

Respite in the Time of COVID-19

Voluntary National Respite Guidelines
for Providing and Receiving Respite
During the Pandemic

with *Case Studies*

July 16, 2020



ARCH Respite and Caregiving Resources in the Time of COVID-19



ARCH Website

archrespite.org/Covid-19-Respite-Resources

COVID-19 Information for Family Caregivers

archrespite.org/consumer-information/covid-19-info-for-caregivers

July News Supplement on Respite during COVID-19

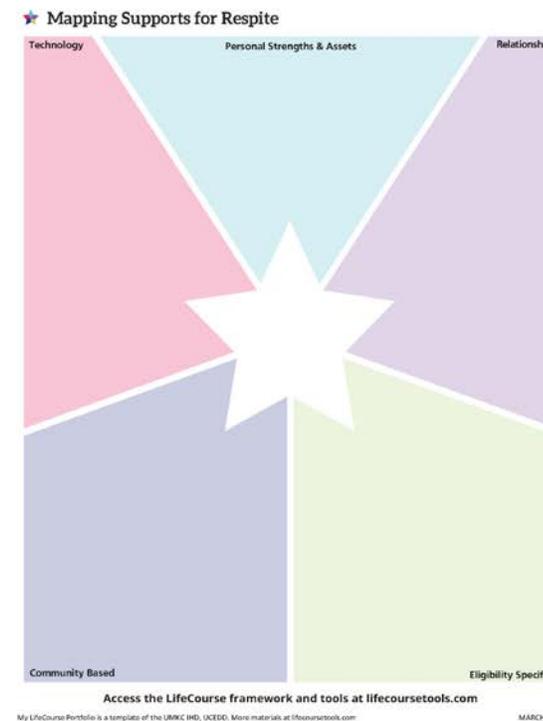
www.icontact-archive.com/archive?c=1089448&f=4586&s=28983&m=739954&t=47b950cc7ae54f1829880449625878f6b2721420326287e33dd0c00b02cf9350

Webinar: Using the LifeCourse Tools for Respite During the Pandemic

Thursday, July 23, 2020, at 3 PM ET

Register at <https://friendsnrc.zoom.us/meeting/register/tJYrdu6hrz4jGdOcbSAqlhWsj90-FN9Rjly8>

Jane St. John with *Charting the LifeCourse Nexus* at the University of MO at Kansas City, Institute for Human Development, will explore how to use the [LifeCourse Tools for Respite](#) to use respite safely during the pandemic, and to help develop strategies for family caregivers and care recipients to cope with the pandemic. Examples will be presented on how to use the tools to help family caregivers find balance as a caregiver, and to help both caregivers and care receivers find alternative respite options and ways to socially distance and still live the good life!



My LifeCourse Respite Portfolio

What is going on in my life?

How would taking short breaks HELP me and the person I provide care to?

Making short breaks happen

What would I do if I had a break from caregiving?

Who would I spend time with during a break from caregiving?

What needs to be in place so I am comfortable leaving the person I am caring for?

My LifeCourse Portfolio is a template of the UMKC PhD, UCEDD. More materials at lifecoursetools.com MARCH 2017



Featured Speakers

- **Kim E. Whitmore, PhD, RN, CPN**, Assistant Professor in the School of Nursing at the University of Wisconsin – Madison, and Founder and Chief Change Officer of Ujima United, LLC
 - **Veronica Diaforli**, Senior Vice President, Programs and Services, The Family Resource Network of New Jersey
 - **Jennifer Sanchez**, Sr. Social Services Program Director, Respite Unit, YMCA Childcare Resource Service, YMCA of San Diego County, CA
 - **Lisa Schneider**, Executive Director, Respite Care Association of Wisconsin
-

ARCH Guidelines Work Group

Meghan Baskett Kluth, Colorado Respite Coalition and Easterseals Colorado

Geene Delaplane, WA State Department of Social and Health Services

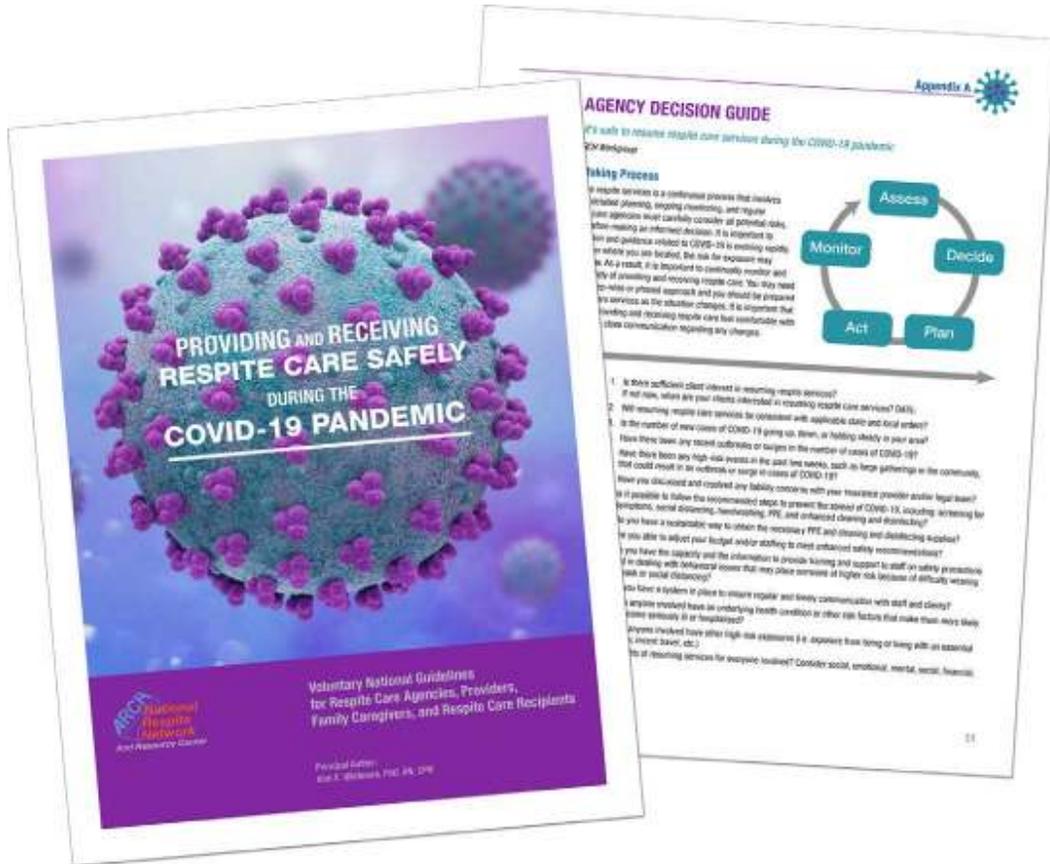
Sherrie Kizer, RN, Agape Respite Care, Inc., IN

