Practical Ideas for Using NFCSP & AFCSP Funds

Purpose: Help counties and Tribal programs connect eligible family caregivers with meaningful direct services, use available funds responsibly, and document each expenditure under the appropriate program and PeerPlace service definition. This is an idea bank, not a blanket authorization to purchase every item listed.

Start Here: Choosing the Appropriate Funding Source

- NFCSP / Title III-E: Prioritize direct caregiver services, including case management, counseling, support groups, caregiver training, respite, and limited supplemental services. Public information is also an appropriate service for outreach and community engagement. Reminder: Do not charge staff professional development to the NFCSP "CG Training" service. A list of BADR approved service definitions and PeerPlace service types can be found here: PeerPlace NFCSP Reference Sheet. PeerPlace reporting questions can be answered by Carrie.Kroetz@gwaar.org.
- AFCSP: Prioritize direct caregiver services including case management, respite, self-care, and other goods/services. Public Awareness is also an appropriate service for outreach and community engagement. Reminder: Up to 10% of AFCSP allocations may support allowable administration. A list of BADR approved service definitions and PeerPlace service types can be found here: PeerPlace AFCSP Reference Sheet. PeerPlace reporting questions can be answered by Carrie.Kroetz@gwaar.org.
- Title III-B: Funds may be an option to report staff training time. PeerPlace reporting questions can be answered by Carrie.Kroetz@gwaar.org.

1 | Outreach, Public Information & Caregiver Connections

Goal: Help people learn about available caregiver programs and services, including those who may not know these resources exist. Many people don't think of themselves as caregivers. Instead of asking if someone is a caregiver, ask if they help a family member or friend with things like errands, medical appointments, transportation, or other daily needs. This can help start a conversation about their caregiving role and the support available to them.

- Connect with Kinship Coordinators, Dementia Care Specialists (DCS), ADRCs, nutrition, transportation and volunteer programs, Tribal aging programs, primary care and therapy clinics, libraries, Head Start, schools, youth programs, YMCAs and faith communities.
- Share caregiver and older-relative fact sheets through school newsletters, backpack communications, clinics, libraries and community partners. Explain that eligibility for older-relative caregiver support is separate from receiving Kinship benefits. Printable / Shareable Fact Sheets:
    - AFCSP Fact Sheet
    - AFCSP Fact Sheet Hmong
    - AFCSP Fact Sheet US Spanish
    - AFCSP Tribal Fact Sheet

    - AFCSP-NFCSP Fact Sheet
    - NFCSP Fact Sheet
    - NFCSP Fact Sheet Hmong
    - NFCSP Fact Sheet US Spanish
    - NFCSP Relative Caregiver Fact Sheet
    - NFCSP Relative Caregiver Fact Sheet Hmong
    - NFCSP Relative Caregiver Fact Sheet US Spanish
    - Rural-Specific Caregiver Resource Flyer
    - Veteran-Specific Resource Flyer
    - Wisconsin Family & Caregiver Support Alliance (WFACSA) Statewide Campaign
- Educate respite providers, healthcare staff and community partners about how to refer caregivers; collaborate with neighboring counties/Tribes.
- Use flyers, brochures, newsletters, mailings, community presentations, public events, radio, print, websites and social media where appropriate. Match expenditure and reporting to the actual service delivered such as Public Awareness (AFCSP) and Public Information (NFCSP).
- When appropriate, create caregiver activity kits, library respite kits, books, reminiscence cards and other materials may be appropriate when purchased and utilized as Caregiver Public Awareness (AFCSP) and/or Public Information (NFCSP).
    - Possible partner recipients: libraries, senior centers, adult day programs, DCS staff, schools, healthcare providers, and community organizations.

2 | Strengthen Direct Service Delivery and Referrals

Goal: Review your local service caps and spending practices to see if changes could help more caregivers access services and make better use of available funds. Any changes to local policies or procedures should be approved by your governing board, applied fairly to all eligible caregivers, and shared with staff. State program requirements and spending limits must still be followed unless an exception is approved. Questions about program caps or waivers? Contact Bryn.Ceman@gwaar.org or Lynn.Gall@dhs.wisconsin.gov.

