

Chapter 388-60B WAC
Domestic violence perpetrator treatment program standards

Last Update: 7/11/19

WAC

DEFINITIONS

388-60B-0015 What definitions apply to this chapter?

PURPOSE

388-60B-0025 What is the purpose of this chapter?

ADVISORY COMMITTEE

388-60B-0035 The department's advisory committee—Who is on the advisory committee and what is its role?

RECORDS RETENTION

388-60B-0045 Program records requirements—What records must programs keep?

388-60B-0055 Department record retention—What records must the department keep?

CERTIFICATION AND APPLICATION REQUIREMENTS

388-60B-0100 Certification requirements—Must a program be certified to provide domestic violence assessments or treatment?

388-60B-0105 Application process—How must a program apply for certification or recertification to provide domestic violence assessments or intervention treatment services?

388-60B-0110 Required documentation for certification and recertification—What must be included in an application to provide domestic violence assessments or treatment?

388-60B-0115 Policies and procedures—Which policies and procedures must be approved by the department before I may provide domestic violence assessments or treatment services?

388-60B-0120 Facility requirements—What facility requirements must a program meet for the space where domestic violence intervention assessments or treatment services are provided?

388-60B-0125 Quality management—What are the minimum treatment outcomes for participants and how must a program measure staff and treatment effectiveness?

388-60B-0130 Adding to existing certification—How must a program add assessments or a level of treatment to an existing certification?

388-60B-0135 Change in ownership—What must be sent to the department when a program is sold or changes ownership?

388-60B-0140 Change of address—What must be sent to the department when a program changes the physical location of where they provide assessments or groups?

DIRECT TREATMENT STAFF REQUIREMENTS

388-60B-0200 Personnel records—What personnel records must a program keep for direct service staff?

388-60B-0210 Minimum staff qualifications—What staff qualifications must a program document for direct service staff?

388-60B-0220 Staff disclosures—What disclosures must direct service staff provide to participants seeking assessments or who are in the program?

388-60B-0230 Trainee requirements—What qualifications must the program document for direct treatment staff designated as a "trainee" by the department?

388-60B-0240 Staff requirements—What qualifications must the program document for direct treatment staff designated as "staff" by the department?

388-60B-0250 Supervisor requirements—What qualifications must the program document for direct treatment staff designated as a "supervisor" by the department?

388-60B-0260 Supervisor responsibilities—What responsibilities must the supervisor document for the program?

388-60B-0270 Continuing education—What continuing education requirements must the program document for direct service staff?

388-60B-0280 Adding direct treatment staff—What documentation must a program submit to the department to add a new direct service staff person, or request designation as a staff or supervisor for existing direct service staff, during a certification period?

PROGRAM STANDARDS

388-60B-0300 Referral screening—May a program screen referrals in order to accept or deny services to potential participants?

388-60B-0305 Nondiscrimination—What are the nondiscrimination criteria with which a program must comply?

388-60B-0310 Treatment focus—What requirements must a program focus on during treatment and what methods of treatment may they use?

388-60B-0315 Group treatment—What standards must programs follow regarding the provision of group treatment?

388-60B-0320 Treatment practices—How must a program approach treatment and what must happen if it is determined that a participant should move into a different level of treatment?

388-60B-0325 Victim safety—What steps must programs take in order to help increase victim safety?

388-60B-0330 Victim confidentiality—What must programs do in order to safeguard victim confidentiality?

388-60B-0335 Cooperation with victim services—How must a program cooperate with local domestic violence victim services agencies?

388-60B-0340 Domestic violence laws—What must a program know about domestic violence laws and justice system practices?

PARTICIPANT STANDARDS

- 388-60B-0345 Participant requirements—What must the program require of participants accepted into a domestic violence intervention treatment program?
- 388-60B-0350 Co-occurring treatment—May participants engage in other types of treatments while they are in domestic violence intervention treatment?
- 388-60B-0355 Participant rights—What are the participant rights that a program must follow and provide to the participant?
- 388-60B-0360 Participant confidentiality—What must programs do in order to safeguard participant confidentiality?
- 388-60B-0365 Releases of information—What releases of information must the program require from participants before they are accepted into a program?
- 388-60B-0370 Participant contracts—What elements must be included in a contract between a program and participant?

TREATMENT REQUIREMENTS

- 388-60B-0400 Behavioral assessment and interview criteria—Who may conduct the interview and assessment and what must it include?
- 388-60B-0405 Treatment planning—What must the treatment plan include and when must it be updated?
- 388-60B-0410 Placement criteria—How must a program determine a participant's level of treatment?
- 388-60B-0415 Required cognitive and behavioral changes—Depending on their level of treatment, what changes must the program document that the participant has made?
- 388-60B-0420 Minimum treatment periods and requirements—How must a program determine the treatment period for each participant?
- 388-60B-0425 Reoffenses and noncompliance during treatment—What must happen if a participant reoffends or is not compliant while they are in treatment?
- 388-60B-0430 Completion criteria and core competencies—What must the program document for a participant to be eligible to successfully complete treatment?
- 388-60B-0435 Discharging participants—What must a program do when a participant is discharged from treatment?

DEPARTMENT REVIEWS AND ACTIONS

- 388-60B-0500 On-site reviews and plans of correction—How does the department review certified programs for compliance with the regulations of this chapter?
- 388-60B-0510 Complaint investigations—How must an investigation get initiated and what is the process of the investigation?
- 388-60B-0520 Program or staff status changes—What must happen if a program's certification or a staff member's designation is changed by the department?
- 388-60B-0530 Program responsibilities after an action—What actions must the program take after notification that its certification has been suspended, revoked, or if no direct service staff are qualified to provide services?

DEFINITIONS

WAC 388-60B-0015 What definitions apply to this chapter? The following definitions apply to this chapter:

"Administrative hearing" a hearing held before an administrative law judge and conducted according to chapter 34.05 RCW and chapter 388-02 WAC.

"Assessment" means the process of obtaining pertinent bio-psychosocial information, as identified by the participant, family, and collateral sources to determine a level of care and to plan individualized domestic violence intervention services and possible referrals for ancillary treatment, assessments, and services.

"Certified" means the status given to domestic violence intervention treatment programs by the department under its authority to certify domestic violence perpetrator programs under RCW 26.50.150.

"Corrective action" means the steps required of the domestic violence intervention treatment program by the department in order to maintain or regain certification.

"Critical incident" means any one of the following events:

(1) Any death, serious injury, or sexual assault that occurs at a program that is certified by the department;

(2) Alleged abuse or a gross violation of rights of an individual receiving services, that is of a serious or emergency nature caused by an employee, volunteer, contractor, or another individual receiving services;

(3) Alleged abuse, harassment, or a gross violation of rights of a direct treatment service staff member by an employee, volunteer, contractor, or another individual receiving services;

(4) A natural disaster, such as an earthquake, volcanic eruption, tsunami, urban fire, flood, or outbreak of communicable disease that presents substantial threat to program operation or client safety;

(5) A bomb threat or death threat;

(6) Theft or loss of data in any form regarding an individual receiving services, including but not limited to, a missing or stolen computer, or a missing or stolen computer disc or flash drive, or any other type of memory device;

(7) Any physical violence that occurs at the program;

(8) Any violence that is perpetrated by a participant of a certified program that results in death, serious injury, or sexual assault;

(9) Any negative media event regarding a participant receiving services, or regarding a direct treatment staff member or owner(s) of the program; or

(10) Any response to the premises of a program by law enforcement or emergency personnel.

"Department" or **"DSHS"** means the Washington state Department of Social and Health Services.

"Direct service staff" means a person who works or volunteers at a certified domestic violence intervention treatment program and has been designated by the department as a trainee, staff, or supervisor.

"Domestic violence intervention treatment program" or **"program"** means a program that provides domestic violence assessments or intervention treatment to perpetrators of intimate partner violence and is certified by DSHS under this chapter 388-60A WAC.

"Evidence-based" means strategies, activities, or approaches which have been shown through scientific research and evaluation to be effective in preventing or delaying a negative outcome.

"Forensic counseling" means the provision of group or individual counseling sessions with a participant who has also been engaged with the criminal justice system. Forensic counseling involves skills in assessment, interviewing, report writing, strong verbal communication skills, and case presentation when needed. The practice of forensic counseling involves investigations, research, assessments, consultations, and the design and implementation of treatment programs. In this chapter it specifically relates to assessing, making recommendations, and providing treatment to those who have committed acts of domestic violence regardless of whether the abuse was illegal or resulted in a criminal conviction or not.

"Intimate partner" means a person who is or was married, in a state registered partnership, or in an intimate or dating relationship with another person presently or at some time in the past. Any person who has one or more children in common with another person, regardless of whether they have been married, in a domestic partnership with each other, or lived together at any time, shall be considered an intimate partner.

"Intimate partner abuse" or **"intimate partner violence"** means a pattern of abusive behavior that is used by one intimate partner against the other and may include but is not limited to assaultive and coercive behaviors, physical, sexual, emotional, verbal, psychological, and economic abuse or coercion, or the improper use of children to control the victim. It may also include the infliction or threat of harm against an intimate partner and is directed at achieving compliance from or control over that intimate partner. It may include, but

is not limited to, a categorization of domestic violence offenses as defined in RCW 10.99.020 committed by one intimate partner against another.

"Level of treatment" or **"level of care"** means the level of treatment a participant is required, recommended, or currently receiving as determined by a certified program through a behavioral assessment, standardized testing, the "risk, needs, and responsivity" form, and a current treatment plan.

"Off-site" means the provision of services by a provider from a certified domestic violence intervention treatment program at a location where the domestic violence assessment or treatment is not the primary purpose of the site, such as in correctional facilities.

"Participant" means an individual being assessed, enrolled, discharged, or treated in a certified domestic violence intervention treatment program. This individual may be court-ordered to participate in treatment or someone who chooses to voluntarily participate in treatment. The terms "client," "perpetrator," and "participant" are used interchangeably in this chapter.

"Promising practices" means programs and strategies that have some scientific research or data showing positive outcomes in delaying a negative outcome, but do not have enough evidence to support generalized conclusions.

"Victim services program" means a nonprofit program or organization that provides, as its primary purpose, assistance and advocacy for domestic violence victims. Domestic violence assistance and advocacy must include crisis intervention, individual and group support, information, referrals, safety assessments, and planning. Domestic violence victim assistance and advocacy may also include, but is not limited to: provision of shelter; emergency transportation; self-help services; culturally specific services; legal advocacy; economic advocacy; and accompaniment and advocacy through medical, legal, immigration, human services, and financial assistance systems. Domestic violence programs that are under the auspices of, or the direct supervision of a court, law enforcement, a prosecution agency, or the child protective services section of the department as defined in RCW 26.44.020 are not considered victim services programs.

"Victim" or **"survivor"** means a person who has been subjected to domestic violence. The terms "victim" and "survivor" are used interchangeably in this chapter.

[WSR 19-15-044, recodified as § 388-60B-0015, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0015, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0015, filed 5/29/18, effective 6/29/18.]

PURPOSE

WAC 388-60B-0025 What is the purpose of this chapter? (1) The overall purpose of this chapter is to increase accountability and competency for programs that provide domestic violence intervention treatment as well as provide minimum standards and a pathway to achieve the following:

(a) To responsibly and as accurately as possible with the information relied upon, assess the risks, needs and responsivity for per-

petrators of intimate partner violence who are seeking assessment and treatment;

(b) To increase the safety of the victim, current partner, children, and other children in the care or residence of perpetrators of intimate partner violence who are enrolled in intervention treatment; and

(c) To hold perpetrators of intimate partner violence accountable in meeting their program requirements and achieving core competencies, including documentation of their cognitive and behavioral changes and personal accountability as outlined in WAC 388-60A-0430, through intervention treatment using evidence-based and promising practices.

(2) The rules in chapter 388-60A WAC establish the following standards for programs that provide domestic violence assessments or any level of intervention treatment to perpetrators of intimate partner violence and include:

(a) Minimum certification requirements for programs that provide services to participants of domestic violence intervention treatment;

(b) Program administrative requirements;

(c) Program staff requirements;

(d) Quality management requirements;

(e) Facility requirements;

(f) Program policies and procedures;

(g) Program treatment record requirements;

(h) Program assessment and treatment requirements; and

(i) A grievance system that includes a grievance process, an appeal process, and access to administrative hearings.

(3) Unless otherwise provided by law, these standards apply to any program that:

(a) Provides or advertises that it provides domestic violence perpetrator assessments or evaluations for intimate partners;

(b) Provides or advertises that it provides domestic violence intervention or perpetrator treatment for intimate partners; or

(c) Defines its services as meeting court orders that require assessment, evaluation, or enrollment in, or completion of, domestic violence perpetrator treatment or domestic violence intervention treatment for intimate partners.

(4) These programs provide assessments, recommendations, or treatment to perpetrators of intimate partner violence, including participants who are self-referred or those who are court-ordered to be assessed or attend treatment.

(5) A program may administer other service programs in addition to domestic violence intervention treatment services; however, the domestic violence intervention treatment program for intimate partners must be considered a separate and distinct program from all other services the agency provides.

(6) Participants of the domestic violence intervention treatment program for intimate partners must not attend the same groups or sessions as participants of other programs or services as part of their domestic violence intervention treatment.

(7) The department requires new applicants who are in the process of applying to DSHS to provide domestic violence intervention assessments or any level of treatment to comply with the requirements in this chapter as of the day it is adopted.

(8) All programs affected by this rule that were certified under the chapter 388-60 WAC and have a current certification are to fully comply and provide written verification to the department with the re-

quirements in this chapter no later than six months following the adoption of this chapter.

(9) All programs that have a current certification under the chapter 388-60 WAC and are in compliance with the requirements of chapter 388-60A WAC will be issued a new certification under chapter 388-60A WAC and will be certified to provide assessments and levels one, two, and three treatments.

(10) If a program certified under the previous chapter 388-60 WAC would like to add level four treatment or remove any service, they must make a written request to the department and await a determination by the department before providing any level four treatment or removing any service.

(11) Written requests can be emailed to CADVProgram@dshs.wa.gov or mailed to:

Department of social
and health services
Domestic violence intervention
treatment program manager
P.O. Box 47510
Olympia, WA 98504

(12) All programs that were certified under the chapter 388-60 WAC and have a current certification may complete treatment for current participants under the rules of chapter 388-60 WAC until their discharge from treatment.

(13) New participants assessed by or participating in the program as of the adoption of this chapter 388-60A WAC must comply with the standards in this chapter.