Tricia Lazare, Self-Directed Supports Department, Inclusa, WI

Jennifer Sanchez, YMCA of San Diego County, CA

Lisa Schneider, Respite Care Association of Wisconsin

Guidelines and Case Studies

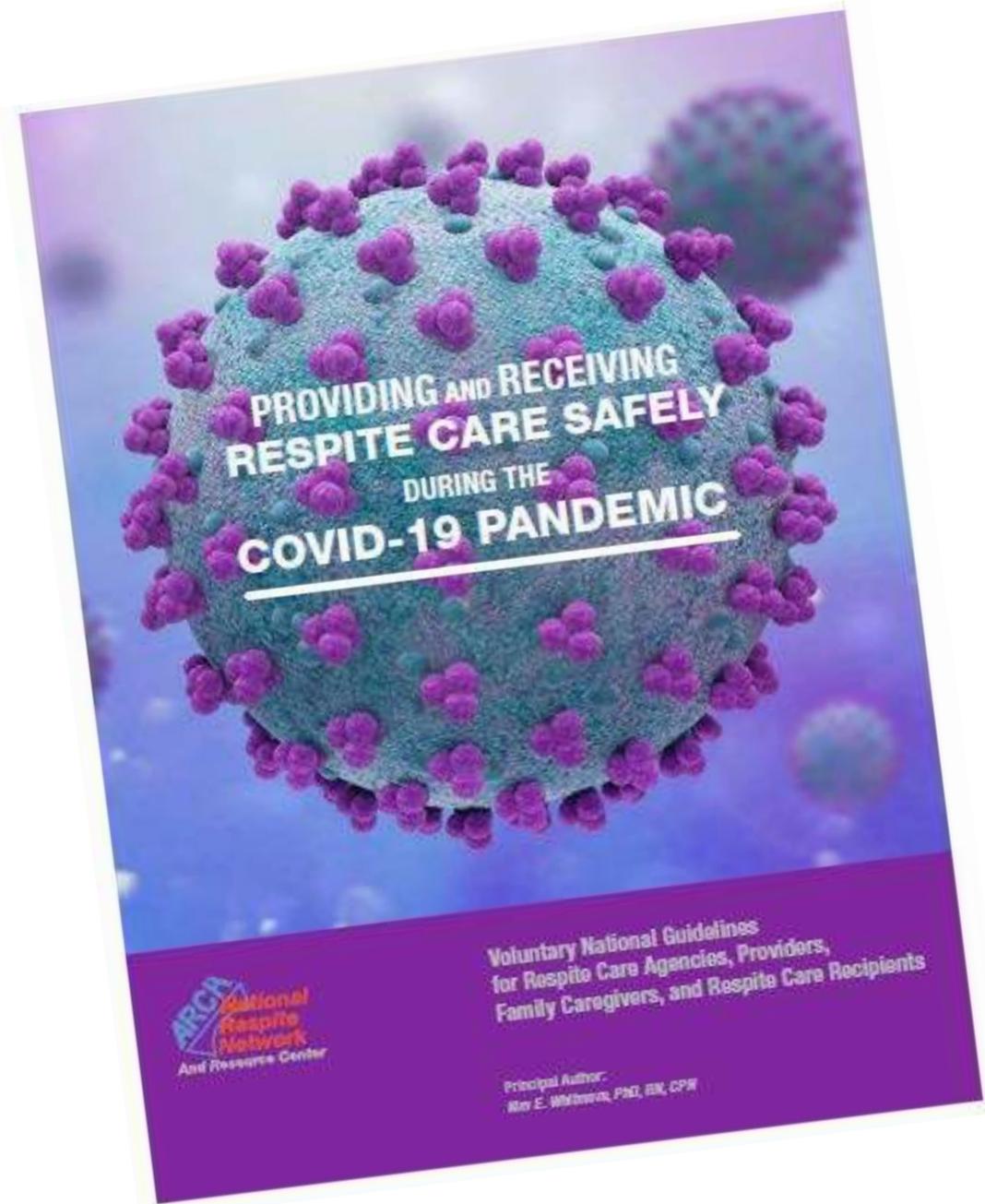


archrespite.org/national-respite-guidelines-for-covid-19

Case Studies

- Agape, Berne, Indiana
archrespite.org/images/COVID-19/Guidelines/IN_Agape_Case_Study.pdf
- New Jersey Family Resource Network
archrespite.org/images/COVID-19/Guidelines/NJ_Family_Resource_Case_Study.pdf
- Respite Care Association of Wisconsin Respite Registry/Caregiver Respite Grant Program
archrespite.org/images/COVID-19/Guidelines/Respite_Care_WI_Case_Study.pdf
- YMCA of San Diego County, San Diego, CA
archrespite.org/images/COVID-19/Guidelines/YMCA_San_Diego_Co_Case_Study.pdf

