

DEVELOPMENTAL DISABILITIES ADMINISTRATION
Olympia, Washington

TITLE: COMMUNITY PROTECTION PROGRAM POLICY 15.05
EXIT CRITERIA

Authority: [Chapter 71A RCW](#) *Developmental Disabilities*
[Chapter 71A.12 RCW](#) *Developmental Disabilities: State Services*
[Chapter 388-101D WAC](#) *Requirements for Providers of Residential Supports*
[Chapter 388-825 WAC](#) *Developmental Disabilities Services*
[Chapter 388-831 WAC](#) *Community Protection Program*
[Chapter 388-850 WAC](#) *County Employment and Day Programs*

Reference: [DDA Policy 15.01](#), *Community Protection Program Identification and Eligibility*
[DDA Policy 15.02](#), *Community Protection Program Services*
[DDA Policy 15.03](#), *Community Protection Standards for Employment Program Services*
[DDA Policy 15.04](#), *Standards for Community Protection Residential Services*

PURPOSE

This policy establishes guidelines for the Developmental Disabilities Administration (DDA) Field Services staff to address issues associated with the reduction or phasing out of restrictions, and termination of Community Protection Residential Services (CPRS) for Community Protection Program (CPP) participants.

SCOPE

This policy applies to DDA Field Services staff and certified residential providers serving individuals who are designated by DDA as meeting the community protection criteria as described in this policy and who are receiving Community Protection Residential Services (CPRS).

DEFINITIONS

Community Protection Residential Services (CPRS) means supported living services with access to 24-hour supervision and instruction and support services, as identified in the CPP participant's Person-Centered Service Plan (PCSP), Positive Behavior Support Plan (PBSP), Individual Instruction and Support Plan (IISP), and Treatment Plan. CPRS are provided by

certified community residential providers contracted with DDA in housing that is owned, leased, or rented by the CPP participant.

Community Protection Program (CPP) means services specifically designed to support individuals with community protection issues as defined in [DDA Policy 15.01](#), *Community Protection Program Identification and Eligibility*, and in “CPP participant” below.

CPP participant means an individual 18 years of age or older who meets one or more of the following criteria and is receiving CPP services:

- (1) Has been convicted of or charged with a crime of sexual violence as defined in Chapters [9A.44](#) and [71.09](#) RCW, including, but not limited to, rape, rape of a child, and child molestation; and constitutes a current risk to others as determined by a qualified professional. (Note: excluding charges or crimes that resulted in acquittal.)
- (2) Has been convicted of or charged with sexual acts directed toward: strangers, individuals with whom a relationship has been established or promoted for the primary purpose of victimization, or persons of casual acquaintance with whom no substantial personal relationship exists; and constitutes a current risk to others as determined by a qualified professional. (Note: excluding charges or crimes that resulted in acquittal.)
- (3) Has not been charged with or convicted of a crime, but has a history of violent, stalking, sexually violent, predatory, and/or opportunistic behavior which a qualified professional has determined demonstrates a likelihood to commit a violent, sexually violent, and/or predatory act; and constitutes a current risk to others as determined by a qualified professional. (Note: “violent” includes fire-setting behaviors when the intent is to hurt or damage someone or property).
- (4) Has committed one or more violent offenses, such as murder, attempted murder, arson, first degree assault, kidnapping, or use of a weapon to commit a crime ([RCW 9.94A.030 \(46\) and \(55\)](#)).

CRM means the Developmental Disabilities Administration Case Resource Manager.

Disclosure means providing copies of professional assessments, incident reports, legal documents, and other verbal or written information pertaining to community protection issues to ensure the provider has all relevant information. Polygraph and plethysmograph reports are excluded from disclosure.

Specialized Client Screen in CARE means a sub-folder in the DDA Case Management folder in CARE. Information available in this folder may include an identifier for community protection or tracking-only for DDA-enrolled participants who meet the criteria.

Supervision Level means the level of supervision that is defined in the participant's treatment plan, and may be specific to the setting (home, work, community). Supervision level includes specific recommendations such as line of sight (within direct field of vision), arm's length (within close physical proximity), or alarms to alert staff to movement within the home.

Treatment Plan means an individualized plan written by a qualified professional that includes the following, at a minimum:

- Specific time-limited goals and objectives based upon evaluation data;
- Specific therapeutic services proposed, including frequency and duration of services and methods to be used;
- Recommendations for supervision and any other restrictions and/or restrictive procedures;
- A description of how progress will be assessed; and
- CPP participant graduation criteria.

Treatment Team means the CPP participant and the group of people responsible for developing, implementing, and monitoring the person's individualized supports and services. This group may include, but is not limited to, the case resource manager, therapist, residential provider, employment program providers, and the person's legal representative or family.

