

Connecting Individuals with Disabilities to Their Community

COMMUNITY BRIDGES EARLY SUPPORT & SERVICES

RESPITE GUIDE FOR FAMILIES

Community Bridges is a private non-profit area agency designated by the State of New Hampshire to assist families who have a child or family member with a developmental disability and/or acquired brain disorder. Community Bridges is committed to assisting individuals and families obtain supportive services and natural supports to reside, work and participate fully in their communities. Individual & Family Support and Respite Services are an integrated system of direct supports and services for families.

Community Bridges Mission Statement

Community Bridges will advance the integration, growth and interdependence of people with disabilities within their home communities and will be a leader in the delivery of and advocacy for innovative supports to individuals and their families.





Early Supports & Services Mission Statement

Early Supports and Services are dedicated to assisting individuals and families, through education and support, to develop and achieve their personal visions.

GENERAL INFORMATION



MAILING ADDRESS:

Community Bridges, 162 Pembroke Road Concord, NH 03301

MAIN PHONE LINES:	603-225-4153 or 1-800-499-4153				
DIRECT VOICE MAIL:	603-226-3212 or 1-800-225-4779 plus extension number				
FAX NUMBER:	603-225-0376				
WEBSITE:	www.communitybridgesnh.org				
BUSINESS HOURS:	Monday through Friday, 8:30 a.m. – 4:30 p.m.				
INDIVIDUAL & FAMILY SUPPORT PROGRAM PHYSICAL ADDRESS:	162 Pembroke Road, Concord, NH 03301				
DIRECTIONS:	Heading North on I-93, take Exit 14. Right onto Loudon Road to Canterbury Road. Right onto Canterbury Road. Left onto Pembroke Road.				
	Heading South on I-93, take Exit 14. Left onto Loudon Road to Canterbury Road). Right onto Canterbury Road. Left onto Pembroke Road.				

24-HR ON-CALL HELP:

For emergencies after hours, use the <u>main phone lines</u> to contact the answering service; they will page the Individual & Family Support Staff on-call to assist you.

RESPITE QUARTERS

Quarter 1 July 1 to Sept. 30	Quarter 2 Oct. 1 to Dec. 31	Quarter 3 Jan. 1 to Mar. 31	Quarter 4 April 1 to June 30
Reimbursement	Reimbursement	Reimbursement	Reimbursement
Request Vouchers	Request Vouchers	Request Vouchers	Request Vouchers
Due by: Oct. 10 th	Due by: Jan. 10 th	Due by: April 10 th	Due by: July 10 th

CONTACT INFORMATION

Karen Lofgren Director of Childhood Services <u>klofgren@cbinnh.org</u>

Ext 278

Stacy Knight Assistant Director of Childhood Services <u>sknight@cbinnh.org</u>

Ext 212

RESPITE SUPPORT

Community Bridges complies with NH Respite Care Standards as mandated in He-M513.



What Is Respite Support?

Respite is defined as <u>occasional, short-term</u> care for an individual who is eligible for such support, in or out of the individual's home, for the <u>temporary</u> relief and support of his or her primary caregivers.

<u>**Respite support is not to be used for "daycare," and cannot occur while the primary caregivers are working</u>.

****Allocations usually are made to assist caregivers in receiving an average of 8-10 hours of respite support per month.

How Are Respite Services Developed?

The primary caregivers identify a respite need and discuss it with their Individual and Family Support Case Manager. The Case Manager will work with the family to identify all possible supports and resources, which may include agency respite funds as needed and as available.

When the Case Manager and the family have determined there is a need for respite and respite has been approved by the Director of Case Management, a Basic Service Agreement will be created. The Individual & Family Support Program Assistant will notify the family by mail. The family will receive The Respite Guide for Families and Family Reimbursement Vouchers. Families are required to maintain monthly contact and semi-annual face to face meetings with their Case Managers in order to continue receiving respite funds.

Any need for a change in an allocation must be discussed with the Individual and Family Support Case Manager. The Individual and Family Support Case Manager will present the request to the Program Director and the Case Manager will inform the family of the decision.

Who Provides Respite Support?

