

**SCOPE OF SERVICE  
FOR  
RESPITE CARE SERVICE  
ELDERLY/DISABLED WAIVER**

A. Definition

Respite Care is provided to individuals unable to care for themselves and is furnished on a short-term basis because of the absence of, or need for relief of those persons normally providing the care.

Skilled or Unskilled Respite is provided for the benefit of the client and to meet client needs in the absence of the primary caregiver(s) rather than to meet the needs of others in the client's household.

Respite Care is not an entitlement. It is based on the needs of the individual client as reflected in the Plan of Care.

B. Objective

The objective of Respite Care is to provide temporary care for clients who live at home and are cared for by their families or other informal support systems. This service will provide temporary, short term relief for the primary caregiver, and continue the supervision and supportive care necessary to maintain the health and safety of waiver clients. Respite Care is intended to supplement, not replace care provided to waiver clients.

Skilled or Unskilled Respite is provided to clients who have a physical, mental, or cognitive impairment that prevents them from being left alone safely in the absence or availability of the primary caregiver.

C. Description of Service to be Provided

1. The unit of service is 15 minutes of direct Respite Care provided in the client's residence. The amount of time does not include the Respite Care Worker's (RCW) transportation time to or from the client's residence or the Respite Care Worker's break or mealtime.
2. The number of units and services provided to each client is dependent upon the individual client's need as set forth in the client's POC established by the Case Manager. In-home Respite Service may be provided for a period not to exceed 720 hours per waiver year (October 1-September 30) in accordance with the provider contracting period. This limitation applies to skilled and unskilled respite or a combination.

Medicaid will not reimburse for activities performed which are not within the scope of services defined.

3. As implied in the definition, Respite Care is for the relief of the family member or primary caregiver; therefore, there must be a primary caregiver identified for each client that uses the Respite Care Service. The primary caregiver does not have to reside in the residence; however, there must be sufficient documentation to establish that the primary caregiver to be relieved furnishes substantial care of the client.
4. This service must not be used to provide continuous care while the primary caregiver is working or attending school.
5. No payment will be made for services not documented on the Plan of Care and the Service Authorization Form.
6. The type of in-home respite (skilled or unskilled) provided to each client will be dependent upon the individual client's needs as established by the Case Manager and set forth in the client's Plan of Care.
  - a. Skilled Respite:
    - (1) Skilled Respite Service will provide skilled medical or nursing observation and services and will be performed by a Registered Nurse or Licensed Practical Nurse who will perform their duties in compliance with the Nurse Practice Act.
      - (a) Orders from the client's physician(s) are required annually and when any changes occur.
      - (b) It is the responsibility of the Skilled Respite Provider to obtain such physician orders for the skilled nursing services needed by the client.
    - (2) In addition to providing supervision to the client, Skilled Respite may include, but is not limited to, the following activities:
      - (a) Assistance with activities of daily living (ADLs), such as,
        - Bathing, personal hygiene and grooming
        - Dressing
        - Toileting or activities to maintain continence
        - Preparing and serving meals or snacks and providing assistance with eating
        - Transferring

- Ambulation
- (b) Home support that is essential to the health and welfare of the recipient, such as,
- Cleaning
  - Laundry
  - Assistance with communication
  - Home safety

Home safety includes a general awareness of the home's surroundings to ensure that the client is residing in a safe environment. Any concerns with safety issues will be reported to the Case Manager for follow-up.

- (c) Skilled nursing services as ordered by the client's physician, including administering medications.
- (d) Skilled medical observation and monitoring of the client's physical, mental or emotional condition and the reporting of any changes.
- (e) Orienting the client to daily events.

b. Unskilled Respite:

- (1) Unskilled Respite Services will provide and/or assist with activities of daily living and observations. Unskilled Respite will be performed by a Personal Care worker.
- (2) In addition to providing supervision to the client, Unskilled Respite may include, but is not limited to, the following activities:
- a. Meal or snack preparation, meal serving, cleaning up afterwards;
  - b. General housekeeping includes cleaning (such as sweeping, vacuuming, mopping, dusting, taking out trash, changing bed linens, defrosting and cleaning the refrigerator, cleaning the stove or oven, cleaning bathrooms); laundry (washing clothes and linen, ironing, minor mending); and, other activities as needed to maintain the client in a safe and sanitary environment;
  - c. Assistance with communication which includes placing phone within client's reach and physically assisting

client with use of the phone and orientation to daily events;

- d. Support for activities of daily living, such as,
  - bathing
  - personal grooming
  - personal hygiene
  - assisting clients in and out of bed
  - assisting with ambulation
  - toileting and/or activities to maintain continence
- e. The Respite Care worker will ensure that the client is residing in a safe environment. Any concerns with safety issues will be reported to the Respite Care Worker Supervisor as well as the Case Manager for follow-up;
- f. Reporting observed changes in the client's physical, mental or emotional condition;
- g. Reminding clients to take medication.

**Note: Under no circumstances should any type of skilled medical or nursing service be performed by an Unskilled Respite worker.**

#### D. Staffing

The DSP must provide all of the following staff positions through employment or sub contractual arrangements.

1. Skilled Respite Supervisors must meet the following qualifications and requirements:
  - a. Be a Registered Nurse (RN) who is currently licensed by the Alabama State Board of Nursing to practice nursing.
  - b. Have references which will be verified thoroughly and documented in the Direct Service Provider personnel file. References must include state criminal background checks (including sex offender registry), previous employers, and the Nurse Aide Registry (if applicable).

- c. Have at least two (2) years experience as a Registered Nurse in public health, hospital, home health, or long term care nursing.
  - d. Have the ability to evaluate the Skilled Respite Worker (SR Worker) in terms of his or her ability to carry out assigned duties and his or her ability to relate to the client.
  - e. Have the ability to assume responsibility for in-service training for RCWs by individual instruction, group meetings or workshops.
  - f. Have the ability to provide appropriate follow-up regarding a client/caregiver and/or Case Managers dissatisfaction, complaints or grievances regarding the provision of Respite Care Service.
  - g. Submit to a program for the testing, prevention, and control of tuberculosis annually.
  - h. Possess a valid, picture identification.
2. Skilled Respite Worker - A Licensed Practical Nurse (LPN) or Registered Nurse (RN) who meets the following requirements:
- a. Be currently licensed by the State of Alabama to practice nursing.
  - b. Have at least two years experience.
  - c. Submit to a program for testing, prevention, and control of tuberculosis, annually.
  - d. Be able to follow the Plan of Care with minimal supervision unless there is a change in the client's condition.
  - e. Possess a valid, picture identification.
  - f. Have references which will be verified thoroughly and documented in the Direct Service Provider personnel file. References must include state criminal background checks (including sex offender registry), previous employers, and the Nurse Aide Registry (if applicable).

Minimum Training Requirements for Skilled Respite Care Workers (LPN or RN):

The Direct Service Provider (DSP) must assure Medicaid and the Operating Agency (OA) that the nurse has adequate experience and expertise to perform the skilled services and the care required by the client.

Provide validation of CEUs for licensure.

3. Unskilled Respite Supervisors and workers must be qualified, trained, and employed by a Medicare/Medicaid certified Home Health Agency or other health care agencies approved by the Commissioner of the Alabama Medicaid Agency.

Unskilled Respite Supervisors must have references which will be verified thoroughly and documented in the Direct Service Provider personnel file. References must include state criminal background checks, previous employers, and the Nurse Aide Registry (if applicable).

