



RULE-MAKING ORDER

CR-103P (May 2009)
(Implements RCW 34.05.360)

Agency: Department of Social and Health Services, Developmental Disabilities Administration

Permanent Rule Only

Effective date of rule:

Permanent Rules

- 31 days after filing.
- Other (specify) _____ (If less than 31 days after filing, a specific finding under RCW 34.05.380(3) is required and should be stated below)

Any other findings required by other provisions of law as precondition to adoption or effectiveness of rule?

- Yes
 - No
- If Yes, explain:

Purpose:

The 2015-2017 biennium budgets provided funding to develop eight community respite beds for adults with developmental disabilities for the provision of short-term community-based planned respite services across the state as an alternative to using respite services in an institutional setting. Additionally, the budget funded eight enhanced respite beds across the state for children for the purpose of providing families and caregivers a break and an opportunity for behavioral stabilization for children. Without these services some families may be unable to continue to care for their children in their own homes and out-of-home placements could be necessary.

Citation of existing rules affected by this order:

Repealed: 0
 Amended: 2
 Suspended: 0

Statutory authority for adoption: RCW 71A.12.030, RCW 71A.12.120

Other authority: ESSB 6052.S.L.

PERMANENT RULE (Including Expedited Rule Making)

Adopted under notice filed as WSR 16-10-021 on April 25, 2016 (date).
Describe any changes other than editing from proposed to adopted version:

None.

If a preliminary cost-benefit analysis was prepared under RCW 34.05.328, a final cost-benefit analysis is available by contacting:

Name: _____ phone () _____
 Address: _____ fax () _____
 e-mail _____

Date adopted:

July 28, 2016

NAME (TYPE OR PRINT)

Katherine Vasquez

SIGNATURE

TITLE

DSHS Rules Coordinator

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: August 04, 2016

TIME: 9:06 AM

WSR 16-17-003

**Note: If any category is left blank, it will be calculated as zero.
No descriptive text.**

**Count by whole WAC sections only, from the WAC number through the history note.
A section may be counted in more than one category.**

The number of sections adopted in order to comply with:

Federal statute:	New	_____	Amended	_____	Repealed	_____
Federal rules or standards:	New	_____	Amended	_____	Repealed	_____
Recently enacted state statutes:	New	<u>39</u>	Amended	<u>2</u>	Repealed	_____

The number of sections adopted at the request of a nongovernmental entity:

New	_____	Amended	_____	Repealed	_____
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The number of sections adopted in the agency's own initiative:

New	_____	Amended	_____	Repealed	_____
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The number of sections adopted in order to clarify, streamline, or reform agency procedures:

New	_____	Amended	_____	Repealed	_____
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The number of sections adopted using:

Negotiated rule making:	New	_____	Amended	_____	Repealed	_____
Pilot rule making:	New	_____	Amended	_____	Repealed	_____
Other alternative rule making:	New	<u>39</u>	Amended	<u>2</u>	Repealed	_____

AMENDATORY SECTION (Amending WSR 13-24-045, filed 11/26/13, effective 1/1/14)

WAC 388-845-1610 Where can respite care be provided? (1) Respite care can be provided in the following location(~~(s)~~):

- (a) Individual's home or place of residence;
- (b) Relative's home;
- (c) Licensed children's foster home;
- (d) Licensed, contracted and DDA certified group home;
- (e) Licensed assisted living facility contracted as an adult residential center;
- (f) Adult residential rehabilitation center;
- (g) Licensed and contracted adult family home;
- (h) Children's licensed group home, licensed staffed residential home, or licensed childcare center;
- (i) Other community settings such as camp, senior center, or adult day care center(~~(-)~~); and
- (j) Certified overnight planned respite services home.

(2) Additionally, your respite care provider may take you into the community while providing respite services.

