

Chapter 246-337 WAC Residential treatment facility

Last Update: 5/30/08

- [246-337-001](#) Scope and purpose.
- [246-337-005](#) Definitions.
- [246-337-010](#) Initial licensure and renewal process.
- [246-337-015](#) Service categories.
- [246-337-020](#) Responsibilities and rights of the licensee and department.
- [246-337-025](#) ~~Alternative Means and Methods of Compliance~~
~~Exemptions and alternative methods.~~
- [246-337-030](#) Retroactivity.
- [246-337-035](#) Procedures to deny, suspend, modify or revoke a license.
~~New Section: Construction Review Services-submission plan requirements~~
- [246-337-040](#) Review of construction documents and functional program.
- [246-337-045](#) Governance and administration.
- [246-337-xxx](#) Quality Improvement
- [246-337-050](#) Management of human resources.
- [246-337-055](#) Personnel criminal history, disclosure, and background inquiries.
- [246-337-060](#) Infection control.
- [246-337-065](#) Health and safety.
- [246-337-070](#) Emergency disaster plan.
- [246-337-075](#) Resident rights.
- [246-337-080](#) Resident care services.
- [246-337-085](#) Admitting child with a parent in treatment.
- [246-337-090](#) Food and nutrition services.
- [246-337-095](#) Resident health care records.
- [246-337-100](#) Health care plan.
- [246-337-105](#) Medication management.
- [246-337-110](#) Use of seclusion and restraint.
- [246-337-115](#) Cleaning, maintenance and refuse disposal.
- [246-337-120](#) Facility, environment, and space requirements.
- [246-337-125](#) Toilet rooms and bathrooms.
- [246-337-130](#) Water supply, sewage and waste disposal.
- [246-337-135](#) Heating, ventilation and air conditioning.
- [246-337-140](#) Lighting, emergency lighting, and electrical outlets.
- [246-337-145](#) Laundry.

[246-337-150](#) Resident rooms, furnishings and storage.

[246-337-155](#) Pet management and safety.

[246-337-990](#) Licensing fees.

246-337-001

Scope and purpose.

- (1) This chapter implements chapter [71.12](#) RCW and sets the minimum health and safety standards for licensure and operations of twenty-four hour private, county or municipal residential treatment facilities (RTF) providing health care services to persons with mental disorders or substance abuse.
- (2) Additionally, these rules apply to residential treatment facilities licensed by the department of health under chapter [71.12](#) RCW and certified by the department of social and health services under chapter [71.05](#) RCW (Mental illness), chapter [70.96A](#) RCW (Treatment for alcoholism, intoxication and drug addiction), and chapter [71.34](#) RCW (Mental health services for minors).
- (3) These rules are intended to supplement other applicable federal, state and local laws, rules and ordinances. If any provision of this chapter is more restrictive than local codes and ordinances this chapter shall prevail over any less restrictive provision.

~~(4) [These rules apply to Triage Facilities licensed by the department of health under chapter 71.12 RCW and certified by the department of social and health services under chapter 71.24.035.](#)~~

[h1]

246-337-005

Definitions.

For the purpose of this chapter, the following words and phrases have the following meanings unless the context clearly indicates otherwise:

- (1) "**Administrator**" means an individual person responsible for managing the day-to-day operations of the RTF.
- (2) "**Adult**" means an individual age eighteen years or older.
- (3) "**Approved**" means approved by the department, unless otherwise specified.
- (4) "**Authorized**" means mandated or permitted, in writing, by the administrator to perform an act that is within a health care provider's lawful scope of practice, or that was lawfully delegated to the health care provider or to the unlicensed staff member.
- (5) "**Automated Drug Dispensing Device**" means automated equipment used for remote storage and distribution of medication for use in resident care. The system is supported by an electronic data base and meets WA Board of Pharmacy and DEA requirements.
- (6) "**Bathroom**" means a room containing at least one bathtub or shower.
- (7) "**Chemical dependency**" means alcoholism, drug addiction, or dependence on alcohol and one or more other psychoactive chemicals, as the context requires.
- (8) "**Chemical dependency RTF**" means all or part of an RTF certified by DSHS-[Division of Behavioral Health and Recovery \(DBHR\)](#) under chapter 70.96A RCW, that provides twenty-four hour evaluation,

stabilization and treatment services for persons with chemical dependency within one or more of the following service categories

- (a) "Acute detoxification" as defined in chapter 388-805 WAC;
- (b) "Sub acute detoxification" as defined in chapter 388-805;
- (c) "Intensive inpatient services" as defined in chapter 388-805;"
- (d) "Long term treatment services" as defined in chapter 388-805 WAC;
- (e) "Recovery house services" as defined in chapter 388-805.

- (9) "Child" or "minor" means an individual under the age of eighteen.
- (10) "Communicable disease" means a disease caused by an infectious agent that can be transmitted from one person, animal, or object to another individual by direct or indirect means including transmission via an intermediate host or vector, food, water or air.
- (11) "Confidential" means information that may not be disclosed except under specific conditions permitted or mandated by law or legal agreement between the parties concerned.
- (12) "Controlled Substance" means a drug, substance, or immediate precursor of such drug or substance, so designated under or pursuant to chapter 69.50 RCW, in the uniform controlled substances act. And includes Schedules I through V as set forth in federal or state laws.
- (13) "Construction" means:
- (a) The erection of a facility;
 - (b) An addition, modification, alteration or change of an approved use to an existing facility; or
 - (c) The conversion of an existing facility or portion of a facility for use as a RTF.
- ~~(14)~~ "Crisis Stabilization Unit" need definition
- ~~(15)~~ "DEA" means Drug Enforcement Administration in the United States Department of Justice, or its successor agency.
- ~~(16)~~ "DEA registrant" means a practitioner authorized by WA State under their scope of practice to handle controlled substances and who by successfully registering with the DEA is granted federal authority to handle for responsibility of controlled substances.
- ~~(17)~~ "DEL" means Department of Early Learning.
- ~~(18)~~ "Department" means the Washington state department of health.
- ~~(19)~~ "DSHS-DBHR" means the Washington state department of social and health services, division of behavioral health and recovery-recovery services.
- (19) "Detoxification-acute" means provision of medical and nursing care services in a nonhospital community based residential setting for residents who are intoxicated and/or withdrawing from alcohol and other drugs. The services provided include 24 hour nursing services for observation, monitoring, treatment and medication administration. Healthcare prescribers are available for assessment and treatment orders. The population served may be individuals with co-occurring health conditions that would be impacted by the detoxification process.
- (20) "Detoxification-sub acute" means social setting detoxification. The services provided include 24 hour supervision, observation and support for those who are intoxicated or are withdrawing from alcohol and other drugs. The services are provided in a community based residential non medical setting. The non medical staff's providing the services are trained to facilitate provide self administration of medication, monitoring, observation and support. The staff recognize when resident symptoms require transfer to a higher level of care. This level of detoxification is appropriate for individuals who are able to participate in daily residential activities.

- (21) "DOSH" means Department of Occupational Safety and Health which is a part of the Department of Labor and Industries (L&I) that develops safety and health rules. -Its scope under 49.19 Safety in Health Care Settings for safety and health includes evaluation and treatment facilities and community mental health programs. Trainings include: general safety, violence escalation, de-escalation, restraining and reporting incidents.
- (21)
- (22) "Emergency health care" means services provided consistent with the health care needs of the resident for an acute illness, injury, or unexpected clinical event as determined by an authorized health care prescriber.
- (23) "Emergency drug starter supplies" means legend drugs, including controlled substances available in a facility administered to a resident after obtaining a health prescribers order for the drug.
- (24) "Facility" means a building or portion of a building.
- (25) "First aid" means care for a condition that requires immediate assistance from an individual trained and certified in first-aid procedures.
- (26) "Hand hygiene" means hand washing using soap and water and/or, antiseptic hand wash, using antimicrobial gels.
- (27) "Health" means a state of complete physical and mental well-being and not merely the absence of disease or infirmity.
- (28) "Health assessment" means a systematic examination of the person's body conducted by an authorized health care prescriber or RNs and LPNs within their scope of practice. -Health care prescribers include MDS, ARNPs and PAs.
- (29) "Health care" means any care, service, or procedure provided by a health care provider to diagnose, treat, or maintain a resident's physical or mental condition, or that affects the structure or function of the human body.
- (30) "Health care provider" means an individual who is licensed, registered or certified under Title 18 RCW to provide health care within a particular profession's statutorily authorized scope of practice.
- (31) "Health care prescriber" means a MD, ARNP, PA or any other authorized person who by law can prescribe drugs in Washington State.
- (32) "Health care screen" means the process approved by an authorized health care provider to determine the health care needs of a resident. This process may be performed by persons who are not health care providers.
- (33) "Legend drugs" means any drugs which are required by state law or regulation of the state board of pharmacy to be dispensed by prescription only or are restricted to use by health care prescribers only.
- (34) "Licensee" means the person, corporation, association, organization, county, municipality, public hospital district, or other legal entity, including any lawful successors thereto to whom the department issues a RTF license.
- (35) "Medication" means a legend drug prescribed for a resident by authorized health care prescriber or nonprescription drugs, also called "over-the-counter medications," that can be purchased by the general public without a prescription.
- (36) "Medication administration" means the direct application of a medication or device by ingestion, inhalation, injection, or any other means, whether self-administered by a resident, or administered by a parent or guardian (for a minor), or an authorized health care provider.

