



# CAREGIVERS SUPPORT FOCUS GROUPS

## Non-Governmental Organizations (NGO)

**The Paperwork Reduction Act of 1995:** This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995. Accordingly, we may not conduct or sponsor, and you are not required to respond to, a collection of information unless it displays a valid OMB number. VA anticipates that the time expended by all individuals who complete the Focus Group session will average 10 minutes. Public Law 111-163, Caregivers and Veterans Omnibus Health Services Act of 2010 requires the Department of Veterans Affairs (VA) to consult with Veterans, family caregivers, Veteran Service Organizations and Non-Governmental Organizations that specialize in the provision of assistance to individuals with disabilities and their family caregivers while developing the implementation plan and report. The results of this Focus Group will lead to improvements in the quality of service delivery by helping to shape the direction and focus of specific programs and services. Disclosure of information involves release of statistical data and other non-identifying data for the improvement of services within the VA healthcare system and associated administrative purposes. Submission of this form is voluntary and failure to respond will have no impact on benefits to which you may be entitled.



## Non-Governmental Organization (NGO) Focus Groups

### ***FOCUS GROUP MEETINGS – August 2010***

---

#### **Caregivers and Veterans Omnibus Health Services Act of 2010 Focus Group Guide**

##### **I. Introductions and Ground Rules**

###### **A. Focus Group Moderator(s)**

###### **B. Greeting:**

**Hi everyone. My name is \_\_\_\_\_, and I'm with the Gallup Organization. I want to thank each of you for participating in this session today. The Department of Veterans Affairs (VA) has asked us to speak with you today to talk about a new law that was enacted in May 2010 to provide support, services, and programs for caregivers of Veterans. Our goal for today is to get your input on how the VA can most effectively implement the law in order to help Veterans and their caregivers.**

###### **C. Ground rules: (post in room)**

**Confidentiality – what is said in the group stays in the group**

**Respect one another**

**Be honest and open**

**Be non-judgmental**

**Speak one at a time**

**Inform of audio taping, observers if applicable**

###### **D. Introduction of focus group participants**

- First Name, role at organization, mission of your organization**

- 1. Before today, were you aware of the new law that passed in May 2010 called the Caregivers and Veterans Omnibus Health Services Act of 2010? If so, what do you know about it?**

##### **II. Law**

- A. I'm going to read a summary of the law to you to get us started, and then we will get your ideas on how to actually implement some of the parts of the law. Feel free to jot down some notes on a piece of paper as I read it to you. Here is the description of the law.**

**On May 5, 2010 the President of the United States signed Public Law (P.L.) 111-163, the Caregivers and Veterans Omnibus Health Services Act of 2010.**

**Under the new law, primary caregivers of Veterans seriously injured in the line of duty on or after September 11, 2001 may be eligible to receive a stipend, access to health care coverage, mental health services, travel, lodging, and respite care. In addition, caregivers may receive training and support.**

- 1. Based on what I've just read to you, how would you summarize what this law will do for caregivers and Veterans, in your own words?**
- 2. After hearing this description, what questions or concerns do you have about it? (Moderator is not to answer the questions, just to gather what the questions are).**
- 3. How will this law impact your organization and the services you provide?**

### **III. Eligibility**

**Let's focus on specific parts of the law so that we can start to get your ideas on how to implement it. First, the first part of the law on the family caregiver program states that an eligible Veteran is any individual who 1) is a Veteran or member of the armed forces undergoing medical discharge, 2) has a serious injury incurred or aggravated in the line of duty after 9/11/01, and 3) is in need of personal care services because of, a) an inability to perform one or more activities of daily living, including things like bathing, eating, dressing and so on, b) because of a need for supervision or protection based on symptoms or residuals of neurological or other impairment or injury, or c) such other matters as the VA Secretary considers appropriate.**

- i. When you hear these criteria for eligibility that are written in the law – what do they mean to you?**
  - i. What process should be used to determine eligibility?**

