

Introduction to Missouri



Foster and Respite Care Resource Provider Training



Every foster and adoptive family can potentially benefit from respite care. The healthier, happier, and most functional families are the ones who can find time for respite in their busy lives. Successful completion of this training is intended to prepare a respite care service applicant for providing respite services.

The goals for the training are to:

- Develop trust between providers, families, and the respite program agency, and help them work together in children's best interests
- Build relationships and communication between providers and families
- Share information about the children who will be using respite services and develop a deeper understanding of their needs
- Prepare providers with information and strategies to care for children with a variety of special needs
- Provide expectations regarding the role of a respite provider
- Provide information regarding available resources

Foster and Respite Training Outline

This training can be completed self-taught or in an instructor-led classroom setting.

Instructor-led classroom activities are shaded in grey for each part of the training.

Two (2) hours of training credit may be awarded for completion of this training. If self-taught, the Knowledge Assessment must be completed and submitted to the licensing worker for applying training credit hours in FACES.

- Part 1 Getting Started
- Part 2 Communication & Relationships
- Part 3 Special Needs
- Part 4 Behavior Management
- Part 5 Respite Care Provider's Role and Tools for Success
- Part 6 Knowledge Assessment

This training is intended to provide a preview of a portion of the responsibilities required of individuals who become licensed resource parents. This training is not the pre-service training required to be licensed as a resource parent.



Part 1 Getting Started

Instructor-led classroom option ice breaker:

Start the training by establishing common ground related to experiences, knowledge, and concerns regarding caring for children with special needs who have been adopted or who are in foster care.

Call for a show of hands in response to the following questions:

1. How many of you have provided respite care in the past?
2. How many of you have a child with special needs?
3. How many of you are working with agencies that serve children with special needs?
4. How many of you are friends of people with adoptive, foster, relative or kinship children?

After you have established common ground, ask the following questions to generate discussion:

1. How would respite services help your friend/family member?
2. What would be your greatest concern about leaving your child with another provider?
3. Why do people need respite?
4. Why is respite important to the health of a family?

Research Regarding Respite

Respite care increases:

- Feelings of well-being for families
- Community and peer contacts for the children
- Social activities for families

Respite improves:

- Coping abilities of families
- Attitudes about caring for a child with challenges
- Families' ability to care for their child at home

Respite care reduces:

- Stress in families
- Risk of abuse and neglect
- Marital or partnership tension
- Feelings of depression and isolation

Most important outcome of respite:

Effective respite care reduces out-of-home placements, disruptions, and dissolutions so that children can stay at home with their families.

Handouts:*Research Regarding Respite*

- http://archrespite.org/images/docs/Factsheets/fs_33-adoptive_families.pdf
- http://archrespite.org/images/docs/Factsheets/FS_34-SeriousEmotionalDisturbance_Respite6_15_12.pdf
- http://archrespite.org/images/docs/Factsheets/fs_32-foster_parents.pdf

Why Is Respite Training Important?

- Training providers to develop their skills and the quality of care they can offer to families helps families to feel comfortable leaving their children with a provider. Without this comfort level, parents may not be willing to access respite care.
- Equally important is the task of preparing providers to do their job well. They experience success and the rewards of their service, and are more likely to continue to provide respite care.



Part 2 Communication & Relationships

Developing communication between parents, youth, and respite care providers

Communication between the parent and respite care provider is imperative. Over time parents have developed success strategies for discipline and building a relationship with their children. They need to share this information so that respite care providers can experience success right away and will want to care for the child again.

One example: A mother of five children gave her son his medication to treat ADHD 20 minutes before he or anyone else was awake. She would go into his room, briefly wake him up, give him his medication, rub his back and quietly tell him she would wake him up in about 20 minutes. This routine dramatically affected his relationships with his siblings, his parents, and helped ensure positive relationships and outcomes at school.

Instructor-led Classroom Option 1: Using the *Child Information Form for Respite Provider, CD-110*, divide the larger group into small group discussions, and then have each group report back to the larger group.

