



Channel Islands Social Services

Respite Interview Checklist for Families & Caregivers



At Channel Islands Social Services we value the establishment of good matches between the family and Respite Caregiver. To assist in this process, we have developed a list of important topics to discuss when first meeting each other. Please feel free to use this as a guide and add additional items important to you.



GETTING TO KNOW YOU

- Respite Caregiver: Experience, education, home city, hobbies, career aspirations ...
- Family: Household members, ages of children, parent's professions, schools, pets, family hobbies ...
- Contact Info: Best phone number(s) to reach family & Respite Caregiver. Can family/caregiver text each other?



HEALTH & SAFETY / COMMUNICATION

- Emergency Numbers: Where is the list kept (we recommend near the phone!), in which order should people be called, do parent's cell phones accept text messages? Please see page 2 for Emergency Contact List.
- Known Allergies: Medications, foods, plants, animals (past reactions & treatment – Epi-pen?)
- Diagnoses: Of all individuals in care (developmental, mental health, emotional, medical)
- Any history of seizures? If yes, describe nature, frequency, duration, protocols, recovery period.
- Special Diets: Types of foods allowable and portions – specialized preparation needed
- Medications: Location of list of medications, dosages, prescribing physicians, and tracking chart/form to log when medication is dispensed and by whom
- Special Equipment: Location & overview of how to use (Hoyer lift, communication device...)
- Basics – Location of first aid kit, electricity shut-off, gas shut-off, water shut-off



PREFERRED / ALLOWED ACTIVITIES

- Sensory activities (jumping, brushing, swinging) that help relax the individual (duration and instruction on when to allow or assist)
- Indoor activities that the individual enjoys (eg. specific toys, books, music, TV, video games allowed?)
- Neighborhood Safety: Neighbors who are friends? Any that should be avoided?
- Outdoor activities enjoyed (types and approved locations in neighborhood & local community)*
****Transportation** – If any transportation of the individuals in care will be allowed, a [CISS Travel Authorization form](#) must be submitted with proper driver's documents prior to any transportation as CISS must make sure the employee is qualified to transport. Only local mileage up to 10 miles roundtrip is allowed.*



FAMILY VALUES / HOUSE RULES / DISCIPLINE

- Important cultural and religious beliefs that are followed by the family
- Review house do's and don'ts that are important to the parent(s)
- Review all behavioral programs/techniques currently being used and effective discipline used by the parent(s)
Please note! CISS employees are not allowed to spank, restrain, or use any type of corporal punishment nor are they allowed to administer any unsupervised time-outs
- Household Pets: Indoors or outdoors? Who feeds them and when? General safety rules.



ROUTINES / CONSISTENCY / PERSONAL CARE

- Specific times for mealtimes, bath time, and free play
- Personal Care: Describe assistance needed (by all individuals who will be in care) to eat, dress, bathe, brush teeth, and use the bathroom. Any diapers / pull-ups? Show where all supplies & disposal are located.



MISCELLANEOUS

- Family is authorized for _____ hours/mo. (Call or email CISS to confirm balance.)
- Family's typical respite schedule is as follows (days/hours): _____
- CISS highly recommends keeping a consistent respite schedule and booking most appointments ahead of time so everyone can plan ahead for a successful visit.
- Other:

Don't forget to call CISS at (805) 384-0983 to let us know if you think this Caregiver/Family is a match for you!

Our Family's List of Emergency Contacts



Updated on _____



Call 911 for a Life-Threatening Emergency! Poison Control (800) 222-1222

Our Home Address is: _____

Parent's Names & Phone #'s (Cell phone and Work phones)	
Children's Names & Birthdates:	
Closest Relatives (Name, Relation, City, Phone #)	
Neighbors (Names, Phone #, House Address)	
Local Police	
Pediatrician / Doctors	
Dentist	
Name and Phone #'s of our Family's Childcare Providers	

Family Member's Known Allergies (Foods, Medications or Other Substances)

Name	Allergic to	Treatment for Exposure
1.		
2.		
3.		
4.		

Other Phone Numbers

Family's Favorite Pizza Delivery: _____

Channel Islands Social Services Respite Care (805) 384-0983

(If after-hours emergency, press x9 for on-call manager AFTER 911 and family has been contacted!)