Unskilled Respite Worker – USR workers must meet the following qualifications and requirements:

- a. Have references which will be verified and documented in the Direct Service Provider personnel file. References must include statewide criminal background checks, previous employers, and Nurse Aide Registry (if applicable).
  - b. Be able to read and write.
  - c. Possess a valid, picture identification.
  - d. Be able to follow the Plan of Care with minimal supervision.
  - e. Assist client appropriately with activities of daily living.
  - f. Complete a probationary period determined by the employer with continued employment contingent on completion of an unskilled respite care in-service training program.
  - g. Must submit to a program for the testing, prevention, and control of tuberculosis annually.
4. Minimum Training Requirements for Unskilled Respite Care Worker:

The Unskilled Respite Care training program should stress the physical, emotional and developmental needs of the population served, including the need for respect of the client, his/her privacy, and his/her property. The minimum training requirement must be completed prior to initiation of service with a client. The DSP is responsible for providing/or conducting the training. The Unskilled Respite Care training program must be approved by the Operating Agency. Proof of the training must be recorded in the personnel file.

Individual records will be maintained on each USR worker to document that each member of the staff has met the requirements below.

Minimum training requirements must include the following areas:

- a. Activities of daily living, such as,
  - bathing (sponge, tub)
  - personal grooming
  - personal hygiene
  - proper transfer technique (assisting clients in and out of bed)
  - assistance with ambulation
  - toileting
  - feeding the client
- b. Home support, such as,
  - maintaining a safe and clean environment,
  - providing care which includes; individual safety, laundry, serve and prepare meals and
  - household management
- c. Recognizing and reporting observations of the client, such as,
  - physical condition
  - mental condition
  - emotional condition
  - prompting the client of medication regimen
- d. Record keeping, such as,
  - A service log signed by the client or family member/responsible person and USR Care worker to document what services were provided for the client in relation to the Plan of Care.
  - Submitting a written summary to the USR Care Worker Supervisor of any problems with client, client's home or family. The Supervisor in return should notify the Case Manager.
- e. Communication skills
- f. Basic infection control/Universal Standards
- g. First aid emergency situations

- h. Fire and safety measures
  - i. Client rights and responsibilities
  - j. Other areas of training as appropriate or as mandated by the Operating Agency
5. The DSP will be responsible for providing a minimum of 12 hours of relevant in-service training per calendar year for each USR worker.  
In-service training is in addition to USR Worker orientation training. For USR workers hired during the calendar year, this in-service requirement may be prorated based on date of employment as a USR Worker.
6. Documentation of the training provided shall include topic, date, name and title of trainer, objective of the training, outline of content, length of training, list of trainees and location.
7. Topics for specific in-service training may be mandated by the Operating Agency.
8. In-service training may entail demonstration of maintaining a safe and clean environment and providing care to the client. Additional training may be provided as deemed necessary by the DSP. Any self-study training programs are limited to four (4) hours annually and must be approved for content and credit hours by the Operating Agency, prior to the planned training. The DSP shall submit proposed program(s) to the Operating Agency least 45 days prior to the planned implementation.
9. The DSP must have an ongoing infection control program in effect and training on Universal Standards and an update on infection control shall be included as part of the 12 hours required in-service for all USR workers each calendar year.
10. The DSP Agency shall maintain records on each employee which shall include the following:
- a. Application for employment;
  - b. Statewide criminal background checks and references
  - c. Job description;
  - d. Record of health with annual tuberculin tests for any staff member, including administrative, that has direct client contact;
  - e. Record of pre-employment and annual in-service training;



- (1) For Skilled Respite Supervisors and Skilled Respite Workers validation of required CEUs for licensure will be accepted for in-service.
  - (2) For USR Supervisor validation of required CEUs for licensure will be accepted.
- f. Orientation;
  - g. Evaluations;
  - h. Supervisory visits;
  - i. Copy of photo identification;
  - j. Records of all complaints/incidents lodged by the client/family/responsible party and action taken;
  - k. Other forms as required by state and federal law, including agreements regarding confidentiality.

