

WSR 24-19-101

PERMANENT RULES

DEPARTMENT OF

SOCIAL AND HEALTH SERVICES

(Developmental Disabilities Administration)

[Filed September 18, 2024, 10:13 a.m., effective October 19, 2024]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The developmental disabilities administration (DDA) amended these rules to allow DDA-contracted entities to provide intensive habilitation services for children and to standardize provider and facility requirements across provider types.

Citation of Rules Affected by this Order: New WAC 388-833-0016, 388-833-0017, 388-833-0019, 388-833-0024, 388-833-0031, 388-833-0032, 388-833-0033, 388-833-0034, 388-833-0035, 388-833-0036, 388-833-0037, 388-833-0038, 388-833-0040, 388-833-0041 and 388-833-0053; repealing WAC 388-833-0030 and 388-833-006; and amending WAC 388-833-0005, 388-833-0010, 388-833-0015, 388-833-0020, 388-833-0025, 388-833-0045, 388-833-0050, and 388-833-0055.

Statutory Authority for Adoption: RCW 71A.12.030.

Other Authority: RCW 71A.12.010 and 71A.12.120.

Adopted under notice filed as WSR 24-15-001 on July 3, 2024.

Changes Other than Editing from Proposed to Adopted Version: DDA is not adopting proposed new WAC 388-833-0018.

DDA modified proposed WAC 388-833-0019 to remove reference to chapter 388-825A WAC and clarified that only state-operated providers are required to be certified.

A final cost-benefit analysis is available by contacting Chantelle Diaz, P.O. Box 45310, Olympia, WA 98504-5310, phone 360-790-4732, fax 360-407-0955, TTY 1-800-833-6388, email Chantelle.Diaz@dshs.wa.gov.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 0, Repealed 0.

Number of Sections Adopted at the Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 0, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 15, Amended 8, Repealed 2.

Date Adopted: September 18, 2024.

Lisa N. H. Yanagida
Chief of Staff

SHS-5032.4

Chapter 388-833 WAC
INTENSIVE HABILITATION SERVICES FOR CHILDREN PROGRAM

DEFINITIONS

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0005 Definitions. (~~("Crisis" means a set of circumstances or events that:~~

~~(1) Put a participant at risk of hospitalization, institutionalization, or loss of residence;~~

~~(2) Exceeds a participant's individual ability to cope/remain stable; or~~

~~(3) Exceeds the ability of the participant's caregivers to provide necessary supports.))~~

"Client" means a person who has a developmental disability as defined in RCW 71A.10.020 and who has been determined eligible by DDA to receive services under chapter 388-823 WAC.

"CRM ((/SW/SSS))" means the DDA case resource manager((, DDA social worker, or DDA social service specialist)) assigned to ((an individual or participant in the intensive habilitation services (IHS) for children program)) a client.

~~((("Developmental disabilities administration" or)) "DDA" means the developmental disabilities administration within the department of social and health services.~~

"Habilitative goals" means the family-identified goals intended to assist the client to acquire, retain, and improve upon self-help, socialization, and adaptive skills.

"Habilitation" means support that assists people with developmental disabilities to acquire, retain, and improve upon the self-help, socialization, and adaptive skills necessary to reside successfully in home and community-based settings.

~~((("IHS review team" means DDA staff who review referrals to the IHS for children program.~~

~~"Individual" means a person who has a developmental disability as defined in RCW 71A.10.020(5) who also has been determined eligible to receive services by the administration under chapter 71A.16 RCW. Other terms used in the field include "client" and "resident."~~

~~"Participant" means the individual who is accessing the intensive habilitation services.~~

~~"Participant team" means individuals who work together to provide formal and informal supports to a participant. A typical team includes IHS staff, the CRM/SW/SSS, the participant's family/legal representative(s), and service providers working with the participant.))~~

"Individualized team" means the group of people who work together to provide formal and informal supports to a client. A typical team includes the client, the client's family and legal representative, intensive habilitation services (IHS) staff, the client's case resource manager, managed care organization care coordinators, and any other service providers working with the client and family.

"Legal representative" means a parent of a client if the client is under age 18 and parental rights have not been terminated or revoked, a court-appointed guardian if a decision is within the scope of

the guardianship order, or any other person authorized by law to act for the client.

