

ABCs of Respite: *A Consumer Guide for Family Caregivers*



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The ABCs of Respite: A Consumer Guide for Family Caregivers

- *Types of Respite*
- *How do I choose a respite program or provider?*
- *How do I choose an Adult Day Care Program?*
- *How do I find and pay for Respite?*

Before You Get Started

Respite is a service that provides a temporary break between the family caregiver and the care recipient. It is most important for caregivers to plan ahead if possible when they begin their caregiving activities to access intermittent breaks from caregiving. To be most effective you should consider respite services much earlier than you think you will need them. Respite will be most helpful if you use it before you become exhausted, isolated, and overwhelmed by your responsibilities. Respite services should be beneficial, meaningful, and enjoyable to both the caregiver and the care recipient.

- Family caregivers need to have sufficient and regular amounts of respite time. Give careful thought to how you want to spend your respite time. Respite needs to be meaningful and purposeful for caregivers to fulfill their needs and plans, as well as safe and enjoyable for the care recipient.
- Respite is most effective when combined with other services and assistance, but don't wait to take your break. You may also benefit from additional financial support, education, emotional and social support that provide a sense of belonging with others. Before you can seek out those services, respite will give you a chance to step back and recharge.

To assess your own need for respite and to ensure that you are making the most of your respite time, please utilize [Time for Living and Caring: Making Respite Services Work for You!](#)¹ prepared by Dr. Dale Lund, et al, at California State University at San Bernardino. This important guidebook is also available [in Spanish](#).

Sometimes you may need respite in emergencies to deal with a personal health crisis, housing or job loss or other immediate situation that might put the care recipient in harm's way. For children this type of respite may be called a "Crisis Nursery". Emergency or crisis respite may be more difficult to find so familiarizing yourself with providers who might offer emergency respite or even registering in advance with such providers, is important. Both emergency and planned respites are critical resources for caregivers who are caring for an individual with special needs at any age across the lifespan.

In 1997, the first Lifespan Respite Program was established in Oregon. By 2000, similar programs were implemented in Nebraska, Oklahoma, and Wisconsin. Since 2009, the US Administration for Community Living has funded thirty-seven states and the District of Columbia² to implement State Lifespan Respite

¹ For URL addresses of links in blue, see Resource Links at the end of the document.

² Alabama, Arizona, Arkansas, Colorado, Connecticut, Delaware, District of Columbia, Florida, Hawaii, Idaho, Illinois, Iowa, Kansas, Louisiana, Nebraska, Maryland, Massachusetts, Minnesota, Mississippi, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New York, North Carolina, Ohio, Oklahoma, North Dakota, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Texas, Virginia, Washington, and Wisconsin.

Programs, which were designed to help families find respite providers and to help them access respite payment resources. Many, but not all of the originally funded state programs still are available to assist families in navigating the maze of respite programs and funding streams. Your first stop for information about respite providers and ways to pay for the service should be to your state's [Lifespan Respite Program](#), if it has one. [State respite or caregiving coalitions](#) may have this information as well.

If your state does not have a State Lifespan Respite program or State Respite Coalition, first check the [ARCH National Respite Locator](#) to find emergency or planned respite. You can also check with an Area Agency on Aging, or an Aging and Disability Resource Center (ADRC). To find an ADRC or an AAA near you, visit the [Eldercare Locator](#). Private organizations such as Easterseals, the Alzheimer's Association, Family Voices, National Multiple Sclerosis Society, The ALS Association, University Centers on Disabilities (UCEDDs), The Arc of the US, or United Cerebral Palsy may also be able to refer you to respite services in your community.

To find additional family caregiver support and assistance, visit the Family Caregiver Alliance's [Services by State](#). If you are a veteran or the family caregiver of a veteran, call the VA Caregiver Support Line at 1-833-260-3274 or visit the online [VA Caregiver Support Program](#).

Types of Respite

Formal and informal, in-home and out-of-home respite options may exist in your locality. Respite programs may utilize an available bed in a health care facility for families who require extended respite options and whose family member or friend requires skilled care; whereas other respite programs may only offer time-limited (a few hours) services in the family's home. In addition, respite services may be available to families through formal programs that hire and train their staff or may be available to families through informal networks such as volunteer programs, faith-based initiatives, parent cooperatives or cash subsidies from states to purchase respite through relatives and friends.