[WSR 19-15-044, recodified as § 388-60B-0025, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0025, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0025, filed 5/29/18, effective 6/29/18.]

ADVISORY COMMITTEE

WAC 388-60B-0035 The department's advisory committee—Who is on the advisory committee and what is its role? The department will establish and appoint a volunteer group to serve as the Washington state domestic violence intervention treatment program standards advisory committee.

(1) The role of the advisory committee is to:

(a) Advise the department regarding recommended changes to the program standards; and

(b) Provide technical assistance on program standards, implementation, training, certification, and recertification criteria.

(2) The advisory committee may include the following members:

(a) Up to four persons representing the perspective of survivors of domestic violence who must be chosen with input from the Washington State Coalition Against Domestic Violence (WSCADV);

(b) One person who identifies as a victim or survivor of domestic violence;

(c) Up to four persons representing the perspective of state-certified domestic violence intervention treatment programs who may be

chosen with input from the Northwest Association of Domestic Violence Treatment Professionals (NWADVTP) or another currently active organization for domestic violence intervention treatment providers in Washington state;

(d) Up to four persons representing the perspective of adult misdemeanant probation and Washington state courts of limited jurisdiction who may be chosen with input from the Misdemeanant Corrections Association and the Washington State District and Municipal Court Judges Association;

(e) One person representing the department of corrections;

(f) One person representing the office of the administrator for the courts; and

(g) One person representing an academic and research perspective.

(3) Advisory committee members are appointed for up to two-year terms.

(4) The department may replace committee members at any time or if the member has two unexcused absences from two consecutive committee meetings.

(5) If funds are available, the department may reimburse advisory committee members for travel and meal expenses related to service on the committee.

(6) Advisory committee members must not receive any other compensation for service on the committee.

(7) The frequency of meetings for the advisory committee is at discretion of the department, as needed.

[WSR 19-15-044, recodified as § 388-60B-0035, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0035, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0035, filed 5/29/18, effective 6/29/18.]

RECORDS RETENTION

WAC 388-60B-0045 Program records requirements—What records must programs keep? (1) The program must keep all records associated with the provision of services for domestic violence assessment or intervention treatment for a minimum of seven years.

(2) In the event of a program or agency closure:

(a) The program must ensure all participants' records are kept and managed for at least seven years after the closure and destroy records in a manner that preserves confidentiality;

(b) The program must provide each participant currently being served with:

(i) Notice of the program closure or program cancellation at least thirty days before the date of closure or program cancellation;

(ii) Assistance with relocation for domestic violence intervention treatment; and

(iii) Information on how to access domestic violence intervention treatment records to which the participant is entitled;

(c) The closing program must notify the department that the program will either:

(i) Continue to retain and manage all participant records; or

(ii) Arrange for the continued storage and management of all participant records;

(d) The closing program must notify the department in writing and include the name of the certified program storing and managing the records, provide the method of contact such as a telephone number or electronic address, and provide the mailing and street address where the records will be stored;

(e) Programs run by sole practitioners must name an emergency contact person who will be responsible for the program's records should the sole practitioner be unable to do so due to illness or death; and

(f) When any program or agency storing and maintaining participant records receives an authorized request for a record, the record must be provided to the requester within a reasonable period of time.

[WSR 19-15-044, recodified as § 388-60B-0045, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0045, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0045, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0055 Department record retention—What records must the department keep? The department must maintain the following information regarding certified domestic violence intervention treatment programs under its records retention schedule:

(1) A current record of all certified domestic violence intervention treatment programs; and

(2) A current record of programs that:

(a) Are in the process of applying for certification;

(b) Have been denied certification over the last twelve months;

(c) Have been notified that the department is revoking or suspending certification;

(d) Have had their certification revoked in the last twelve months; and

(e) Are being investigated.

[WSR 19-15-044, recodified as § 388-60B-0055, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0055, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0055, filed 5/29/18, effective 6/29/18.]

CERTIFICATION AND APPLICATION REQUIREMENTS

WAC 388-60B-0100 Certification requirements—Must a program be certified to provide domestic violence assessments or treatment? (1) All programs providing domestic violence assessments or domestic violence intervention treatment services must submit an application and be certified by the department.

(2) A program must not provide any domestic violence assessments or services prior to certification.

(3) If there is a gap of time between program certification expiration and recertification approval, the program may request up to a thirty-day extension of their certification in order to continue providing services while their recertification application is processed by the department.

(a) It is at the discretion of the department if an extension will be granted for up to thirty days while waiting for recertification approval or denial; and

(b) The department's decision to deny an extension for up to thirty days is not subject to administrative review under chapter 388-02 WAC.

(4) To receive initial certification or to maintain certification the program must comply with all the requirements of chapter 388-60A WAC.

(5) Programs may request to be certified to offer one or any combination of the following domestic violence services:

(a) Domestic violence behavioral assessments;

(b) Levels one, two, and three domestic violence intervention treatment services; or

(c) Level four domestic violence intervention treatment services, which requires the program to meet additional education and documentation requirements as outlined in WAC 388-60A-0110(3).

[WSR 19-15-044, recodified as § 388-60B-0100, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0100, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0100, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0105 Application process—How must a program apply for certification or recertification to provide domestic violence assessments or intervention treatment services? (1) Initial and recertification applications can be downloaded at <https://www.dshs.wa.gov/ca/domestic-violence/certification-process>. Completed applications, the required fee, and documentation must be mailed together to:

Department of social
and health services
Domestic violence intervention
treatment program manager
P.O. Box 47510
Olympia, WA 98504

(2) A program cannot provide assessments or any level of direct treatment services to domestic violence participants without being certified by the department.

(3) Certification and recertification applications must include the application fee, be filled out completely, and contain all documentation required as indicated on the application in order to be processed by the department.

(4) The department will review the application within thirty days after an application is received to determine if the program meets the standards and certification requirements in this chapter.

(a) Programs may supplement their application as needed during the thirty days after the application is received and the department is reviewing it; and

(b) If a program does not meet the application requirements within the thirty days following submission, the program must reapply for certification.

(5) After initial certification programs certified under this chapter must reapply for certification every two years.

- (6) The department must notify the applicant whether the program meets the standards set forth in this chapter.
- (a) If a program meets the standards set forth in this chapter, the department will issue the program an approval letter and a certificate; or
- (b) If a program does not meet the standards set forth in this chapter, the department will provide the program with:
- (i) A written notice containing the reasons the department determined the program did not meet these standards; and
- (ii) A list of the specific provisions of this chapter that the program failed to meet.
- (7) Treatment programs have the right to an administrative hearing to contest the department's denial of their certification applications. Such hearings shall be governed by this chapter and chapter 388-02 WAC. Where provisions of this chapter and chapter 388-02 WAC conflict, the provisions of this chapter will control.
- (8) Certified programs must report to the department any and all changes that occur following the initial or renewal certification process.
- (9) The department may request a copy of additional disclosure statements or background inquiries if there is reason to believe that offenses specified under RCW 43.43.830 have occurred since the original application was submitted.
- (10) The department may grant an exception or waiver from compliance with specific program certification requirements if the exception or waiver does not violate existing local, state, federal, or tribal law.
- (a) To request an exception or waiver to a rule in this chapter, the program must:
- (i) Submit the request in writing to the department;
- (ii) Assure that any exception or waiver would not jeopardize the safety, health, or treatment of an individual; and
- (iii) Assure that any exception or waiver would not impede fair competition of another service program;
- (b) The department approves or denies an exception or waiver request in writing and requires the program to keep a copy of the decision; and
- (c) The department's decision to deny an exception or waiver request is not subject to administrative review under chapter 388-02 WAC.
- (11) The department considers each geographical location of a program an individual program and must certify each location separately.
- (a) A program certified to provide assessments or any level of treatment may do so at an off-site location as defined in this chapter, without an additional certification for the off-site location;
- (b) If the program provides assessments only, then the program is only required to have one certification and does not need a separate certification for each geographical location it serves; and
- (c) If a program that has provided only assessments wants to add certification to provide any level of care, the program must certify each geographical location where any level of care will be offered unless it meets the 'off-site' definition in this chapter.
- (12) The application fee for initial certification and recertification of a domestic violence intervention treatment program is one hundred twenty-five dollars.

(a) The department publishes the application fee for certification of domestic violence intervention treatment programs in the application packet; and

(b) If there is any change in the fee, the update will be done and made effective in July of each year.

[WSR 19-15-044, recodified as § 388-60B-0105, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0105, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0105, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0110 Required documentation for certification and recertification—What must be included in an application to provide domestic violence assessments or treatment? (1) For programs applying for initial certification or recertification the program's director must submit the following documentation with the program's application:

(a) A written statement signed by the program's director that the program complies with the standards contained in this chapter;

(b) A copy of the current business license that authorizes the program, or its governing agency, to do business in Washington state at the physical address indicated on the application;

(c) A list of any off-site locations where the program will be providing services;

(d) A list of all direct treatment staff at the program;

(e) Results of current criminal history background checks conducted by the Washington state patrol for all current direct treatment program staff;

(i) If the program staff has lived outside of the state of Washington in the last ten years, then a background check that covers each state they lived in prior to Washington for the last ten years must be included with the application; and

(ii) The results of an FBI or other national criminal background check can be used in place of the Washington state patrol check if it documents the state of Washington, and any other state they lived in for the past ten years was part of the background check search;

(f) An attestation for each current paid or volunteer staff person, documented in the application, whether the staff person has ever been a party to any civil proceedings involving domestic violence or crimes of moral turpitude;

(g) If the staff person has been party to any civil proceedings involving domestic violence or crimes of moral turpitude, the application must also include the legal findings of each incident along with the staff person's written explanation (see WAC 388-60A-0210 (2)(b));

(h) Proof that each direct treatment staff is currently registered or licensed as a counselor with the Washington state department of health; and

(i) Written documentation that the program maintains cooperative and collaborative relationships with agencies providing services related to domestic violence which must include, at a minimum, all of the following:

(i) One item of documentation showing that the program has established and continues to maintain a cooperative relationship with another local program or agency involved in the provision of direct or ancillary services related to domestic violence including, but not

limited to, probation services, legal services, a domestic violence intervention treatment program, or a victim services program;

(ii) One item of documentation showing that the program regularly attends and participates in a local domestic violence task force, intervention committee, coordinated community response group, or work-group if one exists in their community;

(iii) One item of documentation showing that the program has a collaborative relationship, either electronic or in person, with another Washington state certified domestic violence intervention treatment program which includes:

(A) Written documentation of regularly scheduled opportunities for confidential case staffing; and

(B) Written documentation of regularly scheduled opportunities for collaboration in the delivery of domestic violence intervention treatment services and procedures for victim safety (the program can find a current list of certified domestic violence intervention treatment programs in the state of Washington online at <https://www.dshs.wa.gov/ca/domestic-violence/domestic-violence-perpetrator-treatment>); and

(iv) A current list of all the local domestic violence victim services programs in the program's area as reasonably available.

(2) If applying to provide any level of domestic violence intervention treatment services the program must include the following on their application, which must be approved by the department prior to certification:

(a) An explanation of the program's evidence-based or promising practice treatment modalities (see WAC 388-60A-0310(3)); and

(b) The program's methods of treatment.

(3) In order to apply for level four domestic violence intervention treatment, the program must also submit documentation of the supervisor level direct treatment staff who will be responsible for facilitating group and individual sessions for participants in level four treatment.

(a) The supervisor must document an initial six hours of training, approved by DSHS in providing level four treatment; and

(b) For recertification, the supervisor must document four hours every twenty-four months of continuing education, approved by DSHS in providing level four treatment, focused on criminogenic factors, risk issues, psychopathy, and related topics.

(4) All programs must submit the applicable required policies and procedures as outlined in WAC 388-60A-0115, which must be approved by the department prior to initial certification.

(5) If the program was certified prior to the adoption of chapter 388-60A WAC, the program must submit the applicable policies and procedures with their first recertification application after the adoption of these rules.

(6) For programs applying for recertification, the program must also submit:

(a) A statement of qualifications for any staff added since the last certification period (form #10-210) which can be found online at <https://www.dshs.wa.gov/ca/domestic-violence/certification-processor> requested by mail from the address listed in WAC 388-60A-0105(1);

(b) An update of continuing education hours for each direct treatment staff (form #14-544) which can be found online at <https://www.dshs.wa.gov/ca/domestic-violence/certification-processor> requested by mail from the address listed in WAC 388-60A-0105(1); and

(c) If the program is applying to provide a new domestic violence intervention service on their recertification application, then the program must also submit the following with their application:

(i) The applicable policies and procedures which have not already been approved, but are necessary to provide the new service(s) (see WAC 388-60A-0115); and

(ii) If the program is applying to provide a new level of treatment the following must be submitted and approved by the department prior to providing the service:

(A) A description of the program's evidence-based or promising practice treatment modalities; and

(B) The program's methods of treatment.

[WSR 19-15-044, recodified as § 388-60B-0110, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0110, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0110, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0115 Policies and procedures—Which policies and procedures must be approved by the department before I may provide domestic violence assessments or treatment services? (1) A domestic violence intervention treatment program must keep updated policies and procedures that have been approved by the department prior to initial certification. The policies and procedures must be readily available at all times to all staff and volunteers either in electronic or paper form.

(2) Programs that were certified prior to the implementation of chapter 388-60A WAC must submit policies and procedures to DSHS with their program's first re-certification application after the adoption of these rules.

