**Background**

Lakeland Village, in Medical Lake, is one of three state operated Residential Habilitation Centers (RHCs) that have a certified nursing facility component. Like Lakeland, Fircrest School in Seattle is certified as both a nursing facility and an Intermediate Care Facility (ICF). Yakima Valley School in Selah is strictly nursing facility certified. In 2011, all state agencies were required to reduce their budget by 6.3 percent, and this reduction applied to RHCs such as Lakeland Village. Staff at Lakeland Village identified 27 ICF residents who had medical needs that made them appropriate for nursing facility level of care and who were not significantly using or benefiting from active treatment services at the ICF. With the approval of the residents and their family or guardians, some of these individuals were moved to a building designated as a nursing facility, and the others remained where they were and the building was converted to a nursing facility. The NF service level has a slightly lower daily rate than ICF level of care in Washington State.

For all individuals involved, the Lakeland team discussed the NF placement option with families, parents, guardians or legal representatives. All families/guardians involved agreed that the move from ICF to NF level of care was acceptable and appropriate.

Subsequently, Disability Rights Washington (DRW) reviewed these moves and identified issues with the process used by DDA. These issues concern DDA’s failure to assess the 27 individuals using a federally mandated process called the Pre-Admission Screening and Resident Review (PASRR).

PASRR has two components: Levels I and II. The group at Lakeland received the Level I assessment, the purpose of which is to identify all individuals who might have an intellectual disability (ID) or a serious mental illness (MI). They did not receive Level II, which is used to: 1) Confirm whether the person has ID/MI; 2) Assess the need for NF services; and 3) Determine if the individual needs specialized services while in the NF.

The Centers for Medicare and Medicaid Services (CMS), the federal agency that oversees PASRR, investigated and in November 2013 found that DDA violated both PASRR and NF federal rules at Lakeland Village. CMS has imposed penalties and is requiring the State to take corrective action.

**Scope**

Although the scope of the CMS findings is limited to the group of individuals at Lakeland Village, DDA is currently undergoing process improvement activities that apply to admissions at all nursing facilities, both state-operated and community based.

**Current Compliance Efforts**

DDA is committed to having an effective PASRR program that will: 1) Provide a thorough assessment of each individual’s goals, preferences, and support needs; 2) Assure that individuals are appropriately placed and are offered help to access community residential alternatives when those alternatives can meet the person’s needs; and 3) Identify and implement any specialized services needed for the individual to attain optimal physical, mental, and psychosocial well-being. Consequently, DDA is taking the following actions:

* As part of the required corrective action, all of the individuals who were transferred to NF care at Lakeland Village have been reassessed using PASRR and additional services are being provided to those with an assessed need.
* DDA has undertaken the task of reassessing all residents at the three state-operated NFs to assure best practices. This process will be completed by June 30, 2014.
* A PASRR Manual has been developed and is available to all state employees involved in the PASRR program.
* PASRR program managers:
* Are meeting monthly with regional PASRR coordinators, who are located at field services offices and state operated NFs throughout Washington, to provide information, assure uniformity in program administration, and answer questions.
* Have provided training to staff throughout the state who are involved in the PASRR process.
* Have begun using the DDA Assessment as part of the PASRR process. The DDA Assessment is a comprehensive functional evaluation tool designed to measure the individual support needs of persons with developmental disabilities over a broad spectrum of life areas and activities. Use of this tool provides significantly more information to the assessor and allows more individualized recommendations to be made.
* Have coordinated with the Roads to Community Living (RCL) program to refer those living in NFs who are interested in community options. RCL offers services to help people with complex long-term care needs transition from institutional to community settings.
* DDA is an active member of regional PASRR meetings, organized by CMS regional staff and the PASRR Technical Assistance Center (PTAC), to receive advice and information, and to collaborate with other states.
* DDA attends informational and training sessions presented by PTAC on different PASRR topics.
* DDA has teamed with other state agencies, including the Health Care Authority, Home and Community Services Division, Regional Care Services Division, and the Division of Behavioral Health and Recovery to evaluate current practices and coordinate process improvements.
* DDA is investigating upgrades to the DDA Assessment to make it more tailored to the requirements of PASRR.
* DDA has collected census data about people with intellectual disabilities currently residing in NFs and is actively providing outreach to identify those who may be interested in community alternatives to NF care.

**Summary**

DDA has launched Washington’s most significant PASRR process improvement project since PASRR was created in 1987. The administration shares the values set forth in the PASRR program. Accordingly, DDA is committed to provide better assurance that every individual with ID who is referred for NF services has the opportunity of informed choice, and that individualized plans are developed to support maximum independence for people with developmental disabilities in their setting of choice.