

Office of Health Care Quality Respite Care Services Survey Tool

COMAR 10.21.27 Ed: 1/07

Licensee Name			
Name of Surveyor		Affiliation	
Agency Contact			
Contact Number			
Type of Survey		Date of Survey	
CSA		Contact Number	
Administrative Staff			
Program Director : Mental Health Professional			
Site 1		Site 2	Site 3
Program Information:			
1	Program Name		Type
	Program Address		Child/Adult
	Number of Residents		Gender
2	Program Name		Type
	Program Address		Child/Adult
	Number of Residents		Gender
3	Program Name		Type
	Program Address		Child/Adult
	Number of Residents		Gender
	Site 1	Site 2	Site 3
Average Stay			
Number of In Home Respite			
Must be approved as MTS ,OHMC ,or PRP per 10.21.27.03			
Program Hours: Day, weekend, overnight			
•Does the Respite staff utilize Seclusion/ Quiet room •Restrains as a treatment method? •What Types of restraint utilized •Number of times 10.21.12	Seclusion Quiet room Restrains		
Staffing Schedule 10.21.26.09 24 hour awake-overnight 1:4 adults 1:3 children 1:1 PRN 10.21.26.10			

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Menu: Who designs the menu? 14.31.06.10 menus kept on file for 3 years & approved by Dietician			
How often does the agency visit the foster parents? (2x month) 07.02.21.08			
Staff Schedule: On Call 24/7 and available for On Site 24/7 10.21.27.05C			

Program File Review									
Fire Logs - alternate shifts within quarter Child – every 3 months adult 14.31.06.08									
Site 1			Site 2			Site 3			
Date	Time	Evacuation time	Date	Time	Evacuation time	Date	Time	Evacuation time	
			Site 1	Site 2	Site 3				
Fire Survey – (6 beds or more) 14.31.07.07 .07A4 ????									
Lead Paint, Asbestos, radon (Child Only) ????									
Water test if not public water 14.31.06.07 N (4) (Child Only)									
Fleet Insurance 14.31.06.08 D									
Treatment Foster Care Approval by DHR 7.02.21									
Individual File Review									
1	RCS Program					Date of Birth			
	Name of Resident					Date of Admission			
	Medicaid Number								
2	RCS Program					Date of Birth			
	Name of Resident					Date of Admission			
	Medicaid Number								

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3	RCS Program		Date of Birth	
	Name of Resident		Date of Admission	
	Medicaid Number			
		Client #1	Client #2	Client #3
Pre admission Screening 10.21.27.05				
Evaluate time of respite needed (immediately or intermediately)				
Outlines a preliminary plan				
Expected duration of respite				
Frequency, level and type of staff care				
Medications if Applicable				
Informed of rules				
Admission assessment				
Strengths and needs				
Interventions needed during respite				
Outpatient treatment				
Psychiatric Rehabilitation				
School				
Work				
Initial Plan				
Schedule				
Location				
Level of support				
Schedule of activities				
Assessment & Plan needed interventions				
Coordinated with ITP or IRP				
Crisis Plan 10.21.27.06D				
Conclusion Summary Note per episode 10.21.27.07				
Coordinated with other treatments as needed				
Discharge Plan				
Summary of respite				

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Personnel Records .17						
	Staff Name	Position		Staff Name	Position	
1			4			
2			5			
3			6			
Requirement 10.21.17.08 C	1	2	3	4	5	6
Staff Initials						
Date of Hire						
Current Job Classification						
Resume including 1. education 2. Relevant work experience. 3. specialized skills						
Proof of Certificate/licenses						
Background check (GH Only)						
Reference Checks						
Valid Drivers license (If transports)						
Annual Drivers report						
Orientation within 3 months						
Orientation includes 1. Individual rights						
2. Psych and medical emergency protocol including crisis management and suicide						
3. P&P						
4. Overview of service delivery system						
5. Required trainings						
6. EEO Policy						

