



Standardized Respite Tool Questions and Answers

Background:

In 2023, Senate Bill 138 required the Department of Developmental Services (Department) to work with the community to address inequities in how respite services are provided to caregivers. To make the services more consistent across the State, work began on a Family Support Tool that would have been used to determine an individual's need for respite, day care, and personal assistance services.

As part of this work, current policies and procedures were reviewed and analyzed across all regional centers, and even other states. With this information, the Department is now focusing on a standalone respite tool to determine the need for respite services and how many hours can be approved.

Goals for the Standardized Respite Tool are to:

- Create a simple, easy to use assessment that provides statewide consistency.
- Avoid big changes to the respite hours that individuals and families currently get.
- Reduce differences in authorizations among families with similar needs across the 21 regional centers.

All regional centers will be required to adopt the Standardized Respite Tool and use it consistently. The law requires statewide regional center implementation of the Standardized Respite Tool no later than January 1, 2026.

Regional centers across the state have already tested a draft version of the tool. Service coordinators from each regional center also met twice to discuss, review, and revise the draft tool. The Department hosted a [public webinar](#) about the Family Support Tool project on April 10, 2025. The questions included in the document were submitted by the community at that webinar.

Once the Standardized Respite Tool has been adopted, the Department will continue to explore and develop similar tools and procedures for day care and personal assistance services. These additional tools will have goals similar as the respite tool—to make things more consistent across the state and to make sure services are approved more fairly.

General Questions

Q1. What is the Standardized Respite Tool?

A1. The tool is in development. It is intended to determine respite needs directly with individuals and families. The tool includes questions that gather information about the individual including the individual's needs, caregiver stress, special circumstances, and information related to the provision of respite services.

Q2. Is the Standardized Respite Tool finalized?

A2. No. The project team is in the process of completing data analysis on the tool which may result in additional changes to improve or simplify the tool. The project team will also consider feedback provided by individuals and families, as well as service coordinators, before the tool is finalized.

Q3. How can people provide feedback about this process?

A3. A 30-day public comment period will begin July 29, 2025, for the purpose of obtaining feedback from community partners. Anyone can submit comments via E-mail or voicemail. The E-mail address and phone number will be announced on July 29, 2025.

Q4. People will need information about the tool to provide feedback. How will DDS provide information about the tool?

A4. The Department is hosting a public webinar on July 29, 2025, during which people can learn about the draft tool. The draft tool will be posted under the "Respite Assessment Template and Processes" tab on the Department's website at [Standardizing Regional Center Procedures : CA Department of Developmental Services](#) .

Q5. When will the public be able to review the Standardized Respite Tool?

A5. A draft tool will be presented during a webinar and posted on the Department's website on July 29, 2025.

Q6. When is the Standardized Respite Tool expected to be implemented?

A6. Regional centers are required to start implementing the tool in January 2026. The Department will share information about implementation prior to January 2026.

Q7. Can an individual's hours be reduced because of completing the Standardized Respite Tool?

A7. The Department intends for the tool to determine the appropriate level of service. Throughout this process, care will be taken to minimize the risk that the new tool negatively impacts families and/or those receiving respite services from regional centers.

Q8. How will the implementation of the Standardized Respite Tool affect Individual Planning Process (IPP) development?

A8. During the IPP process, the planning team identifies what is happening in the individual's life, what is important to the individual, and lists all the individual's goals and future plans. The IPP will include a list of services and supports that the individual and the planning team agree will help the individual meet those goals. The Standardized Respite Tool will be administered if the IPP includes a need for respite. It will not replace or change the IPP process.

Q9. The Department sometimes experiences delays in implementation. Will there be a delay in the implementation of the Standardized Respite Tool?

A9. Regional centers are required to begin implementation of a standardized respite tool in January 2026. We are on schedule to implement the first quarter of 2026. We will inform the community if our timeline changes.

Q10. Will there be a process and implementation evaluation done after the Standardized Respite Tool is implemented? If so, who will complete this evaluation?

A10. The Department will monitor outcomes and make adjustments as appropriate.

Standardized Respite Tool Questions

Q11. Will the Standardized Respite Tool be translated for Spanish speaking families or other languages?

A11. The Department will translate the tool into the standard threshold languages, including Spanish, as part of the implementation process.

Q12. Will service coordinators be able to use the Standardized Respite Tool during an IPP meeting?

A12. Yes.

Q13. Will the Standardized Respite Tool help service coordinators decide how many hours to authorize?

A13. Yes.

Q14. Will the Standardized Respite Tool determine a need for respite services?

A14. The tool will not determine a need for respite services. The IPP will continue to be used to decide the services a person needs.

Q15. What about individuals and families who just got a diagnosis and don't know what services they need?

A15. The IPP will include a list of services and supports that the individual and the planning team agree will help the individual meet those goals. The tool will be completed with the service coordinator upon determination respite will help meet the IPP goals.

Q16. Will the Standardized Respite Tool be administered to each individual?

A16. The tool will only be used with individuals who need respite services as identified in the IPP.

Q17. Will individuals and families be able to see how the Standardized Respite Tool determines the hours that are authorized?

A17. Individuals and families will be able to see their results on the tool as well as the recommended service hours.

Q18. Will the Standardized Respite Tool be updated for each person on a regular basis?