Polling Questions



**PROVIDING AND RECEIVING
RESPIRE CARE SAFELY
DURING THE
COVID-19 PANDEMIC**

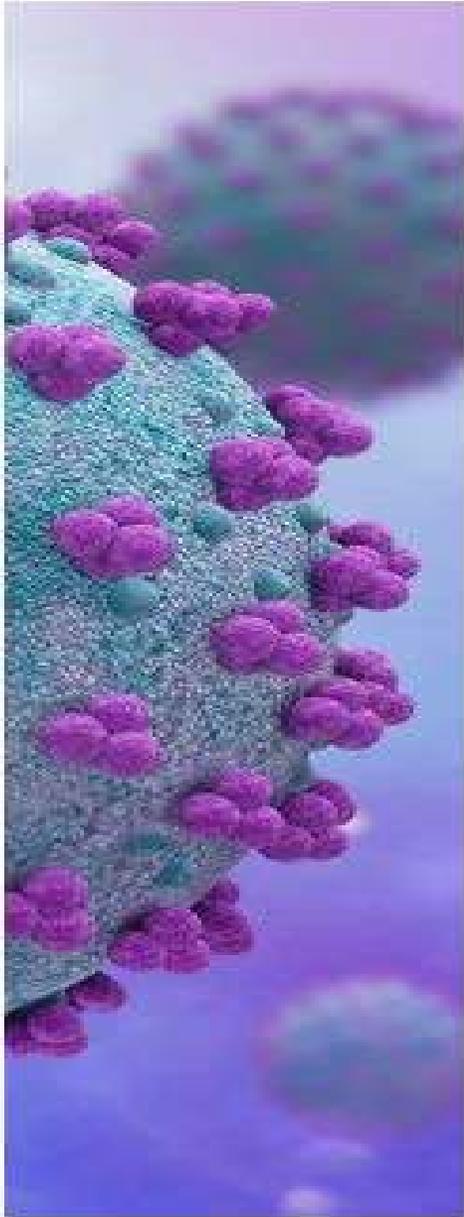


**Voluntary National Guidelines
for Respite Care Agencies, Providers,
Family Caregivers, and Respite Care Recipients**

**Principal Author:
Ann E. Whitman, PhD, RN, CPRP**

Providing and Receiving Respite Care Safely During the COVID-19 Pandemic

*Voluntary National Guidelines
for Respite Care Agencies,
Providers, Family Caregivers, and
Respite Care Recipients*



PRINCIPAL AUTHOR

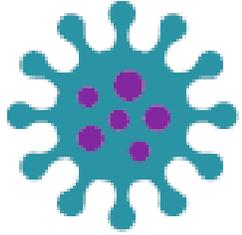
Kim E. Whitmore, PhD, RN, CPN

Assistant Professor, University of Wisconsin – Madison

Chief Change Officer, Ujima United, LLC

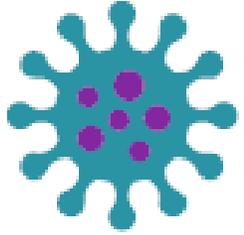
DESIGN AND LAYOUT

Norma McReynolds



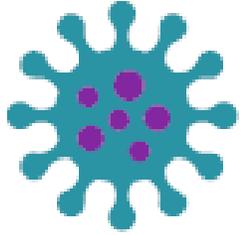
WORKGROUP MEMBERS

- **Meghan Baskett Kluth**
Vice President, Colorado Respite Coalition, a program of Easterseals Colorado
- **Geene Delaplane**
Lifespan Respite Program Manager, Washington State
- **Jill Kagan**
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Sr. Social Services Program Director, YMCA of San Diego County
- **Lisa Schneider**
Executive Director, Respite Care Association of Wisconsin; and Family Caregiver



