May 12, 2015
Montana Respite Summit Round Table Discussions

1. Respite is a good idea obviously. We at this table already know its benefits and how important it is, but many people who are full-time or part-time caregivers of a loved one, do not. The word “respite” may not even be one a lot of people have ever heard. Also, many Montanans might not even be open to this idea. We are independent bunch of people, as we all know.

What do you suggest to help people understand what respite is and value of respite in their lives if they need it or want it?
How should we go about reaching caregivers? What methods do you suggest we use? What specific messages (including the actual words) should we use to help people understand that all caregivers deserve and need breaks periodically? What words do you suggest we use that would be persuasive?

Table One’s ideas:
- Senior Center presentations.
- Married couples still need time without the kids.
- Explain they need a break.
- Hit caregiver burnout, and who is going to take care of both of you.
- “You can’t get a break, then you don’t have a gift to give.”
- Don’t say the word “caregiver” as the spouse caring for a spouse.
- Participants love it and sometimes want to go.
- Show the example for people to learn about the positives of the program.
- Give permission to use the program.
- How can we get the message to people to let them know what it is: newspaper, Montana Senior newspaper, community message boards, build mailings (but how do we get a mailing list?), letter from food banks in food bank boxes, churches (available in the foyers, and by talking to the pastors and secretaries), and pharmacies.
- In smaller towns, we recommend: Sheriffs and fire departments.

Table Two’s ideas:
- Small presentations at Senior Centers.
- Caregiver support groups.
- Word of mouth.
- Newspaper articles.
- Talk to church groups.
- Visit other support groups.
- TV messages.
- Guest speakers.
- Flyers via: newspapers, senior newsletters, bulk mailings, Senior Centers, Meals on Wheels, and churches.
- Use language such as: “You are a gift to the person you are caring for.” “We are here to help you care for your loved one.” “How do you see yourself as a caregiver?”
Table Three’s ideas:
- Billboard or sign that says “Respite is ...”
- Doctors’ offices, all medical staff and dentists offices ask “Are you a caregiver?”
- Provide information to rural health clinics.
- Approach caregivers. Friend comes over and says “Hey, let me do the dishes for you,” and then refers to respite services.
- Have clergy mention they are concerned.
- “The help is for your wife, not for you.”
- Target men. Speak to men’s groups.
- Use the video.
- Men’s caregiver retreat.

Table Four’s ideas:
- A public service announcement is a great idea!
- Newspaper ads.
- Radio.
- Television ads, PSAs in between the news, in the early afternoon.
- “Do you need a break away before you go crazy?”
- “Burnout”
- Tell a real life story.
- Story telling that people can relate to.
- Rewarding to be the respite person.
- Somehow convey to caregivers their needs are just as important as the person they are giving care to.

Table Five’s ideas:
- Some people won’t want to talk about it, but will talk about it to one person, not in a group setting like a support group.
- Word of mouth – trust, pertinent to community.
- A person who can support the process to respite.
- Personal stories and correlation with how it could be used, the value piece.
- Professional who knows the person – provides an opportunity for information.
- Having knowledge of the resources, taking the opportunities when the door is opened.
- Personal, peer-to-peer support.
- Think of respite more broadly. When kids in sports creates a break for parents.
2. Very good resources exist for caregivers! We are not alone in our caregiver responsibilities! There are materials and resources to help, and people to make referrals and even help in affording respite. You’ve heard about some of them today including the voucher funding and provider contract information, the video, support groups, and service providers.

**How do you suggest we do a better job of making these resources visible and truly accessible to caregivers?** In big towns and little towns?
To hospitals for them to pass along? To Senior Centers for them to distribute?
Who else and how else should the Coalition be reaching out to Caregivers to be sure they know about all the resources available to them? How can we make it easier for people to access what is available to them?

Table One’s ideas:
- Patient representatives at hospitals and nursing homes.
- Social workers.
- Partner with Independent Living Centers including LIFT.
- Partner with hospice.
- VA – aid and attendance.
- Senior companions.
- Health fairs.
- Post offices and grocery stores.
- Stable a flyer to prescriptions, or print it on the bags themselves.
- Pow Wows and County Fairs.
- City and county health departments.
- Printed on grocery bags.
- Colleges.
- CNA education programs.
- Adult Protective Services.

