



Resource Book

Chapter 246-337
September 2006 Edition

Washington State
Residential Treatment
Facility

Chapter 246-337

Resource Book

Washington State Residential Treatment Facility

September 2006 Edition



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Residential Treatment Facility

WAC 246-337

Introduction

Welcome to the first Resource Book to the Washington Administrative Code (WAC) for Residential Treatment Facility (RTF) since the adoption of WAC 246-337, August 20, 2005. The RTF is a community based 24 hour residential treatment setting. This setting may provide chemical dependency and mental health services for adults and/or children. Children may accompany parents during chemical dependency treatment in designated facilities.

The types of services provided in the RTF range from crisis triage, voluntary and involuntary evaluation and treatment, chemical dependency detoxification, short and long term care for chemical dependency and/or mental illness.

The Department of Health (DOH) has created this resource book in collaboration with stakeholders to help everyone better understand the rules. The stakeholders include volunteers from various facility types and other governmental agencies, i.e., Division of Alcohol and Substance Abuse (DASA) and Mental Health Division (MHD) under the Department of Social and Health Services (DSHS) Health and Recovery Services Administration.

Here is a short explanation of how the book is organized and what you will find as you read it:

WAC's with Helpful Hints and Notes

This section presents the WAC's with inserted comments throughout. The comments are to assist you in understanding the WAC. Here is what you will see in this section:

- The actual language of the rule is in Times New Roman (this font).

- The "Notes" provide information about a requirement.



- "Links" provide access to other websites with related information.



- "Tools" provide examples useful in meeting the intent of the rule.



- "References" provide other regulations or documents.



It is important that you remember that only the Times New Roman words are law. You are not legally required to do anything except what is in Times New Roman, everything else is just information, advice or suggestion.

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Resource Section

The resource section contains a complete list of links, tools and references.

Revised Code of Washington (RCW)

The Revised Code of Washington (RCW) is the law as passed by the legislature. The RTF law creates legal requirements that RTF must meet. The law applies to the licensees and the Department of Health. DOH's statutory authority is RCW 71.12, Private Establishments.

Washington Administrative Code (WAC)

The Washington Administrative Code (WAC) often referred to as rules, regs or regulation, operationalizes how the RCW is applied. The rules go into details about specific requirements, so they are important to a licensee's day to day business. The rules were developed in collaboration with stakeholders, i.e., industry and other governmental agencies.

Statutory Authority

This section lists the law (RCW) that authorizes DOH to implement the rule.

Index

An alphabetical index assists in finding topics.

The RTF rule and resource book are available in hard copy, by CD or from our website http://www.doh.wa.gov/hsqa/fsl/arcs/RCS/rtf_main.htm

For question or comments, please contact us:

- Phone 1-800-771-1204
- FAX (360) 236-2901
- E-mail fslarcs@doh.wa.gov

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WAC 246-337

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WAC 246-337

WAC with Helpful Hints and Notes

Scope And Purpose

WAC 246-337-001

- (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.

Notes

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WAC with Helpful Hints and Notes

Definitions

WAC 246-337-005

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) “Bathroom” means a room containing at least one bathtub or shower.
- (6) “Chemical dependency” means alcoholism, drug addiction, or dependence on alcohol and one or more other psychoactive chemicals, as the context requires.
- (7) “Chemical dependency RTF” means all or part of an RTF certified by DSHS 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) “Subacute detoxification” as defined in chapter 388-805 WAC;
 - (c) “Intensive inpatient services” as defined in chapter 388-805 WAC;
 - (d) “Long-term treatment services” as defined in chapter 388-805 WAC;
 - (e) “Recovery house services” as defined in chapter 388-805 WAC.
- (8) “Child” or “minor” means an individual under the age of eighteen.

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WAC 246-337-005 (Continued)

- (9) “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.
- (10) “Confidential” means information that may not be disclosed except under specific conditions permitted or mandated by law or legal agreement between the parties concerned.
- (11) “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.
- (12) “DASA” means division of alcohol and substance abuse, within DSHS.
- (13) “Department” means the Washington state department of health.
- (14) “DSHS” means the Washington state department of social and health services.
- (15) “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 provider.
- (16) “Facility” means a building or portion of a building.
- (17) “First aid” means care for a condition that requires immediate assistance from an individual trained and certified in first-aid procedures.
- (18) “Hand hygiene” means handwashing, antiseptic hand wash, or antiseptic hand or surgical hand antisepsis.
- (19) “Health” means a state of complete physical and mental well-being and not merely the absence of disease or infirmity.

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WAC with Helpful Hints and Notes

WAC 246-337-005 (Continued)

- (20) “Health assessment” means a systematic examination of the person’s body conducted by an authorized health care provider.
- (21) “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.
- (22) “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.
- (23) “Health care screen” means the process approved by an authorized health care provider to determine the health care needs of a resident.
- (24) “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.
- (25) “Medication” means a legend drug prescribed for a resident by an authorized health care provider, or nonprescription drugs, also called “over-the-counter medications,” that can be purchased by the general public without a prescription.
- (26) “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.
- (27) “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.
- (28) “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.

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WAC 246-337-005 (Continued)

- (29) “Medication protocol” means a specific group of orders to be used for specific symptoms for specific residents and authorized by a health care provider.
- (30) “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:
- “Adult residential treatment” as defined in chapter 388-865 WAC;
 - “Inpatient evaluation and treatment” as defined in chapter 388-865 WAC;
 - “Child inpatient evaluation and treatment” as defined in chapter 388-865 WAC.
 - “Child long-term inpatient treatment” as defined in chapter 388-865 WAC.
- (31) “Parent” means:
- A biological or adoptive parent who has legal custody of the child, including either parent if custody is shared under joint custody agreement; or
 - An individual or agency judicially appointed as legal guardian or custodian of the child.
- (32) “Resident” means an individual (adult or child) admitted to the RTF licensed under this chapter.
-  **Note:**
This includes children accompanying parents to treatment.
- (33) “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.
- (34) “Restraint” means a continuum of methods used to prevent or limit free body movement.
- (35) “Room” means a space set apart by floor to ceiling partitions on all sides with all openings provided with doors or windows.

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WAC 246-337-005 (Continued)

- (36) “Seclusion” means the involuntary confinement of a resident alone in a room or area from which the resident is physically prevented from leaving.
- (37) “Sink” means a properly trapped plumbing fixture, capable of holding water, with approved potable hot and cold running water under pressure.
- (38) “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.
- (39) “Toilet room” means a room containing a water closet (toilet).
- (40) “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.

Notes

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WAC with Helpful Hints and Notes

Initial Licensure And Renewal Process

WAC 246-337-010

- (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 on-site survey.
 - (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.

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WAC with Helpful Hints and Notes

WAC 246-337-010 (Continued)

- (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;

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WAC 246-337-010 (Continued)

- (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.



Link:

To access a copy of the regulations, application, contact information, complaint process, licensing requirements and facility search information please visit: <http://www.doh.wa.gov/hsqa/fsl/arcs/RCS/contact.htm>

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Service Categories

WAC 246-337-015

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.



Note:

A licensee may request separate licenses for different service categories.

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Responsibilities And Rights Of The Licensee And Department

WAC 246-337-020

- (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;
-  **Link:**

Current contact information for DOH can be found at <http://www.doh.wa.gov/hsqa/fsl/arcs/RCS/contact.htm>

Information about mental health ombudsmen can be found at <http://www1.dshs.wa.gov/mentalhealth/ombuds.shtml>
- (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.
- (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;

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WAC 246-337-020 (Continued)

- (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



Note:

A licensee may request separate licenses for different service categories. As an example, a facility could be licensed as a chemical dependency acute detoxification facility and a mental health inpatient evaluation and treatment facility.

- (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;
 - (e) Document, during an initial survey or as needed, 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.



Tool:

See Resource 1 Sleeping Room Layout

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WAC with Helpful Hints and Notes

Exemptions And Alternative Methods

WAC 246-337-025

- (1) An applicant or licensee may request an exemption 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.



Link:

The procedure for requesting an exemption can be found at <http://www.doh.wa.gov/hsqa/fsl/CRS/exemptions.htm>

- (2) After review and consideration, the department may grant an exemption 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.

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Retroactivity

WAC 246-337-030

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.



Note:

This section relates to structural modifications only! General repair is not considered structural modification. Existing facilities licensed and constructed under the previous regulations, e.g., Uniform Building, Electrical and Plumbing Codes; National Electrical Code; and WACs 246-323, 325 and 326 will not need to make structural modifications to comply with this regulation unless new structural modifications are made to an area.

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Procedures To Deny, Suspend, Modify Or Revoke A License

WAC 246-337-035

- (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.

Deny, Suspend, Modify
or Revoke a License

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WAC with Helpful Hints and Notes

WAC 246-337-035 (Continued)

- (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.

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WAC with Helpful Hints and Notes

Review Of Construction Documents And Functional Program

WAC 246-337-040

- (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.
- (2) 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) 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.



Note:

This plan is known as the written “functional program” as referenced in this section of the regulation.



Tool:

See Resource 2 Functional Program for additional information.



Links:

Additional information related to functional programs can be found at http://www.doh.wa.gov/hsqa/fsl/CRS/functional_program.htm

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WAC 246-337-040 (Continued)

- (3) The licensee or applicant must submit accurate, timely, and complete construction documents that comply with all governing rules.
- (4) 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) Dimensioned floor plan(s) with the function of each room and fixed/required equipment designated;
 - (iii) Elevations, sections, and construction details;
 - (iv) Schedule of floor, wall, and ceiling finishes;
 - (v) Schedules of doors and windows sizes and type, and door finish hardware;
 - (vi) Mechanical systems plumbing and heating/venting/air conditioning; and
 - (vii) Electrical systems, including lighting, power, and communication/notification systems;
 - (c) Specifications that describe with specificity the workmanship and finishes; and
 - (d) Shop drawings and related equipment specifications for:
 - (i) An automatic fire sprinkler system when required by other codes; and
 - (ii) An automatic fire alarm system when required by other codes.
- (5) 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.

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-040 (Continued)

- (6) The applicant or licensee must:
 - (a) Comply with the standards as adopted by the Washington state building code council;
 - (b) Assure conformance to the approved plans during construction;
 - (c) Submit addenda, change orders, construction change directives or any other deviation from the approved plans prior to their installation;
 - (d) Provide a written construction project completion notice to the department indicating:
 - (i) The completion date; and
 - (ii) The actual construction cost;
 - (e) Make adequate provisions for the health, safety, and comfort of residents during construction projects.



Tool:

See Resource 3 Resident Safety During Construction for more information about provisions for resident health, safety and comfort during construction.

Notes

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Governance And Administration

WAC 246-337-045

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, 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.

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-045 (Continued)

- (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.

**Note:**

Each facility is unique and the specific resident population being cared for must be considered when developing a quality improvement program. A quality improvement program provides the means to identify opportunities to improve resident's health and safety.

A quality improvement program will enable a facility to be able to recognize a health or safety opportunity to improve, to report serious reportable events to the appropriate regulatory agency, and to conduct work in a manner that constantly improves the facility's health and safety systems, e.g., employee turnover, medication errors, food safety, access to health care services, environment of care, emergency disaster drill and plan, and others as determined by resident needs, facility location, services provided, etc.

**Links:**

For more information about patient/resident safety and quality improvement programs see: VA National Center for Patient Safety <http://www.va.gov/ncps/index.html>; Agency for Healthcare Research and Quality <http://www.ahrq.gov/>; DOH Coordinated Quality Improvement <http://www.doh.wa.gov/CQIP/default.htm>; and DOH Patient Safety <http://www.doh.wa.gov/PatientSafety/default.htm>

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Management Of Human Resources

WAC 246-337-050

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) Tuberculosis screening (refer to WAC 246-337-060);
 - (k) Performance evaluation(s);

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-050 (Continued)

- (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.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Personnel Criminal History, Disclosure, And Background Inquiries

WAC 246-337-055

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.



Link:

For more information about background checks and criminal history see Background Checks at <http://www1.dshs.wa.gov/geninfo/bkgrd.html> and Criminal History <http://www.wsp.wa.gov/crime/crimhist.htm#info>

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Infection Control

WAC 246-337-060

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.



Note:

Each facility is unique, so the specific resident population being cared for must be considered when developing an infection control program. Resident population characteristics that should be considered include infants and toddlers (toys, hazards, feeding, diapering, immunizations, handwashing, and cleaning and disinfection), and adolescents and adults (tattooing, body piercing, communicable diseases to include Tuberculosis and Influenza, and STI (sexually transmitted infections aka sexually transmitted disease)).

An infection control program enables a facility to be able to recognize a communicable disease outbreak, report Notifiable Conditions per law, know who to call for assistance, and to conduct all work in a manner that limits the spread of infections.



Link:

To see CDC's "An Ounce of Prevention" poster visit <http://www.cdc.gov/heidod/op/materials.htm>

- (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;

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-060 (Continued)

- (b) Residents with poor hygiene;
- (c) Control of bloodborne pathogens in accordance with WISHA, chapter 296-823 WAC;
- (d) Control of tuberculosis consistent with WISHA, department guidelines, 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.



Note:

Cleaning should always flow from clean to dirty versus dirty to clean, i.e., clean the counter and sink before cleaning the toilet.

