

REPORT TO THE LEGISLATURE

Enhanced Respite Services for Children Ages 8-18

Engrossed Substitute Senate Bill 6052
Chapter 4, Laws of 2015, Section 205
(Partial Veto)
64th Legislature
2015 3rd Special Session

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Transforming Lives

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EXECUTIVE SUMMARY

In the 2015-2017 biennial budget, the Washington State Legislature provided funding for the Developmental Disabilities Administration to develop eight Enhanced Respite beds for children with developmental disabilities from ages eight to eighteen. The intent is to provide short-term, state-wide community-based planned respite services, as an alternative to using respite services in an institutional setting. The appropriation for eight beds allowed funding for the two existing beds¹ which were unfunded, and development of six additional beds. The two existing Enhanced Respite beds were developed to increase community resources as a result of a 2011 change in legislation which prohibits children from under the age of 16 to receive services in a Residential Habilitation Center.

BACKGROUND AND CONTEXT

Legislative Charge

As part of the 2015 legislative Session, the Washington State Legislature passed ESSB 6052 appropriating funds for the development and implementation of eight enhanced respite beds across the state for children. These services are intended to provide families and caregivers with a break in caregiving, the opportunity for behavioral stabilization of the child, and the ability to partner with the state in the development of an individualized service plan that allows the child to remain in his or her family home.

ESSB 6052 requires the Developmental Disabilities Administration to develop a respite utilization report by January 2, 2016, and each year thereafter. The report at a minimum, must describe the following:

- 1) The number of children who have used enhanced respite services in the preceding year and;
- 2) The location and number of days per month that each respite bed was occupied.

In 2011, the Washington State Legislature amended RCW 71A.20 through the passage of Second Substitute Senate Bill 5459. The bill directed the Department of Social and Health Services to establish state-staffed community crisis stabilization services. The bill further directed that no person under the age of sixteen (16) years may be admitted to receive services at a Residential Habilitation Center (RHC) and no one under the age of twenty-one (21) may be admitted to receive services at a RHC “unless no service options are available in the community” and that “such admission is limited to the provision of short-term respite or crisis stabilization services.”

As a result there is an increased need for families, who are the majority of providers for children with developmental disabilities, to have an opportunity for respite services in their communities. For families raising children with complex behavioral needs, it is important to have out-of-home respite available that can meet the needs of the child and provide therapeutic supports to both the child and the family.

The goal of these respite services is to provide them in accordance with the Center for Medicare and Medicaid requirements for residential programs. This will include offering these services throughout the state in integrated settings that will support access to community activities when appropriate.

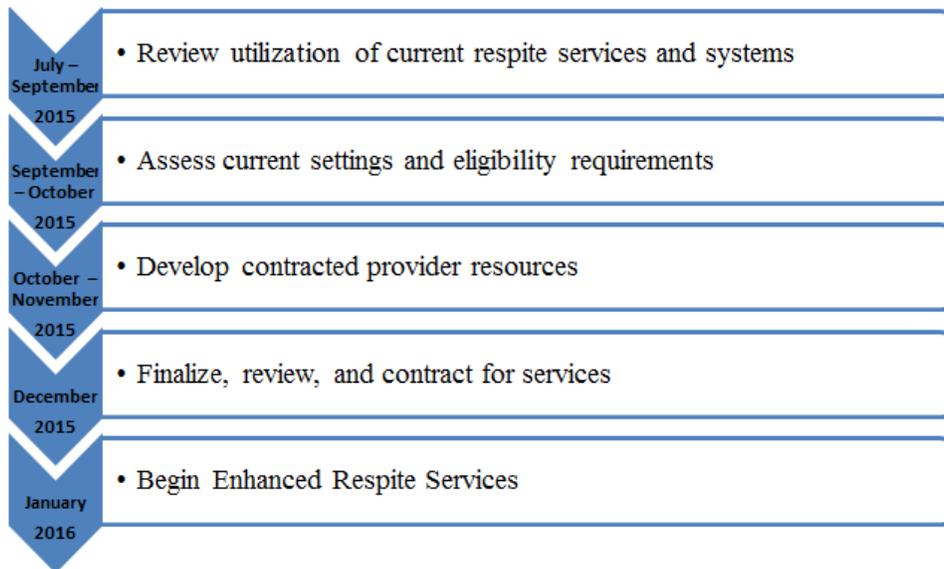
IMPLEMENTATION PLAN AND CONTRACT AND POLICY REQUIREMENTS

¹ Bonney Lake and Kennewick; Tables in Section 4.0

Implementation Plan

In July 2015, after the budget was approved by the Legislature, a workgroup was formed and a project plan developed to include current resource and need analysis, resource development, contract requirements development and a communication plan development.