POLICY

- A. Community Protection Program (CPP) participants will have appropriate opportunities to receive services in the least restrictive manner and in the least restrictive environments possible. In considering requests or recommendations for lessening program restrictions, phasing out supervision, or terminating services, Field Services staff will give careful consideration to the safety and welfare of both the CPP participant and the community.
- B. The reduction of program restrictions shall be based on the CPP participant's compliance with their treatment plan and their assessed risk to the community.
- C. Plans for reduction of program restrictions for individual CPP participants must include specific, objective behavioral criteria and goals.
- D. There are four ways for a participant to exit the CPP:
 1. No longer meeting the CPP eligibility criteria (e.g., determination by the treatment team, reviewed by the Regional CP Committee and approved by the RA or designee that the CPP participant no longer presents a current risk to the community);
 2. Phasing out of the program (see Procedures, Section C);

3. Termination from the program for noncompliance (see Procedures, Section D); and
4. Voluntarily leaving the CPP against the advice of the treatment team (see Procedures, Section E).

PROCEDURES

A. Changes in Treatment Plan

1. During the course of therapy, the participant's therapist may make frequent changes to the treatment plan based upon the participant's progress. These changes must be documented in an updated treatment plan quarterly or sooner if needed. The treatment plan is reviewed with the treatment team. Examples of changes to the treatment plan include, but are not limited to, access to television or other media, reductions in supervision, a change in staffing level (e.g., from 2:1 to 1:1), etc.
2. The CRM must file the updated treatment plan in the CPP participant's record and send a copy to the service provider.
3. The service provider must document employee training about the revised treatment plan.

B. Reduction of Supervision

1. Whenever a CPP participant or any member of the treatment team requests or recommends a reduction in supervision to less than line of sight, the CRM will convene the treatment team within 30 days, and:
 - a. Request a review and written recommendations from the CPP participant's therapist;
 - b. Secure necessary input from treatment team members and significant others, including, but not limited to, the person's Community Corrections Officer (CCO), and mental health case manager, if appropriate;

When the CPP participant is under correctional agency supervision, participation by a CCO or other system representative is required;
 - c. Review any legal mental health system conditions of release to determine whether the reduction would require modifying an existing court order;

- d. Discuss the proposed reductions and develop a team recommendation for a reduction plan based upon the CPP participant's risk assessment and/or current treatment plan. The treatment team should reach consensus on recommendations for reduction of supervision; and
 - e. Following development of a proposed reduction plan, meet with the regional CP Coordinator or committee to review the proposed plan.
2. The regional CP committee will review the plan and determine whether to approve or deny the request to reduce supervision. In approving the request, the committee must verify that the proper procedural steps have occurred and that the reduced supervision is supported by the CPP participant's professional risk assessment or current therapist's assessment of risk.
 3. Any reduction in supervision (by staff or therapist-approved chaperone) to less than line of sight while outside of the residence requires review and approval by the Regional Administrator (RA) or designee within 14 calendar days from the date of the request.
 4. If a CPP participant engages in an incident related to their offending pattern (i.e., offense-specific behaviors), the treatment team may hold reductions pending a review of the participant's treatment plan.
 5. When a CPP participant's request for a reduction in supervision is denied, the CRM, in consultation with the treatment professional, must inform the CPP participant of the reasons for the denial in a timely manner.
 6. If the CPP participant disagrees with the decision, the CRM must inform the person of their right to pursue a further review through the agency's Rights and Grievance procedure as required by [DDA Policy 15.04](#), *Standards for Community Protection Residential Services*.

C. Phasing Out Community Protection Program Services

Some CPP participants may benefit from treatment by gaining valuable insight to their problems and internalizing essential controls sufficiently that phasing out of the CPP is possible. When a CPP participant has demonstrated success in complying with reduced restrictions and remaining offense-free, the individual may be considered for phasing out of the program.

1. Before a CPP participant may begin phasing out, the following must occur:
 - a. Written verification of the CPP participant's treatment progress and a phase out recommendation by their treatment professional. If the

treatment professional is not able to provide a current assessment of risk, the CPP participant shall be referred for a risk assessment by a qualified professional as described in [DDA Policy 15.01](#), *Community Protection Program Identification and Eligibility*.

- b. Agreement by the treatment team that the CPP participant is ready to begin phasing out of the program. The team should strive for consensus; when there are significant disagreements, the CRM must consult with their supervisor and CP Coordinator. If necessary, the CP Coordinator will consult with the RA or designee.
- c. Development of a gradual phase-out plan by the treatment team, which is projected over a reasonable period of time and includes specific criteria for evaluating reductions in restrictions, especially supervision, at designated intervals.

Note: If the person no longer meets the CPP eligibility criteria, the treatment team must develop a shortened transition plan.

