



DEVELOPMENTAL DISABILITIES COMMUNITY SERVICES
Olympia, Washington

TITLE:	PROVIDER CERTIFICATIONS FOR DEVELOPMENTAL DISABILITIES COMMUNITY SERVICES PROGRAMS	7.06
--------	---	------

Authority:	Chapter 388-829A WAC Chapter 388-826 and 388-842 Chapter 388-829C WAC Chapter 388-825A WAC Chapter 388-841 WAC Chapter 388-833 WAC Chapter 388-829R WAC Chapter 388-847 WAC	Alternative Living Children's Residential Habilitation Companion Homes DDA-Certified Providers Enhanced Respite Services Intensive habilitation services for children Overnight Planned Respite Services Stabilization, assessment, and intervention Facility
Reference:	DDA Policy 4.09 DDA Policy 4.12 DDA Policy 4.03 DDA Policy 4.07 DDA Policy 4.22 DDA Policy 4.15 DDA Policy 4.29 DDA Policy 4.25	Alternative Living Companion Homes Enhanced Respite Services for Children Intensive Habilitation Services for Children Out-of-home Services Program Overnight Planned Respite Services for Adults Residential Habilitation for Dependent Youth Stabilization, Assessment, and Intervention Facility

BACKGROUND

The Home and Community Living Administration (HCLA) plays a key role in the quality, oversight, and technical assistance of department-funded, short-term, and residential services provided to Developmental Disabilities Community Services (DDCS) clients. Office of Compliance, Risk, and Privacy is responsible for the certification of the programs identified in this policy. Residential Care Services (RCS) Division is responsible for the certification of supported living, group home, and group training homes.

PURPOSE

Home and Community Living Administration monitors providers through certification evaluations to ensure that client needs are being met and providers are in compliance with WAC, policy, and contract requirements. HCLA-contracted evaluators conduct these evaluations. This policy outlines the process for certification application, evaluations, monitoring, and quality assurance activities.

SCOPE

This policy applies to contracted evaluators, DDOS Case Managers (CMs), Resource Managers (RMs), and all other HCLA staff involved in the oversight and quality assurance process for the services and programs outlined in this policy. Please note that this policy includes oversight of some state-operated community residential programs within DSHS' Behavioral Health and Habilitation Administration.

HCLA certifies the following providers:

- Alternative Living Services (AL)
- Children's Residential Habilitation
 - Children's State-operated Living Alternative (Children's SOLA)
 - Enhanced Out-of-home services (EOHS)
 - Out-of-home services (OHS)
 - Residential Habilitation for Dependent Youth (RHDY)
- Companion Homes (CH)
- Enhanced Respite Services for Children (ERS)
- Intensive Habilitation Services for Children (IHS)
- Overnight Planned Respite Services (OPRS)
- Stabilization, assessment, and intervention facility (SAIF)

DEFINITIONS

Applicant means an individual or entity applying for certification from HCLA under this policy.

Case manager means the DDOS case manager or DDOS social worker assigned to a client.

Certified or Certification means a status that indicates a provider is approved under this policy to provide services to clients.

- **Preliminary certification** means a temporary certification that is valid for 120 days, or until the provider receives their first certification evaluation. Preliminary certification is a prerequisite for the provider to begin delivering services to clients.

- **Initial certification** means the certification after the provider completes their preliminary certification and first certification evaluation. Initial certification is valid for up to 12 months.
- **Regular certification** means the routine certification for a provider to continue delivering services to clients, which is valid for up to 24 months.
- **Special preliminary certification** means a temporary certification that is valid for no more than 12 months and is issued to children's residential habilitation services, intensive habilitation services, and enhanced respite services providers who were in existence as of 6/30/2025.

Certification decision means a length of certification, a certification approval or denial, a citation, or an enforcement action.

Certification evaluation means a process used by HCLA to determine if an applicant or provider complies with applicable WAC, policy, and contract requirements.

Citation means a standard or regulation with which a provider is out of compliance.

Client means a person who has a developmental disability as defined in RCW 71A.10.020(5) and who has been determined eligible to receive services by DDCS under chapter 388-823 WAC.

