

RCW 70.01.070 Report and guidelines on epidemic disease

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

- (a) Local health jurisdictions;
- (b) Advocates for consumers of long-term care;
- (c) Associations representing long-term care facility providers;

and

- (d) The office of the state long-term care ombuds.

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

- (a) Visitation policies that balance the psychosocial and physical health of residents;
- (b) Timely and adequate access to personal protective equipment and other infection control supplies so that employees in long-term care facilities are prioritized for distribution in the event of supply shortages;
- (c) Admission and discharge policies and standards; and
- (d) Rapid and accurate testing to identify infectious outbreaks

for:

- (i) Resident cohorting and treatment;
- (ii) Contact tracing purposes; and
- (iii) Protecting the health and well-being of residents and employees.

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

- (a) Ensure that any corresponding federal rules and guidelines take precedence over the state guidelines;
- (b) Avoid conflict between federal requirements and state guidelines;
- (c) Develop a timeline for implementing the guidelines and a process for communicating the guidelines to long-term care facilities, local health jurisdictions, and other interested stakeholders in a clear and timely manner;
- (d) Consider options for targeting available resources towards infection control when epidemic disease outbreaks occur in long-term care facilities;
- (e) Establish methods for ensuring that epidemic preparedness and response guidelines are consistently applied across all local health jurisdictions and long-term care facilities in Washington state. This may include recommendations to the legislature for any needed statutory changes;
- (f) Develop a process for maintaining and updating epidemic preparedness and response guidelines as necessary; and
- (g) Ensure appropriate considerations for each unique provider type.

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

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

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

(a) Review the report and any corresponding guidelines;

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

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

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

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

(b) Certified community residential services and supports; and

(c) Registered continuing care retirement communities. [2021 c 159 s 30.]

Findings—2021 c 159: See note following RCW 18.20.520.