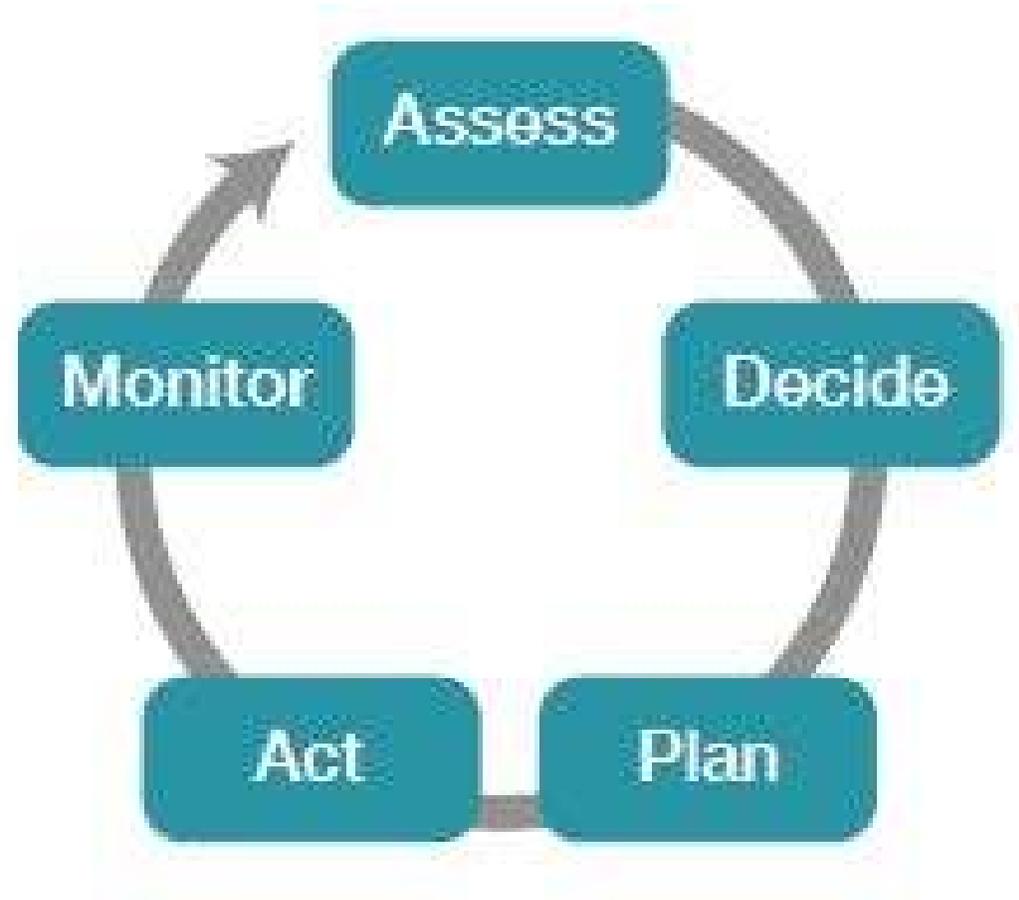
PURPOSE OF GUIDELINES

- Designed to assist you with careful and thoughtful planning and implementation strategies to provide and receive respite care ***as safely as possible*** during the COVID-19 pandemic
- Information about COVID-19 is evolving rapidly as we learn more about this emerging disease
- Information from the World Health Organization, Centers for Disease Control and Prevention (CDC), and Local Public Health Departments should be your primary source for guidance on COVID-19 and other health related issues
- It is important to closely monitor local guidance and consult with your healthcare professional to ensure your health and safety



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- Acknowledgements
- Introduction
 - What is Respite Care?
 - The Impact of the COVID-19 Pandemic on Respite Care
 - Purpose of the Guidelines
 - Target Audiences
- Deciding When It's Safe to Provide or Receive Respite Care
 - The Decision-Making Process
 - Decision Guides



RESPITE AGENCY DECISION GUIDE

Deciding when it's safe to resume respite care services during the COVID-19 pandemic

Developed by the ARCY Markgroup

The Decision-Making Process

The decision to resume respite services is a continuous process that involves thorough assessment, detailed planning, ongoing monitoring, and regular reassessment. Respite care agencies must carefully consider all potential risks, benefits, and barriers before making an informed decision. It is important to remember that information and guidance related to COVID-19 is evolving rapidly. Additionally, depending on where you are located, the risk for exposure may vary and change over time. As a result, it is important to continually monitor and regularly reassess the safety of providing and receiving respite care. You may need to resume services in a step-wise or phased approach and you should be prepared to stop providing respite care services as the situation changes. It is important that all individuals involved in providing and receiving respite care feel comfortable with the decision and are kept in close communication regarding any changes.



Assess

- Yes No Unknown
1. Is there sufficient client interest in resuming respite services? If not now, when are your clients interested in resuming respite care services? DATE.
 2. Will resuming respite care services be consistent with applicable state and local orders?
 3. Is the number of new cases of COVID-19 going up, down, or holding steady in your area?
 4. Have there been any recent outbreaks or surges in the number of cases of COVID-19?
 5. Have there been any high-risk events in the past two weeks, such as large gatherings in the community, that could result in an outbreak or surge in cases of COVID-19?
 6. Have you discussed and resolved any liability concerns with your insurance provider and/or legal team?
 7. Is it possible to follow the recommended steps to prevent the spread of COVID-19, including: screening for symptoms, social distancing, handwashing, PPE, and enhanced cleaning and disinfecting?
 8. Do you have a sustainable way to obtain the necessary PPE and cleaning and disinfecting supplies?
 9. Are you able to adjust your budget and/or staffing to meet enhanced safety recommendations?
 10. Do you have the capacity and the information to provide training and support to staff on safety precautions and in dealing with behavioral issues that may place someone at higher risk because of difficulty wearing a mask or social distancing?
 11. Do you have a system in place to ensure regular and timely communication with staff and clients?
 12. Does anyone involved have an underlying health condition or other risk factors that make them more likely to become seriously ill or hospitalized?
 13. Does anyone involved have other high-risk exposures (i.e. exposure from being or living with an essential worker, recent travel, etc.)
14. What are the possible risks and benefits of resuming services for everyone involved? Consider social, emotional, mental, social, financial, and spiritual needs.



RESPITE AGENCY DECISION GUIDE

Decide

1. Who is impacted by the decision?
2. Who should be involved in the decision?
3. Who should be informed about the decision?
4. Can the decision wait? How long is the current situation sustainable?
5. Do the potential benefits outweigh the potential risks?
6. Are there any other barriers or concerns to consider?
7. Should respite services resume as normal or are there ways to adapt respite services to enhance safety?
8. What is the BEST decision at this time? Resume respite services Not resume, and continue to assess the situation

Plan

1. Ensure there are policies and procedures in place related to the recommended steps to prevent the spread of COVID-19, including: screening for symptoms, social distancing, handwashing, PPE, and enhanced cleaning and disinfecting.
2. Ensure there are policies and procedures in place related to staff travel including limiting travel to hot-spots and measures to take once they return back to work.
3. Train and verify competency of all staff on health and safety procedures, including how to support people with developmental and behavioral disorders, dementia, and other high-risk individuals.
4. Plan how to adjust the time, frequency, environment, or type of activities to minimize risk.
5. Create an emergency plan if staff or clients get sick.
6. Identify and share resources and strategies for self-care and stress management with staff and clients.
7. Notify clients of policies and procedures and ensure understanding of expectations.

