



*Washington State*  
Department of Social  
& Health Services

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**AL TSA** Aging and Long-Term  
Support Administration

# Enhanced Services Facility

Stakeholder Webinar, Part 2

December 2013

Enhanced Services Facilities Workgroup, AL TSA



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# Webinar Housekeeping

Audience participation:

- If registered, we have your e-mail and you are on our list serv
- If not registered, type your name into the question box at the end of this Webinar

We will let you know when we get to the places to accept questions:

- Participants are muted
- Type your question in the question box and we will address



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# Enhanced Services Facility Webinar, Part 2 Agenda

- Overview of Enhanced Services Facility work to date
- In-depth overview of Draft Contract by Home and Community Services
- Questions from participants

<http://www.altsa.dshs.wa.gov/professional/esf.htm>



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# Enhanced Services Facility (ESF) Overview

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- Revisit purpose of ESFs (who are they for)
- Update on License WAC development
- Update on work related to Contract



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# ESF Overview (continued)

## Timeline

July 2013-December 2013

- Contract and Licensing Development

January 2014-June 2014-

- Procurement of Providers
- Finalize Development of Waiver and License

July 2014-June 2015

- Coordination of moves



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# Reminder of what's different about an ESF

- High staffing ratios
- Enhanced Training Requirements
- Personal Care and Behavioral Health Support
- Rates: budget supports a rate average between \$220-\$265/day



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# Those served by ESF Contract are people moving from state hospitals who:

- Are eligible for ALTSA services
- Have no alternate placement
- **Need high staffing levels**
- Have complex personal and behavioral care needs that exceed capacity of current array of providers/supports



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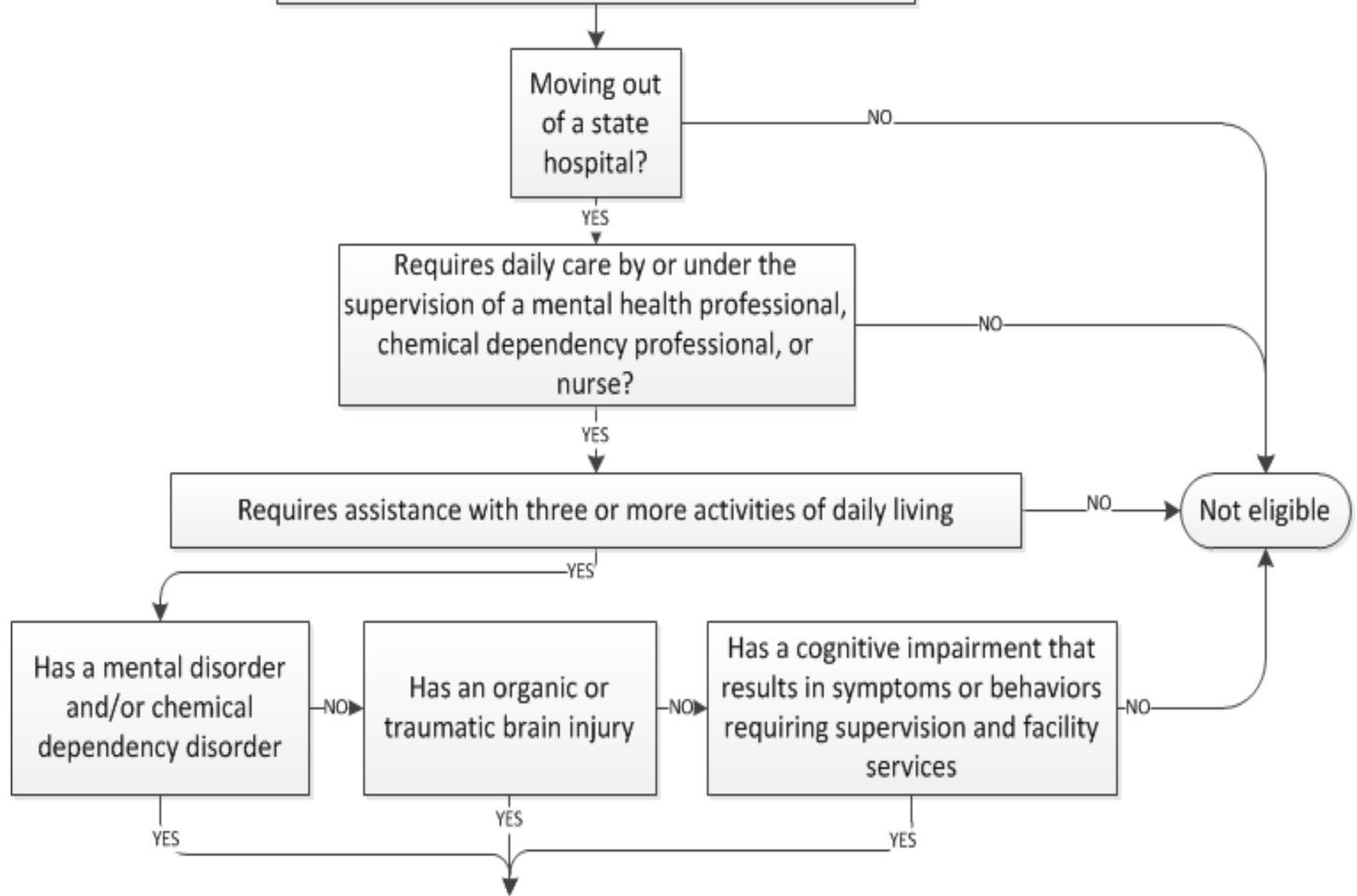
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# Enhanced Services Facility Eligibility Flow Chart