AMENDATORY SECTION (Amending WSR 13-24-045, filed 11/26/13, effective 1/1/14)

WAC 388-845-1615 Who are qualified providers of respite care? Providers of respite care can be any of the following individuals or agencies contracted with DDA for respite care:

- (1) Individuals meeting the provider qualifications under chapter 388-825 WAC;
- (2) Homecare/home health agencies, licensed under chapter 246-335 WAC, Part 1;
- (3) Licensed and contracted group homes, foster homes, child placing agencies, staffed residential homes and foster group care homes;
- (4) Licensed and contracted adult family homes;
- (5) Licensed and contracted adult residential care facilities;
- (6) Licensed and contracted adult residential treatment facilities under chapter 246-337 WAC;
- (7) Licensed child care centers under chapter 170-295 WAC;
- (8) Licensed child day care centers under chapter 170-295 WAC;
- (9) Adult day care providers under chapter 388-71 WAC contracted with DDA;
- (10) Certified provider under chapter 388-101 WAC when respite is provided within the DDA contract for certified residential services; (~~(e)~~)
- (11) Certified overnight planned respite services providers under chapter 388-829R WAC; or
- (12) Other DDA contracted providers such as community center, senior center, parks and recreation, summer programs.

OVERNIGHT PLANNED RESPITE SERVICES

NEW SECTION

WAC 388-829R-005 What definitions apply to this chapter? The following definitions apply to this chapter:

"Adult protective services" or "APS" means the investigative body designated by the aging and long term care support administration (ALTSA) to investigate suspected cases of abandonment, abuse, financial exploitation, and neglect as defined in chapter 74.34 RCW.

"Authorization" means DDA approval of funding for a service as identified in the individual support plan or evidence of payment for a service.

"Client" means a person who has a developmental disability as defined in RCW 71A.10.020(5) and who the administration has determined eligible to receive services under chapter 71A.16 RCW. When used in this section, "you" is interchangeable with client.

"DDA" or "the administration" means the developmental disabilities administration, an administration of the department of social and health services and its employees and authorized agents.

"DSHS" or "the department" means the state of Washington department of social and health services and its employees and authorized agents.

"Family" means relatives who live in the same home with the eligible client. Relatives include spouse or registered domestic partner, natural, adoptive, or stepparent, grandparent, child, stepchild, sibling, stepsibling, uncle, aunt, first cousin, niece, or nephew.

"Mandatory reporter" means any person working with vulnerable adults required to report suspected incidents of abandonment, abuse, neglect, financial exploitation under chapter 74.34 RCW.

"NA-R" means nursing assistant-registered under chapter 18.88A RCW.

"NA-C" means nursing assistant-certified under chapter 18.88A RCW.

"Overnight planned respite services" means services that are intended to provide short-term intermittent relief for persons who live with the DDA client as the primary care provider and are either a family member who is paid or unpaid or a non-family member who is not paid. These services also provide the opportunity for the client to receive support, care, and engagement in the community.

"Overnight planned respite services provider," "service provider" and "provider" means a provider that is contracted to provide overnight planned respite services.

"Registered nurse delegation" means the process by which a registered nurse transfers the performance of selected nursing tasks to a NA-R or NA-C in selected situations as set forth in chapter 18.79 RCW and WAC 246-840-910 through 246-840-970).

NEW SECTION

WAC 388-829R-010 What is the purpose of this chapter? This chapter establishes rules for clients and providers regarding overnight planned respite services administered by DDA.

NEW SECTION

WAC 388-829R-015 What conditions must be met to be eligible to receive overnight planned respite services? (1) Recipients of overnight planned respite services must meet the following conditions at a minimum:

(a) Have been determined eligible for DDA services per chapter 388-823 WAC;

(b) Be at least eighteen years of age; and

(c) Live at home with primary care providers who are paid or unpaid family members or non-family members who are not paid to provide care for you.

(2) The adult respite services committee will consider the following factors when reviewing requests for services:

(a) Whether the recipient's needs can be safely met in the respite setting;

(b) Whether there are available vacancies within ninety days of requested dates; and

(c) Whether the stay will reduce utilization of residential habilitation centers for respite.

NEW SECTION

WAC 388-829R-016 How do I access overnight planned respite services? (1) Your case resource manager will assist you with completing a brief application and ensure overnight planned respite services are included in your individual support plan.

(2) Upon approval for services, you will work with the provider to complete an individual respite services agreement that outlines agreed support needs and activities prior to your stay.

NEW SECTION

WAC 388-829R-017 Who are the qualified providers of overnight planned respite services? Qualified providers must be certified by and contracted with DDA to provide overnight planned respite.

NEW SECTION

WAC 388-829R-018 What are the time limitations of overnight planned respite services? Overnight planned respite services may not exceed fourteen days in a calendar year.

