



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

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

Authority: RCW 70.129
Chapter 388-15 WAC
Chapter 388-71 WAC
Chapter 388-76 WAC

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

SCOPE

This policy applies to all case resource managers who authorize or monitor adult family home services.

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 resource managers (CRM will perform the following activities for all DDD eligible AFH residents, including private pay:
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 must document the:
 - a. Individual's personal care and supervision needs, preferences, informal supports, and strengths;
 - b. Plan for meeting 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 care plan developed by the AFH provider with the DDD resident, as requested.
 3. Review the Negotiated Care Plans submitted by the AFH provider and follow-up on any concerns.
 4. Share incidents and concerns with the regional AFH Quality Improvement Resource Manager (QIRM) and/or AASA Residential Care Services (RCS).
 5. At least once a year (or more frequently if deemed necessary by the CRM, oversight nurse, provider, or individual), the CRM must 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. **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 may:

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1. Review AFH services and authorizations in relationship to existing WAC and department regulations and policies.
2. Maintain a computer data system for tracking QI visits and placements to AFHs, AFH specialty training, and technical assistance;
3. Provide consultation and assistance to CRMs regarding AFHs;
4. Visit each AFH at least once per year to review the quality of AFH services to DDD residents. Visit more often if the provider or resident concerns warrant it;
5. Provide and document feedback to the provider verbally or in writing;
6. Notify RCS and other appropriate staff and individuals when concerned about the AFH provider or resident;
7. Review, follow-up, and coordinate AFH incident reports and complaint investigations with AASA and DDD staff;
8. Provide AFH applicants with information and AFH providers with technical assistance and consultation;
9. Coordinate/schedule DDD AFH trainings; and/or
10. Be a DDD Liaison with regional AASA/RCS staff and AFH associations.

SUPERSESSION

DDD Policy 4.08
Issued March 14, 1998

DDD Policy 4.08
Issued March 25, 1997

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

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