(3) For programs applying to provide assessments, the policies and procedures must be individualized to the program and include:

- (a) Program records under WAC 388-60A-0045;
- (b) Facility requirements under WAC 388-60A-0120;
- (c) Quality management under WAC 388-60A-0125;
- (d) Personnel records under WAC 388-60A-0200;
- (e) Supervision and supervisor requirements under WAC 388-60A-0250 and 388-60A-0260;
- (f) Referral screening under WAC 388-60A-0300;
- (g) Victim safety under WAC 388-60A-0325;
- (h) Victim confidentiality under WAC 388-60A-0330;
- (i) Participant confidentiality under WAC 388-60A-0360;
- (j) Releases of information under WAC 388-60A-0365;
- (k) Behavioral assessment and interview criteria under WAC 388-60A-0400;

(4) For programs certified or applying to provide any level of domestic violence intervention treatment, the policies and procedures must be individualized to the program and at a minimum cover the following:

- (a) Program records under WAC 388-60A-0045;
- (b) Facility requirements under WAC 388-60A-0125;
- (c) Quality management under WAC 388-60A-0130;
- (d) Personnel records under WAC 388-60A-0200;
- (e) Supervision and supervisor requirements under WAC 388-60A-0250 and 388-60A-0260;

- (f) Referral screening under WAC 388-60A-0300;
- (g) Treatment focus under WAC 388-60A-0310;
- (h) Group treatment under WAC 388-60A-0315;
- (i) Treatment practices under WAC 388-60A-0320;
- (j) Victim safety under WAC 388-60A-0325;
- (k) Victim confidentiality under WAC 388-60A-0330;
- (l) Participant requirements under WAC 388-60A-0345;
- (m) Co-occurring treatment under WAC 388-60A-0350;
- (n) Participant confidentiality under WAC 388-60A-0360;
- (o) Releases of information under WAC 388-60A-0365;
- (p) Participant contracts under WAC 388-60A-0370;
- (q) Treatment planning under WAC 388-60A-0405;
- (r) Minimum treatment periods and requirements under WAC 388-60A-0420;
- (s) Reoffenses and noncompliance during treatment under WAC 388-60A-0425; and
- (t) Discharging participants under WAC 388-60A-0435;
- (5) For programs certified or applying to provide levels one, two, and three treatment, the policies and procedures must be individualized to the program and also cover the following:
 - (a) Levels one, two and three placement criteria under WAC 388-60A-0410(1) through 388-60A-0410(3);
 - (b) Levels one, two, and three required cognitive and behavioral changes participants must make in treatment under WAC 388-60A-0415(1);
 - (c) Completion criteria and core competencies for levels one, two, and three treatments under WAC 388-60A-0430;
- (6) For programs certified or applying to provide level four treatment the policies and procedures must be individualized to the program and also cover the following:
 - (a) Level four placement criteria under WAC 388-60A-0410(4);
 - (b) Level four required skills and behavioral changes under WAC 388-60A-0415(2); and
 - (c) Completion criteria for level four treatment under WAC 388-60A-0430(3).

[WSR 19-15-044, recodified as § 388-60B-0115, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0115, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0115, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0120 Facility requirements—What facility requirements must a program meet for the space where domestic violence intervention assessments or treatment services are provided? Each program certified to provide assessments or any level of care must ensure that its treatment space is suitable for the purposes intended.

- (1) For programs that offer any level of treatment:
 - (a) The group room must easily accommodate fourteen people, not counting space taken by staff desks, file cabinets or similar items; or
 - (b) If the program regularly and consistently holds groups smaller than twelve participants, the group room must be able to comfortably accommodate the size of the group and facilitator based on attendance records.
- (2) The program must ensure that the facility space:
 - (a) Is not a personal residence;

(b) Is accessible to an individual with a disability, and if a program operates in a historic building or a building that was constructed before current ADA standards, the program must inform potential participants of barriers to accessibility and offer the participant a referral to programs that are ADA accessible when applicable;

(c) Has a reception area separate from treatment areas;

(d) Ensures confidentiality and anonymity for participants including:

(i) Having window coverings for reception, group, and assessment spaces; and

(ii) Having signage outside the building that does not indicate domestic violence treatment;

(e) Has adequate private space for personal consultation with an individual, staff charting, and therapeutic activities, as appropriate;

(f) Has secure and locked storage of active and closed confidential participant and victim records which are not accessible to participants or the public;

(g) Has separate, secure storage of poisonous external chemicals and caustic materials;

(h) Has evacuation routes with highlighted emergency exits posted in each room used by participants or staff;

(i) Has a restroom available to participants and staff during business hours; and

(j) Has sufficient ventilation and temperature control to facilitate assessments or groups comfortably.

(3) If the program operates in the same building or in very close proximity to a victim services program, the domestic violence intervention treatment program must conduct assessments and groups sessions at least three hours apart from any victim services.

(4) A different agreement in regards to proximity and day or time allowances or restrictions may supersede the requirements of the standard in WAC 388-60A-0120(3) when it is outlined by a signed memorandum of understanding between the treatment program and the victim services program.

Exception: Domestic violence intervention treatment services being delivered off-site, such as in jails or prisons are not subject to the facility standards in this section.

[WSR 19-15-044, recodified as § 388-60B-0120, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0120, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0120, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0125 Quality management—What are the minimum treatment outcomes for participants and how must a program measure staff and treatment effectiveness? Each treatment program certified to provide assessments or any level of domestic violence intervention treatment must document program specific quality management procedures to increase staff and program treatment effectiveness.

(1) Programs providing assessments or any level of domestic violence intervention treatment must document their quality management in writing and at a minimum include:

(a) How the program monitors compliance with the rules in this chapter, at a minimum every six months, including the supervisor's di-

rect observance of groups when applicable and a review of assessments and participants' records for compliance with this chapter and the program's policies and procedures;

(b) How the program reviews and improves its cultural competency, at a minimum on an annual basis;

(c) How the program will provide services to participants who require sign language or interpretation; and

(d) How the program regularly attends and participates in a local domestic violence task force, intervention committee, or workgroup in their service area.

(2) Programs providing any level of domestic violence intervention treatment must also document in writing:

(a) The use of evidence based or promising practices;

(b) A copy of the program's treatment outline along with any handouts, exercises, or instructions, as a guide for the facilitators of groups;

(c) How the program coordinates with local victim services;

(d) How the program collaborates with at least one other certified domestic violence intervention treatment program, either electronically or in person, including written documentation of regularly scheduled opportunities for:

(i) Confidential case staffing;

(ii) Collaboration in the delivery of domestic violence intervention treatment services; and

(iii) Procedures for victim safety;

(e) The policies and procedures the program has in place regarding complaints and grievances; and

(f) How the program collects a confidential evaluation of treatment outcomes for treatment participants which must outline how:

(i) Each participant is given a treatment outcomes evaluation at discharge and asked to complete it at that time. The treatment outcomes form is found online at <https://www.dshs.wa.gov/ca/domestic-violence/certification-processor> or may be requested by mail from:

Domestic violence intervention
treatment program manager
Department of social and
health services (DSHS)
P.O. Box 45710
Olympia, Washington 98504-5710

(ii) The confidential results of the treatment outcomes evaluation is sealed by the participant after it is completed and submitted by the program to DSHS by United States mail by the 15th day of the month, for the previous quarter;

(A) The first quarter is January 1 to March 31, with the results due to DSHS by April 15;

(B) The second quarter is April 1 to June 30, with the results due to DSHS by July 15;

(C) The third quarter is July 1 to September 30, with the results due to DSHS by October 15;

(D) The fourth quarter is October 1 to December 31, with the results due to DSHS by January 15;

(g) If the program fails to submit quarterly treatment outcome evaluation data to the department by the designated deadlines, the department may require corrective actions, initiate an investigation, or take action on the program's certification status; and

(h) If the survivor chooses to provide feedback, the program will provide them with a treatment outcomes evaluation for survivors regarding their experience of the participant's behaviors before, during treatment, and at discharge;

(i) The treatment outcomes form for survivors is found at <https://www.dshs.wa.gov/ca/domestic-violence/certification-processor> or may be requested by mail from the address listed in this subsection; and

(ii) The survivor may give the outcomes evaluation to the program to be kept confidential and sent to DSHS quarterly, or they may send it directly to DSHS if they choose by United States mail to the address listed in this subsection or electronically to CADVProgram@dshs.wa.gov.

[WSR 19-15-044, recodified as § 388-60B-0125, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0125, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0125, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0130 Adding to existing certification—How must a program add assessments or a level of treatment to an existing certification?

(1) To add certification to provide any service(s) to an existing certified domestic violence intervention program, the program must submit an abbreviated application that is signed by the program's director.

(2) The abbreviated application to add services can be downloaded at <https://www.dshs.wa.gov/ca/domestic-violence/certification-processor> requested by mail from:

Domestic violence intervention
treatment program manager
Department of social and
health services (DSHS)
P.O. Box 45710
Olympia, Washington 98504-5710

(3) Completed applications and required documentation can be emailed to CADVProgram@dshs.wa.gov or mailed to the address in this section.

(4) The application must be signed, dated, completed entirely, and must include the following:

(a) The name of the supervisor providing management and supervision of services;

(b) The physical address of the program where the new requested service(s) will be provided;

(c) A copy of the program's policies and procedures applicable to the new service(s);

(d) A copy of the program's treatment topics and evidence-based or promising practice treatment modality related to the new service(s), if applicable; and

(e) Updated quality management procedures to include the new service(s).

(5) The department must approve the application for the provision of the new requested service(s) before the program can provide the service(s).

(6) The department may conduct an on-site review prior to approving the new requested service(s) or issuing a new certificate that includes the added service(s).

[WSR 19-15-044, recodified as § 388-60B-0130, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0130, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0130, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0135 Change in ownership—What must be sent to the department when a program is sold or changes ownership? (1) When a certified domestic violence intervention treatment program changes ownership, the department requires:

(a) A new certification application (see WAC 388-60A-0105 through 388-60A-0115) including all required documentation;

(b) Payment of the certification application fee (see WAC 388-60A-0120(6)); and

(c) A statement regarding the disposition and management of all participant and victim records in accordance with applicable state and federal laws.

(2) The program must receive a new certification under the new ownership before providing any domestic violence assessments or any level of domestic violence intervention treatment services.

[WSR 19-15-044, recodified as § 388-60B-0135, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0135, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0135, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0140 Change of address—What must be sent to the department when a program changes the physical location of where they provide assessments or groups? (1) When a certified domestic violence intervention treatment program relocates to another address, the department requires the program to submit a completed change of address form found online at <https://www.dshs.wa.gov/ca/domestic-violence/certification-processor> requested by mail from:

Domestic violence intervention
treatment program manager
Department of social and
health services (DSHS)
P.O. Box 45710
Olympia, Washington 98504-5710

(2) The program must provide the department with:

(a) The effective date and physical address of the program's new location;

(b) Notification of any changes to direct service staff members or supervisor(s), who must receive department approval before providing any direct client services;

(c) A statement regarding the management of all participant and victim records in accordance with applicable state and federal laws; and

(d) An attestation that the new location complies with facility requirements under WAC 388-60A-0125.

(3) The program must receive a certification for the new location's address before providing any assessments or any level of domestic violence intervention treatment service at that address.

(a) An exception may be granted at the discretion of the department if the program had to move suddenly due to an emergency or danger in the previous facility; and

(b) The department may conduct an on-site review prior to approving or issuing a new certificate for the new location.

[WSR 19-15-044, recodified as § 388-60B-0140, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0140, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0140, filed 5/29/18, effective 6/29/18.]

DIRECT TREATMENT STAFF REQUIREMENTS

WAC 388-60B-0200 Personnel records—What personnel records must a program keep for direct service staff? (1) The program must keep records concerning all personnel, including paid and volunteer staff.

(2) Personnel records must contain the following information:

(a) Their most recent Washington state, FBI or other national background check results, which must have been conducted within the last twenty-four months;

(b) A copy of their current registration or license as a counselor with the Washington state department of health;

(c) A copy of all diplomas; and

(d) A copy of the continuing education and training certificates earned over the last twenty-four months.

(3) For programs with more than one direct service staff, the personnel record must also contain documentation of a staff orientation to the program and include:

(a) An overview of the program's philosophy regarding domestic violence intervention treatment;

(b) A review of the program's treatment outline;

(c) A review of the program's policies and procedures;

(d) A review of the state's domestic violence laws (see WAC 388-60A-0340);

(e) A job description, which is signed by the employee or volunteer; and

(f) The date of hire and the date of termination if applicable.

[WSR 19-15-044, recodified as § 388-60B-0200, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0200, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0200, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0210 Minimum staff qualifications—What staff qualifications must a program document for direct service staff? (1) Direct treatment staff who are currently recognized by the department as a trainee, staff, or supervisor at a certified program under chapter 388-60 WAC will be granted the same designation by the department with the adoption of chapter 388-60A WAC.

(2) Each treatment program certified for assessments or any level of domestic violence intervention treatment must ensure that all staff with direct treatment contact with participants be:

(a) Currently licensed or registered as counselors as required under chapter 18.19 RCW;

(b) Free of criminal convictions involving domestic violence or moral turpitude;

(i) Direct service staff who have convictions involving crimes of domestic violence or moral turpitude may submit a written explanation of their convictions and a request for an exception to this requirement;

(ii) The department will review the explanation and request for an exception on a case-by-case basis, and the decision to grant or deny such a request will be at the department's discretion; and

(iii) This discretionary decision is not subject to an administrative hearing appeal as outlined under chapter 388-02 WAC; and

(c) In good standing with DSHS:

(i) A direct treatment staff person whose actions have been the subject of a DSHS investigation and have resulted in the denial, suspension, or revocation of a program's certification status is subject to a review by DSHS to determine if the direct treatment staff person is considered to be in good standing;

(ii) The department will review the status of a direct service staff on a case-by-case basis and decisions for designation and recognition of the direct service staff person as a trainee, staff, or supervisor will be at the discretion of the department; and

(iii) This discretionary decision is not subject to an administrative hearing appeal as outlined under chapter 388-02 WAC.

(3) Each direct treatment staff person must have a bachelor's degree from an accredited university in counseling, psychology, social work, or similar social services field.

(a) The department may grant an exception or waiver from compliance with this requirement if the exception would not violate an existing local, state, federal, or tribal law;

(b) In order to qualify for an exception, the employee must possess year-for-year professional level experience equivalent to a related bachelor's degree in counseling, psychology, social work, or similar social service field and the department determines this equivalency at the discretion of the DSHS program manager responsible for monitoring domestic violence intervention treatment programs;

(c) To request an exception to a rule in this chapter, the program must:

(i) Submit the request in writing to the department;

(ii) Assure that the exception would not jeopardize the safety, health, or treatment of an individual; and

(iii) Assure that the exception would not impede fair competition of another service agency;

(d) The department approves or denies an exception request in writing and requires the program to keep a copy of the decision; and

(e) The department's decision to deny an exception request is not subject to administrative review under chapter 388-02 WAC.

