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**SUBSTITUTE HOUSE BILL 2789**

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**State of Washington**

**55th Legislature**

**1998 Regular Session**

**By** House Committee on Health Care (originally sponsored by Representatives Backlund, Dyer, Cody, Skinner, Conway, Mitchell, Hickel, Carlson, Cooke, Kenney, Wood, Tokuda, Cole, Murray, Regala and Van Luven)

Read first time 02/03/98. Referred to Committee on .

1 AN ACT Relating to improving long-term care; amending RCW  
2 70.129.030; adding a new section to chapter 18.20 RCW; adding a new  
3 section to chapter 70.128 RCW; creating new sections; and providing an  
4 effective date.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF WASHINGTON:

6 NEW SECTION. **Sec. 1.** The legislature finds that many residents of  
7 long-term care facilities and recipients of in-home personal care  
8 services are exceptionally vulnerable and their health and well-being  
9 are heavily dependent on their caregivers. The legislature further  
10 finds that the quality of staff in long-term care facilities is often  
11 the key to good care. The need for well-trained staff and well-managed  
12 facilities is growing as the state's population ages and the acuity of  
13 the health care problems of residents increases. In order to better  
14 protect and care for residents, the legislature directs that the  
15 minimum training standards be reviewed for licensees serving residents  
16 with special needs, such as mental illness, dementia, or a  
17 developmental disability, that licensees receive appropriate training,  
18 and that the training delivery system be improved.

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

3        (1) The department of social and health services shall review, in  
4 coordination with the department of health, the nursing care quality  
5 assurance commission, adult family home providers, boarding home  
6 providers, in-home personal care providers, and long-term care  
7 consumers and advocates, training standards for administrators and  
8 resident caregiving staff. The departments and the commission shall  
9 submit to the appropriate committees of the house of representatives  
10 and the senate by December 1, 1998, specific recommendations on  
11 training standards and the delivery system, including necessary  
12 statutory changes and funding requirements. Any proposed enhancements  
13 shall be consistent with this section, shall take into account and not  
14 duplicate other training requirements applicable to boarding homes and  
15 staff, and shall be developed with the input of boarding home and  
16 resident representatives, health care professionals, and other vested  
17 interest groups. Training standards and the delivery system shall be  
18 relevant to the needs of residents served by the boarding home and  
19 recipients of long-term in-home personal care services and shall be  
20 sufficient to ensure that administrators and caregiving staff have the  
21 skills and knowledge necessary to provide high quality, appropriate  
22 care.

23        (2) The recommendations on training standards and the delivery  
24 system developed under subsection (1) of this section shall be based on  
25 a review and consideration of the following:    Quality of care;  
26 availability of training; affordability, including the training costs  
27 incurred by the department of social and health services and private  
28 providers; portability of existing training requirements; competency  
29 testing; practical and clinical course work; methods of delivery of  
30 training, standards for training staff; and necessary enhancements for  
31 special needs populations and resident rights training. Residents with  
32 special needs include, but are not limited to, residents with a  
33 diagnosis of mental illness, dementia, or developmental disability.

34        (3) The department of social and health services shall establish  
35 payment rates to cover the reasonable costs of the enhanced minimum  
36 training and specialized standards for facilities with a contract to  
37 accept state-funded residents. The payment rates shall compensate  
38 facilities on a pro rata basis, based upon the facility's ratio of  
39 state-funded residents to private-pay residents. Compensation by the

1 department of social and health services shall include the reasonable  
2 cost of tuition for the training and the reasonable cost for  
3 administrators and caregiving staff while they attend required  
4 training. To the extent possible, the department of social and health  
5 services shall seek federal reimbursement for these training-related  
6 costs. Facilities that admit only private-pay residents shall not have  
7 training costs paid for by the state.

8 NEW SECTION. **Sec. 3.** A new section is added to chapter 70.128 RCW  
9 to read as follows:

10 (1) The department of social and health services shall review, in  
11 coordination with the department of health, the nursing care quality  
12 assurance commission, adult family home providers, boarding home  
13 providers, in-home personal care providers, and long-term care  
14 consumers and advocates, training standards for administrators and  
15 resident caregiving staff. The departments and the commission shall  
16 submit to the appropriate committees of the house of representatives  
17 and the senate by December 1, 1998, specific recommendations on  
18 training standards and the delivery system, including necessary  
19 statutory changes and funding requirements. Any proposed enhancements  
20 shall be consistent with this section, shall take into account and not  
21 duplicate other training requirements applicable to adult family homes  
22 and staff, and shall be developed with the input of adult family home  
23 and resident representatives, health care professionals, and other  
24 vested interest groups. Training standards and the delivery system  
25 shall be relevant to the needs of residents served by the adult family  
26 home and recipients of long-term in-home personal care services and  
27 shall be sufficient to ensure that administrators and caregiving staff  
28 have the skills and knowledge necessary to provide high quality,  
29 appropriate care.

30 (2) The recommendations on training standards and the delivery  
31 system developed under subsection (1) of this section shall be based on  
32 a review and consideration of the following: Quality of care;  
33 availability of training; affordability, including the training costs  
34 incurred by the department of social and health services and private  
35 providers; portability of existing training requirements; and necessary  
36 enhancements for special needs populations and resident rights  
37 training. Residents with special needs include, but are not limited

1 to, residents with a diagnosis of mental illness, dementia, or  
2 developmental disability.

3 (3) The department of social and health services shall establish  
4 payment rates to cover the reasonable costs of the enhanced minimum  
5 training and specialized standards for facilities with a contract to  
6 accept state-funded residents. The payment rates shall compensate  
7 facilities on a pro rata basis, based upon the facility's ratio of  
8 state-funded residents to private-pay residents. Compensation by the  
9 department of social and health services shall include the reasonable  
10 cost of tuition for the training and the reasonable cost for  
11 administrators and caregiving staff while they attend required  
12 training. To the extent possible, the department of social and health  
13 services shall seek federal reimbursement for these training-related  
14 costs. Facilities that admit only private-pay residents shall not have  
15 training costs paid for by the state.

16 **Sec. 4.** RCW 70.129.030 and 1997 c 386 s 31 are each amended to  
17 read as follows:

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

24 (2) The resident or his or her legal representative has the right:

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

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

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

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

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

29 ~~((4))~~ (5) The facility must furnish a written description of  
30 residents rights that includes:

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

33 (b) A posting of names, addresses, and telephone numbers of the  
34 state survey and certification agency, the state licensure office, the  
35 state ombudsmen program, and the protection and advocacy systems; and

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

39 ~~((5))~~ (6) Notification of changes.

1 (a) A facility must immediately consult with the resident's  
2 physician, and if known, make reasonable efforts to notify the  
3 resident's legal representative or an interested family member when  
4 there is:

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

7 (ii) A significant change in the resident's physical, mental, or  
8 psychosocial status (i.e., a deterioration in health, mental, or  
9 psychosocial status in either life-threatening conditions or clinical  
10 complications).

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

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

15 (ii) A decision to transfer or discharge the resident from the  
16 facility.

17 (c) The facility must record and update the address and phone  
18 number of the resident's representative or interested family member,  
19 upon receipt of notice from them.

20 NEW SECTION. **Sec. 5.** The review under sections 2 and 3 of this  
21 act shall include residential care staff training for programs and  
22 services operated under Title 71A RCW.

23 NEW SECTION. **Sec. 6.** Section 4 of this act takes effect July 1,  
24 1998.

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