E. Procedure for Service

1. The Case Manager will submit a Service Authorization Form and Plan of Care to the DSP Agency authorizing Respite Care designating the units, frequency, beginning date of service, and types of duties in accordance with the individual client's needs. This documentation will be maintained in the client's file.
2. The DSP Agency will initiate Respite Care within three (3) working days of the designated START DATE receiving the Service Authorization Form in accordance with the following:
  - a. Services must not be provided prior to the authorized start date as stated on the Service Authorization Form.
  - b. The DSP Agency will adhere to the services and schedule as authorized by the Case Manager on the Service Authorization Form.
  - c. No payment will be made for services unless authorized and listed on the Plan of Care.
  - d. The DSP will retain a client's file for at least five (5) years after services are terminated.
3. Provision of Service authorized:

- a. Respite Care cannot be provided at the same time other authorized waiver services are being provided with the exception of Case Management.
  - b. Services provided by relatives or friends may be covered only if relatives or friends meet the qualifications as providers of care. However, providers of service cannot be a parent/step-parent/legal guardian of a minor or a spouse of the individual receiving services, when the services are those that these persons are legally obligated to provide. There must be strict controls to assure that payment is made to the relatives or friends as providers only in return for respite care services. Additionally, there must be adequate justification as to why the relative or friend is the provider of care and there is documentation in the case management file showing that the family member is a qualified provider and the lack of other qualified providers in remote areas. The case manager will conduct an initial assessment of qualified providers in the area of which the client will be informed. The case manager must document in the client's file the attempts made to secure other qualified providers before a relative or friend is considered. The case manager, along with the DSPs, will review the compiled information in determining the lack of qualified providers for client's living in a remote area.
4. Respite Care Worker will maintain a separate service log for each client to document their delivery of services.
- a. The Respite Care Worker shall complete a service log that will reflect the types of services provided, the number of hours of service, and the date and time of the service.
  - b. The service log must be signed upon each visit by the client, or family member/responsible party. In the event the client is not physically able to sign and the family member/responsible party is not present to sign, then the Respite Care Worker must document the reason the log was not signed by the client or family member/responsible party.
  - c. The Skilled Respite Worker must fully document the skilled nursing services that were authorized by the client's physician and performed for the client during each visit in which Skilled Respite was provided.
  - d. The service logs for Unskilled Respite and the documentation forms for Skilled Respite will be reviewed and signed by the Unskilled or Skilled Respite Supervisor respectively at least once every two (2) weeks. Daily service logs and documentation forms will be retained in the client's file.
  - e. Client visits may be recorded electronically via telephony. Electric documentation will originate from the client's residence as indicated by the phone number at the residence. A monthly report of phone number

exceptions will be maintained with written documentation giving the reason the electronic documentation did not originate at the client's residence, e.g., phone line down, client does not have phone, client staying with relatives. These electronic records may be utilized in place of client signatures.

- f. The DSP Supervisor should notify the Case Manager in writing regarding any report or indication from the DSP Worker regarding a significant change in the client's physical, mental or emotional health. The DSP Supervisor should document such action in the DSP client file.

5. Monitoring of Service:

Unskilled Respite Care must be provided under the supervision of the Registered Nurse or Licensed Practical Nurse who meets the requirements of D.1.b.-h. and will:

- a. Make an initial visit to the client's residence prior to the start of Respite Care for the purpose of reviewing the Plan of Care, providing written information to the client regarding rights and responsibilities, how to register complaints, and discussing the provisions and supervision of the service(s)."
- b. Be immediately accessible by phone. Any deviation from this requirement must be prior approved in writing by the Operating Agency and the Alabama Medicaid Agency. If this position becomes vacant, the Operating Agency and the Alabama Medicaid Agency must be notified within 24 hours.
- c. Provide and document supervision of, training for, and evaluation of Unskilled Respite Care Workers according to the requirements in the approved waiver document.
- d. Provide on-site (client's residence) supervision at a minimum of every 60 days for each client. Supervisory visits must be documented in the individual client record. Supervisors will conduct on-site supervision more frequently if warranted by complaints or suspicion of substandard performances by the Unskilled Respite Care Worker. Client must be present for visit.
- e. Assist Unskilled Respite Care Workers as necessary as they provide individual Respite Service as outlined by the Plan of Care. Any supervision/assistance given must be documented in the individual client's record.