- (3) Ensuring that staff report notifiable conditions and cooperate 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.



Note:

Equipment includes appropriate storage and supplies for handwashing, diaper changing and barriers (gloves, masks, etc.), garbage disposal, sharps container, etc.

- (5) Complying with chapter 246-100 WAC “Communicable and certain other diseases.”



Links:

For more information about HIV/AIDS, Bloodborne pathogens, tuberculosis, Methicillin-Resistant Staphylococcus Aureus (MRSA) reporting and dealing with communicable diseases visit www.doh.wa.gov and select from topics A-Z. See Resource 16 to learn how to use DOH's A-Z topics.



Tool:

See Resource 4 Respiratory Etiquette Poster and Resource 8 Handwashing Poster.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Health And Safety

WAC 246-337-065

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.



Note:

In place of the signed transfer agreement, this section requires a description of how the facility provides for residents healthcare needs (initial, emergency and ongoing health care). This may include connections with mental health, hospitals, maternity services, social services, local health departments, etc.

- (2) The provision of health care services.
- (3) The provision for transportation for residents in accordance with Washington state laws and rules governing transportation.



Note:

The Washington State rules governing transportation are different than the federal rules. Please see the Washington State rules addressing adult and child passenger restraint.



Links:

For more information about Washington State Seat Belt Laws see <http://www.wsp.wa.gov/newsfaqs/faqs.htm#legal> and Washington Traffic Safety Commission at <http://www.wtsc.wa.gov>



Tool:

See Resource 18 Transportation Safety and the Law.

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-065 (Continued)

- (4) Smoking policies and procedures in compliance with applicable Washington state laws and rules.



Note:

When developing your safety policies, consider use of oxygen; visitor smoking; smoking areas, if permitted; children/youths; second hand exposure and indoor air quality. I-901 (Prohibition of Smoking in Public Places) is in effect. Contact your local health jurisdiction for information.



Links:

For more information about smoking and laws see:
<http://www.secstate.wa.gov/elections/initiatives/text/i901.pdf>
<http://www.doh.wa.gov/tobacco/secondhand.htm>

- (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 department serious or undesirable resident outcomes including, but not limited to, death, suicide, or major disruption of services through internal or external emergency events.



Note:

Please notify DOH- FSL-RCS Olympia Office for any serious or undesirable outcomes which result in a medical emergency and/or require hospitalization, e.g., deaths, deaths associated with resident elopement, suicides, medication errors, hypoglycemia, burns and falls, assaults, and restraint and seclusions. There may also be additional reporting requirements from other governmental agencies, i.e., DASA, MHD, Adult Protective Services (APS) and Child Protective Services (CPS).

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Emergency Disaster Plan

WAC 246-337-070

- (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:



Note:

Internal and external emergency safety situations may include natural disaster, e.g., a Tsunami on the coast, floods, volcanic eruption, earthquake, major disruption in utility services, chemical spill, civil unrest or violence within the facility, etc.

- (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;

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-070 (Continued)

- (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.



Note:

Supplies and first aid equipment need to reflect the first aid/CPR training of staff and as noted in (c) below.

- (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) Sufficient to maintain a three-day emergency supply of dry or canned food and water for all staff and residents.



Note:

This regulation contains minimum requirements that are basic for any emergency disaster plan. However, you may choose to develop a plan that is far more elaborate than the regulation requires. Whatever plan you have, ensure that it is one that can be instituted in your facility, is geared towards the population you have in care, that your staff and residents understand it to the fullest extent possible, and that it is based, in part, on your geographical location, e.g., a Tsunami or volcanic eruption is not likely to occur in Spokane, so if your facility is located in the Spokane vicinity, you would not be required or expected to address these issues.

When identifying who is responsible for various aspects of the emergency plan consider a worse case scenario, e.g., in the middle of the night, two employees on duty, no communication, and a storm struck your facility and others in a twenty mile radius, what would you do? Be as specific as possible so that a coordinated effort takes places with as few glitches as possible. Who will be responsible for various aspects of the plan? Do these individuals know how to and have the tools necessary to perform

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-070 (Continued)

these functions, e.g., wrenches or other tools may be needed to shut off the gas or water to the water heater, which, if not contaminated, would be an excellent source of drinking water.



Links:

The Disaster Preparation Handbook, prepared by the Department of Health and the Washington Military Department Emergency Management Division is a useful guide to disaster preparation and can be found at: Emergency Preparedness General Information <http://www.doh.wa.gov/phepr/pheprgeninfo.htm>

For Emergency Preparedness Checklist see <http://www.doh.wa.gov/phepr/handbook/checklist.htm>



Tool:

See Resource 6 Disaster Plan and Evacuation and see Resource 5 Disaster Planning Checklist.

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Resident Rights

WAC 246-337-075

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, 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 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;



Link:

For information about Mental Health Advance Directives go to <http://www1.dshs.wa.gov/mentalhealth/advdirectives.shtml>

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-075 (Continued)

- (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.
- (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.



Link:

For Facilities and Services Licensing Division contact information see <http://www.doh.wa.gov/hsqa/fsl/arcs/contacts.htm>

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Resident Care Services

WAC 246-337-080

- (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, transfer, 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 provider is not present including:
 - (i) Having current policies and procedures signed by a physician or authorized health care provider, 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, the department or other regulatory agencies 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



Note:

Refer to WAC 246-337-065(6) for DOH reporting requirement. Facility policy and procedures need to address when DOH is to be notified and/or other certifying agencies, e.g., DASA and MHD.

- (iv) When to consult with internal or external resource agencies or persons e.g., poison control, fire department and police.
- (d) Addressing how the RTF must provide for each resident's need for personal care items and durable medical equipment.



Note:

Durable medical equipment may include but is not limited to walkers or canes, and specialty chairs or beds. An example would be when a resident with a broken ankle is admitted to your facility and requires crutches for ambulation.

- (e) Addressing provisions for transfer and appropriate prenatal and postnatal care services for pregnant residents.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-080 (Continued)

- (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.



Note:

Facilities have the ability to provide or make provisions for nursing service functions. This should be addressed in your policies and procedures.



Link:

To access information about nursing practices see: <https://fortress.wa.gov/doh/hpqa1/hps6/Nursing/default.htm>

- (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 provider.



Note:

Authorized health care provider means MD, DO, ARNP or PAC.

- (h) Addressing how licensees providing subacute detoxification 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 subacute detoxification facility;
 - (B) Monitoring the resident after being admitted;
 - (C) Reporting abnormal symptoms according to established criteria;

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-080 (Continued)

- (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 provider.
- (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.



Note:

Health care providers may develop a health screen that non-medical personnel may use in screening residents. Health care provider could include a Registered Nurse.



Tool:

Refer to Resource 7 A Guide for Health Care Screening for information to consider when developing a health care screening tool.

- (c) A completed comprehensive health assessment and medical history that is to be conducted by a health care provider 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 or acute detoxification services.



Note:

Health care provider means MD, DO, ARNP or PAC.

- (d) A health assessment by a health care provider, any time a resident exhibits signs and symptoms of an injury, illness or abnormality for which medical diagnosis and treatment are indicated.

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-080 (Continued)

- (e) Access to and availability of authorized health care providers to develop and implement the resident plan of care.
 - (f) Sufficient numbers of trained personnel who are available to provide health care according to the resident's health care plan.
 - (g) 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 provider.
 - (iv) Incorporating resident's health care needs and behavioral needs into the resident's overall health care plan;
 - (v) Emergency health care.
 - (h) 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.
 - (i) Provision is made either on the premises, through a contract laboratory or through a health care provider for service(s) required by the resident.
 - (j) 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.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Accepting A Child With A Parent In Treatment

WAC 246-337-085

A chemical dependency facility that accepts a child with a parent in treatment must assure child care services are provided for the child and the services of a health care provider 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 licensed by DSHS under chapter 388-295 WAC, Minimum licensing requirements for child day care centers, chapter 388-151 WAC, School-age child care center minimum licensing requirements, chapter 388-155 WAC, Minimum licensing requirements for family child day care homes which the children will attend during treatment hours of the parent;



Note:

Child care licensing does not need to include all WAC's mentioned above. You only need to address those WAC's that are relevant to the population you serve.

Effective July 1, 2006, WAC 388-295 moves to 170-295, WAC 388-151 moves to 170-151 and WAC 388-155 moves to 170-296.

- (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;

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Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-085 (Continued)

- (4) Establish policies and procedures addressing the chronological and developmental needs of the children to be accepted;
- (5) Obtain a health history for each child following admission;



Note:

This includes a current immunization history.



Link:

For more information about child and adult immunizations see <http://www.doh.wa.gov/cfh/immunize/>

- (6) Develop with the parent a plan of care for each child that addresses the child's health care needs including medications.



Note:

In programs with parents and children in care, it is important to remember that emphasis needs to be placed on ensuring that the children's health care needs are met as well as those of the parents, and that they are in a safe, healthy and nurturing environment.

When small children accompany parents to treatment, health, safety and environment risks related to the chronological and developmental age of the child need to be considered.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Food And Nutrition Services

WAC 246-337-090

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.



Note:

On May 5, 2005, WAC 246-215 significantly changed with the incorporation and adoption of the Federal Food Codes.



Links:

Food Service Rule at <http://www.doh.wa.gov/ehp/sf/food/FoodRuleMain.htm>

Food Safety Publications and Forms (See code clarifications for more information about menus, fingernails and jewelry, hair restraints, hard crusted breads, and demonstration of knowledge) at <http://www.doh.wa.gov/ehp/sf/food/foodpubs.htm>

In facilities caring for parents and small children, breast milk storage should be addressed. Breast milk can be a source of Bloodborne Pathogen transmission, therefore, adequate storage and labeling is important. For information about storing breast milk see <http://www.hmhbwa.org/forfamilies/breastfeeding/storing.htm>

For more information about feeding infants see <http://www.fns.usda.gov/tn/Resources/feedinginfants-cover.pdf>

- (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;



Note:

Consultation from a registered dietician may be necessary to update meal plans when national dietary guidelines change or special needs population is served, e.g., residents who are pregnant or lactating, with underlying medical conditions, infants' and other children's nutritional requirements or for assistance in meeting the requirements below.

-Continued-

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-090 (Continued)

- (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.



Note:

The Food Code can help determine facility policies for resident health screening and clearance.

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Residential Treatment Facility

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WAC with Helpful Hints and Notes

WAC 246-337-090 (Continued)

- (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;



Note:

An acceptable substitution for a food item listed on the menu would be of comparable nutrient value, e.g., serving chicken in place of turkey, fish or beef.

- (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.



Note:

Temperatures of foods that would normally be held cold or hot, e.g., milk, meats and casseroles, should be taken upon arrival at the facility when food is catered or received from an off-site 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.

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WAC with Helpful Hints and Notes

Resident Health Care Records

WAC 246-337-095

The licensee must ensure the RTF meets the following requirements:

- (1) Develop and implement procedures for maintaining current 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.



Note:

Ensure a system for backup of electronic records is in place.

- (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;

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WAC 246-337-095 (Continued)

- (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) Instructions or teaching provided to resident in connection with his or her health care; and



Note:

Training and teaching needs to be documented. Remember if it is not documented, it didn't happen.

- (v) 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.

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WAC with Helpful Hints and Notes

Health Care Plan

WAC 246-337-100

The licensee must ensure that an individual health care plan is developed and implemented for each resident based on health assessment(s) (see definitions (20) health care assessment and (22) health care provider) 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 on admission to a RTF;
- (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.



Note:

The health care plan may vary depending on the population of residents cared for, i.e., crisis, long term, pregnant and parenting women (PPW), etc.

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Medication Management

WAC 246-337-105

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 providers, administration and pharmacist (as needed). The policies and procedures must be consistent with the rules of the department and the department's board of Pharmacy and address all aspects of medication administration, including the following:



Link:

Go to the following sites for information about pharmacy rules <https://fortress.wa.gov/doh/hpqa1/HPS4/Pharmacy/laws.htm> and pharmacy waste <https://fortress.wa.gov/doh/hpqa1/HPS4/Pharmacy/whatnew.htm>

- (a) Timely procurement;
- (b) Medication administration;



Link:

Go to the following sites for information about safe medication administration: Tips to Improve the Safety of Your Care <http://www.doh.wa.gov/PatientSafety/mederrorflerD.htm>; Institute for Safe Medication Practices <http://www.ismp.org> (Institute for safe medication practices); and Center for Drug Evaluation and Research <http://www.fda.gov/cder>

- (c) Prescribing;
- (d) Proper storage conditions addressing security, safety, sanitation, temperature, light, moisture and ventilation;
- (e) Use of nonprescription drugs:
 - (i) List of drugs available;
 - (ii) Parameters of use;
- (f) Receipt;
- (g) Proper labeling;

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WAC 246-337-105 (Continued)

- (h) Disposal;
- (i) Medication brought into RTF by a resident;
- (j) Accountability;
- (k) Starter supply of psychotropic, detoxification and emergency drugs not for a specific resident;
- (l) Emergency allergy response kit of prepackaged medications and supplies for the treatment of anaphylactic shock; and
- (m) Medications for short term authorized absence (pass) from the RTF, where applicable.