2. Prior to phasing out of the program, there must be an absence of incidents directly related to the CPP participant's offending pattern (i.e., offense-specific behaviors) and the reduction of supervision in the phase-out plan for a minimum of 12 months.
3. At the time the CPP participant is deemed ready to leave the program, the treatment team must develop a written plan that indicates what supports and services the person may receive from DDA upon exiting the program and submit the plan (including mixed household request if needed) to the regional CP committee for review.
4. Following review of the plan, the regional CP committee will make a recommendation to the RA or designee, who will make the final decision within 14 days on a CPP participant's phase out or exit from the CPP.
5. If the CPP participant successfully phases out of the program, the CP Coordinator will:
 - a. Enter that the CPP participant has "Graduated" from CPP in the Specialized Client screen in Comprehensive Assessment and Reporting Evaluation (CARE); and
 - b. Send a written notice to the CPP participant and their legal representative advising that this has occurred.

6. The CRM must document the successful exit from the program in the CPP participant's Service Episode Record (SER).

D. DDA Termination of Community Protection Program Services for Noncompliance

1. In considering whether to terminate CPP services, the CRM and regional CP Coordinator and Committee will consider individual circumstances.
2. Circumstances that may be considered grounds for termination from the community protection program by DDA include, but are not limited to:
 - a. Physical assault(s) by the CPP participant that result in serious injury to another person;
 - b. Repeated incidents of evading supervision, which indicate an unwillingness to comply with necessary supervision;
 - c. Illegal behavior; or
 - d. Consistent refusal to comply with treatment guidelines to the extent that the therapist determines the CPP participant is not amenable to treatment.
3. The regional CP Coordinator or designee must make certain that the treatment team has reviewed and discussed the individual circumstances, and has had an opportunity to make recommendations to prevent the CPP participant's termination from the program.
4. Prior to implementation, the regional CP Coordinator or designee will refer a decision to terminate services to the Central Office CP Program Manager, who will consult with the Administration's Assistant Attorney General (AAG) for review and discussion.
5. Following AAG review, the regional CP Committee will make a recommendation to the RA. Prior to termination, the CP Coordinator must verify that substantial efforts to address the CPP participant's noncompliance have occurred.
6. The RA, in consultation with the Assistant Secretary, will make the final decision whether to terminate the CPP participant's CPP services for noncompliance.
7. The CP Coordinator or designee will document that the CPP participant has been terminated from the CPP for noncompliance, state the reasons, and enter the date terminated on the Specialized Client screen in CARE.

8. When a participant is terminated from the CPP, the CRM must notify all current service providers and others as appropriate (e.g., law enforcement, mental health case manager).
9. Persons terminated from the CPP are not eligible for other DDA services except in-home personal care services, if eligible. Refer to [DDA Policy 15.02](#), *Community Protection Program Services*, for more information.

E. Voluntarily Leaving the Community Protection Program

When a CPP participant decides to leave the CPP against the advice of the treatment team, the service provider will notify DDA. If after work hours, the service provider will follow the after-hours notification process. Once notified, the CRM will:

1. Ensure the person has received adequate information regarding services that may be lost or unavailable once they sign out of the program.
2. Ask the person to sign the [DSHS 15-419](#), *CPP Refusal of Services Statement* form indicating they no longer want to receive CPP services. If the person refuses to sign the form, document the refusal in the CPP participant record.
3. Notify DDA Central Office, all current service providers, and others as appropriate that the participant has left the CPP.
4. For CPP participants who leave the CPP against the advice of the treatment team, document “Refused Services” and the date terminated on the Specialized Client screen in CARE.
5. Persons who leave the CPP may not receive other DDA services except in-home personal care, if eligible. Refer to [DDA Policy 15.02](#), *Community Protection Program Services*, for more information.

F. Eligibility Review

1. The CRM will review eligibility for each CPP participant consistent with the requirements of [Chapter 388-823 WAC](#) and [DDA Policy 11.01](#), *Intake and Eligibility Determination*.
2. When it is determined that a CPP participant no longer meets DDA eligibility, the CRM must:
 - a. Consult with the RA or designee;

- b. Provide written notification, including appeal rights, to the CPP participant and their legal representative and family consistent with DDA policy;
 - c. Notify other parties who need to be informed, including current service providers, local law enforcement agency, CCO, mental health case manager, and others as appropriate; and
 - d. Refer the person to other services for which they might be eligible (e.g., mental health services, housing resources).
- G. When a CPP participant leaves the program, whether through phasing out, leaving voluntarily, or termination by DDA, the CRM will document the person's program status and date terminated on the Specialized Client screen in CARE.
- H. When an individual is denied services, or their services are reduced or terminated in applying the provisions of this policy, the CRM will provide a written notice to the person and their legal representative of the right to an administrative hearing in accordance with [Chapter 388-02 WAC](#).

EXCEPTIONS

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

SUPERSESSION

DDA Policy 15.05
Issued July 1, 2015

Approved: /s/ Donald Clintsman
Deputy Assistant Secretary
Developmental Disabilities Administration

Date: July 1, 2017