NEW SECTION

WAC 388-829R-020 What are the responsibilities of an overnight planned respite services provider? An overnight planned respite services provider must:

- (1) Meet the requirements of this chapter and its contract;
- (2) Deliver the service on the dates approved by the administration;
- (3) Provide supports and services outlined in the individual respite services agreement;
- (4) Provide adequate staff to administer the program and meet the needs of clients;
- (5) Ensure that clients have immediate access to staff or the means to contact staff at all times; and
- (6) Retain all records and other material related to the services contract for six years after expiration of the contract.

NEW SECTION

WAC 388-829R-025 What requirements must an agency meet to contract with DDA to provide overnight planned respite services? To be eligible to contract with DDA to provide overnight planned respite services, an agency:

- (1) Must be certified by the DDA to perform the duties of overnight planned respite service;
- (2) Must be approved as a contractor by the department; and
- (3) Providing respite to more than one client per respite home is prohibited.

NEW SECTION

WAC 388-829R-030 Are the rules in chapter 388-113 and 388-825 regarding background checks applicable to providers of overnight planned respite services? Yes. The rules in chapter 388-113 and 388-825 regarding background checks are applicable to providers of overnight planned respite services.

NEW SECTION

WAC 388-829R-035 What will disqualify overnight planned respite services providers from working in a capacity that may involve access to individuals with a developmental disability? Criminal convictions and pending charges that disqualify overnight planned respite services providers and their employees and volunteers from working with individuals with a developmental disability are listed in chapter 388-113 WAC. Individuals employed by overnight planned respite services providers who receive a DSHS background check with disqualifying results are prohibited from any access to DDA clients.

NEW SECTION

WAC 388-829R-060 What are the minimum requirements for overnight planned respite services providers? Overnight planned respite services providers must at a minimum:

- (1) Have a high school diploma or GED equivalent, unless hired before September 1, 1991;
- (2) Be at least eighteen years of age when employed as a direct care staff, or at least twenty-one years of age when employed as an administrator;
- (3) Have a clear understanding of job responsibilities and knowledge of individual support plans and client needs;
- (4) Have a current background check as required by WAC 388-829R-030; and
- (5) Be able to:
 - (a) Read, understand, and provide services outlined in the individual support plan (ISP) and individual respite services agreement;
 - (b) Reasonably accommodate the client's individual preferences;
 - (c) Know the community resources, such as medical facilities, emergency resources, and recreational opportunities;
 - (d) Enable the client to keep in touch with family and friends in a way preferred by the client;
 - (e) Protect the client's financial interests;
 - (f) Fulfill reporting requirements as required in this chapter and the overnight planned respite services contract;
 - (g) Know how and when to contact the client's representative and case manager; and
 - (h) Successfully complete the training required in this chapter.

NEW SECTION

WAC 388-829R-065 What training requirements must overnight planned respite services staff meet? Overnight planned respite services provider staff must meet all training and certification requirements that apply to community residential service businesses in accordance with chapter 388-829 WAC. The provider must document that its staff has met these requirements and make this documentation available for DDA.

NEW SECTION

WAC 388-829R-070 What policies and procedures must overnight planned respite services providers have? (1) Overnight planned respite services providers must develop and implement policies and procedures that address:

- (a) Client rights, including a client's right to file a complaint or suggestion without interference;
 - (b) Reporting requirements for suspected abuse, neglect, financial exploitation, or abandonment;
 - (c) Client protections when there have been allegations of abuse, neglect, financial exploitation, or abandonment;
 - (d) Emergent situations that may pose a danger or risk to the client or others;
 - (e) Response to a missing person and other client emergencies;
 - (f) Emergency response plans for natural or other disasters;
 - (g) Client access to medical, mental health, and law enforcement resources for clients;
 - (h) Notification to client's legal representative or relatives in case of emergency;
 - (i) Client grievances;
 - (j) Appropriate response and supports for clients who engage in aggressive or assaultive behavior; and
 - (k) All aspects of medication management including but not limited to:
 - (i) Supervision of medication;
 - (ii) Client refusal;
 - (iii) Services related to medications and treatments provided under the delegation of a registered nurse consistent with chapter 246-840 WAC;
 - (iv) The monitoring of a client who self-administers medication;
 - (v) Medication assistance for clients who need support; and
 - (vi) What the service provider will do in the event it becomes aware that a client is no longer safe to take his or her own medications.
- (2) The service provider must train staff on its policies and procedures, maintain current written policies and procedures, and make them accessible to all staff and available to clients and legal representatives upon request.

