

Children's Long-Term Support (CLTS) Waivers Qualified Provider Standards Verification Provider Service: Respite Care

The information collected via this form is required to ensure the qualifications of unregulated providers and should be updated annually. While the completion of this form is voluntary, county waiver agencies must verify and document all of the information regarding provider standards that is collected on this form. In lieu of this form, agencies may use locally designed forms with prior approval from the Children's Services Section.

A. PROVIDER / EMPLOYEE INFORMATION

Provider/Employee Name	Last	First	Middle Initial
Street Address	City	State	Zip Code

B. SERVICE DESCRIPTION

Respite care services are those services provided on a short term basis, to relieve the participant's primary caregiver(s) from care demands. Institutional and residential respite services may involve over night or partial day stays by the participant. Costs for room and board in institutional and residential settings may be included in the charge to the CLTS Waiver. Costs for room and board in home based or other settings may not be included in the charge to the CLTS Waiver.

C. QUALIFIED PROVIDER STANDARDS

Providers of respite care services must meet the following minimum training and qualified provider standards in order to be authorized to receive CLTS Waiver funding. By checking off each box below and signing at the bottom, employing entities (i.e., agencies or families) acknowledge the requirements of this service and have verified that the employee named above has met these standards.

- The provider meets the standards required of a certified Medicaid hospital, nursing home or ICF-MR
 (NOTE: STOP HERE and keep as part of child's record as this is a regulated setting)

OR

Meets the following CLTS waiver qualified provider service standards and training requirements of home-based respite, as described in the Wisconsin Medicaid Home and Community Based Services Waiver Manual:

- a. Is not listed on the Wisconsin Caregiver Misconduct Registry; does not have a substantiated finding of abuse, neglect or misappropriation, and has not committed a crime that is substantially related to the provision of care or supervision of this service.
- b. Is trained to safely deliver services, so as not to endanger the participant.
- c. Is trained to recognize and appropriately respond in the event of an emergency, including a protocol for contacting local emergency response systems and the prompt notification of the county waiver agency.
- d. Is trained on participant-specific information, including individual needs, functional capacities, strengths, abilities and preferences. Understanding and respecting participant preferences in the provision of assistance with activities of daily living including such services as bathing, feeding, grooming, dressing, transfer, ambulation and the use of adaptive aids and equipment (Include these training details in Section E below).
- e. Is trained on general information about the target population(s) which are applicable to the individuals the provider intends to serve (DD PD SED/MH).
- f. Is trained in: working effectively with participants; developing professional ethics and interpersonal skills; understanding and respecting participant direction, individuality, independence, and rights; understanding procedures for handling conflict and complaints; respecting personal property, cultural differences and family relationships.
- g. Is trained in: providing quality homemaking and household services, including understanding good nutrition, special diets and meal planning and preparation; understanding and maintaining a clean, safe and healthy home environment; respecting participant preferences in housekeeping, -shopping and homemaking tasks.
- h. Is trained on the county waiver agency and contract agency policies, procedures and expectations for providers including confidentiality of participant information according to federal Health Insurance Portability and Accountability Act of 1996 (HIPAA) privacy and security rules. Training must address billing and payment processes, record keeping, incident reporting and other reporting requirements, arranging of back up services and must include the name and telephone number of both the waiver agency care manager/support and service coordinator and the primary contact person at the agency.

Medicaid Home and Community-Based Services (HCBS) Waiver Manual for the CLTS Waiver Program (10/2022): <https://www.dhs.wisconsin.gov/publications/p02256.pdf>

4.6.26 Respite Care

4.6.26.1 Definition

Respite care services maintain and strengthen the participant's natural supports by easing the daily stress and care demands for their family, or other primary caregiver(s), on a short-term basis.

These services provide a level of care and supervision appropriate to the participant's needs while their family or other primary caregiver(s) are temporarily relieved from daily caregiving demands. Respite care may take place in a residential setting, institutional setting, the home of the participant, the home of a caregiver, or in other community settings, as outlined below.

Respite care services may be delivered by remote services (refer to Chapter 4.3.2 Remote Services), as applicable and agreed upon by the child or youth and their family. Refer to the CLTS Waiver Program Benefit Code Crosswalk (P-02283) for the specific components of respite care services that may be delivered remotely.

Payment for the provision of respite care is subject to statewide uniform rates. See the Children's Long-Term Support (CLTS) Waiver Program Service Rates webpage for additional information.

Residential Respite

Residential respite may be used for overnight stays or partial day stays for the participant, in settings that are otherwise eligible living situations for the CLTS Waiver Program.

Residential respite may be provided in the following settings:

- Adult family home (AFH) certified for one or two persons.
- AFH licensed for three or four persons.
- Children's foster home, including exceptional treatment foster home.

Institutional Respite

Institutional respite may be used for overnight stays or partial day stays for the participant, in settings that are not otherwise eligible living situations for the CLTS Waiver Program.