"Parent" means a biological or adoptive parent with legal authority to make decisions on behalf of the client.

"Primary caregiver" means the person who provides the majority of the client's care and supervision and lives with the client.

"Provider" means the contracted or state-operated provider of intensive habilitation services.

~~(("Regional clinical team" means DDA staff who may respond to crisis situations by providing assessment, training, behavior support and consultation as well as behavioral health stabilization services to DDA enrolled individuals.))~~

PURPOSE

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0010 What is ((the purpose of the intensive habilitation services for children program)) **required of an IHS provider?**
~~((The purpose of the intensive habilitation services for children program is to provide short-term behavioral health supports to participants who are in crisis.))~~

(1) A provider of the intensive habilitation services (IHS) for children program provides the following:

- (a) The creation and implementation of a habilitative plan;
- (b) Opportunities for the client's family, natural supports, and community providers to participate in individualized team meetings, discuss effective environmental strategies, collaborate on techniques for implementing the client's habilitative plan; and
- (c) Medication administration and medication assistance as needed.

(2) IHS must provide the following to clients:

- (a) Three meals per day plus snacks;
- (b) Toiletries and personal care items;
- (c) Bedding and towels;
- (d) Access to laundry facilities;
- (e) Access to a telephone;
- (f) Opportunities for accessing the community; and
- (g) Transportation to necessary appointments or services.

ELIGIBILITY

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0015 Who ~~((is))~~ may be eligible ((for the)) to receive stabilization services from an intensive habilitation services ((for children program)) provider? A person ~~((is))~~ may be eligible ((for the)) to receive stabilization services from an intensive habilitation services ((for children program)) provider if:

- (1) The person is over age seven but under age 21;
- (2) The person is ~~DDA-eligible~~ ((for DDA services)) under chapter 388-823 WAC;
- ~~((2) The person is eligible for medicaid services;~~
- ~~(3) The person or their legal representative voluntarily consents to intensive habilitation services;~~
- ~~(4) The person is age eight or older but under age twenty-one;~~
- ~~(5) The person has no pending investigations of abuse or neglect with the department of children, youth, and families; and~~
- ~~(6) DDA determines the person needs the level of service provided in the intensive habilitation services for children program.))~~
- (3) The person is eligible for stabilization services under WAC 388-845-1100;
- (4) The person has received medically necessary inpatient treatment for conditions related to behavioral health or autism, if recommended by the person's treating professional, and does not have a treatment recommendation for a locked or secured facility;
- (5) The person's medication needs can be met through nurse delegation;
- (6) The provider determines under WAC 388-833-0016 that the provider can safely meet the person's needs and that the person does not pose a risk to the health or safety of themselves, IHS staff, or other clients supported by the provider;
- (7) The person does not require an intervention prohibited in the setting or that cannot be provided based on staffing levels and credentials; and
- (8) The person has an identified residential discharge setting to return to and the identified caregiver has agreed to participate in the IHS program requirements.

NEW SECTION

WAC 388-833-0016 How does the provider determine if they can safely meet a client's needs? To determine whether they can safely meet a client's needs, the intensive habilitation services provider reviews client information, such as:

- (1) The client's referral packet;
- (2) Information gathered from the client, collateral contacts, or case manager; and

- (3) Composition of clients currently supported by the provider.

PROVIDER QUALIFICATIONS

NEW SECTION

WAC 388-833-0017 Who may become an intensive habilitation services provider? The following entities may become an intensive habilitation services provider:

- (1) A staffed residential home licensed under chapter 110-145 WAC; or
(2) A DDA-certified state-operated provider.

NEW SECTION

WAC 388-833-0019 Is a site visit required and what does DDA review during a site visit? (1) To be certified, a state-operated provider must participate in site visits.

