



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: MONITORING AND QUALITY IMPROVEMENT POLICY 4.08
OF ADULT FAMILY HOME SERVICES

Authority: RCW 70.129 Long-Term Care Resident Rights
Chapter 388-76 WAC Adult Family Home Minimum Licensing
Requirements
Chapter 388-15-194 - 890 WAC Home and Community Services and Long
Term Care Services

BACKGROUND

While Aging and Adult Services (AASA) is responsible for the oversight of the Adult Family Home license and contract, the Division of Developmental Disabilities (DDD) is responsible for the quality and oversight of the services provided to individuals funded by DDD and living in adult family homes (AFH).

PURPOSE

To ensure that persons with developmental disabilities living in adult family homes receive quality services through case management of the residents and quality improvement oversight and support of the AFH providers.

SCOPE

This policy applies to all DDD-funded residents and their AFH providers.

POLICY

Case resource managers will comply with state rules (WACs) and policies governing adult family homes and Medicaid Personal Care (MPC) services when providing services to residents of adult family homes.

PROCEDURES

- A. **Case managers** shall perform the following oversight for individuals living in adult family homes:
1. Develop with the individual an initial service plan from the *Comprehensive Assessment* (DSHS Form 14-327(X)) which identifies ways to meet the person's needs with the most appropriate services. The service plan shall document the:
 - a. Individual's specific needs and strengths;
 - b. Plan for meeting each need by using both formal and informal supports;
 - c. Responsible parties for carrying out each part of the plan;
 - d. Anticipated outcomes;
 - e. Dates and changes to the plan;
 - f. Dates of referral, service initiation, and follow-up review; and
 - g. Written agreement to the service plan by the individual or the individual's representative and the AFH provider.
 2. Provide input to the negotiated service plan developed by the AFH provider with the DDD resident, as requested.
 3. At least once a year (or more frequently if deemed necessary by the case manager, oversight nurse, provider, or individual), the case manager shall complete a full reassessment of the service plan. This must be based on an in-person interview of the person's strengths, physical health, functional and cognitive abilities, social resources, emotional/social functioning, preferences, and the need for formal and informal supports.
- B. **The Quality Improvement Resource Managers (QIRM)** will provide support and oversight to the AFH providers to enhance the health, safety, and quality of life of the DDD residents in these homes. The QIRMs shall:
1. Ensure that DDD services are authorized in compliance with WAC and division policies;
 2. Maintain a computer data system for tracking QI visits and placements to adult family homes, including transfers between homes;
 3. Visit each AFH at least once per year to review the quality of AFH services to DDD residents;

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4. Record these visits and summarize visits in a letter to the AFH provider;
5. Notify appropriate staff and individuals of safety and health concerns;
6. Track AFH incident reports and coordinate with AASA and DDD staff regarding client incident reports and complaint investigations.
7. Provide AFH providers with access to technical assistance and consultation; and
8. Be a DDD Liaison with regional AASA/RCS staff.

SUPERSESSSION

DDD Policy 4.08

Issued March 25, 1997

Approved: /s/ Timothy R. Brown
Director, Division of Developmental Disabilities

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