

Yes	No	Please have this information ready for the DDA representative you will be working with. If you answered "Yes" to the questions, becoming a Companion Home Provider may be right for you.				
Com	Companion Home Foster Care Model					
		Companion Home (CH) program is a foster care model that provides long-term support to a single client who lives in the provider's home. Companion homes are not adult family home or group home type of settings. Providers follow the clients Person Centered Service Plan (PCSP) to provide life skill instruction using teaching and training methods appropriate to the client's age and preferences in areas such as: personal care, personal device care, mobility support, cooking, shopping, bill paying, medical appointments and medication management, employments or educational support, social and emotional support, social activities and creating connections with others.				
		As a companion home provider, you will not be able to hire and pay staff to support the client living with you. You are the sole provider for one client.				
		Are you able to provide 24-hour support and supervision to a client without needing to hire additional help?				
		Are you able to support a client by using teaching and training techniques for skill building in areas identified in the client's person-centered services plan (PCSP)?				
		The client has very specific rights while living in your home. Please review <u>WAC 388-823-1095</u> . Do you understand the client rights outlined in this WAC? What are some questions you may have?				
Comp	panion	Home Payment				
		Daily Rate         CH providers are paid a daily rate. The daily rate includes payment to the CH provider for:         • Delivering services to the client as described in the client's person-centered service plan, and         • All administrative expenses the provider has in connection to being a CH provider, including the cost of maintaining a vehicle and transporting the client.         How the daily rate is determined can be found in WAC 388-829C-131.         The range for the daily rate is found in the following document.         All DDA Rates.xlsx (live.com)         In the Excel spreadsheet, navigate to the CH rates tab. An example of the Excel spreadsheet tab is below:         I         CH Rates Jan 2023				
		Clients with a lower rate typically require less support or supervision throughout the day. Some clients may hold part-time jobs, others may complete some activities of daily living on their own or with minimal support. Clients with a higher rate typically require increased supervision and increased medical or behavioral supports. Some clients may have a Positive Behavior Support Plan, others may require the provider to be nurse delegated. The provider may need to support the client multiple times at night. In all cases, the provider must be available to the client all hours of the day. Will you be available to a client all hours of the day to provide 24 hours of support or supervision as required by the person centered service plan?				

		Room and Board						
		In addition to the daily rate, providers receive a monthly room and board payment from the client.						
		Providers are required to develop and sign a room and board agreement per <u>WAC 388-829C-310</u> will client or their legal guardian if they have one.						
		In addition, federal rules found in <u>42 CFR Section 441.301(c)(4)</u> require the provider to make sure a has the same protection under Washington landlord / tenant law as the general public.						
		The provider must have language in their room and board agreement that:						
		<ul><li>a. Provides adequate notice prior to eviction or termination of tenancy;</li><li>b. Includes a process for the client to have opportunities to make positive changes before eviction; and</li><li>c. Provides information on how a client can appeal their eviction.</li></ul>						
		When developing the room and board agreement, the client needs to have enough funds left over to meet monthly needs outside of room and board expenses.						
		Are you able to provide the client the same protection as the general public under landlord / tenant laws, and develop a room and board agreement that protects the client's interests?						
Com	panior	Home Termination of Services						
		The client can end services with a CH provider at any time.						
		A client receiving services in a CH has protection before services can be terminated by the provider. These rules are found in <u>WAC 388-823-1095</u> . A CH provider may not terminate services to the client unless the provider determines and documents that:						
		The provider cannot meet the needs of the client;						
		<ul> <li>The client's safety or the safety of other individuals in the residence is endangered;</li> <li>The client's health or the health of other individuals in the residence would otherwise be endangered; or</li> </ul>						
		The provider ceases to operate.						
		The client must receive written notice from the provider of any potential termination of services <b>at least 60</b> <b>days</b> before such termination, except when there is a health and safety emergency that requires termination of service, in which case notice must be provided at least seventy-two hours before the date of termination. The notice must include:						
		<ul> <li>The reason for termination of services; and</li> <li>The effective date of termination of services.</li> </ul>						
		Will you be able to complete necessary documentation and provide appropriate notices per WAC 388-823-1095 and WAC 388-829C to a client in the even that you will need to terminate service to a client?						
Resp	ite							
		Respite is a scheduled break in caregiving to provide relief to the CH provider. WAC <u>388-829C-230</u> .						
		A CH provider is required to provide 24-hour support and supervision as identified by the client's person- centered services plan. Companion home providers will need a break from time to time to look after their own needs. The client will need support and supervision during the time the provider is not available to support the client. The client's person-centered service plan determines the number of annual respite hours a provider gets. The client can access respite in all settings listed in <u>WAC 388-845-1610</u> and <u>WAC</u> <u>388-829C-230</u> . The most common form of respite used by a client is provided by a contracted individual provider.						
		The annual respite hour range for CH providers as of 04/01/2023 is:						
		<ul> <li>386 to 1,298 annual hours.</li> <li>Respite hours, if not used, do not roll over to the next year.</li> </ul>						
		Have you considered what you might need respite for, how often you will need respite, and who might be your respite provider?						
		Please list the names of person(s) who don't live with you that are willing and able to contract as a respite provider to give you breaks:						
		Name of person:						