(4) Prior to providing any direct treatment services to program participants, each direct treatment staff person must have completed:

(a) A minimum of thirty hours of domestic violence training from an established domestic violence victim or survivor services program, as defined in this chapter;

(b) A portion, but not all of the victim training hours may be accrued through training from the Washington State Coalition Against Domestic Violence and those trainings may be attended in person or on-line;

(c) A minimum of thirty hours of training on the provision of domestic violence intervention assessment and services, provided by an established and certified domestic violence intervention treatment services program or other organization that has been approved by the department to provide the training and must include:

(i) An orientation to the treatment program if the training is through a certified program;

(ii) An overview of all applicable policies and procedures;

(iii) Instructions on how to conduct behavioral assessments;

(iv) Instructions on how to facilitate groups; and

(v) Instructions regarding the implementation, administration, interpretation, and utilization of domestic violence offender risk assessment tools;

(A) If located within Washington state, the domestic violence intervention treatment program must be certified and meet the standards as outlined in this chapter; and

(B) If located out-of-state the domestic violence intervention treatment program must meet the standards outlined in this chapter and in chapter 26.50 RCW; and

(d) Direct service staff must complete all sixty hours of required training before the employee may apply for trainee status and begin to provide any direct services to participants and any work experience accrued prior to completion of the sixty hours of training will not count toward any requirement for work experience.

[WSR 19-15-044, recodified as § 388-60B-0210, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0210, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0210, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0220 Staff disclosures—What disclosures must direct service staff provide to participants seeking assessments or who are in the program?

(1) Prior to conducting an assessment or providing any level of treatment, each direct service treatment staff must document in the participant's record that the participant was provided with the direct treatment staff's counselor disclosure which must include:

(a) The name of the direct service treatment staff;

(b) The name of the domestic violence intervention treatment program and the program's business address and telephone number;

(c) The direct service staff member's Washington state credential number;

(d) The direct service staff member's education, training, and experience;

(e) The direct service staff member's designation by the department as a trainee, staff, or supervisor;

(f) The name and description of the types of counseling or interventions provided by the direct service staff, including the treatment approach, methods, and techniques employed in their domestic violence intervention treatment program;

(g) Fee information, including:

- (i) The cost for each assessment, group or individual counseling session;
- (ii) Billing practices including any advance payments and refunds; and
- (iii) A statement that participants are not liable for any fees or charges for services rendered prior to receipt of the disclosure statement;
- (h) The limits of confidentiality under RCW 18.19.180;
- (i) Disclosure of the direct service staff's supervisory or consultation agreement, including the supervisor's contact information, if they are not the program's supervisor or if they are receiving supervision from another practitioner;
- (j) Disclosure that the direct service staff person is not credentialed to diagnose mental disorders or to conduct psychotherapy as defined in WAC 246-810-010(14) if it is outside their scope of practice;
- (k) The following information regarding credentialed counselors:
 - (i) Counselors practicing counseling for a fee must be credentialed with the department of health for the protection of the public health and safety;
 - (ii) Credentialing of an individual with the department of health does not include a recognition of any practice standards, nor necessarily imply the effectiveness of any treatment;
 - (iii) The purpose of the Counselor Credentialing Act, chapter 18.19 RCW, which is to:
 - (A) Provide protection for public health and safety; and
 - (B) Empower the citizens of the state of Washington by providing a complaint process against those counselors who would commit acts of unprofessional conduct; and
 - (iv) A reference of the acts of unprofessional conduct in RCW 18.130.180 and the name, address, and contact telephone number within the department of health for complaints; and
- (l) Signature and date blocks for the direct service staff and participant, including an attestation that the participant has read, understands, and was provided with the required disclosure statement.

[WSR 19-15-044, recodified as § 388-60B-0220, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0220, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0220, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0230 Trainee requirements—What qualifications must the program document for direct treatment staff designated as a "trainee" by the department? (1) A trainee is a direct treatment staff person who has completed the sixty hours of domestic violence victim and perpetrator trainings as outlined in WAC 388-60A-0210 but has not yet accrued the minimum hours of experience required at the staff level.

(2) A trainee may serve as a cofacilitator of groups, but must not have sole responsibility for the group at any time.

(3) A trainee must not have sole responsibility for conducting an interview and assessment, for terminating a participant from treatment, or for writing the participant's discharge summary.

[WSR 19-15-044, recodified as § 388-60B-0230, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0230, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0230, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0240 Staff requirements—What qualifications must the program document for direct treatment staff designated as "staff" by the department?

(1) To qualify at the staff level the employee must meet all the qualifications at the trainee level and also have accrued and documented:

(a) A minimum of fifty hours of supervised, direct treatment services to domestic violence participants in a certified domestic violence intervention treatment program or out of state equivalent, which includes documentation of the staff person's observation of at least six certified domestic violence intervention treatment groups including debriefings with the facilitator; and

(b) A minimum of fifty hours of experience working with victims of domestic violence.

[WSR 19-15-044, recodified as § 388-60B-0240, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0240, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0240, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0250 Supervisor requirements—What qualifications must the program document for direct treatment staff designated as a "supervisor" by the department?

(1) To qualify at the supervisor level, the employee must meet all the qualifications required for the staff level and also have accrued and documented:

(a) A minimum of two years of experience in facilitating domestic violence intervention treatment groups at a certified program;

(b) At least two hundred and fifty hours of direct treatment contact with participants in a certified domestic violence intervention treatment program; and

(c) At least one hundred hours of experience working with victims of domestic violence.

(2) A supervisor must have a master's degree from an accredited university in counseling, psychology, social work, or similar social services field.

(3) The department's program manager will review requests for an exception to this requirement on a case-by-case basis.

(a) An exception for the master's degree requirement must not be given to a direct treatment staff member who has already been given an exception for the bachelor's degree;

(b) In order to qualify for an exception, the employee must possess year-for-year professional level experience equivalent to a related master's degree in counseling, psychology, social work, or similar social services field and the department determines this equivalency at the discretion of the DSHS program manager responsible for monitoring domestic violence intervention treatment programs;

(c) To request an exception to a rule in this chapter, the program must:

(i) Submit the request in writing to the department;

- (ii) Assure that the exception would not jeopardize the safety, health, or treatment of an individual; and
- (iii) Assure that the exception would not impede fair competition of another service agency;
- (d) The department approves or denies an exception request in writing and requires the program to keep a copy of the decision; and
- (e) The department's decision to deny an exception request is not subject to administrative review under chapter 388-02 WAC.

[WSR 19-15-044, recodified as § 388-60B-0250, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0250, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0250, filed 5/29/18, effective 6/29/18.]

- WAC 388-60B-0260 Supervisor responsibilities—What responsibilities must the supervisor document for the program?**
- (1) Each program certified for assessments or any level of domestic violence intervention treatment must have at least one person providing supervision to direct treatment staff.
 - (2) Supervision must be documented in the direct service staff's personnel file and follow the program's policies and procedures regarding supervision. At a minimum this must include:
 - (a) At least once every six months, the supervisor must directly observe all treatment staff who are at the trainee or staff level and who provide direct treatment services such as assessments or any level of treatment;
 - (b) At least once every six months the supervisor must review a sample of each direct treatment staff's assessments and participant's records as applicable for compliance with program policies and the WAC standards found in this chapter;
 - (c) A program's supervisor must document their observations and feedback for the program trainee or staff member and include it in the employee or volunteer's personnel file; and
 - (d) Programs that consist of one employee, who is the supervisor, are not required to document group observations or file reviews.
 - (3) A supervisor may be located either on or offsite.
 - (4) If no other direct treatment staff besides the supervisor possesses at least two hundred fifty hours of experience providing direct treatment services to participants, then the supervisor must be present on site at all times that direct treatment services are being provided.
 - (5) The supervisor is responsible for reporting critical incidents, as defined in this chapter to the department within one business day.
 - (6) The supervisor must provide the department with documentation of the incident and the actions the program has taken as a result of the incident.
 - (7) If a program has more than one supervisor, the program must either:
 - (a) Designate a lead supervisor to fulfill the responsibilities of this section; or
 - (b) Document in writing how the responsibilities in this section will be shared among the supervisors.

[WSR 19-15-044, recodified as § 388-60B-0260, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0260, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0260, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0270 Continuing education—What continuing education requirements must the program document for direct service staff? (1)

Each treatment program certified for assessments or any level of domestic violence intervention treatment must ensure that all staff having direct treatment contact with participants documents their continuing education hours.

(2) Each direct treatment staff must complete a minimum of twenty hours of continuing professional education each year after the program is certified, or each year after the staff person is added to the staff list.

(3) No more than five of those hours may be obtained by attending "in-house" training.

(4) Of the twenty annual hours of continuing education, each direct treatment staff must complete a minimum of nine hours in victim training which includes, but is not limited to, any combination of the following topics:

- (a) Domestic violence victim advocacy;
- (b) Safety planning with domestic violence survivors;
- (c) Legal or financial options for domestic violence survivors;
- (d) Information on no contact orders or protective orders;
- (e) Housing options for domestic violence survivors; or
- (f) Other trainings that directly relate to domestic violence survivors or victim advocacy.

(5) Of the twenty annual hours of continuing education, each direct treatment staff must complete a minimum of one hour related to suicide prevention.

(6) Of the twenty annual hours of continuing education, each direct treatment staff must complete a minimum of ten hours in domestic violence intervention, perpetrator, or batterer's treatment. Any combination of the following topics may also be included with the remaining hours if they are submitted with an explanation of how the training relates to domestic violence intervention treatment:

- (a) Mental health;
- (b) Substance use, gambling or other addictions;
- (c) Sexism;
- (d) Racism;
- (e) LGBTQ culture or homophobia;
- (f) Trauma informed treatment;
- (g) Complex trauma;
- (h) Deescalation in a treatment setting;
- (i) Group facilitation;
- (j) Domestic violence offender behaviors;
- (k) Experiential treatment;
- (l) Behavioral assessments;
- (m) Cognitive behavioral treatment;
- (n) Motivational interviewing;
- (o) Forensic counseling;
- (p) Dialectical behavioral treatment;
- (q) Child abuse;

(r) Sexual assault; or
(s) Other trainings that directly relate to providing domestic violence intervention treatment.

(7) The recommended format for all trainings is live and in-person, however direct treatment staff may obtain continuing professional education online when approved in writing by the program's supervisor.

(8) Supervisors who provide level four treatment must also complete and submit four hours of department approved continuing education every two years following the initial six-hour training in level four treatment.

(a) The four hours of training for level four treatment may be included in the forty hours of continuing education training hours.

(b) The continuing education hours for level four treatment must include training on criminogenic factors, risk issues, psychopathy, and related topics.

(9) The direct treatment staff must document all continuing education training hours on department approved forms.

(a) The form must be accompanied by completion certificates, course or workshop outlines, and the supervisor's signature; and

(b) The program must submit the form and accompanying documentation to the department at the time the program applies for recertification (see WAC 388-60A-0110).

[WSR 19-15-044, recodified as § 388-60B-0270, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0270, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0270, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0280 Adding direct treatment staff—What documentation must a program submit to the department to add a new direct service staff person, or request designation as a staff or supervisor for existing direct service staff, during a certification period? (1) A new direct service staff person or an existing person requesting a change in staff level must be approved by the department as a trainee, staff, or supervisor before providing any direct services such as assessments or any level of treatment.

(2) The certified program must submit an application to add or change direct service staff which can be obtained online at <https://www.dshs.wa.gov/ca/domestic-violence/certification-processor> requested by mail from:

Domestic violence intervention
treatment program manager
Department of social and
health services (DSHS)
P.O. Box 45710
Olympia, Washington 98504-5710

(3) With the application, the program must submit documentation to the department which proves that the staff meets the minimum qualifications for all treatment staff stated in WAC 388-60A-0210 in addition to the staff level being requested as stated in WAC 388-60A-0230 through WAC 388-60A-0250.

[WSR 19-15-044, recodified as § 388-60B-0280, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0280, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0280, filed 5/29/18, effective 6/29/18.]

PROGRAM STANDARDS

WAC 388-60B-0300 Referral screening—May a program screen referrals in order to accept or deny services to potential participants?

(1) A treatment program has the authority to accept or reject any referral for assessment or enrollment in its program.

(2) The program must base acceptance and rejection of a participant on written criteria the program has developed to screen potential participants.

(3) A treatment program may impose any relevant and appropriate conditions on participants that the program deems appropriate for the success of treatment.

[WSR 19-15-044, recodified as § 388-60B-0300, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0300, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0300, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0305 Nondiscrimination—What are the nondiscrimination criteria with which a program must comply?

(1) A domestic violence intervention treatment program may not discriminate against any participant based on:

- (a) Race;
- (b) Ethnicity;
- (c) National origin;
- (d) Age;
- (e) Gender or gender identity;
- (f) Disability;
- (g) Religion;
- (h) Marital status or living arrangements;
- (i) Educational attainment;
- (j) Language spoken or limited language proficiency;
- (k) Socio-economic status; or
- (l) Sexual orientation.

(2) Program materials, publications, and audio-visual materials must be culturally aware, sensitive, and nondiscriminatory.

[WSR 19-15-044, recodified as § 388-60B-0305, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0305, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0305, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0310 Treatment focus—What requirements must a program focus on during treatment and what methods of treatment may they use?

(1) A domestic violence intervention treatment program certified for any level of treatment must document in each participant's record

that the program's treatment focus is primarily on increasing victim safety by ending the participant's violence and holding the participant accountable for their abusive behaviors.

(2) The program must document in the participant's record:

(a) The dates, times, and topics covered for each session; and

(b) The behavioral progress of the participant in reaching the objectives or goals as outlined in their treatment plan.

(3) The program must use forensic counseling skills in facilitating evidence-based or promising practices that may include, but are not limited to:

(a) Cognitive-behavioral approaches;

(b) Motivational interviewing or similar client-centered approaches;

(c) Trauma-informed behavioral interventions;

(d) Strength-based strategies; or

(e) Positive behavioral reinforcement strategies.

(4) The program must base all treatment on strategies and philosophies that do not blame the victim or imply that the victim shares any responsibility for the abuse which occurred.

(5) The primary goal of a domestic violence intervention treatment program must be to increase the victim's safety by:

(a) Individualizing treatment for each participant with unique goals, the modality of treatment, and adequate and appropriate intervention to address the participant's high risk factors and needs as outlined in their treatment plan; and

(b) Holding the participant accountable for changing the participant's patterns of abusive thinking and behaving.

