

SHB 1218 - S COMM AMD

By Committee on Health & Long Term Care

ADOPTED 04/10/2021

1 Strike everything after the enacting clause and insert the
2 following:

3 "NEW SECTION. **Sec. 1.** The legislature finds that:

4 (1) Residents in licensed long-term care facilities have been
5 disproportionately impacted and isolated by the COVID-19 pandemic and
6 over 50 percent of all COVID-19 deaths in Washington have been
7 associated with long-term care facilities;

8 (2) According to a University of Washington report, social
9 isolation creates a "double pandemic" that disrupts care and
10 exacerbates the difficulties of dementia, depression, suicide risk,
11 chronic health conditions, and other challenges faced by long-term
12 care residents and providers;

13 (3) A "digital divide" exists in many parts of Washington,
14 particularly for older adults of color with low incomes and those in
15 rural communities;

16 (4) Residents with sensory limitations, mental illness,
17 intellectual disabilities, dementia, cognitive limitations, traumatic
18 brain injuries, or other disabilities may not be able to fully
19 utilize digital tools which exacerbates their social isolation;

20 (5) Long-term care facilities already have the legal
21 responsibility to care for their residents in a manner and in an
22 environment that promotes the maintenance or enhancement of each
23 resident's quality of life. A resident should have a safe, clean,
24 comfortable, and homelike environment as detailed in chapter 70.129
25 RCW; and

26 (6) The COVID-19 pandemic has exposed systematic weaknesses in
27 the state's long-term care system and there is a need to enact
28 additional measures to protect and improve the health, safety, and
29 quality of life of residents.

30 NEW SECTION. **Sec. 2.** A new section is added to chapter 18.20
31 RCW to read as follows:

1 The department must require an assisted living facility that is
2 subject to a stop placement order or limited stop placement order
3 under RCW 18.20.190 to publicly post in a conspicuous place at the
4 facility a standardized notice that the department has issued a stop
5 placement order or limited stop placement order for the facility. The
6 standardized notice shall be developed by the department to include
7 the date of the stop placement order or limited stop placement order,
8 any conditions placed upon the facility's license, contact
9 information for the department, contact information for the
10 administrator or provider of the assisted living facility, and a
11 statement that anyone may contact the department or the administrator
12 or provider for further information. The notice must remain posted
13 until the department has terminated the stop placement order or
14 limited stop placement order.

15 NEW SECTION. **Sec. 3.** A new section is added to chapter 18.20
16 RCW to read as follows:

17 (1) The department shall require each assisted living facility
18 to:

19 (a) Create and regularly maintain a current resident roster
20 containing the name and room number of each resident and provide a
21 written copy immediately upon an in-person request from any long-term
22 care ombuds;

23 (b) Create and regularly maintain current, accurate, and
24 aggregated contact information for all residents, including contact
25 information for the resident representative, if any, of each
26 resident. The contact information for each resident must include the
27 resident's name, room number, and, if available, telephone number and
28 email address. The contact information for each resident
29 representative must include the resident representative's name,
30 relationship to the resident, phone number, and, if available, email
31 and mailing address;

32 (c) Record and update the aggregated contact information required
33 by this section, upon receipt of new or updated contact information
34 from the resident or resident representative; and

35 (d) Upon the written request of any long-term care ombuds that
36 includes reference to this section and the relevant legal functions
37 and duties of long-term care ombuds, provide a copy of the aggregated
38 contact information required by this section within 48 hours, or
39 within a reasonable time if agreed to by the requesting long-term

1 care ombuds by electronic copy to the secure email address or
2 facsimile number provided in the written request.

3 (2) In accordance with the federal older Americans act, federal
4 regulations, and state laws that govern the state long-term care
5 ombuds program, the department shall inform assisted living
6 facilities that:

7 (a) Any long-term care ombuds is authorized to request and obtain
8 from assisted living facilities the information required by this
9 section in order to perform the functions and duties of long-term
10 care ombuds as set forth in federal and state laws;

11 (b) The state long-term care ombuds program and all long-term
12 care ombuds are considered a "health oversight agency," so that the
13 federal health insurance portability and accountability act and
14 chapter 70.02 RCW do not preclude assisted living facilities from
15 providing the information required by this section when requested by
16 any long-term care ombuds, and pursuant to these laws, the federal
17 older Americans act, federal regulations, and state laws that govern
18 the state long-term care ombuds program, facilities are not required
19 to seek or obtain consent from residents or resident representatives
20 prior to providing the information required by this section in
21 accordance with the requirements of this section;

22 (c) The information required by this section, when provided by an
23 assisted living facility to a requesting long-term care ombuds,
24 becomes property of the state long-term care ombuds program and is
25 subject to all state and federal laws governing the confidentiality
26 and disclosure of the files, records, and information maintained by
27 the state long-term care ombuds program or any local long-term care
28 ombuds entity; and

29 (d) The assisted living facility may not refuse to provide or
30 unreasonably delay providing the resident roster, the contact
31 information for a resident or resident representative, or the
32 aggregated contact information required by this section on any basis,
33 including on the basis that the facility must first seek or obtain
34 consent from one or more of the residents or resident
35 representatives.

36 (3) Nothing in this section shall interfere with or diminish the
37 authority of any long-term care ombuds to access facilities,
38 residents, and resident records as otherwise authorized by law.

39 (4) For the purposes of this section, "resident representative"
40 has the same meaning as in RCW 70.129.010.

1 NEW SECTION. **Sec. 4.** A new section is added to chapter 18.20
2 RCW to read as follows:

3 (1) Each assisted living facility shall be responsive to incoming
4 communications and respond within a reasonable time to phone and
5 electronic messages.

6 (2) Each assisted living facility must have a communication
7 system, including a sufficient quantity of working telephones and
8 other communication equipment, to ensure that residents have 24-hour
9 access to communications with family, medical providers, and others,
10 and also to allow for emergency contact to and from facility staff.
11 The telephones and communication equipment must provide for auditory
12 privacy, not be located in a staff office or station, be accessible
13 and usable by persons with hearing loss and other disabilities, and
14 not require payment for local calls. An assisted living facility is
15 not required to provide telephones at no cost in each resident room.

16 NEW SECTION. **Sec. 5.** A new section is added to chapter 18.20
17 RCW to read as follows:

18 (1) Each assisted living facility shall develop and maintain a
19 comprehensive disaster preparedness plan to be followed in the event
20 of a disaster or emergency, including fires, earthquakes, floods,
21 infectious disease outbreaks, loss of power or water, and other
22 events that may require sheltering in place, evacuations, or other
23 emergency measures to protect the health and safety of residents. The
24 facility shall review the comprehensive disaster preparedness plan
25 annually, update the plan as needed, and train all employees when
26 they begin work in the facility on the comprehensive disaster
27 preparedness plan and related staff procedures.