Respite services are usually offered on a sliding fee schedule or there may be a combination of family fees, state and federal funding, including Medicaid waivers, and/or private insurance. Providers may be paid or unpaid in many of the following models (See *How do I pay for respite?* below).

The following descriptions are examples of local respite program models.

In-Home Models

Many families prefer respite that is provided in the home. There are several advantages to in-home respite:

- The care recipient may be most comfortable in the home setting and does not have to adjust to a different environment.
- The parents/caregivers may be more comfortable if the care recipient does not have to leave the home.
- The home is already equipped for any special needs the child/adult may have.
- The cost is relatively economical (especially if family caregivers hire and train their own providers).
- Transportation barriers for the care recipient are eliminated.

Sometimes in-home care is coordinated by an agency which recruits, provides basic training and keeps a database of all respite providers. Families can be matched with a provider by calling the agency, and they are usually responsible for training, payment and repeat scheduling. If you have a Lifespan Respite Program in your state, they will be able to assist you in finding providers, payment resources and training options. Online services, such as Care.com or Rewarding Work, or state online direct care worker registries, can help you find an independent respite provider that you hire and train yourself.

Listed here are some of the typical in-home respite models.

Model 1: Home-Based Services

In addition to respite providers, you may find and train yourself, home-based respite services may be provided through a public health nursing agency, a social service department, a volunteer association, a private nonprofit agency and/or a private homemaker service or home health agency. A trained and perhaps licensed employee of the agency is available to come into the home and offer respite. Ideally, services should be available twenty-four hours a day, 365 days per year.

Model 2: Sitter-Companion Services

Sitter services may be provided by individuals who are trained in caring for children or adults with special needs. Often this type of service can be a project of a service organization or specialized agency (Camp Fire, Jaycees, Junior League, local Arc or United Cerebral Palsy Associations) that is willing to sponsor training and/or maintain a register of trained providers to link to families in need.

Model 3: Self-Directed Respite

This model is similar to having a friend or relative volunteer to care for a child or adult with special needs. The primary difference is that the person providing care is identified or selected by the family and trained by a respite program or by the families themselves. Providers may be paid or unpaid. If they are paid, it is often through a voucher program offered directly to family caregivers to allow them to locate, hire, train and pay their own providers. This approach may be available for in-home or out-of-home respite.

The state or agency offering the vouchers may employ a fiscal management agency to help with payment and necessary payroll taxes for respite providers. The sponsoring agency may also utilize an approved list of possible agencies or respite providers to provide respite and families may select from this list of approved providers.

Out-of-Home Models

Out-of-home respite provides an opportunity for the care recipients to be outside the home. This may be a particularly attractive option for adolescents who are preparing to leave the family home for a more independent living arrangement, for young adults with disabilities who prefer to be with people their own age, or even older adults with mild to moderate memory loss. Such settings provide an opportunity for them to experience new surroundings, different expectations, peer relationships and even cognitive and emotional stimulation. Families are free to enjoy time in their own home without the constraints of constant care and they can devote more attention to siblings and other family members.

Listed below are some special considerations regarding out-of-home models.

- Transportation may be required and special equipment may need to be moved.
- The individual receiving care may not like the unfamiliar environment or may have difficulty adjusting to the changes.

The services may be offered in a variety of settings more restrictive than the care recipient's home, such as special medical centers or nursing homes.

Model 4: Family Care Homes or Host Family Model

In this model, respite is offered in the provider's home. This could be the home of a staff person from a respite program, a family day care home, a trained volunteer's family home or a licensed foster family home. Offering respite in a provider's home enables an individual to receive services in a more familiar setting. It is recommended that homes used under this model be licensed under state regulations governing foster homes or similar homes used for group care.

Model 5: Respite Center-based Model

Some respite programs contract with existing day care centers to provide respite to children with special needs. Day care centers may be housed in churches, community centers and after school programs. Not all centers are licensed by the state to provide services. Respite centers utilizing church, mosque or synagogue social halls, community centers or senior service centers offer similar services for older adults on a regular, daily or intermittent basis (e.g., one weekend day a month).