]		Name of person:							
		How is Companion Home Respite determined?							
		Respite is determined by an algorithm that is activated when the case manager adds Companion Home Respite services to the client's service plan. The WAC below explains how respite is calculated:							
		WAC <u>388-828-6012</u> How does DDD determine the number of respite hours you may receive annually you are receiving companion home services?							
		DDD determines the number of respite hours you may receive annually by adding your companion home services support score in WAC 388-828-6010 to your adjusted companion home services support score in WAC 388-828-6011.							
		An example of how this WAC is applied is located at the end of this document.							
		Will the respite provider(s) you identified be able to start providing respite by your anticipated start date as a companion home provider?							
		If you were to begin services, please provide your anticipated respite needs for the next three months.							
Addi	tional	Employment							
		Occasionally, based on client needs identified in the person center services plan, CH providers can hold outside employment. However, a CH provider is responsible to provide 24-hour support and supervision to a client.							
		If you become a contracted provider, but do not have an identified client, you may continue to work in outside employment while waiting to support a client. Once a client is identified, DDA must review if the outside employment will allow you to be available to the client 24 hours a day.							
		Are you employed?							
		If yes, review form <u>DSHS 02-589</u> Companion Home Outside Employment Notification and Review							
		Are you willing to terminate your outside employment if it is determined that the identified client's health and safety will be jeopardized if you continue to work?							
Train	ing Re	equirements							
		Companion home providers are required to complete 75 hours of initial training. Prior to working with a client, providers will need to complete:							
		Five (5) hours of Safety and Orientation Training							
		Forty (40) hours of DDA Core Training							
		<ul> <li>Six (6) hours of First Aid and CPR Training</li> <li>Six (6) hours of DDA Companion Home Orientation Training</li> </ul>							
		The remaining 18 hours of initial training must be completed within 120 days from the date of hire.							
		<ul> <li>Training provided by DDA is free.</li> <li>Many training options are on-line and can be completed at your convenience.</li> </ul>							
		<ul> <li>You will receive support from DDA staff to locate training provided by DDA.</li> </ul>							
		First Aid and CPR Training is not provided by DDA.							
		Companion home providers must complete 12 hours of continuing education annually thereafter, and maintain current First Aid, CPR, and Bloodborne Pathogens training.							
		Do you have the time, resources, and ability to complete training?							
		Additional information on Companion Home Training is located on <u>Companion Home Provider   DSHS</u> (wa.gov) (https://www.dshs.wa.gov/dda/companion-home-provider) website under the FAQ section.							
Emer	gency	Planning							
		Companion home providers are required to have Emergency Plans per <u>WAC 388-829C</u> . Part of emergency planning is thinking about supports for the client in case of provider illness or other unexpected even in the providers life that prevents the provider from supporting the client.							

		Do you have an emergency plan of how to support a client in case you get sick or need to go to the hospital, or experience a life event that would prevent you from supporting the client?					
		Summary of emergency plan:					
Polic	Policies, Reports, and Record Keeping						
	Companion Home providers must develop a grievance policy. The grievance policy must include all components listed in <u>WAC 388-823-1095(8)</u> .						
		Are you able to develop a grievance policy?					
		Companion Home providers must keep accurate records and submit timely reports to DDA. Some of the reports and record keeping requirements are listed in <u>WAC 388-829C</u> under the "Provider Records" section.					
		Are you able to maintain records and submit reports in compliance with the WAC?					
Com	panior	Home Annual Certification					
	Contracted companion home providers complete annual certification evaluation. A provider must pass the annual certification evaluation to maintain their contract and provide services to a client.						
		Please review the Certification Evaluation (DSHS 09-995) form.					
		Will you be able to comply with certification requirements?					
What	quest	tions do you have?					
What	are th	e Characteristics of a Client you are interested in working with?					

## How to calculate respite

Example: If your companion home services support score is **267** and adjusted companion home services support rating is **343**, the number of respite hours you may receive annually is **610**.

If your unadjusted	
respite assessment	
level for companion	Then your companion
home services in WAC	home services support
388-828-5990 is:	score is:
1	98
2	98
3	267
4	436
5	605

Chart from WAC 388-828-6010.

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If you are authorized to reco companion home services	Your ADL support needs level for the SIS per WAC 388-828-5480				
388-829C and	None	Low	Medium	High	
Your medical acuity level	None	288	288	321	337
per WAC 388-828-5700	Low	288	288	321	337
	Medium	288	343	402	443
	High	288	443	619	693

Chart from WAC 388-828-6011.