



# 2023 Pierce County Developmental Disability Online Legislative Forum Handout Packet



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## 1. Employment & Day Services

## Community Engagement

Community Engagement services develop creative, flexible and supportive community resources and relationships.

These services help connect individuals to resources in their local society and supports them to participate, engage, and integrate into the community.

This service is available to participants enrolled on the HCBS waivers: Basic Plus, CORE, and Individual and Family Services.



### A community engagement provider will:

- Meet with you to discuss goals stated in the Person-Centered Service Plan developed by you and your case manager, and help you develop specific goals related to engaging with the community.
- Assist you with developing strategies to connect with community resources, based on your interests and needs.
- Help you develop healthy relationships with local community members.
- Support you participating in community activities within your identified budget.

**The Department of Social and Health Services assist more than 32,000 clients through the Developmental Disabilities Administration.**

## Community Inclusion

### Overview

Community Inclusion supports individuals to thrive in their home communities through contributions and relationships with others who are not paid to be with the person. It expands natural, supportive relationships with other community members so paid supports are no longer needed.

These individualized services are provided in community settings. Paid supports help clients learn and use skills to be more independent.

We support Community Inclusion through partnerships with Washington state's 39 counties. The counties work with local agencies to provide Community Inclusion services to approximately 1,600 individuals statewide.

### Eligibility Requirements

DDA clients 62 and older who have participated in a DDA employment program for nine consecutive months or have a DDA approved exception to the nine-month rule.

### Oversight

#### External

- Centers for Medicare and Medicaid Services
- Commission for Accreditation of Rehabilitation Facility
- Rehabilitation Services Accreditation System
- Association of Community Rehabilitation Educators
- Office of the Washington State Auditor

#### Internal

- DDA monitoring and evaluation process of counties and client service
- County monitoring of subcontracted providers and client service



### Budget

These expenses cross multiple budget units and we do not currently track at this level. Clients receive individualized service hours based on assessed need.

### Rates

Hourly fee for service.

### Partners

- Individuals and their families
- Counties
- Qualified service providers
- Advocacy organizations
- Volunteer/nonprofit sites

### Authority

**Chapter 388-823 WAC**, DDA Intake and Determination of Developmental Disabilities

**Chapter 388-825 WAC**, DDA Services Rules

**Chapter 388-828 WAC**, DDA Assessment

**Chapter 388-845 WAC**, Home and Community Based Services Waivers

**Chapter 388-850 WAC**, County Plan for Developmental Disabilities



## Frequently Asked Questions

### What are Community Inclusion services?

Community Inclusion services are individualized services provided in integrated community settings with other individuals without disabilities. The activities are based on client interests and provide opportunities typically experienced by the general public of similar age in their local community, accessible by public transit or a reasonable commute from their home. The goal of the service is to support clients to participate, contribute and develop relationships with community members who are not paid staff.

### Who is eligible for Community Inclusion services?

Community Inclusion is available to clients who have participated in nine months of Employment services and choose Community Inclusion in addition to or instead of Employment. Community Inclusion is also available to clients 62 years or older without having to participate in nine months of Employment services. It is available for those clients on the Basic Plus and Core waivers; clients receiving Roads to Community Living, Pre-Admission Screening and Resident Review clients in Skilled Nursing Facilities, and Residential Habilitation Centers clients. An Exception to Rule can be requested through your case manager if you have not or do not want to participate in 9 months of employment services. [WAC 388-845-0603](#) Who is eligible to receive community inclusion services?

### Can I have Community Inclusion and Employment services at the same time?

Yes, starting Jan. 1, 2023, these services are available concurrently after the client participates in nine months of employment services.



### How many hours of support will I receive in Community Inclusion?

Your monthly Community Inclusion service hours are determined by your annual assessment completed by your case manager from the Developmental Disabilities Administration. Monthly service hours range from three to 20. [WAC 388-828-9310](#) How does DDA determine the number of community inclusion services hours you may receive each month?

### What can I expect from my Community Inclusion service?

Your Community Inclusion provider will meet with you and through a process of person-centered planning will identify your individual interests to develop a Community Inclusion plan with strategies to access opportunities consistent with your interests in your local community. The activities will be integrated and provide opportunities to contribute and develop relationships with people in your community who are not paid staff.



## Will I always have a staff person with me in the community?

You will always have appropriate supports to participate safely in community activities; however, your Community Inclusion staff may not always be present. The ideal outcome of the service is that you are supported to participate, contribute and develop relationships with other community members with similar interests who will support you in the activity so that the Community Inclusion staff can fade from that activity and look for additional opportunities for you to participate in community activities of interest.

## What if I do not know what I want to do in the community?

Your Community Inclusion provider is trained to help you identify areas of interest through a process of discovery where you are provided various opportunities in the community to see what you most enjoy or show interest in. In addition, they will seek input from those who know you best.

## What activities are available to participate in as part of Community Inclusion services?

Community activities are as varied as your interests (e.g., club memberships, volunteering, etc.) if they meet all four simple criteria:

1. Individualized based on your interests.
2. Integrated with other individuals without disabilities in the community.
3. Activities that are typically experienced by the general public of similar age in your local community, accessible by public transit or a reasonable commute from your home.
4. Ability to contribute and develop relationship with community members who are not paid staff.

## What activities are NOT available to participate in as part of Community Inclusion Services?

Community Inclusion services cannot be used to support you in some community activities. These activities include: Specialized and/or segregated activities with only clients with disabilities, activities that do not provide an opportunity to contribute or develop relationships with community members who are not paid staff, or activities that don't occur in your local community.

## Can Community Inclusion services be provided to more than one individual at a time?

Although Community Inclusion is an individualized service, it can be provided for two to three clients at the same time; IF the activity is a shared interest of all participants and meets the guidelines of integrated setting, local community, and ability to contribute and develop relationships with other individuals without disabilities in the community who are not paid staff.

## What other services are available to help me access my community?

Community Engagement is a service that assists clients to access their communities and is available to clients on the Individual and Family Services, Basic Plus and Core waivers or Pre-Admission Screening and Resident Review clients in Skilled Nursing Facilities or on Roads to Community Living. It is provided by individual providers and or agencies contracted directly with the Developmental Disabilities Administration. Respite can also be provided in the community. It may be available to clients on the Individual and Family Services, Basic Plus and Core Waivers. It is provided by individual providers and/or agencies contracted directly with DSHS' Developmental Disabilities Administration.



Washington State  
Department of Social  
& Health Services

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January 2021

## Community Engagement

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- Assist you with developing strategies to connect with community resources, based on your interests and needs.
- Help you develop healthy relationships with local community members.
- Support you participating in community activities within your identified budget.

**The Department of Social and Health Services assist more than 32,000 clients through the Developmental Disabilities Administration.**

Contact: Leila Graves, *Case Management Services Program Manager* • [Leila.graves@dshs.wa.gov](mailto:Leila.graves@dshs.wa.gov) • 360-407-1529

**Washington State Department of Social and Health Services**

## Core Waiver

### Overview

The Core Waiver is one of the Developmental Disabilities Administration's five federal Home and Community Based Services waivers. It offers residential habilitation services to 5,624 individuals who are at immediate risk of losing their community residential setting. Individuals must have an identified health and welfare need for residential services that cannot be met by the Basic Plus waiver.

Services Include:

- Assistive Technology
- Community Engagement
- Community Inclusion
- Community Transition
- Environmental Adaptations
- Extermination of Bed Bugs
- Individual/Group Supported Employment
- Individualized Technical Assistance
- Occupational, Speech and Physical Therapies (for adults, when not covered under state plan benefits)
- Positive Behavior Support and Consultation (Only available to clients 20 and younger who currently the service as of 10.1.2020)
- Residential Habilitation
- Respite
- Risk Assessment
- Skilled Nursing (over age 21)
- Specialized Equipment and Supplies
- Specialized Habilitation
- Stabilization Services
- Specialized Habilitation
- Stabilization Services
- Staff and Family Consultation
- Stabilization Services-Crisis Diversion Bed
- Staff and Family Consultation
- Transportation
- Wellness Education



### Eligibility

DDA clients who:

- Meet Social Security Disability criteria.
- Meet Institutional Level of Care criteria.
- Meet the income and resource standards for Apple Health of Washington. (Client's income and resources, not family unit's income and resources)
- Are a U.S. citizen or federally qualified legal resident.
- Accept home and community-based services as an alternative to institutional services.

Waivers are limited to the average cost of an Intermediate Care Facility for Individuals with Intellectual Disabilities for any combination of services necessary to meet the assessed client need. We cannot deny services to people on the waiver due to lack of funding. Consequently, we carefully monitor waiver expenditures.

*(continued on next page)*





## Rates

Waiver services are delivered by many different contracted service providers whose rates are dependent upon the service offered. Service rates can be found at: <https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management>.

## Partners

- Individuals receiving services
- Families of program participants
- Aging and Long-Term Support Administration
- Department of Children, Youth and Families
- The Arc of Washington
- DD Ombuds
- Disability Rights Washington
- Counties and service providers
- Washington State Developmental Disabilities Council
- Health Care Authority

## Oversight

### External

- AL TSA Residential Care Services Division
- Department of Children, Youth, and Families
- Centers for Medicare and Medicaid Services
- National Core Indicators Project
- Office of the Washington State Auditor
- Washington State Department of Health

### Internal

- DDA Office of Quality Programs and Services
- DDA Office of Compliance, Monitoring and Training
- DDA Statewide Investigation Unit Information



## Authority

Title XIX federal funding through §1915(c), Home and Community Based Services waiver and state funding

Chapter 388-845 WAC, DDA Home and Community Based Services Waivers

## Enhanced Respite Services

ERS enable Developmental Disabilities Administration-enrolled children access to short-term respite in a state-contracted and licensed staffed-residential setting. Services assist with behavioral stabilization and provide families with a data summary report upon discharge which recommends effective supports and strategies to address the child's challenging behaviors. ERS provide a break in caregiving for the families/caregivers.

A child may access ERS up to thirty days per calendar



## Eligibility Requirements

- The child is determined eligible for DDA services per Chapter 388-823 WAC
- The child is at high risk of institutionalization and/or out-of-home placement
- The parents/caregivers have accessed available services the client is eligible for, including those available through private insurance, medicare, the medicaid state plan, and DDA The child must be at least eight years of age, or between ages 18 and 20 and enrolled in school

## Quality Assurance Oversight

- Center for Medicare and Medicaid Services
- Department of Children, Youth, and Families
- Washington State Department of Health
- DDA Office of Compliance, Monitoring, and Training
- DDA Office of Quality Assurance and Communications

## Stakeholders

- Individuals receiving services
- Families of program participants
- Advocacy organizations
- Contracted Enhanced Respite Services providers
- Department of Children, Youth, and Families
- DSHS' Behavioral Health Administration
- Washington State Health Care Authority
- Pediatric hospitals

## Contact

Kacie Smarjesse  
Children's Residential Services Program  
Manager

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360 407-1588

Nichole Jensen  
Children's Residential and Crisis Services  
Unit Manager

[nichole.jensen@dshs.wa.gov](mailto:nichole.jensen@dshs.wa.gov)  
360-407-1521

In 2020, Enhanced Respite Services were provided in multiple locations statewide to more than 21 clients. This number is lower than previous years due to the COVID-19 pandemic.

## Overnight Planned Respite Services

OPRS is a community-based service for Developmental Disabilities Administration-enrolled adults living with their primary caregivers. The service offers a break in caregiving and provides individualized activities and support to the client. Services are provided in a community setting (home or apartment) and are staffed by contracted, certified providers. Each respite setting serves one person at a time, using a person-centered plan developed with the primary caregiver to create a schedule with activities that meet the person's needs. Clients are able to access up to 14 days of support in a calendar year.



### To be eligible for OPRS, a client must:

- Be eligible for DDA services per WAC [388-823](#);
- Be 18 years or older;
- Be living at home with a primary caregiver and not currently receiving residential habilitation services under the core waiver; and
- Identify a backup caregiver to respond in an emergency if the primary caregiver is unavailable.

### Quality Assurance Oversight

- DDA Office of Compliance, Monitoring, and Training
- DDA Office of Quality Assurance and Communications
- DSHS's Adult Protective Services
- Washington State Department of Health

## Stakeholders

- Individuals receiving services
- Families of program participants
- Advocacy organizations
- Certified overnight planned respite service providers

## Contact

Brian Woods  
Respite Coordinator  
[Brian.Woods@dshs.wa.gov](mailto:Brian.Woods@dshs.wa.gov)  
360-688-0626

Nichole Jensen  
Children's Residential Services Program  
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360-407-1521

[Overnight Planned Respite](#) locations exist statewide with a current total of 11 beds. Locations include: Spokane, Bellingham, Shoreline, Lynnwood, Tacoma, Olympia and Vancouver. Approximately 266 overnight planned respite stays occurred in 2020 .





PIERCE COUNTY 2023

# Employer List

These local businesses demonstrate commitment to a diverse workforce and celebrate the unique contributions of all workers by hiring employees with intellectual and developmental disabilities (I/DD).

Employment Providers work with businesses to help identify opportunities that create efficiencies and fill unmet needs, and then connect those businesses with qualified applicants.

Employees with I/DD work with Employment Providers to identify their skills, interests, and job goals, engage in on the job training, and receive support to advance their careers.

