

LEOFF I Policy Procedure Manual
Appendix E
Respite Care Services

The goal of this benefit is to provide periodic relief to a family and/or unpaid primary caregiver caring for a LEOFF I retiree (member). The primary caregiver must be principally responsible for the member and reside at the same address. Two (2) weeks of respite care in any twelve month period may be approved by the LEOFF I Board if the member meets the clinical need for the service and it's available.

RESPITE SERVICES CAN INCLUDE THE FOLLOWING SETTINGS AND OPTIONS:

- 1) An in-home respite program, where services are provided in the family's home or a care provider's home
- 2) A center-based respite program, where family caregivers bring the care recipient to a facility in the community to receive respite care
- 3) An adult care setting, such as an adult care center or an adult family home, which is designed to provide temporary respite care in addition to their regular adult care services
- 4) Recreational programs provided through parks and recreation departments and YMCA programs, which provide recreational programs that offer respite breaks
- 5) Generic community programs where adults receiving respite services are integrated into programs

Your physician or other primary care provider can answer questions about the member's needs. Some important questions to talk about with your provider and family include:

- 1) How much assistance do I need for my activities of daily living (e.g., bathing and getting dressed)?
- 2) What are my caregiver's needs?
- 3) What type of Respite Care does my family caregiver prefer?
- 4) What mix of Respite Care options will work best?
- 5) What is the best way to use the two weeks per year?

HOW TO CHOOSE A RESPITE PROVIDER:

Some states require licensing for respite providers. If your state does not, it is even more important to do a thorough background and qualifications check, especially if

you are dealing with individuals who are not associated with companies or agencies. Most company and agency providers will have done background and reference checks for their employees, but do not assume, ask instead. Here is a quick checklist to use when considering a provider:

- 1) Conduct a telephone screening
- 2) Follow up with an in-person interview
- 3) Ask for references
- 4) Check references and do a criminal background check
- 5) Evaluate costs and financing
- 6) Write a contract that provides specific details

The idea is to get to know the prospective provider as well as possible before committing to the relationship. Then, you must communicate your expectations in very specific terms. Finally, these expectations should be in writing to help assure that both parties understand them, and will not need to rely on memory if and when difficulties may arise later. The LEOFF I Board will only reimburse expenses for a licensed caregiver.

HOW TO APPLY FOR RESPITE CARE SERVICES:

The member must first qualify for skilled nursing facility care. The member's physician must complete a **Medical Request for Skilled Nursing Facility Care** form. In addition, the family member must request in writing respite care services, detailing the type of care and duration.

Please submit the forms to:

LEOFF I Disability Board
Attn: Disability Board Secretary
220 4th Ave S
Kent, WA 98032

Funding for respite care shall not exceed 14 days per year and the long-term care provisions daily rate approved by the LEOFF I Board.