

DEVELOPMENTAL DISABILITIES ADMINISTRATION Olympia, Washington

TITLE: ADULT FAMILY HOME SERVICES 4.08

Authority: Title 71A RCW Developmental Disabilities

<u>Chapter 70.129 RCW</u> Long-Term Care Resident Rights

<u>Chapter 388-71 WAC</u> Home and Community Services and Programs

<u>Chapter 388-76 WAC</u> Adult Family Home Minimum Licensing

Requirements

BACKGROUND

The Developmental Disabilities Administration (DDA) plays a key role in the quality, oversight, and technical assistance of department-funded adult family home (AFH) services provided to DDA clients. The Aging and Long-Term Support Administration's (ALTSA's) Residential Care Services (RCS) is responsible for Chapter 388-76 WAC, *Adult Family Home Minimum Licensing Requirements*, and the oversight of AFH licenses. Contracts for AFH services are the responsibility of ALTSA's Management Services Division (MSD).

PURPOSE

This policy establishes procedures for referring clients to AFHs, case management activity, and a quality improvement system of support and oversight for AFHs providing services to DDA clients age 18 or older.

SCOPE

This policy applies to DDA case resource managers (CRMs) who authorize AFH services and performance and quality improvement specialists (PQISs) who monitor AFH services.

DEFINITIONS

Adult family home or AFH means a residential home in which a person or an entity is licensed to provide personal care, special care, room, and board to more than one but not more than six adults who are not related by blood, adoption, or marriage to a provider, entity representative, resident

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manager, or caregiver, who resides in the home. An adult family home may be licensed to provide care to up to eight adults if the home receives approval under WAC 388-76-10031 or 388-76-10032.

Client means a person who has a developmental disability as defined in RCW 71A.10.020 and has been determined DDA-eligible under chapter 388-823 WAC.

Community integration means facilitating a client's full access to the community, including opportunities to seek employment and work in competitive, integrated settings, engage in community life, control their own personal resources and receive services in the community in the same manner as people without disabilities.

Community integration (Add-on) means additional supports for AFH clients to access their local community and participate in activities that they choose. Participating in community activities also means making new connections with people and developing friendships.

Consent means express written consent granted after a client or the client's legal representative has been fully informed of the nature of the services to be offered and that the receipt of services is voluntary.

CRM means DDA case resource manager, social worker, and social service specialist.

DDA means the Developmental Disabilities Administration, an administration of the Department of Social and Health Services and its employees and authorized agents.

DDA specialty training means DDA-approved curriculum that provides information and instruction on meeting the specialized needs of people with intellectual and developmental disabilities.

DSHS means the state of Washington Department of Social and Health Services and its employees and authorized agents.

Guiding values means DDA's values system, which can be used to support individual choices, form a framework for person-centered planning, direct quality supports and services, advocate for resources, drive policies and system evolution, and provide a way to evaluate efforts. The <u>DDA</u> <u>Guiding Values</u> are available on DDA's homepage.

Integrated setting means a setting that is integrated in and supports full access to the greater community with opportunities to engage in community life, control personal resources, and receive services in the community to the same degree of access as people not receiving Medicaid Home and Community-Based Services.

Legal representative means a person's legal guardian, a person's limited guardian when the subject matter is within the scope of the limited guardianship, a person's attorney at law, a

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person's attorney in fact, or any other person who is authorized by law to act for another person.

Mandated reporter means any person working with vulnerable adults required by law to report incidents of abandonment, abuse, neglect, and financial exploitation under chapter 74.34 RCW.

Meaningful Day or MD is a research-based method for AFH providers to create proactive and individualized strategies to engage clients in meaningful activities based on the client's interests, life experiences, and preferences. This targeted approach to service planning includes meaningful activities designed to increase activity participation, refocus behavior, and improve the client's quality of life and continuity of care.

Meaningful Day or MD (Add-On) means additional supports for eligible DDA clients who experience frequent and intense behaviors. It is available for clients who live in a licensed and DSHS-contracted adult family home and have a behavior point score of 12 or higher or have a diagnosis of dementia, such as Alzheimer's Disease, with current behaviors.

Negotiated care plan or **NCP** means a document completed within 30 days of admission using the client's DDA assessment and must include a list of the care and services to be provided with details on the client's preferences and choices, and how services will be delivered to accommodate these preferences and choices. The AFH provider must ensure that the negotiated care plan is agreed to and signed and dated by the client and AFH provider.

Person-centered service plan or **PCSP** means a document that identifies a person's goals and assessed health and welfare needs. The person-centered service plan also indicates the paid services and natural supports that will help the person achieve their goals and address assessed needs.

Regulation means any federal, state, or local law, rule, ordinance, or policy.

POLICY

Case resource managers must comply with state law, rules, and policies governing adult family homes and personal care when authorizing a service for a client residing in an AFH.

PROCEDURES

- A. Referral process for accessing services in an AFH.
 - 1. The CRM must work with the PQI when making a referral to an AFH and consider the following components in addition to the personal preferences of the client or their parent or legal representative:

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- a. Personal preferences of potential roommates;
- b. Provider's ability to meet the client's health, safety, and programmatic needs;
- c. Needs of people living in the AFH, including safety and protection needs;
- d. The AFH has a current license, capacity, and contract;
- e. Provider's areas of expertise;
- f. "DD Specialty" is listed under the AFH contract in the AFH Locator;
- g. Current RCS Enforcement Actions against the AFH(s) the client is interested in; and
- h. Any enforcement actions listed in the AFH locator for AFHs selected.

2. The CRM must:

- a. Update the person-centered service plan, including the addition of Community Integration and Meaningful Day, if the client has an unmet need and is interested in and eligible for the add-ons.
- b. Follow the procedures outlined in <u>DDA Policy 4.01</u>, *One Referral*, to assemble the referral packet.
- c. Send the referral packets to the AFH providers selected by the client or their legal representative, if applicable and collect provider responses.
- d. Inform the PQIS of any updates.
- e. Follow all processes and procedures required once a provider is selected, including:
 - i. Arranging a nurse delegation assessment, if needed;
 - ii. Completing the planned action notice; and
 - iii. Completing DSHS payment system authorization.

- 3. For all DDA AFH clients eligible for Community First Choice residential services, the CRM must:
 - a. Participate in or provide input to the negotiated care plan developed by the AFH provider when requested per <u>WAC 388-76-10370</u>.
 - b. Review NCPs that AFH providers are required to submit per WAC 388-76-10385 and compare it to the client's current DDA assessment. If the NCP does not address all of the client's care needs, the CRM must have a discussion with the AFH provider regarding how the client's care needs will be met. The CRM must document in a service episode record the receipt, review, and any concerns regarding the negotiated care plan.
 - c. Inform PQIS before, or as soon as possible, when a DDA client moves into or out of an AFH.
 - d. Share critical incidents and AFH concerns with PQI staff in addition to any mandatory reporting to regulatory and investigative authorities.
 - e. Discuss technical assistance requests for clients residing in an AFH with PQIS.
- B. Monitoring and Quality Improvement

PQIS must:

- 1. Review AFH settings and services in relationship to AFH regulations.
- 2. Visit an AFH after any client's initial move. The PQI staff must communicate with the CRM before and after the visit.
- 3. Ensure the AFH has a current license and contract.
- 4. Observe how staff interact with a client and how services are being provided while visiting an AFH for a scheduled visit. The PQI staff must record any observations that demonstrate how the AFH is providing services in alignment with the following DDA Guiding Values:
 - a. Inclusion;
 - b. Status and contribution;
 - c. Relationships;
 - d. Power and choice;
 - e. Health and safety; and
 - f. Competence.

- 5. Perform the following tasks according to regional protocol:
 - a. Collect and maintain data for quality improvement and oversight purposes, such as:
 - i. Initial and subsequent quality improvement and oversight visits;
 - ii. Moves to AFHs;
 - iii. AFH specialty training; and
 - iv. Technical assistance.
 - b. Provide consultation and assistance to CRMs regarding AFHs.
 - c. Document feedback to the AFH provider given verbally or in writing.
 - d. Review requests for technical assistance and forward to the appropriate regional contact, and provide input when requested.
 - e. Notify RCS and other staff and individuals, as appropriate, when there are concerns about an AFH provider or a client.
 - f. Review RCS complaint investigation reports and incident reports.
 - g. Coordinate and schedule DDA AFH trainings.
 - h. Act as a DDA liaison with regional RCS staff and other entities associated with AFH services, as appropriate.

EXCEPTION

Any exception to this policy must have the prior written approval of the Deputy Assistant Secretary or designee.

SUPERSESSION

DDA Policy 4.08, *Referral, Monitoring, and Quality Improvement of Adult Family Home Services* Issued June 1, 2017

Approved:

Deputy Assistant Secretary

Developmental Disabilities Administration

Date: August 1, 2024

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