- (2) During a site visit, DDA reviews the state-operated provider's service site for the following safety requirements:
- (a) The common areas of the home are unrestricted.
 - (b) All entrances and exits are unblocked.
 - (c) The home is maintained in a safe and healthy manner.
 - (d) The home has a storage area for flammable and combustible materials.
 - (e) Every floor of the home has working smoke and carbon monoxide detectors.
 - (f) The home has a fire extinguisher that meets requirements for the residence type. There must be a fire extinguisher in the kitchen and at least one on every floor of the home.
 - (g) The home has a stocked first-aid kit.
 - (h) The home has a working and accessible telephone.
 - (i) The home has a working and accessible flashlight or alternative light source.
 - (j) Emergency contact information is available and accessible in the home (e.g., 911, poison control, nonemergency 911, adult protective services, child protective services).
 - (k) The contact information for the developmental disabilities ombuds is available and accessible in the home.
 - (l) The water temperature at the home is 120 degrees Fahrenheit or less.
 - (m) There is a safety plan for any body of water more than 24 inches deep at the home.
 - (n) The home has an evacuation plan and an emergency food and water supply.
 - (o) The home meets integrated setting requirements under WAC 388-823-1096.

(p) The home has a backup power source (e.g., generator, battery pack) if the provider supports a client who uses life sustaining medical equipment.

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0020 How long may a ((participant)) client receive ((services)) support from ((the)) a provider of intensive habilitation services ((for children program))? (1) The ((participant)) client may receive services from an IHS provider for a maximum of ((one hundred eighty)) 90 consecutive days per admission ((, from the date of admission to the program)).

(2) Length of admission is based on the client's progress toward their family-identified goals.

(3) Upon discharge from the intensive habilitation services program, the legally responsible entity - parent, legal representative, or primary caregiver - must resume care for the client.

NEW SECTION

WAC 388-833-0024 What training must a DDA-contracted provider complete? (1) To provide direct support to a client receiving services from a DDA-contracted provider, a direct support professional (DSP) must complete:

(a) Training required under chapter 110-145 WAC;

(b) Training and continuing education required under chapter 388-829 WAC; and

(c) Nurse delegation training if the DSP will be performing tasks requiring delegation under WAC 246-840-930.

(2) The provider must ensure that each direct support professional stays current on their CPR certification, food worker card, and first aid and bloodborne pathogens trainings.

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0025 ~~How does an individual access intensive habilitation services for children)~~ What training must a state-operated provider complete? ~~((The individual or family/legal representative may request intensive habilitation services for children through the CRM/SW/SSS.))~~

(1) To provide direct support to a client receiving services from a state-operated provider, a direct support professional (DSP) must complete:

(a) Training and continuing education required under chapter 388-829 WAC;

(b) Nurse delegation training if the DSP is performing tasks requiring delegation under WAC 246-840-930.

(2) The provider must ensure that each DSP stays current on their CPR certification, food worker card, and first aid and bloodborne pathogens trainings.

HEALTH AND SAFETY

NEW SECTION

WAC 388-833-0031 What infection control practices must the provider implement? (1) The provider must have written policies and procedures about the control of infections. These must include, but are not limited to, the following areas:

- (a) Isolation of sick individuals;
- (b) Germ control procedures;
- (c) Hygiene, including hand washing, toileting, and laundering;
- (d) Prevention of the transmission of communicable diseases including management and reporting;
- (e) First aid;
- (f) Care of minor illnesses;
- (g) Actions to be taken for medical emergencies; and
- (h) General health practices.

(2) The provider must promote personal hygiene to help prevent the spread of germs.

(3) The provider must provide staff with the supplies necessary for limiting the spread of infections.

(4) Staff with a reportable communicable disease or a notifiable disease condition in an infectious stage, as defined by the department of health in chapter 246-101 WAC, must not be on duty until they have a healthcare professional's approval for returning to work.

NEW SECTION

WAC 388-833-0032 How must the provider store medication? (1) The provider must store a client's medication:

- (a) In a locked container, such as a locked box;
- (b) Separate from food and toxic chemicals;
- (c) Under proper conditions for sanitation, temperature, and ventilation; and
- (d) In the original medication container with the pharmacist-prepared or manufacturer's label, which must include the:
 - (i) Name of the client for whom the medication is prescribed;
 - (ii) Name of the medication; and
 - (iii) Dosage and frequency.

(2) The provider may store a client's medication in a medication organizer if the medication organizer was prepared by a pharmacist or registered nurse.

