

Overnight Respite Pilot at Adult Day Care Facilities Perceived as Favorable, but Lacked Objective Measures of Success

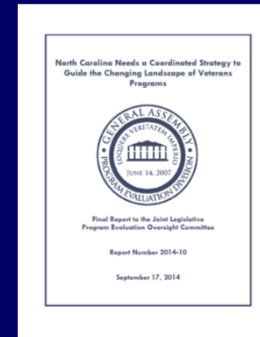
A presentation to the
Joint Legislative Program Evaluation Oversight Committee

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Handouts

- A copy of the report
- A copy of the presentation slides



Evaluation Team

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Study Direction

- Session Law 2011-104 directed
 - DHHS to conduct a pilot of overnight respite in adult day care facilities
 - Program Evaluation Division to evaluate the pilot

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Summary: Findings

- Although the pilot is perceived as successful, only one facility consistently provided overnight respite
- The pilot's design and implementation only met 2 of 10 recommended components of a well-designed pilot
- Pilot effectiveness was hindered by statutory funding restrictions
- Most stakeholders say there is a need for overnight respite, but none have empirical data

Summary: Recommendations

- The General Assembly should
 - Allow the pilot program to expire, thereby ceasing overnight respite in adult day care facilities
 - Require future pilot projects to adhere to standards established by the UNC School of Government

Background



Respite Services

- Respite is a temporary break for caregivers from providing care, which allows to keep their loved ones at home longer
- Overnight respite is providing these services during nighttime hours



Adult Day Care Facilities Provide Daytime Respite

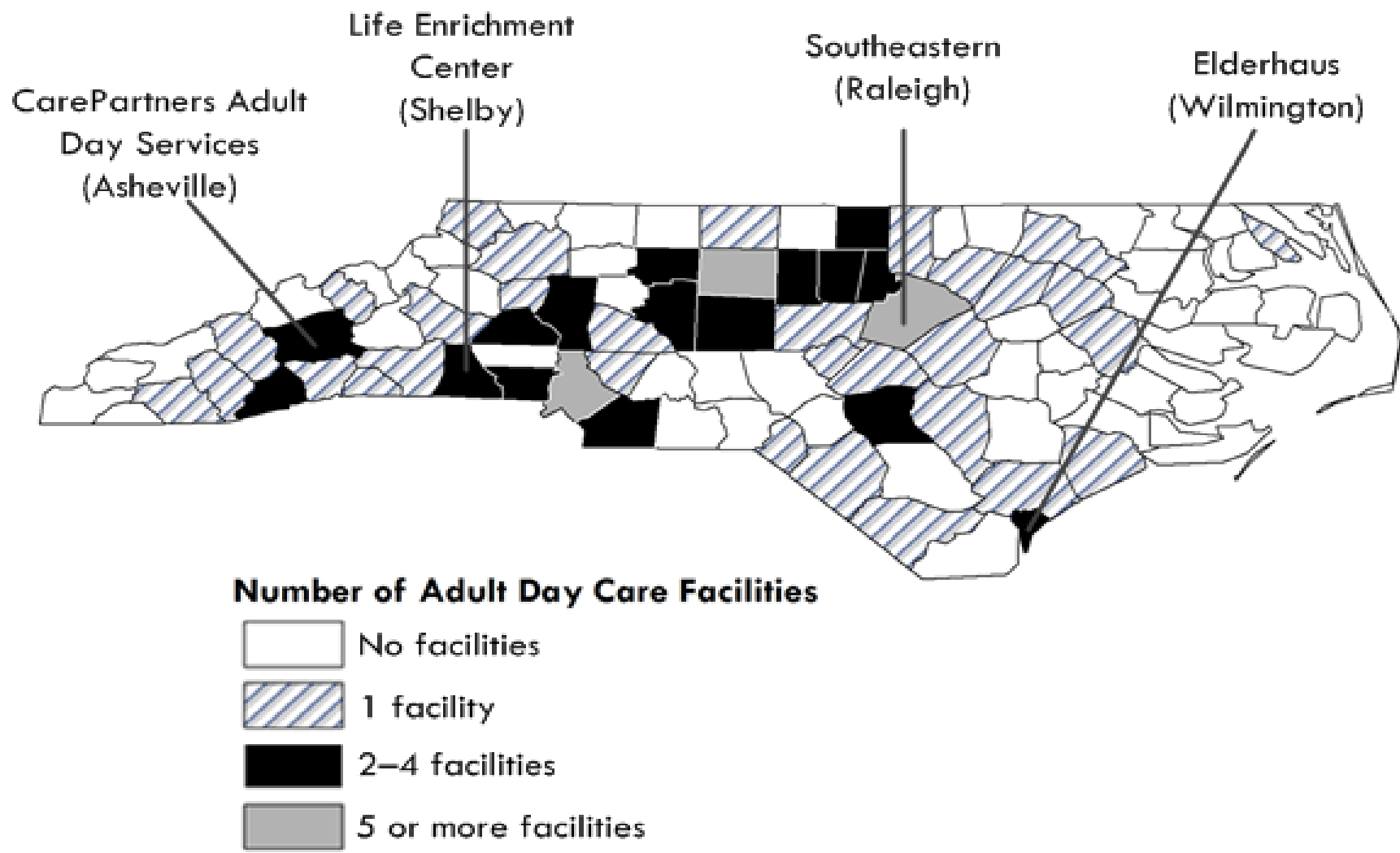
- Adult day care facilities offer a range of social and health services during daytime hours
- As of May 2014, the Division of Aging and Adult Services (DAAS) has certified 100 adult day care programs across the state with 4,827 client slots



