

DEVELOPMENTAL DISABILITIES ADMINISTRATION
Olympia, Washington

TITLE: COMPANION HOMES POLICY 4.12

Authority: [42 C.F.R. 441.301\(c\)\(4\)](#) *Home and Community-Based Settings*
[Title 71A RCW](#) *Developmental Disabilities*
[Chapter 388-825 WAC](#) *DDA Services Rules*
[Chapter 388-828 WAC](#) *DDA Assessment*
[Chapter 388-829C WAC](#) *Companion Homes*

References: [DDA Policy 6.12](#) *Incident Management and Reporting Requirements
for Residential Service Providers*

PURPOSE

This policy establishes service delivery guidelines, service limits, companion home provider and field staff requirements, processes for referral, goal planning, and program oversight.

SCOPE

This policy applies to Developmental Disabilities Administration (DDA) staff and DDA-contracted companion home providers.

DEFINITIONS

Client means a person who has a developmental disability as defined in RCW 71A.10.020 and has been determined DDA-eligible under [Chapter 388-823 WAC](#).

Goal means an area identified in the client's person-centered service plan that the client wants to accomplish with the assistance of a companion home provider.

Instruction means goal-oriented teaching that is designed for acquiring, maintaining, and enhancing skills by using techniques such as step-by-step instruction, mentoring, role modeling, and visual supports.

POLICY

- A. Companion homes provide residential habilitation services as defined in [WAC 388-845-1500](#) in an adult foster care model to no more than one adult DDA client. The services are offered in a private residence approved by DDA to assure client health, safety, and well-being. Companion homes provide 24-hour available supervision.
- B. Providers are expected to be familiar with and adhere to requirements outlined in their contract, WAC, and applicable DDA policies.
- C. Providers must deliver services in an integrated setting that meet requirements under [WAC 388-823-1096](#) to facilitate the client's full access to the greater community, including opportunities to seek employment and work in competitive, integrated settings, engage in community life, control personal resources and receive services in the community in the same manner as people without disabilities. Providers must deliver services in a way that promotes the [DDA Guiding Values](#) and client rights under [WAC 388-823-1095](#).

PROCEDURES**A. Companion Home Requests**

- 1. When a client or the client's legal representative requests residential habilitation services from a companion home provider, the case manager must:
 - a. Review the client's DDA assessment and verify that it reflects the client's current support needs;
 - b. Inform their supervisor of the request;
 - c. Follow the regional process for submitting a Core waiver request if the client has unmet support needs that can be met by a companion home; and
 - d. Seek information about companion homes from the regional resource manager supervisor or designee.
- 2. DDA considers the following factors when reviewing a request for residential habilitation services provided by a companion home, identifying potential providers, and distributing referrals:
 - a. Personal preference of the client being referred;

- b. Legal representative requests;
- c. Provider's ability to meet the client's health, safety, and program needs;
and
- d. Whether the home environment meets the client's needs.

B. Referrals

1. Before referring a client to companion home providers, the case manager must obtain signed form [DSHS 14-012](#), *Consent*, from the client or the client's legal representative if the client has one. The form must have been signed within the last 12 months.
2. The resource manager and the case manager must work collaboratively on client referrals.
3. The case manager must compile the referral packet. The referral packet must include:
 - a. [DSHS 14-012](#), *Consent*.
 - b. The contact information of the client's legal representative if the client has one and the client's Necessary Supplemental Accommodation (NSA).
 - c. Contact information of the client's family and all significant people in the client's life.
 - d. The client's current person-centered service plan (PCSP).
 - e. The following additional plans, if relevant:
 - i. Functional assessment and positive behavior support plan;
 - ii. Cross-system crisis plan;
 - iii. Specialized habilitation plan;
 - iv. Individual technical assistance plan;
 - v. Individual education plan.
 - f. Dates, sources, and copies of the most recent psychological or mental health evaluations, including any behavioral and psychiatric information and treatment plans if current.

- g. A summary of incidents that warranted an incident report involving the client within the past 12 months.
- h. The client's criminal history, if recent and relevant.
- i. Educational and vocational records if current.
- j. Financial information (may be found in ACES), such as:
 - i. Verification of SSI or SSA status;
 - ii. Eligibility for financial assistance (e.g., food stamps, Medicaid);
 - iii. Earned and unearned income and resources;
 - iv. Payee information; and
 - v. Whether the client is receiving state supplementary payment funds.

- k. Medical history, immunization records, and medications.

Note: A client's information and records related to sexually transmitted diseases may only be disclosed as permitted under [RCW 70.02.220](#).

- l. Nurse delegation assessments, if current.
- m. [DSHS 10-234](#), *Individuals with Challenging Support Issues*, if the client is an adult who has a history of challenging support issues.
- n. Any video or written messages or information the client wishes to convey.

Note: The resource manager must notify the provider that the client or client's legal representative provided the information.

- 4. The case manager must send the completed referral packet to the regional referral inbox for processing.
- 5. The resource manager must forward the referral packet to potential providers.
- 6. No more than 10 business days after receiving the full referral packet, the provider must review the packet and respond to the RM in writing stating:
 - a. They would like to call or meet with the client and members of the client's support team; or

- b. A reason for declining the referral.
- 7. The RM must record the provider's response in the service episode record (SER).
- 8. If the provider declines the referral, the provider must destroy or delete the referral information in accordance with their contract.
- 9. If the client decides not to select a provider, the RM must notify the provider and send referral packets to additional providers if directed by the client. The RM must document the client's response in the SER.
- 10. The case manager must notify the client of the status of the referral.