28 (2) The department shall adopt rules governing the comprehensive
29 disaster preparedness plan. At a minimum, the rules must address:
30 Timely communication with the residents' emergency contacts; timely
31 communication with state and local agencies, long-term care ombuds,
32 and developmental disabilities ombuds; contacting and requesting
33 emergency assistance; on-duty employees' responsibilities; meeting
34 residents' essential needs; procedures to identify and locate
35 residents; and procedures to provide emergency information to provide
36 for the health and safety of residents. In addition, the rules shall
37 establish standards for maintaining personal protective equipment and
38 infection control capabilities, as well as department inspection
39 procedures with respect to the plans.

1 **Sec. 6.** RCW 18.51.009 and 1994 c 214 s 22 are each amended to
2 read as follows:

3 RCW 70.129.007, 70.129.105, ~~((and))~~ 70.129.150 through
4 70.129.170, and section 20 of this act apply to this chapter and
5 persons regulated under this chapter.

6 **Sec. 7.** RCW 18.51.260 and 1987 c 476 s 26 are each amended to
7 read as follows:

8 (1) Each citation for a violation specified in RCW 18.51.060
9 which is issued pursuant to this section (~~and which has become~~
10 final)), or a copy or copies thereof, shall be prominently posted, as
11 prescribed in regulations issued by the director, until the violation
12 is corrected to the satisfaction of the department up to a maximum of
13 one hundred twenty days. The citation or copy shall be posted in a
14 place or places in plain view of the patients in the nursing home,
15 persons visiting those patients, and persons who inquire about
16 placement in the facility.

17 (2) The department shall require a nursing home that is subject
18 to a stop placement order or limited stop placement order under RCW
19 18.51.060 to publicly post in a conspicuous place at the nursing home
20 a standardized notice that the department has issued a stop placement
21 order or limited stop placement order for the nursing home. The
22 standardized notice shall be developed by the department to include
23 the date of the stop placement order or limited stop placement order,
24 any conditions placed upon the nursing home's license, contact
25 information for the department, contact information for the
26 administrator or provider of the nursing home, and a statement that
27 anyone may contact the department or the administrator or provider
28 for further information. The notice must remain posted until the
29 department has terminated the stop placement order or limited stop
30 placement order.

31 NEW SECTION. **Sec. 8.** A new section is added to chapter 18.51
32 RCW to read as follows:

33 (1) The department shall require each nursing home to:

34 (a) Create and regularly maintain a current resident roster
35 containing the name and room number of each resident and provide a
36 written copy immediately upon an in-person request from any long-term
37 care ombuds;

1 (b) Create and regularly maintain current, accurate, and
2 aggregated contact information for all residents, including contact
3 information for the resident representative, if any, of each
4 resident. The contact information for each resident must include the
5 resident's name, room number, and, if available, telephone number and
6 email address. The contact information for each resident
7 representative must include the resident representative's name,
8 relationship to the resident, phone number, and, if available, email
9 and mailing address;

10 (c) Record and update the aggregated contact information required
11 by this section, upon receipt of new or updated contact information
12 from the resident or resident representative; and

13 (d) Upon the written request of any long-term care ombuds that
14 includes reference to this section and the relevant legal functions
15 and duties of long-term care ombuds, provide a copy of the aggregated
16 contact information required by this section within 48 hours, or
17 within a reasonable time if agreed to by the requesting long-term
18 care ombuds, by electronic copy to the secure email address or
19 facsimile number provided in the written request.

20 (2) In accordance with the federal older Americans act, federal
21 regulations, and state laws that govern the state long-term care
22 ombuds program, the department shall inform nursing homes that:

23 (a) Any long-term care ombuds is authorized to request and obtain
24 from nursing homes the information required by this section in order
25 to perform the functions and duties of long-term care ombuds as set
26 forth in federal and state laws;

27 (b) The state long-term care ombuds program and all long-term
28 care ombuds are considered a "health oversight agency," so that the
29 federal health insurance portability and accountability act and
30 chapter 70.02 RCW do not preclude nursing homes from providing the
31 information required by this section when requested by any long-term
32 care ombuds, and pursuant to these laws, the federal older Americans
33 act, federal regulations, and state laws that govern the state long-
34 term care ombuds program, nursing homes are not required to seek or
35 obtain consent from residents or resident representatives prior to
36 providing the information required by this section in accordance with
37 the requirements of this section;

38 (c) The information required by this section, when provided by a
39 nursing home to a requesting long-term care ombuds, becomes property
40 of the state long-term care ombuds program and is subject to all

1 state and federal laws governing the confidentiality and disclosure
2 of the files, records, and information maintained by the state long-
3 term care ombuds program or any local long-term care ombuds entity;
4 and

5 (d) The nursing home may not refuse to provide or unreasonably
6 delay providing the resident roster, the contact information for a
7 resident or resident representative, or the aggregated contact
8 information required by this section, on any basis, including on the
9 basis that the nursing home must first seek or obtain consent from
10 one or more of the residents or resident representatives.

11 (3) Nothing in this section shall interfere with or diminish the
12 authority of any long-term care ombuds to access nursing homes,
13 residents, and resident records as otherwise authorized by law.

14 (4) For the purposes of this section, "resident representative"
15 has the same meaning as in RCW 70.129.010.

16 NEW SECTION. **Sec. 9.** A new section is added to chapter 18.51
17 RCW to read as follows:

18 (1) Each nursing home must be responsive to incoming
19 communications and respond within a reasonable time to phone and
20 electronic messages.

21 (2) Each nursing home must have a communication system, including
22 a sufficient quantity of working telephones and other communication
23 equipment to ensure that residents have 24-hour access to
24 communications with family, medical providers, and others, and also
25 to allow for emergency contact to and from facility staff. The
26 telephones and communication equipment must provide for auditory
27 privacy, not be located in a staff office or station, be accessible
28 and usable by persons with hearing loss and other disabilities, and
29 not require payment for local calls. A nursing home is not required
30 to provide telephones at no cost in each resident room.

31 **Sec. 10.** RCW 74.42.420 and 1979 ex.s. c 211 s 42 are each
32 amended to read as follows:

33 The facility shall maintain an organized record system containing
34 a record for each resident. The record shall contain:

35 (1) Identification information, including the information listed
36 in section 8(1) of this act;

37 (2) Admission information, including the resident's medical and
38 social history;

1 (3) A comprehensive plan of care and subsequent changes to the
2 comprehensive plan of care;

3 (4) Copies of initial and subsequent periodic examinations,
4 assessments, evaluations, and progress notes made by the facility and
5 the department;

6 (5) Descriptions of all treatments, services, and medications
7 provided for the resident since the resident's admission;

8 (6) Information about all illnesses and injuries including
9 information about the date, time, and action taken; and

10 (7) A discharge summary.

11 Resident records shall be available to the staff members directly
12 involved with the resident and to appropriate representatives of the
13 department. The facility shall protect resident records against
14 destruction, loss, and unauthorized use. The facility shall keep a
15 resident's record after the resident is discharged as provided in RCW
16 18.51.300.