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Personnel Trainings – Direct Care Staff 14.31.06.05 F						
Licensee:						
	Staffs Name	Position			Staff Initials	
1						
2						
3						
4						
5						
6						
	Staff # 1	Staff # 2	Staff # 3	Staff # 4	Staff # 5	Staff # 6
Initial Trainings Within 3 months .17						
Emergency Preparedness						
CPR						
First-aid						
Suicide Risk/Prevention						
Behavior Modification						
Family Interventions						
Crisis Intervention						
10.21.27.08B						
Mental Illness and Emotional Disorders						
Psychiatric Medications						
Family Interactions						
For staff providing service to children: a. Behavioral Intervention b. Growth and Development						
Caseworkers TFC (ONLY) 07.02.21.05	Staff # 1	Staff # 2	Staff # 3	Staff # 4	Staff # 5	Staff # 6
20 Hours pre-service trainings						
Overview History Development Permanency						
Treatment philosophy of agency						
Skill training in specific						

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treatment methodologies						
Discipline policy including passive restraint						
P&P on evaluation and documentation requirements						
Identification and reporting of child abuse and neglect						
Confidentiality of Records						
Crisis intervention						
grief and loss						
Child development						
Universal precautions						
30 hours annually						

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Personnel Records (Children Residential Only) 14.31.06.05 E

Licensee:						
	Staffs Name	Position			Staff Initials	
1						
2						
3						
4						
5						
6						
	Staff # 1	Staff # 2	Staff # 3	Staff # 4	Staff # 5	Staff # 6
Staff Initials						
Date of Hire						
Application/Resume						
Three (3) References						
Medical exam at hire						
I-9						
Annual TB/medical certification						
Criminal Background check						
Child protective services Check						
Professional Credentials (High school or equivalent 14.31.06.06 B 2 A)						
Annual Performance Eval.						
Drivers License						
Driving Record 2 Years						
Personnel Action/if Applicable						
Received and Read P & P regarding child abuse, neglect and discipline (m)						
Job Description Available 14.31.06.05 D 1						
Verification of Hours Worked						

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Orientation within 3 months						
Orientation includes						
1. Individual rights						
2. Psych and medical emergency protocol including crisis management and suicide						
3. P&P						
4. Overview of service delivery system						
5. Required trainings						
6. EEO Policy						

Personnel Trainings – (Children) Direct Care Staff 14.31.06.05 F						
Initial Trainings	Staff # 1	Staff # 2	Staff # 3	Staff # 4	Staff # 5	Staff # 6
Staff Initials						
Emergency Preparedness						
CPR						
First-aid						
Child abuse and Neglect identification and reporting						
Suicide Risk						
Approved forms of discipline						
Trainings	Staff # 1	Staff # 2	Staff # 3	Staff # 4	Staff # 5	Staff # 6
Medication Managements						
Infection Control/Blood Borne Pathogens						
Parenting Issues, collaboration with families, and supporting children and families in making choices						
Psychosocial and emotional needs of						

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children , family relationships, and impact of separation						
Special Needs of the population						
Child Development						
The role of the child care employee						
Food Preparation, food service, and nutrition						
Communication skills						
Total 40 Hours per year						
Medication Administration/Delegation (if applicable)						
Med Certified						

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Physical Plant Inspection 14.31.06.

TGH/Program		Date:	
Time:			
Building and Grounds 14.31.06.07			
Free from trash and debris/ Trash cans w/lids			
Playground equipment safe			
Yard maintained in good condition			
Comments:			
Emergency			
First Aid Kit			
Evacuation plans (each floor)			
Smoke alarms(each floor)			
Fire extinguishers(each floor)			
Emergency numbers by all phones			
Hallways/Stairways			
Free from Obstruction			
Adequate Light14.31.06.06 K 2			
Comments:			
Living Area			
Walls clean free from cracks and perforations			
Clean and orderly			
Adequate Light14.31.06.06 K 2			
Free from Hazards			
Furniture in good repair 14.31.06.07 I			
Comments:			
Kitchen and Dinning Area14.31.06.07			
Adequate Light 14.31.06.06 K 2			
Sufficient equipment (silverware, cups)			
1 week supply of food 14.31.06.10.B2			