[WSR 19-15-044, recodified as § 388-60B-0310, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0310, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0310, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0315 Group treatment—What standards must programs follow regarding the provision of group treatment? (1) Each treatment program certified for any level of treatment must adhere to the following standards regarding group treatment:

(a) Participants must attend group sessions on a weekly basis;

(b) The group sessions must be single gender;

(c) Participants must be given the choice to attend the group they feel most comfortable in when gender identity is a factor;

(d) The group size is limited to a maximum of twelve participants, and a minimum of two participants;

(e) On a short-term basis the program may accept a participant into their domestic violence intervention treatment program even if the program lacks sufficient participants to constitute a group;

(f) Group sessions with four to twelve participants in attendance must be at least ninety minutes in length;

(g) Group sessions with three or fewer participants in attendance must be at least sixty minutes in length;

(h) Group sessions must be closed to all persons other than participants, group facilitators, and others specifically invited by the group facilitators including, but are not limited to:

(i) Professionals in related fields;

(ii) A research scholar or state of Washington evaluator;

- (iii) Advocates from victim service agencies;
- (iv) Persons offering interpretation services for the deaf and/or hearing impaired or language translation or interpretation; and
- (v) Interns, trainees, or others who bring specific information applicable to the group; and
- (i) Any person attending the group as specified under this section must sign a confidentiality agreement of which the program must keep a record.

[WSR 19-15-044, recodified as § 388-60B-0315, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0315, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0315, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0320 Treatment practices—How must a program approach treatment and what must happen if it is determined that a participant should move into a different level of treatment? Each treatment program certified for any level of domestic violence intervention treatment must:

- (1) Provide forensic counseling, using evidence-based or promising practices in all levels of treatment;
- (2) Require participants to attend weekly group or individual sessions, depending on their level of treatment and individual treatment plan;
- (3) Use a trauma-informed approach in treatment;
- (4) Provide treatment that meets the individual needs of participants based on their ongoing assessment information, motivations for abuse, and motivations for creating healthy relationships;
- (5) Document the required cognitive and behavioral changes required by participants in treatment as cited in WAC 388-60A-0415;
- (6) Submit compliance reports and relevant information to the courts or appropriate probation office when requested by the referral source or court when applicable;
- (7) When increasing or decreasing the level of treatment of a participant the program must document:
 - (a) Updated assessment information;
 - (b) A change in treatment needs;
 - (c) Justification for the treatment level change;
 - (d) Written approval from the program's supervisor; and
 - (e) An updated treatment plan; and
- (8) When a program changes the level of treatment for a participant the program must notify the participant and the referring agency, when applicable.
 - (a) The program must document if the referring agency has opted out of receiving treatment change notifications and if so, it must be documented in the participant's file; and
 - (b) If the program cannot reach the recipient the program must document their reasonable efforts to reach them.

[WSR 19-15-044, recodified as § 388-60B-0320, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0320, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0320, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0325 Victim safety—What steps must programs take in order to help increase victim safety? (1) Each treatment program certified for assessments or any level of treatment must adequately consider the safety of the victims, current partners, and children of the participants receiving assessments or who are enrolled in the treatment program.

(2) All victim contact initiated by the program must be done by a staff or supervisor level employee as defined in WAC 388-60A-0240 and WAC 388-60A-0250, unless the program contracts with a victim services agency to contact victims.

(3) Programs that are certified for assessments or any level of treatment must take the following steps, as applicable to help increase victim safety:

(a) Notify the victim of each program participant before completing the assessment that the participant is being seen by the certified program for an assessment to determine:

(i) If domestic violence intervention treatment is appropriate for the participant, and if so, what level of treatment the participant will start in at the program; and

(ii) If applicable, what other treatments may be required or recommended as part of the participant's treatment plan;

(b) Inform victims about emergency and safety planning, outreach, advocacy, and other applicable services offered by a domestic violence victim services program in their community;

(c) Notify the victim of each program participant within fourteen days of the participant being accepted or denied entrance to the program that the participant has enrolled in or has been rejected for treatment services; and

(d) When the participant has been accepted into treatment, give victims a brief description of the domestic violence intervention treatment program including all of the following:

(i) The primary objective of the domestic violence intervention treatment program to help increase the safety of the victim and children as well as holding the participant accountable;

(ii) The core competencies and minimum completion criteria for the participant in treatment;

(iii) The fact that the victim is not expected to do anything to help the participant complete any treatment program requirements;

(iv) The limitations of domestic violence intervention treatment; and

(v) The program's direct treatment staff's responsibility regarding mandated reporting and duty to warn.

(4) The program must document in writing the program's efforts to notify the victim by phone of the requirements in this section.

(a) The program may mail the required information in this section if they cannot reach the victim by phone after three documented attempts;

(b) The program must document in writing the program's efforts to obtain the victim's contact information;

(c) When communicating with the victim at the time of assessment, enrollment, or denial into treatment the program must not assess the victim in any way, but the program may ask if the victim has any information they would like to share; and

(d) If on their own accord the victim provides the program with information regarding the participant or aspects of their relation-

ship, then the program must keep the victim's information in a separate file from the participant's file.

(5) The program must not invite or require the victim to attend domestic violence intervention treatment sessions or education groups which the program requires participants to attend as a condition of their contracts.

(6) Programs may meet the requirements of this section through an agreement or contract with a victim services program, but it is the responsibility of the certified program to ensure and document in writing that all requirements are met.

[WSR 19-15-044, recodified as § 388-60B-0325, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0325, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0325, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0330 Victim confidentiality—What must programs do in order to safeguard victim confidentiality? Each treatment program certified to provide assessments or any level of domestic violence intervention treatment must follow standards regarding victim confidentiality.

(1) A certified program must treat all information the victim provides to the program as confidential unless the victim gives written permission for the program to release the information or the program is required by law to release the information.

(2) If the program is required by law to release the information shared by the victim, such as in cases of abuse of children, the program must explain the process to the victim and the direct treatment staff's obligations as a mandated reporter under RCW 74.34.020(14).

(3) Any information provided by or to the victim must be kept separate from any files for participants unless the victim has waived their confidentiality for the specific information that will be kept in the participant's file.

(4) If a victim informs the program that the participant has engaged in new abusive behavior, the treatment program must:

(a) Provide the victim with contact information for the local domestic violence victim services programs;

(b) Review with the victim the domestic violence intervention treatment program's victim confidentiality rules including how the victim can waive or release their confidentiality; and

(c) If the victim chooses to waive or release their confidentiality, the program must:

(i) Discuss the victim's safety and document the program's efforts to increase the victim's safety; and

(ii) Document the victim's confidentiality release or waiver in writing, which specifies the information the victim is releasing and for what purpose the information is being released.

(5) If the victim informs the program about a participant's new or recent abusive behavior, and either the victim or the program has reason to believe that disclosing this information to the participant will place the victim at significant risk, the program must keep this information confidential and must not directly address the behavior with the participant until, to the best of the program's knowledge, doing so no longer poses a significant risk to the victim.

(6) The program may explore other sources, such as probation or court records, by which the program has uncovered new or recent abusive behavior and may address the behavior with the participant in treatment if it can be disclosed that the program received this information from a source other than the victim, so as to not place the victim at additional risk.

[WSR 19-15-044, recodified as § 388-60B-0330, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0330, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0330, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0335 Cooperation with victim services—How must a program cooperate with local domestic violence victim services agencies? Each treatment program certified to provide assessments or any level of domestic violence intervention treatment must ensure:

(1) The treatment program has established and maintains cooperative relationships with domestic violence victim services programs located in their community;

(2) The treatment program has a current list of local domestic violence victim programs in their area and the services each program provides;

(3) The list of domestic violence victim programs must be available on-site, in print or electronic form, to all direct service staff at all times; and

(4) The program regularly attends and participates in the local domestic violence task force, intervention committee, or workgroup if one exists in their community.

[WSR 19-15-044, recodified as § 388-60B-0335, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0335, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0335, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0340 Domestic violence laws—What must a program know about domestic violence laws and justice system practices? Each treatment program certified to provide assessments or any level of domestic violence intervention treatment must ensure that the program has an understanding of the laws pertaining to domestic violence and the operation of the justice system.

(1) At a minimum, a program must be familiar with and have written documentation of:

(a) State laws regulating the response to domestic violence by the criminal justice system;

(b) Relief available to victims of domestic violence offered by:

(i) Washington domestic violence law and civil protection orders;

(ii) Criminal no-contact orders; and

(iii) Civil restraining orders; and

(c) Information about local law enforcement, prosecution, and court and probation programs that work with domestic violence cases.

(2) The written documentation required in this section must be available at all times in print or electronic form to all direct service staff.

[WSR 19-15-044, recodified as § 388-60B-0340, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0340, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0340, filed 5/29/18, effective 6/29/18.]

PARTICIPANT STANDARDS

WAC 388-60B-0345 Participant requirements—What must the program require of participants accepted into a domestic violence intervention treatment program?

(1) All participants enrolled in domestic violence intervention treatment must attend consecutive, same gendered, weekly group treatment sessions that are face to face and in-person.

(2) Another type of intervention may be approved for participants in any level of treatment for certain documented clinical reasons, such as psychosis, disability, or other conditions that make the individual not amenable to treatment in a group setting.

(3) A program may develop policies which allow level three and four participants to attend individual sessions as part of the participant's treatment plan in order to address their risk factors and meet their unique needs.

(4) Participants who experience hardship attending a certified program in person may ask the program to request an exception for the requirement of attending treatment group meetings in-person in order to attend via live video feed.

(a) An exception to the requirement to attend group in-person must be requested by the program on behalf of a participant and is subject to approval by the department;

(b) The department will review exception requests on a case by case basis and approve or deny the request within seven calendar days after receiving it, unless circumstances warrant a longer period of time;

(c) The department's decision to deny an exception request is not subject to administrative review under chapter 388-02 WAC; and

(d) The program submitting the exception request must be certified under this chapter and send written documentation by electronic or US mail to the department that outlines all of the following:

(i) Documentation that the participant does not have access to reliable transportation and their residence and place of employment are more than forty-five miles from a certified program, or the participant has a physical disability that creates a hardship for attending in person, or other good cause;

(ii) The program's applicable policies and procedures related to connecting participants to their home group through live video; and

(iii) How the program will ensure all participants' confidentiality including the use of a HIPAA compliant live video attendance program.

(5) The program must assign participants to a home group and the participant must be required to attend the same scheduled group each week.

(6) The program's supervisor must authorize any exceptions to this requirement and document the reason for the exception in the participant's file.

(7) A program may develop policies which allow a brief lapse in treatment of no more than thirty days when a participant transfers from another program or experiences extraordinary circumstances that impede their attendance.

(8) Any lapse in treatment must be approved by the program's supervisor and must not exceed thirty days unless approved in writing by the program's supervisor.

(9) Before the participant begins any level of domestic violence intervention treatment, the program must document in the participant's record:

(a) The participant has signed all applicable releases of information required by the treatment program, including those specified in WAC 388-60A-0365;

(b) The participant has signed a contract for services with the treatment program; and

(c) The participant has an assessment and treatment plan completed by a Washington state certified domestic violence intervention treatment program.

[WSR 19-15-044, recodified as § 388-60B-0345, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0345, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0345, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0350 Co-occurring treatment—May participants engage in other types of treatments while they are in domestic violence intervention treatment? Each treatment program certified for any level of treatment must adhere to the following standards regarding co-occurring treatment:

(1) A program may recommend or require a participant to participate in other types of treatment or classes during the same period the client is participating in the required weekly domestic violence intervention treatment sessions;

(2) Any other type of treatment or therapy must support the goal of victim safety by facilitating change in the participant's abusive behavior without blaming the victim for the participant's abuse;

(3) Participants must sign a release of information for all co-occurring treatment providers;

(4) In order to increase victim safety, participants must not engage in marital or couples counseling unless they meet all of the following requirements:

(a) The participant has been regularly attending domestic violence intervention treatment services for a minimum of six months;

(b) The program has documented that the participant has taken full accountability for their abusive behaviors; and

(c) The program has communicated with the victim or current partner and documented that the participant has made cognitive and behavioral changes that reduce the risk of intimate partner violence towards the victim; and

(5) Co-occurring therapies must not be substituted for the required domestic violence intervention treatment sessions, including but not limited to:

(a) Individual therapy;

(b) Family therapy;

(c) Marital or couples counseling;

- (d) Parenting classes;
- (e) Substance use evaluations, treatment, drug testing; or
- (f) Anger management.

[WSR 19-15-044, recodified as § 388-60B-0350, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0350, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0350, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0355 Participant rights—What are the participant rights that a program must follow and provide to the participant? (1)

Each certified program must provide assessment and treatment participants with rights.

(2) The participant's record must include a copy of the rights, which are signed by the participant and include the following:

(a) A treatment program must provide each participant with the highest quality of service;

(b) Treatment program staff must establish a climate where all relationships with colleagues and participants are respectful;

(c) Each participant must have the assurance that the program staff will conduct themselves professionally, and avoid unprofessional conduct as specified in RCW 18.130.180;

(d) Staff working for a treatment program must not engage in or tolerate verbal abuse, physical abuse, sexual harassment, or exploitation towards a program participant;

(e) Each participant enrolled in domestic violence intervention treatment must have a written contract signed by the participant and the treatment program staff that meets the requirements of WAC 388-60A-0370; and

(f) The participant has the right to request reports and other related materials from their individual file which must be sent directly to the participant or their attorney in a timely manner when it is requested by the participant and they have signed an applicable release of information.

[WSR 19-15-044, recodified as § 388-60B-0355, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0355, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0355, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0360 Participant confidentiality—What must programs do in order to safeguard participant confidentiality? Each program

certified to provide assessments or any level of domestic violence intervention treatment must:

(1) Follow the confidentiality requirements contained in chapter 18.19 RCW for registered counselors and certified professionals;

(2) Require all program participants and guests to agree in writing not to disclose the identity of group participants or personal information about the participants;

(3) Keep all communications between the participant and direct treatment staff confidential unless:

(a) The participant has signed a release of information; or

(b) The program is legally required to release the information;

and

(4) Receive written consent, that gives details about the specific uses for the tape, when a program audio or video tapes a group session.

(a) The program must obtain an additional consent statement from each participant to permit use of the tape for any purpose other than the purposes specified in the original consent;

(b) Audio or video recordings must be stored in a locked, secure and confidential location that is not accessible to participants or the public; and

(c) Audio or video recordings must be destroyed when confidential storage is no longer available, before the program closes or before ownership of the program is transferred.