Note:

You will need to address in policies and procedures a system for ensuring residents receive appropriately labeled and packaged medications when a resident goes on pass.

- (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;

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WAC 246-337-105 (Continued)

- (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 provider 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 seven days after the verbal order.
- (5) Ensuring use of nonprescription drugs that are self-administered are:
- (a) Within parameters established for nonprescription drugs; and



Note:

There are various ways to make available over-the-counter medications (OTC), e.g., a prescriber may order individual OTC medications and the facility may have available OTCs for self-administration by the resident. OTC are to be administered according to manufacturer's instructions with the overall list being approved by the pharmacist or prescriber.

- (b) According to established list.
- (6) Having a current established drug reference resource available for use by RTF staff.

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Use Of Seclusion And Restraint

WAC 246-337-110

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 provider must authorize use of the restraint or seclusion within one hour of initiating the restraint or seclusion.



Note:

Authorized Health Care Provider would be equivalent to a licensed independent practitioner (LIP), e.g., ARNP. See definition of Health Care Provider (WAC 246-337-005(22)) on Page 005-3.

- (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.

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WAC 246-337-110 (Continued)

- (6) A physician or an authorized health care provider, authorized by the licensee, may only renew the original order in accordance with these limits for up to a total of twenty-four hours.



Note:

Authorized health care provider would be equivalent to a Licensed Independent Practitioner (LIP), e.g., ARNP.

- (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.



Note:

Authorized health care provider would be equivalent to a Licensed Independent Practitioner (LIP), e.g., ARNP.

- (8) Within one hour of initiation of restraint or seclusion, an authorized health care provider must conduct a face-to-face assessment of the physical and psychological well-being of the resident.



Note:

In a mental health child long-term inpatient treatment facility the authorized health care provider may include a registered nurse to perform the one hour face to face physical and psychological assessment.

In mental health or chemical dependency service categories, a qualified licensed nurse may perform one hour face-to-face physical and psychological assessment.

- (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;

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WAC 246-337-110 (Continued)

- (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.



Note:

Facility policies and procedures should include the frequencies of when (b) and (c) are to be done.

- (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) 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;



Note:

Toilet rooms need to be readily accessible.

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WAC 246-337-110 (Continued)

- (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.



Note:

This is similar to a bathroom exhaust ventilation and is not equivalent to a negative pressure isolation room that would be used for communicable disease airborne isolation.

- (14) Restraint equipment must be clean and in good repair.



Tool:

See Resource 9 Restraint and Seclusion Standards Comparison.



Link:

For more information about Restraint and Seclusion and to locate the article "Learning From Each Other: Success Stories and Ideas for Reducing Restraint/Seclusion in Behavioral Health" go to http://www.psych.org/psych_pract/treatg/pg/learningfromeachother.cfm

For information about Federal Guidelines related to Restraint and Seclusion go to <http://www.gpoaccess.gov/cfr/index.html> and search using the terms restraint and seclusion.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Cleaning, Maintenance And Refuse Disposal

WAC 246-337-115

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;



Note:

Plastic garbage containers generally do not meet this requirement unless they have been approved and bear the Underwriters Laboratory (UL) label.

- (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.



Link:

For more information related to biohazardous and nonmedical waste see <http://www.doh.wa.gov/ehp/ts/ww/default.htm> and Medical Waste <http://www.lni.wa.gov/wisha/rules/bbpathogens/HTML/296-823-180.htm#WAC296-823-18015>

- (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

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WAC 246-337-115 (Continued)

- (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.



Link:

For more information about DOH Pesticide Program see <http://www.doh.wa.gov/ehp/ts/pest/default.htm>



Tool:

See Resource 10 General Environmental Cleaning/Housekeeping.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Facility, Environment, And Space Requirements

WAC 246-337-120

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:



Tool:

See Resource 15 Keep Your Facility Safe for hazards commonly found in facilities.

- (1) Each RTF shall be located on a site which is:
 - (a) Free of standing water; and
 - (b) 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

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WAC with Helpful Hints and Notes

WAC 246-337-120 (Continued)

- (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 handwashing 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.



Tool:

See Resource 12 Safe Handrail Design.

- (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.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Toilet Rooms And Bathrooms

WAC 246-337-125

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;

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WAC 246-337-125 (Continued)

- (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.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Water Supply, Sewage And Waste Disposal

WAC 246-337-130

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.



Note:

Water temperatures between 100 and 120 degrees Fahrenheit (37.8–48.9° Centigrade) minimize the risk of scalding for your residents. Remember that the resident's age or underlying medical condition may determine how quickly a burn injury can occur.



Tool:

See Resource 11 for water temperature chart.

- (2) Maintaining the plumbing systems free of cross connections.



Tool:

See Resource 14 Cross Connections.



Link:

See the following sites for more information about cross connections: Cross-connection control, DOH, Division of Drinking Water <http://www.doh.wa.gov/ehp/dw/97fscros.pdf> and Cross-Connection Control Manual, EPA <http://www.epa.gov/safewater/crossconnection.html>

- (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.

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WAC with Helpful Hints and Notes

Heating, Ventilation And Air Conditioning

WAC 246-337-135

- (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. 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.



Note:

Bathroom and kitchen fans are an important part of your facility's ventilation system. Fans remove odors which improves indoor air quality. Fans also remove moisture, which can increase the level of humidity. High humidity can damage building materials and cause mold growth. Mold may affect a resident's health.

Keep your ventilation system clean by cleaning the vents and filters. Fans create static electricity which attracts dirt like a magnet to the fan and housing. The dirt can encourage mold growth and restrict air movement.

To find out if your exhaust fan is drawing air, hold a piece of toilet tissue up to the grill. The exhaust air should hold the tissue tightly to the grill.

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WAC 246-337

WAC with Helpful Hints and Notes

Lighting, Emergency Lighting, And Electrical Outlets

WAC 246-337-140

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.



Note:

In addition to children, this may include mental health facilities providing evaluation and treatment, longterm or crisis residential care.

- (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.

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Laundry

WAC 246-337-145

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;



Note:

The intent of the rules is to ensure that linen and clean laundered items are not contaminated or soiled by dirty linen.



Tool:

See Resource 13 Laundry for flow illustration.

- (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.

-Continued-

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-145 (Continued)

- (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:



Note:

Laundry equipment with built-in bleach, detergent or fabric softeners are considered to automatically dispense.

- (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 off-site 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.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Resident Rooms, Furnishings And Storage

WAC 246-337-150

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.



Tool:

See Resource 1 Sleeping Room Layout for egress and spacing diagram of resident bedroom and placement of furniture.

- (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;

-Continued-

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

WAC 246-337-150 (Continued)

- (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.

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Pet Management And Safety

WAC 246-337-155

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



Note:

Pets can be very therapeutic and beneficial to residents living in a residential care setting. However, pets should not pose a hazard or a nuisance to the residents, i.e., biting, threatening, disease transmission, etc. You must keep your pet area and containers clean and sanitary. Your pets must be healthy, kept clean, vaccinated, and have annual veterinary check-ups. Vaccination records should be kept on file at the facility.



Link:

For more information on pets and service animals in residential treatment facilities go to the following site: Zoonotic Disease Program <http://www.doh.wa.gov/EHP/ts/zoo.htm>



Reference:

The Implications of Service Animals in Health Care Settings

Author: Duncan, SL; The 1997, 1998 and 1999 APIC Guidelines Committee

Source: AJIC (American Journal of Infection Control), vol. 28: 170-180

Notes

1•800•771•1204

Residential Treatment Facility

WAC 246-337

WAC with Helpful Hints and Notes

Licensing Fees

WAC 246-337-990

If a written request is submitted for withdrawal after the department has begun the licensure review process, but before licensure, the department may refund any portion of the fees not consumed by departmental action taken prior to the request for withdrawal.



Link:

To obtain information about current licensing fees go to http://www.doh.wa.gov/hsqa/fsl/arcs/RCS/lic_fee.htm

Notes

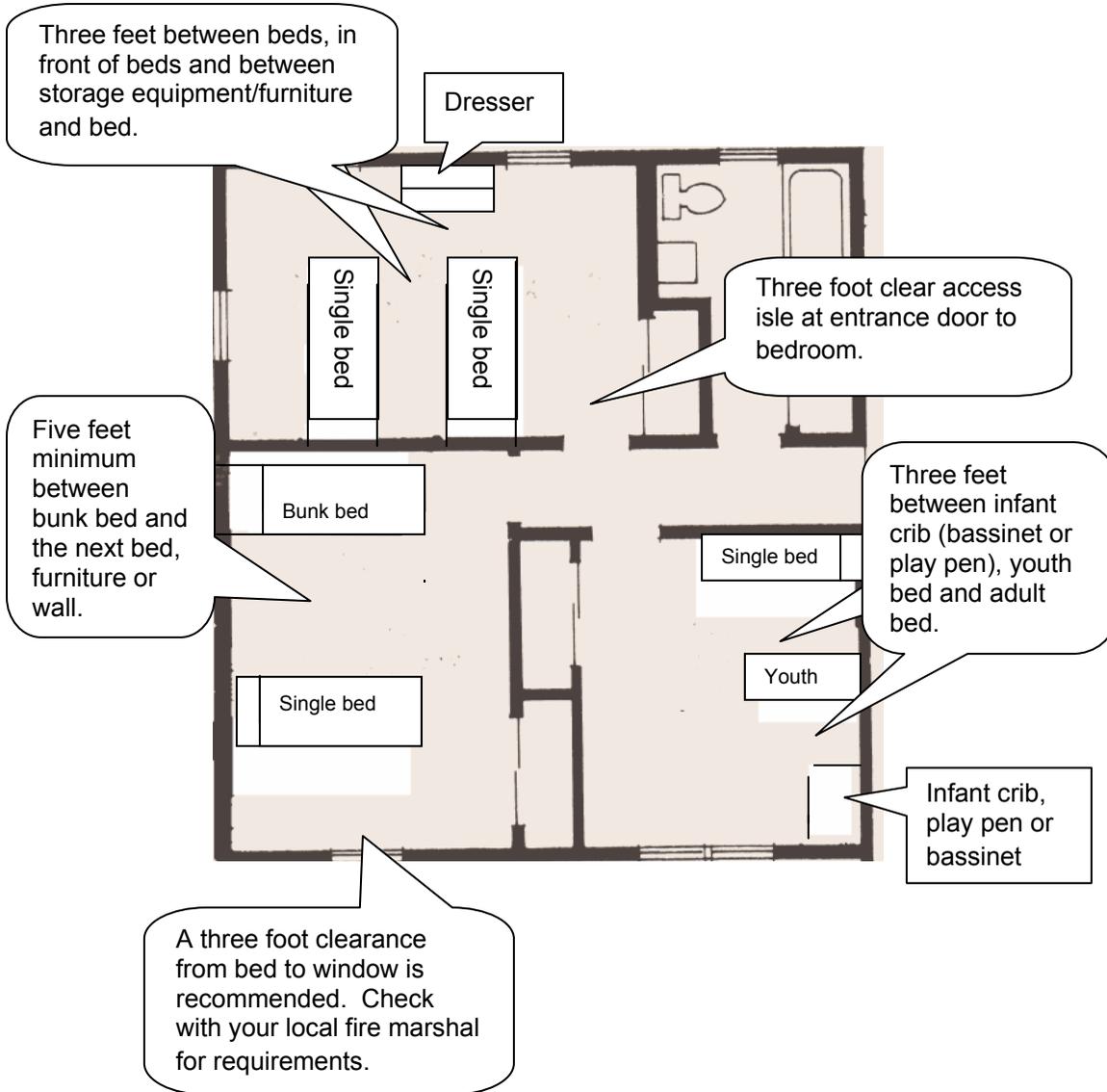
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Residential Treatment Facility

WAC 246-337

Resources

Resource #1—Sleeping Room Layout



Note: Bed includes youth beds, cribs, play pens and bassinets.

WAC 246-337-150 (1) (2)

Residential Treatment Facility

WAC 246-337

Resources

Resource #2—Functional Program

Address who, what, why, when, where and how in your functional program for goals, staffing, infection control, security and safety, seclusion and restraint, laundry, food and nutrition, health care and medication per WAC 246-337-040(2), and for items required by Construction Review Services. You will not need to address all items listed, e.g., if your program will not have or use seclusion and restraint, you will not need to address these items. On the other hand, e.g., if your chemical dependency treatment program provides for children accompanying parents to treatment or a pregnant and parenting women program (PPW), your functional program will need to address care of small children which may include provisions for child care, supervision of children, diaper changing, playgrounds, general safety, etc. Items specifically requested by Construction Review Services include:

- The scope of the project, providing background information.
- Space requirements and functions to be performed.
- Tasks and processes which require special planning and the use of equipment.
- Communications.
- Determine special requirements for each room.

Items That Might Require Special Consideration Include

- | | |
|--|--|
| <ul style="list-style-type: none"> • Communications • Electrical outlets* • Entry and exit requirements | <ul style="list-style-type: none"> • Finishes and ventilation • Special design and system requirements |
|--|--|

* Generally, tamper resistant electrical outlets would be needed in PPW Programs; and mental health child treatment, crisis and evaluation and treatment programs, and others as determined by the licensee or department.