- 1st Chance Towing
- 7-Eleven\*
- A&A Transportation
- AAFES\*
- Ace Hardware
- Albertson's\*
- All Saints
- Allen Realty
- Alphabet Preschool\*
- AM/PM
- Anthony's Restaurants
- Anytime Fitness\*
- Applebee's\*
- ARC of Washington\*
- Art of Crunch\*
- At Home
- Auburn Volkswagen
- Auntie Anne's Pretzels
- BB Music
- Best Buy\*
- BJ's Bingo and Gaming
- BJ's Restaurant & Brewhouse\*
- Black Bear Diner
- Blitz and Co
- Boathouse 19
- Bob's Burgers
- Bonney Lake Food Bank
- Bonney Lake Senior Center
- Bowers Plumbing and Remodel
- Bridgeport Place
- Brookdale Lumber
- Bruce Titus
- Bruno's Family Restaurant & Bar
- Burger King\*
- Burlington Coat Factory\*
- Buttons and Bows
- Cadence Academy Tacoma
- Cafaro\*
- Canteen Vending Svc
- CAPA\*
- Carr's Restaurant
- Celebrity Cake Studio
- Centennial Plaza LLC\*
- Chick-Fil-A\*
- Children's Museum of Tacoma
- Children's Therapy Center
- Chipotle
- Chuck E Cheese\*
- City of Orting
- City of Tacoma\*
- Classy Chassis
- Club Demonstration Services – Costco\*
- Connelly Law Office
- Cost Lest
- Costco\*
- Couple of Socks\*
- Courtyard by Marriott
- Crane's Creations
- Crescent Valley Farm
- Crockett & Associates
- Crown Bar
- Crumbl Cookie
- Culpeppers
- Dairy Queen\*
- Databar
- Dawg Tired Play
- Debbie DoLittle Petting Zoo
- Koelsch Communities - Deer Ridge Memory Care
- DeLong Elementary
- Denny's\*
- Designer Shoe Warehouse (DSW)
- Destination Harley-Davidson
- Developmental Disabilities Administration\*
- Dixie's Home Cookin'
- Dollar Tree\*
- Dream Clean
- Dungarvin
- Eatonville Medical Building
- Edward Jones
- El Shaddai
- Elements
- Elephant Car Wash
- Emerald Queen Casino\*
- Emerald Queen Casino Hotel\*
- Expeditors International
- Farrelli's Pizza\*
- Fat Zach's Pizza
- FedEx\*
- Fence Specialists
- Ferguson Architecture\*

\*Indicates businesses with more than one supported employee.

- Fi Architecture
- Figaro's Pizza
- Fircrest Golf
- Five Guys Burgers and Fries\*
- Food Market at Key Center
- Franke Tobey Jones
- Fred Meyer\*
- Frontier Door and Cabinet\*
- Garden Sphere
- GCE Global Connections to Employment\*
- Goodwill\*
- Greenwater General Store
- Grocery Outlet Bargain Market\*
- Gulf Coast Enterprises\*
- Haggen
- Hall Forest Products
- Helpful Hands Inc\*
- High Cedars Golf Club
- Holiday Inn Express\*
- Home Depot\*
- Hops n Drops\*
- Hornby America Inc
- Hotel Thea
- IHOP
- It's Greek to Me
- Jack in the Box\*
- Jax Salon & Spa
- Jimmy John's\*
- Kentucky Fried Chicken
- Keystone Employment Services
- Kikos Toy Chest
- Kindercare
- Kleen Blast
- Kohl's
- Kubacki's Corner
- Lake Spanaway Golf Course
- Lamppost Coffee and Roaster
- L'Arche Tahoma Hope Farm & Gardens\*
- Life Center\*
- Lifenforce Services\*
- Light Dental Studios\*
- Little Caesars\*
- Lowe's
- Mama Stortini's
- Marriott Fairfield Inn & Suites
- Marshall's\*
- Mary Bridge Good Samaritan Children's Therapy Unit\*
- Mary Mary's
- Master Millwork
- Masterman Vending\*
- McDonald's\*
- McLendon's\*
- Men's Warehouse\*
- Mercedes-Benz Tacoma
- Meridian at Stone Creek
- Metro Parks\*
- Metropolitan Market\*
- Mill Haus Cider Company
- Millers Jewelry & Repair
- MOD Pizza\*
- Morningside Inc.
- Muckleshoot Casino
- MultiCare\*
- Oak House Restaurant & Bar
- O Bee Credit Union
- Odyssey 1
- Old Navy
- Old Spaghetti Factory\*
- Olympic Dining Services
- Olympic Pharmacy
- Opus Arabians / Opus Alliance
- P&J Machining
- Panera Bread\*
- Papa John's\*
- Papa Murphy's\*
- PAPE Material Handling
- Paradise Lanes Bowling Alley
- Paula T Olson Law Office
- People First of Washington\*
- Petco\*
- Pierce County Parks and Recreation\*
- Pizza Hut\*
- Planet Fitness\*
- Playback Sports
- Polished Image Detailing
- Popeye's Chicken\*
- Positive Pooches
- Premier Golf Centers (Spanaway Golf)\*
- Proctor Family Chiropractic
- Puyallup Playcare\*
- Rainier School
- Ram International\*
- Red Lobster
- Regal Cinema\*
- REI
- Round1 Bowling & Amusement\*
- Round Table Pizza
- Safeway\*
- Sandi's Signs
- Sentinel Pest Control
- ServiceMaster Clean\*
- Skookum Contract Services
- Small Tribes of Western Washington
- Sodexo\*
- Sola
- Sorensen's Automotive
- Sound Sleep Products
- South Hill Mall\*
- Southern Kitchen
- St. Patrick's Parish
- St. Vincent DePaul\*
- Starbucks\*
- State Farm Insurance
- Step by Step
- Street Psalms
- Summit Veterinary Referral Center\*
- Taco Bell\*
- Taco Time\*
- Tacoma Boys
- Tacoma Rainiers
- Tacoma School District - Franklin Elementary
- Tacoma Trophy\*
- Target
- Terry's Totes
- The Crawford Gallery Workshop
- The Haven
- The Ram\*
- The Rock Wood Fired Pizza
- Thr3e Coffee
- Thrift City\*
- Thriftway\*
- Tides Tavern
- Tiny's Tire Center
- Tire Disposal & Recycling
- Titus Will Chevrolet
- T.J. Maxx\*
- Tower Lanes Bowling Alley\*
- Toyota of Puyallup
- Trader Joe's\*
- Trapper's Sushi\*
- Two Busy to Cook
- UFC Fit
- ULTA Beauty\*
- Vadis
- Valvoline
- Waffle Stop
- Walgreen's\*
- Wal-Mart\*
- Washington State Fair\*
- WayPoint Church
- Weatherly Inn
- Wendy's\*
- Whistle Workwear
- Winco
- WOW Baking Company\*
- YMCA\*

## Supported Employment Programs

### Overview

Supported Employment Programs help clients find and keep jobs. Jobs provide opportunities to gain competence and status, improve health and safety, interact with others and experience active daily life in the community. We aim to get people competitive jobs with good wages.

Supported Employment includes individual and small group employment options that promote career development and are tailored to individual needs, interests and abilities.

We support employment programs through partnerships with Washington State's 39 counties. Those counties work with local agencies to provide employment supports to approximately 8,000 individuals.

### Eligibility Requirements

- DDA clients who are age 21 and over.

### Budget

These expenses cross multiple budget units and we do not currently track at this level. Clients receive individualized service hours based on assessed need and work history.



### Partners

- Individuals receiving services and their families
- Counties
- Qualified service providers
- Advocacy organizations
- DSHS' Division of Vocational Rehabilitation
- School districts
- State Office of the Superintendent of Public Instruction
- Employers

### Rates

Hourly fee for service.

Contact: Branda Matson, *Employment & Day Program Services Unit Manager* • [Branda.Matson@dshs.wa.gov](mailto:Branda.Matson@dshs.wa.gov)  
Saif Hakim, *Office of Residential, Employment, and Day Programs* • [Saif.Hakim@dshs.wa.gov](mailto:Saif.Hakim@dshs.wa.gov)



Washington State  
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## Quality Assurance Oversight

### External

- Centers for Medicare & Medicaid Services
- Commission for Accreditation of Rehabilitation Facility
- Rehabilitation Services Accreditation System
- Association of Community Rehabilitation Educators
- Office of the Washington State Auditor

### Internal

- DDA monitoring and evaluation process of counties and client service
- County monitoring of subcontracted providers and client service



### Authority

[Chapter 388-823 WAC](#), DDA Intake and Determination of Developmental Disabilities

[Chapter 388-825 WAC](#), DDA Services Rules

[Chapter 388-828 WAC](#), DDA Assessment

[Chapter 388-845 WAC](#), Home and Community Based Services Waivers

[Chapter 388-850 WAC](#), County Plan for Developmental Disabilities



# 2023 Pierce County Developmental Disability Online Legislative Forum Handout Packet

## 2. Early Support for Infants and Toddlers (ESIT)



# Medically Intensive Children's Program

## Overview

The Medically Intensive Children's Program provides private duty nursing services to children ages 17 and younger. These children have complex medical needs which cannot be managed within the scope of intermittent nursing. Private duty nursing services may be provided in the family home, foster home, or in a DDA contracted medically fragile children's group home.

## Budget

DDA does not budget to this level of detail. Health Care Authority manages the budget for MICP.

## Rates

Consult the [Health Care Authority Billing Guide](#).

## Stakeholders

- Clients and families of clients
- Department of Children, Youth and Families
- DSHS Home and Community Services Division
- Washington State Health Care Authority
- Contracted providers:
  - Home Health Agencies
  - Medically Fragile Group Home
- Hospitals

## Authority

[WAC 182-551-3000](#) Private duty nursing for clients age seventeen and younger—General.



## Oversight

### External

- Centers for Medicare and Medicaid Services
- Office of the Washington State Auditor
- Washington State Department of Health

### Internal

- Health Care Authority

## Eligibility Requirements

Individuals:

- Age 17 or younger.
- With complex medical needs (e.g., ventilator dependent, tracheostomy dependent, or treatment of complex respiratory needs).
- Enrolled in Washington Apple Health under the categorically needy scope of care.
- Requiring at least four hours of continuous skilled nursing care per day.



# 2023 Pierce County Developmental Disability Online Legislative Forum Handout Packet

## 3. Housing



## Adult Family Homes

### Overview

Adult Family Homes are privately owned or rented by a licensed provider in a community-based neighborhood. AFH's are licensed to care for 2-8 residents who must be age 18 or older.

AFHs provide a room (shared or single), meals, laundry, supervision, medication administration and varying levels of assistance based on individual support needs. They may also provide specialized care for people with intellectual and developmental disabilities, mental health issues, dementia, and nursing care needs.

The AFH provider will complete a negotiated care plan for each resident based on their CARE assessment to be agreed upon by the resident and or guardian.

DDA expects all AFH providers and their caregivers to ensure that each resident experiences all the following:

- Health and Safety.
- Assistance to manage daily activities and pursue their personal goals.
- Power and choice.
- Status and contribution by self and others.
- Inclusion in the physical and social life of their communities.
- Relationships with relatives and friends.

If a resident has an assessed unmet need they may qualify for Community Integration and/or Medical Escort and Mileage.

Meaningful Day is available for AFH residents who meet eligibility requirements, please refer to the Meaningful Day Fact Sheet.

Approximately 1800 participants enrolled with the Developmental Disabilities Administration receive supports in an Adult Family Home.



### Eligibility Requirements

Individuals who are:

- A client of DDA.
- 18 years of age or older.
- Diagnosed with a developmental or intellectual disability that requires support and supervision.
- Assessed with a need for Community First Choice (Personal Care) and residential services through DSHS.
- Financially eligible for Medicaid and able to pay for participation or can privately pay for services.
- Authorized by DSHS to receive AFH services.

Adult Family Homes must have the following on their AFH license to provide supports to clients of the DDA:

- DSHS Contract
- Accepts Medicaid
- Developmental Disability Specialty Training

*(continued on next page)*



## Oversight

### External

- AL TSA Residential Care Services Division
- Centers for Medicare and Medicaid Services
- Washington State Department of Health
- Office of the Washington State Auditor

### Internal

- DDA Case Resource Manager
- DDA Performance and Quality Improvement Specialists
- DDA State Plan Residential Services Specialists

## Partners

- Individuals receiving services
- Families of program participants
- Aging and Long-Term Support Administration
- The Arc of Washington
- DD Ombuds
- Disability Rights Washington
- Washington State Developmental Disabilities Council
- Adult Family Home Council
- Adult family home providers

### Adult Family Home Locator link:

<https://fortress.wa.gov/dshs/adsaapps/Lookup/AFHAdvLookup.aspx>

Select:

1. Region area
2. Developmental Disabilities
3. Adult Family Home



## Authority

Title 71A RCW, Developmental Disabilities

[WAC 388-106-0115](#), How does CARE use criteria to place me in a classification group for residential facilities?

[WAC 388-106-0270](#), What services are available under community first choice?

Chapter 388-76 WAC, Adult Family Home Minimum Licensing Requirements

## Rates

Adult Family Home services are delivered by Individual service rates can be found on this link and click on Developmental Disabilities Rates: <https://www.dshs.wa.gov/altsa/management-services-division/office-rates-management>

## Budget

State Plan services are forecasted.

## Adult Family Home Meaningful Day

### Overview

Adult Family Home Meaningful Day supports individuals who experience frequent and intense behaviors. It is an add-on service for eligible individuals living in a contracted Meaningful Day adult family home.

The provider and individual develop activity plans based on the individual's strengths, skills and preferences. These person-centered activities refocus and are geared to reduce behaviors and refocus individuals to participate in activities that will improve their overall quality of life.

We strongly encourage AFH providers to provide activities that promote individual skills and interests, as well as group activities that include music, dance, and or physical activity.

### Meaningful Day includes:

**Meaningful Activity Plan** – 9 questions getting to know each person. Activities are generated from this form and is an addendum to their negotiated care plan.

**Monthly Activity Calendar** – the provider and each eligible individual will create an activity calendar every month.

**Monthly Activity and Behavior Report** – is a summary of activities the client participated in and the impact on behaviors.



### Eligibility Requirements

Meaningful Day is available to individuals who:

- Are clients of DDA.
- Live in a contracted Meaningful Day adult family home.
- Have a CARE-assessed behavior point score of 12 or higher or have a diagnosis of dementia, such as Alzheimer's Disease, with an assessed need for activities offered under Meaningful Day.

### AFH Requirements

The AFH must:

- Be free of any health and safety enforcement actions for at least one year.
- Have a DSHS contract.
- Accept Medicaid.
- Complete Developmental Disability Specialty Training.
- Complete Meaningful Day Training Session 1 and complete the contracting process.
- Complete Meaningful Day training Session 2 within one year of contracting.
- Complete at least 3 hours of continuing education each year as listed in the MD contract.

*(continued on next page)*



## Budget

State plan services are forecasted.

## Rates

State plan services are forecasted.

