

DEVELOPMENTAL DISABILITIES ADMINISTRATION Olympia, Washington

| TITLE: | STANDARDS FOR COMMUNITY PROTECTION 15.04 RESIDENTIAL SERVICES | | | |
|------------|--|---|--|--|
| Authority: | <u>42 C.F.R. 440.301(c)(4)</u> | Home and Community-based Settings | | |
| | <u>Title 71A RCW</u> | Developmental Disabilities | | |
| | Chapter 71A.12 RCW | Developmental Disabilities: State Services | | |
| | Chapter 388-101 WAC | Certified Community Residential Services and Support | | |
| | Chapter 388-101D WAC | Requirements for Providers of Residential Services and Support | | |
| | Chapter 388-825 WAC | Developmental Disabilities Services | | |
| | Chapter 388-829 WAC | Community Residential Service Business Training Requirements | | |
| | Chapter 388-831 WAC | Community Protection Program | | |
| Reference: | | ty Protection Program Identification and Eligibility | | |
| | DDA Policy 15.02, Community Protection Program Services | | | |
| | DDA Policy 15.03, Communit | ty Protection Standards for Employment Program | | |
| Services | | | | |
| | DDA Policy 15.05, Community Protection Program Exit Criteria | | | |

<u>PURPOSE</u>

This policy establishes guidelines for supporting community protection program (CPP) participants in supervised community residential settings.

<u>SCOPE</u>

This policy applies to Developmental Disabilities Administration (DDA) field services staff and CPP supported living providers.

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DEFINITIONS

Chaperone means a person, approved by the CPP team, who is delegated the responsibility to escort and supervise the CPP participant and assist the CPP participant to follow their program plan. This may include family members, guardians, community members, or friends.

Community protection program (CPP) means services specifically designed to support CPP participants who are at risk to engage in unsafe behaviors as defined in <u>DDA Policy 15.01</u>, *Community Protection Program Identification and Eligibility*.

CPP participant means a DDA client who has agreed to receive CPP services under <u>Chapter 388-101D WAC</u> and <u>DDA Policy 15.01</u>.

CPP plan means a participant's individualized plan written by a qualified professional, therapist, or CPP skills provider.

CPP team means the program participant and the group of people responsible for the development, implementation, and monitoring of the participant's individualized supports and services. This group includes the CPP participant and CPP case manager and may also include the participant's CPP supported living provider, therapist, CPP skills provider, employment program provider, corrections specialist, mental health case manager, legal representative or family, and anyone else the CPP participant chooses to include.

Disclosure means providing relevant information pertaining to the client's community protection program eligibility. This may include copies of professional assessments, legal documents, and other verbal or written information to ensure the provider has information for the purpose of providing supports. Polygraph and plethysmograph reports are excluded from disclosure.

Functional assessment means observing a client, reviewing information about the client, and collecting data about the client to:

- Determine relationships between antecedents and behaviors;
- Identify reinforcing consequences; and
- Form a hypothesis about why a behavior continues to be used.

Legal representative means a parent of a client if the client is under age eighteen, a courtappointed guardian if a decision is within the scope of the guardianship order, or, for the purpose of this policy, any other person authorized by law to act for the client.

Modification means changes to limiting choices of residential or employment locations, approval of residential or employment locations, modifications made to the residence or employment

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location, and use of restrictive procedures assessed and determined to be necessary for a client to make progress toward their identified goals and objectives and may be documented in their CPP plan, positive behavior support plan, or person-centered service plan. Modifications must address issues that made the client eligible for the community protection program.

Qualified professional means a person conducting a risk assessment who has at least three years of experience working with people with developmental disabilities and:

- (a) If the client being assessed has demonstrated sexually aggressive or sexually violent behavior, the qualified professional must be a certified sex offender treatment provider (C-SOTP), or an affiliate SOTP (A-SOTP) working under the supervision of a C-SOTP; or
- (b) If the client being assessed has demonstrated violent, dangerous, or aggressive behavior, the qualified professional must be a licensed psychologist or psychiatrist who has received specialized training in the treatment of violence or has at least three years of experience treating people with violent or aggressive behaviors.

Specialized environment means a place where the CPP participant has agreed to supervision in a safe, structured manner with rules, requirements, approved restrictions, and expectations for personal responsibility as developed by the CPP team.

