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| **MONTCALM CARE NETWORK PROCEDURE 611 North State Street, Stanton, MI 48888** | |
| SUBJECT: Respite Care-Family  Information and  Responsibilities | Section: 8146A |
| Effective Date: June 15, 1998 | Revised Date: April 28, 2021 |

The following are guidelines for persons/families using Respite Care:

* The amount of Respite Care offered to families will be based on the availability of funds and on an assessment of need. Persons/families will be billed for Respite Care based on a daily ability to pay.
* Out-of-Home Respite Care must be provided by a licensed provider as may be required by law. Out-of-Home Respite in residential or foster care settings also require supervision by a placement agency. For adults, this may be the Montcalm Care Network. For children, this function must be provided by a licensed child placement agency such as the Department of Health and Human Services.
* All providers must be independent contractors or must be employed by an independent provider who has a contract for services with Montcalm Care Network. Individuals in services may also contract with providers using a Self Determination arrangement.
* Ordinarily, any single caregiver may not provide care exceeding forty (40) hours during any single week nor beyond eight (8) hours a day. Exceptions may be made in unusual or emergency situations and only with the approval of the employer of record. Families should plan for more than one person to provide direct care during extended respite periods.
* Respite allocations that are not a part of an entitlement program are contingent on budgeting resources, and may fluctuate with overall usage in the program. Families will be notified of any changes in writing.

Families are expected:

* To participate in the assessment or the review of need for Respite Care at least annually. These assessments are needed for the re-authorization of this service.
* To interview prospective Respite Providers, to ensure that the provider is appropriate to care for the family member, and to assure that the individual will be provided with safe care.
* To evaluate the safety of the environment of care including the safety of persons the individual in services may encounter. This may include Licensure of the location and provider if required by law. The Provider agency will ensure appropriate background checks as required by Medicaid guidelines.
* To provide the caregiver with a safety plan consistent with the needs of the individual and with the families wishes. Minimally, this plan must include a telephone number or location of where the family can be reached in an emergency; a list of medications, potential side effects and possible adverse effects of the medications prescribed; a list of special medical or behavioral instructions, if any; contact information for the primary physician, mental health emergency services; and if the respite is provided in the family home, the nearest ambulance, fire department and police agency and a sheltering and evacuation plan in the event of a tornado, flood or other environmental emergency requiring relocation.
* To provide all caregivers with any items necessary for care (i.e. diapers, medication, special devices).
* To provide funding for the individual and the caregiver if special activities are arranged as part of a respite outing (i.e. taking the individual to a movie, paying for admission to sporting events, etc).
* To provide all caregivers with training and information about the special needs of the individual in services and to assist with training related to the requirements of the person centered plan.
* To fully cooperate in the annual assessment of the family’s ability to pay for services, and to pay the daily ability to pay determined and agreed upon, through the annual financial determination of ability to pay.
* To work cooperatively and be flexible in determining a schedule for Respite hours with the provider.
* To notify the primary clinician if out-of-home placement, or hospitalization is planned, or has occurred.
* To contact the primary clinician if help is needed with respite.
* To contact the primary clinician in the event of any concerns or problems regarding respite use.