

WAC 388-880-041 Individualized treatment: discharge planning.

(1) SCC will develop on an ongoing basis, clinically appropriate discharge plans for every resident. These plans will address at a minimum:

(a) The resident's known physical health, functioning, and any need for health aid devices;

(b) The resident's known intellectual or cognitive level of functioning and need for specialized programming;

(c) The resident's known history of substance use and abuse;

(d) The resident's known history of risky or impulsive behaviors, criminogenic needs, and treatment interventions to address them;

(e) The resident's known ability to perform life skills and activities of daily living independently and the resident's known need for any disability accommodations;

(f) A summary of the known community services and supports the resident needs for a safe life in the community and the type of providers of such services and support; and

(g) A plan to mitigate the needs identified in this subsection that also addresses ways to develop or increase social supports, recreation opportunities, gainful employment, and if applicable, spiritual opportunities.

(2) These plans are memorialized in a psychosocial assessment. These assessments will be written by the assigned social worker and reviewed by the social work manager. Psychosocial assessments are updated on an annual basis, or more frequently if needed.

[Statutory Authority: RCW 71.09.070, 71.09.090, and 71.09.097. WSR 24-12-043, § 388-880-041, filed 5/30/24, effective 6/30/24.]