Some questions providers may want to ask parents are:

- What are four important things I should know about your child?
- Does your child have special routines and schedules?
- What are your child's likes and dislikes?
- What are the expectations at bedtime? When is bedtime? Are there special routines? Does the child wake up, sleep walk, and wander at night? Does the child wet the bed? How do you handle these issues?
- Does your child require special food preparation or have any food allergies?
- Is your child safe alone?
- Does your child play well with other children?
- Can your child be outside? Will your child wander?

Information parents may want to share with a provider are:

- Sensitivities your child has to touch, teasing, sound, and light
- How your child best communicates with others
- Calming activities that soothe your child
- Past abuse experiences that may be triggered by specific activities; how to avoid such situations, and strategies for providers if your child becomes upset
- Your child's fears
- How you respond to certain of your child's behaviors

Option 2: Break the large group into up to five smaller groups with each group assigned one of the following scenarios:

- A parent interviewing a potential respite provider
- A provider who has a concern to discuss with a parent
- A provider who needs to control the behavior of a child with special needs
- A parent who is upset with something a provider has done or failed to do
- A provider, parent, and child doing a routine “debriefing” after respite services

Give the groups 10 minutes to discuss their scenario and either role-play or talk about how they would communicate so that relationships remain positive. When the groups return, ask what lessons they learned. Write replies down on a whiteboard or flipchart.

Whether you choose option 1 or 2, after your discussion distribute *Tips for Being a Nurturing Parent* and/or *Why Children Need Ongoing nurturing Relationships* and talk about the importance of also building a relationship with children and youth.

Handouts:

Child Information Form for Respite Provider, [CD-110](#)

Tips for Being a Nurturing Parent,

<http://www.childwelfare.gov/preventing/supporting/resources/tips.cfm>

Children Need Ongoing Nurturing Relationships

<http://www.scholastic.com/teachers/article/professional-development-why-children-need-ongoing-nurturing-relationships>



Part 3 Special Needs

There are many issues that may be addressed in this part of the training:

- Attachment
- Effects of child abuse and neglect
- Child development
- Issues of adoption/foster care/kinship care
- Mental health diagnosis
- Attention deficit hyperactivity disorder (ADHD)
- Fetal alcohol spectrum disorder (FASD)
- Other common special needs

Instructor-led Classroom Option 1: Visible to everyone, display four large sheets of flipchart paper with the following headings:

- What are the core issues in adoption/foster care?
- What are ways to encourage attachment?
- What are effective ways to work with or parent children with FASD or ADHD?
- How does abuse and neglect affect children?

Invite the audience to discuss each question and learn from each other.

Instructor-led Classroom Option 2: Invite a panel of parents to the training to present the issues they deal with in raising children with special needs. The panel can share experiences briefly, and then the audience can ask questions and discuss concerns.

Handouts:

Common Special Needs in Adoption/Foster Care
Attachment Disorder
Attention Deficit/Hyperactivity Disorder
Fetal Alcohol Spectrum Disorder
Sensory Integration
Core Issues in Adoption
Positive Adoption Language
Resource List for Special Needs



Part 4 Behavior Management

Dealing with children's behavior is typically the biggest day-to-day concern of respite providers. One effective way to manage the behavior of children with special needs is to carefully plan activities that are fun, safe, and developmentally appropriate. In addition, providers need to know how to redirect the behavior of children with special needs and ensure that the children are safe.

Instructor-led Classroom Option 1:

Invite a panel of parents, providers, special educators, and social workers to talk about how they deal with specific behaviors. Be sure that panelists are consistent and know what state regulations are regarding behavior management.

Confidentiality

Information regarding the child or children in respite care will be provided to the potential respite caregivers. Remember that all information about the child, their birth/first families, or adoptive and kinship families is considered confidential and must not be shared with others.