Act

1. After thoughtful assessment and detailed planning, ACT on the best decision at this time.

Monitor

1. Regularly monitor developments with local authorities.
2. Monitor staff absences and have flexible leave policies and practices.
3. Monitor stock and distribution of cleaning and disinfecting supplies and PPE.
4. Monitor daily and consult with local health authorities if there are cases in program or an increase in cases in the local area and adjust operations, as needed.
5. Keep track of all visitors and staff who enter the facility using a sign in/out log that records the day, time, name, and contact information.
6. Monitor staff travel to help avoid visiting hot-spots.
7. Continue to monitor the situation and reassess decision regularly.

This project was supported, in part, by grant number 90270002, from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20531. Grantees undertaking projects with government sponsorship are encouraged to express their own findings and conclusions. Points of view or opinions do not, however, necessarily represent official Administration for Community Living policy.



CLEAR

SAVE

PRINT

FAMILY DECISION GUIDE

Adapted from the [Nursing Forward Decision Guide](#) developed by the University of Wisconsin Division of Extension

The Decision-Making Process

This decision guide was developed for family caregivers and care recipients. Whenever possible, the decision to receive respite care should be made together as a family. Families must carefully consider all potential risks, benefits, and barriers before making an informed decision about whether to resume respite care services. It is important to remember that information and guidance related to COVID-19 is evolving rapidly. Additionally, depending on where you live, the risk for exposure may vary and change over time. As a

result, it is important to continually monitor and regularly reassess the safety of receiving respite care. You may need to resume services in a step-wise or phased approach and you should be prepared to stop receiving respite care services as the situation changes. It is important that all individuals involved in providing and receiving respite care feel comfortable with the decision and are kept in close communication of any changes.

WHO should be involved in the decision-making process?

- | | | |
|-------------------------------------|---|---|
| 1. Who is impacted by the decision? | 2. Who should be informed about the decision? | 3. Consider other family members, friends, and other providers. |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

What is the LOCAL context?

- YES NO UNKNOWN
- Are there any local or national guidelines that need to be considered?
 - Is the number of new cases of COVID-19 going up, down, or holding steady in your area?
 - Have there been any recent outbreaks or surges in the number of cases of COVID-19?
 - Have there been any high-risk events in the past two weeks, such as large gatherings in the community, that could result in an outbreak or surge in cases of COVID-19?

What are the possible RISKS?

- | | |
|--|--|
| 1. What are the possible risks for everyone involved? Consider social, emotional, mental, social, financial, or spiritual needs. | 2. What would happen if no respite care was provided (i.e. job loss, impact on mental health of caregiver, out-of-home placement of care-recipient, etc.)? |
| <input type="text"/> | <input type="text"/> |
- YES NO UNKNOWN
- Has there been any impact on the family caregivers' ability to provide quality care?
 - Does anyone involved have an underlying condition or other risk factors that make them more likely to become seriously ill or hospitalized?
 - Does anyone involved have other high-risk exposures (i.e. exposure from being or living with an essential worker, recent travel, etc.)?
 - Do you have a plan for what to do if someone gets sick?



FAMILY DECISION GUIDE

What are the possible BENEFITS?

- | | | |
|---|--|--|
| 1. What are the possible benefits for everyone involved? Consider social, emotional, mental, financial, or spiritual needs. | 2. How would respite care benefit family caregivers? | 3. How would respite care benefit care recipients? |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
4. What is the current stress level of family caregivers? (highlight number to indicate level.)
- | | | | | | | | | | |
|---------------|---|---|---|---|-------------|---|---|---|----|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
| Little stress | | | | | High Stress | | | | |

How can risks be MINIMIZED?

- YES NO UNKNOWN
- Are there policies and procedures in place related to the recommended steps to prevent the spread of COVID-19, including: screening for symptoms, social distancing, handwashing, PPE, and enhanced cleaning and disinfecting?
 - Can you adapt the time, frequency, environment, or types of activities to minimize risk?
 - Do you have access to PPE (i.e. gloves and face coverings)?
 - Do you have access to cleaning and disinfecting supplies?
 - Is social distancing (at least 6-feet apart) possible?
 - Can everyone involved tolerate wearing masks or other PPE?

What are the possible ALTERNATIVES to respite care?

- YES NO UNKNOWN
- Does the family caregiver have friends or family members who can provide short breaks?
 - Are there other respite options that would help reduce the risks (i.e. virtual respite, outdoor respite, in-home respite, etc.)?
- YES NO UNKNOWN
- Can family caregivers wait a little longer to receive respite care? If so, how long could family caregivers continue to provide quality care without respite care?

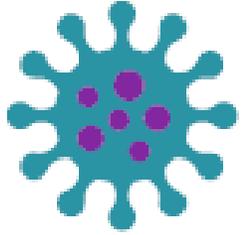
Making the DECISION.

- YES NO UNKNOWN
- Does anyone involved have additional or ongoing concerns you should talk about more?
 - Do the potential benefits outweigh the potential risks?
3. What is the BEST decision at this time? Resume respite care Not resume – continue to assess the situation
4. How will you continue to monitor the situation in order to re-evaluate your decision regularly?
-

This project was supported, in part, by grant number 582788D from the U.S. Administration for Community Living, Department of Health and Human Services, Washington, D.C. 20515. Grantees collaborating projects with government sponsorship are encouraged to express freely their findings and conclusions. Points of view or opinions do not, therefore, necessarily represent official Administration for Community Living policy.