NEW SECTION

WAC 388-833-0033 What must the provider do if a client refuses a prescribed medication? If a client refuses a prescribed medication, the provider must:

- (1) Document the refusal, including the time, date, and medication refused;
- (2) Inform the client of the benefit of the medication;
- (3) Consult a pharmacist or licensed medical provider with prescription authority to determine if the medication refusal could significantly harm the client;
- (4) If recommended, continue to offer the medication following consultation in subsection (3) of this section; and
- (5) Inform the client's parent or legal representative of the refusal and any reasons for the refusal if shared by the client.

NEW SECTION

WAC 388-833-0034 When must the provider dispose of medications?

- (1) The provider must dispose of all client medications that are discontinued, expired, or replaced by another medication in consultation with a pharmacist or other health professional.
- (2) When disposing a client's medication, the provider must list the:
 - (a) Client's name;
 - (b) Medication name;
 - (c) Amount disposed; and
 - (d) Date of disposal.
- (3) Two people must verify the disposal by signature.

NEW SECTION

WAC 388-833-0035 What must the provider do to prepare for emergencies? (1) The provider must develop an emergency response plan.

- (2) The provider must complete a fire drill with clients at least once per month and document completion of the drill.

NEW SECTION

WAC 388-833-0036 What water temperature safety measures must be met? (1) The provider must regulate the facility's water temperature no higher than 120 degrees Fahrenheit.

- (2) The provider must complete and document monthly water temperature checks.

NEW SECTION

WAC 388-833-0037 What safety requirements must be met? (1) The provider must be located in an area with public fire protection.

(2) The provider must have working smoke and carbon monoxide detectors installed. Each smoke and carbon monoxide detector must address the needs of clients who are deaf or hard of hearing.

(3) Smoke detectors must:

(a) Be in operating condition both inside and outside of all sleeping areas.

(b) Be installed on each story of the facility, in all play areas, and in the basement.

(c) Be installed and maintained according to the manufacturer's specifications.

(d) If mounted on a wall, be 12 inches from the ceiling and a corner.

(e) Be tested twice a year to ensure they are in working order. The provider must document the date and time of the test.

(4) Carbon monoxide detectors must be located in or near each client's bedroom and on every floor of the facility.

(5) The provider must have at least one approved 2A10BC-rated five pound or larger all-purpose (ABC) fire extinguisher readily available at all times. "Approved 2A10BC-rated" means a fire extinguisher with an underwriters laboratory label on the nameplate classifying the extinguisher as 2A10BC-rated or larger.

(6) The provider must maintain and service fire extinguishers according to manufacturer's specifications.

(7) An approved fire extinguisher must be located in the area of the normal path of exiting. The maximum travel distance to an extinguisher from any place on the premises must not exceed 75 feet. When the travel distance exceeds 75 feet, additional extinguisher(s) are required.

(8) The provider must have at least one fire extinguisher on each floor of a multilevel facility.

(9) Fire extinguishers must:

(a) Be mounted in a bracket or in a fire extinguisher cabinet so that the top of the extinguisher is no more than five feet above the floor; and

(b) Receive an annual maintenance certification by a licensed firm specializing in this work, based on the manufacturer's recommended schedule. Maintenance means a thorough check of the extinguisher for:

(i) Mechanical parts;

(ii) Extinguishing agent; and

(iii) Expelling means.

(10) New fire extinguishers do not need to receive an additional certification test during the first year.

(11) The department may require that additional fire extinguishers be available on the premises, in consultation with the local fire authority or Washington State Patrol's Fire Protection Bureau.

NEW SECTION

WAC 388-833-0038 Must the provider secure cleaning supplies and other potentially hazardous substances? (1) The provider must safely secure cleaning supplies, flammables and other combustible materials, toxic or poisonous substances, and aerosols.

(2) If a container is filled with a toxic substance from a bulk supply, the provider must clearly label the container.

RECORDSNEW SECTION

WAC 388-833-0040 Must the provider keep a record of a client's property? (1) The provider must maintain a property record for each client.

(2) The property record must include a descriptive list of the items the client possessed upon admission and discharge.

NEW SECTION

WAC 388-833-0041 What records must the provider keep and how long must the records be retained? (1) The provider must keep the following in the client's record:

- (a) Referral packet contents;
- (b) Service notes;
- (c) The client's habilitation plan; and
- (d) The client's behavior intervention plan, if applicable.

(2) The provider must retain a client's records for at least six years after delivering services to the client.

