



Peer Review Checklist for Respite Programs

This peer review checklist is intended for use by CBCAP peer review teams as they visit respite programs. The elements of this checklist are based on the *ARCH National Respite Guidelines*, published by the ARCH National Respite Network and Resource Center. The guidelines can be viewed by visiting the ARCH website at <www.archrespite.org>.

It is recommended that peer reviews be conducted following the *Peer Review Guidelines*, published by the FRIENDS National Resource Center for CBCAP. These Guidelines can be viewed by visiting the FRIENDS website at <www.friendsnrc.org>. As stated in the *Peer Review Guidelines*, it is important that peer reviewers use written guidelines, procedures and evaluation criteria, to ensure objectivity, fairness, and consistency. This checklist is designed to meet the need for written guidelines which can be used as evaluation criteria for respite programs.

Using this checklist, peer reviewers are encouraged to evaluate the respite programs they visit, by (1) reviewing policies and procedures, (2) reviewing staff training materials, (3) reviewing program records, (4) interviewing staff, volunteers and consumers, and (5) observation. Suggestions for data gathering are given in *italics* following each item on the checklist. Peer review teams should consider using all or some of the items in this checklist, as applicable, and according to their and the State Lead Agencies needs and requirements.

I. Work with Families

1. How does the program involve families in service design and implementation?

Give examples.

2. Do the program application forms, questionnaires, or reporting formats have sections related to identifying family strengths?

Review relevant materials.

3. Do families have access to their children while they are in care?

Ask for examples, interview care providers and consumers, review policies, procedures and training materials.

4. How is every effort made to incorporate the family's cultural needs into the respite or crisis services?

Ask for examples, interview consumers and care providers, & observe the culture(s) of the program being visited.

5. How are each family's spiritual beliefs acknowledged and respected by all agency staff and care providers?

Ask for examples, interview consumers and care providers.

6. Does the program only request information that is necessary for the provision and evaluation of services?

Review intake forms.

7. How are written records and oral interactions (for example, phone conversations, meetings) kept confidential?

Review the relevant policies.

8. Are files related to specific families kept in locked filing cabinets with policies in place to ensure they are inaccessible to anyone not entitled to review the files? Who has access to this information? Is information accessible to those who need it, when they need it?

Observe presence of locked file cabinets. Review the policies.

9. Does the program maintain current information on other community services that families may find helpful and how are referrals made?

Review the referral log, and their directory of community services.

10. Is the entry process clear to families and simple to follow? For example, how are accommodations made for families who are not English proficient and do written publicity materials include a contact phone number for additional information that is in plain sight?

Review written publicity materials.

11. What are the program guidelines? Does the program have clearly stated guidelines for eligibility, selection, and priority for services?

Review relevant guidelines.

12. Does the program maintain a waiting list and provide services to those families as soon as possible?

What is the usual wait time? If it is very long, what alternative services are offered? What is done in crisis situations?

13. Can the agency provide cash assistance or subsidies so families can pay for and access respite care options? How does the agency assist families to find a source for funding assistance?

Ask to review the policy.

II. Care of the Individual Child

1. How do you insure that each care provider assigned to a child has the necessary skills and sufficient information about the individual to be competent and sensitive in meeting their needs?

Check licensing requirements, state regulations and the resumes of the providers.

2. How are the family's preferences for food, routines and activities noted, respected and maintained whenever possible?

Ask for examples, interview care providers and consumers. See if registration/enrollment form asks for this information.

3. Is each child receiving care provided with safe, interesting, creative and developmentally appropriate activities?

Observe and ask to see schedules and policies.

4. While in care, do infants and children have a structured schedule that includes daily, periodic free play sessions with options and choices for children?

Are schedules individually tailored or administratively mandated?

5. If television and/or internet access is included in the program, how do the providers monitor to ensure that viewing time is limited and programs are developmentally appropriate?

Observe. Look at policies.