- f. The Skilled Respite Supervisor will provide on-site (client's residence) supervision at a minimum of every 60 days for each client. Supervisory visits must be documented in the individual client record. Supervisors will conduct on-site supervision more frequently if warranted by complaints or suspicion of substandard performances by the Skilled Respite Care Worker. Client must be present for visit.
- g. The SR and USR Supervisor must provide direct supervision of each SR and USR Worker with at least one (1) assigned client at a minimum of every six (6) months. Direct supervisory visits must be documented in the Worker's personnel record.
  - Direct supervision may be carried out in conjunction with an on-site supervisory visit.
  - Client and worker have to be present.

The SR and USR Supervisor will provide and document the supervision, training, and evaluation of SR and USR Workers according to the requirements in the approved Waiver Document.

## 6. Missed Visits and Attempted Visits

### a. Missed Visits

- (1) A missed visit occurs when the client is at home waiting for scheduled services, but the services are not delivered.
- (2) The DSP shall have a written policy assuring that when a Respite Care Worker is unavailable, the Supervisor assesses the need for services and makes arrangements for a substitute to provide services as necessary.
  - (a) If the Supervisor sends a substitute, the substitute will complete and sign the service log after finishing duties.
  - (b) If the Supervisor does not send a substitute, the Supervisor will contact the client and inform them of the unavailability of the Respite Care Worker.
- (3) The DSP will document missed visits in the client's files.
- (4) Whenever the DSP determines that services cannot be provided as authorized, the Case Manager must be notified by telephone immediately. All missed visits must be reported in writing on the

"Weekly Missed/Attempted Visit Report" form to the Case Manager on Monday of each week.

(5) The DSP may not bill for missed visits.

b. Attempted Visits

(1) An attempted visit occurs when the Respite Care Worker arrives at the home and is unable to provide services because the client is not at home or refuses services.

(2) If an attempted visit occurs:

(a) The DSP may not bill for the attempted visits.

(b) The Supervisor will contact the client to determine the reason why the client was not present or why services were refused. Documentation of this discussion must be in the client's file.

(c) The DSP will notify the Case Manager within one (1) day after second attempted visit whenever two attempted visits occur within the SAME week.

7. Changes in Services

a. The DSP will notify the Case Manager within one (1) working day of the following changes:

(1) Client's condition and/or circumstances have changed and the Plan of Care no longer meets the client's needs;

(2) Client does not appear to need Respite Care;

(3) Client dies or moves out of the service area;

(4) Client indicates Respite Care Service is not wanted;

(5) Client loses Medicaid financial eligibility;

(6) When services can no longer be provided.

b. The Case Manager will notify the DSP immediately if a client becomes medically and financially ineligible for waiver services.

The Case Manager must verify Medicaid eligibility on a monthly basis.

- c. If the DSP identifies additional duties that would be beneficial to the client's care, but are not specified on the Plan of Care, the DSP shall contact the Case Manager to discuss having these duties added.
  - (1) The Case Manager will review the DSP's request to modify services and respond within one (1) working day of the request.
  - (2) The Case Manager will approve any modification of duties to be performed by the Respite Care and re-issue the Service Authorization Form accordingly, if he/she concurs with the request.
  - (3) Documentation of any changes in a Plan of Care will be maintained in the client's file.
    - (a) If the total number of hours of service is changed, a new Service Authorization Form is required from the Case Manager.
    - (b) If the types or times of services are changed, a new Service Authorization Form is required from the Case Manager.
    - (c) If an individual declines Respite Care or has become ineligible for services, a Service Authorization Form for termination is required from the Case Manager.

8. Documentation and Record-Keeping

- a. The DSP shall maintain a record keeping system which documents the units of service delivered based on the Service Authorization Form. The client's file shall be made available to Medicaid, the Operating Agencies, or other agencies contractually required to review information upon request.

