

Workgroup Budget Ideas

Proposal: Expansion of In-Home Respite Agency Worker Duties

Expand the scope of duties performed by In-Home Respite Agency workers to include routine skilled services, consistent with those allowed to be provided by licensed day program staff per Title 22, Division 6, Chapter 3, (Adult Day Program Regulations, Article 8, Section 82092), with the exception of tracheostomy care. Compensate in-home respite workers by providing a \$.50/hour wage increase for hours they are providing the increased skill services (and cover the employer's social security, unemployment, workers' compensation costs associated with the wage increase).

Background Information on Program Area:

Many consumers are medically fragile but medically stable and receive respite services from Home Health Agencies (HHA) (Service Code 854) or Licensed Vocational Nurses (LVN) (Service Code 742). Welfare and Institutions Code, Section 4686, now allows in-home respite workers to provide gastrostomy care and feeding of clients, after successful completion of training. This proposal would allow non-licensed employees of In-Home Respite Services Agencies (Service Code 862) to provide additional routine skilled services.

Title 22, Division 6, Chapter 3, (Adult Day Program Regulations, Article 8, Section 82092) specifies that adult day programs may accept or retain medically stable consumers who have certain restricted health conditions, which include use of inhalation-assistive devices, fecal impaction removal, enemas, and suppositories colostomy/ileostomies, and catheters, insulin-dependent diabetes, wounds, Stage 1 and 2 pressure sores, Staph or other serious, communicable infections, as specified, if certain requirements are met. One of these requirements is that program staff complete training provided by a licensed professional sufficient to meet the needs of the client.

Please check applicable box(es):

- Trailer bill language/
- Regulation change
- Waiver amendment/New waiver

Pros:

- Generates savings to the State, by reducing reliance on high cost in-home health professionals.
- Families would benefit from having respite workers who could provide these routine services.

Cons:

- Statutory change needed for exclusion from nursing scope of practice.
- Requires time and training for non-licensed workers to properly learn these skills.

- May increase respite utilization for some families who were previously unable to utilize respite due to a shortage of licensed personnel.

Fiscal :

2009/10 Savings \$4.0 million TF (\$3.0 million GF)

Annual Savings \$4.0 million TF (\$3.0 million GF)

Savings = \$4,019,437 TF (\$3,031,446 GF) Annually

Costs = \$56,800 (\$42,600 GF) Annually for Training

Assumptions

1. 10% reduction in the number of respite hours purchased from Home Health Agencies (\$31.38/hour) and Licensed Vocational Nurses (\$26.05/hour).
2. Corresponding increase in the number of respite hours purchased from In Home Respite Agencies to compensate for the skilled respite worker when they are providing the skilled respite services and the training and administrative costs for the In-Home Respite Service Agencies. DDS proposes a \$0.50/hourly wage increase (limited to hours providing skilled respite services), plus 16.76% for the employer costs due to the wage increase (social security, workers' compensation, unemployment compensation) $16.76\% \times \$0.58 = \0.097 $\$0.50 + \$0.097 = \$0.597$