Corrective action means action taken to remedy a citation.

Corrective action plan means a plan developed by HCLA and the provider to address a citation or citations.

HCLA Designee means the Home and Community Living Administration employee identified as the primary person responsible, per the [DDCS Oversight Matrix](#).

HCLA HQ QA means the quality assurance office within the Home and Community Living Administration supporting intellectual and developmental disabilities programs implemented by HCLA's Developmental Disabilities and Community Services.

Decertification means revocation of a provider's certification.

Enforcement Action means an action HCLA may apply to a provider's certification if the provider is issued a citation or fails to comply with a corrective action.

Evaluator means an individual or entity contracted with HCLA to conduct certification evaluations and other follow-up compliance reviews as requested by HCLA.

Provider means an individual or entity who is certified by HCLA under this chapter.

Resource manager means the DDCS employee who establishes rates, monitors contract compliance, and acts as DDCS's liaison to the service provider.

Site means the private residence or facility where a client receives services from a provider certified under this policy.

Site visit means a mandatory survey of a provider's service site to assess compliance with program-specific site requirements.

Working days means Mondays through Fridays, excluding state and federal holidays.

POLICY

- A. Prospective providers covered under this policy must apply for certification from HCLA.
- B. HCLA-contracted evaluators conduct certification evaluations of programs as outlined in this policy.
- C. DDCS and HCLA staff monitor provider compliance and determine corrective action plans and timelines.
- D. HCLA staff may take enforcement action on a provider's certification if the provider is issued a citation.
- E. HCLA staff must perform quality assurance monitoring to ensure compliance with corrective actions and review and analyze trends.

PROCEDURES

A. Application for Certification

- 1. To be considered a certified provider an applicant must:
 - a. Complete the DDCS application for the specific program in which they are applying for certification;
 - i. Alternative Living (AL) [10-665](#)
 - ii. Children's Residential Habilitation [10-720](#) including:
 - 1. Children's contracted and state operated Out-of-home services (OHS);
 - 2. Residential Habilitation for Dependent Youth (RHDY); and

-
3. Enhanced Out-of-home services (E-OHS)
 - iii. Companion Home (CH) [14-549](#)
 - iv. Enhanced Respite Services (ERS) [10-720](#)
 - v. Intensive Habilitation Services for Children (IHS) [10-720](#)
 - vi. Overnight Planned Respite Services (OPRS)
 - vii. Stabilization, assessment, and intervention facility (SAIF)
 - b. Complete an interview with DDCS if determined necessary by program staff;
 - c. Complete training according to program-specific rules;
 - d. Have policies as required by program-specific rules;
 - e. Meet contract requirements (unless state-operated); and
 - f. Pass a site visit conducted by DDCS under program-specific rules.
 2. To determine whether a provider is eligible for preliminary certification, an HCLA designee, per [DDCS Oversight Matrix](#), must:
 - a. Review provider application materials and confirm all requirements have been met and all necessary information was included;
 - b. Conduct a meeting or interview with the prospective provider;
 - c. Complete site review per program requirements (not applicable for Alternative Living applicants);
 - d. Conduct a background check if applicable;
 - e. Ensure initial training requirements have been met if applicable;
 - f. Review provider policies and procedures (standard operating procedures for state-operated programs);
 - g. Ensure all other required tasks are completed according to program and policy requirements; and
 - h. Execute the contract if applicable.
 3. After all tasks identified above have been completed, and if the designee recommends the provider for preliminary certification, the designee must notify HCLA HQ QA staff via the [HCLA Certification Request](#) **within 7 working days**.
-

