

Respite Care

A. POLICY FOR A SINGLE DESIGNATED ALF FACILITY:

- (1) Section 429.071, Florida Statutes, expressly authorizes the Agency for Health Care Administration (the agency) to establish policies necessary to achieve the objectives specific to the Intergenerational Respite Care Pilot Program contemplated by the section.
- (2) The policies stated herein are not of general applicability and pertain only to the single assisted living facility that s.429.071, F.S., mandates that the agency license as an intergenerational respite care assisted living facility (IRC ALF) that “will provide temporary personal, respite, and custodial care to minors and adults with disabilities and elderly persons with special needs who do not require 24-hour nursing services.”
- (3) The purpose of s.429.071 is to establish a pilot program to facilitate the receipt by minors and adults with disabilities and by elderly persons with special needs, of in-home, family-based respite care for up to 14 days; to prevent caregiver “burnout,” in which the caregiver’s health declines and he or she is unable to continue to provide care so that the only option for the person with disabilities or special needs is to receive institutional care; and to foster the development of intergenerational respite care (IRC) assisted living facilities to temporarily care for minors and adults with disabilities and elderly persons with special needs in the same facility and to give caregivers the time they need for rejuvenation and healing.
- (4) Except as noted in this statement of policy, the designated intergenerational respite care assisted living facility (the Facility) that shall be licensed pursuant to the Program must comply with all applicable requirements and standards contained in Chapter 429, Part I, Florida Statutes and Chapter 58A-5, Florida Administrative Code (F.A.C.).

B. DEFINITIONS:

- (1) “Program” means the Intergenerational Respite Care Pilot Program contemplated by section 429.071, F.S.
- (2) “IRC ALF” means intergenerational respite care (IRC) assisted living facility (ALF).

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- (3) “Facility” means that single assisted living facility designated as or to be the IRC ALF that shall operate under the pilot program to provide temporary personal, respite, and custodial care to minors and adults with disabilities, and elderly persons with special needs who do not require 24-hour nursing services for at least 24 hours but not for a period of more than 14 consecutive days.
- (4) “Abbreviated care plan” (ACP) means the documentation of an individual IRC resident’s health assessment, the IRC resident’s specific physical, psychological, social needs, preferences and how the Facility will meet the IRC resident’s needs.
- (5) “Caregiver” means an individual or individuals legally responsible for the IRC resident in the community.
- (6) “Distinct and Separate Living Units” means a building or buildings, or part of a building that provides separate bathroom, bathing, and bedroom areas. The Facility shall not co-mingle IRC residents who are minors and adult IRC residents without direct care supervision.
- (7) “Minor” means a person 18 years of age or younger.
- (8) “Resident” means a person of any age temporarily residing in and receiving care from the IRC.

C. ABBREVIATED CARE PLAN REQUIREMENTS:

- (1) The ACP must include:
 - (a) Health monitoring
 - (b) Assistance with personal care services and medications
 - (c) Nursing services
 - (d) Supervision
 - (e) Special diets
 - (f) Allergies
 - (g) Current daily activities
 - (h) Restrictions on activities
 - (i) Behavioral patterns
 - (j) Ancillary services
 - (k) Transportation accommodations
 - (l) Other supportive services which may be specific for the IRC resident
 - (m) Identification of service providers
 - (n) Physician name and telephone number

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- (2) Prior to admission, the abbreviated care plan must be completed and signed by the facility's administrator, IRC resident's caregiver, and/or the IRC resident, as appropriate.
- (3) The abbreviated care plan must include the name, address, and telephone number of the caregiver and/or a 24-hour emergency contact for the IRC resident.
- (4) The abbreviated care plan must be current and completed within one (1) calendar week prior to the IRC resident's admission. Abbreviated care plans shall be updated, as necessary, for IRC residents who may be re-admitted to the IRC.
- (5) The abbreviated care plan of each resident may be accepted for a period of one year from the dated original, provided that the resident has no significant changes in care and service needs.

D. FACILITY CONTRACTS AND POLICIES & PROCEDURES:

- (1) The Facility's contract with each resident shall:
 - (a) Contain daily and weekly fees, which shall not be increased during the contracted period of stay.
 - (b) Be signed by the IRC resident or the appropriate caregiver. If the IRC resident is a minor, the contract must be signed by the caregiver.
 - (c) Be executed between the resident and the IRC on each admission into the IRC. **Exception:** If the same resident is readmitted with no significant changes in health, abilities, disabilities or behavior, the initial contract shall be valid for a one year period. The resident's fee may change from one contract period to the next admission within a one year period.
 - (d) Include the contract's effective date and expiration date for each IRC resident.
- (2) The Facility's policy and procedures for achieving the objectives of the Program shall include but not be limited to:
 - (a) A written statement that details how minors and adults will reside in distinct and separate living units.
 - (b) An outline age or developmental appropriate social and leisure activities offered by the IRC.

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- (c) Details for arranging appropriate medical, dental, nursing, behavioral, or mental health services, as needed, for minors and adults with disabilities and elderly persons with special needs.
 - (d) Details for assurance of age-appropriate transportation of residents to scheduled medical, dental, nursing or mental health services.
 - (e) Details pertaining to staff training in caring for minors and adult persons with disabilities and special needs. The required training and the eligibility of staff in these areas shall be in compliance with Chapters 58A-5.019 and 58A-5.0191, F.A.C.
- (3) The Facility must follow the contract and policy and procedures of the Facility.

E. RESIDENTS' RECORDS:

- (1) The residents' records shall include:
 - (a) The admission and the discharge date.
 - (b) Each resident's abbreviated care plan in addition to the required Resident Health Assessment for Assisted Living Facilities (DOEA Form 1823, March 1999) on file, which must be completed and dated no more than 30 days prior to a resident's admission into the IRC ALF Program.

F. EXEMPTIONS:

- (1) The Facility shall not have to comply with the 45 day notice provision outlined in s. 429.28 (1), F.S.
- (2) The IRC residents shall not have to comply with the 30 day notice provision outlined in s. 429.24 (3), F.S.
- (3) The Facility shall not have to comply with the bed-hold provision outlined in s.429.24 (3), F.S.
- (4) Minors and individuals who have been determined to be incompetent shall not travel independently in the community, shall not self administer medication, or require assistance with self administration of medication and shall not keep medication in their rooms.
- (5) Section 429.12, F.S., will not apply to the Facility. The Facility shall not transfer the ownership of the license during the pilot program period.

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G. LICENSING:

The Facility shall submit to the Agency for Health Care Administration, Assisted Living Unit, 2727 Mahan Drive, Mail Stop #30, Tallahassee, Florida, 32308, a monthly report regarding resident characteristics and experiences of the pilot project. The report is due by the 10th calendar day of the following month and must contain the information for each resident discharged during the month:

- (1) The resident's age, gender, diagnoses, length of stay and cost of care;
- (2) Identification of any resident that can not self-evacuate; and
- (3) A description of positive and negative outcomes, challenges and any other issues encountered.