Adult Family Home Locator link:

<https://fortress.wa.gov/dshs/adsaapps/Lookup/AFHAdvLookup.aspx>

Select:

1. Region area
2. Developmental Disabilities
3. Adult Family Home
4. Meaningful Day

## Partners

- Individuals receiving services
- Families of program participants
- Aging and Long-Term Support Administration
- The Arc of Washington
- DD Ombuds
- Disability Rights Washington
- Washington State Developmental Disabilities Council
- Adult Family Home Council
- Adult family home providers



## Authority

Title 71A RCW, Developmental Disabilities

[WAC 388-106-0115](#), How does CARE use criteria to place me in a classification group for residential facilities?

[WAC 388-106-0270](#), What services are available under community first choice?

## Oversight

### External

- AL TSA Residential Care Services Division
- Centers for Medicare and Medicaid Services
- Office of the Washington State Auditor
- Washington State Department of Health

### Internal

- DDA Case Resource Manager
- DDA Performance and Quality Improvement Specialists
- DDA State Plan Residential Services Specialists



## Alternative Living

### Overview

Alternative Living supports independent living through one-on-one instruction. Individuals set goals and get skills training based on their Person-Centered Service Plan. They can get up to 40 hours each month of life-skill instruction in:

- Establishing a residence.
- Home living.
- Community living.
- Health and safety.
- Social activities.
- Protection and advocacy.
- Other topics based on assessed need.

Alternative Living providers are contracted statewide with DSHS' Developmental Disabilities Administration.



### Budget

A total of 80 DDA clients receive up to 40 hours a month of Alternative Living, as of Oct. 1, 2022.

### Rates

The rate paid to providers is \$27.46/hour, as of July 1, 2022.

### Partners

- Individuals receiving services
- Families of individuals with intellectual and developmental disabilities
- Self-advocates
- Advocacy organizations
- Counties
- Service providers

*(continued on next page)*

### Eligibility Requirements

DDA clients who are:

- 18 years of age or older.
- Currently on or approved for Home and Community Based Services' Core waiver or have a written agreement with the provider to purchase AL residential services using the individual's personal financial resources.
- Assessed to need Alternative Living to meet their health and welfare needs in their Person-Centered Service Plan.
- Living outside of their parents' home or moving to their own home within six months.

DSHS' Developmental Disabilities Administration

Contact: **Olga Lutsyk**, Community Residential Program Manager • [Olga.Lutsyk@dshs.wa.gov](mailto:Olga.Lutsyk@dshs.wa.gov) • 360-407-1518

**Valerie Kindschy**, Waiver Residential Unit Manager • [Valerie.Kindschy@dshs.wa.gov](mailto:Valerie.Kindschy@dshs.wa.gov) • 253-341-2044

Washington State Department of Social and Health Services



## Oversight

DSHS uses a formal review and evaluation process to determine whether a service provider meets certification requirements described in 388-829A WAC, DDA policies and the DDA contract. DDA conducts certification evaluation of the contracted providers at least annually.

DSHS' Adult Protective Services investigates complaints regarding abuse, neglect, exploitation, financial exploitation or mistreatment of clients.

## External

- DSHS' Adult Protective Services
- Centers for Medicare and Medicaid Services
- Office of the Washington State Auditor
- Washington State Department of Health

## Internal

- DDA Office of Compliance, Monitoring and Training
- DDA Office of Quality Programs and Stakeholder Involvement



## Authority

[Chapter 71A RCW, Developmental Disabilities](#)

[Chapter 388-825 WAC, DD Service Rules](#)

[Chapter 388-828 WAC, DDA Assessment](#)

[Chapter 388-829A WAC, Alternative Living](#)

# Assisted Living Facilities, Adult Residential Care and Enhanced Residential Care

## Overview

Assisted Living Facility, Adult Residential Care, and Enhanced Residential Care are assisted living facilities licensed through AL TSA, and each have a specified service contract with DSHS/DDA. To serve DDA clients they must complete the Developmental Disability Specialty Training and have it listed on their contract.

### Assisted Living Facility

DSHS's ALF contract ensures that each resident has a lockable private apartment-like unit with a bathroom and kitchenette. ALF services include personal care, meals and snacks, laundry, housekeeping, medication administration and some intermittent nursing, as well activities.

### Adult Residential Care

DSHS's ARC contract provides a supervised living arrangement in a home-like environment for 7 or more individuals. Rooms are typically shared, and clients are more independent.

ARC services include meals and snacks, personal care, laundry, housekeeping, and activities.

### Enhanced Adult Residential Care

DSHS's EARC contract provides a supervised living arrangement with staff available 24/7 in a home-like setting for 7 or more individuals.

EARC services include overnight awake staff, personal care, meals, snacks, laundry, activities, intermittent nursing, medication administration housekeeping services, and supportive services that promote independence and self-sufficiency.

Behavioral support professional is also available when needed.



## Budget

State Plan services are forecasted.

## Rates

ALF, ARC and EARC services are delivered by Individual service rates can be found on this link then click on *Developmental Disabilities Rates*: [www.dshs.wa.gov/altsa/management-servicesdivision/office-rates-management](http://www.dshs.wa.gov/altsa/management-servicesdivision/office-rates-management)

ALF, ARC or EARC Locator link:

<https://fortress.wa.gov/dshs/adsaapps/Lookup/BHAdvLookup.aspx>

Select:

- Region
- Assisted Living Facility, Adult Residential Care or Enhanced Adult Residential Care

(continued on next page)





## Eligibility Requirements

Individuals who:

- Are a client of DDA.
- 18 years of age or older.
- Financially eligible for Medicaid.
- Assessed by DSHS and authorized to receive Community First Choice services.
- Requested ALF, ARC or EARC supports to meet their needs.
- Reside in an ALF, ARC or EARC that have completed the DDST contract requirements.

## Partners

- Individuals receiving services
- Families of program participants
- Aging and Long-Term Support Administration
- The Arc of Washington
- DD Ombuds
- Disability Rights Washington
- Counties and service providers
- Washington State Developmental Disabilities Council
- ALF, ARC, EARC providers

## Oversight

### External

- AL TSA Residential Care Services Division
- Centers for Medicare and Medicaid Services
- Office of the Washington State Auditor
- Washington State Department of Health

### Internal

- DDA Case Resource Manager
- DDA Performance and Quality Improvement Specialists
- DDA State Plan Residential Services Specialists



## Authority

**Title 71A RCW**, Developmental Disabilities

**WAC 388-106-0115** How does CARE use criteria to place me in a classification group for residential facilities?

**Chapter 388-110-140/150 WAC**, Assisted Living Facility

**Chapter 388-110-240/242 WAC**, DDA Adult Residential Care

**Chapter 388-110-220/222 WAC**, DDA Enhanced Adult Residential Care

## Companion Homes

### Overview

Companion homes are based in typical family settings. They follow an adult foster care model where a long-lasting relationship between the individual and the provider is built. Companion home providers work with individuals on goals identified in the individual's Person-Centered Service Plan that help individuals gain and improve life skills necessary to live successfully in the community.

Companion homes provide 24-hour support and supervision for one adult in a typical home setting, with short term relief (also known as respite) available to the provider. Individuals served in a companion homes create a room and board agreement with the provider. The provider also receives a daily rate based on the individual's needs identified in their Person-Centered Service Plan. Companion Home providers are contracted statewide with DSHS' Developmental Disabilities Administration.



### Eligibility Requirements

DDA clients who are:

- 18 years of age or older.
- Currently on or approved for Home and Community Based Services' Core waiver or have a written agreement with the provider to purchase CH residential services using the individual's personal financial resources.
- Assessed to need Companion Home residential habilitation services to meet their health and welfare needs in their Person-Centered Service Plan.
- Able to pay room and board with their personal financial resources.

### Budget

A total of 72 DDA clients were assessed to receive Companion Home Residential Habilitation Services as of Oct. 1, 2022.

### Rates

Companion Home rates are based on the client's assessment and the sum of support assessment scale scores. The reimbursement for each sum can be found at [DSHS' Office of Rates Management](#).

### Partners

- Individuals receiving services
- Families of individuals with intellectual and developmental disabilities
- Self-advocates
- Advocacy organizations
- Counties
- Service providers

*(continued on next page)*



Washington State  
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## Oversight

DSHS uses a formal review and evaluation process to determine whether a service provider meets certification requirements described in [388-829C WAC](#), [DDA policies](#) and the DDA contract. DDA conducts certification evaluation of the contracted providers at least annually.

DSHS' Adult Protective Services investigates complaints regarding abuse, neglect, exploitation, financial exploitation or mistreatment of clients.

### External

- DSHS' Adult Protective Services
- Centers for Medicare and Medicaid Services
- Office of the Washington State Auditor
- Washington State Department of Health

### Internal

- DDA Office of Compliance, Monitoring and Training
- DDA Office of Quality Programs and Stakeholder Involvement



## Authority

[Chapter 71A RCW, Developmental Disabilities](#)

[Chapter 388-825 WAC, DD Service Rules](#)

[Chapter 388-828 WAC, DDA Assessment](#)

[Chapter 388-829C WAC, Companion Home](#)



Interactive Website: <https://fortress.wa.gov/dshs/adsaapps/lookup/ResCareInfo/>

DDA Community Residential Services for adults:

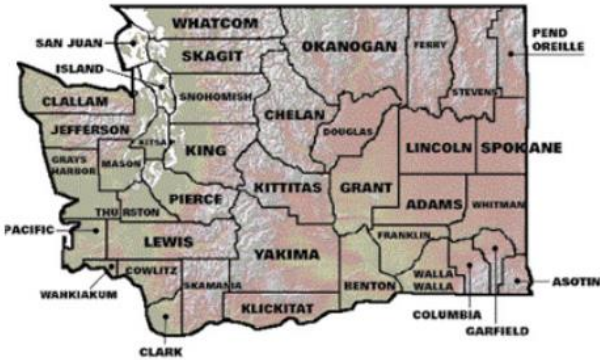
<https://www.dshs.wa.gov/dda/community-residential-services-adults>

Home > DDA > Supported Living Program Locator

### Supported Living Program Locator - WA State

Search for a Supported Living Program by geographic location. For a description of DDA Community Residential Services for adults, click [here](#).

Find facility



Provider Name:  (Optional) County:

Region:

[Show Region Key](#)

Provider	Administrator	Regional Manager
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**Aacres WA LLC (Pierce County)**

[Reports](#)

[More Information](#)

8815 South Tacoma Way Ste 200  
Lakewood, WA 98499  
County: **Pierce**  
[Directions](#)

<p><b>Ambitions of WA Inc (Pierce County)</b></p> <p>6020 Main St. SW Suite F Lakewood, WA 98499 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>Community Alternatives for People with Autism</b></p> <p>12001 Pacific Ave. S #201 Tacoma, WA 98444 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>Dungarvin Washington, LLC (Pierce)</b></p> <p>8815 S Tacoma Way Ste 200 Tacoma, WA 98499 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>East Pierce SOLA</b></p> <p>1305 Tacoma Ave S Tacoma, WA 98405 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>Educational Programs in Home Living</b></p> <p>1720 S. 72nd St., Suite 204 Tacoma, WA 98408 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>Group Action for Peninsula People</b></p> <p>8725 State Road 302 Gig Harbor, WA 98329 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>Hope Human Services LLC</b></p> <p>10009 59th Ave SW</p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>

Lakewood, WA 98499  
County: **Pierce**  
[Directions](#)

**L'Arche Tahoma Hope Community**

12303 36TH AVE E  
TACOMA, WA 98446  
County: **Pierce**  
[Directions](#)

[More  
Information](#)

**Life Force Services Inc. Pierce County**

1206 South 11th St Suite 7  
Tacoma, WA 98405  
County: **Pierce**  
[Directions](#)

[Reports](#)

[More  
Information](#)

**My Gumah Health Supported Living (Pierce)**

408 Lafayette St S  
Tacoma, WA 98444  
County: **Pierce**  
[Directions](#)

[Reports](#)

[More  
Information](#)

**Northwest Services for Independent Living**

2607 Bridgeport Way W. STE 2A  
TACOMA, WA 98466  
County: **Pierce**  
[Directions](#)

[Reports](#)

[More  
Information](#)

**OPTIONS UNLIMITED INC**

120 15th St. SE, Suite 104  
Puyallup, WA 98372  
County: **Pierce**  
[Directions](#)

[More  
Information](#)

**P.A.M. Group Home**

619 7TH AVE SE  
PUYALLUP, WA 98372  
County: **Pierce**  
[Directions](#)

[Reports](#)

[More  
Information](#)

<p><b>People Aiding the Multihandicapped Group Home</b></p> <p>619 7th Ave SE  Puyallup, WA 98372  County: <b>Pierce</b>  <a href="#">Directions</a></p>	<p><a href="#">More Information</a></p>
<p><b>Puget Sound Assisted Living Inc</b></p> <p>633 N. Mildred St., Suite J  Tacoma, WA 98409  County: <b>Pierce</b>  <a href="#">Directions</a></p>	<p><a href="#">Reports</a>      <a href="#">More Information</a></p>
<p><b>Res-Care Washington Inc (Pierce County)</b></p> <p>18300 Cascade Ave S Suite 251  Seattle, WA 98188  County: <b>Pierce</b>  <a href="#">Directions</a></p>	<p><a href="#">Reports</a>      <a href="#">More Information</a></p>
<p><b>Reverent Supported Living (Pierce)</b></p> <p>17309 18th Ave E  Spanaway, WA 98387  County: <b>Pierce</b>  <a href="#">Directions</a></p>	<p><a href="#">More Information</a></p>
<p><b>Service Alternatives for Washington, Inc. Pierce County</b></p> <p>206 N. Main  Coupeville, WA 98239  County: <b>Pierce</b>  <a href="#">Directions</a></p>	<p><a href="#">Reports</a>      <a href="#">More Information</a></p>
<p><b>SOLA Tacoma</b></p> <p>1919 70th Ave. W., Suite 102  Tacoma, WA 98466  County: <b>Pierce</b>  <a href="#">Directions</a></p>	<p><a href="#">Reports</a>      <a href="#">More Information</a></p>



<p><b>Stand Together</b></p> <p>18106 81st St. East Bonney Lake, WA 98391 County: <b>Pierce</b> <a href="#">Directions</a></p>		<p><a href="#">More Information</a></p>
<p><b>Steadfast Supportive Living</b></p> <p>1124 W Riverside Spokane, WA 99201 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>Tahoma Associates</b></p> <p>1545 Tacoma Ave. S Tacoma, WA 98402 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>The Communitas Group</b></p> <p>920 Park Ave Bremerton, WA 98337 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>VALLEY SUPPORTED LIVING INC</b></p> <p>10210 123rd St Ct E Suite B Puyallup, WA 98374 County: <b>Pierce</b> <a href="#">Directions</a></p>	<p><a href="#">Reports</a></p>	<p><a href="#">More Information</a></p>
<p><b>Vibrant Health Homecare - Pierce County</b></p> <p>5401 S Tacoma Way Tacoma, WA 98409 County: <b>Pierce</b> <a href="#">Directions</a></p>		<p><a href="#">More Information</a></p>

## Out-of-Home Services

### Overview

Department of Social and Health Services' Developmental Disabilities Administration Out-of-Home Services provide residential habilitation services for children outside of a child's family home. The service is voluntary and agreed to by the child's parent/ legal guardian and service provider. Services are provided in licensed or certified community-based settings. Parents retain custody, and work in partnership with the provider through a child and family engagement plan that supports the child and their individual support needs. OHS engage local communities, licensed providers, schools, the Washington State Department of Children, Youth, and Families, and other stakeholders to coordinate services that wrap around the individual.