A request for letters of interest was distributed and posted in late October 2015. Solicitation outlined the basic requirements and requested prospective providers submit program proposal including physical setting and budget. Five providers responded to the requests for letters of interests and contracts were initiated beginning in January 2016. Recruitment of new service providers continued throughout the year. Shown here is the initial plan of service development.



Contract and Policy Requirements

- 1) Providers of Enhanced Respite Services are responsible to:
 - a) Be licensed by DSHS in accordance with [Chapter 74.15 RCW](#) and shall meet or exceed the minimum licensing requirements in [Chapter 388-145 WAC](#).
 - b) [DDA Policy 4.03](#) describes the division's expectations regarding the use of enhanced respite services for children and youth who have challenging behaviors and/or other family crises.
 - c) Provide developmentally appropriate services to families by allowing a short-term break in care giving for their child.
 - d) Employ or contract with a behavior specialist available to train and provide oversight to staff working with the individuals receiving Enhanced Respite Services. Expectations include participation in the development/implementation of the child's functional assessment and/or positive behavior support plan and data collection.
 - e) Provide parents the opportunity to participate in the observation and development of therapeutic teaching and training techniques employed by staff working directly with the child accessing Enhanced Respite Services.

- 2) Additional supports required to meet client health, safety and supervision needs include:
- a) Provide housing, meals, basic hygiene supplies, furnishings, and clean linens.
 - b) Employ staff who provides physical assistance, support, and protective supervision to the client in their daily routine activities.
 - c) Employ staff who are nurse delegated or are licensed to meet needs when clients cannot self-medicate as defined in [DDA Policy 6.19](#).
 - d) Provide transportation to local community resources including school.
 - e) Provide meaningful, developmentally appropriate activities indoors and within the local community.

CURRENT UTILIZATION AND BARRIERS

In 2016, there have been five contracted community residential providers delivering Enhanced Respite Services. The tables below show by month, the number of available respite days, the number of clients who utilized respite and the number of days each site was occupied. The final column shows the percentage of utilization.

The tables are organized by contract start date.

Location: Kennewick Provider: Breakthrough Inc. Contract Start Date: 1/1/16 Number of Enhanced Respite beds: One Comments: Provider originally began service delivery 6/15/2015. New contracts were signed 1/1/16. December 2016 data was not available at the time report was due to Legislature.				
Month/year	Number of days available	Number of Clients	Occupied Days	Utilization %
16-Jan	31	2	31	100%
16-Feb	29	2	28	97%
16-Mar	31	2	29	94%
16-Apr	30	2	29	97%
16-May	31	2	30	97%
16-Jun	30	2	27	90%
16-Jul	31	2	3	10%
16-Aug	31	2	30	97%
16-Sep	30	2	27	90%
16-Oct	31	1	31	100%
16-Nov	9	1	9	100%
Averages	28.3	1.8	24.3	86%

Location: Bonney Lake

Provider: Aacres

Contract Start Date: 1/1/16

Number of Enhanced Respite beds: One

Comments: Provider originally began service delivery 3/18/2013. New contracts were signed 1/1/16. December 2016 data was not available at the time report was due to Legislature.

Month/year	Number of days available	Number of Clients	Occupied Days	Utilization %
16-Jan	31	1	3	10%
16-Feb	29	2	29	100%
16-Mar	31	2	31	100%
16-Apr	30	2	30	100%
16-May	31	1	31	100%
16-Jun	30	2	30	100%
16-Jul	31	2	29	94%
16-Aug	31	3	31	100%
16-Sep	30	2	30	100%
16-Oct	31	3	31	100%
16-Nov	30	3	27	90%
Averages	30.4	2.2	29.9	90%

Location: Ferndale

Provider: Service Alternatives

Contract Start Date: 3/1/16

Number of Enhanced Respite beds: One

Comments: December 2016 data was not available at the time report was due to Legislature.