<u>POLICY</u>

- A. A participant who receives CPP supported living agrees to participate in CPP and agrees to follow the specialized supports and modifications in their CPP plan, functional assessment, positive behavior support plan, person-centered service plan, and individual instruction and support plan that relate to their eligibility criteria for CPP.
- B. CPP supported living must include:
 - 1. An opportunity for the CPP participant to live in the community;
 - 2. Environmental and programmatic safeguards and structures that promote protection of the participant, staff, others in the home, and community members and support the participant in avoiding the behaviors that made them eligible for CPP; and
 - 3. Specialized supports that are developed with and agreed upon by the CPP participant that enables them to make positive choices to reduce the behaviors that made them eligible for CPP.

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- C. When restrictions are implemented for the CPP participant that affect their freedom of movement, association, communication, and access to goods or services, the least restrictive interventions that effectively meet the goal of personal and public safety must be used. Any restrictions must meet requirements of <u>DDA Policy 5.15</u>, *Restrictive Procedures: Community*.
- D. The CPP team must meet quarterly to review the CPP participant's progress and make any changes in the CPP participant's program and support, as necessary.

PROCEDURES

A. <u>Eligibility for CPP Supported Living</u>

To receive CPP supported living, a client must:

- 1. Be enrolled in the community protection program under <u>DDA Policy 15.01</u>;
- 2. Voluntarily consent to participate in the program and services including therapy or skill building recommendations, and modifications to reduce the behaviors that made them eligible for CPP; and
- 3. Sign a pre-placement agreement with DDA.
- B. <u>Service Delivery</u>

A CPP supported living provider must:

- 1. Participate in the integration of habilitative program goals, objectives, and interventions to assist CPP participants to live safely in their community and avoid engaging in the behaviors that made they eligible for CPP;
- 2. Collaborate with the CPP participant, the participant's family or legal representative, therapist, skills provider, DDA staff, counties, and other agencies and individuals, such as law enforcement, schools, employers, mental health providers, and anyone else the participant chooses to be a part of their support group;
- 3. Promote problem-solving and adapting to change without punitive action;
- 4. Use modifications reasonably available to enhance protection of the client, community members, children, vulnerable adults, animals, and property; and

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5. Implement the CPP participant's individual instruction and support plan, positive behavior support plan, and CPP plan.

C. <u>Administrative Requirements</u>

A CPP supported living provider must:

- 1. Have a written agency policy that:
 - a. Describes how the provider supports CPP participants, including:
 - i. Participant security and supervision;
 - ii. Habilitative services and supports;
 - iii. Specialized environmental supports; and
 - iv. Progress toward transition from CPP.
 - b. Describes how the provider communicates with other CPP team members and external people and agencies as appropriate.
 - c. Includes guidelines for supporting the CPP participant to choose residential and employment program settings and locations for leisure time activities that will offer them the best success.
 - d. Includes a chaperone agreement that describes who will supervise the participant when the participant is not under the direct supervision of the CPP supported living provider.
 - e. Includes additional considerations for CPP participants when reviewing referrals as outlined in <u>DDA Policy 4.02</u>, *Referral, Acceptance, and Change of Residential Providers.*
 - f. Establishes how employees:
 - i. Follow the CPP participant's CPP plan; and
 - ii. Participate in CPP team meetings.
 - g. Establishes a procedure for managing confidentiality and release of information, and for disclosing a CPP participant's community protection enrollment and risk factors to necessary parties, including delegating nurses.

- h. Establishes and explains a CPP participant's right and access to grievance procedures as they relate to specialized environments and use of any restrictive measures under <u>DDA Policy 5.15</u>. This should also include assisting the participant to communicate concerns to the other members of the CPP team.
- i. Establishes response and contingency plans for:
 - i. Emergency residence changes for a CPP participant; and
 - ii. Situations that may be dangerous related to a CPP participant's CPP eligibility.
- j. Describes how the provider will support CPP participants to follow applicable state laws, sanctions, and conditions of release, such as sex offender registration requirements, DOC supervision requirements, and less restrictive alternative (LRA) conditions.
- k. Describes how the provider will report to DDA and law enforcement when a participant violates the law or a court order.
- I. Describes how the provider will report when a participant chooses not to engage in program to the CPP team.
- m. Describes incident reporting, including emergency procedures, to notify DDA when a significant incident occurs or a CPP participant chooses to not follow previously agreed to modifications, supervision requirements, program recommendations determined by the CPP team, or ceases participation in therapy or skill building related to their CPP eligibility. Refer to DDA Policy 6.12, Incident Management and Reporting Requirements for Residential Services Providers, for incident reporting requirements. Field Services staff should also refer to DDA Policy 12.01, Incident Management and Reporting.