All institutional respite requires prior approval from the Wisconsin Department of Health Services (DHS).

Institutional respite care services may be provided in the following settings:

- Community-based residential facility (CBRF)
- Group home for children and youth
- Hospital
- Intermediate care facility/individuals with intellectual disabilities (ICF/IID)
- Nursing home
- Residential care center (RCC) for children and youth
- Shelter care facility
- Wisconsin state developmental disability center

- Wisconsin state mental health institution

Home-Based Respite

Home-based respite may be used for overnight stays or partial day stays for the participant, in their primary residence or at the home of a caregiver.

Community Respite

Community respite may be used for partial day stays for the participant (and not for overnight stays) in the community.

Respite Camp

Respite camp may be used for overnight stays or partial day stays for the participant when the primary purpose of the service is to temporarily relieve parent(s) or guardian(s) from daily caregiving demands.

4.6.26.2 Service Requirements

All providers of respite services are required to communicate with designated county staff and other providers about any events or situations that meet the definition of an incident in Chapter 9 — Health and Safety, and in accordance with Children’s Incident Reporting for Providers (P-02613). Any communication must follow federal confidentiality laws. Refer to Chapter 9 for additional information about incidents and incident reporting requirements.

Institutional respite care services require prior approval by DHS, except in an emergency situation. Emergency situation is defined as a situation in which the primary caregiver suddenly or unexpectedly becomes unable to provide care due to death, illness, disability, or other unanticipated event.

All institutional respite requires prior approval from DHS. The request for prior approval must include the following information:

- The reason for the request, identifying the caregiver in need of respite.
- The anticipated length and frequency of the respite placement.
- A description of the barriers to the use of alternative community-based services.
- A list of providers that were considered and why these providers cannot meet the participant’s needs.
- A description of the proposed respite setting and the reasons that setting was chosen, including confirmation of appropriate licensure and how the setting will benefit and meet the needs of the specific participant.
- An assurance that restrictive measures will not be used, or if they’re likely to be used, a restrictive measures application must be submitted with the institutional respite request.

The request may be made using the DHS form, Variance Request for Institutional Respite (F-21059).

Approval for institutional respite is specific to the participant, setting, and duration specified in the request. If the setting, duration, or other approved criteria change, a new request must be submitted.

When home-based respite care services are provided in a private home other than the home of the participant the following conditions apply:

- When the planned length of stay is to be 72 hours or less:

- The home is the preferred choice of the participant and their primary caregiver, and
- The caregiver assures that the home is safe and the respite provider is trained and capable of providing the appropriate level of care and supervision needed.
- When the planned length of stay is to be longer than 72 hours:
 - The support and service coordinator (SSC) must assure that the home meets the specifications in Article V of the Wisconsin Medicaid Standards for Certified 1-2 Bed Adult Family Homes (P-00638), Wis. Admin. Code §§ DCF 56.07 and 56.08, and
 - The SSC assures that the provider standards for other person appropriately qualified as approved by the county waiver agency (CWA) and as related to the unique service being provided (refer to Provider Standards and Documentation) are met.

4.6.26.3 Service Limitations

Respite care stays may not exceed 28 consecutive days.

Payment for other duplicative services is precluded while the participant is in respite care.

The cost for transporting a participant during the provision of respite services may be funded through transportation services in addition to the respite service rate. These transportation costs can be funded only as a mileage claim, and not as a per trip cost. (Refer to the transportation service description.)

The components of respite care services that may be delivered by remote services are limited to those outlined in the CLTS Waiver Program Benefit Code Crosswalk (P-02283).

This service may not duplicate any service that is provided under another waiver service category.

The CLTS Waiver Program is the payer of last resort and is not a source of funding for any service that would otherwise be responsibility of another public or private entity. The following programs and services must be considered prior to using waiver funding and, where applicable, be incorporated into a comprehensive plan for participants:

- Public benefits, energy assistance, or other poverty-related services.
- Court-ordered, juvenile justice, or child protective services, including protective placement and guardianship or legal services.
- Any goods or services covered by a third party, including private insurance or Medicaid, such as:
 - Early and Periodic Screening, Diagnostic and Treatment (EPSDT) benefit (known in Wisconsin as HealthCheck Other Services), which provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid or the Medicaid state plan services.
 - Mental health services that are otherwise available.
- Educational or other services funded by the Department of Public Instruction or Individuals with Disabilities Education Act.
- Prevocational or other services offered through the Department of Workforce Development, Division of Vocational Rehabilitation.

Community respite is limited to partial day stays for the participant and may not be used for overnight stays.

4.6.26.4 Service Exclusions

There are no exclusions beyond those outlined in sections 4.01-4.07 of this manual.

4.6.26.5 Provider Standards and Documentation

General Provider Standards

Respite care providers must maintain documentation to demonstrate providers and staff meet the training standards as described in the applicable Provider Types and Qualifications below.

