



DEVELOPMENTAL DISABILITIES ADMINISTRATION
Olympia, Washington

TITLE: STANDARDS FOR COMMUNITY PROTECTION POLICY 15.04
RESIDENTIAL SERVICES (CPRS)

Authority: [Chapter 71A RCW](#) *Developmental Disabilities*
[Chapter 388-101 WAC](#) *Certified Community Residential Services and Support*
[Chapter 388-825 WAC](#) *Developmental Disabilities Services*
[Chapter 388-831 WAC](#) *Community Protection Program*

Reference: [DDA Policy 15.01](#), *Community Protection Program Identification and Eligibility*
[DDA Policy 15.02](#), *Community Protection Program Services*
[DDA Policy 15.03](#), *Community Protection Standards for Employment Program Services*
[DDA Policy 15.05](#), *Community Protection Program Exit Criteria*

PURPOSE

The Developmental Disabilities Administration (DDA) intends to serve persons identified as Community Protection Program (CPP) participants in highly supervised community residential settings. These settings must be certified Community Protection Residential Services (CPRS) ([Chapter 388-101 WAC](#), *Certified Community Residential Services and Support*). The standards described in [Chapter 388-101 WAC](#) apply, except where otherwise indicated in this policy.

SCOPE

This policy applies to DDA Field Services staff and certified residential providers serving persons who are designated by DDA as meeting the community protection definition as described in this policy, and who are receiving, or being referred to, CPRS.

DEFINITIONS

Chaperone means a person who is delegated the responsibility to escort and supervise the CPP participant to ensure CPP participant and community safety. Chaperone agreements are approved by the Treatment Team following review and input from the CPP participant's therapist.

- 6) Ways to develop mutually respectful and trusting relationships while guarding against potentially manipulative behaviors of some CPP participants.
 - c. Expectations for collaboration and cooperation with treatment professionals, including attending group meetings and having joint training with therapists;
 - d. Coordination and communication protocols with DDA Case Resource Managers (CRM) and other community supports, including employment/day program providers, corrections officers, legal representatives, families, and schools;
 - e. Security procedures for the safety of CPP participants, provider staff, and the community;
 - f. Procedures regarding maintenance of confidentiality and appropriate disclosure of personal information; and
 - g. Legal issues regarding community protection behaviors.
2. Residential services providers working with CPP participants must receive community protection specific training within thirty (30) calendar days. Staff who have not completed community protection specific training as described above must not work by themselves with CPP participants.

F. Instruction and Support

To meet standards in [Chapter 388-101 WAC](#), CPP participants must have:

1. A written psychosexual evaluation or risk assessment and treatment recommendations by a certified and/or licensed professional (i.e., psychologist, psychiatrist). If the person has a history of sexual deviancy, there must be an evaluation by a Certified SOTP (C-SOTP) or an Affiliate SOTP (A-SOTP) working under the supervision of a C-SOTP. These professionals must have prior experience working with individuals with developmental disabilities.
2. A written Functional Assessment (FA) of any challenging behaviors for which a PBSP is required. Refer to [DDA Policy 5.14, Positive Behavior Support](#), for requirements regarding FAs and PBSPs.
 - a. For CPP participants, the written assessment by a certified/licensed professional, may substitute for the FA and the provider's

- a. Consider specific offense patterns when determining appropriate program locations, taking into account the preference of the person as much as possible. CPP participants with sexually violent and/or predatory behaviors may not live near schools, child care centers, public playgrounds, or similar settings; and
 - b. Determine appropriate and necessary restrictive procedures that may include visual screening of windows, doors and other openings, use of door and/or window alarms, and restricted access to certain areas.
2. Where possible, residences will be located within a reasonable distance of community resources.

L. Residential Site Approvals

1. [DSHS 10-328](#), *Residential Site Approval Request*, must be used when siting a home for a CPP participant with sexually violent and/or predatory behaviors. Due to the importance of timeliness for residence rentals, site approval processes must be treated with a sense of urgency.

- a. The residential provider and the CRM must conduct site checks at different days and times of the week and document these on the [DSHS 10-328](#), *Residential Site Approval Request*, prior to the home being approved. The residential service provider will conduct a minimum of three (3) site checks, and the CRM will conduct a minimum of one (1).

Note: When conducting a site review on a new house, it may not be possible to gain entry due to landlord availability, etc. In these situations, the CRM may waive the requirement to view the interior of the house and the external views from inside the house.

- b. For site approvals specific to individuals with sexually violent and/or predatory behaviors, the CRM must contact the local office of the Department of Early Learning (DEL) or use other geo-mapping tools to determine the presence of licensed family childcare providers in the neighborhood.
- c. The site approval is specific to the individual CPP participant. When a new CPP participant moves into an existing CPP home, a site approval is required for the new CPP participant. CPP participants may not move from one home to another without a prior site review.
- d. When more than one CPP participant is scheduled to move into a new vacant house, one form may be used that includes the names of all of the

CPP participants. The CRM must ensure that a copy of the form is filed in each CPP participant's record.

- e. In the event a CPP participant must move immediately into an existing CPP home and there is insufficient time to conduct a proper site review, the CRM and the provider must conduct the site review and complete the form within seven (7) calendar days.
2. The DDA Regional Administrator must provide written approval of the residential site for CPP participants on the [DSHS 10-328](#). The RA must approve or disapprove the proposed site within five (5) calendar days following receipt of the completed [DSHS 10-328](#) from the CRM.
3. The residential provider must notify the CRM whenever they become aware of a significant change has occurred in the neighborhood, such as a new childcare center, park or school, children moved in next door, etc. Following the notification, the provider and the CRM must conduct an updated site review and submit it to the RA for approval.
4. The RA may request an updated site review at any time.

M. Chaperones

1. Due to the supervision needs of CPP participants, it is critical that individuals who want to provide supervision to a CPP participant when residential program staff are not present fully understand the CPP participant's issues and restrictions. This shall be documented with a written Chaperone Agreement.
 - a. The CPP participant's therapist reviews each Chaperone Agreement and provides recommendations to the Treatment Team. This may include meeting with the proposed chaperone to discuss the CPP participant's issues and supervision needs, and may include disclosure.
 - b. Chaperone Agreements are not required when supervision will be provided by other paid services providers identified in the CPP participant's ISP, such as the CPP participant's therapist and employment program service providers.
 - c. Use [DSHS 15-356](#), *DDA Community Protection Program Chaperone Agreement*, to document all Chaperone Agreements.
2. The residential provider must train its employees on the contents of the Chaperone Agreement(s) and notify the CPP participant's therapist if the CPP