### Budget

Approximately 100 children and youth were receiving residential habilitation services under the DDA's Home and Community Based Services Core waiver in 2020. These expenses cross multiple budget units and are not currently tracked at this level.



### Eligibility Requirements

Individuals who:

- Are eligible for DSHS' Developmental Disabilities Administration services.
- Will receive residential habilitation services before the age of 18.
- Are eligible for the Home and Community Based Services Core waiver or Roads to Community Living.

The child's parent or legal guardian:

- Has accessed available services through private insurance, Medicare, the Medicaid state plan.

DDA must:

- Request residential habilitation services that are based solely on the child's developmental disability. Have available funding.
- Determine that available and appropriate in-home supports do not meet the child's needs.
- Determine that residential habilitation services are in the child's best interest.

*(continued on next page)*



Washington State  
Department of Social  
& Health Services

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## Partners

- Individuals receiving services
- Families of program participants
- Advocacy organizations
- Children's residential service providers
- Washington State Department of Children, Youth and Families
- DSHS Behavioral Health Administration
- Washington State Health Care Authority
- Pediatric hospitals

## Oversight

- Washington State Department of Children, Youth and Families - Licensing Division
- Center for Medicare and Medicaid Services
- DDA Office of Compliance, Monitoring, and Training
- DDA Office of Quality Assurance and Communications

## Authority

[Chapter 388-823 WAC](#), DDA intake and eligibility determination

[Chapter 388-845 WAC](#), DDA Home and Community Based Services Waivers

[WAC 182-513-1235](#), Roads to Community Living

## Supported Living

### Overview

Supported Living offers person-centered instruction and supports to help adults live in their own homes with 1 to 3 other residents. Individuals pay their own rent, food, and other personal expenses. Services can vary from a few hours a month to up to 24 hours per day and support personal power, choice, and full access to the community.

Community residential providers contract with the Developmental Disabilities Administration to provide Supported Living services. These services are based on an individual's need and the household's shared supports. State-Operated Living Alternatives programs also offer Supported Living.

### Partners

- Individuals receiving services
- Families of individuals with intellectual and developmental disabilities
- Self-advocates
- Advocacy organizations
- Counties
- Service providers
- Service Employees International Union (SEIU)
- Aging and Long-Term Care Services Administration Residential Care Services Division



### Eligibility

Individuals who are:

- Clients of DDA.
- 18 years of age or older.

Currently on or approved for the Home and Community Based Services Core waiver and assessed to need SL services to meet their health and welfare needs in their person-centered service plan.

### Rates

Supported Living rates are based on the client's assessment and a tiered rate is determined. The reimbursement for each tier can be found at [DDA Rates](#).

### Budget

The annual cost for Supported Living in 2020 was approximately \$625 million.

*(continued on next page)*



Washington State  
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## Oversight

The Department of Social and Health Services uses a formal review and evaluation process to determine whether a service provider has complied with certification requirements described in Chapter 388-101 WAC, Chapter 388-101D WAC, and DDA policies, and the DDA contract. The ALISA RCS Division evaluates certification of the contracted agencies at least every two years.

The RCS Division investigates complaints regarding abuse, neglect, exploitation, financial exploitation, or mistreatment of clients..

## External

- ALISA Residential Care Services Division
- Centers for Medicare and Medicaid Services
- DSHS Children's Administration
- Office of the Washington State Auditor
- Washington State Department of Health

## Internal

- DDA Office of Compliance and Monitoring
- DDA Office of Quality Programs and Stakeholder Involvement



## Authority

[Chapter 71A RCW](#), Developmental Disabilities

[Chapter 388-825 WAC](#), DD Services Rules

[Chapter 388-828 WAC](#), DDA Assessment

[Chapter 388-101 WAC](#), Certified Residential Services and Supports

[Chapter 388-101D WAC](#), Requirements for Providers of Residential Services and Supports



# WAGE | EQUITY | STUDY

## Wage Equity for Non-Profit Human Services Workers: A study of work and pay in Seattle and King County

### Executive Summary

Non-profit human services workers play a critical role in building and maintaining the human, social, and institutional strengths of communities. Yet, as documented elsewhere and confirmed by this study, pay for human services work lags behind compensation for other kinds of work. This report presents study findings that compare pay in non-profit human services organizations to pay in other sectors and industries and offers a series of recommendations to help provide a path to more equitable compensation for these workers.

Comparable worth, the principle of equal pay for equivalent work, guided this examination of the extent of wage inequity facing non-profit human services workers in Seattle and King County. This approach acknowledges that various forces have shaped employment patterns and suppressed wages in the non-profit human services sector over time, including race and gender discrimination, wage penalties for caring labor, and decisions made by federal and local policymakers. These factors continue to affect current wages for the local human services workforce, which is overwhelmingly female (roughly 80%) and in which workers of color are overrepresented.

There are different ways to define and assess wage equity and the extent of the wage gap experienced by non-profit human services workers. This study used two separate empirical approaches. First, the market analysis compared pay for human services workers and workers in other industries using state and federal quantitative employment data. Key findings from that analysis include:

- Holding constant worker characteristics such as education level or age, human services workers are paid less than workers in other care industries (education and healthcare) and at least 30% less than workers in non-care industries. For human services workers in the non-profit sector, median annual pay is 37% lower than in non-care industries.
- Workers who leave the human services industry for a job in a different industry see a net pay increase of 7% a year later (relative to workers who stay in human services) after accounting for observable worker and employer characteristics.

Second, a systematic job evaluation analysis allowed us to compare a subset of specific human services jobs to jobs in other industries using in-depth questionnaires and interviews (N=22) and analyzing results using a detailed, multi-factor, points-based classification method.

- The job evaluation results show that the work done by human services workers is undervalued relative to its required levels of skill and difficulty as measured by the job evaluation tool. The job evaluation comparisons demonstrate that the gaps revealed in the market analysis between human services workers and workers in other industries do not reflect lower pay because human services work is easier, less skilled, or less demanding than other jobs. Rather, the pay is less *despite* the high level of skill, responsibility, and difficulty of human services jobs.

These analyses inform our broad conclusion:

**Achieving wage equity for workers at non-profit human services organizations requires substantially increasing wage rates.**

Based on strong and consistent evidence that workers at non-profit human services organizations are underpaid, we recommend that these organizations and their funders work together to increase wages for human services employees. Our specific recommendations include four short-term and three longer-term steps.

**By 2025:**

**RECOMMENDATION 1. Raise real wage rates by a minimum of 7% for non-profit human services workers in the near term.**

Non-profit human services organizations and their governmental and non-governmental funders should increase human services workers' compensation by at least 7% (net of inflation) beginning in the next one to two years, while concurrently exploring how to design and implement a comprehensive overhaul of pay scales for the entire sector over the longer-term. This amount is based on the most conservative estimate in the market analysis, the multivariate analysis of the sub-set of workers who changed jobs, and was the net wage increase observed for human services workers leaving the human services industry. We believe this amount represents a starting point for the minimum increase needed immediately to reduce the number of workers leaving human services posts for significantly higher paying jobs in other industries.

**RECOMMENDATION 2. Make adjustments for inflation separate from equity adjustments and build in future inflation adjustments.**

Calculate wage increases to address pay inequity in addition to annual inflation adjustments. Wage adjustments to match inflation and wage adjustments for pay inequity are different issues and should be addressed separately.

**RECOMMENDATION 3. Maintain or improve non-wage benefits and job characteristics throughout the wage equity increase process.**

Decreasing the generosity of fringe benefits or increasing job demands to increase salaries will erode the value of any increase in pay and make it meaningless.

**RECOMMENDATION 4. Consider wage increases as a necessary part of ongoing racial and gender equity work in the City of Seattle and King County.**

Public agencies and non-profit organizations need to include wage equity – in addition to equal pay – as an action step within their anti-racism, gender equity, and diversity-equity-inclusion (DEI) plans. While organizations legally must make sure that they are paying women, persons of color, and other protected groups equivalently for the same jobs, equal pay measures alone are insufficient to achieving racial and gender equity. Race and gender discrimination shape the wage differentials between non-profit human services and other jobs in several interrelated ways.

## By 2030:

### **RECOMMENDATION 5. Substantially increase wages for non-profit human services workers to align with those of workers doing comparable work in other sectors and industries.**

While establishing a specific pay raise amount is necessarily a political task, the analysis in this report yields what we believe is a useful range of estimates of the magnitude of the current underpayment. The 30% - 37% wage gap found in our analysis imply that wage increases of 43% or more would be needed to align wages for non-profit human services workers with workers with similar job responsibilities and training in non-care work industries. Not increasing wages substantially and systematically equates to ignoring the most basic and severe inequities and further perpetuating the structural racial and gender inequities affecting this sector.

### **RECOMMENDATION 6. Create a salary grade system and establish minimum pay standards based on job characteristics.**

Human services organizations should develop a broad salary grade system linking minimum salary requirements with job characteristics, including a job's knowledge and skills required, initiative and independence, effort, responsibilities, and environmental demands. The range of types of work and different sizes of organizations in the non-profit human services sector means that this grading system will need to have considerable flexibility.

### **RECOMMENDATION 7. Use public contracts to further wage equity.**

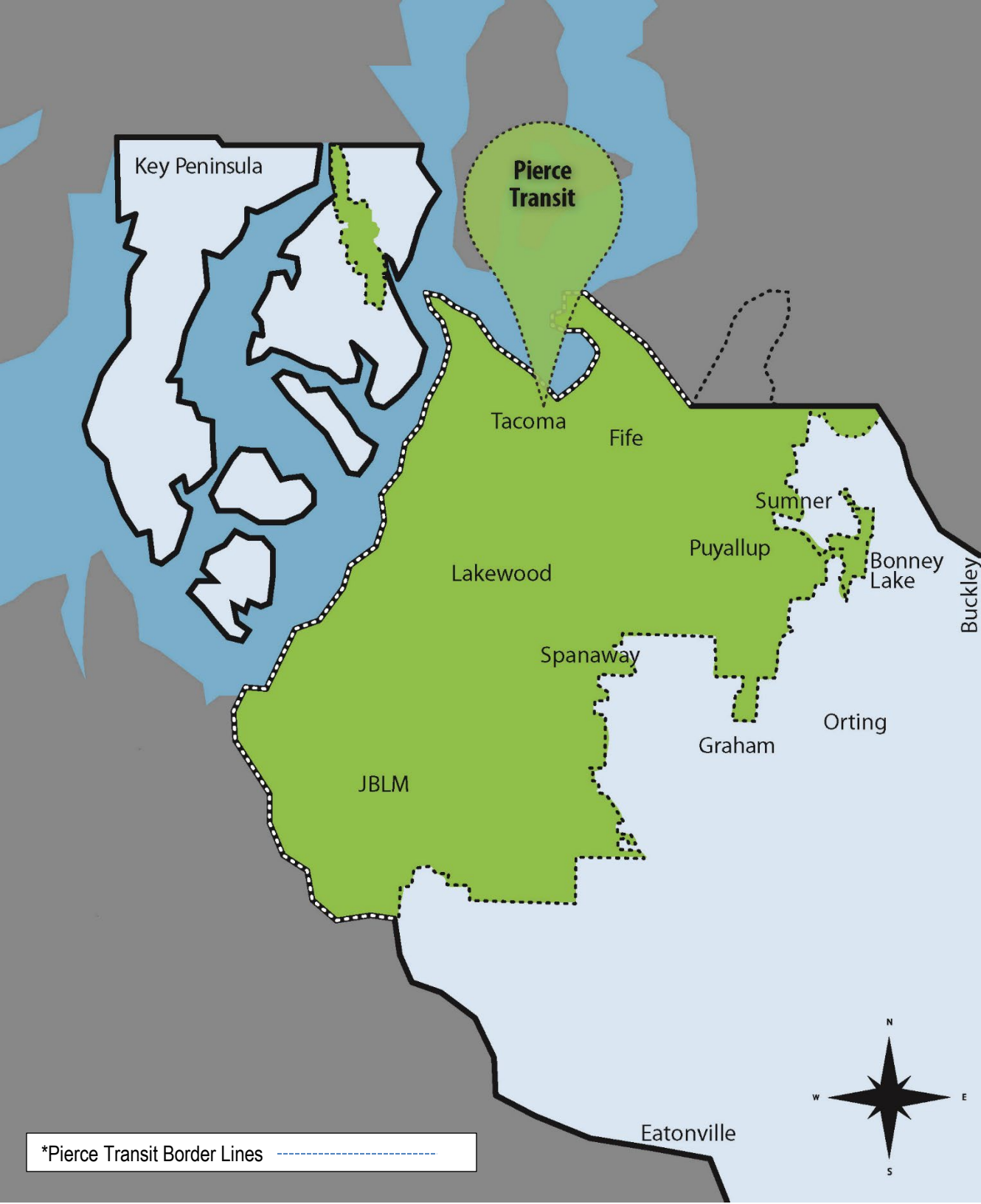
City and county contracts for human services work should make sure that public contracts do not reinforce wage inequities in the economy as a whole. To avoid decreasing prevailing wages in more powerful industries, this means that government should adequately fund human services contracts so that employee wage levels do not fall below similar local jobs in the public sector.