Certain service organizations, such as Easterseals, human service agencies, community-based private independent respite providers, or faith-based organizations may offer respite in a center-based setting, employing trained staff and/or volunteers. These settings are usually regulated by the state.

Model 6: Respite in Foster or Group Homes

In some states, foster care regulations and licensing accommodate the development and operation of foster care or group "homes" which are managed by a non-profit or for-profit corporation. In this situation, several children or adolescents who have disabilities are placed outside their family homes and live together in a home-like environment with the help of a trained, rotating staff. These foster or group homes may provide respite care, either as vacancies occur in the homes or as the sole purpose for which the "home" exists. Some adolescents adapt especially well to this situation, enjoying a setting that is like semi-independent living.

Increasingly, group home settings for older individuals are offering long-term residential care, but may also provide respite services. You can check with an Area Agency on Aging (AAA) or an Aging and Disability Resource Center (ADRC) to see if these exist in your community. Contact the [Eldercare Locator](#) to find the AAA or ADRC near you.

Model 7: Crisis Nurseries

Crisis nurseries provide temporary respite for families experiencing challenging life circumstances that place their children at risk for abuse and/or neglect. Created to provide immediate stress relief for parents and caregivers in times of crisis, the care provided by most nurseries can be accessed any time of the day or night and is offered free-of charge. Although the word “nursery” is typically used when referencing facilities for infants or very young children, crisis nurseries may serve children whose ages range from birth to eighteen years.

Crisis nursery programs may provide both home and center-based care. Many nurseries use existing day care centers, private homes that have been licensed (similar to foster care homes), or emergency shelter facilities. Other programs are located in facilities which are specifically designated as a crisis nursery.

Model 8: Residential Facilities

Some long-term residential facilities, particularly those serving persons with developmental disabilities, have a specified number of beds set aside for short-term respite. Some examples of such facilities are community residences such as group homes and supervised apartments, nursing homes and state-owned facilities. Increasingly assisted living programs or nursing homes for older adults are offering respite for overnight, weekend or extended stays.

Model 9: Parent/Family Cooperative Model

Parent and family caregiver cooperatives have been developed in communities, especially rural areas, where respite services are very limited. In this type of model, families of children with disabilities and/or chronic illnesses develop an informal association and “trade” respite services with each other. This model has been used successfully for young veterans with traumatic brain injury or other conditions who are living at home. This exchange program allows families to receive respite on scheduled dates. In most parent or family caregiver cooperatives, fees are not assessed. This model has proven to be especially effective for families whose children or other family members have similar disabilities.

Model 10: Respitality Model

Respitality is an innovative concept for providing respite. It provides a cost-effective partnership between the private sector and respite agencies. During Respitality, participating hotels provide the family with a room, a pleasant dining experience and perhaps entertainment while a local respite program provides respite either in the family's home or in an out-of-home respite situation. The Respitality concept was developed by United Cerebral Palsy of America.

Model 11: Hospital-Based

Facility-based respite occurs primarily in hospitals. It provides a safe setting for children and adults with high care needs. It can be a good alternative for a small community that has a hospital with a typically low census or a hospital with low weekend occupancy. Individuals can receive high quality care while remaining in a familiar setting with familiar people. In larger communities, a hospital provides the sense of security parents and caregivers need when considering respite. Veterans (VA) Medical Centers offer respite for eligible veterans.

Model 12: Camps

Camp has been a form of respite for families for many years. Whether or not a child has a disability, camp can be a positive experience for any child as well as a break for parents/caregivers. For children with disabilities, chronic or terminal illnesses, the chance to participate in either an integrated or an adapted camp can be life-expanding. Many places around the country offer such experiences as either day or overnight camps. Some camp settings are used for adults with disabilities as well through agencies such as Easterseals or United Cerebral Palsy.

Model 13: Adult Day Services

Adult day services have been providing a form of respite for caregivers for decades. Such services have expanded dramatically in the last twenty years as demand has increased, but also as new funding sources, such as Medicaid waivers, became available. Adult day service centers provide a break (respite) to the caregiver while providing health services, therapeutic services and social activities for people with dementia, including Alzheimer's disease, chronic illnesses, traumatic brain injuries, developmental disabilities and other problems that increase their care needs. Some adult day care centers are dementia specific, providing services exclusively to that population. Other centers serve the broader population.