- (37) **"Medication self-administration"** or **"self-medication administration"** means a process by which each resident obtains his/her container of medication from a supervised and secure storage area, removes the dose needed and ingests or applies the medication as directed on the label while being observed by staff.
- (38) **"Medication error"** includes any failure to administer or receive a medication according to an authorized health care provider's order, or according to the manufacturer's directions for nonprescription drugs.
- (39) **"Medication protocol"** means a specific group of orders to be used for specific symptoms for specific residents and authorized by a health care prescriber (MD, ARNP, and PA). The protocol would be placed in the resident's medical record for reference. The order implementing the protocol would be an authenticated order. If the protocol has medications included, the medication administration record would reflect the medications, dosages and parameters for use.
- (40) **"Mental health RTF"** means all or part of a RTF providing twenty-four hour evaluation, stabilization and treatment services for persons with a mental disorder and certified by DSHS under chapters 71.05 or 71.34 RCW, within one or more of the following service categories:
- (a) **"Adult residential treatment"** as defined in chapter 388-865 WAC;
 - (b) **"Inpatient evaluation and treatment"** as defined in chapter 388-865 WAC;
 - (c) **"Child inpatient evaluation and treatment"** as defined in chapter 388-865 WAC.
 - (d) **"Child long-term inpatient treatment"** as defined in chapter 388-865 WAC.
 - (e) **"Triage Facility"** as defined under RCW 71.5.020; 150; 153 and 71.24.035020 and; WAC 388-865
 - (f) **"Crisis Stabilization" a Unit's** defined under RCW 71.05 and chapter 388-865 WAC.
- (41) **"Parent"** means:
- (a) A biological or adoptive parent who has legal custody of the child, including either parent if custody is shared under joint custody agreement; or
 - (b) An individual or agency judicially appointed as legal guardian or custodian of the child.
- (42) **"Quality or Process Improvement"** means process to improve the quality of care provided to residents and to identify and prevent poor resident outcomes.
- (43) **"Resident"** means an individual (adult or child) admitted to the RTF licensed under this chapter.
- (44) **"Residential treatment facility"** or **"RTF"** means a facility for purposes of evaluation and treatment or evaluation and referral of any individual with a chemical dependency or mental disorder.
- (45) **"Restraint"** means a continuum of methods used to prevent or limit free body movement, including medications.
- (46) **"Room"** means a space set apart by floor to ceiling partitions on all sides with all openings provided with doors or windows.
- (47) **"Seclusion"** means the involuntary confinement of a resident alone in a room or area from which the resident is physically prevented from leaving.
- (48) **"Sink"** means a properly trapped plumbing fixture, capable of holding water, with approved potable hot and cold running water under pressure.
- (49) **"Survey"** means an inspection or investigation conducted by the department to evaluate and monitor a licensee's compliance with chapter 71.12 RCW and this chapter.
- (50) **"Toilet room"** means a room containing a water closet (toilet).
- (51) **"Triage facility"** means a short term facility or portion of a facility licensed by the department of health and certified by the department of social and health services under 71.24.035, which is designed as a facility to assess and stabilize an individual or determine the need for involuntary commitment, and

must meet department of health residential treatment facility standards. A triage facility may be structured as a voluntary or involuntary placement facility.

(52) "WISHA" means the state of Washington Industrial Safety and Health Act, chapter [49.17 RCW](#), administered by the Washington state department of labor and industries.

246-337-010

Initial licensure and renewal process.

- (1) **Initial:** An applicant for an initial RTF license must submit to the department, sixty days or more before starting:
 - (a) A completed application on form(s) provided by the department, signed by the owner or legal designee, including:
 - (i) The identity of each officer and director, or their equivalent, of the licensee;
 - (ii) Disclosure statements and criminal history background checks obtained within three months of the application date for the administrator in accordance with chapter [43.43 RCW](#);
 - (iii) The license fee specified in WAC [246-337-990](#); and
 - (iv) A reduced floor plan on 8-1/2 x 11 size paper that shows each room within the facility in a manner that is easily seen and understood.
 - (b) Evidence of applicant's compliance with chapter [71.12 RCW](#) and this chapter including:
 - (i) The department approved construction documents and functional program plan;
 - (ii) Documentation of application for certification by DSHS under chapter [71.05 RCW](#) (Mental illness), chapter [70.96A RCW](#) (Treatment for alcoholism, intoxication and drug addiction), or chapter [71.34 RCW](#) (Mental health services for minors);
 - (iii) Approval of the chief of the Washington state patrol, through the director of fire protection, as required by RCW [71.12.485](#) and chapter [212-12 WAC](#);
 - (iv) Compliance with all applicable federal, state and local laws, rules, and codes; and
 - (v) Completion of an initial review and approval of facility policies and procedures.
 - (vi) An on-site operational survey will be conducted after the facility is caring for residents. The number of approved resident beds will be validated. See 040-(4)(ce).
 - (c) Other information as required by the department.
- (2) If the applicant has met all requirements for licensure set forth in subsection (1) of this section, the department shall issue a RTF license (listing the service categories). An RTF license is effective for one year from the date it is issued.
- (3) **Renewal:** At least thirty days before the expiration date of the current license, the licensee must submit to the department:
 - (a) A completed application on form(s) provided by the department;
 - (b) Disclosure statements and criminal history background checks obtained within three months of the renewal date for the administrator in accordance with chapter [43.43 RCW](#);
 - (c) The fee specified in WAC [246-337-990](#);
 - (d) Documentation satisfactory to the department of licensee's compliance with chapter [71.12 RCW](#) and this chapter, including the following:
 - (i) Compliance with rules adopted by the chief of the Washington state patrol, through the director of fire protection, as required by RCW [71.12.485](#) and chapter [212-12 WAC](#);
 - (ii) Compliance with all applicable federal, state and local laws, and rules; and
 - (e) Other information as required by the department.
- (4) At least sixty days prior to changing any of the license service categories, number of resident beds, location or use of rooms as listed on the licensed room list, or the physical structure of the RTF, the licensee must:
 - (a) Notify the department in writing of the intended change;
 - (b) Request the department to determine the need for review by the department's construction review services; and

- (c) If the change involves an approved increase in beds, the licensee must pay a fee under WAC [246-337-990](#);
 - (5) At least sixty days prior to selling, leasing, renting or otherwise transferring control of a license, that results in a change of the Uniform Business Identifier Number (UBI #), the licensee must submit to the department:
 - (a) The full name and address of the current licensee and prospective licensee;
 - (b) The name and address of the licensed RTF and the name under which the RTF will operate;
 - (c) Date of the proposed change;
 - (d) Plans for preserving resident records, consistent with WAC [246-337-095](#); and
 - (e) Other information required by the department.
 - (6) A prospective new RTF owner shall apply for licensure by complying with subsection (1) of this section.
 - (7) A RTF license is not transferable.
-

246-337-015
Service categories.

A licensee may provide services under a single RTF license for one or more of the following service categories:

- (1) Chemical dependency acute detoxification;
 - (2) Chemical dependency subacute detoxification;
 - (3) Chemical dependency intensive inpatient;
 - (4) Chemical dependency long-term treatment;
 - (5) Chemical dependency recovery house;
 - (6) Mental health adult residential treatment (includes crisis services for twenty-four hours or more);
 - (7) Mental health inpatient evaluation and treatment;
 - (8) Mental health child long-term inpatient treatment;
 - (9) Mental health child inpatient evaluation and treatment.
 - (10) [Triage Facility](#)
 - (11) [Crisis Stabilization Unit](#)
-

246-337-020
Responsibilities and rights of the licensee and department.

- (1) The licensee must:
 - (a) Comply with chapter [71.12](#) RCW and this chapter;
 - (b) Maintain and post in a conspicuous place on the premises:
 - (i) A current RTF license; and
 - (ii) The name, address and telephone number of the department, appropriate resident advocacy groups, and description of ombudsman services;

- (c) Provide services limited to each service category that appears on the RTF license;
 - (d) Maintain the occupancy level at or below the licensed resident bed capacity of the RTF;
 - (e) Cooperate with the department during on-site surveys;
 - (f) Respond to a statement of deficiencies by submitting to the department:
 - (i) Within ten working days of receipt, a written plan of correction for each deficiency cited that includes a target date and is subject to approval by the department; and
 - (ii) A written progress report attesting to the final completion of the correction of deficiencies identified in the plan of correction.
 - (g) Notify department in writing when there is a change in administrator.
- (2) The department shall:
- (a) Issue or renew a license when the applicant or licensee meets the requirements in chapter [71.12](#) RCW and this chapter;
 - (b) List, in writing, the service category(ies) the RTF is licensed to provide under this chapter;
 - (c) Verify compliance with RCW [71.12.485](#) and chapter [212-12](#) WAC administered by the Washington state patrol fire marshal fire protection service;
 - (d) Verify compliance with applicable state and local codes;
- (3) The department may issue a single RTF license to include two or more RTF (campus), if the applicant or licensee:
- (a) Meets the licensure requirements of chapter [71.12](#) RCW and this chapter; and
 - (b) Operates the multiple RTF as a single integrated system with:
 - (i) Governance by a single authority or body over all buildings;
 - (ii) All services provided by an integrated staff; and
- (4) Conduct on-site surveys. After completing a survey, the department may:
- (a) Give the administrator a written statement of deficiencies identifying failure to meet specific requirements of chapter [71.12](#) RCW and this chapter observed during an on-site survey;
 - (b) Obtain, review, and approve written plan of correction with dates to be completed;
 - (c) Review the progress report attesting to correction of deficiencies;
 - (d) Conduct a follow up on-site assessment at the discretion of the department;

246-337-025

Exemption or Exemptions and an Alternative means and methods of compliance.

- (1) An applicant or licensee may request an exemption or exemption-alternative means or method of compliance from any part of this chapter by submitting a written request to the department, including:
 - (a) The specific section, or sections, of rules for which the exemption is requested;
 - (b) An explanation of the circumstances involved;
 - (c) A proposed alternative that would ensure the safety and health of residents meeting the intent of the rule; and
 - (d) Any supporting research or other documentation.
- (2) After review and consideration, the department may grant an exemption the request if the exemption does not:
 - (a) Negate the purpose and intent of these rules;
 - (b) Place the safety or health of the residents in the RTF in jeopardy;
 - (c) Reduce any fire and life safety or infection control laws or rules; or
 - (d) Adversely affect the structural integrity of a facility.
- (3) The department will send a copy of the exemption decision to the licensee, and shall maintain the exemption as part of the current RTF file. The licensee shall maintain the documented exemption decision on file in the RTF.