Instructor-led Classroom Option 2:

Moderate a discussion answering questions that illustrate effective behavior management techniques:

- When do problems need to be managed?
- What are some basic rules for behavior?
- When do you notice that problems generally occur?
- How can you track behaviors, anticipate problems, and redirect the child before the trouble starts?
- How can you best handle behavior problems during transitions between activities?
- How can you improve cooperation and impulse control?
- How can you best use structure and consistency to manage behavior?
- What behavior management techniques may be used?
- What behavior management techniques are prohibited?
- How can families and providers manage their own mounting frustration when trying to manage children with special needs?

Encourage experienced providers to offer examples of effective behavior management techniques.

Close with encouragement and humor and talk about the importance of laughing with the children. Encourage respite providers to have fun with the children. These children need to have fun, and to be encouraged to learn new things and experience a variety of activities.

Be proactive when you take care of a child with special needs. If you want a child to succeed, it is better to over-supervise than to under-supervise, especially when the child

is in the provider's home. Providing structure and preventing problems is much better than trying to repair problems after they have happened.

Self-care for respite providers is important. What do you do to calm yourself? What is your back-up plan if you need help?

Handouts:

How To Mean Business without Being Mean

Tips for Parents & Caregivers of Children who have Experienced Trauma

Top Ten List for Parents Caring for Children with Multiple Diagnoses

Avoiding Power Struggles in Parenting

[Resource Parent Discipline Agreement, CD-119](#)



Part 5 Respite Care Provider's Role and Tools for Success

Supporting the Family

A respite care provider's number one job is to support the family. Providers need to listen carefully to what parents tell them about their children, respect their knowledge and understanding of their children, and follow through with providing care according to the parent's wishes.

Instructor-led Classroom Activity:

Using a flipchart, write down the group's responses to ways they could support the family.

Getting Information

To be successful and support the family, providers need to get all the useful information they can about the child and the family.

Instructor-led Classroom Activity:

Hand out the respite packet forms that will help providers collect useful information, and go over the most important ones in the following order:

1. *Primary Caregiver Family Information*
2. *Child Information for Respite Provider*, [CD-110](#)
3. *Emergency and Care and Information*,
<http://extension.missouri.edu/explorepdf/commdm/emw1011.pdf>
4. *Authorization to Secure Emergency Services*
5. Foster Respite Care Provider Checklist, [CS-RC-2](#)

Sharing Strategies for Emergencies

It is very important to talk about emergency situations with the family *before* they happen. Know what providers' responsibilities are for the child and to the family.

Instructor-led Classroom Activity:

Talk about what providers will need to do to be successful and competent. Use the flipchart and have people share how they would talk with parents and discuss how to handle the following situations:

- A runaway child
- Raging behavior, violent outburst
- Night terrors

- Inappropriate sexual behavior
- Stealing
- Legal matters
- Medical emergencies

Explore solutions for each of these areas. Any one of them can happen.

Reporting to Families

Remember that parents are arranging for respite care because their children have challenging needs and they need a break. The last thing they need after returning from time away is a play-by-play report of everything their child did wrong. Respite providers should talk about the positives first, and have a sense of humor about the respite experience. Respite providers need to focus on the big picture and trust that they will build a relationship with the child. Children often test a new caregiver to see what they can get away with, but as they build a relationship with you they will do less testing.

Respite Providers should think about the child too. How excited would you be to build a relationship with a provider that reports every little mistake you made? Would you want to trust or try to improve if the provider seems to be watching for and reporting your mistakes?

It is important not to pre-judging resource parents and teach them how to recognize children with attachment issues. Children with attachment issues are often charming and delightful around people they don't know very well, while at the same time, can seem to be oppositional with their parents. Resource parents may warn respite providers to expect extreme and difficult behaviors from their child. Respite providers may even witness the child display those behaviors with the parent, but find the child to be cooperative and well behaved in their care. Untrained respite providers may not realize they are experiencing a shallow bond with an unattached child, misinterpret their observations of the parents, and wrongly believe the parents are causing the child's misbehavior.

Instructor-led Classroom Activity:

Use the flipchart to get responses for how to report back the truth to parents but stay positive. Brainstorm ideas for what a provider can do to improve the outcome with a child the next time.

