



California's protection and advocacy system
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#4: Fact Sheet on California's Budget Cuts to Developmental Disability Services & Programs - July 15, 2009

Expanded Scope of Duties for In-Home Respite Workers Performing Incidental Medical Services¹

These changes are included in the Budget Trailer Bill. They will be effective when the Budget is approved, unless the language is changed by the Legislature.

How the Law Changed

The changes increase the number of incidental medical services that an in-home respite worker can provide. Current law allows an in-home respite worker who is not a licensed health care professional to provide gastrostomy feeding and care for consumers who are in a stable condition. Current law also requires that the respite worker be trained by a medical professional.

The new services that may be provided by an in-home respite worker include:

- Colostomy and ileostomy: changing bags and cleaning stoma
- Urinary catheter: emptying & changing bags and care of catheter site

¹ The changes are part of the Budget Trailer Bill AB x3 45. You may find the law at: http://www.leginfo.ca.gov/pub/09-10/bill/asm/ab_0001-0050/abx3_45_bill_20090628_amended_asm_v98.html. The changes affecting Expanded Scope of Duties for In-Home Respite Workers Performing Incidental Medical Services are found in Welfare & Institutions Code, Section 4686.

- Gastrostomy: feeding, hydration, cleaning stoma, and adding medication per physician's or nurse practitioner's orders.

In order to provide these services, respite workers must:

- Be employed by an agency that is vendored by a regional center to provide in-home respite services;
- Receive training from a licensed health care professional;
- Provide proof of completion of a first aid course and a cardiopulmonary resuscitation course with the preceding year.

The new law continues to require the consumer's treating physician to tell the regional center that the consumer's condition is stable.

The respite agency has duties under the new law and should refer directly to the legislation to determine those duties.

What Should You Do If the Regional Center Wants to Change Your Services?

If your regional center wants to change services it must hold an IPP (Individual Program Plan) meeting.² At the meeting, the IPP team must discuss whether or not the change applies to you. If you do not agree with the change, you may want to explain how your condition is not stable, or how you need someone with additional training to provide the service.

If after the IPP meeting, you do not agree with the decision to change your service, the regional center must give you a written notice of its decision. The notice must be given 30 days before the change begins.³

If you want to appeal the decision and continue to receive these services, you must request a fair hearing within 30 days.⁴

- If you request the hearing within 10 days of receiving the notice, your services will be continued while the hearing process is conducted⁵; and
- If you request the hearing after 10 days but still before the 30 day limit, you will receive the fair hearing but your services may be

² See Welfare & Institutions Code Section 4646.4 (a) (b)

³ See Welfare & Institutions Code Section 4710

⁴ See Welfare & Institutions Code Section 4710.5 (a)

⁵ See Welfare & Institutions Code Section 4715

discontinued until the outcome of the hearing is known.⁶

For more important information on how to appeal decisions by the regional center, read our fact sheet, Due Process and Hearing Rights..

⁶ See Welfare & Institutions Code Section 4710.5 (a)