DEVELOPMENTAL DISABILITIES ADMINISTRATION
Olympia, Washington

TITLE: ALTERNATIVE LIVING SERVICES POLICY 4.09

Authority:

- Chapter 71A RCW: Developmental Disabilities
- Chapter 388-825 WAC: DDA Services Rules
- Chapter 388-828 WAC: DDA Assessment
- Chapter 388-829A WAC: Alternative Living

PURPOSE

This policy describes the expectations and requirements for Alternative Living (AL) services.

SCOPE

This policy applies to all Field Services offices of the Developmental Disabilities Administration (DDA) and DDA-contracted Alternative Living (AL) service providers.

DEFINITIONS

Goals means what a client wants to accomplish with the assistance of his or her alternative living provider.

Habilitation means services delivered by residential service providers intended to assist persons with developmental disabilities to acquire, retain, and improve the self-help, socialization, and adaptive skills necessary to reside successfully in a home and community-based setting.

Instruction means an active process of teaching a particular skill or subject to help a client gain greater independence or maintain current skills and abilities.

Person-Centered Service Plan or PCSP means the plan developed by the DDA Case Manager, the client, the client’s legal representative, and the client’s service providers.

Support means the implementation of services provided to meet assessed needs.
POLICY

A. AL services must be provided in an integrated setting that facilitates the client’s full access to the greater community, including opportunities to seek employment and work in competitive, integrated settings, engage in community life, control personal resources and receive services in the community in the same manner as individuals without disabilities. AL services must be provided in a way that promotes:

1. The client’s essential personal rights of privacy, dignity and respect and freedom from coercion and restraint are protected.

2. The client’s initiative, autonomy and independence in making life choices, including but not limited to, daily activities, physical environment and with whom to interact are optimized and not regimented.

3. The client’s choice of whether or not to provide their AL provider with a key to their home.

4. The client’s freedom and support to control their own schedules and invite visitors into their home.

5. The client’s responsibilities and protections from eviction under the landlord tenant law of the state of Washington, county, city or other designated entity as the general public. The client’s home is a specific physical place that can be owned, rented, or occupied under another legally enforceable agreement by the individual receiving services.

B. AL service providers are independent contractors who focus on community-based, individualized, habilitative training to enable a client to live as independently as possible with minimal residential services. AL is a service option available to clients on the Core Waiver based on assessed need.

Note: Clients receiving AL services before December 1, 2009, who are not on the Core Waiver may continue to receive this service without requiring an exception. However, an exception to rule is required for clients who are not on the Core Waiver if AL services have been terminated and reinstatement is requested.

1. The AL service provider’s primary function is to teach new skills that result in greater individual client independence while promoting the following DDA Guiding Values:

   a. Health and safety;
   b. Power and choice;
   c. Status and contribution;
   d. Inclusion;
e. Relationships; and
f. Competence.

2. The AL provider may help the client complete the tasks as they are being taught, however AL services are not intended to provide ongoing protective supervision or activities of daily living support.

C. The AL provider must offer habilitative services in areas identified in the client’s Person-Centered Service Plan (PCSP) and DSHS 10-269, Alternative Living Services Plan and Provider Report (PCSP Addendum). The provider must deliver one-to-one training and support in a typical community setting in a manner appropriate to the client’s age and preferences.

D. The CRM must identify the areas of training appropriate in the client’s PCSP and DSHS 10-269, Alternative Living Services Plan and Provider Report (PCSP Addendum). The client may receive training and minimal assistance in relation to the training task in the following areas:

1. **Establishing a Residence**, including how to:
   a. Locate a residence;
   b. Complete a change of address form;
   c. Start or stop utility services;
   d. Manage contractual obligations, such as deposits, insurance, or landlord-tenant agreements; and
   e. Acquire basic furnishings and food.

2. **Home Living**, including:
   a. **Personal hygiene**, such as how to maintain personal cleanliness and appearance, and choose weather- and activity-appropriate clothing;
   b. **Food and nutrition**, such as how to plan a meal, prepare and store food, and understand basic nutrition and diet information; and
   c. **Home management**, such as how to perform housekeeping activities, launder and store clothing, maintain a yard, use household appliances, and apply home safety practices.
3. **Community Living**, including:
   
a. **Public and private community services**, such as how to access the Social Security Administration (SSA), Supplemental Security Income (SSI), Public Utility District (PUD) assistance, affordable housing, food stamps, phone discounts, utility discounts, food and clothing banks, and homeless shelters;

b. **Essential shopping**, such as how to shop for food, clothing, or household items, make lists, locate sales, comparison shop, use coupons, discounts, and debit or credit cards;

c. **Transportation**, such as how to use public transportation or a taxi, access specialized transportation, study the driver’s manual and practice for licensing testing, maintain a car or bicycle, and practice traffic and pedestrian safety; and

d. **Planning leisure time activities**, such as how to identify interests, locate recreational facilities and activities, and plan vacations.