17 NEW SECTION. **Sec. 11.** A new section is added to chapter 18.51
18 RCW to read as follows:

19 (1) Each nursing home shall develop and maintain a comprehensive
20 disaster preparedness plan to be followed in the event of a disaster
21 or emergency, including fires, earthquakes, floods, infectious
22 disease outbreaks, loss of power or water, and other events that may
23 require sheltering in place, evacuations, or other emergency measures
24 to protect the health and safety of residents. The nursing home shall
25 review the comprehensive disaster preparedness plan annually, update
26 the plan as needed, and train all employees when they begin work in
27 the nursing home on the comprehensive disaster preparedness plan and
28 related staff procedures.

29 (2) The department shall adopt rules governing the comprehensive
30 disaster preparedness plan. At a minimum, the rules must address the
31 following if not already adequately addressed by federal requirements
32 for emergency planning: Timely communication with the residents'
33 emergency contacts; timely communication with state and local
34 agencies, long-term care ombuds, and developmental disabilities
35 ombuds; contacting and requesting emergency assistance; on-duty
36 employees' responsibilities; meeting residents' essential needs;
37 procedures to identify and locate residents; and procedures to
38 provide emergency information to provide for the health and safety of
39 residents. In addition, the rules shall establish standards for

1 maintaining personal protective equipment and infection control
2 capabilities, as well as department inspection procedures with
3 respect to the plans.

4 **Sec. 12.** RCW 74.42.460 and 1979 ex.s. c 211 s 46 are each
5 amended to read as follows:

6 The facility shall have a written staff organization plan and
7 detailed written procedures to meet potential emergencies and
8 disasters. The facility shall clearly communicate and periodically
9 review the plan and procedures with the staff and residents. The plan
10 and procedures shall be posted at suitable locations throughout the
11 facility. The planning requirement of this section shall complement
12 the comprehensive disaster preparedness planning requirement of
13 section 11 of this act.

14 NEW SECTION. **Sec. 13.** A new section is added to chapter 70.97
15 RCW to read as follows:

16 The department shall require an enhanced services facility that
17 is subject to a stop placement order or limited stop placement order
18 under RCW 70.97.110 to publicly post in a conspicuous place at the
19 facility a standardized notice that the department has issued a stop
20 placement order or limited stop placement order for the facility. The
21 standardized notice shall be developed by the department to include
22 the date of the stop placement order or limited stop placement order,
23 any conditions placed upon the facility's license, contact
24 information for the department, contact information for the
25 administrator or provider of the facility, and a statement that
26 anyone may contact the department or the administrator or provider
27 for further information. The notice must remain posted until the
28 department has terminated the stop placement order or limited stop
29 placement order.

30 NEW SECTION. **Sec. 14.** A new section is added to chapter 70.97
31 RCW to read as follows:

32 (1) The department shall require each enhanced services facility
33 to:

34 (a) Create and regularly maintain a current resident roster
35 containing the name and room number of each resident and provide a
36 written copy immediately upon an in-person request from any long-term
37 care ombuds;

1 (b) Create and regularly maintain current, accurate, and
2 aggregated contact information for all residents, including contact
3 information for the resident representative, if any, of each
4 resident. The contact information for each resident must include the
5 resident's name, room number, and, if available, telephone number and
6 email address. The contact information for each resident
7 representative must include the resident representative's name,
8 relationship to the resident, phone number, and, if available, email
9 and mailing address;

10 (c) Record and update the aggregated contact information required
11 by this section, upon receipt of new or updated contact information
12 from the resident or resident representative; and

13 (d) Upon the written request of any long-term care ombuds that
14 includes reference to this section and the relevant legal functions
15 and duties of long-term care ombuds, provide a copy of the aggregated
16 contact information required by this section within 48 hours, or
17 within a reasonable time if agreed to by the requesting long-term
18 care ombuds, by electronic copy to the secure email address or
19 facsimile number provided in the written request.

20 (2) In accordance with the federal older Americans act, federal
21 regulations, and state laws that govern the state long-term care
22 ombuds program, the department shall inform enhanced services
23 facilities that:

24 (a) Any long-term care ombuds is authorized to request and obtain
25 from enhanced services facilities the information required by this
26 section in order to perform the functions and duties of long-term
27 care ombuds as set forth in federal and state laws;

28 (b) The state long-term care ombuds program and all long-term
29 care ombuds are considered a "health oversight agency," so that the
30 federal health insurance portability and accountability act and
31 chapter 70.02 RCW do not preclude enhanced services facilities from
32 providing the information required by this section when requested by
33 any long-term care ombuds, and pursuant to these laws, the federal
34 older Americans act, federal regulations, and state laws that govern
35 the state long-term care ombuds program, facilities are not required
36 to seek or obtain consent from residents or resident representatives
37 prior to providing the information required by this section in
38 accordance with the requirements of this section;

39 (c) The information required by this section, when provided by an
40 enhanced services facility to a requesting long-term care ombuds,

1 becomes property of the state long-term care ombuds program and is
2 subject to all state and federal laws governing the confidentiality
3 and disclosure of the files, records, and information maintained by
4 the state long-term care ombuds program or any local long-term care
5 ombuds entity; and

6 (d) The enhanced services facility may not refuse to provide or
7 unreasonably delay providing the resident roster, the contact
8 information for a resident or resident representative, or the
9 aggregated contact information required by this section, on any
10 basis, including on the basis that the enhanced services facility
11 must first seek or obtain consent from one or more of the residents
12 or resident representatives.

13 (3) Nothing in this section shall interfere with or diminish the
14 authority of any long-term care ombuds to access facilities,
15 residents, and resident records as otherwise authorized by law.

16 (4) For the purposes of this section, "resident representative"
17 has the same meaning as in RCW 70.129.010.

18 NEW SECTION. **Sec. 15.** A new section is added to chapter 70.97
19 RCW to read as follows:

20 (1) Each enhanced services facility must be responsive to
21 incoming communications and respond within a reasonable time to phone
22 and electronic messages.

23 (2) Each enhanced services facility must have a communication
24 system, including a sufficient quantity of working telephones and
25 other communication equipment to assure that residents have 24-hour
26 access to communications with family, medical providers, and others,
27 and also to allow for emergency contact to and from facility staff.
28 The telephones and communication equipment must provide for auditory
29 privacy, not be located in a staff office or station, be accessible
30 and usable by persons with hearing loss and other disabilities, and
31 not require payment for local calls. An enhanced services facility is
32 not required to provide telephones at no cost in each resident room.

33 NEW SECTION. **Sec. 16.** A new section is added to chapter 70.97
34 RCW to read as follows:

35 (1) Each enhanced services facility shall develop and maintain a
36 comprehensive disaster preparedness plan to be followed in the event
37 of a disaster or emergency, including fires, earthquakes, floods,
38 infectious disease outbreaks, loss of power or water, and other

1 events that may require sheltering in place, evacuations, or other
2 emergency measures to protect the health and safety of residents. The
3 enhanced services facility must review the comprehensive disaster
4 preparedness plan annually, update the plan as needed, and train all
5 employees when they begin work in the enhanced services facility on
6 the comprehensive disaster preparedness plan and related staff
7 procedures.

