



DIVISION OF DEVELOPMENTAL DISABILITIES
Olympia, Washington

TITLE: PLANNED AND EMERGENCY SHORT TERM STAYS POLICY 4.01

Authority: 42 CFR 483.440 (b)
RCW 71A.12; 71A.16.010; 71A.20.090
WAC 388-97
WAC 388-825-055

PURPOSE

This policy establishes procedures for authorizing and providing both planned and emergency short term stays at the Residential Habilitation Centers (RHC) operated by the Division of Developmental Disabilities (DDD).

SCOPE

This policy applies to RHC and Field Services staff.

DEFINITIONS

Adolescent means a DDD eligible youth age 13 through 17 years.

Emergency means a sudden, unexpected occurrence demanding immediate action.

Emergency or temporary admission of a person to an RHC means 31 or more days in an RHC and the person does not have a home to return to.

Long term admission of a person to an RHC means ninety (90) or more days in an RHC and admission is approved by the Division Director.

Short term stay (STS) means temporary residential services provided to a person and/or the person's family on an emergency or planned basis not to exceed thirty (30) days in a calendar year in an RHC. Nursing Facility and DDD rules limit respite to thirty (30) days without an exception.

POLICY

- A. RHC capacity that is not being used for permanent residents may be available for short term stays.
- B. When an individual is at an RHC for a STS beyond ninety (90) days, Field Services staff must pursue a request for ICF/MR admission. Field Services staff will follow the procedures for requesting admission that are described in DDD Policy 3.04, *ICF/MR Admissions Protocol*.

PROCEDURE

- A. Planned Short Term Stay Admissions
 - 1. Application, eligibility determination, and referral to the RHC for a STS will be handled through the DDD regional office where the RHC is located.
 - 2. Regional Administrator approval is required for a STS of thirty (30) days or less.
 - 3. Division Director or designee approval is required to:
 - a. Provide any STS for more than thirty (30) days in a calendar year; and
 - b. Approve a STS of a child or adolescent.
 - 4. Except in the case of an emergency, the DDD regional office will provide all required referral information to the RHC at least five (5) working days prior to placement. At the time of referral, the following information must be current within the last ninety (90) days:
 - a. Legal information, including:
 - Criminal justice system actions;
 - Local law enforcement involvement;
 - Contractual obligations or court ordered decrees; and
 - Pending criminal charges and any related information.
 - b. Medical information, including:
 - Name, address, and telephone number of physician and back-up physician;
 - Updated immunization record;

- Current medical evaluation, including physical examination and current diagnoses;
 - Report of current Hepatitis B screening;
 - Report of current tuberculosis (TB) screening if nursing facility;
 - All current prescription medications and purpose;
 - Known allergies; and
 - Prescribed diet and reason.
- c. Functional and/or developmental assessments, including a review of any significant challenging behaviors (e.g., danger to self or others) and any planned interventions previously used or in effect. Include copies of the current Positive Behavior Support Plan (PBSP) and Cross Systems Crisis Plan (CSCP), if applicable.
- d. Individual Support Plan (ISP), which includes an objective for the STS or emergency care.
- e. For children, the current Individual Education Plan (IEP) and plan for school attendance during respite.
- f. Updated social service information, including:
- Family profile, including name and address of primary contact and legal representative/guardian status;
 - Social development;
 - Placement history;
 - Employment history and interests; and
 - Reason for referral, including reasons that preclude community placement.

B. Emergency STS Admissions

1. Emergency STS admission of an adult to an RHC requires an exception to policy (ETP) from the Division Director and is temporary, pending the development of appropriate community resources.
2. Emergency STS admission of an adolescent to an RHC can occur when:
 - a. A voluntary placement plan is in place with DDD with the goal of community placement or family reunification; and
 - b. DDD determines that foster placement services cannot meet the emergency needs of the child/family; and

- c. Progress towards placement planning is reported to the Division Director at least every ninety (90) days.
 3. When an emergency exists and placement admission is for 72 hours or less, referral information should be obtained as follows:
 - a. Use the regular placement procedures as much as possible in the time allowed.
 - b. When circumstances or time do not allow regular placement procedures, the following information is still necessary:
 - Reason for referral, including situations that are precluding the use of community resources;
 - Medical information, updated by the DDD regional office as necessary, including current medications, allergies, and any existing and available immunization and health records;
 - Existing behavioral information and current PBSP, updated by the DDD regional office as needed; and
 - Description of requested services during the STS.
 4. The Interdisciplinary Team (IDT) will provide services based upon the person's individual needs.
 5. When an emergency placement exceeds 72 hours, the DDD regional office will supply all referral information normally required for a planned STS to the RHC. An Individual Habilitation Plan (IHP) will be developed if the placement is expected to extend beyond thirty (30) days. Assessments will begin upon admission.
- C. Discharge Procedures
 1. A discharge plan will be in place upon admission for a planned STS, including the residence the person will return to.
 2. If extenuating circumstances prevent the discharge as planned, the DDD regional office responsible for the person will make alternative plans or request an extension of the STS, not to exceed a total of thirty (30) days in the calendar year.
 3. If a discharge does not/cannot occur within the thirty (30) days allowed for STS in a calendar year, written approval by the Division Director is required for any extension. The request to the Director must include a detailed plan and timeline for discharge.

EXCEPTIONS

The Regional Administrator must initiate an Exception to Rule (ETR) request to the Division Director using the Comprehensive Assessment and Reporting Evaluation (CARE) system. The Division Director will make the final decision on ETR requests. The initial decision may be verbal, followed by an electronic confirmation of the ETR request approval or denial on the Regional Administrator's worklist in CARE.

SUPERSESSION

DDD Policy 4.01
Issued February 1, 2008

DDD Policy 4.01
Issued April 24, 2006

DDD Policy 4.01
Issued June 25, 2004

DDD Policy 4.01
Issued April 13, 2000

DDD Policy 4.01
Issued June 30, 1999

DDD Policy 4.01
Issued February 14, 1994

Approved: /s/ Linda Rolfe
Director, Division of Developmental Disabilities

Date: April 1, 2008