[WSR 19-15-044, recodified as § 388-60B-0360, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0360, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0360, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0365 Releases of information—What releases of information must the program require from participants before they are accepted into a program? In order to obtain information for the assessment or treatment of the participant, to facilitate the communication necessary for periodic safety checks and case monitoring, and to increase the safety of the victim and any children involved, the treatment program must require all participants to sign the following releases, which must remain in effect until at least ninety days after the participant is discharged from treatment:

(1) A release for the victim when applicable;

(a) The release must allow the certified program to communicate with the victim during the assessment and treatment process;

(b) The release must allow the certified program to notify the victim that the participant has been accepted or rejected for treatment;

(c) The release must allow the certified program to notify the victim of any significant changes in the participant's treatment plan or noncompliance with treatment; and

(d) The release must allow the program to notify the victim if their safety appears to be at risk due to the participant's potential for violence or lethality;

(2) A release to receive and provide information regarding the participant with child protective services, child welfare services, other child services, or DSHS programs;

(3) A release allowing the program to receive and provide relevant information regarding the participant, including safety concerns, with each of the following entities as applicable:

(a) Significant others or current partners;

(b) Any adult children who are biological to or have lived with the participant;

(c) The victim's community and legal advocates;

(d) Police;

(e) Lawyers, including prosecutors;

(f) Courts;

(g) Probation officers;

(h) Parole officers;

(i) Court-appointed guardian ad litem; and

- (j) Any concurrent or former treatment or assessment agencies, including but not limited to:
 - (i) Domestic violence intervention treatment programs;
 - (ii) Sexual offender programs;
 - (iii) Mental health agencies;
 - (iv) Individual therapists; and
 - (v) Substance use treatment programs; and
- (4) A release allowing the information and data from the participant's individual file to be used for research and evaluation must be offered but not required to be signed by the participant and the release must indicate that any information disclosed for research and evaluation purposes will remain confidential.

[WSR 19-15-044, recodified as § 388-60B-0365, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0365, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0365, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0370 Participant contracts—What elements must be included in a contract between a program and participant? (1) Each treatment program certified for any level of domestic violence intervention treatment must require participants to sign and date a formal contract for services before treatment begins.

(2) The program must document that a copy of the contract was offered to the participant.

(3) The contract between each participant and the treatment program must include the following elements:

(a) A statement regarding the treatment program's philosophy that the victim may not be blamed for the participant's abuse, the participant must stop all forms of abuse, the abuser is to be held accountable for their actions, and the program's primary concern is for the safety of victims;

(b) A requirement that the participant must:

(i) Cooperate with all program rules;

(ii) Stop violent and threatening behaviors;

(iii) Develop and adhere to an accountability plan;

(iv) Comply with and when requested, bring documentation of, compliance with all court orders including but not limited to spousal support, child support, parenting plans, and orders of protection or no contact;

(v) Cooperate with the rules for group participation; and

(vi) Sign all required releases of information;

(c) A policy on attendance and consequences for inadequate attendance;

(d) A requirement that the participant must actively participate in treatment, including sharing personal experiences, values, and attitudes, as well as completing all group activities and assignments;

(e) Treatment completion criteria and core competencies;

(f) The program's policy regarding concurrent treatment requirements;

(g) The program's policy regarding the possession of weapons as described under chapter 9.41 RCW;

(h) An agreement that group members must honor the confidentiality of all participants;

(i) A statement that the treatment program has the duty to warn and protect victims, law enforcement, and third parties of any reasonably foreseeable risk of serious harm the program determines the participant poses to them;

(j) A requirement that the participant must either:

(i) Provide the program with the participant's arrest records, criminal history, civil or family law actions, protection orders, no contact orders, incident or police reports, and any information regarding treatment services previously received; or

(ii) Identify the existence of and location of all service records, and authorize release of all such records to the domestic violence treatment program;

(k) The program's policy regarding the use of drugs and alcohol, including a provision that the participant must attend treatment sessions free of drugs and alcohol; and

(l) Fees and methods of payment for treatment.

[WSR 19-15-044, recodified as § 388-60B-0370, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0370, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0370, filed 5/29/18, effective 6/29/18.]

TREATMENT REQUIREMENTS

WAC 388-60B-0400 Behavioral assessment and interview criteria—

Who may conduct the interview and assessment and what must it include?

(1) A participant must complete an individual interview and behavioral assessment with a certified program prior to starting any level of treatment.

(2) The purpose of the assessment is to determine:

(a) The level of risk, needs, and responsivity for the participant;

(b) The level of treatment the program will require for the participant; and

(c) Behaviorally focused individualized treatment goals or objectives for an initial treatment plan.

(3) Only treatment staff who meet the minimum qualifications for direct treatment staff as defined in this chapter may complete the interview and assessment process and all related paperwork.

(a) An assessment must be completed by a staff person who has been designated by the department at the staff or supervisor level as outlined in WAC 388-60A-0240 and 388-60A-0250;

(b) A trainee must not have sole responsibility for conducting an interview or assessment;

(c) A trainee may sit in on an interview and assessment process, but the staff or supervisor level person must conduct the interview and write the assessment.

(4) The assessment process must include:

(a) A behavioral assessment and screening interview with the participant;

(b) Collateral information and input from third party sources;

(c) The participant's legal history; and

(d) A summary of the results from all applicable evidence-based, empirical, and objective standardized tests.

(5) The assessment process is ongoing throughout treatment and changes to the participant's program based on updated assessment information must be documented in the participant's record.

(6) Each program certified for assessments must comply with the following:

(a) The program staff must meet in person and face to face with the participant to conduct the assessment, and the assessment must be kept in the participant's file;

(b) Information gathered by or provided to the program from the current victim, past victims, significant others, children, or other family members must not be included in the assessment unless:

(i) The program has written consent from that person to include such information in the written assessment; or

(ii) The program is quoting public information gathered from a public record such as a police report, protective order, no contact order, or a similar document;

(c) The assessment must be written, completed, signed, and dated by the staff or supervisor who completed the interview and assessment; and

(d) The program must document their reasonable efforts to share a completed assessment in a timely manner when it is requested by another certified program and an applicable release of information has been signed by the participant.

(7) **General assessment information:** During the assessment interview a program staff or supervisor must write the assessment and document information that includes the following:

(a) The participant's referral source and contact information for the source when applicable;

(b) Basic demographic and contact information;

(c) The participant's current relationship status and their plans for the relationship;

(d) The participant's access to the victim and their children, family, and coworkers;

(e) An assessment of the participant's individual culture which includes:

(i) Gender identity;

(ii) Preferred pronouns;

(iii) Sexual orientation;

(iv) Religion or spiritual beliefs;

(v) Race;

(vi) Ethnicity; and

(vii) Groups with which the participant identifies;

(f) The possible cultural context for the participant's views about using violence in family relationships;

(g) An assessment of the participant's history of victimization that includes:

(i) Domestic violence victimization;

(ii) Sexual assault victimization; and

(iii) Other trauma history including complex trauma;

(h) Current or past protective orders, no contact orders, parenting assessments, parenting plans, and orders for supervised visitation with children;

(i) A summary of information from police or incident reports for current and past incidents involving coercive or abusive behaviors;

(i) The program must document the participant's specific abusive behaviors; and

(ii) The program must document whether there were children present during any incidents or in the immediate aftermath of an incident and what the children's exposure was to the abuse, the victim's injuries, and damage to property;

(j) The participant's comments or views about specific abusive behaviors in current and past incidents;

(k) Additional collateral information that is necessary to assess the participant's risks and needs, including but not limited to information from:

(i) Probation or parole officers;

(ii) The victim, previous partners, or a current partner if they choose to provide information;

(iii) Victim advocates;

(iv) 911 tapes;

(v) Guardians ad litem, CASAs, or parenting evaluators; and

(vi) Child protective service workers; and

(l) An assessment of whether children have been effected in any way by the participant's domestic violence and if a parenting class specific to perpetrators of domestic violence will be required by the program.

(8) **Domain 1:** An assessment of the participant's current and past high risk factors that include but are not limited to:

(a) Victim initiated separation from the participant in the last six months or other indication the victim may initiate separation;

(b) The infliction or threat of physical harm against an intimate partner including strangulation, physical, sexual, and psychological abuse, or a pattern of assaultive, coercive, and controlling behaviors directed at achieving compliance from or control over that partner;

(c) Access to a firearm, previous use or threats to use a weapon as it is defined in chapter 9.41 RCW, or prior training with weapons;

(d) Signs of jealousy, possessiveness, isolation, monitoring, stalking, or holding a victim captive;

(e) Abuse of children, pets or an elderly person;

(f) Instability in the participant's life including but not limited to employment, new or increased substance use, friendships, or intimate relationships;

(g) Children of the victim that are not the participant's biological children;

(h) History of violence in or outside of the home and any police contacts for the violence;

(i) Previous domestic violence or anger management assessments or treatments;

(j) Ideation, attempts, or threats of homicide and suicide; and

(k) Repeated violations of probation, no contact orders, protection orders, or similar orders.

(9) **Domain 2:** A screening for traumatic brain injury, making appropriate referrals for further assessment or treatment when needed. Screening information gathered must include:

(a) Traumatic brain injury or report of injury to the frontal lobe from an accident, sports, military, or similar activities;

(b) Any history of concussions or brain disease or injuries from strokes or dementia; and

(c) A history of experiencing repeated blows to the head regardless of whether the participant ever lost consciousness.

(10) **Domain 3:** A screening for indicators associated with the participant's mental health, making appropriate referrals for further assessment or treatment when needed. The screening must include:

(a) A complete diagnostic evaluation when it is completed by an appropriately credentialed mental health professional practicing within their scope of practice; and

(b) Whether the participant reveals any of the following:

(i) Indicators associated with post-traumatic stress disorder;

(ii) Indicators associated with bipolar disorder;

(iii) Indicators associated with anxiety and depression;

(iv) Indicators associated with personality anomalies;

(v) Anti-social traits;

(vi) Sociopathic traits;

(vii) Psychopathic traits;

(viii) Previous or current mental health treatment; and

(ix) Other mental health or emotional indicators the participant or staff consider relevant to planning successful participation in domestic violence intervention treatment, such as psychosis.

(11) **Domain 4:** An assessment of the participant's belief system as it relates to:

(a) Hierarchical relationships;

(b) Spiritual, cultural, or religious beliefs about gender and family roles that condone partner violence;

(c) Readiness to change; and

(d) Level of accountability.

(12) **Domain 5:** A screening for substance use, making appropriate referrals for further assessment or treatment by a chemical dependency professional when needed. The screening must include:

(a) Past and current substance use;

(b) Information about charges, assessments, or treatments related to substance use; and

(c) Other substance use information the participant or staff consider relevant to successful participation in domestic violence intervention treatment.

(13) **Domain 6:** An assessment of the participant's environmental factors which must include:

(a) Criminal history from the participant's:

(i) Self-report;

(ii) A background check that covers each state they have lived in over the last ten years; and

(iii) Collateral sources;

(b) Friends and family with criminogenic behaviors;

(c) The absence or presence of pro-social supports;

(d) A brief employment history and current status including:

(i) Length of employment; and

(ii) Level of job satisfaction;

(e) Highest level of education completed and any barriers to education or learning, including literacy, learning disabilities, or language needs;

(f) The people who make up the participant's support system and how their beliefs do or do not support the participant's abusive behaviors;

(g) The participant's motivations for healthy family relationships;

(h) The participant's strengths, social activities, hobbies, and recreational activities; and

(i) Whether or not the participant is socially isolated.

(14) **Domain 7:** Documentation of the results from an evidence-based, empirical, and objective standardized test that assesses risk,

lethality, or needs for domestic violence perpetrators and documentation of the participant's level of psychopathy when needed.

(a) Examples of acceptable assessments for risk, lethality, or needs for domestic violence perpetrators include but are not limited to:

- (i) The Domestic Violence Inventory;
- (ii) The Domestic Violence Screening Instrument - Revised;
- (iii) The Ontario Domestic Assault Risk Assessment; and
- (iv) The Spousal Assault Risk Assessment;

(b) If a program staff or supervisor has reason to believe it is needed or the participant has indicated any combination of three or more anti-social, sociopathic, or psychopathic traits, then the staff or supervisor must gather information related to the participant's level of psychopathy; and

(c) Examples of acceptable assessments for psychopathy include but are not limited to:

- (i) Self-Report Psychopathy Scale (SRP4);
- (ii) Hare P-scan; or
- (iii) Psychopathy checklist (PCL-R or PCL-SV);

(A) The administration of the PCL requires appropriate credentials and training; and

(B) The Interpersonal measure of psychopathy (IM-P) may be used with the PCL-R.

(15) **Acute or critical factors:** The following assessment factors are considered critical or acute and indicate the participant is at a higher risk for lethality or recidivism and must be required to attend level three or four treatment unless the program's supervisor documents extraordinary reasons for an exception in the participant's record.

(16) Other assessment factors may indicate a participant is at a high risk even if they do not meet any of these factors. The critical or acute factors include but are not limited to:

(a) Previous incidents of physical assaults causing injury, sexual assaults, strangulation, or previous reported incidents toward more than one partner;

(b) Previous use or threats with weapons against an intimate partner or family member;

(c) Stalking behaviors;

(d) Physical, sexual, or assaultive violence against children, pets, or an elderly person;

(e) Attempts or threats of homicide or suicide in the last twelve months;

(f) Repeated violations of probation, no contact orders, protective orders, or similar orders; or

(g) A medium or high level of psychopathy.

(17) If the program cannot obtain one or more of the items required in the assessment, then the program must document within the assessment their reasonable efforts to obtain the information.

(18) During an assessment process, the program staff or supervisor who conducted the interview must document a completed DSHS domestic violence 'risks, needs and responsibility form,' which can be downloaded from <https://www.dshs.wa.gov/ca/domestic-violence/certification-process>.

(19) **Summary:** The assessment must contain a written summary which at a minimum includes findings from the behavioral assessment and interview with the participant, collateral information, and input from third party sources, and includes:

- (a) A summary of the participant's social and legal history;
- (b) An assessment of the degree of abusive cognitive and behavioral patterns;
- (c) An assessment of the behaviors that need to be targeted in domestic violence intervention treatment;
- (d) An assessment of the participant's level of accountability and their motivations and readiness to change;
- (e) A summary and assessment of the results of all evidence-based, empirical, and objective standardized tests given through the assessment process; and
- (f) The program's recommendation and rationale for no domestic violence intervention treatment or a condition for treatment that indicates level one, two, three, or four treatment that corresponds to the participant's risks and needs as determined through the interview and assessment process;
 - (i) The recommended level of treatment must not be diminished by factors such as the absence of legal charges, the type of legal charge the participant may have received, plea deals, or any other influences from outside entities; and
 - (ii) The program must recommend a level of domestic violence intervention treatment when intimate partner violence has occurred, unless the program has documented a reasonable and valid rationale for a recommendation of an alternative service or no treatment at all in the assessment; and
- (g) All required and recommended referrals to other types of treatment such as substance use, parenting, or mental health treatment in order for the participant to be successful in domestic violence intervention treatment.

