

**SPOKANE COUNTY COMMUNITY SERVICES, HOUSING,
AND COMMUNITY DEVELOPMENT DEPARTMENT
DEVELOPMENTAL DISABILITIES DIVISION**

ADULT SERVICES QUESTIONS

Each response should be no more than 200 words.

Please respond with each of the following:

1. Description of the agency's qualifications, experience, and philosophy of services to adults with developmental disabilities.
2. Description of examples of how your agency will provide services in accordance with the County Guide to Achieve Developmental Disability Administration's Guiding Values.
3. Description of how your agency develops, implements, and reviews individualized service plans for people enrolled, addressing the person's preferences, strengths, and support needs. Describe how information is gathered, how plan is implemented, and how goals identified in the plan are reviewed and revised, depending on plan outcomes.
4. Description of how your agency will increase community inclusion for people with developmental disabilities.
5. Description of how your agency will participate in activities that promote networking and collaboration among agencies serving adults with developmental disabilities.
6. Description of how your agency includes program participants and others relevant to agency policy development, ongoing agency operations, and in evaluating agency performance.
7. Description of your agency's internal quality control and quality improvement process for services to be provided, including how agency performance information is gathered, reviewed, and how information is used to improve agency performance.
8. Description of how your agency will ensure that potential conflicts of interest will not arise. Such a conflict will arise when any employment or day program provider is a guardian, legal representative, or another decision maker for the client. A conflict may also arise when any employee of the agency is the decision maker for, or a family member of, a client of the agency. In these situations, the provider must document the measures taken specific to the situation to assure that a conflict of interest does not exist.

If requesting qualification for Employment Services, please respond with each of the following:

1. Description of how your agency will provide services through the Washington Department of Social and Health Services (DSHS) Division of Vocational Rehabilitation (DVR) funding.
2. Description of how your agency has experience developing, obtaining, and maintaining successful placements in paid employment at minimum wage, or better, in community-based businesses.
3. Description of your agency's plan to increase the diversity of community employers and the wide variety of valued jobs.
4. Description of your agency's plan to increase the number of quality jobs available for people with significant support needs.
5. Description of your agency's plan to increase employer's awareness regarding the work capabilities of people with developmental disabilities.

If requesting qualification for Community Access, please respond with the following:

1. Description of your agency's experience in providing service in an integrated community setting that supports contribution by the client with local community members who are not paid to be with that person.