This summary is based on the work of the Wage Equity Study team convened by the University of Washington. The full report is available at <https://socialwork.uw.edu/wageequitystudy>.



# 2023 Pierce County Developmental Disability Online Legislative Forum Handout Packet

## 4. Transportation



\*Pierce Transit Border Lines -----



**Introduction:**

Pierce County, Washington, is home to a diverse population, including individuals with Intellectual and Developmental Disabilities (I/DD) who the majority rely on public transportation for essential needs. Transportation connects residents to employment, education, health care, recreation, and other activities of daily life and critical needs for survival. However, a significant gap in transportation services exists, leaving many of these individuals without accessible means of mobility. There is a pressing need to surpass the Americans with Disabilities Act (ADA)-specified federal requirement of a 0.75-mile distance from a fixed bus route for Paratransit services and provide transportation options for Developmental Disabilities Administration (DDA) clients who reside in communities without public transportation. By expanding Paratransit services and addressing transportation gaps, we can ensure that individuals with I/DD are able to avoid isolation and access vital services and activities.

**Key Challenges:**

- **Limited Accessibility:** Paratransit services are currently **available** only to **individuals** living within a **0.75-mile** distance from a fixed **bus route**. This leaves a considerable portion of the I/DD population with no viable transportation options.
- **Communities Without Public Transportation:** Despite efforts, many communities in Pierce County still **lack any** form of **public transportation**, rendering residents with I/DD entirely isolated or dependent on locally managed, often stretched, stop-gap solutions.
- **Impact on Quality of Life:** Inaccessibility to transportation severely impacts the quality of life for individuals with I/DD. They struggle to access essential services, healthcare, education, employment, and social activities.
- **Localized Solutions:** To address the transportation gap, communities have had to rely on localized, and non-standardized, creating disparities in accessibility across the county.

**Impact on DDA Clients:**

- **Isolation:** Limited access to transportation often results in social isolation and exclusion from critical resources and community.
- **Healthcare Access:** Inadequate transportation may impact ability to access preventative and specialist care and may contribute to missed medical appointments.

For reference Pierce Transit serves riders within the dotted line and green area on the map (.75-mile beyond the dotted line for Shuttle eligible riders).







# 2023 Pierce County Developmental Disability Online Legislative Forum Handout Packet

## 5. Other Legislative Priorities



Association of County  
Human Services

## Developmental Disabilities Program Committee

### 2024 Legislative Priorities

- 1. Ensure access to Employment and Community Inclusion services by increasing Employment and Community Inclusion provider rates as recommended in the [October 1, 2022, State Developmental Disabilities Administration’s Employment and Day Rate Study](#).**

Employment and Community Inclusion supports provide a critical foundation of stability in the lives of adults with intellectual and developmental disabilities. The current statewide staffing shortage has resulted in reduced or suspended services for many people. We thank the 2023 Legislature for increasing provider rates; however, the funding is not sufficient to fully implement the recommended rates from the legislatively mandated 2022 Employment and Day Rate Study. Sustainable provider rates must be implemented to recruit and retain qualified staff and deliver quality services.

- 2. Improve continuity of care for infants and toddlers by allowing their Early Support for Infants and Toddlers (ESIT) agencies to receive Special Education funding for the first month of services provided.**

ESIT agencies are mandated to provide services to all eligible children, and the growth in children receiving services continues to increase each year. Under RCW 43.216.580, a child is required to have *“received services within a month prior to the monthly count day.”* This means providers are not able to bill the Department of Children, Youth, & Families for Special Education funding for the first month a child receives services.

The legislature should amend RCW 43.216.580 in order to address funding inequities for ESIT, increase capacity for providers to deliver timely services to families, and address unintended consequences of the current RCW language. Suggested amendment:

*“(c) For the purposes of this subsection (2), a child is receiving early intervention services if the child has received services in the same month as the monthly count day, which is the last business day of the month.”*

Juliana Roe, Policy Director

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Association of County  
Human Services

- 3. Address the housing crisis faced by individuals with intellectual and developmental disabilities (I/DD) by implementing the recommendations in the [State Developmental Disabilities Administration's October 1, 2022, Housing Fund Priority Study report](#) and establishing permanent revenue sources for affordable housing.**

According to [ECONorthwest's Housing Needs for Individuals with Intellectual and Developmental Disabilities in Washington State report](#) submitted to the Legislature in December 2022, approximately 37,000 adults with I/DD are facing housing insecurity. Affordable housing, with support services, is needed immediately for people with I/DD living in our communities and those who need community living options to leave institutions or hospital settings. Accessibility is key for individuals with I/DD, and a wide range of housing options are needed. Part of accessible housing is the support provided by the community residential services workforce. Addressing these essential needs is critical to successful community living for people with I/DD.

The Housing Trust Fund is the primary source of financial equity for developing and preserving affordable housing across Washington State. Implementing the Housing Fund Priority Study report's recommendations and establishing permanent revenue sources for state and local housing options will increase the supply of accessible and affordable housing for individuals with I/DD and their families.

Juliana Roe, Policy Director

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# Allies in Advocacy 2024 Priorities

## State Priorities

### 1. Working on improving Community Services and Community

**Residential opportunities:** Allies will advocate for structure and policy changes, so there is less need for congregate settings like Residential Habilitation Centers. We will be working with our State DD Network Partners and other community organizations on this priority. We strongly believe that those with I/DD live successfully in the community when they receive adequate care services and get placed in appropriate safe community residential housing environments. We demand our State fully fund adequate services for people by increasing the number of waiver slots, by making sure services are person centered, by increasing the right appropriate housing options, and by making sure we have an adequate number of high-quality providers.

### 2. Allies provides technical assistance to self-advocate organizations:

We are assisting Self Advocates in Leadership and People First of Washington in their efforts to pass legislation. We believe their continued efforts helps all Washington State Communities support people with I/DD to lead independent lives. We work with these organizations on various committees to strengthen their public policy objectives.

**3. Support the Nothing About Us Without Us Bill:** Allies is supporting the Nothing About Us Without Us Bill. If passed, the bill would require an adequate number of people with lived experience, including those with I/DD, to sit on Statutory Entities (Boards, Task Forces, Workgroups, and commissions).

**4. Educate About and Support Supportive Decision-Making Services:** We believe people with intellectual and developmental disabilities should be presumed competent and never have all their rights taken from them. Guardianship is used too often to strip all the rights from an individual. There is another way. When people need assistance in a particular area, they should be able to get help through supportive decision-making services. We believe all state workers and organizations need to understand how these services work and let those who they serve know about them.

**5. End of Life Rights:** Allies want to make sure when an individual is at the end of their life or passes away their rights should be honored with their end-of-life documents that they put into place. In addition, if additional documents need to be created to protect their rights or their loved one's rights after the person passes they need to be created. Not all documents die with a person.



**6. Accountability is key:** Allies will fight to create more accountability for state and local administration/organizations/businesses that serve people with disabilities. We believe when people with disabilities are being served and helped those that assist them should always follow up on their promises and be accountable if they don't follow through. In addition, service providers must accommodate and make their services, programs, and meetings accessible for each individual so they can be successful.

**7. Increase Leadership and Job opportunities:** Allies will help create more leadership and job opportunities for people with intellectual and developmental disabilities. We strongly believe everyone deserves the opportunity to get the job of their choosing and have leadership opportunities that help them to grow to become the person they want to be.

## **Federal Priorities**

- 1. Self-Advocate Network Partner:** In 2018, Allies started working officially with the three federal developmental disability network partners in our state: the Washington State Developmental Disabilities Council, the state Protection and Advocacy System, and the state University Center for Excellence in Developmental Disabilities. Our state self-advocates and our partners believe we (people with intellectual and developmental disabilities) should have an equal place at the advocacy table helping improve the civil rights of people with I/DD. Therefore, allies and our state partners are advocating for a change to the federal Developmental Disabilities Assistance and Bill of Rights Act (DD Act), which would add an official self-advocacy state partner.
- 2. Support Federal Advocacy Efforts:** Allies in Advocacy works with all National I/DD organizations to make sure Washington state self-advocates are informed about federal legislation that improves the lives of people with I/DD and are also supported to advocate on them.

Washington State Allies in Advocacy (Allies) is an activist organization whose mission is to improve the lives of all people with intellectual and developmental disabilities (I/DD). All of our board of directors and staff have I/DD. Each of us on the Allies board and staff fights to protect the civil rights of those with I/DD.





**COMMUNITY RESIDENTIAL  
SERVICES ASSOCIATION**

# Supported Living

*Serving people with developmental disabilities in their home communities*

## 2024 Legislative Priority

**Support the DDA Decision Package to increase community residential provider rates by 8% (\$42.6m GF-S)**

### Financial pressures on providers increased drastically over the last several years

- Current nursing rates allow for a starting wage 25% below the average RN salary in our state
- Transportation rates are now over 56% below the IRS mileage rate
- Health care insurance costs up 40.3% over last 5 years
- Washington's overtime exempt salary threshold for 2024 is 42% above funded provider rates
- 22.6% inflation over last 4 years

### Longstanding funding shortfalls and the complexity of the work have impacted services

- 57% DSP turnover in 2022
- Annual turnover near 50% for eight straight years
- \$19.51 average starting DSP wage in 2022
- 14% open positions in 2022



At the Legislature's request, Milliman conducted a Supported Living rate study and reported the following rate insufficiencies:

- ★ Only 68% of Administrative Expenses were covered by funded Administrative Rates
- ★ Only 93% of Direct Care Expenses were covered by funded Direct Care Rates
- ★ Overall, funded rates only covered 90% of current expenses, resulting in 57% turnover!
- ★ Recommended rate structure for range of supports to serve clients with high behavioral support needs

**Washington DSP Turnover is  
in the highest 25% of states!**

- National average is 43.6%

**Washington ranks in the bottom  
10% of states for average DSP wages  
as a percentage of minimum wage!**



What is Supported Living?

Supported Living services individuals with developmental disabilities by providing residential and community services that maximize each person's quality of life.

Each client lives in their own home and receives personalized behavioral, social, and mental health supports.

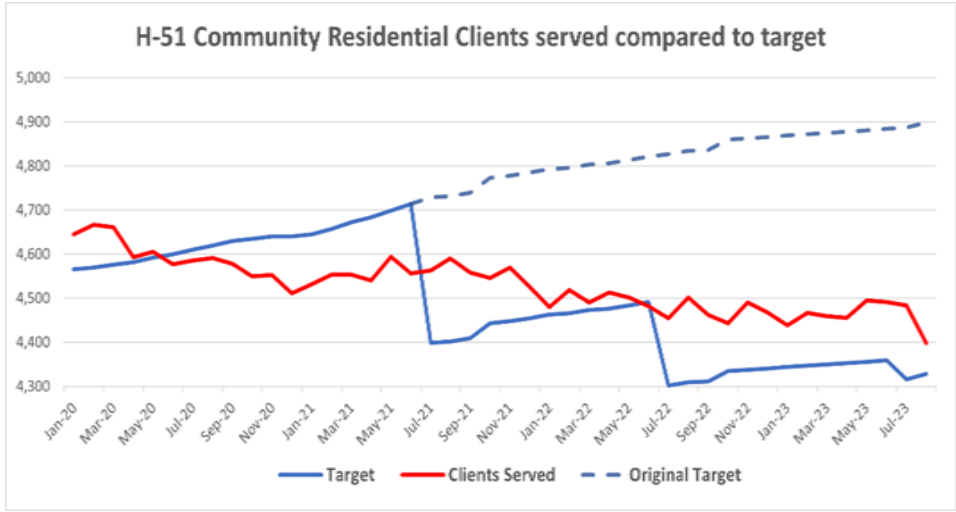
**15 years ago, DSPs were paid almost 11% above a self-sufficient wage and are now paid 21.5% below a self-sufficient wage.**

Date	DSP Wage	Self-Sufficient Wage	Difference %
2024	\$19.51	\$23.70	(21.5%)
2020	\$13.89	\$17.42	(25.4%)
2017	\$11.34	\$14.06	(24%)
2014	\$10.26	\$11.06	(7.8%)
2011	\$9.90	\$10.09	(10.1%)
2009	\$9.98	\$8.91	10.7%

**Now Hiring!**

Chick-fil-A: \$22/hr to start  
 Dick's Drive-In: \$20/hr to start  
 Fred Meyer: \$20.06/hr to start

As a result of the long-standing funding shortfalls, workforce issues and the high turnover, fewer clients are being served, while some of our most vulnerable citizens wait for much-needed services.



**For more information, please contact:**  
 CRSA: Legislative Chairs— Scott Livengood [livengood@alphasls.org](mailto:livengood@alphasls.org) and Randy Hauck [rhauck@community-living.org](mailto:rhauck@community-living.org)  
 Lobbyist— Melissa Johnson [melissa@bogardjohnson.com](mailto:melissa@bogardjohnson.com)



## Washington State Developmental Disabilities Council

### Legislative Agenda 2024

#### **The DD Council will consider the following when deciding to support or oppose budget and policy proposals:**

- ✓ Is the proposal consistent with the values of the Council's federal law, and Council policies and principles?
- ✓ Does the proposal address the goals of disability policy for individuals with developmental disabilities; namely Self-Determination, Equality of Opportunity, Full Participation, Independent Living and Economic Self Sufficiency?
- ✓ Does the proposal invest in home and community services that protect independence, stability and employment?
- ✓ Is the proposal sustainable with respect to both short and long-term revenue growth options so that people who require publicly-funded services are appropriately supported in the community?
- ✓ Does the proposal assist people with developmental disabilities and their families to access needed services?
- ✓ Does the proposal explore efficiencies in the DD system and reinvest savings to serve people with developmental disabilities, especially those who are unserved?
- ✓ Does the proposal include a plan to measure program and service effectiveness and impact, and provide avenues for accountability of those programs and services in providing desired outcomes?

#### **Washington State DD Council Supports Proposals that:**

- Provide enhanced staffing and funding for home and community based culturally and linguistically relevant services. These services would support individuals with intellectual/developmental disabilities and their families over the life span.
- Remove barriers to improve and increase access to local and community supports so that people can choose the types of services that best enable them



to live meaningful and productive lives. Special attention should be given to removing barriers that disproportionately impact communities of color, those who are experiencing the biggest gaps in access, and increasing culturally and linguistically relevant services.