[WSR 19-15-044, recodified as § 388-60B-0400, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0400, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0400, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0405 Treatment planning—What must the treatment plan include and when must it be updated? Each program certified for any level of domestic violence intervention treatment must adhere to the following treatment planning standards:

- (1) The program must develop an individualized written treatment plan for each participant who is accepted into the domestic violence intervention treatment program;
- (2) The initial treatment plan must be completed before the participant begins treatment;
- (3) The initial treatment plan and all updates to the plan must be signed and dated by the participant and direct service staff member who updated the plan;
 - (a) The program must document that a copy of the original and any updated treatment plans have been given to the participant and the referral source unless the recipient has opted out of receiving it; and
 - (b) If the referral source or participant has opted out of receiving a copy, documentation of them opting out must be documented in the participant's file;
- (4) The program must base the participant's treatment on:
 - (a) The interview and assessment completed by a Washington state certified domestic violence intervention treatment program;

(b) The risks, needs, and responsivity form (available for download at <https://www.dshs.wa.gov/ca/domestic-violence/certification-process>) which the program completed for the participant; and

(c) Ongoing risk and assessment information obtained throughout treatment from the participant, collateral, and third party sources;

(5) The treatment plan must:

(a) Adequately and appropriately address any criminogenic needs, as well as high risk, critical, and acute factors of the individual participant;

(b) Identify the program's general responsivity by documenting the evidence-based or promising treatment modality the program will use to address the participant's risks and needs in order to assist them in meeting their goals or objectives;

(c) Identify the program's specific responsivity, taking into account the participant's characteristics such as their strengths, learning style, personality, motivation, bio-social factors, and culture;

(d) Include individualized goals or objectives which are behaviorally specific and measurable;

(e) Document required referrals to other treatments or classes such as mental health, substance use, or parenting, which are necessary in order for the participant to be successful in domestic violence intervention treatment;

(f) Document recommended referrals to other treatment programs and resources; and

(g) Document which treatment gets priority and the sequence of treatment for the participant if more than one treatment service is indicated on the plan; and

(6) The treatment plan must be updated when indicated by:

(a) Significant changes in the participant's behavior or circumstances;

(b) Factors associated with victim safety;

(c) A change in the participant's treatment risks, needs, goals, or objectives; or

(d) If the participant is moving to a higher or lower level of treatment.

[WSR 19-15-044, recodified as § 388-60B-0405, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0405, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0405, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0410 Placement criteria—How must a program determine a participant's level of treatment? (1) For level one treatment the program must ensure:

(a) A program must place participants in level one treatment if the program has documented through the assessment, collateral contacts, the participant's legal history and the "risks, needs and responsivity" form all of the following:

(i) The participant has no previous domestic violence charges regardless of an arrest or legal outcomes;

(ii) The participant is at an overall low risk for lethality or recidivism; and

(iii) The participant has engaged in abusive and controlling behavior with an intimate partner;

(b) If the program cannot obtain information from all of the sources in this section then the program must document their reasonable efforts to obtain the information and must place the participant in level two, three, or four treatment; and

(c) A participant who has already been placed in a higher level of treatment must not be transferred to level one treatment at any time.

(2) For level two treatment the program must ensure:

(a) A program must place participants in level two treatment if the program has determined through the assessment, collateral contacts, the participant's legal history, the assessment process and the "risks, needs and responsivity" form the following:

(i) The participant is at an overall medium risk for lethality or recidivism;

(ii) The participant has an established pattern of abuse and control; and

(iii) The participant has little or no criminogenic needs; and

(b) If the program cannot obtain information from any of the sources in this section, then the program must document their reasonable efforts to obtain the information.

(3) For level three treatment, the program must ensure the program places participants in level three treatment if the program has documented through the assessment, collateral contacts, the participant's legal history and the 'risks, needs and responsivity' form the following:

(a) The participant is at an overall high risk for lethality or recidivism;

(b) The participant has indicated an acute or critical assessment factor as specified in WAC 388-60A-0400(15) and 388-60A-0400(16); or

(c) The participant has identified antisocial traits; and

(d) The participant has criminogenic needs which can be addressed in group or through ancillary individual sessions, depending on their unique risks and needs as identified in the participant's assessment and outlined in their treatment plan.

(4) For level four treatment, the program must ensure:

(a) The participant's risks and needs indicate a medium or high level of psychopathy as identified through a combination of information from:

(i) The assessment;

(ii) Collateral sources;

(iii) The participant's legal history; and

(iv) A relevant assessment tool which may include but is not limited to:

(A) The Self-Report Psychopathy Scale (SRP4);

(B) The PCL-SV or PCL-R which may include the IM-P;

(C) The Hare P-scan; or

(D) Other evidence-based measures of psychopathy; and

(b) Level four treatment may be facilitated through group or individual sessions or a combination of group and individual sessions in order to meet the participant's unique treatment needs as outlined in their treatment plan.

(5) Levels one and two treatment may be combined in the same group.

(6) Level three treatment participants may be combined with levels one and two or in a separate group, depending on the individual treatment needs and goals of each participant.

(7) Participants in level four treatment must be in a separate group from all other participants in lower levels of treatment and must not be combined with any other groups at any time.

[WSR 19-15-044, recodified as § 388-60B-0410, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0410, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0410, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0415 Required cognitive and behavioral changes—Depending on their level of treatment, what changes must the program document that the participant has made? (1) For levels one, two and three treatment, the program must ensure:

(a) The groups are facilitated by a program staff member who is designated by the department at the staff or supervisor level;

(b) A trainee may cofacilitate with a staff or supervisor, but must not facilitate the group alone at any time;

(c) The program uses evidence-based or promising practices (see WAC 388-60A-0310) to facilitate the areas of treatment focus listed in this section;

(d) The cognitive and behavioral changes in this section are the minimum standard for certified domestic violence intervention treatment and the program must add topics, discussions, lessons, exercises, or assignments that meet the individual treatment needs of the participant;

(e) The areas of treatment in this section include cognitive and behavioral changes, which must be shared in treatment by the participant and documented by the program in the participant's individual record as those changes are identified;

(f) Each treatment program certified for levels one, two, and three domestic violence intervention treatment must document in each participant's file that the following cognitive and behavioral changes are documented for each participant and at a minimum include:

(i) **Types of abuse:** Individual and specific examples of how the participant has acknowledged that they have engaged in any abusive behaviors including but not limited to the following types of abuse:

(A) Physical;

(B) Emotional and psychological including terrorizing someone or threatening them;

(C) Verbal;

(D) Spiritual;

(E) Cultural;

(F) Sexual;

(G) Economic;

(H) Physical force against property or pets;

(I) Stalking;

(J) Acts that put the safety of partners, children, pets, other family members, or friends at risk; and

(K) Electronic, online, and social media;

(ii) **Belief systems:** Exploration of the participant's individual and cultural belief system, including acknowledgement of how those beliefs have allowed and supported violence against an intimate partner including privilege or oppression;

(A) Specific examples of how the participant's individual belief system has allowed or supported the use or threat of violence to establish power and control over an intimate partner; and

(B) Examples of how the participant has experienced societal approval and support for control through violence and the designation of an intimate partner or children as safe targets for this violence;

(iii) **Respectful relationships:** Documentation of new skills the participant has gained through exercises in learning and practicing respectful relationship skills including techniques to be nonabusive and noncontrolling that include but are not limited to:

(A) Requesting and obtaining affirmative consent as an essential aspect of interpersonal relationships; and

(B) Respecting boundaries about others' bodies, possessions, and actions;

(iv) **Children:** Documentation of the participant's understanding of how children have been impacted by the participant's abuse and the incompatibility of domestic violence and abuse with responsible parenting including but not limited to:

(A) An understanding of the emotional impacts of domestic violence on children;

(B) An understanding of the long-term consequences that exposure to incidents of domestic violence may have on children; and

(C) The behavioral changes the participant has made and shared with the group as a result of this understanding;

(v) **Accountability:** Documentation of the participant's understanding of accountability for their abusive behaviors and their resulting behavioral changes including but not limited to:

(A) Documentation of the participant's understanding of how they are solely responsible for their abusive and controlling behavior and how they acknowledge this fact;

(B) An understanding of the need to avoid blaming the victim and the ability to consistently take responsibility for the participant's abusive behavior, including holding themselves and others in group accountable for their behavior;

(C) Documentation of a minimum of three separate individual examples of how the participant has taken accountability since beginning domestic violence intervention treatment which must be kept in the participant's file;

(D) Documented examples of how the participant has demonstrated spontaneous accountability in treatment, taking accountability in the moment;

(E) Documentation of the participant's accountability plan:

(I) The treatment program may assist the participant in developing the plan;

(II) In the plan the participant must make a commitment to giving up power and control, including abusive and controlling behaviors towards the victim and others;

(III) In the plan the participant must take accountability for specific abusive behaviors they have committed and have a plan for stopping all abusive behaviors;

(IV) In the plan the participant must identify examples of individualized and specific behavioral changes they have made which demonstrate an understanding of accountability; and

(V) In the plan the participant must identify their personal motivations, ethics, and values as they relate to maintaining healthy relationships; and

(F) Documentation that the participant has demonstrated an understanding of accountability in their past and current relationships, and their progress in taking accountability including the resulting cognitive and behavioral changes during treatment;

(vi) **Financial and legal obligations:** Documentation of the participant's understanding of why it is necessary for them to meet their financial and legal obligations to family members and the actions they are taking to meet those obligations;

(vii) **Empathy:** Documentation of the exercises or assignments on empathy building that demonstrate the participant's cognitive and behavioral changes as a result of increasing their empathy;

(viii) **Defense mechanisms:** Documentation of what the participant has identified as their individual defense mechanisms such as projection, denial, and detachment as well as healthy coping strategies the participant has learned, and the cognitive and behavioral changes they have made in dealing with unpleasant feelings;

(ix) **Self-care:** Documentation of individualized self-care practices the participant has learned and incorporated into their lives, and documentation of their understanding of why self-care is crucial for healthy relationships;

(x) **Support system:** Documentation of the participant's healthy support system, including who they have identified as part of that system and how they provide healthy support;

(xi) **Indicators:** Documentation of the indicators or red flags the participant has identified that they have engaged in, their understanding of how those behaviors are abusive, and the cognitive and behavioral changes they have made as a result;

(xii) **Cognitive distortions:** Documentation of the cognitive distortions or thinking errors the participant has identified, that they have used to justify their abusive behaviors, and how they have learned to reframe and change their thinking when those cognitive distortions are present;

(xiii) **Personal motivations:** Documentation of the participant's personal motivations for abusive behaviors and the cognitive and behavioral changes they have made to replace those beliefs and subsequent behaviors which include but are not limited to:

(A) A sense of entitlement;

(B) A belief that the participant should have power and control over their partner;

(C) Learned experience that abuse can get the participant what they want;

(D) The need to be right or win at all costs; and

(E) Insecurity and fear;

(xiv) **Relationship history:** Documentation of the participant's relationship history which documents common characteristics, motivations for abuse, applicable cognitive distortions, and indicators of domestic violence throughout the participant's history of intimate relationships;

(A) The treatment program and group may assist the participant in developing the relationship history; and

(B) The relationship history must focus on the participant's behaviors in an accountable manner without blaming others; and

(xv) **Criminogenic needs:** Documentation of treatment in group or individual sessions with level three participants that addresses their individual criminogenic needs as indicated through assessment and treatment planning.

(2) For level four treatment the program must ensure:

(a) The participant's individual risks, needs, and goals as indicated on the participant's treatment plan are addressed in level four treatment either in groups, individual sessions, or a combination of group and individual sessions;

(b) Level four treatment must only be facilitated by direct treatment staff designated as a supervisor who has attended the initial six hours of education approved by the department for providing level four treatment as well as four hours of continuing education every twenty-four months following the initial training;

(c) The treatment program providing level four treatment must be certified for level four treatment and demonstrate:

(i) The program uses cognitive behavioral and trauma informed techniques in treatment;

(ii) The program uses techniques that:

(A) Enhance intrinsic motivation;

(B) Use targeted interventions that are directly tied to the participant's needs, goals, or objectives identified in the participant's individualized treatment plan;

(C) Skill train with directed practice with participants;

(D) Increase positive reinforcement with participants; and

(E) Engage in ongoing support in communicating with the participant;

(d) The skills and behavioral changes for participants in level four treatment are the minimum standard and the program must add behavior changes, skills, lessons, exercises, or assignments that meet the individual treatment needs of the participant;

(e) The program must ensure that the following is documented in each participant's file in level four treatment and at a minimum include:

(i) The individualized meaning or motivations behind the participant's abusive behaviors and documentation of their belief about why it is in their best interest to meet their needs in alternative, legal, and healthy ways;

(ii) Documentation of how the negative legal and social consequences for someone who commits domestic violence has an affect on them personally and how that serves as motivation for changing their behaviors;

(iii) Documentation of their individual motivation for developing and improving a healthy support system, including who is already part of that support system and the identification of potential members of their healthy support system; and

(iv) Documentation of how the participant is working with the program to meet their individual dynamic criminogenic needs by:

(A) Reducing antisocial and procriminal attitudes, values, beliefs, and cognitive-emotional states;

(B) Reducing procriminal associates and increasing involvement with others who are pro-social;

(C) Managing temperamental and anti-social personality patterns that are conducive to criminal activity;

(D) Reducing antisocial behaviors;

(E) Identifying family factors that include criminality and a variety of psychological problems in the family of origin;

(F) Encouraging behaviors that lead to higher levels of personal, educational, vocational, or financial achievement;

(G) Encouragement of involvement in pro-social leisure activities;

(H) Understanding how abusing alcohol and drugs effects the participant's choices, decisions, and outcomes; and

(I) Understanding how employment status and their level of satisfaction effects the participant's choices, decisions, and outcomes.

(3) The program must make reasonable accommodations for participants with different educational levels, learning disabilities and learning styles throughout all levels of treatment.

[WSR 19-15-044, recodified as § 388-60B-0415, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0415, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0415, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0420 Minimum treatment periods and requirements—How must a program determine the treatment period for each participant?

(1) The minimum treatment period is the time required for the participant to fulfill all conditions of treatment set by the treatment program as indicated in the participant's contract and their treatment plan.

(2) Satisfactory completion of treatment must not be based solely on the client participating in the treatment program for a certain period of time or attending a certain number of sessions.