Providing Respite Is a Journey

Providing respite is a journey. You do not need all the answers. There will be:

- Opportunities for ongoing learning and training
- A learning curve
- Time to keep growing

You are on this journey with parents, children, and other resource providers. Keep talking and learning from each other.

Instructor-led Classroom Conclusion:

Ask for final questions. Review all required forms. Thank everyone for their commitment to children and families.



Forms:

All the following forms are located on [Children's Division E-forms](#):

- Application to Provide Respite Care, CS-RC-1
- Foster Respite Care Provider Checklist, CS-RC-2
- Sign a Respite Care Provider Approval, CS-RC-3
- Sign a Cooperative Agreement for the Purchase of Respite Care Services with the Children's Division, CM-10
- Read, agree to and sign the Resource Parent Discipline Agreement, CD-119
- Read, agree to and sign the Safe Sleep Practices, CD-117

Handouts for Training

Handouts are not included in this training manual but are available online:

Common Special Needs in Adoption/Foster Care

Attachment Disorder

Attention Deficit/Hyperactivity Disorder

Fetal Alcohol Spectrum Disorder

Sensory Integration

Core Issues in Adoption

Positive Adoption Language

Resource List for Special Needs

How To Mean Business without Being Mean

Tips for Parents & Caregivers of Children who have Experienced Trauma

Top Ten List for Parents Caring for Children with Multiple Diagnoses

Avoiding Power Struggles in Parenting

Additional Resources

Adoption Competency

- North American Council on Adoptable Children, www.nacac.org
- Minnesota Adoption Support and Preservation, www.mnasap.org
- New York State Citizens Coalition for Children, www.nysccc.org
- Child Welfare Information Gateway, www.childwelfare.gov/adoption/
- Child Welfare League of America, <http://cwla.org/programs/adoption/default.htm>
- Spaulding for Children, www.spaulding.org/resourcecenter/index.htm

Attachment

- The Association for Treatment and Training in the Attachment of Children. (ATTCh). www.attach.org
- Child Trauma Academy, www.childtrauma.org

ADHD

- Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD), www.chadd.org

FASD

- The ABCs of FAS/FAE: Teachers Guide and Resource Booklet, www.lcsc.edu/education/fas/FAS.html
- Fetal Alcohol Syndrome, www.come-over.to/FAS/

Parenting Children with Special Needs

- Scholastic, www.teacher.scholastic.com/professional/bruceperry/index.htm
(Internationally known Dr. Bruce Perry lists his published articles on topics such as brain development, attachment, and learning strategies. They are available to be copied by teachers and parents.)

Promising Practice

- www.childwelfare.gov/permanency/overview/mediation.cfm

Fact Sheets

http://archrespite.org/productspublications/arch-fact-sheets#FS_32

FAQs

Please be aware that payment for respite services is reportable income to the Internal Revenue Service. If a respite provider receives payment for providing respite services, a 1099 will be issued and sent to the respite provider. Respite providers need to work with their tax preparer to determine how it should be handled on their individual tax returns.



Part 6 Knowledge Assessment

Answers are True or False

1. A respite provider must complete all the same background checks as a foster parent applicant. True False.
2. A respite provider must be at least 21 years of age. True False.
3. A respite provider may be married or single. True False.
4. All information about the child, their birth/first families, or adoptive and kinship families is considered confidential and must not be shared with others. True False.
5. To provide respite services in my home the Respite Care Provider Checklist, CS-RC2, must be completed by a licensing worker. True False.
6. I have read all the handouts and resources provided for this training. True False.
7. I must be approved and sign a Children's Division Cooperative Agreement to provide respite services for foster parents. True False.
8. Part of the process to be approved to provide respite service requires the respite provider submit fingerprints True False.
9. The respite provider must sign the Resource Parent Discipline Agreement, CD-119 , regarding types of discipline that is not allowed and alternative methods of discipline that may be used to train a child in a positive True False.
10. Respite providers are required to cooperate with the treatment team for the foster youth placed in their home for respite services True False.