One difference between traditional group and in-home adult respite and adult day services is that adult day services not only provide respite to family caregivers, but also therapeutic care and other care for cognitively and physically impaired older adults.

Generally, although programs vary, participants attend the program for several hours a day to a full day (eight hours) up to five days a week. Most programs do not offer weekend or overnight services although a few may offer half-day services on Saturdays. A few innovative adult day programs are offering full weekend and occasional overnight care.

How do I Choose a Respite Program or Provider?

Hiring on Your Own

Some states require training and licensing for respite providers. If your state does not it is even more important to do a thorough background and qualifications check, especially if you are dealing with individuals who are not associated with companies or agencies and you are hiring the individual on your own. Most company and agency providers will have done background and reference checks for their employees, but do not assume, ask instead. Here is a quick checklist to use when considering a provider:

1. Conduct a telephone screening.
2. Follow up with an in-person Interview.
3. Ask for references and documentation of training or credentials.
4. Assess whether the provider is trained and capable of administering medications, assisting with medical tasks or daily living needs, if necessary. Are they experienced and comfortable in handling the unique needs of your loved one?

5. Ask if they are willing to engage in or offer activities or companion services requested by the person in care
6. If the provider will be driving the care recipient, do they have a valid driver's license?
7. Check references and do a criminal background check or make sure that one was performed recently.
8. Evaluate costs and financing.
9. Write a contract that provides specific details.

The idea is to get to know the prospective provider as well as possible before committing to the relationship. Then you must communicate your expectations in very specific terms. Finally, expectations should be in writing to help assure that both parties understand them and will not need to rely on memory if difficulties arise later.

Using an Agency

If you are selecting a home health or other agency who will send a respite provider into your home or if you are using a center-based program, you should ask the following questions:

1. How are the workers selected and trained?
2. Are background checks performed?
3. Are respite workers licensed and bonded, if required?
4. What tasks can be performed by the respite worker?
5. Can the respite worker administer medications, assist with medical tasks or daily living needs, if necessary?
6. Will the respite provider engage in or offer activities or companion services requested by the person in care?
7. What hours and days are services available?
8. If the provider will be driving the care recipient, do they have a valid driver's license?
9. What is the eligibility process?
10. What are the fees and how are they paid?
11. How are emergencies and problems handled?
12. Are references available?

If you are considering respite services outside the home, request a tour for you and your loved one. When possible, visit the facility or program more than once and observe the engagement between participants and staff. Observe for cleanliness and the types of activities available. Are there opportunities for social engagement or other activities desired by the care recipient?

For more information on respite for specific ages or conditions, see free downloadable [Nine Steps to Respite For Family Caregivers](#). ARCH also provides [National Respite Guidelines](#) that may help you learn what to look for in a high quality respite setting.

A variety of **consumer guides, workbooks and checklists** also are available to help you sort out the myriad of options you may have in your community and, in some instances, offer guidance on training for the respite provider:

Help for Choosing Children's Respite

- A [Practical Guide to Respite for Your Family](#) by Molly Dellinger-Wray and Monica Uhl with the Partnership for People with Disabilities (formerly the Virginia Institute for Developmental Disabilities), a university affiliated program at Virginia Commonwealth University
- [Get Creative About Respite-A Parent's Guide](#) and [What You Need To Know About Me](#) from the Connecticut Lifespan Respite Coalition
- [Finding Caregivers and Respite Providers](#) compiled by the SC Respite Coalition and Family Connection
- [The Respite Notebook](#) developed by the Child Neurology Foundation

Help for Choosing Respite for Adults and Aging

- [Respite Care Guide: Finding What's Best For You](#) - The Alzheimer's Association
- National Adult Day Services Association (NADSA) guidelines and [checklist](#) for adult day service programs to help [choose a center](#). More information about selecting an adult day care center can be found below.

How Do I Choose Adult Day Services?