D. <u>Staff Training</u>

- 1. A CPP supported living employee must complete the following training before working alone with a CPP participant:
 - a. Provider general overview on community protection.

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- b. Specific information about the CPP participant they are supporting, such as training on the participant's positive behavior support plan, treatment plan, individual instruction and support plan, cross-systems crisis plan, and CPP team communication protocols.
- 2. No more than 30 days after beginning working with a CPP participant, a CPP supported living employee must complete the *Community Protection Program Orientation and Training* developed by DDA.

E. <u>Instruction and Support</u>

A CPP participant must have:

- 1. A psychosexual evaluation or risk assessment and support recommendations written by a qualified professional.
- 2. A functional assessment and positive behavior support plan if required under <u>DDA</u> <u>Policy 5.21</u>, *Functional Assessments and Positive Behavior Support Plans*.
 - a. A CPP participant's evaluation or risk assessment from a qualified professional may substitute for a functional assessment if:
 - i. The evaluation or risk assessment was written in the last five years;
 - ii. The current treatment plan developed by the CPP participant's therapist contains hypotheses for the behaviors;
 - iii. The document includes a summary statement of the certified or licensed professional's written assessment and its conclusions; and
 - iv. The CPP participant's current treatment plan and positive behavior support plan include all approved restrictions.
 - b. If the CPP participant needs a positive behavior support plan for behaviors unrelated to the behaviors that made them eligible for CPP, the CPP supported living provider is required to create a functional assessment for those behaviors and a CPP plan may not be substituted for these behaviors.

F. <u>CPP Participant Records</u>

The CPP supported living provider must ensure all of the following CPP-related documents are in a CPP participant's record:

- 1. Psychological or psychosexual evaluations and risk assessments written by a qualified professional;
- 2. The CPP plan that includes:
 - a. Specific time-limited goals and objectives based upon evaluation data;
 - b. Specific services proposed, include frequency and duration of services and methods to be used;
 - c. Recommendations for supervision and any other restrictions or restrictive procedures, why they are necessary and what criteria must be met to reduce or remove supervision and restriction;
 - d. A description of how participant progress will be assessed; and
 - e. Criteria to complete skill development or therapy services related to behaviors that make them eligible for CPP.
- 3. If required, documentation of the CPP participant's registration with appropriate law enforcement authorities, as well as documentation of subsequent notification to DDA of registration;
- 4. Chaperone agreements for supervision of the CPP participant when program staff are not present (refer to Procedures Section K below for chaperone requirements);
- 5. Documentation of the CPP participant's choice to decline engaging with modifications in the individual instruction and support plan, positive behavior support plan, or treatment recommendations of the certified or licensed professional or other treatment professional; and
- 6. Copies of any approved exceptions to policy (ETP).

G. <u>Transportation</u>

A CPP supported living provider:

- 1. Must ensure or provide supervised transportation as needed for medical emergencies, appointments, to and from the employment or day program site, and community activities; and
- 2. Follow the CPP team recommendation for modifications on the use of independent transportation.

H. <u>Residential Site Requirements</u>

- 1. CPP supported living providers must:
 - a. Consider specific risk factors when supporting a CPP participant on identifying housing locations, taking into account the preference of the client as much as possible.
 - b. Determine necessary modifications, which may include visual screening of windows, doors and other openings, use of door and window alarms, and restricted access to certain areas related to the CPP participant's CPP eligibility. All modifications must be the least restrictive alternative and follow DDA Policy 5.15.
- 2. When possible and according to client choice, a CPP participant's residence should be located within a reasonable distance of community resources.

I. <u>Residential Site Reviews</u>

The following procedures apply to site reviews conducted after October 31, 2021.

- 1. <u>DSHS 10-328</u>, *Residential Site Review*, must be used when assisting a CPP participant to select a home. The provider must complete and submit the form to DDA before the participant moves into the residence. The form must include the following elements:
 - a. Documentation that the residential provider has conducted multiple site visits of the home at different days and times of the week to assess the appropriateness of the home and surrounding area for the CPP participant. For a client whose CPP eligibility is related to sexually aggressive or inappropriate behaviors as identified in the CPP participant's

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PCSP, the provider must complete at least three site visits. For other types of risk factors, the provider must complete at least two site visits.