CLEAR SAVE PRINT



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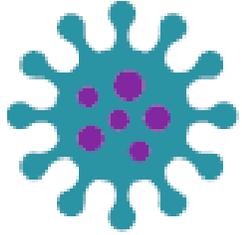
- Important Information about COVID-19
 - What is COVID-19?
 - Symptoms of COVID-19
 - Who's at Risk?
 - Preventing Illness

Stop the Spread of Germs

Help prevent the spread of respiratory diseases like COVID-19.

- Stay at least 6 feet (about 2 arms' length) from other people.** (Illustration shows two people with a 6 ft distance marker between them.)
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash and wash your hands.** (Illustration shows a person coughing into a tissue.)
- When in public, wear a cloth face covering over your nose and mouth.** (Illustration shows people wearing face coverings.)
- Do not touch your eyes, nose, and mouth.** (Illustration shows a hand with a red 'X' over the face.)
- Clean and disinfect frequently touched objects and surfaces.** (Illustration shows hands spraying disinfectant.)
- Stay home when you are sick, except to get medical care.** (Illustration shows a person in bed and a house.)
- Wash your hands often with soap and water for at least 20 seconds.** (Illustration shows hands being washed with soap.)

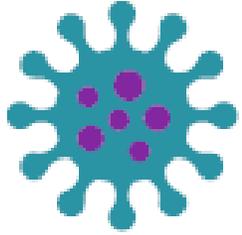
[cdc.gov/coronavirus](https://www.cdc.gov/coronavirus)



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 - Cleaning and Disinfecting
 - Food Safety
 - Caring for People with Dementia or Developmental and Behavioral Disorders
 - Legal and Ethical Considerations
 - Training Respite Care Providers

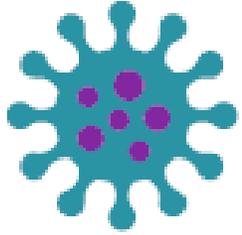




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 - Health Screening Policy and Procedures
 - Competency Validation Checklist
 - Oath of Personal Responsibility

OATH OF PERSONAL RESPONSIBILITY

Adapted from the [Oklahoma Center for Nonprofits](#)!

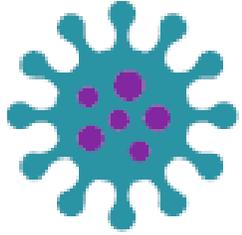
We have composed a simple "Oath of Personal Responsibility" that all respite agency staff, respite providers, family caregivers, and care recipients should adhere to. While not legally binding, it does remind all of us of our responsibilities to help reduce the spread of COVID-19 and ensure that respite care services can be provided safely.

I, _____, am aware of the potential spread of COVID-19 that could result in severe illness and potential death. Therefore, I will, to the best of my ability, follow the recommended steps to prevent the spread of COVID-19, including: screening for symptoms, social distancing, handwashing, wearing face coverings, and enhanced cleaning and disinfecting. Should I develop symptoms or if I am exposed to someone with COVID-19, I promise to contact the respite agency to let them know. I will work with my healthcare provider and follow current recommendations related to testing and quarantine.

PRINT NAME

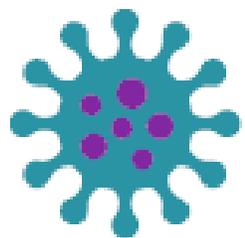
SIGN NAME

DATE



SUMMARY

- Guidelines and downloadable fillable PDFs of all appendices available on ARCH website at <https://archrespite.org/national-respite-guidelines-for-covid-19>
- All references are hyperlinked throughout the document for easy access to additional information
- As new information and resources become available, we will continue to update this guide
- Please email additional ideas, resources, or examples of success stories to Jill Kagan at jkagan@archrespite.org



THANK YOU





Respite Program Case Study

The Family Resource Network New Jersey

Program Description

- The New Jersey Family Resource Network (FRN) provides direct support services to children and adults with intellectual and developmental disabilities and their family caregivers. Originally known as the Epilepsy Foundation of New Jersey, the Family Resource Network is in its 50th year of operation and includes Epilepsy Services of NJ, Autism Family Services of NJ, and Caregivers of NJ.
- Serves 1,800 children and adults with disabilities monthly. Services are funded by Department of Human Services. Children's services are coordinated through the NJ Department of Children and Families, and adult services are coordinated through the Division of Developmental Disabilities (DD).
- The FRN provides respite services through their voucher program, in-home services, and various out-of-home community-based options such as an afterschool program, summer camp, and community inclusion activities and events.
- Due to the COVID-19 pandemic all community-based respite services were closed on March 12th at the time of the statewide shutdown. For voucher and in-home services, a phased in approach was used to reopen due to different state agency oversight guidance and requirements for child vs. adult services. During the shutdown, the voucher service for children was able to continue, and in-home respite continued where possible, available, and agreed upon. Though significantly reduced, services were maintained. This occurred within 30 days of the shutdown.

Planning and Guidance

- Information and resources through the Centers for Disease Control and Prevention (CDC), NJ Department of Children and Families, Division of Developmental Disabilities (DD), NJ Academy of Pediatrics, FRN Health and Innovations Department (internal public health experts), and Governor Orders/Guidance.
- To gain clarity on how to proceed, communicated on a regular basis with the NJ Department of Human Services: Department of Children and Families and Division of DD.
- Applied for and received a Paycheck Protection Program (PPP) loan from the federal government
- Applied for free Personal Protective Equipment (PPE) with NJ organizations such as the NJ Association for Community Providers.
- Immediately contacted all Direct Support Professional (DSP) staff to discuss options for continuing to work as PPP loan provided option to retain staff. Some staff did not continue to work. Others were repurposed and used in other services or administrative tasks.
- Conducted extensive outreach to families including weekly emails, social media posts, and individual phone calls to each family.
- Identified regional Respite Coordinators in each area of the state to assist with planning, PPE purchase and dissemination, family outreach, and service reopening protocols.
- Developed the FRN Guide for Use of PPE to instruct DSPs around using masks and gloves and Identified best options for purchasing PPE, delivering or shipping to Regional Coordinators, and disseminating to DSPs.
- Developed COVID health screening procedures for both families and DSPs to be conducted 24 hours prior to service and the day of service ahead of going to the home.
- Started tracking COVID numbers internally including exposure, testing results, and deaths to get a better grasp of the scope of the pandemic for NJ.