Family members must do some research to determine whether the adult day services are right for their loved ones. The components of a quality adult day services program should include the following:

- Conducts an individual needs assessment before admission to determine the person's range of abilities and needs;
- Provides an active program that meets the daily social, recreational and rehabilitative needs of the person in care;
- Develops an individualized treatment plan for participants and monitors it regularly, adjusting the plan as necessary;
- Provides referrals to other needed community services;
- Has clear criteria for service and guidelines for termination based on the functional status of the person in care;
- Provides a full range of in-house services which may include personal care, transportation, meals, health screening and monitoring, educational programs, counseling and rehabilitative services;
- Provides a safe, secure environment;

- Uses qualified and well-trained volunteers;
- Adheres to or exceeds existing state and national standards and guidelines.

Contact the National Adult Day Services Association (NADSA) [organization directory](#) and for a [checklist](#) to help you choose the right program. Local Area Agencies on Aging (AAA) can also direct you to adult day care centers in your area. Contact the [Eldercare Locator](#) to find the AAA nearest you. Ultimately, word of mouth is often one of the best ways of finding quality adult day care.

How Do I Find and Pay for Respite?

The first place to look for respite providers or programs is your [State Lifespan Respite Program](#) or [State Respite Coalition](#). Some states maintain their own [state respite registries](#). If your state does not have these resources, the ARCH [National Respite Locator Service](#) (NRLS) can provide you a list of respite programs in your geographic area. You can search the NRLS by the age of the person you are providing care for and by zip code. For additional sources of information, check [these resources](#).

A range of possible private, state and federal funding sources may be available to help you pay for respite. If you have a State Lifespan Respite Program or State Respite Coalition, they may be able to help you pay for respite, link you to free or low cost respite, or link you to funding sources that may be unique to your state.

Possibilities include:

Lifespan Respite Care Programs: Not every state has a Lifespan Respite Care Program, but those that do often provide respite vouchers, grant or stipend programs to help families pay for respite through self-directed programs, especially for those caregivers who do not qualify for other publicly funded programs. They may also support volunteer or faith-based respite services that offer free or low-cost respite care. State Lifespan Respite Care programs often work in collaboration with a State Respite Coalition. Contact your State Lifespan Respite Care Program or State Respite Coalition for more information.

Medicaid Waivers: Generally, every state offers some respite assistance through various Home and Community-based Medicaid Waivers. To find out which waivers that pay for respite are available in your state and information about eligibility, see ARCH's Medicaid Waivers for Respite Support. Each state's eligibility criteria and funding for waivers are different and you should also check with your state's Medicaid office.

Medicaid State Plan: If you live in a state that has adopted the **Section 1915(i) Medicaid State Plan Option for Home and Community-Based Services** and the person you care for qualifies for Medicaid under income guidelines, respite may be covered under your state's Medicaid plan without the need for a waiver. In FY 2020, 13 states (AR, CA, CT, DE, DC, ID, IN, IA, MI, MS, NV, OH, and TX) offered this option.

State Self-Direction Programs: If a person with a disability or chronic condition is eligible for Medicaid, they may qualify for financial assistance that can be used to purchase necessary home and community-based services and supports, including payment to the family caregiver or to pay for respite. Such programs are sometimes known as cash & counseling, consumer or self-directed programs, or other

names selected by the state. Find state Self-Direction Programs on the Applied Self-Direction (asd) website.

Medicare Hospice Benefit: If someone is eligible for Medicare and is in hospice, their caregivers are eligible for respite under the [Medicare Hospice benefit](#).

Medicare Advantage: These plans may now cover non-medical supplemental benefits such as adult day care services and respite. Other optional covered services that benefit the plan holder as well as their family caregivers may include home care, transportation to appointments, meal delivery and home modifications.

National Family Caregiver Support Program: Funding may be available through the National Family Caregiver Support Program, which is administered through your local Area Agency on Aging (AAA), if you are caring for someone over the age of 60 or someone of any age with Alzheimer's or related dementias. Funding for respite may also be available if you are a grandparent or other relative age 55 or older caring for a grandchild or if you are parent or other relative caregiver aged 55 or older caring for an adult child with disabilities. Visit the [Eldercare Locator](#) to contact your AAA about respite funding options.

State Family Caregiver Support or Respite Programs: If your state has a state-funded family caregiver support or respite program, respite funding may be available through these sources. Visit [Services by State](#) at the Family Caregiver Alliance for more information.