Respite can be provided by anyone with whom the primary caregivers feel comfortable and whom they believe will provide a safe and enjoyable environment for the individual.



Respite can be provided by:

- neighbors
- relatives (e.g. grandparents, siblings, aunts/uncles, cousins)
- church friends
- friends
- health care workers
- students from local high schools or colleges
- 1:1 school aides
- other staff members from schools or from other agencies

Just as one would search for providers for a child who does not experience a disability, families of children with disabilities may look for their own respite provider from within their natural support system.

Whether support is being sought for a child or an adult, it is always helpful for primary caretakers to ask those they know for ideas regarding people who may be willing to provide respite. Families truly need to network as much as possible in order to develop a strong network.

When interviewing a Respite Provider:

- Verify References
- Ask questions that are pertinent to the individual's and family's needs

It is the responsibility of the primary caregivers to provide all training and information necessary to best support the individual.

Still having trouble finding a respite provider? Here are some "Helpful Hints:"

- Contact School Guidance Counselors to connect with responsible students
- Post index cards on high school and college bulletin boards
- Post index cards at Day Care Centers
- Seek guidance from your Case Manager

Here are some incentives for Respite Providers:

- Building relationships
- Community Service
- Experience in a related field
- Extra Cash

Please note:

- The parents/guardians of an individual eligible for reimbursable respite cannot provide "Respite Support"
- The stepparents and/or domestic partners of parents who have a child eligible for reimbursable respite cannot provide "Respite Support."
- Community Bridges is unable to accept or reimburse a voucher if the parent/guardian, or his/her spouse or domestic partner, is listed as the provider.

Where May Respite Support Occur?

Respite support may take place in many settings; we encourage families to be creative. The setting the family chooses will depend upon the needs of the individual and the family. Respite can occur:

- in the family's home
- in a community setting
- in the home of a neighbor, relative or friend

How Is The Person Providing Respite Paid?

When families use their own providers:

- 1. They must negotiate rates and schedule respite support.
- 2. Families should negotiate a reasonable flat rate for 12 hours or more of respite.
- 3. Families then pay their own providers directly
- 4. Families submit Family Reimbursement Request Vouchers to Community Bridges.
- 5. Community Bridges does not reimburse for expenses other than Respite Support.

Please Note: <u>This amount cannot exceed the total amount of your quarterly</u> <u>allocation</u>. <u>If a family chooses to pay their provider a higher hourly rate, they</u> <u>are responsible for the difference</u>. <u>Please contact your Case Manager or the</u> <u>Individual & Family Support Program Assistant with any questions</u>. It is the best practice for vouchers to be completed and submitted within seven (7) days after respite occurs. Please refer to Page 2 of the Respite Guide or your Basic Service Agreement for the last acceptable date vouchers can be submitted for the current quarter. Vouchers may be sent in by U.S. mail, hand delivery, fax or email. An electronic version of the voucher can be found at our website at www.communitybridgesnh.org. Click on the Resources tab and choose Family Resources. There you will find the Family Reimbursement Voucher and a copy of the Respite Guide for Families. Follow the instructions to fill out and submit the Voucher:

- 1. Parent/Guardian enters the name of your family member who received respite support.
- 2. Parent/Guardian enters the name, address and phone number of the person that provided respite to your family member.
- 3. Enter the respite dates/times/rate and amount paid for each service date.
- 4. Respite provider signs the document each time they provide respite service.
- 5. Parent/Guardian completes the bottom half of the form including signing the form.

Respite is reimbursed on a biweekly basis:

- Respite Vouchers are **due by** <u>Noon on Friday (please see the Respite</u> <u>Reimbursement schedule for exact dates of when they are due by)</u>
- Respite reimbursement checks will be mailed the following Friday according to the Respite Reimbursement schedule
- Late respite vouchers (those not received by Noon time on Friday) will not be reimbursed until the next reimbursement period.

If you presently submit your respite vouchers monthly or even quarterly, you can continue to do so. Just know that they will be processed and checks cut according to the schedule below. We've attached a calendar for your reference. Please call your Case Manager or Stacey McCormack if you have any questions about this process change.

