



REPORT TO THE LEGISLATURE

Community Respite Services for Adults

Engrossed Substitute Senate Bill 5092
Chapter 334, Laws of 2021
(partial veto)
67th Legislature
2021 Regular session, Section 203(1)(t)

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Contents

Executive summary	3
Background and context.....	3
Respite services data review	5
Survey feedback results	8
Summary.....	9

Executive Summary

In the 2015-2017 biennial budget ([ESSB 6052](#)), the Washington State Legislature gave funds to the Department of Social and Health Services' Developmental Disabilities Administration to develop and implement eight overnight planned respite beds for adults ages 18 and older with intellectual and developmental disabilities. In the 2017-2019 budget, the Legislature gave more funds to support full implementation of the eight respite beds. This service does not receive Medicaid match like others do. In the 2019-2021 budget, the Legislature funded five more planned respite beds for a total of 13 beds in the program. In April 2022, Overnight Planned Respite Services raised pay rates 4%. We hoped to attract and retain providers, prevent families from needing long-term residential programs and to allow more people to use community respite services. Providers told us the 4% increase was still not enough to operate their programs. We reviewed the budget for OPRS and closed one contracted bed to fund a 19% rate increase for each bed, effective Jul. 1, 2022. In fiscal year 2023, individual client usage increased by 14%. Fiscal year 2024 saw a notable increase of 32% in the number of clients accessing OPRS beds in comparison to fiscal year 2023.

Individuals, families and caregivers can request planned respite at a Residential Habilitation Center if preferred, or when community-based respite options are unavailable or unable to meet the needs of the client referred.

Background and Context

Legislative Charge

In 2015, the Washington State Legislature passed ESSB 6052 which funded eight community-based overnight planned respite beds across the state. We began offering OPRS in January 2016. OPRS provides short-term respite offered by a DDA contracted and certified provider and is available to eligible DDA clients aged 18 and over. This service offers a critical break for caregivers from the daily responsibilities of caring for a client while providing individualized supports and activities for the individual during their respite stay.

Overnight Planned Respite Services Overview

Biennium	Legislative Action	Cumulative # of funded beds	# of beds contracted
2015-2017	Funded 8 OPRS beds	8	4
2017-2019	Carry forward capacity	8	8
2019-2021	Funded 5 additional OPRS beds	13	11
2021-2023	Carry forward capacity	13	11
2021-2023	19% rate increase – effective July 1, 2022	12	9
2023-2025	Carry forward capacity	12	9

ESSB 6052 required DDA to submit to the legislature an annual respite use report. The report must include:

- The number of people who accessed overnight planned respite in the community each fiscal year.
- The location and number of days each month that each bed was occupied.

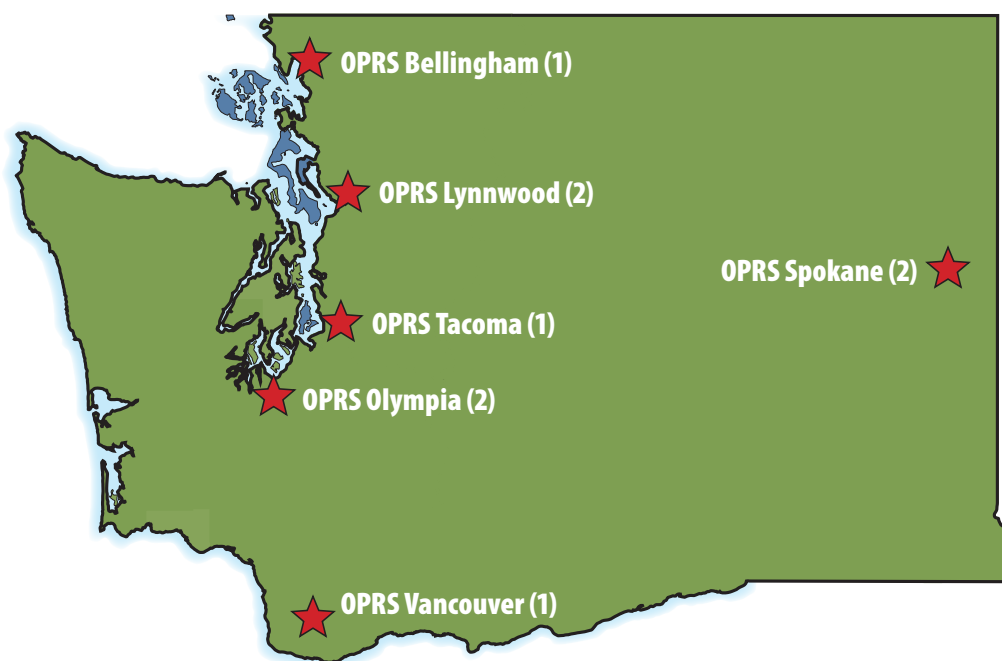
ESSB [5092](#) (2021 legislative session), [5268](#) and [5693](#) (2022 legislative session) tasked us to report on community and respite stabilization needs of DDA clients and consider barriers to these services. We sent the community respite and stabilization preliminary report on [Oct. 1, 2022](#). We highlighted initial recommendations and next steps to enhance quality service delivery and expansion in the Oct. 1, 2023 report. In 2024, we wrote a final Community Respite and Stabilization Services report with feedback from those with lived experience and to present our final recommendations on service enhancements including suggested geographical locations for additional beds, length of service, and other considerations to improve access to these services.