Veterans: Veterans eligible for outpatient medical services can also receive non-institutional respite, outpatient geriatric evaluation and management services and therapeutically oriented outpatient day care. Respite care may be provided in a home or other non-institutional setting, such as a community nursing home. Ordinarily respite is limited to no more than 30 days per year. The services can be contracted or provided directly by the staff of the **Veterans Health Administration** (VHA) or by another provider or payor.

A program administered by the Department of Veterans Affairs, the **Program of Comprehensive Assistance to Family Caregivers** is available to eligible Veterans who elect to receive their care in a home setting from a primary family caregiver. For more information, visit the VA Caregiver Support Program or call the VA Caregiver Support Line at 1-855-260-3274. See ARCH's Nine Steps to Respite for Military and Veteran Caregivers for more information and additional resources.

Military Families: Military families should look to **TRICARE's Extended Care Health Option** (ECHO) or the Military **Exceptional Family Member Program** (EFMP), which offers respite care to anyone in the military who is enrolled in the EFMP and meets the criteria. See summary [table of federal respite funding](#) that may be available to military families for respite.

The **Respite Relief** program from the Elizabeth Dole Foundation provides free in-home respite care for military and Veteran caregivers through CareLinx. [Read more and apply.](#)

Funding for Adult Day Services: Original Medicare does not cover adult day service costs but Medicaid can pay all the costs in a licensed day services center with a medical model or an Alzheimer's environment, if the senior qualifies financially. Some centers offer need-based scholarships. Others may

use a sliding fee scale based on income. Private medical insurance policies sometimes cover a portion of day service center costs when registered, licensed medical personnel are involved in the care. Long-term care insurance may also pay for adult day services, depending upon the policy. Dependent care tax credits may be available to the caregiver as well. See also **Medicare Advantage** above.

Private Funding Sources for Caregivers of Persons with Dementia: The following organizations may offer financial assistance for respite:

The **Association for Frontotemporal Degeneration** has a **Comstock Respite Grant Program**. [Read more and apply.](#)

The [HFC In-Home Care Grant Program](#) relieves caregivers, giving them time to rest, recharge and focus on their personal and professional life. Delivered with our partner, Home Instead, HFC's Care Grants provide 3-6 months of free, professional, in-home care.

Contact your [local Alzheimer's Association](#) or [Alzheimer's Foundation](#) members to learn what kind of financial assistance may be available for respite care.

Private Funding Sources for Caregivers of People with Disabilities or Chronic Diseases: Some local or state affiliates of organizations such as [Easterseals](#), [The Arc](#), [National Multiple Sclerosis Society](#), and the [ALS Association](#) may offer respite funding assistance or services on a sliding fee scale.

Faith-based Organizations: Many faith-based organizations, such as [Lutheran Services in America](#), provide a range of home and community-based services, including respite, for disabled people, older adults, and their family caregivers at no or low cost. Check with your local faith organization.

References

ARCH National Respite Resource Center (2014). *Respite for Family Caregivers of Persons with Dementia, including Alzheimer's Disease* [ARCH Factsheet Number 55]. Chapel Hill, NC: Author.

ARCH National Respite Resource Center (2015). *Respite for Caregivers of Veterans*. [ARCH Fact Sheet Number 63]. Chapel Hill, NC: Author.

ARCH National Respite Resource Center (2022). *Adult Day Services and Respite*. [ARCH Fact Sheet]. Durham, NC: Author.

ARCH National Respite Resource Center (2020). *Crisis Nurseries: Respite for Children at Risk of Abuse or Neglect*. [ARCH Fact Sheet]. Chapel Hill, NC: Author.

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ARCH National Respite Network and Resource Center (2021). *Nine Steps to Respite for Family Caregivers*. Durham, NC: Author

Edgar, Maggie and Monica Uhl (2011). *2011 National Respite Guidelines*. Chapel Hill, NC: ARCH National Respite Network and Resource Center.

Musumeci, M. and O'Malley, M. (2019). *Key State Policy Choices about Medicaid Home and Community-based Services*. Washington DC: Kaiser Family Foundation.