Family reimbursement checks are generally mailed out on Fridays. The Business Office does not make checks available for pick up at Community Bridges. Please allow a few days for postal delivery.

PLEASE NOTE:

If there is a holiday in a given week, vouchers must be here by noon on the Thursday before the week with the holiday.

RESPITE REIMBURSEMENT CALENDAR FOR 2024

Vouchers Due	Checks Mailed				
December 29th	January 5th				
January 12th	January 19th				
January 26th	February 2nd				
February 9th	February 16th				
February 23rd	March 1st				
March 8th	March 15th				
March 22nd	March 29th				
April 5th	April 12th				
April 19th	April 26th				
May 3rd	May 10th				
May 17th	May 24th				
May 31st	June 7th				
June 14th	June 21st				
June 28th	July 5th				
July 12th	July 19th				
July 26th	August 2nd				
August 9th	August 16th				
August 23rd	August 30th				
September 6th	September 13th				
September 20th	September 27th				
October 4th	October 11th				
October 18th	October 25th				
November 1st	November 8th				
November 15th	November 22nd				
November 27th (November 28th & 29th are holidays)	December 6th				
December 13th	December 20th				
Please pay particular attention to those dates that are in bold - they are					
exceptions to the rule due to Community Bridges holiday schedule.					

How Is The Family Reimbursement Request Voucher Filled Out?

The following page shows an <u>example</u> of how to properly fill out a Family Reimbursement Request Voucher. Families who have any questions regarding the proper completion of vouchers should contact their Case Manager or the Individual & Family Support Program Assistant.

COMMUNITY BRIDGES

EXAMPLE

Account #_____

70 Pembroke Road, Concord, NH 03301 Tel (603) 225-4153 Fax (603) 225-0376

Authorized Signature

FOR OFFICE USE ONLY

FAMILY REIMBURSEMENT REQUEST VOUCHER

Respite Support for _John Doe Jr. ____

(First Name AND Last Name of individual receiving supports)

Respite Provider Full Name _____ Jane Smith

Provider Address & Phone No. <u>123 Avenue St. Town NH</u> 603-555-1234

Date Respite Provided	Time Respite Began	Time Respite Ended	Total # of Hours	Hourly/ Daily Rate	Amount Paid by Family	PROVIDER SIGNATURE Required for each date to attest that respite was provided and payment was received
06/01/21	6:00PM	7:30 PM	1.5	\$8.00	\$12.00	Jane Smith Jane Smith
07/02/21	5:00PM	8:00 PM	3	\$8.00	\$24.00	Jane Smith
Total	Amount P	aid by Fan	nily to this	5 provider	\$36.00	

Parent/Guardian Signature: <u>Sally Dec</u>

to attest that respite was provided and pr	rovider was paid					
Are you satisfied with respite and its ability to	meet your needs?	X Yes	🗌 No	If no, plea	ise explain:	
Community I Parents/guardians are res Please fill in the parent/g		ng provid	ers at th	e time res	spite is provi	
Name: <u>Sally Doe</u>	Mailing Street Add	lress: <u>32</u>	1 Avenue	e Ln.		
Town: <u>City</u>	_ State: _	NH	Zip (Code:	03301	i
Telephone #: 603-555-9876	Da	ate Subm	itted:	07/16/	2021	
Is this a new address? Check here: \Box	Check here if	you need	more fo	rms sent	to you: 🗌	

ATTENTION

It is important that the information reported on this form is *accurate*. Respite reimbursements are paid out of **Federal funds**; vouchers may be subject to **Medicaid audits**. *Only list dates and times that you actually paid someone to provide support. <u>You</u> may be required to file a **1099-misc form** for monies *over* **\$600.00** paid to one provider. <u>You</u> may be required to withhold and pay employment taxes if a provider was paid **\$2000.00** or more in one year. These limits do change. *Please refer to IRS Publication 926 and IRS Publication "A Guide to Information Returns."*

PLEASE SUBMIT WHITE COPY TO COMMUNITY BRIDGES – FAMILY/PROVIDER KEEP YELLOW COPY