NEW SECTION

WAC 388-829R-075 What are the requirements for an individual respite services agreement? (1) Overnight planned respite services providers must develop an individual respite services agreement with the client's paid or unpaid caregiver at least three business days prior to the client's placement.

(2) The individual respite services agreement must outline supports and services to be provided during the respite stay.

NEW SECTION

WAC 388-829R-080 What services and activities must be a part of overnight planned respite services? The overnight planned respite services provider must provide the following services and activities at no cost to the client:

- (1) Support staff available twenty-four hours per day for each day of the respite stay as determined in the individual respite services agreement to meet the client's needs as identified in the client's assessment;
- (2) A furnished home environment including a private, furnished bedroom for the respite client;
- (3) An accessible site for clients with physical disabilities;
- (4) Three nutritious meals and two snacks per day;
- (5) Bedding and towels;
- (6) Access to laundry facilities;
- (7) Access to a telephone for local calls;
- (8) Medication monitoring, assistance and administration as needed;
- (9) Instruction and support services identified in the client's individual respite services agreement;
- (10) Transportation as identified in the individual respite services agreement;
- (11) Supports for performing personal hygiene routines and activities of daily living as identified in the individual respite service agreement and individual support plan; and
- (12) Activities within the home and community as outlined in the individual respite services agreement.

NEW SECTION

WAC 388-829R-085 Are overnight planned respite providers responsible to transport a client? (1) The client and client's family are responsible for transportation to and from the respite services.

(2) The overnight planned respite services provider is responsible to ensure that the client's transportation needs are met during the respite stay as identified in the client's individual respite services agreement.

NEW SECTION

WAC 388-829R-090 What requirements must be met before an overnight planned respite provider transports a client? Before transporting a client, overnight planned respite services providers must:

- (1) Carry automobile insurance per chapter 46.30 RCW; and
- (2) Have a valid driver's license per chapter 46.20 RCW.

NEW SECTION

WAC 388-829R-110 What health care assistance must an overnight planned respite provide a client? The overnight planned respite services provider must provide the client the following health care assistance:

- (1) Observe the client for changes in health, take appropriate action, and respond to emergencies;
- (2) Manage medication assistance per chapter 246-888 WAC and administration per WAC 246-840-910 to 246-840-970 and DDA residential medication management requirements specified in the overnight planned respite services contract;
- (3) Assist the client with any medical treatment prescribed by health professionals that does not require registered nurse delegation or professionally licensed services;
- (4) Communicate directly with health professionals when needed; and
- (5) Provide a balanced, nutritional diet.

NEW SECTION

WAC 388-829R-115 How may an overnight planned respite services provider assist a client with medication? (1) An overnight planned respite services provider may only provide medication assistance per chapter 246-888 WAC if the client meets the following criteria:

- (a) Is able to put the medication into his or her mouth, apply, or instill the medication; and
 - (b) Is aware that he or she is receiving medication.
- (2) An overnight planned respite services provider may provide specific medication assistance tasks as described under chapter 246-888 WAC as follows:

Medication Assistance Task	May an overnight planned respite services provider complete this task if the client meets both criteria in subsections (1)(a) and (b) of this section?
Remind or coach the client to take his or her medication.	Yes
Open the medication container.	Yes
Hand client the medication container.	Yes
Place medication in the client's hand.	Yes

Medication Assistance Task	May an overnight planned respite services provider complete this task if the client meets both criteria in subsections (1)(a) and (b) of this section?
Transfer medication from a container to another device for the purpose of an individual dose (e.g., pouring liquid medication from a container to a calibrated spoon, medication cup or adaptive device.	Yes
Alter a medication by crushing or mixing, or similar alterations.	Yes, if the client is aware that the medication has been altered or added to food or beverage. A pharmacist or other qualified practitioner must determine it is safe to alter a medication and this must be documented on the prescription container or in the client's record.
Handing the client a prefilled insulin syringe.	Yes, but the client must be able to inject the insulin by him or herself.
Guide or assist client to apply or instill skin, nose, eye and ear preparations.	Yes, but hand-over-hand administration is not allowed.
Assistance with injectable or IV medication.	No, this is not allowed.
Hand-over-hand assistance with medication.	No, may only be done under nurse delegation.
Assistance with medication beyond the examples provided in this chart.	No, may only be done by a licensed professional within the scope of their license or under registered nurse delegation.