Items Requiring Special Design and Systems Requirements

- | | |
|---|---|
| <ul style="list-style-type: none"> • Air Conditioning (cooling, heating**, ventilating) • Communication Systems, including computers • Domestic water supply (hot, cold, storage) • Electrical system including emergency electrical service • Emergency Call Systems • Emergency Entrance Night/door locked call • Graphics and Signage | <ul style="list-style-type: none"> • Handicapped Accessibility • Life Safety (entry/exit, compartmentalization for smoke and fire, fire sprinkler system and fire alarm system) • Line System (laundry, clean, soiled, contaminated) • Maintenance • Medical Emergency Assessment • Sewer system • Telephone system • Utilities, e.g. |
|---|---|

** Heating needs to be appropriately designed with consideration for age and mental health of the residents in care, i.e., if heaters are within small children's reach, they will need to be designed and positioned so as to minimize the risk of access to sharp internal fins and mechanisms, and thermal or burn injury hazards.

Additional information related to functional programs can be found on the internet at:

http://www.doh.wa.gov/hsqa/fsl/crs/functional_program.htm

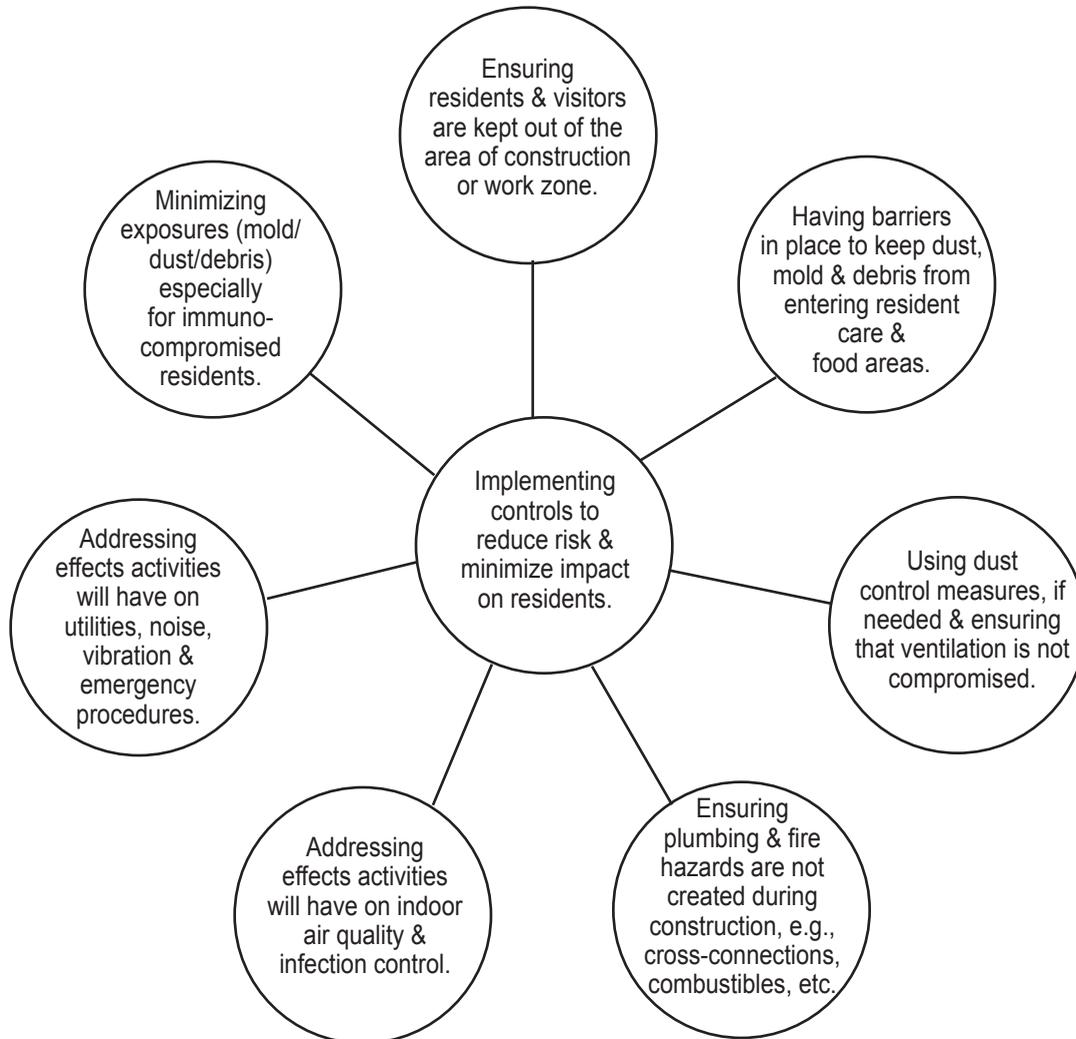
Residential Treatment Facility

WAC 246-337

Resources

Resource #3—Resident Safety During Construction

When planning demolition, construction or renovation work, the licensee should conduct a proactive risk assessment to determine the scope and nature of the activities and extent of risk to residents, and take steps to minimize those identified risks, including:



WAC 246-337-040(6)(e)

Residential Treatment Facility

WAC 246-337

Resources

Resource #4—Respiratory Etiquette

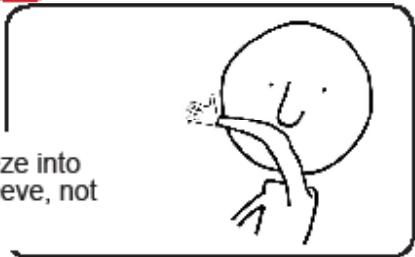
Stop the spread of germs

Cover your Cough



Cover your mouth and nose with a tissue when you cough or sneeze

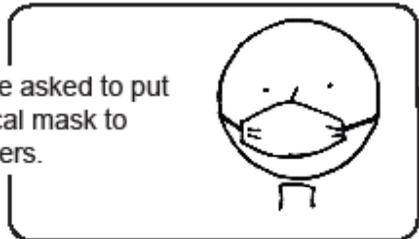
or
cough or sneeze into your upper sleeve, not your hands.



Put your used tissue in the waste basket.



You may be asked to put on a surgical mask to protect others.



Clean your Hands

after coughing or sneezing

Wash with soap and water

or

clean with alcohol-based hand cleaner.





For more information, visit us online at www.doh.wa.gov

For persons with disabilities, this document is available on request in other formats: 1-800-526-0127.

PUBLIC HEALTH
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DCH Pub 120-130

Residential Treatment Facility

WAC 246-337

Resources

Resource #5—Disaster Planning Checklist

In the event of a disaster, you should be prepared to take care of your residents and staff for at least three days after the disaster. The following considerations, emergency supplies and suggestions will help you in meeting the intent of this regulation and ultimately help to ensure your facility residents' needs are met during an emergency or disaster.

Consider and address in your Emergency Disaster Plan

How and who will be responsible for:

- Assistant residents to get to a place of safety inside or outside of the facility, if necessary, i.e., how will your facility be evacuated? What if your residents remain in place?
- Accounting for residents.
- Care of residents with special needs.
- Contacting family members, guardians, etc.
- Primary evacuation route and alternate weather evacuation route.
- Provisions for emergency medications, food, water, clothing, shelter, heat and power.
- Retrieval of critical medications or list of prescribed medications.
- Transportation
- Shutting off gas, water and electricity, if possible and necessary

Emergency Survival Kit:

- Dry or canned food and drinking water for three days for each person.
- Can opener
- First aid supplies and first aid book
- Copies of important documents
- Special needs items (infant formula, eye glasses, medications, etc.)
- A change of clothing for each resident
- Sleeping bag or blanket
- Battery powered radio or television
- Flashlight and extra batteries
- Whistle
- Waterproof matches
- Toys, books, puzzles, games
- List of contact names and phone numbers

Additional items to be stored at your facility:

Cooking supplies:

- Barbecuing, camp stove, chafing dish
- Fuel for cooking (charcoal, camp stove fuel, etc.)

- Plastic knives, forks, spoons
- Paper plates and cups
- Paper towels
- Heavy-duty aluminum foil

Sanitation Supplies:

- Large plastic trash bags for trash, water protection
- Large trash cans
- Bar soap and liquid detergent, shampoo
- Toothpaste and toothbrushes
- Feminine and infant supplies, toilet paper
- Household bleach with no additives
- Newspaper—to wrap garbage and waste

Comfort:

- Sturdy shoes
- Gloves for cleaning debris
- Tent

Tools:

- Ax, shovel, broom
- Crescent wrench for turning off gas
- Screwdriver, pliers, hammer
- Coil of one-inch rope, plastic tape and sheeting
- Knife or razor blades
- Garden hose for siphoning and fire fighting

Excerpted, in part, from the "Disaster Preparedness Handbook"—DOH and Washington Military Department, January 2005.

Residential Treatment Facility

WAC 246-337

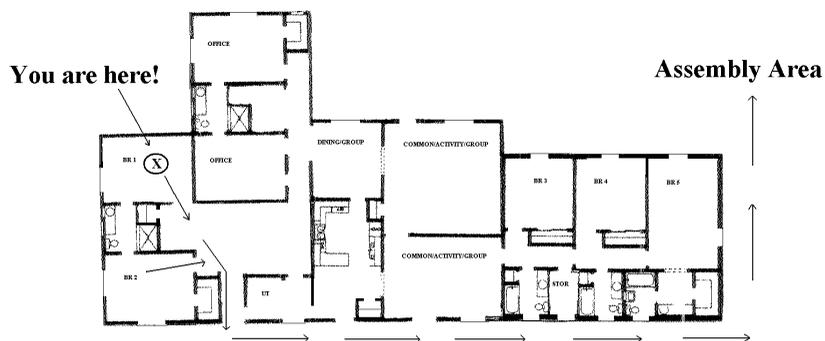
Resources

Resource #6—Disaster Plan—Evacuation

A disaster plan should include information related to evacuation. A disorganized evacuation plan can result in confusion, injury, and property damage. When developing the evacuation portion of your disaster plan, it is important to determine the following:

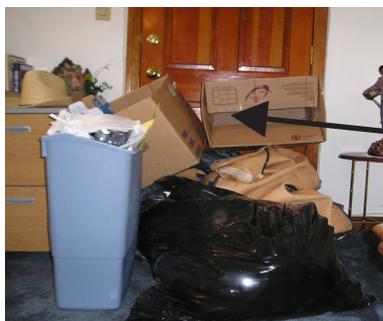
- Conditions under which an evacuation would be necessary.
- Conditions under which it may be better to shelter-in-place.
- A clear chain of command and designation of the person in your business authorized to order an evacuation or shutdown.
- Specific evacuation procedures, including routes and exits.
- Specific evacuation procedures for high-rise buildings, if applicable.
- Procedures for assisting staff and residents with disabilities or who speak little or no English.
- Where will you evacuate to, i.e., exterior location or other facility.
- A means of accounting for residents and staff.

In many instances, facilities create evacuation drawings or maps to assist in a smooth evacuation, e.g., the one below was created from a floor diagram with arrows that designate the exit routes. Drawings should include the locations of exits, assembly points, and equipment (such as fire extinguishers, first aid kits, spill kits, etc.) that may be needed in an emergency. Drawings should be posted prominently in various areas for all residents and staff to see.



Your exit route should be:

- Clearly marked and well lit,
- Unobstructed and clear of debris at all times, and
- Unlikely to expose evacuating residents and staff to additional hazards.



Note: Obstacles in hallways, at the base of stairs, blocking doorways, etc., may prevent a safe evacuation.

Residential Treatment Facility

WAC 246-337

Resources

Resource #7—A Guide To Health Care Screening

WAC 246-337-080(2)(b) When developing a health care screening tool, consider the following:

Demographic Area:

- Name, age, sex, marital status
- Date of admission/Date of Birth
- Admitting diagnosis
- Height/weight/vital signs on admission

History and Assessment:

Social Cultural:

- Occupation, education, religion, ethnicity

General Observations:

- Appearance
- Psychomotor—Posture/gait
- Behavior
- Communication/Speech
- Mental Status

Medical Data:

- Allergies
- Previous major illness, surgeries, hospitalizations
- Current medications
- Mental health history
- Suicidal/homicidal
- Substance Use history
- Pain (location & intensity)
- Skin—infections/lacerations/wounds
- Review of systems:

Sensory—Hearing/vision	Musculoskeletal
Cardiovascular	Respiratory
Gastrointestinal	Urinary
Endocrine	Neurological

Basic Needs:

- Dietary preferences, restrictions, allergies
- Rest, sleep, comfort
- Personal Hygiene
- Elimination habits
- Dental—condition of teeth/dentures
- Mobility—functional aids/equipment
- Medical Treatments

Communicable Disease Screening:

- Scabies
- Head Lice
- Sexually Transmitted Diseases
- TB Screening:
 - Last TB test result
 - History of treatment for TB
 - Any of the following symptoms:
 - Weight loss
 - Night sweats
 - Coughing up blood
 - Fatigue
 - Decreased Appetite
 - Fever
 - Prolonged productive cough

Residential Treatment Facility

WAC 246-337

Resources

Resource #8—Handwashing Posters—English & Spanish

**Be a Germ-Buster...
WASH YOUR HANDS!**



Health
DCM1 Pub 130-012 8/2006 For persons with disabilities, this document is available on request in other formats. Please call 1-800-525-0127 (TDD relay 1-800-833-6388).