246-337-030

Retroactivity.

Any construction on or after the effective date of this chapter must comply with this chapter. RTFs that are licensed and operating on the effective date of this chapter may continue to operate without modifications to the facility, unless specifically required under this chapter, or as deemed necessary by either the local building official, the department, other licensing regulators, the state fire marshal, for the general safety and welfare of the occupants and public.

246-337-035

Procedures to deny, suspend, modify or revoke a license.

- (1) The department may deny, suspend, modify, or revoke a RTF facility license under chapters [71.12](#), [43.70](#), [34.05](#) RCW and [246-10](#) WAC, if the applicant or licensees have:
 - (a) Been denied a license to operate a health care, child care, group care or personal care facility in this state or elsewhere, had the license suspended or revoked, or been found civilly liable or criminally convicted of operating the facility without a license;
 - (b) Committed, aided or abetted an illegal act in connection with the operation of any RTF or the provision of health care or residential services;
 - (c) Abandoned, abused, neglected, assaulted, or demonstrated indifference to the welfare and well-being of a resident;
 - (d) Failed to take immediate corrective action in any instance of assault, abuse, neglect, or indifference to the welfare of a resident;
 - (e) Retaliated against a staff member, resident or other individual for reporting suspected abuse or other alleged improprieties;
 - (f) Failed to comply with any of the provisions of chapter [71.12](#) RCW or this chapter; or
 - (g) Failed to meet DSHS certification standards under chapters [71.05](#), [70.96A](#) and [71.34](#) RCW.
- (2) An applicant or licensee may contest a disciplinary decision or action of the department under RCW [43.70.115](#), chapters [34.05](#) RCW and [246-10](#) WAC.
- (3) The department may summarily suspend a license pending a proceeding for revocation or other action if the department determines a deficiency is an imminent threat to a resident's health, safety, or welfare.
- (4) In addition to any other rights allowed under applicable law, the department may address violations by an applicant or a licensee of chapter [71.12](#) RCW or this chapter by:
 - (a) Offering a plan of correction if the department determines that identified deficiencies are not major, broadly systemic, or of a recurring nature. Under this chapter, a "plan of correction" is a proposal devised by the applicant or licensee and approved by the department, that includes specific corrective actions that must be taken to correct identified deficiencies and a time frame in which to complete them. Implementation is required within the approved time frame, and is subject to verification by the department;
 - (b) Offering a directed plan of correction if the department determines that identified deficiencies are broadly systemic, recurring, or of a significant threat to public health and safety. Under this chapter, a "directed plan of correction" is a plan of correction based on a statement of deficiencies, and includes specific corrective actions that must be taken and a time frame in which to complete them. Under this chapter, a "statement of deficiencies" is a survey or investigation report completed by the department identifying one or more deficiencies. The final content of the directed plan of correction will be reached during meetings between the department and the licensee, following an initial statement of general requirements by the department. Timelines will be reduced to the minimum necessary, even prior to formalization of the directed plan of correction, to redress problems;
 - (c) Initiating administrative action, under chapter [34.05](#) RCW, RCW [43.70.115](#) and chapter [246-10](#) WAC, either as the department's primary alternative, or in the event the department requires corrective action under (a) or (b) of this subsection, and the applicant or licensee fails to correct identified deficiencies to the department's satisfaction within the approved time frame; and/or
 - (d) Taking administrative action initiated under chapter [34.05](#) RCW:

- i. An administrative action may result in a hearing before a presiding officer and the issuance of formal findings and a directed order;
- ii. The administrative action and any resulting order constitute formal action under the provisions of chapter 34.05 RCW.

~~New Section Construction~~ Section Construction Review Services-submission requirements (in the March 30,12 rules workshop-the stakeholders wanted to remove this whole section-they felt that the way it reads currently would require them to call and wait for CRS to replace lights, washing machines etc.) I sugges that we combine (1) (2) (3) without the detail in i, ii, iii , iv, v, vi, vii. And add to 246-337-040 and title the section Construction and Review Services-Requirements for submission ; review of construction documents and functional program

- (1) The licensee or applicant must submit plans to construction review services as directed by construction review services and consistent with WAC 246-337 for approval prior to beginning any construction.
 - (a) A new building or portion thereof to be used as a RTF.
 - (b) An addition of, or modification or alteration to an existing RTF, including but not limited to the RTF's
 - i. Physical structure
 - ii. Electrical fixtures or systems
 - iii. Mechanical equipment or systems;
 - iv. Fire alarm fixtures or systems;
 - v. Carpeting;
 - vi. Wall coverings 1/28 inch thick or thicker; or
 - vii. Kitchen or laundry equipment
 - © A change in the department approved use of an existing RTF or portion of the RTF; and
 - (c) An existing building or portion thereof to be converted for use as a RTF.

~~((2) The plans must provide an analysis of likely adverse impacts on current RTF residents and plans to eliminated or mitigate such adverse impacts.~~

~~(3)A person or RTF does not need to notify construction review services of the following:~~

- (a) ~~Repairs or maintenance of equipment, furnishings or fixtures;~~
- (b) ~~Replacement of equipment, furnishings or fixtures with equivalent equipment furnishings or fixtures;~~
- (c) ~~Repair or replacement of damaged construction if the repair or replacement is performed according to construction documents approved by construction review services within eight years preceding the current repair or replacement~~
- (d) ~~Painting or~~
- (e) ~~Cosmetic changes that do not affect resident activities, services, or care and are performed in accordance with the current edition of the building code.~~

246-337-040

Construction and Review Services-Requirements for submission; review of construction documents and functional program.

- (1) The licensee or applicant must submit plans to construction review services as directed by construction review services consistant with WAC 246-337 for approval prior to beginning any construction.
- (2) Construction includes: a new building or portion thereof to be used as an RTF; an addition or modification or alteration to an existing RTF.
- (3) Prior to beginning any construction or remodeling, the applicant or licensee must submit an application and fee, if applicable, to the department and receive written authorization by the department to proceed.
- (4)) The plans must provide an analysis of likely adverse impacts on current RTF residents and plans to eliminated or mitigate such adverse impacts.

~~(1) Prior to beginning any construction or remodeling, the applicant or licensee must submit an application and fee, if applicable, to the department and receive written authorization by the department to proceed.~~

(52) The licensee or applicant must submit a written functional program, in accordance with RCW [71.12.470](#), outlining the service categories and types of residents to be served and how the needs of the residents will be met including, but not limited to [a narrative description of:](#)

- (a) Program goals;
- (b) Staffing and health care to be provided;
- (c) Infection control;
- (d) Security and safety;
- (e) Seclusion and restraint;
- (f) Laundry;
- (g) Food and nutrition; and
- (h) Medication.

(2) (3) (6) The licensee or applicant must submit accurate, timely, and complete construction documents that comply with all governing rules.

(3) (7) Construction documents must include:

- (a) Drawings prepared, stamped, and signed by an architect licensed by the state of Washington under chapter [18.08](#) RCW. The services of a consulting engineer licensed by the state of Washington may be used for the various branches of the work, if appropriate; and
- (b) Drawings with coordinated architectural, mechanical, and electrical work drawn to scale showing complete details for construction, including:
 - (i) Site plan(s) showing streets, driveways, parking, vehicle and pedestrian circulation, utility line locations, and location of existing and new buildings;
 - (ii) Elevations, sections, and construction details;
 - (iii) Schedule of floor, wall, and ceiling finishes;
 - (iv) Schedules of doors and windows - sizes and type, and door finish hardware;
 - (v) Mechanical systems - plumbing and heating/venting/air conditioning; and
 - (vi) Electrical systems, including lighting, power, and communication/notification systems;

[© Dimensional floor plans with the function of each room and fixed/required equipment designated: Document a, a department approved room list identifying resident rooms, the dimensions and calculated square footage of each room, the number of approved resident beds, and other information related to the licensed resident bed capacity. This list will be kept as part of the RTF licensure file©](#)

(d) Specifications that describe with specificity the workmanship and finishes; and

(e) Shop drawings and related equipment specifications for:

- (vii) An automatic fire sprinkler system when required by other codes; and
- (viii) An automatic fire alarm system when required by other codes.

[Insert 246-320-505\(2\)\(c\)\(i\)\(C\) language here specific to I/C during construction](#)

(4) (8) A license may not be issued for a new RTF, a new facility within an RTF, or changes in resident bed capacity or licensed service category(ies) for a currently licensed RTF, without written approval from the department's construction review services unit and residential care services program.

(5) (9) The applicant or licensee must:

- (a)(c) Comply with the standards as adopted by the Washington state building code council;
- (b)(d) Assure conformance to the approved plans during construction;
- (e)(e) Submit addenda, change orders, construction change directives or any other deviation from the approved plans prior to their installation;
- (d)(f) Provide a written construction project completion notice to the department indicating:

- (i) The completion date; and
 - (ii) The actual construction cost;
- (e)(g) Make adequate provisions for the health, safety, and comfort of residents during construction projects.
-

246-337-045

Governance and administration.