NEW SECTION

WAC 388-829R-120 What is required for an overnight planned respite services provider to administer medication and provide delegated nursing tasks? Before overnight planned respite services providers may administer medication or provide nursing tasks for their clients, they must meet one of the following requirements:

- (1) Be a registered nurse (RN) or licensed practical nurse (LPN);
- or
- (2) Be delegated to perform nursing care tasks by a registered nurse.

NEW SECTION

WAC 388-829R-125 What is required for an overnight planned respite services provider to perform nursing tasks under the registered nurse delegation program? In order to be delegated to perform nursing tasks, an overnight planned respite services provider must:

(1) Receive client-specific training from the delegating registered nurse; and

(2) Verify with the registered nurse delegator that it has complied with chapter 18.79 RCW and WAC 246-840-910 through 246-840-990 by providing the registered nurse delegator with proof of:

(a) A current NA-R or NA-C registration or certification as a home care aide (HCA-C) without restriction, or a certification showing completion of the "nurse delegation for nursing assistants" class; and

(b) A certification of completion of the "nurse delegation training: special focus on diabetes" class when the provider anticipates that the NA-R, NA-C or HCA-C may be administering insulin injections under nurse delegation; or a certification showing completion of "fundamentals of caregiving" if the overnight planned respite services provider is an NA-R.

NEW SECTION

WAC 388-829R-130 When is an overnight planned respite services provider not allowed to perform nursing tasks? (1) An overnight planned respite services provider is prohibited from performing delegated nursing tasks for a client if it has not complied with the requirements in WAC 388-829R-125.

(2) An overnight planned respite services provider may not offer support to a client whose needs it is unable to meet.

(3) If the overnight planned respite services provider is not eligible to perform nursing tasks, a legally authorized person such as an RN or LPN must perform the task.

NEW SECTION

WAC 388-829R-135 What records must the overnight planned respite services provider keep regarding registered nurse delegation? (1) The overnight planned respite services provider must keep the following records when participating in registered nurse delegation:

(a) Written instructions for performing the delegated task from the delegating RN;

(b) The most recent six months of documentation showing that the task was performed; and

(c) Validation of nursing assistant registrations or certifications.

(2) These records must be accessible to the delegating nurse at all times.

NEW SECTION

WAC 388-829R-140 Where must overnight planned respite services be provided? Overnight planned respite services providers must provide overnight planned respite services in a single person residence maintained and furnished by the provider.

NEW SECTION

WAC 388-829R-145 How must overnight planned respite services providers regulate the water temperature at their residence? (1) Overnight planned respite services providers must regulate the water temperature at their residence as follows:

(a) Maintain the water temperature in the household between one hundred five degrees and one hundred twenty degrees Fahrenheit; and

(b) Check the water temperature at least every six months. The water temperature is best measured two hours after substantial hot water usage.

(2) The overnight planned respite services provider must document compliance with these requirements.

NEW SECTION

WAC 388-829R-150 What are the requirements for record entries? (1) The overnight planned respite services provider must make entries at the time of or immediately following the event and maintain both the original and corrected entries when an error in the record is made.

(2) Written entries must be legible, in ink, and signed and dated.

(3) Electronic record entries must identify the date of the entry and the person who made the entry by his or her unique user ID.

NEW SECTION

WAC 388-829R-155 Are client records considered confidential? The overnight planned respite services provider must consider all client information privileged and confidential.

(1) Any transfer or inspection of records to parties other than DSHS must be authorized by DDA or through a release of information form that:

(a) Includes a specific description of the records the client consents to be released; and

(b) Is signed by the client or the client's legal representative.

(2) A signed release of information is valid for up to one year and must be renewed annually from the signature date.

NEW SECTION

WAC 388-829R-160 How long must an overnight planned respite services provider keep client records? An overnight planned respite services provider must keep a client's records for a period of six years from the end of the client's respite stay.

NEW SECTION

WAC 388-829R-165 What must overnight planned respite services providers do to plan for and respond to emergencies? (1) The overnight planned respite services provider must develop an emergency response plan to address natural and other disasters.

(2) In an emergency, the overnight planned respite services provider must:

- (a) Immediately call 911 if it is a life threatening emergency;
- (b) Provide emergency services;
- (c) Notify DDA and the client's legal representative; and
- (d) Submit a written report to DDA as required by the DDA residential reporting requirements specified in the overnight planned respite services contract.

