

REPORT TO THE LEGISLATURE

Enhanced Respite Services for Children Ages 8-18

Engrossed Substitute Senate Bill 6052
Chapter 4, Laws of 2015, Section 205
(Partial Veto)
64th Legislature, 2015 3rd Special Session

January 2, 2018

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1.0 EXECUTIVE SUMMARY

The 2015-2017 biennial budget, and continued thereafter, the Washington State Legislature provided funding for the Developmental Disabilities Administration (DDA) to develop eight enhanced respite beds for children with developmental disabilities ages eight to eighteen. The intent is to provide short-term, statewide, community-based enhanced respite services as an alternative to using respite services in an institutional setting.

2.0 BACKGROUND AND CONTEXT

Legislative Charge

As part of the 2015 legislative session, the Washington State Legislature passed ESSB 6052 that appropriated funds for the development and implementation of eight enhanced respite beds across the state for children. These services provide families and caregivers with a break in caregiving, the opportunity for behavioral stabilization of the child, and the ability to partner with the state in the development of an individualized service plan that allows the child to remain in his or her family home.

ESSB 6052 requires the DDA to develop a respite utilization report by January 2, 2016 and each year thereafter. At a minimum, the report must describe the following:

- (1) The number of children who have used community respite in the preceding year; and
- (2) The location and number of days per month that each bed was occupied.

In 2011, the Washington State Legislature amended RCW 71A.20 through the passage of Second Substitute Senate Bill 5459. The bill directed the Department of Social and Health Services (DSHS) to establish state-staffed community crisis stabilization services. The bill further directed that no person under the age of sixteen years may be admitted to receive services at a Residential Habilitation Center (RHC) and no one under the age of twenty-one may be admitted to receive services at a RHC “unless no service options are available in the community” and that “such admission is limited to the provision of short-term respite or crisis stabilization services.”

As a result there is an increased need for families, who are the majority of providers for children with developmental disabilities, to have an opportunity for respite services in their communities. For families raising children with complex behavioral needs, it is important to have out-of-home respite available that can meet the needs of the child and provide therapeutic supports to both the child and the family.

The goal of these respite services is to provide them in accordance with the Center for Medicare and Medicaid requirements for residential programs. This will include offering these services throughout the state in integrated settings that will support access to community activities when appropriate.

3.0 UTILIZATION AND BARRIERS

Data reflects utilization averages from January through September 2017. There are five contracted community residential providers delivering enhanced respite services.

Enhanced Respite Service Utilization				
Respite Location	Number of persons who utilized service 2016	Number of persons who utilized service 2017	2017 Utilization Rates	Comments
Kennewick	21	16	96%	
Spokane	14	14	91%	Services not utilized in January 2017 due to licensing concerns.
Spokane	6	17	86 %	Contract began September 2016.
Ferndale	22	2	68%	Services on hold since Feb 2017 due to staffing and necessary home modifications
Bonney Lake	27	11	87%	Services not authorized in August and September 2017 due to licensing concerns.

Current Barriers to Accessing Adult Planned Respite Services in the Community

- 1) Providers having trouble hiring and retaining staff that meet the standards defined in the licensing requirements.
- 2) Inability to locate affordable homes and acquire qualified staff due to high rent costs and local minimum wage impacts.
- 3) Once a home is located, extended length of time in order to get a home licensed, including background check clearances.
- 4) Clients experiencing acute crisis require a level of support and intervention that is not immediately available.
- 5) The need for staff to be currently registered and/or certified to provide nurse delegated tasks is shown to be a barrier due to state agency processing timelines.

4.0 Contract and Policy Requirements for Enhanced Respite Service Delivery

- 1) Providers of enhanced respite Services are responsible to:
 - a) Be licensed by DSHS in accordance with Chapter 74.15 RCW and shall meet or exceed the minimum licensing requirements in Chapter 388-145 WAC.
 - b) Provide developmentally appropriate services to families by allowing a short-term break in care giving for their child.
 - c) Employ or contract with a qualified specialist available to train and provide oversight to staff working with the individuals receiving enhanced respite services.
 - d) Provide parents the opportunity to participate in the observation and development of therapeutic teaching and training techniques employed by staff working directly with the child accessing enhanced respite services.
- 2) Additional supports required to meet client health, safety and supervision needs include:
 - a) Provide housing, meals, basic hygiene supplies, furnishings, and clean linens.
 - b) Employ staff who provide physical assistance, support, and protective supervision to the client in their daily routine activities.
 - c) Employ staff who are nurse delegated or are licensed to meet needs when clients cannot self-medicate as defined in DDA Policy 6.19.
 - d) Provide transportation to local community resources including school.
 - e) Provide meaningful, developmentally appropriate activities indoors and within the local community.

Additional Resource Development Measures

- 1) DDA targeted the development of a licensed and contracted facility in Vancouver, WA to meet the enhanced respite need for children and families in the southwestern region. The projected contract begin date is November 2017.
- 2) Statewide resource development continues to be a priority pursuing current contracted and licensed providers who have capacity to develop additional enhanced respite resources in local communities.

Parent feedback regarding utilization of Enhanced Respite Services:

“Staff were respectful, patient, very professional, promptly responsive, understanding and compassionate. Thank you so much.”

“Greg put us at ease and we felt that he and his staff took excellent care of our child.”

“Everything and every step in the entire process exceeded our expectations.”