

DEVELOPMENTAL DISABILITIES ADMINISTRATION
Olympia, Washington

TITLE: COMPANION HOMES POLICY 4.12

Authority: [Chapter 71A RCW](#) *Developmental Disabilities*
[Chapter 388-825 WAC](#) *DDA Services Rules*
[Chapter 388-828 WAC](#) *DDA Assessment*
[Chapter 388-829C WAC](#) *Companion Homes*

PURPOSE

This policy establishes the requirements for Companion Home (CH) providers that clarify or are in addition to requirements outlined in rule.

SCOPE

This policy applies to all field services offices of the Developmental Disabilities Administration (DDA) and contracted Companion Home providers.

DEFINITIONS

Goals means what the person has identified they want to accomplish with the supports provided by the provider.

Habilitation means services delivered by providers to assist individuals with developmental disabilities to acquire, retain, and improve upon the self-help, socialization, and adaptive skills necessary to live successfully in the community.

Instruction means an active process of teaching a particular skill or subject.

Support means the implementation of direct care services to ensure assessed needs are met and build capacity.

POLICY

- A. Companion Homes provide residential services and supports in an adult foster care model to no more than one adult DDA client. The services are offered in a regular family residence approved by DDA to assure client health, safety, and well-being. DDA

reimburses the provider for the instruction and support service. Companion homes provide 24-hour available supervision.

- B. Companion Home providers are expected to be familiar with and adhere to applicable requirements outlined in their contract, WAC, and applicable DDA policies.
- C. Companion Home services must be provided in an integrated setting 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 individuals without disabilities. Companion Home services must be provided in a way that promotes:
 - 1. The client's essential personal rights of privacy, dignity, respect, and freedom from coercion and restraint are protected.
 - 2. The client's initiative, autonomy, and independence in making life choices, including but not limited to, daily activities, physical environment, and with whom to interact are optimized and not regimented.
 - 3. The client's right to privacy in their sleeping or living unit.
 - 4. The client's right to lockable doors to their sleeping unit with appropriate others having keys to the door(s).
 - 5. The client's freedom and support to control their own schedules and invite visitors into their home.

PROCEDURES

A. Requests for Companion Home Services

- 1. When a client or the client's legal representative requests Companion Home services, the Case Resource Manager (CRM) must:
 - a. Review the client's CARE assessment and verify that it reflects the client's current support needs;
 - b. Inform his or her supervisor of the request;
 - c. Discuss the appropriateness of Core waiver services with his or her supervisor, and any other staff required by the regional process;
 - d. Seek information about Companion Home Services from the regional Resource Manager Supervisor, if needed;

- e. If the client has unmet support needs that can be met with Companion Home services, follow the regional process for submitting a Core waiver request.

B. Referrals

1. Before referring a client to Companion Home service providers, the CRM must obtain signed form [DSHS 14-012](#), *Consent*, from the client or the client's legal representative if applicable. The form must have been signed within the last 12 months.
2. The Resource Manager (RM) and the CRM will work collaboratively on client referrals.
 - a. The CRM will identify the current needs of the client through the DDA Client Assessment process, submit a Core waiver request if one is needed, and prepare the referral packet.
 - b. DDA will consider the following factors when reviewing a request for Companion Home residential services, identifying potential service providers, and distributing referrals:
 - 1) Personal preference of the client being referred;
 - 2) Legal representative requests;
 - 3) Provider's ability to meet the client's health, safety, and program needs; and
 - 4) Conduciveness of the home to the client's needs.
 - c. The RM will distribute the referral packet to potential Companion Home service providers and collect the provider responses.
3. The CRM will compile the contents of the referral packet. The referral packet must include all of the following:
 - a. The client's legal representative and Necessary Supplemental Accommodation's (NSA's) contact information;
 - b. The client's current DDA Assessment and Person-Centered Service Plan (PCSP);
 - c. Dates, sources, and copies of the most recent psychological or mental health evaluations, including any behavioral and psychiatric information and treatment plans;

- d. A summary of incidents that warranted an Incident Report (IR) involving the client within the past 12 months, including behavioral incidents and medical issues;
- e. The client's criminal history, if applicable;
- f. Educational and vocational records, including the client's Individualized Education Plan (IEP) if available;
- g. Financial information (may be found in ACES), such as:
 - 1) Verification of Social Security Administration (SSA), Supplemental Security Income (SSI) status; and
 - 2) Payee information;
- h. 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](#).
- i. Nurse delegation assessments, if applicable. The contracted Registered Nurse (RN) must use [DSHS 10-217](#), *Nurse Delegation: Nursing Assistant Credentials and Training*;
- j. Contact information of the client's family and all significant people in the client's life; and
- k. DSHS 10-234, *Individuals with Challenging Support Issues*, if the client is an adult who has a history of challenging support issues.