NEW SECTION

WAC 388-829R-170 What records must overnight planned respite services providers keep? Overnight planned respite services providers must keep the following information:

- (1) Client's name and address;
- (2) Name, address, and telephone number of the client's relative or legal representative;
- (3) A copy of the most recent ISP;
- (4) A copy of the individual respite services agreement;
- (5) Nurse delegation records;
- (6) Water temperature monitoring records;
- (7) Staff training records;
- (8) Staff time sheets specific to locations worked;
- (9) Payment records;
- (10) Dates and times of service;
- (11) Progress notes and incident reports;
- (12) Medication intake records;
- (13) A list of the client's personal property upon arrival and departure; and
- (14) A record of money or gift cards managed by the respite provider on behalf of the client during the respite stay.

NEW SECTION

WAC 388-829R-175 Are overnight respite services providers mandatory reporters? (1) Yes. Overnight respite services providers are mandatory reporters. They are required to report all instances of suspected abandonment, abuse, financial exploitation, or neglect of vulnerable adults as defined in chapter 74.34 RCW.

(2) Overnight respite services providers must comply with DDA's residential reporting requirements specified in their contract.

(3) Providers must retain a signed copy of the DDA policy on residential reporting requirements specified in their contract and submit a signed copy of the policy to DDA.

NEW SECTION

WAC 388-829R-180 How must overnight respite services providers report abuse and neglect? Overnight respite services providers must immediately report suspected abandonment, abuse, financial exploitation, or neglect of vulnerable adults to:

(1) Adult protective services using the DSHS toll free telephone number, 1-866-END-HARM or 1-866-363-4276;

(2) DDA in compliance with the DDA residential reporting requirements as specified in the overnight planned respite services contract; and

(3) Law enforcement agencies as required under chapter 74.34 RCW, including when there is reason to suspect sexual or physical abuse.

NEW SECTION

WAC 388-829R-185 Who oversees, monitors, and evaluates overnight planned respite services? DDA oversees and monitors the overnight planned respite services provider. DDA will conduct an evaluation in the home where the respite is provided at least every twelve months.

NEW SECTION

WAC 388-829R-190 How often must DDA evaluate overnight planned respite services providers? (1) DDA must complete its initial evaluation within the first ninety days after the overnight planned respite services provider begins providing respite services.

(2) Following DDA's initial evaluation, it must evaluate the overnight planned respite services provider at least every twelve months.

(3) DDA may conduct additional reviews at its discretion.

NEW SECTION

WAC 388-829R-195 How must the overnight planned respite services provider participate in the evaluation process? The overnight planned respite services provider must participate in the evaluation process by:

- (1) Allowing scheduled and unscheduled home visits by DDA staff and DDA contracted evaluators;
- (2) Providing information and documentation as requested by DDA and DDA contracted evaluators; and
- (3) Cooperating in setting up appointments with DDA and DDA contracted evaluators.

NEW SECTION

WAC 388-829R-200 What occurs during the review and evaluation process? During the review and evaluation process, DDA contracted evaluators will review compliance with this chapter and the DDA overnight planned respite services provider contract.

NEW SECTION

WAC 388-829R-205 What happens if the overnight planned respite services provider is found to be out of compliance? (1) If DDA finds in its evaluation that the overnight planned respite services provider is out of compliance with any part of this chapter or the DDA contract, the provider and DDA must develop a corrective action plan.

- (2) The corrective action plan must:
 - (a) Outline methods for the provider to comply with the required corrections; and
 - (b) Provide a time frame for the provider to complete the corrective actions.

NEW SECTION

WAC 388-829R-210 When may DDA stop the authorization for payment or terminate a contract for the services of an overnight planned respite services provider? DDA may stop the authorization for payment or terminate a contract for the services of an overnight planned respite services provider when:

- (1) The provider demonstrates inadequate performance or inability to deliver quality care that jeopardizes the client's health, safety, or well-being;
- (2) The provider does not complete the corrective actions within the agreed upon time frame;

(3) The provider fails to comply with the requirements of this chapter or the overnight planned respite services provider contract; or

(4) DDA has a reasonable, good faith belief that the client's health, safety, or well-being is at risk.

NEW SECTION

WAC 388-829R-215 May the overnight planned respite services provider request an administrative hearing to contest DDA's decision to stop payment or terminate its contract? No. The overnight planned respite services provider may not contest the decision to stop payment or termination of the contract by administrative hearing. A client may challenge DDA's decision to deny a provider of choice.