Table Two’s ideas:
- Word out to Police and Fire Departments.
- Adult Protective Services.
- Find a donor to pay for advertising.
- Follow-up with a social worker to check on people who are released from the hospitals and nursing homes.
- Veterans Administration Hospital.
- Health fairs.
- Meals on Wheels.
- Local grocery stores.
- Lifespan Respite automobile license plates.
- Home health agencies.
- Opportunities Inc., and the other Human Resource Development Councils across the state.
- Family Services.
- City and County Health Departments.
- Grocery bags.
Table Three’s ideas:
- Billboards. “Take time.”
- Health fairs.
- “Give the gift of time.”
- Information to the medical community.
- Retired teachers’ groups.
- Church groups – men’s and women’s.
- At risk homes.
- Mother’s groups.
- Information in newborn packets given to new moms.
- Adult Protective Services employees.
- Car window decals with our slogan.
- License plates.

Table Four’s ideas:
- Presentations. At Senior Centers is one opportunity to consider.
- Brochures.
- Coffee spots the elderly visit.
- Discharge planners; go talk to them and give them the information.
- Adult Protective Services.
- Aging Services / ADRCs.
- Anywhere that specializes in shampoos and sets.
- Colleges – nursing and CNAs.
- School counselors – Alta Care.
- Office of Public Assistance.
- VA clinics.
- Pharmacies.

Table Five’s ideas:
- Nurses need the information, as well as physician assistants.
- Education system and information.
- Send home to parents from special education teachers.
- Social media.
- Organizations – medical waiting rooms.
- Aging Horizons TV program.
- U-tube video for the video we saw today and PSAs.
- Commercial clips on TV between programs
- Publications, brochures, tidbits, AARP.
- Facebook.
- Council on Aging.
- Public restrooms, on doors, in coffee shops, cozies, advertising, place mats.
- Pharmacies.
- Churches.
- Salvation Army
- VA Clinics.
- Summer camps, one or two lines on application.
3. The Statewide Respite Coalition is going strong and meeting its goals, but we want to the best possible job for Montana’s caregivers and the people they care for.

**What can we do to help insure that the Coalition is able to continue its work for a long time and benefit as many Montanans as possible into the future?** What do you suggest? Who is missing from the Coalition membership list? Can you think of any sectors or representatives we should have at the table? Feel free to recommend kinds of people or even specific people. Who should we be collaborating with that we might now be right now? Who should we reach out to and invite to join us? Can you think of ways to help insure our work continues after the grant is finished, in two years? Are there other funding opportunities we should look into, to make sure the website referral resources and the voucher program can continue?

Table One’s ideas:
- Keep recruiting new members.
- Advocate to the legislature.
- Preventive care through insurance.
- Check with other states to see how it is being done.
- Fundraise to corporations.
- Curriculum in nursing school programs.
- Collaborate with the legislature, AARP, the Marian Stanley Smith Fund (a foundation), and tie into Caregivers Month in November.

Table Two’s ideas:
- Money.
- Keep recruiting; do not stop!
- Keep grants going.
- Advocate with the Legislature.
- Preventive care, through insurance companies.
- Check with other states who have a good success rate.
- Get more people involved.
- Foundations or big business donations.
- Teach nursing students about caregiving.
- Dennis Washington Foundation.

Table Three’s ideas:
- Insurance companies.
- Community foundations.
- Become a 501(c)3 non-profit organization as a coalition.
- NorthWestern Energy.
- Montana Dakota Utilities.
- Show the savings in dollars by using respite services.
- Share success stories about using the voucher.
- AARP needs to join in.
- National Respite Day.
- Respite Awareness Day or Week.
- Respite during conferences.
- Get cosmetologists involved, and have a “Take Care of Your Caregiver Day.”
- Legislation.
- Visit the Director of the Department of Public Health and Human Services.

Table Four’s ideas:
- Promote, promote, promote.
- Share success stories.
- Advocate.
- Word of mouth.
- Who is missing? Councils on Aging, Home health workers, discharge planners, providers, and I and A’s / SHIP Counselors.
- After the grant runs out, advocate for funding. Ask for donations from people who have received services. Go to your local legislator. Look for other grant opportunities.

Table Five’s ideas:
- Lobbying education – legislators, testify.
- Train and recruit Coalition members.
- Legislators, meetings.
- Paid coordinator for the Coalition.
- Shared ownership.
- Recruit specific types of members based on expertise.
- Working committees are essential.
- Passion and have the time – personal requests and connections.
- Conference groups – AARP, others.
- Funding – foundations.
- Other sources of grant funding.
- Barter system – bank time for respite and options. A way to contribute to a fund to pay for respite.
- Endowment fund.
- National Caregiver Awareness Month is November, the them could be respite.