**Elimine los gérmenes...
LAVESE SUS MANOS**



Health
DCM1 Pub 130-012 8/2006 Spanish Para personas discapacitadas, este documento está disponible a su pedido en otros formatos. Para hacer su pedido, llame a 1-800-525-0127 (TDD) / TTY 1-800-833-6388.

Residential Treatment Facility

WAC 246-337

Resources

Resource #9—Restraint & Seclusion Standards Comparison

RTF Rule	<ul style="list-style-type: none">• Compliant with applicable federal, state laws and Chapters 70.96A, 71.05, 71.34.• A physician or other authorized health care provider must authorize use within one hour.• A physician or authorized health care provider must examine the residents before the R or S exceeds more than 24 hours.• Within one hour of initiation of R or S authorized health care provider must conduct a face to face assessment of the physical and psychological well being of the resident.• Authorized is defined as 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.• Health care provider is defined as 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.
WAC 388-0545	<ul style="list-style-type: none">• Staff must notify and receive authorization by a physician within one hour of initiating patient restraint or seclusion.• If the use of R/S exceeds 24 hours, a licensed physician must assess the consumer & write a new order if the intervention will be continued.
WAC 388-0546	<ul style="list-style-type: none">• in the event of emergency use of R or S, a licensed physician must be notified within 1 hour & must authorize R or S.• No consumer may be R or S in excess of 2 hours without being evaluated by a mental health professional (Mental Health Professional could be SW, PHD, or RN).• If R or S exceeds 24 hours, consumer must be examined by a licensed physician.
Feds-Adult	<ul style="list-style-type: none">• R or S may be ordered by either a physician or a licensed independent practitioner permitted by the state and hospital to order R or S without direct supervision.• A physician or a licensed independent practitioner must see the patient and evaluate the need for the intervention within one hour after its initiation.
Feds-Children	<ul style="list-style-type: none">• R and S must be issued by a physician or other licensed independent practitioner permitted by the state and the facility to order such R or S and trained in the use of emergency safety intervention.• Within 1 hour of the R or S initiation, a face to face physical and psychological assessment must be conducted by a physician or other licensed practitioner trained in the use of emergency safety interventions & permitted by the state & the facility to assess the physical & psychological well being of residents.
ICF/MR	<ul style="list-style-type: none">• Emergency use of restraints only is permitted, may not exceed 12 hours, used as part of individual program plan, in emergency or for specific medical reasons.
Nursing Homes	<ul style="list-style-type: none">• Right to be free of physical or chemical restraints imposed for discipline or convenience and involuntary seclusion.• Includes standards on length of use and procedures (WAC 388-97-075).• All alleged violation of rights involving abuse or neglect is reported.

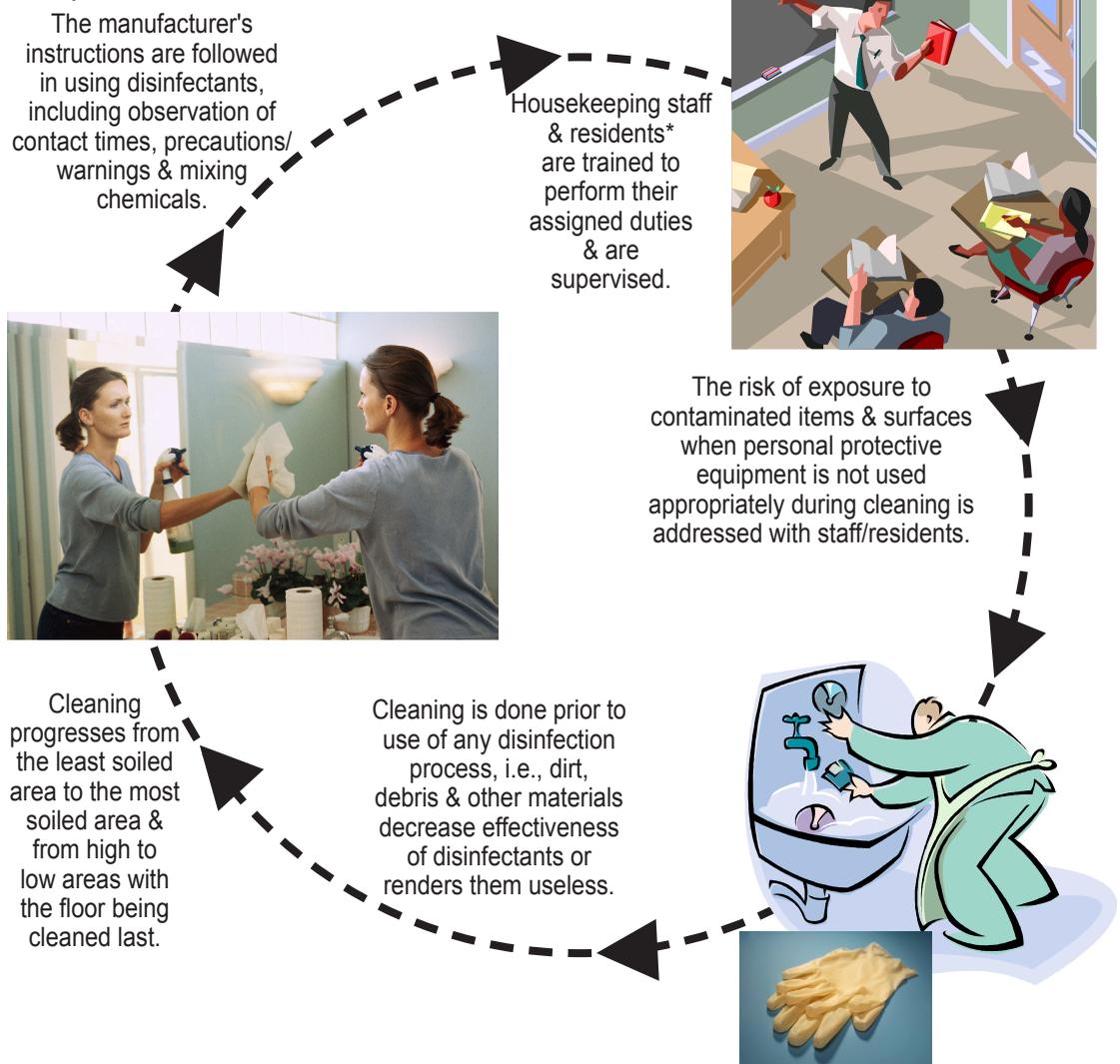
Residential Treatment Facility

WAC 246-337

Resources

Resource #10—General Environmental Cleaning/House-keeping

Cleaning/housekeeping is done to reduce the number of microorganisms that may come in contact with residents, staff and visitors, and to provide a clean and pleasant living environment. To accomplish this in a healthy and safe manner, licensees are to ensure that:



* Residents may have work assignments as part of their individual health care plan. Material Safety Data Sheets (MSDS) should be on file for chemicals used. Minimize contamination of cleaning solutions and cleaning tools by frequently changing solutions and using clean tools such as mop buckets and heads.

WISHA's Bloodborne Pathogens (WAC 296-823) requirements are to be followed for cleanup of blood, body fluids & other potentially infectious fluids.

WAC 246-337-060, 065, 075(5)(c) & 115

Residential Treatment Facility

WAC 246-337

Resources

Resource #11—Tempered Water 100-120°F

Water temperatures between 100 and 120 degrees minimize the risk of scalding for your patients.

Third-degree burns can be caused by just two seconds in 150 degree water.

Burns also happen with a six-second exposure to 140 degree water or with a thirty second exposure to 130 degree water. It is easy to see how water that is too hot is particularly dangerous to the very young and the very old.

Even if the temperature is 120 degrees, a five-minute exposure could result in third-degree burns.

In rare cases, very high water temperature can make water tanks explode.

In addition to preventing accidents, a lower temperature will save energy and money.

WAC 246-337-130(1)

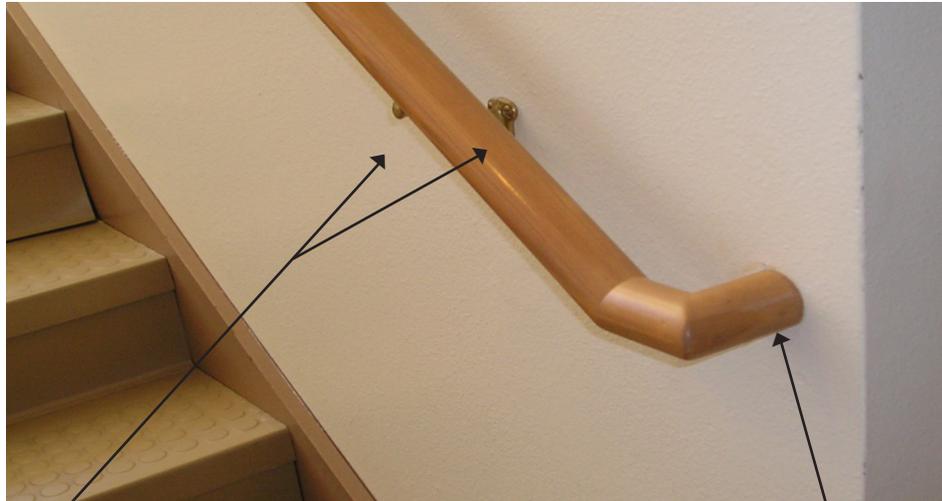
Residential Treatment Facility

WAC 246-337

Resources

Resource #12—Safe Handrail Design

Ensure that handrails are designed in a manner that does not create a hooking hazard, and are smooth and secured without rotation within fittings!



Fittings

End of Handrail



Photos taken at Park Place RTF—Tacoma, Washington

Design your handrails in a manner that eliminates hooking or snagging of clothing, bags and other items which may result in stumbling, tripping, and falls.

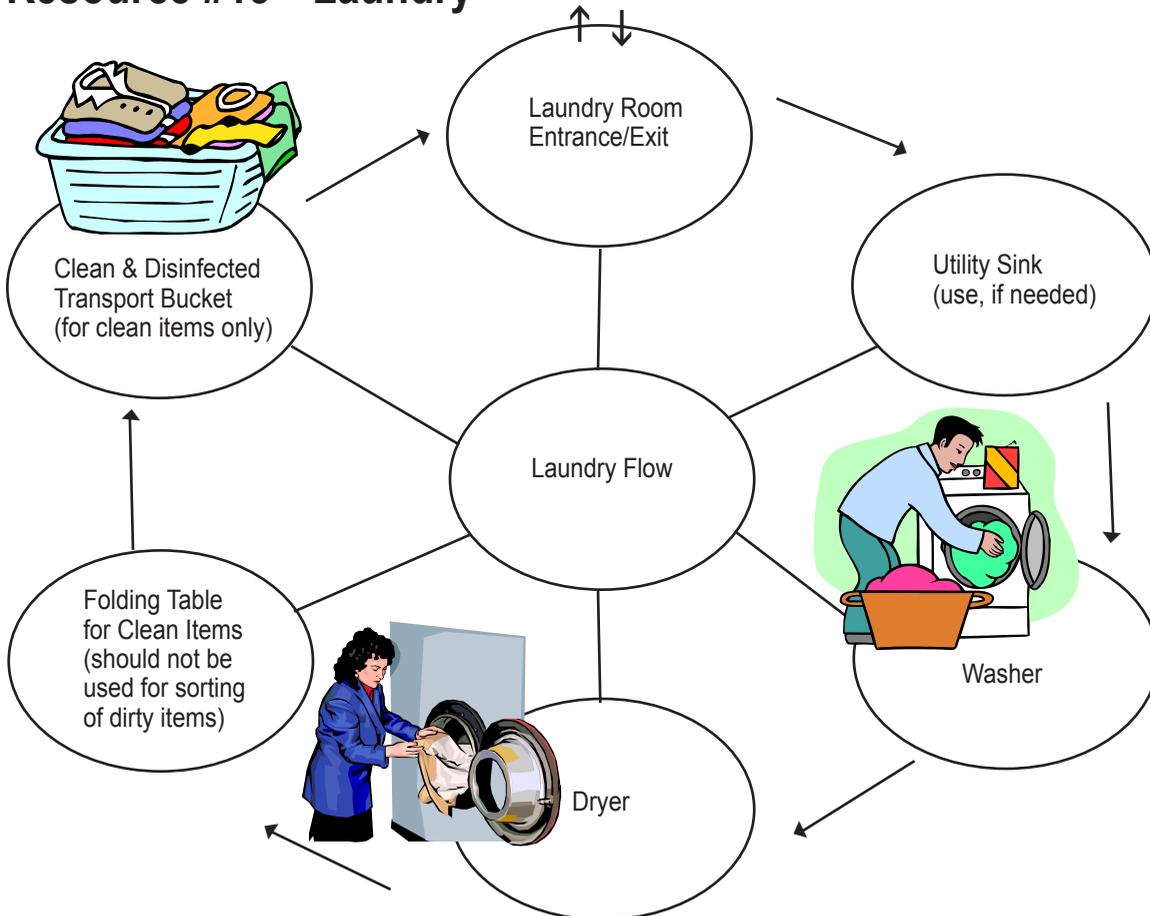
WAC 246-337-120(4)

Residential Treatment Facility

WAC 246-337

Resources

Resource #13—Laundry



- Process laundry in a manner that prevents cross-contamination between the clean and dirty items, and ensure laundered items are clean, and disinfected (when needed).
- Separate laundry transport containers, in good repair, should be used for transporting clean and dirty laundry. Clean and disinfect transport containers after transporting dirty items, and before transporting clean ones.
- Adequate drying of laundered items will reduce or eliminate the possibility of mold, mildew and bacterial growth on clean items.
- Clean lint traps or trays before or after laundering each load to reduce the possibility of a fire, and to aid in proper operation of the equipment.
- Utilizing appropriate personal protective equipment (PPE) such as gloves, gowns, masks, aprons, etc., when handling contaminated laundry will reduce the chance of staff becoming ill or having a potential exposure to disease.