4. The CRM will send the completed referral packet to the RM team for processing.

5. The RM will forward the referral packet to potential providers.

C. Rate Setting

- 1. Companion Home services are paid using a daily rate.
- 2. The daily rate is calculated by the electronic Residential Rates for Developmental Disabilities (RRDD) system based on the client's CARE assessment scores from the following Support Assessment Scales:
 - a. Activities of Daily Living (ADL);
 - b. Behavior;

- c. Interpersonal Support;
- d. Medical;
- e. Mobility; and
- f. Protective Supervision;

Note: Caregiver Risk Level is not a factor in calculating the Companion Home daily rate.

3. RRDD assigns a numerical value to each of the six Support Assessment Scales in subsection (2) as follows:
 - a. None = 0
 - b. Low = 1
 - c. Medium = 2
 - d. High = 3
4. RRDD will assign a behavior score of “4” if the client:
 - a. Has a behavior score of “3” from the Support Assessment Scales;
 - b. Has a history of challenging support issues that have been documented on form DSHS 10-234, *Individual with Challenging Support Issues*; and
 - c. Currently has a positive behavior support plan in place.
5. RRDD will calculate the sum of the six values in subsection (2) of this section and multiply the sum by 12.5 to establish the daily rate.
6. Companion Home daily rates must be reviewed following annual or significant change CARE assessments. Daily rates may fluctuate based on changes to the client’s scores in the Support Assessment Scales.

D. Provider Duties and Requirements

CH service providers must:

1. Participate in the client’s PCSP development, review, and revision;
2. Use teaching techniques that include step-by-step instruction, mentoring, role modeling, and developing visual cues, 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 as required by DDA Policy 5.14 *Positive Behavior Support*; and

3. Submit the following written records and reports to the CRM:
 - a. Quarterly reports that describe the instruction and support activities performed as identified in the PCSP;
 - b. Incident Reports per Policy 6.12 *Incident Management and Reporting Requirements*; and
 - c. Reports on client refusal of services as described in WAC 388-829C-370.

E. Required Training

1. Effective January 1, 2016, new Companion Home service providers must meet all training requirements that apply to community residential service businesses under chapter 388-829 WAC.
2. Companion Home service providers must document that these requirements have been met, submit the training documentation to the DDA Resource Manager, have the documentation available to contracted evaluators at the time of the evaluation, and to department staff upon request.
3. CH service providers must complete at least 12 hours of continuing education each calendar year after the calendar year in which they successfully complete 70 hours of Basic Training and five hours of Orientation and Safety Training. The continuing education must be on topics relevant to supporting people with developmental disabilities or adult teaching techniques and approved by the DDA Resource Manager.

F. Companion Home Respite

1. Companion Home clients are eligible to receive respite care to provide intermittent relief to the Companion Home provider. Respite services for Companion Home providers is offered through DDA contracted respite providers.
2. Annual respite hours are determined by the CARE Assessment. Additional information can be found in [Chapter 388-828 WAC](#).

G. Companion Home Habilitation Goal

1. The DDA CRM, in collaboration with the client, the client's legal representative, and the Companion Home provider, will develop at least one habilitation goal that the provider will actively support the client to accomplish. This goal must be documented in the client's PCSP. The goal will include instructions of how the goal should be supported and how the goal progress will be measured.

2. The Companion Home provider must provide a written report on the progress made to achieve the habilitation goal at least quarterly, or more frequently if requested.

H. **Quality Assurance**

1. The DDA CRM must:
 - a. Conduct an assessment, at least annually, at a place of the client's choosing. If the assessment is not held in the client's home, the CRM will visit the client in the companion home at another time;
 - b. Review all written reports from the provider for compliance with the PCSP goals identified in the client assessment and follow up with the CH service provider as needed; and
 - c. Initial and file all written reports submitted by the CH service provider and document in the SERs.
2. The Companion Home provider must:
 - a. Participate at least annually in a review and evaluation process. The DDA-contracted Companion Home evaluator will review compliance with [Chapter 388-829C WAC](#), this policy, and the Companion Home contract and identify required corrective actions, as necessary.
 - 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. An exception to policy must be submitted and reviewed on an annual basis.

SUPERSESSION

DDA Policy 4.12
Issued July 1, 2015

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Approved:

/s/ Donald Clintsman

Deputy Assistant Secretary

Developmental Disabilities Administration

Date: July 1, 2017