8 (2) The department shall adopt rules governing the comprehensive
9 disaster preparedness plan. At a minimum, the rules must address:
10 Timely communication with the residents' emergency contacts; timely
11 communication with state and local agencies, long-term care ombuds,
12 and developmental disabilities ombuds; contacting and requesting
13 emergency assistance; on-duty employees' responsibilities; meeting
14 residents' essential needs; procedures to identify and locate
15 residents; and procedures to provide emergency information to provide
16 for the health and safety of residents. In addition, the rules shall
17 establish standards for maintaining personal protective equipment and
18 infection control capabilities, as well as department inspection
19 procedures with respect to the plans.

20 NEW SECTION. **Sec. 17.** A new section is added to chapter 70.128
21 RCW to read as follows:

22 (1) The department shall require each adult family home to:

23 (a) Create and regularly maintain a current resident roster
24 containing the name and room number of each resident and provide a
25 written copy immediately upon an in-person request from any long-term
26 care ombuds;

27 (b) Create and regularly maintain current, accurate, and
28 aggregated contact information for all residents, including contact
29 information for the resident representative, if any, of each
30 resident. The contact information for each resident must include the
31 resident's name, room number, and, if available, telephone number and
32 email address. The contact information for each resident
33 representative must include the resident representative's name,
34 relationship to the resident, phone number, and, if available, email
35 and mailing address;

36 (c) Record and update the aggregated contact information required
37 by this section, upon receipt of new or updated contact information
38 from the resident or resident representative; and

1 (d) Upon the written request of any long-term care ombuds that
2 includes reference to this section and the relevant legal functions
3 and duties of long-term care ombuds, provide a copy of the aggregated
4 contact information required by this section within 48 hours, or
5 within a reasonable time if agreed to by the requesting long-term
6 care ombuds, by electronic copy to the secure email address or
7 facsimile number provided in the written request.

8 (2) In accordance with the federal older Americans act, federal
9 regulations, and state laws that govern the state long-term care
10 ombuds program, the department shall inform adult family homes that:

11 (a) Any long-term care ombuds is authorized to request and obtain
12 from adult family homes the information required by this section in
13 order to perform the functions and duties of long-term care ombuds as
14 set forth in federal and state laws;

15 (b) The state long-term care ombuds program and all long-term
16 care ombuds are considered a "health oversight agency," so that the
17 federal health insurance portability and accountability act and
18 chapter 70.02 RCW do not preclude adult family homes from providing
19 the information required by this section when requested by any long-
20 term care ombuds, and pursuant to these laws, the federal older
21 Americans act, federal regulations, and state laws that govern the
22 state long-term care ombuds program, adult family homes are not
23 required to seek or obtain consent from residents or resident
24 representatives prior to providing the information required by this
25 section in accordance with the requirements of this section;

26 (c) The information required by this section, when provided by an
27 adult family home to a requesting long-term care ombuds, becomes
28 property of the state long-term care ombuds program and is subject to
29 all state and federal laws governing the confidentiality and
30 disclosure of the files, records, and information maintained by the
31 state long-term care ombuds program or any local long-term care
32 ombuds entity; and

33 (d) The adult family home may not refuse to provide or
34 unreasonably delay providing the resident roster, the contact
35 information for a resident or resident representative, or the
36 aggregated contact information required by this section, on any
37 basis, including on the basis that the adult family home must first
38 seek or obtain consent from one or more of the residents or resident
39 representatives.

1 (3) Nothing in this section shall interfere with or diminish the
2 authority of any long-term care ombuds to access facilities,
3 residents, and resident records as otherwise authorized by law.

4 (4) For the purposes of this section, "resident representative"
5 has the same meaning as in RCW 70.129.010.

6 NEW SECTION. **Sec. 18.** A new section is added to chapter 70.128
7 RCW to read as follows:

8 The department must require an adult family home that is subject
9 to a stop placement order or limited stop placement order under RCW
10 70.128.160 to publicly post in a conspicuous place at the adult
11 family home a standardized notice that the department has issued a
12 stop placement order or limited stop placement order for the adult
13 family home. The standardized notice shall be developed by the
14 department to include the date of the stop placement order or limited
15 stop placement order, any conditions placed upon the adult family
16 home's license, contact information for the department, contact
17 information for the administrator or provider of the adult family
18 home, and a statement that anyone may contact the department or the
19 administrator or provider for further information. The notice must
20 remain posted until the department has terminated the stop placement
21 order or limited stop placement order.

22 NEW SECTION. **Sec. 19.** A new section is added to chapter 70.129
23 RCW to read as follows:

24 The department of social and health services and the department
25 of health, in collaboration with the state office of the long-term
26 care ombuds and representatives of long-term care facilities, shall
27 develop training materials to educate the leadership and staff of
28 local health jurisdictions on the state's long-term care system. The
29 training materials must provide information to assist local health
30 jurisdiction personnel when establishing and enforcing public health
31 measures in long-term care facilities and nursing homes, including:

32 (1) All applicable state and federal resident rights, including
33 the due process rights of residents; and

34 (2) The process for local health jurisdiction personnel to report
35 abuse and neglect in facilities and nursing homes, including during
36 periods when visitation may be limited.

1 NEW SECTION. **Sec. 20.** A new section is added to chapter 70.129

2 RCW to read as follows:

3 (1) In circumstances in which limitations must be placed on
4 resident visitation due to a public health emergency or other threat
5 to the health and safety of the residents and staff of a facility or
6 nursing home, residents must still be allowed access to an essential
7 support person, subject to reasonable limitations on such access
8 tailored to protecting the health and safety of essential support
9 persons, residents, and staff.

10 (2) The facility or nursing home must allow private, in-person
11 access to the resident by the essential support person in the
12 resident's room. If the resident resides in a shared room, and the
13 roommate, or the roommate's resident representative, if any, does not
14 consent or the visit cannot be conducted safely in a shared room,
15 then the facility or nursing home shall designate a substitute
16 location in the facility or nursing home for the resident and
17 essential support person to visit.

18 (3) The facility or nursing home shall develop and implement
19 reasonable conditions on access by an essential support person
20 tailored to protecting the health and safety of the essential support
21 person, residents, and staff, based upon the particular public health
22 emergency or other health or safety threat.