4. **Health and Safety**, including:
   
a. **Understanding personal safety and emergency procedures**, such as how to call for and ask for help, create and post emergency numbers, attend a first aid class, protect oneself and one’s personal possessions, decrease vulnerability, increase assertiveness, and have situational awareness;

b. **Physical, mental, and dental health**, such as how to follow prescribed diet and exercise, practice healthy sexuality, follow a prescribed medication routine, manage illness or injury, schedule appointments and access medical, therapy, dental, and mental health care appointments; and

c. **Developing and practicing an emergency response plan to address natural and other disasters**, such as how to locate emergency shelters, build and maintain an emergency kit and supplies, evacuate in an emergency, and follow emergency directions.

5. **Social Activities**, including:
   
a. **Social skills**, such as how to interpret social cues and non-verbal communication, use active listening skills, negotiate with others, work with others to solve problems and make decisions, and advocate for oneself;
b. **Community integration**, such as how to volunteer, explore cultural, recreational, leisure, or spiritual activities in the community, and develop relationships with and participate in community clubs, organizations, and other public groups; and

c. **Positive relationships**, such as how to build and maintain relationships with family, friends, and other community members.

6. **Protection and Advocacy**, including:

a. **Money management and budgeting**, such as how to pay bills and maintain financial records, establish and follow a monthly budget, count money and make change, reconcile bank statements, file tax returns, report wage earnings to SSI, and access consumer credit counseling;

b. **Protecting self from exploitation**, such as how to recognize and manage relationships that may pose a danger or risk;

c. **Making choices and decisions**, such as how to make informed choices and weigh consequences, and take responsibility for personal decisions; and

d. **Asserting rights and finding advocacy**, such as how to seek help and guidance when needed.

7. **Other training and support to assist a client to live independently**, such as helping the client manage significant life events.

E. **Eligibility Criteria for AL Services**

1. AL is a service option available to clients on the Core Waiver. Case Resource Managers (CRMs) will review potential service options with clients and families based on the client’s assessed needs, skills, abilities, and interests.

2. A client must be at least 18 years old and authorized by DDA to receive AL services.

3. AL services are offered by providers to clients who live in or are establishing their own home. The home must be owned, rented, or leased by the client or his or her legal representative.

4. Under [WAC 388-829A-070](https://www.wa.gov/dshs/medical/services/registration-requirements/rules/section-829a), AL services must not be offered in the provider’s home.
5. A client must live outside of his or her parent’s home, or be actively planning to move out of the parent’s home within the next six months as identified in the client’s PCSP.

6. A client who receives AL services must pay for daily living expenses - such as rent, utilities, and food - using his or her personal financial resources.

F. Residential Allowance Requests

AL clients may be able to access Residential Allowance requests if available and approved. Please see DDA Policy 6.11, Residential Allowances Requests, for direction.

PROCEDURES

A. Service Identification

1. The CRM must identify the client’s needs in the client’s DDA Assessment. If AL services are being considered and the client is not on the Core Waiver, the CRM must consult with his or her supervisor and the regional Resource Manager Supervisor, and submit a Core Waiver request if appropriate.

2. For clients on the Core Waiver and requesting AL, the authorization requires prior approval from the Resource Management Administrator (RMA) or designee.

B. Referral

1. Before sending a client’s referral packet to AL service providers, the CRM must obtain signed DSHS 14-012, Consent form from the client, or the client’s legal representative if applicable. The form must have been signed within the last 12 months.

2. DDA will consider the following factors when reviewing a request for AL services, identifying potential AL service providers, and distributing referrals:
   a. Personal preference of the client being referred;
   b. Legal representative requests;
   c. Provider’s ability to meet the client’s health, safety, and program needs.

3. The CRM will identify the current needs of the client and complete the referral packet. The referral packet must include all of the following:
   a. DSHS 14-012, Consent;
   b. The client’s current DDA Assessment and PCSP;
c. The client’s legal representative and NSA’s contact information;

d. Dates, sources, and copies of the client’s most recent psychological or mental health evaluations, including any behavioral and psychiatric information and treatment plans;

e. The client’s Functional Assessment, Positive Behavior Support Plan, and Cross-System Crisis Plan, if developed;

f. A summary of incidents that warranted an Incident Report (IR) involving the client within the past 12 months, including behavioral incidents and medical issues;

g. The client’s criminal history, if applicable;

h. An Individualized Education Plan (IEP) if the client is currently in school; and

i. DSHS 10-234, Individuals with Challenging Support Issues, if the client is an adult who has a history of challenging support issues.

C. Authorization

1. Prior approval from the RMA or designee is required for initial authorization of AL services only.

2. Once approved for services, AL can be authorized for up to one year. Services and supports must be reviewed annually at the time of the DDA Assessment, or more frequently if necessary, to determine if AL continues to be an appropriate service option.

D. Assessment

1. The CRM will meet with the client - preferably in the client's home - at least annually to complete the DDA assessment.