- Uphold the human and civil rights of people with intellectual/developmental disabilities to live lives that are integrated and inclusive, where their identities, language, and culture are respected. Their lives should be free from abuse, neglect, exploitation and isolation.
- Improve outcomes for our entire diverse community including those discriminated against due to ethnicity, religion, sexual orientation, gender, disability status, socioeconomic level, and age.
- Accountability of the proposal includes measurable outcomes that impact our community in the intended way. That includes a plan to measure program and service effectiveness and impact, and provides avenues for accountability of those programs and services in providing desired outcomes.

Learn more about the Washington State Developmental Disabilities Council at our [Public Policy & Advocacy webpage](#).

**This legislative agenda was voted on October 20, 2023, Yakima, WA**

## **Eliminate 15% Special Education Enrollment Cap**

Special education funding is capped at 15% of students enrolled per school district. Although the Washington Legislature raised the enrollment cap in 2023, more than 100 districts still exceed the 15% enrollment cap. Every student in need must have fully funded educational support. **We are asking the Legislature to:**

- ✓ Eliminate the 15% special education enrollment cap
- ✓ Require any increases in special education funding go directly to students
- ✓ Improve accountability and transparency metrics for special education program outcomes

## **Abolish Isolation and Restrict Restraint Against Children with Disabilities**

Restraining and/or isolating students in crisis is a harmful and unnecessary practice. Restraint and isolation of students disproportionately impacts BIPOC, at-risk and students with disabilities. Restraint and isolation are intended to be used in emergency situations only but they're often a form of punishment or retribution. **We are asking the Legislature to:**

- ✓ Support legislation to end isolation and restrict the restraint of students
- ✓ Require improved reporting and data collection to prevent biased targeting of students
- ✓ Require professional development for teachers and school employees managing students in crisis

## **Fund the Construction of the Multicultural Village**

ODMF is partnering with Mercy Housing, Sound Transit, The City of Kent, Local and state officials to build an inclusive, affordable, and accessible housing development in Kent, WA. The Multicultural village will house 200 individuals and families with 40 units reserved for people with disabilities. **We are asking the Legislature to:**

- ✓ Provide \$22 million dollars in capital funds, necessary for non-residential construction costs, to complete this \$134 million-dollar project.

## **End Homelessness and Housing Insecurity**

Affordable housing developments are urgently needed across Washington state. Funding via new housing levies, real estate excise taxes and re-evaluating current tax funds distributions is urgently needed to better support housing development. **We are asking the Legislature to:**

- ✓ Support the Real Estate Excise Tax (REET) bill (HB1628).
- ✓ Support new housing levies to fund housing development
- ✓ Simplify access to Housing Trust Fund to expediate housing development

## **Support Compensation for Family Caregivers from the Developmental Disabilities Administration (DDA).**

Parents of children with disabilities are often unpaid caregivers, foregoing paid employment. Families from diverse backgrounds often do not have access to caregivers who are culturally competent or capable of communicating in their preferred language. Currently, only parents of adults with disabilities and extended family members can be paid caregivers. **We are asking the Legislature to:**

- ✓ Allow parents of minor children to receive caregivers' compensation from the DDA
- ✓ Fund education and outreach efforts to diverse communities to increase the caregiving workforce





## Shut Them Down!

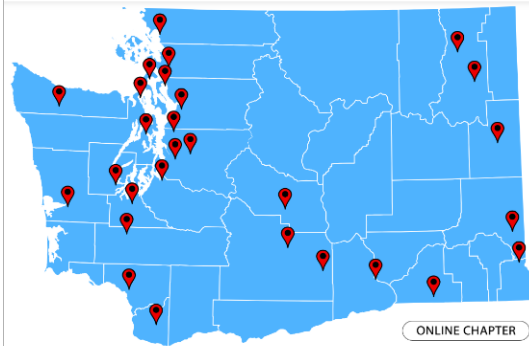
### BELIEF STATEMENT:

We believe that no person should be segregated from our communities. We believe that appropriate funding to support enhancing community services must be provided.

That is why we want institutions closed. We object to anyone controlling anyone else's life. We will pledge our support and help to those people who move out to find friends, supports, and resources in their new homes.

**Community Living!**

**Accessible Affordable  
Housing!**



### About Us

People First of Washington is the oldest disability led self-advocacy organization in Washington State with over 30 active chapters and 1,000 members.



**People First of Washington**  
[www.peoplefirstofwashington.org](http://www.peoplefirstofwashington.org)  
P.O. Box 11953  
Olympia, WA 98508

(253) 999-7222



The purpose and mission of People First of Washington is to assist all people to realize and appreciate that we are PEOPLE FIRST and our disabilities are secondary. We are equal citizens in our communities.

**2024 Legislative  
Agenda  
Priorities**



## **Nothing About Us Without Us!**

### **BELIEF STATEMENT:**

We believe it is our human right to be included equally in our community without limitations.

Inclusion means that everyone is valued, respected, and included in their communities in ways that are meaningful to them.

Inclusion is more than access to buildings and bathrooms and buses.

Real inclusion means that people with disabilities have equal access to information and support to understand and use it in their own lives. We each

have an important role to play to make inclusion a priority and a reality in our community.



## **Transportation!**

### **BELIEF STATEMENT:**

We believe that all people have the right to get where they need or want to go.

We deserve equal opportunities to utilize public transportation for work, medical needs, education, recreation, family and community activities.

Transportation helps to make and keep us independent.



## **Reform State Services!**

### **BELIEF STATEMENT:**

We believe that all people have the right to make the decisions that affect and direct their lives.

To support us leading the process, we need equal access to information, resources, facts and support. The significant people in our lives, such as family, guardians, case managers, co-workers, friends, bosses, and personal support staff should assist us in a self-directed process to form these decisions.

## **Accountability to Us!**



**Please Join Us!**

**Self-Advocates In  
Leadership (SAIL) meets on  
the second Tuesday of each  
month at the Sea-Tac  
Airport Conference Center.**

**We are dedicated to the  
rights and power of people  
with**

**intellectual and  
developmental disabilities  
through changing public  
policy in the legislature.**

**For more information please**

**contact Jessica Renner  
Sail@arcwa.org 360 357  
5596**

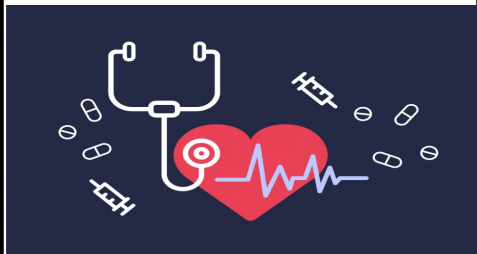


**2024  
Washington  
State  
Legislative  
Agenda**



### **Closing RHCs**

SAIL will work with other stakeholders to close the state’s institutions and advocate for the freedom of our people.



### **Healthcare and Provider Wages**

The quality of personal supports relates directly to wages and training. SAIL will work with other stakeholders to have a clear voice to the legislature to fight for a better quality of life for direct service professionals



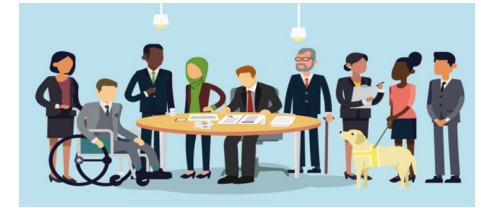
### **‘Nothing About Us Without Us’ Bill**

SAIL supports the public policy passage of House Bill 1541 to provide meaningful and empowered inclusion of people with IDD with diverse backgrounds in the community.



### **Housing and Residential**

SAIL is committed to advocating on public policies for housing options, That supports and serves people with IDD based on the values of diversity, equity inclusion and welfare



### **Budget Ask:**

#### **Emergency Provision**

SAIL requests that money is set aside out of the budget to be used as an emergency fund for support professionals to be paid from when not paid otherwise



#### **Transportation**

Access to reliable, safe and accessible transportation is necessary for everyone to be equally included. SAIL is committed to working with policymakers to increase transportation resources





# 2024 Public Policy Agenda

For People with Intellectual and Developmental Disabilities

**The Arc's vision is for people with intellectual and developmental disabilities (IDD) to be valued members of their communities with the opportunity to realize their full potential and a future that is secure.**

The Arc of Washington State has been advocating for individuals with intellectual and developmental disabilities (IDD) and their families since 1936. We work to ensure that the state knows the critical needs of both children and adults with IDD and that the necessary funding for those quality services and supports is consistently appropriated by the legislature.

The Arc of Washington State centers the voices of individuals with IDD and their families ensuring they have the information they need to have an active voice as legislative policies and budgets are crafted and passed each year.

**This is a Supplemental budget year for both Capital and Operating budgets.**

The Arc of Washington State has compiled input from members, stakeholders, and like-mission organizations and coalitions to identify legislative priorities for the 2024-2025 Supplemental Budget. The Arc works closely with the Developmental Disabilities Administration (DDA), the Governor's Office, and multiple agencies to provide input to agency Decision Packages and advocates for gaps in community-based services and civil rights. The Arc works throughout the legislative session to track bills and provide education and information on the impact of legislation. There are also critical services used by people with IDD within other agency budgets. Throughout the session, you can find our "smiley face" Budget Side-by-Side chart on our website at <https://arcwa.org/billtracker/>. This will help with tracking bills and budget items throughout the legislative session. Join our Advocacy Days every Wednesday during legislative session.

For additional information: (888) 754-8798, ext. 6 or email [Diana@arcwa.org](mailto:Diana@arcwa.org)

This Annual Policy Agenda is Supported by:

- The Arc of Washington State
- The Arc of Cowlitz County
- The Arc of Grays Harbor
- The Arc of King County
- The Arc of Snohomish County
- The Arc of Southwest WA
- The Arc of Spokane
- The Arc of Tri-Cities
- The Arc of Whatcom County

**Disability Rights  
Are Human Rights**

September 2023



# 2024 Public Policy Agenda

People with intellectual and developmental disabilities (IDD) need statewide public policies that allow them to live inclusively in their local communities and to be active, participating members of society.

## HCBS Waiver Services

- Support people with IDD in crisis
- Prioritize services for senior families
- Expand waiver services to include “supervision” for people in home and other residential settings with cognitive/behavioral support needs
- Create a provider category for behavior specialty paid at a higher rate
- Ensure having a waiver means receiving services

## Community Residential Services

- Pay Supported Living providers at a rate equitable with state providers
- Fund community residential options for teens and adults with high behavior support needs
- Increase Basic Plus aggregate amount and allow housing navigation/plan service

## Affordable Housing

- Fund technical assistance to expand capacity for building DD housing
- Ensure stable housing for homeless families caring for children with IDD and homeless adults with IDD
- Support passage of REET bill with funding for DD housing and related IDD support services

## Health Care

- Expand crisis support for youth and adults with IDD in behavioral crisis and eliminate acute care and inpatient hospital boarding
- Expand well care and mental healthcare provider capacity for people with IDD using Medicaid



## Budget Priorities & Fundamental Supports

- Stabilize providers so they can expand, and increase openings for the Basic Plus, Individual and Family Services (IFS), Core, and Children’s Intensive In-Home Behavioral Supports (CIIBS) Waivers
- Adequately fund DDA and related social and health services so people can live in the community and aren’t forced into congregate settings

## Equity & Civil Rights

- Downsize and close Residential Habilitation Centers (RHC)
- Provide appropriate supports to parents with IDD
- Expand access to transportation
- Fund adequate legal aide services for people with IDD
- Preserve all historical documents, records, and artifacts at our state RHCs so we can tell the story of our past

## Education

- Fund training and discontinue abusive restraints and end isolation
- Build inclusionary practices by providing technical support for universal design for learning including multitiered systems and supports
- Remove the cap and completely fund all special education students
- Provide school-based and community partner services to support IDD students with high acuity needs and eliminate out-of-state educational placements
- Shift burden of proof to school districts in due process hearings

## Employment and Day Programs

- Ensure network adequacy of Day and Employment programs in every local community across the state
- Increase capacity for Day Programs with specific funding for start-up and development
- Increase rates across Day and Employment programs to ensure sustainable growth and access to programs



# Washington Statewide Parent Coalitions

## 2024 Legislative Priorities

### Capture and fund Supervision/Safety Support needs in all settings

- Individuals with Intellectual and Developmental Disabilities have a right to be safe in their homes and communities, and DDA has a responsibility to provide that support wherever an individual lives, including the family home.
- The CARE assessment should be adjusted to capture and reflect safety support needs for every individual.
- Overtime exemptions should be allowed for individual providers (IPs) who provide supervision in addition to personal care.

### End the Provider Shortage

- Individuals with Intellectual and Developmental Disabilities deserve a well-trained provider workforce, who are paid professionals making a livable wage, able to meet individual support needs and prevent harm and neglect.
- Implement DDA's study in HB 1694 to Pay parent care-providers of individuals under the age of 18 who have medically and behaviorally complex needs.
- DDA services and Providers must be developed in all areas of the state.

### Develop Adult Day Services across the State

- Develop statewide DDA Adult Day Programs in community settings that end isolation and support personal choice, individual goals, social engagement, habilitative goals, and personal care needs.
- Make Adult Day Programs/Adult Day Health a separate waiver service (aside from respite and Day Services) with its own dedicated funding.
- Fund the upfront development costs, staffing, and implementation of statewide DDA Adult Day Programs in community settings across the state.
- Support rate parity across DDA Day Services (Community Inclusion, Community Engagement, Supported Employment, Adult Day Programs, and Respite). to build a robust provider network and more equitably distribute DDA funding.

### End Isolation and Restraint in Schools

- Continue legislative work toward reducing and ending the use of restraint and isolation in schools.

### Increase Access to Housing and Residential Supports for Adults with IDD

- Individuals with IDD have a right to affordable, accessible, and sustainable housing in an individual's chosen setting with their needed level of services and support and regular access to the community. Services and funding should follow the person, wherever they choose to live, including their own family home.
- Reduce eligibility barriers to DDA Core Waiver services and prioritize Core waivers for individuals whose family caregivers are aging.
- Develop wrap-around **life-transition planning services** for adults with IDD who have aging caregivers or who want to change where they live. Planning should include housing, residential supports, access to the community, financial planning, and long-term sustainable care. Expand access to the Family Mentor Project for individuals with aging caregivers.