Resource Links

Aging and Disability Resource Center (ADRC), part of the No Wrong Door System
<https://nwd.acl.gov/>

ARCH Fact Sheet on Respite for Family Caregivers of Persons with Dementia, including Alzheimer's Disease
<https://archrespite.blackbaudwp.com/library/respites-for-family-caregivers-of-persons-with-dementia-including-alzheimers-disease/>

ARCH Fact Sheet on Respite for Veterans
<https://archrespite.org/library/respites-for-caregivers-of-veterans/>

Eldercare Locator
<https://eldercare.acl.gov/>

Federal Funding and Support Opportunities for Respite

<https://archrespite.org/library/federal-funding-and-support-opportunities-for-respite/>

Summary Table of Federal Programs that Support Respite Care

<https://archrespite.org/library/summary-table-of-federal-programs-that-support-respite-care/>

Federal Programs that Support Respite Services for Veterans, Military Caregivers and Military Families

https://archrespite.org/wp-content/uploads/2022/09/Matrix_FedFunding_Military.pdf

Medicaid Waivers for Respite Support

State-by-State Tables of Medicaid Waiver Information

<https://archrespite.org/resource-library/medicaid-waivers/>

Lifespan Respite Program Contacts

<https://archrespite.org/lifespan-respite/state-respite-coalition-contacts/>

Medicare Hospice Benefit

<https://www.medicare.gov/Pubs/pdf/02154-Medicare-Hospice-Benefits.PDF>

National Adult Day Services Association Organization – Choosing a Center

<http://www.nadsa.org/consumers/choosing-a-center/>

National Respite Guidelines

<https://archrespite.org/library/national-respite-guidelines/>

National Respite Locator (NRLS)

<https://archrespite.org/caregiver-resources/respitelocator/>

Nine Steps to Respite for Family Caregivers (also available in Spanish)

<https://archrespite.org/caregiver-resources/fact-sheets-for-family-caregivers/>

Services by State, Family Caregiver Alliance

<https://caregiver.org/family-care-navigator>

State Respite Coalition Contacts

<https://archrespite.org/lifespan-respite/state-respite-coalition-contacts/>

State Respite Registries

<https://archrespite.org/caregiver-resources/respitelocator/#FindRespiteAccordion-1>

Time for Living and Caring: Making Respite Services Work for You!

<https://archrespite.org/library/time-for-living-and-caring-making-respite-services-work-for-you/>

Spanish Version: Respite Services: Enhancing the Quality of Daily Life for Caregivers and Care Recipients

https://archrespite.org/wp-content/uploads/2022/09/LundRespiteBrochure_Spanish.pdf

VA Caregiver Support Program
<https://www.caregiver.va.gov>

Respite Guides: Help for Choosing Respite Services and Adult Day Programs

- *A Practical Guide to Respite for Your Family* by Molly Dellinger-Wray and Monica Uhl with the Partnership for People with Disabilities (formerly the Virginia Institute for Developmental Disabilities), a university affiliated program at Virginia Commonwealth University
<https://archrespite.org/library/a-practical-guide-to-respite-for-your-family/>
- *Get Creative About Respite - A Parent's Guide*
<https://archrespite.org/library/get-creative-about-respite-a-parents-guide/>
- *Get Creative about Respite - What You Need To Know About Me* from the Connecticut Lifespan Respite Coalition.
<https://archrespite.org/library/what-you-need-to-know-about-me-a-child-adolescent-guide-for-families-and-caregivers/>
- *Finding Caregivers and Respite Providers* compiled by the SC Respite Coalition and Family Connection <https://archrespite.org/library/finding-caregivers-respite-providers/>
- *Respite Care Guide: Finding What's Best For You* - The Alzheimer's Association
<https://archrespite.org/library/respite-care-guide-finding-whats-best-for-you/>
- *The Respite Notebook* developed by the Child Neurology Foundation (updated 2017)
<https://archrespite.org/library/a-respite-care-notebook/>
- National Adult Day Services Association (NADSA) checklist for adult day service programs
<http://www.nadsa.org/wp-content/uploads/2015/08/Site-Visit-Checklist-for-the-web.pdf>
- National Adult Day Services Association (NADSA) – Choose a Center
<http://www.nadsa.org/consumers/choosing-a-center/> and Organization Directory at
<http://www.nadsa.org/locator/>