4. HCLA HQ QA must:
 - a. Acknowledge the request within **5 working days**;
 - b. Determine if the preliminary certification request is approved or denied and notify the requestor;
 - c. Add the provider to the certification database;
 - d. Send the provider a notice of approval or denial **no more than 7 working days** from request date and include the reason if denied; and
 - e. If approved include in the notice, the date that the initial certification evaluation is due.
5. A preliminary certification is valid for no more than 120 days without an initial certification evaluation unless an extension is granted. HCLA HQ QA may extend the providers preliminary certification beyond 120 days only if:
 - a. The provider is not yet supporting a client, or the provider has delivered services to a client for less than 60 days; and
 - b. DDCS verifies the provider meets program-specific WAC and contract requirements.
6. An applicant denied a preliminary certification may reapply.
7. DDCS may close out an application if the applicant is nonresponsive for 10 business days.
8. If a provider no longer meets preliminary certification requirements, HCLA may revoke the provider's preliminary certification. If HCLA revokes a preliminary certification, HCLA HQ QA must notify the provider in writing of the reason for the revocation.

B. Certification Evaluation Process

1. Certification evaluations must be completed prior to the expiration of the previous certification, unless the provider is granted an extension.
2. Prior to a certification expiration, HCLA HQ QA:
 - a. Assigns the evaluation to an HCLA-contracted evaluator; and
 - b. Sends notification to the provider, HCLA designee, and evaluator at least one month prior to the evaluation due date and includes the certification tool and provider checklist.
3. The assigned HCLA-contracted evaluator must:
 - a. Follow guidelines for conducting evaluations as outlined in the Evaluator Guide, including instructions on sample size and use of evaluation tools.

- b. Conduct a record review and on-site evaluation to review compliance with rules and policies.
 - c. Use the certification review tool specific to the setting being evaluated:
 - i. [Alternative Living Services \(AL\)](#) DSHS 15-388
 - ii. [Children's Residential Habilitation](#) DSHS 10-721 including:
 - 1. Children's Contracted and State operated Out-of-home services (OHS);
 - 2. Residential Habilitation for Dependent Youth (RHDY); and
 - 3. Enhanced Out-of-home Services (E-OHS)
 - iii. [Companion Homes \(CH\)](#) DSHS 09-995
 - iv. Enhanced Respite Services (ERS)
 - v. [Intensive Habilitation Services for Children \(IHS\)](#) DSHS 10-671
 - vi. [Overnight Planned Respite Services \(OPRS\)](#) DSHS 10-639
 - vii. [Stabilization, assessment, and intervention facility \(SAIF\)](#) DSHS 10-678
 - d. Review provider satisfaction survey results for the evaluation period.
 - e. Conduct interviews with the provider, staff, and client or legal representative per the Evaluator Guide.
 - f. Work with the provider and Resource Manager or HCLA designee to schedule the evaluation and request necessary paperwork.
4. The Resource Manager or HCLA designee must:
- a. Assist the evaluator to contact and schedule the evaluation with the provider if needed;
 - b. Provide the evaluator with DDOS-specific documents that the provider may not have in their possession (i.e. background check results);
 - c. Participate in the evaluation by attending exit meetings, recommending certification length using the [Guidelines for Determining Corrective Action Timelines and Certification Lengths for HCLA Certified Providers](#), and assisting with corrective action plans; and

- d. Respond to questions from the evaluator or provider that may arise.

5. Exit Meetings

- a. Exit meetings are held with all providers following the completion of their evaluation.
- b. Certification length and corrective actions are identified during the exit meeting using the [Guidelines for Determining Corrective Action Timelines and Certification Lengths for HCLA Certified Providers](#).
- c. Any standards where the provider was partially or non-compliant require a corrective action plan.
- d. The assigned HCLA-contracted evaluator must:
 - i. Schedule an exit meeting with the provider, Resource Manager or HCLA designee, and others according to the Evaluator Guide;
 - ii. Review the evaluation tool with all participants during the exit meeting, including the standards and findings; and
 - iii. Record the recommended certification length and any identified corrective action plans and due dates.
- e. The Resource Manager or HCLA designee must:
 - i. Work with the provider to determine a corrective action plan for each citation where the provider is non or partially compliant, using the [Guidelines for Determining Corrective Action Timelines and Certification Lengths for HCLA Certified Providers](#) to determine corrective action plan timelines according to the degrees of severity. The provider must submit to HCLA evidence that the citation has been corrected.
 - ii. Notify HCLA HQ QA if a corrective action timeline is outside of the recommended guidelines.
 - iii. Based on the findings of the evaluation and using the [Guidelines for Determining Corrective Action Timelines and Certification Lengths for HCLA Certified Providers](#):
 - 1. Recommend initial certification up to 12 months;
 - 2. Recommend regular certification up to 24 months; or
 - 3. Recommend an enforcement action be issued.

f. Following the completion of a certification evaluation, HCLA HQ QA Staff must:

- i. Review the completed evaluation and make the final decision regarding length of certification.

