**MINOR CAREGIVER OPTIONS DISCUSSION GUIDE AND DECISION ROADMAP**

**INSTRUCTIONAL GUIDE**

This is a tool designed to support discussion regarding, and selection of, caregiver options for a child that, primarily, takes into consideration the best interest of the member including supporting their self-determination to the maximum extent possible. The tool highlights circumstances, discussion points and considerations to facilitate informed decision making without evaluating parenting or familial choices and dynamics. Throughout the tool, there will be opportunities to capture discussion points to inform the selection of a caregiver option(s).

The ALTCS Case Managers are expected to follow the workflow of the guide to support facilitation of the discussion ensuring all caregiver options are explored understanding that no one option(s) should be assumed appropriate by the ALTCS Case Manager nor an automatic decision made by the member/parent/Health Care Decision Maker (HCDM) without undertaking the facilitated process to ensure consistent application for everyone.

This discussion should only take place after the member’s needs have been identified and assessed through the Person-Centered Service Planning (PCSP) process (refer to AMPM Exhibit 1620-10), the HCBS Members Needs Tool has been completed (refer to AMPM Exhibit 1620-17), and the service need and service hours have been identified.

This discussion must occur no less than on an annual basis and when the following circumstances apply:

1. After an initial service assessment for newly eligible ALTCS members, or
2. When a member experiences a change in conditions that necessitates either a reduction or increase in assessed and authorized services and hours.

The tool may also be considered and used any time it may be necessary to consider caregiver options as deemed appropriate to support the needs and preferences of the member. For example, action items may include intermediate steps aimed at both temporary and/or permanent plans for caregiver options.

This discussion shall involve anyone the member/parent/ HCDM chooses (e.g., family members, teachers, family friends). It is highly recommended to include any current service provider agencies serving the member in the discussion as directed by the member/parent/HCDM.

The completed form which documents the discussion and decisions should be signed by the parent/HCDM and ALTCS Case Manager. This form is considered a supplemental document of the PCSP (refer to AMPM Exhibit 1620-10).

**PHASE ONE: CAREGIVER OPTIONS**

This phase of the discussion is focused on identifying what considerations and attempts have already been made to find caregivers and what opportunities remain to be explored. It is important to keep in mind that there may be a need to explore multiple caregiver options to support the member’s care needs and preferences.

Discuss each of the following caregiver options using the discussion prompts and summarize the discussion. If there are opportunities still to be explored, identify action steps that should be taken.

**PHASE TWO: MEMBER-SPECIFIC CONSIDERATIONS**

This phase of the discussion is focused on member specific considerations and how those support and inform a decision on the caregiver options that are in the best interest of the member.

Discuss each of the caregiver options that remain considerations and possibilities (from Phase One) using the discussion prompts and summarize the discussion.

**PHASE THREE: PARENT AS PAID CAREGIVER SERVICE MODEL OPTION**

This phase of the discussion is focused on specific considerations when the parent as paid caregiver option is being considered as the one (or one of the) caregiver options. In the context of the Parents as Paid Caregivers Service Model, a parent has formal and/or legal custody of a minor child. This includes biological/adoptive parents and guardians of minor children.

Discuss specific considerations for the parent as paid caregiver service model option using the discussion prompts and summarize the discussion.

**PHASE FOUR: REVISITING OPTIONS**

This phase of the discussion is to be utilized when caregiver options have previously been decided upon and implemented. During the annual review, start the discussion with this section. This section may also be used for instances when the caregiver options need to be revisited because a member experiences a change in conditions that necessitates either a reduction or increase in assessed and authorized services and hours.

Discuss each of the considerations using the prompts and summarize the discussion.

**PHASE FIVE: DECISION(S)**

This phase of the discussion is to finalize and document the decision(s) on which caregiver options are going to be pursued.

Review all of the discussion summary points to help inform a decision(s) on the caregiver options. Check the caregiver options selected and summarize how the option(s) selected are in the interest of the member and support their self-determination to the maximum extent possible. The discussion prompts and summary from Phase Two should be used to support the decision summary.

The action items should be carried over and documented in the PCSP action plan.

If the parent caregiver option is selected, the “Parents as Paid Caregivers Service Model Acknowledgement of Understanding” must be reviewed and signed (refer to AMPM Exhibit 1620-22). The signed forms should be included as an exhibit to the PCSP. The service delivery model shall also be noted in the PCSP.

