BACKGROUND

**RCW 71A.10.020(5)** requires that the Department not use IQ as the sole evidence of substantial limitation when determining eligibility. **Chapter 71A.16 RCW** grants the Department the authority to define rules for eligibility and re-determination of eligibility.

Evidence of substantial limitations of adaptive functioning requires adaptive testing completed in the past 36 months to qualify under the condition of Intellectual Disability, Epilepsy, Autism or Another Neurological or Other Condition similar to Intellectual Disability. Acceptable adaptive tests include the Vineland Adaptive Behavior Scales (VABS), Scales of Independent Behavior-Revised (SIB-R), Adaptive Behavior Assessment System – Second Edition (ABAS-II), or Inventory of Client and Agency Planning (ICAP).

An ICAP will only be administered if there is no Vineland, SIB-R, or ABAS-II score administered within the past 36 months and a qualified respondent is available. If an ICAP is required, only Developmental Disabilities Administration (DDA) staff or a contracted designee may administer the ICAP.

PURPOSE

This policy establishes procedures for the consistent administration of the ICAP for purposes of determining or re-determining eligibility for the Developmental Disabilities Administration (DDA).

SCOPE

This policy applies to all DDA Field Services staff authorized to administer the ICAP.
POLICY

A. DDA shall promote the accurate and consistent administration of the ICAP by the use of initial training and compliance with statewide policy that augments WAC 388-823-0910 through 0940. ICAP training will only be delivered by qualified individuals approved by the Intake and Eligibility Program Manager.

B. DDA will achieve accuracy and consistency through the following:

1. If an applicant is dually diagnosed with a qualifying condition and mental illness, per WAC 388-823-0740 the applicant must provide acceptable evidence that the current adaptive functioning is the result of a developmental disability and not an unrelated injury or illness. If acceptable evidence is not provided, the ICAP results are not considered reliable.

2. When IE staff determines that an ICAP is required, the decision to administer the ICAP must be reviewed per regional procedures and documented in the Comprehensive Assessment Reporting Evaluation (CARE) Service Episode Record (SER).

3. When an ICAP is required, IE staff will administer the ICAP or refer to a supervisor to assign another person trained to administer ICAP.

4. The administration of the ICAP will be limited to those approved by DDA Central Office and trained in ICAP administration.

5. Case Resource Managers will not administer the ICAP for anyone on their caseload.

C. Administration of the ICAP

1. Intake and Eligibility staff will determine if the ICAP respondent is qualified.

   a. There must be at least one (1) qualified respondent who has known the applicant for at least three (3) months and who sees the applicant on a day-to-day basis.

   b. If a qualified respondent cannot be identified, the ICAP will not be administered and eligibility will be determined using available evidence.

   c. More than one respondent may be interviewed to ensure that information is complete and accurate.
d. The applicant must be present during at least one interview to demonstrate skills.

2. Prior to the administration of the ICAP provide the respondent(s) and the applicant with:
   a. DSHS 16-182, Guidelines for Completing the ICAP/SIB-R Adaptive Behavior Scale; and
   b. DSHS 10-329, Informed Consent for ICAP

   c. Prior to administering the ICAP ask the respondents to read and sign the section entitled “Declaration of Understanding” on page three of DSHS 10-329, Informed Consent for ICAP. Each “Declaration of Understanding” will be maintained in the applicant’s Intake and Eligibility file.

3. Offer the respondents the opportunity to be interviewed in private. Document the choice of a private interview was offered in a SER.

4. Provide the respondent with a copy of the ICAP questions.
   a. Use a translator if the respondent requests one.
   b. The ICAP questions are available in Spanish by request from the DDA Central Office.
   c. Include the applicant in the discussion, but direct questions to the respondents.

5. Ask the applicant to demonstrate the following tasks (listed in the ICAP booklet):

   **Motor Skills**: Items #1 through #11, #13, #14, #16, #17, and #18

   **Suggested items for demonstration:**
   - Foam beads in jar
     - Picks up small object (Item #1)
     - Transfers small objects from one hand to another (Item #2)
     - Puts small objects into containers and takes them out again (Item #6)
   - Chair
     - Observe if applicant is able to sit alone for thirty (30) seconds with head and back held straight and steady, without support (Item #3)
• Observe if applicant is able to stand for at least five (5) seconds by holding onto furniture or other objects (Item #4)
• Observe if applicant pulls self into a standing position (Item #5)

Stand/walk
• Stands alone and walks for at least six (6) feet (Item #7)

Crayons and blank paper
• Scribbles or marks on a piece of paper (Item #8)

Foam beads wrapped in foil
• Removes wrapping (Item #9)

Standard round doorknob or handle
• Turns a knob or handle and opens a door (Item #10)

Stairs
• If the ICAP is done in the home and the home has stairs, staff will demonstrate going up and down stairs by alternating feet from step to step (Item #11)

Scissors, thick black marker, and blank paper
• Cuts along a thick straight line (Item #13)

Blank paper and pen
• Prints first name, copying from example (Item #14)

Envelope and previously used paper
• Folds letter into three equal sections and seals it in an envelope (Item #16)

Sewing needle, thread, buttons, felt
• Threads a sewing needle (Item #17)

Note: If client can thread a sewing needle, go to “repairs minor damage to clothing” under Personal Living Skills, Item #21.

Social and Communication Skills: Items #1 through #3, #5, #6, #8 through #10, #14, #17, #18

Suggested items for demonstration:

Informal conversation and observation
• Shakes head or otherwise indicates ‘yes’ or ‘no’ (Item #6)
• Turns head toward speaker when name is called (Item #3)
• Speaks in three or four word sentences (Item #10)

Knife, fork, and spoon
• Hands toys or objects to another person (Item #5)

Common signs/symbols sheet
• Responds appropriately to most common signs, symbols, for example, staff can point to a symbol and ask client to identify it, what it is for, etc. (Item #14)

**Personal Living Skills:** Item #21

*Suggested items for demonstration:*
Sewing needle, thread, buttons, felt
• Sews a button on the felt and/or demonstrates sewing stitches on the felt (Item #21)

**Community Living Skills:** Item #10

*Suggested items for demonstration:*
Informal conversation and observation
• States day, month, and year of birth (Item #10)

6. Reach agreement on the answers review the completed sections with the respondent. Have the respondent initial the bottom of each ICAP section to document their agreement with the recording of their responses.

If a respondent disagrees with a response as marked on the ICAP booklet, review the question and either change the response or note the disagreement on the page with the reasoning for the different conclusion.

7. Score the ICAP using the ICAP computer program.

If administered by a CRM other than IE staff, the ICAP will be sent to an IE worker to:

a. Score and enter the result in the comments section of the CARE IE screen.

b. Enter “DDA” as the collateral contact and the ICAP and the CRM who administered it into the IE documents screen.

8. The staff administering the ICAP may be asked to testify at any appeals involving their assessment results.
EXCEPTIONS

Any exception to this policy must have the written approval of the DDA Deputy Assistant Secretary.

SUPERSESSION:

DDD Policy 11.02
Issued September 4, 2012

Approved:  /s/ Donald Clintsman
Deputy Assistant Secretary
Developmental Disabilities Administration

Date: December 1, 2015