23 (4) The facility or nursing home may temporarily suspend an
24 individual's designation as an essential support person for failure
25 to comply with these requirements or reasonable conditions developed
26 and implemented by the facility or nursing home that are tailored to
27 protecting that health and safety of the essential support person,
28 residents, and staff, based upon the particular public health
29 emergency or other health or safety threat. Unless immediate action
30 is necessary to prevent an imminent and serious threat to the health
31 or safety of residents or staff, the facility or nursing home shall
32 attempt to resolve the concerns with the essential support person and
33 the resident prior to temporarily suspending the individual's
34 designation as an essential support person. The suspension shall last
35 no longer than 48 hours during which time the facility or nursing
36 home must contact the department for guidance and must provide the
37 essential support person:

38 (a) Information regarding the steps the essential support person
39 must take to resume the visits, such as agreeing to comply with
40 reasonable conditions tailored to protecting the health and safety of

1 the essential support person, residents, and staff, based upon the
2 particular public health emergency or other health or safety threat;

3 (b) The contact information for the long-term care ombuds
4 program; and

5 (c) As appropriate, the contact information for the developmental
6 disabilities ombuds, the agency responsible for the protection and
7 advocacy system for individuals with developmental disabilities, and
8 the agency responsible for the protection and advocacy system for
9 individuals with mental illness.

10 (5) For the purposes of this section, "essential support person"
11 means an individual who is:

12 (a) At least 18 years of age;

13 (b) Designated by the resident, or by the resident's
14 representative, if the resident is determined to be incapacitated or
15 otherwise legally incapacitated; and

16 (c) Necessary for the resident's emotional, mental, or physical
17 well-being during situations that include, but are not limited to,
18 circumstances involving compassionate care or end-of-life care,
19 circumstances where visitation from a familiar person will assist
20 with important continuity of care or the reduction of confusion and
21 anxiety for residents with cognitive impairments, or other
22 circumstances where the presence of an essential support person will
23 prevent or reduce significant emotional distress to the resident.

24 **Sec. 21.** RCW 70.129.010 and 2020 c 278 s 13 are each reenacted
25 and amended to read as follows:

26 Unless the context clearly requires otherwise, the definitions in
27 this section apply throughout this chapter.

28 (1) "Chemical restraint" means a psychopharmacologic drug that is
29 used for discipline or convenience and not required to treat the
30 resident's medical symptoms.

31 (2) "Department" means the department of state government
32 responsible for licensing the provider in question.

33 (3) "Facility" means a long-term care facility.

34 (4) "Long-term care facility" means a facility that is licensed
35 or required to be licensed under chapter 18.20, 70.97, 72.36, or
36 70.128 RCW.

37 (5) "Physical restraint" means a manual method, obstacle, or
38 physical or mechanical device, material, or equipment attached or
39 adjacent to the resident's body that restricts freedom of movement or

1 access to his or her body, is used for discipline or convenience, and
2 not required to treat the resident's medical symptoms.

3 (6) "Reasonable accommodation" by a facility to the needs of a
4 prospective or current resident has the meaning given to this term
5 under the federal Americans with disabilities act of 1990, 42 U.S.C.
6 Sec. 12101 et seq. and other applicable federal or state
7 antidiscrimination laws and regulations.

8 (~~(7) ("Representative" means a person appointed under RCW~~
9 ~~7.70.065.~~

10 ~~(8))~~ "Resident" means the individual receiving services in a
11 long-term care facility, that resident's attorney-in-fact, guardian,
12 or other (~~legal~~) representative acting within the scope of their
13 authority.

14 (8) "Resident representative" means:

15 (a)(i) A court-appointed guardian or conservator of a resident,
16 if any;

17 (ii) An individual otherwise authorized by state or federal law
18 including, but not limited to, agents under power of attorney,
19 representative payees, and other fiduciaries, to act on behalf of the
20 resident in order to support the resident in decision making; access
21 medical, social, or other personal information of the resident;
22 manage financial matters; or receive notifications; or

23 (iii) If there is no individual who meets the criteria under
24 (a)(i) or (ii) of this subsection, an individual chosen by the
25 resident to act on behalf of the resident in order to support the
26 resident in decision making; access medical, social, or other
27 personal information of the resident; manage financial matters; or
28 receive notifications.

29 (b) The term "resident representative" does not include any
30 individual described in (a) of this subsection who is affiliated with
31 any long-term care facility or nursing home where the resident
32 resides, or its licensee or management company, unless the affiliated
33 individual is a family member of the resident.

34 **Sec. 22.** RCW 70.129.020 and 1994 c 214 s 3 are each amended to
35 read as follows:

36 The resident has a right to a dignified existence, self-
37 determination, and communication with and access to persons and
38 services inside and outside the facility. A facility must protect and

1 promote the rights of each resident and assist the resident which
2 include:

3 (1) The resident has the right to exercise his or her rights as a
4 resident of the facility and as a citizen or resident of the United
5 States and the state of Washington.

6 (2) The resident has the right to be free of interference,
7 coercion, discrimination, and reprisal from the facility in
8 exercising his or her rights.

9 (3) In the case of a resident adjudged incompetent by a court of
10 competent jurisdiction, the rights of the resident are exercised by
11 the person appointed to act on the resident's behalf.

12 (4) In the case of a resident who has not been adjudged
13 incompetent by a court of competent jurisdiction, a resident
14 representative may exercise the resident's rights to the extent
15 provided by law.

16 **Sec. 23.** RCW 70.129.030 and 2013 c 23 s 184 are each amended to
17 read as follows:

18 (1) The facility must inform the resident both orally and in
19 writing in a language that the resident understands of his or her
20 rights and all rules and regulations governing resident conduct and
21 responsibilities during the stay in the facility. The notification
22 must be made prior to or upon admission. Receipt of the information
23 must be acknowledged in writing.

24 (2) The resident to the extent provided by law or (~~his or her~~
25 ~~legal~~) resident representative to the extent provided by law, has
26 the right:

27 (a) Upon an oral or written request, to access all records
28 pertaining to himself or herself including clinical records within
29 twenty-four hours; and

30 (b) After receipt of his or her records for inspection, to
31 purchase at a cost not to exceed the community standard photocopies
32 of the records or portions of them upon request and two working days'
33 advance notice to the facility.

34 (3) The facility shall only admit or retain individuals whose
35 needs it can safely and appropriately serve in the facility with
36 appropriate available staff and through the provision of reasonable
37 accommodations required by state or federal law. Except in cases of
38 genuine emergency, the facility shall not admit an individual before
39 obtaining a thorough assessment of the resident's needs and

1 preferences. The assessment shall contain, unless unavailable despite
2 the best efforts of the facility, the resident applicant, and other
3 interested parties, the following minimum information: Recent medical
4 history; necessary and contraindicated medications; a licensed
5 medical or other health professional's diagnosis, unless the
6 individual objects for religious reasons; significant known behaviors
7 or symptoms that may cause concern or require special care; mental
8 illness, except where protected by confidentiality laws; level of
9 personal care needs; activities and service preferences; and
10 preferences regarding other issues important to the resident
11 applicant, such as food and daily routine.