Residential Treatment Facility

WAC 246-337

Resources

Resource #14—Cross Connections

Plumbing cross-connections are defined as actual or potential connections between a potable (clean/drinking water) and nonpotable (dirty/contaminated) water supply. The reason this happens is due to back siphonage or back pressure.

The adjacent illustration shows a fireman putting out a fire causing very high water usage which may cause a drop in pressure in the lines supplying the surrounding homes and facilities. The drop in pressure is known as back or negative pressure in water line, which results in back siphonage or back pressure. If back siphonage or back pressure occurs, we have a cross-connection where non-drinking contaminate or waste water can be sucked from bathing facilities, water hose bibs connected to garden sprayers, etc., in to the potable or drinking water plumbing lines of your kitchens, handwashing sinks, water fountains, etc.



When equipment is connected directly or indirectly to a potable water supply, a backflow prevention device or air gap needs to be installed to ensure a cross-connection is not created. Examples of such equipment include:

- Water Hose Bibs
- Ice Machines
- Dish Washers
- Food Preparation Sinks
- Sink Faucet (submerged or with hose attached)
- Juice and pressurized Soda Dispensing Equipment
- Front Loading Commercial and Domestic Style Laundry Machines

Water hose bib with vacuum breaker.



The type of backflow prevention device required depends on the level of risk or hazard posed by the connected equipment and the equipment design. For instance, a janitor sink or hose bib could be served by an atmospheric vacuum breaker or similar device as the risk posed is considered low level. Yet high risk levels require more complicated devices. Some equipment may also have a manufacturer installed backflow prevention device. Follow applicable rules or code requirements and manufacturer's instructions for both equipment and backflow prevention devices, and consult a licensed plumber for installation.

Indirect Drain at a food preparation Sink



Vacuum Breaker on utility sink Faucet



For more information, see appendix for web link to Cross-Connection Manual.

WAC 246-337-130(2)

Residential Treatment Facility

WAC 246-337

Resources

Resource #15—Keep Your Facility Safe



WAC 246-337-120 (Hazards are not limited to the above list.)

Residential Treatment Facility

WAC 246-337

Resources

Resource #16—Learn More About Website Resources

DOH Internet Website

- 1) Go to www.doh.wa.gov
- 2) Select A to Z
- 3) Select a topic and follow the links until you have found the information needed.

DSHS Internet website

- 1) Go to www.dshs.wa.gov
- 2) Select A to Z
- 3) Select a topic and follow the links until you have found the information needed.

Google

- 1) Go to www.google.com
- 2) Type in the topic to search
- 3) Follow the links until you have found the information needed.

Washington State Legislative Website

- 1) Go to <http://search.leg.wa.gov>
- 2) Type in RCW or WAC
- 3) Check RCW or WAC box below
- 4) Select go
- 5) Scroll down and follow the links until you have found the information needed.

Residential Treatment Facility

WAC 246-337

Resources

Resource #17—RCW's And WAC's In Residential Treatment Facility Rules

The following RCW's and WAC's are found within the Residential Treatment Facility Rules and can be located by going to the Washington State Legislative Web Site <http://search.leg.wa.gov>

RCW's

- 11.88..... Guardianship
- 17.21..... Washington Pesticide Application Act
- Title 18..... Businesses and Professions
- 18.79..... Nursing Care
- 26.44..... Abuse of Children
- 34.05..... Administrative Procedure Act
- 43.43..... Washington State Patrol
- 43.70..... Department of Health
- 49.17..... WISHA
- 69.06..... Food and Beverage Establishment Workers Permits
- 70.02..... Medical Records
- 70.41..... Hospital Licensing and Regulations
- 70.96A..... Treatment for Alcoholism, Intoxication and Drug Addiction
- 70.111..... Infant Crib Safety Act
- Title 71..... Mental Illness
- 71.05..... Mental Illness
- 71.12..... Private Establishment
- 71.34..... Mental Health Services for Minors
- 71A..... Developmental Disabilities
- 74.34..... Abuse of Vulnerable Adults

WAC's

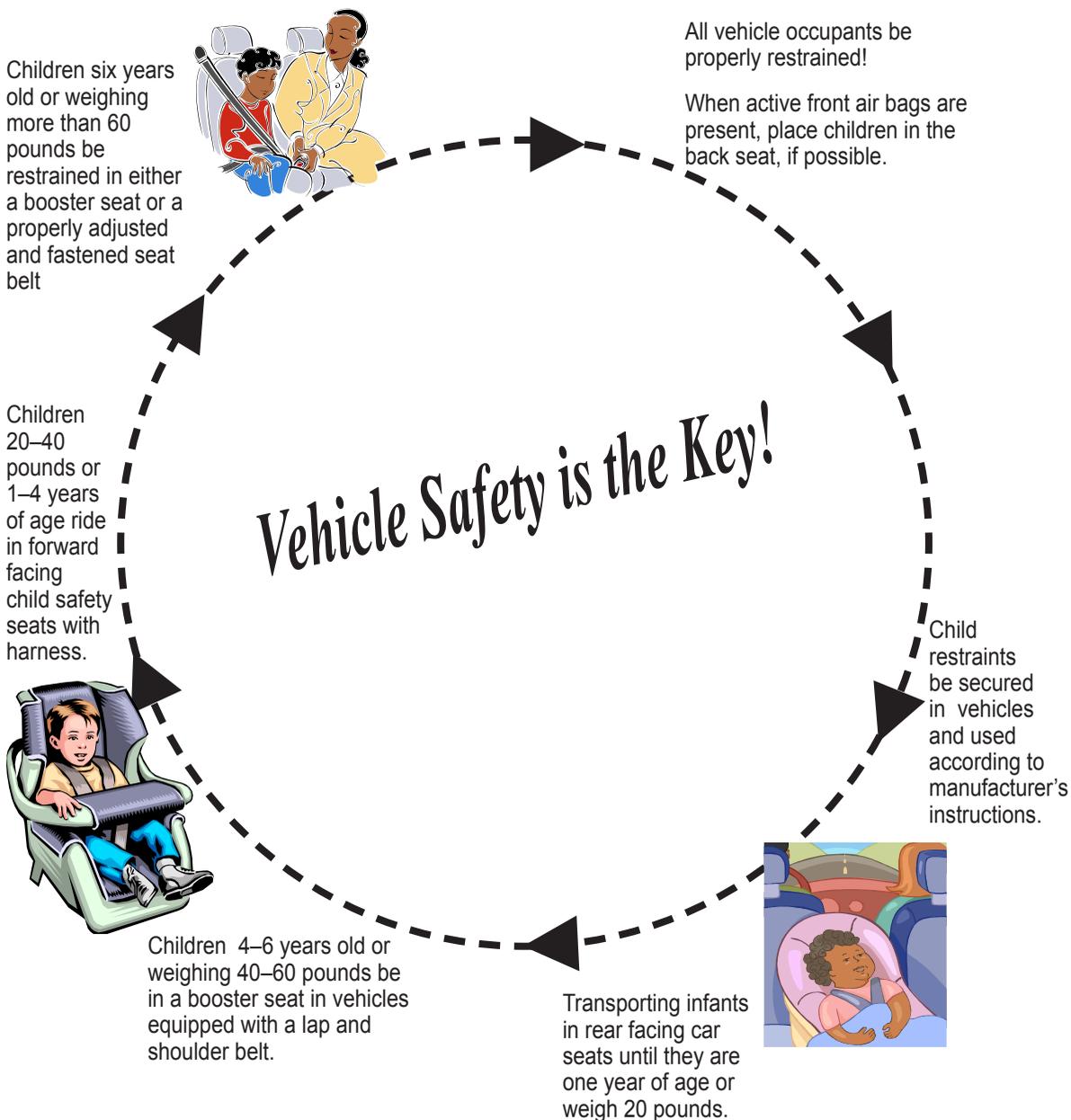
- 16-228..... General Pesticide Regulations
- 51-56..... Uniform Plumbing Code
- 173-240..... Submission of Plans and Reports for Constructions of Waste Water
- 212-12..... Fire Marshall Standards
- 246-10..... Administrative Procedures
- 246-100..... Communicable and Other Diseases
- 246-101..... Notifiable Conditions
- 246-170..... Tuberculosis Prevention, Treatment and Control
- 246-215..... Food Service
- 246-217..... Food Worker Cards
- 246-272..... Onsite Sewage System
- 246-290..... Public Water Supplies
- 246-291..... Group B Public Water Systems
- 246-366..... Primary and Secondary Schools
- 246-337..... Residential Treatment Facilities
- 246-50..... Coordinated Quality Improvement Program
- 296-46..... Electrical Safety
- 296-823..... Occupational Exposure to Bloodborne Pathogens
- 388-151..... School Age Child Care Center Minimum Licensing Requirements
- 388-155..... Minimum Licensing Requirement for Family Child Daycare Homes
- 388-295..... Minimum Licensing for Children
- 388-805..... Certification Requirements for Chemical Dependency Service Providers
- 388-865..... Community Mental Health and Involuntary Treatment Programs

Residential Treatment Facility

WAC 246-337

Resources

Resource #18—Transportation Safety & The Law

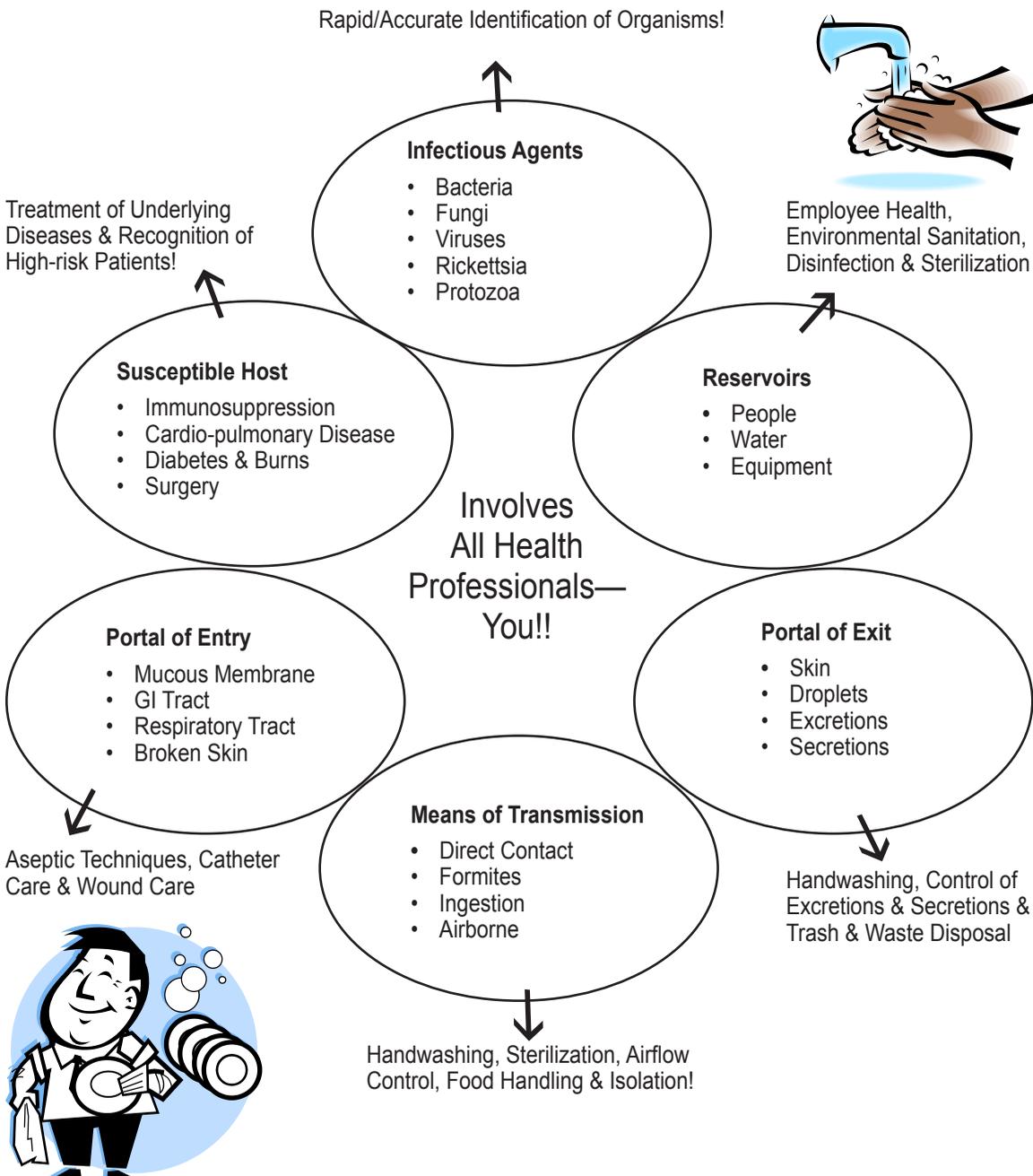


Residential Treatment Facility

WAC 246-337

Resources

Resource #19—Breaking The Chain Of Infection



WAC 246-337-060

Notes

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Residential Treatment Facility

RCW 71.12

Revised Code of Washington (RCW)

Definitions

RCW 71.12.455

As used in this chapter, “establishment” and “institution” mean and include every private or county or municipal hospital, including public hospital districts, sanitarium, home, or other place receiving or caring for any mentally ill, mentally incompetent person, or chemically dependent person.