6. Does the program follow USDA nutritional guidelines?
Observe. Review menus.
7. How are all care providers in your program trained in the nutritional needs of those for whom they care?
How is this done and who does the training?
8. How are family/child/individual food preferences honored in planning and providing for each care receiver's nutritional needs?
Ask for evidence.
9. Are meals attractively presented, offered at time intervals recommended by the USDA and provided in a socially pleasant environment?
Observe a meal time and again, review USDA guidelines.
10. Are infants always held for bottle feedings and spoken to kindly while being fed, changed or otherwise cared for?
Observe, interview providers, review training materials, policies and procedures.
11. How do the care providers ensure that the daily hygiene needs of children in care are met, offering assistance as needed?
Ask for examples, review training materials, interview care providers. Check for supplies like extra diapers, soap, etc.
12. Does each provider have pertinent medical and emergency contact information and releases for each child in care? How is that information collected, stored, updated, and kept accessible for quick use in an emergency?
Ask to see forms, interview staff, and observe staff accessing this information.
13. How is documentation kept on medication administration?
Review documentation, observe medication storage, and review medication administration policies.
14. Is the care setting clean, safe, accessible, and free of hazards?
This not only needs to be observed, but peer reviewers need to know what the safety regulations are for that state.
15. How do you insure that a provider supervises all children at all times?
Observe provider supervision, review training policies and procedures, materials, and documentation, and interview staff.
16. How are all children protected from physical, sexual, and emotional abuse by other children and care providers? What methods of discipline are permitted and practiced?
Observe care provider supervision, review training policies and procedures, materials, and documentation, and interview staff.

III. Care Providers

1. How does the agency recruit providers from ethnic and cultural groups similar to the families being served?

Observe and also ask to see evidence of recruitment efforts.

2. How are families encouraged to identify providers whenever appropriate? (for home based services)

Interview consumers and staff.

3. How does the agency make efforts to recruit providers who live in areas easily accessible to families? (for home based services)

Interview consumers and staff.

5. Does the agency make every effort to pay providers wages appropriate to their level of experience and the care they give?

Ask to see the benefit package and salary schedule.

6. What benefits, such as health insurance, paid sick and vacation days, and a retirement package do providers receive?

Ask to see benefit package.

7. How does the agency ensure that providers are of good moral character and have no record of committing crimes against children and/or adults?

Look at procedures and ask how background checks are conducted? Ask to see documentation that this is being done.

8. Are the providers knowledgeable about child development and developmentally appropriate activities?

Look at their resumes. Ask to see training topics and outlines.

9. Does the agency schedule regular staff meetings and in-service training that is available to all providers?

Review agendas and meeting notes from the meetings or training events.

10. Do providers have access to an administrative staff person at all times for support, back-up assistance, and other help as needed?

How is that access arranged for (pagers, cell phones)? Do staff report being comfortable with the level of administrative support that is available to them? Ask what turn over rate is and whether there is a problem with staff burnout. Interview direct care staff.

11. Do all providers receive pre-service and regular in-service training that, at a minimum, covers the following topics

- Policies and procedures for the program
- Relevant local, state and federal laws (ADA, USDA, etc.) and abuse and neglect detection and reporting protocol
- Conditions which providers are likely to encounter, such as disabilities, chronic or terminal illnesses, and children at risk for abuse and neglect
- Emergency procedures (First Aid, CPR, program emergency protocols)
- Infectious diseases, and universal precautions to be used to avoid the spread of disease
- Effective ways to work with families of persons with disabilities and/or families in crisis

- Child development and behavior management
- Cultural diversity and sensitivity
- Support services available for care receivers, their families and care providers

How is the training delivered? Who trains staff?

12. Does the agency have policies related to care provider/care-receiver ratios that meet or exceed state requirements?

Reviewers need to know what the state minimum requirements are and should ask for evidence that the agency stays within or exceeds the minimum requirements.

13. If the state has licensing requirements, do providers meet these standards?

Ask to see documentation.

IV. Community Involvement

1. How is community service coordination and collaboration built into the program development and service delivery system?

Interview consumers and other community members.

2. How does the agency maintain, update, and share information on all agencies providing respite and crisis services in your community?

Ask for examples.

3. Does the agency provide other key community agencies with relevant information about your program, such as the population served, program description, and referral procedures?

Ask for examples.

4. Does the program participate in collaboration on training, funding, sharing technical expertise and support, or the development of multiple community service options?

Ask for examples.

5. Does the program have a mission statement, goals, objectives, and action plans established, and an on-going process to determine the program's role in the community?

Review copies of the mission statement, etc.

6. Does the agency's advisory board(s) include family members, community members, and professionals involved in human services?

Ask for a roster. Are board members who are family members actually consumers of services (and not simply an agency person who happens to be a parent of a child with disabilities)?

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