Arizona Respite Network – Quarterly Meeting

Meeting Notes January 18th, 2022

Vision: All family caregivers in AZ will have access to respite care services when needed, including during emergencies.

The Arizona Respite Network is hosted by the Arizona Caregiver Coalition (ACC), the Arizona Department of Economic Security (ADES) Division of Aging and Adult Services (DAAS), and the Lifespan Respite Committee. It is an initiative under the Lifespan Respite Program Grant from the Federal Administration for Community Living (ACL).

1. Welcome and Background – Jutta Ulrich, Executive Director, Arizona Caregiver Coalition, welcomed all attendees and reviewed the vision and purpose of the Arizona Network. Updates:
   a. **Mini-grants** are now available through the Lifespan Respite grant for planning or expanding respite programs. [https://azcaregiver.org/service/arizona-respite-network/](https://azcaregiver.org/service/arizona-respite-network/). Applications are posted on the ACC website and should be sent to Jutta@azcaregiver.org.
   b. A committee is working on concepts for a **list of respite providers** that can be published for the general public to access. Project lead is Cat Trobaugh, WACOG Area Agency on Aging. Cat had sent letters to many providers but got limited response; a small committee might be needed to follow up.
   c. The ACC has scheduled the annual Family Caregiver Day at the Capitol for March 3, 2022.

2. Special topic: Emergency Respite – Several guests presented key concepts for how they provide emergency respite service in their service area.
   a. Tracy Cieniewicz, Huntsville, Alabama. Their agency, Cerebral Palsy Huntsville, is contracted with Area Agencies on Aging (AAA), and the Department of Mental Health to provide respite. The AAAs conduct intake of clients and then refer them to respite; a medical diagnosis is required. Emergency respite ($500) is only for clients already in the system for respite. Clients cannot have respite from other funding sources. Funding comes from Lifespan Respite, Dept. of Mental Health, some state appropriations. They have a very specific list defining emergencies.
   b. Hanna Quiring, Dept of Health and Human Services, Nebraska. Emergency respite is for caregivers already in the system for respite; they must document need with a doctor’s note. AAAs determine eligibility, caregiver must be eligible for regular respite in order to get emergency respite. They authorize $125 a month for respite plus $85 a month for crisis. Families choose the provider, must re-apply every 12 months. There is an online provider matching service, but not required.
   c. Stacy Subida, Chicago AAA. Provider for emergency respite can be a friend or family member but must be hired by a delegate agency. They contract with an
agency for outreach and marketing to providers. They have 20 facilities on their list to provide respite in addition to in-home respite. Emergency respite is part of the regular respite program, it just means that the response time is faster. NOTE: Subsequently Jutta Ulrich spoke to someone from the “Premier” agency. They work with nursing homes (SNF) and suggest that taking emergency respite clients can help fill their beds and can provide leads for potential future residents. The pay is the Medicaid rate. The client chooses a facility, Premier to determine if they have a bed free. The invoice goes to the Premier, which gets funds from the City/AAA and then pays the SNF. The SNFs on their list take clients even for just one day, no TB test, and little paperwork. They tried Assisted Living Facilities but that required a lot of paperwork.

d. Discussion:
   i. Lita Nelson, DES-DAAS stated that AAAs in Arizona can offer emergency respite. A gap might be that stand-by providers are needed. Lifespan Respite grant funds could be used when a caregiver is not eligible for AAA funding.
   ii. We may need to research the process required to have a person admitted to a facility; paperwork, TB test may be needed and that would be a challenge if there is an emergency.
   iii. We may want to include grandparents raising grandchildren as a population to be served with respite.

Attendees:
Jackie Edwards, Intertribal Council of Arizona
Shawn Thompson, ADES Division of Developmental Disabilities
Ginger Fligger, Pinal-Gila Council for Seniors
Deb Waring, Pima Council on Aging
Brandon Baxter, NACOG Area Agency on Aging
Cat Trobaugh, WACOG Area Agency on Aging
Gina, WACOG Area Agency on Aging
Scott Hawthornthwaite, Area Agency on Aging Region One Inc.
Paulina Serna, Raising Special Kids
Karen Enriquez, SEAGO Area Agency on Aging
Lita Nelson, ADES Division of Aging and Adult Services
Courtney Allen, Benevilla
Kayleigh Bernardino, Visiting Angels
Laura Guild, AZDES
Jutta Ulrich, Arizona Caregiver Coalition
Tracy Cieniewicz, Alabama
Hanna Quiring, Nebraska
Stacy Subida, Chicago AAA
Veronica Whitby Cosey, Chicago AAA