License To Be Obtained—Penalty

RCW 71.12.460

No person, association, county, municipality, public hospital district, or corporation, shall establish or keep, for compensation or hire, an establishment as defined in this chapter without first having obtained a license therefor from the department of health, complied with rules adopted under this chapter, and paid the license fee provided in this chapter. Any person who carries on, conducts, or attempts to carry on or conduct an establishment as defined in this chapter without first having obtained a license from the department of health, as in this chapter provided, is guilty of a misdemeanor and on conviction thereof shall be punished by imprisonment in a county jail not exceeding six months, or by a fine not exceeding one thousand dollars, or by both such fine and imprisonment. The managing and executive officers of any corporation violating the provisions of this chapter shall be liable under the provisions of this chapter in the same manner and to the same effect as a private individual violating the same.

License Application—Fees

RCW 71.12.470

Every application for a license shall be accompanied by a plan of the premises proposed to be occupied, describing the capacities of the buildings for the uses intended, the extent and location of grounds appurtenant thereto, and the number of patients proposed to be received therein, with such other information, and in such form, as the department of health requires. The application shall be accompanied by the proper license fee. The amount of the license fee shall be established by the department of health under RCW 43.70.110.

Examination Of Operation Of Establishment And Premises Before Granting License

RCW 71.12.480

The department of health shall not grant any such license until it has made an examination of all phases of the operation of the establishment necessary to determine compliance with rules adopted under this chapter including the premises proposed to be licensed and is satisfied that the premises are substantially as described, and are otherwise fit and suitable for the purposes for which they are designed to be used, and that such license should be granted.

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RCW

Residential Treatment Facility

RCW 71.12

Revised Code of Washington (RCW)

Examination Of Premises As To Compliance With The Chapter, Rules, And License—License Changes

RCW 71.12.500

The department of health may at any time examine and ascertain how far a licensed establishment is conducted in compliance with this chapter, the rules adopted under this chapter, and the requirements of the license therefor. If the interests of the patients of the establishment so demand, the department may, for just and reasonable cause, suspend, modify, or revoke any such license. RCW 43.70.115 governs notice of a license denial, revocation, suspension, or modification and provides the right to an adjudicative proceeding.

Fire Protection—Duties Of Chief Of The Washington State Patrol

RCW 71.12.485

Standards for fire protection and the enforcement thereof, with respect to all establishments to be licensed hereunder, shall be the responsibility of the chief of the Washington state patrol, through the director of fire protection, who shall adopt such recognized standards as may be applicable to such establishments for the protection of life against the cause and spread of fire and fire hazards. The department of health, upon receipt of an application for a license, or renewal of a license, shall submit to the chief of the Washington state patrol, through the director of fire protection, in writing, a request for an inspection, giving the applicant's name and the location of the premises to be licensed. Upon receipt of such a request, the chief of the Washington state patrol, through the director of fire protection, or his or her deputy shall make an inspection of the establishment to be licensed, and if it is found that the premises do not comply with the required safety standards and fire regulations as promulgated by the chief of the Washington state patrol, through the director of fire protection, he or she shall promptly make a written report to the establishment and the department of health as to the manner and time allowed in which the premises must qualify for a license and set forth the conditions to be remedied with respect to fire regulations. The department of health, applicant or licensee shall notify the chief of the Washington state patrol, through the director of fire protection, upon completion of any requirements made by him or her, and the director of fire protection or his or her deputy shall make a reinspection of such premises. Whenever the establishment to be licensed meets with the approval of the chief of the Washington state patrol, through the director of fire protection, he or she shall submit to the department of health a written report approving same with respect to fire protection before a full license can be issued. The chief of the Washington state patrol, through the director of fire protection, shall make or cause to be made inspections of such establishments at least annually. The department of health shall not license or continue the license of any establishment unless and until it shall be approved by the chief of the Washington state patrol, through the director of fire protection, as herein provided.

In cities which have in force a comprehensive building code, the provisions of which are determined by the chief of the Washington state patrol, through the director of fire protection, to be equal to the minimum standards of the chief of the Washington state patrol, through the director of fire protection, for such establishments, the chief of the fire department, provided the latter is a paid chief of a paid fire department, shall make the inspection with the chief of the Washington state patrol, through the director of fire protection, or his or her deputy, and they shall jointly approve the premises before a full license can be issued.

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Residential Treatment Facility

RCW 71.12

Revised Code of Washington (RCW)

Expiration And Renewal Of License

RCW 71.12.490

All licenses issued under the provisions of this chapter shall expire on a date to be set by the department of health. No license issued pursuant to this chapter shall exceed thirty-six months in duration. Application for renewal of the license, accompanied by the necessary fee as established by the department of health under RCW 43.70.110, shall be filed with that department, not less than thirty days prior to its expiration and if application is not so filed, the license shall be automatically canceled.

Examination And Visitation In General

RCW 71.12.510

The department of health may at any time cause any establishment as defined in this chapter to be visited and examined.

Scope Of Examination

RCW 71.12.4520

Each such visit may include an inspection of every part of each establishment. The representatives of the department of health may make an examination of all records, methods of administration, the general and special dietary, the stores and methods of supply, and may cause an examination and diagnosis to be made of any person confined therein. The representatives of the department of health may examine to determine their fitness for their duties the officers, attendants, and other employees, and may talk with any of the patients apart from the officers and attendants.

Conference With Management—Improvement

RCW 71.12.530

The representatives of the department of health may, from time to time, at times and places designated by the department, meet the managers or responsible authorities of such establishments in conference, and consider in detail all questions of management and improvement of the establishments, and may send to them, from time to time, written recommendations in regard thereto.

Recommendations To Be Kept On File—Records Of Inmates

RCW 71.12.540

The authorities of each establishment as defined in this chapter shall place on file in the office of the establishment the recommendations made by the department of health as a result of such visits, for the purpose of consultation by such authorities, and for reference by the department representatives upon their visits. Every such establishment shall keep records of every person admitted thereto as follows and shall furnish to the department, when required, the following data: Name, age, sex, marital status, date of admission, voluntary or other commitment, name of physician, diagnosis, and date of discharge.

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RCW

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Residential Treatment Facility

RCW 71.12

Revised Code of Washington (RCW)

Local Authorities May Also Prescribe Standards

RCW 71.12.550

This chapter shall not prevent local authorities of any city, or city and county, within the reasonable exercise of the police power, from adopting rules and regulations, by ordinance or resolution, prescribing standards of sanitation, health and hygiene for establishments as defined in this chapter, which are not in conflict with the provisions of this chapter, and requiring a certificate by the local health officer, that the local health, sanitation and hygiene laws have been complied with before maintaining or conducting any such institution within such city or city and county.

Voluntary Patients—Receipt Authorized—Application—Report

RCW 71.12.560

The person in charge of any private institution, hospital, or sanitarium which is conducted for, or includes a department or ward conducted for, the care and treatment of persons who are mentally ill or deranged may receive therein as a voluntary patient any person suffering from mental illness or derangement who is a suitable person for care and treatment in the institution, hospital, or sanitarium, who voluntarily makes a written application to the person in charge for admission into the institution, hospital or sanitarium. At the expiration of fourteen continuous days of treatment of a patient voluntarily committed in a private institution, hospital, or sanitarium, if the period of voluntary commitment is to continue, the person in charge shall forward to the office of the department of social and health services a record of the voluntary patient showing the name, residence, date of birth, sex, place of birth, occupation, social security number, marital status, date of admission to the institution, hospital, or sanitarium, and such other information as may be required by rule of the department of social and health services.

Communications By Patients—Rights

RCW 71.12.570

No person in an establishment as defined in this chapter shall be restrained from sending written communications of the fact of his detention in such establishment to a friend, relative, or other person.

The physician in charge of such person and the person in charge of such establishment shall send each such communication to the person to whom it is addressed. All persons in an establishment as defined by chapter 71.12 RCW shall have no less than all rights secured to involuntarily detained persons by RCW 71.05.360 and *71.05.370 and to voluntarily admitted or committed persons pursuant to RCW 71.05.050 and 71.05.380.

Revocation Of License For Noncompliance—Exemption As To Christian Science Establishments

RCW 71.12.590

Failure to comply with any of the provisions of RCW 71.12.550 through 71.12.570 shall constitute grounds for revocation of license: PROVIDED, HOWEVER, That nothing in this chapter or the rules and regulations adopted pursuant thereto shall be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any establishment, as defined in this chapter conducted in accordance with the practice and principles of the body known as Church of Christ, Scientist.

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Residential Treatment Facility

RCW 71.12

Revised Code of Washington (RCW)

Suspension Of License—Non Compliance With Support Order— Reissuance

RCW 71.12.595

The department of health shall immediately suspend the license or certificate of a person who has been certified pursuant to RCW 74.20A.320 by the department of social and health services as a person who is not in compliance with a support order or a *residential or visitation order. If the person has continued to meet all other requirements for reinstatement during the suspension, reissuance of the license or certificate shall be automatic upon the department of health's receipt of a release issued by the department of social and health services stating that the licensee is in compliance with the order.

Prosecuting Attorney Shall Prosecute Violations

RCW 71.12.640

The prosecuting attorney of every county shall, upon application by the department of social and health services, the department of health, or its authorized representatives, institute and conduct the prosecution of any action brought for the violation within his county of any of the provisions of this chapter.

Licensing, Operation, Inspection—Adoption Of Rules

RCW 71.12.670

The department of health shall adopt rules for the licensing, operation, and inspections of establishments and institutions and the enforcement thereof.

RCW

Notes

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Scope And Purpose

WAC 246-337-001

- (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.

Definitions

WAC 246-337-005

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) "Bathroom" means a room containing at least one bathtub or shower.
- (6) "Chemical dependency" means alcoholism, drug addiction, or dependence on alcohol and one or more other psychoactive chemicals, as the context requires.
- (7) "Chemical dependency RTF" means all or part of an RTF certified by DSHS 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) "Subacute detoxification" as defined in chapter 388-805 WAC;
 - (c) "Intensive inpatient services" as defined in chapter 388-805 WAC;
 - (d) "Long-term treatment services" as defined in chapter 388-805 WAC;
 - (e) "Recovery house services" as defined in chapter 388-805 WAC.
- (8) "Child" or "minor" means an individual under the age of eighteen.
- (9) "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.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-005 (Continued)

- (10) “Confidential” means information that may not be disclosed except under specific conditions permitted or mandated by law or legal agreement between the parties concerned.
- (11) “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.
- (12) “DASA” means division of alcohol and substance abuse, within DSHS.
- (13) “Department” means the Washington state department of health.
- (14) “DSHS” means the Washington state department of social and health services.
- (15) “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 provider.
- (16) “Facility” means a building or portion of a building.
- (17) “First aid” means care for a condition that requires immediate assistance from an individual trained and certified in first-aid procedures.
- (18) “Hand hygiene” means handwashing, antiseptic hand wash, or antiseptic hand or surgical hand antiseptis.
- (19) “Health” means a state of complete physical and mental well-being and not merely the absence of disease or infirmity.
- (20) “Health assessment” means a systematic examination of the person’s body conducted by an authorized health care provider.
- (21) “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.
- (22) “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.
- (23) “Health care screen” means the process approved by an authorized health care provider to determine the health care needs of a resident.
- (24) “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.
- (25) “Medication” means a legend drug prescribed for a resident by an authorized health care provider, or nonprescription drugs, also called “over-the-counter medications,” that can be purchased by the general public without a prescription.
- (26) “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.
- (27) “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.
- (28) “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.
- (29) “Medication protocol” means a specific group of orders to be used for specific symptoms for specific residents and authorized by a health care provider.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-005 (Continued)

- (30) “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.
- (31) “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.
- (32) “Resident” means an individual (adult or child) admitted to the RTF licensed under this chapter.
- (33) “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.
- (34) “Restraint” means a continuum of methods used to prevent or limit free body movement.
- (35) “Room” means a space set apart by floor to ceiling partitions on all sides with all openings provided with doors or windows.
- (36) “Seclusion” means the involuntary confinement of a resident alone in a room or area from which the resident is physically prevented from leaving.
- (37) “Sink” means a properly trapped plumbing fixture, capable of holding water, with approved potable hot and cold running water under pressure.
- (38) “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.
- (39) “Toilet room” means a room containing a water closet (toilet).
- (40) “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.