C. Transition Planning

- 1. Transition planning reimbursement helps with planning and coordination of services for successful community living. A companion home provider must be contracted before receiving transition planning reimbursement; transition planning reimbursement does not cover transition expenses incurred before the provider was contracted.
- 2. Transition planning reimbursement may be used to cover expenses related to understanding the client support needs including:
 - a. Meeting the client, and the client's legal representative if the client has one, to discuss the support services that the provider will offer to meet the client's assessed needs;
 - b. Visiting with the client in the community, in the client's home, or in the provider's home;
 - c. Setting up client supports prior to the start of services; and
 - d. Developing plans.
- 3. To request preapproval for transition planning reimbursement, the provider must submit a written proposal to the RM that includes a:
 - a. Description of the anticipated expenses; and
 - b. Proposed service start date.

4. The RM must send the proposal to the RMA or designee. The RM must send a written response to the provider indicating the RMA or designee's decision.
5. For instances where transition planning does not result in the client entering the provider's contract, the provider may receive transition planning reimbursement if the provider made a good faith effort to add the client to their contract.
6. DDA publishes companion home transition planning reimbursement rates in the Office of Rates Management's resource called [All DDA Rates](#).

D. Rate Assessment

1. DDA reimburses providers for the instruction and support services provided. Providers are paid using a daily rate as determined under [WAC 388-829C-131](#).
2. DSHS publishes companion home daily rates in the Office of Rates Management's resource called [All DDA Rates](#).

E. Provider Duties and Requirements

A companion home provider must:

1. Participate in the client's PCSP development, review, and revision;
2. Use instruction techniques appropriate to the client's needs and preferred learning style (e.g., include step-by-step instruction mentoring, role modeling, and developing visual cues); and
3. Submit the following written records and reports to the case manager:
 - a. Quarterly reports using [DSHS 15-516](#), *Companion Home Quarterly Report*, which describes the information required in [WAC 388-829C-350](#);
 - b. Incident reports per [DDA Policy 6.12](#), *Incident Management and Reporting Requirements for Residential Service Providers*; and
 - c. Reports on client refusal of services as described in [WAC 388-829C-370](#).

F. Required Training

1. A companion home provider must meet all training requirements that apply to community residential service businesses under [Chapter 388-829 WAC](#). The provider must complete:
 - a. 75 hours of initial training, which includes:
 - i. 5 hours of DDA Orientation and Safety Training;
 - ii. 40 hours of DDA Basic Training; and
 - iii. 30 hours of population-specific training, which includes 6 hours of Companion Home Provider Orientation; and
 - b. 12 hours of continuing education annually.
2. Companion home providers must submit the training documentation to the resource manager, or regional designee, have the documentation available to contracted evaluators at the time of the evaluation, and to DDA staff upon request.
3. For trainings where a DDA-issued certificate is needed, the resource manager or designee must issue a certificate to the provider upon receiving verification of the completed training from the provider.
4. DDA will reimburse the provider for up to 75 hours of completed initial training required under [Chapter 388-829 WAC](#). A companion home provider must be contracted before receiving training reimbursement; training reimbursement does not cover training completed before the provider has a contract. Continuing education is included in the provider's daily rate.
5. DDA publishes companion home training reimbursement rates in the Office of Rates Management's resource called [All DDA Rates](#).

G. Companion Home Respite

1. Companion home clients are eligible to receive respite care, which allows the provider to receive a scheduled break in caregiving. The client may receive respite in settings identified in [WAC 388-829C-230](#).
2. Annual respite hours are determined by the DDA assessment and do not roll over to the next plan year. [WAC 388-829C-232](#) and [WAC 388-828-6012](#) describe the calculation for annual respite hours. DDA determines a companion home client's

annual respite allocation by adding the client’s adjusted companion home services support score under [WAC 388-828-6011](#) to their companion home services support score under [WAC 388-828-6010](#).

- a. A companion home services support score is derived from the unadjusted respite assessment level.
- b. The unadjusted respite assessment level is based on protection supervision level and behavior acuity level as described in [WAC 388-828-5990](#).
- c. [WAC 388-828-6010](#) has a chart that converts the unadjusted respite assessment level into the companion home services support score.

H. Companion Home Habilitation Goal

1. The case manager, in collaboration with the client, the client’s legal representative if the client has one, and the provider, must develop at least one habilitation goal that the provider must actively support the client to accomplish. This goal must be documented in the client’s PCSP. Goals must be specific, measurable, achievable, relevant, and time-bound (“SMART goals”).
2. At least quarterly, or more frequently if requested by DDA, the provider must submit a report to the client’s case manager using [DSHS 15-516](#), *Companion Home Quarterly Report*. These reports are due by the tenth day of the month following the reporting period.

Note: “Quarterly” means the four following time periods: January through March; April through June; July through September; and October through December.

I. Quality Assurance

1. The DDA case manager must:
 - a. Review all written reports from the provider for compliance with the PCSP goals identified in the client assessment and follow up with the provider as needed;
 - b. Initial and file all written reports submitted by the provider and document in the SER; and

- c. If requested, provide all documents requested by the DDA-contracted evaluator.
2. The provider must:
 - a. Participate at least annually in a certification evaluation process. Provide all documents requested by the DDA-contracted evaluator.
 - b. Complete all required corrective actions resulting from the evaluation process within the timeframe provided and submit documentation to the resource manager.
3. In addition to other reasons stipulated in the contract, DDA may deny payment or terminate the contract if the corrective actions are not completed within the specified timeline.

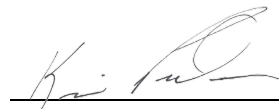
EXCEPTIONS

Any exception to this policy must have the prior written approval of the Deputy Assistant Secretary or designee.

SUPERSESSION

4.12, *Companion Homes*
Issued May 1, 2022

Approved:



Deputy Assistant Secretary
Developmental Disabilities Administration

Date: September 1, 2023