COVID-19 Training and Resource Dissemination

- Called each DSP and provided individualized orientation and training by phone to go over service reopening procedures and protocols.
- Established FRN Connect through Zoom and provided free virtual training and events for families and DSP staff during April, May and June. Topics included caregiver issues, hygiene, yoga, Zumba, fitness classes, story time and more.
- Established Mental Health Zoom sessions with social worker providing support for Direct Support Professionals actively supporting families in their own homes.

Reopening Procedures and Requirements

- Regional Respite Coordinators took the lead for ensuring all reopening tasks were completed, including PPE distribution, orienting and training DSPs by phone, and communicating with all families.
- Prior to service, the regional Respite Coordinators called families by phone to review the safety protocols. The Direct Support Professionals called and Implemented COVID screening procedures by conducting calls 24 hours prior to service and the day of service ahead of going to the home before providing any services.
- Helped families find funding for PPE if needed through state agencies.
- Discussed and addressed other family needs such as food assistance, health insurance, and financial and housing needs. If families needed additional help, they were referred to appropriate local and state programs and agencies.

Challenges and Opportunities

- Working with two state agencies, one focused on child services and the other on adult services, resulted in challenges regarding consistent determinations about reopening.
- Through extensive individual family outreach during the pandemic, staff became more connected to families, sharing their stories on social media and taking “porch” photos to capture their experiences.
- Families and FRN administrative staff found a newfound appreciation for DSPs who rose to each challenge in their new roles providing respite for families. Overall, the FRN only had a 15% reduction in in-home respite services.
- Awards FREE Respite from the NJ Pandemic Relief Fund

Respite Service Continuation

- Anticipates that all pandemic-related respite program changes will remain in place for the foreseeable future.
- Ongoing DSP/staff support around new COVID-19 information and resources will be needed.
- PPE supplies will be maintained for current and future needs.
- FRN will advocate for DSP concerns and issues.
- FRN will continue to apply for funding for PPE Supplies with FEMA and other sources.

Veronica L Diaforli
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SR VP of Programs and Services
vdiaforli@familyresourcenetwork.org
609-392-4900 x 203

<https://www.familyresourcenetwork.org/frn-support-services>



FOR YOUTH DEVELOPMENT
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA of San Diego County: In-Home Respite Care

YMCA CHILDCARE RESOURCE SERVICES
FIELD SERVICES: RESPITE UNIT
JENNIFER SANCHEZ
SR. SOCIAL SERVICES PROGRAM DIRECTOR
JSANCHEZ@YMCA.ORG
SAN DIEGO, CA



YMCA San Diego Special Needs Care: In-Home Respite Care Program Description

The YMCA of San Diego County provides respite for families of children and adults with special needs to give families short-term relief from the ongoing care of their child with developmental disabilities. Currently serving children as young as 2 years old through older adults into their 60s. Respite is available through in-home care provided by trained YMCA staff. All referrals for respite come from the San Diego Regional Center.

Regional service coordinators review family needs and determine eligibility and the number of quarterly respite care hours. The respite program serves approximately 1,000 clients and has 370 part-time respite providers, providing an average of 10,000 respite hours per month.

YMCA San Diego Special Needs Care: In-Home Respite Care Program

During the COVID-19 pandemic, in-home respite services were suspended on March 16th due to the statewide *stay at home order*. However, families were able to access out-of-home respite provided by licensed family child care homes. These services followed California child care licensing guidelines during the pandemic.

Planning and Guidance for Reopening Respite Services

Conducted respite service planning through internal leadership and staff/provider discussions and coordination with the YMCA corporate office serving 19 locations in San Diego County.

Researched COVID-19 information and resources through the Centers for Disease Control and Prevention (CDC), California Department of Public Health, San Diego County Health Department, and local guidance and resources.

Purchased Personal Protective Equipment (PPE) for respite providers including cloth and disposable masks, gloves, soap, safety glasses/goggles, and hand sanitizer gel.

Created COVID-19 health screening guidelines and questions with YMCA legal counsel and input from state emergency and health programs. COVID-19 health screening is conducted 24 hours in advance of providing/receiving respite services and prior to every respite appointment.

Planning and Guidance for Reopening Respite Services

Surveyed families to determine if they wanted to use respite services. Although 70% said they wanted to use services, a lower number are actually using services as of reopening.

If families indicated they had an immediate need for respite, connected families with their service coordinator so they could access other regional respite service services through the San Diego Regional Center.

Created a family liability waiver based on legal team advice, that must be signed before receiving respite services.

Respite providers were given an opportunity to take voluntary leave for a discretionary 30 day leave if they wanted.

Reopening Procedures and Requirements

Respite providers required to complete online COVID-19 training prior to resuming work.

Respite providers required to pick up PPE prior to resuming work at contactless drive-through YMCA distribution locations. PPE for respite providers includes masks (cloth and disposable), gloves, soap, safety glasses/goggles, and hand sanitizer gel.

Respite providers advised that they can also use PPE with respite recipients if they display symptoms requiring safety/health intervention such as not being able or willing to wear a face mask.

All respite providers and families required to complete the Respite Health Screening Questionnaire 24 hours in advance of every appointment and prior to entering the home for the respite appointment.

