



ARCH Data Collection Workgroup Meeting

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Today's Call Agenda

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Brief review of aims, concept, and process

Brief recap of the last meeting's activities and actions.

Group discussion on most recent draft of outcomes and indicators.



Workgroup Aim, Concept and Process

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Aim

- To identify a set of data elements and data collection protocols that will be a future requirement of all Lifespan Respite Grantees.

Concept

- To achieve our aim, active participation of Lifespan Respite grantees, ARCH staff, and ACL staff will help ensure appropriate data are collected to demonstrate effectiveness and that the expectations for data collection are reasonable and achievable for all grantees.

Process

- Through a series of web-meetings, conference calls, and email exchanges, the team will draft, review, and finalize data collection protocols.

Outcomes	Indicators
Grantees meet the outcomes identified in their proposal.	Semi-annual documentation of progress made towards achievement of outcomes and indicators using Outcome 1 Tracking Form.
Grantees have a coordinated state-wide system that increases the involvement of organizations and individuals in promoting accessible respite.	The number of stakeholders who actively promote, fund, provide, or otherwise support respite services.
	External resources (any LR grants) are leveraged for sustaining the LR program. (measured with a leveraged funds worksheet.) worksheet.
	An increase of faith-based, community-based agencies, public agencies, or private clubs/organizations with a pool of respite providers available to assist local caregivers.
	By the final year of this grant, resources outside of the Lifespan Respite grant are secured for the continuation of a at least one key project activity for an additional 2 years.
	The number of public and private organizations that include language related to respite in their policies and procedures manuals.
	The number of respite hours received by caregivers.
Lifespan Respite activities result in increased access to respite resources across the state.	The number of respite providers available in in the state.
	The number of caregivers unable to locate an appropriately trained provider
	The number of steps caregivers report having to take prior to accessing respite
	There are more points of contact for caregivers to access respite information and services that were not available before Lifespan Respite funding.

Follow-up interviews with 5 grantees. Some themes:

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- Grantees will welcome clear requirements for performance measures. If they know what is expected before they are awarded the grant, it is much easier to prepare.
- Grantees would need to establish a strong and extensive network of stakeholders across multiple sectors as a first step prior to collecting any data. That network will be key in collecting data on all indicators.
- Most grantees should be able to collect the data needed with preparation and support. The staff who collect data must value the project. They will need training and support. They are more likely to collect clean data with clear instructions. They will be more enthusiastic when they can see the data presented in tables and charts.
- The need for collecting qualitative data should not be lost in the shuffle. Collecting numbers is necessary, but to truly understand why and how results were achieved, the ‘story’ of the program should be recorded.
- ARCH/ACL will need to prepare clear written guidelines, ongoing peer and ARCH support, timely technical assistance through the data collection and reporting process, and feedback from ARCH and ACL after reports have been reviewed.

Most recent draft. Your thoughts, please.

- Do you have sources that could provide you with data for tracking these indicators?
- What obstacles do you foresee to accurate data collection and reporting?
- Are we missing some critical indicators that ALL grantees should measure?

Outcomes	Indicators
1. Grantees meet the outcomes identified in their proposal.	1.1. Semi-annual and final progress made towards achievement of outcomes and indicators.
2. Grantees have a coordinated state-wide system of accessible respite.	2.1. The number of stakeholders who actively promote, fund, provide, or otherwise support respite services.
	2.2. The external resources used for sustaining the LR program.
	2.3. The number of caregivers receiving respite.
	2.4. Organizations/agencies that connect caregivers with a single point of contact for respite information and services.
	2.5. The number of respite providers available.
	2.6. The number of caregivers on waiting lists or turned away due to a lack of appropriate providers.

Next Steps

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- ARCH and ACL will draft a data collection tool based on feedback from these discussions.
- Upcoming workgroup call to present and review the draft data collection tool: Timing to be determined
- Pilot testing of the draft data collection tool: Initially planned for late Spring 2018, anticipate a delayed start for later in 2018.