- Offer individualized caregiver needs assessments, follow-up calls, service planning and referrals. A staff or volunteer phone outreach effort may be useful; document whether contact is case management or Information & Assistance.
- Set a goal to make full use of all your caregiver funds each year! Counties and Tribes are encouraged to use their annual NFCSP and AFCSP funds to support eligible caregivers. Track spending throughout the year. Encourage caregivers to use months monthly, submit receipts/expenses monthly, to track timely spend. Increase outreach to help more caregivers learn about available services. Remember: When local funds run out, or a caregiver does not qualify for NFCSP or AFCSP, refer them to the Respite Care Association of Wisconsin (RCAW) grant programs for possible additional respite assistance. RCAW grants depend on available funding.

3 | Training and Education

Goal: Help family caregivers learn new skills! Both NFCSP and AFCSP funds can be used to help eligible family caregivers learn how to provide care. Think beyond traditional caregiver workshops. Conferences, seminars, webinars, and local training events can offer valuable learning opportunities and may be covered by either program.

Examples include:

- Alzheimer's and dementia conferences: A spouse caring for someone with Alzheimer's disease attends a conference to learn about dementia-related behaviors, communication strategies, safety, and long-term care planning.
- Coalition for Children, Youth & Families conferences: A grandparent raising grandchildren attends a conference to learn about childhood trauma, challenging behaviors, local family services, and strategies for supporting children with complex needs.
- Behavioral health and disability conferences: A parent caring for an adult child with a qualifying disability attends training on behavior management, communication, and future planning workshop.
- Long-term care planning workshops: A caregiver attends a seminar on navigating long-term care options, advance care planning, and preparing for changing care needs.
- Hands-on caregiving classes: A family caregiver learns safe transfers, fall prevention, medication management, nutrition, or personal care techniques.

3 | Respite, Supplemental Services for Safety, Nutrition, and Practical Help

Goal: Help caregivers get a break and support with everyday needs! Offer services such as in-home respite, personal care, housekeeping, help with chores, adult day programs, temporary overnight respite, and child day programs for eligible older-relative caregivers.

- Be flexible when arranging respite care. For example, could a family member or friend provide care in their own home to give the caregiver a break?
- Re-visit and encourage in-home respite, personal care, homemaker, chore assistance, adult day programs, child day programs for eligible older-relative caregivers, and temporary overnight respite.
- Nutrition is important! Consider meals on an individual caregiver basis if an eligible caregiver is not otherwise eligible for Title III-C meals or if your county has a nutrition program waitlist. (Apply current meal policy and any required DHS form.)
- Consider nontraditional caregiver services such as groceries, hygiene items, incontinence supplies, cleaning items, craft supplies and similar consumables when tied to assessed caregiver needs.
- Consider supportive equipment/technology such as a medication dispenser, tablet/GrandPad, mobility equipment or lift device. (Please keep in mind AFCSP has a $4,000 spending max per care recipient per calendar year and NFCSP has a $5,000 max spending on home modification per calendar year.)

- Consider door sensors, alarms, fall detectors, remote monitoring or GPS tracking.
- Consider safety-related structural/restorative work, such as ramps, grab bars, lighting, locks or plumbing repairs, when essential to care-recipient health and safety.
- Emergency information projects such as Purple Tube and File of Life may be valuable.

5 | Support Caregiver Wellness, Social Connections, and Self-Care
Goal: Help caregivers stay healthy, reduce stress, and make time for themselves!

- Encourage activities that support caregivers' physical and emotional well-being, such as yoga, walking groups, hobbies, journaling, and music or art activities.
- Consider gym memberships, puzzles, games, craft supplies, and other activities that help caregivers relax and recharge.
- Offer support groups, counseling, and other opportunities for caregivers to connect with others, manage stress, and feel supported.

Closing Consideration: Our goal is to help counties and Tribes fully utilize their NFCSP and AFCSP allocations so that eligible family caregivers can access the support they need. However, maximizing funding must always go hand in hand with program compliance. Before approving an expense, **check whether the service, item, or support is already covered or available through Medicare, Medicaid, Family Care, IRIS, private insurance, or another funding source.** Caregiver funds should not duplicate services or expenses already paid for by another program.

If another program covers only part of a service or does not meet the caregiver's full need, determine whether NFCSP or AFCSP may appropriately cover the remaining unmet need. **Tip:** Document the caregiver's need, other funding sources considered, and the reason NFCSP or AFCSP funding is appropriate. When uncertain, contact GWAAR or DHS for technical assistance before approving the expense.