Reopening Procedures and Requirements

If a respite provider answers yes on any of the health screening questions, they are required to isolate themselves from others, call their supervisor, and contact a medical provider and get tested. In order to return to work, they must have a “return-to-work” note from a medical provider.

Respite providers are required to participate in additional training within 30 days of resuming work around trauma informed care and self-care. This is an online training.

During respite, providers are required to physically distance from all family members and if possible and safe from the client (6 feet). If unable to distance, they are required to wear a mask.

THANK YOU!

REMEMBER THE THREE CS



COVER

Cover your cough and sneeze in your elbow or tissue.



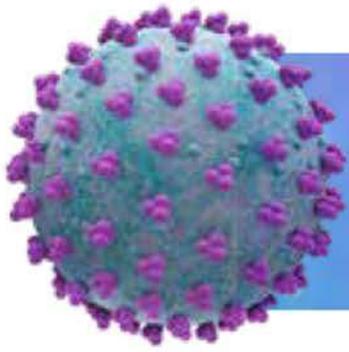
CLEAN

Wash hands frequently for 20 seconds. Wipe down equipment before and after use with sanitizing spray.



CONTAIN

Stay home if you are sick.



Respite Program Case Study *Respite in the Time of COVID-19*

Respite Care Association of Wisconsin – Respite Care Registry and Caregiver Respite Grant Program

The first things **we** did:

1. Sent emails to family caregivers who had used the Caregiver Respite Grant Program, and to registry providers to determine caregiver/provider comfort levels for allowing/providing in-home respite services.
 - **Most caregivers and registry providers were uncomfortable, but stated that down the road, they would be more open to receiving respite from providers with Personal Protective Equipment (PPE).**
2. Scheduled daily webinars the first week of *Safer At Home* orders for anyone to join to identify and discuss specific COVID-19 issues and concerns.
3. Periodic webinars continued to be held as needed (In addition to our monthly Webinar Wednesday).



Planning and Guidance for Ongoing Registry Services and Caregiver Respite Grant Program

- **Conducted internal planning** through staff discussions, research and collaborating with statewide collaborating agencies as needed.
- **Repurposed funding** from conferences and travel that never happened to offer those on our registry and recipients of our caregiver respite grant program an opportunity to select from a list of meaningful activities to do during respite.
- **Sent emails to those listed on our registry** to confirm whether they wanted to remain active or not during COVID.
- **Collected and ordered Personal Protective Equipment (PPE)** for staff, registry providers, and caregivers including masks, gloves, and sanitizing gel.
- **Implemented an expedited approval for the Caregiver Respite Grant Program** for those who were **infected or affected** by COVID-19 by eliminating the requirement for supporting documentation.



On Wednesday, April 1, 2020, 04:09:58 PM CDT, Margie Arpin <marpin@respitcarewi.org> wrote:

You are receiving this email because you are listed on the Respite Care Association of Wisconsin's Registry of Care Providers.

Our registry is still available to caregivers who want to search for respite care providers. However, because of the CoVid-19 pandemic and the current Safer At Home orders issued by Governor Evers, we understand that you may not feel comfortable going into someone's home to provide care. Therefore, we can temporarily suspend your profile on the registry until the order is lifted. Please email this response if you want to be temporarily taken off the registry:

"I would like to have my profile temporarily suspended from the RCAW Registry"

Please respond ASAP. If we do not hear back from you, your profile will remain active.

Thank you for your work as a care provider. Please let me know if you have any questions.

Sincerely,

Margie Arpin

Office Manager
1835 E. Edgewood Dr.
Suite 105-436
Appleton, WI 54913
Office: 608-222-2033
www.respitcarewi.org



To learn more, visit www.respitcarewi.org or call 608-222-2033



RCAW
Respite Care Association
of Wisconsin

Challenges and Opportunities

- **Participated in media interviews** to address respite care challenges during COVID-19 and to share RCAW's newly developed resources.
- **Utilized various social media platforms** to address questions and concerns from families and respite care providers; and proactively provide updates and status/changes on our programs to better meet their needs.
- **Reconfigured previously planned in-person community provider recruitment to virtual events** due to pandemic which required additional planning.
- **Planned and conducted special outreach program** for individuals who were furloughed but wanted to provide respite. Created a short-term opportunity where they could use a special modified process to be listed on the registry on a temporary basis.
- **Distributed Care for the Caregiver Kits** to all of our Caregiver Respite Grant Program recipients including word searches, stress balls, playing cards, bags of tea, chocolate, comfy socks, hand lotion, and RCAW water bottles with overwhelming positive response.

Resources for Caregivers & Providers
in Wisconsin during COVID-19

Are you looking for work during the COVID-19
pandemic?

NEWSMAKER SUNDAY
RACHEL WATKINS-PETERSEN
RESPITE CARE ASSOCIATION OF WISCONSIN

1:00 P.M. - 1:30 P.M.

Get the link to join by visiting the homepage of
www.respitecarewi.org

 **RCAW**
Respite Care Association
of Wisconsin

*Respite
Registry and
Caregiver
Respite Grant
Program
Service
Continuation*

- **Continue to update** RCAW COVID-19 webpage
- **Expand online training** curriculum will around pandemic needs and other special situations.
- **Monitor Registry usage** to identify and address concerns of those listed on our registry.
- **Provide ongoing supports to families and providers** through phone calls and online resources.
- **Provide state pandemic updates** as needed.

Don't hesitate to contact us with any questions, or ideas for collaboration!

Organizational Questions:

Lisa Schneider

lschneider@respitcarewi.org

Program related questions:

Rachel Watkins-Petersen

rwatkins-petersen@respitcarewi.org

Training related questions:

Val Madsen

vmadsen@respitcarewi.org

Registry related questions:

Margie Arpin

marpin@respitcarewi.org