

DEVELOPMENTAL DISABILITIES ADMINISTRATION
Olympia, Washington

TITLE: INTERDISCIPLINARY TEAM 17.06.03

AUTHORITY [42 C.F.R. 483.440](#) *Active Treatment Services*
[42 C.F.R. 483.440\(c\)](#) *Individual Program Plan*
[42 C.F.R. 483.440\(d\)](#) *Program Implementation*
[42 C.F.R. 483.440\(e\)](#) *Program Documentation*
[42 C.F.R. 483.440\(f\)](#) *Program Monitoring and Change*
[Title 71A RCW](#) *Developmental Disabilities*

DEFINITIONS

Active Treatment means aggressive, consistent implementation of a program of specialized and generic training, treatment, health services, and related services directed toward:

1. Acquiring the behaviors necessary for the client to function with as much self-determination and independence as possible; and
2. Preventing or slowing the regression or loss of optimal functional status.

Individual Habilitation Plan (IHP) is a comprehensive plan developed by the individual's IDT that includes a detailed description of the individual's needs, supports, and preferences to aid transition to a less-restrictive environment.

Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) is the facility in which the client resides in and receives active treatment services.

Qualified Intellectual Disability Professional (QIDP) is the person primarily responsible for facilitating the IDT meetings, writing the IHP, maintain oversight of program implementation and is the liaison with guardians/family members. In the facilities this person is also referred to as the Habilitation Plan Administrator (HPA).

PURPOSE

To establish responsibilities of the Interdisciplinary Team.

SCOPE

This policy applies to all employees who serve as a member of an Interdisciplinary Team for a client who resides in an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID) at a Residential Habilitation Center (RHC).

POLICY

- A. Clients residing in an ICF/IID must receive an active treatment program that is aggressive, integrated, coordinated and monitored by a qualified intellectual disability professional (QIDP).
- B. For each client residing in an ICF/IID, the RHC must establish a team of professionals that work cooperatively as members of the client's Interdisciplinary Team.
- C. The Interdisciplinary Team must:
 - 1. Develop the client's Individual Habilitation Plan (IHP);
 - 2. Meet at least once every 365 days, or more often if the client's needs change; and
 - 3. Strive to eliminate or reduce restrictive programs, activities, and procedures from the client's IHP.
- D. The Interdisciplinary Team must include:
 - 1. The client;
 - 2. The client's family or guardian; and
 - 3. RHC facility staff.
- E. The interdisciplinary team may include personnel from:
 - 1. A school; or
 - 2. An organization that supports the client's specific needs.
- F. The Interdisciplinary Team may include professionals with expertise necessary to meet the client's specific needs, such as:

1. Physical development;
2. Health;
3. Nutritional status;
4. Sensorimotor development;
5. Affective development;
6. Speech and language development;
7. Auditory functioning;
8. Cognitive development;
9. Vocational development;
10. Social development;
11. Adaptive behavior; and
12. Independent living skills.

G. Each RHC employee on the Interdisciplinary Team must:

1. Complete assessments and maintain current and accurate information;
2. Review documents;
3. Provide hands-on assistance to a client throughout development and implementation of the client's programs, which includes assessment of the program prior to implementation;
4. Be familiar with the plans that are developed;
5. Monitor staff implementation of the plans;
6. Monitor data collection for validity; and
7. Talk with staff to determine need for any modifications to the plan.

PROCEDURES

A. The client's role in the Interdisciplinary Team

1. The client is the most important member of the Interdisciplinary Team and is the focal point of the planning and decision-making process.
2. To the best of their ability, the client must be:
 - a. Consulted and considered in all decisions affecting the client and their care, thus creating a person-centered IHP; and

- b. Included in the Interdisciplinary Team meetings to participate in the decision making process.

B. The family or guardian's role in the Interdisciplinary Team

- 1. The client's family or guardian advocates for the client and works with the Interdisciplinary Team to provide services that support the client to live as independently as possible.
- 2. The client's family or guardian is encouraged to:
 - a. Participate in the Interdisciplinary Team process;
 - b. Provide input that helps determine the client's needs;
 - c. Provide input for plans to meet the client's needs;
 - d. Participate in decision-making;
 - e. Review and sign informed consent forms;
 - f. Notify other Interdisciplinary Team members of concerns, wishes, and objections; and
 - g. Advocate for the client's appropriate placement.

C. The Habilitation Plan Administrator's role in the Interdisciplinary Team

- 1. The Habilitation Plan Administrator manages the Interdisciplinary Team process, which includes:
 - a. Scheduling and facilitating Interdisciplinary Team meetings;
 - b. Ensuring appropriate members are present at each meeting;
 - c. Encouraging participation by all members;
 - d. Resolving issues and conflicts within the team;
 - e. Maintaining contact with the client's family, guardian, non-health related outside agencies.

2. The Habilitation Plan Administrator manages the client's Individualized Habilitation Plan, which includes:
 - a. Writing the Individual Habilitation Plan;
 - b. Distributing the Individual Habilitation Plan to the remaining IDT members;
 - c. Training staff to implement the Individual Habilitation Plan;
 - d. Ensuring all assessments are complete and included in the Individual Habilitation Plan;
 - e. Monitoring data and program implementation;
 - f. Revising the Individual Habilitation Plan during regularly scheduled review, or more often if needed.

SUPERSESSION

RHC Standard Operating Procedure 103.2, *Interdisciplinary Team*
Issued May 15, 2018

Approved:  Date: May 15, 2018¹
Deputy Assistant Secretary
Developmental Disabilities Administration

¹ This document was a standard operating procedure that was reissued as a DDA policy without substantive changes.