Initial Licensure And Renewal Process

WAC 246-337-010

- (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:

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-010 (Continued)

- (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 on-site survey.
 - (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.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Service Categories

WAC 246-337-015

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.

Responsibilities And Rights Of The Licensee And Department

WAC 246-337-020

- (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.
- (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

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-020 (Continued)

- (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;
 - (e) Document, during an initial survey or as needed, 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.

Exemptions And Alternative Methods

WAC 246-337-025

- (1) An applicant or licensee may request an exemption 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 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.

Retroactivity

WAC 246-337-030

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.

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WAC

Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Procedures To Deny, Suspend, Modify Or Revoke A License

WAC 246-337-035

- (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:

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Washington Administrative Code (WAC)

WAC 246-337-035 (Continued)

- (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.

Review Of Construction Documents And Functional Program

WAC 246-337-040

- (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.
- (2) 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) 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.
- (3) The licensee or applicant must submit accurate, timely, and complete construction documents that comply with all governing rules.
- (4) 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) Dimensioned floor plan(s) with the function of each room and fixed/required equipment designated;
 - (iii) Elevations, sections, and construction details;
 - (iv) Schedule of floor, wall, and ceiling finishes;
 - (v) Schedules of doors and windows sizes and type, and door finish hardware;
 - (vi) Mechanical systems plumbing and heating/venting/air conditioning; and
 - (vii) Electrical systems, including lighting, power, and communication/notification systems;
 - (c) Specifications that describe with specificity the workmanship and finishes; and

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WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-040 (Continued)

- (d) Shop drawings and related equipment specifications for:
 - (i) An automatic fire sprinkler system when required by other codes; and
 - (ii) An automatic fire alarm system when required by other codes.
- (5) 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.
- (6) The applicant or licensee must:
 - (a) Comply with the standards as adopted by the Washington state building code council;
 - (b) Assure conformance to the approved plans during construction;
 - (c) Submit addenda, change orders, construction change directives or any other deviation from the approved plans prior to their installation;
 - (d) Provide a written construction project completion notice to the department indicating:
 - (i) The completion date; and
 - (ii) The actual construction cost;
 - (e) Make adequate provisions for the health, safety, and comfort of residents during construction projects.

Governance And Administration

WAC 246-337-045

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, 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.

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Washington Administrative Code (WAC)

WAC 246-337-045 (Continued)

- (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.

Management Of Human Resources

WAC 246-337-050

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);

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WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-050 (Continued)

- (j) Tuberculosis screening (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.

Personnel Criminal History, Disclosure, And Background Inquiries

WAC 246-337-055

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.

Infection Control

WAC 246-337-060

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 WISHA, chapter 296-823 WAC;
 - (d) Control of tuberculosis consistent with WISHA, department guidelines, 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 cooperate 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."

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Health And Safety

WAC 246-337-065

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.
- (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 department serious or undesirable resident outcomes including, but not limited to, death, suicide, or major disruption of services through internal or external emergency events.

Emergency Disaster Plan

WAC 246-337-070

- (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.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-070 (Continued)

- (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) Sufficient to maintain a three-day emergency supply of dry or canned food and water for all staff and residents.

Resident Rights

WAC 246-337-075

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, 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 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.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-075 (Continued)

- (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.
- (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.

Resident Care Services

WAC 246-337-080

- (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, transfer, 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 provider is not present including:
 - (i) Having current policies and procedures signed by a physician or authorized health care provider, 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, the department or other regulatory agencies 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 control, 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 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 provider.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-080 (Continued)

- (h) Addressing how licensees providing subacute detoxification 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 subacute detoxification 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 provider.
- (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 is to be conducted by a health care provider 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 or acute detoxification services.
 - (d) A health assessment by a health care provider, any time a resident exhibits signs and symptoms of an injury, illness or abnormality for which medical diagnosis and treatment are indicated.
 - (e) Access to and availability of authorized health care providers to develop and implement the resident plan of care.
 - (f) Sufficient numbers of trained personnel who are available to provide health care according to the resident's health care plan.
 - (g) 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 provider.
 - (iv) Incorporating resident's health care needs and behavioral needs into the resident's overall health care plan;

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-080 (Continued)

- (v) Emergency health care.
 - (h) 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.
 - (i) Provision is made either on the premises, through a contract laboratory or through a health care provider for service(s) required by the resident.
 - (j) 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.

Accepting A Child With A Parent In Treatment

WAC 246-337-085

A chemical dependency facility that accepts a child with a parent in treatment must assure child care services are provided for the child and the services of a health care provider 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 licensed by DSHS under chapter 388-295 WAC, Minimum licensing requirements for child day care centers, chapter 388-151 WAC, School-age child care center minimum licensing requirements, chapter 388-155 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 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.

Food And Nutrition Services

WAC 246-337-090

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.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-090 (Continued)

- (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.

Resident Health Care Records

WAC 246-337-095

The licensee must ensure the RTF meets the following requirements:

- (1) Develop and implement procedures for maintaining current health care records as required by chapter 70.02 RCW and RCW 71.05.390 or by applicable laws.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-095 (Continued)

- (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.
- (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) Instructions or teaching provided to resident in connection with his or her health care; and
 - (v) 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.

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WAC

Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Health Care Plan

WAC 246-337-100

The licensee must ensure that an individual health care plan is developed and implemented for each resident based on health assessment(s) (see definitions (20) health care assessment and (22) health care provider) 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 on admission to a RTF;
- (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.

Medication Management

WAC 246-337-105

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 providers, administration and pharmacist (as needed). The policies and procedures must be consistent with the rules of the department and the department's board of Pharmacy and address all aspects of medication administration, including the following:
 - (a) Timely procurement;
 - (b) Medication administration;
 - (c) Prescribing;
 - (d) Proper storage conditions addressing security, safety, sanitation, temperature, light, moisture and ventilation;
 - (e) Use of nonprescription drugs:
 - (i) List of drugs available;
 - (ii) Parameters of use;
 - (f) Receipt;
 - (g) Proper labeling;
 - (h) Disposal;
 - (i) Medication brought into RTF by a resident;

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Washington Administrative Code (WAC)

WAC 246-337-105 (Continued)

- (j) Accountability;
 - (k) Starter supply of psychotropic, detoxification and emergency drugs not for a specific resident;
 - (l) Emergency allergy response kit of prepackaged medications and supplies for the treatment of anaphylactic shock; 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 provider 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 seven days 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 list.
- (6) Having a current established drug reference resource available for use by RTF staff.

Use Of Seclusion And Restraint

WAC 246-337-110

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.

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WAC 246-337-110 (Continued)

- (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 provider 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 provider, 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 authorized health care provider 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.

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Washington Administrative Code (WAC)

(WAC 246-337-110 (Continued))

- (13) The licensee must ensure that restraint and seclusion is carried out in a safe environment. This room must:
- Be designed to minimize potential for stimulation, escape, hiding, injury, or death;
 - Have a maximum capacity of one resident;
 - Have a door that opens outward;
 - Have a staff-controlled, lockable, adjoining toilet room;
 - Have a minimum of three feet of clear space on three sides of the bed; and
 - Have negative pressure with an independent exhaust system with the exhaust fan at the discharge end of the system.
- (14) Restraint equipment must be clean and in good repair.

Cleaning, Maintenance And Refuse Disposal

WAC 246-337-115

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

- Sanitary disposal and collection of garbage and refuse, by including:
 - Use of noncombustible waste containers in resident rooms and common use areas;
 - Containers constructed of nonabsorbent material, which are water-tight, covered, and adequate to store garbage and refuse generated by the RTF;
 - A storage area location convenient for resident and staff use;
 - An area and containers that are cleaned and maintained to prevent:
 - Entrance of insects, rodents, birds, or other pests;
 - Odors; and
 - Other nuisances.
- 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.
- A locked housekeeping room on each level of the RTF that is equipped with:
 - A utility sink or equivalent means of obtaining and disposing of mop water separate from food preparation and service areas; and
 - 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.
- Adequate storage space for:
 - Clean and soiled equipment and linens;
 - Lockable, shelved storage impervious to moisture, for cleaning supplies, disinfectants and poisonous compounds; and
 - Separate, locked storage for flammable materials or other fire and safety hazards.
- A safe and cleanable area is designated for pouring stock chemicals and cleaning supplies into separate, properly labeled containers if stock chemicals are used.
- An effective pest control program so that the RTF is free of pests such as rodents and insects.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Facility, Environment, And Space Requirements

WAC 246-337-120

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) 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 handwashing 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.

Toilet Rooms And Bathrooms

WAC 246-337-125

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.

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WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-125 (Continued)

- (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.

Water Supply, Sewage And Waste Disposal

WAC 246-337-130

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.

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WAC

Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Heating, Ventilation And Air Conditioning

WAC 246-337-135

- (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. 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.

Lighting, Emergency Lighting, And Electrical Outlets

WAC 246-337-140

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.

Laundry

WAC 246-337-145

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;

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

WAC 246-337-145 (Continued)

- (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 off-site 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.

Resident Rooms, Furnishings And Storage

WAC 246-337-150

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.

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WAC 246-337-150 (Continued)

- (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.

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Residential Treatment Facility

WAC 246-337

Washington Administrative Code (WAC)

Pet Management And Safety

WAC 246-337-155

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

Licensing Fees

WAC 246-337-990

If a written request is submitted for withdrawal after the department has begun the licensure review process, but before licensure, the department may refund any portion of the fees not consumed by departmental action taken prior to the request for withdrawal.

WAC

Residential Treatment Facility

Chapter 296-337 WAC

Statutory Authority

Statutory Authority

246-337-001 Purpose.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-001, filed 7/20/05, effective 8/20/05.]

246-337-005 Definitions.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-005, filed 7/20/05, effective 8/20/05.]

246-337-010 Initial licensure and renewal process.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-010, filed 7/20/05, effective 8/20/05.]

246-337-015 Service categories.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-015, filed 7/20/05, effective 8/20/05.]

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

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-020, filed 7/20/05, effective 8/20/05.]

246-337-025 Exemptions and alternative methods.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-025, filed 7/20/05, effective 8/20/05.]

246-337-030 Retroactivity.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-030, filed 7/20/05, effective 8/20/05.]

246-337-035 Procedures to deny, suspend, modify or revoke a license.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-035, filed 7/20/05, effective 8/20/05.]

246-337-040 Review of construction documents and functional program.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-040, filed 7/20/05, effective 8/20/05.]

246-337-045 Governance and administration.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-045, filed 7/20/05, effective 8/20/05.]

246-337-050 Management of human resources.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-050, filed 7/20/05, effective 8/20/05.]

246-337-055 Personal criminal history, disclosure, and background inquiries.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-055, filed 7/20/05, effective 8/20/05.]

246-337-060 Infection control.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-060, filed 7/20/05, effective 8/20/05.]

246-337-065 Health and safety.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-065, filed 7/20/05, effective 8/20/05.]

246-337-070 Emergency disaster plan.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-070, filed 7/20/05, effective 8/20/05.]

246-337-075 Resident rights.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-075, filed 7/20/05, effective 8/20/05.]

246-337-080 Resident care services.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-080, filed 7/20/05, effective 8/20/05.]

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Residential Treatment Facility

Chapter 296-337 WAC

Statutory Authority

246-337-085 Accepting a child with a parent in treatment.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-085, filed 7/20/05, effective 8/20/05.]

246-337-090 Food and nutrition services.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-090, filed 7/20/05, effective 8/20/05.]

246-337-095 Resident health care records

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-095, filed 7/20/05, effective 8/20/05.]

246-337-100 Health care plan.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-100, filed 7/20/05, effective 8/20/05.]

246-337-105 Medication management.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-105, filed 7/20/05, effective 8/20/05.]

246-337-110 Use of seclusion and restraint.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-110, filed 7/20/05, effective 8/20/05.]

246-337-115 Cleaning, maintenance and refuse disposal.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-115, filed 7/20/05, effective 8/20/05.]

246-337-120 Facility, environment, and space requirements.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-120, filed 7/20/05, effective 8/20/05.]

246-337-125 Toilet rooms and bathrooms.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-125, filed 7/20/05, effective 8/20/05.]

246-337-130 Water supply, sewage and waste disposal.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-130, filed 7/20/05, effective 8/20/05.]

246-337-135 Heating, ventilation and air conditioning.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-135, filed 7/20/05, effective 8/20/05.]

246-337-140 Lighting, emergency lighting, and electrical outlets.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-140, filed 7/20/05, effective 8/20/05.]

246-337-145 Laundry.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-145, filed 7/20/05, effective 8/20/05.]

246-337-150 Resident rooms, furnishings and storage.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-150, filed 7/20/05, effective 8/20/05.]

246-337-155 Pet Management and safety.

[Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-155, filed 7/20/05, effective 8/20/05.]

246-337-990 Licensing fees.

[Statutory Authority: RCW 43.70.250. 05-23-099, § 246-337-990, filed 11/17/05, effective 12/18/05. Statutory Authority: Chapter 71.12 RCW. 05-15-157, § 246-337-990, filed 7/20/05, effective 8/20/05.]

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