Overnight Planned Respite Services

OPRS is a community-based service for adults living with their primary caregivers per [Chapter 388-829 WAC](#). The service offers a break in caregiving duties for the provider and offers individualized activities and supports to the client during the respite stay. Services are provided in a community setting such as a home or apartment and are staffed by certified and contracted providers. Each OPRS respite setting serves one person at a time and clients may access the service up to 14 days in a calendar year.

In July 2023, DDA updated [Chapter 388-829C-230 WAC](#) to allow those living with [companion home](#) providers to access OPRS.

OPRS Provider Locations



Respite Services Data Review

Overnight Planned Respite Services Current Service Use

In fiscal year 2024, 360 adults accessed overnight planned respite. This is a 32% increase over the 276 clients who used this service in fiscal year 2023. These numbers include clients who accessed OPRS more than once during the 12-month period.

In July 2023, revisions to [Chapter 388-829C WAC](#) extended OPRS access to individuals residing with companion home providers. In fiscal year 2024, OPRS providers were able to accommodate double staffing for 11 clients who needed more support to meet medical or behavioral needs.

We offered nine overnight planned respite beds through four contracted providers at the beginning of fiscal year 2024. During that time Olympia and Vancouver had the highest rates of bed occupancy, while Bellingham showed the lowest. Providers have continued to experience challenges in maintaining staffing levels sufficient to meet the needs of individuals referred. However, all beds stayed online and available for referrals throughout the fiscal year.

The end of fiscal year 2024 brought news that one of our four contracted OPRS providers, The Arc of Spokane, intended to end their OPRS contract effective Oct. 10, 2024. The Arc said they are getting more referrals for clients with complex needs they can't support while having a hard time keeping staff. These factors make it impossible for them to continue providing overnight planned respite services. If more funding and possibly training were available, they would consider offering this service again.

Fiscal year 2025 also brought forward a one-time allocation of \$350,000 specifically to develop overnight planned respite services in the Tri-Cities area. We are actively meeting with providers who are open to contracting for OPRS in this area. We hope to establish two respite beds specifically area. We will also focus on replacing the beds lost through the Arc of Spokane's bed closure.

While the number of clients accessing OPRS increased notably in fiscal year 2024, overall occupancy of 59% in fiscal year 2024 was comparable to the 60% occupancy achieved during fiscal year 2023.



OPRS FY2024 Bed Occupancy Rates by Location					
Location	Quarter 1 Jul-Sept 23	Quarter 2 Oct-Dec 23	Quarter 3 Jan-Mar 24	Quarter 4 Apr-Jun 24	Total Year
Spokane Bismark	42%	52%	40%	40%	43%
Spokane Lidgerwood	65%	67%	52%	36%	55%
Bellingham	25%	42%	6%	29%	26%
Lynnwood Duplex A	79%	76%	51%	65%	68%
Lynnwood Duplex B	61%	75%	53%	62%	63%
Olympia Duplex A	90%	85%	85%	87%	87%
Olympia Duplex B	53%	86%	75%	81%	74%
Tacoma	36%	35%	31%	43%	36%
Vancouver	80%	92%	73%	79%	81%

Source: DDA Respite and Short-term Services Unit, July 2024

Overnight Planned Respite Services Client Count

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Fiscal Year 2020	96	99	71	0	*266
Fiscal Year 2021	78	56	29	76	*239
Fiscal Year 2021	84	52	36	49	*221
Fiscal Year 2023	68	78	54	76	*276
Fiscal Year 2023	90	97	78	95	*360

