PURPOSE:

This policy establishes guidelines for case resource managers to follow when offering and authorizing services to eligible persons participating in the Division of Developmental Disabilities (DDD) Community Protection Program.

SCOPE:

This policy applies to DDD Field Services staff.

DEFINITIONS:

**Community Protection Program (CPP)** means services specifically designed to support persons with community protection issues as defined in DDD Policy 15.01, *Community Protection Program Identification and Eligibility*, and in “Program Participant” below.

**Community Protection Program Participant** means a person who meets one or more of the following criteria and is receiving specialized CPP services:

1. Has been convicted of or charged with a crime of sexual violence as defined in Chapter 71.09 RCW, including, but not limited to, rape, statutory rape, rape of a child, and child molestation;
(2) Has been convicted of or charged with acts directed toward: strangers, individuals with whom a relationship has been established or promoted for the primary purpose of victimization, or persons of casual acquaintance with whom no substantial personal relationship exists;

(3) Has been convicted of or charged with a sexually violent offense and/or predatory act, and may constitute a future danger;

(4) Has not been convicted and/or charged, but has a history of stalking, sexually violent, predatory, and/or opportunistic behavior which demonstrates a likelihood to commit a sexually violent and/or predatory act based on current behaviors that may escalate to violence; and/or

(5) Has committed one or more violent crimes, such as murder, attempted murder, arson, first degree assault, kidnapping, or use of a weapon to commit a crime.

Treatment Team means the program participant and the group of people responsible for the development, implementation, and monitoring of the person’s individualized supports and services. This group may include, but is not limited to, the case resource manager, therapist, residential provider, employment/day program provider, and the person’s legal guardian and/or family.

Certified Community Protection Program Residential Services means Community Protection – Intensive Supported Living Services (CP-ISLS) as described in DDD Policy 15.04, Community Protection – Intensive Supported Living Services. CP-ISLS includes access to twenty-four (24) hour supervision, instruction and support services, as identified in the person’s Individual Service Plan (ISP) and Individual Instruction and Support Plan (IISP).

POLICY:

A. Services offered to persons in the Community Protection Program (CPP) should be consistent with their individual support and supervision needs, and be provided in a manner that minimizes the likelihood of offending behavior. Services must be provided in the most integrated setting appropriate to the person’s needs and in the least restrictive manner possible.

B. DDD staff will only authorize services to CPP participants that:

1. Are designed to provide the intensity of support and supervision necessary to maximize the safety of the CPP participants as well as the community; and
2. Follow the treatment recommendations set forth by the certified and/or licensed professionals who evaluate and/or treat them.

C. If there is disagreement concerning the treatment professional’s recommendations, the CRM will consult with the Field Services Administrator (FSA) for guidance. The FSA will respond in writing within fourteen (14) days.

D. Persons with community protection issues may be referred for services to prospective providers only with disclosure of community protection information. Confidentiality of identification of any victim(s) must be respected. CRMs must redact (i.e., block out) victim names and other identifiers on all referral documents. Victim(s) identity must be contained only in the person’s permanent file.

E. The following list specifies, when resources are available, what services can and cannot be authorized for CPP participants. Some services may have additional eligibility requirements.

1. Professional Therapy
   a. Therapy that addresses an individual’s community protection issues must be provided by a qualified therapist or treatment professional. Whenever possible, the treatment provider should have experience in developmental disabilities.
   b. Sexual deviancy treatment must be provided by a certified Sex Offender Treatment Provider (SOTP), or a SOTP “Affiliate” working under the supervision of a certified SOTP.
   c. The use of restrictive procedures during therapy or as part of treatment shall be governed by the requirements of DDD Policy 5.15, Use of Restrictive Procedures.

2. Family Support [Note: Family Support is not a CPP service]
   a. Services that do not entail supervision may be authorized (e.g., therapies, specialized equipment, etc.)
   b. Respite and attendant care services, including emergency respite, may only be authorized as follows, and only with the recommendation of the person’s treatment professional:
(i) In the person’s home, as long as the person’s parent or guardian remains on site to accept full responsibility for supervision, or a relative respite care provider is available and willing to accept full responsibility for supervision and has signed a statement to that effect;

(ii) In a licensed foster home in accordance with the foster care plan, provided that substitute care providers are knowledgeable and trained related to the child’s community protection risks and supervision requirements;

(iii) Community activities used as respite care may not be authorized.

3. **Medicaid Personal Care (MPC)** [Note: MPC is not a CPP service]
   a. MPC services are available to persons who meet the eligibility criteria;
   b. MPC services are limited to personal care tasks; and
   c. Supervision services may not be authorized except as specified in the person’s Comprehensive Assessment service plan for medically related support or oversight.

4. **Residential Services**
   a. Children or youth under age 18 who meet the CPP criteria will be placed out-of-home only in licensed foster homes, staffed residential homes, or group care facilities that have received specialized training for the care and supervision of persons with community protection issues. Other residential services may be approved only through an Exception to Policy (ETP) signed by the Division Director.
   b. Adults age 18 and above will be referred to certified Community Protection - Intensive Supported Living Services (CP-ISLS) when resources are available.
   c. Other DDD residential services, including supported living, alternative living, and group homes will not be authorized. When a person receiving services in these settings is identified as a CPP participant, he or she may continue in that residence provided that:
      (i) A professional assessment supports the residential setting;
(ii) The residential provider meets the criteria described in DDD Policy 15.04, Standards for Community Protection - Intensive Supported Living Services (CP-ISLS); and

(iii) The Division Director approves an exception to policy (ETP).

d. Residential services under the jurisdiction of the DSHS Aging and Adult Services Administration (AASA) will not be offered to CPP participants. This includes placement in adult family homes (AFH), adult residential care facilities (ARC), assisted living facilities, and nursing homes.

5. Employment/Day Programs

a. Persons who have been offered certified CPP residential services and declined them are not eligible for an employment/day program.

b. Persons who have not been offered certified CPP residential services, and who have not been receiving employment services, may receive employment/day program services with the approval of the person’s treatment team.

c. Persons who have been in employment/day program services prior to being identified as having CP issues, and who have not been offered certified CPP residential services, may remain in their employment/day program or seek new employment under the following conditions:

(i) There is disclosure to both the county and the employment/day program provider;

(ii) The employment/day program provider can provide the level of supervision needed consistent with the recommendations of a qualified treatment professional;

(iii) There is disclosure to prospective employers other than the employment/day program provider when recommended by the person’s treatment team; and

(iv) The Field Services Administrator (FSA) approves continuation or new employment.
d. Community access services that are not work-related may only be authorized with the prior approval of the FSA.

PROCEDURES:

A. When a person who meets the criteria for the CPP requests services, the CRM will refer to the parameters outlined above to determine what services to authorize.

B. When a person who already receives services is identified as having, or possibly having community protection issues, the CRM must immediately:

1. Advise his or her supervisor and the FSA;

2. Submit a request for the authorization of temporary resources to the service provider(s) to enhance support and supervision (e.g., residential staff add-on, attendant care funding, county resources for one-time funding, technical assistance and consultation, etc.);

3. Submit a request for a professional assessment as soon as possible to determine whether the person meets the division’s community protection criteria as set forth in DDD Policy 15.01, Community Protection Program Identification and Eligibility; and

4. Schedule a staffing with the designated regional CPP coordinator or committee.

C. When the person resides in an AFH or other AASA facility, the FSA will notify the Regional Administrators of Home and Community Services (HCS) and Residential Care Services (RCS) of the person’s community protection status and discuss service options.

D. Field Services staff will use the following as guidelines to determine whether to continue providing services that are already authorized:

1. If the person’s professional assessment concludes that he or she meets the CPP criteria but the risk assessment (i.e., likelihood of offense or re-offense) is specified as low and the treatment professional determines that existing services are adequate and within the parameters of this policy, the CRM may continue to authorize existing services with the written approval of the FSA;

2. If the person’s professional assessment concludes that he or she meets the CPP criteria and the risk assessment is moderate to high, Field Services staff will refer to the parameters established in the Policy section above to determine what services can be provided.
3. When the person has been receiving services that include supervision responsibility through either Family Support or Medicaid Personal Care (MPC), the program services will be modified to be consistent with the guidelines above.

4. When the child/youth is in an out-of-home placement in the Voluntary Placement Program (VPP), the social worker will consult with the birth, adoptive, and foster parents or the licensed facility to determine whether to provide technical assistance and training as needed, or to refer the child/youth to an alternative licensed placement. When the child/youth cannot remain in the existing placement and an alternative placement is needed, the social worker will:
   a. Return the child/youth to his or her parents’ home, consistent with the conditions of the Voluntary Placement Agreement; or
   b. Refer the child/youth to the Children’s Administration Division of Children and Family Services (DCFS) for an appropriate alternative placement when there are concerns of abuse/neglect issues.

5. When the person is in either DDD or AASA residential services, Field Services staff will:
   a. Regard the person as the region’s highest priority for the next available CPP resources;
   b. Advise DDD Central Office and request additional resources if regional resources are not expected to be available in a reasonable period of time; and
   c. Authorize temporary resources, as approved, to existing service providers to enhance the safety of both the person and the community.

E. When a person is denied services, or his or her services are reduced or terminated in applying the provisions of this policy, the CRM will provide a written notice to the person and his or her guardian of the right to a fair hearing in accordance with Chapter 388-08 WAC.

EXCEPTIONS:

Any exceptions to this policy must have the prior written approval of the Division Director.
SUPERSESSION:

None.

Approved:  /s/ Linda Rolfe
Director, Division of Developmental Disabilities

Date: July 1, 2001