Z-0755.3

HOUSE BILL 2636

State of Washington 56th Legislature 2000 Regular Session

By Representatives Schual-Berke and Conway; by request of Department of Social and Health Services

Read first time . Referred to Committee on .

AN ACT Relating to long-term care training; amending RCW 18.20.010, 70.128.005, 70.128.120, 70.128.130, 74.39A.005, and 74.39A.050; adding a new section to chapter 18.20 RCW; and adding a new section to chapter 70.128 RCW.

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

6 **Sec. 1.** RCW 18.20.010 and 1985 c 297 s 1 are each amended to read 7 as follows:

The purpose of this chapter is to provide for the development, 8 establishment, and enforcement of standards for the maintenance and 9 10 operation of boarding homes, which, in the light of advancing knowledge, will promote safe and adequate care of the individuals 11 12 therein. It is further the intent of the legislature that boarding 13 homes be available to meet the needs of those for whom they care by 14 recognizing the capabilities of individuals to direct their self-15 medication or to use supervised self-medication techniques when ordered 16 and approved by a physician licensed under chapter 18.57 or 18.71 RCW 17 or a ((podiatrist)) <u>podiatric physician and surgeon</u> licensed under 18 chapter 18.22 RCW.

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1 The legislature finds that many residents of community-based long-2 term care facilities are vulnerable and their health and well-being are 3 dependent on their caregivers. The quality, skills, and knowledge of 4 their caregivers are often the key to good care. The legislature finds 5 that the need for well-trained caregivers is growing as the state's 6 population ages and residents' needs increase. The legislature intends 7 that current training standards should be enhanced.

8 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 18.20 RCW 9 to read as follows:

10 (1) Boarding home administrators or their designees must 11 satisfactorily complete department-approved basic training and 12 continuing education.

(2) Staff persons must satisfactorily complete department-approvedstaff orientation, basic training, and continuing education.

(3) The department must create an approval system for those seekingto conduct department-approved training.

(4) The department will complete rules for subsections (1), (2), and (3) of this section by March 1, 2001 in collaboration with providers, consumers, caregivers, advocates, family members, educators, and other interested parties.

(5) The department must develop by January 1, 2003, training modules for administrators and staff to enhance knowledge and ability to provide care for people with dementia, mental illness, and developmental disabilities.

25 **Sec. 3.** RCW 70.128.005 and 1995 c 260 s 1 are each amended to read 26 as follows:

27 The legislature finds that adult family homes are an important part 28 of the state's long-term care system. Adult family homes provide an 29 alternative to institutional care and promote a high degree of independent living for residents. Persons with functional limitations 30 have broadly varying service needs. Adult family homes that can meet 31 32 those needs are an essential component of a long-term system. The 33 legislature further finds that different populations living in adult family homes, such as the developmentally disabled and the elderly, 34 35 often have significantly different needs and capacities from one another. 36

1 It is the legislature's intent that department rules and policies 2 relating to the licensing and operation of adult family homes recognize 3 and accommodate the different needs and capacities of the various 4 populations served by the homes. Furthermore, the development and 5 operation of adult family homes that can provide quality personal care 6 and special care services should be encouraged.

7 The legislature finds that many residents of community-based long-8 term care facilities are vulnerable and their health and well-being are 9 dependent on their caregivers. The quality, skills, and knowledge of 10 their caregivers are often the key to good care. The legislature finds 11 that the need for well-trained caregivers is growing as the state's 12 population ages and residents' needs increase. The legislature intends 13 that current training standards should be enhanced.

14 **Sec. 4.** RCW 70.128.120 and 1996 c 81 s 1 are each amended to read 15 as follows:

16 Each adult family home provider and each resident manager shall 17 have the following minimum qualifications:

18 (1) Twenty-one years of age or older;

19 (2) Good moral and responsible character and reputation;

20 (3) Literacy;

21 (4) Management and administrative ability to carry out the 22 requirements of this chapter;

(5) Satisfactory completion of department-approved ((initial))
 <u>basic</u> training and continuing education training as specified by the
 department in rule, working in collaboration with providers, consumers,
 <u>caregivers</u>, advocates, family members, educators, and other interested
 <u>parties in the rule-making process</u>;

(6) Satisfactory completion of department-approved, or equivalent,
 special care training before a provider may provide special care
 services to a resident;

31 (7) Not been convicted of any crime listed in RCW 43.43.830 and32 43.43.842; and

(8) Effective July 1, 1996, registered with the department ofhealth.

35 **Sec. 5.** RCW 70.128.130 and 1995 c 260 s 6 are each amended to read 36 as follows: 1 (1) Adult family homes shall be maintained internally and 2 externally in good repair and condition. Such homes shall have safe 3 and functioning systems for heating, cooling, hot and cold water, 4 electricity, plumbing, garbage disposal, sewage, cooking, laundry, 5 artificial and natural light, ventilation, and any other feature of the 6 home.