The licensee must establish a governing body with responsibility for operating and maintaining the RTF. The governing body must provide organizational guidance and oversight to ensure that resources support and staff provides safe and adequate resident care including, but not limited to:

- (1) Adopting, periodically reviewing at least every two years., and updating as necessary, policies that:
 - (a) Govern the organization and functions of the RTF including:
 - (i) A brief narrative explaining the scope of services provided;
 - (ii) An organization chart specifying the governing body, staff positions, and number of full- or part-time persons for each position; and
 - (iii) A policy addressing that sufficient resources such as personnel, facilities, equipment, and supplies are provided to meet the needs of the population served;
 - (b) Provide a process for communication and conflict resolution for both staff and residents; and
 - (c) Provide clear lines of authority for both management and operation of the RTF.
- (2) Establishing procedures for selecting and periodically evaluating a qualified administrator to assure that he or she carries out the goals and policies of the governing body. The administrator must:
 - (a) Be qualified through appropriate knowledge, experience and capabilities to supervise and administer the services properly;
 - (b) Be available, or assure that a designated alternate who has similar qualifications is available, one hundred percent of the time, either in person, by telephone or electronic pager (or similar electronic means), to carry out the goals, objectives and standards of the governing body.
- (3) Establishing written policies and procedures that implement all applicable rules, which are routinely reviewed by the administrator and the governing body to ensure they are kept current, made known to staff, made available at all times to all staff, and are complied with within the RTF.
- (4) Establishing a personnel system that assures:
 - (a) Personnel records of all employees and volunteers contain written job descriptions consistent with staff responsibilities and standards for professional licensing;
 - (b) Staff are assigned, oriented, trained, supervised, monitored, and evaluated;
 - (c) Staff who provide direct resident care, direct treatment, or manage the safety of a resident are competent by training, experience and capability;
 - (d) Contractors have current contracts on file clearly stating the responsibilities of the contractor;
 - (e) Staff with unsupervised access to residents complies with WAC 246-337-055.
- (5) Establishing a RTF-wide approach to a coordinated quality improvement program for resident care services under chapter 71.12 RCW addressing health and safety.

The RTF stakeholder group did not want major additions to the quality improvement section; they suggested that if there are issues with facilities not performing there should be enforcement action; additionally, they do not want duplication of efforts by DSHS-DBHR, Accrediting Agencies or Contracts-they suggest only requiring by rule reporting to DOH of DOH issues only (this predicated on DSHS DBHR continuing to share facility incidents with DOH.

246-337-xx New Section Quality Improvement

The licensee must establish a RTF wide approach to a coordinated quality improvement program for resident care services under chapter 71.12 RCW addressing health and safety.

The licensee must establish policies and procedures to ensure ongoing maintenance of a coordinated quality improvement program to improve the quality of care provided to residents and to identify and prevent negative resident and facility outcomes.

An RTFAn RTF must:

- (1) Establish a facility wide approach for performance measurement, assessment, and to improve resident care services including but not limited to:
 - a. A written performance improvement plan that is periodically evaluated;
 - b. Performance improvement activities that are interdisciplinary and include at least one member of the governing authority;
 - c. Prioritize performance improvement activities; implement, maintain (ongoing) and monitor actions taken to improve performance
- (2) Collect, measure, and assess data on processes and outcomes related to resident care and the environment including but not limited to:
 - a. Medication errors or incidents
 - b. Death
 - c. Injuries which result in a negative resident health outcomes
 - d. Restraint and/or seclusion use
 - e. Resident grievances
 - f. Risk management activities
- (3) Review serious or unanticipated resident or facility events in a timely manner.
- (4) Report to the department and other regulatory agencies serious or undesirable resident outcomes within 24 hours including but not limited to:
 - (a) allegation of abuse;
 - (b) elopement;
 - (c) death ;
 - (d) suicide;
 - (e) injuries resulting in hospitalization;
 - (f) mandated reporting;
 - (g) controlled substance incidents;
 - (h) major disruption of services through internal or external emergency or disaster events
- (5) ~~When reporting to the DOH complaint intake line the following:~~
 - a. ~~Name~~
 - b. ~~Details of the incident or event~~
 - c. ~~Facility actions taken and immediate changes to facility programming~~
 - d. ~~Additional agencies or entities reported to~~

246-337-050

Management of human resources.

The licensee must ensure residents receive health care by adequate numbers of staff authorized and competent to carry out assigned responsibilities, including:

- (1) A sufficient number of personnel must be present on a twenty-four hour per day basis to meet the health care needs of the residents served; managing emergency situations; crisis intervention, implementation of health care plans; and required monitoring activities.
- (2) Personnel trained, authorized and credentialed (where applicable) to carry out assigned job responsibilities consistent with scopes of practice, resident population characteristics and the resident's individual plan of care/treatment;
- (3) The presence of at least one individual trained in basic first aid and age appropriate cardiopulmonary resuscitation twenty-four hours per day.
- (4) Written documentation to verify credentials, training, and performance evaluations for each staff member including, but not limited to:
 - (a) Employment application/hire date;
 - (b) Verification of education, experience and training;
 - (c) Current job description;
 - (d) Criminal disclosure statement and results of a Washington state patrol background inquiry;

- (e) HIV/AIDS training or verification;
 - (f) Current license/certification/registration (if applicable);
 - (g) Current basic first aid and age appropriate cardiopulmonary resuscitation training (if applicable);
 - (h) Current food and beverage service worker permit (if applicable);
 - (i) Current driver's license (if applicable);
 - (j) [Initial and ongoing tuberculosis screening according to facility risk assessment and tuberculosis written plan](#) (refer to WAC [246-337-060](#));
 - (k) Performance evaluation(s);
 - (l) Staff using restraint and seclusion procedures must receive initial and ongoing education and training in the proper and safe use of seclusion and/or restraints;
 - (m) Initial orientation and ongoing training to address the safety and health care needs of the population served.
- (5) If independent contractors, consultants, students, volunteers and trainees are providing direct on-site residential care, the licensee must ensure their compliance with this section.

246-337-055

Personnel criminal history, disclosure, and background inquiries.

The licensee must ensure that all staff, independent contractors, consultants, students, volunteers and trainees with unsupervised access to residents are screened for criminal history disclosure and background requirements consistent with RCW [43.43.830](#) through [43.43.842](#).

246-337-060

Infection control.

[Check with DOH TB control the status of the TB recommendations that would be relevant for all services types within the RTF license. RTF stakeholders want this simpler, as even DSHS DBHR is going to screening according to risk assessment.](#)

The licensee must ensure each resident's care is provided in an environment that prevents the transmission of infections and communicable disease among residents, staff, and visitors including:

- (1) Implementing and maintaining an infection control program by assignment of responsibility for infection control and monitoring to a specified staff member.
- (2) Maintaining an infection control program that includes adoption and implementation of written policies and procedures for:
 - (a) Meeting the standards as outlined in the most recent edition of the department's *Human Immune Deficiency Virus (HIV) and Acquired Immune Deficiency Syndrome (AIDS) Curriculum Manual*, including;
 - (i) Hand hygiene;
 - (ii) Disinfection;
 - (iii) Standard/universal precautions;
 - (b) Residents with poor hygiene;
 - (c) Control of bloodborne pathogens in accordance with [DOSH](#), chapter [296-823](#) WAC;
 - (d) Control of tuberculosis consistent with [DOSH](#), department guidelines, [DBHR tuberculosis resource tool](#) and chapter [246-170](#) WAC;
 - (e) Exclusion of staff from work who have a communicable disease in an infectious stage; and
 - (f) Environmental management and housekeeping functions.
- (3) Ensuring that staff report notifiable conditions and cooperates with public health authorities to facilitate investigation of a case, suspected case, or outbreak of a notifiable condition, consistent with chapter [246-101](#) WAC.

- (4) Providing the equipment necessary to implement the RTF infection control policies and procedures.
 - (5) Complying with chapter [246-100 WAC](#) "Communicable and certain other diseases."
-

246-337-065
Health and safety.

The licensee must protect resident health and safety by developing written policies and procedures that are consistent with the requirements of this chapter, and address:

- (1) Coordination of interagency and intra-agency services, if any, to meet and provide for resident health care needs.
 - (2) The provision of health care services.
 - (3) The provision for transportation for residents in accordance with Washington state laws and rules governing transportation. [This should include policies and procedures that address safety and healthcare needs of residents being transported. Safety and healthcare needs may include managing disorderly residents; minimum qualifications for transport staff and additional equipment in transport vehicles \(car seats for infants and children, etc.\); addressing cell phone, texting, managing disorderly residents; minimum qualifications for transport staff \(CPR, 1st aid, driver's license\) and emergency equipment in transport vehicles.](#)
 - (4) Smoking policies and procedures in compliance with applicable Washington state laws and rules.
 - (5) Security to protect residents, visitors, staff and property including, but not limited to:
 - (a) Controlling access to and egress (elopement and evacuation) from the RTF; and
 - (b) Investigating, and recording all security incidents.
 - ~~(6) Reporting to the [DOH complaint intake line](#); department serious or undesirable resident outcomes [within 24 hours](#) including, but not limited to [allegations of abuse](#), [elopement](#), death, [suicide](#), [controlled substances discrepancies](#), or major disruption of services through internal or external emergency events.~~
 - ~~(a)(6) [DOH complaint intake line](#)~~
 - ~~(6) (7) Reports to the [When reporting to the DOH complaint intake line include the following:](#)~~
 - e. [Name](#)
 - f. [Details of the incident or event](#)
 - g. [Facility actions taken and immediate changes to facility programming](#)
 - h. [Additional agencies or entities reported to](#)~~(b) [Specify name, details of incident or event, what the facility did in response, whom else did the facility report. See 246-337-xxx \(7\).](#)~~
-

246-337-070
Emergency disaster plan.

- (1) The licensee must ensure resident health and safety by establishing and implementing an emergency plan designed for response to internal and external emergency safety situations. The emergency plan must:
 - (a) Be specific to the RTF, and each building that comprises the RTF;
 - (b) Be communicated to the residents and staff;
 - (c) Be coordinated with local emergency plans;
 - (d) Address actions the licensee will take if residents cannot return to the facility;
 - (e) Be posted or readily available to all staff and residents; and
 - (f) Require emergency phone numbers to be adjacent to appropriate phones.

