BACKGROUND

The Washington State Legislature provided funding in the 2015-17 Biennial Budget to develop eight planned respite beds for adult individuals, age 18 or older, with developmental disabilities. The service is to provide short-term community based planned respite services across the state as an alternative to using services in a Residential Habilitation Center (RHC).

PURPOSE

Overnight Planned Respite Services (OPRS) for adults are intended to enable DDA enrolled individuals, who meet eligibility criteria, access to respite in a Developmental Disabilities Administration (DDA) contracted and certified residential setting. These services are intended to provide families and caregivers with a break in caregiving and to create additional capacity to serve the short-term needs of adults with developmental disabilities.

This policy describes the Administration’s expectations regarding the use of Overnight Planned Respite Services for adults.

SCOPE

This service is available to DDA clients age 18 or older who live at home with their family. Family members may be paid or unpaid care providers. This service is also available to clients living at home with nonfamily members who are not paid to provide care for the client. The
client’s support needs must be safely accommodated in available contracted and certified settings.

DEFINITIONS

Adult Respite Service Committee means the committee designated by the Deputy Assistant Secretary that reviews and processes all adult respite requests.

CARE means the Comprehensive Assessment and Reporting Evaluation tool.

Certified means a certification issued by the Developmental Disabilities Administration to an agency providing services in a community-based setting.

DDA Assessment refers to the standardized assessment tool, as defined in Chapter 388-828 WAC, used by DDA to measure the support needs of persons with developmental disabilities.

Department means the Washington State Department of Social and Health Services.

Developmentally appropriate services means structured interventions that focus on each individual’s unique differences and build healthy foundations of emotional, social, and intellectual development by assisting all providers, direct support staff, and therapists to tailor the approach to the individual’s unique developmental profile.

Family means relatives who live in the same home with the eligible client. Relatives include spouse or registered domestic partner, natural, adoptive, or stepparent, grandparent, child, stepchild, sibling, stepsibling, uncle, aunt, first cousin, niece, or nephew.

Planned means a specific timeframe for respite services including arrival and discharge dates.

Positive Behavior Support means an approach to addressing challenging behavior that focuses on changing the physical and interpersonal environment and a person’s skill deficits so the person is able to get his or her needs met without having to resort to challenging behavior. Positive behavior support must be emphasized in all services funded by DDA for persons with developmental disabilities.

Residential Habilitation Center (RHC) means a state-operated facility certified to provide intermediate care for individuals with intellectual disabilities or nursing facility level of care for persons with developmental disabilities.

Overnight Planned Respite Services (OPRS) means services intended to provide short-term intermittent relief for persons who live with the DDA client as the primary care provider and are either (1) a family member (paid or unpaid) or (2) a nonfamily member who is not paid. These services provide person-centered support, care, and planned activities for the client in the community.
POLICY

A. To be eligible for OPRS, the adult client must:
   1. Be eligible for DDA services under RCW 71A.10.020 (3) and chapter 388-823 WAC;
   2. Be 18 years of age or older;
   3. Live in the family home; and
   4. Be approved for the service by the statewide Adult Respite Service Committee.

B. OPRS is intended to produce the following outcomes:
   1. Families will receive a short-term break in the ongoing support they provide for
      the individual; and
   2. The individual will receive developmentally appropriate services in a certified
      community-based setting.

C. OPRS hours will not affect the individual’s assessed waiver respite hours.

D. OPRS cannot exceed 14 days in a calendar year.

E. OPRS can only be scheduled up to 90 days in advance.

F. Families must arrange transportation of the individual to and from the certified respite
   setting.

PROCEDURES

Referral Process for Accessing OPRS:

A. The CRM must submit a prior approval in CARE to their supervisor, requesting
   Overnight Planned Respite Services. The request should include a description of the
   respite services needed and justification for the respite request. The CRM should identify
   respite begin and end dates.

B. The CRM must complete and submit the following documentation to his or her
   supervisor:
   1. A completed DSHS 14-012, Consent, form;
2. The DSHS 10-572, Respite Application for Overnight Planned, RHC Emergent and/or Planned Respite Services form; and

3. A current DDA Assessment completed within the past 12 months. If there is not a current DDA Assessment completed within the past 12 months, the CRM will complete the Support Assessment to identify the individual’s support needs.

C. The CRM supervisor will review and submit the completed application packet to the Adult Respite Service Committee for review of the Overnight Planned Respite Service request.

D. The Adult Respite Service Committee will notify the CRM and the CRM’s supervisor of the outcome of the committee review.

E. If the individual is approved for OPRS:

1. The Adult Respite Service Committee must:
   a. Forward the application packet to the certified provider. The certified provider must respond to the committee within seven business days of receiving the packet and verify whether they can support the individual;
   b. Document the scheduled stay on the DDA SharePoint site for the individual program; and
   c. Communicate to the CRM and the CRM’s supervisor the approved respite request.

2. The CRM must:
   a. Communicate to the family the approval of the service and send the DSHS 10-571, OPRS Individualized Agreement form to the family. The family and provider must complete DSHS 10-571 together before the scheduled stay;
   b. Retain a copy of the completed DSHS 10-571 in the client’s file;
   c. Complete the Planned Action Notice for the approval of the service in CARE; and
   d. Update the individual’s person-centered service plan.

3. The Regional Administrator or designee must review and finalize the prior approval in CARE.
F. If the request is denied by the Adult Respite Service Committee or the certified provider, the CRM must:

1. Work with the family to identify alternative options that may be available; and
2. Complete the Planned Action Notice for the denial of the service.

EXCEPTIONS

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

SUPERSESSION

DDA Policy 4.15
Issued February 1, 2016

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