(3) In addition to meeting the participant's goals and objectives as outlined in their treatment plan, the program must require each participant to satisfy all treatment program requirements for:

(a) A minimum of six months of consecutive weekly same gender group sessions for level one treatment;

(b) A minimum of nine months of consecutive weekly same gender group sessions for level two treatment;

(c) A minimum of twelve months of consecutive weekly same gender group, individual, or a combination of group and individual sessions for level three treatment; or

(d) A minimum of eighteen months of consecutive weekly same gender group, individual, or a combination of group and individual sessions for level four treatment.

(4) Any breaks in treatment must be reasonable, justified, and follow the program's policies.

(a) A break in treatment cannot exceed thirty days, unless it is approved by the program's supervisor, and the reason for the decision is documented in the participant's file;

(b) A break in treatment may include conditions the participant must meet during the break in order to maintain a compliant status, such as assignments or check-ins which must be documented in the participant's file, and the participant must receive a copy of the conditions; and

(c) A break in treatment must be reported to the referral source unless they have opted out of receiving notification of breaks in treatment which must be documented in the participant's file.

[WSR 19-15-044, recodified as § 388-60B-0420, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0420, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0420, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0425 Reoffenses and noncompliance during treatment—What must happen if a participant reoffends or is not compliant while they are in treatment? Each treatment program certified for any level of domestic violence intervention treatment must ensure:

(1) The treatment program has defined what it means to reoffend, including abusive or controlling behaviors that may or may not be illegal.

(2) The treatment program has established and written consequences if a participant reoffends during treatment or does not comply with program requirements.

(3) The program has documented that the participant was made aware of the consequences of reoffending prior to starting treatment.

(4) If the participant reoffends during treatment the program must document in the participant's record:

(a) The details of the reoffense;

(b) Any changes to the ongoing assessment, treatment plan, level of treatment, or minimum treatment period and requirements for the participant as a result of the reoffense or if the program has discharged the participant because the program feels the participant is unlikely to benefit from additional time at the program; and

(c) The notification of the reoffense to the referral source.

(5) The program must document reoffenses or noncompliance in:

(a) The participant's record;

(b) Reports to the court, if applicable; and

(c) Reports to the victim, if feasible.

(6) When a participant is noncompliant with their contract, program rules, or attendance, within seven days of the noncompliance the program must:

(a) Notify the court or other referral source, if applicable; and

(b) Document in the participant's file:

(i) The details of the noncompliance;

(ii) The consequences imposed by the program and referral source, if applicable; and

(iii) Any changes to the participant's ongoing assessment and treatment plan as a result of the noncompliance.

[WSR 19-15-044, recodified as § 388-60B-0425, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0425, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0425, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0430 Completion criteria and core competencies—What must the program document for a participant to be eligible to successfully complete treatment? (1) The program must ensure:

(a) The participant has met the program's written criteria for satisfactory completion of treatment including:

(i) Cooperation with all program rules and requirements;

(ii) The goals or objectives of the participant's treatment plan, which include measurable behavioral changes; and

(iii) The minimum treatment period and requirements;

(b) The participant has attended and complied with all other treatment sessions required by the program, which may include ancillary treatments or classes such as mental health, substance use, or parenting;

(c) The participant is in compliance with all related court orders;

(d) When a participant who is court ordered to pay spousal or child support is behind on payments, they must show a payment plan agreement and documentation that they have been in compliance with the plan for a minimum of six months, in order to be in compliance; and

(e) Documentation of all cognitive and behavioral changes as required through coverage of the treatment topics, the completion of all assignments, and the requirements as outlined in the level of treatment in which they participated.

(2) In order to complete levels one, two, or three treatment the program must also document the participant has successfully demonstrated core competencies:

(a) Accountability and adherence to the participant's accountability plan;

(b) Increased victim safety as evidenced by written documentation of the participant's demonstration of a change in their beliefs which have resulted in the participant's cessation of all violent acts or threats of violence for a minimum of the last six months; and

(c) Knowledge of their personal primary motivations for abusive or controlling behaviors and alternative ways to meet their needs in a nonabusive manner.

(3) In order to complete level four treatment, the program must document the following in the participant's file:

(a) The participant's plan for how they will meet their needs in nonabusive, legal, and healthy ways;

(b) The problem solving and self-control skills the participant has learned and demonstrated in treatment to deal with unpleasant feelings; and

(c) The program's assessment of satisfactory changes to the participant's environmental factors such as peer groups, employment, or substance use.

[WSR 19-15-044, recodified as § 388-60B-0430, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0430, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0430, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0435 Discharging participants—What must a program do when a participant is discharged from treatment? (1) Discharge criteria must be uniform and predictable.

(2) Discrimination may not occur against any participant.

(3) The program may discharge or transfer a participant if the treatment program cannot provide adequate treatment services to the participant because of the treatment program's current development or certified levels of treatment.

(4) When a participant is discharged for satisfactory completion of treatment the program must ensure:

(a) The treatment program documents a written discharge summary in the participant's file within seven days of completion which includes:

(i) A summary of the cognitive and behavioral changes the participant demonstrated in treatment;

(ii) The goals or objectives the participant met in treatment as outlined in their treatment plan(s);

- (iii) The program's assessment of the participant's current risk factors;
 - (iv) Any recommendations for the participant's treatment after discharge; and
 - (v) The participant's eligibility criteria to return to the treatment program in the future; and
- (b) The treatment program must notify the following parties within seven days when a participant satisfactorily completes treatment:
- (i) The court having jurisdiction, if the participant has been court-mandated to attend treatment; and
 - (ii) The victim, if feasible, which must be documented in writing.
- (5) When a participant is discharged for incomplete or unsatisfactory treatment the program must ensure:
- (a) The treatment program documents a written discharge summary in the participant's file within three days of discharging participants who do not complete treatment which must include:
 - (i) The reason the participant was discharged from treatment;
 - (ii) A summary of what the participant demonstrated in treatment including any cognitive or behavioral changes;
 - (iii) The program's assessment of the participant's current risk factors;
 - (iv) Recommendations for the participant's treatment after discharge; and
 - (v) The participant's eligibility criteria to return to the treatment program in the future;
 - (b) The program must document that the participant has not complied with:
 - (i) The participant's contract with the treatment program;
 - (ii) The participant's treatment plan with the treatment program;
 - (iii) A court order;
 - (iv) A probation agreement; or
 - (v) Group rules;
 - (c) The treatment program must notify the following parties in writing when the program discharges a participant from the program because of failure to complete treatment:
 - (i) The court having jurisdiction, if the participant has been court-mandated to attend treatment;
 - (ii) The participant's probation or parole officer, if applicable; and
 - (iii) The victim of the participant, if feasible; and
 - (d) The program must notify the above parties within three days of terminating the participant's enrollment in the program.

[WSR 19-15-044, recodified as § 388-60B-0435, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0435, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0435, filed 5/29/18, effective 6/29/18.]

DEPARTMENT REVIEWS AND ACTIONS

WAC 388-60B-0500 On-site reviews and plans of correction—How does the department review certified programs for compliance with the regulations of this chapter? To obtain and maintain certification to

provide domestic violence intervention treatment services, including certification to provide assessments or any level of care, each program is subject to an on-site review to determine if the program is in compliance with the minimum certification standards of this chapter.

(1) For a standard review, a department representative(s) conducts an entrance meeting with the program and an on-site review that may include a review of:

- (a) Program policies and procedures;
- (b) Direct service staff personnel records;
- (c) Participant and victim records;
- (d) Written documentation of the program's treatment program;
- (e) Attendance sheets and other forms related to the provision of domestic violence intervention treatment services;
- (f) The facility where services are delivered and where records are kept;
- (g) The program's quality management plan; and
- (h) Any other information that the department determines to be necessary to confirm compliance with the minimum standards of this chapter, including but not limited to interviews with:
 - (i) Individuals served by the program; and
 - (ii) The program's direct treatment staff members.

(2) The department representative(s) concludes an on-site review, which may or may not happen in the same visit, with an exit meeting that includes, if available and applicable:

- (a) A discussion of findings;
- (b) A statement of deficiencies requiring corrective action; and
- (c) A compliance report signed by the program's designated official and the department representative.

(3) The department requires the program to correct the deficiencies listed on the plan of correction:

- (a) By the negotiated time frame agreed upon by the program and the department representative; or
- (b) Immediately if the department determines participant or victim health and safety concerns require immediate corrective action.

(4) If the program fails to make satisfactory corrective actions by the negotiated deadline in the compliance report, the department may:

- (a) Begin to take progressive action against the program's certification; or
- (b) Initiate an investigation of the program.

(5) The department may schedule a follow-up review after a standard review or investigation to ensure all corrective actions have been successfully implemented.

[WSR 19-15-044, recodified as § 388-60B-0500, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0500, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0500, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0510 Complaint investigations—How must an investigation get initiated and what is the process of the investigation? DSHS investigates complaints regarding domestic violence intervention treatment programs that provide assessments or any level of intervention services.

- (1) Any person may submit a written complaint to DSHS if the person has the following concerns about a certified program:
 - (a) The program has acted in a way that places the identified victim, current partner, or children at risk; or
 - (b) The program has failed to follow standards in this chapter.
- (2) Once it receives a complaint about a certified program, the department will:
 - (a) Determine that the complaint includes sufficient information to be deemed valid;
 - (b) Notify the program within fourteen days of the complaint being determined valid that the department has received a complaint about the program; and
 - (c) Notify the program by US Mail that an investigation has been initiated.
- (3) The department may begin an investigation of a domestic violence intervention treatment program without a written complaint if the department believes that the program:
 - (a) Has placed the identified victim, current partner or children at risk; or
 - (b) Failed to follow the standards of this chapter.
- (4) The investigation of a complaint against a domestic violence intervention treatment program may include:
 - (a) Contact with:
 - (i) The person making the complaint;
 - (ii) Other persons involved in the complaint; and
 - (iii) The treatment program;
 - (b) A request for written documentation of evidence; and
 - (c) An on-site visit to the program to review files or interview program staff.
- (5) The department must complete its investigation within sixty days of beginning the investigation, unless circumstances warrant a longer period of time.
- (6) The department will prepare written results of the complaint investigation.
- (7) If the department decides that the treatment program behaved in a way that placed victims at risk or failed to meet the standards outlined in this chapter, the written results must include a decision regarding the status of the program's certification.
- (8) If the department determines that a complaint against a domestic violence intervention treatment program is founded, the department may:
 - (a) Send a written warning to the treatment program;
 - (b) Suspend the treatment program's certification;
 - (c) Revoke the treatment program's certification; or
 - (d) Temporarily or indefinitely remove a program staff's designation as a trainee, staff, or supervisor.
- (9) The department must send the written results of its investigation to the program.
 - (a) If any allegations were founded, the written results must be sent by certified mail, return receipt requested, within twenty days after completing the investigation; and
 - (b) If all allegations were unfounded, the written results may be sent to the program by electronic mail.
- (10) The department will send a copy of the written results of the investigation to the person who made the complaint against the domestic violence intervention treatment program either by United States mail or electronic mail when feasible.

[WSR 19-15-044, recodified as § 388-60B-0510, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0510, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0510, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0520 Program or staff status changes—What must happen if a program's certification or a staff member's designation is changed by the department?

(1) If the department issues a written warning to a program, the department must send notice by certified mail and provide the treatment program with:

- (a) The specific reasons for the written warning;
- (b) The chapter 388-60A WAC standards that the written warning is based on;
- (c) Any remedial steps or corrective actions which the program must complete to the satisfaction of the department;
- (d) The deadline for completion of any corrective actions or remedial steps; and
- (e) If the treatment program refuses or fails to remedy the problems outlined in the written warning, the department may revoke or suspend the certification of the program.

(2) If the department suspends a treatment program's certification, the department must send notice by certified mail and provide the treatment program with:

- (a) The specific reasons for the suspension;
- (b) The chapter 388-60A WAC standards that the suspension is based on;
- (c) The effective date of the suspension;
- (d) Any remedial steps or corrective actions which the program must complete to the satisfaction of the department before the department will reinstate the program's certification and lift the suspension; and
- (e) The deadline for completion of any corrective actions or remedial steps.

(3) If the department revokes a program's certification, the department must send notice by certified mail and provide the program with:

- (a) The specific reasons for the revocation;
- (b) The chapter 388-60A WAC standards the revocation is based on; and
- (c) The effective date of the revocation.

(4) If the department temporarily or indefinitely removes a program staff's designation as trainee, staff, or supervisor, the department must send notice by certified mail and provide the treatment program with:

- (a) The specific reasons for the removal of the program staff's designation;
- (b) The chapter 388-60A WAC standards that the decision to remove the program staff's designation was based on; and
- (c) If applicable, any remedial steps or corrective actions the program staff must take in order to have their designation as a trainee, staff, or supervisor reinstated.

(5) When the department revokes or suspends a program's certification, issues a written warning, or removes a program staff's designation as trainee, staff, or supervisor, then the department will no-

tify the program director through certified mail of the program's right to request an administrative hearing.

(6) The program director may request an administrative hearing from the office of administrative hearings under chapter 388-02 WAC within thirty calendar days of the date on which the program received notice of the department's decision via certified mail, and if the program fails to submit its request for a hearing within this time-frame, the program shall have no right to administrative review of the department's decision.

[WSR 19-15-044, recodified as § 388-60B-0520, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60A-0520, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60A-0520, filed 5/29/18, effective 6/29/18.]

WAC 388-60B-0530 Program responsibilities after an action—What actions must the program take after notification that its certification has been suspended, revoked, or if no direct service staff are qualified to provide services? (1) If the department revokes, suspends a program's certification, or if no qualified direct service staff are available to provide services, the program must:

(a) Take immediate steps to notify and refer current participants to other certified domestic violence intervention treatment programs prior to the effective date of revocation or suspension;

(b) Cease accepting participants of domestic violence into its treatment program;

(c) Notify victims, current partners of the participants, and any relevant agencies about the participant referral; and

(d) Notify, in writing, the presiding judge and chief probation officer of each judicial district from which the treatment program receives court referrals.

(2) If a program also holds a license or certification from the state of Washington for other treatment modalities, the department may notify the appropriate licensing or certifying authority that the program's domestic violence intervention treatment certification has been suspended or revoked, as applicable.

[WSR 19-15-044, recodified as § 388-60A-0530, filed 7/11/19, effective 7/28/19. WSR 18-14-078, recodified as § 110-60B-0530, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 26.50.150. WSR 18-12-034, § 388-60B-0530, filed 5/29/18, effective 6/29/18.]