



Dementia & Alzheimer's Association of St. Clair County

Advocacy · Education · Resources · Support

Respite Care Fund

Fund Purpose:

To provide respite *or relief*, to the primary caregiver of an individual with a diagnosis of dementia.

Who Can Apply?

Residents of St. Clair County who are the primary caregiver of an individual with a form of dementia.

Please note; this grant is only available to applicants who are not currently receiving charity respite care through other St. Clair County agencies. There are no income requirements for program eligibility.

Who Provides the Care?

Local healthcare agencies (see list below) will provide the care for your loved one in your home or at an adult day program. Our partnering healthcare agencies provide staff educated in dementia care that are committed to providing quality respite care. All staff have passed a thorough background check.

How Can I Use This Program?

The agency will work with you to deliver services based on your request, need, and aide availability.

Funds are available in amounts up to \$1,000.00 per calendar year from date of award and paid directly to the agency. Any fees accrued beyond \$1,000 are not the responsibility of the grant.

Application Process:

Complete and submit the application form on the reverse side. Mail the completed application along with a dementia diagnosis from attending physician to: **D.A.A., Attention: Respite Care Fund, 600 Grand River Ave, Port Huron, MI 48060**

Note: Applications are reviewed on a bi-monthly basis by Resource Committee members. After your application has been reviewed, we will contact you and your preferred care provider. This grant is available on a first come, first serve basis and fund availability. All applications will remain on file for one year.

** If you require immediate or extended respite care, please contact your physician or local home health agency. Many home health agencies have charity care respite dollars readily available.*

Our Approved Providers

Adult Day Programs

Council on Aging
Starpath Adult Day Services
810-984-8970

Life Skills Centers, Inc.
Memory Care Services
810-331-0030

Care In The Home

Comfort Keepers
888-917-3894
Rx Family Home Care Services
810-328-3934

Council on Aging Personal Care
810-987-8811
Visiting Angels
810-966-2273

Harbor Health Care
810-765-7114
Senior Helpers
810-637-5933

Visiting Nurse Association Health Services Private Duty Care
toll free 800-959-4131 or 810-989-2437

Respite Care Fund Application

Date: _____

Please tell us about the individual with dementia (Applicant):

Name: _____

Date of Birth: _____ Age: _____

Address: _____ City: _____

Has the individual received a dementia diagnosis? YES NO

In the past 12 months has the applicant received respite care assistance from any organization? YES NO If yes, name of organization: _____

Has the applicant ever been awarded funds through this grant? YES NO

Name of person completing this application: _____

Relation to Applicant: _____

Daytime Phone Number: _____ Other: _____

Please briefly explain your need for respite care:

What Agency will you be using with this grant? *Please select the respite care provider from the provider list above.*

I have read the information provided herein and understand that the Dementia & Alzheimer's Association of St. Clair County is not responsible for any negligence on the part of the agency providing services.

Signature: _____