- b. Documentation of how the site is suitable given the CPP participant's specific risk factors and a description of any modifications that will be implemented to ensure the safety of the CPP participant and others.
- c. Approval of the selected home by the residential agency's administrator.
- 2. When completing a site review for a participant with proximity to minors as a risk factor, the provider may contact the Department of Children, Youth, and Families for information on the proximity of the proposed residence to any licensed childcare providers. Contact information can be requested from the community protection program manager.
- 3. The site review form must be specific to the CPP participant's needs.
- 4. When a CPP participant moves into a new or existing CPP home, the provider must complete a site review specific to that participant. When a CPP participant is transferring from one approved home to another, the provider must complete a site review before the CPP participant moves.
- 5. In the event a CPP participant must move immediately into a home approved for a different CPP participant, and there is insufficient time to conduct a site review for the new CPP participant, the provider must conduct the site review and complete the form no more than seven calendar days after the participant moves into the home.
- 6. The provider must notify the CPP team if they become aware that a change has occurred in the neighborhood that might increase the risk to the participant or the community. Examples include: a change in neighbors; or a newly established childcare center, park, or school. If the CPP team comes to a consensus that a new site review is needed, the provider must conduct a new site review and submit an updated site review form to the case manager.
- 7. DDA may request an updated site review at any time.
- J. <u>Composition of Households</u>
 - 1. If a CPP participant and a non-CPP client wish to live together in a mixed household:

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- a. The CPP team must review the request and consider the following:
 - i. The choice of all potential housemates and guardians;
 - ii. Individualized modifications and how they will affect others in the home;
 - iii. Personal compatibility; and
 - iv. Potential risk to the non-CPP housemate based the current risk level of the CPP participant to engage in behaviors that made them eligible for the program.
- b. The CPP case resource managers must:
 - i. Ensure that signed consents are completed for each client or their legal representatives; and
 - ii. Obtain a prior approval in CARE for the non-CPP client to live with the CPP participant.
- 2. The regional administrator must review the request and notify each client's case resource manager of the final decision within 14 days.
- 3. If a CPP participant wishes to remain in their current home with CPP participants upon transition from the program:
 - a. The review process to establish a mixed household must occur before they graduate; and
 - b. The regional administrator must provide a written decision no more than 14 days after receiving the information necessary to review the request.
- K. <u>Chaperones</u>
 - 1. It is critical that anyone who chaperones a CPP participant understands the specific risk factors of the CPP participant and agrees to maintain the same restrictions and supervision level as residential program staff, which is documented with a written chaperone agreement. A chaperone agreement is not considered a reduction in supervision.

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- a. The CPP participant's therapist or skills provider must review each chaperone agreement and provide recommendations for implementation to the CPP team. This may include meeting with the proposed chaperone to discuss the CPP participant's current progress in program and supervision needs and may include disclosure.
- b. Chaperone agreements are not required when supervision will be provided by other paid services providers identified in the CPP participant's PCSP, such as the CPP participant's therapist, skills providers, or employment program provider.
- c. The CPP supported living provider must use <u>DSHS 15-356</u>, *DDA Community Protection Program Chaperone Agreement*, to document all chaperone agreements. The CPP team must review chaperone agreements at the quarterly CPP team meetings.
- 2. The residential provider must train its employees on the contents of each chaperone agreement and notify the CPP participant's therapist or skills provider if the CPP participant or approved chaperone is not following a chaperone agreement.
- 3. Failure by the approved chaperone to provide supervision as outlined in the CPP plan to the CPP participant may result in termination of the chaperone agreement. Before terminating a chaperone agreement, the CPP team must make attempts to ensure the chaperone and participant understand the need for the current level of supervision and the need for any restrictive procedures that are necessary to ensure the safety of the participant and the community.

EXCEPTIONS

Any exception to this policy must have the prior written approval of the deputy assistant secretary or designee.

SUPERSESSION

DDA Policy 15.04 Issued November 1, 2021

Approved:

Date: July 1, 2023

Deputy Assistant Secretary Developmental Disabilities Administration

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