12 (4) The facility must inform each resident in writing in a
13 language the resident or (~~his or her~~) resident representative
14 understands before admission, and at least once every twenty-four
15 months thereafter of: (a) Services, items, and activities customarily
16 available in the facility or arranged for by the facility as
17 permitted by the facility's license; (b) charges for those services,
18 items, and activities including charges for services, items, and
19 activities not covered by the facility's per diem rate or applicable
20 public benefit programs; and (c) the rules of facility operations
21 required under RCW 70.129.140(2). Each resident and (~~his or her~~)
22 resident representative must be informed in writing in advance of
23 changes in the availability or the charges for services, items, or
24 activities, or of changes in the facility's rules. Except in
25 emergencies, thirty days' advance notice must be given prior to the
26 change. However, for facilities licensed for six or fewer residents,
27 if there has been a substantial and continuing change in the
28 resident's condition necessitating substantially greater or lesser
29 services, items, or activities, then the charges for those services,
30 items, or activities may be changed upon fourteen days' advance
31 written notice.

32 (5) The facility must furnish a written description of residents
33 rights that includes:

34 (a) A description of the manner of protecting personal funds,
35 under RCW 70.129.040;

36 (b) A posting of names, addresses, and telephone numbers of the
37 state survey and certification agency, the state licensure office,
38 the state ombuds program, and the protection and advocacy systems;
39 and

1 (c) A statement that the resident may file a complaint with the
2 appropriate state licensing agency concerning alleged resident abuse,
3 neglect, and misappropriation of resident property in the facility.

4 (6) Notification of changes.

5 (a) A facility must immediately consult with the resident's
6 physician, and if known, make reasonable efforts to notify the
7 (~~resident's legal~~) resident representative (~~(or an interested~~
8 ~~family member)~~) to the extent provided by law when there is:

9 (i) An accident involving the resident which requires or has the
10 potential for requiring physician intervention;

11 (ii) A significant change in the resident's physical, mental, or
12 psychosocial status (i.e., a deterioration in health, mental, or
13 psychosocial status in either life-threatening conditions or clinical
14 complications).

15 (b) The facility must promptly notify the resident or (~~the~~
16 ~~resident's~~) resident representative (~~(shall make reasonable efforts~~
17 ~~to notify an interested family member, if known,)~~) when there is:

18 (i) A change in room or roommate assignment; or

19 (ii) A decision to transfer or discharge the resident from the
20 facility.

21 (c) The facility must record and update the address (~~and~~),
22 phone number, and any other contact information of the (~~resident's~~)
23 resident representative (~~(or interested family member)~~), upon receipt
24 of notice from them.

25 **Sec. 24.** RCW 70.129.040 and 2011 1st sp.s. c 3 s 301 are each
26 amended to read as follows:

27 (1) The resident has the right to manage his or her financial
28 affairs, and the facility may not require residents to deposit their
29 personal funds with the facility.

30 (2) Upon written authorization of a resident, if the facility
31 agrees to manage the resident's personal funds, the facility must
32 hold, safeguard, manage, and account for the personal funds of the
33 resident deposited with the facility as specified in this section.

34 (a) The facility must deposit a resident's personal funds in
35 excess of one hundred dollars in an interest-bearing account or
36 accounts that is separate from any of the facility's operating
37 accounts, and that credits all interest earned on residents' funds to
38 that account. In pooled accounts, there must be a separate accounting
39 for each resident's share.

1 (b) The facility must maintain a resident's personal funds that
2 do not exceed one hundred dollars in a noninterest-bearing account,
3 interest-bearing account, or petty cash fund.

4 (3) The facility must establish and maintain a system that
5 assures a full and complete and separate accounting of each
6 resident's personal funds entrusted to the facility on the resident's
7 behalf.

8 (a) The system must preclude any commingling of resident funds
9 with facility funds or with the funds of any person other than
10 another resident.

11 (b) The individual financial record must be available on request
12 to the resident, or ~~((his or her legal))~~ resident representative to
13 the extent provided by law.

14 (4) Upon the death of a resident with personal funds deposited
15 with the facility, the facility must convey within thirty days the
16 resident's funds, and a final accounting of those funds, to the
17 individual or probate jurisdiction administering the resident's
18 estate; but in the case of a resident who received long-term care
19 services paid for by the state, the funds and accounting shall be
20 sent to the state of Washington, department of social and health
21 services, office of financial recovery. The department shall
22 establish a release procedure for use for burial expenses.

23 (5) If any funds in excess of one hundred dollars are paid to an
24 adult family home by the resident or ((a)) resident representative
25 ~~((of the resident))~~, as a security deposit for performance of the
26 resident's obligations, or as prepayment of charges beyond the first
27 month's residency, the funds shall be deposited by the adult family
28 home in an interest-bearing account that is separate from any of the
29 home's operating accounts, and that credits all interest earned on
30 the resident's funds to that account. In pooled accounts, there must
31 be a separate accounting for each resident's share. The account or
32 accounts shall be in a financial institution as defined by RCW
33 ~~((30.22.041))~~ 30A.22.041, and the resident shall be notified in
34 writing of the name, address, and location of the depository. The
35 adult family home may not commingle resident funds from these
36 accounts with the adult family home's funds or with the funds of any
37 person other than another resident. The individual resident's account
38 record shall be available upon request by the resident or ~~((the~~
39 ~~resident's))~~ resident representative to the extent provided by law.

1 (6) The adult family home shall provide the resident or (~~the~~
2 ~~resident's~~) resident representative full disclosure in writing,
3 prior to the receipt of any funds for a deposit, security, prepaid
4 charges, or any other fees or charges, specifying what the funds are
5 paid for and the basis for retaining any portion of the funds if the
6 resident dies, is hospitalized, or is transferred or discharged from
7 the adult family home. The disclosure must be in a language that the
8 resident or (~~the resident's~~) resident representative understands,
9 and be acknowledged in writing by the resident or (~~the resident's~~)
10 resident representative. The adult family home shall retain a copy of
11 the disclosure and the acknowledgment. The adult family home may not
12 retain funds for reasonable wear and tear by the resident or for any
13 basis that would violate RCW 70.129.150.

14 (7) Funds paid by the resident or (~~the resident's~~) resident
15 representative to the adult family home, which the adult family home
16 in turn pays to a placement agency or person, shall be governed by
17 the disclosure requirements of this section. If the resident then
18 dies, is hospitalized, or is transferred or discharged from the adult
19 family home, and is entitled to any refund of funds under this
20 section or RCW 70.129.150, the adult family home shall refund the
21 funds to the resident or (~~the resident's~~) resident representative
22 to the extent provided by law, within thirty days of the resident
23 leaving the adult family home, and may not require the resident to
24 obtain the refund from the placement agency or person.

25 (8) If, during the stay of the resident, the status of the adult
26 family home licensee or ownership is changed or transferred to
27 another, any funds in the resident's accounts affected by the change
28 or transfer shall simultaneously be deposited in an equivalent
29 account or accounts by the successor or new licensee or owner, who
30 shall promptly notify the resident or (~~the resident's~~) resident
31 representative to the extent provided by law, in writing of the name,
32 address, and location of the new depository.

