

Contract Respite Provider Pre-Test

Name: _____ Date: _____

Title: Respite Provider Facility: Community Services, Inc.

- 1) How does a respite provider document the service they are providing?
- On notebook paper On a progress report (DD-12)
- Documentation is not required Discuss with the service coordinator
- 2) Is a respite provider required to provide training?
- YES NO
- 3) When is it acceptable for the client to receive respite in the respite provider's home?
- When they want to. If the respite provider's home is certified through DHHR.
- If they live nearby. If the parent says it is ok.
- 4) Mark all information that should be included in the respite documentation:
- Start Time of Service Client's Name Total Units Per Day
- Month/Year of Service Color of Clothing Provider's Name
- Date of Birth Mileage Stop Time of Service
- 5) Respite documentation should include a specific description of the service provided?
- TRUE FALSE
- 6) It is ok to bill for transportation for personal errands as long as the client is in the car with you.
- TRUE FALSE

Name: _____

7) It is ok to use respite as day care/after school care.

- TRUE FALSE

8) Of the three choices below, choose the best one for documentation of mileage.

Mileage FROM: Home TO: Doctors Office

Mileage FROM: Clients Home, Charleston, WV TO: Dunbar Medical, Dunbar, WV

Mileage FROM: Charleston TO: Dunbar

9) List 2 different kinds of abuse:

10) Neglect can include, but is not limited to hazardous or unsafe living conditions (i.e fleas, lice on people, soiled bedding, fecal/urine odor, inadequate clothing).

- TRUE FALSE

11) Possible signs of abuse or neglect could include (mark all that apply) :

- Bruises on body Not allowing kids to have a dog
 No running water in home Not enough food in home
 Welts on body Unauthorized withdrawals from an adult's ATM card

12) List at least 1 sign of sexual abuse: _____

13) As a respite provider, you are what is defined as a "Mandatory Reporter" and must report any incidents of real or suspected abuse/neglect you may be witness to?

- TRUE FALSE

14) The terms APS and CPS refer to:

Adult and/or Child _____ Services

15) A verbal report of suspected incidents of abuse and/or neglect should be verbally reported _____ to your local DHHR office.

- Within 2 days
 Only Monday through Friday when the office is open
 Immediately