Community residential services, supported living in particular, have been woefully underfunded over the last ten years, while RHCs continue to require additional funding every year, trying to stay in compliance with the federal Center for Medicare and Medicaid (CMS) rules, yet failing.

Centers for Medicare and Medicaid (CMS) - EMPHASIS ON COMMUNITY

In Washington State, there are four RHCs; Yakima Valley School is a skilled nursing facility, Rainier School is an Intermediate Care Facility (ICF), Fircrest School and Lakeland Village have both. They are called schools for a reason: they were created as a place for children with I/DD to go learn skills such as getting dressed, sewing, farm chores, etc., then return home. Over the years, parents were encouraged to leave their children at the RHC and move on with their life and now residents, their family members and guardians consider the RHC to be the client’s home. However, in recent years, CMS has re-emphasized the “intermediate” aspect of institutional care. They have told our state “it is the responsibility of the RHC not to house and protect people, but rather to be actively preparing them for leaving the RHC and integrating into the community.”

35% of all persons with intellectual or developmental disabilities have an accompanying psychiatric disorder. We can’t find community placements for people with DD if staff are not paid an appropriate wage for the level of care they provide.

2020 Supplemental Budget Request: $6.9M GF-S

January 2021 - 4% Vendor Rate increase to stay ahead of the minimum wage increase

Last session, the Legislature included a 13.5% rate increase that will be effective January 1, 2020 when the minimum wage will increase by 12.5%. However, a rate increase for the following January 1st minimum wage increase was not included in the budget. This 4% vendor rate increase will compensate for that January 1, 2021 minimum wage increase and keep direct care staff wages above minimum wage.
SAIL believes the goal of residential services is to apply high standards of health, safety and respect to help people with disabilities so they can thrive at home and in the community. We want legislators to please support funding for SOLA and the closure of institutions. People with disabilities want to be in the community utilizing residential services such as supported living.

SAIL is in support of SB 6419—RHC task force recommendations, SB 6387—Uniform guardianship act, SB 1651—DDA Rights bill, HB 5753—Eliminating Sub-minimum Wage and HB 2437—Voting Accessibility. This week we are talking about Residential Services.

HADIT Legislation

SB 6205, which is SEIU legislation entitled Preventing harassment, abuse, and discrimination experienced by long-term care workers. Also, known as the HADIT bill. This bill will affect caregivers that come into the home. The home care union is backing the bill but a lot of self advocates have several issues with the bill.

First, we feel the workgroup that is working through prevention of abuse should have more representation of people with disabilities that receive care. #2 the language around how people with disabilities are being abused is very vague and we aren’t sure if this is necessary until they clarify what they mean. Plus, we feel like advocates and the Union need to discuss how we can work together so that everyone is respected. SAIL voted to oppose most of the bill language but hopes to keep the workgroup to help work through these issues.

Increase Funding for SOLAs NOT Institutions

The Developmental Disabilities Administration (DDA) State Operated Living Alternatives (SOLA) program is a supported living service operated by state employees. One to four persons live together as roommates and share living expenses and staff support. Self-Advocates want to live in the community! We don’t want to feel isolated in hospitals or institutions! Currently, people who move from an RHC (Residential Habilitation Centers) are placed in State Operated Living Alternatives (SOLA) which is a community setting.

Community Inclusion is about creating opportunities for increased presence and participation in the community for all individuals. Community Inclusion demands that we encourage everyone to expect nothing less than that which individuals living without disability look forward to in their lives. This does not happen in institution and hospital settings. We want support staff to help us with our everyday living tasks in inclusive environments like SOLAs.

An environment of inclusiveness makes it possible for a diverse group of people to function together on common factors of unique characteristics of each person. An inclusive and equitable culture demonstrates behaviors that value and respect individuals and groups with different backgrounds as well as recognizing the specific challenges and circumstances experienced by these different groups. SOLA supports individuals based on personal needs. This assists them to reach their full potential to live in, contribute to and participate in their communities.

Increase Funding for Supported living

Supported living is an opportunity for adults with developmental disabilities to choose where, how and with whom they live. People receive personalized supports needed to maintain their own private home. Through supported living, People with disabilities can receive supports to live in their own homes. Care providers are the backbone for many people with disabilities! We need to make sure that providers receive wages that they are able to live on. People with disabilities want their caregivers to be able to stay in their jobs and provide quality care for us over a long period of time.