

INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE MANUAL

Chapter 7: In-Home Services Effective Date: October 1, 2008

Section 8: Respite Care Version: 1

POLICY

The Indiana Department of Child Services (DCS) will encourage families who are receiving inhome services to use informal supports identified either by the family or through the Child and Family Team (CFT). If informal supports cannot be identified by the family, the Family Case Manager (FCM) will assist the parent, guardian, or custodian in finding respite care if it is a part of the Case Plan or recommended by the CFT. However, DCS will not pay for the cost of respite care.

Note: Informal supports may include, but are not limited to aunts, uncles, grandparents, cousins, brothers, sisters, neighbors, friends, co-workers, etc.

DCS will encourage families to use respite care services if identified as a necessary support service. DCS defines respite care as a transfer of caregiving responsibilities with the specific intent of providing relief to the family in stressful or emergency situations. For children receiving in-home services respite care may be anywhere from twenty-four (24) hours to five (5) days.

Note: DCS does not consider field trips and sleepovers to be respite care.

All respite care must be preapproved by the FCM assigned to the child, unless emergency circumstances exist. If respite care is secured by the parent/guardian/custodian, the FCM must complete a Child Protection Services (CPS) check and a limited criminal history check on the identified respite care provider.

Note: If emergency circumstances exist, the parent/guardian/custodian must call the supervisor of the assigned FCM, or call the 24-hour contact number for the DCS local office and inform the intake worker of the emergency and where the child will live and for how long.

For all children under the care and supervision of DCS, DCS will require that the respite care provider be a licensed foster family home or licensed child caring institution unless the recommendation was made by the CFT or waived by the DCS local office Director. The DCS local office Director or a designee may grant exceptions to this in writing.

DCS will not count children in respite care towards the licensed capacity of the care provider.

DCS will collaborate with the family to develop a Respite Care Plan, if identified as a necessary support service through the CFT Meeting or Case Conference, to be utilized during DCS involvement and after the family has reached sustainable safe case closure.

DCS will require that the parent/guardian/custodian provide the respite care provider with the following information about each child to be cared for:

- 1. The full name and date of birth.
- 2. The Medicaid Card or other insurance information.
- 3. The medical needs, including detailed medication instructions, if applicable.
- 4. A daytime phone number for the assigned FCM.
- 5. A 24-hour contact phone number for the local DCS office on call person.
- 6. A contact phone number where the parent/guardian/custodian can be reached.
- 7. Any pertinent information relating to the child's behavior.
- 8. Any known allergies.
- 9. Any restrictions in contacting the parent/guardian/custodian, etc.

Code References

NA

PROCEDURE

The FCM will:

- 1. Document all requests for respite care services in the Management Gateway for Indiana's Kids (MaGIK) case log notes;
- 2. Review all requests for respite care and seek input from the Supervisor, CFT members and/or convene a CFT Meeting if applicable if there are any concerns regarding the length of the planned respite care, the frequency of requests, etc. See separate policy, 5.7 Child and Family Team Meetings;
- 3. Recommend use of respite care when there are signs of extensive family stress;
- 4. Notify the parent, guardian, or custodian if the request for respite has been approved; if not approved, provide an explanation as to why;
- 5. Assist the parent, guardian, or custodian with locating and/or coordinating the respite care;
- 6. Verify with the respite care provider the arrangements that have been made (e.g., length of stay, drop off and pick-up times, etc.); and
- 7. Ensure that the respite care provider receives all necessary information to adequately care for the child (e.g., Medicaid number, physician name and number, FCM contact information, etc).

The Parent, Guardian, or Custodian will:

- 1. Request the use of respite care at least three (3) business days in advance, unless emergency conditions exist. Requests may be in writing or oral;
- 2. Make all arrangements with the respite care provider (e.g., length of stay, drop-off and pick-up times, pre-care visits, and any agreements regarding payment for respite care, etc.); and
- 3. Prepare the child for respite care (e.g., pre-care visits, explaining respite care to the child, etc.).

PRACTICE GUIDANCE

N/A

FORMS

N/A

RELATED INFORMATION

Why is Approval Necessary?

DCS must review all respite care requests because:

- 1. DCS is responsible for the care and supervision of the child; therefore, DCS needs to be able to locate the child at all times; and
- Archived 5/31/2017 recommended by 2. Review of respite care use allows DCS to identify potential concerns. Frequent respite care use could signal that in-home services may not be appropriate.