- (2) The emergency plan must identify:
 - (a) Who is responsible for each aspect of the plan;
 - (b) Procedures for accounting for all residents and staff during and after the emergency;
 - (c) How the premises will be evacuated, if necessary, and the meeting location after evacuation;
 - (d) How to address care of residents with special needs during and after an emergency;
 - (e) Provisions for emergency medications, food, water, clothing, shelter, heat and power;
 - (f) How family members will be contacted; and
 - (g) Transportation arrangements if necessary.
 - (3) The licensee must evaluate the effectiveness of the emergency plan, including:
 - (a) Review at least annually and revise as needed;
 - (b) Conduct and document, at least annually, emergency drills for residents and staff; and
 - (c) Debrief and evaluate the plan after each emergency incident or drill.
 - (4) Supplies and first-aid equipment must be:
 - (a) In a designated location;
 - (b) Readily available to staff during all hours of operation including during transportation of residents;
 - (c) Sufficient in type and quantity according to staff and residents' needs; and
 - (d) Within expiration dates; and
 - (e) Sufficient to maintain a three-day emergency supply of dry or canned food and water for all staff and residents.
-

246-337-075

Resident rights.

[The stakeholder group wanted to call out parent initiative legislation separately for those patients admitted to E&Ts or Emergency Services.](#)

The licensee must establish a process to ensure resident rights are protected in compliance with chapter [71.12](#) RCW, this chapter, and with chapters [70.96A](#), [71.05](#), and/or [71.34](#) RCW, as applicable, depending on the service categories that are part of the RTF license. This process must address, at a minimum, how the RTF will:

- (1) Inform each resident in an understandable manner in writing and verbally of his or her personal representative, designee or parent, of all rights, treatment methods, and rules applicable to the proposed health care of a particular resident.
- (2) Document that each resident, parent or guardian received a written copy of his or her rights on or before admission.
- (3) Address use of emergency interventions such as use of youth behavior management guidelines, restraint and/or seclusion, the use of special treatment interventions, restriction of rights and parameters of confidentiality.
- (4) Allow residents, their personal representatives, and parents, to review resident files in accordance with chapter [70.02](#) RCW.
- (5) Ensure that each resident is treated in a manner that respects individual identity, human dignity and fosters constructive self-esteem by ensuring each resident has the right to:
 - (a) Be free of abuse, including being deprived of food, clothes or other basic necessities;
 - (b) Be free of restraint and/or seclusion, except as provided in WAC [246-337-110](#)
 - (c) Participate or abstain from social and religious activities;
 - (d) Participate in planning his or her own health care and treatment that considers their own medical and/or mental health advance directives;
 - (e) Refuse to perform services for the benefit of the RTF unless agreed to by the resident, as a part of the individual health care plan and in accordance with applicable law;
 - (f) Inform each resident of the cost of treatment;

- (g) Inform each resident in writing of the department contact information, including telephone number and mailing address;
 - (h) Inform each resident that the resident may file a complaint with the department regarding the RTF's noncompliance with any part of this chapter, without interference, discrimination or reprisal. The resident may choose whether to notify the RTF of the complaint;
 - (i) Promote a healthy, safe, clean and comfortable environment;
 - (j) Protect each resident from invasion of privacy: Provided that reasonable means may be used to detect or prevent items that may be harmful or injurious to the resident or others, from being possessed or used on the premises.
- (6) Protect the confidentiality of treatment and personal information when communicating with individuals not associated or listed in the resident individual's treatment plan or confidentiality disclosure form.
 - (7) Comply with reporting requirements of suspected incidents of child or adult abuse and neglect in accordance with chapters [26.44](#) and [74.34](#) RCW. [See 246-337-xxx \(7\); 246-337-065\(6\).](#) [\(check references\)](#)
 - (8) Account for each resident's assets, including allowance, earnings from federal or state sources and expenditures.
 - (9) Assist each resident, upon request, in sending written communications of the fact of the resident's commitment in the RTF to friends, relatives, or other persons.

246-337-080

Resident care services.

[Stakeholders wanted us to check on what the meaning of calling out the prescriber was. Stakeholders wanted this whole section simpler ie Those who provide acute detox do:.....; check with DSHS re: what is overlapping or duplicative in certification processes.](#)

- (1) **Policies and procedures:** The licensee must establish and implement policies and procedures that describe how residents are provided care and personal equipment to meet their health care needs including:
 - (a) Admission, [monitoring, staffing patterns](#), transfer, and discharge and referral process.
 - (b) Addressing how the licensee provides or makes provision for health care services.
 - (c) Addressing the action of RTF personnel when medical emergencies or a threat to life arises when a physician or authorized health care [prescriber](#) is not present including:
 - (i) Having current policies and procedures signed by a physician or authorized health care [prescriber](#), reviewed as needed and at least biennially;
 - (ii) How resident medical and related data shall be transmitted in the event of a transfer;
 - (iii) Need for the notification of legal guardian or next of kin, in the event of a serious change in the resident's condition, transfer of a resident to another facility, elopement, death, or when unusual circumstances occur; and
 - (iv) When to consult with internal or external resource agencies or persons e.g., poison [center](#), fire department and police.
 - (d) Addressing how the RTF must provide for each resident's need for personal care items and durable medical equipment.
 - (e) Addressing provisions for [delivery, emergency provisions for](#) transfer and appropriate prenatal and postnatal care services for pregnant residents.
 - (f) Addressing how a licensee providing twenty-four hours per day nursing service functions provides systems for supervision, assessment and delegation in accordance with applicable statute and rules including chapter [18.79](#) RCW, Nursing care.
 - (g) Addressing how a licensee providing acute detoxification services must ensure resident health and safety including:
 - (i) A licensed nurse must be on-site when a resident is receiving acute detoxification services;
 - (ii) Registered nurse responsible for supervising resident care nursing services shall be on-site at least four hours per week and available on-call to the licensed practical nurse; and

- (iii) Policies and procedures for acute detoxification services approved by an authorized health care prescriber.
- (h) Addressing how licensees providing sub acute detoxification, triage facility, or crisis stabilization unit services must ensure resident health and safety, including:
 - (i) Implementing policies and procedures establishing agreements with authorized health care providers or hospitals that includes:
 - (A) Criteria for determining the degree of medical stability of a potential resident in a sub acute detoxification, triage or crisis stabilization facility;
 - (B) Monitoring the resident after being admitted;
 - (C) Reporting abnormal symptoms according to established criteria;
 - (D) Criteria requiring immediate transfer to a hospital; and
 - (E) Resident discharge or transfer criteria;
 - (ii) Monitoring of residents by a staff including observing a resident for signs and symptoms of illness or trauma; and
 - (iii) Observing the resident to self-administer his or her own medication as prescribed by the resident's health care prescriber.

(i) Addressing how licensees providing evaluation and treatment services ensure resident health and safety, including: managing restraint and/or seclusion; medication administration, treatment and discharge planning.

- (2) **Delivery of resident care services:** The licensee must ensure ~~the provision of or for~~ that resident care services ~~to~~ meet the health care needs of the resident including:
 - (a) Admission is limited to residents for whom a facility is qualified by staff, services, equipment, building design and occupancy to give safe care.
 - (b) A health care screen of each resident that is to be conducted upon admission and updated as changes occur or when additional health care needs are identified.
 - (c) A completed comprehensive health assessment and medical history that following admission to an RTF, unless a current comprehensive health assessment or review was performed and is available upon admission to an RTF providing mental health services.
 - (d) ~~A completed comprehensive~~ completed comprehensive health assessment and medical history conducted by a health care prescriber, RN or LPN following admission to an ~~RTF~~ RTF, unless a current comprehensive health assessment or review was performed and is available upon admission to an RTF providing acute detoxification services.
 - (e) A health assessment by a health care prescriber, any time a resident exhibits signs and symptoms of an injury, illness or abnormality for which medical diagnosis and treatment are indicated.
 - (f) Access to and availability of authorized health care providers to develop and implement the resident plan of care.
 - (g) Sufficient numbers of trained personnel who are available to provide health care according to the resident's health care plan.
 - (h) Provision for or access by referral to health care for residents admitted to the RTF including, but not limited to:
 - (i) Assisting residents in following all prescribed treatments, modified diets, activities or activity limitations.
 - (ii) Assisting residents to keep health care appointments.
 - (iii) Medication administration or observing the resident self-administer his or her own medication as prescribed by the resident's authorized health care prescriber.
 - (iv) Incorporating resident's health care needs and behavioral needs into the resident's overall health care plan;
 - (v) Emergency health care.
 - (i) Provision for twenty-four hours per day nursing service functions to include availability by phone; when the RTF provides mental health inpatient evaluation and treatment, mental health adult residential treatment, mental health child long-term inpatient treatment, mental health child inpatient evaluation and treatment, and/or chemical dependency acute detoxification.
 - (j) Provision is made either on the premises, through a contract laboratory or through a health care provider for service(s) required by the resident.

- (k) Storing and labeling each resident's personal care items separately preventing contamination and access by other residents.
 - (3) **Documentation:** The licensee must ensure documentation of health care received or provided in the resident's health care record.
-

246-337-085

Accepting-Admitting a child with a parent in treatment.