The DSP shall maintain a file on each client, which shall include the following:

- (1) A current HCBS application;
- (2) Both current and historical Service Authorization Forms specifying units, services, and schedule of Respite Care visits for the client;
- (3) All service logs;
  - The service log must be reviewed and initialed by the Nurse Supervisor at least once every two (2) weeks.
- (4) Records of all missed or attempted visits;

- (5) Records of all complaints lodged by clients or family members/responsible parties and any actions taken;
  - (6) Evaluations from all 60 day on-site supervisory visits to the client;
  - (7) The Service Authorization Form notifying the DSP Agency of termination, if applicable;
  - (8) The name of the primary caregiver.
- b. The DSP will retain a client's file for at least five (5) years after services are terminated.
  - c. The DSP Agency shall comply with federal and state confidentiality laws and regulations in regard to client and employee files.

F. Rights, Responsibilities, and Service Complaints

1. The Case Manager has the responsibility of ensuring that the DSP has fulfilled its duty of properly informing the client of all rights and responsibilities and the manner in which service complaints may be registered.
2. The DSP Agency will inform the client/responsible party of their right to lodge a complaint about the quality of Respite Care Service provided and will provide information about how to register a complaint with the Case Manager as well as the Alabama Medicaid Agency.
  - a. Complaints which are made against Respite Care Workers will be investigated by the DSP and documented in the client's file.
  - b. All complaints to be investigated will be referred to the Respite Care Worker Supervisor who will take appropriate action.
  - c. The Respite Care Worker Supervisor will take any action necessary and document the action taken in the client's and employee's files.
  - d. The Respite Care Worker Supervisor will contact the Case Manager by letter or telephone about any complaint and any corrective action taken.
3. The DSP must maintain documentation of all complaints, follow-up, and corrective action regarding the investigation of those complaints and documentation showing that they have completed with the requirements of this section.

G. Administrative Requirements

In addition to all conditions and requirements contained in the Scope of Services as well as in the contract, the DSP shall be required to adhere to the following stipulations:

1. The DSP Agency shall designate an individual to serve as the agency administrator. This does not have to be a full time position; however, the designated administrator must have the authority and responsibility for the direction of the DSP Agency. The DSP Agency shall notify the Operating Agency within (3) working days of a change in the agency administrator, address, or phone number.
2. The DSP will maintain an organizational chart indicating the administrative control and lines of authority for the delegation of responsibility down to the "hands on" client care level staff shall be set forth in writing. This information will be readily accessible to all staff. A copy of this information shall be forwarded to the Operating Agency at the time the contract is implemented. Any future revisions or modifications shall be distributed to all staff of the DSP Agency and to the Operating Agency.
3. Administrative and supervisory functions shall not be delegated to another agency or organization.
4. A list of the members of the DSP's governing body shall be made available to the Operating Agency and/or the Alabama Medicaid Agency upon request.
5. The DSP Agency must maintain an annual operating budget which shall be made available to the Operating Agency and/or the Alabama Medicaid Agency upon request.
6. During the life of the contract the DSP Agency shall acquire and maintain contract liability insurance to protect all paid and volunteer staff, including board members, from liability incurred while acting on behalf of the agency. Upon request, the DSP Agency shall furnish a copy of the insurance policy to the Operating Agency and/or the Alabama Medicaid Agency.
7. The DSP Agency shall ensure that key agency staff, including the agency administrator or the DSP Supervisor, be present during compliance review audits conducted by Medicaid, the Operating Agency and/or its agents.
8. The DSP Agency shall maintain an office which is open during normal business hours and staffed with qualified personnel.
9. The Direct Service Provider (DSP) shall provide it's regularly scheduled holidays to the Operating Agency. The DSP Agency must not be closed for more than four (4) consecutive days at a time and then only if a holiday falls in conjunction with a weekend. The DSP shall also provide the regular hours of business operation. If a service is needed on a scheduled holiday, the service provider will ensure that the service is rendered.



10. The DSP Agency will maintain a Policy and Procedures Manual to describe how activities will be performed in accordance with the terms of the Operating Agency contract and the Waiver Document. The Policy and Procedure Manual should include the organization's Emergency Plan regarding service delivery.

H. Provider Experience

Providers of Respite Care must meet all provider qualifications prior to rendering the Respite Care Service.

All personnel with direct client contact or access to client information must have complete reference verification and statewide criminal background checks on file prior to client contact or access to client information.