



RESIDENTIAL CARE SERVICES
ADULT FAMILY HOMES (AFH)
INFORMAL DISPUTE RESOLUTION (IDR)

Return completed form
to email or fax:

RCSIDR@dshs.wa.gov
Fax: (360) 725-3225

AFH IDR Request

Authority [RCW 70.128.167](#) and [WAC 388-76-10990](#);
for further information about the IDR process, click [here](#).

FACILITY NAME		LICENSE NUMBER	
PROVIDER'S NAME		PHONE NUMBER (AND AREA CODE)	
ALTERNATE PHONE NUMBER (AND AREA CODE)	EMAIL ADDRESS		
MAILING ADDRESS	CITY	STATE WA	ZIP CODE

Submission

Submit this form-within **10 working days** of receiving your official Statement of Deficiencies (SOD) or Enforcement Letter to the address listed above. **A separate request form must be submitted for each citation or enforcement action you are disputing. Note: Your IDR request will be denied if the request form is incomplete, inaccurate or late.** If you have any questions, contact the IDR Program by telephone at (360) 725-3233 or via e-mail at RCSIDR@dshs.wa.gov.

Traditional IDR: Conducted by an IDR Program Manager (PM) during a 1:1 meeting. The disputing provider is given two hours to present relevant information to the IDR PM. A **Traditional IDR is required** if disputing **4** or more citations or enforcement actions; however, it is optional for **three (3)** or fewer citations. The IDR program requests that any supporting documentation be submitted at least one week prior to the scheduled IDR date.

Panel IDR: Conducted by a panel consisting of one provider, one consumer advocate, and one department staff and is chaired by an IDR PM. Brief presentations are made by both the provider and department staff who initiated the citation or enforcement. The panel provides a recommendation to the IDR PM who makes the final decision. A **Panel IDR** is only available if you are disputing **three (3)** or fewer citations or enforcement actions. You must submit supporting documentation within **20 working days** of receiving the official SOD. Documentation received after this deadline will **not** be considered by the panel.

IDR Review (check one): **Traditional IDR Review** **Panel IDR Review**

IDR Type (check one): Face to Face Telephone Desk Review

Dispute:

STATEMENT OF DEFICIENCIES (SOD) DATE
WAC / RCW BEING DISPUTED

Clearly and concisely indicate why you are disputing the citation. Provide only relevant documents to the dispute.