A chemical dependency facility that ~~accepts~~ admits a child with a parent in treatment must assure child care services are provided for the child and the services of a health care prescriber who is responsible for developing health care policies, provides consultation and monitors the child's health care. The facility shall:

- (1) Operate or arrange for child care ~~certified by DSHS-DBHR or~~ licensed by ~~DEL~~ under chapter 170-295 WAC, Minimum licensing requirements for child day care centers, chapter 170-151 WAC, School-age child care center minimum licensing requirements, chapter 170-296 WAC, Minimum licensing requirements for family child day care homes which the children will attend during treatment hours of the parent;
 - (2) Allow an infant under one month of age to be cared for by the staff of the RTF to supplement care by the mother;
 - (3) Allow the parent to be responsible for the care of his/her own child during the hours the parent is not in treatment, with the following conditions:
 - (a) The parent's management of the child is subject to the policies and procedures of the RTF;
 - (b) A parent may designate another resident to care for a child, if the designation is in writing and includes:
 - (i) A specified time period;
 - (ii) Any special instructions; and
 - (iii) Is signed by the parent, designee and staff member who approves of the designation
 - (4) Establish policies and procedures addressing the chronological and developmental needs of the children to be accepted;
 - (5) Obtain a health history and current immunization for each child following admission;
 - (6) Develop with the parent a plan of care for each child that addresses the child's health care needs including medications.
-

246-337-090

Food and nutrition services.

The licensee must ensure that nutritionally adequate and appetizing meals that meet resident needs are stored, prepared and served in accordance with chapter 246-215 WAC.

- (1) The licensee shall provide:
 - (a) Food and dietary services managed by a person knowledgeable in food services, and, when needed, consultative services provided by a registered dietician;
 - (b) Food and water daily, supplying at least one hundred percent of the current nationally recommended dietary allowance for meals and snacks, adjusted for:
 - (i) Age, gender, development, activities and health conditions; and
 - (ii) Reasonable accommodations for cultural and religious preferences.

- (2) The licensee shall provide at least three meals at regular intervals without more than fourteen hours between the last meal of the day and the first meal of the next day.
- (3) If modified food plans are needed for residents receiving detoxification services or who have other nutritional needs, the licensee must:
 - (a) Provide modified diets, nutrient supplements and concentrates to residents as prescribed by an authorized health care provider;
 - (b) Limit modified meal content or frequency to no more than forty-eight hours without an authorized health care provider's orders; and
 - (c) Notify staff of any resident with food allergies or other medical conditions, symptoms of allergic reactions to watch for, and emergency measures to take if they occur.
- (4) The licensee must allow sufficient time for residents to consume meals.
- (5) The licensee must designate at least one individual having a current food and beverage service worker's permit to monitor and oversee food handling at the RTF; and require that all residents who do not have food and beverage worker permits, but have been medically screened and cleared to work in the kitchen, be oriented and supervised by staff with current food and beverage worker permits at all times when working in the kitchen.
- (6) Menus must be dated, available and conspicuously posted one week or more in advance. The licensee must:
 - (a) Keep records of all food served, and substitutions;
 - (b) Retain menu records of food served for at least three months.
- (7) All food must be prepared on-site unless the licensee has a signed contract or agreement with a food establishment.
- (8) Each licensee must keep on file:
 - (a) A description of how food will be handled, prepared and stored; and
 - (b) A written plan of action should food be in an unacceptable condition.
- (9) Staff must follow manufacturer's instructions in operating kitchen equipment.
- (10) A licensed RTF with sixteen or fewer residents may use domestic or home-type kitchen appliances.
- (11) An RTF with more than sixteen residents must use commercial appliances.

246-337-095

Resident health care records.

[RTF stakeholder group wants to know what a "complete health care record" means to DOH.](#)

The licensee must ensure the RTF meets the following requirements:

- (1) Develop and implement procedures for maintaining current **and complete** health care records as required by chapter [70.02](#) RCW and RCW [71.05.390](#) or by applicable laws.
- (2) Make health care records accessible for review by appropriate direct care staff, the resident and the department in accordance with applicable law.
- (3) Ensure health care records are legibly written or retrievable by electronic means. **If electronic records are maintained, the facility must have capability of creating a paper copy of the resident/patient records if requested by the department, the resident or direct care staff.**
- (4) Document medical information on the licensee's standardized forms.
- (5) Record health care information by the health care provider or direct care staff with resident contact to include typed or legible handwriting in blue or black ink, verified by signature or unique identifier, title,

date and time.

- (6) Maintain the confidentiality and security of health care records in accordance with applicable law.
- (7) Maintain health care records in chronological order in their entirety or chronological by sections.
- (8) Keep health care records current with all documents filed according to the licensee's written timeline policy.
- (9) Inclusion of the following, at a minimum, in each record:
 - (a) Resident's name, age, sex, marital status, date of admission, voluntary or other commitment, name of physician, diagnosis, date of discharge, previous address and phone number, if any;
 - (b) Resident's receipt of notification of resident's rights and responsibilities, if applicable;
 - (c) Resident's consent for health care provided by the RTF;
 - (d) A copy of any authorizations, advance directives, powers of attorney, letters of guardianship, or other similar documentation provided by the resident;
 - (e) Original reports, where available or, if not available, durable, legible copies of original reports on all tests, procedures, and examinations performed on the resident;
 - (f) Health assessments;
 - (g) Health care plan, including the names, relationship to the resident and addresses of those individuals the resident states with whom the RTF may freely communicate regarding the health care of the resident without violating the resident's right to confidentiality or privacy of health care information;
 - (h) Dated and signed (or initialed) notes describing health care provided for each contact with the resident pertinent to the resident's health care plan including, but not limited to:
 - (i) Physical and psychosocial history;
 - (ii) Medication administration, medical/nursing services, and treatment provided, resident's response to treatment and any adverse reactions and resolution of medical issues;
 - (iii) Use of restraint or seclusion consistent with WAC [246-337-110](#);
 - (iv) [Emergency treatment or responses if applicable. \(ie there may be occasions when the resident is seen, but there are no special instructions or followup issues, the stakeholders were concerned that they would be required to have another facilities information as part of their health care record.\)](#)
 - (v) Instructions or teaching provided to resident in connection with his or her health care; and
 - (vi) Discharge summary, including:
 - (A) Concise review of resident's physical and mental history, as applicable;
 - (B) Condition upon discharge;
 - (C) Recommendations for services, follow-up or continuing care; and
 - (D) Date and time of discharge.
- (10) Retaining the health care records at least six years beyond resident's discharge or death date, whichever occurs sooner, and at least six years beyond the age of eighteen.
- (11) Destroying the health care records in accordance with applicable law and in a manner that preserves confidentiality.

246-337-100
Health care plan.

The licensee must ensure that an individual health care plan is developed and implemented for each resident based on health assessment(s) [or screening](#) on admission and updated as additional needs are identified during treatment that includes the following:

- (1) The health care plan must be prepared by one or more staff involved in the resident's care with participation by the resident and by either his or her legal representative or parent when minors are

involved;

- (2) An initial or provisional health care plan addressing the health care needs of the resident;
- (3) A discharge (aftercare) health care plan if the resident will require less than a fourteen-day treatment, if appropriate; and
- (4) A comprehensive health care plan developed by participants providing health care to the resident addressing and including, but not limited to:
 - (a) Health care needs;
 - (b) Implementation, modification and review of health care needs documented in the health care plan and health care record;
 - (c) Needs of a mother and child during pregnancy and after delivery, if applicable;
 - (d) Work assignments given to residents as part of their health care plan, if applicable; and
 - (e) Discharge health care needs.

The stakeholders want the applicable CFRs added to pharmacy and medication sections. They wanted "significant loss" defined-ie does this include medications that have been checked: They wanted clarification regarding shift counts does this mean per shift, or at time of administration; is there a difference between stock meds; patients own meds or AED ?,

246-337-105

Medication management.

The licensee is responsible for the control and use of all medications within the RTF, including:

- (1) Ensuring policies and procedures and medication protocols are developed, approved, reviewed and implemented by licensed health care prescribers, administration and pharmacist ~~(as needed)~~. The policies and procedures must be consistent with the rules of the department, the department's board of pharmacy, the DEA and address all aspects of pharmaceutical management including the following:
 - (a) Timely procurement;
 - (b) Medication administration;
 - (c) Prescribing;
 - (d) Proper storage conditions addressing security, safety, sanitation, temperature, light, moisture and ventilation, and hand washing facilities;
 - (e) Use of over the counter (nonprescription) medication:
 - (i) Over the Counter medication list;
 - (ii) Parameters of use within manufacturers recommendations;
 - (f) Receipt;
 - (g) Proper labeling;
 - (h) Disposal; including through a reverse distributor;
 - (i) Medication brought into RTF by a resident;
 - (j) Accountability for legend drugs and controlled substances that meet DEA and Board of Pharmacy rules; minimally includes:
 - i. Documentation. Documentation of receipt, use, disposition, inventory, discharge. All controlled substance records shall be kept for two years.
 - ii. Access. Access to medication room
 - iii. Shift. Shift counts of controlled substances: shall be counted by two authorized persons licensed to administer or trained to provide self administration of drugs when transfer of accountability occurs. If an automated dispensing device is used, the procedures developed for the automated dispensing device shall be used.
 - iv. Biennial. Biennial inventory of all controlled substances must be taken and maintained at the facility
 - v. How methadone, suboxone is managed, administered and disposition at time of discharge
 - vi. Significant losses, disappearances and unaccounted discrepancies of controlled substances shall be reported to the department, the board of pharmacy, the federal drug enforcement administration and to the facility manager/administrator.

