs.
- Marketing training more.

Other

- Create melt-down space for parent (caregiver)
- Provider support group



Outcome 2: A sustainable, coordinated statewide system of respite resources and programs for all family caregivers is enhanced.

****Themes****

What's Good

- It seems like lots of research is being done!
- Website navigation is seamless for families.
- Gradual increasing awareness across the state.
- Good outreach & education.

Retention

- Incentives for students to maybe travel, etc. to provide respite in areas further away from them
- More providers on the registry.

Build the Pipeline / Recruitment

- Schools – develop a club to educate the community (entrepreneurs) volunteers.



- More providers on the registry.

- Lack of providers in a specific location or age you're trying to serve.
- Find adults and volunteers
- Find those who are passionate
- Continue to incorporate different respite providers
- More partnership opportunities should be identified.

Training

- Provide a training for licensing
- Move toward state certification.
- Create a direct path from caregiver training – BRYC – Registry
- More partnership opportunities should be identified.

Access / Awareness

- Inconsistent awareness of respite resources.
- Family events/weekend social events (grants)
- RCAW in different areas of the state is becoming more familiar with resources in SE Wisconsin; however, Iron County ADRC had no awareness of respite resources.

Registry

- Provide a tier level of care identifier
- List of ALL providers, including agencies searching for support.
- Adding agencies to lists
- One-click to view providers/agencies

Outcome 3: New respite programs are created throughout the state.

****Themes****

What's Good

- I do like your current behavior trainings!

Awareness / Access

- Radio advertising
- Great program in BRYC program but not much awareness

Building The Pipeline / Recruitment

- Connecting with University service-learning programs, for example, nursing, psychology, etc.
- Develop a toolkit that guides community partners for volunteer-based respite: universities, tech colleges, faith-based, high schools, etc.

Information/Education/Resources

- Plan to transition program for older adults

Retention

- Networking is available between providers.

Training

- Push the program (Spanish/English) and train the trainer
- Trainer
- Focus on the 6-week program in alternative languages to address the underserved populations.
- Bring Respite To Your Community program
- More specific hands-on trainings
- Trainings on Adaptive equipment, G-tubes, potty training, etc., medical cares
- Expand training program to include 'medically fragile' and adults/children, 'Alzheimer's/dementia,' and 'autism.'
- Peer run Co-op
- Make BRYC a regional event with marketing
- Assessment

Registry

- Level of care selections explaining what is (could be) required at each level so the respite providers can select and show their comfort level – core level form
- We need to increase awareness and look for additional partners such as faith communities (rural faith communities)



Day 2

Feedback/Insights on Registry

1. How can we increase the number of profiles on the registry?

- Universities, Tech Schools, Marketing to Students (doesn't have even to be healthcare)
- Could it be part of the curriculum
- Job Fairs at Universities
- Send marketing materials today to centers
- Contacting the Adult Family Homes and letting them know about the registry, so they offer respite
- CNAs – marketing to them that respite care is an option
- Radio Stations
- How do you market and define respite to get those interested?
- Aging units, working with GWAAR
- Facebook and marketing ads (this is what a provider could be like, etc.)
- They can set their hours, be their boss
- Add something to the training page incentivizing the flexibility
- It's essential to do a personal follow-up with those who've completed the
- If you know anyone else interested, please let them know about the training
- Handshake (app)
- MCOs – more outreach
- Life After High School (event)
- Transition programs for high schools
- AARP membership – can we market to retired people?
- Mall Walkers “you don't have to do this every day.”
- Rural communities – faith communities and educating social workers in SNFs
- Community health partners – AHEC
- Tavern League
- Food trucks
- Radio Show
- Veterans (AMVETS of Wisconsin)

2. How Can We Better Connect Respite Care Providers with Family Caregivers?

- State CLTS meetings (RCAW staff be guest speakers)
- WABS (Wisconsin Association of Benefits Specialists)
- Keep it fresh into the ADRCs (I&As & ADR directors)
- General Public Service Announcements of what respite is
 - Some professionals don't use the term respite – they use the term “break.”
 - The word is not well understood
- Asking caregivers, “what would you do if your loved one was here (adult day break)” and that's how you can
- Find ambassadors from other organizations to be RCAW ambassadors
- Created a Kiosk
- Libraries are trying to get more involved in the community, and could they host tech classes and also have an RCAW kiosk in the library
- Connect respite care providers with family caregivers
- Radio commercials
- Mileage reimbursement
- RCAW can create business cards and send them to people listed on the registry to hand out to people

3. How or What Can We Do to Increase Respite Being Achieved Because of the Registry?

- Create a universal “everyone who is employed with whoever” (fiscal agents) be employed through the registry
- Putting marketing materials in the Initial Contact Packet (for ADRCs)
- Host a Town Hall (during caregiver month) and talk about funding to put on a buffet, reach out to a local politician, and have someone from RCAW come and talk about what respite is.
- ADRC aging conference for the state
- DCS and Caregiver specialists would be the ones who know who they should get to (at the top)
- Youth and Transitions Options Counseling
- Forward Health Portal
- Advisory Board – 1 per county

The Cooperative Business Model



Overview

- Co-ops are a legal entity
- Different than a non-profit, but are not for profit
- You can incorporate as a co-op and operate as a non-profit
- Types of Co-Ops
 - Consumer
 - Worker
 - Multi-Stakeholder
 - Purchasing and Shared Services
 - Producer
- Examples:
 - [Soaring Independent Cooperative in Dane County, WI](#)
 - [Cooperative Care in Wautoma, WI](#)

1. Who are the primary stakeholders in the respite care community?

- “Everybody”
- County,
- ADRC,
- Employers,
- Local businesses,
- Family caregivers,
- Care recipients,
- Co-op workers/care providers

2. What are the needs of each of the stakeholders?

- Consumers want quality care at a lower cost / Workers want a livable wage
 - This can be conflicting values
- Benefits (affordable)
- Can stakeholders provide services (i.e., barber, etc.) to pay their co-op dues?

Of the stakeholders you’ve named, can you envision a group that could organize cooperatively to meet shared needs while also addressing the needs of the entire community?

- SNFs, CBRFs, AFHs, Hospitals
- Moms of kids living with special needs and cannot access childcare, etc.