### **IV. Caregiver training**

**Part of the law states that caregivers will receive training and ongoing technical support in order to provide personal care services to the Veteran.**

- 1. What kind of training do you think caregivers need?**
- 2. What topics should be included in this training?**
- 3. What would be the best way to deliver this training? (PROBE: In person, online, etc.)**
- 4. What do you think should happen if the training reveals that this person is not fit to be a caregiver?**
- 5. Thinking about ongoing technical support for caregivers, what does this mean to you?**
  - i. What kinds of ongoing support do you think caregivers should have access to? (PROBE)**
  - ii. What are the different ways that ongoing technical support should be provided (LISTEN FOR: By phone, online, email, in person visits?)**

#### **V. Other services provided by the new law**

- 6. The law also states that the primary caregivers of eligible Veterans can receive a monthly stipend, health care coverage if they are not entitled to care or services under another health plan contract, mental health services, and in-home respite care. What are your reactions to these benefits?**
  - a. The law states that, to the extent practicable, the stipend amount should be not less than the monthly amount a commercial home health care entity would pay an individual in that geographic area to provide equivalent personal care services to the eligible Veteran. How does that sound to you?**
  - b. Let's talk about whether the caregiver should receive a stipend when the Veteran is hospitalized or not at home for a period of time because of health reasons. At what point should benefits stop if the Veteran is going to be in the hospital or rehab care for an extended period?**
  - c. If there are other reasons why the primary caregiver is no longer providing care, at what point should their stipend stop?**
  - d. What about mental health services? What kind of services should be included? How do you think those should be offered to caregivers?**

#### **VI. Application for the benefits**

- 7. Let's take a step back for a moment and think about the process of applying for this program. The law states that an eligible Veteran and a**

family member seeking to participate in the caregiver program shall jointly submit an application.

- a. What are your reactions to this?
- b. Let's brainstorm how this application process should be implemented.
  - i. First, do you think the application forms should be available just on paper, or also online? (PROBE to find out if they think that caregivers/Veterans have a computer, go online, know how to access and fill out forms online)
  - ii. What kinds of questions do you think should be covered on the application? Are there any special circumstances that should be addressed on the application?
  - iii. What are your thoughts about what the overall length of the application form should be?
  - iv. How should the Veteran and caregiver be notified if they qualify, or do not qualify, for the program?

## VII. Monitoring

8. The law states that the well-being of each Veteran receiving personal care services under the family caregiver program shall be monitored.
  - a. What are your thoughts about how often the monitoring should occur?
  - b. How should this monitoring program be designed?
    - i. Who should do the monitoring?
    - ii. How should the monitoring be done?
    - iii. What should the monitor be looking for? (PROBE: What do you think is meant by monitoring the "well-being" of the Veteran?)
  - c. If it is found that the caregiver is not effectively caring for the Veteran, what should be done?
  - d. If the Veteran or the caregiver disagrees with the monitor's assessment, what recourse, if any, should the Veteran or primary caregiver have?

## VIII. Revocation

9. Suppose it is no longer in the best interest of the Veteran to be receiving care from the designated primary caregiver or other approved caregiver. What are some situations you can think of in which a caregiver should no longer provide care for the Veteran?

- a. If the caregiver is determined not suitable to provide care, what do you think should happen? How should the Veteran be cared for during this transition?
- b. What if the Veteran or the caregiver disagrees with this decision? What should they be entitled to, if anything, in terms of appealing the decision?

## **IX. Outreach**

**10. What do you think is the best way for VA to spread the word to Veterans and their caregivers about this new law and the programs and services it offers?**

- a. How would you like to get information about this?
- b. What concerns do you think Veterans or caregivers might have about applying for this benefit?

**11. What one recommendation do you have for VA that you think they absolutely must do to make sure this law is implemented in the best way possible for Veterans and primary caregivers?**

**Thank you so much for your assistance with these important considerations. We greatly appreciate your help.**