7 (2) Adult family homes shall be maintained in a clean and sanitary
8 manner, including proper sewage disposal, food handling, and hygiene
9 practices.

10 (3) Adult family homes shall develop a fire drill plan for 11 emergency evacuation of residents, shall have smoke detectors in each 12 bedroom where a resident is located, shall have fire extinguishers on 13 each floor of the home, and shall not keep nonambulatory patients above 14 the first floor of the home.

(4) Adult family homes shall have clean, functioning, and safehousehold items and furnishings.

17 (5) Adult family homes shall provide a nutritious and balanced diet18 and shall recognize residents' needs for special diets.

(6) Adult family homes shall establish health care procedures for
 the care of residents including medication administration and emergency
 medical care.

(a) Adult family home residents shall be permitted to self-administer medications.

(b) Adult family home providers may administer medications anddeliver special care only to the extent authorized by law.

(7) Adult family home providers shall either: (a) Reside at the adult family home; or (b) employ or otherwise contract with a qualified resident manager to reside at the adult family home. The department may exempt, for good cause, a provider from the requirements of this subsection by rule.

(8) A provider will ensure that any volunteer, student, employee, or person residing within the adult family home who will have unsupervised access to any resident shall not have been convicted of a crime listed under RCW 43.43.830 or 43.43.842. Except that a person may be conditionally employed pending the completion of a criminal conviction background inquiry.

37 (9) A provider shall offer activities to residents under care as38 defined by the department in rule.

(10) An adult family home provider ((shall)) must ensure that staff
 are competent and receive necessary training to perform assigned tasks.
 Staff must satisfactorily complete department-approved staff
 orientation, basic training, and continuing education as specified by
 the department by rule. The department will work in collaboration with
 providers, consumers, caregivers, advocates, family members, educators,
 and other interested parties in the rule-making process.

8 <u>NEW SECTION.</u> Sec. 6. A new section is added to chapter 70.128 RCW 9 to read as follows:

By March 1, 2001, the department must, by rule, create an approval system for those seeking to conduct department-approved training under RCW 70.128.120 (5) and (6) and 70.128.130(10). The department will work in collaboration with providers, consumers, caregivers, advocates, family members, educators, and other interested parties in the rulemaking process.

16 **Sec. 7.** RCW 74.39A.005 and 1993 c 508 s 1 are each amended to read 17 as follows:

18 The legislature finds that the aging of the population and advanced medical technology have resulted in a growing number of persons who 19 20 require assistance. The primary resource for long-term care continues to be family and friends. However, these traditional caregivers are 21 22 increasingly employed outside the home. There is a growing demand for 23 improvement and expansion of home and community-based long-term care 24 services to support and complement the services provided by these 25 informal caregivers.

26 The legislature further finds that the public interest would best 27 be served by a broad array of long-term care services that support 28 persons who need such services at home or in the community whenever 29 practicable and that promote individual autonomy, dignity, and choice. The legislature finds that as other long-term care options become 30 more available, the relative need for nursing home beds is likely to 31 32 The legislature recognizes, however, that nursing home care decline. 33 will continue to be a critical part of the state's long-term care options, and that such services should promote individual dignity, 34 35 autonomy, and a homelike environment.

36 <u>The legislature finds that many recipients of in-home services are</u> 37 <u>vulnerable and their health and well-being are dependent on their</u> 1 caregivers. The quality, skills, and knowledge of their caregivers are 2 often the key to good care. The legislature finds that the need for 3 well-trained caregivers is growing as the state's population ages and 4 clients' needs increase. The legislature intends that current training 5 standards should be enhanced.

6 Sec. 8. RCW 74.39A.050 and 1999 c 336 s 5 are each amended to read 7 as follows:

8 The department's system of quality improvement for long-term care 9 services shall use the following principles, consistent with applicable 10 federal laws and regulations:

(1) The system shall be client-centered and promote privacy,
independence, dignity, choice, and a home or home-like environment for
consumers consistent with chapter 392, Laws of 1997.

14 (2) The goal of the system is continuous quality improvement with 15 the focus on consumer satisfaction and outcomes for consumers. This 16 includes that when conducting licensing inspections, the department 17 shall interview an appropriate percentage of residents, family members, 18 resident managers, and advocates in addition to interviewing providers 19 and staff.

(3) Providers should be supported in their efforts to improve
 quality and address identified problems initially through training,
 consultation, technical assistance, and case management.

(4) The emphasis should be on problem prevention both in monitoringand in screening potential providers of service.

(5) Monitoring should be outcome based and responsive to consumer complaints and a clear set of health, quality of care, and safety standards that are easily understandable and have been made available to providers.