Month/year	Number of days available	Number of Clients	Occupied Days	Utilization %
16-Jan	N/A			
16-Feb	N/A			
16-Mar	31	1	9	29%
16-Apr	30	1	27	90%
16-May	31	3	31	100%
16-Jun	30	4	25	83%
16-Jul	31	2	31	100%
16-Aug	31	2	31	100%
16-Sep	30	1	30	100%
16-Oct	31	2	14	45%
16-Nov	30	2	28	93%
Averages	30.5	2	25.11	82%

Location: Spokane
Provider : Breakthrough, Inc.
Contract Start Date: 3/14/2016
Number of Enhanced Respite beds: One
Comments: Referrals were suspended in November 2016 awaiting outcomes of investigative actions.

Month/year	Number of days available	Number of Clients	Occupied Days	Utilization %
16-Jan	N/A			
16-Feb	N/A			
16-Mar	18	1	18	100%
16-Apr	30	2	28	93%
16-May	31	2	30	97%
16-Jun	30	2	28	93%
16-Jul	31	2	31	100%
16-Aug	31	2	29	94%
16-Sep	30	2	30	100%
16-Oct	31	1	20	65%
16-Nov	N/A			
Averages	29	1.75	26.75	93%

Location: Maple Valley
Provider: Service Alternatives
Contract Start Date: 7/28/16 – 8/26/16
Number of Enhanced Respite beds: One
Comments: Payment was suspended in August at request of the service provider due to their inability to maintain minimum staffing requirement per DLR Chapter 388-145 WAC. Anticipate services to resume early Spring 2017.

Month/year	Number of days available	Number of Clients	Occupied Days	Utilization %
16-Jan	N/A			
16-Feb	N/A			
16-Mar	N/A			
16-Apr	N/A			
16-May	N/A			
16-Jun	N/A			
16-Jul	4	1	4	100%
16-Aug	31	1	26	84%
16-Sep	26		0	0%
16-Oct	N/A			
16-Nov	N/A			
Averages	20.3	1	10	61%

Location: Spokane Provider: Visions for a New Beginning Contract Start Date: 9/21/16 Number of Enhanced Respite beds: One Comments: December 2016 data was not available at the time report was due to Legislature.				
Month/year	Number of days available	Number of Clients	Occupied Days	Utilization %
16-Jan	N/A			
16-Feb	N/A			
16-Mar	N/A			
16-Apr	N/A			
16-May	N/A			
16-Jun	N/A			
16-Jul	N/A			
16-Aug	N/A			
16-Sep	9	1	9	100%
16-Oct	31	1	31	100%
16-Nov	30	2	21	70%
Averages	23.3	1.33	20.33	90%

Enhanced Respite contracts were initiated throughout the year as the availability to contract with service providers emerged. The N/A in number of days available indicates that the contract was either not started or ended mid-year.

Current challenges in establishing and maintaining Enhanced Respite Services

The above tables demonstrate that there are challenges in starting new Enhanced Respite contracts. Service providers report challenges encountered include:

- 1) Ability to locate accessible, affordable homes in all communities that meet licensing requirements.
- 2) Length of time to get a home licensed once a home is located.
- 3) Difficulty in hiring and retaining staff that meet the standards defined in the licensing requirements.
- 4) Lack of staff due to competition with other employers offering similar rate of pay, in positions with less responsibility.
- 5) Lack of available appropriate community resources/interventions within the local community to support the client if the client's mental and/or medical health conditions are not stable and predictable.

Current barriers to accessing respite services

- 1) The need for staff to be currently registered and/or certified to provide nurse delegated tasks if needed.
- 2) Clients experiencing acute crisis require a level of support and intervention that may not be immediately available.
- 3) Risk of vulnerability to other individuals residing in the home.
- 4) Unavailability during the time period requested, due to heavy utilization.
- 5) Distance to travel to Enhanced Respite sites can be a barrier for some families.

SUMMARY

The total number of persons who utilized Enhanced Respite Services in the tables above is 84. Some of these persons may have utilized Enhanced Respite on more than one occasion. The tables also demonstrate that as a new location opens, it sometimes takes time for utilization to increase; however, once the service is established, the occupancy is high. Utilization ranged from a low of 61% to a high of 93%.

DDA was funded to provide eight Enhanced Respite beds. Due to the challenges service providers face in locating and licensing homes, and in hiring and retaining staff to meet minimum staffing requirements, that goal has not been met.

DDA is currently working with two additional licensed providers, in contracting to provide Enhanced Respite Services with an anticipated start date of spring 2017. Families have found Enhanced Respite to be a useful service, as demonstrated in the level of utilization. DDA will continue to develop additional Enhanced Respite sites within the budgetary and legislative allowances. Additional locations would be useful to families so that they do not have to leave their local communities to access the Enhanced Respite service.