DEVELOPMENTAL DISABILITIES ADMINISTRATION

# Strategic Plan 2021-2023

*March 2020*

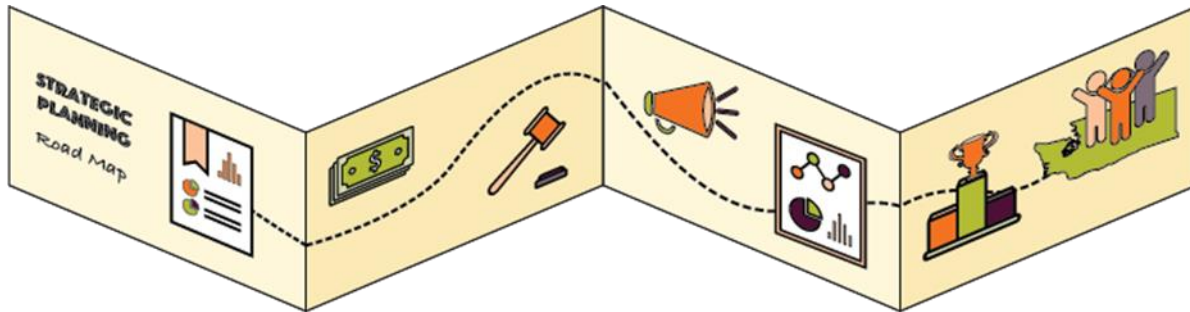
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## STRATEGIC PLANNING IN DSHS

DSHS' goal and commitment is to be a national leader in every aspect of client service. The DSHS strategic plans are a roadmap to the future. They identify where we currently are with our performance, where we want to be and how we're going to get there. The plans are used to guide our day-to-day efforts and focus our resources. They are integral to the work we do every day.



To that end, a strategic plan is crucial for making informed budget decisions. The Legislature requires each agency's budget recommendations be directly linked to the agency's strategic plan. Our plan articulates our mission, programs, goals and objectives. The strategic plan itself links budget requests to specific efforts in order to achieve statewide goals.

While the primary purpose of a strategic plan is to guide the agency's activities, it also provides a helpful means to communicate with clients, partners and stakeholders outside the agency. In addition, state law (RCW 43.88.090) directs each state agency to define its mission and to establish measurable goals to achieve desirable results for customers, and to develop clear strategies and time lines for achieving these goals.

Given the historic times we are living in with the COVID-19 pandemic, the 2021-2023 biennium will be a dramatically different strategic planning and budget season. DSHS doesn't know yet what our new normal will be. However, we will take this opportunity to think about the fundamental changes to how we serve people and focus on the strategic priorities that support our core mission of transforming lives.

For the 2021-23 Strategic Plan, DSHS has an overarching executive summary that encompasses the many services and administrations within DSHS. Additionally, each administration has a more specific strategic plan, with objectives and action plans related to their vast and diverse programs. Lastly, the plans have metrics that are monitored quarterly to ensure we are meeting our goals and objectives. The DSHS strategic plans are developed on a two-year cycle and are annually updated.



# DSHS PRIORITIES AND GOALS

This agency-wide strategic plan addresses the priorities for all of DSHS, and sets measurable objectives and goals. Using data, we monitor our progress in order to ensure DSHS serves our clients in a meaningful way and to the best of our ability within our funding. Every DSHS employee contributes to the mission of Transforming Lives by addressing the priorities and accomplishing the objectives within our agency-wide strategic plan.



DSHS has articulated broad over-arching priorities for the agency based on discussions with clients, stakeholders, the Governor’s Office, legislators, staff and others. These priorities directly address current needs and anticipate future needs. By working together across administrations, stakeholders, vendors, community partners, agencies, and others, DSHS will be able to deliver a range of quality of services to Washington residents, work efficiently and effectively, and be an employer of choice for our staff.

In addition, each strategic objective within the DSHS Strategic Plan supports the five broad goals for DSHS.

 <p><b>PUBLIC TRUST</b> Strong management practices will ensure quality and efficiency.</p>	 <p><b>HEALTH</b> Each individual and each community will be healthy.</p>	 <p><b>PROTECTION</b> Each individual who is vulnerable will be protected.</p>	 <p><b>QUALITY OF LIFE</b> Each individual in need will be supported to attain the highest possible quality of life.</p>	 <p><b>SAFETY</b> Each individual and each community will be safe.</p>
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- These DSHS goals align with the Governor’s goals of:
- Healthy and Safe Communities.
  - Efficient, Effective and Accountable Government.

# DEVELOPMENTAL DISABILITIES ADMINISTRATION EXECUTIVE SUMMARY



“Serving people in their home communities and caring for clients in our residential habilitation centers is at the core of our daily work. I commend DDA's ambitious goals in this plan, especially around improving health and wellness for clients and enhancing equity, diversity and inclusion efforts for staff.”

**Don Clinstman, Interim Secretary**  
*Department of Social and Health Services*



“Every day the Developmental Disabilities Administration empowers people to live the lives they want. This plan is about the work and the expected outcomes to accomplish our mission.”

**Debbie Roberts, Assistant Secretary**  
*Developmental Disabilities Administration*  
[DDA organizational chart](#)

Developmental Disabilities Administration programs are designed to help individuals with developmental disabilities and their families get services and supports based on need and choice.

DDA offers a range of safe, high-quality community, employment and residential services and supports on a \$1.7 billion annual budget.

Within the Department of Social and Health Services, more than 4,000 DDA employees statewide offer:

- **Case management** that includes assessment, service and support planning. 49,297 individuals are DDA clients; 13,750 do not have paid services and 35,547 have a paid service with case management.
- **Community First Choice**, a Medicaid program that offers approximately 18,000 DDA clients in-home personal care supports for help with tasks such as eating, bathing, dressing, housekeeping, laundry and preparing meals to help increase independence or to substitute human help.
- **Community residential supports** such as state-operated living alternatives, supported living and adult family homes for more than 6,900 individuals to live in and take part in the community.
- **Employment, community inclusion and child development services** that offer increased financial independence and connection to the community for more than 16,884 individuals.
- **Home and community-based waivers**, which provide services in the community instead of an institutional setting. DDA offers services under five waivers to over 20,000 individuals.
- **Residential habilitation centers**, state-operated settings that provide 24-hour instruction and support with daily living skills for 647 residents.

**Mission**  
Transforming lives by providing support and fostering partnerships that empower people to live the lives they want.

**Vision**  
Support individuals by continually improving and individualizing supports, building support plans based on needs, and engaging individuals and families

**Values**  
Respect, Person-Centered Service Planning, Partnerships and Community Participation



## STRATEGIC OBJECTIVES

Below are the specific strategic objectives within the department's priorities. Some objectives refer to decision funding packages. Decision packages are funding requests DSHS submits to the Office of Financial Management as part of the state budget process.

### DSHS STRATEGIC PRIORITY: SUPPORT PEOPLE IN OUR CARE AND CUSTODY

**Importance:** We must provide top-notch care and supports for the people in our care and custody, whether they reside in a community-based setting or in one of our 9 residential facilities. Equally important is the safety of our employees who provide the care. Well-maintained facilities that have adequate space and staffing are another important element of the care and comfort of their residents.

Based on this, DSHS has established the following strategic objectives to support how we will care for those in our care.

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#### **Strategic Objective: 1.1: Ensure clients receiving supported living, group home, group training home services and adult family homes get regular medical and dental care and that health needs are identified and addressed.**

*Decision Packages:* 000 - ML - 8 Lease Rate Adjustments, 000 – AW – ML – L7 – Personal Protective Equipment COVID-19, 150 - PL - GJ - Confidential Client Data Protection

**Does this objective have an I.T. component?**  Yes  No

**Importance:** Regular medical and dental exams can help identify issues before they become more difficult to address. By getting the right health care services, preventative screenings and treatments, individuals who have regular medical exams have improved chances of living longer, healthier lives.

**Success Measure 1.1.1:** Increase the percentage of clients receiving certified residential services who see a doctor at least once a year from 92% (baseline) in July 2019 to 93% by June 2023.

See Chart ADX.38: Percent of clients receiving certified residential services visiting a Primary Care Physician at least once a year.

#### **Action Plan:**

- Provide case resource managers ongoing training and support to help them understand the value and importance of clients having regular scheduled medical exams.
- Provide the regional leadership team with monthly report of clients in certified residential services who do not have a doctor visit recorded in the preceding 12 months of their annual assessment.
- Review performance data quarterly with central office and regional executive management teams to ensure targets are being met and to note areas of concern.

**Success Measure 1.1.2:** Increase number of clients seeing a dentist from 76% (baseline) in July 2019 to 80% by June 2023.



See Chart ADX.39: Number of clients receiving certified residential services who visited their dentist in the last 12 months.

**Action Plan:**

- Provide case resource managers ongoing training and support to help them understand the value and importance of clients having regular dental exams.
- Provide the regional leadership team with monthly report of clients in certified residential services who do not have a dental visit recorded in the preceding 12 months of their annual assessment.
- Review performance data quarterly with central office and regional executive management teams to ensure targets are being met and to note areas of concern.

**DSHS STRATEGIC PRIORITY: SERVE PEOPLE IN THEIR HOME COMMUNITY**

**Importance:** Studies show us that people in recovery do best when they live in their home communities, close to their support systems including services, family and friends. The Governor’s Office, DSHS and others are embarking on an ambitious Mental Health Transformation project to increase the availability of specialized supports in adult family homes and other facilities for individuals in recovery. We also are focused on developing more community living alternatives for people with intellectual and developmental disabilities so they can live, work and play closer to their families, friends and loved ones.

Based on this, DSHS has established the following strategic objectives to support how we will serve people in their home community.

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**Strategic Objective 2.1: Support individuals with developmental disabilities to be able to receive services that support them in living in their own communities rather than in facility-based settings.**

*Decision Packages:* 040 – ML – OU – Forecast Cost Utilization, 040 – ML – 93 – Mandatory Caseload Adjustment, 040 – ML – 94 – Mandatory Workload Adjustments, 040 – ML – DA – Utilization of Residential Services, 040 – ML – DE - Utilization of Respite Services, 000 – ML – WM – Technical Corrections, 000 – AW - ML -WD – Facility One-Time Costs, 040 – PL – 4X – Children’s SOLA, 040 - PL - DN - High School Transition Students, 040 – ML – D3 – Financial Eligibility Staff, 040 - PL - L8 - COVID-19 Client Services and Facility Modification, 040 – PL – 4F – In-Home Provider PPE, 040 – PL – EP – Personal Needs Allowance, 040 – PL – D9 – Increase CIIBS Waiver Capacity, 040 – PL - D6 - PASRR Capacity Increase

**Does this objective have an I.T. component?**  Yes  No

**Importance:** Individuals with developmental disabilities should have access to services and resources that meet their needs and promote activities, routines and relationships. This includes being able to live in communities rather than in facility-based settings.

**Success Measure 2.1.1:** Increase the percentage of DDA clients served in home and community-based settings from 97.7% in July 2021 to 98% by June 2023.

See Chart AD1.2: Percent of clients with developmental disabilities served in home and community-based settings.

**Action Plan:**

- Ensure all clients requesting services receive an assessment to determine eligibility for community-based services.
- Provide Roads to Community Living funds to assist clients with their transition during the first 12 months after moving.
- Conduct quarterly performance data reviews at the executive level to ensure targets are met.

**Success Measure 2.1.2:** Transition 24 individuals who reside at Western and Eastern State Hospitals to State Operated Living Alternatives by June 2023.

See Chart ADX.37: Number of DDA State-Operated Living Alternative placements for DDA clients residing at Western and Eastern State Hospitals

**Action Plan:**

- Work with staff at Western and Eastern State Hospitals to determine the discharge readiness of clients.
- Obtain homes in the community and recruit and hire staff to support clients in the SOLA program as funding becomes available and when clients are ready for discharge from the hospital.
- Conduct quality assurance surveys on clients who have moved to ensure that service and support needs are being met.

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**Strategic Objective 2.2: Use available funding to provide the services and supports needed.**

*Decision Packages: 000 – ML – 9T – Transfers, 000 – ML – L2 – Overtime Rule Changes*

**Does this objective have an I.T. component?** Yes No

**Importance:** Waivers provide funding for services and supports necessary to serve over 20,000 individuals. DDA instills trust by ensuring that enrollment is at or near capacity in order to ensure that all available resources are used to meet the service needs of clients and their families.

**Success Measure 2.2.1:** Increase enrollment in the Basic Plus waiver from 9,118 to 9,571 by June 2023.

See Chart ADX.34: Enrollment in the Basic Plus waiver

**Action Plan:**

- The waiver committee will review the capacity tracking report to determine available capacity prior to reviewing requests for enrollment.
- The waiver committee will conduct weekly meetings to review enrollment requests and determine if they should be approved or not.
- The DDA executive leadership team will review caseload activity each quarter.

**Success Measure 2.2.2:** Increase enrollment in the Core waiver from 4,672 June 2021 to 4,871 by June 2023.

See Chart ADX.35: Enrollment in the Core Waiver



**Action Plan:**

- DDA will continue to monitor the waiver caseload to determine if there is capacity and funding available to support new enrollment requests for access to waiver funding and services.
- Provide a monthly report on capacity of the Core waiver and disposition of waiver enrollment requests to be reviewed by waiver committee.

**Success Measure 2.2.3:** Maintain an average quarterly caseload of at least 6,500 clients on the Individual and Family Services waiver.

See Chart ADX.36: Enrollment in the Individual and Family Services waiver

**Action Plan:**

- DDA routinely monitors the waiver caseload to determine if there is capacity and funding available to support new client enrollment requests for access to waiver funding and services.
- Provide a monthly report on capacity of DDA waivers and disposition of waiver enrollment requests to be reviewed by waiver committee.

**DSHS STRATEGIC PRIORITY: PROVIDE A PATHWAY OUT OF POVERTY AND BECOME HEALTHIER**

**Importance:** Whether people come to us for simple, short-term assistance or with more complex, long-term needs, we must be present to the whole person, offering the right benefits at the right time. Our participation in the Governor’s Poverty Reduction Workgroup and our own efforts to work with families to understand the cycle of intergenerational poverty will give us the tools we need to help individuals and families achieve economic stability.

