



**CARE** means the comprehensive assessment reporting evaluation tool under chapter 388-106 WAC.

**CARE Assessment** means an inventory and evaluation of a client's strengths and limitations based on an in-person interview in the client's home or place of residence, using the comprehensive assessment reporting evaluation (CARE) tool.

**Caregiver** means a contracted provider who provides services to DDA clients.

**Child Protective Services (CPS)** means those services provided by the Department of Social and Health Services that protects children from abuse and neglect, safeguards such children from future abuse and neglect, and investigates reports of child abuse and neglect.

**Client** means a person eligible for DDA services.

**Collateral contact** means a person or agency that is involved in the client's life, such as a legal guardian, family member, provider, or friend.

**CRM** means a DDA case resource manager, social worker, or social service specialist.

**ECMP Committee** means a committee of ECMP regional supervisors, ECMP coordinators, and headquarters program managers who review, prioritize, and process transfers on and off the program, based on policy criteria and program capacity.

**Legal representative** means a parent of a client if the client is under age eighteen and parental rights have not been terminated or revoked, a court-appointed guardian if a decision is within the scope of the guardianship order, or any other person authorized by law to act for the client.

**Necessary supplemental accommodation** means a person who is willing to receive copies of planned action notices and other DSHS correspondence in order to help a client understand the documents and exercise their rights.

**SER** means a service episode record in the case management system, Comprehensive Assessment Reporting and Evaluation (CARE).

## **POLICY**

- A. The CRM must:
1. Refer all clients who have an ECMP critical indicator referral in CARE to their supervisor and the regional ECMP coordinator for enrollment consideration; and
  2. SER the results of the referral.

- B. A client is eligible for the ECMP if the client lives with or is largely dependent on a paid caregiver in their home and:
1. The client's CARE assessment indicates all of the following:
    - a. The client has a limited ability to supervise their caregiver (CARE Cognitive Functioning screen);
    - b. The client has a limited ability to communicate their needs and few documented collateral contacts; and
    - c. The client lacks additional, independent, routine supports that would help the client supervise the care being provided in their home; or
  2. Any of the following apply:
    - a. The client is a minor living with a paid caregiver with a history of CPS involvement;
    - b. The client is an adult with a screened-in referral to Adult Protective Services;
    - c. DDA has concerns that the home environment or quality of care may jeopardize the client's health or safety; or
    - d. The caregiver status is "very stressed," and the continuity of care is assessed as being a "serious risk of failure."

#### **GENERAL CASE RESOURCE MANAGER PROCEDURES**

- A. The CRM must identify any clients they believe meet eligibility criteria for the ECMP. A case resource manager may refer a client to the enhanced case management program at any time.
- B. The CRM must record supporting information in CARE and the DDA Assessment as follows:
1. Document in the Collateral Contacts screen if the client lives with a paid provider;
  2. Document in the Cognitive Functioning screen if the client has a limited ability to supervise their caregiver;

3. Document whether the client has communication barriers or limited collateral contacts. Supporting information includes:
    - a. The client's support needs related to Protective Supervision, Social Activities, and Protection and Advocacy;
    - b. The client's Service Level Assessment responses regarding relationships, interests, and speech or hearing comprehension;
    - c. The client's goals in the Person-Centered Service Plan; and
    - d. Collateral contacts;
  4. Document whether the client has a limited ability to supervise their caregiver. Supporting information includes:
    - a. The availability of additional paid service providers or unpaid collateral contacts who might help supervise the caregiver in the client's home;
    - b. Whether or not DDA has consent to discuss the client's care needs with the person identified to supervise the caregiver in the client's home;
    - c. Whether or not the person identified to supervise the caregiver is able to visit the client's home at least monthly; or
    - d. Credible reports that raise concern about the character, competence, or suitability of the person supervising the caregiver in the client's home; and
  5. If the client lives with a paid provider, the CRM must document any of the following:
    - a. The client is a minor with a history of CPS involvement;
    - b. The client has a history of screened-in referrals to APS; or
    - c. DDA has documented concerns that the home environment or quality of care may jeopardize the client's health or safety.
- C. If a CRM identifies a client on their caseload that appears to meet eligibility criteria for the ECMP, the CRM must complete [DSHS 11-121](#) form, *Enhanced Case Management Referral Consideration*, and email the referral form to their Supervisor and the Regional ECMP Coordinator.

- D. The Supervisor and Regional ECMP Coordinator will discuss the case with the CRM, determine if the case meets ECMP eligibility, and inform the CRM of the decision.
- E. The CRM must document in the Service Episode Record the results of the enrollment discussion and any necessary next steps.
- F. For cases deemed appropriate by the region, the Regional ECMP Coordinator will complete a *Prior Approval for "Enhanced Case Management Program – Enrollment"* and submit the request to the ECMP Committee for approval.
- G. The Regional ECMP Coordinator will inform the Supervisor and CRM of the committee's decision.
- H. The Regional ECMP Coordinator will maintain a list of clients determined eligible, but who remain unenrolled due to program capacity.
- I. The ECMP Committee conducts final reviews and processes transfers onto the program as referrals are received.