Source: DDA Respite and Short-term Services Unit, July 2024

**Some clients may have utilized overnight planned respite on more than one occasion.*

Barriers to accessing overnight planned respite services

- Each OPRS location has different accessibility features and staffing resources. This can impact bed occupancy. Not every OPRS location is suitable for every client. Sometimes the most suitable bed is too far away.
- Some OPRS locations offer 1:1 staff support during awake hours but only shared night support staffing. The shared night support staffing model does not provide enough supervision for adults with more complex medical, behavioral or mental health support needs. OPRS locations that do provide 24-hour staffing tend to be fill up quickly. There are only two OPRS beds statewide offering this level of support.
- OPRS often receives requests for individuals assessed for additional staffing during their respite stay. The current OPRS rates are not sufficient for 2:1 staff support.
- Overnight planned respite services are available only in a few places. Primary caregivers are responsible for getting participants to the respite site. This travel can be far and challenging, sometimes keeping them from using this service.
- Some who need more medical care can't be supported in the community-based respite setting when their medical needs cannot be delegated under Chapter 246-840-910 through 970 WAC, or when a nurse delegator is uncomfortable delegating complex tasks.
- Families and caregivers reserve overnight planned respite beds based on a preferred date. Beds may not be available for the dates requested. An individual or caregiver's preference during busier travel times such as summer months and holidays and weekend use versus weekday use impact bed availability and in turn, monthly bed occupancy rates.



Survey Feedback – Overnight Planned Respite Services

From July 2023 through June 2024, clients’ families or caregivers completed 42 OPRS surveys. Average scores and comments from families and caregivers are included below. Scoring reflects satisfaction with the service and supports during the client’s stay with “1” being low to “5” being high. When looking at the data, there was a general increase in OPRS service satisfaction comparing fiscal year 2023 to fiscal year 2024.

Overnight Planned Respite Survey Results Comparison

Survey Metrics	Fiscal Year 2024	Average Scores
Rate how well were you and your family member treated.	Jul-Dec 2023 Jan-Jun 2024	3.57 3.95
Rate the comfort and cleanliness of the home.	Jul-Dec 2023 Jan-Jun 2024	3.48 4
Rate the provider staff’s understanding of your needs.	Jul-Dec 2023 Jan-Jun 2024	4.43 4.75
Rate the level of communication you received from the provider before and during the stay.	Jul-Dec 2023 Jan-Jun 2024	4.04 4.2
Do you feel the service met your needs?	Jul-Dec 2023	73.91% - Yes 8.7% - Somewhat 13.04% - No 4.35% - N/A
Do you feel the service met your needs?	Jan-Jun 2024	100% - Yes 0% - Somewhat 0% - No 0% - N/A
Were appropriate medication and health care supports provided?	Jul-Dec 2023	65.22% - Yes 26.09% - Somewhat 0% - No 8.7% - N/A
Were appropriate medication and health care supports provided?	Jan-Jun 2024	95% - Yes 0% - Somewhat 0% - No 5% - N/A
If you have accessibility needs, did the home meet your needs?	Jul-Dec 2023	39.13% - Yes 8.7% - Somewhat 4.35% - No 47.83% - N/A
If you have accessibility needs, did the home meet your needs?	Jan-Jul 2024	40% - Yes 0% - Somewhat 0% - No 60% - N/A

Source: Survey Monkey, September 2024

Client and Family Testimonials

- We are so grateful for this break from daily caregiving! Thank you for keeping our daughter safe & secure.
- The staff all seem to have a great time with my son (who prefers to be left alone). They engage him enough that he feels like it is a great place to be and yet he doesn't have to have a lot of conversation which is exhausting for him. He loves going to respite which is very important to me, I love that he enjoys it.
- My son has enjoyed his stays and now asks when he gets to go again.
- The staff is warm & welcoming. I was very scared to try respite, and they completely put me at ease. So much so that we are on our 3rd respite adventure. Prior to this, my mindset was that absolutely no one would ever be taking care of my son aside from myself.
- My son really enjoys his stays there, because of the excellent staff, and they always make it fun for him.
- We were delighted to have Kye have so many opportunities to be in the community and interface with family. Also really appreciated the daily photos.



Summary

Feedback from individuals and families who used OPRS was overall positive, with a high rate of likelihood shown for individuals who desire to access this service in the future. Individuals, caregivers and families continue to express a need for more overnight respite services. DDA continues to focus on increasing exposure of OPRS and communication to afford more clients and caregivers to benefit from this service. We are also committed to developing providers for this service in currently underserved locations to improve access to respite services in local communities across the state to the extent allocated by the Legislature.