Overnight Respite Pilot

- S.L. 2011-104 authorized DHHS to pilot overnight respite in four adult day care facilities
 - Prohibited state and Medicaid funding of the service
 - Limited stays to less than 14 consecutive days and a maximum of 60 days per year
 - Authorized four pilot facilities, each with a maximum of six beds

DHHS's Division of Health Service Regulation Selected and Monitored the Four Pilot Facilities



Findings



Finding 1.

Participants, caregivers, pilot facilities, and DHHS perceive the pilot to be successful, but only one pilot facility has consistently provided overnight respite

Only One Pilot Facility Has Consistently Provided Overnight Respite Services

Pilot Facility	Months Offering Overnight Service	Number of Overnight Clients	Currently Providing Overnight Service
CarePartners (Asheville)	16 months	39 clients	Yes
Elderhaus (Wilmington)	10 months	25 clients	No
Southeastern (Raleigh)	1 month	2 clients	Yes
Life Enrichment (Shelby)	None	None	No



Perceived Success of Overnight Respite Pilot

- Care Recipients: Nearly 80% of care recipients say they were satisfied with overnight respite services
- Caregivers: More than 95% of caregivers say they were satisfied with overnight respite services

Perceived Success of Overnight Respite Pilot

- The pilot facilities and DHHS view the pilot as successful because it offers caregivers an additional option for respite care
- DHHS officials also stated the pilot's success has been facility-specific

Finding 2.

The legislative mandate for the overnight respite pilot and DHHS's implementation of the pilot only met two of the ten recommended components of a well-designed pilot program

Only 2 of 10 Elements of a Well-Designed Pilot Were Implemented

Elements of a Well-Designed Pilot Program	Status
1. Problem statement	●
2. Conceptual framework of how the pilot addresses the problem	◐
3. Budget estimating the State's cost for the pilot program	●
4. Fiscal analysis estimating the State's full-scale program cost	◐
5. Performance criteria assessing the program's success	○
6. Examination of alternative solutions	○
7. Study design allowing for meaningful evaluation	○
8. Study design reducing threats to validity	○
9. Substantial time for observing program effects	◐
10. Substantial units for observing program effects	◐
● = Fully implemented; ◐ = Partially implemented; ○ = Not implemented	

Implications of the Overnight Respite Pilot's Implementation

- Because only 2 of 10 components were implemented:
 - Pilot facilities could not compare their performance or revise their own practices to increase their performance
 - The General Assembly lacks information on the demand for overnight respite, alternative solutions to the service in adult day care facilities, and the fiscal effects of continuing or expanding the pilot
 - Caregivers may no longer have the option of adult day care facilities providing overnight respite

Finding 3.