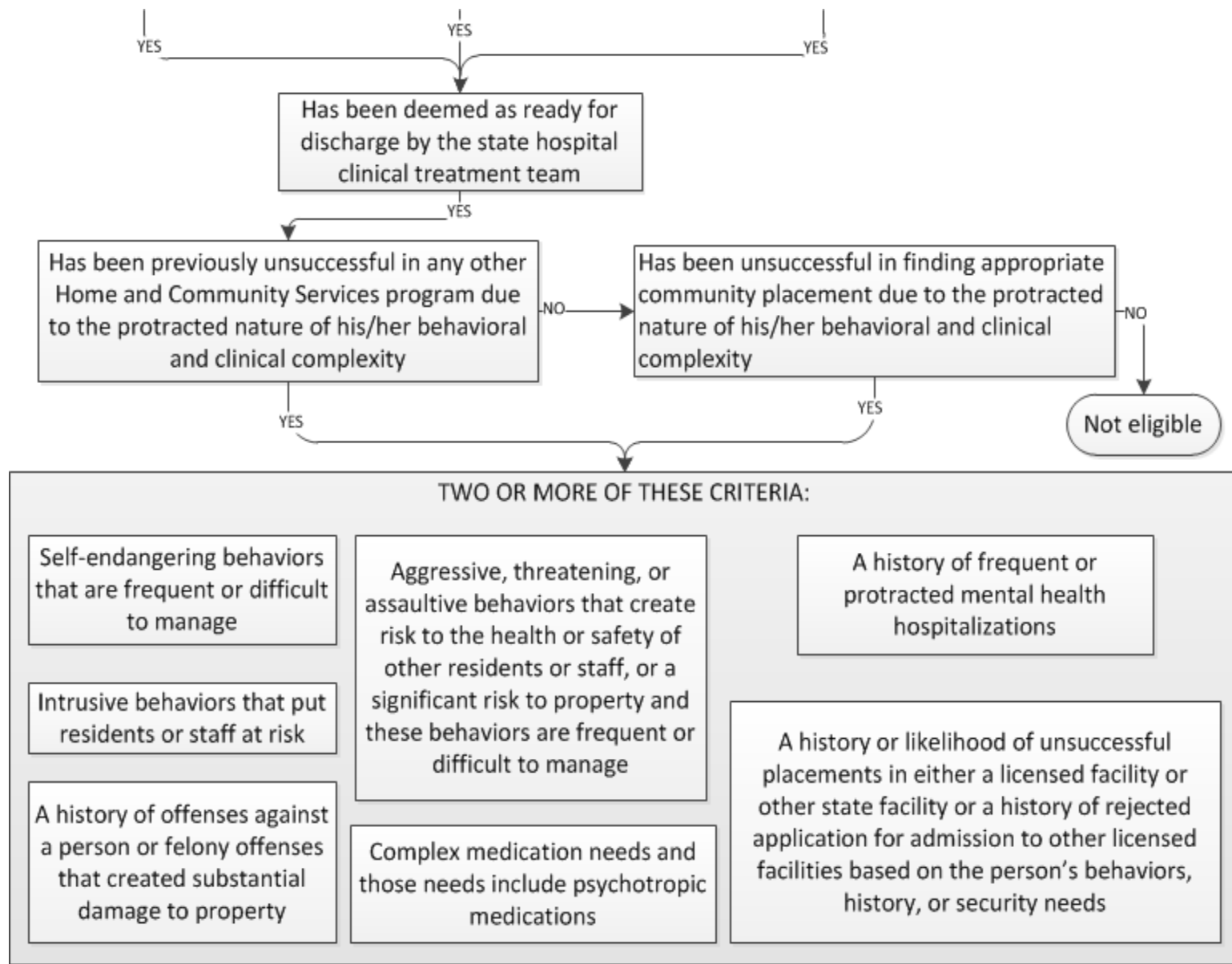
18 Years or older and meet these criteria



