



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: ALTERNATIVE LIVING SERVICES POLICY 4.09

Authority: Chapter 71A RCW *Developmental Disabilities*
Chapter 388-825 WAC *DDD Services Rules*
Chapter 388-828 WAC *DDD Assessment*
Chapter 388-829A WAC *Alternative Living*

Reference: DDD Policy 5.02, *Necessary Supplemental Accommodation*
DDD Policy 6.12, *Mandatory Reporting Requirements for Residential Services Providers*

PURPOSE

This policy describes the expectations and requirements for Alternative Living (AL) services.

SCOPE

This policy applies to all Field Services offices of the Division of Developmental Disabilities (DDD) and DDD contracted Alternative Living services providers.

POLICY

- A. Alternative Living (AL) services are provided by independent contractors that focus on community based, individualized client training to enable the client to live as independently as possible with minimal residential services. AL is a service option available to clients on the CORE Waiver based on client need. Clients who were receiving AL services prior to December 1, 2009, and who are not on the CORE waiver may continue to receive this service without requiring an exception unless AL services have been terminated and reinstatement requested.
1. The AL service provider works with the client on skills acquisition to enable the client to maintain as much self-determination, personal power and choice as possible in meeting the client's own independent living needs.

2. The AL service provider's primary function is to teach new skills that result in greater individual client independence. In the process of teaching and training new skills, the AL provider may assist the client in conjunction with completing the tasks being taught. AL services are not intended to provide ongoing protective supervision or activities of daily living support.
- B. The AL provider must offer habilitative services in areas identified in the client's Individual Support Plan (ISP) and [DSHS 10-269, Alternative Living Services Plan and Provider Report \(ISP Addendum\)](#). The provider must deliver one-to-one training and support in a typical community setting in a manner appropriate to the client's age and culture.
- C. The areas of training appropriate for each client will be identified in the client's ISP and [DSHS 10-269, Alternative Living Services Plan and Provider Report \(ISP Addendum\)](#). The client may receive training and minimal assistance in relation to the training task in the following areas:
1. **Establishing a Residence**, including locating a residence, notification of address change, securing utilities and/or closure of accounts, deposits, landlord/tenant agreements, furnishings, food supplies, and insurance.
 2. **Home Living**, including:
 - a. **Personal hygiene** (personal cleanliness, grooming, and appropriate dressing);
 - b. **Food and nutrition** (menu planning, food storage, cooking, and basic nutrition and diet information);
 - c. **Home management** (maintenance and repairs, cleaning, laundry, using household appliances, and home safety); and
 - d. **Communication/basic literacy skills** (making appointments; using telephones, telephone books, maps, bus schedules, and newspaper advertisements; filling out forms and applications; telling time; communicating thoughts and feelings, and appropriate conversation).
 3. **Community Living**, including:
 - a. **Accessing public and private community services** (including government and/or private and public service systems available to persons with low or no income (e.g., the Social Security Administration (SSA), Supplemental Security Income (SSI), Public Utility District (PUD)

assistance, low income housing, food stamps, phone discounts, utility discounts, food banks, homeless shelters, etc.).

- b. **Essential shopping** (for food, clothing, household items, etc.; planning, making lists, locating sales, comparison shopping, using coupons, discount, and credit cards);
 - c. **Transportation** (use of public transportation or taxi; assistance with studying the driver's manual and licensing; car or bicycle maintenance; and traffic/pedestrian safety; and
 - d. **Planning leisure time activities** (assessing availability and location of recreation facilities and activities; and vacation planning).
4. **Health and Safety**, including:
- a. **Understanding personal safety and emergency procedures** (fire escape plan, emergency numbers, emergency shelters, first aid, burglary protection, and self-protection (vulnerability, assertiveness, and self-defense);
 - b. **Physical, mental and dental health** (diet, exercise, human sexuality, medication awareness, dealing with illness or injury, and routine access to medical, dental, and mental health care); and
 - c. **Developing and practicing an emergency response plan** to address natural and other disasters.
5. **Social Activities**, including:
- a. **Social skills**, including assertiveness training, time management, positive self-concept building;
 - b. **Community integration**; and
 - c. **Building and maintaining positive relationships** with family, friends, and neighbors.
6. **Protection and Advocacy**, including:
- a. **Money management and budgeting** (paying bills and keeping financial records; establishing and following a monthly budget; money recognition and counting change; reconciling bank statements; filing tax returns; reporting wage earnings to SSI; and consumer credit counseling;

