Washington State Department of Social and Health Services

Transforming Lives

REPORT TO THE LEGISLATURE

Adult Planned Respite

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

January 2, 2018

Developmental Disabilities Administration Office of the Assistant Secretary PO Box 45310 Olympia, WA 98504-5310 (360) 407-1500 <u>http://www.dshs.wa.gov/dda/</u>



TABLE OF CONTENTS

1.0	Pag Executive Summary	ge 1
2.0	Background and Context	1
3.0	Utilization and Barriers	2
4.0	Contract and Policy Requirements	3

1.0 EXECUTIVE SUMMARY

In the 2015-2017 biennial budget, the Washington State Legislature provided funding for the Developmental Disabilities Administration (DDA) to develop eight planned respite beds for adults with developmental disabilities. These services were fully funded in the 2017-2019 biennial budget. The intent is to provide short-term, community-based, planned respite services across the state as an alternative to using respite services in an institutional setting.

Data from services in 2017 indicate challenges that continue to impact utilization rates. Such barriers include inability to fill the bed timely when cancellations occur; clients' behavioral support needs exceed what can be met in the adult respite setting; and families' choice selecting respite dates that may unintentionally create unused days between requests.

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 community respite beds across the state for adults. These services provide families and caregivers with a break in caregiving as an alternative to using an institutional setting.

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

Currently the large majority of services provided by the DDA are provided in the community, with only a few hundred clients that receive services in Residential Habilitation Centers (RHCs). The community currently has few funded respite options to meet the needs of families to occasionally have an extended rest from caregiving. Because of the lack of community respite, some families use RHCs for respite care. This is a high cost, limited service and can be inconvenient for families who do not live in close proximity to one of the four RHCs.

As the state relies on families as the largest providers of residential supports for individuals with developmental disabilities at a minimal cost, the opportunity for respite across the state is a very important policy decision.

The goal of respite services is to provide them in accordance with the Center for Medicare and Medicaid requirements for residential programs. This includes offering respite 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 four locations where contracted community residential providers deliver adult planned respite services.

Respite	Quarter 1	Quarter 2	Quarter 3	Quarter 4 ¹
Location				
Yakima	45%	56%	72%	Unavailable
Yakima	16%	62%	66%	Unavailable
	(contract			
	began			
	March			
	2017)			
Bellingham	33%	69%	76%	Unavailable
Shoreline	42%	74%	76%	Unavailable

	Quarter 1	Quarter 2	Quarter 3	Quarter 4
Total Number of	16	25	32	25
Clients Served				
2016 (3 contracted				
beds)				
Total Number of	22	39	42	Not available
Clients Served				
2017 (four				
contracted beds				
beginning March				
2017)				

Current Barriers to Accessing Adult Planned Respite Services in the Community

- 1) Difficulty in hiring and retaining staff.
- 2) Ability to locate affordable homes due to high rent costs and local minimum wage impacts.
- 3) Clients experiencing acute crisis require a level of support and intervention that is not immediately available.
- 4) Individuals scheduled for respite have last minute cancellations which results in vacancy and lower utilization rates.
- 5) Client's health and safety needs exceed what a community residential provider can appropriately provide.

 $^{^{1}}$ 4th quarter data is not available until 1/1/2018.

4.0 Contract and Policy Requirements for Adult Planned Respite Service Delivery

- 1) Provide a safe, comfortable environment including:
 - a) Amenities including a bed, bathroom, clean linens, access to cooking facilities, 3 meals and 2 snacks per day
 - b) Compliance with any applicable certification program requirements
 - c) Full ADA accessibility
- 2) Provide adequate supports to meet health and safety needs including:
 - a) 24 hour available staff
 - b) Individual staff attention for some portions of the day when needed to meet assessed needs
 - c) Staff who are trained in accordance with Community Residential Service Business training requirements of WAC 388-829
 - d) Provide access to local community resources, including transportation
 - e) Develop an Individualized Respite Agreement with the family outlining a client's supervision needs and recreational opportunities clients may participate in while accessing respite.

Additional Adult Planned Respite Resource Development Measures

- 1) Targeted development is occurring in Thurston, Spokane, and South King counties. Both duplex and stand-alone options are being considered for optimal delivery of adult planned respite services.
- Statewide resource development continues to be a priority pursuing current certified providers who have capacity to develop additional adult planned resources in local communities.

Family feedback regarding utilization of Adult Planned Respite Services:

"My son experienced tremendous personal growth in just 2 weeks due to the fine care of the staff. At home, he was very resistant to going anywhere, but with the care of the staff, and their encouragement, he went out somewhere every day! This is a <u>great</u> step toward supported independent living. We will definitely request this facility again. Special thanks to Margaret for handling his initial homesickness too! She was like a mom to him."

"The caregivers are all wonderful! It is clear they care about our son."

"It was wonderful for my brother whose disability limits what he can do, but staff made sure he had fun, was happy, entertained and took excellent care of all his needs. There needs to be more places like Elmview!"

Additional Respite Resources

The data represented below outlines the current respite utilization for adults in an RHC during the first three quarters of 2017, in a State-Operated Living Alternative (SOLA), and in an Adult Family Home.

Utilization of Respite for 2017				
Location	Utilization			
Fircrest RHC	15 clients			
Lakeland Village RHC	30 clients			
Rainer School RHC	6 clients			
Yakima Valley School RHC	149 clients			
SOLA respite bed - Spokane	Full approximately 90% of the time			
Various Adult Family Homes ²	24 clients			

² Ability to provide respite in this setting is limited due to provider's lack of expertise supporting people with developmental disabilities and a low reimbursement rate which does not meet the need of many referred for respite services.