RIGHTS AND RESPONSIBILITIES

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0045 What are the (~~expectations of family/legal representative~~) rights and responsibilities of parents or legal representatives when their child is in the intensive habilitation services for children program? (~~Family/legal representatives retain custody of their child at all times when the child is receiving services in the intensive habilitation services (IHS) for children program. Family/legal representative responsibilities include, but are not limited to, the following:~~)

(1) Accessing intensive habilitation services (IHS) is voluntary and does not affect a parent's or legal representative's rights and responsibilities as a legal custodian for the child.

(2) Before a client receives IHS, an IHS family agreement must be signed agreeing to:

~~((1))~~ (a) ~~Maintain ((ongoing and regular))~~ at least weekly contact with their child;

~~((2) Agree to work cooperatively with their child's DDA CRM/SW/SSS, and other DSHS staff and persons caring for the child;~~

~~(3))~~ (b) Participate in ((decision making for the child)) the child's individualized team meetings and service planning;

(c) Participate in weekly meetings about implementing strategies identified in the habilitation plan;

(d) Work with IHS staff to transition the child back home or to another identified residential setting; and

(e) Arrange with IHS to maintain the child's school enrollment.

(3) An IHS family agreement must be signed by:

(a) The client's parent or the client's legal representative; or

(b) The client's legal representative and primary caregiver if the client is the subject of court-ordered out-of-home care through a dependency action under RCW 13.34.060 or a tribal child welfare action.

~~((4) The right to make all nonemergency decisions about medical care, enlistment in military service, marriage and other important legal decisions for the person under eighteen years of age; and~~

~~(5) Agree that if their child's IHS placement disrupts, their child will return to the parents physical care until a new placement is developed.)~~

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0050 ~~((Who pays for the participant's care when they are))~~ What are the financial responsibilities of parents or legal representatives when their child is in the intensive habilitation services for children program? ~~((A combination of state and federal funds cover the cost of the participant's care while in the intensive habilitation services for children program. The family/legal representative is encouraged to support the participant with typical items or activities, e.g., presents, clothing, special items, special outings which are not supported by state or federal funds.))~~

A parent or legal representative remains financially responsible for all expenses for their child that the provider is not required to provide under this chapter or the provider's contract.

NEW SECTION

WAC 388-833-0053 **May the provider decide to stop providing services to a client and to whom must notice be sent?** (1) The provider may decide to stop providing services if the provider determines and documents that the client's behavior jeopardizes:

(a) The client's health or safety; or

(b) The health or safety of staff or other clients the provider supports.

(2) The notice of the provider's decision must include:

(a) The reason for the decision; and

(b) The effective date of the decision.

- (3) At least 72 hours before the effective date of the decision, the provider must notify:
 - (a) The client;
 - (b) The client's parent or legal representative;
 - (c) The client's DDA case manager; and
 - (d) The IHS program manager.

AMENDATORY SECTION (Amending WSR 21-14-088, filed 7/7/21, effective 8/7/21)

WAC 388-833-0055 What are a client's appeal rights ((do I have))? (1) ~~((You have the right to))~~ A client, the client's parent, or the client's legal representative may appeal decisions made by DDA in accordance with WAC 388-825-120 through 388-825-165 and WAC 388-845-4000 through 388-845-4015.

(2) A client, the client's parent, or the client's legal representative does not have a right to appeal a decision for admission to the intensive habilitation services program.

(3) A client does not have a right to appeal a provider's decision to terminate support to the client.

~~((2))~~ (4) Once the ((one hundred eighty day maximum stay is reached)) client has received services for the maximum of 90 days, the intensive habilitation services (IHS) ((have been completed and terminating the service and returning the participant to another residential placement is not considered a termination, denial, or move to a different type of residential service as described in WAC 388-825-120)) are complete. The client, the client's parent, or the client's legal representative does not have a right to appeal the service end date.

~~((3) A participant may appeal eligibility for the IHS program but participation in the program is determined by WAC 388-833-0030 and is dependent on bed and funding availability. There is no appeal right to an IHS participation determination.))~~

REPEALER

The following sections of the Washington Administrative Code are repealed:

- WAC 388-833-0030 How is a decision made for participation in the intensive habilitation services for children program?
- WAC 388-833-0060 Does DDA make exceptions to the requirements in this chapter?