

WAC 388-71-0718 What is the adult day care center's responsibility in developing the client's negotiated care plan? (1) Upon the department's or authorized case manager's referral of a COPES, RSW, RCL, or other agency approved client to an ADC center, the ADC center must respond in writing to the department or authorized case manager within two working days, acknowledging receipt of the referral and the center's ability to process and evaluate the referred client.

(2) The case manager will provide the client's department service plan to the ADC center within five working days after the client or client's representative has signed it.

(3) The ADC center must schedule and conduct an intake and evaluation visit with the referred client or the client and his or her authorized representative to determine the client's desire to attend the ADC center and evaluate the ADC center's ability to meet the client's assessed needs and specific goals as defined in the client's department service plan. The intake and evaluation must be based on an interview with the client or the client and his or her authorized representative.

(4) Within ten paid service days from the date the client started attending the ADC center, the ADC center must complete and provide a preliminary service plan to the client or the client and his or her representative and the client's case manager that outlines the client's strengths, deficits, and potential needs. The ADC center must determine whether it can meet the client's needs, how it will meet the client's needs, and whether it will accept the client into the program. The ADC center must not accept a client whose needs the center cannot meet. The ADC center must document in the client's file the date it accepted the client into the ADC program. If the client is not accepted into the ADC program, the preliminary service plan must include the reason(s) why the client was not accepted.

(5) Within thirty calendar days of the date the client was accepted into the ADC program, the ADC center must work with the client or the client and his or her authorized representative to develop and complete a negotiated care plan signed by the client or the client's authorized representative and the ADC center.

(6) The negotiated care plan must limit the frequency of services to the number of days authorized in the department authorized service plan. The negotiated care plan must include:

(a) A list of the care and services the ADC center will provide the client;

(b) Identification of who will provide the client's care and services;

(c) When and how the ADC center will provide the care and services;

(d) How the ADC center will manage the client's medications and how the client will receive his or her medications when attending the ADC center;

(e) The client's activity preferences and how the ADC center will meet these preferences;

(f) Other preferences and choices about issues important to the client, including, but not limited to:

(i) Food;

(ii) Daily routine;

(iii) Activities;

(iv) Services received and who will provide the services received;

(v) Individuals they interact with;

- (vi) Grooming;
- (vii) How the ADC center will accommodate the client's preferences and choices; and
- (g) If needed, a plan to:
 - (i) Follow in case of a foreseeable crisis due to the client's assessed needs;
 - (ii) Reduce tension, agitation, and problem behaviors;
 - (iii) Respond to the client's special needs, including, but not limited to medical devices and related safety plans, and if medical devices are used, ADC center staff must ensure the medical device will not be used as a physical restraint for discipline or staff convenience and must also ensure clients are free from coercion while attending the ADC center;
 - (iv) Respond to the client's refusal of care or treatment, including when the ADC center should notify the client's physician or practitioner of the client's refusal; and
 - (v) Identify any communication barriers the client may have and how the ADC center will use the client's behaviors and nonverbal gestures to communicate with him or her.
- (7) The ADC center must:
 - (a) Ensure medical devices will never be used as a physical restraint for discipline or staff convenience;
 - (b) Update the negotiated care plan annually and whenever there is a significant change in the client's condition and needs;
 - (c) Share the negotiated care plan with the client's case manager whenever it is updated, annually, and after a significant change;
 - (d) Ensure the client's case manager reviews the negotiated care plan to ensure all services are appropriate and all authorized care needs have been included;
 - (e) Keep the current negotiated care plan in the client's file; and
 - (f) Offer a copy of the negotiated care plan to the client or the client and his or her authorized representative.
- (8) The ADC center must report changes in the client's condition or unanticipated absences more than three consecutive scheduled days of service to the client's case manager within one week.
 - (a) Unanticipated absences may include but are not limited to absences due to client illness or change in transportation access.
 - (b) The case manager may follow up with the client or the client and his or her representative and determine if any updates to the assessment, client's department service plan, or service authorizations are needed.

[Statutory Authority: RCW 74.08.090. WSR 18-18-006, § 388-71-0718, filed 8/23/18, effective 9/23/18. Statutory Authority: RCW 74.08.090 and 74.09.520. WSR 17-19-098, § 388-71-0718, filed 9/19/17, effective 10/20/17; WSR 15-01-174, § 388-71-0718, filed 12/23/14, effective 1/23/15. Statutory Authority: RCW 74.04.050, 74.04.057, 74.04.200, 74.08.090, 74.09.520, and 74.39A.030. WSR 03-06-024, § 388-71-0718, filed 2/24/03, effective 7/1/03.]