Based on this, DSHS has established the following strategic objectives to support how we will provide a pathway out of poverty and becoming healthier.

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**Strategic Objective 3.1: Increase the number of working-age adults with a developmental disability who are employed.**

**Does this objective have an I.T. component?**  Yes  No

**Importance:** DDA is committed to providing employment support to all working-aged adult clients. Having a job and earning a wage are powerful achievements. Increasing access and opportunities for employment allows individuals to fully participate in their communities.

**Success Measure 3.1.1:** Increase the percentage of working-age adults with developmental disabilities who are employed and receiving supported employment services from 66% in July 2018 to 67% by June 2023.

See Chart AD2.1: Percent of working-age adults with developmental disabilities receiving supported employment services who are earning a wage.

**Action Plan:**

- Provide regional management teams and counties with quarterly data showing supported employment caseload and activities.
- Use appropriated funding to expand capacity on the Basic Plus waiver for individuals who are age 21, graduating from high school, Medicaid-eligible and interested in pursuing supported employment services.
- Review technical assistance provided by the Centers for Medicare and Medicaid Services to evaluate the value-based purchasing model. This may provide valuable information and options for financial and non-financial incentives to increase employment of clients with high needs.

**DSHS STRATEGIC PRIORITY: INCREASE ORGANIZATIONAL EFFICIENCY, PERFORMANCE AND EFFECTIVENESS**

**Importance:** At DSHS, we strive every day to get even better at what we do, no matter how each of us contributes to our agency mission of Transforming Lives. An important piece of that is transforming ourselves. Our most important resource is our professional, caring, compassionate staff. We need to continue our efforts to be an employer of choice – recruiting and retaining individuals committed to a career in public service. We will keep a laser focus on equity, diversity and inclusion. Those values are foundational to every aspect of our work with clients and in our day-to-day interactions with each other. Data will be used to drive decisions that will ensure our work is effective, efficient and accurate.

Based on this, DSHS has established the following strategic objectives to support how we will increase organizational efficiency, performance and effectiveness.

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**Strategic Objective 4.1: Ensure that services and supports provided to clients in certified residential settings meet regulatory requirements and quality of care standards.**

*Decision Packages: 000 – ML – WQ – Food and Medical Adjustments, 000 – ML – 8X – Facility Maintenance Costs, 040 – PL – D7 – RHC Digital Records Transformation*

**Does this objective have an I.T. component?** Yes No

**Importance:** More than 4,200 individuals across the state receive community-based residential services from more than 135 contracted providers. Timely and consistent background checks for staff, routine community engagement for the individuals we support and quality support plans reflecting industry best practices are three key indicators of safe, integrated and quality service.

**Success Measure 4.1.1:** Certified residential providers will receive fewer than two background check-related citations each per quarter by June 2023.

See Chart ADX41: Number of background check-related citations for certified residential service providers

**Action Plan:**

- Provide certified residential service providers with training and technical assistance.
- Give residential service providers the option of a background check tracking tool.
- Review performance data quarterly with central office and regional executive management teams to ensure targets are met and to note any issues.



**Success Measure 4.1.2:** Certified residential service providers sampled will provide clients with at least three days of support in accessing community-based activities for three consecutive quarters during the 2021-23 biennium.

See Chart ADX 21: Average number of days in a seven-day period in which individuals in Supported Living programs accessed community-based activities

**Action Plan:**

- Share community activity data and promote residential providers’ support of community activities at regional provider meetings.
- Follow up, involve case management and provide technical assistance as appropriate for clients identified to have two or fewer community outings in sampled weeks.
- Provide access to online training and encourage residential provider staff to support clients in accessing community-based activities.

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**Strategic Objective 4.2: Conduct timely assessments to ensure that services authorized are adequate in supporting identified health and welfare needs.**

*Decision Packages: 040 – PL – D8 – Paper to Electronic Workflows*

**Does this objective have an I.T. component?** Yes No

**Importance:** Assessments are used to identify a person’s health and welfare needs as well as to determine financial and functional eligibility and the services a person is authorized to receive. Annual reassessments are required to review the effectiveness of authorized services and determine if support needs have changed. It is important to complete these assessments and reassessments in a timely manner because they affect a person’s life and because this improves service delivery.

**Success Measure 4.2.1:** Maintain a 99% on-time completion rate of initial assessments by June 2023.

See Chart ADX.24: Percent of initial assessments completed on-time for clients with developmental disabilities requesting services

**Action Plan:**

- Provide a monthly assessment timeliness report to regional leadership teams.
- Review performance data quarterly with regional executive management teams.
- Provide case resource managers training and ongoing support to better equip them with knowledge and skills to administer an assessment.

**Success Measure 4.2.2:** Maintain a 99% on-time completion rate of annual reassessments by June 2023.

See chart ADX.1: Percent of assessments completed on time for CFC, Waiver, new or no-paid-services clients requesting services.

**Action Plan:**

- Provide a monthly assessment timeliness report to regional leadership teams.
- Review performance metric data quarterly with regional executive management teams.





- Provide case resource managers training and ongoing support to better equip them with knowledge and skills to administer an assessment.

**Success Measure 4.2.3:** Maintain on-time completion of annual individual habilitation plans of individuals residing at a residential habilitation center at 96% or greater each quarter by June 2023.

See Chart ADX.40: Percent of annual individual habilitation plans completed on time

**Action Plan:**

- Provide a monthly report regarding timeliness of completing individual habilitation plans.
- Quarterly review a sample of individual habilitation plans at each residential habilitation center to ensure they are updated within a year of the individual habilitation plans.
- Provide residential habilitation centers with a quarterly report showing the trend of timeliness in completing individual habilitation plans.

**Strategic Objective 4.3: Continue to support and promote equity, diversity and inclusion in the workplace by recruiting, hiring, training and retaining a diverse workforce through effective promotion, communication and training.**

**Does this objective have an I.T. component?** Yes No

**Importance:** DDA is committed to promoting equity, diversity and inclusion with the goal of creating a workplace environment of mutual respect and equal opportunity. Motivated and engaged staff will lead to better staff retention, organization health, identification of emerging leaders and improved customer outcomes. Equity, diversity and inclusion are core DDA values.

**Success Measure 4.3.1:** Increase the percentage of DDA employees who complete a DSHS equity, diversity and inclusion training from 72% to 90% by June 2023.

See Chart ADX.32: Percent of DDA employees who complete a DSHS equity, diversity and inclusion training.

**Action Plan:**

- DDA will provide online and instructor-led trainings for employees to take in the DSHS Learning Management System.
- DDA staff will provide quarterly reports to executive management team regarding progress achieved.
- DDA will add the requirement to complete at least one DSHS equity, diversity and inclusion training by June 2023 to DDA employee position description forms.

**Success Measure 4.3.2:** Increase the number of DDA employees certified as diversity and inclusion leaders from 10 to 18 by June 2023.

See Chart ADX.42: Number of DDA employees certified as diversity and inclusion leaders

**Action Plan:**

- Ensure certification for each diversity professional and diversity executive, and identify additional roles and responsibilities as essential for certification.
- Certified DDA employees will incorporate practices/principles of equity, diversity and inclusion in their respective facilities and offices.



- Report biannually the number of DDA employees identified as leaders in diversity and inclusion efforts.

**Success Measure 4.3.4:** Increase from 987 to 1137, the number of DDA employees who have completed 7.01, American Indian Policy or Government to Government by June 2023.

See Chart ADX.44: Number of staff trained on Indian Policy Affairs training.

**Action Plan:**

- Review 7.01 plans and training schedule with Office of Indian Policy.
- DDA works with OIP staff to provide instructor-led training for employees through the DSHS Learning Management System.
- DDA staff will provide quarterly reports to executive management team and the Indian Policy Advisory Committee subcommittee regarding progress achieved.

**Success Measure 4.3.5:** Ensure that 90% of DDA hiring managers complete a leadership course with an equity, diversity and inclusion focus by June 2023.

See Chart ADX.45: Number of supervisors completing qualifying equity, diversity and inclusion leadership class.

**Action Plan:**

- Identify hiring managers to attend training.
- Provide quarterly reports to management teams regarding progress toward achieving this success measure.
- Require that hiring managers complete cultural humility training as part of their annual performance plan.

**Strategic Objective 4.4: Train DDA employees to perform their duties in a manner that promotes safety in the workplace.**

*Decision Packages: 000 – ML – WQ – Food and Medical Adjustments*

**Does this objective have an I.T. component?**  Yes  No

**Importance:** Safety and continuity of work processes are critical components to ensure the health and safety of clients and staff.

**Success Measure 4.4.1:** Increase the percentage of DDA employees completing online DSHS Active Threat safety training course from 66% to 75% by June 2023.

See Chart ADX.29: Number and percent of DDA employees completing the online DSHS Active Threat training.

**Action Plan:**

- Offer an online training course for employees to take in the DSHS Learning Management System.
- Provide regional and residential habilitation center management teams with monthly reports regarding the number of employees who have completed the training.
- Review performance data with the executive management team each quarter.

**Success Measure 4.4.2:** Ensure all clients enrolled in the Enhanced Case Management Programs receive a visit from a DDA case resource manager at least once every four months. Maintain percentage of clients visited at



99.3% and evaluate the effectiveness of authorized services and assessed support needs from July 2021 to June 2023.

See Chart ADX.26: Percent of clients enrolled on the Enhanced Case Management Program who have required visits completed on time.

**Action Plan:**

- Ensure 99% of clients enrolled on the ECMP receive a visit at least once every four months.
- Case resource managers will document scheduled, unannounced and refused visits in clients' records.
- Review performance data with the executive management team each quarter.

**Success Measure 4.4.3:** Increase the percentage of residential habilitation center whose Therapeutic Options certification is current each quarter from 89% in July 2021 to 95% by June 2023.

See Chart ADX.30: Percent of RHC who required to be certified in Therapeutic Options.

**Action Plan:**

- Provide Therapeutic Options training to residential habilitation center direct support professionals.
- Residential habilitation center program managers will provide monthly reports regarding the number of employees whose Therapeutic Options certification is in good standing and the number of those who need to be certified/recertified.
- Review performance data with the executive management team each quarter.

**Success Measure 4.4.4:** 100% of RHC, SOLA and field services offices will have emergency and continuity plans by June 2023.

See Chart ADX.43: Percent all RHCs and SOLAs have emergency and continuity plans during emergency incidents and disasters.

**Action Plan:**

- DDA Emergency Management staff will develop a Continuity of Operations template for use by the SOLAs that is in compliance with requirements set forth in DSHS Administrative Policy 9.15.
- DDA Emergency Management staff will collaborate with the SOLA Operational Compliance Manager to ensure that each SOLA has a site-specific COOP by June 2023.
- DDA Emergency Management staff will collaborate with each of the four RHCs to review and update their respective COOP's to ensure that their plans meet the required annual update of June 2023.
- DDA Emergency Management staff will review and update the DDA HQ COOP to ensure that the plan meets the required annual update of June 2023.





# Pierce County **Developmental Disabilities** Advisory Board

## 2024 Legislative Priorities

The Pierce County Developmental Disabilities Advisory Board thanks the Legislature for your continued efforts to expand services and supports for individuals with intellectual and developmental disabilities (I/DD). In 2023 you passed legislation that supported our community in unprecedented ways. Despite these efforts, Individuals and families continue to be in crisis, unable to find housing and services in their local communities. We ask you to address these critical needs:

### Employment and Day | ESIT | Housing | Transportation



**EMPLOYMENT AND DAY: Ensure individuals are supported to live a full and meaningful life that includes employment, community inclusion, and other integrated and meaningful daytime services that support them to be part of their community.**

Employment and Community Inclusion supports provide a critical foundation of stability in the lives of adults with I/DD. We thank the 2023 Legislature for increasing provider rates; however, the funding is not sufficient to fully implement the recommended rates from the legislatively mandated 2022 Employment and Day Rate Study and the system remains unstable. In addition to stabilizing existing services, new and innovative community-based programs funded at a sustainable rate are needed to provide a range of meaningful activities that support a full life for individuals with I/DD.



**ESIT: Improve continuity of care for infants and toddlers receiving Early Support for Infants and Toddlers (ESIT) program services by amending RCW 43.216.580 to read: "(c) For the purposes of this subsection (2), a child is receiving early intervention services if the child has received services in the same month as the monthly count day, which is the last business day of the month."**

ESIT agencies provide entitlement services to all eligible children, and the number served in Pierce County has increased by an average of 18% annually in recent years. Currently, the RCW language reads "(c) For the purposes of this subsection (2), a child is receiving early intervention services if the child has received services within a month prior to the monthly count day." In practice, this means providers are not able to bill the Department of Children, Youth, & Families (DCYF) for Special Education funding for the first month a child receives services, even though that first month tends to be the most expensive. Adoption of the updated language would begin to address funding inequities for ESIT and increase capacity for providers to deliver timely services to families.





**HOUSING:** Address the housing crisis faced by individuals with I/DD by identifying a sustainable and permanent revenue source for DD affordable housing, increasing the Housing Trust Fund – Developmental Disabilities Set-aside, and fully funding residential supports.

In Washington state, approximately 37,000 adults with I/DD are facing housing insecurity (ECONorthwest, Housing Needs for Individuals with I/DD in Washington State ,2022. Pg. 5). Affordable housing, with support services, is needed immediately to provide housing for people with I/DD living in our communities and those that need community living options to leave institutions or hospital settings. Addressing these essential needs is critical to successful community living.



**TRANSPORTATION:** Ensure that Washington State surpasses the Americans with Disabilities Act (ADA)-specified federal requirement of a 0.75-mile distance from a fixed bus route for Paratransit services and provides transportation options for Developmental Disabilities Administration (DDA) clients who live in communities without public transportation.

Individuals with Intellectual/Developmental Disabilities rely on public transportation to get to work, the grocery store, medical appointments, and community activities; currently Paratransit is only available to those that live within a 0.75-mile distance from a fixed bus route and many communities lack any bus routes at all. Communities without bus routes either lack access to accessible transportation entirely or rely on already stretched locally managed stop-gap solutions. Addressing transportation gaps will ensure that we don't leave individuals isolated and unable to care for their essential needs.



For more information, please contact:

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**Pierce County**  
Human Services