The CWA is required to maintain documentation to demonstrate the required provider training standards have been met.

The CWA is required to maintain documentation to demonstrate any required licensure or certification under the applicable statutes or administrative rules is current.

Providers of home-based respite and community respite are required to maintain documentation to demonstrate the applicable standards for the home environment has been met.

Providers are subject to required licensing and credentialing verification, caregiver background checks, and hiring prohibitions described in Chapter 4. DHS collects and verifies required certification, license, education, experience, or other documentation during the provider registration process to initially qualify providers.

For more information related to CLTS Waiver Program service providers, refer to the *What is a CLTS Provider?* webpage.

Provider Types and Qualifications

Foster homes (agency provider)

Providers must meet the regulations in Wis. Stat. ch. 48 and Wis. Admin. Code ch. DCF 56 and are required to maintain documentation of current licensure or certification.

Community-based residential facility (agency provider)

Providers must meet the regulations in Wis. Stat. ch. 50 and Wis. Admin. Code ch. DHS 83 and are required to maintain documentation of current licensure or certification.

Group homes for children (agency provider)

Providers must meet the regulations in Wis. Stat. § 48.67 and Wis. Admin. Code ch. DCF 57 and are required to maintain documentation of current licensure or certification.

Residential care center (RCC) for children and youth (agency provider)

Providers must meet the regulations in Wis. Stat. § 48.68 and Wis. Admin. Code ch. DCF 52 and are required to maintain documentation of current licensure or certification.

RCC respite staff must receive training that is tailored to the participant. Child-specific training must include information about the participant's strengths, goals, and needs, as well as behavior support plans in place for the participant, any unique medical needs, and aspects of the participant's culture.

Shelter care facilities (agency provider)

Providers must meet the regulations in Wis. Admin. Code ch. DCF 59 and are required to maintain documentation of current licensure or certification.

Respite agency (agency provider)

The provider is required to receive training specific for the participant's support and care needs.

The provider must complete the required training within six months of beginning employment, unless the participant's individual service plan specifies that training is needed before providing services.

Persons providing respite care are required to meet the DHS training requirements below. This includes training on at least the following subjects pertaining to the child or youth served:

- Policies, procedures, and expectations of the contract agency, including training on participant and provider rights and responsibilities; record keeping and reporting; and other information deemed necessary and appropriate.
- Information specific to disabilities, abilities, needs, functional deficits, and strengths of the population to be served. This training should be person-specific for the participant to be served and generally focused.
- Recognizing and appropriately responding to all conditions that might adversely affect the participant's health and safety including how to respond to emergencies and incidents as defined in Chapter 9.
- Developing interpersonal and communications skills that are appropriate and effective for working with the population to be served. These skills include understanding the principles of person-centered services; person rights; respect for age; cultural, linguistic, and ethnic differences; active listening, responding with emotional support and empathy; ethics in dealings with people including family and other providers; conflict resolution skills; ability to deal with death and dying; and other topics relevant to the specific population to be served.
- Understanding of all confidentiality and privacy laws and rules.
- Understanding of procedures for handling complaints.
- Understanding of the participant who needs support, including personal hygiene needs, preferences, and techniques for assisting with activities of daily living including, where relevant, bathing, grooming, skin care, transfer, ambulation, exercise, feeding, dressing, and use of adaptive aids and equipment.
- Understanding the personal health and wellness-related needs of the participant needing supports including nutrition, dietary needs, exercise needs, and weight monitoring and control.

Group child care center (agency provider)

Providers must meet the regulations in Wis. Stat. ch. 48 and Wis. Admin. Code ch. DCF 251 and are required to maintain documentation of current licensure or certification.

Family child care center (agency and individual provider)

Providers must meet the regulations in Wis. Admin. Code ch. DCF 250 and are required to maintain documentation of current licensure or certification.

Other agency or person appropriately qualified as approved by the CWA and as related to the unique service being provided (agency and individual provider)

The requirements for individual providers are the same as those for respite agency, above.

Day camps (agency provider)

Providers must meet the regulations in Wis. Admin. Code ch. DCF 252, when applicable, and are required to maintain documentation of current licensure or certification.

Respite providers are required to have child-specific training.

Adult family home (individual provider)

Providers must meet the regulations in Wis. Stat. ch. 50 and Wis Admin. Code ch. DHS 88 for Adult Family Homes with 3 or 4 beds, and be certified under Wis. Admin. Code ch. DHS 82 for Adult Family Homes with 1 or 2 beds. Respite providers are required to maintain documentation of current licensure or certification.

4.6.26.6 Service Documentation

The actual length of the respite stay must be specified in the participant's record maintained by the CWA.

The CWA is required to maintain documentation to demonstrate this service does not supplant or duplicate supports or services that are otherwise available through one of the funding sources listed above. (Refer to Service Limitations.)