The legislative prohibition against using state or Medicaid funding for overnight respite in adult day care facilities hindered the effectiveness of the pilot

Funding of Respite Care in NC Adult Day Care Facilities

- S.L. 2011-104 prohibited state and Medicaid funds for overnight respite at adult day care facilities
- Adult day care facilities can receive other state and Medicaid funding for non-overnight services
- State and Medicaid funds can be used to pay for overnight services at other facility types

Estimated Costs If Medicaid Had Been an Allowable Source of Funding for the Pilot

- PED estimated the State's share of Medicaid costs
 - Four pilot facilities = \$2,272 to \$6,720 per year
 - All adult day care facilities interested in providing the service = \$69,300 to \$168,000 per year

Stakeholders Believe Funding Prohibitions Hindered the Pilot

- DHHS stated funding restrictions were a barrier and demand would have been clearer with outside funding
- Pilot facility staff stated funding restrictions were a barrier and utilization would have been higher with outside funding
- Nearly a quarter (24%) of caregivers did not use overnight respite because of cost

Finding 4.

Although organizations affiliated with respite care have anecdotal evidence supporting the need for overnight respite services, none have empirical data on its demand

Most Stakeholders Support This Option, But None Have Empirical Data

- All stakeholder organizations that offer respite or represent affected populations stated there is a need for overnight respite at adult day care facilities
- Two stakeholder organizations oppose the option in adult day care facilities
 - North Carolina Assisted Living Association
 - North Carolina Association of Long Term Care Facilities

PED Attempted to Measure Demand

- Most caregivers use overnight respite at adult day care facilities for their own rest, say it has reduced their stress, and are likely to use it again in the next year
- Non-pilot adult day care facilities estimate 17% of their current clients would use overnight respite, and of those, each would use the service about 20 nights a year

Recommendations



Recommendation 1.

The General Assembly should allow the pilot program authorizing overnight respite services in adult day care facilities to expire on June 1, 2015, as set out by its establishing legislation

Basis for Recommendation 1

- Limited data on the success of the pilot because of its implementation
- Limited information to establish demand for the service
- Limited state financial resources

Recommendation 2.

The General Assembly should require state agencies and institutions initiating pilot projects at the direction of the General Assembly to adhere to standards established by UNC-Chapel Hill's School of Government

Summary: Findings

- Although only one pilot facility consistently provided overnight respite, stakeholders perceive the pilot as successful, but none have empirical data on the demand for the service
- The effectiveness of the pilot was hindered by its design, implementation, and funding restrictions

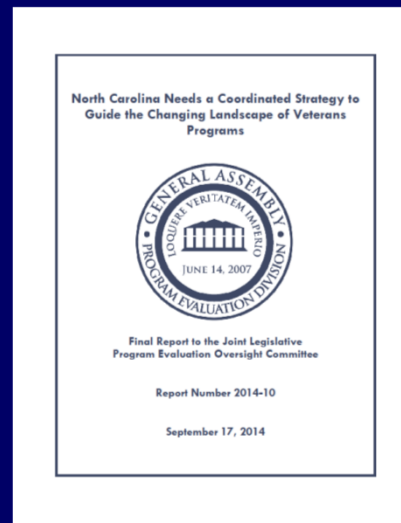
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Legislative Options

- Accept the report
- Refer it to any appropriate committees
- Instruct staff to draft legislation based on any of the report's recommendations

**Report available online at
www.ncleg.net/PED/Reports/reports.html**



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