Note: If the certification length changes from what was recommended during the exit meeting, the HCLA HQ QA staff must consult with the DDOS representative who determined the original certification length.

- ii. Send the provider a copy of the completed certification evaluation and include a notification of the length of the provider's certification.

6. Citations and Corrective Action Plans

- a. HCLA HQ QA staff may issue a citation based on information discovered during a certification evaluation or other department review.
- b. Corrective action plans for citations are determined using the [Guidelines for Determining Corrective Action Timelines and Certification Lengths for HCLA Certified Providers](#).

7. Corrective Action Plan Monitoring

- a. HCLA Designee must monitor corrective action plans to ensure providers are completing them by the deadlines.
- b. For all corrective actions the provider must submit to HCLA Designee evidence that the citation has been corrected.
- c. The HCLA Designee must:
 - i. Monitor provider compliance with each corrective action identified in the certification evaluation or citation.
 - ii. Document corrective action progress and completion in the [Corrective Action Tracking database](#); and
 - iii. Report issues of provider non-compliance with corrective actions to HCLA HQ QA staff.
- d. HCLA HQ QA staff must:
 - i. Monitor the [Corrective Action Tracking database](#) monthly and inform the appropriate staff when any outstanding corrective actions are identified.

- e. If a provider fails to complete their corrective actions, the following steps must be taken:
 - i. HCLA designee must contact the provider to discuss the overdue corrective actions and inform the provider that they are in jeopardy of a contract or enforcement action if they are unable to comply. They must inform the provider:
 - 1. The reasons they are in jeopardy;
 - 2. What is expected to correct the situation;
 - 3. The due date; and
 - 4. The expected outcome if they do not comply (i.e. contract or enforcement action).
 - ii. The HCLA designee must follow-up with a letter to the provider that outlines the steps the provider needs to take to come into compliance, and the expected outcome if they do not comply. HCLA HQ QA will provide a template for this letter.
 - iii. If the provider is still unable to comply with contract or certification requirements outlined in the letter, HCLA designee must notify HCLA HQ QA, who will determine if enforcement action is necessary.
 - iv. HCLA DDCS must place any contract or certification notices sent to the provider in the provider's contract file.

8. Enforcement Actions

- a. HCLA may apply an enforcement action to a provider's certification if:
 - i. HCLA issues the provider a citation in the major or significant category;
 - ii. The provider fails to cooperate, prevents, or interferes with a certification evaluation, or review by the department or applicable licensing agency;
 - iii. There is an immediate issue affecting client health and safety potentially involving provider action or inaction;
 - iv. The provider is non-compliant with certification requirements;

- v. The provider failed to comply with any applicable requirements regarding vulnerable adults under [chapter 74.34 RCW](#) or children under [chapter 26.44 RCW](#);
 - vi. The provider failed to submit a plan of correction; or
 - vii. The provider failed to implement a plan of correction.
- b. Enforcement actions may include:
 - i. Conditions, which requires the provider to complete an action determined by HCLA by a specific date;
 - ii. Referral suspension, which temporarily prohibits the provider from delivering services to new clients until approved by HCLA;
 - iii. Provisional certification, which sets a provider's certification to expire on a specific date unless the provider corrects identified areas of noncompliance; and
 - iv. Decertification. HCLA must decertify a provider who is no longer qualified according to program-specific rules.
- c. To issue an enforcement action, HCLA HQ QA staff must:
 - i. Send the provider a written notification, which:
 - 1. States the enforcement action;
 - 2. States the effective date and length of the enforcement action;
 - 3. Lists a specific regulation for which the provider is issued a citation;
 - 4. States the conditions, if any, and list the date by which each condition must be met;
 - 5. Includes additional supporting documentation, if available; and
 - 6. Explains the informal dispute resolution process and the provider's appeal rights.
 - ii. If a provider receives an enforcement action, HCLA HQ QA staff must send each client supported by the provider and their legal representative or necessary supplemental accommodation a notice of that action as described in chapter [71A.26 RCW](#).

