



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: RESPITE CARE AND EMERGENCY PLACEMENT POLICY 4.01

Authority: 42 CFR 483.440 (b)
 RCW 71A.12; 71A.16.010; 71A.20.090
 WAC 388-97
 WAC 388-825-055

PURPOSE

This policy establishes procedures for authorizing and providing respite care and emergency placements at the Division of Developmental Disabilities (DDD) Residential Habilitation Centers (RHCs).

SCOPE

This policy applies to RHC and Field Services Staff.

DEFINITIONS

Adolescent means a DDD eligible youth age 13 through 17 years.

Emergency means a sudden, unexpected occurrence demanding immediate action.

Emergency or temporary admission of a person to an RHC means 31 or more days in an RHC in a calendar year.

Respite care means temporary residential services provided to a person and/or the person's family on an emergency or planned basis not to exceed thirty (30) days in a calendar year in an RHC. Nursing Facility and DDD rules limit respite to thirty (30) days without an exception.

- Current medical evaluation, including physical examination and current diagnoses;
 - Report of current Hepatitis B screening;
 - Report of current tuberculosis (TB) screening if nursing facility;
 - All current prescription medications and purpose;
 - Known allergies; and
 - Prescribed diet and reason.
- c. Functional/developmental assessments, including a review of any severe challenging behaviors (e.g., danger to self or others) and any planned interventions previously used or in effect. Include copies of the current Positive Behavior Support Plan (PBSP) and Cross Systems Crisis Plan (CSCP), if applicable.
- d. Individual support plan, which includes an objective for respite or emergency care.
- e. For children, the current Individual Education Plan (IEP) and plan for school attendance during respite.
- f. Updated social service information, including:
- Family profile, including name and address of primary contact and guardian status;
 - Social development;
 - Placement history;
 - Employment history and interests; and
 - Reason for referral, including reasons that preclude community placement.
5. When an emergency exists and placement admission is for 72 hours or less, referral information should be obtained as follows:
- a. Use regular placement procedures as much as possible in the time allowed.
- b. When circumstances or time do not allow regular placement procedures, the following information is still necessary:
- Reason for referral, including situations that are precluding the use of community resources;
 - Medical information, updated by the DDD regional office as necessary, including current medications, allergies, and any existing and available immunization and health records;

- Existing behavioral information and current PBSP, updated by the DDD regional office as needed; and
 - Description of requested services during the respite stay.
6. The Interdisciplinary Team (IDT) will provide services based upon the person's individual needs.
 7. When an emergency placement exceeds 72 hours, the DDD regional office will supply all referral information normally required for a non-emergent placement to the RHC. An Individual Habilitation Plan (IHP) will be developed if the placement is expected to extend beyond thirty (30) days. Assessments will begin upon admission.

B. Discharge Procedures

1. A discharge plan will be in place upon admission for respite.
2. If extenuating circumstances prevent the discharge as planned, the DDD regional office responsible for the person will make alternative plans or request an extension of the RHC respite, not to exceed a total of thirty (30) days in the calendar year.
3. If a discharge does not/cannot occur within the thirty (30) days allowed for respite in a calendar year, written approval by the Division Director is required for any extension. The request to the Director must include a detailed plan and timeline for discharge.

C. Emergency RHC Admissions

1. Emergency admission of an adult to an RHC requires an exception to policy (ETP) from the Division Director and is temporary, pending the development of appropriate community resources.
2. Emergency admission of an adolescent to an RHC can occur when:
 - a. A voluntary placement plan is in place with DDD with the goal of community placement or family reunification; and
 - b. DDD determines that foster placement services cannot meet the emergency needs of the child/family; and
 - c. Progress towards placement planning is reported to the Division Director at least every ninety (90) days.

