Breakout Room Discussion Guide

**Instructions:** We will break out into three smaller groups to discuss the following questions related to emergency respite. For background, see [ARCH Fact Sheet on Emergency Respite](https://friendsnrc.zoom.us/j/87007391708?pwd=end6Njc0a1FETVN0czFhOVZwN1A5Zz09).

Don’t worry about getting through all the questions. Multiple questions are provided to help stimulate a free flow of ideas while staying on topic. If you like, first consider the overarching question **“What do you see as the greatest challenge to providing emergency respite vouchers?”** and then review the major topic areas below and decide as a group which group of questions you would like to focus on.

**Facilitators:** Each session will have a facilitator who will take notes and/or record the session.

- **Group #1.** Talena Ford, OK Lifespan Respite
- **Group #2.** Aietah Stephens, Sooner Success
- **Group #3.** Jill Kagan, ARCH

**Introductions**

Please introduce yourself and let us know if you provide or plan to provide emergency respite vouchers as part of your Lifespan respite grant activities.

**Questions**

**Definitions and Guidelines**

1. How do you define emergency respite? If you provide emergency respite vouchers, do you provide guidelines for eligibility, and for how and when they may be used (e.g., for specific defined emergencies; restrictions on respite providers; how often the voucher may be used in any given period)? If so, please describe the major provisions.

2. How do you screen family caregivers for emergency respite voucher use?

3. Do you offer emergency respite to assist in the prevention of abuse or neglect when a high risk family is identified?
**Engaging/Educating Family Caregivers**

1. What do you see as the primary barriers for family caregivers in seeking and using emergency respite vouchers?

2. Do you train family caregivers to prepare for emergencies and develop a plan to find and use respite during an unexpected emergency?

**Emergency Respite Providers**

1. Among the formal respite services and providers in your networks, have you seen a reluctance to offer respite on an emergency basis? (e.g., reluctance to reserve slots for emergencies because of fiscal considerations; reluctance to provide emergency respite to individuals with serious medical or behavioral conditions; reluctance to provide services on short notice; shortage of a pool of providers available 24/7 or available for overnight care; administrative regulations that require proof of immunizations or other medical certifications before respite can be provided)

2. Do emergency respite providers in your program require additional training and do you help provide it? What additional training topics would be useful?

**Partnerships**

1. Have you developed specialized partnerships with community stakeholders, such as child or adult protective services, first responders, medical community, abuse prevention agencies, to help facilitate outreach about availability of emergency respite and to help develop guidelines for emergency respite vouchers use?