- iii. A HCLA representative or the HCLA-contracted evaluator must ensure citations listed in the notice from HCLA have been corrected before lifting an enforcement action.
 - iv. HCLA HQ QA must issue a letter notifying the provider when the enforcement action is lifted.
 - v. HCLA HQ QA may issue a new citation if a DSHS representative or evaluator discovers a new finding.
- d. If a provider is decertified;
- i. Resource Managers or HCLA designee must end payment;
 - ii. Resource Managers or HCLA designee must request provider contract termination;
 - iii. Case Resource Managers must send a Planned Action Notice to the client; and
 - iv. HCLA HQ QA must consult with Quality Compliance Coordinators to initiate a Planned Action Notice to all impacted clients.

9. Extending a Certification Period

- a. HCLA HQ QA staff may extend a provider's certification period if a certification evaluation is unable to be completed on time. Examples of when certification may be extended include provider or client health issues, moves, emergencies, natural disasters, or pandemics.
- b. Requests for an extension can come from providers, Resource Managers or HCLA designees, or HCLA-contracted evaluators.
- c. The provider's performance during the extension period is reviewed as part of the provider's certification evaluation.

10. Change in Provider Status

- a. The assigned Resource Manager or HCLA designee must notify HCLA HQ QA staff as soon as possible when there is a change in provider status, which may include:
 - i. Termination of a provider contract;
 - ii. Provider no longer delivering services to client(s);
 - iii. Death of a client supported by a companion home provider;
 - iv. Death of an alternative living or companion home provider;
 - v. Change in provider contact information;

- vi. Services transferred or relocated to a new site;
 - vii. Adult Protective Services or Child Protective Services finding when the provider is an alternative living or companion home provider;
 - viii. Department of Children, Youth, and Families Licensing Division Compliance Agreement; and
 - ix. Change of ownership.
- b. Not delivering services to clients. If a provider delivered services during a certification period but is temporarily not delivering services when their certification evaluation is due:
- i. The certification evaluation must be conducted; and
 - ii. An evaluator must attempt to interview a client (or the client's legal representative, if appropriate) who received services from the provider during the certification period.
 - iii. If a provider has not delivered services to a client during a certification period, HCLA may extend the certification period.
- c. Transferring services to a new site
- i. Before a certified provider transfers services to a new site and continues supporting the same client or clients, the site must meet program-specific site requirements and pass a site visit to maintain certified status. The assigned Resource Manager or HCLA designee must complete this site review.
 - ii. If a provider temporarily relocates services due to an emergency, as soon as client safety can be assured, the provider must notify HCLA with the new address, phone number, and anticipated duration of the change in location.
 - iii. For alternative living, the provider holds one certification regardless of where services are delivered.
- d. Opening an additional site
- i. Each additional service site must be separately certified.
 - ii. Before a certified provider opens an additional site, the provider must request and obtain an additional certification.
 - iii. The Resource Manager or HCLA designee must work with the provider to follow the application process for certification identified in this policy.

- e. Inactivating a provider
 - i. If a provider chooses to end their contract, HCLA HQ QA must inactivate the provider's certification and send the provider a notification.

11. Informal Dispute Resolution & Appeal Rights

- a. If a contracted provider disagrees with a citation, certification decision, or enforcement action, the provider may request one or both of the following:
 - i. Informal dispute resolution under [WAC 388-825A-0230](#).
 - ii. Administrative hearing under [WAC 388-825A-0240](#).
- b. Information regarding appeal rights must be provided in notifications sent to the provider for citations, certification decisions, and enforcement actions.