2. In the PCSP, the CRM will identify the client’s AL service, AL service provider, and number of monthly service hours to be authorized based on the habilitation needs identified in the PCSP. The maximum number of hours allowable is 40 per month. Specific habilitation goals are identified on DSHS 10-269, Alternative Living Services Plan and Provider Report (PCSP Addendum), and are referenced in the Finalize Plan section of the PCSP, under the tab titled "Other Plans."
3. The client, AL service provider, and the client’s legal representative if applicable, will review the client’s PCSP and develop habilitation goals that focus on increasing the client’s independence.

4. The CRM must review and revise the AL Services Plan:
   a. At least annually as part of the DDA Assessment;
   b. If the client decides they no longer want assistance with a particular task; and
   c. If the CRM, client, or AL service provider believes a goal has been met and does not require further intervention.

5. Habilitation goals will focus on aspects of a person's life to assist them in learning or maintaining independence. Consideration will be given to hours needed to maintain skills learned as well as new skill acquisition. For example, a client may focus on learning to prepare breakfast meals and then progress to lunch meals before moving on to dinner meals.

6. The number of hours assigned for each goal will be modified as the client acquires skills. The CRM will determine if and when the client would benefit from fading the AL service hours over time. CRM discretion for modifying hours is determined by measureable outcomes described in the AL Services Plan and Provider Report and evidenced through mandatory quarterly reports and client discussion.

7. The CRM will review all written reports from the provider for compliance with the habilitative goals specified in the client’s PCSP. The CRM will initial and file all written reports submitted by the AL service provider and document in the Service Episode Record (SER).

E. **Provider Duties and Requirements**

AL service providers must:

1. Participate in the client’s PCSP and AL Services Plan development, review, and revision;

2. Use teaching techniques that include step-by-step instruction, mentoring, role modeling, and developing visual cues as appropriate to the client’s needs and preferred learning style. Positive behavior support principles based on individual dignity and respect must be emphasized in all services as required by [DDA Policy 5.14, Positive Behavior Support](#); and
3. Submit the following written records and reports to the CRM:

   a. DSHS 10-269, Alternative Living Services Plan and Provider Report (PCSP Addendum). This monthly report must:

      1) Describe the type and extent of services provided to the client during that time period;

      2) Be signed by the client, the client’s legal representative, and the provider; and

      3) Be completed monthly and submitted at least quarterly. These reports are due by the tenth day of the month following the reporting period.

   b. DSHS 10-104B, Service Verification and Attendance Record. This record must:

      1) Reflect actual hours of service and mileage associated with providing services;

      2) Be signed by the client or the client’s legal representative, and the service provider; and

      3) Be submitted monthly by the tenth day of the month following the reporting period.

   c. DSHS 23-034, Alternative Living Financial Report. This report must:

      1) Be submitted if the AL provider supports the client with money management and is also the client’s payee;

      2) Be signed by the client, the client’s legal representative, the provider, and the CRM; and

      3) Be submitted monthly by the tenth day of the month following the reporting period.

   d. Incident Reports per DDA Policy 6.12, Incident Management and Reporting Requirements.

4. Maintain a copy of all documents submitted to DDA for six years.
F. **Required Training**

1. Effective January 1, 2016, new AL service providers must meet all training requirements that apply to community residential service businesses under chapter 388-829 WAC.

2. AL service providers must document that these requirements have been met, submit the training documentation to the DDA Case/Resource Manager or regional designee, and make the documentation available to DDA staff at the time of the evaluation. DDA will reimburse the provider for the class time;

3. AL providers must complete at least 12 hours of continuing education each calendar year after the calendar year in which they successfully complete 70 hours of Basic Training and five hours of Orientation and Safety Training. The continuing education must be on topics relevant to supporting people with developmental disabilities or adult teaching techniques and approved by the DDA Case/Resource Manager or Regional Designee.

G. **Oversight and Quality Assurance Monitoring Plan**

DDA monitors AL services and providers as follows:

1. The CRM must:
   
   a. Visit the client’s home at least annually;
   
   b. Review all written reports from the provider for compliance with the instruction and support goals specified in the client’s AL Services Plan, and follow up with the AL service provider as needed; and
   
   c. Initial and file all written reports submitted by the AL service provider and document in SERs.

2. Performance and Quality Improvement (PQI) staff will conduct quality assurance interviews of AL service providers and clients who receive AL services. If the quality assurance interview indicates concerns, staff will develop a corrective action plan. The corrective action plan must:
   
   a. Outline methods for the provider to comply with the requirements; and
   
   b. Provide a timeframe for completion of the corrective actions.

3. In addition to other reasons stipulated in the contract, DDA may deny payment or terminate the contract if the corrective actions are not completed within the specified timeline.
EXCEPTIONS

The Resource Manager Administrator may grant a written exception to the monthly maximum hours allowable if there is a documented need for additional teaching and training. Any other exception to this policy must have the prior written approval of the Deputy Assistant Secretary.

SUPERSESSION

DDA Policy 4.09
Issued July 1, 2015

Approved: /s/ Donald Clintsman Date: July 1, 2017
Deputy Assistant Secretary
Developmental Disabilities Administration