# Respite Care Services

Rhode Island Department of Children, Youth and Families

**Policy: 700.0205**

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The preservation of quality foster and adoptive placements for children is a high priority. Further, the Department acknowledges the special challenges faced by individuals caring for children with specified presenting problems for which required levels of supervision and care exceed the norm.

To assist and support these caretakers, the Department authorizes respite services. Respite is defined as substitute care for a child in a foster placement or subsidized adoption home due to presenting medical, emotional, behavioral and developmental problems of the child and/or vacation or emergency situations, that can be documented, within the foster family. Respite is not used as a caretaker function when foster parents are at work. (Respite is provided to subsidized adoptive parents in accordance with the provisions of their subsidy agreement.)

Respite care may be provided in the home or outside of the home and may be provided for part of a day or overnight. Respite care may be provided by someone known to the foster or adoptive parent or it may be arranged through the Department as long as the individual or organization selected is deemed eligible and acceptable by the Department. All payments for respite will be made through the Department in accordance with established and acceptable rates.

The foster or adoptive parent works with the child's DCYF worker to ensure all approvals are secured and payments authorized and initiated. The DCYF worker can authorize respite care for a period of two (2) weeks, not necessarily consecutive, within a twelve (12) month period. Any additional respite or any respite arrangements that are made for foster parents who require respite on a more frequent and on-going basis must be approved by the Assistant Administrator or Regional Director. The Assistant Administrator or Regional Director will exercise his or her sound professional judgement in determining whether or not the presenting circumstances justify approval for funding of additional respite.

**Related Procedures…**

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**Procedure from Policy 700.0205:** Respite Care Services

A. Qualifications for respite providers
   1. All respite providers must be 21 years of age, must be cleared through BCI and DCYF and must meet with DCYF staff prior to start of services. (This is waived in the case of a currently licensed DCYF foster home, when respite is being provided by an individual working for a currently licensed private agency, or when respite is being provided in accordance with a subsidized adoption agreement.)
   2. For medically involved children, provider must also be a licensed medical provider (e.g., RN, LPN, EMT or CNA) or must have completed specialized medical technique and/or equipment training as needed by the child's level of care. Documentation of the specialized training must be provided to the DCYF social worker to be maintained in the child's file.
   3. For out-of-home respite, provider must also have all household members cleared through BCI and DCYF. DCYF staff must visit the out of home location and complete a Preliminary Assessment of the Foster Home (DCYF #036A) for the provider that will remain in the child's record. (This is waived in the case of a currently licensed DCYF foster home, when respite is being provided by an individual working for a currently licensed private agency, or when respite is being provided in accordance with a subsidized adoption agreement.)
   4. For out of home respite for medically involved children, all of the requirements above must be met and additionally, DCYF staff must consider whether the child's medical needs can be met by that provider at that location. (DCYF staff may consult with the child's primary physician or request that the foster parent do so.)
   5. For agencies performing respite:
      a. For all children, it must be a MEDICAID approved provider agency or the agency must submit to DCYF their application, process for recruitment, screening, job description, evaluation of staff and provider training and standards of care for children receiving services.
      b. For medically involved children, the agency must also provide assurances that licensed medical providers meet all RI licensing requirements (e.g., RN, LPN, EMT,CNA) or have completed specialized medical technique or equipment training as needed by the child's level of care.
      c. Provider agencies should attempt to maintain a pool of individual providers with the knowledge and experience needed to care for a wide variety of children with special needs.

B. The foster or adoptive parent is responsible to notify the worker when respite is required or desired, the dates, the time frame and the respite provider (if already identified). This notification should take place at least 3 weeks prior to the need for respite, except in family emergencies that can be documented.

C. The worker is responsible to:
   1. Review the request for respite with the supervisor and seek approval.
   2. Ensure the identified provider is a licensed foster parent or approved respite provider. If neither, the worker will secure a BCI and DCYF record check and review results with the supervisor for approval.
   3. If no provider is identified, the worker assists in locating an appropriate respite provider by:
      a. Using the approved respite provider list contained in RICHIST.
      b. Seeking assistance from the placement unit staff who can assist with licensed foster parents who provide respite for other foster parents.
   4. The worker prepares and processes the 005 for payment and ensures that the respite provider is aware that he/she must complete and submit to the DCYF Business Office a "Bill for Services", co-signed by the foster or adoptive parent.
      a. Respite caretaker not associated with a Provider Agency (this includes respite caretaker identified by foster family or DCYF staff, including another foster family) providing

~~overnight care is funded at the current foster board rate for the child or children. Respite~~

provided for a portion of a day is funded at established hourly rates associated with the foster board rate (rates are available through the Business Office).

b. Agency Respite Provider is funded at the same prevailing hourly rate that is charged to our residential providers for respite care (rates are available through the Business Office).

5. For overnight respite, the worker enters a change in "living arrangement" in the RICHIST record. There is no change in "placement" recorded in RICHIST while the child is in authorized respite care.

D. Foster and adoptive parents caring for a child with serious emotional or conduct disabilities may be eligible for respite services through the Local Coordinating Council(LCC) affiliated with Project Reach RI/Child and Adolescent Social Services Program (CASSP). The LCC Community Planning Team involved with the child will determine eligibility for respite through this program.