- b. **Protecting self from exploitation** (recognizing and redirecting relationships which may pose a danger or risk to the client);
 - c. **Making choices and decisions;** and
 - d. **Asserting rights and finding advocacy.**
- 7. **Transitioning** from a more dependent or structured residential environment to a more independent setting (e.g., moving from a parent's home to own apartment).
 - 8. **Other training** a client may need to live independently in the community.

D. Eligibility Criteria for AL Services

- 1. AL is a service option available to clients on the CORE Waiver. Case Resource Managers (CRM) may provide clients/families with the entire menu of services available through the waiver. The CRMs will suggest particular service options based upon their knowledge of the client's skills, abilities, and interests.

Note: AL authorization requires prior approval from the Field Services Administrator (see Procedures section). CRMs should consult with their supervisor when AL services are contemplated for a particular client.

- 2. Clients must be at least eighteen (18) years old and authorized by DDD to receive AL services.
- 3. AL services are offered by providers to clients who live in or are establishing their own home. The home must be owned, rented, or leased by the client or his/her legal representative.
- 4. AL services may not be offered in the provider's home (WAC 388-829A-070).
- 5. Clients must live outside of their parent's home or be actively planning to move out of their parent's home within the next six (6) months as identified in the client's ISP.
- 6. Clients who receive AL services are responsible for paying for their daily living expenses (such as rent, utilities, and food) using their personal financial resources.

PROCEDURES**A. Assessment and Authorization**

1. Prior approval from the Field Services Administrator (FSA) or designee is required for initial authorization only. Once approved for the service, AL can be authorized for up to one year. It must be reviewed annually (or sooner if needed) at the time of the DDD Assessment to determine if AL continues to be the appropriate service option.
2. The CRM will meet with the client in the client's home at least annually to complete an assessment of support needs.
3. In the ISP, the CRM will identify the AL service, the number of hours, and the provider. Specific training tasks and monthly service hours allocated for each task are identified on [DSHS 10-269, *Alternative Living Services Plan and Provider Report \(ISP Addendum\)*](#), and are referenced in the Finalize Plan section of the ISP, under the tab titled, "Other Plans."
4. The client, AL provider, and the client's legal representative (if applicable) will participate with the CRM in developing, reviewing, and revising the ISP and the AL Services Plan, including the development of specific training goals.
5. The AL Services Plan must be reviewed at least annually or whenever significant changes occur in the client's instructional needs.
6. The CRM will determine the number of hours of support to be authorized based on the habilitation needs identified in the ISP. The maximum number of hours allowable is forty (40) per month.

EXAMPLE: A sample distribution of hours might look like some combination of the following:

- 5 hours for money management;
- Up to 5 hours for meal planning and shopping for nutritional meals;
- 5 to 10 hours for learning skills related to meal preparation;
- 5 hours for learning skills related to medication management and/or making medical appointments;
- 5 hours for teaching skill related to connecting with community resources;
- Up to 5 hours of skill building related to maintaining a home, communication with landlords, etc.;
- 5 hours of skill building related to making wise choices, teachings skills to reduce vulnerability, accessing crisis resources appropriately; and

- Up to 5 hours for cultivating relationships with extended family or neighbors and non-paid relationships.

Skill building areas will focus on aspects of a person's life to assist them in learning or maintaining independence. Consideration will be given to hours needed to maintain skills learned as well as new skill acquisition. For example, a client may focus on learning to prepare breakfast meals and then progress to lunch meals before moving on to dinner meals. Because some clients do not generalize learning to other settings, the teaching techniques by providers must be very specific. To be effective, the direction to providers given by CRMs must be equally specific.