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Menu Available				
Equipment in working order				
Disposable dinnerware (prohibited unless documented)				
Dishes, cups free from chips and cracks				
Adequate seating area				
Water temperature 110°				
Comments:				
Doors and Windows 14.31.06.07				
Screens				
Window coverings				
Doors in good condition				
Windows open and close 14.31.06.07M1				
Comments:				
Sleeping Accommodations 14.31.06.07				
Initials of Residents assigned to room				
1		3		
2		4		
	Room 1	Room 2	Room 3	Room 4
Bed, dresser, tables, chairs in good condition				
Bedroom Clean and orderly				
Source of Natural Lighting				
Adequate Light 14.31.06.06 K 2				
Adequate storage				
Adequate clean and comfortable clothing 14.31.06.10 D				
Comments:				
Room 1				
Room 2				
Room 3				

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Room 4			
Bathrooms	Location of		
Bathroom 1			
Bathroom 2			
Bathroom 3			
	Bathroom 1	Bathroom 2	Bathroom 3
Clean (Free from Mold)			
Adequate light14.31.06.06 K 2			
Operating condition (toilet, Shower)			
Soap, Shampoo, Paper Towels			
Comments:			
Room 1			
Room 2			
Room 3			
Room 4			
Basement/Washer and Dryer			
Clean and Orderly			
Free from Trash			
Washer and dryer is working order			
Lint trap free from lint			
Basement free from water			
Adequate Light14.31.06.06 K 2			
Comments:			

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Treatment Foster Care 07.05.02. 18, 07.02.21.05 & 07.02.21.07					
Licensee:					
	Foster Parent Name	Position	Initials		
1					
2					
3					
4					
5					
Foster Parent Files	Staff # 1	Staff # 2	Staff # 3	Staff # 4	Staff # 5
TB every two years					
Medical exam					
Face Sheet Name, address, Telephone number, other members name and relationship					
Application and references					
Agencies home study					
Agencies findings					
Marital StatusRecord of each placement					
Documentation of Agencies monitoring Annual recertification					
Criminal background					
Child abuse and support clearances					
Trainings					
Fire and Health inspections					
07.05.02.12					
Role and Relationship in foster care between agency foster parent and child					
Separation anxiety importance of parents and siblings					
Developmental needs					
Care of special needs					
Cultural and religious awareness					
Child management and discipline					
Child abuse and neglect					
Support services in community					
Self-awareness					

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Communication						
Problem solving						
First aid and home safety						
Human sexuality						
Foster care as prep for adoption						
Need for adoption						
Adoption responsibilities						
Function of CRBC						
Legal technical and financial educational aspects						
Nature and purpose of agency documents						
Treatment Foster Parent Trainings	# 1	# 2	# 3	# 4	# 5	
24 hours pre-service training						
Importance of Foster parents						
Definition of foster care and its relationship to permanency planning						
Rationale for teamwork in permanency planning						
Explanation of needs and rights of children						
Needs rights and responsibilities of parents						
Roles of foster parents and caseworkers						
Grieving process						
Feelings about separation						
Working with behaviors of child						
Development of accepting attitude						
Issues of substance abuse						
Universal precautions						
20 hours annually						
Crisis recognition, management and intervention						
Caseworkers 07.02.21.05	Staff # 1	Staff # 2	Staff # 3	Staff # 4	Staff # 5	Staff # 6
20 Hours pre-service trainings						
Overview History Development						

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Permanency						
Treatment philosophy of agency						
Skill training in specific treatment methodologies						
Discipline policy including passive restraint						
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grief and loss						
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