A18. The tool shall be used at the time of Annual Review/IPP meeting or at the request of the individual/family whenever significant changes occur that impact support needs.

Q19. Can the Standardized Respite Tool only be re-administered when there is a change in services?

A19. The tool shall be used at the time of Annual Review/IPP meeting or at the request of the individual/family whenever significant changes occur that impact support needs.

Q20. Does the Standardized Respite Tool need to be completed every year or only when there is a change in services?

A20. The tool shall be used at the time of Annual Review/IPP meeting or at the request of the individual/family whenever significant changes occur that impact support needs.

Q21. Some individuals and families feel that service coordinators ask for a lot of information, but do not consider the individual's or family's needs when authorizing hours. How will the Standardized Respite Tool address individual and family needs?

A21. The tool is intended to determine respite needs directly with individuals and families. It includes questions that gather information about the individual including the individual's needs, caregiver stress, and special circumstances.

Q22. Will this tool be available and required for early intervention families?

A22. The tool can be administered if a child has a need identified in the Individualized Family Service Plan.

Q23. How will age be considered in the Standardized Respite Tool?

A23. The tool will consider age, specifically, whether the individual is a child or an adult.

Q24. How will the Standardized Respite Tool consider family responsibility to care for their own child?

A24. Current policies on family responsibility will continue to apply with this tool.

Q25. Will the Standardized Respite Tool consider the generic resources that an individual is receiving (e.g., assistance from county childcare programs, Early Periodic Screening, Diagnostic and Treatment Services)?

A25. Yes. According to the Welfare and Institutions Code individuals must use local and community resources before accessing regional center services (see Welfare and Institution Codes Sections [4512](#), [4648](#), [4659](#), and [4644](#)).

Q26. How does In-Home Supportive Service (IHSS) authorized hours impact the hours that will be authorized using the Standardized Respite Tool?

A26. Current policies on generic resources will continue to apply with this tool.

Q27. Will the Standardized Respite Tool ease vendor's intake processes?

A27. The tool is unlikely to impact vendor specific intake processes.

Q28. How will the Standardized Respite Tool prevent explicit and implicit biases, racial biases, and/or biases towards certain skills?

A28. Having a consistent process and tool will assist the regional centers considering the individual's support needs. It does not consider other factors related to culture, race, ethnicity, gender, or other characteristics. The Department welcomes feedback about other ways to improve this process to limit bias.

Service, Billing, and Authorization Questions

Q29. How will the Standardized Respite Tool address inconsistent Purchase of Service (POS) standards across regional centers?

A29. The tool will help to bring consistency across regional centers by creating a consistent process, standardized tool, and an hour framework to be used at all 21 regional centers.

Q30. Should all regional centers be billing the same rates for the same services?

A30. The Department is implementing rate reform across all service types, which does not include regional centers billing the same rates for the same service. Geographical differences may result in slightly different rates from one regional center to the next.

Q31. How will the tool work for my regional center that uses different service codes for respite? For example, I found out that my regional center bills personal assistance for respite services.

A31. DDS intends for the tool to help set the number of hours for services that meet the individual's need for respite.

Q32. Will the tool help to prevent regional centers from telling families they must use IHSS as a replacement for respite?

A32. Current policies on generic resources will continue to apply with this tool.

Q33. What if the individual is getting a service in lieu of another service that they are unable to receive?

A33. Service coordinators should explain why someone cannot get the requested service. If it is due to policy issues, such as seeking respite while a primary caregiver is working, the tool should not be used since use of the service does not follow policy. If the person qualifies for the service, the tool will help set the number of hours needed. For example, if someone needs respite but the regional center uses another service to meet that need, the tool will be used to set hours for respite, regardless of the service code billed for the service.

Complex and Exceptional Needs Questions

Q34. As part of the Standardized Respite Tool, will DDS give any consideration to supporting people with complex needs?

A34. The Standardized Respite Tool gives consideration to supporting individuals with complex needs.

Q35. How will the Standardized Respite Tool help vendors to meet complex needs?

A35. The tool is not intended to determine how vendors deliver services, but rather to determine how many hours they should provide.

Q36. What if the individual and/or family disagrees with the hour authorizations indicated by the Standardized Respite Tool?

A36. The individual and/or family may continue to raise concerns and complaints through existing departmental and regional center processes, including due process.

Q37. What if someone needs additional hours beyond what the Standardized Respite Tool authorizes?

A37. There will be a process for determining if someone needs services in addition to what the tool recommends.

Q38. Will the Standardized Respite Tool remove the need for a regional center to have an "exceptions committee" to award more hours if a family feels the original amount awarded is not enough?

A38. It is expected that existing regional center processes will continue, and the Department will provide direction specific to use of the tool.

Q39. If a family requests an increase in respite, will they need to request these additional hours when the Standardized Respite Tool is implemented?

A39. This is a policy issue that will be considered prior to implementation of the tool.

Questions about Providing Feedback

Q40. The most effective way to obtain diverse feedback from our community is to let individuals provide feedback when information is presented.

A40. DDS will consider this for future presentations.

Q41. If DDS only allows for feedback offered through e-mail, opportunities to provide feedback will be limited as many in the community with valuable feedback do not have access to email or the ability to respond via email.

A41. Hearing this concern, DDS will offer both e-mail and voicemail for people to provide feedback. The E-mail address and phone number will be announced on July 29, 2025.