7. The number of hours assigned will be modified as the client acquires skills. The CRM will determine if and when the client would benefit from fading the service hours over time. CRM discretion at modifying hours is determined by measureable outcomes described in the AL Plan and evidenced through required quarterly reports and client discussion.
8. When referring a client to an AL provider, the CRM will follow the requirements and procedures described in DDD Policy 4.02, *Community Residential Services: Referral and Acceptance*. This includes sending a cover letter and a referral packet of information about the client to the selected provider.

B. Provider Duties and Requirements

AL providers must perform the following duties:

1. Participate in the ISP and AL Services Plan development, review, and revision;
2. Use teaching techniques that include step by step instruction, mentoring, role modeling, developing visual cues, etc., as appropriate to the client's needs and preferred learning style. Positive behavior support principles based on individual dignity and respect must be emphasized in all services per DDD Policy 5.14, Positive Behavior Support.
3. Submit written reports to the CRM at least quarterly that describe the type and extent of services provided to each client during that time period (WAC 388-829A-180). AL providers must use [DSHS 10-269, Alternative Living Services Plan and Provider Report \(ISP Addendum\)](#), for the quarterly reports.
4. If the provider assists the client with money management, submit a written monthly report to the CRM by the 10th day of the following month using [DSHS 10-269, Alternative Living Services Plan and Provider Report \(ISP Addendum\)](#). If the AL provider is also the payee, use [DSHS 23-034, Alternative Living](#)

[Financial Report](#), for the monthly reports. The timeframe for these reports must be specified on the ISP.

5. Submit written reports of any unusual or significant incidents that put the client at risk of injury, abuse, neglect, exploitation, or financial exploitation. AL providers are mandatory reporters of suspected client abuse, neglect, exploitation, and financial exploitation under Washington State Law (refer to DDD Policy 6.12, *Mandatory Reporting Requirements for Residential Services Providers*);
6. Maintain a copy of both the current AL Services Plan and a record of the client's progress for six (6) years; and
7. Complete and maintain copies of the [DSHS 10-104A, Service Verification and Attendance Record](#) for all services provided for six (6) years.

C. DDD Specialty Training and Continuing Education

1. AL providers must successfully complete the DDD Specialty Training within ninety (90) days of providing AL services to a client. DDD will reimburse the provider for the class time.
2. Additionally, AL providers must attend a minimum of ten (10) hours of continuing education per year. Continuing education begins the calendar year after the DDD Specialty training is taken. The continuing education must be on topics relevant to supporting people with developmental disabilities or adult teaching techniques.
3. AL providers must submit their annual continuing education hours and documentation of training attendance to the CRM for approval prior to routing to the regional DDD Contracts Manager for entering in the Enterprise Agency Contracts Database (EACD).

D. Oversight and Quality Assurance Monitoring Plan

DDD will use the following process to monitor AL services and providers:

1. The CRM will:
 - a. Conduct a visit to the client's place of residence at least every twelve (12) months;
 - b. Review all written reports from the provider for compliance with the instruction and support goals specified in the client's AL Services Plan; provide follow up as needed; and

- c. Initial and file all written reports submitted by the provider and document these in the Service Episode Record (SER).
2. Designated Field Services staff will conduct an annual quality assurance interview with a sample of AL providers and clients who receive AL services. If the quality assurance interview indicates concerns, staff will develop a corrective action plan. The corrective action plan must:
 - a. Outline methods for the provider to comply with the requirements; and
 - b. Provide a timeframe for completion of the corrective actions.
3. DDD may deny payment or terminate the contract if the corrective actions are not completed within the specified timeline, in addition to other reasons stipulated in the contract.

EXCEPTIONS

The Field Services Administrator may grant a written exception to the maximum hours allowable when there is documented risk to the client's health and welfare. All other exceptions to this policy require the prior written approval of the Division Director.

SUPERSESSION

DDD Policy 4.09
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Approved: /s/ Linda Rolfe
Director, Division of Developmental Disabilities

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