

ELDER AFFAIRS DEPARTMENT[321]

Notice of Intended Action

Twenty-five interested persons, a governmental subdivision, an agency or association of 25 or more persons may demand an oral presentation hereon as provided in Iowa Code section 17A.4(1)"b."

Notice is also given to the public that the Administrative Rules Review Committee may, on its own motion or on written request by any individual or group, review this proposed action under section 17A.8(6) at a regular or special meeting where the public or interested persons may be heard.

Pursuant to the authority of Iowa Code sections 231.14, 231.23A and 249H.10, the Elder Affairs Department hereby gives Notice of Intended Action to adopt new Chapter 14, "Iowa Family Caregiver Support Program," Iowa Administrative Code.

The proposed new chapter provides support services for family caregivers of persons aged 60 and over and for grandparents or persons who are relative caregivers of children. It also establishes standards for those services and includes a severability rule.

Any interested person may make written suggestions or comments on the proposed chapter on or before January 21, 2009. Such written suggestions or comments should be directed to the Department of Elder Affairs, Jessie M. Parker Building, 510 E. 12th Street, Des Moines, Iowa 50319; E-mailed to lisa.burk@iowa.gov; or faxed to (515)242-3300.

These rules are intended to implement Iowa Code sections 231.23A and 249H.10. The following amendment is proposed.

Adopt the following **new** 321—Chapter 14:

CHAPTER 14
IOWA FAMILY CAREGIVER SUPPORT PROGRAM

321—14.1(231,249H) Purpose. The purpose of the family caregiver support program is to provide support services for family caregivers for older individuals and for grandparents or persons who are relative caregivers of children. The program shall be called the Iowa family caregiver support program.

321—14.2(231,249H) Definitions. Words and phrases used in this chapter are as defined in 321 IAC 1 unless the context indicates otherwise. The following definitions also apply to this chapter:

"Child" means an individual who is not more than 18 years of age or who is an individual with a disability.

"Family caregiver" means an adult family member, 18 years of age or older, or another adult individual selected by the consumer or the consumer's legal representative, who is an informal provider of in-home or community care to an older individual or to a person of any age with Alzheimer's disease, a related disorder, or a neurological or organic brain dysfunction.

"Grandparent" or *"relative caregiver"* means a grandparent or stepgrandparent of a child; or a relative of a child by blood, marriage or adoption who is not a parent and who is 55 years of age or older and:

1. Lives with the child; and
2. Is the primary caregiver of the child because the biological or adoptive parent is unable or unwilling to serve as the primary caregiver of the child; and
3. Has a legal relationship to the child, such as legal custody or guardianship, or is raising the child informally.

"Older individual" means a person 60 years of age or older.

"Respite care" means temporary, substitute support or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers.

"Supplemental services" means services or items that are provided on a limited basis to complement the care provided by the caregiver.

321—14.3(231,249H) Eligibility for services. In order to be eligible for services under this chapter, a family caregiver shall be providing informal in-home or community care to:

1. An older individual; or
2. A person of any age with Alzheimer’s disease, a related disorder, or a neurological or organic brain dysfunction; or
3. A child or children not more than 18 years of age; or
4. An adult child or children aged 19 through 59 with a disability.

321—14.4(231,249H) Priorities for service. In determining eligibility for services for categories as defined in rule 14.3(231,249H) of this chapter, equal priority shall be given to persons in all categories listed below. The area agencies on aging (AAA) will determine if the grandparent component of the program is offered based on the availability of funds.

Family Caregivers	Grandparents and Relative Caregivers
Individuals of any age with Alzheimer’s disease or related disorders.	Children with severe disabilities.
Older individuals with the greatest social and economic needs (with particular attention to low-income individuals) who are providing care to individuals 60 years of age or older.	Older individuals with the greatest social and economic needs (with particular attention to low-income individuals) who are providing care to individuals 60 years of age or older.
	Older individuals providing care to persons with severe disabilities, including children with severe disabilities.

321—14.5(231,249H) Coordination. The AAA and AAA contractors shall coordinate activities with other community agencies and volunteer organizations to provide the types of services described in this chapter.

321—14.6(231,249H) Service categories. Each AAA shall provide all of the following categories of service under this chapter. Services may be provided to individuals or to groups directly, or through contract procedures as specified in 321 IAC 6. The services include:

14.6(1) Information about available services. This may include, but is not limited to, providing to family caregivers newsletters, seminars or other types of group presentations which identify and explain the various services that may be available.

14.6(2) Access to services. This may include, but is not limited to: information, assistance, referral, outreach, and adequate follow-up procedures to ensure that, to the maximum extent practicable, individuals receive the needed services that are available within their communities.

14.6(3) Counseling, training and support groups. This may include, but is not limited to, the following services:

- a. Individual or group support programs that develop or strengthen informal or family support systems.
- b. Formal or informal opportunities for individuals to acquire knowledge, experience or skills in caregiving.
- c. Counseling to enable the caregiver and family to resolve problems or to relieve temporary stresses. Mental health and behavioral health services shall be provided by a mental health professional licensed in this state.

14.6(4) Respite care. This may include, but is not limited to:

- a. In-home respite.
- b. Respite provided by the care recipient attending an adult day service program, senior center or other nonresidential program.

c. Institutional respite provided by placing the recipient in a setting such as a nursing facility for a short period of time.

d. Children attending summer camps or similar short-term care while the children are being cared for by grandparents.