#### **ECMP CASE RESOURCE MANAGER AND COORDINATOR PROCEDURES**

- A. The ECMP Coordinator must send [DSHS 10-588](#), *ECMP Enrollment Letter*, to the newly enrolled client and legal representative.
- B. The CRM must visit an ECMP client at least once every four months, including unannounced visits when appropriate.
  - 1. Each of the required visits must not occur more than four months apart.
  - 2. An unannounced visit may replace a scheduled visit.
- C. If the CRM is unable to meet with the client for a scheduled visit, the CRM must schedule a follow-up visit.
- D. A visit can be either declined or refused.
  - 1. A visit is considered declined if:
    - a. The client, the client's family, or the individual provider has a scheduling conflict, or forgot about appointment;
    - b. The client, the client's family, or the individual provider prefers not to have people in their home due to concerns about contagious illness;

- c. The client or family did not pass prescreening questions; or
    - d. The client or family has indicated good reason that it is not a good time due to other circumstances.
  2. A refused visit is when the client or representative:
    - a. Is not allowing a case manager to inspect the living quarters of the client as required by [DDA Policy 14.03](#), *Viewing a Client's Living Quarters*; and
    - b. Provides no reason, or a reason other than that in subsection (D)(1) above.
- E. If a client declines or refuses a visit, scheduled or unannounced, the case manager must document the reason for the declined or refused visit in an SER in CARE.
- F. The follow-up visit must occur no more than thirty days after the declined or refused visit and may be unannounced.
- G. If the case manager is unable to complete an in-home visit, they may contact local law enforcement, APS, or CPS to coordinate a wellness check.
- H. As required under WAC 388-71-0540 (10), an individual provider must cooperate with monitoring visits. If the provider does not comply with monitoring visits, the CRM may issue the provider of choice termination Planned Action Notice.
- I. To determine whether more frequent visits are necessary, the CRM may consider any of the following:
  1. The client is the subject of a current APS or CPS investigation;
  2. The client was recently referred for an APS or CPS investigation;
  3. The CRM's documented concerns about the client's safety, home environment, physical appearance, exploitation, health, or the caregiver's ability to deliver quality services;
  4. The CRM has learned of a destabilizing event involving the client, such as an arrest, hospitalization, or victimization;
  5. The client or caregiver has not followed through with two or more scheduled visits; or

6. The CRM has attempted to schedule a visit, but neither the client nor the provider has responded via telephone or email.
- J. For each home visit, a CRM must document in the ECMP node:
1. If a client refuses or declines to allow a home visit and the client's reason for refusing or declining the visit;
  2. Specific concerns, any referrals made, and outcomes from previous referrals or assistance provided;
  3. Observations, including data tracking regarding CRM level of concern related to:
    - a. Isolation;
    - b. Home environment; and
    - c. Quality of care;
  4. Rapport with the client and caregivers, including whether or not the client is currently requesting services, and whether or not the caregiver is supportive of the client having additional services at this time; and
  5. Specific issues, concerns, and referrals addressed during the visit.
- K. In between visits, the CRM must enter into the ECMP node any milestones that occur, such as authorizing new services, waiver approvals, guardian appointments, etc.
- L. Caseload Transfers Off of the ECMP
1. A client may transfer off of the ECMP if:
    - a. The client no longer meets eligibility criteria; and
    - b. After two in-home visits in an eight-month period, the case manager has indicated "no concern" or "slight concern" (as defined in the F1 screen) in the ECMP node in CARE regarding quality of care, the home environment, and isolation.
  2. The CRM must discuss potential transfers off of the ECMP with the ECMP supervisor. The region reviews clients who may transfer off of the ECMP to ensure the:
    - a. Client no longer meets the ECMP eligibility; and

- b. CRM has accurate information to submit a *Prior Approval for “Enhanced Case Management Program – Disenrollment”* or an *“Enhanced Case Management Program – Archive File.”*
3. The ECMP Committee conducts final reviews and processes disenrollment off of the program. The CRM must send [DSHS 10-597](#), *ECMP Disenrollment Letter* to the client and the client’s legal representative.
4. If a client loses a paid provider or loses financial eligibility while enrolled in ECMP, the client may remain on ECMP if the client and legal representative are actively working on having services restored.
5. If a client will be transferring off of ECMP due to no longer receiving services, the case manager must:
  - a. Ensure that all attempts to communicate with the client and legal representative are documented in SERs;
  - b. Send a planned action notice to the client, and the client’s legal representative and necessary supplemental accommodation, informing them of the plan to stop case management and provide information on who to contact if they decide to resume services with DDA; and
  - c. Consult with regional guardianship coordinators when a petition for guardianship may be appropriate.

### **COMPLAINTS AND GREIVANCES**

If a case resource manager, supervisor, regional administrator or central office employee receives a complaint or grievance from a client, the employee must follow [DDA 5.03](#), *Client Complaints*.

### **EXCEPTIONS**

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

### **SUPERSESSON**

DDA 4.17, *Enhanced Case Management Program*  
Issued April 1, 2020



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TITLE:

ENHANCED CASE MANAGEMENT PROGRAM

POLICY 4.17

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Approved:     /s/ Shannon Manion      
Deputy Assistant Secretary  
Developmental Disabilities Administration

Date: October 15, 2021