- (k) Emergency supply of psychotropic, detoxification and legend drugs not for a specific resident that meet Board of Pharmacy and DEA rules by-by.
 - (a) Use of 24 hr retail or long term care pharmacy by prescription order; or
 - (b) Use of 24 hour hospital pharmacy by prescription order; or
 - (c) Use of an upgraded Automated Drug Distribution Device by prescription order; or
 - (d) Use of a DEA registrant /WA State Health care prescriber for a specific facility ~~who~~ takes who takes responsibility responsibility for accountability of the controlled substances.
 - (l) Policies and procedures describe processes used to make available emergency allergy response kit of prepackaged medications and supplies for the treatment of anaphylactic shock that is resident specific; and
 - (m) Medications for short term authorized absence (pass) from the RTF, where applicable.
- (2) Establishing and maintaining ~~of~~ an organized system that ensures accuracy in receiving, transcribing and implementing policies and procedures for medication administration, including ensuring residents receive the correct medication, dosage, route, time, and reason.
 - (3) Documentation of all medications administered or self-administered, including the following data:
 - (a) Name and dosage of medication;
 - (b) Start/stop date;
 - (c) Time;
 - (d) Route;
 - (e) Staff or resident initials indicating medication was administered, self-administered or issued;
 - (f) Notation if medication was refused, held, wasted or not administered or self-administered;
 - (g) Allergies;
 - (h) Resident response to medication when given as necessary or as needed (PRN);
 - (i) Medical staff notification of errors, adverse effects, side effects; and
 - (j) Within established parameters for nonprescription drugs.
 - (4) Ensuring written orders are signed by an authorized health care prescriber with prescriptive authority for all legend drugs and vaccines. Verbal orders for legend drugs and vaccines must be signed by the prescriber as soon as possible, but no later than 48 hours after the verbal order.
 - (5) Ensuring use of nonprescription drugs that are self-administered are:
 - (a) Within parameters established for nonprescription drugs; and
 - (b) According to established formulary;
 - (c) By order of the prescriber;
 - (d) Reviewed and approved by healthcare prescriber yearly.
 - (6) Having a current established drug reference resource available for use by RTF staff.

246-337-110

Use of seclusion and restraint.

Any RTF that utilizes restraint or seclusion must ensure that restraint or seclusion is performed in compliance with chapters 70.96A, 71.05, 71.34 RCW, this chapter, and other applicable federal and state laws and rules. Restraint and seclusion must be performed in a manner that is safe, proportionate and appropriate to the severity of the behavior, the resident's chronological and developmental age, size, gender, physical, medical and psychiatric condition, and personal history.

- (1) The licensee may use seclusion or restraint only in emergency situations needed to ensure the physical safety of the individual resident or other residents or staff of the facility, and when less restrictive measures have been found to be ineffective to protect the resident or others from harm.
- (2) Seclusion and restraint procedures must be implemented in the least restrictive manner possible in accordance with a written modification to the resident's health care plan and discontinued when the behaviors that necessitated the restraint or seclusion are no longer in evidence.

- (3) "Whenever needed" or "as needed" (PRN) orders for use of seclusion or restraint are prohibited.
- (4) A physician or other authorized health care prescriber must authorize use of the restraint or seclusion within one hour of initiating the restraint or seclusion.
- (5) Each order of restraint or seclusion is limited in length of time to:
 - (a) **Adults:** Four hours;
 - (b) **Children and adolescents ages nine to seventeen:** Two hours; and
 - (c) **Children under nine years of age:** One hour.
- (6) A physician or an authorized health care prescriber, authorized by the licensee, may only renew the original order in accordance with these limits for up to a total of twenty-four hours.
- (7) A physician or an authorized health care provider must examine the resident, before the restraint or seclusion exceeds more than twenty-four hours. This procedure must be repeated for each subsequent twenty-four hour period of restraint or seclusion.
- (8) Within one hour of initiation of restraint or seclusion, an MD, an authorized health care provider (such as a licensed registered nurse qualified by license, training and experience) must conduct a face-to-face assessment of the physical and psychological well-being of the resident.
- (9) The resident's clinical record must include the following documentation should restraint or seclusion be used:
 - (a) Order for the restraint or seclusion including name of the physician or authorized health care provider authorizing restraint or seclusion;
 - (b) Date/time order obtained;
 - (c) The specific intervention ordered including length of time and behavior that would terminate the intervention;
 - (d) Time restraint or seclusion began and ended;
 - (e) Time and results of one hour assessment;
 - (f) Resident behavior prior to initiation of restraint or seclusion;
 - (g) Any injuries sustained during the restraint or seclusion; and
 - (h) Post intervention debriefing with resident to discuss precipitating factors leading to the need for intervention.
- (10) Safety health checks must be conducted and documented at a minimum of every fifteen minutes, to include:
 - (a) Behavior;
 - (b) Food/nutrition offered;
 - (c) Toileting; and
 - (d) Physical condition.
- (11) Staff shall continuously observe and monitor residents in seclusion or restraint by an assigned staff member (face-to-face) or by staff using both video and audio equipment.
- (12) Staff involved in the restraint or seclusion will debrief and address effectiveness and safety issues.
- (13) Suggest moving to section 120 The licensee must ensure that restraint and seclusion is carried out in a safe environment. This room must:
 - (a) Be designed to minimize potential for stimulation, escape, hiding, injury, or death;
 - (b) Have a maximum capacity of one resident;
 - (c) Have a door that opens outward;
 - (d) Have a staff-controlled, lockable, adjoining toilet room; if lockable by key, key must be readily accessible by staff;
 - (e) Have a minimum of three feet of clear space on three sides of the bed; and
 - (f) Have negative pressure with an independent exhaust system with the exhaust fan at the discharge end of the system.
- (14) There are policies and procedures for the application, use and management of restraint equipment.

- (15) Restraint equipment must be clean and in good repair.
 - (16) There are policies and procedures for the involuntary administration of medications.
-

246-337-115

Cleaning, maintenance and refuse disposal.

The licensee must ensure that the RTF, equipment and furnishings are safe, sanitary, and maintained in good repair. The RTF shall provide for:

- (1) Sanitary disposal and collection of garbage and refuse, by including:
 - (a) Use of noncombustible waste containers in resident rooms and common use areas;
 - (b) Containers constructed of nonabsorbent material, which are water-tight, covered, and adequate to store garbage and refuse generated by the RTF;
 - (c) A storage area location convenient for resident and staff use;
 - (d) An area and containers that are cleaned and maintained to prevent:
 - (i) Entrance of insects, rodents, birds, or other pests;
 - (ii) Odors; and
 - (iii) Other nuisances.
 - (2) Management of biohazardous and nonmedical waste in accordance with applicable federal, state and local rules, including the use of appropriate containers and collection and disposal services if infectious wastes are generated.
 - (3) A locked housekeeping room on each level of the RTF that is equipped with:
 - (a) A utility sink or equivalent means of obtaining and disposing of mop water separate from food preparation and service areas; and
 - (b) Storage for cleaning supplies and wet mops which is mechanically ventilated to the outside according to standards adopted by the state building code council, chapter [51-13 WAC](#).
 - (4) Adequate storage space for:
 - (a) Clean and soiled equipment and linens;
 - (b) Lockable, shelved storage impervious to moisture, for cleaning supplies, disinfectants and poisonous compounds; and
 - (c) Separate, locked storage for flammable materials or other fire and safety hazards.
 - (5) A safe and cleanable area is designated for pouring stock chemicals and cleaning supplies into separate, properly labeled containers if stock chemicals are used.
 - (6) An effective pest control program so that the RTF is free of pests such as rodents and insects.
-

246-337-120

Facility, environment, and space requirements.

The licensee must ensure that each RTF, exterior grounds and component parts such as, but not limited to, fences, equipment, outbuildings and landscape items are safe, free of hazards, clean, and maintained in good repair, including:

- (1) Each RTF shall be located on a site which is:
 - ~~(a) Free of standing water; and~~
 - ~~(b)~~(a) Accessible by emergency vehicles on at least one street, road or driveway usable under all weather conditions and free of major potholes or obstructions.
- (2) Develop and implement systems for routine preventative maintenance, including:
 - (a) Heating ventilation and air conditioning, plumbing and electrical equipment;
 - (b) Certification and calibration of biomedical and therapeutic equipment; and

- (c) Documentation of all maintenance.
 - (3) Rooms shall be provided for dining, multipurpose, counseling, therapy and social activities, including:
 - (a) At least forty square feet per resident for the total combined area which is utilized for dining, social, educational, recreational activities and group therapies;
 - (b) A ceiling height of at least seven and one-half feet over the required floor area throughout the RTF
 - (c) At least one private area for visitation of residents and guests;
 - (d) Therapy rooms for individual and group counseling that maintain visual and auditory confidentiality in the ratio of at least one room per twelve residents; and
 - (e) A medical examination room, when there is routine physical examination of residents within the RTF. The examination room must be equipped with:
 - (i) An exam table with at least three feet of space on two sides and end of the table for staff access;
 - (ii) An examination light;
 - (iii) Storage units for medical supplies and equipment;
 - (iv) A hand washing sink;
 - ~~(f) Provide secured medication distribution and preparation areas equipped with a handwash sink.~~
 - (f) Dining room(s) or area(s) are large enough to accommodate all residents at a single sitting or in no more than three shifts. If the space is used for more than one purpose, that space must be designed to accommodate each of the activities without unreasonable interference with one another.
 - (4) Equip stairways with more than one riser and ramps with slopes greater than one in twenty with handrails on both sides. Ends of handrails are designed in a manner that eliminates a hooking hazard.
 - (5) School facilities, excluding child care, serving residents on the same grounds as the RTF must meet all requirements for health and safety and comply with chapter [246-366 WAC](#), Primary and secondary schools.
-

246-337-125

Toilet rooms and bathrooms.