14.6(5) Supplemental services. This may include, but is not limited to:

a. Chore services such as heavy housework, yard work, or sidewalk maintenance.

b. An emergency in-home or wearable response system.

c. Legal assistance.

d. Material aid in the form of goods or services such as food, smoke detectors, eyeglasses, security devices, or other similar aid.

e. Assisted transportation using vehicles which may include provision of assistance, including an escort, to a person with physical or cognitive difficulties.

321—14.7(231,249H) Conflict of interest. Conflict of interest includes any action or failure to act that may be an actual or perceived conflict between official duties and personal interest. Conflict of interest exists when the family caregiver program or any entity or individual:

1. Uses an official position for private gain (other than salary).

2. Gives preferential treatment to any entity or individual or fails to act impartially in the conduct of official duties.

3. Impedes or adversely affects governmental efficiency or economy.

4. Engages in conduct that could adversely affect the confidence of the public in the integrity of the family caregiver program.

5. Creates circumstances where it might reasonably be perceived that an entity's or individual's judgment could be influenced by the nature of the circumstances.

6. Uses any property of the person giving care or the person receiving care for personal use.

7. Provides another direct service to a consumer assigned to the family caregiver program.

8. The family caregiver program disproportionately chooses one provider over another provider or indicates it may be attempting to influence the selection of a specific provider.

321—14.8(231,249H) Confidentiality. Except by written consent of the consumer or the consumer's legal representative, the use or disclosure by any person of any information concerning a consumer for any purpose not directly connected with the administration of the responsibilities of the department, AAA, or authorized service provider is prohibited.

321—14.9(231,249H) Quality standards.

14.9(1) AAA staff requirements. Each AAA shall:

a. Evaluate the full-time equivalent for its family caregiver program, considering current funding levels among other factors, and shall staff the program to best meet the needs of the service delivery area.

b. Employ or contract for a designated family caregiver specialist with the following demonstrated competencies:

(1) A bachelor's degree in the human services field or an associate's degree in the human services field and two years of employment in information and referral positions, which may be substituted for a bachelor's degree. Family caregiver specialists employed prior to [insert the effective date of this chapter] are exempt from this requirement.

(2) If the applicant or prospective contractor does not have the certification required in paragraph "a" of subrule 14.9(2), the applicant shall have three years of prior employment in information and referral positions.

14.9(2) Certification.

a. A family caregiver specialist shall possess and maintain a current Certification for Information and Referral (I&R) Specialists in Aging (CIRS-A) from the Alliance of Information and Referral Systems at the time of employment or contract; or

b. If employed on or prior to [insert the effective date of this chapter], a family caregiver specialist shall obtain the certification required in paragraph “a” of this subrule within six months of [insert the effective date of this chapter] or upon meeting eligibility requirements for certification which include:

- (1) At least one year of employment in I&R for specialists with a bachelor’s or higher degree; or
- (2) Two years of employment in I&R for specialists with an associate/community college degree;

or

- (3) Three years of employment in I&R for specialists with a high school diploma or GED.

c. Part-time staff and volunteers shall possess and maintain a CIRS-A.

14.9(3) Training. The family caregiver specialist shall attend during the term of employment annual and other family caregiver specialist training when provided by the department.

14.9(4) Local contract monitoring. The AAA shall utilize a system to monitor all service providers’ performance under the contract and promptly ensure that any problems that arise are corrected. All contracts shall be created and monitored under the provisions of 321 IAC 6.11(231) or 321 IAC 5.15(231), as applicable.

a. For the purposes of this subrule, monitoring means any planned, ongoing, or periodic activity that measures outcomes and ensures contractor compliance with the terms and conditions of the contract and customer satisfaction and also ensures that the contractor meets the needs of the caregiver.

b. The AAA shall conduct caregiver evaluations to determine the quality of services and goods provided, including but not limited to customer satisfaction surveys, inspections, and evaluation of goods and services provided.

c. Monitoring activities shall include:

(1) Periodic contact, including on-site visits, to maintain a continuous dialogue with the contractor and to review progress on a regular basis.

(2) Requiring the contractor to submit progress reports or other appropriate data based on predefined contract criteria. These reports shall include documentation indicating where and how moneys received were expended and results of caregiver performance evaluations and customer satisfaction surveys.

(3) Reviewing the contractor’s reports and verifying the services provided to determine if those services adhere to the contract. Substandard performance shall be identified and addressed appropriately, up to and including cancellation of the contract. Any corrective action shall be completed as soon as possible to maintain quality service to the consumer.

(4) Comparing contract billings with the terms contained in the contract to ensure that costs or payments are within contract parameters.

321—14.10(231,249H) Reports. The AAA shall record all services and submit all fiscal and performance reports for this program to the department in accordance with current instructions issued by the department.

321—14.11(231,249H) Failure to meet program requirements; waiver of standards. When an AAA fails to meet the requirements of this chapter, the department shall follow procedures outlined in 321 IAC 4. Provisions of this chapter may be waived pursuant to 321 IAC 11.

321—14.12(231,249H) Severability. Should any rule, subrule, paragraph, phrase, sentence or clause of this chapter be declared invalid or unconstitutional for any reason, the remainder of this chapter shall not be affected thereby.

These rules are intended to implement Iowa Code chapters 231 and 249H.