(6) Prompt and specific enforcement remedies shall also be 29 30 implemented without delay, pursuant to RCW 74.39A.080, RCW 70.128.160, chapter 18.51 RCW, or chapter 74.42 RCW, for providers found to have 31 32 delivered care or failed to deliver care resulting in problems that are serious, recurring, or uncorrected, or that create a hazard that is 33 34 causing or likely to cause death or serious harm to one or more These enforcement remedies may also include, 35 residents. when 36 appropriate, reasonable conditions on a contract or license. In the selection of remedies, the safety, health, and well-being of residents 37 shall be of paramount importance. 38

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(7) To the extent funding is available, all long-term care staff 1 directly responsible for the care, supervision, or treatment of 2 vulnerable persons should be screened through background checks in a 3 4 uniform and timely manner to ensure that they do not have a criminal history that would disqualify them from working with vulnerable 5 persons. Whenever a state conviction record check is required by state 6 7 law, persons may be employed or engaged as volunteers or independent 8 contractors on a conditional basis according to law and rules adopted 9 by the department.

10 (8) No provider or staff, or prospective provider or staff, with a stipulated finding of fact, conclusion of law, an agreed order, or 11 finding of fact, conclusion of law, or final order issued by a 12 disciplining authority, a court of law, or entered into a state 13 14 registry finding him or her guilty of abuse, neglect, exploitation, or 15 abandonment of a minor or a vulnerable adult as defined in chapter 74.34 RCW shall be employed in the care of and have unsupervised access 16 17 to vulnerable adults.

18 (9) The department shall establish, by rule, a state registry which 19 contains identifying information about personal care aides identified under this chapter who have substantiated findings of abuse, neglect, 20 financial exploitation, or abandonment of a vulnerable adult as defined 21 22 in RCW 74.34.020. The rule must include disclosure, disposition of 23 findings, notification, findings of fact, appeal rights, and fair 24 hearing requirements. The department shall disclose, upon request, 25 substantiated findings of abuse, neglect, financial exploitation, or 26 abandonment to any person so requesting this information.

27 (10) The department shall by rule develop training requirements for 28 individual providers and home care agency providers. Individual 29 providers and home care agency providers must satisfactorily complete department-approved orientation, basic training, and continuing 30 education as defined by the department by rule. The department will 31 work in collaboration with providers, consumers, caregivers, advocates, 32 family members, educators, and other interested parties in the rule-33 34 making process. The department shall deny payment to an individual 35 provider or a home care provider who does not complete the training requirements within the time limit specified by the department by rule. 36 37 (11) The department shall create an approval system by rule by March 1, 2001, for those seeking to conduct department-approved 38 39 training. In the rule-making process, the department will collaborate

with providers, consumers, caregivers, advocates, family members,
 educators, and other interested parties.

3 (12) The department shall establish, by rule, training, background 4 checks, and other quality assurance requirements for personal aides who 5 provide in-home services funded by medicaid personal care as described 6 in RCW 74.09.520, community options program entry system waiver 7 services as described in RCW 74.39A.030, or chore services as described 8 in RCW 74.39A.110 that are equivalent to requirements for individual 9 providers.

10 (((12))) (13) Under existing funds the department shall establish 11 internally a quality improvement standards committee to monitor the 12 development of standards and to suggest modifications.

13 (((13))) (14) Within existing funds, the department shall design, develop, and implement a long-term care training program that is 14 flexible, relevant, and qualifies towards the requirements for a 15 nursing assistant certificate as established under chapter 18.88A RCW. 16 17 This subsection does not require completion of the nursing assistant certificate training program by providers or their staff. 18 The long-19 term care teaching curriculum must consist of a fundamental module, or 20 modules, and a range of other available relevant training modules that provide the caregiver with appropriate options that assist in meeting 21 the resident's care needs. Some of the training modules may include, 22 23 but are not limited to, specific training on the special care needs of persons with developmental disabilities, dementia, mental illness, and 24 25 the care needs of the elderly. No less than one training module must be dedicated to workplace violence prevention. The nursing care 26 27 quality assurance commission shall work together with the department to develop the curriculum modules. The nursing care quality assurance 28 29 commission shall direct the nursing assistant training programs to 30 accept some or all of the skills and competencies from the curriculum modules towards meeting the requirements for a nursing assistant 31 certificate as defined in chapter 18.88A RCW. A process may be 32 33 developed to test persons completing modules from a caregiver's class to verify that they have the transferable skills and competencies for 34 35 entry into a nursing assistant training program. The department may review whether facilities can develop their own related long-term care 36 37 training programs. The department may develop a review process for determining what previous experience and training may be used to waive 38 39 some or all of the mandatory training. The department of social and

- 1 health services and the nursing care quality assurance commission shall
- 2 work together to develop an implementation plan by December 12, 1998.

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