The licensee must ensure that private or common-use toilet rooms and bathrooms are available to residents including:

- (1) Provision for a minimum of one toilet (water closet) and handwashing sink for every eight residents, or fraction thereof. Urinals may count for up to one-third of the required toilets in a male-only toilet room.
- (2) A toilet and handwashing sink in, or immediately accessible to each bathroom.
- (3) A minimum of one bathing fixture for every eight residents.
- (4) Rooms containing more than one water closet or more than one bathing area must:
 - (a) Be designated for use by one gender, unless it is a toilet specifically designated for children under the age of six years;
 - (b) Provide for privacy during toileting, bathing, and dressing through the use of doors or dividers;
- (5) Each toilet room and bathroom must be equipped with:
 - (a) Water resistant, smooth, easily cleanable, slip-resistant bathtubs, showers, and floor surfaces;
 - (b) Washable walls to the height of splash or spray;
 - (c) Washable cabinets and counter tops;
 - (d) Plumbing fixtures designed for easy cleaning;

- (e) Clean, nonabsorbent toilet seats free of cracks;
 - (f) Grab bars installed at each water closet and bathing fixture;
 - (g) Shatter resistant mirrors when appropriate;
 - (h) Adequate lighting for general illumination;
 - (i) One or more handwashing sink with soap and single use or disposable towels with a mounted paper towel dispenser, unless a blower or equivalent hand-drying device is provided;
 - (j) Toilet tissue with a reachable mounted tissue dispenser by each toilet.
- (6) Reasonable access to bath and toilet rooms must be provided by:
- (a) Locating a toilet room and bathing facilities on the same floor or level as the sleeping room of the resident; and
 - (b) Providing access without passage through any food preparation area or from one bedroom through another bedroom.
- (7) If a toilet room or bathing facility adjoins a bedroom, the bathing facility is restricted to use by those residents residing in the adjoining bedrooms.
-

246-337-130

Water supply, sewage and waste disposal.

The licensee must ensure that water supply and waste disposal in each facility meet the provisions of chapter [246-290](#) or [246-291](#) WAC, whichever applies, including:

- (1) Maintaining tempered water between one hundred and one hundred twenty degrees Fahrenheit in resident areas.
 - (2) Maintaining the plumbing systems free of cross connections.
 - (3) Assuring all sewage and waste water drain into a public sewer system in compliance with applicable laws and rules, or meet the requirements of chapters [246-272](#) and [173-240](#) WAC, and local laws and rules.
-

246-337-135

Heating, ventilation and air conditioning.

- (1) The licensee must ensure that all rooms used by residents are able to maintain interior temperatures between sixty-five degrees Fahrenheit and seventy-eight degrees Fahrenheit year-round.
 - (2) Direct evaporative coolers may not be used for cooling. In existing facilities, no new or replacement evaporative coolers may be used after adoption of these rules. Facilities currently using direct evaporative coolers (swamp coolers or similar equipment) shall follow manufacturer's instructions and develop and implement a written preventive maintenance program.
 - (3) All areas of the building must be ventilated to prevent excessive odors and moisture. The ventilation system must be in compliance with [chapter 51-13 WAC Mechanical code as adopted by the Washington state building code council](#).
 - (3)(4) Facilities licensed prior to July 1991 may continue to use windows for ventilating toilet rooms, bathrooms, and janitor rooms if the windows are equipped with sixteen gauge mesh screens.
-

246-337-140

Lighting, emergency lighting, and electrical outlets.

The licensee must ensure that lighting, emergency lighting, and electrical outlets are adequate and safe including:

- (1) Light fixtures are protected against light bulb breakage by using appropriately fitted shields, bulbs, or tubes manufactured with shatter resistant materials in all areas occupied by residents, including common areas, and in medication and food preparation areas.
 - (2) Each room or area occupied by children under age five or residents with unsafe behaviors must have tamper resistant electrical outlets.
 - (3) Each electrical outlet within six feet of a sink or wet area must be of the ground fault interrupter type or be controlled by a ground fault circuit interrupter.
 - (4) Provide emergency lighting on each floor.
 - (5) Provide operable exterior lighting with solar or battery backup at the exit and entry doors.
-

246-337-145 Laundry.

The licensee must ensure that laundry facilities, equipment, handling and processes ensure linen and laundered items provided to residents are clean, in good repair and adequate to meet the needs of residents including:

- (1) The licensee must provide laundry and linen services on the premises, or by commercial laundry.
- (2) The licensee must handle, clean, and store linen according to acceptable methods of infection control. The licensee must:
 - (a) Provide separate areas for handling clean laundry and soiled laundry;
 - (b) Ensure clean laundry is not processed in, and does not pass through, areas where soiled laundry is handled;
 - (c) Ensure areas where clean laundry is stored are not exposed to contamination from other sources;
 - (d) Ensure all staff wears appropriate personal protective equipment and uses appropriate infection control practices when handling laundry;
 - (e) Ensure that damp textiles or fabrics are not left in machines for longer than twelve hours;
 - (f) Ensure that gross soil is removed before washing and proper washing and drying procedures are used; and
 - (g) Ensure that contaminated textiles and fabrics are handled with minimum agitation to avoid contamination of air, surfaces and persons.
- (3) The licensee must use and maintain laundry equipment according to manufacturers' instructions.
- (4) The licensee must use washing machines that have a continuous supply of hot water with a temperature of one hundred forty degrees Fahrenheit, or that automatically dispense a chemical sanitizer and detergent or wash additives as specified by the manufacturer, whenever the licensee washes:
 - (a) Licensee's laundry;
 - (b) Licensee's laundry is combined with resident's laundry into a single load; or
 - (c) More than one resident's laundry is combined into a single load.
- (5) The licensee or a resident washing an individual resident's personal laundry, separate from other laundry, may wash the laundry at temperatures below one hundred forty degrees Fahrenheit provided chemicals suitable for low temperature washing at proper use concentration and according to the cleaning instructions of the textile, fabric or clothing are used.

- (6) The licensee must ventilate laundry rooms and areas to the exterior including areas or rooms where soiled laundry is held for processing by offsite commercial laundry services.
 - (7) The licensee must locate laundry equipment in rooms other than those used for open food storage, food preparation or food service.
 - (8) If the licensee provides a laundry area where residents may do their personal laundry, the laundry area must be arranged to reduce the chances of soiled laundry contaminating clean laundry and equipped with:
 - (a) A utility sink;
 - (b) A table or counter for folding clean laundry;
 - (c) At least one washing machine and one clothes dryer; and
 - (d) Mechanical ventilation to the exterior.
-

246-337-150

Resident rooms, furnishings and storage.

The RTF shall ensure that residents have an accessible, clean, well-maintained room with sufficient space, light, and comfortable furnishings for sleeping and personal activities including, but not limited to:

- (1) Sleeping rooms designed to provide at least a three-foot clear access aisle from the entry door, along at least one side of each bed, and in front of all storage equipment.
- (2) If a bunk bed is used, a minimum access aisle of five feet shall be provided along at least one side of the bunk bed.
- (3) Room identification and resident capacity per sleeping room consistent with the approved room list and evacuation floor plan.
- (4) Direct access to a hallway, living room, lounge, the outside, or other common use area without going through a laundry or utility area, a bath or toilet room, or another resident's bedroom.
- (5) Each sleeping room having one or more outside windows that:
 - (a) Is easily opened if necessary for fire exit or ventilation;
 - (b) Is marked with a solid color or barriers to prevent residents from accidentally walking into them if clear glass windows or doors extend to the floor;
 - (c) Has adjustable curtains, shades, blinds, or equivalent installed at the windows for visual privacy; and
 - (d) Is shatterproof, screened, or of the security type as determined by the resident needs.
- (6) Sleeping rooms equipped with:
 - (a) One or more ~~noncombustible~~ waste containers;
 - (b) An individual towel and washcloth rack or an equivalent method to provide clean towels and washcloths;
 - (c) Storage facilities for storing a reasonable quantity of clothing and, when requested by the resident, storage in a lockable drawer, cupboard, locker, or other secure space somewhere in the building;
 - (d) Furniture appropriate for the age and physical condition of each resident, must be provided, including:
 - (i) A chair, which may be used in either the bedroom or a group room interchangeably;
 - (ii) A bed of appropriate size equipped with:
 - (A) A mattress that is clean, in good repair, and fits the frame;
 - (B) One or more pillows that are clean, and in good repair for each resident over two and one-half years;
 - (C) Bedding that includes a tight-fitting sheet or cover for the sleeping surface, and a clean blanket or suitable cover; and

- (D) Bedding that is in good repair, changed weekly or more often as necessary to maintain cleanliness;
- (iii) A bed thirty-six or more inches wide for adults and appropriate size for children, spaced thirty-six inches apart;
- (iv) A single level nonstacking crib, infant bed, bassinet or playpen for children twenty-four months and younger meeting chapter [70.111](#) RCW, and including:
 - (A) Sleep equipment having secure latching devices; and
 - (B) A mattress that is:
 - (I) Snug-fitting to prevent the infant from becoming entrapped between the mattress and crib side rails;
 - (II) Waterproof and easily sanitized; and
 - (III) Free of crib bumpers, stuffed toys or pillows;
 - (V) A youth bed or regular bed for children twenty-five months and older;
 - (VI) If bunk beds are used, children six years of age or less are prohibited from utilizing the upper bunk.

**246-337-155
Pet management and safety.**

The licensee must ensure the health and safety of residents and all service animals, therapy animals, and pets when allowed on the premises.

**246-337-990
Licensing fees.**

A licensee must submit the following fees to the department:

FEE TYPE	AMOUNT
Administrative processing/ initial application fee	\$204.00
License bed fee (per bed)	\$190.00
Annual renewal fee (per bed)	\$190.00
Late fee (per bed)	\$33.00 (up to \$660.00)
Follow-up compliance survey fee or a complete on-site survey fee resulting from a substantiated complaint	\$1,320.00

- (1) The department shall refund fees paid by the applicant for initial licensure if:
 - (a) The department has received an application but has not conducted an on-site survey or provided technical assistance. The department shall refund two-thirds of the fees paid, less a fifty dollar processing fee;
 - (b) The department has received an application and has conducted an on-site survey or provided technical assistance. The department shall refund one-third of the fees paid, less a fifty dollar processing fee.
- (2) The department will not refund fees paid by the applicant if:
 - (a) The department has conducted more than one on-site visit for any purpose;

|

- (b) One year has elapsed since the department received an initial licensure application, and the department has not issued a license because the applicant failed to complete requirements for licensure; or
- (c) The amount to be refunded as calculated by subsection (1)(a) or (b) of this section is ten dollars or less.

DRAFT