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# Funding Considerations

- 42 beds funded this biennium
- Medicaid Clients
- Budget assumes a federal match, therefore we are developing a 1915 (c) Waiver



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# Facility Considerations Based on CMS Waiver Requirements

- Homelike, promotes choice and stability
- Cannot share property with an institution (such as a SNF or psych hospital)
- Individual rooms and/or choice of roommates



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# ESF Program Elements

- Policies for security, safety, transitioning, crisis prevention & discharge planning
- Daily individual and group activities
- Behavior support in the program design
- (Medically necessary MH/CD services would be provided through the RSN )
- Continuous Quality Improvement project



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# Staffing Levels

## Staffing Ratio:

- One (1) staff to three (3) residents; higher if residents' needs require

## Positions counted in the staffing ratios:

- RN or LPN
- Caregiving Staff
- Mental Health Professional 16 hrs./day



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# Staffing

- During the day: At least two (2), regardless of minimum residents
- One awake staff for four residents at night
- RN or LPN on duty at all times
- RN at least 8 hrs and on call
- For medically fragile residents – RN on site 16 hrs and on call the other 8



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# Staffing (continued)

## **DRAFT definition of Medically Fragile**

“Medically fragile” means a chronic and complex physical condition which results in prolonged dependency on specialized medical care that requires frequent daily skilled nursing interventions. If these medically-necessary interventions are interrupted or denied, the resident may experience irreversible damage or death. Examples of specialized medical care and treatment for medically fragile residents include but are not limited to: IV therapies requiring monitoring of vital signs and dose titration dependent on lab values; wound care requiring external vacuum or other mechanical devices for debridement; complicated wound care requiring other specialized or extensive interventions and treatment; ventilator or other respiratory device dependence and monitoring; dependence on licensed staff for complex respiratory support; and peritoneal or hemodialysis (on-site).



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# Training

- AL TSA approved plan (all training must meet the requirements outlined in WAC 388-112-0320)
- Mental health & dementia specialty training for all and developmental disability specialty training as needed
- 10 of 12 CEs for Home-care Aid Certified and in-service for NACs must be relevant to population
- 3 additional hours of training quarterly relevant to population
- Trainer meets training requirements/qualifications outlined in WAC 388-112-0360 (1) (a) (b) and (3)



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# Comprehensive Assessments & Individual Treatment Plan (ITP)

- Complete a Comprehensive Assessment
- Develop one ITP for each ESF resident
- Review & update monthly
- Must include:
  - ✓ An activity section specific to behavioral challenges
  - ✓ Behavior supports designed to prevent crises and maintain placement



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# Contact information

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*Traci Adair*

*Resource Support and Development Unit Manager*

Home and Community Services

adairt@dshs.wa.gov

(360) 725-2455 or (206) 341-7653

*Sandy Robertson*

*Enhanced Services Facilities Program Manager*

Home and Community Services

robersk@dshs.wa.gov

(360) 725-2576

<http://www.altsa.dshs.wa.gov/professional/esf.htm>



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