**MINOR CAREGIVER OPTIONS DISCUSSION GUIDE AND DECISION ROADMAP**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| ***MEMBER NAME*** |  | ***AHCCCS ID #*** |

**CAREGIVER OPTIONS: INITIAL CONSIDERATIONS**

Non-Family:

1. Caregiver recruited by agency, or
2. Caregiver recruited by family.

Family Member (Non-Parent):

1. Caregiver **NOT living** with the member, or
2. Caregiver **living** with the member.

Discussion Prompts:

1. For each one of the caregiver options above, have there been attempts to recruit or secure caregivers for the child? Why or why not?
2. If there were attempts, what were the outcomes or barriers?
3. If some of the options have not been explored, what opportunities exist to attempt to recruit caregivers?

|  |  |
| --- | --- |
| Discussion Summary: |  |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
|  |  |
|  |
|  |
|  |

**PHASE TWO: MEMBER-SPECIFIC CONSIDERATIONS**

Discussion Prompts:

1. How do the option(s) support fostering and furthering the member’s:
	1. Self-determination and independence?
	2. Integration in the community through activities and relationship building?
2. Which option is preferable for the member based on their own input?  **Note:** For transition-aged youth members (ages 16-17), the ALTCS Case Manager should hold a separate conversation with the member to get their direct input. The member can choose to include another person to support them in the conversation that is not a parent or provider or even decline to have a separate conversation. The member or the ALTCS Case Manager (whichever is preferred by the member) will share the member’s input with the parent/HCDM, and others invited to participate in the discussion, so the member’s input is prioritized to help inform a decision about caregiver options(s).
3. What option(s) maximize sustainability and continuity of care?
4. What option(s) are more compatible with the larger family unit and dynamics when considering the family culture, dynamics, time spent together, etc.?

|  |  |
| --- | --- |
| Discussion Summary: |  |
|  |
|  |
|  |
|  |

**PHASE THREE: PARENT AS PAID CAREGIVER SERVICE MODEL OPTION**

Discussion Prompts:

1. Is the parent willing to provide paid care?
2. What are some of the benefits and/or consequences of this service model for the child and family (e.g. socialization, health, recreation, etc.)?
3. Are there any hours of the day the parent(s) are unavailable when the needs assessment highlights the member needs care? For example, any personal or familial responsibilities that might hinder the quality or continuity of the member’s care?
4. Are there any physical limitations that would present challenges to the specific type of care the child needs?
5. Does the member have more than 40 hours per week of care identified in the PCSP (in total) for attendant care and habilitation? **Note:** If that is the case, the other caregiver options have to be explored to ensure the member gets all the care that is authorized and medically necessary.
6. Has the parent reviewed the “Acknowledgement of Understanding” form? **Note:** It is important for the parent(s) to review the form and get any of their questions answered. Some requirements may change their willingness or ability to provide paid care. If the parent needs to review the form, identify that in the action steps and give the parent(s) an opportunity to review before continuing with the discussion. The discussion can be resumed once the action item(s) have been completed.

|  |  |
| --- | --- |
| Discussion Summary: |  |
|  |
|  |
|  |
|  |

|  |  |
| --- | --- |
|  |  |
|  |
|  |
|  |
|  |

**PHASE FOUR: REVISITING OPTIONS**

***NOTE: Only complete this section when caregiver options have previously been decided upon and implemented***

Discussion Prompts:

1. Reminder of all caregiver options:
2. Non-Family:
	1. Caregiver recruited by agency, or
	2. Caregiver recruited by family.
3. Family Member:
	1. Caregiver **NOT living** with the member,
	2. Caregiver **living** with the member, or
	3. Parent caregiver.
4. Revisit the caregiver options currently being utilized to serve the member:
5. How do the option(s) support fostering and furthering the member’s:
	* 1. Self-determination and independence?
		2. Integration in the community through activities and relationship building?
6. Which option is preferable to the member based on their own input?  **Note:** For transition-aged youth members (ages 16-17), the ALTCS Case Manager should hold a separate conversation with the member to get their direct input. The member can choose to include another person to support them in the conversation that is not a parent or provider or even decline to have a separate conversation. The member or the ALTCS Case Manager (whichever is preferred by the member) will share the member’s input with the parent/HCDM, and others invited to participate in the discussion, so the member’s input is prioritized to help inform a decision about caregiver options(s).
7. What option(s) maximize sustainability and continuity of care?
8. What option(s) are more compatible with the larger family unit and dynamics when considering the family culture, dynamics, time spent together, etc.?
9. What are some of the benefits and/or consequences of this service model for the child and family (e.g. socialization, health, recreation, etc.)?

|  |  |
| --- | --- |
| Discussion Summary: |  |
|  |
|  |
|  |
|  |

**PHASE FIVE: DECISION(S)**

**Caregiver Options: Select all that apply:**

Non-Family:

[ ] Caregiver recruited by agency, or

[ ] Caregiver recruited by family.

Family Member:

[ ] Non-Parent caregiver **NOT living** with the member,

[ ] Non-Parent caregiver **living** with the member, or

[ ] Parent caregiver.

|  |  |
| --- | --- |
| Discussion Summary: |  |
|  |
|  |
|  |
|  |

**Action Plan for Follow Up**

|  |  |  |
| --- | --- | --- |
| **Action To Be Taken** | **Person Responsible** | **Due Date *(Target)*** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| *SIGNATURE OF PARENT/HCDM* |  | *DATE* |
|  |  |  |
| *SIGNATURE OF CASE MANAGER* |  | *DATE* |
|  |  |  |