33 (9) Because it is a matter of great public importance to protect
34 residents who need long-term care from deceptive disclosures and
35 unfair retention of deposits, fees, or prepaid charges by adult
36 family homes, a violation of this section or RCW 70.129.150 shall be
37 construed for purposes of the consumer protection act, chapter 19.86
38 RCW, to constitute an unfair or deceptive act or practice or an
39 unfair method of competition in the conduct of trade or commerce. The
40 resident's claim to any funds paid under this section shall be prior

1 to that of any creditor of the adult family home, its owner, or
2 licensee, even if such funds are commingled.

3 **Sec. 25.** RCW 70.129.080 and 1994 c 214 s 9 are each amended to
4 read as follows:

5 The resident has the right to privacy in communications,
6 including the right to:

7 (1) Send and promptly receive mail that is unopened;

8 (2) Have access to stationery, postage, and writing implements at
9 the resident's own expense; and

10 (3) Have reasonable access within a reasonable time to the use of
11 a telephone and other communication equipment where calls can be made
12 without being overheard.

13 **Sec. 26.** RCW 70.129.090 and 2013 c 23 s 185 are each amended to
14 read as follows:

15 (1) The resident has the right and the facility must not
16 interfere with access to any resident by the following:

17 (a) Any representative of the state;

18 (b) The resident's individual physician;

19 (c) The state long-term care ombuds as established under chapter
20 43.190 RCW;

21 (d) The agency responsible for the protection and advocacy system
22 for individuals with developmental disabilities as established under
23 part C of the developmental disabilities assistance and bill of
24 rights act;

25 (e) The agency responsible for the protection and advocacy system
26 for individuals with mental illness as established under the
27 protection and advocacy for mentally ill individuals act;

28 (f) Subject to reasonable restrictions to protect the rights of
29 others and to the resident's right to deny or withdraw consent at any
30 time, resident representative, immediate family or other relatives of
31 the resident, and others who are visiting with the consent of the
32 resident;

33 (g) The agency responsible for the protection and advocacy system
34 for individuals with disabilities as established under section 509 of
35 the rehabilitation act of 1973, as amended, who are not served under
36 the mandates of existing protection and advocacy systems created
37 under federal law.

1 (2) The facility must provide reasonable access to a resident by
2 (~~his or her~~) the resident representative or an entity or individual
3 that provides health, social, legal, or other services to the
4 resident, subject to the resident's right to deny or withdraw consent
5 at any time.

6 (3) The facility must allow representatives of the state ombuds
7 to examine a resident's clinical records with the permission of the
8 resident or (~~the resident's legal~~) resident representative to the
9 extent provided by law, and consistent with state and federal law.

10 **Sec. 27.** RCW 70.129.110 and 2013 c 23 s 186 are each amended to
11 read as follows:

12 (1) The facility must permit each resident to remain in the
13 facility, and not transfer or discharge the resident from the
14 facility unless:

15 (a) The transfer or discharge is necessary for the resident's
16 welfare and the resident's needs cannot be met in the facility;

17 (b) The safety of individuals in the facility is endangered;

18 (c) The health of individuals in the facility would otherwise be
19 endangered;

20 (d) The resident has failed to make the required payment for his
21 or her stay; or

22 (e) The facility ceases to operate.

23 (2) All long-term care facilities shall fully disclose to
24 potential residents or (~~their legal~~) resident representatives the
25 service capabilities of the facility prior to admission to the
26 facility. If the care needs of the applicant who is medicaid eligible
27 are in excess of the facility's service capabilities, the department
28 shall identify other care settings or residential care options
29 consistent with federal law.

30 (3) Before a long-term care facility transfers or discharges a
31 resident, the facility must:

32 (a) First attempt through reasonable accommodations to avoid the
33 transfer or discharge, unless agreed to by the resident;

34 (b) Notify the resident and resident representative (~~and make a~~
35 ~~reasonable effort to notify, if known, an interested family member~~)
36 of the transfer or discharge and the reasons for the move in writing
37 and in a language and manner they understand;

38 (c) Record the reasons in the resident's record; and

1 (d) Include in the notice the items described in subsection (5)
2 of this section.

3 (4) (a) Except when specified in this subsection, the notice of
4 transfer or discharge required under subsection (3) of this section
5 must be made by the facility at least thirty days before the resident
6 is transferred or discharged.

7 (b) Notice may be made as soon as practicable before transfer or
8 discharge when:

9 (i) The safety of individuals in the facility would be
10 endangered;

11 (ii) The health of individuals in the facility would be
12 endangered;

13 (iii) An immediate transfer or discharge is required by the
14 resident's urgent medical needs; or

15 (iv) A resident has not resided in the facility for thirty days.

16 (5) The written notice specified in subsection (3) of this
17 section must include the following:

18 (a) The reason for transfer or discharge;

19 (b) The effective date of transfer or discharge;

20 (c) The location to which the resident is transferred or
21 discharged;

22 (d) The name, address, and telephone number of the state long-
23 term care ombuds;

24 (e) For residents with developmental disabilities, the mailing
25 address and telephone number of the agency responsible for the
26 protection and advocacy of individuals with developmental
27 disabilities established under part C of the developmental
28 disabilities assistance and bill of rights act; and

29 (f) For residents with mental illness, the mailing address and
30 telephone number of the agency responsible for the protection and
31 advocacy of individuals with mental illness established under the
32 protection and advocacy for mentally ill individuals act.

33 (6) A facility must provide sufficient preparation and
34 orientation to residents to ensure safe and orderly transfer or
35 discharge from the facility.

36 (7) A resident discharged in violation of this section has the
37 right to be readmitted immediately upon the first availability of a
38 gender-appropriate bed in the facility.

1 **Sec. 28.** RCW 70.129.150 and 1997 c 392 s 206 are each amended to
2 read as follows:

3 (1) Prior to admission, all long-term care facilities or nursing
4 facilities licensed under chapter 18.51 RCW that require payment of
5 an admissions fee, deposit, or a minimum stay fee, by or on behalf of
6 a person seeking admission to the long-term care facility or nursing
7 facility, shall provide the resident, or (~~his or her~~) resident
8 representative, full disclosure in writing in a language the resident
9 or (~~his or her~~) resident representative understands, a statement of
10 the amount of any admissions fees, deposits, prepaid charges, or
11 minimum stay fees. The facility shall also disclose to the person, or
12 (~~his or her~~) resident representative, the facility's advance notice
13 or transfer requirements, prior to admission. In addition, the long-
14 term care facility or nursing facility shall also fully disclose in
15 writing prior to admission what portion of the deposits, admissions
16 fees, prepaid charges, or minimum stay fees will be refunded to the
17 resident or (~~his or her~~) resident representative to the extent
18 provided by law, if the resident leaves the long-term care facility
19 or nursing facility. Receipt of the disclosures required under this
20 subsection must be acknowledged in writing. If the facility does not
21 provide these disclosures, the deposits, admissions fees, prepaid
22 charges, or minimum stay fees may not be kept by the facility. If a
23 resident dies or is hospitalized or is transferred to another
24 facility for more appropriate care and does not return to the
25 original facility, the facility shall refund any deposit or charges
26 already paid less the facility's per diem rate for the days the
27 resident actually resided or reserved or retained a bed in the
28 facility notwithstanding any minimum stay policy or discharge notice
29 requirements, except that the facility may retain an additional
30 amount to cover its reasonable, actual expenses incurred as a result
31 of a private-pay resident's move, not to exceed five days' per diem
32 charges, unless the resident has given advance notice in compliance
33 with the admission agreement. All long-term care facilities or
34 nursing facilities covered under this section are required to refund
35 any and all refunds due the resident or (~~his or her~~) resident
36 representative to the extent provided by law, within thirty days from
37 the resident's date of discharge from the facility. Nothing in this
38 section applies to provisions in contracts negotiated between a
39 nursing facility or long-term care facility and a certified health

1 plan, health or disability insurer, health maintenance organization,
2 managed care organization, or similar entities.

3 (2) Where a long-term care facility or nursing facility requires
4 the execution of an admission contract by or on behalf of an
5 individual seeking admission to the facility, the terms of the
6 contract shall be consistent with the requirements of this section,
7 and the terms of an admission contract by a long-term care facility
8 shall be consistent with the requirements of this chapter.

9 **Sec. 29.** RCW 70.129.180 and 2009 c 489 s 1 are each amended to
10 read as follows:

11 (1) A long-term care facility must fully disclose to residents
12 the facility's policy on accepting medicaid as a payment source. The
13 policy shall clearly state the circumstances under which the facility
14 provides care for medicaid eligible residents and for residents who
15 may later become eligible for medicaid.

16 (2) The policy under this section must be provided to residents
17 orally and in writing prior to admission, in a language that the
18 resident or (~~the resident's~~) resident representative understands.
19 The written policy must be in type font no smaller than fourteen
20 point and written on a page that is separate from other documents.
21 The policy must be signed and dated by the resident or (~~the~~
22 ~~resident's~~) resident representative to the extent provided by law,
23 if the resident lacks capacity. The facility must retain a copy of
24 the disclosure. Current residents must receive a copy of the policy
25 consistent with this section by July 26, 2009.

26 NEW SECTION. **Sec. 30.** A new section is added to chapter 70.01
27 RCW to read as follows:

28 (1) The department of health and the department of social and
29 health services shall develop a report and guidelines on epidemic
30 disease preparedness and response for long-term care facilities. In
31 developing the report and guidelines, the department of health and
32 the department of social and health services shall consult with
33 interested stakeholders, including but not limited to:

- 34 (a) Local health jurisdictions;
35 (b) Advocates for consumers of long-term care;
36 (c) Associations representing long-term care facility providers;
37 and
38 (d) The office of the state long-term care ombuds.

1 (2) The report must identify best practices and lessons learned
2 about containment and mitigation strategies for controlling the
3 spread of the infectious agent. At a minimum, the report must
4 consider:

5 (a) Visitation policies that balance the psychosocial and
6 physical health of residents;

7 (b) Timely and adequate access to personal protective equipment
8 and other infection control supplies so that employees in long-term
9 care facilities are prioritized for distribution in the event of
10 supply shortages;

11 (c) Admission and discharge policies and standards; and

12 (d) Rapid and accurate testing to identify infectious outbreaks
13 for:

14 (i) Resident cohorting and treatment;

15 (ii) Contact tracing purposes; and

16 (iii) Protecting the health and well-being of residents and
17 employees.

18 (3) In developing the report, the department of health and the
19 department of social and health services shall work with the
20 stakeholders identified in subsection (1) of this section to:

21 (a) Ensure that any corresponding federal rules and guidelines
22 take precedence over the state guidelines;

23 (b) Avoid conflict between federal requirements and state
24 guidelines;

25 (c) Develop a timeline for implementing the guidelines and a
26 process for communicating the guidelines to long-term care
27 facilities, local health jurisdictions, and other interested
28 stakeholders in a clear and timely manner;

29 (d) Consider options for targeting available resources towards
30 infection control when epidemic disease outbreaks occur in long-term
31 care facilities;

32 (e) Establish methods for ensuring that epidemic preparedness and
33 response guidelines are consistently applied across all local health
34 jurisdictions and long-term care facilities in Washington state. This
35 may include recommendations to the legislature for any needed
36 statutory changes;

37 (f) Develop a process for maintaining and updating epidemic
38 preparedness and response guidelines as necessary; and

39 (g) Ensure appropriate considerations for each unique provider
40 type.

1 (4) By December 1, 2021, the department of health and the
2 department of social and health services shall provide a draft report
3 and guidelines on COVID-19 as outlined in subsection (2) of this
4 section to the health care committees of the legislature.

5 (5) By July 1, 2022, the department of health and the department
6 of social and health services shall finalize the report and
7 guidelines on COVID-19 and provide the report to the health care
8 committees of the legislature.

9 (6) Beginning December 1, 2022, and annually thereafter, the
10 department of health and the department of social and health services
11 shall:

12 (a) Review the report and any corresponding guidelines;

13 (b) Make any necessary changes regarding COVID-19 and add
14 information about any emerging epidemic of public health concern; and

15 (c) Provide the updated report and guidelines to the health care
16 committees of the legislature. When providing the updated guidelines
17 to the legislature, the department of health and the department of
18 social and health services may include recommendations to the
19 legislature for any needed statutory changes.

20 (7) For purposes of this section, "long-term care facilities"
21 includes:

22 (a) Licensed skilled nursing facilities, assisted living
23 facilities, adult family homes, and enhanced services facilities;

24 (b) Certified community residential services and supports; and

25 (c) Registered continuing care retirement communities."

SHB 1218 - S COMM AMD

By Committee on Health & Long Term Care

ADOPTED 04/10/2021

26 On page 1, line 4 of the title, after "sanctions;" strike the
27 remainder of the title and insert "amending RCW 18.51.009, 18.51.260,
28 74.42.420, 74.42.460, 70.129.020, 70.129.030, 70.129.040, 70.129.080,
29 70.129.090, 70.129.110, 70.129.150, and 70.129.180; reenacting and
30 amending RCW 70.129.010; adding new sections to chapter 18.20 RCW;
31 adding new sections to chapter 18.51 RCW; adding new sections to
32 chapter 70.97 RCW; adding new sections to chapter 70.128 RCW; adding
33 new sections to chapter 70.129 RCW; adding a new section to chapter
34 70.01 RCW; and creating a new section."

EFFECT: Adds a requirement for DOH and DSHS to consult with interested stakeholders to develop a report and guidelines on epidemic preparedness and response for long-term care facilities.

--- END ---