

RESPITE CARE POLICY

I. INTENT

It is the intent of San Andreas Regional Center to make respite services available to assist families in maintaining the consumer in the family home. Respite is part of a network of support services that are available for families and is not meant to supplant other services.

II. DEFINITION

Consumers, Individuals served by the regional center and Persons we serve are terms that are used interchangeably throughout the San Andreas Purchase of Service policies to refer to those individuals who receive services from the regional center. These same terms are used throughout the Lanterman Developmental Disabilities Services Act.

Respite is the provision of intermittent and/or regularly scheduled temporary non-medical care to consumers with developmental disabilities on an in-home and/or out-of-home basis. Respite services are designed to do all of the following:

- \$ Assist family members in maintaining the consumer at home.
- \$ Provide appropriate care and supervision to ensure the consumer's safety in the absence of family members.
- \$ Relieve family members from the constantly demanding responsibility of caring for the consumer.
- \$ Attend to the consumer's basic self-help needs and other activities of daily living, including interaction, socialization, and continuation of usual daily routines which would ordinarily be performed by the family member.
- \$ Meet emergency needs.

In order to provide appropriate respite services, San Andreas will make available the following options:

In-Home Respite is the provision of respite services within the consumer's own home. Parents/family member may choose to utilize an Employer of Record (EOR) respite agency and/or Financial Management Services (FMS) in order to use family members or others as the respite worker, or they may choose to use a vendorized agency, which provides the worker.

Out-of-Home Respite services are provided by a vendor who is licensed by Department of Social Services or an agency authorized by DSS or it is licensed by Department of Health Services. There are numerous service codes under which San Andreas can provide respite. Respite is provided in a setting outside the consumer's home. Parents may choose a licensed community care facility, vendored camp, or an intermediate care facility for the developmentally disabled licensed by the Department of Health. Vendored facilities must have training, education, and the skills to perform the required licensed services. Out of home respite service is intermittent or regularly scheduled temporary care to consumers and is designed to relieve families of the constant responsibility of caring for a family member; to meet planned or emergent needs of the family; to allow parents the opportunity for vacations or other necessities of family life.

III. POLICY

San Andreas shall purchase respite care to assist the family member. Authorized respite hours may be used by the family at any time during the authorization period. Families of consumers in out-of-home placement are not eligible for respite services. Families who use the Financial Management Services (FMS) or Employer of Record (EOR) must first obtain a vendor number, and must comply with all federal and state requirements. Respite provided by trained health professionals is covered in the In-Home Skilled Nursing Policy.

The respite needs of each family shall be individually assessed by the planning team to determine the actual number of respite hours needed. Families customarily use from 12-24 hours/month. This number is suggested as a guideline. The planning team will use the "Family Needs Assessment Summary Sheet" as a tool to help determine individual respite needs. Families participating in the Financial Management Services program, and/or Employer of Record (EOR) must use respite providers who are at least eighteen years of age and not a spouse.

IV. PURCHASE OF SERVICE (POS) STANDARD

The type and amount of respite services that San Andreas will purchase will be determined by the planning team based on consumer and family needs.

V. EXCEPTIONS TO POLICY

The executive director has full discretion to authorize service purchases which are exceptions to the board-adopted purchase of service policies. The executive director has designated different members within the organization who may authorize a director's exception. They are called the director's designees.

The first formal discussion of a request for service takes place at the planning team meeting. If the request falls within the service policy, the request is granted.

If the request for service is not consistent with the policy, the service coordinator starts the exception review process by exploring the basis for the request. A time line for the director's exception review is set by agreement between the consumer/family and the service coordinator but the time line may not exceed fifteen (15) days. Within that time, another planning team meeting will be convened. In the meantime the coordinator presents the information to the manager to determine whether a director's exception may be warranted.

At the scheduled planning team meeting the decision will be made. The director's designee will attend the planning team meeting if necessary.

If the exception is granted, the service coordinator amends the person-centered individual program plan, notifies the consumer/family, and gives a copy of the amended plan to the consumer/family.

If the exception is not granted, the service coordinator promptly informs the consumer/family that it has not been granted, informs the consumer family of their appeal rights, and sends a notice of action and a fair hearing form.

VI. NOTICE OF ACTION

If a decision is made to deny, reduce, or cancel the service without the agreement of the consumer or the consumer's representative, a Notice of Action will be sent.

Adopted 03/16/2015