Informal Dispute Resolution

- a. A provider who disagrees with a citation, certification decision, or enforcement action may request an informal dispute resolution with HCLA where HCLA will review evidence from the provider.
- b. To request an informal dispute resolution, the provider must:
 - i. Submit a written request to HCLA no more than 15 calendar days after the date of the certification letter or written notice of an enforcement action; and
 - ii. Include a written statement that identifies:
 - 1. Each disputed citation, certification decision, or enforcement action;
 - 2. The grounds for disagreement with HCLA's finding; and
 - 3. The provider's preferred method for evidence presentation (i.e., face-to-face, video conference, teleconference, or document review).
- c. Requests for an informal dispute resolution can be submitted to any HCLA staff. HCLA staff must immediately forward the request to HCLA HQ QA staff for processing.
- d. No more than 10 business days after receiving an informal dispute resolution request, HCLA HQ QA staff must notify the provider the request was received.

- e. No more than 30 calendar days after HCLA receives the provider's request, HCLA HQ QA staff must convene an informal dispute resolution committee to:
 - i. Review the evidence and argument presented;
 - ii. Notify the provider in writing which action HCLA is taking under this section; and
 - iii. Issue an amended notice if a citation, certification decision, or enforcement action is rescinded or changed.
- f. An informal dispute resolution committee must include:
 - i. One member of HCLA HQ QA;
 - ii. At least one member who is not part of the HCLA HQ QA Unit; and
 - iii. A DDCS staff familiar with program requirements who is not involved in the case.
- g. HCLA may take the following action:
 - i. Rescind a citation, certification decision, or enforcement action;
 - ii. Change a citation, certification decision, or enforcement action;
 - iii. Make editorial changes to a citation, certification decision, or enforcement action; or
 - iv. Take no action.
- h. The HCLA assistant secretary or designee makes the final decision following an informal dispute resolution.
- i. The effective date of an enforcement action must not be delayed or suspended pending an informal dispute resolution process.
- j. A corrective action due date must not be delayed or suspended pending an informal dispute resolution process.
- k. Following the informal dispute resolution determination, HCLA HQ QA must send a notice to the provider with the outcome, including any changes to the citation, certification decision, or enforcement action.

Appeal Rights

- a. If a contracted provider, or provider whose contract has been terminated, disagrees with an enforcement action or the outcome of an informal dispute resolution, the provider may request an administrative hearing under [chapter 388-02 WAC](#).

- b. To request an administrative hearing the provider must submit a written request to the office of administrative hearings no more than 28 days after receiving a written notice of enforcement action or written notice of the outcome of the informal dispute resolution, which must include:
 - i. A copy of the contested citation, certification decision, or enforcement action; and
 - ii. The reason the provider is contesting the citation, certification decision, or enforcement action.

12. Quality Assurance Activities

- a. HCLA HQ QA must perform regular quality assurance activities to monitor compliance with certification requirements and this policy, including:
 - i. Sending satisfaction surveys, including:
 - 1. Home and Community Living Administration's Developmental Disabilities Community Services Certification Evaluation and Quality Assurance Survey to providers following their certification evaluation; and
 - 2. Home and Community Living Administration's Developmental Disabilities Community Services Respite & Crisis Services Quality Assurance Survey to clients and legal representatives who received services from a crisis or short-term respite program.
 - ii. Monitoring satisfaction survey results and follow-up on any responses of concern.
 - iii. Conducting trend analysis on a routine basis for:
 - 1. Provider citation trends;
 - 2. Certification results; and
 - 3. Satisfaction survey results.
- b. Share the findings and recommendations from trend analysis and other quality assurance activities with program staff and executive management as appropriate.

EXCEPTION

Any exception to this policy must have the prior written approval of the Division Director.

SUPERSESSON

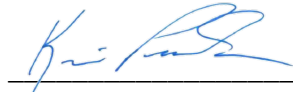
TITLE:

CERTIFICATION EVALUATIONS FOR DDCS PROVIDERS

7.06

N/A

Approved:



Date: July 1, 2025

Director

Developmental Disabilities Community Services Division

Attachments: