	1/28/99, effective 1/28/99. Statutory Authority: RCW 43.72.310.
245-02-175	Adjudicative proceedings—Reconsideration. [Statutory Authority: RCW 43.72.310. 95-04-112, § 245-02-175, filed 2/1/95, effective 3/4/95.] Decodified by 99-04-049, filed 1/28/99, effective 1/28/99. Statutory Authority: RCW 43.72.310.
245-02-180	Notice of modification or withdrawal of authorization. [Statutory Authority: RCW 43.72.310. 95-04-112, § 245-02-180, filed 2/1/95, effective 3/4/95.] Decodified by 99-04-049, filed 1/28/99, effective 1/28/99. Statutory Authority: RCW 43.72.310.

Reviser's note: Later promulgation, see chapter 246-25 WAC.

WAC 245-02-010 through 245-02-180 Decodified. See Disposition Table at beginning of this chapter.

Title 246 WAC
DEPARTMENT OF HEALTH

Chapters

Chapter 246-05 WAC
LOCAL PUBLIC HEALTH—GUIDELINES

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-05-001	Purpose. [Statutory Authority: RCW 43.70.020. 93-19-061, § 246-05-001, filed 9/13/93, effective 10/14/93.] Repealed by 99-03-062, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 43.70.480.
246-05-010	Definitions. [Statutory Authority: RCW 43.70.020. 93-19-061, § 246-05-010, filed 9/13/93, effective 10/14/93.] Repealed by 99-03-062, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 43.70.480.
246-05-020	Appendix—County, city, or town in a public health district, department, or county-city department. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-05-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.46.080 and 43.20.050. 83-19-057 (Order 268), § 248-990-990, filed 9/20/83; 83-04-011 (Order 253), § 248-990-990, filed 1/24/83; Order 104, Appendix—Guidelines (codified as WAC 248-990-990), filed 9/25/74; Appendix, filed 8/4/67.] Repealed by 99-03-063, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 43.30.050 and 70.46.080.
246-05-030	Assurance of nonsupplanting. [Statutory Authority: RCW 43.70.020. 93-19-061, § 246-05-030, filed 9/13/93, effective 10/14/93.] Repealed by 99-03-062, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 43.70.480.

WAC 246-05-001 through 246-05-030 Repealed. See Disposition Table at beginning of this chapter.

Chapter 246-08 WAC
PRACTICE AND PROCEDURE

WAC

WAC 246-08-400 How much can a medical provider charge for searching and duplicating medical records? RCW 70.02.010(12) allows medical providers to charge fees for searching and duplicating medical records. The fees a provider may charge cannot exceed the fees listed below:

(1) Copying charge per page:

(a) No more than seventy-nine cents per page for the first thirty pages;

(b) No more than sixty cents per page for all other pages.

(2) Additional charges:

(a) The provider can charge an eighteen dollar clerical fee for searching and handling records;

(b) If the provider personally edits confidential information from the record, as required by statute, the provider can charge the usual fee for a basic office visit.

(3) This section is effective July 1, 1999, through June 30, 2001.

[Statutory Authority: RCW 70.02.010 and 43.70.040. 99-13-083, § 246-08-400, filed 6/14/99, effective 7/15/99. Statutory Authority: RCW 70.02.010(12) and 43.70.040. 97-12-087, § 246-08-400, filed 6/4/97, effective 7/5/97. Statutory Authority: RCW 43.70.040 and 70.02.101(12). 95-20-080, § 246-08-400, filed 10/4/95, effective 11/4/95.]

Chapter 246-25 WAC
ANTITRUST IMMUNITY AND COMPETITIVE OVERSIGHT
(Formerly Chapter 245-02 WAC)

WAC

WAC 246-25-010 Definitions. Unless the context requires otherwise, the definitions contained in this section apply throughout this chapter.

(1) "**Attorney general**" means the antitrust section of the office of the attorney general.

(2) "**Applicant**" means a certified health plan, health care facility, health care provider, or other person involved in the development, delivery, or marketing of health services or certified health plans.

(3) "**Parties**" means the natural persons, corporations, or associations involved in the plan or activity which is the subject of the proposal being reviewed.

(4) "**Petition**" means the document that shall be filed with the commission pursuant to RCW 43.72.310(3) by an applicant in order to request approval of conduct that could tend to lessen competition in the relevant market.

(5) "**Proposal**" means the plan or activity that is being reviewed.

(6) "**Request for informal opinion**" means the document that may be filed with the commission pursuant to RCW 43.72.310(1) by an applicant.

(7) "**Exclusive dealing clause**" means a clause in a contract between a certified health plan and a health care provider or facility by which the provider or facility agree not to provide services to another certified health plan.

(8) "**Health care network**" means a group of providers or facilities controlled by the providers, facilities or intermediary organizations including, but not limited to, physician-hospital organizations and independent practice associations.

(9) "**Most favored nations clause**" means terms in a contract between a certified health plan and a health care provider or facility by which the provider or facility agrees they will not charge other plans a lower price than the price charged the plan instituting the clause.

(10) "**Rural area**" means a geographical area outside the boundaries of Metropolitan Statistical Areas (MSAs) or an area within an MSA, but more than thirty minutes average travel time from an urban area of at least ten thousand population.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-010, filed 1/28/99, effective 1/28/99; 95-04-115, § 245-02-010, filed 2/1/95, effective 10/1/95.]

WAC 246-25-020 General policy statement—Antitrust immunity and competitive oversight. (1) The purpose of WAC 245-02-020 through 245-02-050 is to implement provisions of the act that require the commission to adopt rules governing antitrust immunity, competitive oversight, and conduct of certified health plans, health care providers, and health care facilities. The provisions of these rules shall be strictly construed. Whenever there is doubt as to the meaning of these rules or as to their applicability to particular conduct or circumstances, these rules shall be interpreted in a manner consistent with existing antitrust law principles of this state and of the federal government, including final orders of the Federal Trade Commission and final decisions

of the federal courts interpreting the various federal antitrust statutes.

(2) Unless explicitly permitted under this chapter or pursuant to a petition approved in accordance with the provisions of RCW 43.72.310 (3) and (4), nothing in these rules shall be deemed or interpreted to permit activities or to grant immunity for those activities prohibited under RCW 43.72.300(3) or any other activity which would constitute a per se violation of state or federal antitrust laws.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-020, filed 1/28/99, effective 1/28/99; 95-04-115, § 245-02-020, filed 2/1/95, effective 10/1/95.]

WAC 246-25-025 Scope and applicability. The provisions of WAC 245-02-010 through 245-02-050 shall govern contracts and conduct among health care providers, health care facilities, and certified health plans entered into or renewed on and after October 1, 1995.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-025, filed 1/28/99, effective 1/28/99; 95-04-115, § 245-02-025, filed 2/1/95, effective 10/1/95.]

WAC 246-25-030 Cooperative activities—Policy statement. The commission recognizes that reforms in the health system will occur through the development of comprehensive, integrated, and cost-effective health services delivery systems. Because the health services market place is evolving in anticipation of changes required by the act, it would not be appropriate to establish with precision specific areas where cooperative activities are entitled to immunity from antitrust laws. Pursuant to RCW 34.05.023, the commission therefore adopts as an interim policy statement the *Statements of Enforcement Policy and Analytical Principles Relating to Health Care and Antitrust*issued by the U.S. Department of Justice and the Federal Trade Commission on September 27, 1994. These nine policy statements address: (1) Mergers among hospitals; (2) hospital joint ventures involving high-technology or other expensive health care equipment; (3) hospital joint ventures involving specialized clinical or other expensive health care services; (4) providers' collective provision of nonfee-related information to purchasers of health care services; (5) providers' collective provision of fee-related information to purchasers of health care services; (6) provider participation in exchanges of price and cost information; (7) joint purchasing arrangements among health care providers; (8) physician network joint ventures; and (9) analytical principles relating to multiprovider networks.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-030, filed 1/28/99, effective 1/28/99; 95-04-115, § 245-02-030, filed 2/1/95, effective 10/1/95.]

WAC 246-25-035 Consumer access to local health services in rural areas. An applicant may petition the commission for approval of a managed health care finance and delivery system in a rural area that may violate existing antitrust law principles or provisions of WAC 245-02-040, 245-02-045 or 245-02-050 but is necessary to preserve local access to regular and ongoing health services in a rural area. In addition to the requirements set forth in WAC 245-02-110, et seq., such petitions shall include information demonstrating that the proposed system: (a) Has been developed through a community-based process that takes into consideration the concerns of local residents, health care providers, public and private health care facilities, local community organizations, and appropriate state agency health planning organizations located in or with responsibility for health services in rural areas, (b) will achieve quality improvements and cost efficiencies over present health service capabilities in the rural area, (c) will result in local access to regular and ongoing services required under the uniform benefits package, (d) will combine health care service delivery and financing, and (e) will or will not have special community governance arrangements. Nothing contained in this section shall be deemed to relieve an applicant from meeting the requirements imposed by law for registration and certification of certified health plans.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-035, filed 1/28/99, effective 1/28/99; 95-04-115, § 245-02-035, filed 2/1/95, effective 10/1/95.]

WAC 246-25-040 Collective negotiations—Policy statement—Permitted negotiations—Petitions. (1) The board finds that collective negotiation by competing health care providers of certain nonfee terms and conditions of contracts with health carriers may result in procompetitive effects in the absence of any express or implied threat of retaliatory collective action by health care providers. However, the board finds few or no procompetitive effects in permitting competing health care providers to collectively negotiate contract terms and conditions that include fees or prices for provider services. The potential anticompetitive harms arising from collective exchanges of fee or price information by competing providers and collective negotiation by competing providers of the fees to be paid providers by health carriers far outweigh any potential gains in simplifying provider and health carrier negotiations, any reduction in transaction costs, and any potential gains in cost-effective health care delivery systems. To the contrary, the board finds that collective negotiation of fees or other prices for services by competing health care providers creates the potential to thwart the cost containment goals of health care reform by enabling health care providers to resist health carrier and purchaser pressure to reduce or limit the increase in prices for health care services. Except as herein provided, nothing contained in this section shall authorize any person or entity to engage in activities that would constitute violations of state or federal antitrust laws.

(2) Competing health care providers within the service area of a health carrier may meet and communicate for the purposes of collectively negotiating the following terms and conditions of contracts with health carriers:

(a) Respective provider and health carrier liability for the treatment or lack of treatment of health carrier enrollees;

(b) Administrative procedures including methods and timing of provider payment for services;

(c) Dispute resolution procedures relating to disputes between health carriers and providers including disputes between providers and health carriers that originate from enrollees;

(d) Patient referral procedures;

(e) Formulation and application of reimbursement methodology, e.g., risk pools, capitation, and capitation between providers and hospitals, except as provided in section 3;

(f) Quality assurance programs;

(g) Health service utilization review procedures; and

(h) Carrier provider selection and termination criteria, or whether to engage in selective contracting.

Nothing herein shall be construed to allow a boycott.

(3) Competing health care providers shall not meet and communicate for the purposes of collectively negotiating the following terms and conditions of contracts with health carriers:

(a) The fees or prices for services, including those arrived at by applying any reimbursement methodology procedures;

(b) The conversion factor in a resource based relative value scale reimbursement methodology or similar methodologies;

(c) The amount of any discount on the price of services to be rendered by providers;

(d) The dollar amount of capitation or fixed payment for health services rendered by providers to health carrier enrollees; or

(e) The inclusion or alteration of terms and conditions to the extent they are the subject of government regulation prohibiting or requiring the particular term or condition in question; however, such restriction does not limit provider rights to collectively petition government for a change in such regulation.

(4) Competing health care providers' exercise of collective negotiation rights granted by this section shall conform to the following criteria:

(a) Providers shall communicate or negotiate with health carriers through a third party who is authorized by the providers;

(b) Each competing provider involved in the communication and negotiation with health carriers shall make an independent decision to accept or reject a specific offer from a health carrier;

(c) Health carriers communicating or negotiating with the providers' representative shall remain free to contract with or offer different contract terms and conditions to individual competing providers;

(d) The providers' representative shall not recommend to providers that providers accept or reject the health carrier offer; the representative may only deliver the offer to providers and communicate to providers an evaluation of the positive or negative aspects of the offer;

(e) The providers' representative shall not represent more than 30% of the market of practicing providers for the provision of services of a particular provider type or specialty in the service area or proposed service area of a health carrier with less than 5% of the market, as measured by 1) the number of covered lives as reported by the Insurance Commissioner, or 2) the actual number of consumers of prepaid comprehensive health services; and

(f) The providers' representative shall comply with the provisions of subsection (5) of this section.

(5) Any person or organization proposing to act or acting as a representative of providers for the purpose of exercising the authority granted under this section shall comply with the following requirements:

(a) Before engaging in any collective negotiation with health carriers on behalf of competing health care providers, the representative shall file with the board information identifying the representative, the representative's plan of operation, and the representative's procedures to ensure compliance with this section;

(b) Before engaging in any collective negotiations with health carriers on behalf of providers, the representative shall furnish for the board's approval, a brief report identifying the proposed subject matter of the negotiations or discussions with health carriers and the efficiencies expected to be achieved thereby.

Approval shall be withheld by the board if the proposed negotiations would exceed the authority granted under this section. The representative shall supplement the report to the board as new information becomes available that indicates that the subject matter of the negotiations with the health carrier has or will change;

(c) Within fourteen days of a health carrier decision declining negotiation, terminating negotiation, or failing to respond to a request for negotiation the representative shall report to the board the end of negotiations;

(d) Before reporting the results of negotiations with a health carrier and before giving providers an evaluation of any offer made by a health carrier, the representative shall furnish for the board's approval prior to dissemination to providers, a copy of all communications to be made to providers related to negotiations, discussions, and health carrier offers.

(6) With the advice of the attorney general, the board shall either approve or disapprove the activity as identified in the report within thirty days of filing. If disapproved, the board shall furnish a written explanation of any deficiencies along with a statement of specific remedial measures as to how such deficiencies could be corrected. A representative who fails to obtain the board's approval is deemed to act outside the authority granted under this section.

(7) Nothing contained in this section is intended to authorize competing providers to act in concert in response to a report issued by the providers' representative related to the representative's discussions or negotiations with health carriers. The representative of the providers shall advise providers of the provisions of this section and shall warn providers of the potential for legal action against providers who violate state or federal antitrust laws by exceeding the authority granted under this section.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-040, filed 1/28/99, effective 1/28/99; 96-11-133, § 245-02-040, filed 5/22/96, effective 6/22/96; 95-04-115, § 245-02-040, filed 2/1/95, effective 10/1/95.]

WAC 246-25-045 "Most favored nations clauses"—Policy statement. "Most favored nations clauses" may discourage discounting by the affected seller, may facilitate oligopolistic pricing and deter entry by more efficient competitors. "Most favored nations clauses" are often used as a replacement for innovation or efficiency by large competitors

and act as a disincentive for creativity by small competitors. The commission finds that the use of "most favored nations clauses" in contracts between a health care provider or facility and a certified health plan create the potential to thwart the cost containment goals of health care reform. For these reasons, the use of "most favored nations clauses" in contracts between a health care provider or facility and a certified health plan is prohibited.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-045, filed 1/28/99, effective 1/28/99; 95-04-115, § 245-02-045, filed 2/1/95, effective 10/1/95.]

WAC 246-25-050 Exclusive dealing clauses—Policy statement. (1) Exclusive dealing clauses in health care provider and facility contracts with certified health plans may enhance the quality of health services, achieve economic efficiencies, or improve the cost-effective use of health services and equipment. Exclusive dealing clauses may also reduce competition among certified health plans, providers, and facilities when the clauses prevent other competitors from entering the relevant market, thereby increasing the probability of the creation of a monopoly in that market.

(2) A contract between a certified health plan and a health care facility or provider may not contain an exclusive dealing clause if the plan holds more than forty percent of the relevant market.

(3) A contract between a certified health plan and a health care facility or provider may contain an exclusive dealing clause if the plan holds twenty percent or less of the relevant market.

(4) A contract between a certified health plan and a health care facility or provider may contain an exclusive dealing clause if the plan holds between twenty and forty percent of the relevant market and the commission has explicitly permitted its use. To obtain such approval, a plan must request an informal opinion as to use of the clause in the particular circumstances or seek approval by written petition pursuant to the procedures set forth in WAC 245-02-110, et seq.

(5) A contract between a health care network and a health care facility or provider may not contain an exclusive dealing clause if the health care network holds more than forty percent of the relevant market.

(6) A contract between a health care network and a health care facility or provider may contain an exclusive dealing clause if the health care network holds twenty percent or less of the relevant market.

(7) A contract between a health care network and a health care facility or provider may contain an exclusive dealing clause if the network holds between twenty and forty percent of the relevant market and the commission has explicitly permitted its use. To obtain such approval, a network must request an informal opinion as to use of the clause in the particular circumstances or seek approval by written petition pursuant to the procedures set forth in WAC 245-02-110, et seq.

(8) The provisions of this section do not apply to contracts between a staff or group model health maintenance organization and its health care facilities or providers.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-050, filed 1/28/99, effective 1/28/99; 95-04-115, § 245-02-050, filed 2/1/95, effective 10/1/95.]

WAC 246-25-100 Purpose. The purpose of WAC 245-02-110 through 245-02-175 is to implement RCW 43.72.310 by setting forth the form and procedure for: (1) Requests for informal opinions from the attorney general as to whether particular conduct is authorized by the act, and (2) written petitions to the commission requesting approval of conduct that could tend to lessen competition in a relevant market.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-100, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-100, filed 2/1/95, effective 3/4/95.]

WAC 246-25-110 Form of petition and request for informal opinion. A petition, request for informal opinion, or request for adjudicatory proceeding shall adhere generally to the following form:

(1) At the top of the page shall appear the wording "before the Washington Health Services Commission." On the left side of the page, below the foregoing, the following caption shall be set out "In the Matter of (name of applicant)." Opposite the foregoing caption shall appear the words "petition," or "request for informal opinion," or, "request for adjudicatory proceeding," whichever is applicable.

(2) The materials required by WAC 245-02-115 through 245-02-125 shall be attached to the foregoing.

(3) The petition or request shall be signed and dated by the entity named in the first paragraph, or by its attorney. The original and five copies shall be filed with the commission as described in WAC 245-02-130.

(4) Information required by this chapter may be submitted in hard copy or in machine readable form:

(a) If hard copy, documents shall be submitted and organized by request;

(b) If in machine readable form, the data should comply with specifications acceptable to the commission and attorney general, which will be provided upon request.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-110, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-110, filed 2/1/95, effective 3/4/95.]

WAC 246-25-115 Contents of requests for informal opinions and written petitions. The following information shall accompany any written petition or request for informal opinion submitted to the commission:

(1) **Identification of parties.** Identify all parties to the proposal, and their parent entities, and for each one state:

(a) The name(s) under which it is doing business, or proposes to do business, in Washington;

(b) Its business address(es);

(c) Its type of business organization (for example, corporation, sole proprietorship, partnership, or association);

(d) A brief description of the nature or type of business conducted at each of its business locations within the state of Washington; and

(e) The person to whom questions regarding the request or petition should be directed.

(2) **Nature and description of proposal.** State or describe:

(a) The nature and type of transaction (for example, joint venture, acquisition, or merger)

(b) The business(es) involved or affected;

(c) The products and services involved or affected;

(d) The scheduled timeline, including expected dates of any major events required to consummate the proposed activity;

(e) The geographic area(s) in which business will be conducted;

(f) Whether the same products or services as those listed in (c), above, are currently offered within thirty miles of the geographic area(s) identified in (e), above, and if so, by whom; and

(g) The extent to which the participants share substantial risk including, but not limited to: (1) The extent to which the venture agrees to provide services on a capitated basis, or (2) the extent to which the venture creates significant financial incentives for its participants as a group to achieve specified cost containment goals, such as withholding a substantial amount of compensation due to participants, with distribution of that amount to participants only if the cost containment goals are met.

(h) A general description of any anticipated impact of the proposal on competition, including but not limited to the description of the business(es) involved or affected, the effect upon the parties in their competition with each other, the changes in market share among certified plans, health care providers or health care facilities in the geographic product or service area, the presence and entry of new market participants sufficient to deter or counteract the anti-competitive effects of the proposed activity, and availability of arrangements less restrictive to competition that would achieve the same or similar benefits to the community in health care delivery.

(i) The exclusive or nonexclusive nature of the proposal including, but not limited to (1) the extent to which viable competing networks or plans with adequate provider participation currently exist in the market, (2) the extent to which providers in the proposed network actually participate in other networks or contract individually with health benefit plans, or other evidence of their willingness and incentives to do so, (3) the extent to which providers in the proposed network will earn substantial revenue outside the network, (4) the absence of any indication of significant departicipation from other networks in the market as a result of the proposed venture, and (5) the absence of any indications of coordination among the providers in the network regarding price or other competitively significant terms of participation in other networks or plans.

(3) **Simultaneous review.** Identify any other state or federal agency reviewing the proposal and state the date on which each review was requested.

(4) Identify the name and address of all employee organizations representing the applicant's employees.

(5) **Description of how conduct will meet the goals of health care reform.** Describe in narrative form how the proposal will:

(a) Enhance the quality, access and cost of health services to consumers;

(b) Gain cost efficiency in the provision of health services;

(c) Improve utilization of health services, facilities and equipment;

(d) Avoid duplication of health services resources;

(e) Facilitate the exchange of information relating to performance expectations;

(f) Develop comprehensive, integrated, and cost-effective health services delivery in the geographic, product or service area;

(g) Reduce competition among certified health plans, health care providers, or health care facilities;

(h) Have an impact on the quality, availability, or price of health services to consumers;

(i) Reduce the number of people employed or otherwise impact how employees deliver health care services; and

(j) Change or otherwise have an impact on employee to patient ratios and how this will affect the quality of health services available to consumers.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-115, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-115, filed 2/1/95, effective 3/4/95.]

WAC 246-25-120 Continuing oversight and reporting requirements. Written petitions and requests for informal opinions must include, in narrative form, a description of the nature of the continued supervision and oversight the parties' believe would be necessary and appropriate to ensure the proposal continues to be consistent with the petition or request and that its benefits continue to outweigh its disadvantages. The description shall include a recommendation for the form of annual or more frequent progress reports appropriate to the transaction and sufficient to allow the commission and attorney general to evaluate the continuing conduct.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-120, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-120, filed 2/1/95, effective 3/4/95.]

WAC 246-25-125 Additional information. An applicant shall submit additional relevant information it believes is sufficient to support its petition or request for an informal opinion. The commission or attorney general may require the submission of additional information as may be required to complete the analysis necessary to form an opinion or respond to a written petition. Depending on the size, scope and nature of the proposed transaction, the material may include some or all of the following:

(1) Contracts, agreements, correspondence, corporate minutes, memoranda, or other documents describing the proposal;

(2) Financial statements for the parties to the proposal for the most recent fiscal year;

(3) Documents filed with any other state or federal agency with respect to the proposal;

(4) Plans, studies, or reports prepared in anticipation of the proposal;

(5) The parties' and their parent organizations' articles of incorporation, bylaws, and documents sufficient to identify

the names of the parties' board of directors, owners, and officers; and

(6) Advertisements, brochures, or other publications used for marketing the parties' products or services within the state of Washington during the last fiscal year.

If the proposal includes collaboration between parties, including but not limited to mergers or joint ventures, the commission or the attorney general may request some or all of the following additional information depending on the size, scope, and nature of the proposed transaction:

(1) Each participant's contribution of capital, equipment, or other value to the transaction;

(2) Each participant's ownership interest and its expected consideration or return from the proposal;

(3) Each participant's nonmonetary involvement in the arrangement;

(4) The market share of each participant in the proposed collaborative effort, for each of the products sold by that participant, identifying the relevant geographic market; and

(5) A statement describing whether arrangements less restrictive to competition would achieve the same or similar benefits as those described in response to section (4) above.

If the proposal is for the merger of acute care inpatient hospitals, the commission or the attorney general may request some or all of the following additional information for the three years prior to the proposed merger, depending on the size, scope, or nature of the proposed merger:

(1) Data reported to the Comprehensive Hospital Abstract Reporting System (CHARS), in computerized form if possible;

(2) Copies of the parties' responses to the American Hospital Association's Annual Hospital Survey;

(3) The identities of the ten largest purchasers of hospital services for each hospital; and

(4) The average number of licensed, staffed, and occupied beds for each year.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-125, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-125, filed 2/1/95, effective 3/4/95.]

WAC 246-25-130 Submission of information. (1) The applicant requesting an informal opinion or submitting a written petition shall direct the request or written petition to the Chair of the Commission at the Washington Health Services Commission, P.O. Box 41185, Olympia, Washington 98504-1185. Upon receipt of an informal opinion request or written petition, the commission will send a copy of the request or written petition to the Office of the Attorney General, Antitrust Section, 900 Fourth Avenue, Suite 2000, Seattle, Washington 98164-1012.

(2) The applicant shall also send a copy of the petition and request for informal opinion to any organization representing employees of the applicant.

(3) Each petition and request for informal opinion shall contain a certificate from each person submitting information stating that the information submitted is true and accurate to the best of that person's knowledge.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-130, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-130, filed 2/1/95, effective 3/4/95.]

WAC 246-25-131 Public notice and comment. (1) The commission may solicit comments from the public on the petition, request for informal opinion or request for adjudicatory proceeding by causing notice to be published in the state register of the subject matter of a petition, request for informal opinion or request for adjudicatory proceeding, and indicating how, when and where persons may comment.

(2) No later than three days after its publication in the state register, the commission shall cause a copy of the notice of a petition, request for informal opinion or request for adjudicatory proceeding to be mailed to each person who has made a request to the agency for a mailed copy of such notice. The commission will charge for the actual cost of providing individual mailed copies of these notices.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-131, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-131, filed 2/1/95, effective 3/4/95.]

WAC 246-25-135 Commission to provide copy of informal opinion to applicant. (1) Within five days of receipt of an attorney general's informal opinion requested by the commission under RCW 43.72.310(1), the commission shall mail a copy of the informal opinion to the requesting applicant. The applicant shall provide a copy of the informal opinion to the employee organizations representing the applicant's employees.

(2) No later than three days after its mailing of a copy of the informal opinion to the requesting party, the commission shall cause a copy of the attorney general's informal opinion to be mailed to each person who has made a request to the agency for a mailed copy. The commission may charge for the actual cost of providing individual mailed copies of these informal opinions.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-135, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-135, filed 2/1/95, effective 3/4/95.]

WAC 246-25-140 Attorney general to provide informal opinion and advice on petitions to the commission. As required by RCW 43.72.310(1), the attorney general will respond to a request for an informal opinion, or for advice regarding a written petition. The attorney general shall have discretion over the scope of the informal opinion or advice provided.

(1) An informal opinion rendered by the attorney general pursuant to RCW 43.72.310(1) will include the following:

(a) A statement of the facts relied upon in the opinion;

(b) A statement of the issues presented by the applicant;

(c) The attorney general's analysis; and

(d) The attorney general's conclusion as to whether the proposed conduct is authorized by chapter 43.72 RCW.

(2) If the attorney general concludes that the proposed conduct is authorized, the informal opinion will include the following, taking into account the size, scope, and nature of the proposed conduct:

(a) A general description of the nature of the continued supervision and oversight the attorney general believes is necessary and appropriate to ensure the proposal continues to be authorized by chapter 43.72 RCW and that its benefits continue to outweigh its disadvantages;

(b) A general description of the form of annual, or more frequent, progress reports the attorney general believes is appropriate to the transaction and sufficient to allow the commission and the attorney general to evaluate the continuing conduct; and

(c) An indication of the types of data the attorney general believes are necessary to evaluate continuing conduct.

(3) The informal opinion, and any written advice provided to the commission regarding a written petition, should include an explanation of when and under what conditions the attorney general would commit not to file an antitrust enforcement action if the informal opinion concludes that the proposed conduct is authorized, or if the commission approves the petition.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-140, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-140, filed 2/1/95, effective 3/4/95.]

WAC 246-25-145 Applicant may request an adjudicative proceeding or file a petition. An applicant may request an adjudicative proceeding in the following circumstances:

(1) Where the applicant has received an informal opinion pursuant to RCW 43.72.310 and within thirty days of the applicant's receipt of the opinion, the applicant requests an adjudicatory proceeding to determine whether the proposed conduct should be authorized pursuant to RCW 43.72.310 (2)(a) because it is likely to achieve the policy goals of chapter 43.72 RCW and a more competitive alternative is impractical;

(2) If the attorney general concludes in its informal opinion that the conduct proposed is not authorized by chapter 43.72 RCW, the requesting applicant shall have thirty days from the date of receipt of the informal opinion from the commission to file a written petition with the commission requesting approval of conduct that could tend to lessen competition in the relevant market pursuant to RCW 43.72.310(3). The petition shall constitute an application for an adjudicatory proceeding under RCW 34.05.413; or

(3) Pursuant to RCW 43.72.310(3) an applicant may file a written petition with the commission requesting approval of conduct that could tend to lessen competition in the relevant market regardless of whether it has previously sought an informal opinion. The petition shall constitute an application for an adjudicatory proceeding under RCW 34.05.413.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-145, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-145, filed 2/1/95, effective 3/4/95.]

WAC 246-25-150 Decision not to conduct an adjudication. If the commission decides not to conduct an adjudicative proceeding in response to an application, the commission shall furnish the applicant a copy of its decision in writing, with a brief statement of the commission's reasons and of any administrative review available to the applicant.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-150, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-150, filed 2/1/95, effective 3/4/95.]

WAC 246-25-155 Adjudicative proceeding—Rules of procedure. An application for an adjudicative proceeding shall be accompanied by all of the information required for requests for informal opinions and written petitions, as described in WAC 245-02-115 to 245-02-125. The applicant may incorporate by reference any materials previously provided to the commission or attorney general. Except as set forth in WAC 245-02-160 through 245-02-175, the commission adopts for its use the Model Rules of Procedure set forth in chapter 10-08 WAC.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-155, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-155, filed 2/1/95, effective 3/4/95.]

WAC 246-25-160 Adjudicative proceedings—Notice of hearing. (1) Within thirty days of receipt of an application for adjudicative proceeding or petition, the commission shall notify the applicant of any obvious errors or omissions, request any additional information it requires and is permitted by law to require regarding the application for adjudicative proceeding or petition, and notify the applicant of the name, mailing address, and telephone number that may be contacted regarding the application.

(2) Within sixty days after receipt of the application, the commission shall commence an adjudicative proceeding by serving notice of hearing on the applicant and all other persons required by RCW 34.05.434; 34.05.417 (1)(b), or decide not to conduct an adjudicative proceeding and furnish the applicant with a copy of its decision in writing, with a brief statement of its reasons for doing so and of any administrative review available.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-160, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-160, filed 2/1/95, effective 3/4/95.]

WAC 246-25-165 Presiding officer. The determination of the presiding officer for an adjudicative proceeding before the commission shall be governed by RCW 34.05.425.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-165, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-165, filed 2/1/95, effective 3/4/95.]

WAC 246-25-170 Commission to retain jurisdiction. A grant or denial of authority to engage in proposed conduct shall be deemed a final order of the commission. Where authorization is granted, the commission shall retain jurisdiction over the applicant for purposes of continuing oversight and supervision as required by RCW 43.72.310(6).

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-170, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-170, filed 2/1/95, effective 3/4/95.]

WAC 246-25-175 Adjudicative proceedings—Reconsideration. A petition for reconsideration of a final order under RCW 34.05.470 shall be filed with the commission.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-175, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-175, filed 2/1/95, effective 3/4/95.]

WAC 246-25-180 Notice of modification or withdrawal of authorization. If at anytime during its ongoing supervision of authorized conduct pursuant to RCW 43.72.310(6), the commission determines that reason exists to revoke or modify its authorization, the commission shall immediately notify the applicant in writing. An applicant may request an adjudicative proceeding within thirty days of receipt of the notice. If no adjudicative hearing is requested by the applicant within thirty days of receipt of the notice, the commission shall immediately revoke or modify its authorization.

[Statutory Authority: RCW 43.72.310. 99-04-049, recodified as § 246-25-180, filed 1/28/99, effective 1/28/99; 95-04-112, § 245-02-180, filed 2/1/95, effective 3/4/95.]

Chapter 246-100 WAC
COMMUNICABLE AND CERTAIN OTHER DISEASES

WAC

WAC 246-100-016 Confidentiality. Identifying information about any individual with a reportable disease or condition pursuant to chapter 246-100 WAC shall be protected by persons with knowledge of such identity.

(1) Health care providers, employees of a health care facility or medical laboratory, and other individuals with knowledge of a person with sexually transmitted disease, following the basic principles of health care providers, which respect the human dignity and confidentiality of patients:

(a) May disclose identity of a person or release identifying information only as specified in RCW 70.24.105; and

(b) Shall establish and implement policies and procedures to maintain confidentiality related to a patient's medical information.

(2) For the purpose of RCW 70.24.105(6), customary methods for exchange of medical information shall be limited as follows:

(a) Health care providers may exchange confidential medical information related to HIV testing, HIV test results, and confirmed HIV or confirmed STD diagnosis and treatment in order to provide health care services to the patient. Meaning:

(i) The information shared impacts the care or treatment decisions concerning the patient; and

(ii) The health care provider requires the information for the patient's benefit.

(b) "Health care services to the patient" means personal interaction, treatment, consultation, or intervention for patient care.

(c) Health care facility administrators are authorized to permit access to medical information as necessary to fulfill professional duties. Health care facility administrators shall advise those persons permitted access under this section of the requirement to maintain confidentiality of such information as defined under this section and chapter 70.24 RCW. Professional duties means the following or functionally similar activities:

(i) Medical record or chart audits;

(ii) Peer reviews;

(iii) Quality assurance;

(iv) Utilization review purposes;

(v) Research as authorized under chapters 42.48 and 70.02 RCW;

(vi) Risk management; and

(vii) Reviews required under federal or state law or rules.

(d) Health care facility administrators and health care providers responsible for office management are authorized to permit access to a patient's medical information and medical record by health care facility and medical staff or office staff to carry out duties required for care and treatment of a patient and the management of medical information and the patient's medical record.

(e) Health care facility administrators are authorized to permit exchange of medical information for training and teaching of health care providers and students when exchange of confidential medical information is necessary for such training and specifically related to the care of the patient.

(3) Health care providers, employees of a health care facility or medical laboratory, and other individuals with knowledge of a person with a reportable disease or condition, other than those specified in subsections (1) and (2) of this section, shall release identifying information only to other individuals responsible for protecting the health and well being of the public through control of communicable and certain other diseases.

(4) Local and state health department personnel shall maintain individual case reports as confidential records consistent with WAC 246-100-091.

(5) Local and state health department personnel shall not disclose identifying information received as a result of WAC 246-100-076 (1)(c)(i) and (xiv) or WAC 246-100-236 (1)(a)(xviii) and (xix) unless:

(a) Explicitly and specifically required to do so by state or federal law; or

(b) Authorized by written patient consent.

(6) Local and state health department personnel are authorized to use HIV identifying information obtained as a result of WAC 246-100-076 (1)(c)(i) and (xiv) and WAC 246-100-236 (1)(a)(xviii) and (xix) only for the following purposes:

(a) Notification of persons with substantial exposure, including sexual or syringe-sharing partners;

(b) Referral of the infected individual to social and health services; and

(c) Linkage to other public health data bases, provided that the identity or identifying information on the HIV-infected person is not disclosed outside of the health department.

(7) Public health data bases do not include health professions licensing records, certifications or registries, teacher certification lists, other employment rolls or registries, or data bases maintained by law enforcement officials.

(8) State and local health officers shall require and maintain signed confidentiality agreements with all health department employees with access to HIV identifying information. Such agreements will be renewed at least annually and include reference to criminal and civil penalties for violation of chapter 70.24 RCW and other administrative actions that may be taken by the agency.

(9) State and local health officers shall investigate potential breaches of the confidentiality of HIV identifying information by health department employees. All breaches of confidentiality shall be reported to the state health officer or their authorized representative for review and appropriate action.

(10) The Washington state public health laboratory, other laboratories approved as public health referral laboratories, and any persons, institutions, or facilities submitting specimens or records containing patient-identifying information shall maintain the identifying information accompanying submitted laboratory specimens as confidential records.

(11) Statistical summaries and epidemiologic studies based on individual case reports may be public information provided no individual is identified or identifiable.

[Statutory Authority: RCW 70.24.125 and 70.24.130. 99-17-077, § 246-100-016, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-016, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-016, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.105. 90-07-033 (Order 043), § 248-100-016, filed 3/14/90, effective 4/14/90. Statutory Authority: Chapter 70.24 RCW. 88-21-093 (Order 322), § 248-100-016, filed 10/19/88; 88-17-057 (Order 317), § 248-100-016, filed 8/17/88. Statutory Authority: RCW 43.20.050. 87-11-047 (Order 302), § 248-100-016, filed 5/19/87.]

WAC 246-100-036 Responsibilities and duties—Local health officers. (1) The local health officer shall review and determine appropriate action for:

(a) Each reported case or suspected case of a reportable disease or condition;

(b) Any disease or condition considered a threat to public health;

(c) Each reported outbreak or suspected outbreak of disease, requesting assistance from the department in carrying out investigations when necessary; and

(d) Instituting disease prevention and infection control, isolation, detention, and quarantine measures necessary to prevent the spread of communicable disease, invoking the power of the courts to enforce these measures when necessary.

(2) Local health officers shall:

(a) Submit reports to the state health officer as required in chapter 246-100 WAC;

(b) Establish a system at the local health department for maintaining confidentiality of written records and written and telephoned disease case reports consistent with WAC 246-100-016;

(c) Notify health care providers within the health district regarding requirements in this chapter;

(d) Distribute appropriate report forms to persons responsible for reporting;

(e) Notify the principal health care provider:

(i) If possible, prior to initiating a case investigation by the local health department; and

(ii) For HIV infection, not contact the HIV-infected person directly without considering the recommendations of the principal health care provider on the necessity and best means for conducting the case investigation, unless:

(A) The principal health care provider cannot be identified; or

(B) Reasonable efforts to reach the principal health care provider over a two-week period of time have failed;

(f) Ensure anonymous HIV testing is reasonably available;

(g) Make HIV testing, AIDS counseling, and pretest and post-test counseling, as defined in this chapter, available for voluntary, mandatory, and anonymous testing and counseling as required by RCW 70.24.400;

(h) Make information on anonymous HIV testing, AIDS counseling, and pretest and post-test counseling, as described under WAC 246-100-208 and 246-100-209, available;

(i) Use identifying information on HIV-infected individuals provided according to WAC 246-100-076 and 246-100-236 only:

(i) For purposes of contacting the HIV-positive individual to provide test results and post-test counseling; or

(ii) To contact persons who have experienced substantial exposure, including sex and injection equipment-sharing partners, and spouses; or

(iii) To link with other name-based public health disease registries when doing so will improve ability to provide needed care services and counseling and disease prevention; and

(j) Destroy case report identifying information on asymptomatic HIV-infected individuals received as a result of WAC 246-100-076 within three months of receiving a complete case report;

(k) Destroy documentation of referral information established in WAC 246-100-072 and this subsection containing identities and identifying information on HIV-infected individuals and at-risk partners of those individuals immediately after notifying partners or within three months, whichever occurs first.

(3) Each local health officer has the authority to:

(a) Carry out additional steps determined to be necessary to verify a diagnosis reported by a health care provider;

(b) Require any person suspected of having a reportable disease or condition to submit to examinations required to determine the presence of the disease or condition; and

(c) Investigate any case or suspected case of a reportable disease or condition or other illness, communicable or otherwise, if deemed necessary.

(4) Local health officers shall conduct investigations and institute control measures consistent with those indicated in the sixteenth edition 1995 of *Control of Communicable Dis-*

eases Manual, edited by Abram S. Benenson, published by the American public health association, except:

(a) When superseded by more up-to-date measures, or

(b) When other measures are more specifically related to Washington state.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-036, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 70.24.022, [70.24].340 and Public Law 104-146. 97-15-099, § 246-100-036, filed 7/21/97, effective 7/21/97. Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-036, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-036, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-02-008 (Order 324), § 248-100-036, filed 12/27/88. Statutory Authority: RCW 43.20.050. 88-07-063 (Order 308), § 248-100-036, filed 3/16/88.]

WAC 246-100-041 Responsibilities and duties—State health officer. (1) The state health officer shall have authority to:

(a) Require reporting of cases and suspected cases of disease and conditions in addition to those required in WAC 246-100-076 for a period of time less than thirty-six months when:

(i) The disease or condition is newly recognized or recently acknowledged as a public health concern, and

(ii) Epidemiologic investigation based on reports of cases may contribute to understanding of the disease or condition, and

(iii) Written notification is provided to all local health officers regarding:

(A) Additional reporting requirements, and

(B) Rationale or justification for specifying the disease or condition as reportable.

(b) Require laboratories to submit specimens indicative of infections in addition to those required in WAC 246-100-231 for a period of time less than thirty-six months, provided:

(i) The infection is of public health concern, and

(ii) Written notification is provided to all local health officers and all directors of medical laboratories registered as described in WAC 246-100-221 explaining:

(A) Actions required, and

(B) Reason for the addition.

(2) The state health officer's authorization to require reporting of cases or submission of laboratory specimens, other than those specified in WAC 246-100-076 and 246-100-231, shall expire thirty-six months from the date of written notification of local health officers and laboratory directors unless amended rules are adopted by the state board of health.

(3) The state health officer shall distribute periodic epidemiologic summary reports and an annual review of public health issues to local health officers and local health departments.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-041, filed 8/13/99, effective 9/1/99. Statutory Authority: Chapter 70.24 RCW. 93-08-036 (Order 354B), § 246-100-041, filed 4/1/93, effective 5/2/93. Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-041, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-041, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-041, filed 5/19/87.]

WAC 246-100-042 Reporting of blood lead levels. (1) The state health officer finds as follows:

(a) Adverse health effects resulting from elevated levels of lead in the blood has been acknowledged as a public health concern throughout the United States;

(b) Epidemiologic investigation based on reports of the results of blood level tests may contribute to the understanding of the condition, its prevalence within the state of Washington, and especially the extent to which the condition affects both children and those who may be exposed to lead in the work place;

(c) Rapid follow-up and appropriate management of potentially hazardous blood lead levels is necessary to assure safe public health, and assists in development of programs to prevent future lead over-exposure.

(2) **Definitions.** For the purposes of this section, the following words and phrases have the following meanings:

(a) "Blood lead level" means a measurement of lead content in whole blood.

(b) "Reporting organization" means any medical laboratory which performs blood lead analysis at a site within the state of Washington; or any individual or organization which sends blood specimens to an out-of-state medical laboratory for lead testing, including in-state organizations which receive blood specimens from other in-state individuals or organizations, and then send those specimens to an out-of-state testing laboratory.

(c) "Testing laboratory" means a medical laboratory which performs a blood lead analysis.

(3) **Reporting of blood lead levels.**

(a) A reporting organization shall report all blood lead levels to the department of health, including those which are within normal limits. The department of health shall send a copy of any report with a blood lead level equal to or greater than 40 micrograms per deciliter in adults, or equal to or greater than 10 micrograms per deciliter in children less than 15 years of age, to the local health department serving the jurisdiction in which the tested person resides.

(b) An individual or organization which sends blood specimens to an out-of-state laboratory may fulfill its reporting obligation by arranging for the testing laboratory to submit adequate reports.

(c) Reports shall be made in a format approved by the department.

(d) For blood lead levels equal to or greater than 40 micrograms per deciliter for adults, or equal to or greater than 20 micrograms per deciliter in children less than 15 years of age, the department must be notified by telephone, fax or mail within seven calendar days of the date test was performed, or if the test was performed by an out-of-state laboratory the date when the test result was received. Telephone reports must be supplemented by a written report submitted no later than the fifth business day of the next month after the telephone contact. In event age of patient is not known, the reporting organization shall follow the reporting schedule for children less than 15 years of age.

(e) For blood lead levels equal to or greater than 20 micrograms per deciliter in adults, or equal to or greater than 10 micrograms per deciliter in children less than 15 years of age, a report shall be made to the department no later than the

fifth business day of the next month after the month in which the test was performed, or if the test was performed by an out-of-state laboratory the month during which the test result was received. In the event age of patient is not known, the reporting organization shall follow the reporting schedule for children less than 15 years of age.

(f) Information to be reported to the department for blood lead levels specified in parts (3)(d) and (3)(e) shall include the following:

(i) Name of the person tested;

(ii) Name of the reporting organization;

(iii) Name of the testing laboratory;

(iv) Date specimen received;

(v) Blood lead level of person tested;

(vi) Name of health care provider ordering test;

(vii) Address or telephone number of health care provider ordering test, if available;

(viii) Date of birth or the age of the person tested, if available;

(ix) Sex of person tested, if available;

(x) Race and ethnicity of person tested, if available;

(xi) Whether blood specimen is venous or capillary, if available;

(xii) Free erythrocyte or zinc protoporphyrin or zinc protoporphyrin/heme ratio, if performed, when available;

(xiii) Address and occupation of the person tested, or if a child the parents' occupation, if available;

(xiv) Name, address and telephone number of the employer, or if a child the parents' employer, if available;

(g) For all other blood lead levels, the reporting organization must either report the information specified in (3)(f) or submit a monthly summary report by the fifth day of the next month. The monthly summary must be categorized by the number of tests performed on specimens for children less than 15 years of age, the number of tests performed for individuals 15 years of age or older and the number of tests performed where patient's age is unknown. In each category the number of tests must be sorted by one of the following geographic indicators: patient county of residence, or patient postal zip code of residence, or provider county of practice, or provider postal zip code of practice.

(4) **Responsibilities of health care providers.** Upon request of a representative of the department of health or the department of labor and industries, a health care provider who has ordered a blood lead test shall provide the patient's address and telephone number to the department of health or the department of labor and industries, and when known the following information:

(a) Circumstances of lead exposure;

(b) Employer's name, address and telephone number, or, if a child, the same information on the employers of the parents;

(c) Occupation of person tested, or, if a child, occupation of parents;

(d) Type of industry of employer of person tested, or, if a child, type of industry of the employers of the parents;

(e) Reason for drawing lead level.

(5) **Confidentiality.**

(a) The medical laboratory report and all patient information provided by the health care provider shall be maintained in a confidential manner as with other disease reports and are not subject to public disclosure in any form under which the patient may be identified.

(b) The department of labor and industries shall have full access to information collected pursuant to this section, for the purposes of research, analysis, and follow-up of blood lead levels.

[Statutory Authority: RCW 43.20.050. 99-11-037, § 246-100-042, filed 5/13/99, effective 5/14/99; 96-11-077, § 246-100-042, filed 5/13/96, effective 6/13/96. Statutory Authority: RCW 43.20.050(3). 93-10-038 (Order 358), § 246-100-042, filed 4/28/93, effective 5/29/93.]

WAC 246-100-043 Surveillance report to the board—State health officer. Within twelve months of the effective date of the HIV infection reporting system established in WAC 246-100-076, the state health officer, in cooperation with local health officers, will report to the board on:

(1) The ability of the reporting system to meet surveillance performance standards established by the federal Centers for Disease Control and Prevention;

(2) The cost of the reporting system for state and local health departments;

(3) The reporting system's effect on disease control activities; and

(4) The impact of HIV reporting on HIV testing among persons at increased risk of HIV infection.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-043, filed 8/13/99, effective 9/1/99.]

WAC 246-100-072 Rules for notification of partners at risk of HIV infection. (1) A health care provider may consult with the local health officer or an authorized representative about an HIV-infected individual.

(2) Only under the specific circumstances listed below, a principal health care provider shall report the identity of sex or injection equipment-sharing partners, including spouses, of an HIV-infected individual to the local health officer or an authorized representative:

(a) After being informed of the necessity to notify sex and injection-equipment sharing partners, including spouses, and confirm notification to the health care provider, the HIV-infected individual either refuses or is unable to notify partners that partners:

(i) May have been exposed to and infected with HIV; and

(ii) Should seek HIV-pretest counseling and consider HIV testing; and

(b) The HIV-infected individual neither accepts assistance nor agrees to referral to the local health officer or an authorized representative for assistance in notifying partners.

(3) Only in the specific circumstances listed below, shall a principal health care provider notify the local health officer or an authorized representative to directly contact the HIV-infected person for the purpose of partner notification:

(a) The HIV-infected person agrees to meet with the local health officer or authorized representative; or

(b) The principal health care provider provided pretest counseling as described in WAC 246-100-209(1) before the individual was tested; and

(c) The principal health care provider made efforts, but was unable to meet face-to-face with the individual to notify the individual of the HIV-test result and to provide post-test counseling as required in WAC 246-100-209 in order to assure partner notification.

(4) A health care provider shall not disclose the identity of an HIV-infected individual or the identity of sex and injection equipment-sharing partners, including spouses, at risk of HIV infection, except as authorized in RCW 70.24.105, WAC 246-100-072, or 246-100-076.

(5) Local health officers and authorized representatives shall:

(a) Confirm conditions in subsections (2) and (3) of this section were met prior to initiating partner notification or receiving referral of identity of an HIV-infected individual; and

(b) Use identifying information, provided according to this section, on HIV-infected individuals only for contacting the HIV-infected individual to provide post-test counseling or to contact sex and injection equipment-sharing partners, including spouses; and

(c) Destroy documentation of referral information established under this subsection, containing identities and identifying information on the HIV-infected individual and at-risk partners of that individual, immediately after notifying partners or within three months of the date information was received, whichever occurs first.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-072, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 70.24.022, [70.24].340 and Public Law 104-146. 97-15-099, § 246-100-072, filed 7/21/97, effective 7/21/97. Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-072, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-072, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-02-008 (Order 324), § 248-100-072, filed 12/27/88.]

WAC 246-100-076 Reportable diseases and conditions. (1) The following diseases and conditions shall be reported as individual case reports by health care providers and others with a duty to report to the local health department in accordance with requirements and procedures described throughout chapter 246-100 WAC:

(a) Category A diseases require an immediate report at the time a case is suspected or diagnosed and include:

(i) Anthrax,

(ii) Botulism (including food-borne, infant, and wound),

(iii) Cholera,

(iv) Diphtheria, noncutaneous,

(v) Measles (rubeola),

(vi) Paralytic shellfish poisoning,

(vii) Plague,

(viii) Poliomyelitis, and

(ix) Rabies.

(b) Category B diseases or conditions require a case report within one day of diagnosis and include:

(i) Brucellosis,

(ii) Gastroenteritis of suspected food-borne or waterborne origin,

(iii) Hemophilus influenzae invasive disease (excluding otitis media) in children age five years and under,

(iv) Hepatitis A and B, acute,

(v) Leptospirosis,

(vi) Listeriosis,

(vii) Meningococcal disease,

(viii) Paratyphoid fever (see salmonellosis),

(ix) Pertussis,

(x) Rubella, including congenital,

(xi) Salmonellosis, including paratyphoid fever and typhoid fever,

(xii) Shigellosis,

(xiii) Syphilis—primary, secondary, or congenital (for other, see Category C),

(xiv) Tuberculosis (suspected or diagnosed),

(xv) Typhoid fever, including carrier (see salmonellosis),

(xvi) Unusual communicable disease (see definition WAC 246-100-011).

(c) Category C diseases or conditions require a case report within seven days of diagnosis and include:

(i) Acquired immunodeficiency syndrome (AIDS) and symptomatic human immunodeficiency virus (HIV) disease for adults and adolescents (as classified by the Centers for Disease Control, U.S. Public Health Service, Morbidity and Mortality Weekly Report (MMWR), December 19, 1992, Volume 41, Number RR-17), and for pediatric HIV cases (as classified by the Centers for Disease Control, U.S. Public Health Service, MMWR, April 24, 1987, Volume 36, Number 15),

(ii) Amebiasis,

(iii) Campylobacteriosis,

(iv) Chancroid,

(v) Chlamydia trachomatis infection,

(vi) Ecoli 0157:H7 infection,

(vii) Encephalitis, viral,

(viii) Giardiasis,

(ix) Gonorrhea,

(x) Granuloma inguinale,

(xi) Herpes simplex, initial genital infection,

(xii) Herpes simplex, neonatal,

(xiii) Hepatitis non-A, non-B, and unspecified,

(xiv) Human immunodeficiency virus (HIV) infection,

(xv) Kawasaki syndrome,

(xvi) Legionellosis,

(xvii) Leprosy (Hansen's disease),

(xviii) Lyme disease,

(xix) Lymphogranuloma venereum,

(xx) Malaria,

(xxi) Mycobacteriosis,

(xxii) Mumps,

(xxiii) Nongonococcal urethritis,

(xxiv) Pelvic inflammatory disease, acute,

(xxv) Pseudomonas folliculitis of suspected waterborne origin,

(xxvi) Psittacosis,

(xxvii) Q fever,

(xxviii) Relapsing fever (borreliosis),

(xxix) Reye Syndrome,

(xxx) Rheumatic fever,

(xxxi) Rocky mountain spotted fever,

(xxxii) Syphilis—other (see also Category B),

(xxxiii) Tetanus,
(xxxiv) Tick paralysis,
(xxxv) Toxic shock syndrome,
(xxxvi) Trichinosis,
(xxxvii) Tularemia,
(xxxviii) Vibriosis,
(xxxix) Yersiniosis, and
(xl) Severe adverse reaction to immunization.

(2) Any cluster or pattern of cases, suspected cases, deaths, or increased incidence of any disease or condition beyond that expected in a given period which may indicate an outbreak, epidemic, or related public health hazard shall be reported immediately by telephone to the local health officer. Such patterns include, but are not limited to, suspected or confirmed outbreaks of food borne or waterborne disease, chickenpox, influenza, viral meningitis, nosocomial infection suspected due to contaminated products or devices, or environmentally related disease.

(3) A health care provider conducting a clinical HIV research project shall be required to report the identity of an individual participating in the project unless:

(a) The project has been approved by an institutional review board; and

(b) The project has a system in place to remind referring health care providers of their reporting obligations under this section.

(4) In implementing the reporting requirements in subsection (1)(c)(i) and (xiv), the department of health will seek the input of local health departments, HIV-infected persons, and community organizations serving persons with HIV infection or AIDS.

(5) Effective September 1, 1999, health care providers are required to report to the local health department all cases of HIV infection consistent with the provisions of chapter 246-100 WAC, provided the HIV-infected person receives health care or treatment services on or after September 1, 1999, regardless of the date of initial diagnosis. Local health officials will report asymptomatic HIV infection cases to the state health department according to a standard code developed by the state health department.

(6) When providing technical assistance to a local health department, authorized representatives of the state health department may temporarily and subject to the time limitations in WAC 246-100-036 (2)(j) receive the names of reportable cases of asymptomatic HIV infection for the purpose of HIV surveillance, partner notification, or special studies. Upon completion of the activities by representatives of the state health department, named information will be:

(a) Provided to the local health department subject to the provisions of WAC 246-100-036 (2)(j); and

(b) Converted to code and maintained as code only until the person is diagnosed with AIDS.

(7) Diagnosed cases of symptomatic HIV infection, including AIDS, as defined in this section remain a reportable condition, by name, regardless of the date of diagnosis.

(8) Local health officers may require reporting of additional diseases and conditions.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-076, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 70.28.032. 96-23-064, § 246-100-076, filed 11/20/96, effective 12/21/96. Statutory Authority: Chapter 70.24 RCW. 93-08-036 (Order 354B), § 246-100-076, filed 4/1/93, effective 5/2/93. Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-076, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-076, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-076, filed 5/19/87.]

WAC 246-100-206 Special diseases—Sexually transmitted diseases. (1) Definitions.

(a) "Anonymous HIV testing" means that the name or identity of the individual tested for HIV will not be recorded or linked to the HIV test result. However, once the individual testing positive receives HIV health care or treatment services, reporting of the identity of the individual to the state or local public health officer is required.

(b) "Behaviors presenting imminent danger to public health (BPID)" means the following activities, under conditions specified below, performed by an individual with a laboratory confirmed HIV infection:

(i) Anal or vaginal intercourse without a latex condom; or

(ii) Shared use of blood-contaminated injection equipment;

(iii) Donating or selling HIV-infected blood, blood products, or semen; and

(iv) Under the following specified conditions:

(A) The infected individual received post-test counseling as described in WAC 246-100-209 prior to repeating activities in subsection (1)(b)(i) and (ii) of this section; and

(B) The infected individual did not inform the persons, with whom activities described in subsection (1)(b)(i) and (ii) of this section occurred, of his or her infectious status.

(c) "Behaviors presenting possible risk" means:

(i) Actual actions resulting in "exposure presenting a possible risk" limited to:

(A) Anal, oral, or vaginal intercourse excluding conjugal visits; or

(B) Physical assault; or

(C) Sharing of injection equipment or sharp implements; or

(D) Throwing or smearing of blood, semen, or vaginal fluids; or

(ii) Threatened action if:

(A) The threatening individual states he or she is infected with HIV; and

(B) The threatened behavior is listed in subsection (1)(b)(i)(A), (B), (C), and (D) of this section; and

(C) The threatened behavior could result in "exposure presenting a possible risk."

(d) "Conduct endangering public health" means:

(i) Anal, oral, or vaginal intercourse for all sexually transmitted diseases;

(ii) For HIV and Hepatitis B:

(A) Anal, oral, or vaginal intercourse; and/or

(B) Sharing of injection equipment; and/or

(C) Donating or selling blood, blood products, body tissues, or semen; and

(iii) Activities described in subsection (1)(d)(i) and (ii) of this section resulting in introduction of blood, semen, and/or vaginal fluids to:

(A) Mucous membranes;

(B) Eyes;

(C) Open cuts, wounds, lesions; or

(D) Interruption of epidermis.

(e) "Confidential HIV testing" means that the name or identity of the individual tested for HIV will be recorded and linked to the HIV test result, and that the name of the individual testing positive for HIV will be reported to the state or local health officer in a private manner.

(f) "Exposure presenting possible risk" means one or more of the following:

(i) Introduction of blood, semen, or vaginal fluids into:

(A) A body orifice or a mucous membrane;

(B) The eye; or

(C) An open cut, wound, lesion, or other interruption of the epidermis.

(ii) A needle puncture or penetrating wound resulting in exposure to blood, semen, and/or vaginal fluids.

(g) "Reasonably believed" or "reason to believe," in reference to a sexually transmitted disease, means a health officer's belief which:

(i) For the purpose of investigating the source and spread of disease, is based upon a credible report from an identifiable individual indicating another person is likely to have a sexually transmitted disease (STD) or to have been exposed to a STD; and

(ii) For the purpose of issuing a written order for an individual to submit to examination, counseling, or treatment is based upon:

(A) Laboratory test results confirming or suggestive of a STD; or

(B) A health care provider's direct observation of clinical signs confirming an individual has or is likely to have a STD; or

(C) Obtaining information directly from an individual infected with a STD about the identity of his or her sexual or needle-sharing contacts when:

(I) Contact with the infected individual occurred during a period when the disease may have been infectious; and

(II) The contact was sufficient to transmit the disease; and

(III) The infected individual is, in the health officer's judgment, credible and believable.

(h) "Substantial exposure" means physical contact resulting in exposure presenting possible risk, limited to:

(i) A physical assault upon the exposed person involving blood or semen;

(ii) Intentional, unauthorized, nonconsensual use of needles or sharp implements to inject or mutilate the exposed person;

(iii) An accidental parenteral or mucous membrane or nonintact skin exposure to blood, semen, or vaginal fluids.

(2) Health care providers shall:

(a) Report each case of sexually transmitted disease as required in chapter 246-100 WAC, and

(b) Instruct each patient regarding:

(i) Communicability of the disease, and

(ii) Requirements to refrain from acts that may transmit the disease to another.

(c) Ensure completion of a prenatal serologic test for syphilis in each pregnant woman pursuant to RCW 70.24.090 including:

(i) Submission of a blood sample for syphilis to a laboratory approved to perform prenatal serologic tests for syphilis, as required in RCW 70.24.090, at the time of the first prenatal visit, and

(ii) Decide whether or not to omit the serologic test for syphilis if the test was performed elsewhere during the current pregnancy.

(3) Laboratories, health care providers, and other persons shall deny issuance of a certificate or statement implying an individual is free from sexually transmitted disease.

(4) Local health officers, health care providers, and others, in addition to requirements in chapter 246-100 WAC, shall comply with the provisions in chapter 70.24 RCW.

(5) Prevention of ophthalmia neonatorum.

(a) Health care providers diagnosing or caring for a patient with gonococcal or chlamydial ophthalmia neonatorum shall report the case to the local health officer or local health department in accordance with the provisions of this chapter.

(b) The principal health care provider attending or assisting in the birth of any infant or caring for an infant after birth, shall ensure instillation of a department-approved prophylactic ophthalmic agent into the conjunctival sacs of the infant within the time frame established by the department in policy statement of ophthalmia agents approved for the prevention of ophthalmia neonatorum in the newborn, issued June 19, 1981.

(6) State and local health officers or their authorized representatives shall:

(a) Have authority to conduct or cause to be conducted an interview and investigation of persons infected or reasonably believed to be infected with a sexually transmitted disease; and

(b) Use procedures and measures described in WAC 246-100-036(4) in conducting investigations.

(7) State and local health officers and their authorized representatives shall have authority to:

(a) Issue written orders for medical examination, testing, and/or counseling under chapter 70.24 RCW, only after:

(i) All other efforts to protect public health have failed, including reasonable efforts to obtain the voluntary cooperation of the person to be affected by the order; and

(ii) Having sufficient evidence to "reasonably believe" the individual to be affected by the order:

(A) Has a sexually transmitted disease; and

(B) Is engaging in "conduct endangering public health"; and

(iii) Investigating and confirming the existence of "conduct endangering public health" by:

(A) Interviewing sources to assess their credibility and accuracy; and

(B) Interviewing the person to be affected by the order; and

(iv) Including in a written order all information required in RCW 70.24.024.

(b) Issue written orders for treatment under RCW 70.24.022 only after laboratory test results, or direct observa-

tion of clinical signs or assessment of clinical data by a physician, confirm the individual has, or is likely to have, a sexually transmitted disease;

(c) Issue written orders to cease and desist from specified activities, under RCW 70.24.024 only after:

(i) Determining the person to be affected by the order is engaging in "conduct endangering public health"; and

(ii) Laboratory test results, or direct observation of clinical signs or assessment of clinical data by a physician, confirm the individual has, or is likely to have, a sexually transmitted disease; and

(iii) Exhausting procedures described in subsection (7)(a) of this section; and

(iv) Enlisting, if appropriate, court enforcement of the orders described in subsections (7)(a) and (b) of this section; and

(d) Seek court orders for detainment under RCW 70.24.034, only for persons infected with HIV and only after:

(i) Exhausting procedures described in subsection (7)(a), (b), and (c) of this section; and

(ii) Enlisting, if appropriate, court enforcement of orders to cease and desist; and

(iii) Having sufficient evidence to "reasonably believe" the person is engaging in "behaviors presenting an imminent danger to public health."

(8) Conditions for detainment of individuals infected with sexually transmitted disease.

(a) A local health officer may notify the state health officer if he or she determines:

(i) The criteria for "behaviors presenting imminent danger to public health (BPID)" are met by an individual; and

(ii) Such individual fails to comply with a cease and desist order affirmed or issued by a court.

(b) A local or state health officer may request the prosecuting attorney to file an action in superior court to detain an individual specified in subsection (8)(a) of this section.

(c) The requesting local or state health officer or authorized representative shall:

(i) Notify the department prior to recommending the detainment setting where the individualized counseling and education plan may be carried out consistent with subsections (8)(d), (e), and (f) of this section;

(ii) Make a recommendation to the court for placement of such individual consistent with subsections (8)(d) and (f) of this section; and

(iii) Provide to the court an individualized plan for education and counseling consistent with subsection (8)(e) of this section.

(d) State board of health requirements for detainment of individuals demonstrating BPID:

(i) Sufficient number of staff, caregivers, and/or family members to:

(A) Provide round-the-clock supervision, safety of detainee, and security; and

(B) Limit and restrict activities to prevent BPID; and

(C) Make available any medical, psychological, or nursing care when needed; and

(D) Provide access to AIDS education and counseling; and

(E) Immediately notify the local or state health officer of unauthorized absence or elopement; and

(ii) Sufficient equipment and facilities to provide:

(A) Meals and nourishment to meet nutritional needs; and

(B) A sanitary toilet and lavatory; and

(C) A bathing facility; and

(D) Bed and clean bedding appropriate to size of detainee; and

(E) A safe detention setting appropriate to chronological and developmental age of detainee; and

(F) A private sleeping room; and

(G) Prevention of sexual exploitation.

(iii) Sufficient access to services and programs directed toward cessation of BPID and providing:

(A) Linguistically, socially, culturally, and developmentally appropriate ongoing AIDS education and counseling; and

(B) Psychological and psychiatric evaluation and counseling; and

(C) Implementation of court-ordered plan for individualized counseling and education consistent with subsection (8)(e) of this section.

(iv) If required, provide access to isolation and/or restraint in accordance with restraint and seclusion rules in WAC 275-55-263 (2)(c);

(v) Maintain a safe, secure environment free from harassment, physical danger, and sexual exploitation.

(e) Washington state board of health standards for an individualized counseling and education plan for a detainee include:

(i) Consideration of detainee's personal and environmental characteristics, culture, social group, developmental age, and language;

(ii) Identification of habitual and addictive behavior and relapse pattern;

(iii) Identification of unique risk factors and possible cross-addiction leading to behavior presenting imminent danger to public health;

(iv) Identification of obstacles to behavior change and determination of specific objectives for desired behavior;

(v) Provision of information about acquisition and transmission of HIV infection;

(vi) Teaching and training of individual coping skills to prevent relapse to BPID;

(vii) Specific counseling for chemical dependency, if required;

(viii) Identification of and assistance with access to community resources, including social services and self-help groups appropriate to provide ongoing support and maintenance of behavior change; and

(ix) Designation of a person primarily responsible for counseling and/or education who:

(A) Completed pretest and post-test counselor training approved by the office on AIDS; and

(B) Received training, as approved by the office on AIDS, focused on facilitating behavior change related to preventing BPID; and

(C) Has a post-graduate degree in social work, psychology, counseling, psychosocial nursing, or other allied profession; and

(D) Completed at least one year clinical experience after post-graduate education with a primary focus on individualized behavior change; and

(E) Is a certified counselor under chapter 18.19 RCW.

(x) Designation and provision of a qualified counselor under WAC 275-19-145 when the detainee is assessed to have a drug or alcohol problem.

(f) The state board of health designates the following settings appropriate for detainment provided a setting meets requirements in subsection (8)(d)(i), (ii), (iii), (iv), and (v) of this section:

(i) Homes, care facilities, or treatment institutions operated or contracted by the department;

(ii) Private homes, as recommended by the local or state health officer;

(iii) Boarding homes licensed under chapter 18.20 RCW;

(iv) Nursing homes licensed under chapter 18.51 RCW;

(v) Facilities licensed under chapter 71.12 RCW, including:

(A) Psychiatric hospitals, per chapter 246-322 WAC;

(B) Alcoholism treatment centers if certified for substance use under chapter 275-19 WAC;

(C) Adult residential rehabilitation centers, per chapter 246-325 WAC;

(D) Private adult treatment homes, per chapter 246-325 WAC;

(E) Residential treatment facilities for psychiatrically impaired children and youth, per chapter 246-323 WAC;

(vi) A hospital licensed under chapter 70.41 RCW.

(9) Jail administrators may order pretest counseling, post-test counseling, and HIV testing of persons detained in jail according to RCW 70.24.360 only under the following conditions:

(a) The jail administrator documents and reports to the local health officer, within seven days after the incident, any incident perceived to be actual or threatened "behaviors presenting possible risk"; and

(b) The local health officer:

(i) Determines the documented behavior or behaviors meet the criteria established in the definition of "behaviors presenting a possible risk"; and

(ii) Interviews the detained individual to evaluate the factual basis for alleged actual or threatened behavior; and

(iii) Makes a fact determination, based upon the documented behavior, the interview with the detained individual, and/or independent investigation, that sufficient factual evidence exists to support the allegation of actual or threatened "behaviors presenting possible risk"; and

(iv) Arranges for testing of the individual who is the source of the behavior to occur within seven days of the request from the jail administrator; and

(v) Reviews with the detained individual who is the source of the behavior the documentation of the actual or threatened behavior to try to assure understanding of the basis for HIV testing; and

(vi) Provides written approval of the jail administrator's order prior to HIV testing in accordance with subsection (7)(a)(i) of this section.

(c) The jail administrator maintains HIV test results and identity of the tested individual as a confidential, nondisclosable record, as provided in RCW 70.24.105.

(10) When an individual experiences a substantial exposure to another individual's body fluids and requests HIV testing of that other individual, the state and local health officers have authority to order pretest counseling, HIV testing, and post-test counseling of that other individual providing:

(a) The alleged exposure occurred when the individual was employed or acting as an authorized volunteer in one of the following employment categories:

(i) Law enforcement officer;

(ii) Firefighter;

(iii) Health care provider;

(iv) Staff of health care facilities;

(v) Funeral director;

(vi) Embalmer; and

(b) The alleged substantial exposure occurred on the job; and

(c) The request to the health officer for testing and counseling of the individual was made within seven days of the occurrence of the alleged exposure; and

(d) The local health officer:

(i) Determines that the alleged exposure meets the criteria established in the definition of "substantial exposure"; and

(ii) Ensures that pretest counseling of the individual to be tested, or a legal representative, occurs; and

(iii) Arranges for testing of the individual who is the source of the exposure to occur within seven days of the request from the person exposed; and

(e) The exposed individual agrees to be tested for HIV if such testing is determined appropriate by the health officer; and

(f) Records on HIV testing ordered by a health officer are maintained only by the ordering health officer.

(11) For the purpose of RCW 49.60.172 concerning the absence of HIV infection as a bona fide occupational qualification only, "significant risk" means a job qualification which requires person-to-person contact likely to result in direct introduction of blood into the eye, an open cut or wound, or other interruption of the epidermis, when:

(a) No adequate barrier protection is practical; and

(b) Determined only on case-by-case basis consistent with RCW 49.60.180.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-206, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 70.24.022, [70.24].340 and Public Law 104-146. 97-15-099, § 246-100-206, filed 7/21/97, effective 7/21/97. Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-206, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-206, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-07-095 (Order 325), § 248-100-206, filed 3/22/89; 88-21-093 (Order 322), § 248-100-206, filed 10/19/88; 88-17-056 (Order 316), § 248-100-206, filed 8/17/88. Statutory Authority: RCW 43.20.050. 87-11-047 (Order 302), § 248-100-206, filed 5/19/87.]

WAC 246-100-207 Human immunodeficiency virus (HIV) testing—Ordering—Laboratory screening—Inter-

pretation—Reporting. (1) Any person ordering or prescribing an HIV test for another, except for seroprevalent studies under chapter 70.24 RCW or provided under subsections (2) and (3) of this section, shall:

(a) Provide or refer for pretest counseling described under WAC 246-100-209;

(b) Obtain or ensure informed specific consent of the individual to be tested separate from other consents prior to ordering or prescribing an HIV test, unless excepted under provisions in chapter 70.24 RCW;

(c) Inform, orally or in writing, the individual to be tested of the availability of anonymous HIV testing and of the differences between "anonymous HIV testing" and "confidential HIV testing"; and

(d) Provide or refer for post-test counseling described under WAC 246-100-209 if HIV test is positive for or suggestive of HIV infection.

(2) Any person authorized to order or prescribe an HIV test for another may offer anonymous HIV testing without restriction.

(3) Blood banks, tissue banks, and others collecting or processing blood, sperm, tissues, or organs for transfusion/transplanting shall:

(a) Obtain or ensure informed specific consent of the individual prior to ordering or prescribing an HIV test, unless excepted under provisions in chapter 70.24 RCW;

(b) Explain that the reason for HIV testing is to prevent contamination of the blood supply, tissue, or organ bank donations;

(c) At the time of notification regarding a positive HIV test, provide or ensure at least one individual counseling session; and

(d) Inform the individual that the name of the individual testing positive for HIV infection will be confidentially reported to the state or local health officer.

(4) Persons subject to regulation under Title 48 RCW and requesting an insured, subscriber, or potential insured or subscriber to furnish the results of an HIV test for underwriting purposes, as a condition for obtaining or renewing coverage under an insurance contract, health care service contract, or health maintenance organization agreement shall:

(a) Before obtaining a specimen to perform an HIV test, provide written information to the individual tested explaining:

(i) What an HIV test is;

(ii) Behaviors placing a person at risk for HIV infection;

(iii) The purpose of HIV testing in this setting is to determine eligibility for coverage;

(iv) The potential risks of HIV testing; and

(v) Where to obtain HIV pretest counseling.

(b) Obtain informed specific written consent for an HIV test. The written informed consent shall include:

(i) An explanation of confidential treatment of test result reports limited to persons involved in handling or determining applications for coverage or claims for the applicant or claimant; and

(ii) That the name of the individual testing positive for HIV infection will be confidentially reported to the state or local health officer; and

(iii) Requirements under subsection (4)(c) of this section.

(c) Establish procedures to inform an applicant of the following:

(i) Post-test counseling specified under WAC 246-100-209(4) is required if an HIV test is positive or indeterminate;

(ii) Post-test counseling is done at the time any positive or indeterminate HIV test result is given to the tested individual;

(iii) The applicant is required to designate a health care provider or health care agency to whom positive or indeterminate HIV test results are to be provided for interpretation and post-test counseling; and

(iv) When an individual applicant does not identify a designated health care provider or health care agency and the applicant's HIV test results are positive or indeterminate, the insurer, health care service contractor, or health maintenance organization shall provide the test results to the state or local health department for interpretation and post-test counseling.

(5) Laboratories and other places where HIV testing is performed shall demonstrate complete and satisfactory participation in an HIV proficiency testing program approved by the Department Laboratory Quality Assurance Section, Mailstop K17-9, 1610 N.E. 150th, Seattle, Washington 98155.

(6) The department laboratory quality assurance section shall accept substitutions for EIA screening only as approved by the United States Food and Drug Administration (FDA) and a published list or other written FDA communication.

(7) Persons informing a tested individual of positive laboratory test results indicating HIV infection shall do so only when:

(a) HIV is isolated by viral culture technique; or

(b) HIV nucleic acid (RNA or DNA) is detected; or

(c) HIV is detected through a P24 antigen (neutralizable) test; or

(d) HIV antibodies are identified by a sequence of tests which are reactive and include:

(i) A repeatedly reactive screening test such as the enzyme immunoassay (EIA); and

(ii) An additional, more specific, assay such as a positive western blot assay (WBA) or other tests as approved by the United States Food and Drug Administration (FDA) in a published list or other written FDA communication.

(e) Such information consists of relevant, pertinent facts communicated in such a way that it will be readily understood by the recipient.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-207, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 70.24.380. 97-04-041, § 246-100-207, filed 1/31/97, effective 3/3/97. Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-207, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-207, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW and RCW 70.24.130. 89-20-006 (Order 334), § 248-100-207, filed 9/22/89, effective 10/23/89. Statutory Authority: Chapter 70.24 RCW. 89-14-003 (Order 329), § 248-100-207, filed 6/22/89; 88-17-058 (Order 318), § 248-100-207, filed 8/17/88.]

WAC 246-100-208 Counseling standard—AIDS counseling. (1) Principal health care providers shall counsel or ensure AIDS counseling for:

(a) Each pregnant woman; and

(b) Each patient seeking treatment of a sexually transmitted disease.

(2) Drug treatment programs under chapter 70.96A RCW shall provide or ensure provision of AIDS counseling for each person in a drug treatment program.

(3) Health care providers, persons, and organizations providing AIDS counseling shall:

(a) Assess the behaviors of each individual counseled for risk of acquiring and transmitting human immunodeficiency virus (HIV);

(b) Maintain a nonjudgmental environment during counseling which:

(i) Considers the individual's particular circumstances; and

(ii) Is culturally, socially, linguistically, and developmentally appropriate to the individual being counseled.

(c) Focus counseling on behaviors increasing the risk of HIV acquisition and transmission;

(d) Provide or ensure provision of personalized risk reduction education to individuals who:

(i) Are men who had sex with other men at any time since 1977;

(ii) Used intravenous substances at any time since 1977;

(iii) Engaged in sex for money or drugs at any time since 1977;

(iv) Have had sexual and/or injection equipment-sharing contact with persons listed in subsection (3)(d)(i), (ii), and (iii) of this section;

(v) Have been exposed to or known to have had a sexually transmitted disease at any time since 1977;

(vi) Are at increased risk of HIV infection by definition of United States Public Health Service, Centers for Disease Control;

(vii) Are enrolled in a drug treatment program under chapter 69.54 RCW; or

(viii) Received multiple transfusions of blood, plasma, or blood products from 1977 to 1985.

(e) Encourage individuals assessed to be at other than virtually no risk of HIV infection to:

(i) Receive AIDS risk reduction counseling;

(ii) Consider information about the nature, purpose, and potential ramifications of HIV testing;

(iii) Receive pretest counseling;

(iv) Consider confidential or anonymous voluntary HIV testing if appropriate and understand the differences between "anonymous HIV testing" and "confidential HIV testing"; and

(v) "Virtually no risk of HIV infection" means persons with medical histories absent of and reporting none of the following factors:

(A) Transfusion with blood or blood products at any time since 1977;

(B) Residence at any time in countries where HIV is considered endemic since 1977;

(C) Unprotected sex between men at any time since 1977;

(D) Use of intravenous substances at any time since 1977, especially when sharing injection equipment;

(E) Engagement in sex for money or drugs at any time since 1977;

(F) Sexual and/or injection equipment-sharing contacts at any time since 1977 with persons listed in subsection (3)(e)(v)(C), (D), and (E) of this section;

(G) Exposure to a sexually transmitted disease; and

(H) Increased risk of HIV infection by definition of United States Public Health Service, Centers for Disease Control.

(4) Persons and organizations providing AIDS counseling may provide additional or more comprehensive counseling than required in this section.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-208, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-208, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-208, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 88-17-058 (Order 318), § 248-100-208, filed 8/17/88.]

WAC 246-100-209 Counseling standards—Human immunodeficiency virus (HIV) pretest counseling—HIV post-test counseling. (1) Health care providers and other persons providing pretest counseling shall:

(a) Assess the individual's risk of acquiring and transmitting HIV by evaluating information about the individual's possible risk-behaviors;

(b) Provide at least one individual counseling session prior to HIV testing;

(c) Inform in writing or orally any individual planning to be tested for HIV that:

(i) Anonymous HIV testing is available through the local health department, home testing kits, or may be available through other community sources, and explain the differences between "anonymous HIV testing" and "confidential HIV testing"; and

(ii) If the test result is positive, sex and injection equipment-sharing partners, including spouses must be notified that they:

(A) May have been exposed to and infected with HIV; and

(B) Should seek HIV pretest counseling and consider HIV testing; and

(iii) The principal health care provider is required to refer identities of at-risk partners to the local health officer or authorized representative if:

(A) The HIV-infected individual either refuses or is unable to notify partners of exposure, possible infection, and need for pretest counseling and HIV testing; or

(B) The HIV-infected individual neither accepts assistance nor agrees to referral to the local health officer or an authorized representative for assistance in notifying partners; and

(iv) Unless HIV testing is anonymous, the principal health care provider is required to confidentially refer the identity of the individual testing positive to the local health officer or an authorized representative.

(2) When an individual is assessed by a counselor or health care provider as "virtually no risk of HIV infection," as defined in WAC 246-100-208 (3)(e)(v) a counselor or the health care provider shall, in addition to subsection (1)(a) of this section:

(a) Maintain a nonjudgmental environment during counseling which:

(i) Considers the individual's particular circumstances; and

(ii) Is culturally, socially, linguistically, and developmentally appropriate to the individual being counseled.

(b) Explain the nature, purpose, value, and reason for the HIV tests;

(c) In writing or orally, inform the individual to be tested that anonymous HIV testing is available through the local health department, home testing kits, or may be available through other community sources, and explain the differences between "anonymous HIV testing" and "confidential HIV testing";

(d) Explain the possible effect of HIV testing and a positive HIV test result related to employment, insurance, housing, and other potential legal, social, and personal consequences;

(e) Develop and maintain a system of referral and make referrals that:

(i) Are accessible and confidential for those counseled;

(ii) Are acceptable to and supportive of those counseled;

(iii) Provide assistance to those counseled in maintaining risk reduction behaviors.

(f) Provide at least one individual counseling session at the time HIV test results are disclosed to individuals testing positive; and

(g) Maintain disclosure and confidentiality requirements in WAC 246-100-016.

(3) If the individual is assessed by a health care provider to be other than "virtually no risk of HIV infection," as defined in WAC 246-100-208 (3)(e)(v), the person providing pretest counseling shall maintain requirements in subsection (1) and (2) of this section and:

(a) Focus counseling on behaviors increasing the risk of HIV acquisition and transmission;

(b) Provide personalized risk reduction education to individuals who:

(i) Are men engaging in unprotected intercourse with other men at any time since 1977;

(ii) Used intravenous substances at any time since 1977, especially those sharing injection equipment;

(iii) Engaged in sex for money or drugs at any time since 1977;

(iv) Have had sexual and/or injection equipment-sharing contacts at any time since 1977 with persons listed in subsection (3)(b)(i), (ii), and (iii) of this section;

(v) Have been exposed to or diagnosed with a sexually transmitted disease;

(vi) Are at increased risk of HIV infection by definition of United States Public Health Services, Centers for Disease Control;

(vii) Are required by RCW 70.24.095 and 70.24.340 to receive HIV counseling and testing.

(c) Inform any individual planning to be tested for HIV of the need to notify sexual and injection equipment-sharing partners, including spouses, if test results are positive;

(d) Advise individuals listed in subsection (3)(b)(i), (ii), and (iii) of this section not to donate or sell blood, blood products, semen, organs, or other body tissues; and

(e) Emphasize or reemphasize the following counseling messages:

(i) The following will eliminate or decrease the risk of HIV infection:

(A) Sexual abstinence;

(B) A mutually monogamous relationship between uninfected people; and

(C) Following safer sex guidelines.

(ii) Do not share intravenous drugs and injection equipment;

(iii) Do not engage in behaviors in which blood, vaginal fluid, or semen is exchanged;

(iv) Condoms, even if used properly, do not supply absolute protection from HIV infection;

(v) Condoms may reduce risk of HIV infection if the condom is:

(A) Latex and used with a water-based lubricant rather than an oil-based lubricant, if a lubricant is used;

(B) Used in conjunction with spermicide during vaginal or anal intercourse; and

(C) Worn from start to finish of vaginal, oral, and anal intercourse.

(vi) Dental dams may reduce risk of HIV infection if the dental dam is:

(A) Latex; and

(B) Used from start to finish of oral intercourse.

(vii) The sexual behaviors having highest risk for HIV infection are those involving the exchange of blood or semen, especially receptive anal and vaginal intercourse;

(viii) Anal intercourse may increase the risk of condom failure and HIV infection;

(ix) Infected women should postpone pregnancy until more is known about how to prevent prenatal and perinatal transmission of HIV infection;

(x) Sexual negotiation skills can be learned to enhance risk reduction; and

(xi) Other sexually transmitted diseases, especially those causing genital ulcers, may increase the risk of acquiring or transmitting HIV infection.

(f) Make those counseled aware HIV retesting at a later date may be necessary or recommended.

(4) Persons providing post-test counseling shall:

(a) Follow requirements in subsection (1) of this section;

(b) Provide at least one individual counseling session at the time HIV test results are disclosed for individuals:

(i) Testing positive for HIV; or

(ii) Reporting practice of behaviors listed in (3)(b)(i), (ii), and (iii) of this section.

(c) If the individual being counseled tested positive for HIV infection:

(i) Unless testing was anonymous, remind the individual that the identity of the individual testing positive for HIV infection will be confidentially reported to the state or local health officer;

(ii) Provide assistance to persons in notifying partners, including spouses, and confirm those partners including spouses have been notified; and/or

(iii) Seek agreement to refer the name of the individual to the local health officer for assistance in notifying partners; and/or

(iv) Offer to refer partners for counseling and testing; and

(v) Develop or adopt a system to avoid documenting the names of referred partners in the permanent record of the individual being counseled; and

(vi) Offer referral for alcohol and drug and mental health counseling, including suicide prevention, if appropriate; and

(vii) Provide or refer for medical evaluation and antiretroviral treatment; and

(viii) Refer for tuberculosis screening.

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-209, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 70.24.022, [70.24].340 and Public Law 104-146. 97-15-099, § 246-100-209, filed 7/21/97, effective 7/21/97. Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-209, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-209, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-02-008 (Order 324), § 248-100-209, filed 12/27/88; 88-17-058 (Order 318), § 248-100-209, filed 8/17/88.]

WAC 246-100-236 Duties of laboratories—Reporting of laboratory results indicative of certain reportable diseases. (1) By December 31, 1987, medical laboratories which perform testing or are responsible for referring the specimen to an out-of-state laboratory for testing shall:

(a) Report each positive culture or other suggestive test results to the local health officer by phone, written report, or submission of specimen within two working days, unless specified otherwise, for:

(i) Anthrax (Bacillus anthracis),

(ii) Botulism (Clostridium botulinum),

(iii) Cholera (Vibrio cholerae),

(iv) Diphtheria (Corynebacterium diphtheriae) - toxigenic strains,

(v) Gonorrhea (Neisseria gonorrhoeae) (report within seven days),

(vi) Measles (rubeola) (measles virus),

(vii) Plague (Yersinia pestis),

(viii) Rabies (rabies virus),

(ix) Brucellosis (Brucella species),

(x) Leptospirosis (Leptospira interrogans),

(xi) Listeria infection of blood or spinal fluid (Listeria monocytogenes),

(xii) Meningococcal infection of blood or spinal fluid (N. meningitidis),

(xiii) Pertussis (Bordetella pertussis),

(xiv) Salmonellosis (Salmonella species),

(xv) Shigellosis (Shigella species), and

(xvi) Hepatitis A (positive anti-HAV IgM),

(xvii) Mycobacteriosis,

(xviii) Human immunodeficiency virus (HIV), including positive Western Blot assays, P24 antigen or viral culture tests,

(xix) CD4+(T4) lymphocyte counts less than 200 and/or CD4+(T4) percents less than fourteen percent of total lymphocytes, for patients aged thirteen or older, or positive results on HIV nucleic acid tests (RNA or DNA), (report monthly or quarterly).

(b) For the diseases and conditions listed in (a)(i) through (xvii) of this subsection, send a copy of the state form accompanying specimen submitted as required in WAC 246-100-231 or identifying information including:

(i) Type of specimen tested (e.g., serum or sputum),

(ii) Test result,

(iii) Name of reporting laboratory,

(iv) Date of report,

(v) Name of requesting health care provider or health care facility, and

(vi) Name of patient.

(c) After September 1, 1999, for the diseases and conditions listed in (a)(xviii) and (xix) of this subsection, upon written request of the state department of health, send to the state or local health department identifying information including:

(i) Type of specimen tested (e.g., serum),

(ii) Test result,

(iii) Name of reporting laboratory,

(iv) Date of report,

(v) Name of requesting health care provider or health care facility,

(vi) Name of patient, if submitted by the health care provider, or other patient identifier if the name is not submitted by the health care provider, and

(vii) Patient date of birth and gender, if submitted by the health care provider.

(2) By December 31, 1987, medical laboratories shall report positive cultures or other suggestive test results for chlamydial infection (chlamydia trachomatis) to local health departments monthly including either:

(a) Identifying information specified in subsection (1)(b)(i-vi) of this section, or

(b) Aggregate numbers of positive tests including age, sex, and site of infection when known.

(3) Medical laboratories shall label or stamp reports appropriately with information indicating "reportable disease" and the telephone number of the local health department, if such labels or stamps are provided by the local health department.

(4) State and local health officers and health departments receiving reports from medical laboratories shall:

(a) Allow time for the laboratory to notify the principal health care provider prior to contact if:

(i) Delay is unlikely to jeopardize public health, and

(ii) The laboratory requests a delay.

(b) Try to contact the principal health care provider and discuss circumstances prior to contact of a patient when possible.

(c) Comply with the requirements of WAC 246-100-036(2).

[Statutory Authority: RCW 70.24.125. and 70.24.130. 99-17-077, § 246-100-236, filed 8/13/99, effective 9/1/99. Statutory Authority: RCW 70.24.130. 95-13-037, § 246-100-236, filed 6/14/95, effective 7/15/95. Statutory Authority: Chapter 70.24 RCW. 93-08-036 (Order 354B), § 246-100-236, filed 4/1/93, effective 5/2/93. Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-236, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-236, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-236, filed 3/16/88; 87-11-047 (Order 302), § 248-100-236, filed 5/19/87.]

Chapter 246-138 WAC

TESTING OF GOOD SAMARITANS FOR CERTAIN INFECTIOUS DISEASES

WAC

WAC 246-138-001 Purpose. The purpose of this rule is to ensure eligible good samaritans may receive testing for certain infectious diseases at no cost to the good samaritan.

[Statutory Authority: 1999 c 391 § 2. 00-01-066, § 246-138-001, filed 12/13/99, effective 1/13/00.]

WAC 246-138-010 Definitions. The following definitions apply throughout this chapter unless the context clearly indicates otherwise.

(1) "Certain infectious diseases" means hepatitis A virus (HAV), hepatitis B virus (HBV), hepatitis C virus (HCV), and human immunodeficiency virus (HIV).

(2) "Good samaritan" means a person rendering emergency care or transportation as described in RCW 4.24.300 and 4.24.310.

(3) "Local health department" means the city, town, county, or district agency providing public health services to persons within the area, as provided in chapters 70.05 and 70.08 RCW.

(4) "Local health officer" means the individual appointed under chapter 70.05 RCW as the health officer for the local health department, or appointed under chapter 70.08 RCW as the director of public health of a combined city-county health department.

(5) "Exchange of bodily fluids significantly increasing the odds of being exposed to a deadly infectious disease":

(a) For HBV, HCV, and HIV means physical contact resulting in exposure presenting possible risk, limited to:

(i) A physical assault upon the exposed person involving blood or semen;

(ii) Intentional, unauthorized, nonconsensual use of needles or sharp implements to inject or mutilate the exposed person;

(iii) An accidental parenteral or mucous membrane or nonintact skin exposure to blood, semen, or vaginal fluids; or

(iv) For HBV only, mucous membrane or nonintact skin exposure to saliva; or

(b) For HAV means physical contact resulting in oral exposure of the good samaritan to the feces of the person she/he was assisting.

[Statutory Authority: 1999 c 391 § 2. 00-01-066, § 246-138-010, filed 12/13/99, effective 1/13/00.]

WAC 246-138-020 How is a good samaritan eligible for no cost testing for certain infectious diseases? To receive no cost testing, a good samaritan must:

(1) Seek testing from the local health department of the county of her or his residence within thirty days of the exchange of bodily fluids significantly increasing the odds of being exposed to a deadly infectious disease;

(2) Have sustained an exchange of bodily fluids significantly increasing the odds of being exposed to a deadly infectious disease as determined by the local health officer or authorized representative, while rendering emergency care or transportation; and

(3) Be uninsured or have health insurance that does not cover most of the costs of testing.

[Statutory Authority: 1999 c 391 § 2. 00-01-066, § 246-138-020, filed 12/13/99, effective 1/13/00.]

WAC 246-138-030 What are the duties and responsibilities of the local health department? Local health departments, during regular hours of operation shall:

(1) Determine whether the good samaritan has sustained an exchange of bodily fluids significantly increasing the odds of being exposed to a deadly infectious disease;

(2) Determine which certain infectious diseases or other infectious diseases are appropriate to test for, which tests should be done and when the tests should be done, based on the nature and time of the exchange of bodily fluids significantly increasing the odds of being exposed to a deadly infectious disease and the natural history of infection for the diseases in question;

(3) Offer counseling and testing, consistent with recommendations in the sixteenth edition 1995 of *Control of Communicable Diseases Manual*, edited by Abram S. Benenson, published by the American public health association, for those infectious diseases to which the good samaritan is determined to have sustained an exchange of bodily fluids significantly increasing the odds of being exposed to a deadly infectious disease;

(4) Obtain the informed consent of the good samaritan prior to testing;

(5) Provide the good samaritan with the results of the testing and the possible need for retesting;

(6) Refer the good samaritan to an appropriate health care provider for any subsequent needed care in the event of a positive test; and

(7) Maintain the confidentiality of those medical records as required by chapters 70.24 RCW and 246-100 WAC.

[Statutory Authority: 1999 c 391 § 2. 00-01-066, § 246-138-030, filed 12/13/99, effective 1/13/00.]

WAC 246-138-040 Limitations. Nothing in this chapter requires a local health department to provide health care services beyond the counseling, testing, and referral described in this chapter.

[Statutory Authority: 1999 c 391 § 2. 00-01-066, § 246-138-040, filed 12/13/99, effective 1/13/00.]

Chapter 246-205 WAC

DECONTAMINATION OF ILLEGAL DRUG MANUFACTURING OR STORAGE SITES

WAC

WAC 246-205-990 Fees. (1) The department shall charge fees for issuance and renewal of certificates. The department shall set the fees by rule.

(2) The fees shall cover the cost of issuing certificates, filing papers and notices, and administering this chapter. The costs shall include reproduction, travel, per diem, and administrative and legal support costs.

(3) Fees are nonrefundable and shall be in the form of check or money order made payable to the department.

(4) The department shall require payment of the following fees upon receipt of application:

(a) Twenty-seven dollars shall be assessed for each initial, renewal, or reciprocal worker certificate application.

(b) Twenty-seven dollars shall be assessed for each initial, renewal, or reciprocal supervisor certificate application.

(c) Five hundred thirty-seven dollars shall be assessed for each initial, renewal, or reciprocal authorized contractor certificate application. The applicant's certificate shall expire annually on the expiration date of the contractor's license issued under the provisions of chapter 18.27 RCW.

(d) Two hundred five dollars shall be assessed for each initial application and fifty dollars shall be assessed for each renewal application for illegal drug manufacturing or storage site decontamination training course approval.

[Statutory Authority: RCW 43.70.250. 00-02-016, § 246-205-990, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-205-990, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-990, filed 1/24/91, effective 4/1/91.]

Chapter 246-215 WAC
FOOD SERVICE

WAC

WAC 246-215-010 Definitions. (1) "Abbreviations":

(a) "FDA" means United States Food and Drug Administration.

(b) "HACCP" means hazard analysis, critical control point.

(c) "PPM" means parts per million.

(d) "USA" means United States of America.

(e) "USDA" means United States Department of Agriculture.

(f) "WSDA" means Washington state department of agriculture.

(2) "Adulterated" means the altered condition of food including:

(a) Bearing or containing any poisonous or deleterious substance in a quantity rendering food injurious to health;

(b) Bearing or containing any added poisonous or deleterious substance where no safe tolerance has been established by regulation, or exceeding such tolerance if one has been established;

(c) Consisting in whole or in part of any filthy, putrid, or decomposed substance, or otherwise being unfit for human consumption;

(d) Processing, preparing, packing, or holding potentially hazardous foods under improper time-temperature conditions or under other conditions increasing the probability of food contamination with excessive microorganisms or physical contaminants;

(e) Processing, preparing, packing, or holding food under insanitary conditions increasing the probability of food contamination or cross-contamination;

(f) Holding or packaging food in containers composed, in whole or in part, of any poisonous or deleterious substance rendering the contents potentially injurious to health; or

(g) Containing any product of a diseased animal, or an animal dying by means other than by slaughter, except as permitted under WAC 246-215-020(6).

(3) "Approved" means acceptable to the health officer based on his/her determination regarding conformance with appropriate standards and public health practice.

(4) "Approved source" means foods which are obtained by the food service establishment owner from persons who comply with applicable federal, state and local laws, ordinances and regulations.

(5) "Aquatic foods" means foods grown in or harvested from water, including all types of fish, shellfish and mollusks, edible crustacea, reptiles, amphibians, and mixtures containing aquatic foods and synthetic foods, such as surimi.

(6) "Base of operation" means an approved site for servicing, cleaning, sanitizing, supplying, and maintaining a mobile food unit.

(7) "Bed and breakfast" means a private home or inn offering lodging on a temporary basis to travelers, tourists, and transient guests which provides food service only to registered guests.

(8) "Bulk food" means processed or unprocessed food in containers where consumers withdraw desired quantities.

(9) "Caterer" means a person or food service establishment contracted to prepare food in an approved facility for final cooking or service at another location.

(10) "Commissary" means an approved food service establishment where food is stored, prepared, portioned, or packaged for service elsewhere.

(11) "Corrosion-resistant" means a material maintaining original surface characteristics under prolonged contact with food, cleaning compounds, or sanitizing solutions.

(12) "Critical control point" means a location where exercising a preventive measure or procedure eliminates, prevents, or minimizes a hazard or hazards from occurring after that point.

(13) "Cross-contamination" means the process where disease causing organisms are transferred from raw or other foods to equipment or ready-to-eat foods.

(14) "Department" means the Washington state department of health.

(15) "Durable" means capable of withstanding expected use and remaining easily cleanable.

(16) "Easily cleanable" means readily accessible with materials and finish fabricated to permit complete removal of residue by normal cleaning methods.

(17) "Equipment" means all stoves, ovens, ranges, hoods, slicers, mixers, meat blocks, tables, counters, refrigerators, sinks, dish machines, steam tables, and similar items used in the operation of a food service establishment.

(18) "Extensive remodel" means construction in a food service establishment requiring a building permit or plumbing permit, except for signs and fences.

(19) "Food" means any raw, cooked, or processed edible substance, ice, beverage, or ingredient used or intended for use or for sale, in whole or in part, for human consumption.

(20) "Food additive" means substances added directly or indirectly to food.

(21) "Food contact surfaces" means those surfaces of equipment and utensils normally contacting food, and those surfaces where food may drain, drip, or splash back onto surfaces normally in contact with food.

(22) "Food service establishment" means:

(a) A place, location, operation, site, or facility where food is manufactured, prepared, processed, packaged, dispensed, distributed, sold, served, or offered to the consumer regardless of whether or not compensation for food occurs, including but not limited to:

(i) Restaurants, snack bars, cafeterias, taverns, bars;

(ii) Retail food stores, supermarkets, retail meat markets, retail fish markets, retail bakeries, delicatessens;

(iii) Institutional operations licensed by the department or local health officer, such as schools, hospitals, jails, prisons, and child care facilities;

(iv) Central preparation sites, including caterers;

(v) Satellite servicing locations;

(vi) Temporary food service establishments or mobile food units;

(vii) Bed and breakfast operations;

(viii) Remote feeding sites; and

(ix) Vending machines dispensing potentially hazardous foods.

(b) Except for the following:

(i) Private homes where food is prepared or served for consumption by household members and/or their guests;

(ii) Establishments offering only commercially prepackaged nonpotentially hazardous foods;

(iii) Commercial food processing establishments, licensed and regulated by the USDA, FDA, or WSDA; and

(iv) Farmers exempt from licensure under RCW 36.71.090.

(23) "Food service worker" means the permit holder, an individual having supervisory or management duties, and any other person working in a food service establishment.

(24) "Frozen" means the condition of a food when it is continuously stored at or below 10° F.

(25) "Game meat" means warm-blooded and cold-blooded animals, excluding fish and meat food animals as defined by USDA, noncommercially raised and processed without continuous regulatory surveillance, including, but not limited to:

(a) Mammals such as deer, elk, antelope, buffalo, and bear;

(b) Birds; and

(c) Reptiles such as alligator.

(26) "Hazard analysis critical control point (HACCP)" means a method used to reduce the risk of foodborne illness by:

(a) Identifying hazards of high risk foods;

(b) Assessing the hazards posed by each preparation step;

(c) Determining the critical points for controlling hazards;

(d) Monitoring a critical control point or points; and

(e) Implementing immediate and appropriate corrective action when control criteria are not met.

(27) "Health officer" means the city, county, city-county, or district health officer defined under RCW 70.05.010(2), or his/her authorized representative, or the representative of the department.

(28) "Hermetically sealed container" means a properly designed container, intended to keep the contents free of contamination by microorganisms and to maintain the commercial sterility of its contents after thermal processing.

(29) "Imminent or actual health hazard" means:

(a) A breakdown or lack of equipment or power causing improper temperature control for potentially hazardous foods; and/or

(b) Lack of water preventing adequate handwashing or equipment cleaning and sanitizing; and/or

(c) Emergency situations including fire, flood, building collapse, or similar accident or natural disaster; and/or

(d) A sewage backup or sewage contamination within a food service establishment; and/or

(e) An occurrence of an outbreak of foodborne illness linked to the food service establishment.

(30) "Immediate service" means foods served to the public within thirty minutes of preparation.

(31) "Menu" means a written or graphic description of foods prepared and offered for sale or service by a food service establishment.

(32) "Mislabeled" means the presence of any false or misleading written, printed, or graphic material upon or accompanying food or food containers.

(33) "Mobile food unit" means a readily movable food service establishment.

(34) "Modified atmosphere packaging" means a process that completely encases food in an impermeable or partially permeable membrane, with either a partial or complete vacuum; or a gas or mixture of gases surrounding the food. Hermetically sealed containers are not considered to be modified atmosphere packaging.

(35) "Owner" means a person owning and/or responsible for the operation of a food service establishment.

(36) "Perishable food" means foods, other than potentially hazardous foods, where deterioration or spoilage due to loss of moisture or growth of molds and bacteria may occur.

(37) "Person" means any individual, partnership, corporation, association, or other legal entity or agency of state, county, or municipal government, or agency of the federal government which is subject to the jurisdiction of the state.

(38) "Person in charge" means the individual present in a food service establishment and designated supervisor of the food service establishment at the time of inspection or any food service worker present when a designated supervisor is absent.

(39) "pH" means a measure of the amount of acid in a food product.

(40) "Potentially hazardous food" means any natural or synthetic edible item, material, or ingredient in a form supporting rapid and progressive growth of infectious or toxigenic microorganisms or the slower growth of Clostridium botulinum. Potentially hazardous food:

(a) Includes any food of animal origin, raw, cooked, or processed;

(b) Includes certain cooked or prepared foods of plant origin, including but not limited to:

(i) Potato products;

(ii) Dry legumes;

(iii) Rice;

(iv) Sprouts; and

(v) Cut melons and cut cantaloupes.

(c) Excludes foods:

(i) With a water activity (Aw) value of 0.90 or less;

(ii) With a pH level of 4.6 or below;

(iii) Enclosed in unopened hermetically sealed containers commercially processed to achieve and maintain commercial sterility under nonrefrigerated storage and distribution conditions; and

(iv) Where laboratory evidence acceptable to the health officer indicates no likelihood of rapid or progressive growth of infectious or toxigenic microorganisms or the slower growth of Clostridium botulinum.

(41) "Restructured" means potentially hazardous foods processed and formed so surface contaminants may become incorporated inside the final product.

(42) "Sanitary design" means smooth, nonabsorbent, and easily cleanable.

(43) "Sanitized" means effective bactericidal treatment by a process providing enough accumulative heat or concentration of chemicals for enough time to reduce the bacterial count, including pathogens, to a safe level on food contact surfaces.

(44) "Sealed" means free of cracks or other openings permitting entry or passage of moisture or air.

(45) "Self-service" means any site within a food service establishment where customers dispense their own food or beverages.

(46) "Served" means offered to a person for consumption.

(47) "Single service articles" means utensils designed, fabricated, and intended by the manufacturer for one time use.

(48) "Sulfiting agents" means chemicals used to treat food to increase shelf life and enhance appearance including:

(a) Sulfur dioxide;

(b) Sodium sulfite;

(c) Sodium bisulfite;

(d) Potassium bisulfite;

(e) Sodium metabisulfite; and

(f) Potassium metabisulfite.

(49) "Temporary food service establishment" means a food service establishment operating at a fixed location for not more than twenty-one consecutive days in conjunction with a single event or celebration.

(50) "Time/temperature" means the relationship between the length of time and the specific temperatures to which potentially hazardous foods are subjected during storage, transportation, preparation, cooking, reheating, dispensing, service, or sale.

(51) "Unpasteurized juice" means fruit or vegetable juice that has not been specifically processed to prevent, reduce, or eliminate the presence of pathogens, either through heat pasteurization or in another manner allowed under 21 CFR 101.17 (g)(7). This includes any beverage containing juice where neither the juice ingredient nor the beverage has been processed in the above manner.

(52) "Utensil" means any food contact implement used in storing, preparing, transporting, dispensing, serving, or selling of food.

(53) "Water activity (Aw)" means a measure of the amount of moisture available for bacterial growth in a food.

(54) "Wholesome" means in sound condition, clean, free from adulteration, and otherwise suitable for use as human food.

[Statutory Authority: RCW 43.20.050. 00-02-014, § 246-215-010, filed 12/27/99, effective 1/27/00; 92-08-112 (Order 261B), § 246-215-010, filed 4/1/92, effective 5/2/92.]

WAC 246-215-040 Public health labeling. (1) Food service establishment owners shall label all food products offered for sale if enclosed in a package or container; except:

(a) Food products produced on-site;

(b) Nonpotentially hazardous bakery products from approved sources; or

(c) Single service portions or other packaged foods which are shipped to the food service establishment enclosed within a properly labeled master carton.

(2) Food service establishment owners shall label modified atmosphere packaged foods in compliance with WAC 246-215-060.

(3) Food service establishment owners shall ensure labels include:

(a) The common name of the food;

(b) All ingredients, including food additives, in descending order of predominance;

(c) The name, city, state, and zip code of the manufacturer; and

(d) A packaging date code, when required by law or when the food is potentially hazardous.

(4) Food service establishment owners shall ensure information contained on labels is:

(a) Accurate;

(b) Easily readable; and

(c) In the English language, except that duplicate labeling in foreign languages is allowed.

(5) When labels, menus, or other printed or graphic materials are inaccurate or misleading and a report of illness or injury is associated with the food product, the health officer may:

(a) Stop sale of the product until correctly labeled;

(b) Require relabeling of the product; and

(c) Issue public health advisories.

(6) Whenever raw milk or raw milk cheese or similar raw milk products are offered for sale in a food service establishment, the health officer shall:

(a) Require conspicuous labeling of raw milk or products containing raw milk as "raw milk" or "contains raw milk";

(b) Require conspicuous posting of signs near the product that state: "Warning: Raw milk or foods prepared from raw milk, such as unripened or fresh cheese, may be contaminated with dangerous bacteria capable of causing severe intestinal illnesses. Contact your local health department for advice or to report a suspected illness";

(c) Exempt properly fermented raw milk cheeses from the labeling requirements contained in this subsection, provided the cheeses are produced using a flash heating process and they meet the following cheese composition requirements:

(i) Moisture content of 40% or less;

(ii) Saline-in-moisture content of 3.75% or greater;

(iii) Water activity (Aw) of 0.96 or less; and

(iv) pH of 5.40 or less.

(7) Food service establishment owners shall label packaged or bulk foods containing sulfiting agents at detectable levels as follows:

(a) Accept accurate labels placed on packaged foods by the manufacturer;

(b) Place a label on prepackaged foods stating, "This food contains a sulfiting agent";

(c) Place a sign or label on the bulk food container or in a conspicuous place nearby stating, "The following food or foods contain a sulfiting agent,. . . . . ";

(d) Except these foods may be sold without labeling:

(i) Wine by the glass;

(ii) Salad bars; and

(iii) Delicatessens and similar take-out food facilities when food is prepared on-site.

(8) Food service establishment owners shall provide prominent and conspicuous labels on bulk food display units with at least one of the following:

(a) Manufacturer's or processor's container label plainly in view;

(b) A card, sign, or other appropriate device stating the common name of the food; or

(c) A list of ingredients and any food additives contained in the product.

(9) Food service establishment owners shall ensure accurate labels are present on bulk containers of chemicals and pet foods.

(10) When raw or undercooked meats, eggs, or aquatic foods, or unpasteurized fruit or vegetable juices, are offered for immediate service or for sale as ready-to-eat, the health officer shall require these foods to be identified, as such:

(a) On the menu;

(b) On the label; or

(c) On a sign clearly visible to the patrons.

(11) The health officer may approve alternate wording on signs required in subsections (6) and (7) of this section.

[Statutory Authority: RCW 43.20.050. 00-02-014, § 246-215-040, filed 12/27/99, effective 1/27/00; 92-08-112 (Order 261B), § 246-215-040, filed 4/1/92, effective 5/2/92.]

Chapter 246-217 WAC
FOOD WORKER CARDS

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-217-001 Objective. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-001, filed 12/27/90, effective 1/31/91; Regulation.87.001, effective 3/11/60.] Repealed by 99-13-019, filed 6/7/99, effective 7/8/99. Statutory Authority: RCW 43.20.050.

246-217-002 Legal authority of the state board of health. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-002, filed 12/27/90, effective 1/31/91; Regulation.86.999, effective 3/11/60.] Repealed by 99-13-019, filed 6/7/99, effective 7/8/99. Statutory Authority: RCW 43.20.050.

246-217-011 Definitions. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-011, filed 12/27/90, effective 1/31/91; Regulation.86.001, effective 3/11/60.] Repealed by 99-13-019, filed 6/7/99, effective 7/8/99. Statutory Authority: RCW 43.20.050.

246-217-020 Communicable disease. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-020, filed 12/27/90, effective 1/31/91; Regulation.87.020, effective 3/11/60.] Repealed by 99-13-019, filed 6/7/99, effective 7/8/99. Statutory Authority: RCW 43.20.050.

246-217-030 Form of permits—Fees. [Statutory Authority: RCW 43.20.050 and chapter 69.03 RCW. 92-14-093 (Order 286B), § 246-217-030, filed 6/30/92, effective 7/31/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 69.06 RCW. 87-19-069 (Order 346), § 248-86-010, filed 9/16/87; Regulation.86.010, effective 3/11/60.] Repealed by 99-13-019, filed 6/7/99, effective 7/8/99. Statutory Authority: RCW 43.20.050.

246-217-040 Requirements for permits. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-040, filed 12/27/90, effective 1/31/91; Regulation.86.020, effective 3/11/60.] Repealed by 99-13-019, filed 6/7/99, effective 7/8/99. Statutory Authority: RCW 43.20.050.

246-217-050 Examination may be required. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-050, filed 12/27/90, effective 1/31/91; Regulation.86.040, effective 3/11/60.] Repealed by 99-13-019, filed 6/7/99, effective 7/8/99. Statutory Authority: RCW 43.20.050.

WAC 246-217-001 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-217-002 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-217-005 Purpose and authority. The purpose of chapter 246-217 WAC is to establish state board of health standards for the issuance of food worker cards (food worker permits) under chapter 69.06 RCW and RCW 43.20.050. To promote and protect the health, safety and well-being of the public and prevent the spread of disease by food, all food service workers in the state shall demonstrate through the process of examination that they possess an ade-

quate knowledge of the principles and practices involved in the safe preparation, storage, and service of foods.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-005, filed 6/7/99, effective 7/8/99.]

WAC 246-217-010 Definitions. As used in this chapter of the rules and regulations, the following definitions apply:

(1) "Additional food safety training" means completion of a comprehensive training program on food safety of at least four hours in length. Training may include topics such as: Proper cooking, hot-holding, cold-holding and cooling of potentially hazardous foods; cross-contamination prevention; HACCP and/or proper hand washing techniques. Approval of training programs shall be obtained from jurisdictional health departments or the department by the training provider. Approval of training programs must be obtained in advance.

(2) "Applicant" means an individual applying to obtain an initial or renewal food worker card.

(3) "Department" means the Washington state department of health.

(4) "Food service establishment" means:

(a) A place, location, operation, site, or facility where food is manufactured, prepared, processed, packaged, dispensed, distributed, sold, served, or offered to the consumer regardless of whether or not compensation for food occurs, including but not limited to:

(i) Restaurants, snack bars, cafeterias, taverns, bars;

(ii) Retail food stores, supermarkets, retail meat markets, retail fish markets, retail bakeries, delicatessens;

(iii) Institutional operations licensed by the department, the state department of social and health services or local health officer, such as schools, hospitals, jails, prisons, nursing homes, boarding homes, adult family homes and child care facilities;

(iv) Central preparation sites, including caterers;

(v) Satellite servicing locations;

(vi) Temporary food service establishments or mobile food units;

(vii) Bed and breakfast operations;

(viii) Remote feeding sites; and

(ix) Vending machines dispensing potentially hazardous foods.

(b) This term does not include:

(i) Private homes where food is prepared or served for consumption by household members and/or their guests;

(ii) Establishments offering only commercially prepackaged nonpotentially hazardous foods;

(iii) Commercial food processing establishments, licensed and regulated by the USDA, FDA, or WSDA; and

(iv) Farmers exempt from licensure under RCW 36.71.090.

(5) "Food service worker" means an individual who works (or intends to work) with or without pay in a food service establishment and handles unwrapped or unpackaged food or who may contribute to the transmission of infectious diseases through the nature of his/her contact with food products and/or equipment and facilities. This does not include persons who simply assist residents or patients in institutional facilities with meals, or students in K-12 schools who periodically assist with school meal service.

(6) "Food worker card" means a food and beverage service workers' permit as required under chapter 69.06 RCW.

(7) "Health officer" means the county, city-county, or district health officer of a jurisdictional health department, or his/her authorized representative, or the representative of the department.

(8) "Jurisdictional health department" refers to one of the following:

(a) Local health district as defined in chapter 70.46 RCW.

(b) City-county health department as defined in chapter 70.08 RCW.

(c) County health department as defined in chapter 70.05 RCW.

(9) "Person" means any individual, partnership, corporation, association, or other legal entity or agency of state, county, or municipal government, or agency of the federal government which is subject to the jurisdiction of the state.

(10) "Secretary" means the secretary of the state department of health.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-010, filed 6/7/99, effective 7/8/99; 91-02-051 (Order 124B), recodified as § 246-217-010, filed 12/27/90, effective 1/31/91; Regulation.87.002, effective 3/11/60.]

WAC 246-217-011 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-217-015 Applicability. (1) All food service workers must obtain a food worker card within fourteen calendar days from the beginning of employment at a food service establishment.

(2) In the case of temporary food service establishments, at a minimum the operator or person in charge each shift or during hours of operation shall have a valid food worker card obtained prior to the event.

(3) Employers at any food service establishment (permanent or temporary) must provide information or training regarding pertinent safe food handling practices to food service workers prior to beginning food handling duties if the worker does not hold a valid food worker card. Documentation that the information or training has been provided to the individual must be kept on file by the employer and be available for inspection by the health officer at all times.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-015, filed 6/7/99, effective 7/8/99.]

WAC 246-217-020 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-217-025 Issuance of food worker cards—Fees. (1) In order to qualify for issuance of an initial or renewal food worker card, an applicant must demonstrate his/her knowledge of safe food handling practices by satisfactorily completing an examination conducted by the local health officer or designee.

(2) Each applicant for a food worker card must pay a fee in the amount of eight dollars. The fee shall be used by the

jurisdictional health department or designee to defray the costs of food worker training and education, administration of the program, and testing of applicants. Photographic identification may be required at the time of application.

(3) The local health officer or designee shall furnish to the applicant a copy of the latest edition of the *"Food and Beverage Service Workers' Manual"* or similar publication, as prepared or approved by the department.

(4) Effective January 1, 2000, prior to conducting the examination of the applicant(s), the health officer (or designee) shall provide at least thirty minutes of instruction, including both audio and visual presentations. Instruction content shall include topics related to safe food preparation, storage and service. At a minimum, topics shall include: Food borne illness overview; basic bacteriology as it relates to food borne illness; proper cooking, hot holding, cold holding and cooling of potentially hazardous foods; cross-contamination prevention; and proper hand washing techniques.

(5) The food worker card examination will be uniform state-wide and will be prepared by and/or approved by the department; except that jurisdictional health departments may include additional questions to address local health concerns. The examination will cover topics identified in subsection (4) of this section, as required instruction topics. An exam must be approved by the department prior to its use. To pass the examination the applicant must answer at least eighty percent of the questions correctly.

(6) Upon payment of the required fee and the applicant's satisfactory completion of the examination, the applicant will receive the food worker card.

(7) A copy of the card or the applicable information shall be kept on file at the jurisdictional health department.

(8) Copies of food worker cards for all employed food service workers shall be kept on file by the employer or kept by the employee on his or her person and open for inspection at all times by authorized public health officials.

(9) All food worker cards shall be issued and signed by the local health officer. The local health officer may contract with persons to provide the required training or testing within his/her jurisdiction. The contracts shall include test security provisions so that test questions, scoring keys, and other examination data are exempt from public disclosure to the same extent as records maintained by state or local government agencies.

(10) The health officer or designee shall make test accommodations in accordance with the Americans with Disabilities Act for those requesting such accommodations.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-025, filed 6/7/99, effective 7/8/99.]

WAC 246-217-030 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-217-035 Validity and form of food worker cards. (1) All initial cards are valid for two years from the date of issuance.

(2) Effective July 1, 1999, renewal cards are valid for three years from the date of issuance; except: An applicant may be granted a renewal card valid for five years from the date of issuance if the applicant documents that he/she has attended "additional food safety training" within the past two years.

(3) Any legally issued food worker card shall be valid throughout Washington state.

(4) Food service workers may apply for a renewal of a food worker card up to sixty days before the expiration date on their current valid card. Proof of a valid card must be shown at the time of renewal application.

(5) The card shall be approximately three inches by five inches in size and contain the following information:

(a) The identification of the card as a Washington state food worker card or "limited duty card," as applicable;

(b) The identity of the jurisdictional health department issuing the card;

(c) Printed (or typed written) name and signature of the food service worker;

(d) Card expiration date;

(e) Signature of the health officer; and

(f) Any other identifier or other information deemed necessary by the health officer.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-035, filed 6/7/99, effective 7/8/99.]

WAC 246-217-040 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-217-045 Limited duty food worker cards. The local health officer may issue a limited duty card when necessary to reasonably accommodate a person with a disability.

(1) A person applying to obtain a limited duty card shall communicate to the local health officer which low public health risk activity(ies) (e.g., dishwashing, bussing tables, filling condiment containers, etc.) he or she will be performing.

(2) The health officer may require the applicant to attend the food safety training associated with the issuance of food worker cards. No written examination is required for the issuance of limited duty cards.

(3) The local health officer shall list the approved activity(ies) on the food worker card.

(4) The fee and length of validity of limited duty cards is the same as all other food worker cards.

(5) The employer should ensure that the individual is provided with information to safely perform the activity(ies) listed on the card.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-045, filed 6/7/99, effective 7/8/99.]

WAC 246-217-050 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-217-060 Revocation of food worker card. The food worker card may be revoked by the local health officer, or by the secretary, upon evidence indicating repeated or continuing violations of accepted procedures and practices in the preparation, service, or storage of food offered for public consumption, or upon demonstration of the

presence of a communicable disease in the infectious state, or an infectious condition of potential hazard to the public or to the persons' co-workers, or for falsification of information required for issuance of the card. Any food service worker who has had his/her card revoked shall be ineligible for issuance of another card by any local health officer in the state until the conditions for revocation are appropriately resolved.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-060, filed 6/7/99, effective 7/8/99; 91-02-051 (Order 124B), recodified as § 246-217-060, filed 12/27/90, effective 1/31/91; Regulation.86.050, effective 3/11/60.]

WAC 246-217-070 Right of appeal. Any food service worker whose food worker card has been revoked by a local health officer, or the secretary, may appeal to the local board of health, or the department's office of professional standards consistent with chapter 246-10 WAC in the event such revocation is by the secretary, for review of the findings. The appeal must be in writing and must be filed with the appropriate board or office within ten days of revocation of the card. While the appeal is pending, the revocation of the card shall be stayed until such time as the appropriate board or office has reviewed the findings and entered its decision.

[Statutory Authority: RCW 43.20.050. 99-13-019, § 246-217-070, filed 6/7/99, effective 7/8/99; 91-02-051 (Order 124B), recodified as § 246-217-070, filed 12/27/90, effective 1/31/91; Regulation.86.060, effective 3/11/60.]

Chapter 246-220 WAC

RADIATION PROTECTION—GENERAL PROVISIONS

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-220-110 Appendix A—Determination of A_1 and A_2 values. [Statutory Authority: RCW 70.98.050. 95-01-108, § 246-220-110, filed 12/21/94, effective 1/21/95. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-12-200, filed 12/11/86; Order 1095, § 402-12-200, filed 2/6/76.] Repealed by 99-15-105, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050.

246-220-120 Appendix B—Information on transportation special form licensed material. [Statutory Authority: RCW 70.98.050. 94-01-073, § 246-220-120, filed 12/9/93, effective 1/9/94. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-12-210, filed 12/11/86; Order 1095, § 402-12-210, filed 2/6/76.] Repealed by 99-15-105, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050.

WAC 246-220-010 Definitions. As used in these regulations, these terms have the definitions set forth below. Additional definitions used only in a certain part will be found in that part.

(1) "Absorbed dose" means the energy imparted by ionizing radiation per unit mass of irradiated material. The units of absorbed dose are the gray (Gy) and the rad.

(2) "Accelerator produced material" means any material made radioactive by exposing it in a particle accelerator.

(3) "Act" means Nuclear energy and radiation, chapter 70.98 RCW.

(4) "Activity" means the rate of disintegration or transformation or decay of radioactive material. The units of activity are the becquerel (Bq) and the curie (Ci).

(5) "Adult" means an individual eighteen or more years of age.

(6) "Agreement state" means any state with which the United States Nuclear Regulatory Commission has entered into an effective agreement under section 274 b. of the Atomic Energy Act of 1954, as amended (73 Stat. 689).

(7) "Airborne radioactive material" means any radioactive material dispersed in the air in the form of particulates, dusts, fumes, mists, vapors, or gases.

(8) "Airborne radioactivity area" means a room, enclosure, or operating area in which airborne radioactive material exists in concentrations (a) in excess of the derived air concentration (DAC) specified in WAC 246-221-290, Appendix A, or (b) to such a degree that an individual present in the area without respiratory protective equipment could exceed, during the hours an individual is present in a week, an intake of 0.6 percent of the annual limit on intake (ALI) or twelve DAC-hours.

(9) "Alert" means events may occur, are in progress, or have occurred that could lead to a release of radioactive material but that the release is not expected to require a response by offsite response organizations to protect persons offsite.

(10) "Annual limit on intake" (ALI) means the derived limit for the amount of radioactive material taken into the body of an adult worker by inhalation or ingestion in a year. ALI is the smaller value of intake of a given radionuclide in a year by the reference man that would result in a committed effective dose equivalent of 0.05 Sv (5 rem) or a committed dose equivalent of 0.5 Sv (50 rem) to any individual organ or tissue. ALI values for intake by ingestion and by inhalation of selected radionuclides are given in WAC 246-221-290.

(11) "Background radiation" means radiation from cosmic sources; naturally occurring radioactive materials, including radon, except as a decay product of source or special nuclear material, and including global fallout as it exists in the environment from the testing of nuclear explosive devices or from past nuclear accidents such as Chernobyl that contribute to background radiation and are not under the control of the licensee. "Background radiation" does not include sources of radiation from radioactive materials regulated by the department.

(12) "Becquerel" (Bq) means the SI unit of activity. One becquerel is equal to 1 disintegration or transformation per second (s^{-1}).

(13) "Bioassay" means the determination of kinds, quantities or concentrations, and, in some cases, the locations of radioactive material in the human body, whether by direct measurement, in vivo counting, or by analysis and evaluation of materials excreted or removed from the human body. For purposes of these regulations, "radiobioassay" is an equivalent term.

(14) "Byproduct material" means: (a) Any radioactive material (except special nuclear material) yielded in or made

radioactive by exposure to the radiation incident to the process of producing or utilizing special nuclear material, and (b) the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its source material content, including discrete surface wastes resulting from uranium or thorium solution extraction processes. Underground ore bodies depleted by these solution extraction operations do not constitute "byproduct material" within this definition.

(15) "Calendar quarter" means not less than twelve consecutive weeks nor more than fourteen consecutive weeks. The first calendar quarter of each year shall begin in January and subsequent calendar quarters shall be so arranged such that no day is included in more than one calendar quarter and no day in any one year is omitted from inclusion within a calendar quarter.No licensee or registrant shall change the method of determining calendar quarters for purposes of these regulations except at the beginning of a calendar year.

(16) "Calibration" means the determination of (a) the response or reading of an instrument relative to a series of known radiation values over the range of the instrument, or (b) the strength of a source of radiation relative to a standard.

(17) "CFR" means Code of Federal Regulations.

(18) "Class" means a classification scheme for inhaled material according to its rate of clearance from the pulmonary region of the lung. Materials are classified as D, W, or Y, which applies to a range of clearance half-times: For Class D, Days, of less than ten days, for Class W, Weeks, from ten to one hundred days, and for Class Y, Years, of greater than one hundred days. For purposes of these regulations, "lung class" and "inhalation class" are equivalent terms. For "class of waste" see WAC 246-249-040.

(19) "Collective dose" means the sum of the individual doses received in a given period of time by a specified population from exposure to a specified source of radiation.

(20) "Committed dose equivalent" ($H_{T,50}$) means the dose equivalent to organs or tissues of reference (T) that will be received from an intake of radioactive material by an individual during the fifty-year period following the intake.

(21) "Committed effective dose equivalent" ($H_{E,50}$) is the sum of the products of the weighting factors applicable to each of the body organs or tissues that are irradiated and the committed dose equivalent to each of these organs or tissues ($H_{E,50} = \Sigma\, w_T H_{T,50}$).

(22) "Constraint" or dose constraint means a value above which specified licensee actions are required.

(23) "Controlled area." See "Restricted area."

(24) "Curie" means a unit of quantity of radioactivity. One curie (Ci) is that quantity of radioactive material which decays at the rate of 3.7×10^{10} transformations per second (tps).

(25) "Declared pregnant woman" means a woman who has voluntarily informed her employer, in writing, of her pregnancy, and her estimated date of conception.

(26) "Deep dose equivalent" (H_d), which applies to external whole body exposure, means the dose equivalent at a tissue depth of 1 centimeter (1000 mg/cm^2).

(27) "Department" means the department of health, division of radiation protection, which has been designated as the state radiation control agency.

(28) "Depleted uranium" means the source material uranium in which the isotope Uranium-235 is less than 0.711 percent by weight of the total uranium present. Depleted uranium does not include special nuclear material.

(29) "Derived air concentration" (DAC) means the concentration of a given radionuclide in air which, if breathed by the reference man for a working year of two thousand hours under conditions of light work, results in an intake of one ALI. For purposes of these regulations, the condition of light work is an inhalation rate of 1.2 cubic meters of air per hour for two thousand hours in a year. DAC values are given in WAC 246-221-290.

(30) "Derived air concentration-hour" (DAC-hour) means the product of the concentration of radioactive material in air, expressed as a fraction or multiple of the derived air concentration for each radionuclide, and the time of exposure to that radionuclide, in hours. A licensee or registrant may take two thousand DAC-hours to represent one ALI, equivalent to a committed effective dose equivalent of 0.05 Sv (5 rem).

(31) "Dose" is a generic term that means absorbed dose, dose equivalent, effective dose equivalent, committed dose equivalent, committed effective dose equivalent, total organ dose equivalent, or total effective dose equivalent. For purposes of these regulations, "radiation dose" is an equivalent term.

(32) "Dose commitment" means the total radiation dose to a part of the body that will result from retention in the body of radioactive material. For purposes of estimating the dose commitment, it is assumed that from the time of intake the period of exposure to retained material will not exceed fifty years.

(33) "Dose equivalent (H_T)" means the product of the absorbed dose in tissue, quality factor, and all other necessary modifying factors at the location of interest. The units of dose equivalent are the sievert (Sv) and rem.

(34) "Dose limits" means the permissible upper bounds of radiation doses established in accordance with these regulations. For purposes of these regulations, "limits" is an equivalent term.

(35) "Dosimetry processor" means a person that processes and evaluates individual monitoring devices in order to determine the radiation dose delivered to the monitoring devices.

(36) "dpm" means disintegrations per minute. See also "curie."

(37) "Effective dose equivalent (H_E)" means the sum of the products of the dose equivalent to each organ or tissue (H_T) and the weighting factor (w_T) applicable to each of the body organs or tissues that are irradiated ($H_E = \Sigma\, w_T H_T$).

(38) "Embryo/fetus" means the developing human organism from conception until the time of birth.

(39) "Entrance or access point" means any opening through which an individual or extremity of an individual could gain access to radiation areas or to licensed radioactive materials. This includes entry or exit portals of sufficient size to permit human entry, without respect to their intended use.

(40) "Exposure" means (a), when used as a verb, being exposed to ionizing radiation or to radioactive material, or (b), when used as a noun, the quotient of ΔQ by Δm where

"ΔQ" is the absolute value of the total charge of the ions of one sign produced in air when all the electrons (negatrons and positrons) liberated by photons in a volume element of air having mass "Δm" are completely stopped in air. The special unit of exposure is the roentgen (R) and the SI equivalent is the coulomb per kilogram. One roentgen is equal to 2.58×10^{-4} coulomb per kilogram of air.

(41) "Exposure rate" means the exposure per unit of time, such as roentgen per minute and milliroentgen per hour.

(42) "External dose" means that portion of the dose equivalent received from any source of radiation outside the body.

(43) "Extremity" means hand, elbow, arm below the elbow, foot, knee, and leg below the knee.

(44) "Eye dose equivalent" means the external dose equivalent to the lens of the eye at a tissue depth of 0.3 centimeter (300 mg/cm^2).

(45) "Former United States Atomic Energy Commission (AEC) or United States Nuclear Regulatory Commission (NRC) licensed facilities" means nuclear reactors, nuclear fuel reprocessing plants, uranium enrichment plants, or critical mass experimental facilities where AEC or NRC licenses have been terminated.

(46) "Generally applicable environmental radiation standards" means standards issued by the United States Environmental Protection Agency (EPA) under the authority of the Atomic Energy Act of 1954, as amended, that impose limits on radiation exposures or levels, or concentrations or quantities of radioactive material, in the general environment outside the boundaries of locations under the control of persons possessing or using radioactive material.

(47) "Gray" (Gy) means the SI unit of absorbed dose. One gray is equal to an absorbed dose of 1 joule/kilogram (100 rad).

(48) "Healing arts" means the disciplines of medicine, dentistry, osteopathy, chiropractic, podiatry, and veterinary medicine.

(49) "High radiation area" means any area, accessible to individuals, in which radiation levels could result in an individual receiving a dose equivalent in excess of 1 mSv (0.1 rem) in one hour at 30 centimeters from any source of radiation or from any surface that the radiation penetrates. For purposes of these regulations, rooms or areas in which diagnostic x-ray systems are used for healing arts purposes are not considered high radiation areas.

(50) "Human use" means the intentional internal or external administration of radiation or radioactive material to human beings.

(51) "Immediate" or "immediately" means as soon as possible but no later than four hours after the initiating condition.

(52) "IND" means investigatory new drug for which an exemption has been claimed under the United States Food, Drug and Cosmetic Act (Title 21 CFR).

(53) "Individual" means any human being.

(54) "Individual monitoring" means the assessment of:

(a) Dose equivalent (i) by the use of individual monitoring devices or (ii) by the use of survey data; or

(b) Committed effective dose equivalent (i) by bioassay or (ii) by determination of the time-weighted air concentrations to which an individual has been exposed, that is, DAC-hours.

(55) "Individual monitoring devices" means devices designed to be worn by a single individual for the assessment of dose equivalent. For purposes of these regulations, individual monitoring equipment, personnel monitoring device, personnel dosimeter, and dosimeter are equivalent terms. Examples of individual monitoring devices are film badges, thermoluminescent dosimeters (TLDs), pocket ionization chambers, and personal air sampling devices.

(56) "Inspection" means an official examination or observation by the department including but not limited to, tests, surveys, and monitoring to determine compliance with rules, regulations, orders, requirements and conditions of the department.

(57) "Interlock" means a device arranged or connected such that the occurrence of an event or condition is required before a second event or condition can occur or continue to occur.

(58) "Internal dose" means that portion of the dose equivalent received from radioactive material taken into the body.

(59) "Irretrievable source" means any sealed source containing licensed material which is pulled off or not connected to the wireline downhole and for which all reasonable effort at recovery, as determined by the department, has been expended.

(60) "License" means a license issued by the department in accordance with the regulations adopted by the department.

(61) "Licensed material" means radioactive material received, possessed, used, transferred, or disposed under a general or specific license issued by the department.

(62) "Licensee" means any person who is licensed by the department in accordance with these regulations and the act.

(63) "Licensing state" means any state with regulations equivalent to the suggested state regulations for control of radiation relating to, and an effective program for, the regulatory control of NARM and which has been granted final designation by the Conference of Radiation Control Program Directors, Inc.

(64) "Lost or missing licensed material" means licensed material whose location is unknown. This definition includes licensed material that has been shipped but has not reached its planned destination and whose location cannot be readily traced in the transportation system.

(65) "Member of the public" means an individual except when the individual is receiving an occupational dose.

(66) "Minor" means an individual less than eighteen years of age.

(67) "Monitoring" means the measurement of radiation, radioactive material concentrations, surface area activities or quantities of radioactive material and the use of the results of these measurements to evaluate potential exposures and doses. For purposes of these regulations, radiation monitoring and radiation protection monitoring are equivalent terms.

(68) "NARM" means any naturally occurring or accelerator-produced radioactive material. It does not include by-product, source, or special nuclear material. For the purpose of meeting the definition of a Licensing State by the Confer-

ence of Radiation Control Program Directors, Inc. (CRCPD), NARM refers only to discrete sources of NARM. Diffuse sources of NARM are excluded from consideration by the CRCPD for Licensing State designation purposes.

(69) "Natural radioactivity" means radioactivity of naturally occurring nuclides.

(70) "NDA" means a new drug application which has been submitted to the United States Food and Drug Administration.

(71) "Nonstochastic effect" means a health effect, the severity of which varies with the dose and for which a threshold is believed to exist. Radiation-induced cataract formation is an example of a nonstochastic effect. For purposes of these regulations, a "deterministic effect" is an equivalent term.

(72) "Nuclear Regulatory Commission" (NRC) means the United States Nuclear Regulatory Commission or its duly authorized representatives.

(73) "Occupational dose" means the dose received by an individual in the course of employment in which the individual's assigned duties involve exposure to radiation or to radioactive material from licensed and unlicensed sources of radiation, whether in the possession of the licensee, registrant, or other person. Occupational dose does not include dose received: From background radiation, from any medical administration the individual has received, from exposure to individuals administered radioactive material and released pursuant to chapters 246-239 and 246-240 WAC, from voluntary participation in medical research programs, or as a member of the public.

(74) "Ore refineries" means all processors of a radioactive material ore.

(75) "Particle accelerator" means any machine capable of accelerating electrons, protons, deuterons, or other charged particles in a vacuum and of discharging the resultant particulate or other radiation into a medium at energies usually in excess of 1 MeV.

(76) "Permittee" means a person who has applied for, and received, a valid site use permit for use of the low-level waste disposal facility at Hanford, Washington.

(77) "Person" means any individual, corporation, partnership, firm, association, trust, estate, public or private institution, group, agency, political subdivision of this state, any other state or political subdivision or agency thereof, and any legal successor, representative, agent or agency of the foregoing, but shall not include federal government agencies.

(78) "Personal supervision" means supervision such that the supervisor is physically present at the facility and in such proximity that contact can be maintained and immediate assistance given as required.

(79) "Personnel monitoring equipment." See individual monitoring devices.

(80) "Pharmacist" means an individual licensed by this state to compound and dispense drugs, and poisons.

(81) "Physician" means an individual licensed by this state to prescribe and dispense drugs in the practice of medicine.

(82) "Planned special exposure" means an infrequent exposure to radiation, separate from and in addition to the annual occupational dose limits.

(83) "Practitioner" means an individual licensed by the state in the practice of a healing art (i.e., physician, dentist, podiatrist, chiropractor, etc.).

(84) "Public dose" means the dose received by a member of the public from exposure to sources of radiation under the licensee's or registrant's control or to radiation or radioactive material released by the licensee. Public dose does not include occupational dose or doses received from background radiation, from any medical administration the individual has received, from exposure to individuals administered radioactive material and released pursuant to chapters 246-239 and 246-240 WAC, or from voluntary participation in medical research programs.

(85) "Qualified expert" means an individual who has demonstrated to the satisfaction of the department he/she has the knowledge, training, and experience to measure ionizing radiation, to evaluate safety techniques, and to advise regarding radiation protection needs. The department reserves the right to recognize the qualifications of an individual in specific areas of radiation protection.

(86) "Quality factor" (Q) means the modifying factor, listed in Tables I and II, that is used to derive dose equivalent from absorbed dose.

TABLE I
QUALITY FACTORS AND ABSORBED DOSE EQUIVALENCIES

TYPE OF RADIATION	Quality Factor (Q)	Absorbed Dose Equal to A Unit Dose Equivalent[a]
X, gamma, or beta radiation and high-speed electrons	1	1
Alpha particles, multiple-charged particles, fission fragments and heavy particles of unknown charge	20	0.05
Neutrons of unknown energy	10	0.1
High-energy protons	10	0.1

[a]Absorbed dose in rad equal to 1 rem or the absorbed dose in gray equal to 1 Sv.

If it is more convenient to measure the neutron fluence rate rather than to determine the neutron dose equivalent rate in sievert per hour or rem per hour as required for Table I, then 0.01 Sv (1 rem) of neutron radiation of unknown energies may, for purposes of these regulations, be assumed to result from a total fluence of 25 million neutrons per square centimeter incident upon the body. If sufficient information exists to estimate the approximate energy distribution of the neutrons, the licensee or registrant may use the fluence rate per unit dose equivalent or the appropriate Q value from Table II to convert a measured tissue dose in gray or rad to dose equivalent in sievert or rem.

TABLE II

MEAN QUALITY FACTORS, Q, AND FLUENCE PER UNIT DOSE EQUIVALENT FOR MONOENERGETIC NEUTRONS

Neutron Energy (MeV)	Quality Factor[a] (Q)	Fluence per Unit Dose Equivalent[b] (neutrons cm^{-2} rem^{-1})	Fluence per Unit Dose Equivalent[b] (neutrons cm^{-2} Sv^{-1})
(thermal)2.5×10^{-8}	2	980×10^{6}	980×10^{8}
1×10^{-7}	2	980×10^{6}	980×10^{8}
1×10^{-6}	2	810×10^{6}	810×10^{8}
1×10^{-5}	2	810×10^{6}	810×10^{8}
1×10^{-4}	2	840×10^{6}	840×10^{8}
1×10^{-3}	2	980×10^{6}	980×10^{8}
1×10^{-2}	2.5	1010×10^{6}	1010×10^{8}
1×10^{-1}	7.5	170×10^{6}	170×10^{8}
5×10^{-1}	11	39×10^{6}	39×10^{8}
1	11	27×10^{6}	27×10^{8}
2.5	9	29×10^{6}	29×10^{8}
5	8	23×10^{6}	23×10^{8}
7	7	24×10^{6}	24×10^{8}
10	6.5	24×10^{6}	24×10^{8}
14	7.5	17×10^{6}	17×10^{8}
20	8	16×10^{6}	16×10^{8}
40	7	14×10^{6}	14×10^{8}
60	5.5	16×10^{6}	16×10^{8}
1×10^{2}	4	20×10^{6}	20×10^{8}
2×10^{2}	3.5	19×10^{6}	19×10^{8}
3×10^{2}	3.5	16×10^{6}	16×10^{8}
4×10^{2}	3.5	14×10^{6}	14×10^{8}

[a] Value of quality factor (Q) at the point where the dose equivalent is maximum in a 30-cm diameter cylinder tissue-equivalent phantom.

[b] Monoenergetic neutrons incident normally on a 30-cm diameter cylinder tissue-equivalent phantom.

(87) "Quarter" means a period of time equal to one-fourth of the year observed by the licensee, approximately thirteen consecutive weeks, providing that the beginning of the first quarter in a year coincides with the starting date of the year and that no day is omitted or duplicated in consecutive quarters.

(88) "Rad" means the special unit of absorbed dose. One rad equals one-hundredth of a joule per kilogram of material; for example, if tissue is the material of interest, then 1 rad equals 100 ergs per gram of tissue. One rad is equal to an absorbed dose of 100 erg/gram or 0.01 joule/kilogram (0.01 gray).

(89) "Radiation" means alpha particles, beta particles, gamma rays, x-rays, neutrons, high-speed electrons, high-speed protons, and other particles capable of producing ions. For purposes of these regulations, ionizing radiation is an equivalent term. Radiation, as used in these regulations, does not include magnetic fields or nonionizing radiation, such as radiowaves or microwaves, visible, infrared, or ultraviolet light.

(90) "Radiation area" means any area, accessible to individuals, in which radiation levels could result in an individual receiving a dose equivalent in excess of 0.05 mSv (0.005 rem) in one hour at thirty centimeters from the source of radiation or from any surface that the radiation penetrates.

(91) "Radiation machine" means any device capable of producing ionizing radiation except those devices with radioactive materials as the only source of radiation.

(92) "Radiation safety officer" means an individual who has the knowledge and responsibility to apply appropriate radiation protection regulations and has been assigned such responsibility by the licensee or registrant.

(93) "Radiation source." See "Source of radiation."

(94) "Radioactive material" means any material (solid, liquid, or gas) which emits radiation spontaneously.

(95) "Radioactive waste" means any radioactive material which is no longer of use and intended for disposal or treatment for the purposes of disposal.

(96) "Radioactivity" means the transformation of unstable atomic nuclei by the emission of radiation.

(97) "Reference man" means a hypothetical aggregation of human physical and physiological characteristics determined by international consensus. These characteristics may be used by researchers and public health workers to standardize results of experiments and to relate biological insult to a common base.

(98) "Registrable item" means any radiation machine except those exempted by RCW 70.98.180 or exempted by the department pursuant to the authority of RCW 70.98.080.

(99) "Registrant" means any person who is registered by the department or is legally obligated to register with the department in accordance with these regulations and the act.

(100) "Registration" means registration with the department in accordance with the regulations adopted by the department.

(101) "Regulations of the United States Department of Transportation" means the regulations in 49 CFR Parts 170-189, 14 CFR Part 103, and 46 CFR Part 146.

(102) "Rem" means the special unit of any of the quantities expressed as dose equivalent. The dose equivalent in rem is equal to the absorbed dose in rad multiplied by the quality factor (1 rem= 0.01 Sv).

(103) "Research and development" means: (a) Theoretical analysis, exploration, or experimentation; or (b) the extension of investigative findings and theories of a scientific or technical nature into practical application for experimental and demonstration purposes, including the experimental production and testing of models, devices, equipment, materials, and processes. Research and development does not include the internal or external administration of radiation or radioactive material to human beings.

(104) "Respiratory protective equipment" means an apparatus, such as a respirator, used to reduce an individual's intake of airborne radioactive materials.

(105) "Restricted area" means any area to which access is limited by the licensee or registrant for purposes of protecting individuals against undue risks from exposure to radiation and radioactive material. "Restricted area" shall not include any areas used for residential quarters, although a separate room or rooms in a residential building may be set apart as a restricted area.

(106) "Roentgen" (R) means the special unit of exposure. One roentgen equals 2.58 x 10^{-4} coulombs/kilogram of air.

(107) "Sanitary sewerage" means a system of public sewers for carrying off waste water and refuse, but excluding sewage treatment facilities, septic tanks, and leach fields owned or operated by the licensee or registrant.

(108) "Sealed source" means any device containing radioactive material to be used as a source of radiation which has been constructed in such a manner as to prevent the escape of any radioactive material.

(109) "Shallow dose equivalent" (H_s), which applies to the external exposure of the skin or an extremity, means the dose equivalent at a tissue depth of 0.007 centimeter (7 mg/cm^2) averaged over an area of 1 square centimeter.

(110) "SI" means an abbreviation of the International System of Units.

(111) "Sievert" means the SI unit of any of the quantities expressed as dose equivalent. The dose equivalent in sievert is equal to the absorbed dose in gray multiplied by the quality factor (1 Sv= 100 rem).

(112) "Site area emergency" means events may occur, are in progress, or have occurred that could lead to a significant release of radioactive material and that could require a response by offsite response organizations to protect persons offsite.

(113) "Site boundary" means that line beyond which the land or property is not owned, leased, or otherwise controlled by the licensee or registrant.

(114) "Source container" means a device in which radioactive material is transported or stored.

(115) "Source material" means: (a) Uranium or thorium, or any combination thereof, in any physical or chemical form, or (b) ores which contain by weight one-twentieth of one percent (0.05 percent) or more of (i) uranium, (ii) thorium, or (iii) any combination thereof. Source material does not include special nuclear material.

(116) "Source material milling" means the extraction or concentration of uranium or thorium from any ore processing primarily for its source material content.

(117) "Source of radiation" means any radioactive material, or any device or equipment emitting or capable of producing ionizing radiation.

(118) "Special nuclear material" means:

(a) Plutonium, uranium-233, uranium enriched in the isotope 233 or in the isotope 235, and any other material that the United States Nuclear Regulatory Commission, pursuant to the provisions of section 51 of the Atomic Energy Act of 1954, as amended, determines to be special nuclear material, but does not include source material; or

(b) Any material artificially enriched in any of the foregoing, but does not include source material.

(119) "Special nuclear material in quantities not sufficient to form a critical mass" means uranium enriched in the isotope U-235 in quantities not exceeding three hundred fifty grams of contained U-235; Uranium-233 in quantities not exceeding two hundred grams; Plutonium in quantities not exceeding two hundred grams; or any combination of them in accordance with the following formula: For each kind of special nuclear material, determine the ratio between the quantity of that special nuclear material and the quantity specified above for the same kind of special nuclear material. The sum of such ratios for all of the kinds of special nuclear material in combination shall not exceed "1" (i.e., unity). For example, the following quantities in combination would not exceed the limitation and are within the formula:

$$\frac{175(\text{grams contained U-235})}{350} + \frac{50(\text{grams U-233})}{200} + \frac{50(\text{grams Pu})}{200} < 1$$

(120) "Stochastic effect" means a health effect that occurs randomly and for which the probability of the effect occurring, rather than its severity, is assumed to be a linear function of dose without threshold. Hereditary effects and cancer incidence are examples of stochastic effects. For purposes of these regulations, probabilistic effect is an equivalent term.

(121) "Survey" means an evaluation of the radiological conditions and potential hazards incident to the production, use, release, disposal, or presence of sources of radiation. When appropriate, such evaluation includes, but is not limited to, tests, physical examinations, calculations and measurements of levels of radiation or concentration of radioactive material present.

(122) "Test" means (a) the process of verifying compliance with an applicable regulation, or (b) a method for determining the characteristics or condition of sources of radiation or components thereof.

(123) "These regulations" mean all parts of the rules for radiation protection of the state of Washington.

(124) "Total effective dose equivalent" (TEDE) means the sum of the deep dose equivalent for external exposures and the committed effective dose equivalent for internal exposures.

(125) "Total organ dose equivalent (TODE)" means the sum of the deep dose equivalent and the committed dose equivalent to the organ or tissue receiving the highest dose.

(126) "United States Department of Energy" means the Department of Energy established by Public Law 95-91, August 4, 1977, 91 Stat. 565, 42 U.S.C. 7101 et seq., to the extent that the department exercises functions formerly vested in the United States Atomic Energy Commission, its chairman, members, officers and components and transferred to the United States Energy Research and Development Administration and to the administrator thereof pursuant to sections 104 (b), (c) and (d) of the Energy Reorganization Act of 1974 (Public Law 93-438, October 11, 1974, 88 Stat. 1233 at 1237, 42 U.S.C. 5814 effective January 19, 1975) and retransferred to the Secretary of Energy pursuant to section 301(a) of the Department of Energy Organization Act (Public Law 95-91, August 4, 1977, 91 Stat. 565 at 577-578, 42 U.S.C. 7151, effective October 1, 1977).

(127) "Unrefined and unprocessed ore" means ore in its natural form prior to any processing, such as grinding, roasting, beneficiating, or refining.

(128) "Unrestricted area" (uncontrolled area) means any area which is not a restricted area. Areas where the external dose exceeds 2 mrem in any one hour or where the public dose, taking into account occupancy factors, will exceed 100 mrem total effective dose equivalent in any one year must be restricted.

(129) "Very high radiation area" means an area, accessible to individuals, in which radiation levels could result in an individual receiving an absorbed dose in excess of 5 Gy (500 rad) in one hour at one meter from a source of radiation or from any surface that the radiation penetrates.

(130) "Waste handling licensees" mean persons licensed to receive and store radioactive wastes prior to disposal and/or persons licensed to dispose of radioactive waste.

(131) "Week" means seven consecutive days starting on Sunday.

(132) "Weighting factor" w_T for an organ or tissue (T) means the proportion of the risk of stochastic effects resulting from irradiation of that organ or tissue to the total risk of stochastic effects when the whole body is irradiated uniformly. For calculating the effective dose equivalent, the values of w_T are:

ORGAN DOSE WEIGHTING FACTORS

Organ or Tissue	w_T
Gonads	0.25
Breast	0.15
Red bone marrow	0.12
Lung	0.12
Thyroid	0.03
Bone surfaces	0.03
Remainder	0.30[a]
Whole Body	1.00[b]

[a] 0.30 results form 0.06 for each of 5 "remainder" organs, excluding the skin and the lens of the eye, that receive the highest doses.

[b] For the purpose of weighting the external whole body dose, for adding it to the internal dose, a single weighting factor, w_T=1.0, has been specified. The use of other weighting factors for external exposure will be approved on a case-by-case basis until such time as specific guidance is issued.

(133) "Whole body" means, for purposes of external exposure, head, trunk including male gonads, arms above the elbow, or legs above the knee.

(134) "Worker" means an individual engaged in activities under a license or registration issued by the department and controlled by a licensee or registrant but does not include the licensee or registrant. Where the licensee or registrant is an individual rather than one of the other legal entities defined under "person," the radiation exposure limits for the worker also apply to the individual who is the licensee or registrant. If students of age eighteen years or older are subjected routinely to work involving radiation, then the students are considered to be workers. Individuals of less than eighteen years of age shall meet the requirements of WAC 246-221-050.

(135) "Working level" (WL) means any combination of short-lived radon daughters in 1 liter of air that will result in the ultimate emission of 1.3×10^5 MeV of potential alpha particle energy. The short-lived radon daughters are — for radon-222: polonium-218, lead-214, bismuth-214, and polonium-214; and for radon-220: polonium-216, lead-212, bismuth-212, and polonium-212.

(136) "Working level month" (WLM) means an exposure to one working level for one hundred seventy hours — two thousand working hours per year divided by twelve months per year is approximately equal to one hundred seventy hours per month.

(137) "Year" means the period of time beginning in January used to determine compliance with the provisions of these regulations. The licensee or registrant may change the starting date of the year used to determine compliance by the licensee or registrant provided that the change is made at the beginning of the year and that no day is omitted or duplicated in consecutive years.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-220-010, filed 7/21/99, effective 8/21/99; 98-13-037, § 246-220-010, filed 6/8/98, effective 7/9/98; 95-01-108, § 246-220-010, filed 12/21/94, effective 1/21/95; 94-01-073, § 246-220-010, filed 12/9/93, effective 1/9/94. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-220-010, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-12-050, filed 12/11/86; 83-19-050 (Order 2026), § 402-12-050, filed

9/16/83. Statutory Authority: Chapter 70.121 RCW. 81-16-031 (Order 1683), § 402-12-050, filed 7/28/81. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-12-050, filed 12/8/80; Order 1095, § 402-12-050, filed 2/6/76; Order 708, § 402-12-050, filed 8/24/72; Order 1, § 402-12-050, filed 7/2/71; Order 1, § 402-12-050, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-110 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-220-120 Repealed. See Disposition Table at beginning of this chapter.

Chapter 246-221 WAC
RADIATION PROTECTION STANDARDS

WAC

WAC 246-221-005 Radiation protection programs. (1) Each specific licensee shall develop, document, and implement a radiation protection program sufficient to ensure compliance with the provisions of this chapter.

(2) The licensee shall use, to the extent practicable, procedures and engineering controls based upon sound radiation protection principles to achieve occupational doses and doses to members of the public that are as low as is reasonably achievable (ALARA).

(3) The licensee shall review the radiation protection program content and implementation at the frequency specified in the license.

(4) To implement the ALARA requirements of subsection (2) of this section, and notwithstanding the requirements of WAC 246-221-060, a constraint on air emission of radioactive material to the environment, excluding radon-220, radon-222 and their daughters, shall be established by licensees such that the individual member of the public likely to receive the highest dose will not be expected to receive a total effective dose equivalent in excess of 0.1 mSv (10 mrem) per year from these emissions. This dose constraint does not apply to sealed sources or to accelerators less than 200MeV. If a licensee subject to this requirement exceeds this dose constraint, the licensee shall report the exceedance as provided in WAC 246-221-260 and promptly take appropriate corrective action to ensure against recurrence.

(5) Each licensee shall maintain records of the radiation protection program, including:

(a) The provisions of the program; and

(b) Audits, where required, and other reviews of program content and implementation.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-221-005, filed 7/21/99, effective 8/21/99; 94-01-073, § 246-221-005, filed 12/9/93, effective 1/9/94.]

WAC 246-221-160 Procedures for picking up, receiving, and opening packages. (1)(a) Each licensee who expects to receive a package containing quantities of radioactive material in excess of the Type A_1 or A_2 quantities specified in WAC 246-231-200 shall make arrangements to receive:

(i) The package when it is offered for delivery by the carrier; or

(ii) Immediate notification from the carrier of the arrival of the package at the carrier's terminal.

(b) Each licensee who picks up a package of radioactive material from a carrier's terminal shall pick up the package expeditiously upon receipt of notification from the carrier of its arrival.

(2) Each licensee shall:

(a) Monitor for radioactive contamination the external surfaces of any package labeled with a Radioactive White I, Yellow II or Yellow III label unless the package contains only radioactive material in the form of gas or in special form as defined in WAC 246-231-010; and

(b) Monitor the radiation levels of the external surfaces of any package labeled with a Radioactive White I, Yellow II or Yellow III label unless the package contains quantities of radioactive material that are less than or equal to the Type A quantity, as defined in WAC 246-231-200; and

(c) Monitor all packages known to contain radioactive material for radioactive contamination and radiation levels if the package has evidence of potential contamination, such as packages that are crushed, wet, or damaged.

(3) The monitoring shall be performed:

(a) Immediately upon receipt if there is evidence of package degradation or any other evidence of potential contamination or excessive radiation levels; or

(b) As soon as practicable after receipt, but no later than three hours after the package is received at the licensee's facility if received during the licensee's normal working hours, or no later than three hours from the beginning of the next working day if received after normal working hours.

(4) The licensee shall immediately notify the final delivery carrier and, by telephone and telegram, mailgram, or facsimile, the department when:

(a) For normal shipments, removable radioactive surface contamination exceeds either 22 dpm/cm2 for beta-gamma emitting radionuclides, all radionuclides with half-lives less than ten days, natural uranium, natural thorium, uranium-235, uranium-238, thorium-232, and thorium-228 and thorium 230 when contained in ores or concentrates; or 2.2 dpm/cm2 for all other alpha emitting radionuclides; or

(b) For exclusive use shipments, removable radioactive surface contamination exceeds either 220 dpm/cm2 for beta-gamma emitting radionuclides, all radionuclides with half-lives less than ten days, natural uranium, natural thorium, uranium-235, uranium-238, thorium-232, and thorium-228 and thorium 230 when contained in ores or concentrates; or 22 dpm/cm2 for all other alpha emitting radionuclides; or

(c) For normal or exclusive use shipments, external radiation levels exceed two mSv/hour (200 millirem per hour) at any point on the external surface of the package; or

(d) For exclusive use shipments where the shipment is made in a closed transport vehicle, packages are secured in a

fixed position, and no loading or unloading occurs between the beginning and end of transportation, external radiation levels exceed ten mSv/hour (1000 millirem per hour) at any point on the external surface of the package.

(5) Each licensee shall establish and maintain procedures for safely opening packages in which radioactive material is received, and shall assure that such procedures are followed and that due consideration is given to instructions for the type of package being opened and the monitoring of potentially contaminated packaging material (including packages containing radioactive material in gaseous form) to assure that only background levels of radiation are present prior to disposal of such material as nonradioactive waste.

(6) Licensees transferring special form sources to and from a work site in vehicles owned or operated by the licensee are exempt from the contamination monitoring requirements of subsection (2)(a) of this section but are not exempt from the monitoring requirement in subsection (2)(b) of this section for measuring radiation levels to ensure that the source is still properly lodged in its shield.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-221-160, filed 7/21/99, effective 8/21/99; 94-01-073, § 246-221-160, filed 12/9/93, effective 1/9/94. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-160, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-125, filed 12/11/86; 83-19-050 (Order 2026), § 402-24-125, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-125, filed 12/8/80; Order 1095, § 402-24-125, filed 2/6/76.]

WAC 246-221-170 Waste disposal, general requirement. (1) No licensee shall dispose of any radioactive material except:

(a) By transfer to an authorized recipient as provided in WAC 246-232-080, or chapter 246-249 WAC; or

(b) As authorized pursuant to WAC 246-221-070, 246-221-180, 246-221-190, 246-221-200, 246-221-210, or 246-221-220.

(c) By decay in storage as authorized in a specific license.

(2) A person shall be specifically licensed to receive waste containing licensed material from other persons for:

(a) Treatment prior to disposal; or

(b) Treatment or disposal by incineration; or

(c) Decay in storage; or

(d) Disposal at a land disposal facility licensed pursuant to chapter 246-250 WAC; or

(e) Storage until transferred to a disposal facility authorized to receive the waste.

(3) Nothing in chapter 246-221 WAC relieves the licensee from complying with other applicable federal, state, and local regulations governing any other toxic or hazardous properties of materials that may be disposed pursuant to this chapter.

(4) Each licensee shall maintain records of all transfers and disposals of radioactive material. Requirements for the disposition of certain disposal records, prior to license termination, are located in WAC 246-232-060.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-221-170, filed 7/21/99, effective 8/21/99; 94-01-073, § 246-221-170, filed 12/9/93, effective 1/9/94. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-170, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-130, filed 12/8/80; Order 1095, § 402-24-130, filed 2/6/76; Order 1, § 402-24-130, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-260 Reports of overexposures and excessive levels and concentrations. (1) In addition to any notification required by WAC 246-221-250, each licensee or registrant shall submit a written report to the department within thirty days after learning of any of the following occurrences:

(a) Incidents for which notification is required by WAC 246-221-250; or

(b) Doses in excess of any of the following:

(i) The occupational dose limits for adults in WAC 246-221-010; or

(ii) The occupational dose limits for a minor in WAC 246-221-050; or

(iii) The limits for an embryo/fetus of a declared pregnant woman in WAC 246-221-055; or

(iv) The limits for an individual member of the public in WAC 246-221-060; or

(v) Any applicable limit in the license; or

(vi) The ALARA constraints for air emissions established under WAC 246-221-005; or

(c) Levels of radiation or concentrations of radioactive material in:

(i) A restricted area in excess of applicable limits in the license; or

(ii) An unrestricted area in excess of ten times the applicable limit set forth in this chapter or in the license or registration, whether or not involving exposure of any individual in excess of the limits in WAC 246-221-060; or

(d) For source materials milling licensees and nuclear power plants subject to the provisions of United States Environmental Protection Agency's generally applicable environmental radiation standards in 40 CFR 190, levels of radiation or releases of radioactive material in excess of those standards, or of license conditions related to those standards.

(2) Each report required by subsection (1) of this section shall describe:

(a) The incident and its exact location, time and date;

(b) The extent of exposure of individuals to radiation or to radioactive material, including estimates of each individual's dose as required by subsection (3) of this section;

(c) Levels of radiation and concentrations of radioactive material involved, including the radionuclides, quantities, and chemical and physical form;

(d) The cause or probable cause of the exposure, levels of radiation or concentrations;

(e) The manufacturer and model number (if applicable) of any equipment that failed or malfunctioned;

(f) The results of any evaluations or assessments; and

(g) Corrective steps taken or planned to assure against a recurrence, including the schedule for achieving conformance with applicable limits, ALARA constraints, generally applicable environmental standards, and associated license conditions.

(3) Each report filed with the department pursuant to this section shall include for each individual exposed the name, social security number, and date of birth, and an estimate of the individual's dose. With respect to the limit for the embryo/fetus in WAC 246-221-055, the identifiers should be those of the declared pregnant woman. The report shall be prepared so that this information is stated in a separate and detachable part of the report.

(4) Individuals shall be notified of reports in accordance with the requirements of WAC 246-222-040.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-221-260, filed 7/21/99, effective 8/21/99; 95-01-108, § 246-221-260, filed 12/21/94, effective 1/21/95; 94-01-073, § 246-221-260, filed 12/9/93, effective 1/9/94. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-260, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-200, filed 12/8/80; Order 1095, § 402-24-200, filed 2/6/76; Order 708, § 402-24-200, filed 8/24/72; Order 1, § 402-24-200, filed 7/2/71; Order 1, § 402-24-200, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-265 Special reports to the department—Planned special exposures and leaking sources. (1) The licensee or registrant shall submit a written report to the department within thirty days following any planned special exposure conducted in accordance with WAC 246-221-030. The written report shall:

(a) Inform the department that a planned special exposure was conducted;

(b) Indicate the date the planned special exposure occurred; and

(c) Provide the information required by WAC 246-221-030.

(2) The licensee shall file a written report with the department within five days after learning that a sealed source is leaking or contaminated. The report shall describe:

(a) The source;

(b) The source holder;

(c) The equipment in which the source is installed;

(d) The test results; and

(e) The corrective action taken.

[Statutory Authority: RCW 70.98.050. 99-05-013, § 246-221-265, filed 2/5/99, effective 3/8/99; 94-01-073, § 246-221-265, filed 12/9/93, effective 1/9/94.]

WAC 246-221-280 Notifications and reports to individuals. (1) Requirements for notification and reports to individuals of exposure to radiation or radioactive material are specified in WAC 246-222-040.

(2) When a licensee or registrant is required pursuant to WAC 246-221-260 to report to the department any exposure of an identified occupationally exposed individual, or an identified member of the public, or dosimetry device assigned to any individual to radiation from any source, the licensee or registrant shall also notify the individual. Such notice shall be transmitted at a time not later than the transmittal to the department, and shall comply with the provisions of WAC 246-222-040(1).

[Statutory Authority: RCW 70.98.050. 99-05-012, § 246-221-280, filed 2/5/99, effective 3/8/99. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-280, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-280, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-215, filed 12/11/86; Order 1095, § 402-24-215, filed 2/6/76.]

Chapter 246-222 WAC
RADIATION PROTECTION—WORKER RIGHTS

WAC

WAC 246-222-030 Instructions to workers. (1) All individuals likely to receive in a year an occupational dose in excess of 1 mSv (100 mrem):

(a) Shall be kept informed of the storage, transfer, or use of sources of radiation in the licensee's or registrant's facility;

(b) Shall be instructed in the health protection considerations for the individual and potential offspring associated with exposure to radiation or radioactive material, in precautions or procedures to minimize exposure, and in the purposes and functions of protective devices employed;

(c) Shall be instructed in, and instructed to observe, to the extent within the worker's control, the applicable provisions of these regulations, department form RHF-3 "Notice to employees," and license conditions for the protection of personnel from exposures to radiation or radioactive material;

(d) Shall be instructed that any worker or representative of workers who believes that a violation of the regulations, license conditions, or unnecessary exposure to radiation exists or occurred, may request an inspection by the department by oral or written notification. The notification shall set forth specific grounds for the complaint. Any such notification to the department is confidential;

(e) Shall be instructed of their right to notify the department if the individual suspects improper actions by a licensee/registrant, or conditions which may lead to a violation of these regulations, the license/registration, or unnecessary exposure to radiation or radioactive materials;

(f) Shall be instructed that employment discrimination by a licensee/registrant against an employee because of actions described in this chapter is prohibited;

(g) Shall be instructed as to their responsibility to report promptly to the licensee or registrant any condition which may constitute, lead to, or cause a violation of the act, these regulations, and licenses or unnecessary exposure to radiation or radioactive material;

(h) Shall be instructed in the appropriate response to warnings made in the event of any unusual occurrence or malfunction that may involve exposure to radiation or radioactive material; and

(i) Shall be advised as to the radiation exposure reports which workers shall be furnished pursuant to WAC 246-222-040.

(2) Records of these instructions described in subsection (1) of this section for all individuals working in, or frequenting any portion of, a restricted area shall be maintained for inspection by the department until further notice. These records shall include a copy of this section, or all the information contained in this section, along with a dated verification signature by the employee stating that the individual has

received an explanation of the instructions contained in this section.

(3) In determining those individuals subject to the requirements of subsection (1) of this section, licensees and registrants shall take into consideration assigned activities during normal and abnormal situations involving exposure to sources of radiation which can reasonably be expected to occur during the life of a licensed or registered facility. The extent of these instructions shall be commensurate with potential radiological health protection considerations present in the workplace.

[Statutory Authority: RCW 70.98.050. 99-05-012, § 246-222-030, filed 2/5/99, effective 3/8/99; 94-01-073, § 246-222-030, filed 12/9/93, effective 1/9/94. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-030, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-48-030, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-48-030, filed 12/8/80; Order 1084, § 402-48-030, filed 1/14/76.]

Chapter 246-231 WAC

PACKAGING AND TRANSPORTATION OF RADIOACTIVE MATERIAL

WAC

WAC 246-231-001 Purpose and scope. (1) This chapter establishes requirements for packaging, preparation for shipment, and transportation of radioactive material.

(2) These rules are in addition to applicable requirements of the United States Nuclear Regulatory Commission (NRC), the United States Department of Transportation (DOT), the U.S. Postal Service[1], and other requirements of Title 246 WAC.

(3) The regulations in this chapter apply to any licensee authorized by specific or general license issued by the department to receive, possess, use, or transfer licensed material, if the licensee delivers that material to a carrier for transport, transports the material outside the site of usage as specified in the license, or transports that material on public highways. No provision of this chapter authorizes possession of licensed material.

[1] *Postal Service Manual (Domestic Mail Manual)*, section 124.3, which is incorporated by reference at 39 CFR 111.1.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-001, filed 7/21/99, effective 8/21/99.]

WAC 246-231-005 Requirement for license. No person shall deliver radioactive material to a carrier for transport or transport radioactive material except as authorized in a general or specific license issued by the department, or as exempted in this chapter.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-005, filed 7/21/99, effective 8/21/99.]

WAC 246-231-010 Definitions. The following terms are as defined here for the purpose of this chapter. To ensure compatibility with international transportation standards, all limits in this chapter are given in terms of dual units: The International System of Units (SI) followed or preceded by U.S. standard or customary units. The U.S. customary units are not exact equivalents, but are rounded to a convenient value, providing a functionally equivalent unit. For the purpose of this chapter, either unit may be used.

(1) "A1" means the maximum activity of special form radioactive material permitted in a Type A package.

(2) "A2" means the maximum activity of radioactive material, other than special form, LSA and SCO material, permitted in a Type A package. These values are either listed in WAC 246-231-200, Table A-1, or may be derived in accordance with the procedure prescribed in WAC 246-231-200.

(3) "Carrier" means a person engaged in the transportation of passengers or property by land or water as a common, contract, or private carrier, or by civil aircraft.

(4) "Certificate holder" means a person who has been issued a certificate of compliance or other package approval by the U.S. Nuclear Regulatory Commission (USNRC).

(5) "Close reflection by water" means immediate contact by water of sufficient thickness for maximum reflection of neutrons.

(6) "Containment system" means the assembly of components of the packaging intended to retain the radioactive material during transport.

(7) "Conveyance" means:

(a) For transport by public highway or rail any transport vehicle or large freight container;

(b) For transport by water any vessel, or any hold, compartment, or defined deck area of a vessel including any transport vehicle on board the vessel; and

(c) For transport by aircraft any aircraft.

(8) "Exclusive use" means the sole use by a single consignor of a conveyance for which all initial, intermediate, and final loading and unloading are carried out in accordance with the direction of the consignor or consignee. The consignor and the carrier must ensure that any loading or unloading is performed by personnel having radiological training and resources appropriate for safe handling of the consignment. The consignor must issue specific instructions, in writing, for maintenance of exclusive use shipment controls, and include them with the shipping paper information provided to the carrier by the consignor.

(9) "Fissile material" means plutonium-238, plutonium-239, plutonium-241, uranium-233, uranium-235, or any combination of these radionuclides. Unirradiated natural uranium and depleted uranium, and natural uranium or depleted uranium that has been irradiated in thermal reactors only are

not included in this definition. Certain exclusions from fissile material controls are provided in USNRC regulations 10 CFR 71.53.

(10) "Highway route controlled quantity" means a quantity within a single package which exceeds:

(a) 3,000 times the A1 or A2 quantity specified in WAC 246-231-200; or

(b) 1,000 TBq (27,000 Ci) whichever is least.

(11) "Licensed material" means radioactive material received, possessed, used, or transferred under a general or specific license issued by the department pursuant to the regulations in this chapter.

(12) "Low specific activity (LSA) material" means radioactive material with limited specific activity that satisfies the descriptions and limits set forth below. Shielding materials surrounding the LSA material may not be considered in determining the estimated average specific activity of the package contents. LSA material must be in one of three groups:

(a) LSA-I.

(i) Ores containing only naturally occurring radionuclides (e.g., uranium, thorium) and uranium or thorium concentrates of such ores; or

(ii) Solid unirradiated natural uranium or depleted uranium or natural thorium or their solid or liquid compounds or mixtures; or

(iii) Radioactive material, other than fissile material, for which the A2 value is unlimited; or

(iv) Mill tailings, contaminated earth, concrete, rubble, other debris, and activated material in which the radioactive material is essentially uniformly distributed, and the average specific activity does not exceed 1E-6 A2/g.

(b) LSA-II.

(i) Water with tritium concentration up to 0.8 TBq/liter (20.0 Ci/liter); or

(ii) Material in which the radioactive material is distributed throughout, and the average specific activity does not exceed 1E-4 A2/g for solids and gases, and 1E-5 A2/g for liquids.

(c) LSA-III. Solids (e.g., consolidated wastes, activated materials) in which:

(i) The radioactive material is distributed throughout a solid or a collection of solid objects, or is essentially uniformly distributed in a solid compact binding agent (such as concrete, bitumen, ceramic, etc.); and

(ii) The radioactive material is relatively insoluble, or it is intrinsically contained in a relatively insoluble material, so that, even under loss of packaging, the loss of radioactive material per package by leaching, when placed in water for seven days, would not exceed 0.1 A2; and

(iii) The average specific activity of the solid does not exceed 2E-3 A2/g.

(13) "Low toxicity alpha emitters" means natural uranium, depleted uranium, natural thorium; uranium-235, uranium-238, thorium-232, thorium-228 or thorium-230 when contained in ores or physical or chemical concentrates or tailings; or alpha emitters with a half-life of less than ten days.

(14) "Maximum normal operating pressure" means the maximum gauge pressure that would develop in the containment system in a period of one year under the heat condition specified in USNRC regulations Title 10 CFR 71.71 (c)(1), in the absence of venting, external cooling by an ancillary system, or operational controls during transport.

(15) "Natural thorium" means thorium with the naturally occurring distribution of thorium isotopes (essentially 100 weight percent thorium-232).

(16) "Normal form radioactive material" means radioactive material that has not been demonstrated to qualify as "special form radioactive material."

(17) "Nuclear waste" as used in WAC 246-231-140 means any quantity of radioactive material (not including radiography sources being returned to the manufacturer) required to be in Type B packaging while transported to, through, or across state boundaries to a disposal site, or to a collection point for transport to a disposal site. Nuclear waste, as used in these regulations, is a special classification of radioactive waste.

(18) "Optimum interspersed hydrogenous moderation" means the presence of hydrogenous material between packages to such an extent that the maximum nuclear reactivity results.

(19) "Package" means the packaging together with its radioactive contents as presented for transport.

(a) "Fissile material package" means a fissile material packaging together with its fissile material contents.

(b) "Type B package" means a Type B packaging together with its radioactive contents. On approval by the NRC, a Type B package design is designated as B(U) unless the package has a maximum normal operating pressure of more than 700 kPa (100 lb/in2) gauge or a pressure relief device that would allow the release of radioactive material to the environment under the tests specified in USNRC regulations Title 10 CFR 71.73 (hypothetical accident conditions), in which case it will receive a designation B(M). B(U) refers to the need for unilateral approval of international shipments; B(M) refers to the need for multilateral approval of international shipments. There is no distinction made in how packages with these designations may be used in domestic transportation. To determine their distinction for international transportation, see DOT regulations in 49 CFR Part 173. A Type B package approved before September 6, 1983, was designated only as Type B. Limitations on its use are specified in WAC 246-231-070.

(20) "Packaging" means the assembly of components necessary to ensure compliance with the packaging requirements of this chapter. It may consist of one or more receptacles, absorbent materials, spacing structures, thermal insulation, radiation shielding, and devices for cooling or absorbing mechanical shocks. The vehicle, tie-down system, and auxiliary equipment may be designated as part of the packaging.

(21) "Special form radioactive material" means radioactive material that satisfies the following conditions:

(a) It is either a single solid piece or is contained in a sealed capsule that can be opened only by destroying the capsule;

(b) The piece or capsule has at least one dimension not less than 5 mm (0.2 in); and

(c) It satisfies the requirements of USNRC regulations. A special form encapsulation designed in accordance with the USNRC requirements in effect on June 30, 1983, (see 10

CFR Part 71, revised as of January 1, 1983), and constructed before July 1, 1985, and a special form encapsulation designed in accordance with the requirements of the USNRC in effect on March 31, 1996, (see 10 CFR Part 71, revised as of January 1, 1983), and constructed before April 1, 1998, may continue to be used. Any other special form encapsulation must meet the specifications of this definition.

(22) "Specific activity" of a radionuclide means the radioactivity of the radionuclide per unit mass of that nuclide. The specific activity of a material in which the radionuclide is essentially uniformly distributed is the radioactivity per unit mass of the material.

(23) "State" means a state of the United States, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, and the Commonwealth of the Northern Mariana Islands.

(24) "Surface contaminated object (SCO)" means a solid object that is not itself classed as radioactive material, but which has radioactive material distributed on any of its surfaces. SCO must be in one of two groups with surface activity not exceeding the following limits:

(a) SCO-I: A solid object on which:

(i) The nonfixed contamination on the accessible surface averaged over 300 cm^2 (or the area of the surface if less than 300 cm^2) does not exceed 4 Bq/cm^2 (1E-4 microcurie/cm^2) for beta and gamma and low toxicity alpha emitters, or 0.4 Bq/cm^2 (1E-5 microcurie/cm^2) for all other alpha emitters;

(ii) The fixed contamination on the accessible surface averaged over 300 cm^2 (or the area of the surface if less than 300 cm^2) does not exceed 4E+4 Bq/cm^2 (1.0 microcurie/cm^2) for beta and gamma and low toxicity alpha emitters, or 4E+3 Bq/cm^2 (0.1 microcurie/cm^2) for all other alpha emitters; and

(iii) The nonfixed contamination plus the fixed contamination on the inaccessible surface averaged over 300 cm^2(or the area of the surface if less than 300 cm^2) does not exceed 4E+4 Bq/cm^2 (1 microcurie/cm^2) for beta and gamma and low toxicity alpha emitters, or 4E+3 Bq/cm^2 (0.1 microcurie/cm^2) for all other alpha emitters.

(b) SCO-II: A solid object on which the limits for SCO-I are exceeded and on which:

(i) The nonfixed contamination on the accessible surface averaged over 300 cm^2 (or the area of the surface if less than 300 cm^2) does not exceed 400 Bq/cm^2 (1E-2 microcurie/cm^2) for beta and gamma and low toxicity alpha emitters or 40 Bq/cm^2 (1E-3 microcurie/cm^2) for all other alpha emitters;

(ii) The fixed contamination on the accessible surface averaged over 300 cm^2 (or the area of the surface if less than 300 cm^2) does not exceed 8E+5 Bq/cm^2 (20 microcuries/cm^2) for beta and gamma and low toxicity alpha emitters, or 8E+4 Bq/cm^2 (2 microcuries/cm^2) for all other alpha emitters; and

(iii) The nonfixed contamination plus the fixed contamination on the inaccessible surface averaged over 300 cm^2(or the area of the surface if less than 300 cm^2) does not exceed 8E+5 Bq/cm^2 (20 microcuries/cm^2) for beta and gamma and low toxicity alpha emitters, or 8E+4 Bq/cm^2 (2 microcuries/cm^2) for all other alpha emitters.

(25) "Transport index" means the dimensionless number (rounded up to the next tenth) placed on the label of a package, to designate the degree of control to be exercised by the carrier during transportation. The transport index is determined as follows:

(a) For nonfissile material packages, the number determined by multiplying the maximum radiation level in millisievert (mSv) per hour at one meter (3.3 ft) from the external surface of the package by 100 (equivalent to the maximum radiation level in millirem per hour at one meter (3.3 ft)); or

(b) For fissile material packages, the number determined by multiplying the maximum radiation level in millisievert per hour at one meter (3.3 ft) from the external surface of the package by 100 (equivalent to the maximum radiation level in millirem per hour at one meter (3.3 ft)), or, for criticality control purposes, the number obtained as described in USNRC regulations 10 CFR 71.59, whichever is larger.

(26) "Type A quantity" means a quantity of radioactive material, the aggregate radioactivity of which does not exceed A1 for special form radioactive material, or A2, for normal form radioactive material, where A1 and A2 are given in Table A-1 of WAC 246-231-200, or may be determined by procedures described in WAC 246-231-200.

(27) "Type B quantity" means a quantity of radioactive material greater than a Type A quantity.

(28) Uranium—natural, depleted, enriched.

(a) "Natural uranium" means uranium with the naturally occurring distribution of uranium isotopes (approximately 0.711 weight percent uranium-235, and the remainder by weight essentially uranium-238).

(b) "Depleted uranium" means uranium containing less uranium-235 than the naturally occurring distribution of uranium isotopes.

(c) "Enriched uranium" means uranium containing more uranium-235 than the naturally occurring distribution of uranium isotopes.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-010, filed 7/21/99, effective 8/21/99.]

WAC 246-231-030 Transportation of licensed material. (1) Each licensee who transports licensed material outside the site of usage, as specified in the license issued by the department, or where transport is on public highways, or who delivers licensed material to a carrier for transport, shall comply with the applicable requirements of the DOT regulations in 49 CFR Parts 170 through 189 appropriate to the mode of transport.

(a) The licensee shall particularly note DOT regulations in the following areas:

(i) Packaging—49 CFR Part 173: Subparts A and B and I.

(ii) Marking and labeling—49 CFR Part 172: Subpart D, Secs. 172.400 through 172.407, Secs. 172.436 through 172.440, and subpart E.

(iii) Placarding—49 CFR Part 172: Subpart F, especially Secs. 172.500 through 172.519, 172.556, and appendices B and C.

(iv) Accident reporting—49 CFR Part 171: Secs. 171.15 and 171.16.

(v) Shipping papers and emergency information—49 CFR Part 172: Subparts C and G.

(vi) Hazardous material employee training—49 CFR Part 172: Subpart H.

(vii) Hazardous material shipper/carrier registration—49 CFR Part 107: Subpart G.

(b) The licensee shall also note DOT regulations pertaining to the following modes of transportation:

(i) Rail—49 CFR Part 174: Subparts A through D and K.

(ii) Air—49 CFR Part 175.

(iii) Vessel—49 CFR Part 176: Subparts A through F and M.

(iv) Public Highway—49 CFR Part 177 and Parts 390 through 397.

(2) If DOT regulations are not applicable to a shipment of licensed material, the licensee shall conform to the standards and requirements of the DOT specified in paragraph (1) of this section to the same extent as if the shipment or transportation were subject to DOT regulations. A request for modification, waiver, or exemption from those requirements, and any notification referred to in those requirements, must be filed with, or made to, the Director, Office of Nuclear Material Safety and Safeguards, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-030, filed 7/21/99, effective 8/21/99.]

WAC 246-231-040 Exemptions. (1) Common and contract carriers, freight forwarders, and warehouse workers who are subject to the rules and regulations of the United States Department of Transportation (49 CFR Parts 170 through 189) or the United States Postal Service (Domestic Mail Manual, Section 124.3 incorporated by reference, 39 CFR 111.11 (1974) are exempt from this chapter to the extent that they transport or store radioactive material in the regular course of their carriage for another or storage incident thereto. Common and contract carriers who are not subject to the rules and regulations of the United States Department of Transportation or United States Postal Service are subject to WAC 246-231-005 and other applicable sections of these regulations.

(2) Any licensee who delivers radioactive material to a carrier for transport, where such transport is subject to the regulations of the United States Postal Service, is exempt from the provisions of WAC 246-231-005.

(3) Physicians as defined in WAC 246-220-010, are exempt from the requirements of this chapter only to the extent that they transport radioactive material for emergency use in the practice of medicine.

(4) A licensee is exempt from all requirements of this chapter with respect to shipment or carriage of a package containing radioactive material having a specific activity not greater than 70 Bq/g (0.002 uCi/g).

(5) A licensee is exempt from all requirements of this chapter, other than WAC 246-231-030 and 246-231-120, with respect to shipment or carriage of the following packages, provided the packages contain no fissile material:

(a) A package containing no more than a Type A quantity of radioactive material;

(b) A package in which the only radioactive material is low specific activity (LSA) material or surface contaminated objects (SCO), provided the external radiation level at 3 m from the unshielded material or objects does not exceed 10 mSv/h (1 rem/h); or

(c) A package transported within locations within the United States which contains only americium or plutonium in special form with an aggregate radioactivity not to exceed 20 curies.

(6) A licensee is exempt from all requirements of this chapter, other than WAC 246-231-030 and 246-231-120, with respect to shipment or carriage of low-specific-activity (LSA) material in group LSA-I, or surface contaminated objects (SCOs) in group SCO-I.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-040, filed 7/21/99, effective 8/21/99.]

WAC 246-231-050 General licenses for carriers. (1) A general license is hereby issued to any common or contract carrier not exempted under WAC 246-231-040 to receive, possess, transport and store radioactive material in the regular course of their carriage for another or storage incident thereto, provided the transportation and storage is in accordance with the applicable requirements of the regulations, appropriate to the mode of transport, of the United States Department of Transportation.

(2) A general license is hereby issued to any private carrier to transport radioactive material, provided the transportation is in accordance with the applicable requirements of the regulations, appropriate to the mode of transport, of the United States Department of Transportation insofar as such regulations relate to the loading and storage of packages, placarding of the transporting vehicle, shipping papers, and incident reporting. Any notification of incidents referred to in those requirements shall be filed with, or made to, the department.

(3) Persons who transport radioactive material pursuant to the general licenses of subsection (1) or (2) of this section are exempt from the requirements of chapters 246-221 and 246-222 WAC to the extent that they transport radioactive material.

(4) A general license is hereby issued to deliver radioactive material to a carrier[1] for transport provided that:

(a) The licensee complies with the applicable requirements of the regulations, appropriate to the mode of transport, of the United States Department of Transportation insofar as such regulations relate to the packaging of radioactive material, to shipping papers, and to the monitoring, marking and labeling of those packages.

(b) The licensee has established procedures for opening and closing packages in which radioactive material is transported to provide safety and to assure that, prior to the delivery to a carrier for transport, each package is properly closed for transport.

(c) Prior to delivery of a package to a carrier for transport, the licensee shall assure that any special instructions needed to safely open the package are sent to or have been made available to the consignee.

(d) In addition to the requirements of the United States Department of Transportation, each package of Type A or B quantity radioactive material prepared for shipment must have the innermost container labeled as to the isotope, chem-

ical form, number of bequerels or subunits thereof, and date of determination of activity and each innermost container shall be tested to assure that the container is properly sealed and that contamination which would cause undue hazard to public health and safety or property is not present prior to transportation. This requirement does not apply to properly packaged shipments of radioactive waste consigned to a commercial low level radioactive waste disposal facility.

Note 1- For the purpose of this regulation, licensees who transport their own licensed material as a private carrier are considered to have delivered such material to a carrier for transport.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-050, filed 7/21/99, effective 8/21/99.]

WAC 246-231-060 General license—NRC-approved package. (1) A general license is hereby issued to any licensee of the department to transport, or to deliver to a carrier for transport, licensed material in a package for which a license, certificate of compliance, or other approval has been issued by the department or NRC.

(2) This general license applies only to a licensee who has a quality assurance program approved by the USNRC.

(3) This general license applies only to a licensee who:

(a) Has a copy of the certificate of compliance, or other approval of the package, and has the drawings and other documents referenced in the approval relating to the use and maintenance of the packaging and to the actions to be taken before shipment;

(b) Complies with the terms and conditions of the license, certificate, or other approval, as applicable, and the applicable requirements of the USNRC; and

(c) Submits in writing to the Director, Office of Nuclear Material Safety and Safeguards, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, before the licensee's first use of the package, the licensee's name and license number and the package identification number specified in the package approval.

(4) This general license applies only when the package approval authorizes use of the package under this general license.

(5) For a Type B or fissile material package, the design of which was approved by NRC before April 1, 1996, the general license is subject to the additional restrictions of NRC regulations 10 CFR 71.13.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-060, filed 7/21/99, effective 8/21/99.]

WAC 246-231-070 Previously approved package. (1) A Type B package previously approved by NRC but not designated as B(U) or B(M) in the identification number of the NRC Certificate of Compliance, may be used under the general license of WAC 246-231-060 with the following additional conditions:

(a) Fabrication of the packaging was satisfactorily completed by August 31, 1986, as demonstrated by application of its model number in accordance with WAC 246-231-100 (2)(c);

(b) A package used for a shipment to a location outside the United States is subject to multilateral approval, as defined in DOT regulations at 49 CFR 173.403; and

(c) A serial number that uniquely identifies each packaging which conforms to the approved design is assigned to, and legibly and durably marked on, the outside of each packaging.

(2) A Type B(U) package, a Type B(M) package, a low specific activity (LSA) material package or a fissile material package, previously approved by the NRC but without the designation "-85" in the identification number of the NRC Certificate of Compliance, may be used under the general license of WAC 246-231-060 with the following additional conditions:

(a) Fabrication of the package is satisfactorily completed by April 1, 1999, as demonstrated by application of its model number in accordance with WAC 246-231-100 (2)(c);

(b) A package used for a shipment to a location outside the United States is subject to multilateral approval as defined in DOT regulations at 49 CFR 173.403; and

(c) A serial number which uniquely identifies each packaging which conforms to the approved design is assigned to and legibly and durably marked on the outside of each packaging.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-070, filed 7/21/99, effective 8/21/99.]

WAC 246-231-080 General license—DOT specification container. (1) A general license is issued to any licensee of the department to transport, or to deliver to a carrier for transport, licensed material in a specification container for fissile material or for a Type B quantity of radioactive material as specified in DOT regulations at 49 CFR Parts 173 and 178.

(2) This general license applies only to a licensee who has a quality assurance program approved by the NRC as satisfying the provisions of subpart H of the NRC regulations, 10 CFR 71.

(3) This general license applies only to a licensee who:

(a) Has a copy of the specification; and

(b) Complies with the terms and conditions of the specification and the applicable requirements of subparts A, G, and H of NRC regulations 10 CFR 71.

(4) This general license is subject to the limitation that the specification container may not be used for a shipment to a location outside the United States, except by multilateral approval, as defined in DOT regulations at 49 CFR 173.403.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-080, filed 7/21/99, effective 8/21/99.]

WAC 246-231-090 General license—Use of foreign approved package. (1) A general license is issued to any licensee of the department to transport, or to deliver to a carrier for transport, licensed material in a package the design of which has been approved in a foreign national competent authority certificate that has been revalidated by DOT as meeting the applicable requirements of 49 CFR 171.12.

(2) Except as otherwise provided in this section, the general license applies only to a licensee who has a quality assurance program approved by the USNRC.

(3) This general license applies only to shipments made to or from locations outside the United States.

(4) This general license applies only to a licensee who:

(a) Has a copy of the applicable certificate, the revalidation, and the drawings and other documents referenced in the certificate, relating to the use and maintenance of the packaging and to the actions to be taken before shipment; and

(b) Complies with the terms and conditions of the certificate and revalidation, and with the applicable requirements of the USNRC.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-090, filed 7/21/99, effective 8/21/99.]

WAC 246-231-100 Applicability of operating controls and procedures. (1) A licensee subject to this chapter, who, under a general or specific license, transports licensed material or delivers licensed material to a carrier for transport, shall also comply with the requirements of NRC regulations 10 CFR 71 subpart G, with the quality assurance requirements of subpart H, and with the general provisions of subpart A.

(2) Before the first use of any packaging for the shipment of licensed material:

(a) The licensee shall ascertain that there are no cracks, pinholes, uncontrolled voids, or other defects that could significantly reduce the effectiveness of the packaging;

(b) Where the maximum normal operating pressure will exceed 35 kPa (5 lbf/in^2) gauge, the licensee shall test the containment system at an internal pressure at least fifty percent higher than the maximum normal operating pressure, to verify the capability of that system to maintain its structural integrity at that pressure; and

(c) The licensee shall conspicuously and durably mark the packaging with its model number, serial number, gross weight, and a package identification number assigned by NRC. Before applying the model number, the licensee shall determine that the packaging has been fabricated in accordance with the design approved by the U.S. Nuclear Regulatory Commission.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-100, filed 7/21/99, effective 8/21/99.]

WAC 246-231-110 Routine determinations. Before each shipment of licensed material, the licensee shall ensure that the package with its contents satisfies the applicable requirements of this section and of the license. The licensee shall determine that:

(1) The package is proper for the contents to be shipped;

(2) The package is in unimpaired physical condition except for superficial defects such as marks or dents;

(3) Each closure device of the packaging, including any required gasket, is properly installed and secured and free of defects;

(4) Any system for containing liquid is adequately sealed and has adequate space or other specified provision for expansion of the liquid;

(5) Any pressure relief device is operable and set in accordance with written procedures;

(6) The package has been loaded and closed in accordance with written procedures;

(7) For fissile material, any moderator or neutron absorber, if required, is present and in proper condition;

(8) Any structural part of the package that could be used to lift or tie down the package during transport is rendered inoperable for that purpose, unless it satisfies the design requirements of NRC regulations 10 CFR 71.45;

(9) The level of nonfixed (removable) radioactive contamination on the external surfaces of each package offered for shipment is as low as reasonably achievable, and within the limits specified in DOT regulations in 49 CFR 173.443;

(10) External radiation levels around the package and around the vehicle, if applicable, will not exceed the limits specified in NRC regulations 10 CFR 71.47 at any time during transportation; and

(11) Accessible package surface temperatures will not exceed the limits specified in NRC regulations 10 CFR 71.43(g) at any time during transportation.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-110, filed 7/21/99, effective 8/21/99.]

WAC 246-231-120 Air transport of plutonium. (1) Notwithstanding the provisions of any general licenses and notwithstanding any exemptions stated directly in this part or included indirectly by citation of 49 CFR chapter I, as may be applicable, the licensee shall assure that plutonium in any form, whether for import, export, or domestic shipment, is not transported by air or delivered to a carrier for air transport unless:

(a) The plutonium is contained in a medical device designed for individual human application; or

(b) The plutonium is contained in a material in which the specific activity is not greater than 0.002 uCi/g (70 Bq/g) of material and in which the radioactivity is essentially uniformly distributed; or

(c) The plutonium is shipped in a single package containing no more than an A2 quantity of plutonium in any isotope or form, and is shipped in accordance with WAC 246-231-030; or

(d) The plutonium is shipped in a package specifically authorized for the shipment of plutonium by air in the Certificate of Compliance for that package issued by the U.S. Nuclear Regulatory Commission.

(2) Nothing in subsection (1) of this section is to be interpreted as removing or diminishing the requirements of NRC regulations 10 CFR 73.24.

(3) For a shipment of plutonium by air which is subject to subsection (1)(d) of this section, the licensee shall, through special arrangement with the carrier, require compliance with 49 CFR 175.704, U.S. Department of Transportation regulations applicable to the air transport of plutonium.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-120, filed 7/21/99, effective 8/21/99.]

WAC 246-231-130 Opening instructions. Before delivery of a package to a carrier for transport, the licensee shall ensure that any special instructions needed to safely open the package have been sent to, or otherwise made available to, the consignee for the consignee's use in accordance with WAC 246-221-160.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-130, filed 7/21/99, effective 8/21/99.]

WAC 246-231-140 Advance notification of shipment of irradiated reactor fuel and nuclear waste. (1) As specified in subsections (2), (3), and (4) of this section, each licensee shall provide advance notification to the governor of a state, or the governor's designee, of the shipment of licensed material, through, or across the boundary of the state, before the transport, or delivery to a carrier, for transport, of licensed material outside the confines of the licensee's plant or other place of use or storage.

(2) Advance notification is required under this section for shipments of irradiated reactor fuel in quantities less than that subject to advance notification requirements of NRC regulations 10 CFR 73.37(f). Advance notification is also required under this section for shipment of licensed material, other than irradiated fuel, meeting the following three conditions:

(a) The licensed material is required by this section to be in Type B packaging for transportation;

(b) The licensed material is being transported to or across a state boundary en route to a disposal facility or to a collection point for transport to a disposal facility; and

(c) The quantity of licensed material in a single package exceeds the least of the following:

(i) 3000 times the A1 value of the radionuclides as specified in WAC 246-231-200, Table A-1 for special form radioactive material;

(ii) 3000 times the A2 value of the radionuclides as specified in WAC 246-231-200, Table A-1 for normal form radioactive material; or

(iii) 1000 TBq (27,000 Ci).

(3) Procedures for submitting advance notification.

(a) The notification must be made in writing to the office of each appropriate governor or governor's designee and to the Administrator of the appropriate NRC Regional Office listed in Appendix A of NRC regulations 10 CFR Part 73.

(b) A notification delivered by mail must be postmarked at least seven days before the beginning of the seven-day period during which departure of the shipment is estimated to occur.

(c) A notification delivered by messenger must reach the office of the governor or of the governor's designee at least four days before the beginning of the seven-day period during which departure of the shipment is estimated to occur.

(i) A list of the names and mailing addresses of the governors' designees receiving advance notification of transportation of nuclear waste was published in the *Federal Register* on June 30, 1995, (60 FR 34306).

(ii) The list will be published annually in the *Federal Register* on or about June 30 to reflect any changes in information.

(iii) A list of the names and mailing addresses of the governors' designees is available on request from the Director, Office of State Programs, U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001.

(d) The licensee shall retain a copy of the notification as a record for three years.

(4) Information to be furnished in advance notification of shipment. Each advance notification of shipment of irradiated reactor fuel or nuclear waste must contain the following information:

(a) The name, address, and telephone number of the shipper, carrier, and receiver of the irradiated reactor fuel or nuclear waste shipment;

(b) A description of the irradiated reactor fuel or nuclear waste contained in the shipment, as specified in the regulations of DOT in 49 CFR 172.202 and 172.203(d);

(c) The point of origin of the shipment and the seven-day period during which departure of the shipment is estimated to occur;

(d) The seven-day period during which arrival of the shipment at state boundaries is estimated to occur;

(e) The destination of the shipment, and the seven-day period during which arrival of the shipment is estimated to occur; and

(f) A point of contact, with a telephone number, for current shipment information.

(5) Revision notice. A licensee who finds that schedule information previously furnished to a governor or governor's designee, in accordance with this section, will not be met, shall telephone a responsible individual in the office of the governor of the state or of the governor's designee and inform that individual of the extent of the delay beyond the schedule originally reported. The licensee shall maintain a record of the name of the individual contacted for three years.

(6) Cancellation notice.

(a) Each licensee who cancels an irradiated reactor fuel or nuclear waste shipment for which advance notification has been sent shall send a cancellation notice to the governor of each state or to the governor's designee previously notified, and to the Administrator of the appropriate NRC Regional Office listed in Appendix A of USNRC regulations 10 CFR 73.

(b) The licensee shall state in the notice that it is a cancellation and identify the advance notification that is being canceled. The licensee shall retain a copy of the notice as a record for three years.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-140, filed 7/21/99, effective 8/21/99.]

WAC 246-231-200 Appendix A—Determination of A1 and A2. I. Values of A1 and A2 for individual radionuclides, which are the bases for many activity limits elsewhere in these regulations are given in Table A-1. The curie (Ci) values specified are obtained by converting from the Terabecquerel (TBq) figure. The curie values are expressed to three significant figures to assure that the difference in the TBq and Ci quantities is one tenth of one percent or less. Where values of A1 or A2 are unlimited, it is for radiation control purposes only. For nuclear criticality safety, some materials are subject to controls placed on fissile material.

II. For individual radionuclides whose identities are known, but which are not listed in Table A-1, the determination of the values of A1 and A2 requires NRC approval, except that the values of A1 and A2 in Table A-2 may be used without obtaining approval from the NRC.

III. In the calculations of A1 and A2 for a radionuclide not in Table A-1, a single radioactive decay chain, in which radionuclides are present in their naturally occurring proportions, and in which no daughter nuclide has a half-life either longer than ten days, or longer than that of the parent nuclide,

shall be considered as a single radionuclide, and the activity to be taken into account, and the A1 or A2 value to be applied shall be those corresponding to the parent nuclide of that chain. In the case of radioactive decay chains in which any daughter nuclide has a half-life either longer than ten days, or greater than that of the parent nuclide, the parent and those daughter nuclides shall be considered as mixtures of different nuclides.

IV. For mixtures of radionuclides whose identities and respective activities are known, the following conditions apply:

(a) For special form radioactive material, the maximum quantity transported in a Type A package:

$$\sum_{I} \frac{B(i)}{A1(i)} \quad \text{less than or equal to 1}$$

(b) For normal form radioactive material, the maximum quantity transported in a Type A package:

$$\sum_{I} \frac{B(i)}{A2(i)} \quad \text{less than or equal to 1}$$

Where B(i) is the activity of radionuclide I and A1(i) and A2(i) are the A1 and A2 values for radionuclide I, respectively.

Alternatively, an A1 value for mixtures of special form material may be determined as follows:

$$A1 \text{ for mixture} = \frac{1}{\sum_{I} \frac{f(i)}{A1(i)}}$$

Where f(i) is the fraction of activity of nuclide I in the mixture and A1(i) is the appropriate A1 value for nuclide I.

An A2 value for mixtures of normal form material may be determined as follows:

$$A2 \text{ for mixture} = \frac{1}{\sum_{I} \frac{f(i)}{A2(i)}}$$

Where f(i) is the fraction of activity of nuclide I in the mixture and A2(i) is the appropriate A2 value for nuclide I.

V. When the identity of each radionuclide is known, but the individual activities of some of the radionuclides are not known, the radionuclides may be grouped and the lowest A1 or A2 value, as appropriate, for the radionuclides in each group may be used in applying the formulas in paragraph IV. Groups may be based on the total alpha activity and the total beta/gamma activity when these are known, using the lowest A1 or A2 values for the alpha emitters and beta/gamma emitters.

Table A-1.—A1 and A2 Values for Radionuclides

Symbol of Radionuclide	Element and atomic number	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)	Specific activity (TBq/g)	(Ci/g)
Ac-225	Actinium (89)	0.6	16.2	1E-2	0.270	2.1E+3	5.8E+4
Ac-227		40	1080	2E-5	5.41E-4	2.7	7.2E+1
Ac-228		0.6	16.2	0.4	10.8	8.4E+4	2.2E+6
Ag-105	Silver (47)	2	54.1	2	54.1	1.1E+3	3.0E+4
Ag-108m		0.6	16.2	0.6	16.2	9.7E-1	2.6E+1
Ag-110m		0.4	10.8	0.4	10.8	1.8E+2	4.7E+3
Ag-111		0.6	16.2	0.5	13.5	5.8E+3	1.6E+5
Al-26	Aluminum (13)	0.4	10.8	0.4	10.8	7.0E-4	1.9E-2
Am-241	Americium (95)	2	54.1	2E-4	5.41E-3	1.3E-1	3.4
Am-242m		2	54.1	2E-4	5.41E-3	3.6E-1	1.0E+1
Am-243		2	54.1	2E-4	5.41E-3	7.4E-3	2.0E-1
Ar-37	Argon (18)	40	1080	40	1080	3.7E+3	9.9E+4
Ar-39		20	541	20	541	1.3	3.4E+1
Ar-41		0.6	16.2	0.6	16.2	1.5E+6	4.2E+7
Ar-42		0.2	5.41	0.2	5.41	9.6	2.6E+2
As-72	Arsenic (33)	0.2	5.41	0.2	5.41	6.2E+4	1.7E+6
As-73		40	1080	40	1080	8.2E+2	2.2E+4
As-74		1	27.0	0.5	13.5	3.7E+3	9.9E+4
As-76		0.2	5.41	0.2	5.41	5.8E+4	1.6E+6
As-77		20	541	0.5	13.5	3.9E+4	1.0E+6
At-211	Astatine (85)	30	811	2	54.1	7.6E+4	2.1E+6
Au-193	Gold (79)	6	162	6	162	3.4E+4	9.2E+5
Au-194		1	27.0	1	27.0	1.5E+4	4.1E+5
Au-195		10	270	10	270	1.4E+2	3.7E+3
Au-196		2	54.1	2	54.1	4.0E+3	1.1E+5
Au-198		3	81.1	0.5	13.5	9.0E+3	2.4E+5
Au-199		10	270	0.9	24.3	7.7E+3	2.1E+5
Ba-131	Barium (56)	2	54.1	2	54.1	3.1E+3	8.4E+4
Ba-133m		10	270	0.9	24.3	2.2E+4	6.1E+5
Ba-133		3	81.1	3	81.1	9.4	2.6E+2
Ba-140		0.4	10.8	0.4	10.8	2.7E+3	7.3E+4

Symbol of Radionuclide	Element and atomic number	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)	Specific activity (TBq/g)	(Ci/g)
Be-7	Beryllium (4)	20	541	20	541	1.3E+4	3.5E+5
Be-10		20	541	0.5	13.5	8.3E-4	2.2E-2
Bi-205	Bismuth (83)	0.6	16.2	0.6	16.2	1.5E-3	4.2E+4
Bi-206		0.3	8.11	0.3	8.11	3.8E+3	1.0E+5
Bi-207		0.7	18.9	0.7	18.9	1.9	5.2E+1
Bi-210m		0.3	8.11	3E-2	0.811	2.1E-5	5.7E-4
Bi-210		0.6	16.2	0.5	13.5	4.6E+3	1.2E+5
Bi-212		0.3	8.11	0.3	8.11	5.4E+5	1.5E+7
Bk-247	Berkelium (97)	2	54.1	2E-4	5.41E-3	3.8E-2	1.0
Bk-249		40	1080	8E-2	2.16	6.1E+1	1.6E+3
Br-76	Bromine (35)	0.3	8.11	0.3	8.11	9.4E+4	2.5E+6
Br-77		3	81.1	3	81.1	2.6E+4	7.1E+5
Br-82		0.4	10.8	0.4	10.8	4.0E+4	1.1E+6
C-11	Carbon (6)	1	27	0.5	13.5	3.1E+7	8.4E+8
C-14		40	1080	2	54.1	1.6E-1	4.5
Ca-41	Calcium (20)	40	1080	40	1080	3.1E-3	8.5E-2
Ca-45		40	1080	0.9	24.3	6.6E+2	1.8E+4
Ca-47		0.9	24.3	0.5	13.5	2.3E+4	6.1E+5
Cd-109	Cadmium (48)	40	1080	1	27.0	9.6E+1	2.6E+3
Cd-113m		20	541	9E-2	2.43	8.3	2.2E+2
Cd-115m		0.3	8.11	0.3	8.11	9.4E+2	2.5E+4
Cd-115		4	108	0.5	13.5	1.9E+4	5.1E+5
Ce-139	Cerium (58)	6	162	6	162	2.5E+2	6.8E+3
Ce-141		10	270	0.5	13.5	1.1E+3	2.8E+4
Ce-143		0.6	16.2	0.5	13.5	2.5E+4	6.6E+5
Ce-144		0.2	5.41	0.2	5.41	1.2E+2	3.2E+3
Cf-248	Californium (98)	30	811	3E-3	8.11E-2	5.8E+1	1.6E+3
Cf-249		2	54.1	2E-4	5.41E-3	1.5E-1	4.1
Cf-250		5	135	5E-4	1.35E-2	4.0	1.1E+2
Cf-251		2	54.1	2E-4	5.41E-3	5.9E-2	1.6
Cf-252		0.1	2.70	1E-3	2.70E-2	2.0E+1	5.4E+2
Cf-253		40	1080	6E-2	1.62	1.1E+3	2.9E+4
Cf-254		3E-3	8.11E-2	6E-4	1.62E-2	3.1E+2	8.5E+3
Cl-36	Chlorine (17)	20	541	0.5	13.5	1.2E-3	3.3E-2
Cl-38		0.2	5.41	0.2	5.41	4.9E+6	1.3E+8
Cm-240	Curium (96)	40	1080	2E-2	0.541	7.5E+2	2.0E+4
Cm-241		2	54.1	0.9	24.3	6.1E+2	1.7E+4
Cm-242		40	1080	1E-2	0.270	1.2E+2	3.3E+3
Cm-243		3	81.1	3E-4	8.11E-3	1.9	5.2E+1
Cm-244		4	108	4E-4	1.08E-2	3.0	8.1E+1
Cm-245		2	54.1	2E-4	5.41E-3	6.4E-3	1.7E-1
Cm-246		2	54.1	2E-4	5.41E-3	1.1E-2	3.1E-1
Cm-247		2	54.1	2E-4	5.41E-3	3.4E-6	9.3E-5
Cm-248		4E-2	1.08	5E-5	1.35E-3	1.6E-4	4.2E-3
Co-55	Cobalt (27)	0.5	13.5	0.5	13.5	1.1E+5	3.1E+6
Co-56		0.3	8.11	0.3	8.11	1.1E+3	3.0E+4
Co-57		8	216	8	216	3.1E+2	8.4E+3
Co-58m		40	1080	40	1080	2.2E+5	5.9E+6
Co-58		1	27.0	1	27.0	1.2E+3	3.2E+4
Co-60		0.4	10.8	0.4	10.8	4.2E+1	1.1E+3
Cr-51	Chromium (24)	30	811	30	811	3.4E+3	9.2E+4
Cs-129	Cesium (55)	4	108	4	108	2.8E+4	7.6E+5
Cs-131		40	1080	40	1080	3.8E+3	1.0E+5
Cs-132		1	27.0	1	27.0	5.7E+3	1.5E+5
Cs-134m		40	1080	9	243	3.0E+5	8.0E+6
Cs-134		0.6	16.2	0.5	13.5	4.8E+1	1.3E+3
Cs-135		40	1080	0.9	24.3	4.3E-5	1.2E-3
Cs-136		0.5	13.5	0.5	13.5	2.7E+3	7.3E+4
Cs-137		2	54.1	0.5	13.5	3.2	8.7E+1
Cu-64	Copper (29)	5	135	0.9	24.3	1.4E+5	3.9E+6
Cu-67		9	243	0.9	24.3	2.8E+4	7.6E+5
Dy-159	Dysprosium (66)	20	541	20	541	2.1E+2	5.7E+3
Dy-165		0.6	16.2	0.5	13.5	3.0E+5	8.2E+6
Dy-166		0.3	8.11	0.3	8.11	8.6E+3	2.3E+5
Er-169	Erbium (68)	40	1080	0.9	24.3	3.1E+3	8.3E+4
Er-171		0.6	16.2	0.5	13.5	9.0E+4	2.4E+6
Es-253	Einsteinium (99)a	200	5400	2E-2	5.41E-1	.....	.....
Es-254		30	811	3E-3	8.11E-2	.....	.....
Es-254m		0.6	16.2	0.4	10.8	.....	.....
Es-255							
Eu-147	Europium (63)	2	54.1	2	54.1	1.4E+3	3.7E+4

Symbol of Radionuclide	Element and atomic number	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)	Specific activity (TBq/g)	(Ci/g)
Eu-148		0.5	13.5	0.5	13.5	6.0E+2	1.6E+4
Eu-149		20	541	20	541	3.5E+2	9.4E+3
Eu-150		0.7	18.9	0.7	18.9	6.1E+4	1.6E+6
Eu-152m		0.6	16.2	0.5	13.5	8.2E+4	2.2E+6
Eu-152		0.9	24.3	0.9	24.3	6.5	1.8E+2
Eu-154		0.8	21.6	0.5	13.5	9.8	2.6E+2
Eu-155		20	541	2	54.1	1.8E+1	4.9E+2
Eu-156		0.6	16.2	0.5	13.5	2.0E+3	5.5E+4
F-18	Fluorine (9)	1	27.0	0.5	13.5	3.5E+6	9.5E+7
Fe-52	Iron (26)	0.2	5.41	0.2	5.41	2.7E+5	7.3E+6
Fe-55		40	1080	40	1080	8.8E+1	2.4E+3
Fe-59		0.8	21.6	0.8	21.6	1.8E+3	5.0E+4
Fe-60		40	1080	0.2	5.41	7.4E-4	2.0E-2
Fm-255	Fermium (100) b	40	1080	0.8	21.6		
Fm-257		10	270	8E-3	2.16E-1		
Ga-67	Gallium (31)	6	162	6	162	2.2E+4	6.0E+5
Ga-68		0.3	8.11	0.3	8.11	1.5E+6	4.1E+7
Ga-72		0.4	10.8	0.4	10.8	1.1E+5	3.1E+6
Gd-146	Gadolinium (64)	0.4	10.8	0.4	10.8	6.9E+2	1.9E+4
Gd-148		3	81.1	3E-4	8.11E-3	1.2	3.2E+1
Gd-153		10	270	5	135	1.3E+2	3.5E+3
Gd-159		4	108	0.5	13.5	3.9E+4	1.1E+6
Ge-68	Germanium (32)	0.3	8.11	0.3	8.11	2.6E+2	7.1E+3
Ge-71		40	1080	40	1080	5.8E+3	1.6E+5
Ge-77		0.3	8.11	0.3	8.11	1.3E+5	3.6E+6
H-3	Hydrogen (1)	See T- Tritium					
Hf-172	Hafnium (72)	0.5	13.5	0.3	8.11	4.1E+1	1.1E+3
Hf-175		3	81.1	3	81.1	3.9E+2	1.1E+4
Hf-181		2	54.1	0.9	24.3	6.3E+2	1.7E+4
Hf-182		4	108	3E-2	0.811	8.1E-6	2.2E-4
Hg-194	Mercury (80)	1	27.0	1	27.0	1.3E-1	3.5
Hg-195m		5	135	5	135	1.5E+4	4.0E+5
Hg-197m		10	270	0.9	24.3	2.5E+4	6.7E+5
Hg-197		10	270	10	270	9.2E+3	2.5E+5
Hg-203		4	108	0.9	24.3	5.1E+2	1.4E+4
Ho-163	Holmium (67)	40	1080	40	1080	2.7	7.6E+1
Ho-166m		0.6	16.2	0.3	8.11	6.6E-2	1.8
Ho-166		0.3	8.11	0.3	8.11	2.6E+4	7.0E+5
I-123	Iodine (53)	6	162	6	162	7.1E+4	1.9E+6
I-124		0.9	24.3	0.9	24.3	9.3E+3	2.5E+5
I-125		20	541	2	54.1	6.4E+2	1.7E+4
I-126		2	54.1	0.9	24.3	2.9E+3	8.0E+4
I-129		Unlimited	Unlimited	Unlimited	Unlimited	6.5E-6	1.8E-4
I-131		3	81.1	0.5	13.5	4.6E+3	1.2E+5
I-132		0.4	10.8	0.4	10.8	3.8E+5	1.0E+7
I-133		0.6	16.2	0.5	13.5	4.2E+4	1.1E+6
I-134		0.3	8.11	0.3	8.11	9.9E+5	2.7E+7
I-135		0.6	16.2	0.5	13.5	1.3E+5	3.5E+6
In-111	Indium (49)	2	54.1	2	54.1	1.5E+4	4.2E+5
In-113m		4	108	4	108	6.2E+5	1.7E+7
In-114m		0.3	8.11	0.3	8.11	8.6E+2	2.3E+4
In-115m		6	162	0.9	24.3	2.2E+5	6.1E+6
Ir-189	Iridium (77)	10	270	10	270	1.9E+3	5.2E+4
Ir-190		0.7	18.9	0.7	18.9	2.3E+3	6.2E+4
Ir-192		1	27.0	0.5	13.5	3.4E+2	9.2E+3
Ir-193m		10	270	10	270	2.4E+3	6.4E+4
Ir-194		0.2	5.41	0.2	5.41	3.1E+4	8.4E+5
K-40	Potassium (19)	0.6	16.2	0.6	16.2	2.4E-7	6.4E-6
K-42		0.2	5.41	0.2	5.41	2.2E+5	6.0E+6
K-43		1.0	27.0	0.5	13.5	1.2E+5	3.3E+6
Kr-81	Krypton (36)	40	1080	40	1080	7.8E-4	2.1E-2
Kr-85m		6	162	6	162	3.0E+5	8.2E+6
Kr-85		20	541	10	270	1.5E+1	3.9E+2
Kr-87		0.2	5.41	0.2	5.41	1.0E+6	2.8E+7
La-137	Lanthanum (57)	40	1080	2	54.1	1.6E-3	4.4E-2
La-140		0.4	10.8	0.4	10.8	2.1E+4	5.6E+5
Lu-172	Lutetium (71)	0.5	13.5	0.5	13.5	4.2E+3	1.1E+5
Lu-173		8	216	8	216	5.6E+1	1.5E+3
Lu-174m		20	541	8	216	2.0E+2	5.3E+3
Lu-174		8	216	4	108	2.3E+1	6.2E+2
Lu-177		30	811	0.9	24.3	4.1E+3	1.1E+5

Symbol of Radionuclide	Element and atomic number	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)	Specific activity (TBq/g)	Specific activity (Ci/g)
MFP		(6) For mixed fission products, use formula for mixtures or Table A-2					
Mg-28	Magnesium (12)	0.2	5.41	0.2	5.41	2.0E+5	5.4E+6
Mn-52	Manganese (25)	0.3	8.11	0.3	8.11	1.6E+4	4.4E+5
Mn-53		Unlimited	Unlimited	Unlimited	Unlimited	6.8E-5	1.8E-3
Mn-54		1	27.0	1	27.0	2.9E+2	7.7E+3
Mn-56		0.2	5.41	0.2	5.41	8.0E+5	2.2E+7
Mo-93	Molybdenum (42)	40	1080	7	189	4.1E-2	1.1
Mo-99		0.6	16.2	0.5	13.5c	1.8E+4	4.8E+5
N-13	Nitrogen (7)	0.6	16.2	0.5	13.5	5.4E+7	1.5E+9
Na-22	Sodium (11)	0.5	13.5	0.5	13.5	2.3E+2	6.3E+3
Na-24		0.2	5.41	0.2	5.41	3.2E+5	8.7E+6
Nb-92m	Niobium (41)	0.7	18.9	0.7	18.9	5.2E+3	1.4E+5
Nb-93m		40	1080	6	162	8.8	2.4E+2
Nb-94		0.6	16.2	0.6	16.2	6.9E-3	1.9E-1
Nb-95		1	27.0	1	27.0	1.5E+3	3.9E+4
Nb-97		0.6	16.2	0.5	13.5	9.9E+5	2.7E+7
Nd-147	Neodymium (60)	4	108	0.5	13.5	3.0E+3	8.1E+4
Nd-149		0.6	16.2	0.5	13.5	4.5E+5	1.2E+7
Ni-59	Nickel (28)	40	1080	40	1080	3.0E-3	8.0E-2
Ni-63		40	1080	30	811	2.1	5.7E+1
Ni-65		0.3	8.11	0.3	8.11	7.1E+5	1.9E+7
Np-235	Neptunium (93)	40	1080	40	1080	5.2E+1	1.4E+3
Np-236		7	189	1E-3	2.70E-2	4.7E-4	1.3E-2
Np-237		2	54.1	2.0E-4	5.41E-3	2.6E-5	7.1E-4
Np-239		6	162	0.5	13.5	8.6E+3	2.3E+5
Os-185	Osmium (76)	1	27.0	1	27.0	2.8E+2	7.5E+3
Os-191m		40	1080	40	1080	4.6E+4	1.3E+6
Os-191		10	270	0.9	24.3	1.6E+3	4.4E+4
Os-193		0.6	16.2	0.5	13.5	2.0E+4	5.3E+5
Os-194		0.2	5.41	0.2	5.41	1.1E+1	3.1E+2
P-32	Phosphorus (15)	0.3	8.11	0.3	8.11	1.1E+4	2.9E+5
P-33		40	1080	0.9	24.3	5.8E+3	1.6E+5
Pa-230	Protactinium (91)	2	54.1	0.1	2.70	1.2E+3	3.3E+4
Pa-231		0.6	16.2	6E-5	1.62E-3	1.7E-3	4.7E-2
Pa-233		5	135	0.9	24.3	7.7E+2	2.1E+4
Pb-201	Lead (82)	1	27.0	1	27.0	6.2E+4	1.7E+6
Pb-202		40	1080	2	54.1	1.2E-4	3.4E-3
Pb-203		3	81.1	3	81.1	1.1E+4	3.0E+5
Pb-205		Unlimited	Unlimited	Unlimited	Unlimited	4.5E-6	1.2E-4
Pb-210		0.6	16.2	9E-3	0.243	2.8	7.6E+1
Pb-212		0.3	8.11	0.3	8.11	5.1E+4	1.4E+6
Pd-103	Palladium (46)	40	1080	40	1080	2.8E+3	7.5E+4
Pd-107		Unlimited	Unlimited	Unlimited	Unlimited	1.9E-5	5.1E-4
Pd-109		0.6	16.2	0.5	13.5	7.9E+4	2.1E+6
Pm-143	Promethium (61)	3	81.1	3	81.1	1.3E+2	3.4E+3
Pm-144		0.6	16.2	0.6	16.2	9.2E+1	2.5E+3
Pm-145		30	811	7	189	5.2	1.4E+2
Pm-147		40	1080	0.9	24.3	3.4E+1	9.3E+2
Pm-148m		0.5	13.5	0.5	13.5	7.9E+2	2.1E+4
Pm-149		0.6	16.2	0.5	13.5	1.5E+4	4.0E+5
Pm-151		3	81.1	0.5	13.5	2.7E+4	7.3E+5
Po-208	Polonium (84)	40	1080	2E-2	0.541	2.2E+1	5.9E+2
Po-209		40	1080	2E-2	0.541	6.2E-1	1.7E+1
Po-210		40	1080	2E-2	0.541	1.7E+2	4.5E+3
Pr-142	Praseodymium (59)	0.2	5.41	0.2	5.41	4.3E+4	1.2E+6
Pr-143		4	108	0.5	13.5	2.5E+3	6.7E+4
Pt-188	Platinum (78)	0.6	16.2	0.6	16.2	2.5E+3	6.8E+4
Pt-191		3	81.1	3	81.1	8.7E+3	2.4E+5
Pt-193m		40	1080	9	243	5.8E+3	1.6E+5
Pt-193		40	1080	40	1080	1.4	3.7E+1
Pt-195m		10	270	2	54.1	6.2E+3	1.7E+5
Pt-197m		10	270	0.9	24.3	3.7E+5	1.0E+7
Pt-197		20	541	0.5	13.5	3.2E+4	8.7E+5
Pu-236	Plutonium (94)	7	189	7E-4	1.89E-2	2.0E+1	5.3E+2
Pu-237		20	541	20	541	4.5E+2	1.2E+4
Pu-238		2	54.1	2E-4	5.41E-3	6.3E-1	1.7E+1
Pu-239		2	54.1	2E-4	5.41E-3	2.3E-3	6.2E-2
Pu-240		2	54.1	2E-4	5.41E-3	8.4E-3	2.3E-1
Pu-241		40	1080	1E-2	0.270	3.8	1.0E+2
Pu-242		2	54.1	2E-4	5.41E-3	1.5E-4	3.9E-3
Pu-244		0.3	8.11	2E-4	5.41E-3	6.7E-7	1.8E-5

Symbol of Radionuclide	Element and atomic number	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)	Specific activity (TBq/g)	Specific activity (Ci/g)
Ra-223	Radium (88)	0.6	16.2	3E-2	0.811	1.9E+3	5.1E+4
Ra-224		0.3	8.11	6E-2	1.62	5.9E+3	1.6E+5
Ra-225		0.6	16.2	2E-2	0.541	1.5E+3	3.9E+4
Ra-226		0.3	8.11	2E-2	0.541	3.7E-2	1.0
Ra-228		0.6	16.2	4E-2	1.08	1.0E+1	2.7E+2
Rb-81	Rubidium (37)	2	54.1	0.9	24.3	3.1E+5	8.4E+6
Rb-83		2	54.1	2	54.1	6.8E+2	1.8E+4
Rb-84		1	27.0	0.9	24.3	1.8E+3	4.7E+4
Rb-86		0.3	8.11	0.3	8.11	3.0E+3	8.1E+4
Rb-87		Unlimited	Unlimited	Unlimited	Unlimited	3.2E-9	8.6E-8
Rb (natural)		Unlimited	Unlimited	Unlimited	Unlimited	6.7E+6	1.8E+8
Re-183	Rhenium (75)	5	135	5	135	3.8E+2	1.0E+4
Re-184m		3	81.1	3	81.1	1.6E+2	4.3E+3
Re-184		1	27.0	1	27.0	6.9E+2	1.9E+4
Re-186		4	108	0.5	13.5	6.9E+3	1.9E+5
Re-187		Unlimited	Unlimited	Unlimited	Unlimited	1.4E-9	3.8E-8
Re-188		0.2	5.41	0.2	5.41	3.6E+4	9.8E+5
Re-189		4	108	0.5	13.5	2.5E+4	6.8E+5
Re (natural)		Unlimited	Unlimited	Unlimited	Unlimited		2.4E-8
Rh-99	Rhodium (45)	2	54.1	2	54.1	3.0E+3	8.2E+4
Rh-101		4	108	4	108	4.1E+1	1.1E+3
Rh-102m		2	54.1	0.9	24.3	2.3E+2	6.2E+3
Rh-102		0.5	13.5	0.5	13.5	4.5E+1	1.2E+3
Rh-103m		40	1080	40	1080	1.2E+6	3.3E+7
Rh-105		10	270	0.9	24.3	3.1E+4	8.4E+5
Rn-222	Radon (86)	0.2	5.41	4E-3	0.108	5.7E+3	1.5E+5
Ru-97	Ruthenium (44)	4	108	4	108	1.7E+4	4.6E+5
Ru-103		2	54.1	0.9	24.3	1.2E+3	3.2E+4
Ru-105		0.6	16.2	0.5	13.5	2.5E+5	6.7E+6
Ru-106		0.2	5.41	0.2	5.41	1.2E+2	3.3E+3
S-35	Sulfur (16)	40	1080	2	54.1	1.6E+3	4.3E+4
Sb-122	Antimony (51)	0.3	8.11	0.3	8.11	1.5E+4	4.0E+5
Sb-124		0.6	16.2	0.5	13.5	6.5E+2	1.7E+4
Sb-125		2	54.1	0.9	24.3	3.9E+1	1.0E+3
Sb-126		0.4	10.8	0.4	10.8	3.1E+3	8.4E+4
Sc-44	Scandium (21)	0.5	13.5	0.5	13.5	6.7E+5	1.8E+7
Sc-46		0.5	13.5	0.5	13.5	1.3E+3	3.4E+4
Sc-47		9	243	0.9	24.3	3.1E+4	8.3E+5
Sc-48		0.3	8.11	0.3	8.11	5.5E+4	1.5E+6
Se-75	Selenium (34)	3	81.1	3	81.1	5.4E+2	1.5E+4
Se-79		40	1080	2	54.1	2.6E-3	7.0E-2
Si-31	Silicon (14)	0.6	16.2	0.5	13.5	1.4E+6	3.9E+7
Si-32		40	1080	0.2	5.41	3.9	1.1E+2
Sm-145	Samarium (62)	20	541	20	541	9.8E+1	2.6E+3
Sm-147		Unlimited	Unlimited	Unlimited	Unlimited	8.5E-1	2.3E-8
Sm-151		40	1080	4	108	9.7E-1	2.6E+1
Sm-153		4	108	0.5	13.5	1.6E+4	4.4E+5
Sn-113	Tin (50)	4	108	4	108	3.7E+2	1.0E+4
Sn-117m		6	162	2	54.1	3.0E+3	8.2E+4
Sn-119m		40	1080	40	1080	1.4E+2	3.7E+3
Sn-121m		40	1080	0.9	24.3	2.0	5.4E+1
Sn-123		0.6	16.2	0.5	13.5	3.0E+2	8.2E+3
Sn-125		0.2	5.41	0.2	5.41	4.0E+3	1.1E+5
Sn-126		0.3	8.11	0.3	8.11	1.0E-3	2.8E-2
Sr-82	Strontium (38)	0.2	5.41	0.2	5.41	2.3E+3	6.2E+4
Sr-85m		5	135	5	135	1.2E+6	3.3E+7
Sr-85		2	54.1	2	54.1	8.8E+2	2.4E+4
Sr-87m		3	81.1	3	81.1	4.8E+5	1.3E+7
Sr-89		0.6	16.2	0.5	13.5	1.1E+3	2.9E+4
Sr-90		0.2	5.41	0.1	2.70	5.1	1.4E+2
Sr-91		0.3	8.11	0.3	8.11	1.3E+5	3.6E+6
Sr-92		0.8	21.6	0.5	13.5	4.7E+5	1.3E+7
T	Tritium (1)	40	1080	40	1080	3.6E+2	9.7E+3
Ta-178	Tantalum (73)	1	27.0	1	27.0	4.2E+6	1.1E+8
Ta-179		30	811	30	811	4.1E+1	1.1E+3
Ta-182		0.8	21.6	0.5	13.5	2.3E+2	6.2E+3
Tb-157	Terbium (65)	40	1080	10	270	5.6E-1	1.5E+1
Tb-158		1	27.0	0.7	18.9	5.6E-1	1.5E+1
Tb-160		0.9	24.3	0.5	13.5	4.2E+2	1.1E+4
Tc-95m	Technetium (43)	2	54.1	2	54.1	8.3E+2	2.2E+4
Tc-96m		0.4	10.8	0.4	10.8	1.4E+6	3.8E+7

Symbol of Radionuclide	Element and atomic number	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)	Specific activity (TBq/g)	(Ci/g)
Tc-96		0.4	10.8	0.4	10.8	1.2E+4	3.2E+5
Tc-97m		40	1080	40	1080	5.6E+2	1.5E+4
Tc-97		Unlimited	Unlimited	Unlimited	Unlimited	5.2E-5	1.4E-3
Tc-98		0.7	18.9	0.7	18.9	3.2E-5	8.7E-4
Tc-99m		8	216	8	216	1.9E+5	5.3E+6
Tc-99		40	1080	0.9	24.3	6.3E-4	1.7E-2
Te-118	Tellurium (52)	0.2	5.41	0.2	5.41	6.8E+3	1.8E+5
Te-121m		5	135	5	135	2.6E+2	7.0E+3
Te-121		2	54.1	2	54.1	2.4E+3	6.4E+4
Te-123m		7	189	7	189	3.3E+2	8.9E+3
Te-125m		30	811	9	243	6.7E+2	1.8E+4
Te-127m		20	541	0.5	13.5	3.5E+2	9.4E+3
Te-127		20	541	0.5	13.5	9.8E+4	2.6E+6
Te-129m		0.6	16.2	0.5	13.5	1.1E+3	3.0E+4
Te-129		0.6	16.2	0.5	13.5	7.7E+5	2.1E+7
Te-131m		0.7	18.9	0.5	13.5	3.0E+4	8.0E+5
Te-132		0.4	10.8	0.4	10.8	1.1E+4	3.0E+5
Th-227	Thorium (90)	9	243	1E-2	0.270	1.1E+3	3.1E+4
Th-228		0.3	8.11	4E-4	1.08E-2	3.0E+1	8.2E+2
Th-229		0.3	8.11	3E-5	8.11E-4	7.9E-3	2.1E-1
Th-230		2	54.1	2E-4	5.41E-3	7.6E-4	2.1E-2
Th-231		40	1080	0.9	24.3	2.0E+4	5.3E+5
Th-232		Unlimited	Unlimited	Unlimited	Unlimited	4.0E-9	1.1E-7
Th-234		0.2	5.41	0.2	5.41	8.6E+2	2.3E+4
Th (natural)		Unlimited	Unlimited	Unlimited	Unlimited	8.1E-9	2.2E-7
Ti-44	Titanium (22)	0.5	13.5	0.2	5.41	6.4	1.7E+2
Tl-200	Thallium (81.1)	0.8	21.6	0.8	21.6	2.2E+4	6.0E+5
Tl-201		10	270	10	270	7.9E+3	2.1E+5
Tl-202		2	54.1	2	54.1	2.0E+3	5.3E+4
Tl-204		4	108	0.5	13.5	1.7E+1	4.6E+2
Tm-167	Thulium (69)	7	189	7	189	3.1E+3	8.5E+4
Tm-168		0.8	21.6	0.8	21.6	3.1E+2	8.3E+3
Tm-170		4	108	0.5	13.5	2.2E+2	6.0E+3
Tm-171		40	1080	10	270	4.0E+1	1.1E+3
U-230	Uranium (92)	40	1080	1E-2	0.270	1.0E+3	2.7E+4
U-232		3	81.1	3E-4	8.11E-3	8.3E-1	2.2E+1
U-233		10	270	1E-3	2.70E-2	3.6E-4	9.7E-3
U-234		10	270	1E-3	2.70E-2	2.3E-4	6.2E-3
U-235		Unlimited	Unlimited	Unlimited	Unlimited	8.0E-8	2.2E-6
U-236		10	270	1E-3	2.70E-2	2.4E-6	6.5E-5
U-238		Unlimited	Unlimited	Unlimited	Unlimited	1.2E-8	3.4E-7
U (natural)		Unlimited	Unlimited	Unlimited	Unlimited	2.6E-8	7.1E-7
U (enriched 5% or less)		Unlimited	Unlimited	Unlimited	Unlimited	(See Table A-3)	
U (enriched more than 5%)		10	270	1E-3	2.70E-2	(See Table A-3)	
U (depleted)		Unlimited	Unlimited	Unlimited	Unlimited	(See Table A-3)	
V-48	Vanadium (23)	0.3	8.11	0.3	8.11	6.3E+3	1.7E+5
V-49		40	1080	40	1080	3.0E+2	8.1E+3
W-178	Tungsten (74)	1	27.0	1	27.0	1.3E+3	3.4E+4
W-181		30	811	30	811	2.2E+2	6.0E+3
W-185		40	1080	0.9	24.3	3.5E+2	9.4E+3
W-187		2	54.1	0.5	13.5	2.6E+4	7.0E+5
W-188		0.2	5.41	0.2	5.41	3.7E+2	1.0E+4
Xe-122	Xenon (54)	0.2	5.41	0.2	5.41	4.8E+4	1.3E+6
Xe-123		0.2	5.41	0.2	5.41	4.4E+5	1.2E+7
Xe-127		4	108	4	108	1.0E+3	2.8E+4
Xe-131m		40	1080	40	1080	3.1E+3	8.4E+4
Xe-133		20	541	20	541	6.9E+3	1.9E+5
Xe-135		4	108	4	108	9.5E+4	2.6E+6
Y-87	Yttrium (39)	2	54.1	2	54.1	1.7E+4	4.5E+5
Y-88		0.4	10.8	0.4	10.8	5.2E+2	1.4E+4
Y-90		0.2	5.41	0.2	5.41	2.0E+4	5.4E+5
Y-91m		2	54.1	2	54.1	1.5E+6	4.2E+7
Y-91		0.3	8.11	0.3	8.11	9.1E+2	2.5E+4
Y-92		0.2	5.41	0.2	5.41	3.6E+5	9.6E+6
Y-93		0.2	5.41	0.2	5.41	1.2E+5	3.3E+6
Yb-169	Ytterbium (70)	3	81.1	3	81.1	8.9E+2	2.4E+4
Yb-175		30	811	0.9	24.3	6.6E+3	1.8E+5
Zn-65	Zinc (30)	2	54.1	2	54.1	3.0E+2	8.2E+3
Zn-69m		2	54.1	0.5	13.5	1.2E+5	3.3E+6
Zn-69		4	108	0.5	13.5	1.8E+6	4.9E+7
Zr-88	Zirconium (40)	3	81.1	3	81.1	6.6E+2	1.8E+4

Symbol of Radionuclide	Element and atomic number	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)	Specific activity (TBq/g)	(Ci/g)
Zr-93		40	1080	0.2	5.41	9.3E-5	2.5E-3
Zr-95		1	27.0	0.9	24.3	7.9E+2	2.1E+4
Zr-97		0.3	8.11	0.3	8.11	7.1E+4	1.9E+6

a International shipments of Einsteinium require multilateral approval of A1 and A2 values.
b International shipments of Fermium require multilateral approval of A1 and A2 values.
c 20 Ci for Mo99 for domestic use.

Table A-2.—General Values for A1 and A2

Contents	A1 (TBq)	A1 (Ci)	A2 (TBq)	A2 (Ci)
Only beta- or gamma-emitting nuclides are known to be present	0.2	5	0.02	0.5
Alpha-emitting nuclides are known to be present, or no relevant data are available	0.10	2.70	2E-5	5.41E-4

Table A-3.—Activity-mass Relationships for Uranium

Uranium Enrichment 1 wt % U-235 present	Specific Activity TBq/g	Ci/g
0.45	1.8E-8	5.0E-7
0.72	2.6E-8	7.1E-7
1.0	2.8E-8	7.6E-7
1.5	3.7E-8	1.0E-6
5.0	1.0E-7	2.7E-6
10.0	1.8E-7	4.8E-6
20.0	3.7E-7	1.0E-5
35.0	7.4E-7	2.0E-5
50.0	9.3E-7	2.5E-5
90.0	2.2E-6	5.8E-5
93.0	2.6E-6	7.0E-5
95.0	3.4E-6	9.1E-5

1 The figures for uranium include representative values for the activity of the uranium-234 that is concentrated during the enrichment process.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-231-200, filed 7/21/99, effective 8/21/99.]

Chapter 246-232 WAC

RADIOACTIVE MATERIAL—LICENSING APPLICABILITY

WAC

WAC 246-232-001 Purpose and scope. (1) This chapter prescribes rules governing licensing of radioactive material. No person shall receive, possess, use, transfer, own or acquire radioactive material except as authorized in a specific or general license issued pursuant to chapters 246-233 or 246-235 WAC or as otherwise provided in this chapter.

(2) In addition to the requirements of this chapter, or chapters 246-233 or 246-235 WAC, all licensees are subject to the requirements of chapters 246-220, 246-221, 246-222, 246-231, 246-247, and 246-254 WAC. Licensees engaged in the practice of nuclear medicine are subject to the requirements of chapter 246-239 WAC, licensees engaged in industrial radiographic operations are subject to the requirements of chapter 246-243 WAC, licensees using sealed sources in the healing arts are subject to the requirements of chapter 246-240 WAC, licensees using radioactive material in well logging and subsurface tracer studies are subject to the requirements of chapter 246-244 WAC, licensees engaged in land disposal of radioactive waste are subject to the requirements of chapter 246-250 WAC, and licensees owning or operating uranium or thorium mills and associated mill tailings are subject to the requirements of chapter 246-252 WAC.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-232-001, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-001, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-010, filed 9/16/83; 79-12-073 (Order 1459), § 402-19-010, filed 11/30/79, effective 1/1/80. Formerly chapter 402-20 WAC.]

WAC 246-232-040 Reciprocal recognition of licenses. (1) Subject to these regulations, any person who holds a specific license from the United States Nuclear Regulatory Commission or any agreement state or licensing state, and issued by the agency having jurisdiction where the licensee maintains an office for directing the licensed activity and at which radiation safety records are normally maintained, is hereby granted a general license to conduct the activities authorized in such licensing document within this state for a period not in excess of one hundred eighty days in that twelve month period which commences the date approval is granted, and the appropriate fee received, by the department provided that:

(a) The licensing document does not limit the activity authorized by such document to specified installations or locations;

(b) The licensed activity is not conducted in an area under exclusive federal jurisdiction;

(c) The out-of-state licensee notifies the department in writing and pays or has paid the appropriate fee (refer to chapter 246-254 WAC), at least three days prior to each entry to the state to engage in such activity. The written notification must be sent to the Radioactive Materials Section, Department of Health, Mailstop 47827, Olympia, Washington 98504-7827 and the fee should be sent to Washington State Department of Health, Revenue Accounting, P.O. Box 1099, Olympia, Washington 98504. Such notification shall indicate the location, period, and type of proposed possession and use within the state, and shall be accompanied by copies of the pertinent licensing documents. If, for a specific case, the three-day period would impose an undue hardship on the out-of-state licensee, the licensee may, upon telephone application to the department (360 236-3220), obtain permission to

proceed sooner. The department may waive the requirement for filing additional written notifications during the remainder of the twelve months following the receipt of the initial notification from a person engaging in activities under the general license provided in this subsection;

(d) The out-of-state licensee complies with all applicable regulations of the department and with all the terms and conditions of the licensing document, except any such terms and conditions which may be inconsistent with applicable regulations of the department;

(e) The out-of-state licensee supplies such other information as the department may request; and

(f) The out-of-state licensee shall not transfer or dispose of radioactive material possessed or used under the general license provided in this subsection except by transfer to a person:

(i) Specifically licensed by the department or by the United States Nuclear Regulatory Commission, an agreement state or a licensing state to receive such material; or

(ii) Exempt from the requirements for a license for such material under WAC 246-232-010 (2)(a).

(2) Notwithstanding the provisions of subsection (1) of this section, any person who holds a specific license issued by the United States Nuclear Regulatory Commission, an agreement state or a licensing state authorizing the holder to manufacture, transfer, install, or service a device described in WAC 246-233-020(4) within the areas subject to the jurisdiction of the licensing body is hereby granted a general license to install, transfer, demonstrate or service a device in this state in areas not under exclusive federal jurisdiction provided that:

(a) Such person shall file a report with the department within thirty days after the end of each calendar quarter in which any device is transferred to or installed in this state. Each such report shall identify each general licensee to whom such device is transferred by name and address, the type of device transferred, and the quantity and type of radioactive material contained in the device;

(b) The device has been manufactured, labeled, installed, and serviced in accordance with applicable provisions of the specific license issued to such person by the United States Nuclear Regulatory Commission, an agreement state or a licensing state;

(c) Such person shall assure that any labels required to be affixed to the device under regulations of the authority which licensed manufacture of the device bear a statement that "Removal of this label is prohibited"; and

(d) The holder of the specific license shall furnish to each general licensee to whom such device is transferred or on whose premises such device is installed a copy of the general license contained in WAC 246-233-020(4).

(3) The department may withdraw, limit, or qualify its acceptance of any specific license or equivalent licensing document issued by another agency, or any product distributed pursuant to such licensing document, upon determining that such action is necessary in order to prevent undue hazard to public health and safety or property.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-232-040, filed 7/21/99, effective 8/21/99; 98-13-037, § 246-232-040, filed 6/8/98, effective 7/9/98. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-19-250, filed 12/11/86; 83-19-050 (Order 2026), § 402-19-250, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-19-250, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-250, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-210.]

WAC 246-232-060 Termination of licenses and decommissioning of sites and separate buildings or outdoor areas. (1) Each specific licensee shall immediately notify the department in writing when the licensee decides to permanently discontinue all activities involving materials authorized under the license and request termination of the license. This notification and request for termination of the license must include the reports and information specified in subsection (3)(c) and (d) of this section. The licensee is subject to the provisions of subsections (3) and (4) of this section, as applicable.

(2) No less than thirty days before the expiration date specified in a specific license, the licensee shall either:

(a) Submit an application for license renewal under WAC 246-235-050; or

(b) Notify the department in writing if the licensee decides not to renew the license.

(3) If a licensee does not submit an application for license renewal under WAC 246-235-050, the licensee shall on or before the expiration date specified in the license:

(a) Terminate use of radioactive material;

(b) Properly dispose of radioactive material;

(c) Submit a completed departmental form "Certificate of disposition of radioactive material" or equivalent; and

(d) Submit a radiation survey report to confirm the absence of radioactive materials or establish the levels of radioactive contamination, unless the department determines a radiation survey report is not necessary.

(i) If no radioactive contamination attributable to activities conducted under the license is detected, the licensee shall submit a certification that no detectable radioactive contamination was found. If the information submitted under this paragraph and subsection (3)(c) and (d) of this section is adequate, the department will notify the licensee in writing that the license is terminated.

(ii) If detectable levels of radioactive contamination attributable to activities conducted under the license are found, the license continues in effect beyond the expiration date, if necessary, with respect to possession of residual radioactive material present as contamination until the department notifies the licensee in writing that the license is terminated. During this time, the licensee is subject to the provisions of subsection (4) of this section. In addition to the information submitted under subsection (3)(c) and (d) of this section, the licensee shall submit a plan for decontamination, if necessary.

(4) Each licensee who possesses residual radioactive material under subsection (3)(d)(ii) of this section, following the expiration of the facility and/or equipment date specified in the license, shall:

(a) Be limited to actions, involving radioactive material related to decontamination and preparation for release for unrestricted use; and

(b) Continue to control entry to restricted areas until they are suitable for release for unrestricted use and the department notifies the licensee in writing that the license is terminated. The guidance contained in WAC 246-232-140, Schedule D, shall be used in making this determination.

(5) Each general licensee licensed under the provisions of WAC 246-233-020(8), shall immediately notify the department in writing when the licensee decides to discontinue all activities involving radioactive materials authorized under the general license. Such notification shall include a description of how the generally licensed material was disposed and the results of facility surveys, if applicable, to confirm the absence of radioactive materials.

(6) Within sixty days of the occurrence of any of the following, each licensee shall provide notification to the department in writing of such occurrence, and either begin decommissioning its site, or any separate building or outdoor area that contains residual radioactivity so that the building or outdoor area is suitable for release in accordance with department requirements, or submit within twelve months of notification a decommissioning plan, if required by subsection (10)(a) of this section, and begin decommissioning upon approval of that plan if:

(a) The license has expired or has been revoked by the department; or

(b) The licensee has decided to permanently cease principal activities, as defined in this section, at the entire site or in any separate building or outdoor area that contains residual radioactivity such that the building or outdoor area is unsuitable for release in accordance with department requirements; or

(c) No principal activities under the license have been conducted for a period of twenty-four months; or

(d) No principal activities have been conducted for a period of twenty-four months in any separate building or outdoor area that contains residual radioactivity such that the building or outdoor area is unsuitable for release in accordance with department requirements.

(7) As used in this section, principal activities means activities authorized by the license which are essential to achieving the purpose(s) for which the license was issued or amended. Storage during which no licensed material is accessed for use or disposal and activities incidental to decontamination or decommissioning are not principal activities.

(8) Coincident with the notification required by subsection (6) of this section, the licensee shall maintain in effect all decommissioning financial assurances established by the licensee pursuant to WAC 246-235-075 or as required by this section. The amount of the financial assurance must be increased, or may be decreased, as appropriate, to cover the detailed cost estimate for decommissioning established pursuant to subsection (10)(d)(v) of this section. Following approval of the decommissioning plan, a licensee may reduce the amount of the financial assurance as decommissioning proceeds and radiological contamination is reduced at the site with the approval of the department.

(9) The department may grant a request to extend the time periods established in subsection (6) of this section if the department determines that this relief is not detrimental to the public health and safety and is otherwise in the public interest. The request must be submitted no later than thirty days before notification pursuant to subsection (6) of this section. The schedule for decommissioning set forth in subsection (6) of this section may not commence until the department has made a determination on the request.

(10)(a) A decommissioning plan must be submitted if required by license condition or if the procedures and activities necessary to carry out decommissioning of the site or separate building or outdoor area have not been previously approved by the department and these procedures could increase potential health and safety impacts to workers or to the public, such as in any of the following cases:

(i) Procedures would involve techniques not applied routinely during cleanup or maintenance operations;

(ii) Workers would be entering areas not normally occupied where surface contamination and radiation levels are significantly higher than routinely encountered during operation;

(iii) Procedures could result in significantly greater airborne concentrations of radioactive materials than are present during operation; or

(iv) Procedures could result in significantly greater releases of radioactive material to the environment than those associated with operation.

(b) The department may approve an alternate schedule for submittal of a decommissioning plan required pursuant to subsection (6) of this section if the department determines that the alternative schedule is necessary to the effective conduct of decommissioning operations and presents no undue risk from radiation to the public health and safety and is otherwise in the public interest.

(c) Procedures such as those listed in (a) of this subsection with potential health and safety impacts may not be carried out prior to approval of the decommissioning plan.

(d) The proposed decommissioning plan for the site or separate building or outdoor area must include:

(i) A description of the conditions of the site or separate building or outdoor area sufficient to evaluate the acceptability of the plan;

(ii) A description of planned decommissioning activities;

(iii) A description of methods used to ensure protection of workers and the environment against radiation hazards during decommissioning;

(iv) A description of the planned final radiation survey;

(v) An updated detailed cost estimate for decommissioning, comparison of that estimate with present funds set aside for decommissioning, and a plan for assuring the availability of adequate funds for completion of decommissioning;

(vi) A description of the physical security plan and material control and accounting plan provisions in place during decommissioning;

(vii) For decommissioning plans calling for completion of decommissioning later than twenty-four months after plan approval, the plan shall include a justification for the delay based on the criteria in subsection (12) of this section.

(e) The proposed decommissioning plan will be approved by the department if the information therein demonstrates that the decommissioning will be completed as soon as practicable and that the health and safety of workers and the public will be adequately protected.

(11)(a) Except as provided in subsection (12) of this section, licensees shall complete decommissioning of the site or separate building or outdoor area as soon as practicable but no later than twenty-four months following the initiation of decommissioning.

(b) Except as provided in subsection (12) of this section, when decommissioning involves the entire site, the licensee shall request license termination as soon as practicable but no later than twenty-four months following the initiation of decommissioning.

(12) The department may approve a request for an alternative schedule for completion of decommissioning of the site or separate building or outdoor area, and license termination if appropriate, if the department determines that the alternative is warranted by consideration of the following:

(a) Whether it is technically feasible to complete decommissioning within the allotted twenty-four-month period;

(b) Whether sufficient waste disposal capacity is available to allow completion of decommissioning within the allotted twenty-four-month period;

(c) Whether a significant volume reduction in wastes requiring disposal will be achieved by allowing short-lived radionuclides to decay;

(d) Whether a significant reduction in radiation exposure to workers can be achieved by allowing short-lived radionuclides to decay; and

(e) Other site-specific factors which the department may consider appropriate on a case-by-case basis, such as the regulatory requirements of other government agencies, lawsuits, ground water treatment activities, monitored natural ground water restoration, actions that could result in more environmental harm than deferred cleanup, and other factors beyond the control of the licensee.

(13) As the final step in decommissioning, the licensee shall:

(a) Certify the disposition of all licensed material, including accumulated wastes, by submitting a completed certificate of disposition of radioactive material or equivalent information; and

(b) Conduct a radiation survey of the premises where the licensed activities were carried out and submit a report of the results of this survey unless the licensee demonstrates that the premises are suitable for release in some other manner. The licensee shall, as appropriate:

(i) Report levels of gamma radiation in units of millisieverts (microroentgen) per hour at one meter from surfaces, and report levels of radioactivity, including alpha and beta, in units of megabecquerels (disintegrations per minute or microcuries) per one hundred square centimeters—removable and fixed—for surfaces, megabecquerels (microcuries) per milliliter for water, and becquerels (picocuries) per gram for solids such as soils or concrete; and

(ii) Specify the survey instrument(s) used and certify that each instrument is properly calibrated and tested.

(14) Specific licenses, including expired licenses, will be terminated by written notice to the licensee when the department determines that:

(a) Radioactive material has been properly disposed;

(b) Reasonable effort has been made to eliminate residual radioactive contamination, if present; and

(c)(i) A radiation survey has been performed which demonstrates that the premises are suitable for release in accordance with department requirements; or

(ii) Other information submitted by the licensee is sufficient to demonstrate that the premises are suitable for release in accordance with department requirements; and

(d) Records required by subsections (16) and (18) of this section have been received.

(15) Specific licenses for uranium and thorium milling are exempt from subsections (6)(d), (9) and (10) of this section with respect to reclamation of tailings impoundments and/or waste disposal areas.

(16) Prior to license termination, each licensee authorized to possess radioactive material with a half-life greater than one hundred twenty days, in an unsealed form, shall forward the following records to the department:

(a) Records of disposal required by WAC 246-221-230 (8)(a); and

(b) Records of results required by WAC 246-221-230 (7)(h).

(17) If licensed activities are transferred or assigned in accordance with WAC 246-232-050(2), each licensee authorized to possess radioactive material, with a half-life greater than one hundred twenty days, in an unsealed form, shall transfer the following records to the new licensee and the new licensee will be responsible for maintaining these records until the license is terminated:

(a) Records of disposal required by WAC 246-221-230 (8)(a); and

(b) Records of results required by WAC 246-221-230 (7)(h).

(18) Prior to license termination, each licensee shall forward the records required by WAC 246-235-075(6) to the department.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-232-060, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050 and 70.98.080. 97-08-095, § 246-232-060, filed 4/2/97, effective 5/3/97; 91-15-112 (Order 184), § 246-232-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-330, filed 9/16/83.]

WAC 246-232-090 Transportation. No person shall deliver radioactive material to a carrier for transport or transport radioactive material except as authorized in a general or specific license issued by the department or as exempted in chapter 246-231 WAC. General licenses for transportation of radioactive material and other transportation requirements are found in chapter 246-231 WAC.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-232-090, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-090, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-500, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), §

402-19-500, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-500, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-220.]

Chapter 246-235 WAC
RADIOACTIVE MATERIALS—SPECIFIC LICENSES

WAC

WAC 246-235-075 Financial assurance and recordkeeping for decommissioning. (1) Each applicant for one of the following licenses shall submit a decommissioning funding plan as described in this section:

(a) A specific license authorizing receipt of radioactive waste for the purpose of volume reduction, repackaging or interim storage.

(b) Receipt of contaminated articles, scrap material, equipment, or clothing to be decontaminated at the licensee's facility.

(c) A specific license authorizing the possession and use of radioactive material of half-life greater than one hundred twenty days and in quantities for unsealed material exceeding 10^3 times and for sealed forms exceeding 10^{10} times the applicable quantities set forth in WAC 246-221-300 Appendix B (for a combination of isotopes the unity rule applies. A decommissioning funding plan will be required if R is greater than 1, where R is defined as the sum of the ratios of the quantity for sealed and unsealed forms of each isotope compared to the applicable value derived from WAC 246-221-300).

(d) A specific license authorizing possession and use of source material in readily dispersible form and in quantities greater than 10 millicuries.

(2) Each decommissioning funding plan shall contain:

(a) A cost estimate for decommissioning facilities impacted by the activities authorized in the specific license.

(b) A description of the method of assuring funds for decommissioning.

(c) A schedule for adjusting cost estimates and associated funding levels periodically over the life of the facility or facilities.

(d) A description of methods and general procedures for performing facility decontamination, maintaining security, and performing a final radiation survey.

(e) A commitment to clean up accidental spills promptly and to begin decommissioning of the facility or facilities within twelve months of ceasing operation involving radioactive material.

(3) Each cost estimate for decommissioning shall include:

(a) A description of the facility and areas within the facility likely to require decommissioning as a result of routine operation.

(b) Anticipated labor, equipment and material costs.

(c) Anticipated waste volume.

(d) Anticipated packaging, transportation and waste disposal costs.

(e) An assessment of costs associated with an accident involving licensed material.

(4) Submit a certification that financial assurance for decommissioning shall be provided by one or more of the following methods:

(a) Prepayment. Prepayment is the deposit of sufficient funds to pay decommissioning costs. Funds shall be deposited prior to the start of operation into an account segregated from licensee assets and outside the licensee's administrative control. Prepayment may be in the form of a trust, escrow account, government fund, certificate of deposit, or deposit of government securities.

(b) A surety method, insurance, or other guarantee method. These methods guarantee that decommissioning costs will be paid should the licensee default. A surety method may be in the form of a surety bond, letter of credit, or line of credit. Any surety method or insurance used to provide financial assurance for decommissioning must contain the following conditions:

(i) The surety method or insurance shall be open-ended or, if written for a specified term, such as five years, shall be renewed automatically unless ninety days or more prior to the renewal date, the issuer notifies the department, the beneficiary, and the licensee of its intention not to renew. The surety method or insurance shall also provide that the full face amount be paid to the beneficiary automatically prior to the expiration without proof of forfeiture if the licensee fails to provide a replacement acceptable to the department within thirty days after receipt of notification of cancellation.

(ii) The surety method or insurance shall be payable to a trust established for decommissioning costs. The trustee and trust shall be acceptable to the department. Acceptable trustees include an appropriate state or federal government agency or an entity which has the authority to act as a trustee and whose trust operations are regulated and examined by a federal or state agency.

(iii) The surety method or insurance must remain in effect until the department has terminated the license.

(c) An external sinking fund in which deposits are made at least annually, coupled with a surety method or insurance, the value of which may decrease by the amount being accumulated in the sinking fund. An external sinking fund is a fund established and maintained by setting aside funds periodically in an account segregated from licensee assets and outside the licensee's administrative control. The total amount of funds in the external sinking fund shall be sufficient to pay decommissioning costs at the time termination of operation is expected. An external sinking fund may be in the form of a trust, escrow account, government fund, certificate of deposit, or deposit of government securities. The surety or insurance provisions shall be as stated in subsection (4)(b) of this section.

(d) In the case of state or local government licensees, a statement of intent containing a cost estimate for decommissioning and indicating that funds for decommissioning will be obtained when necessary.

(e) Other methods of financial assurance as approved by the department. The department may approve other financial mechanisms submitted by the applicant or licensee provided the alternate method meets, at a minimum, the requirements of 10 C.F.R. 30.35 and associated U.S. Nuclear Regulatory Commission guidance.

(5)(a) The department shall review each decommissioning funding plan prior to license issuance and prior to license renewal.

(b) The applicant or licensee shall incorporate department comments into its cost estimate and shall revise its financial surety accordingly.

(c) Applicants shall obtain the appropriate financial assurance as approved by the department prior to receipt of licensed material. The department may issue a new license if the applicant agrees to comply with the decommissioning funding plan as approved. If the applicant defers execution of the financial instrument until after the license has been issued, a signed original of the financial instrument obtained to satisfy the requirements of this section shall be submitted to the department before receipt of licensed material.

(d) Holders of licenses issued on or before the effective date of this rule shall submit a decommissioning funding plan to the department by April 1, 1993. Licensees shall implement the financial assurance requirements within thirty days of receiving department approval of the decommissioning funding plan. Licensees shall submit copies of the financial surety within thirty days of securing the surety and annually thereafter.

(6) Each person licensed under this chapter shall keep records of information important to the safe and effective decommissioning of the facility in an identified location until the site is released for unrestricted use. Before licensed activities are transferred or assigned in accordance with WAC 246-232-050(2), licensees shall transfer all records described in this subsection to the new licensee. In this case, the new licensee will be responsible for maintaining these records until the license is terminated by the department. If records of relevant information are kept for other purposes, reference to these records and their locations may be used. Information the department considers important to decommissioning consists of:

(a) Records of spills or other unusual occurrences involving the spread of contamination in and around the facility, equipment, or site. These records may be limited to instances when contamination remains after any cleanup procedures or when there is reasonable likelihood that contaminants may have spread to inaccessible areas as in the case of possible seepage into porous materials such as concrete. These records shall include any known information on identification of involved nuclides, quantities, forms, and concentrations.

(b) As-built drawings and modifications of structures and equipment in restricted areas where radioactive materials are used and/or stored, and of locations of possible inaccessible contamination such as buried pipes which may be subject to contamination. If required drawings are referenced, each relevant document need not be indexed individually. If drawings are not available, the licensee shall substitute appropriate records of available information concerning these areas and locations.

(c) Except for areas containing only sealed sources (provided the sources have not leaked or no contamination remains after any leak) or depleted uranium used only for shielding or as penetrators in unused munitions, or radioactive materials having only half-lives of less than sixty-five days, a list contained in a single document and updated every two years, of the following:

(i) All areas designated and formerly designated as restricted areas as defined under WAC 246-220-010;

(ii) All areas outside of restricted areas that require documentation under (a) of this subsection;

(iii) All areas outside of restricted areas where current and previous wastes have been buried as documented under WAC 246-221-230 (8)(a); and

(iv) All areas outside of restricted areas which contain material such that, if the license expired, the licensee would be required to either decontaminate the area to unrestricted release levels or apply for approval for disposal under WAC 246-221-180. Records of the cost estimate performed for the decommissioning funding plan or of the amount certified for decommissioning, and records of the funding method used for assuring funds if either a funding plan or certification is used.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-235-075, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050 and 70.98.080. 97-08-095, § 246-235-075, filed 4/2/97, effective 5/3/97; 92-06-008 (Order 245), § 246-235-075, filed 2/21/92, effective 3/23/92.]

Chapter 246-243 WAC

RADIATION PROTECTION—INDUSTRIAL RADIOGRAPHY

WAC

WAC 246-243-040 Equipment performance requirements. Equipment used in industrial radiography operations must meet the following minimum criteria:

(1)(a) Each radiographic exposure device, source assembly or sealed source, and all associated equipment must meet the requirements specified in American National Standards Institute, N432-1980 *"Radiological Safety for the Design and Construction of Apparatus for Gamma Radiography,"* (published as NBS Handbook 136, issued January 1981). Copies of the document are available for inspection at the Department of Health, Division of Radiation Protection, Olympia, Washington.

(b) Engineering analysis may be submitted by an applicant or licensee to demonstrate the applicability of previously performed testing on similar individual radiography equipment components. Upon review, the department may find this an acceptable alternative to actual testing of the component pursuant to the above referenced standard.

(c) Notwithstanding (a) of this subsection, equipment used in industrial radiographic operations need not comply with § 8.9.2(c) of the Endurance Test in American National Standards Institute N432-1980, if the prototype equipment has been tested using a torque value representative of the torque that an individual using the radiography equipment can realistically exert on the lever or crankshaft of the drive mechanism.

(2) In addition to the requirements specified in subsection (1) of this section, the following requirements apply to

radiographic exposure devices, source changers, source assemblies and sealed sources.

(a) The licensee shall ensure that each radiographic exposure device has attached to it a durable, legible, clearly visible label bearing the:

(i) Chemical symbol and mass number of the radionuclide in the device;

(ii) Activity and the date on which this activity was last measured;

(iii) Model (or product code) and serial number of the sealed source;

(iv) Manufacturer's identity of the sealed source; and

(v) Licensee's name, address, and telephone number.

(b) Radiographic exposure devices intended for use as Type B transport containers must meet the applicable requirements of 10 CFR Part 71.

(c) Modification of radiographic exposure devices, source changers, and source assemblies and associated equipment is prohibited, unless the design of any replacement component, including source holder, source assembly, controls or guide tubes would not compromise the design safety features of the system.

(3) In addition to the requirements specified in subsections (1) and (2) of this section, the following requirements apply to radiographic exposure devices, source assemblies, and associated equipment that allow the source to be moved out of the device for radiographic operations or to source changers.

(a) The coupling between the source assembly and the control cable must be designed in such a manner that the source assembly will not become disconnected if cranked outside the guide tube. The coupling must be such that it can not be unintentionally disconnected under normal and reasonably foreseeable abnormal conditions.

(b) The device must automatically secure the source assembly when it is cranked back into the fully shielded position within the device. The securing system may only be released by means of a deliberate operation on the exposure device.

(c) The outlet fittings, lock box, and drive cable fitting on each radiographic exposure device must be equipped with safety plugs or covers which must be installed during storage and transportation to protect the source assembly from water, mud, sand, or other foreign matter.

(d)(i) Each sealed source or source assembly must have attached to it or engraved on it, a durable, legible, visible label with the words: "DANGER—RADIOACTIVE."

(ii) The label may not interfere with the safe operation of the exposure device or associated equipment.

(e) The guide tube must be able to withstand a crushing test that closely approximates the crushing forces that are likely to be encountered during use, and be able to withstand a kinking resistance test that closely approximates the kinking forces likely to be encountered during use.

(f) Guide tubes must be used when moving the source out of the device.

(g) An exposure head or similar device designed to prevent the source assembly from passing out of the end of the guide tube must be attached to the outermost end of the guide tube during radiographic operations.

(h) The guide tube exposure head connection must be able to withstand the tensile test for control units specified in ANSI N432-1980.

(i) Source changers must provide a system for ensuring that the source will not be accidentally withdrawn from the changer when connecting or disconnecting the drive cable to or from a source assembly.

(4) All radiographic exposure devices and associated equipment in use after January 1, 1998, must comply with the requirements of this section.

(5) The maximum exposure rate limits for storage containers and source changers with the sealed source in the shielded position are:

(a) 2 millisieverts (200 millirem) per hour at any exterior surface; and

(b) 0.1 millisieverts (10 millirem) per hour at one meter from any exterior surface.

[Statutory Authority: RCW 70.98.050. 99-05-012, § 246-243-040, filed 2/5/99, effective 3/8/99; 94-01-073, § 246-243-040, filed 12/9/93, effective 1/9/94. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-030, filed 12/8/80; Order 1084, § 402-36-030, filed 1/14/76; Order 1, § 402-36-030, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-090 Leak testing, repair, tagging, opening, modification, and replacement of sealed sources. (1) The replacement of any sealed source fastened to or contained in a radiographic exposure device and leak testing, repair, tagging, opening, or any other modification of any sealed source shall be performed only by persons specifically authorized to do so by the department, the United States Nuclear Regulatory Commission, or any agreement state.

(2) Each sealed source shall be tested for leakage at intervals not to exceed six months. In the absence of a certificate from a transferor that a test has been made within the six-month period prior to the transfer, the sealed source shall not be put into use until tested and results obtained.

(3) The leak test shall be capable of detecting the presence of 185 becquerels (0.005 microcurie) of removable contamination on the sealed source. An acceptable leak test for sealed sources in the possession of a radiography licensee would be to test at the nearest accessible point to the sealed source storage position, or other appropriate measuring point, by a procedure specifically approved in a license condition. Records of leak test results shall be kept in units of microcuries and maintained for inspection by the department for three years after the leak test is performed.

(4) Any test conducted pursuant to subsections (2) and (3) of this section which reveals the presence of 185 becquerels (0.005 microcurie) or more of removable radioactive material shall be considered evidence that the sealed source is leaking. The licensee shall immediately withdraw the equipment involved from use and shall cause it to be decontaminated and repaired or to be disposed in accordance with regulations of the department. Within five days after obtaining results of the test, the licensee shall file a report with the department describing the involved equipment, the test results, and the corrective action taken.

[Statutory Authority: RCW 70.98.050. 99-05-012, § 246-243-090, filed 2/5/99, effective 3/8/99; 94-01-073, § 246-243-090, filed 12/9/93, effective

1/9/94. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-090, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-36-070, filed 12/11/86; 83-19-050 (Order 2026), § 402-36-070, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-070, filed 12/8/80; Order 1084, § 402-36-070, filed 1/14/76; Order 1, § 402-36-070, filed 1/8/69; Rules (part), filed 10/26/66.]

Chapter 246-244 WAC
RADIATION PROTECTION—WIRELINE SERVICES

WAC

WAC 246-244-040 Limits on levels of radiation. Sources of radiation shall be used, stored, and transported in such a manner that the transportation requirements of chapter 246-231 WAC and the dose limitation requirements of chapter 246-221 WAC are met.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-244-040, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-060, filed 12/11/86.]

WAC 246-244-060 Transport precautions. (1) Transport containers shall be physically secured to the transporting vehicle to prevent accidental loss, tampering, or unauthorized removal.

(2) Transport of radioactive material shall be in accordance with applicable provisions of the United States Department of Transportation, as required by chapter 246-231 WAC.

[Statutory Authority: RCW 70.98.050. 99-15-105, § 246-244-060, filed 7/21/99, effective 8/21/99. Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-100, filed 12/11/86.]

Chapter 246-254 WAC
RADIATION PROTECTION—FEES

WAC

WAC 246-254-053 Radiation machine facility registration fees. (1) Radiation machine facility fees apply to each person or facility owning, leasing and using radiation-producing machines.

FEE TYPE	FEE
(a) Annual Base Registration Fee	$46
(b) Late registration or re-registration	$46
(c) Penalty for operating without registration	$46 for each year of unregistered operation
(d) Tube Fees	See Table 1

TABLE 1
Radiation Tube Fees

Group	First Tube	Each Additional Tube
(i) **Group A:** Dental, Podiatric, Veterinary uses	$46	$23
(ii) **Group B:** Hospital, Medical, Chiropractic uses	$127	$66
(iii) **Group C:** Industrial, research, and other uses	$70	$23
(iv) **Group D:** Electron Microscopes, Mammographic X-ray Machines, Bone Densitometers, and Airport Baggage Cabinet X-ray Systems	NA	NA

(2) **X-ray shielding fees and penalties.**

(a) Facilities regulated under the shielding plan requirements of WAC 246-225-030 or 246-227-150 are subject to a $90 X-ray shielding review fee for each X-ray room.

(b) If a facility regulated under WAC 246-225-030 or 246-227-150 operates without X-ray shielding calculations or a floor plan review it will be subject to a $45 penalty.

(3) **Radiation safety fee.** If a facility or group of facilities under one administrative control employs two or more full-time individuals whose positions are entirely devoted to in-house radiation safety, the facility shall pay a flat, annual fee of $2,900.

(4) **Consolidation of registration.** Facilities may consolidate X-ray machine registrations into a single registration after notifying the department in writing and documenting that a single business license applies.

[Statutory Authority: RCW 43.70.110. 99-13-085, § 246-254-053, filed 6/14/99, effective 7/15/99; 98-11-066, § 246-254-053, filed 5/19/98, effective 7/1/98. Statutory Authority: RCW 43.70.110, 43.70.250 and chapter 70.98 RCW. 98-01-047, § 246-254-053, filed 12/8/97, effective 1/8/98; 96-11-043, § 246-254-053, filed 5/8/96, effective 6/28/96; 95-12-004, § 246-254-053, filed 5/25/95, effective 6/25/95; 94-11-010, § 246-254-053, filed 5/5/94, effective 6/5/94; 93-13-019 (Order 372), § 246-254-053, filed 6/8/93, effective 7/9/93. Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-053, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-053, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20B.110. 89-16-064 (Order 2839), § 440-44-050, filed 7/31/89, effective 8/31/89. Statutory Authority: RCW 43.20A.055. 86-08-054 (Order 2359), § 440-44-050, filed 3/28/86. Statutory Authority: Chapter 70.98 RCW and 1985 c 383. 85-20-021 (Order 2283), § 440-44-050, filed 9/23/85. Statutory Authority: RCW 43.20A.055. 85-13-007 (Order 2238), § 440-44-050, filed 6/7/85; 83-12-058 (Order 1965), § 440-44-050, filed 6/1/83. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-050, filed 6/4/82.]

WAC 246-254-070 Fees for specialized radioactive material licenses. (1) Persons licensed or authorized to possess or use radioactive material in the following special categories shall forward annual fees to the department as follows:

(a) Four thousand eight hundred forty-five dollars for operation of a single nuclear pharmacy.

(b) Eight thousand two hundred sixty-five dollars for operation of a single nuclear laundry.

(c) Eight thousand two hundred sixty-five dollars for a license authorizing a single facility to use more than one curie of unsealed radioactive material in the manufacture and distribution of radioactive products or devices containing radioactive material.

(d) Two thousand nine hundred dollars for a license authorizing a single facility to use less than or equal to one curie of unsealed radioactive material or any quantity of previously sealed sources in the manufacture and distribution of products or devices containing radioactive material.

(e) Seven hundred fifty-four dollars for a license authorizing the receipt and redistribution from a single facility of manufactured products or devices containing radioactive material.

(f) Five thousand five hundred forty-five dollars for a license authorizing decontamination services operating from a single facility.

(g) Two thousand six hundred twenty-five dollars for a license authorizing waste brokerage including the possession, temporary storage at a single facility, and over-packing only of radioactive waste.

(h) One thousand one hundred seventy dollars for a license authorizing equipment servicing involving:

(i) Incidental use of calibration sources;

(ii) Maintenance of equipment containing radioactive material; or

(iii) Possession of sealed sources for purpose of sales demonstration only.

(i) Two thousand one hundred ninety dollars for a license authorizing health physics services, leak testing, or calibration services.

(j) One thousand three hundred seventy dollars for a civil defense license.

(k) Four hundred thirteen dollars for a license authorizing possession of special nuclear material as pacemakers or depleted uranium as shielding.

(2) Persons licensed or authorized to possess and use radioactive material in the following broad scope categories shall forward annual fees to the department as follows:

(a) Sixteen thousand four hundred five dollars for a license authorizing possession of atomic numbers three through eighty-three with maximum authorized possession of any single isotope greater than one curie.

(b) Seven thousand five hundred eighty dollars for a license authorizing possession of atomic numbers three through eighty-three with maximum authorized possession of any single isotope greater than 0.1 curie but less than or equal to one curie.

(c) Six thousand ninety-five dollars for a license authorizing possession of atomic numbers three through eighty-three with maximum authorized possession less than or equal to 0.1 curie.

(3) Persons licensed or authorized to possess or use radioactive material which are not covered by any of the annual license fees described in WAC 246-254-070 through 246-254-100, shall pay fees as follows:

(a) An initial application fee of one thousand dollars;

(b) Billing at the rate of ninety dollars for each hour of direct staff time associated with issuing and maintaining the license and for the inspection of the license; and

(c) Any fees for additional services as described in WAC 246-254-120.

(d) The initial application fee will be considered a credit against billings for direct staff charges but is otherwise nonrefundable.

(4) Persons licensed or authorized to possess or use radioactive material in a facility for radioactive waste processing, including resource recovery, volume reduction, decontamination activities, or other waste treatment, but not permitting commercial on-site disposal, shall pay fees as follows:

(a) A nonrefundable initial application fee for a new license of sixteen thousand dollars which shall be credited to the applicant's quarterly billing described in (b) of this subsection; and

(b) Quarterly billings for actual direct and indirect costs incurred by the department including, but not limited to, license renewal, license amendments, compliance inspections, a resident inspector for time spent on the licensee's premises as deemed necessary by the department, laboratory and other support services, and travel costs associated with staff involved in the foregoing.

[Statutory Authority: RCW 43.70.250. 00-02-016, § 246-254-070, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-254-070, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 43.70.110. 98-11-067, § 246-254-070, filed 5/19/98, effective 6/19/98. Statutory Authority: RCW 43.70.110, [43.70.]250 and chapter 70.98 RCW. 96-11-043, § 246-254-070, filed 5/8/96, effective 6/28/96; 95-12-004, § 246-254-070, filed 5/25/95, effective 6/25/95; 94-11-011 § 246-254-070, filed 5/5/94, effective 6/5/94; 93-13-019 (Order 372), § 246-254-070, filed 6/8/93, effective 7/9/93. Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-070, filed 10/29/91, effective 11/29/91.]

WAC 246-254-080 Fees for medical and veterinary radioactive material licenses. (1) Persons licensed or authorized to possess or use radioactive material in the following medical or veterinary categories shall forward annual fees to the department as follows:

(a) Four thousand one hundred dollars for operation of a mobile nuclear medicine program from a single base of operation.

(b) Two thousand nine hundred ninety dollars for a license authorizing groups II and III of WAC 246-235-120 for diagnostic nuclear medicine at a single facility.

(c) Two thousand five hundred ninety dollars for a license authorizing groups IV and V of WAC 246-235-120 for medical therapy at a single facility.

(d) Four thousand one hundred twenty dollars for a license authorizing groups II or III and groups IV or V of WAC 246-235-120 for full diagnostic and therapy services at a single facility.

(e) Two thousand two hundred fifteen dollars for a license authorizing group VI of WAC 246-235-120 for brachytherapy at a single facility.

(f) One thousand three hundred seventy dollars for a license authorizing brachytherapy or gamma stereotactic therapy or teletherapy at a single facility.

(g) Two thousand eighty-five dollars for a license authorizing medical or veterinary possession of greater than two hundred millicuries total possession of radioactive material at a single facility.

(h) One thousand six hundred sixty dollars for a license authorizing medical or veterinary possession of greater than thirty millicuries but less than or equal to two hundred millicuries total possession of radioactive material at a single facility.

(i) One thousand two hundred twenty dollars for a license authorizing medical or veterinary possession of less than or equal to thirty millicuries total possession of radioactive material at a single facility.

(j) One thousand seventy-five dollars for a license authorizing group I as defined in WAC 246-235-120 or in vitro uses of radioactive material at a single facility.

(k) Six hundred seventy-one dollars for a license authorizing medical or veterinary possession of a sealed source for diagnostic use at a single facility.

(2) Persons with licenses authorizing multiple locations of use shall increase the annual fee by fifty percent for each additional location or base of operation.

[Statutory Authority: RCW 43.70.250. 00-02-016, § 246-254-080, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-254-080, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 43.70.110. 98-11-067, § 246-254-080, filed 5/19/98, effective 6/19/98. Statutory Authority: RCW 43.70.110, [43.70.]250 and chapter 70.98 RCW. 96-11-043, § 246-254-080, filed 5/8/96, effective 6/28/96; 95-12-004, § 246-254-080, filed 5/25/95, effective 6/25/95; 94-11-011 § 246-254-080, filed 5/5/94, effective 6/5/94; 93-13-019 (Order 372), § 246-254-080, filed 6/8/93, effective 7/9/93. Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-080, filed 10/29/91, effective 11/29/91.]

WAC 246-254-090 Fees for industrial radioactive material licenses. (1) Persons licensed or authorized to possess or use radioactive material in the following industrial categories shall forward annual fees to the department as follows:

(a) Four thousand eight hundred thirty dollars for a license authorizing the use of radiographic exposure devices in one or more permanent radiographic vaults in a single facility.

(b) Six thousand four hundred seventy dollars for a license authorizing the use of radiographic exposure devices at temporary job sites but operating from a single storage facility.

(c) Three thousand one hundred seventy dollars for a license authorizing well-logging activities including the use of radioactive tracers operating from a single storage facility.

(d) Six hundred eighty-seven dollars for a license authorizing possession of portable sealed sources including moisture/density gauges and excluding radiographic exposure devices operating from a single storage facility.

(e) Seven hundred fifty-four dollars for a license authorizing possession of any nonportable sealed source, including special nuclear material and excluding radioactive material used in a gas chromatograph at a single facility.

(f) Four hundred seventy-five dollars for a license authorizing possession of gas chromatograph units containing radioactive material at a single facility.

(g) One thousand three hundred five dollars for a license authorizing possession of any self-shielded or pool type irradiator with sealed source total quantity greater than one hundred curies at a single facility.

(h) Six thousand nine hundred twenty dollars for a license authorizing possession of sealed sources for a walk-in type irradiator at a single facility.

(i) Six thousand twenty-five dollars for a license authorizing possession of greater than one gram of unsealed special nuclear material or greater than five hundred kilograms of source material at a single facility.

(j) One thousand nine hundred thirty dollars for a license authorizing possession of less than or equal to one gram of unsealed special nuclear material or five hundred kilograms of source material at a single facility.

(k) Three hundred nine dollars for a license authorizing possession of static elimination devices not covered by a general license.

(2) Persons with licenses authorizing multiple locations of permanent storage shall increase the annual fee by fifty percent for each additional location.

(3) Depleted uranium registrants required to file Form RHF-20 shall forward an annual fee of sixty-two dollars to the department.

[Statutory Authority: RCW 43.70.250. 00-02-016, § 246-254-090, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-254-090, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 43.70.110. 98-11-067, § 246-254-090, filed 5/19/98, effective 6/19/98. Statutory Authority: RCW 43.70.110, [43.70.]250 and chapter 70.98 RCW. 96-11-043, § 246-254-090, filed 5/8/96, effective 6/28/96; 95-12-004, § 246-254-090, filed 5/25/95, effective 6/25/95; 94-11-011 § 246-254-090, filed 5/5/94, effective 6/5/94; 93-13-019 (Order 372), § 246-254-090, filed 6/8/93, effective 7/9/93. Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-090, filed 10/29/91, effective 11/29/91.]

WAC 246-254-100 Fees for laboratory radioactive material licenses. (1) Persons licensed or authorized to possess or use unsealed radioactive material in the following laboratory categories shall forward annual fees to the department as follows:

(a) Three thousand three hundred dollars for a license authorizing possession at a single facility of unsealed sources in amounts greater than:

(i) One millicurie of I-125 or I-131; or

(ii) One hundred millicuries of H-3 or C-14; or

(iii) Ten millicuries of any single isotope.

(b) One thousand six hundred thirty-five dollars for a license authorizing possession at a single facility of unsealed sources in amounts:

(i) Greater than 0.1 millicurie and less than or equal to one millicurie of I-125 or I-131; or

(ii) Greater than ten millicuries and less than or equal to one hundred millicuries of H-3 or C-14; or

(iii) Greater than one millicurie and less than or equal to ten millicuries of any single isotope.

(c) One thousand three hundred seventy dollars for a license authorizing possession at a single facility of unsealed sources in amounts:

(i) Greater than 0.01 millicurie and less than or equal to 0.1 millicurie of I-125 or I-131; or

(ii) Greater than one millicurie and less than or equal to ten millicuries of H-3 or C-14; or

(iii) Greater than 0.1 millicurie and less than or equal to one millicurie of any other single isotope.

(d) Four hundred seventy-five dollars for a license authorizing possession at a single facility of unsealed or sealed sources in amounts:

(i) Less than or equal to 0.01 millicurie of I-125 or I-131; or

(ii) Less than or equal to one millicurie of H-3 or C-14; or

(iii) Less than or equal to 0.1 millicurie of any other single isotope.

(e) Six hundred thirty-five dollars for a license authorizing possession at a single facility of large quantities of naturally occurring radioactive material in total concentration not exceeding 0.002 microcurie per gram.

(2) Persons with licenses authorizing multiple locations of use shall increase the annual fee by fifty percent for each additional location.

(3) Persons registered to perform in vitro testing pursuant to Form RHF-15 shall forward an annual fee of sixty-two dollars to the department.

[Statutory Authority: RCW 43.70.250. 00-02-016, § 246-254-100, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-254-100, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 43.70.110. 98-11-067, § 246-254-100, filed 5/19/98, effective 6/19/98. Statutory Authority: RCW 43.70.110, [43.70.]250 and chapter 70.98 RCW. 96-11-043, § 246-254-100, filed 5/8/96, effective 6/28/96; 95-12-004, § 246-254-100, filed 5/25/95, effective 6/25/95; 94-11-011 § 246-254-100, filed 5/5/94, effective 6/5/94; 93-13-019 (Order 372), § 246-254-100, filed 6/8/93, effective 7/9/93. Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-100, filed 10/29/91, effective 11/29/91.]

Chapter 246-282 WAC
SANITARY CONTROL OF SHELLFISH

WAC

WAC 246-282-990 Shellfish program certification fees. (1) Annual certificate fees are:

Type of Operation	Annual Fee
Harvester	$250.
Shellstock Shipper	
0 - 49 Acres	$275.
50 or greater Acres	$440.
Shucker-Packer	
Plants with floor space < 2000 sq. ft.	$500.
Plants with floor space > 2000 sq. ft. and < 5000 sq. ft.	$605.
Plants with floor space > 5000 sq. ft.	$1,115.

(2) Type of operations are defined as follows:

(a) "Shellstock shipper" means shippers growing, harvesting, buying, or selling shellstock. Shellstock shippers are not authorized to shuck shellfish or to repack shucked shellfish.

(b) "Shucker-packer" means shippers shucking and packing shellfish. A shucker-packer may act as a shellstock dealer.

(c) "Harvester" means a commercial shellfish operation with activities limited to harvesting shellstock, and shipping and selling it within Washington state to shellfish dealers licensed by the department. Harvesters do not shuck shellfish; repack shucked shellfish; repack shellstock; or store shellstock in any location other than the approved growing area where the shellstock was harvested.

(3) "Export certificate" means a certificate issued by the department to a licensed shucker-packer or shellstock shipper for use in the foreign export of a lot or shipment of shellfish. The fee for each export certificate shall be $10.

[Statutory Authority: RCW 43.70.250. 00-02-016, § 246-282-990, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-282-990, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 43.20B.020 and 69.30.030. 98-12-068, § 246-282-990, filed 6/1/98, effective 7/2/98. Statutory Authority: RCW 43.203.020 [43.20B.020]. 97-12-031, § 246-282-990, filed 5/30/97, effective 6/30/97. Statutory Authority: RCW 43.20B.020 and 69.30.030. 96-16-073, § 246-282-990, filed 8/6/96, effective 10/1/96. Statutory Authority: RCW 43.70.040. 93-17-096 (Order 389), § 246-282-990, filed 8/17/93, effective 9/17/93; 91-02-049 (Order 121), recodified as § 246-282-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 85-12-029 (Order 2236), § 440-44-065, filed 5/31/85; 84-13-006 (Order 2109), § 440-44-065, filed 6/7/84; 83-15-021 (Order 1991), § 440-44-065, filed 7/14/83. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-065, filed 6/4/82.]

Chapter 246-290 WAC
PUBLIC WATER SUPPLIES

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-290-115 Corrosion control recommendation report. [Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-115, filed 6/22/94, effective 7/23/94.] Repealed by 99-07-021, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.02.050.

246-290-240 Disinfection of facilities. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-145, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-145, filed 9/8/83.] Repealed by 99-07-021, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.02.050.

246-290-330 Public notification. [Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-330, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-330, filed 3/25/93, effective 4/25/93; 92-04-070 (Order 241B), § 246-290-330, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-330, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-330, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-187, filed 10/10/89, effective 11/10/89.] Repealed by 99-07-021, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.02.050.

246-290-410 Small water system management program. [Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-410, filed 6/22/94, effective 7/23/94; 91-02-051 (Order 124B), recodified as § 246-290-410, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-196, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-196, filed 2/17/88.] Repealed by 99-07-021, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.02.050.

246-290-430 Continuity of service. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-430, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-205, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-205, filed 9/8/83.] Repealed by 99-07-021, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.02.050.

246-290-440 Operations. [Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-440, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-440, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-440, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-215, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-215, filed 9/8/83.] Repealed by 99-07-021, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.02.050.

246-290-610 Definitions relating to surface water treatment. [Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-610, filed 3/25/93, effective 4/25/93.] Repealed by 99-07-021, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.02.050.

WAC 246-290-001 Purpose and scope. (1) The purpose of this chapter is to define basic regulatory requirements and to protect the health of consumers using public drinking water supplies.

(2) The rules of this chapter are specifically designed to ensure:

(a) Adequate design, construction, sampling, management, maintenance, and operation practices; and

(b) Provision of safe and high quality drinking water in a reliable manner and in a quantity suitable for intended use.

(3) Purveyors shall be responsible for complying with the regulatory requirements of this chapter.

(4) These rules are intended to conform with Public Law 93-523, the Federal Safe Drinking Water Act of 1974, and Public Law 99-339, the Safe Drinking Water Act Amendments of 1986, and certain provisions of Public Law 104-182, the Safe Drinking Water Act Amendments of 1996.

(5) The rules set forth are adopted under chapter 43.20 RCW. Other statutes relating to this chapter are:

(a) RCW 43.20B.020, Fees for services—Department of health and department of social and health services;

(b) Chapter 43.70 RCW, Department of health;

(c) Chapter 70.05 RCW, Local health department, boards, officers—Regulations;

(d) Chapter 70.116 RCW, Public Water System Coordination Act of 1977;

(e) Chapter 70.119 RCW, Public water supply systems—Certification and regulation of operators;

(f) Chapter 70.119A RCW, Public water systems—Penalties and compliance; and

(g) Chapter 70.142 RCW, Chemical contaminants and water quality.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-001, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-001, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-001, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-005, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-005, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-005, filed 9/8/83.]

WAC 246-290-002 Guidance. (1) The department has numerous guidance documents available to help purveyors comply with state and federal rules regarding drinking water. These include documents on the following subjects:

(a) Compliance;
(b) System management and financial assistance;
(c) Groundwater protection;
(d) Growth management;
(e) Operations/maintenance;
(f) Operator certification;
(g) Water system planning;
(h) Monitoring and water quality;
(i) System approval;
(j) Small water systems;
(k) Water resources;
(l) Water system design; and
(m) General information.

(2) The guidance documents are available at minimal or no cost by contacting the division of drinking water's publication service at (360) 236-3099 or (800) 521-0323. Individuals can also request the documents via the Internet at http://www.doh.wa.gov/ehp/dw or through conventional mail at P.O. Box 47822, Olympia, Washington 98504-7822.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-002, filed 3/9/99, effective 4/9/99.]

WAC 246-290-010 Definitions. Abbreviations and acronyms:

ADD - average day demand;
AG - air gap;
ANSI - American National Standards Institute;
APWA - American Public Works Association;
ASCE - American Society of Civil Engineers;
AVB - atmospheric vacuum breaker;
AWWA - American Water Works Association;
BAT - best available technology;
BAT - backflow assembly tester (for WAC 246-29-490);
C - residual disinfectant concentration in mg/L;
CCS - cross-connection control specialist;
CFR - code of federal regulations;
CT - the mathematical product in mg/L - minutes of "C" and "T";
CWSSA - critical water supply service area;
DCDA - double check detector assembly;
DCVA - double check valve assembly;
DWSRF - drinking water state revolving fund;
ERU - equivalent residential unit;
gph - gallons per hour;
gpm - gallons per minute;
GWI - ground water under the direct influence of surface water;
HPC - heterotrophic plate count;
IAPMO - International Association of Plumbing and Mechanical Officials;
kPa - kilo pascal (SI units of pressure);
m - meter;
MCL - maximum contaminant level;
MDD - maximum day demand;
mg/L - milligrams per liter (1 mg/L= 1 ppm);
mL - milliliter;
mm - millimeter;
MTTP - maximum total trihalomethane potential;
NSF - National Sanitation Foundation;
NTNC - nontransient **noncommunity**;
NTU - nephelometric turbidity unit;
PAA - project approval application;
pCi/L - picocuries per liter;
PHD - peak hourly demand;
ppm - parts per million (1 ppm= 1 mg/L);
psi - pounds per square inch;
PVBA - pressure vacuum breaker assembly;
RPBA - reduced pressure backflow assembly;
RPDA - reduced pressure detector assembly;
SAL - state advisory level;
SCA - sanitary control area;
SDWA - Safe Drinking Water Act;
SEPA - State Environmental Policy Act;
SOC - synthetic organic chemical;
SMA - satellite management agency;
SPI - special purpose investigation;
SRF - state revolving fund;
SVBA - spill resistant vacuum breaker assembly;
SWTR - surface water treatment rule;
T - disinfectant contact time in minutes;
TTHM - total trihalomethane;
TNC - transient **noncommunity**;
TNTC - too numerous to count;
UBC - Uniform Building Code;
ug/L - micrograms per liter;
UL - Underwriters Laboratories, Inc.;
umhos/cm - micromhos per centimeter;
UPC - Uniform Plumbing Code;
UTC - utilities and transportation commission;
VOC - volatile organic chemical;
WAC - Washington Administrative Code;
WADOT - Washington department of transportation;
WFI - water facilities inventory and report form; and
WHPA - wellhead protection area.

"Acute" means posing an immediate risk to human health.

"Alternate filtration technology" means a filtration process for substantial removal of particulates (generally > 2 log *Giardia lamblia* cysts) by other than conventional, direct, diatomaceous earth, or slow sand filtration processes.

"Analogous treatment system" means an existing water treatment system that has unit processes and source water quality characteristics that are similar to a proposed treatment system.

"Approved air gap" means a physical separation between the free-flowing end of a potable water supply pipeline and the overflow rim of an open or nonpressurized receiving vessel. To be an air gap approved by the department, the separation must be at least:

Twice the diameter of the supply piping measured vertically from the overflow rim of the receiving vessel, and in no case be less than one inch, when unaffected by vertical surfaces (sidewalls); and:

Three times the diameter of the supply piping, if the horizontal distance between the supply pipe and a vertical surface (sidewall) is less than or equal to three times the diameter of the supply pipe, or if the horizontal distance between the supply pipe and intersecting vertical surfaces (sidewalls) is less than or equal to four times the diameter of the supply pipe and in no case less than one and one-half inches.

"Approved atmospheric vacuum breaker" means an AVB of make, model, and size that is approved by the department. AVBs that appear on the current approved backflow prevention assemblies list developed by the University of Southern California Foundation for Cross-Connection Control and Hydraulic Research or that are listed or approved by other nationally recognized testing agencies (such as IAPMO, ANSI, or UL) acceptable to the local administrative authority are considered approved by the department.

"Approved backflow preventer" means an approved air gap, an approved backflow prevention assembly, or an approved AVB. The terms "approved backflow preventer," "approved air gap," or "approved backflow prevention assembly" refer only to those approved backflow preventers relied upon by the purveyor for the protection of the public water system. The requirements of WAC 246-290-490 do not apply to backflow preventers installed for other purposes.

"Approved backflow prevention assembly" means an RPBA, RPDA, DCVA, DCDA, PVBA, or SVBA of make, model, and size that is approved by the department. Assemblies that appear on the current approved backflow prevention assemblies list developed by the University of Southern California Foundation for Cross-Connection Control and Hydraulic Research or other entity acceptable to the department are considered approved by the department.

"As-built drawing" means the drawing created by an engineer from the collection of the original design plans, including changes made to the design or to the system, that reflects the actual constructed condition of the water system.

"Authorized agent" means any person who:

Makes decisions regarding the operation and management of a public water system whether or not he or she is engaged in the physical operation of the system;

Makes decisions whether to improve, expand, purchase, or sell the system; or

Has discretion over the finances of the system.

"Average day demand (ADD)" means the total quantity of water use from all sources of supply as measured or estimated over a calendar year divided by three hundred sixty-five. ADD is typically expressed as gallons per day per ERU (gpd/ERU).

"Backflow" means the undesirable reversal of flow of water or other substances through a cross-connection into the public water system or consumer's potable water system.

"Backflow assembly tester" means a person holding a valid BAT certificate issued in accordance with chapter 246-292 WAC.

"Backpressure" means a pressure (caused by a pump, elevated tank or piping, boiler, or other means) on the consumer's side of the service connection that is greater than the pressure provided by the public water system and which may cause backflow.

"Backsiphonage" means backflow due to a reduction in system pressure in the purveyor's distribution system and/or consumer's water system.

"Best available technology (BAT)" means the best technology, treatment techniques, or other means that EPA finds, after examination for efficacy under field conditions, are available, taking cost into consideration.

"Blended sample" means a sample collected from two or more individual sources at a point downstream of the confluence of the individual sources and prior to the first connection.

"C" means the residual disinfectant concentration in mg/L at a point before or at the first consumer.

"Category red operating permit" means an operating permit identified as such pursuant to chapter 246-294 WAC. Placement in this category results in permit issuance with conditions and a determination that the system is inadequate.

"Chemical contaminant treatment facility" means a treatment facility specifically used for the purpose of removing chemical contaminants.

"Clarification" means a treatment process that uses gravity (sedimentation) or dissolved air (flotation) to remove flocculated particles.

"Closed system" means any water system or portion of a water system in which water is transferred to a higher pressure zone closed to the atmosphere, such as when no gravity storage is present.

"Coagulant" means a chemical used in water treatment to destabilize particulates and accelerate the rate at which they aggregate into larger particles.

"Coagulation" means a process using coagulant chemicals and rapid mixing to destabilize colloidal and suspended particles and agglomerate them into flocs.

"Combination fire protection system" means a fire sprinkler system that:

Is supplied only by the purveyor's water;

Does not have a fire department pumper connection; and

Is constructed of approved potable water piping and materials that serve both the fire sprinkler system and the consumer's potable water system.

"Completely treated water" means water from a surface or GWI source that receives filtration or disinfection treatment that fully complies with the treatment technique requirements of Part 6 of this chapter as determined by the department.

"Composite sample" means a sample in which more than one source is sampled individually by the water system and then composited by a certified laboratory by mixing equal parts of water from each source (up to five different sources) and then analyzed as a single sample.

"Comprehensive monitoring plan" means a schedule that describes both the frequency and appropriate locations for sampling of drinking water contaminants as required by state and federal rules.

"Confirmation" means to demonstrate the accuracy of results of a sample by analyzing another sample from the same location within a reasonable period of time, generally not to exceed two weeks. Confirmation is when analysis

results fall within plus or minus thirty percent of the original sample results.

"Confluent growth" means a continuous bacterial growth covering a portion or the entire filtration area of a membrane filter in which bacterial colonies are not discrete.

"Conservation program" means policies and activities implemented to encourage or cause efficient use of water on a long-term basis. Conservation programs shall include identification of the conservation objectives of the purveyor, evaluation of conservation measures considered, and identification of specific conservation measures identified for implementation.

"Construction completion report" means a form provided by the department and completed for each specific construction project to document:

- Project construction in accordance with this chapter and general standards of engineering practice;
- Physical capacity changes; and
- Satisfactory test results.

The completed form must be stamped with an engineer's seal, and signed and dated by a professional engineer.

"Consumer" means any person receiving water from a public water system from either the meter, or the point where the service line connects with the distribution system if no meter is present. For purposes of cross-connection control, "consumer" means the owner or operator of a water system connected to a public water system through a service connection.

"Consumer's water system," as used in WAC 246-290-490, means any potable and/or industrial water system that begins at the point of delivery from the public water system and is located on the consumer's premises. The consumer's water system includes all auxiliary sources of supply, storage, treatment, and distribution facilities, piping, plumbing, and fixtures under the control of the consumer.

"Contaminant" means a substance present in drinking water that may adversely affect the health of the consumer or the aesthetic qualities of the water.

"Contingency plan" means that portion of the wellhead protection program section of the water system plan or small water system management program that addresses the replacement of the major well(s) or wellfield in the event of loss due to ground water contamination.

"Continuous monitoring" means determining water quality with automatic recording analyzers that operate without interruption twenty-four hours per day.

"Conventional filtration treatment" means a series of processes including coagulation, flocculation, clarification, and filtration that together result in substantial particulate removal (> = 2.5 log *Giardia lamblia* cysts).

"Critical water supply service area (CWSSA)" means a geographical area which is characterized by a proliferation of small, inadequate water systems, or by water supply problems which threaten the present or future water quality or reliability of service in such a manner that efficient and orderly development may best be achieved through coordinated planning by the water utilities in the area.

"Cross-connection" means any actual or potential physical connection between a public water system or the consumer's water system and any source of nonpotable liquid, solid, or gas that could contaminate the potable water supply by backflow.

"Cross-connection control program" means the administrative and technical procedures the purveyor implements to protect the public water system from contamination via cross-connections as required in WAC 246-290-490.

"Cross-connection control specialist" means a person holding a valid CCS certificate issued in accordance with chapter 246-292 WAC.

"Cross-connection control summary report" means the annual report that describes the status of the purveyor's cross-connection control program.

"CT" or **"CTcalc"** means the product of "residual disinfectant concentration" (C) and the corresponding "disinfectant contact time" (T) i.e., "C" x "T".

"$CT_{99.9}$" means the CT value required for 99.9 percent (3 log) inactivation of *Giardia lamblia* cysts.

"CTreq" means the CT value a system shall provide to achieve a specific percent inactivation of *Giardia lamblia* cysts or other pathogenic organisms of health concern as directed by the department.

"Curtailment" means short-term, infrequent actions by a purveyor and its consumers to reduce their water use during or in anticipation of a water shortage.

"Dead storage" means the volume of stored water not available to all consumers at the minimum design pressure in accordance with WAC 246-290-230(5) and (6).

"Demand forecast" means an estimate of future water system water supply needs assuming historically normal weather conditions and calculated using numerous parameters, including population, historic water use, local land use plans, water rates and their impacts on consumption, employment, projected conservation savings from implementation of a conservation program, and other appropriate factors.

"Department" means the Washington state department of health or health officer as identified in a joint plan of operation in accordance with WAC 246-290-030(1).

"Design and construction standards" means department design guidance and other peer reviewed documents generally accepted by the engineering profession as containing fundamental criteria for design and construction of water facility projects. Design and construction standards are comprised of performance and sizing criteria and reference general construction materials and methods.

"Diatomaceous earth filtration" means a filtration process for substantial removal of particulates (> 2 log *Giardia lamblia*cysts) in which:

A precoat cake of graded diatomaceous earth filter media is deposited on a support membrane (septum); and

Water is passed through the cake on the septum while additional filter media, known as body feed, is continuously added to the feed water to maintain the permeability of the filter cake.

"Direct filtration" means a series of processes including coagulation, flocculation, and filtration (but excluding sedimentation) that together result in substantial particulate removal (> 2 log *Giardia lamblia* cysts).

"Direct service connection" means a service hookup to a property that is contiguous to a water distribution main and where additional distribution mains or extensions are not needed to provide service.

"Disinfectant contact time (T in CT)" means: When measuring the first or only C, the time in minutes it takes water to move from the point of disinfectant application to a point where the C is measured; and

For subsequent measurements of C, the time in minutes it takes water to move from one C measurement point to the C measurement point for which the particular T is being calculated.

"Disinfection" means the use of chlorine or other agent or process the department approves for killing or inactivating microbiological organisms, including pathogenic and indicator organisms.

"Distribution coliform sample" means a sample of water collected from a representative location in the distribution system at or after the first service and analyzed for coliform presence in compliance with this chapter.

"Distribution-related projects" means distribution projects such as storage tanks, booster pump facilities, transmission mains, pipe linings, and tank coating. It does not mean source of supply (including interties) or water quality treatment projects.

"Distribution reservoir" means a water storage structure that is integrated with a water system's distribution network to provide for variable system demands including, but not limited to, daily equalizing storage, standby storage, or fire reserves, or to provide for disinfectant contact time.

"Distribution system" means all piping components of a public water system that serve to convey water from transmission mains linked to source, storage and treatment facilities to the consumer excluding individual services.

"Domestic or other nondistribution system plumbing problem,"means contamination of a system having more than one service connection with the contamination limited to the specific service connection from which the sample was taken.

"Drinking water state revolving fund (DWSRF)" means the revolving loan program financed by the state and federal governments and managed by the state for the purpose of assisting water systems to meet their capital needs associated with complying with the federal Safe Drinking Water Act.

"Duplicate (verification) sample" means a second sample collected at the same time and location as the first sample and used for verification.

"Emergency" means an unforeseen event that causes damage or disrupts normal operations and requires immediate action to protect public health and safety.

"Emergency source" means any source that is approved by the department for emergency purposes only, is not used for routine or seasonal water demands, is physically disconnected, and is identified in the purveyor's emergency response plan.

"Engineering design review report" means a form provided by the department and completed for a specific distribution-related project to document:

- Engineering review of a project report and/or construction documents under the submittal exception process in accordance with WAC 246-290-125(3); and
- Design in accordance with this chapter and general standards of engineering practice.

The completed form must be stamped with engineer's seal, and signed and dated by a professional engineer.

"Equalizing storage" means the volume of storage needed to supplement supply to consumers when the peak hourly demand exceeds the total source pumping capacity.

"Equivalent residential unit (ERU)" means a system-specific unit of measure used to express the amount of water consumed by a typical full-time single family residence.

"Expanding public water system" means a public water system installing additions, extensions, changes, or alterations to their existing source, transmission, storage, or distribution facilities that will enable the system to increase in size its existing service area and/or its number of approved service connections. Exceptions:

A system that connects new approved individual retail or direct service connections onto an existing distribution system within an existing service area; or

A distribution system extension in an existing service area identified in a current and approved water system plan or project report.

"Filtration" means a process for removal of particulate matter from water by passage through porous media.

"Financial viability" means the capability of a water system to obtain sufficient funds to construct, operate, maintain, and manage a public water system, on a continuing basis, in full compliance with federal, state, and local requirements.

"Fire flow" means the maximum rate and duration of water flow needed to suppress a fire under WAC 246-293-640 or as required under local fire protection authority standards.

"Fire suppression storage" means the volume of stored water available during fire suppression activities to satisfy minimum pressure requirements per WAC 246-290-230.

"First consumer" means the first service connection associated with any source (i.e., the point where water is first withdrawn for human consumption, excluding connections where water is delivered to another water system covered by these regulations).

"Flocculation" means a process enhancing agglomeration and collection of colloidal and suspended particles into larger, more easily settleable or filterable particles by gentle stirring.

"Flow-through fire protection system" means a fire sprinkler system that:

Is supplied only by the purveyor's water;

Does not have a fire department pumper connection;

Is constructed of approved potable water piping and materials to which sprinkler heads are attached; and

Terminates at a connection to a toilet or other plumbing fixture to prevent the water from becoming stagnant.

"Grab sample" means a water quality sample collected at a specific instant in time and analyzed as an individual sample.

"Ground water under the direct influence of surface water (GWI)" means any water beneath the surface of the ground that the department determines has the following characteristics:

Significant occurrence of insects or other macroorganisms, algae, or large-diameter pathogens such as *Giardia lamblia;* or

Significant and relatively rapid shifts in water characteristics such as turbidity, temperature, conductivity, or pH closely correlating to climatological or surface water conditions where natural conditions cannot prevent the introduction of surface water pathogens into the source at the system's point of withdrawal.

"Guideline" means a department document assisting the purveyor in meeting a rule requirement.

"Health officer" means the health officer of the city, county, city-county health department or district, or an authorized representative.

"Heterotrophic Plate Count (HPC)" means a procedure to measure a class of bacteria that use organic nutrients for growth. The density of these bacteria in drinking water is measured as colony forming units per milliliter and is referred to as the HPC.

"High health cross-connection hazard" means a cross-connection which could impair the quality of potable water and create an actual public health hazard through poisoning or spread of disease by sewage, industrial liquids or waste.

"Human consumption" means the use of water for drinking, bathing or showering, hand washing, food preparation, cooking, or oral hygiene.

"Hydraulic analysis" means the study of a water system's distribution main and storage network to determine present or future adequacy for provision of service to consumers within the established design parameters for the system under peak flow conditions, including fire flow. The analysis is used to establish any need for improvements to existing systems or to substantiate adequacy of design for distribution system components such as piping, elevated storage, booster stations or similar facilities used to pump and convey water to consumers.

"Inactivation" means a process which renders pathogenic microorganisms incapable of producing disease.

"Inactivation ratio" means the ratio obtained by dividing CTcalc by CTreq.

"Incompletely treated water" means water from a surface or GWI source that receives filtration and/or disinfection treatment that does not fully comply with the treatment technique requirements of Part 6 of this chapter as determined by the department.

"In-line filtration" means a series of processes, including coagulation and filtration (but excluding flocculation and sedimentation) that together result in particulate removal.

"In-premises protection" means a method of protecting the health of consumers served by the consumer's potable water system, located within the property lines of the consumer's premises by the installation of an approved air gap or backflow prevention assembly at the point of hazard, which is generally a plumbing fixture.

"Intertie" means an interconnection between public water systems permitting the exchange or delivery of water between those systems.

"Legionella" means a genus of bacteria containing species which cause a type of pneumonia called Legionnaires' Disease.

"Limited alternative to filtration" means a process that ensures greater removal and/or inactivation efficiencies of pathogenic organisms than would be achieved by the combination of filtration and chlorine disinfection.

"Local administrative authority" means the local official, board, department, or agency authorized to administer and enforce the provisions of the Uniform Plumbing Code as adopted under chapter 19.27 RCW.

"Low health cross-connection hazard" means a cross-connection that could cause an impairment of the quality of potable water to a degree that does not create a hazard to the public health, but does adversely and unreasonably affect the aesthetic qualities of such potable waters for domestic use.

"Major project" means all construction projects subject to SEPA in accordance with WAC 246-03-030 (3)(a) and include all surface water source development, all water system storage facilities greater than one-half million gallons, new transmission lines longer than one thousand feet and larger than eight inches in diameter located in new rights of way and major extensions to existing water distribution systems involving use of pipes greater than eight inches in diameter, that are designed to increase the existing service area by more than one square mile.

"Mandatory curtailment" means curtailment required by a public water system of specified water uses and consumer classes for a specified period of time.

"Maximum contaminant level (MCL)" means the maximum permissible level of a contaminant in water the purveyor delivers to any public water system user, measured at the locations identified under WAC 246-290-300, Table 3.

"Maximum contaminant level violation" means a confirmed measurement above the MCL and for a duration of time, where applicable, as outlined under WAC 246-290-310.

"Maximum day demand (MDD)" means the highest actual or estimated quantity of water that is, or is expected to be, used over a twenty-four hour period, excluding unusual events or emergencies. MDD is typically expressed as gallons per day per ERU (gpd/ERU).

"Monitoring waiver" means an action taken by the department pursuant to WAC 246-290-300 (4)(g) or (7)(f) to allow a water system to reduce specific monitoring requirements based on a determination of low source vulnerability to contamination.

"Nested storage" means one component of storage is contained within the component of another.

"Nonacute" means posing a possible or less than immediate risk to human health.

"Nonresident" means a person having access to drinking water from a public water system, but who lives elsewhere. Examples include travelers, transients, employees, students, etc.

"Normal operating conditions" means those conditions associated with the designed, day-to-day provision of potable drinking water that meets regulatory water quality standards and the routine service expectations of the system's consumers at all times, including meeting fire flow demands. Operation under conditions such as power outages, floods, or unscheduled transmission or distribution disruptions, even if considered in the system design, are considered abnormal.

"Operational storage" means the volume of distribution storage associated with source or booster pump normal cycling times under normal operating conditions and is additive to the equalizing and standby storage components, and to fire flow storage if this storage component exists for any given tank.

"Peak hourly demand (PHD)" means the maximum rate of water use, excluding fire flow, that can be expected to occur within a defined service area over a continuous sixty minute time period. PHD is typically expressed in gallons per minute (gpm).

"Peak hourly flow" means, for the purpose of CT calculations, the greatest volume of water passing through the system during any one hour in a day.

"Performance criteria" means the level at which a system shall operate in order to maintain system reliability compliance, in accordance with WAC 246-290-420, and to meet consumers' reasonable expectations.

"Permanent residence" means any dwelling that is, or could reasonably be expected to be, occupied on a continuous basis.

"Permanent source" means a public water system supply source that is used regularly each year, and based on expected operational requirements of the system, will be used more than three consecutive months in any twelve-month period. For seasonal water systems that are in operation for less than three consecutive months per year, their sources shall also be considered to be permanent.

"Point of disinfectant application" means the point where the disinfectant is added, and where water downstream of that point is not subject to contamination by untreated surface water.

"Population served" means the number of persons, resident and nonresident, having immediate access to drinking water from a public water system, whether or not such persons have actually consumed water from that system. The number of nonresidents shall be the average number of persons having immediate access to drinking water on days access was provided during that month. In the absence of specific population data, the number of residents shall be computed by multiplying the number of active services by two and one-half.

"Potable" means water suitable for drinking by the public.

"Potential GWI" means a source identified by the department as possibly under the influence of surface water, and includes, but is not limited to, all wells with a screened interval fifty feet or less from the ground surface at the wellhead and located within two hundred feet of a surface water, and all Ranney wells, infiltration galleries, and springs.

"Premises isolation" means a method of protecting a public water system by installation of approved air gaps or approved backflow prevention assemblies at or near the service connection or alternative location acceptable to the purveyor to isolate the consumer's water system from the purveyor's distribution system.

"Pressure filter" means an enclosed vessel containing properly sized and graded granular media through which water is forced under greater than atmospheric pressure.

"Primary disinfection" means a treatment process for achieving inactivation of *Giardia lamblia* cysts, viruses, or other pathogenic organisms of public health concern to comply with the treatment technique requirements of Part 6 of this chapter.

"Primary standards" means standards based on chronic, nonacute, or acute human health effects.

"Primary turbidity standard" means an accurately prepared formazin solution or commercially prepared polymer solution of known turbidity (prepared in accordance with "standard methods") that is used to calibrate bench model and continuous turbidimeters (instruments used to measure turbidity).

"Project approval application (PAA)" means a department form documenting ownership of water system, design engineer for the project, and type of project.

"Protected ground water source" means a ground water source the purveyor shows to the department's satisfaction as protected from potential sources of contamination on the basis of hydrogeologic data and/or satisfactory water quality history.

"Public water system" is defined and referenced under WAC 246-290-020.

"Purchased source" means water a purveyor purchases from a public water system not under the control of the purveyor for distribution to the purveyor's consumers.

"Purveyor" means an agency, subdivision of the state, municipal corporation, firm, company, mutual or cooperative association, institution, partnership, or person or other entity owning or operating a public water system. Purveyor also means the authorized agents of such entities.

"Reclaimed water" means effluent derived in any part from sewage from a wastewater treatment system that has been adequately and reliably treated, so that as a result of that treatment, it is suitable for beneficial use or a controlled use that would not otherwise occur, and it is no longer considered wastewater.

"Record drawings" means the drawings bearing the seal and signature of a professional engineer that reflect the modifications made to construction documents, documenting actual constructed conditions of the water system facilities.

"Recreational tract" means an area that is clearly defined for each occupant, but has no permanent structures with internal plumbing, and the area has been declared as such in the covenants or on the recorded plat in order to be eligible for reduced design considerations.

"Regional public water supplier" means a water system that provides drinking water to one, or more, other public water systems.

"Regularly" means four hours or more per day for four days or more per week.

"Removal credit" means the level (expressed as a percent or log) of *Giardia* and virus removal the department grants a system's filtration process.

"Repeat sample" means a sample collected to confirm the results of a previous analysis.

"Resident" means an individual living in a dwelling unit served by a public water system.

"Residual disinfectant concentration" means the analytical level of a disinfectant, measured in milligrams per liter, that remains in water following the application (dosing) of the disinfectant after some period of contact time.

"Same farm" means a parcel of land or series of parcels that are connected by covenants and devoted to the production of livestock or agricultural commodities for commercial purposes and does not qualify as a **Group A** public water system.

"Sanitary survey" means a review, inspection, and assessment of a public water system by the department or department designee including, but not limited to: Source, facilities, equipment, administration and operation, maintenance procedures, monitoring, recordkeeping, planning documents and schedules, and management practices. The purpose of the survey is to evaluate the adequacy of the water system for producing and distributing safe and adequate drinking water.

"Satellite management agency (SMA)" means a person or entity that is approved by the department to own or operate public water systems on a regional or county-wide basis without the necessity for a physical connection between such systems.

"Seasonal source" means a public water system source used on a regular basis, that is not a permanent or emergency source.

"Secondary standards" means standards based on factors other than health effects.

"Service connection" means a connection to a public water system designed to provide potable water to a single family residence, or other residential or nonresidential population. When the connection provides water to a residential population without clearly defined single family residences, the following formulas shall be used in determining the number of services to be included as residential connections on the WFI form:

Divide the average population served each day by two and one-half; or

Using actual water use data, calculate the total ERUs represented by the service connection in accordance with department design guidance.

In no case shall the calculated number of services be less than one.

"Significant noncomplier" means a system that is violating or has violated department rules, and the violations may create, or have created an imminent or a significant risk to human health. Such violations include, but are not limited to, repeated violations of monitoring requirements, failure to address an exceedance of permissible levels of regulated contaminants, or failure to comply with treatment technique standards or requirements.

"Simple disinfection" means any form of disinfection that requires minimal operational control in order to maintain the disinfection at proper functional levels, and that does not pose safety concerns that would require special care, equipment, or expertise. Examples include hypochlorination, UV-light, contactor chlorination, or any other form of disinfection practice that is safe to use and easy to routinely operate and maintain.

"Slow sand filtration" means a process involving passage of source water through a bed of sand at low velocity (generally less than 0.10 gpm/ft^2) that results in substantial particulate removal (> 2 log *Giardia lamblia* cysts) by physical and biological mechanisms.

"Source meter" means a meter that measures total output of a water source over specific time periods.

"Source water" means untreated water that is not subject to recontamination by surface runoff and:

For unfiltered systems, enters the system immediately before the first point of disinfectant application; and

For filtered systems, enters immediately before the first treatment unit of a water treatment facility.

"Special purpose investigation (SPI)" means on-site inspection of a public water system by the department or designee to address a potential public health concern, regulatory violation, or consumer complaint.

"Special purpose sample" means a sample collected for reasons other than the monitoring compliance specified in this chapter.

"Spring" means a source of water where an aquifer comes in contact with the ground surface.

"Standard methods" means the 18th edition of the book, titled *Standard Methods for the Examination of Water and Waste Water,* jointly published by the American Public Health Association, American Water Works Association (AWWA), and Water Pollution Control Federation. This book is available through public libraries or may be ordered from AWWA, 6666 West Quincy Avenue, Denver, Colorado 80235.

"Standby storage" means the volume of stored water available for use during a loss of source capacity, power, or similar short-term emergency.

"State advisory level (SAL)" means a level established by the department and state board of health for a contaminant without an existing MCL. The SAL represents a level that when exceeded, indicates the need for further assessment to determine if the chemical is an actual or potential threat to human health.

"State board of health" and **"board"** means the board created by RCW 43.20.030.

"Surface water" means a body of water open to the atmosphere and subject to surface runoff.

"Susceptibility assessment" means the completed Susceptibility Assessment Survey Form developed by the department to evaluate the hydrologic setting of the water source

and assess its contribution to the source's overall susceptibility to contamination from surface activities.

"Synthetic organic chemical (SOC)" means a manufactured carbon-based chemical.

"System capacity" means the system's operational, technical, managerial, and financial capability to achieve and maintain compliance with all relevant local, state, and federal plans and regulations.

"System physical capacity" means the maximum number of service connections or equivalent residential units (ERUs) that the system can serve when considering the limitation of each system component such as source, treatment, storage, transmission, or distribution, individually and in combination with each other.

"Time-of-travel" means the time required for ground water to move through the water bearing zone from a specific point to a well.

"Too numerous to count (TNTC)" means the total number of bacterial colonies exceeds 200 on a 47-mm diameter membrane filter used for coliform detection.

"Tracer study" means a field study conducted to determine the disinfectant contact time, T, provided by a water system component, such as a clearwell or storage reservoir, used for *Giardia lamblia* cyst and virus inactivation. The study involves introducing a tracer chemical at the inlet of the contact basin and measuring the resulting outlet tracer concentration as a function of time.

"Transmission line" means pipes used to convey water from source, storage, or treatment facilities to points of distribution or distribution mains, and from source facilities to treatment or storage facilities. This also can include transmission mains connecting one section of distribution system to another section of distribution system as long as this transmission main is clearly defined as such on the plans and no service connections are allowed along the transmission main.

"Treatment technique requirement" means a department-established requirement for a public water system to provide treatment, such as filtration or disinfection, as defined by specific design, operating, and monitoring requirements. A "treatment technique requirement" is established in lieu of a primary MCL when monitoring for the contaminant is not economically or technologically feasible.

"Trihalomethane (THM)" means one of a family of organic compounds, named as derivatives of methane, where three of the four hydrogen atoms in methane are each substituted by a halogen atom in the molecular structure. THMs may occur when chlorine, a halogen, is added to water containing organic material and are generally found in water samples as disinfection byproducts.

"Turbidity event" means a single day or series of consecutive days, not to exceed fourteen, when one or more turbidity measurement each day exceeds 5 NTU.

"T10" means the time it takes ten percent of the water passing through a system contact tank intended for use in the inactivation of *Giardia lamblia* cysts, viruses, and other microorganisms of public health concern, as determined from a tracer study conducted at peak hourly flow or from published engineering reports or guidance documents for similarly configured tanks.

"Unapproved auxiliary water supply" means a water supply (other than the purveyor's water supply) on or available to the consumer's premises that is either not approved for human consumption by the health agency having jurisdiction or is not otherwise acceptable to the purveyor.

"Uncovered distribution reservoir" means a distribution reservoir that is open, without a suitable water-tight roof or cover, where the potable water supply is exposed to external contaminants, including but not limited to people, birds, animals, and insects.

"Uniform Plumbing Code" means the code adopted under RCW 19.27.031(4) and amended under chapter 51-46 WAC. This code establishes state-wide minimum plumbing standards applicable within the property lines of the consumer's premises.

"Used water" means water which has left the control of the purveyor.

"Verification" means to demonstrate the results of a sample to be precise by analyzing a duplicate sample. Verification occurs when analysis results fall within plus or minus thirty percent of the original sample.

"Virus" means a virus of fecal origin which is infectious to humans and transmitted through water.

"Volatile organic chemical (VOC)" means a manufactured carbon-based chemical that vaporizes quickly at standard pressure and temperature.

"Voluntary curtailment" means a curtailment of water use requested, but not required of consumers.

"Waterborne disease outbreak" means the significant occurrence of acute infectious illness, epidemiologically associated with drinking water from a public water system, as determined by the appropriate local health agency or the department.

"Water facilities inventory (WFI) form" means the department form summarizing each public water system's characteristics.

"Water right" means a permit, claim, or other authorization, on record with or accepted by the department of ecology, authorizing the beneficial use of water in accordance with all applicable state laws.

"Water right assessment" means an evaluation of the legal ability of a water system to use water for existing or proposed usages in conformance with state water right laws. Such an assessment may be done by a water system, a purveyor, the department of ecology, or any combination thereof.

"Watershed" means the region or area that:

Ultimately drains into a surface water source diverted for drinking water supply; and

Affects the physical, chemical, microbiological, and radiological quality of the source.

"Water shortage" means a situation during which the water supplies of a system cannot meet normal water demands for the system, including peak periods.

"Water shortage response plan" means a plan outlining policies and activities to be implemented to reduce water use on a short-term basis during or in anticipation of a water shortage.

"Well field" means a group of wells one purveyor owns or controls that:

Draw from the same aquifer or aquifers as determined by comparable inorganic chemical analysis and comparable static water level and top of the open interval elevations; and

Discharge water through a common pipe and the common pipe shall allow for collection of a single sample before the first distribution system connection.

"Wellhead protection area (WHPA)" means the portion of a well's, wellfield's or spring's zone of contribution defined as such using WHPA criteria established by the department.

"Zone of contribution" means the area surrounding a pumping well or spring that encompasses all areas or features that supply ground water recharge to the well or spring.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-010, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-010, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-010, filed 3/25/93, effective 4/25/93; 92-04-070 (Order 241B), § 246-290-010, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-010, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-010, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-015, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-015, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-015, filed 9/8/83.]

WAC 246-290-020 Applicability. (1) Public water system shall mean any system providing water for human consumption through pipes or other constructed conveyances, excluding a system serving only one single-family residence and a system with four or fewer connections all of which serve residences on the same farm. Such term includes:

(a) Collection, treatment, storage, and/or distribution facilities under control of the purveyor and used primarily in connection with such system; and

(b) Collection or pretreatment storage facilities not under control of the purveyor, but primarily used in connection with such system.

(2) The rules of this chapter shall apply to all **Group A** public water systems except those systems meeting all of the following conditions:

(a) Consists only of distribution and/or storage facilities and does not have any source or treatment facilities;

(b) Obtains all water from, but is not owned by, a public water system where the rules of this chapter apply;

(c) Does not sell water directly to any person; and

(d) Is not a passenger-conveying carrier in interstate commerce.

(3) **Group A** public water systems meeting all of the provisions under subsection (2) of this section may be required by the department to comply with such provisions of this chapter as are necessary to resolve a public health concern if the department determines a public health threat exists or is suspected.

(4) A **Group A** system shall be defined as a public water system providing service such that it meets the definition of a public water system provided in the 1996 amendments to the federal Safe Drinking Water Act (Public Law 104-182, Section 101, subsection b).

(5) **Group A** water systems are further defined as **community**and **noncommunity** water systems.

(a) **Community** water system means any **Group A** water system providing service to fifteen or more service connections used by year-round residents for one hundred eighty or more days within a calendar year, regardless of the number of people, or regularly serving at least twenty-five year-round (i.e., more than one hundred eighty days per year) residents.

Examples of a **community** water system might include a municipality, subdivision, mobile home park, apartment complex, college with dormitories, nursing home, or prison.

(b) **Noncommunity** water system means a **Group A** water system that is not a **community** water system. **Noncommunity** water systems are further defined as:

(i) **Nontransient (NTNC)** water system that provides service opportunity to twenty-five or more of the same nonresidential people for one hundred eighty or more days within a calendar year.

Examples of a **NTNC** water system might include a school, day care center, or a business, factory, motel, or restaurant with twenty-five or more employees on-site.

(ii) **Transient (TNC)** water system that serves:

(A) Twenty-five or more different people each day for sixty or more days within a calendar year;

(B) Twenty-five or more of the same people each day for sixty or more days, but less than one hundred eighty days within a calendar year; or

(C) One thousand or more people for two or more consecutive days within a calendar year.

Examples of a **TNC** water system might include a restaurant, tavern, motel, campground, state or county park, an RV park, vacation cottages, highway rest area, fairground, public concert facility, special event facility, or church.

(c) A **Group B** water system is a public water system that does not meet the definition of a **Group A** water system. (See Table 1 and chapter 246-291 WAC for further explanation of a **Group B** water system.)

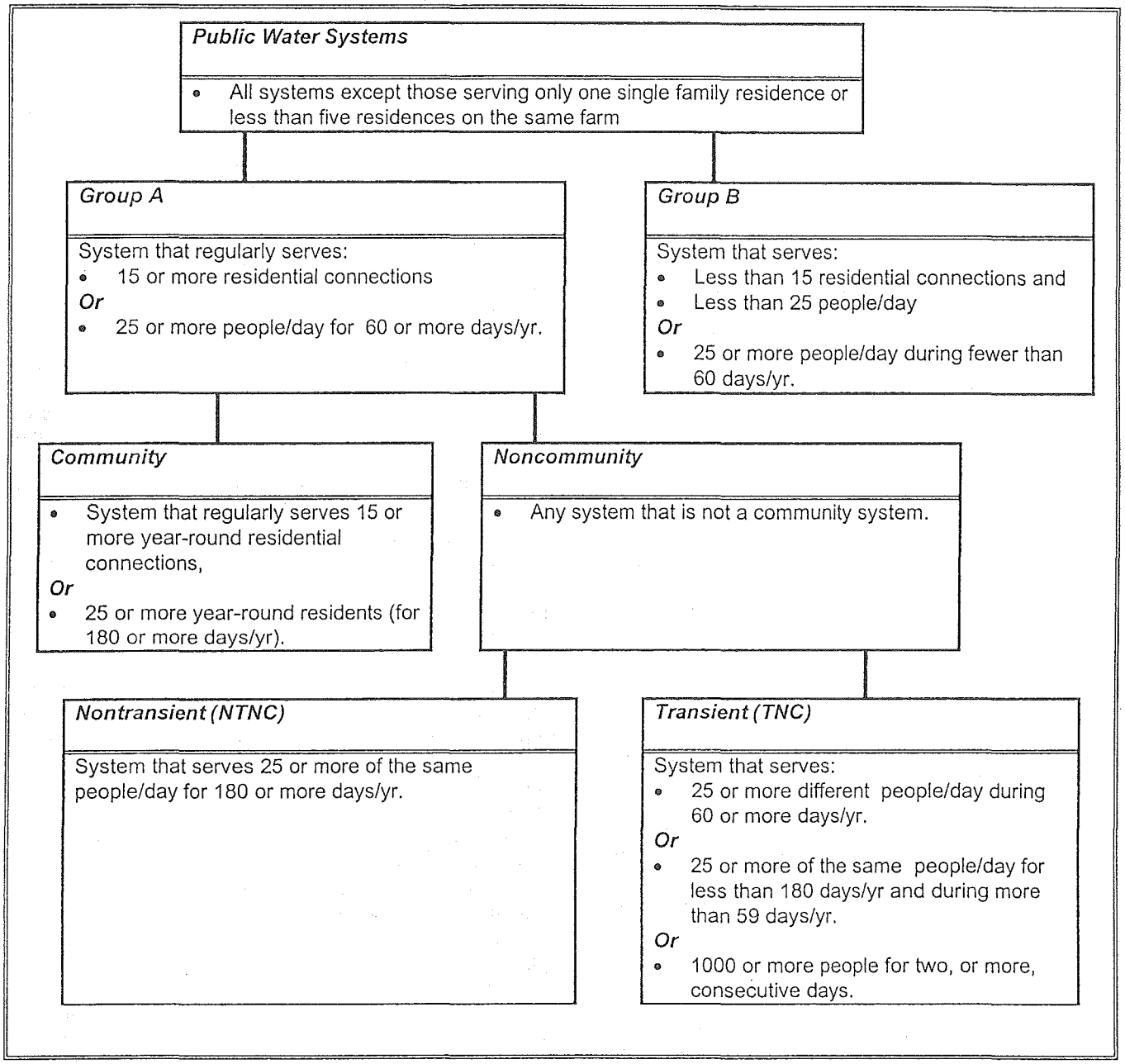
(6) A **Group A** system meeting more than one of the categories described in this section shall be classified by the department in the following order:

(a) **Community** water system;

(b) **NTNC** water system; or

(c) **TNC** water system.

Table 1



Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-020, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-020, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-020, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-006, filed 10/10/89, effective 11/10/89.]

WAC 246-290-025 Adoption by reference. The following sections and subsections of Title 40 Code of Federal Regulations (CFR) Part 141 National Primary Drinking Water Regulations revised as of July 1, 1996, and including all amendments and modifications thereto effective as of the date of adoption of this chapter are adopted by reference:

141.2 Definitions. Only those definitions listed as follows:

Action level;
Corrosion inhibitor;
Effective corrosion inhibitor residual;
First draw sample;
Large water system;
Lead service line;
Medium-size water system;
Optimal corrosion control treatment;
Service line sample;
Single family structure; and
Small water system.

141.12 Maximum contaminant levels for organic chemicals.
141.13 Maximum contaminant levels for turbidity.
141.21 Coliform monitoring.
141.22 Turbidity sampling and analytical requirements.
141.23(a) - 141.23(j), Inorganic chemical sampling.
141.23(m) - 141.23(o)
141.24(a) - 141.24(d), Organic chemicals other than total trihalomethanes.
141.24 (f)(1) - 141.24 (f)(15),
141.24 (f)(18), 141.24 (f)(19),
141.24 (f)(21),
141.24 (g)(1) - 141.24 (g)(9),
141.24 (g)(12) - 141.24 (g)(14),
141.24 (h)(1) - 141.24 (h)(11),
141.24 (h)(14) - 141.24 (h)(17)
141.40(a) - 141.40(e), Special monitoring for inorganic and organic chemicals.
141.40(g), 141.40(i) - 141.40(n)
141.61 Maximum contaminant levels for organic contaminants.
141.62 Maximum contaminant levels for inorganic chemical and physical contaminants.

Control of Lead and Copper

141.80 General requirements.
141.81 Applicability of corrosion control treatment steps to small, medium-size and large water systems.
141.82(a) - 141.82(h) Description of corrosion control treatment requirements.
141.83 Source water treatment requirements.
141.84 Lead service line replacement requirements.
141.85 Public education and supplemental monitoring requirements.
141.86 Monitoring requirements for lead and copper in tap water.
141.87 Monitoring requirements for water quality parameters.
141.88 Monitoring requirements for lead and copper in source water.
141.90 Reporting requirements.
141.91 Recordkeeping requirements.
143.1-143.5 Secondary contaminants.

Copies of the incorporated sections and subsections of Title 40 CFR are available from the Department of Health, Airdustrial Center Building 3, P.O. Box 47822, Olympia, Washington 98504-7822, or by calling the department's drinking water hotline at 1-800-521-0323.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-025, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-025, filed 6/22/94, effective 7/23/94.]

WAC 246-290-030 General administration. (1) The department and the health officer for each local health jurisdiction may develop a joint plan of operation. This plan shall:

(a) List the roles and responsibilities of each agency;

(b) Specifically designate those **Group A** systems for which the department and local health officer have primary responsibility;

(c) Provide for an agreed-to level of public water system oversight;

(d) Be signed by the department and the local health department or district; and

(e) Be reviewed at least once every five years and updated as needed.

Wherever in this chapter the term "department" is used, the term "health officer" may be substituted based on the terms of this plan of operation.

(2) The department shall, upon request, review and report on the adequacy of water supply supervision to both the state and local boards of health.

(3) The local board of health may adopt rules governing **Group A** water systems within its jurisdiction for which the health officer has assumed primary responsibility. Adopted local board of health rules shall be:

(a) No less stringent than this chapter; and

(b) Revised, if necessary, within twelve months after the effective date of revised state board of health rules. During this time period, existing local rules shall remain in effect, except provisions of the revised state board of health rules that are more stringent than the local board of health rules shall apply.

(4) For those **Group A** water systems where the health officer has assumed primary responsibility, the health officer may approve project reports and construction documents in accordance with engineering criteria approved by the department and listed under Part 3 of this chapter and water system plans in accordance with planning criteria listed under WAC 246-290-100.

(5) An advisory committee shall be established to provide advice to the department on the organization, functions, service delivery methods, and funding of the drinking water program. Members shall be appointed by the department for fixed terms of no less than two years, and may be reappointed. The committee shall reflect a broad range of interests in the regulation of public water supplies, including water utilities of all sizes, local governments, business groups, special purpose districts, local health jurisdictions, other state and federal agencies, financial institutions, environmental organizations, the legislature, professional engineers engaged in water system design, and other groups substantially affected by the department's role in implementing state and federal requirements for public water systems.

(6) The department may develop guidance to clarify sections of the rules as needed and make these available for distribution. Copies of the guidance may be obtained by contacting the division of drinking water.

(7) Fees may be charged and collected by the department as authorized in chapter 43.20B RCW and by local health agencies as authorized in RCW 70.05.060 to recover all or a portion of the costs incurred in administering this chapter or that are required to be paid under WAC 246-290-990.

(8) All state and local agencies involved in review, approval, surveillance, testing, and/or operation of public water systems, or issuance of permits for buildings or sewage systems shall be governed by these rules and any decisions of the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-030, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-030, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-030, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-030, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-025, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-025, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-025, filed 9/8/83.]

WAC 246-290-035 Water system ownership. (1) The following requirements apply to all newly developed public water systems:

(a) Except for systems proposed within an individual water system's approved service area in a critical water supply service area as governed by the Public Water System Coordination Act, chapter 70.116 RCW and chapter 246-293 WAC, and offered service by that existing system, any proposed new public water system must be owned or operated by a department approved satellite management agency (SMA) if one is available;

(b) The approval of any proposed new public water system shall be conditioned upon the periodic review of the system's operational history to determine its ability to meet the department's financial viability and other operating requirements. If, upon periodic review, the department determines the system is in violation of financial viability or other operating requirements, the system shall transfer ownership to an approved SMA or obtain operation and management by an approved SMA, if such ownership or operation and management can be made with reasonable economy and efficiency.

(2) An owner of a public water system who is proposing to transfer or has transferred ownership shall:

(a) Provide written notice to the department and all consumers at least one year prior to the transfer, unless the new owner agrees to an earlier date. Notification shall include a time schedule for transferring responsibilities, identification of the new owner, and under what authority the new ownership will operate. If the system is a corporation, identification of the registered agent shall also be provided;

(b) Ensure all health-related standards pursuant to this chapter are met during transfer of the utility. It shall also be the responsibility of the utility transferring ownership to inform and train the new owner regarding operation of the utility; and

(c) Comply with the operating permit requirements pursuant to chapter 246-294 WAC.

(3) The purveyor may be required to document compliance with other relevant ownership requirements, such as those pursuant to UTC jurisdiction under Title 80 RCW.

(4) No purveyor may end utility operations without providing written notice to all customers and to the department at least one year prior to termination of service. A purveyor that fails to provide such notice remains subject to the provisions of this chapter.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-035, filed 3/9/99, effective 4/9/99.]

WAC 246-290-040 Engineering requirements. (1) Purveyors shall ensure that all work required to be prepared under the direction of a professional engineer, including, but not limited to, water system plans, project reports, corrosion control recommendation reports, tracer studies, construction documents and construction completion reports, and engineering design review reports for distribution-related submittal exceptions, is prepared under the direction, and bears the seal, date, and signature of a professional engineer:

(a) Licensed in the state of Washington under chapter 18.43 RCW; and

(b) Having specific expertise regarding design, operation, and maintenance of public water systems.

(2) Exceptions to this requirement are projects identified under WAC 246-290-125 (1)(a) through (d).

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-040, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-040, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-040, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-040, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-035, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-035, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-035, filed 9/8/83.]

WAC 246-290-050 Enforcement. When any purveyor is out of compliance with a law or rule regulating public water systems and administered by the department, the department may initiate appropriate enforcement actions, regardless of any prior approvals issued. These actions may include, but are not limited to, any one or combination of the following:

(1) Notice of violation instructing or requiring appropriate corrective measures;

(2) Compliance schedule for specific actions necessary to achieve compliance status;

(3) Departmental order requiring submission of project reports, construction documents, and construction report forms;

(4) Departmental order requiring specific actions or ceasing unacceptable activities within a designated time period;

(5) Departmental order to stop work and/or refrain from using any public water system or improvements thereto until all written approvals required by statute or rule are obtained;

(6) Imposition of civil penalties may be issued for up to five thousand dollars per day per violation, or, in the case of a violation that has been determined to be a public health emergency, a penalty of not more than ten thousand dollars

per day per violation under authority of chapter 70.119A RCW;

(7) Imposition of civil penalties may be issued to a person who constructs, modifies, or expands a public water system or who commences the construction, modification, or expansion of a public water system without first obtaining the required department approval. The amount of the penalty may be up to five thousand dollars per service connection, or, in the case of a system serving a transient population, a penalty of not more than four hundred dollars per person based on the highest average daily population the system serves or is anticipated to serve. The total penalty that may be imposed pursuant to this subsection and RCW 70.119A.040 (1)(b) is five hundred thousand dollars;

(8) Action that requires the purveyor to take preventive or corrective steps when results of a sanitary survey or special purpose investigation conducted by, or on behalf of, the department indicate conditions that are currently or may become a detriment to system operation;

(9) Legal action may be taken by the attorney general or local prosecutor. The legal action may be criminal or civil.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-050, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-050, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-050, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-045, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-045, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-045, filed 9/8/83.]

WAC 246-290-060 Variances, exemptions, and waivers. (1) General.

(a) The state board of health may grant variances, exemptions, and waivers of the requirements of this chapter according to the procedures outlined in subsection (5) of this section. See WAC 246-290-300 (4)(g) and (7)(f) for monitoring waivers.

(b) Consideration by the board of requests for variances, exemptions, and waivers shall not be considered adjudicative proceedings as that term is defined in chapter 34.05 RCW.

(c) Statements and written material regarding the request may be presented to the board at or before the public hearing wherein the application will be considered. Allowing cross-examination of witnesses shall be within the discretion of the board.

(d) The board may grant a variance, exemption, or waiver if it finds:

(i) Due to compelling factors, the public water system is unable to comply with the requirements; and

(ii) The granting of the variance, exemption, or waiver will not result in an unreasonable risk to the health of consumers.

(2) Variances.

(a) MCL.

(i) The board may grant a MCL variance to a public water system that cannot meet the MCL requirements because of characteristics of the source water that is reasonably available to the system.

(ii) A MCL variance may only be granted after the system has applied the best available technology (BAT), treatment techniques, or other means as identified by the environmental protection agency (EPA) and still cannot meet an MCL standard as specified in section 1415, Public Law 93-523 (federal Safe Drinking Water Act) as amended by Public Law 99-339 (SDWA amendments of 1986), and Public Law 104-182 (SDWA amendments of 1996), as codified at 42 USC 300g-4.

(iii) A variance shall not be granted from the MCL for presence of total coliform under WAC 246-290-310(2).

(b) Treatment techniques.

(i) The board may grant a treatment technique variance to a public water system if the system demonstrates that the treatment technique is not necessary to protect the health of consumers because of the nature of the system's source water.

(ii) A variance shall not be granted from any treatment technique requirement under Part 6 of chapter 246-290 WAC.

(c) The board shall condition the granting of a variance upon a compliance schedule as described in subsection (6) of this section.

(3) Exemptions.

(a) The board may grant a MCL or treatment technique exemption to a public water system that cannot meet an MCL standard or provide the required treatment in a timely manner, or both, as specified under section 1416, Public Law 93-523 (federal Safe Drinking Water Act) as amended by Public Law 99-339 (SDWA amendments of 1986), and Public Law 104-182 (SDWA amendments of 1996), as codified at 42 USC 300g-4.

(b) An exemption may be granted for up to one year if the system was:

(i) In operation on the effective date of the MCL or treatment technique requirement; or

(ii) Not in operation on the effective date, and no reasonable alternative source of drinking water is available.

(c) No exemption shall be granted from:

(i) The requirement to provide a residual disinfectant concentration in the water entering the distribution system under WAC 246-290-662 or 246-290-692; or

(ii) The MCL for presence of total coliform under WAC 246-290-310(2).

(d) The board shall condition the granting of an exemption upon a compliance schedule as described in subsection (6) of this section.

(4) Waivers. The board may grant a waiver to a public water system if the system cannot meet the requirements of these regulations pertaining to any subject not covered by EPA regulations.

(5) Procedures.

(a) For variances and exemptions. The board shall consider granting a variance or exemption to a public water system upon completion of the following actions:

(i) The purveyor applies in writing to the department. The application, which may be in the form of a letter, shall clearly state the reason for the request and what actions the purveyor has taken to meet the requirement;

(ii) The purveyor provides notice of the purveyor's application to consumers and provides proof of such notice to the department;

(iii) The department prepares recommendations, including a compliance schedule for the board's consideration;

(iv) The board provides notice for and conducts a public hearing on the purveyor's request; and

(v) EPA reviews any variance or exemption granted by the board for concurrence, revocation, or revision as provided under sections 1415 and 1416 of Public Law 93-523 (federal Safe Drinking Water Act), as amended, codified at 42 USC 300g-4.

(b) For waivers. The board shall consider granting a waiver upon completion of the following actions:

(i) The purveyor applies to the department in writing. The application, which may be in the form of a letter, shall clearly state the reason for the request;

(ii) The purveyor provides notice of the purveyor's application to consumers and provides proof of such notice to the department;

(iii) The department prepares a recommendation to the board; and

(iv) The board provides notice for and conducts a public hearing on the purveyor's request.

(6) Compliance schedule.

(a) The board shall condition the granting of a variance or exemption based on a compliance schedule. The compliance schedule shall include:

(i) Actions the purveyor shall undertake to comply with a MCL or treatment technique requirement within a specified time period; and

(ii) A description and time-table for implementation of interim control measures the department may require while the purveyor completes the actions required in (a)(i) of this subsection.

(b) The purveyor shall complete the required actions in the compliance schedule within the stated time frame.

(7) Extensions to exemptions.

(a) The board may extend the final date of compliance prescribed in the compliance schedule for a period of up to three years after the date the exemption was granted upon a finding that the water system:

(i) Cannot meet the MCL or treatment technique requirements without capital improvements that cannot be completed within the original exemption period;

(ii) Has entered into an agreement to obtain needed financial assistance for necessary improvements; or

(iii) Has entered into an enforceable agreement to become part of a regional public water system and the system is taking all practicable steps to meet the MCL.

(b) The board may extend the final date of compliance prescribed in the compliance schedule of an exemption for one or more additional two-year periods if the purveyor:

(i) Is a community water system providing water to less than five hundred service connections;

(ii) Needs financial assistance for the necessary improvements; and

(iii) Is taking all practicable steps to meet the compliance schedule.

(c) Procedures listed in subsection (5) of this section shall be followed in the granting of extensions to exemptions.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-060, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-060, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-060, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-060, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-055, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-055, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-055, filed 9/8/83.]

WAC 246-290-100 Water system plan. (1) The purpose of this section is to establish a uniform process for purveyors to:

(a) Demonstrate the system's operational, technical, managerial, and financial capability to achieve and maintain compliance with relevant local, state, and federal plans and regulations;

(b) Demonstrate how the system will address present and future needs in a manner consistent with other relevant plans and local, state, and federal laws, including applicable land use plans;

(c) Establish eligibility for funding pursuant to the drinking water state revolving fund.

(2) Purveyors of the following categories of community public water systems shall submit a water system plan for review and approval by the department:

(a) Systems having one thousand or more services;

(b) Systems required to develop water system plans under the Public Water System Coordination Act of 1977 (chapter 70.116 RCW);

(c) Any system experiencing problems related to planning, operation, and/or management as determined by the department;

(d) All new systems;

(e) Any expanding system; and

(f) Any system proposing to use the document submittal exception process in WAC 246-290-125.

(3) The purveyor shall work with the department and other parties to establish the level of detail for a water system plan. In general, the scope and detail of the plan will be related to size, complexity, past performance, and use of the water system. Project reports may be combined with a water system plan.

(4) In order to demonstrate system capacity, the water system plan shall address the following elements, as a minimum, for a period of at least twenty years into the future:

(a) Description of the water system, including:

(i) Ownership and management, including the current names, addresses, and telephone numbers of the owners, operators, and emergency contact persons for the system;

(ii) System history and background;

(iii) Related plans, such as coordinated water system plans, abbreviated coordinated water system plans, local land use plans, ground water management plans, and basin plans;

(iv) Service area map, characteristics, agreements, and policies; and

(v) Satellite management, if applicable.

(b) Basic planning data, including:

(i) Current population, service connections, water use, and equivalent residential units; and

(ii) Projected land use, future population, and water demand for a consecutive six-year and final twenty-year planning period within the system's service area.

(c) System analysis, including:

(i) System design standards;

(ii) Water quality analysis;

(iii) System inventory description and analysis; and

(iv) Summary of system deficiencies.

(d) Water resource analysis, including:

(i) Development and implementation of a cost-effective conservation program, which includes evaluation of conservation-oriented water rate structures;

(ii) Water demand forecasts;

(iii) Water use data collection;

(iv) Source of supply analysis, which includes an evaluation of water supply alternatives if additional water rights will be pursued within twenty years;

(v) Water shortage response plan if a water system experiences a water shortage, or anticipates it will experience a water shortage within the next six-year planning period;

(vi) Water right assessment;

(vii) Water supply reliability analysis; and

(viii) Interties.

(e) Source water protection in accordance with WAC 246-290-135.

(f) Operation and maintenance program in accordance with WAC 246-290-415 and 246-290-654(5), as applicable.

(g) Improvement program, including a six-year capital improvement schedule.

(h) Financial program, including demonstration of financial viability by providing:

(i) A summary of past income and expenses;

(ii) A one-year balanced operational budget for systems serving one thousand or more connections or a six-year balanced operational budget for systems serving less than one thousand connections;

(iii) A plan for collecting the revenue necessary to maintain cash flow stability and to fund the capital improvement program and emergency improvements; and

(iv) A rate structure that has considered:

(A) The affordability of water rates; and

(B) The feasibility of adopting and implementing a rate structure that encourages water conservation.

(i) Other documents, such as:

(i) Documentation of SEPA compliance;

(ii) Agreements; and

(iii) Comments from the county and adjacent utilities.

(5) Purveyors intending to implement the project report and construction document submittal exceptions authorized under WAC 246-290-125 must include:

(a) Standard construction specifications for distribution mains; and/or

(b) Design and construction standards for distribution-related projects, including:

(i) Description of project report and construction document internal review procedures, including engineering design review and construction completion reporting requirements;

(ii) Construction-related policies and requirements for external parties, including consumers and developers;

(iii) Performance and sizing criteria; and

(iv) General reference to construction materials and methods.

(6) The department, at its discretion, may require reports from purveyors identifying the progress in developing their water system plans.

(7) Purveyors shall transmit water system plans to adjacent utilities and local governments having jurisdiction, to assess consistency with ongoing and adopted planning efforts.

(8) For community systems, the purveyor shall hold an informational meeting for system consumers prior to departmental approval of a water system plan or a water system plan update. The purveyor shall notify consumers in a way that is appropriate to the size of the system.

(9) Department approval of a water system plan shall be in effect for six years from the date of written approval unless:

(a) Major projects subject to SEPA as defined in WAC 246-03-030 (3)(a) are proposed that are not addressed in the plan;

(b) Changes occur in the basic planning data significantly affecting system improvements identified; or

(c) The department requests an updated plan or plan amendment.

(10) The purveyor shall update the plan and submit it for approval at least every six years. If the system no longer meets the conditions of subsection (2) of this section, the purveyor shall as directed by the department, submit either a plan amendment the scope of which will be determined by the department, or a small water system management program under WAC 246-290-105.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-100, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-100, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-100, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-065, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-065, filed 9/8/83.]

WAC 246-290-105 Small water system management program. (1) The purpose of a small water system management program is to:

(a) Demonstrate the system's operational, technical, managerial, and financial capability to achieve and maintain compliance with all relevant local, state, and federal plans and regulations; and

(b) Establish eligibility for funding pursuant to the drinking water state revolving fund.

(2) All noncommunity and all community systems not required to complete a water system plan as described under WAC 246-290-100(2) shall develop and implement a small water system management program.

(3) The purveyor shall submit this program for review and approval to the department when:

(a) A new NTNC public water system is created; or

(b) An existing system has operational, technical, managerial, or financial problems, as determined by the department.

(4) Content and detail shall be consistent with the size, complexity, past performance, and use of the public water system. General content topics shall include, but not be limited to, the following elements:

(a) System management;
(b) Annual operating permit;
(c) Water facilities inventory form;
(d) Service area and facility map;
(e) Documentation of water rights, through a water right assessment;
(f) Record of source water pumped;
(g) Water usage;
(h) Water conservation program;
(i) Source protection;
(j) Component inventory and assessment;
(k) List of planned system improvements;
(l) Water quality monitoring program;
(m) Operation and maintenance program;
(n) Cross-connection control program;
(o) Emergency response plan; and
(p) Budget.

(5) The department may require changes be made to a small water system management program if necessary to effectively accomplish the program's purpose.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-105, filed 3/9/99, effective 4/9/99.]

WAC 246-290-110 Project report. (1) The project report is a written document that describes why a project is being proposed and includes engineering design calculations showing how the project will meet its objectives.

(2) The purveyor shall submit project reports to the department and receive written approval prior to installation or construction of any new water system, water system extension, or improvement. The department may require the submittal of a project report for the purpose of resolving a system operational problem. Exceptions to this requirement are listed in WAC 246-290-125.

(3) Project reports submitted for approval by purveyors who are required to have a water system plan will not be considered for approval unless a current, approved water system plan that adequately addresses the project is on file with the department. In the event that a purveyor of an existing system does not have such a plan, the department may enter into a compliance agreement with the purveyor that grants a time extension to complete the water system plan.

(4) Project reports shall be consistent with the standards identified in Part 3 of this chapter. Depending on the complexity and type of project or problem, shall include the following elements (information contained in a current water system plan or other engineering document previously approved by the department need not be duplicated, but must be specifically referenced):

(a) Project description, including:

(i) Why the project is being proposed, how problem(s) (if any) are to be addressed, and the relationship of the project to other system components;

(ii) A statement of State Environmental Policy Action (SEPA) determination of nonsignificance or justification of why SEPA does not apply to project;

(iii) If applicable, source development information (refer to WAC 246-290-130, Source approval, WAC 246-290-132, Interties, and WAC 246-290-135, Source protection);

(iv) If applicable, type of treatment (refer to WAC 246-290-250, Water treatment and Part 6, Surface water treatment); and

(v) A summary of consumer and user complaints.

(b) Planning data. If a purveyor has a water system plan or small water system management program, the project report shall indicate the proposed project's relationship to the plan. If the purveyor is not required by WAC 246-290-100 to have a water system plan, planning related information shall include:

(i) General project background with population and water demand forecasts;

(ii) How the project will impact neighboring water systems;

(iii) Local requirements, such as fire flow;

(iv) Additional management responsibilities in accordance with WAC 246-290-105, Small water system management program, WAC 246-290-415, Operations and maintenance, and chapter 246-292 WAC, Waterworks operator certification regulations;

(v) Implementation strategies or proposed construction schedule;

(vi) Estimated capital and annual operating cost, and method of financing, if applicable.

(c) An analysis of alternatives, including description of options and rationale for selecting the proposed option.

(d) A review of water quality as it relates to the purpose of the proposed project. If a project involves treatment and/or a filtration facility pilot study, refer to departmental guidance, reporting requirements for corrosion control under 40 CFR 141.90, and tracer studies under WAC 246-290-636(5).

(e) When the project involves a new source or an increase in system physical capacity, a review of water quantity, including a water rights assessment, unless such an assessment has previously been submitted in a water system plan or small water system management program that has been approved by the department. The purveyor shall take any follow-up action as directed by the department, to determine conformance with applicable state water rights laws.

(f) Engineering calculations including sizing justification, hydraulic analysis, physical capacity analysis, and other relevant technical considerations necessary to support the project.

(g) Design and construction standards, including performance standards, construction materials and methods, and sizing criteria, if applicable.

(h) Project reports for the design of treatment facilities shall include the following:

(i) Detailed design criteria and calculations to support the proposed treatment processes, process control, and process utilities; and

(ii) Proposed methods and schedules for start-up, testing, and operation of the completed treatment facility.

(i) Legal considerations, such as ownership, right-of-way, sanitary control area (SCA), restrictive covenants, restrictions related to water use that are recorded on titles or deeds to properties, and relationship with the boundary review board and the utilities and transportation commission (UTC).

(j) Other necessary department-determined considerations.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-110, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-110, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-110, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-110, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-086, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-086, filed 2/17/88.]

WAC 246-290-115 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-290-120 Construction documents. (1) Construction documents shall identify how specific projects will be constructed while satisfying the requirements and conditions established in the project report and/or the water system plan.

(2) Purveyors shall submit construction documents to the department for written approval prior to installation of any new water system, or water system extension or improvement. Exceptions to this requirement are listed in WAC 246-290-125.

(3) Construction documents submitted for approval by purveyors who are required to have a water system plan will not be considered for approval unless a current, approved water system plan that adequately addresses the project is on file with the department. In the event that a purveyor of an existing system does not have such a plan, the department may enter into a compliance agreement with the purveyor that grants a time extension to complete the water system plan.

(4) Construction documents shall be consistent with the standards identified in Part 3 of this chapter and shall include, at a minimum, the following:

(a) Drawings. Include detailed drawings of each project component;

(b) Material specifications. List detailed material specifications for each project component;

(c) Construction specifications.

(i) List detailed construction specifications and assembly techniques for carrying out the project;

(ii) Testing. Identify testing criteria and procedures for each applicable portion of the project;

(iii) Disinfection. Identify specific disinfection procedures that shall conform with American Water Works Association (AWWA) standards or other standards acceptable to the department;

(iv) Inspection. Identify provisions for inspection of the installation of each project component. See WAC 246-290-040 and subsection (5) of this section for construction reporting requirements;

(d) Change orders. All significant changes shall be submitted to and approved by the department in writing. The change order must identify who will be responsible for obtaining departmental approval and how change orders will be reported to the department. Significant means a change in materials used, deviations from original intent of project, or changes made to the physical capacity of the project;

(e) Record drawings. Record drawings provided to the purveyor following the completion of the project shall be maintained and available to the department upon request.

(5) Purveyors shall submit a construction completion report (departmental form) to the department within sixty days of completion and before use of distribution-related projects in accordance with WAC 246-290-125 (3)(f), or other project approved for construction by the department. Exceptions to this requirement are projects listed in WAC 246-290-125(1). The form shall:

(a) Bear the seal, date, and signature of a professional engineer licensed in the state of Washington;

(b) State the project is constructed and is completed in accordance with department regulations and principles of standard engineering practice, including physical testing procedures, water quality tests, and disinfection practices; and

(c) Document system physical capacity to serve consumers if the project results in a change (increase or decrease) in physical capacity.

(6) The purveyor shall submit a new or updated water facilities inventory (WFI) form (departmental form) with the construction completion report (departmental form) for a new water system, whenever there are changes or additions to an existing water system that would change information of the WFI, or when required by the department.

(7) If the project results in an increase in the water system's physical capacity, the purveyor shall submit a water right assessment, unless such an assessment has previously been submitted in a project report, water system plan, or small water system management program, that has been approved by the department. The purveyor shall take any follow-up action, as directed by the department, to determine conformance with applicable state water rights laws.

(8) Approval of construction documents shall be in effect for two years unless the department determines a need to withdraw the approval. An extension of the approval may be obtained by submitting a status report and a written schedule for completion. Extensions may be subject to additional terms and conditions imposed by the department.

(9) The purveyor shall fulfill the requirements of this section before the use of any completed project.

(10) Purveyors of new water systems must meet the ownership requirements of WAC 246-290-035 and the water system planning requirements of WAC 246-290-100 or 246-290-105 before the department will review and approve the purveyors' construction documents.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-120, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-120, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-096, filed 2/17/88.]

WAC 246-290-125 Project report and construction document submittal exceptions. (1) The following projects do not require project reports in accordance with WAC 246-290-110 and construction documents in accordance with WAC 246-290-120 to be submitted to the department for review and approval prior to installation:

(a) Installation of valves, fittings, and meters, including backflow prevention assemblies;

(b) Installation of hydrants in accordance with WAC 246-290-230 (3) and (6);

(c) Repair of a system component or replacement with a component of a similar capacity and material in accordance with the original construction specifications of the approved design; or

(d) Maintenance or painting of surfaces not contacting potable water.

(2) Purveyors may elect to not submit to the department for review and approval project reports in accordance with WAC 246-290-110 and construction documents in accordance with WAC 246-290-120 for new distribution mains providing:

(a) The purveyor water system has on file with the department a current department-approved water system plan that includes standard construction specifications for distribution mains; and

(b) The purveyor maintains on file a completed construction completion report (departmental form) in accordance with WAC 246-290-120(5) and makes it available for review upon request by the department.

(3) Purveyors may elect to not submit to the department for review and approval project reports in accordance with WAC 246-290-110 and construction documents in accordance with WAC 246-290-120 for review and approval of other distribution-related projects as defined in WAC 246-290-010 providing:

(a) The purveyor has on file with the department a current department-approved water system plan, in accordance with WAC 246-290-100(5);

(b) The purveyor submits a written request with a new water system plan or an amendment to a water system plan, and updates the request with each water system plan update. The written request should specifically identify the types of projects or facilities for which the submittal exception procedure is requested;

(c) The purveyor has documented that they have employed or hired under contract the services of a professional engineer licensed in the state of Washington to review distribution-related projects not submitted to the department for review and approval. The review engineer and design engineer shall not be the same individual. The purveyor shall provide written notification to the department whenever they proposed to change their designated review engineer;

(d) If the project is a new transmission main, storage tank, or booster pump station, it must be identified in the capital improvement program of the utility's water system plan. If not, either the project report must be submitted to the department for review and approval, or the water system plan must be amended;

(e) A project summary file is maintained by the purveyor for each project and made available for review upon request by the department, and includes:

(i) Descriptive project summary;

(ii) Anticipated completion schedule;

(iii) Consistency with utility's water system plan;

(iv) Water right assessment, where applicable;

(v) Change in system physical capacity;

(vi) Copies of original design and record drawings;

(vii) Engineering design review report (departmental form). The form shall:

(A) Bear the seal, date, and signature of a professional engineer licensed in the state of Washington prior to the start of construction;

(B) Provide a descriptive reference to completed project report and/or construction documents reviewed, including date of design engineer's seal and signature; and

(C) State the project report and/or construction documents have been reviewed, and the design is in accordance with department regulations and principles of standard engineering practice;

(f) The construction completion report is submitted to the department in accordance with WAC 246-290-120(5) for new storage tanks and booster pump stations, and maintained on file with the water system for all other distribution-related projects;

(g) A WFI is completed in accordance with WAC 246-290-120(6); and

(h) The purveyor meets the requirements of chapter 246-294 WAC to have a category "green" operating permit.

(4) Source of supply (including interties) and water quality treatment-related projects shall not be eligible for the submittal exception procedure.

(5) Purveyors not required to prepare a water system plan under WAC 246-290-100 shall be eligible for the submittal exception procedure provided that:

(a) They have a department-approved water system plan meeting the requirements of WAC 246-290-100; and

(b) They comply with all other requirements in this section.

(6) Purveyors shall ensure that all work required to be prepared under the direction of a professional engineer be accomplished per WAC 246-290-040 and chapter 18.43 RCW.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-125, filed 3/9/99, effective 4/9/99.]

WAC 246-290-130 Source approval. (1) Every purveyor shall obtain drinking water from the highest quality source feasible. No new source, previously unapproved source, or modification of an existing source shall be used as a public water supply without department approval. No intake or other connection shall be maintained between a public water system and a source of water not approved by the department.

(2) Before initiating source development or modification, the purveyor shall contact the department to identify submittal requirements.

(3) Any party seeking source approval shall provide the department sufficient documentation, in a project report, construction documents, or in supplemental documents, that the source:

(a) Is reasonable and feasible for the type and size of the system;

(b) May legally be used in conformance with state water rights laws;

(c) Supplies water that is physically and reliably available in the necessary quantities, as shown in:

(i) A hydrogeologic assessment of the proposed source;

(ii) A general description of the watershed, spring, and/or aquifer recharge area affecting the quantity or quality of flow, which includes seasonal variation and upstream water uses that may significantly affect the proposed source;

(iii) For ground water and spring sources, well source development data that are available from a pump test at the maximum design rate and duration, or are available from other sources of information, that establish pump settings (depth) in the well and demonstrate adequacy of water quantity to meet design criteria while not leading to water quality problems;

(iv) For ground water and spring sources, installation of a source meter or other equivalent device that reliably measures volume of flow into the system;

(d) Is, or is not, a GWI under WAC 246-290-640, and meets or can meet the applicable requirements for GWI sources as described in that section including treatment;

(e) Adequately provides for source protection, as shown in:

(i) For surface water and GWI sources, the watershed control program identified under WAC 246-290-135 and Part 6 of this chapter;

(ii) For wells, a preliminary department susceptibility assessment or equivalent information, and preliminary WHPA delineation and contaminant inventory, under the requirements for sanitary control and wellhead protection under WAC 246-290-135;

(f) Is designed and constructed in conformance with this chapter, and relevant requirements of chapter 173-160 WAC (department of ecology well construction standards);

(g) Meets water quality standards under WAC 246-290-310, as shown in an initial water quality analysis that includes, at a minimum, the following:

(i) Bacteriological;

(ii) Complete inorganic chemical and physical;

(iii) Complete VOC;

(iv) Radionuclides, if source approval is requested for a community system;

(v) SOC, except where waived or not required under WAC 246-290-310; and

(vi) Any other information required by the department relevant to the circumstances of the particular source.

Sources that otherwise would not meet water quality standards may be approved if treatment is provided.

(4) The required documentation under subsection (3) of this section shall include, at a minimum:

(a) A copy of the water right, or other written evidence of the existence of the right;

(b) A map showing the project location and vicinity;

(c) A map depicting topography, distances to the surface water intake, well or spring from existing property lines, buildings, potential sources of contamination, ditches, drainage patterns, and any other natural or man-made features affecting the quality or quantity of water;

(d) The dimensions, location, and legal documentation of the sanitary control area (SCA) under WAC 246-290-135;

(e) A copy of the on-site inspection form completed by the department or local health department representative;

(f) A copy of the water well report including the unique well identification tag number, depth to open interval or top of screened interval, overall depth of well from the top of the casing, vertical elevation, and location (both plat location and latitude/longitude); and

(g) Documentation of source meter installation. The purveyor may utilize other documents, such as a water system plan, susceptibility assessment, wellhead protection program, project report, or construction documents, to provide such documentation and information to the department, provided that such documents are current, and the purveyor indicates the location in the document of the relevant information.

(5) If treatment of a source is necessary to meet water quality standards, the purveyor may be required to meet the provisions of WAC 246-290-250 and Part 6 of this chapter, if applicable, prior to or as a condition of approval.

(6) An intertie must be adequately described in a written agreement between the purveyor and the supplier of the water, and otherwise meet the requirements of WAC 246-290-132.

(7) The purveyor shall not construct facilities for source development and use without prior approval of the department pursuant to the provisions of WAC 246-290-120.

(8) The purveyor shall receive a written source approval when:

(a) The purveyor has complied with the relevant provisions of subsections (1) through (7) of this section; and

(b) The developed source provides water complying with this chapter.

(9) The purveyor may receive a conditional source approval, such as one that sets limits on use or requires interim treatment, if further analysis of the quality of the source is required before final approval.

(10) For sources or supplies of water used by bottled water or ice plants to produce bottled water or ice:

(a) If the bottled water or ice plant is a Group A community water system and the plant uses the system's source for the water that is bottled or made into ice, the source and supply used for the bottled water and ice shall meet the applicable Group A requirements;

(b) If the bottled water or ice plant uses its own source for the water that is bottled or made into ice, and the plant is not a Group A community water system, the owner or operator shall obtain source approval from the department, and the source water shall meet the ongoing source water quality monitoring requirements for a Group A community system;

(c) If the bottled water or ice plant purchases the water for bottling or making ice from another source or supply, the water shall meet the minimum requirements for a Group A community water system, and the owner or operator of the plant shall ensure that the water meets such requirements;

(d) The source or supply for the water that is bottled or made into ice shall be protected from contamination prior to the bottling or ice making process; and

(e) In addition to the requirements imposed under this subsection, the processing of bottled water shall be subject to regulation by the state department of agriculture and the United States Food and Drug Administration.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-130, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-130, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), §

246-290-130, filed 3/25/93, effective 4/25/93. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-130, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-130, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-097, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-097, filed 2/17/88.]

WAC 246-290-132 Interties. (1) No interties shall be used and/or constructed as a public water supply without department approval.

(2) Interties shall not be eligible for submittal exceptions pursuant to WAC 246-290-125.

(3) Prior to department approval, purveyors proposing nonemergency interties shall ensure that the intertie is addressed:

(a) In an approved coordinated water system plan, water system plan, water system plan update, water system plan amendment, or small water system management program including:

(i) Location of the proposed intertie;

(ii) Date it is proposed to be utilized;

(iii) The purpose, physical capacity, service area, and proposed usage of the intertie;

(iv) Copy of the intertie agreement between purveyors;

(v) Description of how the intertie:

(A) Improves overall system reliability;

(B) Enhances the manageability of the system;

(C) Provides opportunities for conjunctive use; or

(D) Delays or avoids the need to develop new water sources;

(vi) Identification of any potential public health or safety concerns;

(vii) Discussion of any water quality and treatment issues;

(viii) Demonstration of the source capacity and hydraulic capacity of the supplying and receiving systems at the designed flow rate through the intertie;

(ix) Water right assessment;

(x) Identification of alternative sources that will be utilized when the intertie agreement expires if the water is not being provided in perpetuity; and

(xi) Identification and comparison of alternatives if any.

(b) In construction documents in accordance with WAC 246-290-120 including:

(i) Demonstration of the installation of a source meter to measure water exchanged; and

(ii) Water right assessment, if not previously provided to the department. Where RCW 90.03.383 requires a water right or water right change to be issued by the department of ecology, construction work on the intertie shall not begin, notwithstanding any prior approval of the intertie by the department in a water system plan, until the department of ecology issues the required water right document.

(4) Emergency use interties are interconnections between public water systems permitting the temporary exchange or delivery of water between those systems only in cases of emergency that result in permanent supplies being unavailable for use. Prior to department approval, purveyors proposing emergency use interties shall ensure that the emergency intertie is addressed:

(a) In an approved coordinated water system plan, water system plan, water system plan update, water system plan amendment, or small water system management plan including:

(i) Description of the intended use of the emergency intertie;

(ii) Location of the proposed intertie;

(iii) Date the intertie is intended to be operational;

(iv) Copy of the intertie agreement between purveyors detailing the conditions and limitations of such intertie; and

(v) Hydraulic analysis conducted to identify the impacts upon each water system.

(b) In a project report in accordance with WAC 246-290-110 or in a construction document in accordance with WAC 246-290-120.

(5) Purveyors proposing interties shall apply to the department of ecology for water right changes as provided in RCW 90.03.383. Except as provided in RCW 90.03.383(7) and 90.03.390, no interties may be constructed without department of ecology action on the proposed change.

(6) The purveyor may be required to have emergency interties approved as nonemergency interties where such interties are used frequently or on a long-term basis. If the department makes such a determination, the intertie will require approval in accordance with subsection (3) of this section.

(7) Intertie agreements between purveyors shall include:

(a) Identification of specific time periods in which water will be provided;

(b) Identification of the volume of water available for use, including any seasonal or other restrictions; and

(c) Identification of how water conservation programs, data collection, water demand forecasting, and other operational matters will be coordinated.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-132, filed 3/9/99, effective 4/9/99.]

WAC 246-290-135 Source water protection. (1) The department may require monitoring and controls in addition to those specified in this section if, in the opinion of the department, a potential risk exists to the water quality of a source.

(2) Sanitary control area (SCA).

(a) The purveyor shall maintain an SCA around all sources for the purpose of protecting them from existing and potential sources of contamination.

(b) For wells and springs, the minimum SCA shall have a radius of one hundred feet (thirty meters) and two hundred feet (sixty meters) respectively, unless engineering justification demonstrates that a smaller area can provide an adequate level of source water protection. The justification shall address geological and hydrological data, well construction details, mitigation measures, and other relevant factors necessary to assure adequate sanitary control.

(c) The department may require a larger SCA than specified in (b) of this subsection, or additional mitigation measures if land use, geological, and/or hydrological data support such a decision. It shall be the purveyor's responsibility to obtain the protection needed.

(d) No source of contamination may be constructed, stored, disposed of, or applied within the SCA without the permission of the department and the purveyor.

(e) The SCA shall be owned by the purveyor in fee simple, or the purveyor shall have the right to exercise complete sanitary control of the land through other legal provisions.

(f) A purveyor, owning all or part of the SCA in fee simple or having possession and control, shall send to the department copies of legal documentation, such as a duly recorded declaration of covenant, restricting the use of the land. This legal documentation shall state:

(i) No source of contamination may be constructed, stored, disposed of, or applied without the permission of the department and the purveyor; and

(ii) If any change in ownership of the system or SCA is considered, all affected parties shall be informed of these requirements.

(g) Where portions of the control area are in the possession and control of another, the purveyor shall obtain a duly recorded restrictive covenant which shall run with the land, restricting the use of said land in accordance with this chapter and provide the department with copies of the appropriate documentation.

(3) Wellhead protection.

(a) Purveyors of water systems using ground water or spring sources shall develop and implement a wellhead protection program.

(b) The wellhead protection program shall be part of the water system plan required under WAC 246-290-100 or the small water system management program required under WAC 246-290-105.

(c) The purveyor's wellhead protection program shall contain, at a minimum, the following elements:

(i) A completed susceptibility assessment or equivalent information;

(ii) Wellhead protection area (WHPA) delineation for each well, wellfield, or spring with the six month, one, five and ten year time of travel boundaries marked, or boundaries established using alternate criteria approved by the department in those settings where ground water time of travel is not a reasonable delineation criteria. WHPA delineations shall be done in accordance with recognized methods such as those described in the following sources:

(A) Department guidance on wellhead protection; or

(B) EPA guidance for delineation of wellhead protection areas;

(iii) An inventory, including identification of site locations and owners/operators, of all known and potential ground water contamination sources located within the defined WHPA(s) having the potential to contaminate the source water of the well(s) or spring(s). This list shall be updated every two years;

(iv) Documentation of purveyor's notification to all owners/ operators of known or potential sources of ground water contamination listed in (c)(B)(iii) of this subsection;

(v) Documentation of purveyor's notification to regulatory agencies and local governments of the boundaries of the WHPA(s) and the findings of the WHPA inventory;

(vi) A contingency plan to ensure consumers have an adequate supply of potable water in the event that contamination results in the temporary or permanent loss of the principal source of supply (major well(s) or wellfield); and

(vii) Documentation of coordination with local emergency incident responders (including police, fire and health departments), including notification of WHPA boundaries, results of susceptibility assessment, inventory findings, and contingency plan.

(4) Watershed control program.

(a) Purveyors of water systems using surface water or GWI sources shall develop and implement a watershed control program in accordance with Part 6 of chapter 246-290 WAC as applicable.

(b) The watershed control program shall be part of the water system plan required in WAC 246-290-100 or the small water system management program required in WAC 246-290-105.

(c) The purveyor's watershed control program shall contain, at a minimum, the following elements:

(i) Watershed description and inventory, including location, hydrology, land ownership and activities that may adversely affect source water quality;

(ii) An inventory of all potential surface water contamination sources and activities, including identification of site locations and owner/operators, located within the watershed and having the significant potential to contaminate the source water quality;

(iii) Watershed control measures, including documentation of ownership and relevant written agreements, and monitoring of activities and water quality;

(iv) System operation, including emergency provisions; and

(v) Documentation of water quality trends.

(d) The purveyor shall submit the watershed control program to the department for approval. Following departmental approval, the purveyor shall implement the watershed control program as approved.

(e) Purveyors of systems using unfiltered surface or GWI sources and meeting the criteria to remain unfiltered as specified in WAC 246-290-690 shall submit an annual report to the department that summarizes the effectiveness of the watershed control program. Refer to WAC 246-290-690 for further information about this report.

(f) The purveyor shall update the watershed control program at least every six years, or more frequently if required by the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-135, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-135, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-135, filed 3/25/93, effective 4/25/93.]

WAC 246-290-140 Existing system as-built approval. At the discretion of the department, owners of existing systems without approved construction documents shall provide information necessary to establish the extent of the water system's compliance with this chapter. At a minimum, this shall include submission and approval by the department of:

(1) A water system plan or small water system management program;

(2) As-built or record drawings; and

(3) Water quality analyses.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-140, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-140, filed 6/22/94, effective 7/23/94; 91-02-051 (Order 124B), recodified as § 246-290-140, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-098, filed 10/10/89, effective 11/10/89.]

WAC 246-290-200 Design standards. (1) Purveyors shall ensure that good engineering criteria and practices are used in the design and construction of all public water systems, such as those set out in:

(a) Department guidance on design for Group A public water systems;

(b) The most recent published edition of the Uniform Building Code (UBC) or the Uniform Plumbing Code (UPC);

(c) The most recent published edition of *Recommended Standards for Water Works, A Committee Report of the Great Lakes - Upper Mississippi River Board of State Public Health and Environmental Managers;*

(d) Standard specifications of the American Public Works Association (APWA), the American Society of Civil Engineers (ASCE), the American Water Works Association (AWWA), or the American Society for Testing and Materials (ASTM);

(e) Design criteria, such as contained in current college texts and professional journal articles, acceptable to the department;

(f) Chapter 173-160 WAC *Minimum Standards for Construction and Maintenance of Water Wells*;

(g) The latest edition of the PNWS-AWWA Cross-Connection Control Manual, or the University of Southern California (USC) Manual of Cross-Connection Control.

(2) In addition, purveyors of new or expanding public water systems shall consider and use, as appropriate, the following design factors:

(a) Historical water use;

(b) Community versus recreational uses of water;

(c) Local conditions and/or regulations;

(d) Community expectations;

(e) Public Water System Coordination Act considerations where appropriate;

(f) Provisions for systems and component reliability in accordance with WAC 246-290-420;

(g) Wind pressures, seismic risk, snow loads, and flooding;

(h) Other risks from potential disasters, as feasible; and

(i) Other information as required by the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-200, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-200, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-105, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-105, filed 9/8/83.]

WAC 246-290-220 Drinking water materials and additives. (1) All materials shall conform to the ANSI/NSF Standard 61 if in substantial contact with potable water supplies. For the purposes of this section, "substantial contact" means the elevated degree that a material in contact with water may release leachable contaminants into the water such that levels of these contaminants may be unacceptable with respect to either public health or aesthetic concerns. It should take into consideration the total material/water interface area of exposure, volume of water exposed, length of time water is in contact with the material, and level of public health risk. Examples of water system components that would be considered to be in "substantial contact" with drinking water are filter media, storage tank interiors or liners, distribution piping, membranes, exchange or adsorption media, or other similar components that would have high potential for contacting the water. Materials associated with such components as valves, pipe fittings, debris screens, gaskets, or similar appurtenances would not be considered to be in substantial contact.

(2) Materials or additives in use prior to the effective date of these regulations that have not been listed under ANSI/NSF Standard 60 or 61 shall be allowed for their current applications until such time that the materials are scheduled for replacement, or that stocks of existing additives are depleted and scheduled for reorder.

(3) Any treatment chemicals, with the exception of commercially retailed hypochlorite compounds such as unscented Clorox, Purex, etc., added to water intended for potable use shall comply with ANSI/NSF Standard 60. The maximum application dosage recommendation for the product certified by the ANSI/NSF Standard 60 shall not be exceeded in practice.

(4) Any products used to coat, line, seal, patch water contact surfaces or that have substantial water contact within the collection, treatment, or distribution systems shall comply with the appropriate ANSI/NSF Standard 60 or 61. Application of these products shall comply with recommendations contained in the product certification.

(5) The department may accept continued use of, and proposals involving, certain noncertified chemicals or materials on a case-by-case basis, provided all of the following criteria are met:

(a) The chemical or material has an acknowledged and demonstrable history of use in the state for drinking water applications;

(b) There exists no substantial evidence that the use of the chemical or material has caused consumers to register complaints about aesthetic issues, or health related concerns, that could be associated with leachable residues from the material; and

(c) The chemical or material has undergone testing through a protocol acceptable to the department and has been found to not contribute leachable compounds into drinking water at levels that would be of public health concern.

(6) Any pipe, pipe fittings, solder, or flux used in the installation or repair of a public water system shall be lead-free:

(a) This prohibition shall not apply to leaded joints necessary for the repair of cast iron pipes; and

(b) Within the context of this section, lead-free shall mean:

(i) No more than eight percent lead in pipes and pipe fittings; and

(ii) No more than two-tenths of one percent lead in solder and flux.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-220, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-131, filed 2/17/88.]

WAC 246-290-221 Water demand design criteria. (1) Except as provided in this section, expanding systems shall use water demand design for average day demand (ADD), and peak periods of demand such as maximum day demand (MDD), and peak hourly demand (PHD) that are based upon actual metered water use records. The data collected shall be sufficient to account for seasonal or other cyclic changes in water demand, and shall correlate to the maximum number of full-time or part-time equivalent residential units in service at any time.

(2) For seasonally used, transitory noncommunity, or recreational developments the design for ADD, MDD, and PHD shall be based upon metered water uses whenever such data is available. The data must account for the daily population using the water over the time that records are collected, and must reflect the uses associated with maximum occupancy for the development. The design demands for these developments apply only to part-time uses, and may not be applied to structures or dwellings that can be permanently occupied.

(3) In the absence of metered use or other comparable information, the following sources of design information may be used:

(a) Comparable metered water use data from analogous water systems. Analogous systems are those with similar characteristics, such as demographics, housing sizes, income levels, lot sizes, climate, water pricing structure, conservation practices, use restrictions, and soils and landscaping; or

(b) Design criteria or guidelines in the most recent edition of the department manual for design of Group A public water systems.

(4) The design for water systems based upon metered water use records shall have an MDD no lower than three hundred fifty gallons per day per equivalent residential unit (ERU), except for the design of any expansion to an existing water system that has a minimum of two years of meter records that clearly demonstrate that a lower design value for MDD may be used without significant risk of pressure loss. The meter records must correlate the demand data to the actual level of occupancy for the periods covered by the records.

(5) The minimum water demand and duration required for fire flow and/or fire suppression storage shall be determined by the local fire control authority, or chapter 246-293 WAC for systems within the boundaries of a designated critical water supply service area (CWSSA). Public water systems that are not required to comply with minimum fire flow standards shall coordinate with the local fire control authorities to ensure that any hydrants on the system, if they can possibly be used in the course of fire suppression activities, do not create adverse pressure problems within the water system as a result of fire control actions.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-221, filed 3/9/99, effective 4/9/99.]

WAC 246-290-222 Water system physical capacity. (1) The water system physical capacity shall be established by evaluating the capacity of each system component such as source, treatment, storage, transmission, or distribution, individually and in combination with each other. The evaluation shall identify any limitations on the ability of the system to provide service to all consumers.

(2) The water system physical capacity shall be:

(a) Reported in terms of total equivalent residential units (ERUs) and the number of residential and nonresidential connections with the number of ERUs they represent; and

(b) Compared to the existing number of residential and nonresidential connections currently served and the ERUs they represent.

(3) Total source capacity calculations shall not include emergency sources as defined in WAC 246-290-010.

(4) Total daily source capacity, in conjunction with any storage that is designed to accommodate peak use periods on a daily or longer basis, shall be sufficient to provide a reliable supply of water equal to or exceeding the MDD.

(5) Treatment capacity, in conjunction with any storage designed to accommodate peak demand periods on a daily or longer basis, shall be sufficient to provide a reliable supply of treated water equal to or exceeding the MDD while meeting the water quality parameters set forth in Part 4 and Part 6 as applicable, of this chapter.

(6) Water storage shall be sufficient to meet expected system service demands by providing sufficient operational, equalizing, standby, and where applicable, fire suppression storage volumes in accordance with WAC 246-290-235.

(7) Distribution system capacity shall provide for PHD, or MDD plus required fire flow, as required in each pressure zone while maintaining minimum design pressures established under this chapter.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-222, filed 3/9/99, effective 4/9/99.]

WAC 246-290-230 Distribution systems. (1) The purveyor shall size and evaluate new, or expansions to existing, distribution systems using a hydraulic analysis acceptable to the department.

(2) The minimum diameter of all distribution mains shall be six inches (150 mm) unless smaller mains can be justified by hydraulic analysis.

(3) Systems designed to provide fire flows shall have a minimum distribution main size of six inches (150 mm).

(4) Installation of new standard fire hydrants shall not be allowed on mains less than six inches (150 mm) in diameter. Existing fire hydrants on currently active mains less than six inches (150 mm) in diameter shall be allowed to remain provided:

(a) The existing distribution system consists of mains at least four inches (101.6 mm) in diameter, and the fire flow available from existing four-inch (101.6 mm) mains within the proximity of the fire hydrant exceeds the minimum fire flow standard adopted by the local fire protection authority; and

(b) The location and installation of the fire hydrants on the four-inch (101.6 mm) main have received approval by the local fire protection authority.

(5) New public water systems or additions to existing systems shall be designed with the capacity to deliver the design PHD quantity of water at 30 psi (210 kPa) under PHD flow conditions measured at all existing and proposed service water meters or along property lines adjacent to mains if no meter exists, and under the condition where all equalizing storage has been depleted.

(6) If fire flow is to be provided, the distribution system shall also provide maximum day demand (MDD) plus the required fire flow at a pressure of at least 20 psi (140 kPa) at all points throughout the distribution system, and under the condition where the designed volume of fire suppression and equalizing storage has been depleted.

(7) Booster pumps shall be designed in accordance with good engineering criteria and practices as listed in WAC 246-290-200.

(8) On existing systems, or for additions to existing systems, that are unable to meet the pressure requirements of this section, booster pumps for individual services may be used in the interim until system improvements are made to resolve pressure deficiencies. In this situation, the individual booster pumps shall be under the management and control of the purveyor.

(9) Transmission lines as defined in WAC 246-290-010 shall be designed to maintain greater than or equal to five psi (35 kPa) during normal operations, except when directly adjacent to storage tanks, and shall be sized according to a hydraulic analysis. Transmission mains designed to operate at velocities greater than ten feet per second shall include a hydraulic transient (water hammer) analysis in conjunction with the hydraulic analysis.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-230, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-230, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-230, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-135, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-135, filed 9/8/83.]

WAC 246-290-235 Distribution reservoirs. (1) Distribution reservoirs shall be designed to:

(a) Prevent entry by birds, animals, insects, excessive dust, and other potential sources of external contamination. The design shall include provisions for a lockable weathertight roof, a screened roof vent, an overflow pipe with atmospheric discharge or other suitable means to prevent a cross-connection, sample collection capability, a drain to daylight (or an approved alternative that is adequate to protect against cross-connection), a provision for tank isolation in order to perform maintenance procedures, and other appurtenances appropriate to the protection of stored water from contamination;

(b) Maintain water circulation, prevent water stagnation, and provide adequate disinfection contact time; and

(c) Be accessible for routine maintenance and water quality monitoring.

(2) Equalizing storage, as defined in WAC 246-290-010, shall be provided to meet peak periods of demand, either daily or longer, when determined to be necessary based on available, or designed, source pumping capacity.

(3) Operational, standby, and fire suppression storage volumes as defined in WAC 246-290-010 shall be provided, as applicable, for all pressure zones to meet both normal as well as abnormal demands of the system.

(4) Standby and fire suppression storage volumes may be nested with the larger of the two volumes being the minimum available, provided the local fire protection authority does not require them to be additive.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-235, filed 3/9/99, effective 4/9/99.]

WAC 246-290-240 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-290-250 Treatment design. (1) Treatment systems or devices shall be piloted and designed to ensure finished water quality conforms to water quality standards established in WAC 246-290-310.

(2) Treatment systems or devices for surface water or GWI sources shall be designed in accordance with the provisions of Part 6 of this chapter and the applicable provisions herein.

(3) Predesign studies, including pilot studies as appropriate, shall be required for proposed surface water and GWI sources and those ground water sources requiring treatment. The goal of the predesign study shall be to establish the most effective method, considering economics, to produce satisfactory finished water quality meeting the requirements of this chapter and complying with the treatment technique requirements in Part 6 of chapter 246-290 WAC. The predesign study shall be included as part of the project report under WAC 246-290-110. Refer to WAC 246-290-676 for requirements relating specifically to the filtration facility pilot study. The purveyor shall not establish nor maintain a bypass to divert water around any feature of a treatment process, except by written permission of the department.

(4) All well and spring sources not determined to be GWI's shall have continuous disinfection that meets the operational requirements of WAC 246-290-451 (3) and (4). The department may modify the requirement for disinfection for public water systems that demonstrate the well or spring sources (not confirmed as GWI's) have satisfactory bacteriological histories at the source and have SCAs in accordance with WAC 246-290-135.

(5) Purveyors shall use appropriate treatment technologies, such as those outlined in department guidance on water treatment, and shall address water treatment facilities in their water system plans pursuant to WAC 246-290-100.

(6) Project reports for the design of treatment facilities shall meet the requirements of WAC 246-290-110.

(7) Construction specifications for treatment facilities shall meet the requirements of WAC 246-290-120.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-250, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-250, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-155, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-155, filed 9/8/83.]

WAC 246-290-300 Monitoring requirements. (1) General.

(a) The monitoring requirements specified in this section are minimums. The department may require additional monitoring when:

(i) Contamination is present or suspected in the water system;

(ii) A ground water source is determined to be a potential GWI;

(iii) The degree of source protection is not satisfactory;

(iv) Additional monitoring is needed to verify source vulnerability for a requested monitoring waiver;

(v) Under other circumstances as identified in a departmental order; or

(vi) Additional monitoring is needed to evaluate continuing effectiveness of a treatment process where problems with the treatment process may exist.

(b) Special purpose samples collected by the purveyor shall not count toward fulfillment of the monitoring requirements of this chapter unless the quality of data and method of sampling and analysis are acceptable to the department.

(c) The purveyor shall ensure samples required by this chapter are collected, transported, and submitted for analysis according to department-approved methods. The analyses shall be performed by the state public health laboratory or another laboratory certified by the department. Qualified water utility, certified laboratory, or health department personnel may conduct measurements for pH, temperature, residual disinfectant concentration and turbidity as required by this chapter, provided, these measurements are made in accordance with "standard methods."

(d) Compliance samples required by this chapter shall be taken at locations listed in Table 3 of this section.

(e) Purveyors failing to comply with a monitoring requirement shall notify:

(i) The department in accordance with WAC 246-290-480; and

(ii) The water system users in accordance with WAC 246-290-495.

(2) Selling and receiving water.

(a) Source monitoring. Purveyors, with the exception of those that "wheel" water to their consumers (i.e., sell water that has passed through another purchasing purveyor's distribution system), shall conduct source monitoring in accordance with this chapter for the sources under their control. The level of monitoring shall satisfy the monitoring requirements associated with the total population served by the source.

(b) Distribution system monitoring. The purveyor of a system that receives and distributes water shall perform distribution-related monitoring requirements. Monitoring shall include, but not be limited to, the following:

(i) Collect coliform samples in accordance with subsection (3) of this section;

(ii) Collect trihalomethane samples in accordance with subsection (6) of this section;

(iii) Perform the distribution system residual disinfectant concentration monitoring required under WAC 246-290-451 or 246-290-694;

(iv) Perform lead and copper monitoring required under 40 CFR 141.86, 141.87, and 141.88;

(v) Perform the distribution system monitoring in accordance with 40 CFR 141.23(b) for asbestos if applicable;

(vi) Other monitoring as required by the department.

(c) Reduced monitoring for regional programs. The receiving purveyor may receive reductions in the coliform, lead and copper, THM and distribution system disinfectant residual concentration monitoring requirements, provided the receiving system:

(i) Has a satisfactory water quality history as determined by the department;

(ii) Operates in a satisfactory manner consistent with this chapter;

(iii) Purchases water from a purveyor that has a department-approved regional monitoring program; and

(iv) Has a written agreement with the supplying system or regional water supplier that is acceptable to the department, and which identifies the responsibilities of both the supplying and receiving system(s) with regards to monitoring, reporting and maintenance of the distribution system.

(d) Periodic review of regional programs. The department may periodically review the sampling records of public water systems participating in a department-approved monitoring program to determine if continued reduced monitoring is appropriate. If the department determines a change in the monitoring requirements of the receiving system is appropriate:

(i) The department shall notify the purveyor of the change in monitoring requirements; and

(ii) The purveyor shall conduct monitoring as directed by the department.

(3) Bacteriological.

(a) The purveyor shall be responsible for collection and submittal of coliform samples from representative points throughout the distribution system. Samples shall be collected after the first service and at regular time intervals each month the system provides water to consumers. Samples shall be collected that represent normal system operating conditions.

(i) Systems providing disinfection treatment shall, when taking a routine or repeat sample, measure residual disinfectant concentration within the distribution system at the same time and location and comply with the residual disinfection monitoring requirements under WAC 246-290-451.

(ii) Systems providing disinfection treatment shall assure that disinfectant residual concentrations are measured and recorded on all coliform sample report forms submitted for compliance purposes.

(b) Coliform monitoring plan.

(i) The purveyor shall prepare a written coliform monitoring plan and base routine monitoring upon the plan. The plan shall include coliform sample collection sites and a sampling schedule.

(ii) The purveyor shall:

(A) Keep the coliform monitoring plan on file with the system and make it available to the department for inspection upon request;

(B) Revise or expand the plan at any time the plan no longer ensures representative monitoring of the system, or as directed by the department; and

(C) Submit the plan to the department for review and approval when requested and as part of the water system plan required under WAC 246-290-100.

(c) Monitoring frequency. The number of required routine coliform samples is based on total population served.

(i) Purveyors of **community** systems shall collect and submit for analysis no less than the number of routine samples listed in Table 2 during each calendar month of operation;

(ii) Unless directed otherwise by the department, purveyors of **noncommunity** systems shall collect and submit for analysis no less than the number of samples required in Table 2, and no less than required under 40 CFR 141.21. Each month's population shall be based on the average daily population and shall include all residents and nonresidents served during that month. During months when the average daily population served is less than twenty-five, routine sample collection is not required when:

(A) Using only protected ground water sources;

(B) No coliform were detected in samples during the previous month; and

(C) One routine sample has been collected and submitted for analysis during one of the previous two months.

(iii) Purveyors of systems serving both a resident and a nonresident population shall base their minimum sampling requirement on the total of monthly populations served, both resident and nonresident as determined by the department, but no less than the minimum required in Table 2; and

(iv) Purveyors of systems with a nonresident population lasting two weeks or less during a month shall sample as directed by the department. Sampling shall be initiated at least two weeks prior to the time service is provided to consumers.

(v) Purveyors of TNC systems shall not be required to collect routine samples in months where the population served is zero or the system has notified the department of an unscheduled closure.

(d) Invalid samples. When a coliform sample is determined invalid under WAC 246-290-320 (2)(d), the purveyor shall:

(i) Not include the sample in the determination of monitoring compliance; and

(ii) Take follow-up action as defined in WAC 246-290-320 (2)(d).

(e) The purveyor using a surface water or GWI source shall collect representative source water samples for bacteriological density analysis in accordance with WAC 246-290-664 and 246-290-694 as applicable.

TABLE 2

MINIMUM MONTHLY ROUTINE COLIFORM SAMPLING REQUIREMENTS

Population Served [1] During Month		Minimum Number of Routine Samples/Calendar Month: When NO samples with a coliform presence were collected during the previous month	Minimum Number of Routine Samples/Calendar Month: When ANY samples with a coliform presence were collected during the previous month
1 -	1,000	1*	5
1,001 -	2,500	2*	5
2,501 -	3,300	3*	5
3,301 -	4,100	4*	5
4,101 -	4,900	5	5
4,901 -	5,800	6	6
5,801 -	6,700	7	7
6,701 -	7,600	8	8
7,601 -	8,500	9	9
8,501 -	12,900	10	10
12,901 -	17,200	15	15
17,201 -	21,500	20	20
21,501 -	25,000	25	25
25,001 -	33,000	30	30
33,001 -	41,000	40	40
41,001 -	50,000	50	50
50,001 -	59,000	60	60
59,001 -	70,000	70	70
70,001 -	83,000	80	80
83,001 -	96,000	90	90
96,001 -	130,000	100	100
130,001 -	220,000	120	120
220,001 -	320,000	150	150
320,001 -	450,000	180	180
450,001 -	600,000	210	210
600,001 -	780,000	240	240
780,001 -	970,000	270	270
970,001 -	1,230,000[3]	300	300

[1] Does not include the population of a consecutive system that purchases water. The sampling requirement for consecutive systems is a separate determination based upon the population of that system.

[2] Noncommunity systems using only protected ground water sources and serving less than 25 individuals, may collect and submit for analysis, one sample every three months.

[3] Systems serving populations larger than 1,230,000 shall contact the department for the minimum number of samples required per month.

*In addition to the provisions of subsection (1)(a) of this section, if a system of this size cannot show evidence of having been subject to a sanitary survey on file with the department, or has been determined to be at risk to bacteriological concerns following a survey, the minimum number of samples required per month may be increased by the department after additional consideration of such factors as monitoring history, compliance record, operational problems, and water quality concerns for the system.

(4) Inorganic chemical and physical.

(a) A complete inorganic chemical and physical analysis shall consist of the primary and secondary chemical and physical substances.

(i) Primary chemical and physical substances are antimony, arsenic, asbestos, barium, beryllium, cadmium, chromium, cyanide, fluoride, mercury, nickel, nitrate (as N), nitrite (as N), selenium, sodium, thallium, and for unfiltered surface water, turbidity.

(ii) Secondary chemical and physical substances are chloride, color, hardness, iron, manganese, specific conductivity, silver, sulfate, total dissolved solids*, and zinc.

* Required only when specific conductivity exceeds seven hundred micromhos/centimeter.

(b) Purveyors shall monitor for all primary and secondary chemical and physical substances identified in Table 4 and Table 5. Samples shall be collected in accordance with the monitoring requirements referenced in 40 CFR 141.23(a) through 141.23(j) and 40 CFR 143.4, except for composite samples for systems serving less than three thousand three hundred one persons. For these systems, compositing among different systems may be allowed if the systems are owned or operated by a department-approved satellite management agency.

(c) Samples required by this subsection shall be taken at designated locations in accordance with 40 CFR 141.23(a) through 141.23(j), and 40 CFR 143.4, and Table 3 herein.

(i) Wellfield samples shall be allowed from department designated wellfields; and

(ii) In accordance with 40 CFR 141.23 (a)(3), alternate sampling locations may be used if approved by the department. The process for determining these alternate sites is described in department guidance. Purveyors of community and NTNC systems may ask the department to approve an alternate sampling location for multiple sources within a single system that are blended prior to entry to the distribution system. Alternate sampling plans shall address the following:

(A) Source vulnerability;

(B) Individual source characteristics;

(C) Previous water quality information;

(D) Status of monitoring waiver applications; and

(E) Other information deemed necessary by the department.

(d) Composite samples:

(i) In accordance with CFR 141.23 (a)(4), purveyors may ask the certified lab to composite samples representing as many as five individual samples from within one system. Sampling procedures and protocols are outlined in department guidance; and

(ii) For systems serving a population of less than three thousand three hundred one, the department may approve composite sampling between systems when those systems are part of an approved satellite management agency.

(e) When the purveyor provides treatment for one or more inorganic chemical or physical contaminants, the department may require the purveyor to sample before and after treatment. The department shall notify the purveyor if and when this additional source sampling is required.

(f) Inorganic monitoring plans.

(i) Purveyors of community and NTNC systems shall prepare an inorganic chemical monitoring plan and base routine monitoring on the plan.

(ii) The purveyor shall:

(A) Keep the monitoring plan on file with the system and make it available to the department for inspection upon request;

(B) Revise or expand the plan at any time the plan no longer reflects the monitoring requirements, procedures or sampling locations, or as directed by the department; and

(C) Submit the plan to the department for review and approval when requested and as part of the water system plan required under WAC 246-290-100.

(g) Monitoring waivers.

(i) Purveyors may request in writing, a monitoring waiver from the department for any nonnitrate/nitrite inorganic chemical and physical monitoring requirements identified in this chapter.

(ii) Purveyors requesting a monitoring waiver shall comply with applicable subsections of 40 CFR 141.23 (b)(3), 141.23 (c)(3), and 141.40 (n)(4).

(iii) Purveyors shall update and resubmit requests for waiver renewals as applicable during each compliance cycle or period or more frequently as directed by the department.

(iv) Failure to provide complete and accurate information in the waiver application shall be grounds for denial of the monitoring waiver.

(h) The department may require the purveyor to repeat sample for confirmation of results.

(i) Purveyors with emergency and seasonal sources shall monitor those sources when they are in use.

(5) Lead and copper. Monitoring for lead and copper shall be conducted in accordance with 40 CFR 141.86, 141.87, and 141.88.

(6) Trihalomethanes (THMs).

(a) Purveyors of **community** systems serving a population of ten thousand or more and providing water treated with chlorine or other halogenated disinfectant shall monitor as follows:

(i) Ground water sources. The purveyor shall collect one sample from each treated ground water source every twelve months. This sample shall be taken at the source before treatment and analyzed for maximum total trihalomethane potential (MTTP). The purveyor may receive approval from the department for an alternate sample location if it would provide essentially the same information as an MTTP analysis regarding the levels of THMs that the consumers are, or could potentially be, exposed to in the drinking water.

(ii) Surface water sources. The purveyor shall collect four samples per treated source every three months. The samples shall be taken within a twenty-four-hour period. The purveyor shall take one of the samples from the extreme end of the distribution system, the farthest point possible from the source of supply, and three samples from representative intermediate locations in the distribution system. The samples shall be analyzed for TTHM (i.e., the sum of trichloromethane, bromodichloromethane, dibromochloromethane, and tribromomethane). After one year of monitoring, the department may reduce the monitoring frequency to one sample every three months per treatment plant if the TTHM levels are less than 0.10 mg/L. The purveyor shall take the sample at the extreme end of the distribution system; or

(iii) Purchased surface water sources. The purveyor of a consecutive system shall collect one water sample per each purchased source originating from a surface supply or confirmed GWI every three months. The sample shall be taken at the extreme end of the distribution system and analyzed for TTHM.

(b) Purveyors of **community** systems shall monitor for TTHM when serving a population less than ten thousand and

providing surface water treated with chlorine or other halogenated disinfectant. The purveyor shall collect one water sample per treated source every three months for one year. The sample shall be taken at the extreme end of the distribution system and analyzed for TTHM. After the first year, the purveyor shall monitor surface water sources every thirty-six months.

(c) Purveyors of **community** systems shall monitor for TTHM when serving less than ten thousand people and purchasing surface water treated with chlorine or other halogenated disinfectant or adding a halogenated disinfectant after purchase. The purveyor shall collect one water sample every three months at the extreme end of the distribution system or at a department-acceptable location. The sample shall be analyzed for TTHM. After the first year, the purveyor shall monitor every thirty-six months.

(7) Organic chemicals.

(a) Purveyors of community and NTNC water systems shall comply with monitoring requirements in accordance with 40 CFR 141.24(a), 141.24(f), 141.24(g), 141.24(h), 141.40(a), 141.40(d), and 141.40(e).

(b) Sampling locations shall be as defined in 40 CFR 141.24(f), 141.24(g), 141.24(h), 141.40(b) and 141.40(c).

(i) Wellfield samples shall be allowed from department designated wellfields; and

(ii) In accordance with 40 CFR 141.24 (f)(3) and 141.24 (h)(3), alternate sampling locations may be allowed if approved by the department. These alternate locations are described in department guidance. Purveyors may ask the department to approve an alternate sampling location for multiple sources within a single system that are blended prior to entry to the distribution system. The alternate sampling location shall consider the following:

(A) Source vulnerability;

(B) An updated organic monitoring plan showing location of all sources with current and proposed sampling locations;

(C) Individual source characteristics;

(D) Previous water quality information;

(E) Status of monitoring waiver applications; and

(F) Other information deemed necessary by the department.

(c) Composite samples:

(i) Purveyors may ask the certified lab to composite samples representing as many as five individual samples from within one system. Sampling procedures and protocols are outlined in department guidance;

(ii) For systems serving a population of less than three thousand three hundred one, the department may approve composite sampling between systems when those systems are part of an approved satellite management agency.

(d) The department may require the purveyor to sample both before and after treatment for one or more organic contaminants. The department shall notify the purveyor if and when this additional source sampling is required.

(e) Organic chemical monitoring plans.

(i) Purveyors of community and NTNC systems shall prepare an organic chemical monitoring plan and base routine monitoring on the plan.

(ii) The purveyor shall:

(A) Keep the monitoring plan on file with the system and make it available to the department for inspection upon request;

(B) Revise or expand the plan at any time the plan no longer reflects the monitoring requirements, procedures or sampling locations, or as directed by the department; and

(C) Submit the plan to the department for review and approval when requested and as part of the water system plan required under WAC 246-290-100.

(f) Monitoring waivers.

(i) Purveyors may request in writing, a monitoring waiver from the department for any organic monitoring requirement except those relating to unregulated VOCs;

(ii) Purveyors requesting a monitoring waiver shall comply with 40 CFR 141.24 (f)(7), 141.24 (f)(10), 141.24 (h)(6), 141.24 (h)(7) or 141.40 (n)(4);

(iii) Purveyors shall update and resubmit requests for waiver renewals as directed by the department; and

(iv) Failure to provide complete and accurate information in the waiver application shall be grounds for denial of the monitoring waiver.

(g) Purveyors with emergency and seasonal sources shall monitor those sources under the applicable requirements of this section when they are actively providing water to consumers.

(8) Unregulated chemicals.

(a) Unregulated inorganic contaminants. Purveyors of community and NTNC systems shall:

(i) Monitor for the unregulated inorganic chemicals listed in 40 CFR 141.40 (n)(12);

(ii) Comply with monitoring methods, frequencies, and sampling locations in accordance with 40 CFR 141.40 (n)(2) through 141.40 (n)(9) and 141.40 (n)(12); and

(iii) Apply in writing for a monitoring waiver according to the conditions outlined in 40 CFR 141.40 (n)(3), and the departmental procedures described in subsection (7)(f) of this section.

(b) Unregulated VOCs. Purveyors shall:

(i) Monitor in accordance with 40 CFR 141.40(e) and 141.40(j);

(ii) Comply with monitoring methods, frequency and sampling locations in accordance with 40 CFR 141.40(a) through 141.40(d), 141.40(g) and 141.40(i); and

(iii) Perform repeat monitoring for these compounds in accordance with 40 CFR 141.40(l).

(c) Unregulated SOCs. Purveyors shall:

(i) Monitor for the unregulated SOCs listed in 40 CFR 141.40 (n)(11); and

(ii) Comply with monitoring methods, frequencies, and sampling locations in accordance with 40 CFR 141.40 (n)(1) through 141.40 (n)(9).

Purveyors may request that the department defer this monitoring if a system has less than one hundred fifty service connections.

(d) Purveyors with emergency and seasonal sources shall monitor those sources under the applicable requirements of this section whenever they are actively providing water to consumers.

(9) Radionuclides.

(a) The purveyor's monitoring requirements for gross alpha particle activity, radium-226 and radium-228 shall be:

(i) **Community** systems shall monitor once every forty-eight months. Compliance shall be based on the analysis of an annual composite of four consecutive quarterly samples or the average of the analyses of four samples obtained at quarterly intervals;

(ii) The purveyor may omit analysis for radium-226 and radium-228 if the gross alpha particle activity is less than five pCi/L; and

(iii) If the results of the initial analysis are less than half of the established MCL, the department may allow compliance with the monitoring requirements based on analysis of a single sample collected every forty-eight months.

(b) The purveyor's monitoring requirements for man-made radioactivity shall be:

(i) Purveyors of **community** systems using surface water sources and serving more than one hundred thousand persons and other department-designated water systems shall monitor for man-made radioactivity (beta particle and photon) every forty-eight months. Compliance shall be based on the analysis of a composite of four consecutive quarterly samples or the analysis of four quarterly samples; and

(ii) The purveyor of a water system located downstream from a nuclear facility as determined by the department, shall monitor once every three months for gross beta and iodine-131, and monitor once every twelve months for strontium-90 and tritium. The department may allow the substitution of environmental surveillance data taken in conjunction with a nuclear facility for direct monitoring of man-made radioactivity if the department determines that such data is applicable to a particular public water system.

(10) Other substances.

On the basis of public health concerns, the department may require the purveyor to monitor for additional substances.

TABLE 3

MONITORING LOCATION

Sample Type	Sample Location
Asbestos	One sample from distribution system or if required by department, from the source.
Bacteriological	From representative points throughout distribution system.
Complete Inorganic Chemical & Physical	From a point representative of the source, after treatment, and prior to entry to the distribution system.
Lead/Copper	From the distribution system at targeted sample tap locations.
Nitrate/Nitrite	From a point representative of the source, after treatment, and prior to entry to the distribution system.
Total Trihalomethanes -Surface Water	From points at extreme end, and at intermediate locations, in the distribution system from the source after treatment.
Potential Trihalomethanes -Ground Water	From the source before treatment.
Radionuclides	From the source.
Organic Chemicals (VOCs & SOCs)	From a point representative of the source, after treatment and prior to entry to distribution system.
Other Substances (unregulated chemicals)	From a point representative of the source, after treatment, and prior to entry to the distribution system, or as directed by the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-300, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-300, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-300, filed 3/25/93, effective 4/25/93; 92-04-070 (Order 241B), § 246-290-300, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-300, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-300, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-165, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-165, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-165, filed 9/8/83.]

WAC 246-290-310 Maximum contaminant levels (MCLs). (1) General.

(a) The purveyor shall be responsible for complying with the standards of water quality identified in this section. If a substance exceeds its maximum contaminant level (MCL), the purveyor shall take follow-up action in accordance with WAC 246-290-320.

(b) When enforcing the standards described under this section, the department shall enforce compliance with the primary standards as its first priority.

(2) Bacteriological.

(a) MCLs under this subsection shall be considered primary standards.

(b) Notwithstanding subsection (1) of this section, if coliform presence is detected in any sample, the purveyor shall take follow-up action in accordance with WAC 246-290-320(2).

(c) Acute MCL. An acute MCL for coliform bacteria occurs when there is:

(i) Fecal coliform presence in a repeat sample;

(ii) *E. coli* presence in a repeat sample; or

(iii) Coliform presence in any repeat samples collected as a follow-up to a sample with fecal coliform or *E. coli* presence.

(d) Nonacute MCL. A nonacute MCL for coliform bacteria occurs when:

(i) Systems taking less than forty routine samples during the month have more than one sample with coliform presence; or

(ii) Systems taking forty or more routine samples during the month have more than 5.0 percent with coliform presence.

(e) MCL compliance. The purveyor shall determine compliance with the coliform MCL for each month the system provides drinking water to the public. In determining MCL compliance, the purveyor shall:

(i) Include:

(A) Routine samples; and

(B) Repeat samples.

(ii) Not include:

(A) Samples invalidated under WAC 246-290-694 (1)(c); and

(B) Special purpose samples.

(3) Inorganic chemical and physical.

The primary and secondary MCLs are listed in Table 4 and 5:

TABLE 4
INORGANIC CHEMICAL CHARACTERISTICS

Substance	Primary MCLs (mg/L)
Antimony (Sb)	0.006
Arsenic (As)	0.05
Asbestos	7 million fibers/liter (longer than 10 microns)
Barium (Ba)	2.0
Beryllium (Be)	0.004
Cadmium (Cd)	0.005
Chromium (Cr)	0.1
Copper (Cu)	*
Cyanide (HCN)	0.2
Fluoride (F)	4.0
Lead (Pb)	*
Mercury (Hg)	0.002
Nickel (Ni)	0.1
Nitrate (as N)	10.0
Nitrite (as N)	1.0
Selenium (Se)	0.05
Sodium (Na)	*
Thallium (Tl)	0.002
Substance	**Secondary MCLs (mg/L)**
Chloride (Cl)	250.0
Fluoride (F)	2.0
Iron (Fe)	0.3
Manganese (Mn)	0.05
Silver (Ag)	0.1
Sulfate (SO_4)	250.0
Zinc (Zn)	5.0

* Although the state board of health has not established MCLs for copper, lead, and sodium, there is sufficient public health significance connected with copper, lead, and sodium levels to require inclusion in inorganic chemical and physical source monitoring. For lead and copper, the EPA has established distribution system related levels at which a system is required to consider corrosion control. These levels, called "action levels," are 0.015 mg/L for lead and 1.3 mg/L for copper and are applied to the highest concentration in ten percent of all samples collected from the distribution system. The EPA has also established a recommended level of twenty mg/L for sodium as a level of concern for those consumers that may be restricted for daily sodium intake in their diets.

TABLE 5
PHYSICAL CHARACTERISTICS

Substance	Secondary MCLs
Color	15 Color Units
Specific Conductivity	700 umhos/cm
Total Dissolved Solids (TDS)	500 mg/L

(4) Trihalomethanes.

(a) The department shall consider standards under this subsection primary standards.

(b) The MCL for total trihalomethanes (TTHM) is 0.10 mg/L calculated on the basis of a running annual average of quarterly samples. The concentrations of each of the trihalomethane compounds (trichloromethane, dibromochloromethane, bromodichloromethane, and tribromomethane) are totaled to determine the TTHM level.

(c) There is no MCL for maximum total trihalomethane potential (MTTP). When the MTTP value exceeds 0.10 mg/L, the purveyor shall follow up as described under WAC 246-290-320 (6).

(5) Radionuclides.

(a) The department shall consider standards under this subsection primary standards.

(b) The MCLs for radium-226, radium-228, and gross alpha particle radioactivity are:

TABLE 6

Substance	MCL (pCi/L)
Radium-226	3
Combined Radium-226 and Radium-228	5
Gross alpha particle activity (excluding uranium)	15

(c) The MCL for beta particle and photon radioactivity from man-made radionuclides is: The average annual concentration shall not produce an annual dose equivalent to the total body or any internal organ greater than four millirem/year.

NOTE: The department shall assume compliance with the four millirem/year dose limitation if the average annual concentration for gross beta activity, tritium, and strontium-90 are less than 50 pCi/L, 20,000 pCi/L, and 8 pCi/L respectively. When both tritium and strontium-90 are present, the sum of their annual dose equivalents to bone marrow shall not exceed four millirem/year.

(6) Organic chemicals.

(a) The department shall consider standards under this subsection primary standards.

(b) VOCs.

(i) The MCLs for VOCs shall be as listed in 40 CFR 141.61(a).

(ii) The department shall determine compliance with this subsection based on compliance with 40 CFR 141.24(f).

(c) SOCs.

(i) MCLs for SOCs shall be as listed in 40 CFR 141.61(c).

(ii) The department shall determine compliance with this subsection based on compliance with 40 CFR 141.24(h).

(7) Other chemicals.

(a) The state board of health shall determine maximum contaminant levels for any additional substances.

(b) Purveyors may be directed by the department to comply with state advisory levels (SALs) for contaminants that do not have a MCL established in chapter 246-290 WAC. SALs shall be:

(i) MCLs that have been promulgated by the EPA, but which have not yet been adopted by the state board of health; or

(ii) State board of health adopted levels for substances recommended by the department and not having an EPA established MCL. A listing of these may be found in the department document titled *Procedures and References for the Determination of State Advisory Levels for Drinking Water Contaminants* dated June 1996, that has been approved by the state board of health and is available.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-310, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-310, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-310, filed 3/25/93, effective 4/25/93; 92-04-070 (Order 241B), § 246-290-310, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-310, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-310, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-175, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-175, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-175, filed 9/8/83.]

WAC 246-290-320 Follow-up action. (1) General.

(a) When an MCL violation occurs, the purveyor shall take follow-up action as described in this section.

(b) When a primary standard violation occurs, the purveyor shall:

(i) Notify the department in accordance with WAC 246-290-480;

(ii) Notify the consumers served by the system in accordance with WAC 246-290-495;

(iii) Determine the cause of the contamination; and

(iv) Take action as directed by the department.

(c) When a secondary standard violation occurs, the purveyor shall notify the department and take action as directed by the department.

(d) The department may require additional sampling for confirmation of results.

(2) Bacteriological.

(a) When coliform bacteria are present in any sample and the sample is not invalidated under (d) of this subsection, the purveyor shall ensure the following actions are taken:

(i) The sample is analyzed for fecal coliform or E. coli. When a sample with a coliform presence is not analyzed for E. coli or fecal coliforms, the sample shall be considered as having a fecal coliform presence for MCL compliance purposes;

(ii) Repeat samples are collected in accordance with (b) of this subsection;

(iii) The department is notified in accordance with WAC 246-290-480; and

(iv) The cause of the coliform presence is determined and corrected.

(b) Repeat samples.

(i) The purveyor shall collect repeat samples in order to confirm the original sample results and to determine the cause of the coliform presence. Additional treatment, such as batch or shock chlorination, shall not be instituted prior to the collection of repeat samples unless prior authorization is given by the department. Following collection of repeat samples, and before the analytical results are known, there may be a need to provide interim precautionary treatment or other means to insure public health protection. The purveyor shall contact the department to determine the best interim approach in this situation.

(ii) The purveyor shall collect and submit for analysis a set of repeat samples for every sample in which the presence of coliforms is detected. A set of repeat coliform samples consists of:

(A) Four repeat samples for systems collecting one routine coliform sample each month; or

(B) Three repeat samples for all systems collecting more than one routine coliform sample each month.

(iii) The purveyor shall collect repeat sample sets according to Table 7;

(iv) The purveyor shall collect one set of repeat samples for each sample with a coliform presence. All samples in a set of repeat samples shall be collected on the same day and submitted for analysis within twenty-four hours after notification by the laboratory of a coliform presence, or as directed by the department.

(v) When repeat samples have coliform presence, the purveyor shall:

(A) Contact the department and collect a minimum of one additional set of repeat samples as directed by the department; or

(B) Collect one additional set of repeat samples for each sample where coliform presence was detected.

(vi) The purveyor of a system providing water to consumers via a single service shall collect repeat samples from the same location as the sample with a coliform presence. The set of repeat samples shall be collected:

(A) On the same collection date;

(B) Over consecutive days with one sample collected each day until the required samples in the set of repeat samples are collected; or

(C) As directed by the department.

(vii) If a sample with a coliform presence was collected from the first two or last two active services, the purveyor shall monitor as directed by the department;

(viii) The purveyor may change a previously submitted routine sample to a sample in a set of repeat samples when the purveyor:

(A) Collects the sample within five adjacent service connections of the location from which the initial sample with a coliform presence was collected;

(B) Collects the sample after the initial sample with a coliform presence was submitted for analysis;

(C) Collects the sample on the same day as other samples in the set of repeat samples, except under (b)(iv) of this subsection; and

(D) Requests and receives approval from the department for the change.

(ix) The department may determine that sets of repeat samples specified under this subsection are not necessary during a month when a nonacute coliform MCL violation is determined for the system.

Table 7
REPEAT SAMPLE REQUIREMENTS

# OF ROUTINE SAMPLES COLLECTED EACH MONTH	# OF SAMPLES IN A SET OF REPEAT SAMPLES	LOCATIONS FOR REPEAT SAMPLES (COLLECT AT LEAST ONE SAMPLE PER SITE)
1	4	♦ Site of previous sample with a coliform presence ♦ Within 5 active services upstream of site of sample with a coliform presence ♦ Within 5 active services downstream of site of sample with a coliform presence ♦ At any other active service or from a location most susceptible to contamination (i.e., well or reservoir)
more than 1	3	♦ Site of previous sample with a coliform presence ♦ Within 5 active services upstream of site of sample with a coliform presence ♦ Within 5 active services downstream of site of sample with a coliform presence

(c) Monitoring frequency following a coliform presence. Systems having one or more coliform presence samples that were not invalidated during the previous month shall collect and submit for analysis the minimum number of samples shown in the last column of Table 2.

(i) The purveyor may obtain a reduction in the monitoring frequency requirement when one or more samples with a coliform presence were collected during the previous month, if the purveyor proves to the satisfaction of the department;

(A) The cause of the sample with a coliform presence; and

(B) The problem is corrected before the end of the next month the system provides water to the public.

(ii) If the monitoring frequency requirement is reduced, the purveyor shall collect and submit at least the minimum number of samples required when no samples with a coliform presence were collected during the previous month.

(d) Invalid samples. Coliform samples may be determined to be invalid under any of the following conditions:

(i) A certified laboratory determines that the sample results show:

(A) Multiple tube technique cultures that are turbid without appropriate gas production;

(B) Presence-absence technique cultures that are turbid in the absence of an acid reaction;

(C) Occurrence of confluent growth patterns or growth of TNTC (too numerous to count) colonies without a surface sheen using a membrane filter analytic technique;

(ii) The analyzing laboratory determines there is excess debris in the sample.

(iii) The analyzing laboratory establishes that improper sample collection or analysis occurred;

(iv) The department determines that a nondistribution system problem has occurred as indicated by:

(A) All samples in the set of repeat samples collected at the same location, including households, as the original coliform presence sample also are coliform presence; and

(B) All other samples from different locations (households, etc.) in the set of repeat samples are free of coliform.

(v) The department determines a coliform presence result is due to a circumstance or condition that does not reflect water quality in the distribution system.

(e) Follow-up action when an invalid sample is determined. The purveyor shall take the following action when a coliform sample is determined to be invalid:

(i) Collect and submit for analysis an additional coliform sample from the same location as each invalid sample within twenty-four hours of notification of the invalid sample; or

(ii) In the event that it is determined that the invalid sample resulted from circumstances or conditions not reflective of distribution system water quality, collect a set of samples in accordance with Table 7; and

(iii) Collect and submit for analysis samples as directed by the department.

(f) Invalidated samples shall not be included in determination of the sample collection requirement for compliance with this chapter.

(3) Inorganic chemical and physical follow-up monitoring shall be conducted in accordance with the following:

(a) For nonnitrate/nitrite primary inorganic chemicals, 40 CFR 141.23 (a)(4), 141.23 (b)(8), 141.23 (c)(7), 141.23 (f)(1), 141.23(g), 141.23(m) and 141.23(n);

(b) For nitrate, 40 CFR 141.23 (a)(4), 141.23 (d)(2), 141.23 (d)(3), 141.23 (f)(2), 141.23(g), 141.23(m), 141.23(n), and 141.23(o);

(c) For nitrite, 40 CFR 141.23 (a)(4), 141.23 (e)(3), 141.23 (f)(2), and 141.23(g); or

(d) The purveyor of any public water system providing service that has secondary inorganic MCL exceedances shall take follow-up action as required by the department. Follow-up action shall be commensurate with the degree of consumer acceptance of the water quality and their willingness to bear the costs of meeting the secondary standard. For new community water systems and new nontransient noncommunity water systems without active consumers, treatment for secondary contaminant MCL exceedances will be required.

(4) Lead and copper follow-up monitoring shall be conducted in accordance with 40 CFR 141.85(d), 141.86 (d)(2), 141.86 (d)(3), 141.87(d) and 141.88(b) through 141.88(d).

(5) Turbidity.

Purveyors monitoring turbidity in accordance with Part 6 of this chapter shall provide follow-up in accordance with WAC 246-290-634.

(6) Trihalomethanes. When the average of all samples taken during any twelve-month period exceeds the MCL for total trihalomethanes, the violation is confirmed and the purveyor shall take corrective action as required by the department, and consistent with 40 CFR 141.30 (b)(3). When the maximum trihalomethane potential (MTTP) result is equal to or greater than 0.10 mg/L and the result is confirmed by a promptly collected repeat sample, the purveyor shall provide for additional monitoring and take action as directed by the department.

(7) Organic chemicals. Follow-up monitoring shall be conducted in accordance with the following:

(a) For VOCs, 40 CFR 141.24 (f)(11) through 141.24 (f)(15); or

(b) For SOCs, 40 CFR 141.24(b), 141.24(c) and 141.24 (h)(7) through 141.24 (h)(11).

(8) Unregulated inorganic and organic chemicals.

(a) Follow-up monitoring shall be conducted in accordance with 40 CFR 141.40 (n)(8) and 141.40 (n)(9).

(b) When an unregulated chemical is verified at a concentration above the detection limit, the purveyor shall:

(i) Submit the sample analysis results to the department within seven days of receipt from the laboratory; and

(ii) Sample the source a minimum of once every three months for one year and then annually thereafter during the three-month period when the highest previous measurement occurred.

(c) If the department determines that an unregulated chemical is verified at a level greater than a SAL, the department shall notify the purveyor in writing. The purveyor shall repeat sample the source as soon as possible after initial department notice that a SAL has been exceeded. The purveyor shall submit the analysis results to the department within seven days of receipt from the laboratory. If any repeat sample confirms that a SAL has been exceeded, the purveyor shall:

(i) Provide consumer information in accordance with WAC 246-290-495;

(ii) Investigate the cause of the contamination; and

(iii) Take follow-up or corrective action as required by the department.

(d) The department may reduce the purveyor's monitoring requirement for a source detecting an unregulated chemical if the source has been monitored annually for at least three years, and all analysis results are less than the SAL.

(9) The department shall determine the purveyor's follow-up action when a substance not included in this chapter is detected.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-320, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-320, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-320, filed 3/25/93, effective 4/25/93; 92-04-070 (Order 241B), § 246-290-320, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-320, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-320, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-185, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-185, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-185, filed 9/8/83.]

WAC 246-290-330 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-290-410 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-290-415 Operations and maintenance. (1) The purveyor shall ensure that the system is operated in accordance with the operations and maintenance program as established in the approved water system plan required under WAC 246-290-100 or the small water system management program under WAC 246-290-105.

(2) The operations and maintenance program shall include the following elements as applicable:

(a) Water system management and personnel;

(b) Operator certification;

(c) Comprehensive monitoring plan for all contaminants under WAC 246-290-300;

(d) Emergency response program;

(e) Cross-connection control program; and

(f) Maintenance of service reliability in accordance with WAC 246-290-420.

(3) The purveyor shall ensure that the system is operated in accordance with good operations procedures such as those available in texts, handbooks, and manuals available from the following sources:

(a) American Water Works Association (AWWA), 6666 West Quincy Avenue, Denver, Colorado 80235;

(b) American Society of Civil Engineers (ASCE), 345 East 47th Street, New York, New York 10017-2398;

(c) Ontario Ministry of the Environment, 135 St. Clair Avenue West, Toronto, Ontario M4V1B5, Canada;

(d) The Chlorine Institute, 2001 "L" Street NW, Washington, D.C. 20036;

(e) California State University, 600 "J" Street, Sacramento, California 95819;

(f) Health Research Inc., Health Education Services Division, P.O. Box 7126, Albany, New York 12224; and

(g) Any other standards acceptable to the department.

(4) The purveyor shall not establish or maintain a bypass to divert water around any feature of a treatment process, except by written approval from the department.

(5) The purveyor shall take preventive or corrective action as directed by the department when results of an inspection conducted by the department indicate conditions which are currently or may become a detriment to system operation.

(6) The purveyor of a system using surface water or GWI shall meet operational requirements specified in Part 6 of this chapter.

(7) The purveyor shall have a certified operator if required under chapter 70.119 RCW and chapter 246-292 WAC.

(8) The purveyor shall at all times employ reasonable security measures to assure the raw water intake facilities, water treatment processes, water storage facilities, and the distribution system are protected from possible damage or compromise by unauthorized persons, animals, vegetation, or similar intruding agents. Such measures include elements such as locks on hatches, fencing of facilities, screening of reservoir vents or openings, and other recommendations as may be found in the current edition of the *Recommended Standards for Water Works, A Committee Report of the Great Lakes - Upper Mississippi River Board of State Public Health and Environmental Managers.*

(9) All purveyors utilizing ground water wells shall monitor well levels from ground level to the static water level on a seasonal basis, including low demand and high demand periods, to document the continuing availability of the source

to meet projected, long-term demands. Purveyors shall maintain this data and provide it to the department upon request.

(10) All operation and maintenance practices shall conform to Part 5 of this chapter.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-415, filed 3/9/99, effective 4/9/99.]

WAC 246-290-416 Sanitary surveys. (1) All public water systems shall submit to a sanitary survey conducted by the department, or the department's designee, based upon the following schedule:

(a) For community and nontransient noncommunity water systems, every five years, or more frequently as determined by the department. The sanitary surveys shall be consistent with the schedules presented in 40 CFR 141.21; and

(b) For transient noncommunity water systems, every five years unless the system uses only disinfected ground water and has an approved wellhead protection program, in which case the survey shall be every ten years. The sanitary surveys shall be conducted consistent with schedules presented in 40 CFR 141.21.

(2) All public water system purveyors shall be responsible for:

(a) Ensuring cooperation in scheduling sanitary surveys with the department, or its designee; and

(b) Ensuring the unrestricted availability of all facilities and records at the time of the sanitary survey.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-416, filed 3/9/99, effective 4/9/99.]

WAC 246-290-420 Reliability and emergency response. (1) All public water systems shall provide an adequate quantity and quality of water in a reliable manner at all times consistent with the requirements of this chapter.

(2) During normal operating conditions, for both average and peak demand periods, water pressure at the consumer's service meter, or property line if a meter is not used, shall be maintained at the approved design pressure, but in no case be less than 20 psi (140 kPa). Water quality shall be maintained as required in Part 4 and Part 6 of this chapter.

(3) When fire flow is required, 20 psi (140 kPa) at the operating hydrant and at least positive pressure shall be maintained throughout the system under fire flow conditions.

(4) The purveyor shall address abnormal operating conditions, such as those associated with fires, floods, unscheduled power outages, facility failures, and system maintenance, by using measures consistent with applicable regulations and industry standards to ensure the system is constructed, maintained, and operated to protect against the risk of contamination by cross-connections as a result of loss of system pressure.

(5) For operations during abnormal conditions, the purveyor shall establish the level of reliability, in accordance with consumer expectations, to ensure prevention of loss of pressure or prompt restoration of pressure when a loss of pressure has occurred. Consumer expectations may be established by a simple majority of the affected consumers within the system's service area, or within specific, definable pressure zones when different levels of service may be encountered. A simple majority of consumers can be associated with either a vote of the consumers for privately owned and operated systems, or of the system's governing body, such as council, board, or commission, for publicly governed systems. Consumer expectations shall not be used by a purveyor to justify a failure to address routine or repeated loss of pressure within the system, or within specific, definable pressure zones, because of the purveyor's failure to properly construct, maintain, or operate the system. The level of reliability established under this subsection, and measures for achieving such reliability, shall be identified in the operations and maintenance program and incorporated into the water system design, and shall be approved by the department. The level of reliability shall not affect the purveyor's obligations under subsections (1) through (4) of this section.

(6) The purveyor shall implement all appropriate measures necessary to meet the identified level of reliability for normal and abnormal operating conditions. Procedures for system operation during normal and abnormal operating conditions shall be documented in an operations and maintenance and emergency response program in accordance with WAC 246-290-415 and shall be implemented in a timely and reasonable manner.

(7) If a purveyor is unable to satisfactorily address departmental concerns or consumer complaints regarding the level of reliability associated with normal or abnormal operating conditions, the purveyor may be required to prepare a project report pursuant to WAC 246-290-110 that addresses an evaluation of the problem, impacts on affected consumers, and recommended corrective action. Unless the department determines that public health protection requires otherwise, improvements related to abnormal operating conditions described under subsection (5) of this section will be required commensurate with the established level of reliability for abnormal operating conditions.

(8) Restrictions on designed, or historically documented, normal water uses shall not be allowed except under the following conditions:

(a) Whenever there is clear evidence that, unless limitations are imposed, water use at normal levels will lead to a relatively rapid depletion of water source reserves, such as in drought situations or when significant facility failures occur;

(b) Whenever a water system observes that demands for water exceed the available supply, as a result of such events as miscalculated planning, inattentive operation, or unforeseen problems with sources and that limitations would be necessary to insure basic levels of service while additional sources were being sought or developed, or the situation was being otherwise remedied; or

(c) Whenever the water system institutes restrictions as part of a water conservation program which has been accepted by the system consumers through appropriate public decision-making processes within existing governance mechanisms, or has been mandated under state regulatory authority.

(9) A purveyor shall provide the department with the current names, addresses, and telephone numbers of the owners, operators, and emergency contact persons for the system, including any changes to this information. The purveyor shall also maintain twenty-four-hour phone availability and shall

respond to consumer concerns and service complaints in a timely manner.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-420, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-420, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-420, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-201, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-201, filed 2/17/88.]

WAC 246-290-430 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-290-440 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-290-451 Disinfection of drinking water. (1) No portion of a public water system containing potable water shall be put into service, nor shall service be resumed until the facility has been effectively disinfected.

(a) In cases of new construction, drinking water shall not be furnished to the consumer until satisfactory bacteriological samples have been analyzed by a laboratory certified by the state; and

(b) In cases of existing water mains, when the integrity of the main is lost resulting in a significant loss of pressure that places the main at risk to cross-connection contamination, the purveyor shall use standard industry practices such as flushing, disinfection, and/or bacteriological sampling to ensure adequate and safe water quality prior to the return of the line to service;

(c) If a cross-connection is confirmed, the purveyor shall satisfy the reporting requirements as described under WAC 246-290-490(8).

(2) The procedure used for disinfection shall conform to standards published by the American Water Works Association, or other industry standards acceptable to the department.

(3) The purveyor of a system using ground water and required to disinfect, shall meet the following disinfection requirements, unless otherwise directed by the department:

(a) Minimum contact time at a point at or before the first consumer of:

(i) Thirty minutes if 0.2 mg/L free chlorine residual is maintained;

(ii) Ten minutes if 0.6 mg/L free chlorine residual is maintained; or

(iii) Any combination of free chlorine residual concentration (C), measured in mg/L, and contact time (T), measured in minutes, that results in a CT product (C X T) of greater than or equal to six; or

(iv) Contact time (T) for surface water or GWI sources shall be determined in accordance with WAC 246-290-636.

(b) Detectable residual disinfectant concentration in all active parts of the distribution system, measured as total chlorine, free chlorine, combined chlorine, or chlorine dioxide;

(c) Water in the distribution system with an HPC level less than or equal to 500 organisms/mL is considered to have a detectable residual disinfectant concentration.

(4) The department may require the purveyor to provide longer contact times, higher chlorine residuals, or additional treatment to protect the health of consumers served by the public water system.

(5) The purveyor of a system using surface water or GWI shall meet disinfection requirements specified in Part 6 of this chapter.

(6) The purveyor of a system providing ground water disinfection shall monitor residual disinfectant concentration at representative points in the system on a daily basis, and at the same time and location of routine and repeat coliform sample collection. Frequency of disinfection residual monitoring may be reduced upon written request to the department if it can be shown that disinfection residuals can be maintained on a reliable basis without the provision of daily monitoring.

(7) The analyses shall be conducted in accordance with "standard methods." To assure adequate monitoring of chlorine residual, the department may require the use of continuous chlorine residual analyzers and recorders.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-451, filed 3/9/99, effective 4/9/99.]

WAC 246-290-455 Operation of chemical contaminant treatment facilities. (1) Purveyors shall ensure finished drinking water from chemical contaminant treatment facilities complies with the minimum water quality standards established in WAC 246-290-310. This section does not apply to facilities used only for corrosion control treatment purposes.

(2) The purveyor shall collect finished drinking water samples at a point directly downstream of the treatment system prior to the first consumer on a monthly basis.

(a) Finished drinking water samples from treatment systems utilized for removal of contaminants with established primary MCLs shall be submitted to a certified laboratory for analysis of the specific contaminant(s) of concern.

(b) Finished drinking water samples from treatment systems utilized for removal of contaminants with established secondary MCLs shall be submitted to a certified laboratory for analysis or analyzed for the specific contaminant(s) of concern by the purveyor through department-approved on-site methods.

(c) Additional finished drinking water monitoring may be required by the department based on the complexity or size of the water system.

(3) If primary MCLs following treatment are exceeded in four or more months of a consecutive twelve-month compliance period, the purveyor shall submit a project report to the department that addresses the failure to maintain compliance. The project report shall include methods and schedules to correct the treatment deficiency and/or indicate schedules for implementing an alternate source of supply or an effective treatment technology.

(4) If secondary MCLs following treatment are exceeded in four or more months of a consecutive twelve-month compliance period, the purveyor shall take action per WAC 246-290-320 (3)(d).

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-455, filed 3/9/99, effective 4/9/99.]

WAC 246-290-460 Fluoridation of drinking water. (1) Purveyors shall obtain written department approval of fluoridation treatment facilities before placing them in service.

(2) Where fluoridation is practiced, purveyors shall maintain fluoride concentrations in the range 0.8 through 1.3 mg/L throughout the distribution system.

(3) Where fluoridation is practiced, purveyors shall take the following actions to ensure that concentrations remain at optimal levels and that fluoridation facilities and monitoring equipment are operating properly:

(a) Daily monitoring.

(i) Take daily monitoring samples for each point of fluoride addition and analyze the fluoride concentration. Samples must be taken downstream from each fluoride injection point at the first sample tap where adequate mixing has occurred.

(ii) Record the results of daily analyses in a monthly report format acceptable to the department. A report must be made for each point of fluoride addition.

(iii) Submit monthly monitoring reports to the department within the first ten days of the month following the month in which the samples were collected.

(b) Monthly split sampling.

(i) Take a monthly split sample at the same location where routine daily monitoring samples are taken. A monthly split sample must be taken for each point of fluoride addition.

(ii) Analyze a portion of the sample and record the results on the lab sample submittal form and on the monthly report form.

(iii) Forward the remainder of the sample, along with the completed sample form to the state public health laboratory, or other state-certified laboratory, for fluoride analysis.

(iv) If a split sample is found by the certified lab to be:

(A) Not within the range of 0.8 to 1.3 mg/l, the purveyor's fluoridation process shall be considered out of compliance.

(B) Differing by more than 0.30 mg/l from the purveyor's analytical result, the purveyor's fluoride testing shall be considered out of control.

(4) Purveyors shall conduct analyses prescribed in subsection (3) of this section in accordance with procedures listed in the most recent edition of *Standard Methods for the Examination of Water and Wastewater.*

(5) The purveyor may be required by the department to increase the frequency, and/or change the location of sampling prescribed in subsection (3) of this section to ensure the adequacy and consistency of fluoridation.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-460, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-460, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-235, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-235, filed 9/8/83.]

WAC 246-290-470 Uncovered distribution reservoirs. (1) Existing uncovered distribution reservoirs shall be operated based on a plan of operation approved by the department.

(2) Purveyors with uncovered distribution reservoirs shall have a department-approved plan and schedule to cover all reservoirs on file with the department.

(3) The plan of operation shall address the following elements as a minimum:

(a) Assurance of the means and levels associated with the provision of continuous disinfection at all times water is being delivered to the public, including the reliability provisions outlined in WAC 246-290-420;

(b) Description of the means for control of debris, algal, or other aquatic organism growths, surface water runoff, and atmospheric or avian-borne airborne contamination;

(c) Procedures for ensuring that construction will not lead to reservoir contamination;

(d) Provisions for ensuring adequate security measures are provided; and

(e) Any required, or department-directed, monitoring and reporting.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-470, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-470, filed 3/25/93, effective 4/25/93; 91-02-051 (Order 124B), recodified as § 246-290-470, filed 12/27/90, effective 1/31/91; 83-19-002 (Order 266), § 248-54-245, filed 9/8/83.]

WAC 246-290-480 Recordkeeping and reporting. (1) Records. The purveyor shall keep the following records of operation and water quality analyses:

(a) Bacteriological and turbidity analysis results shall be kept for five years. Chemical analysis results shall be kept for as long as the system is in operation. Records of daily source meter readings shall be kept for ten years. Other records of operation and analyses required by the department shall be kept for three years. All records shall bear the signature of the operator in responsible charge of the water system or his or her representative. Systems shall keep these records available for inspection by the department and shall send the records to the department if requested. Actual laboratory reports may be kept or data may be transferred to tabular summaries, provided the following information is included:

(i) The date, place, and time of sampling, and the name of the person collecting the sample;

(ii) Identification of the sample type (routine distribution system sample, repeat sample, source or finished water sample, or other special purpose sample);

(iii) Date of analysis;

(iv) Laboratory and person responsible for performing analysis;

(v) The analytical method used; and

(vi) The results of the analysis.

(b) Records of action taken by the system to correct violations of primary drinking water standards. For each violation, records of actions taken to correct the violation, and copies of public notifications shall be kept for no less than three years after the last corrective action taken.

(c) Copies of any written reports, summaries, or communications relating to sanitary surveys or SPIs of the system conducted by system personnel, by a consultant or by any local, state, or federal agency, shall be kept for ten years after completion of the sanitary survey or SPI involved.

(d) Copies of project reports, construction documents and related drawings, inspection reports and approvals shall be kept for the life of the facility.

(e) Where applicable, daily records of the following shall be kept for a minimum of three years:

(i) Chlorine residual;

(ii) Fluoride level;

(iii) Water treatment plant performance including, but not limited to:

(A) Type of chemicals used and quantity;

(B) Amount of water treated; and

(C) Results of analyses.

(iv) Turbidity;

(v) Source meter readings; and

(vi) Other information as specified by the department.

(2) Reporting.

(a) Unless otherwise specified in this chapter, the purveyor shall report to the department within forty-eight hours:

(i) The failure to comply with the primary standards or treatment technique requirements under this chapter;

(ii) The failure to comply with the monitoring requirements under this chapter; and

(iii) The violation of a primary MCL.

(b) The purveyor shall submit to the department reports required by this chapter, including tests, measurements, and analytic reports. Monthly reports are due before the tenth day of the following month, unless otherwise specified in this chapter.

(c) The purveyor shall submit to the department copies of any written summaries or communications relating to the status of monitoring waivers during each monitoring cycle or as directed by the department.

(d) Source meter readings shall be made available to the department.

(e) Water facilities inventory form (WFI).

(i) Purveyors of **community** and **NTNC** systems shall submit an annual WFI update to the department;

(ii) Purveyors of **TNC** systems shall submit an updated WFI to the department as requested;

(iii) Purveyors shall submit an updated WFI to the department within thirty days of any change in name, category, ownership, or responsibility for management of the water system, or addition of source or storage facilities; and

(iv) At a minimum the completed WFI shall provide the current names, addresses, and telephone numbers of the owners, operators, and emergency contact persons for the system.

(v) Purveyors shall provide in the WFI total annual water production and use, including:

(i) Total annual water production for each source;

(ii) Monthly and annual totals for water purchased from or sold to other purveyors; and

(iii) For purveyors with more than one thousand service connections, monthly and annual totals for purveyor consumer classes. Monthly data may be estimated if the water system bills less frequently than monthly.

(f) Bacteriological.

(i) The purveyor shall notify the department of the presence of:

(A) Coliform in a sample, within ten days of notification by the laboratory; and

(B) Fecal coliform or E. coli in a sample, by the end of the business day in which the purveyor is notified by the laboratory. If the purveyor is notified of the results after normal close of business, then the purveyor shall notify the department before the end of the next business day.

(ii) When a coliform MCL violation is determined, the purveyor shall:

(A) Notify the department within twenty-four hours of determining acute coliform MCL violations; and

(B) Notify the department before the end of the next business day when a nonacute coliform MCL is determined.

(g) Systems monitoring for unregulated VOCs in accordance with WAC 246-290-300 (8)(b), shall send a copy of the results of such monitoring and any public notice to the department within thirty days of receipt of analytical results.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-480, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-480, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-480, filed 3/25/93, effective 4/25/93; 92-04-070 (Order 241B), § 246-290-480, filed 2/4/92, effective 3/6/92; 91-02-051 (Order 124B), recodified as § 246-290-480, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-265, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-265, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-265, filed 9/8/83.]

WAC 246-290-490 Cross-connection control. (1) Applicability, purpose, and responsibility.

(a) All community water systems shall comply with the cross-connection control requirements specified in this section.

(b) All noncommunity water systems shall apply the principles and provisions of this section, including subsection (4)(b) of this section, as applicable to protect the public water system from contamination via cross-connections. Noncommunity systems that comply with subsection (4)(b) of this section and the provisions of WAC 51-46-0603 of the UPC (which addresses the installation of backflow preventers at points of water use within the potable water system) shall be considered in compliance with the requirements of this section.

(c) The purpose of the purveyor's cross-connection control program shall be to protect the public water system, as defined in WAC 246-290-010, from contamination via cross-connections.

(d) The purveyor's responsibility for cross-connection control shall begin at the water supply source, include all the public water treatment, storage, and distribution facilities, and end at the point of delivery to the consumer's water system, which begins at the downstream end of the service connection or water meter located on the public right-of-way or utility-held easement.

(e) Under the provisions of this section, purveyors are not responsible for eliminating or controlling cross-connections within the consumer's water system. Under chapter 19.27 RCW, the responsibility for cross-connection control within the consumer's water system, i.e., within the property lines of the consumer's premises, falls under the jurisdiction of the local administrative authority.

(2) General program requirements.

(a) The purveyor shall develop and implement a cross-connection control program that meets the requirements of this section, but may establish a more stringent program through local ordinances, resolutions, codes, bylaws, or operating rules.

(b) Purveyors shall ensure that good engineering and public health protection practices are used in the development and implementation of cross-connection control programs. Department publications and the most recently published editions of references, such as, but not limited to, those listed below, may be used as guidance for cross-connection program development and implementation:

(i) *Manual of Cross-Connection Control* published by the Foundation for Cross-Connection Control and Hydraulic Research, University of Southern California (USC Manual); or

(ii) *Cross-Connection Control Manual, Accepted Procedure and Practice* published by the Pacific Northwest Section of the American Water Works Association (PNWS-AWWA Manual).

(c) The purveyor may implement the cross-connection control program, or any portion thereof, directly or by means of a contract with another agency or party acceptable to the department.

(d) The purveyor shall coordinate with the local administrative authority in all matters concerning cross-connection control. The purveyor shall document and describe such coordination, including delineation of responsibilities, in the written cross-connection control program required in (e) of this subsection.

(e) The purveyor shall include a written description of the cross-connection control program in the water system plan required under WAC 246-290-100 or the small water system management program required under WAC 246-290-105. The cross-connection control program shall include the minimum program elements described in subsection (3) of this section.

(f) The purveyor shall ensure that cross-connections between the distribution system and a consumer's water system are eliminated or controlled by the installation of an approved backflow preventer commensurate with the degree of hazard. This can be accomplished by implementation of a cross-connection program that relies on:

(i) Premises isolation as defined in WAC 246-290-010; or

(ii) Premises isolation and in-premises protection as defined in WAC 246-290-010.

(g) Purveyors with cross-connection control programs that rely both on premises isolation and in-premises protection:

(i) Shall comply with the premises isolation requirements specified in subsection (4)(b) of this section; and

(ii) May reduce premises isolation requirements and rely on in-premises protection for premises other than the type not addressed in subsection (4)(b) of this section, if the conditions in (h) of this subsection are met.

(h) Purveyors may rely on in-premises protection only when the following conditions are met:

(i) The in-premises backflow preventers provide a level of protection commensurate with the purveyor's assessed degree of hazard;

(ii) Backflow preventers which provide the in-premises backflow protection meet the definition of approved backflow preventers as described in WAC 246-290-010;

(iii) The approved backflow preventers are installed, inspected, tested (if applicable), maintained, and repaired in accordance with subsections (6) and (7) of this section;

(iv) Records of such backflow preventers are maintained in accordance with subsections (3)(j) and (8) of this section; and

(v) The purveyor has reasonable access to the consumer's premises to conduct an initial hazard evaluation and periodic reevaluations to determine whether the in-premises protection is adequate to protect the purveyor's distribution system.

(i) The purveyor shall take appropriate corrective action within its authority if:

(i) A cross-connection exists that is not controlled commensurate to the degree of hazard assessed by the purveyor; or

(ii) A consumer fails to comply with the purveyor's requirements regarding the installation, inspection, testing, maintenance or repair of approved backflow preventers required by this chapter.

(j) The purveyor's corrective action may include, but is not limited to:

(i) Denying or discontinuing water service to a consumer's premises until the cross-connection hazard is eliminated or controlled to the satisfaction of the purveyor;

(ii) Requiring the consumer to install an approved backflow preventer for premises isolation commensurate with the degree of hazard; or

(iii) The purveyor installing an approved backflow preventer for premises isolation commensurate with the degree of hazard.

(k) Purveyors denying or discontinuing water service to a consumer's premises for one or more of the reasons listed in (i) of this subsection shall notify the local administrative authority prior to taking such action except in the event of an emergency.

(l) The purveyor shall prohibit the intentional return of used water to the purveyor's distribution system. Such water would include, but is not limited to, water used for heating, cooling, or other purposes within the consumer's water system.

(3) Minimum elements of a cross-connection control program.

(a) To be acceptable to the department, the purveyor's cross-connection control program shall include the minimum elements identified in this subsection.

(b) Element 1: The purveyor shall adopt a local ordinance, resolution, code, bylaw, or other written legal instrument that:

(i) Establishes the purveyor's legal authority to implement a cross-connection control program;

(ii) Describes the operating policies and technical provisions of the purveyor's cross-connection control program; and

(iii) Describes the corrective actions used to ensure that consumers comply with the purveyor's cross-connection control requirements.

(c) Element 2: The purveyor shall develop and implement procedures and schedules for evaluating new and existing service connections to assess the degree of hazard posed by the consumer's premises to the purveyor's distribution system and notifying the consumer within a reasonable time frame of the hazard evaluation results. At a minimum, the program shall meet the following:

(i) For new connections made on or after the effective date of these regulations, procedures shall ensure that an initial evaluation is conducted before service is provided;

(ii) For existing connections made prior to the effective date of these regulations, procedures shall ensure that an initial evaluation is conducted in accordance with a schedule acceptable to the department; and

(iii) For all service connections, once an initial evaluation has been conducted, procedures shall ensure that periodic reevaluations are conducted in accordance with a schedule acceptable to the department and whenever there is a change in the use of the premises.

(d) Element 3: The purveyor shall develop and implement procedures and schedules for ensuring that:

(i) Cross-connections are eliminated whenever possible;

(ii) When cross-connections cannot be eliminated, they are controlled by installation of approved backflow preventers commensurate with the degree of hazard; and

(iii) Approved backflow preventers are installed in accordance with the requirements of subsection (6) of this section.

(e) Element 4: The purveyor shall ensure that personnel, including at least one person certified as a CCS, are provided to develop and implement the cross-connection control program.

(f) Element 5: The purveyor shall develop and implement procedures to ensure that approved backflow preventers are inspected and/or tested (as applicable) in accordance with subsection (7) of this section.

(g) Element 6: The purveyor shall develop and implement a backflow prevention assembly testing quality control assurance program, including, but not limited to, documentation of tester certification and test kit calibration, test report contents, and time frames for submitting completed test reports.

(h) Element 7: The purveyor shall develop and implement (when appropriate) procedures for responding to backflow incidents.

(i) Element 8: The purveyor shall include information on cross-connection control in the purveyor's existing program for educating consumers about water system operation. Such a program may include periodic bill inserts, public service announcements, pamphlet distribution, notification of new consumers and consumer confidence reports.

(j) Element 9: The purveyor shall develop and maintain cross-connection control records including, but not limited to, the following:

(i) A master list of service connections and/or consumer's premises where the purveyor relies upon approved backflow preventers to protect the public water system from contamination, the assessed hazard level of each, and the required backflow preventer(s);

(ii) Inventory information on:

(A) Approved air gaps installed in lieu of approved assemblies including exact air gap location, assessed degree of hazard, installation date, history of inspections, inspection results, and person conducting inspections;

(B) Approved backflow assemblies including exact assembly location, assembly description (type, manufacturer, model, size, and serial number), assessed degree of hazard, installation date, history of inspections, tests and repairs, test results, and person performing tests; and

(C) Approved AVBs used for irrigation system applications including location, description (manufacturer, model, and size), installation date, history of inspection(s), and person performing inspection(s).

(iii) Cross-connection program summary reports and backflow incident reports required under subsection (8) of this section.

(k) Element 10: Purveyors who distribute and/or have facilities that receive reclaimed water within their water service area shall meet any additional cross-connection control requirements imposed by the department under a permit issued in accordance with chapter 90.46 RCW.

(4) Approved backflow preventer selection.

(a) The purveyor shall ensure that a CCS:

(i) Assesses the degree of hazard posed by the consumer's water system upon the purveyor's distribution system; and

(ii) Determines the appropriate method of backflow protection for premises isolation in accordance with Table 8.

TABLE 8

APPROPRIATE METHODS OF BACKFLOW PROTECTION FOR PREMISES ISOLATION

Degree of Hazard	Application Condition	Appropriate Approved Backflow Preventer
High health cross-connection hazard	Backsiphonage or backpressure backflow	AG, RPBA, or RPDA
Low health cross-connection hazard	Backsiphonage or backpressure backflow	AG, RPBA, RPDA, DCVA, or DCDA

(b) Premises isolation requirements.

(i) For service connections with remises posing a high health cross-connection hazard including, but not limited to, those premises listed in Table 9, the purveyor shall ensure that an approved air gap or RPBA is installed for premises isolation.

(ii) If the purveyor's CCS determines that no hazard exists for a connection serving premises of the type listed in Table 9, the requirements of (b)(i) of this subsection do not apply.

(iii) The purveyor shall document, on a case-by-case basis, the reasons for not applying the requirements of (b)(i) of this subsection to a connection serving premises of the type listed in Table 9 and include such documentation in the

cross-connection control program summary report required in subsection (8) of this section.

TABLE 9

HIGH HEALTH CROSS-CONNECTION HAZARD PREMISES REQUIRING PREMISES ISOLATION BY AG OR RPBA

Agricultural (farms and dairies)
Beverage bottling plants
Car washes
Chemical plants
Commercial laundries and dry cleaners
Premises where both reclaimed water and potable water are provided
Film processing facilities
Food processing plants
Hospitals, medical centers, nursing homes, veterinary, medical and dental clinics, and blood plasma centers
Premises with separate irrigation systems using the purveyor's water supply and with chemical addition+
Laboratories
Metal plating industries
Mortuaries
Petroleum processing or storage plants
Piers and docks
Radioactive material processing plants or nuclear reactors*
Survey access denied or restricted
Wastewater lift stations and pumping stations
Wastewater treatment plants*
Premises with an unapproved auxiliary water supply interconnected with the potable water supply

+ For example, parks, playgrounds, golf courses, cemeteries, estates, etc.

* RPBAs for connections serving these premises are acceptable only when used in combination with an in-plant approved air gap; otherwise, the purveyor shall require an approved air gap at the service connection.

(c) Backflow protection for single-family residences.

(i) For single-family residential service connections, the purveyor shall comply with the requirements of (b) of this subsection when applicable.

(ii) If the requirements of (b) of this subsection do not apply and the requirements specified in subsection (2)(h) of this section are met, the purveyor may rely on backflow protection provided at the point of hazard in accordance with WAC 51-46-0603 of the UPC for hazards such as, but not limited to:

(A) Irrigation systems;

(B) Swimming pools or spas;

(C) Ponds; and

(D) Boilers.

For example, the purveyor may accept an approved AVB on a residential irrigation system, if the AVB is properly installed in accordance with the UPC.

(d) Backflow protection for fire protection systems.

(i) Backflow protection is not required for residential flow-through or combination fire protection systems constructed of potable water piping and materials.

(ii) For service connections with fire protection systems other than flow-through or combination systems, the purveyor shall ensure that backflow protection consistent with WAC 51-46-0603 of the UPC is installed. The UPC requires minimum protection as follows:

(A) An RPBA or RPDA for fire protection systems with chemical addition or using unapproved auxiliary water supply; and

(B) A DCVA or DCDA for all other fire protection systems.

(iii) For new connections made on or after the effective date of these regulations, the purveyor shall ensure that backflow protection is installed before water service is provided.

(iv) For existing fire protection systems:

(A) With chemical addition or using unapproved auxiliary supplies, the purveyor shall ensure that backflow protection is installed within ninety days of the purveyor notifying the consumer of the high health cross-connection hazard or in accordance with an alternate schedule acceptable to the purveyor.

(B) Without chemical addition, without on-site storage, and using only the purveyor's water (i.e., no unapproved auxiliary supplies on or available to the premises), the purveyor shall ensure that backflow protection is installed in accordance with a schedule acceptable to the purveyor or at an earlier date if required by the agency administering the Uniform Building Code as adopted under chapter 19.27 RCW.

(C) When establishing backflow protection retrofitting schedules for fire protection systems that have the characteristics listed in (d)(iv)(B) of this subsection, the purveyor may consider factors such as, but not limited to, impacts of assembly installation on sprinkler performance, costs of retrofitting, and difficulty of assembly installation.

(e) Purveyors may require backflow preventers commensurate with the degree of hazard determined by the purveyor to be installed for premises isolation for connections serving premises that have characteristics such as, but not limited to, the following:

(i) Complex plumbing arrangements or plumbing potentially subject to frequent changes that make it impracticable to assess whether cross-connection hazards exist;

(ii) A repeated history of cross-connections being established or reestablished; or

(iii) Cross-connection hazards are unavoidable or not correctable, such as, but not limited to, tall buildings.

(5) Approved backflow preventers.

(a) The purveyor shall ensure that all backflow prevention assemblies relied upon by the purveyor are models included on the current list of backflow prevention assemblies approved for use in Washington state. The current approved assemblies list is available from the department upon request.

(b) The purveyor may rely on testable backflow prevention assemblies that are not currently approved by the department, if the assemblies:

(i) Were included on the department and/or USC list of approved backflow prevention assemblies at the time of installation;

(ii) Have been properly maintained;

(iii) Are commensurate with the purveyor's assessed degree of hazard; and

(iv) Have been inspected and tested at least annually and have successfully passed the annual tests.

(c) The purveyor shall ensure that an unlisted backflow prevention assembly is replaced by an approved assembly commensurate with the degree of hazard, when the unlisted assembly:

(i) Does not meet the conditions specified in (b)(i) through (iv) of this subsection;

(ii) Is moved; or

(iii) Cannot be repaired using spare parts from the original manufacturer.

(d) The purveyor shall ensure that AVBs meet the definition of approved atmospheric vacuum breakers as described in WAC 246-290-010.

(6) Approved backflow preventer installation.

(a) The purveyor shall ensure that approved backflow preventers are installed in the orientation for which they are approved (if applicable).

(b) The purveyor shall ensure that approved backflow preventers are installed in a manner that:

(i) Facilitates their proper operation, maintenance, inspection, and/or in-line testing (as applicable) using standard installation procedures acceptable to the department such as those in the USC Manual or PNWS-AWWA Manual;

(ii) Ensures that the assembly will not become submerged due to weather-related conditions such as flooding; and

(iii) Ensures compliance with all applicable safety regulations.

(c) The purveyor shall ensure that approved backflow assemblies for premises isolation are installed at a location adjacent to the meter or property line or an alternate location acceptable to the purveyor.

(d) When premises isolation assemblies are installed at an alternate location acceptable to the purveyor, the purveyor shall ensure that there are no connections between the point of delivery from the public water system and the approved backflow assembly, unless the installation of such a connection meets the purveyor's cross-connection control requirements and is specifically approved by the purveyor.

(e) The purveyor shall ensure that approved backflow preventers are installed in accordance with the following time frames:

(i) For new connections made on or after the effective date of these regulations, the following conditions shall be met before service is provided:

(A) The provisions of subsection (3)(d)(ii) of this section; and

(B) Satisfactory completion of a test by a BAT in accordance with subsection (7) of this section.

(ii) For existing connections where the purveyor identifies a high health cross-connection hazard, the provisions of (3)(d)(ii) of this section shall be met:

(A) Within ninety days of the purveyor notifying the consumer of the high health cross-connection hazard; or

(B) In accordance with an alternate schedule acceptable to the purveyor.

(iii) For existing connections where the purveyor identifies a low health cross-connection hazard, the provisions of subsection (3)(d)(ii) of this section shall be met in accordance with a schedule acceptable to the purveyor.

(f) The purveyor shall ensure that bypass piping installed around any approved backflow preventer is equipped with an approved backflow preventer that:

(i) Affords at least the same level of protection as the approved backflow preventer that is being bypassed; and

(ii) Complies with all applicable requirements of this section.

(7) Approved backflow preventer inspection and testing.

(a) The purveyor shall ensure that:

(i) A CCS inspects backflow preventer installations to ensure that protection is provided commensurate with the assessed degree of hazard;

(ii) Either a BAT or CCS inspects:

(A) Air gaps installed in lieu of approved backflow prevention assemblies for compliance with the approved air gap definition; and

(B) Backflow prevention assemblies for correct installation and approval status.

(iii) A BAT tests approved backflow prevention assemblies for proper operation.

(b) The purveyor shall ensure that inspections and/or tests of approved air gaps and approved backflow assemblies are conducted:

(i) At the time of installation;

(ii) Annually after installation, or more frequently, if required by the purveyor for connections serving premises or systems that pose a high health cross-connection hazard or for assemblies that repeatedly fail;

(iii) After a backflow incident; and

(iv) After an assembly is repaired, reinstalled, or relocated or an air gap is replumbed.

(c) The purveyor shall ensure that inspections of AVBs installed on irrigation systems are conducted:

(i) At the time of installation;

(ii) After a backflow incident; and

(iii) After repair, reinstallation, or relocation.

(d) The purveyor shall ensure that approved backflow prevention assemblies are tested using procedures acceptable to the department, such as those specified in the most recently published edition of the USC Manual. When circumstances, such as, but not limited to, configuration or location of the assembly, preclude the use of USC test procedures, the purveyor may allow, on a case-by-case basis, the use of alternate (non-USC) test procedures acceptable to the department.

(e) The purveyor shall ensure that results of backflow prevention assembly inspections and tests are documented and reported in a manner acceptable to the purveyor.

(f) The purveyor shall ensure that an approved backflow prevention assembly or AVB, whenever found to be improperly installed, defective, not commensurate with the degree of hazard, or failing a test (if applicable) is properly reinstalled, repaired, overhauled, or replaced.

(g) The purveyor shall ensure that an approved air gap, whenever found to be altered or improperly installed, is properly replumbed or, if commensurate with the degree of hazard, is replaced by an approved RPBA.

(8) Recordkeeping and reporting.

(a) Purveyors shall keep cross-connection control records for the following time frames:

(i) Records pertaining to the master list of service connections and/or consumer's premises required in subsection (3)(j)(i) of this section shall be kept as long as the premises pose a cross-connection hazard to the purveyor's distribution system;

(ii) Records regarding inventory information required in subsection (3)(j)(ii) of this section shall be kept for five years or for the life of the approved backflow preventer whichever is shorter; and

(iii) Records regarding backflow incidents and annual summary reports required in subsection (3)(j)(iii) of this section shall be kept for five years.

(b) Purveyors may maintain cross-connection control records in original form or transfer data to tabular summaries.

(c) Purveyors may maintain records or data in any media, such as paper, film, or electronic format.

(d) The purveyor shall complete the cross-connection control program summary report annually. Report forms and guidance on completing the report are available from the department.

(e) The purveyor shall make all records and reports required in subsection (3)(j) of this section available to the department or its representative upon request.

(f) The purveyor shall notify the department, local administrative authority, and local health jurisdiction as soon as possible, but no later than the end of the next business day, when a backflow incident is known by the purveyor to have:

(i) Contaminated the public water system; or

(ii) Occurred within the premises of a consumer served by the purveyor.

(g) The purveyor shall:

(i) Document details of backflow incidents on a form acceptable to the department such as the backflow incident report form included in the most recent edition of the PNWS-AWWA Manual; and

(ii) Include all backflow incident report(s) in the annual cross-connection program summary report referenced in (d) of this subsection, unless otherwise requested by the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-490, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-490, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-285, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-285, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-285, filed 9/8/83.]

WAC 246-290-495 Public notification. (1) Required notification. The purveyor shall notify the water system users when the system:

(a) Has an MCL violation of a primary standard as described under WAC 246-290-310;

(b) Fails to comply with:

(i) Treatment technique requirements under Part 6 of this chapter or 40 CFR 141.80(d);

(ii) Monitoring requirements under WAC 246-290-300, 246-290-664, 246-290-674, or 246-290-694;

(iii) Analytical requirements of WAC 246-290-638 or chapter 246-390 WAC;

(iv) A departmental order; or

(v) A variance or exemption schedule prescribed by the state board of health;

(c) Is identified as a source of waterborne disease outbreak as determined by the department;

(d) Is issued a category red operating permit;

(e) Is issued a departmental order; or

(f) Is operating under a variance or exemption.

(2) Content. Notices shall provide:

(a) A clear, concise, and simple explanation of the violation;

(b) Discussion of potential adverse health effects and any segments of the population that may be at higher risk;

(c) Mandatory health effects information in accordance with subsection (4) of this section;

(d) A list of steps the purveyor has taken or is planning to take to remedy the situation;

(e) A list of steps the consumer should take, including advice on seeking an alternative water supply if necessary;

(f) The purveyor's name and phone number; and

(g) When appropriate, notices shall be bilingual or multilingual.

The purveyor may provide additional information to further explain the situation.

(3) Distribution.

(a) Purveyors of community and NTNC systems with violations of a primary MCL, treatment technique, or variance or exemption schedule shall provide:

(i) Newspaper notice to water system users as defined in (e) of this subsection, within fourteen days of violation;

(ii) Direct mail notice or hand delivery to all consumers served by the system within forty-five days of the violation. The department may waive the purveyor's mail or hand delivery if the violation is corrected within forty-five days. The waiver shall be in writing and made within the forty-five day period;

(iii) Notice to radio and television stations serving the area within seventy-two hours of violation of an acute coliform MCL under WAC 246-290-310 (2)(c), a nitrate MCL under WAC 246-290-310(3), occurrence of a waterborne disease outbreak or other acute violation as determined by the department; and

(iv) Repeat mail or hand delivery every three months until the violation is corrected.

(b) Purveyors of community and NTNC systems shall provide newspaper notice as defined in (e) of this subsection, to water system users within three months of the following:

(i) Violation of a monitoring requirement or testing procedure;

(ii) Receipt of a departmental order;

(iii) Receipt of a category red operating permit; or

(iv) Granting of a variance or exemption.

Purveyors shall also provide repeat notice by mail or hand delivery to all consumers served by the system every three months until the situation is corrected or for as long as the variance or exemption remains in effect.

(c) Purveyors of TNC systems shall post a notice or notify consumers by other methods authorized by the department within fourteen days of the following:

(i) Violation of a primary MCL;

(ii) Violation of a treatment technique requirement; or

(iii) Violation of a variance or exemption schedule. If the violation is acute, the department shall require posting within seventy-two hours.

(d) Purveyors of TNC systems shall post a notice or notify consumers by other methods authorized by the department within three months of the following:

(i) Violation of a monitoring requirement or testing procedure;

(ii) Receipt of a category red operating permit; or

(iii) Granting of a variance or exemption.

(e) "Newspaper notice," as used in this section, means publication in a daily newspaper of general circulation or in a weekly newspaper of general circulation if a daily newspaper does not serve the area. The purveyor may substitute a community or homeowner's association newsletter or similar periodical publication if the newsletter reaches all affected consumers within the specified time.

(f) The purveyor shall substitute a posted notice in the absence of a newspaper of general circulation or homeowner's association newsletter or similar periodical publication. The purveyor shall post the notice within the time frame specified in this subsection.

(g) The purveyor shall place posted notices in conspicuous locations and present the notices in a manner making them easy to read. Notices shall remain posted until the violation is corrected or for as long as the variance or exemption remains in effect.

(h) The purveyor of a community or NTNC water system shall give a copy of the most recent public notice for all outstanding violations to all new billing units or new hookups before or at the time water service begins.

(i) The purveyor shall provide the department with a copy of the public notification at the time the purveyor notifies the public.

(4) Mandatory language.

(a) The purveyor shall provide specific health effects language in the notice when a violation involves:

(i) A violation of a primary organic or inorganic chemical or physical MCL;

(ii) A violation of a secondary fluoride MCL;

(iii) A violation of an acute coliform MCL;

(iv) A violation of a nonacute coliform MCL;

(v) A treatment technique requirement;

(vi) Granting or continuation of exemption or variance; or

(vii) Failure to comply with a variance or exemption schedule.

(b) The purveyor shall provide specific mandatory language in its notification when the purveyor receives a category red operating permit.

(c) Required specific language is contained in department guidance.

(5) Procedure for notification of organic chemical and unregulated chemical sample results.

(a) Availability of results. After receipt of the first analysis results, the purveyor of a community or NTNC water system shall notify persons served by the system of the availability of the results and shall supply the name and telephone number of a contact person. Purveyors with surface water sources shall include a statement that additional monitoring will be conducted for three more quarters.

(i) The purveyor shall initiate notification within three months of the purveyors receipt of the first analysis results. This notification is only required one time.

(ii) Notification shall occur by any of the following methods:

(A) Inclusion in the first set of water bills issued after receipt of the results;

(B) Newspaper notice that shall run at least one day each month for three consecutive months;

(C) Direct mail;

(D) Posting for at least one week if an NTNC system; or

(E) Any other method approved by the department.

(iii) Within three months of receipt of analysis results, purveyors selling water to other public water systems shall provide copies of the analysis results to the purchasing system.

(iv) Within thirty days of receipt of analysis results, purveyors purchasing water shall make results available to their consumers. The purveyor's notification shall occur by the method outlined under (a)(ii) of this subsection.

(b) Consumer information.

(i) The purveyor shall provide consumer information within twenty-one days of receipt of confirmation sample results when:

(A) A regulated chemical is confirmed at a concentration greater than an MCL, and the level will not cause the running annual average to exceed the MCL; or

(B) The department determines that an unregulated chemical is confirmed at a level greater than a SAL.

(ii) Consumer information shall include:

(A) Name and level of chemical detected;

(B) Location where the chemical was detected;

(C) Any health effects that the chemical could cause at its present concentration;

(D) Plans for follow-up activities; and

(E) Phone number to call for further information.

(iii) Consumer information shall be distributed by any of the following methods:

(A) Notice placed in the major newspaper in the affected area;

(B) Direct mail to consumers;

(C) Posting for at least one week if an NTNC system; or

(D) Any other method approved by the department.

(6) Fluoride notification procedure.

When a primary or secondary MCL violation occurs or a variance or exemption is issued or a variance or exemption schedule is violated, the purveyor of a community water system shall send notice, including mandatory language, to:

(a) The department annually;

(b) Water system users annually; and

(c) New billing units added while the violation exists.

(7) When circumstances dictate the purveyor give a broader or more immediate notice to protect public health,

the department may require the purveyor's notification by whatever means necessary.

(8) When the state board of health grants a public water system a waiver, the purveyor shall notify consumers and new billing units or new hookups before water service begins. The purveyor shall provide a notice annually and send a copy to the department.

(9) The department may give notice to the water system users as required by this section on behalf of the water purveyor. However, the purveyor remains responsible for ensuring the department's requirements are met.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-495, filed 3/9/99, effective 4/9/99.]

WAC 246-290-601 Purpose of surface water treatment. (1) Part 6 of chapter 246-290 WAC establishes filtration and disinfection as treatment technique requirements for water systems using surface or GWI sources. The Part 6 treatment technique requirements are established in lieu of maximum contaminant levels (MCLs) for the following contaminants:

(a) *Giardia lamblia*;

(b) Viruses;

(c) Heterotrophic plate count bacteria;

(d) *Legionella*; and

(e) Turbidity.

(2) For water systems using unfiltered surface sources, in whole or part, and that have been required to install, but have yet to complete the installation and operation of, filtration facilities, the turbidity levels at entry points to distribution and sampling/analytical requirements shall be in accordance with 40 CFR 141.13 and 40 CFR 141.22, respectively.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-601, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-601, filed 3/25/93, effective 4/25/93.]

WAC 246-290-610 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-290-620 Applicability of surface water treatment requirements. (1) The requirements of Part 6 of this chapter apply to water systems that:

(a) Use surface sources or ground water sources under the direct influence of surface water (GWI); or

(b) Purchase surface or GWI water from an approved public water system or other entity acceptable to the department.

(2) The requirements of Part 6 of this chapter do not apply to water systems that use unfiltered surface or GWI sources as emergency sources, provided the source is physically disconnected from the system at all times until it is needed, and the purveyor meets the following conditions:

(a) Has a department-approved emergency response plan; and

(b) Provides disinfection treatment that meets the requirements under WAC 246-290-662 (2) (d).

(3) The requirements of WAC 246-290-640 apply to **Group A** systems that use sources potentially under the influence of surface water as determined by the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-620, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-620, filed 3/25/93, effective 4/25/93.]

WAC 246-290-630 General requirements. (1) The purveyor shall ensure that treatment is provided for surface and GWI sources consistent with the treatment technique requirements specified in Part 6 of chapter 246-290 WAC.

(2) The purveyor shall install and properly operate water treatment processes to ensure at least:

(a) 99.9 percent (3 log) removal and/or inactivation of *Giardia lamblia* cysts; and

(b) 99.99 percent (4 log) removal and/or inactivation of viruses.

(3) The purveyor shall ensure that the requirements of subsection (2) of this section are met between a point where the source water is not subject to contamination by untreated surface water and a point at or before the first consumer.

(4) The department may require higher levels of removal and/or inactivation of *Giardia lamblia* cysts and viruses than specified in subsection (2) of this section if deemed necessary to protect the health of consumers served by the system.

(5) The purveyor shall ensure that personnel operating a system subject to Part 6 of chapter 246-290 WAC meet the requirements under chapter 70.119 RCW and chapter 246-292 WAC.

(6) The purveyor of a **Group A community** system serving water from a surface or GWI source to the public before January 1, 1991, shall comply with applicable minimum treatment requirements. The purveyor shall meet either:

(a) The filtration and disinfection requirements under WAC 246-290-660 and 246-290-662 respectively;

(b) The criteria to remain unfiltered under WAC 246-290-690 and the disinfection requirements under WAC 246-290-692; or

(c) The criteria to provide a limited alternative to filtration under WAC 246-290-691 and the disinfection requirements under WAC 246-290-692.

(7) The purveyor of a **Group A noncommunity** system serving water from a surface or GWI source, shall meet either:

(a) The filtration and disinfection requirements under WAC 246-290-660 and 246-290-662, respectively; or

(b) The criteria to provide a limited alternative to filtration under WAC 246-290-691 and the disinfection requirements under WAC 246-290-692.

(8) The purveyor of a **Group A** system first serving water from a surface or GWI source to the public after December 31, 1990, shall meet either:

(a) The filtration and disinfection requirements under WAC 246-290-660 and 246-290-662, respectively; or

(b) The criteria to provide a limited alternative to filtration under WAC 246-290-691 and the disinfection requirements under WAC 246-290-692.

(9) The purveyor of a system required to install filtration may choose to provide a limited alternative to filtration or abandon the surface or GWI source as a permanent or seasonal source and develop an alternate, department-approved source. Purveyors that develop alternate ground water sources or purchase water from a department-approved pub-

lic water system using a ground water source shall no longer be subject to Part 6 of chapter 246-290 WAC, once the alternate source is approved by the department and is on line.

(10) A purveyor that chooses to provide a limited alternative to filtration shall submit an application to the department that contains the information necessary to determine whether the source can meet the criteria.

(11) If a limited alternative to filtration is provided, then the purveyor shall install and properly operate treatment processes to ensure greater removal and/or inactivation efficiencies of *Giardia lamblia* cysts, viruses, or other pathogenic organisms of public health concern than would be achieved by the combination of filtration and chlorine disinfection.

[Statutory Authority: RCW 43.20.050. 99-07-021 and 99-10-076, § 246-290-630, filed 3/9/99 and 5/4/99, effective 4/9/99 and 6/4/99; 93-08-011 (Order 352B), § 246-290-630, filed 3/25/93, effective 4/25/93.]

WAC 246-290-632 Treatment technique violations. (1) A treatment technique violation shall be considered a violation of a primary drinking water standard and in the case of an unfiltered system, may result in the purveyor of an unfiltered system being required to install filtration.

(2) A treatment technique violation occurs when a system using a surface or GWI source is identified by the department as the source of a waterborne disease outbreak or any of the following occur as applicable:

(a) The purveyor providing filtration delivers unfiltered water or fails to meet one or more of the following requirements:

(i) Filtration treatment in accordance with WAC 246-290-660; or

(ii) Disinfection treatment in accordance with WAC 246-290-662.

(b) The purveyor required to install filtration:

(i) Fails to meet the interim disinfection requirements in accordance with WAC 246-290-672 or as otherwise directed by the department; or

(ii) Fails to install filtration or develop an alternate source by the applicable time lines specified in WAC 246-290-670.

(c) The purveyor of an unfiltered surface water, or GWI source, meeting the criteria to remain unfiltered:

(i) Delivers water with a turbidity level exceeding 5.0 NTU measured at a point immediately prior to the point of primary disinfection; or

(ii) Fails to meet one or more of the disinfection requirements in accordance with WAC 246-290-692 after the dates specified in WAC 246-290-686.

(d) The purveyor of an unfiltered source meeting the criteria to provide a limited alternative to filtration:

(i) Delivers water with a turbidity level exceeding 5.0 NTU measured at a point immediately prior to the point of primary disinfection; or

(ii) Fails to meet one or more of the disinfection requirements in accordance with WAC 246-290-692.

(e) A purveyor supplies water from an unfiltered source that has not been previously approved by the department.

(f) A purveyor of a department approved unfiltered source that fails to meet the on-going criteria to remain unfiltered:

(i) Delivers water with a turbidity level exceeding 5.0 NTU measured at a point immediately prior to the point of primary disinfection; or

(ii) Fails to meet one or more of the disinfection requirements in accordance with WAC 246-290-692.

(g) A purveyor of a department approved unfiltered source that has failed to meet the criteria to provide a limited alternative to filtration:

(i) Delivers water with a turbidity level exceeding 5.0 NTU measured at a point immediately prior to the point of primary disinfection; or

(ii) Fails to meet one or more of the disinfection requirements in accordance with WAC 246-290-692.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-632, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-632, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-632, filed 3/25/93, effective 4/25/93.]

WAC 246-290-634 Follow-up to treatment technique violations. When a treatment technique violation occurs, the purveyor:

(1) Shall report to the department in accordance with:

(a) WAC 246-290-666 for purveyors providing filtration or required to filter;

(b) WAC 246-290-674 for purveyors installing filtration; or

(c) WAC 246-290-696 for purveyors meeting the criteria to remain unfiltered or providing a limited alternative to filtration;

(2) Shall notify the public in accordance with WAC 246-290-495;

(3) Shall determine the cause of the violation;

(4) Shall take action as directed by the department; and

(5) May be subject to enforcement under WAC 246-290-050.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-634, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-634, filed 3/25/93, effective 4/25/93.]

WAC 246-290-636 Determination of disinfectant contact time (T). (1) The purveyor shall calculate T at peak hourly flow for each surface or GWI source.

(2) For pipelines, the purveyor shall calculate T by dividing the internal volume of the pipe by the peak hourly flow rate through that pipe.

(3) For all other system components used for inactivation of *Giardia lamblia* cysts, viruses, and other microorganisms of public health concern, the purveyor shall use tracer studies or empirical methods to determine T.

(4) The purveyor shall use the T10 value determined by tracer studies or other methods acceptable to the department as T in all CT calculations.

(5) Tracer studies.

(a) The purveyor shall conduct field tracer studies on all system components with configurations (geometry and/or baffling) for which analogous contact times are not documented.

(b) Before conducting tracer studies, the purveyor shall obtain the department's approval of a tracer study plan. The plan shall identify at a minimum:

(i) How the purveyor will conduct the study;

(ii) The tracer material to be used;

(iii) Flow rates to be used; and

(iv) The names, titles, and qualifications of the persons conducting the study.

(c) A professional engineer registered in the state of Washington shall direct the conduct of all tracer studies.

(d) Tracer studies shall be conducted in accordance with good engineering practices using methods acceptable to the department such as those described in department guidance on surface water treatment.

(e) The department may require the purveyor to conduct additional tracer studies when:

(i) Modifications impacting flow distribution or T are made; or

(ii) Increases in flow exceed the conditions of the previous tracer studies.

(6) Empirical methods.

(a) Empirical methods may be used to calculate T10, if the purveyor demonstrates to the department's satisfaction that system components have configurations analogous to components on which tracer studies have been conducted and results have been documented.

(b) The purveyor shall submit to the department for review and approval engineering justification for determining T10 using empirical methods. As-built drawings of system components in their current configurations shall be submitted with the engineering justification.

(c) A professional engineer registered in the state of Washington shall prepare the engineering justification for determining T10 using empirical methods.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-636, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-636, filed 3/25/93, effective 4/25/93.]

WAC 246-290-638 Analytical requirements. (1) The purveyor shall ensure that only qualified persons conduct measurements for pH, temperature, turbidity, and residual disinfectant concentrations. In this section, qualified shall mean:

(a) A person certified under chapter 246-292 WAC;

(b) An analyst, with experience conducting these measurements, from the state public health laboratory or another laboratory certified by the department; or

(c) A state or local health agency professional experienced in conducting these measurements.

(2) The purveyor shall ensure that measurements for temperature, turbidity, pH, and residual disinfectant concentration are made in accordance with "standard methods."

(3) The purveyor shall ensure that samples for coliform and HPC analysis are:

(a) Collected and transported in accordance with department-approved methods; and

(b) Submitted to the state public health laboratory or another laboratory certified by the department to conduct such analyses.

(4) Turbidity monitoring.

(a) The purveyor shall equip the system's water treatment facility laboratory with a:

(i) Bench model turbidimeter; and

(ii) Continuous turbidimeter and recorder if required under WAC 246-290-664 or 246-290-694.

(b) The purveyor shall ensure that bench model and continuous turbidimeters are:

(i) Designed to meet the criteria in "standard methods"; and

(ii) Properly operated, calibrated, and maintained at all times in accordance with the manufacturer's recommendations.

(c) The purveyor shall validate continuous turbidity measurements for accuracy as follows:

(i) Calibrate turbidity equipment based upon a primary standard in the expected range of measurements; and

(ii) Verify continuous turbidimeter performance on a weekly basis, not on consecutive days, with grab sample measurements made using a properly calibrated bench model turbidimeter.

(d) When continuous turbidity monitoring equipment fails, the purveyor shall measure turbidity on grab samples collected at least every four hours while the system serves water to the public and the equipment is being repaired or replaced. The purveyor shall have continuous monitoring equipment on-line within five working days of failure.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-638, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-638, filed 3/25/93, effective 4/25/93.]

WAC 246-290-640 Determination of GWI sources. (1) Until the department has made a source GWI determination, the purveyor shall monitor in accordance with the requirements for ground water sources in WAC 246-290-300 or as directed by the department and provide follow-up in accordance with WAC 246-290-320.

(2) The purveyor, after being notified by the department that one or more of the system sources have been classified as potential GWI, may elect to seek approval from the department to modify the potential GWI source to mitigate surface water influences prior to compliance with subsection (3) of this section, and if so, shall:

(a) Complete a project report, for departmental approval, that describes the proposed source-related modifications, including the schedule for their completion and an explanation of why the source should be reclassified upon completion of the source modifications; and

(b) Demonstrate compliance, if directed by the department, with the requirements of subsection (3) of this section upon completion of the source-related modifications.

(3) The purveyor using a source identified as a potential GWI shall provide to the department all information necessary to determine whether the source is under direct surface water influence. Information shall include, but not be limited to:

(a) Site-specific source water quality data, including temperature, conductivity, and/or other appropriate parameters as determined by the department;

(b) Documentation of source construction characteristics;

(c) Documentation of hydrogeology;

(d) Distance to surface water; and

(e) Water quality results from nearby surface water(s), including temperature, conductivity, and/or other appropriate parameters as determined by the department.

(4) Upon a determination by the department that one or more potential GWI source(s) being used are in hydraulic connection to a surface water, the purveyor shall:

(a) Secure the services of a professional engineer to direct further evaluation and actions regarding the source;

(b) Provide disinfection treatment of the source in accordance with WAC 246-290-451; and

(c) Provide microscopic particulate analyses (MPA) results for review by the department based upon a sampling plan approved by the department.

(5) A purveyor notified by the department that one or more GWI sources are in use shall:

(a) Within ninety days of notification submit a project report to the department that includes an implementation schedule for compliance with the treatment techniques specified in Part 6 of this chapter;

(b) Notify consumers served by the system; and

(c) Comply with the applicable requirements of WAC 246-290-670.

(6) After completion of the requirements in subsection (3) of this section, the purveyor may modify a GWI source to mitigate direct surface influence. In such cases, the purveyor shall:

(a) Include in a project report, for submittal to the department for approval, a description of the proposed approaches and schedule for source modification; and

(b) Comply again with subsection (3) of this section upon completion of source modifications to be considered for source reclassification.

(7) The department may reevaluate a ground water source for direct surface influence, if conditions impacting source classification have changed.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-640, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-640, filed 3/25/93, effective 4/25/93.]

WAC 246-290-650 Compliance requirements for filtered systems. (1) In addition to the requirements of Parts 1 through 5 of chapter 246-290 WAC, Subpart B of Part 6 of chapter 246-290 WAC applies to purveyors of systems using surface or GWI sources and providing filtration, including:

(a) Systems with water treatment facilities that produced water served to the public before January 1, 1991;

(b) Unfiltered systems installing filtration, once the new water treatment facilities are on-line; and

(c) New systems using surface or GWI sources. For the purpose of the Part 6 chapter 246-290 WAC requirements, new systems are defined as systems first serving water to the public after December 31, 1990.

(2) The purveyor of a new system using a surface or GWI source shall comply with the requirements of Part 6 subparts A and B chapter 246-290 WAC and be subject to the treatment technique violations specified in WAC 246-290-632 beginning when the system first serves water to the public and thereafter.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-650, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-650, filed 3/25/93, effective 4/25/93.]

WAC 246-290-652 Filtration technology and design criteria for existing filtered systems. (1) The purveyor shall treat all surface and GWI sources using one of the following filtration technologies unless another technology is acceptable to the department:

(a) Conventional;

(b) Direct;

(c) Diatomaceous earth; or

(d) Slow sand.

(2) Purveyors not using one of the filtration technologies in subsection (1) of this section or not complying with the design criteria specified in WAC 246-290-676 shall submit a project report to the department that demonstrates to the department's satisfaction that the existing water treatment facility can be operated to reliably produce, by June 29, 1993, water meeting the operating and performance requirements of WAC 246-290-654 and 246-290-660, respectively. The project report shall comply with the requirements of WAC 246-290-110.

(3) The purveyor shall make the demonstration required under subsection (2) of this section using the latest twelve months of operating data, results of special studies conducted to test the performance of the water treatment facility under adverse water quality conditions or other means acceptable to the department.

(4) For water treatment facilities currently unable to meet the performance and operation requirements, the project report shall specify the modifications needed to upgrade the facility. Purveyors upgrading existing water treatment facilities shall comply with the design and reliability requirements under WAC 246-290-676 and 246-290-678, respectively.

(5) The purveyor of a new system using a surface or GWI source shall be subject to the:

(a) Design and reliability requirements under WAC 246-290-676 and 246-290-678, respectively; and

(b) Operating criteria for new water treatment facilities under WAC 246-290-654.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-652, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-652, filed 3/25/93, effective 4/25/93.]

WAC 246-290-654 Treatment criteria for filtered systems. (1) The purveyor shall operate filters such that maximum flow rates do not exceed those specified in Table 10. The purveyor may operate filters at higher flow rates, if the purveyor demonstrates to the department's satisfaction that filtration at the higher rate consistently achieves at least 99 percent (2 log) removal of *Giardia lamblia* cysts and meets the turbidity performance requirements of Table 11.

Table 10
FILTRATION OPERATION CRITERIA

FILTRATION TECHNOLOGY/MEDIA	MAXIMUM FILTRATION RATE (gpm/ft^3)
Conventional, Direct and In-Line	
Gravity Filters with Single Media	3

FILTRATION TECHNOLOGY/MEDIA	MAXIMUM FILTRATION RATE (gpm/ft^3)
Gravity Filters with Deep Bed, Dual or Mixed Media	6
Pressure Filters with Single Media	2
Pressure Filters with Deep Bed, Dual or Mixed Media	3
Slow Sand	0.1
Diatomaceous Earth	1.0

(2) The purveyor using conventional, direct or in-line filtration shall ensure that effective coagulation is in use at all times the water treatment facility produces water served to the public.

(3) The purveyor using conventional, direct, or in-line filtration shall demonstrate treatment effectiveness for *Giardia lamblia* cyst removal by one of the following methods:

(a) Turbidity reduction method where source and filtered water turbidity measurements are made in accordance with WAC 246-290-664 (2) and (3) respectively:

(i) When source turbidity is greater than or equal to 2.5 NTU, the purveyor shall achieve the turbidity performance requirements specified in WAC 246-290-660(1); or

(ii) When source turbidity is less than 2.5 NTU, the purveyor shall achieve:

(A) An eighty percent reduction in source turbidity based on an average of the daily turbidity reductions measured in a calendar month; or

(B) An average daily filtered water turbidity less than or equal to 0.1 NTU.

(b) Particle counting method. The purveyor shall:

(i) Use a particle counting protocol acceptable to the department; and

(ii) Demonstrate at a frequency acceptable to the department at least the following log reduction of particles in the size range of five to fifteen microns (*Giardia lamblia* cyst-sized particles) as applicable:

(A) 2.5 log reduction for systems using conventional filtration; or

(B) 2.0 log reduction for systems using direct or in-line filtration.

(c) Microscopic particulate analysis method. The purveyor shall:

(i) Use a protocol acceptable to the department; and

(ii) Demonstrate at a frequency acceptable to the department at least the following log reduction of *Giardia lamblia* cysts and/or *Giardia lamblia* cyst surrogate indicators as applicable:

(A) 2.5 log reduction for systems using conventional filtration; and

(B) 2.0 log reduction for systems using direct or in-line filtration.

(d) Other methods acceptable to the department.

(4) The purveyor shall ensure continuous disinfection of all water delivered to the public and shall:

(a) Maintain an adequate supply of disinfection chemicals and keep back-up system components and spare parts on hand;

(b) Develop, maintain, and post at the water treatment facility a plan detailing:

(i) How water delivered to the public will be continuously and adequately disinfected; and

(ii) The elements of an emergency notification plan to be implemented whenever the residual disinfectant concentration at entry to distribution falls below 0.2 mg/L for more than one hour.

(c) Implement such plan during an emergency affecting disinfection.

(5) Operations program.

(a) For each water treatment facility treating a surface or GWI source, the purveyor shall develop an operations program and make it available to the department for review upon request.

(b) The program shall be submitted to the department as an addendum to the purveyor's water system plan (WAC 246-290-100) or small water system management program (WAC 246-290-105).

(c) The program shall detail how the purveyor will produce optimal filtered water quality at all times the water treatment facility produces water to be served to the public.

(d) The purveyor shall operate the water treatment facility in accordance with the operations program.

(e) The operations program shall include, but not be limited to, a description of:

(i) For conventional, direct or in-line filtration, procedures used to determine and maintain optimized coagulation as demonstrated by meeting the requirements of WAC 246-290-654(3);

(ii) Procedures used to determine chemical dose rates;

(iii) How and when each unit process is operated;

(iv) Unit process equipment maintenance program;

(v) Treatment plant performance monitoring program;

(vi) Laboratory procedures;

(vii) Records;

(viii) Reliability features; and

(ix) Response plans for water treatment facility emergencies, including disinfection failure and watershed emergencies.

(f) The purveyor shall ensure the operations program is:

(i) Readily available at the water treatment facility for use by operators and for department inspection;

(ii) Consistent with department guidelines for operations procedures such as those described in department guidance on surface water treatment and water system planning; and

(iii) Updated as needed to reflect current water treatment facility operations.

(6) Pressure filters. Purveyors using pressure filters shall:

(a) Inspect and evaluate the filters, at least every six months, for conditions that would reduce their effectiveness in removing *Giardia lamblia* cysts;

(b) Maintain, and make available for department review, a written record of pressure filter inspections; and

(c) Be prepared to conduct filter inspections in the presence of a department representative, if requested.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-654, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-654, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-654, filed 3/25/93, effective 4/25/93.]

WAC 246-290-660 Filtration. (1) Turbidity performance requirements.

(a) The purveyor shall ensure that the turbidity level of representative filtered water samples:

(i) Complies with the performance standards in Table 11; and

(ii) Never exceeds 5.0 NTU.

Table 11
TURBIDITY PERFORMANCE REQUIREMENTS

Filtration Technology	Filtered water turbidity (in NTUs) shall be less than or equal to this value in at least 95% of the measurements made each calendar month
Conventional, Direct and In-line	0.50
Slow Sand	1.0
Diatomaceous Earth	1.0
Alternate Technology	as determined by the department

(b) The department may allow the turbidity of filtered water from a system using slow sand filtration to exceed 1.0 NTU, but never 5.0 NTU, if the system demonstrates to the department's satisfaction that the higher turbidity level will not endanger the health of consumers served by the system. As a condition of being allowed to produce filtered water with a turbidity exceeding 1.0 NTU, the purveyor may be required to monitor one or more parameters in addition to the parameters specified under WAC 246-290-664. The department shall notify the purveyor of the type and frequency of monitoring to be conducted.

(2) *Giardia lamblia* and virus removal credit.

(a) The department shall notify the purveyor of the removal credit granted for the system's filtration process. The department shall specify removal credit for:

(i) Existing filtration facilities based on periodic evaluations of performance and operation; and

(ii) New or modified filtration facilities based on results of pilot plant studies or full scale operation.

(b) Conventional, direct, and in-line filtration.

(i) The removal credit the department may grant to a system using conventional, direct, or in-line filtration and demonstrating effective treatment is as follows:

	Percent Removal Credit (log)	
Filtration Technology	*Giardia*	Virus
Conventional	99.7 (2.5)	99 (2.0)
Direct and in-line	99 (2.0)	90 (1.0)

(ii) A system using conventional, direct, or in-line filtration shall be considered to provide effective treatment, if the purveyor demonstrates to the satisfaction of the department that the system meets the:

(A) Turbidity performance requirements under subsection (1) of this section; and

(B) Operations requirements of WAC 246-290-654.

(iii) The department may grant a higher level of *Giardia lamblia* and virus removal credit than listed under (b)(i) of this subsection, if the purveyor demonstrates to the department's satisfaction that the higher level can be consistently achieved.

(iv) As a condition of maintaining the maximum removal credit, purveyors may be required to periodically monitor one or more parameters not routinely monitored under WAC 246-290-664. The department shall notify the purveyor of the type and frequency of monitoring to be conducted.

(v) The department shall not grant removal credit to a system using conventional, direct, or in-line filtration that:

(A) Fails to meet the minimum turbidity performance requirements under subsection (1) of this section; or

(B) Fails to meet the operating requirements under WAC 246-290-654.

(c) Slow sand filtration.

The department may grant a system using slow sand filtration 99 percent (2 log) *Giardia lamblia* cyst removal credit and 99 percent (2 log) virus removal credit, if the system meets the department design requirements under WAC 246-290-676 and meets the minimum turbidity performance requirements in subsection (1) of this section.

(d) Diatomaceous earth filtration.

The department may grant a system using diatomaceous earth filtration 99 percent (2 log) *Giardia lamblia* cyst removal credit and 90 percent (1 log) virus removal credit, if the system meets the department design requirements under WAC 246-290-676 and meets the minimum turbidity performance requirements in subsection (1) of this section.

(e) Alternate filtration technology.

The department shall grant, on a case-by-case basis, *Giardia lamblia* cyst and virus removal credit for systems using alternate filtration technology based on results of product testing acceptable to the department.

(f) The purveyor granted no removal credit shall:

(i) Provide treatment in accordance with WAC 246-290-662 (2) (d); and

(ii) Within ninety days of department notification regarding removal credit, submit an action plan to the department for review and approval. The plan shall:

(A) Detail how the purveyor plans to comply with the turbidity performance requirements in subsection (1) of this section and operating requirements of WAC 246-290-654; and

(B) Identify the proposed schedule for implementation.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-660, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-660, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-660, filed 3/25/93, effective 4/25/93.]

WAC 246-290-662 Disinfection for filtered systems.

(1) General requirements.

(a) The purveyor shall provide continuous disinfection to ensure that filtration and disinfection together achieve, at all times the system serves water to the public, at least the following:

(i) 99.9 percent (3 log) inactivation and removal of *Giardia lamblia* cysts; and

(ii) 99.99 percent (4 log) inactivation and/or removal of viruses.

(b) Where sources receive sewage discharges and/or agricultural runoff, purveyors may be required to provide greater levels of removal and inactivation of *Giardia lamblia* cysts and viruses to protect the health of consumers served by the system.

(c) Regardless of the removal credit granted for filtration, purveyors shall, at a minimum, provide continuous disinfection to achieve at least 68 percent (0.5 log) inactivation of *Giardia lamblia* cysts and 99 percent (2 log) inactivation of viruses.

(2) Establishing the level of inactivation.

(a) The department shall establish the level of disinfection (log inactivation) to be provided by the purveyor.

(b) The required level of inactivation shall be based on source quality and expected levels of *Giardia lamblia* cyst and virus removal achieved by the system's filtration process.

(c) Based on periodic reviews, the department may adjust, as necessary, the level of disinfection the purveyor shall provide to protect the health of consumers served by the system.

(d) Systems granted no *Giardia lamblia* cyst removal credit.

(i) Unless directed otherwise by the department, the purveyor of a system granted no *Giardia lamblia* cyst removal credit shall provide interim disinfection:

(A) To ensure compliance with the monthly coliform MCL under WAC 246-290-310;

(B) Achieve at least 99.9 percent (3 log) inactivation of *Giardia lamblia* cysts; and

(C) Maintain a detectable residual disinfectant concentration, or an HPC level less than 500 organisms/ml, within the distribution system in accordance with subsection (6) of this section.

(ii) The purveyor shall comply with the interim disinfection requirements until the system can demonstrate to the department's satisfaction that it complies with the operating requirements and turbidity performance requirements under WAC 246-290-654 and 246-290-660(1), respectively.

(3) Determining the level of inactivation.

(a) Unless the department has approved a reduced CT monitoring schedule for the system, each day the system serves water to the public, the purveyor, using procedures and CT values acceptable to the department such as those presented in department guidance of surface water treatment, shall determine:

(i) CTcalc values using the system's treatment parameters and calculate the total inactivation ratio achieved by disinfection; and

(ii) Whether the system's disinfection process is achieving the minimum levels of inactivation of *Giardia lamblia* cysts and viruses required by the department.

(b) The department may allow a purveyor to determine the level of inactivation using lower CT values than those specified in (a) of this subsection, provided the purveyor demonstrates to the department's satisfaction that the required levels of inactivation of *Giardia lamblia* cysts and viruses can be achieved.

(4) Determining compliance with the required level of inactivation.

(a) A purveyor shall be considered in compliance with the inactivation requirement when a total inactivation ratio equal to or greater than 1.0 is achieved.

(b) Failure to provide the required level of inactivation on more than one day in any calendar month shall be considered a treatment technique violation.

(5) Residual disinfectant concentration entering the distribution system.

(a) The purveyor shall ensure that all water entering the distribution system contains a residual disinfectant concentration, measured as free or combined chlorine, of at least 0.2 mg/L at all times the system serves water to the public; and

(b) Failure to provide a 0.2 mg/L residual at entry to distribution for more than four hours on any day shall be considered a treatment technique violation.

(6) Residual disinfectant concentration within the distribution system.

(a) The purveyor shall ensure that the residual disinfectant concentration in the distribution system, measured as total chlorine, free chlorine, combined chlorine, or chlorine dioxide, is detectable in at least ninety-five percent of the samples taken each calendar month.

(b) Water in the distribution system with an HPC less than or equal to 500 organisms/ml is considered to have a detectable residual disinfectant concentration.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-662, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-662, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-662, filed 3/25/93, effective 4/25/93.]

WAC 246-290-664 Monitoring for filtered systems. (1) Source coliform monitoring.

(a) The purveyor shall ensure that source water samples of each surface or GWI source are:

(i) Collected before the first point of disinfectant application and before coagulant chemical addition; and

(ii) Analyzed for fecal coliform density in accordance with methods acceptable to the department.

(b) At a minimum, the purveyor shall ensure source samples are collected for fecal coliform analysis at a frequency equal to ten percent of the number of routine coliform samples collected within the distribution system each month under WAC 246-290-300, or once per calendar month, whichever is greater up to a maximum of one sample per day.

(2) Source turbidity monitoring.

(a) The purveyor using conventional, direct, or in-line filtration shall measure source turbidity at least once per day on a representative sample collected before disinfection and coagulant addition.

(b) Grab sampling or continuous turbidity monitoring and recording may be used to meet the requirement specified in (a) of this subsection.

(c) Purveyors using continuous turbidity monitoring shall record continuous turbidity measurements at equal intervals, at least every four hours, in accordance with a department-approved sampling schedule.

(3) Filtered water turbidity monitoring.

(a) The purveyor shall:

(i) Continuously monitor turbidity on representative samples from each individual filter unit and of the system's combined filter effluent, prior to clearwell storage;

(ii) Record continuous turbidity measurements at equal intervals, at least every four hours, in accordance with a department-approved sampling schedule; and

(iii) Conduct monitoring in accordance with the analytical techniques under WAC 246-290-638.

(b) Purveyors using slow sand filtration or an alternate filtration technology may reduce filtered water turbidity monitoring to one grab sample per day with departmental approval. Reduced turbidity monitoring shall be allowed only where the purveyor demonstrates to the department's satisfaction that a reduction in monitoring will not endanger the health of consumers served by the water system.

(4) Monitoring the level of inactivation and removal.

(a) Each day the system is in operation, the purveyor shall determine the total level of inactivation and removal of *Giardia lamblia* cysts and viruses achieved.

(b) The purveyor shall determine the total level of inactivation and removal based on:

(i) *Giardia lamblia* cyst and virus removal credit granted by the department for filtration; and

(ii) Level of inactivation of *Giardia lamblia* cysts and viruses achieved through disinfection.

(c) At least once per day, purveyors shall monitor the following to determine the level of inactivation achieved through disinfection:

(i) Temperature of the disinfected water at each residual disinfectant concentration sampling point used for CT calculations; and

(ii) If using chlorine, pH of the disinfected water at each chlorine residual disinfectant concentration sampling point used for CT calculations.

(d) Each day during peak hourly flow (based on historical information), the purveyor shall:

(i) Determine disinfectant contact time, T, to the point at which C is measured; and

(ii) Measure the residual disinfectant concentration, C, of the water at the point for which T is calculated. The C measurement point shall be located before or at the first consumer.

(e) The department may reduce CT monitoring requirements for purveyors that demonstrate to the department's satisfaction that the required levels of inactivation are consistently exceeded. Reduced CT monitoring shall only be allowed where the purveyor demonstrates to the department's satisfaction that a reduction in monitoring will not endanger the health of consumers.

(5) Monitoring the residual disinfectant concentration entering the distribution system.

(a) Systems serving more than thirty-three hundred people per month.

(i) The purveyor shall continuously monitor and record the residual disinfectant concentration of water entering the distribution system and report the lowest value each day.

(ii) If the continuous monitoring equipment fails, the purveyor shall measure the residual disinfectant concentration on grab samples collected at least every four hours at the entry to the distribution system while the equipment is being repaired or replaced. The purveyor shall have continuous monitoring equipment back on-line within five working days following failure.

(b) Systems serving thirty-three hundred or less people per month.

(i) The purveyor shall collect grab samples or use continuous monitoring and recording to measure the residual disinfectant concentration entering the distribution system.

(ii) Purveyors of **community** systems choosing to take grab samples shall collect:

(A) Samples at the following minimum frequencies:

Population Served	Number/day
25 - 500	1
501 - 1,000	2
1,001 - 2,500	3
2,501 - 3,300	4

(B) At least one of the grab samples at peak hourly flow; and

(C) The remaining samples evenly spaced over the time the system is disinfecting water that will be delivered to the public.

(iii) Purveyors of **noncommunity** systems choosing to take grab samples shall collect samples for disinfectant residual concentration entering the distribution system as directed by the department.

(iv) When grab samples are collected and the residual disinfectant concentration at the entry to distribution falls below 0.2 mg/L, purveyors shall collect a grab sample every four hours until the residual disinfectant concentration is 0.2 mg/L or more.

(6) Monitoring residual disinfectant concentrations within the distribution system.

(a) The purveyor shall measure the residual disinfectant concentration at representative points within the distribution system on a daily basis or as otherwise approved by the department.

(b) At a minimum, the purveyor shall measure the residual disinfectant concentration within the distribution system at the same time and location that a routine or repeat coliform sample is collected in accordance with WAC 246-290-300(3) or 246-290-320(2).

(c) The purveyor may measure HPC within the distribution system in lieu of measuring the residual disinfectant concentration in accordance with this subsection.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-664, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-664, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-664, filed 3/25/93, effective 4/25/93.]

WAC 246-290-666 Reporting for filtered systems. (1) The purveyor shall notify the department, as soon as possible, but no later than the end of the next business day, when:

(a) A waterborne disease outbreak potentially attributable to the water system occurs;

(b) The turbidity of the combined filter effluent exceeds 5.0 NTU at any time;

(c) The residual disinfection concentration falls below 0.2 mg/L at the entry point to the distribution system. The purveyor shall also report whether the residual was restored to 0.2 mg/L or more within four hours; or

(d) An event occurs that may affect the ability of the water treatment facility to produce drinking water that complies with this chapter including, but not limited to:

(i) Spills of hazardous materials in the watershed; and

(ii) Treatment process failures.

(2) The purveyor shall report results of monitoring conducted in accordance with WAC 246-290-664 to the depart-

ment. Monthly report forms shall be submitted within ten days after the end of each month the system served water to the public.

(3) The purveyor shall report, at a minimum, all the information requested by the department using a department-approved form or format including:

(a) Water treatment facility operations information;

(b) Turbidity monitoring results. Continuous measurements shall be reported at equal intervals, at least every four hours, in accordance with a department-approved schedule;

(c) Disinfection monitoring information including:

(i) Level of inactivation achieved;

(ii) Residual disinfectant concentrations entering the distribution system; and

(iii) Residual disinfectant concentrations within the distribution system.

(d) Total level of removal and inactivation; and

(e) A summary of water quality complaints received from consumers served by the water system.

(4) A person certified under chapter 246-292 WAC shall complete and sign the monthly report forms required in this section.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-666, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-666, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-666, filed 3/25/93, effective 4/25/93.]

WAC 246-290-668 Watershed control. (1) The purveyor shall, to the extent possible, exercise surveillance over conditions and activities in the watershed affecting source water quality. The purveyor shall develop and implement a department-approved watershed control program.

(2) The purveyor shall ensure that an evaluation of the watershed is completed at least every six years. Watershed evaluations shall be performed such that results of the survey are included in the purveyor's water system plan in accordance with WAC 246-290-100 or small water system management program in accordance with WAC 246-290-105, whichever is applicable.

(3) A professional engineer registered in the state of Washington shall direct the conduct of the watershed evaluation and develop a watershed evaluation report.

(4) The purveyor shall submit the report to the department within sixty days of completion of the watershed evaluation.

(5) The report shall describe the watershed, characterize the watershed hydrology, and discuss the purveyor's watershed control program. The report shall also describe:

(a) Conditions/activities in the watershed that are adversely affecting source water quality;

(b) Changes in the watershed that could adversely affect source water quality that have occurred since the last watershed evaluation;

(c) The monitoring program the purveyor uses to assess the adequacy of watershed protection including an evaluation of sampling results; and

(d) Recommendations for improved watershed control.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-668, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-668, filed 3/25/93, effective 4/25/93.]

WAC 246-290-670 Compliance requirements for existing unfiltered systems installing filtration. (1) The purveyor of an existing unfiltered system shall:

(a) Install filtration within eighteen months after department notification; and

(b) Be subject to the interim compliance requirements as determined by the department and in conformance with 40 CFR 141.13 and WAC 246-290-632.

(2) The purveyor under an enforcement action or compliance agreement that is dated prior to the effective date of Part 6 of chapter 246-290 WAC, shall adhere to the compliance schedule for installation of filtration established in the departmental order or bilateral compliance agreement in lieu of the dates specified in subsection (1) of this section.

(3) The purveyor required to install filtration shall submit an action plan and schedule to the department for review and approval. The plan shall:

(a) Be submitted within ninety days of departmental notification; and

(b) Document the purveyor's plan and implementation schedule to comply with one of the following:

(i) Subparts A and B of Part 6 of chapter 246-290 WAC, if continuing to use the surface or GWI source as a permanent source and installing filtration;

(ii) Subparts A and D of Part 6 of chapter 246-290 WAC, if abandoning the surface or GWI source and purchasing completely treated water from a department-approved public water system using surface or GWI water; or

(iii) All other applicable sections of this chapter, if abandoning the surface or GWI source and developing an alternate department-approved ground water source.

(4) Between written departmental notification of the filtration requirement and installation of filtration, the purveyor shall meet:

(a) The interim disinfection requirements under WAC 246-290-672 or as otherwise directed by the department;

(b) The interim monitoring and reporting requirements under WAC 246-290-674; and

(c) All other applicable requirements of this chapter.

(5) The purveyor installing filtration shall ensure that when completed, the final treatment processes, consisting of filtration and disinfection, will comply with the requirements under WAC 246-290-660 and 246-290-662, respectively.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-670, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-670, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-670, filed 3/25/93, effective 4/25/93.]

WAC 246-290-672 Interim treatment requirements. (1) Purveyors of existing unfiltered systems installing filtration shall provide interim disinfection treatment to:

(a) Ensure compliance with the monthly coliform MCL under WAC 246-290-310;

(b) Achieve inactivation levels of *Giardia lamblia* cysts on a daily basis each month the system serves water to the public as directed by the department; and

(c) Maintain a detectable residual disinfectant concentration in the distribution system, measured as total chlorine, free chlorine, or combined chlorine in 95 percent or more of the samples taken each calendar month. Water in the distribu-

tion system with an HPC level less than or equal to 500 organisms/ml is considered to have a detectable residual disinfectant concentration.

(2) Failure to provide the required level of inactivation in subsection (1)(b) of this section on more than one day in any calendar month shall be considered a treatment technique violation.

(3) The department may require the purveyor to provide higher levels of treatment than specified in subsection (1)(b) of this section when necessary to protect the health of consumers served by the public water system.

(4) Interim treatment requirements shall be met in accordance with a schedule acceptable to the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-672, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-672, filed 3/25/93, effective 4/25/93.]

WAC 246-290-674 Interim monitoring and reporting. (1) Monitoring. Unless directed otherwise by the department, the purveyor of an existing unfiltered system installing filtration shall:

(a) Conduct interim monitoring in accordance with 40 CFR 141.22;

(b) Measure the residual disinfectant concentration within the distribution system at the same time and location that a routine or repeat sample is collected in accordance with WAC 246-290-300(3) or 246-290-320(2); and

(c) Measure residual disinfection concentrations at entry to the distribution system on a daily basis, or as directed by the department.

(2) Reporting.

(a) The purveyor installing filtration shall report to the department as soon as possible, but no later than the end of the next business day, when:

(i) A waterborne disease outbreak potentially attributable to the water system occurs;

(ii) The turbidity of water delivered to the public exceeds 5.0 NTU; or

(iii) The interim disinfection requirements under WAC 246-290-672 are not met.

(b) The purveyor shall report results of monitoring to the department. Monthly report forms shall be submitted within ten days after the end of each month the system served water to the public.

(c) The purveyor shall report, at a minimum, all the information requested by the department using a department-approved form or format including:

(i) Water quality information, including results of monitoring in accordance with WAC 246-290-300 and 246-290-320;

(ii) Disinfection monitoring information;

(iii) A summary of water quality complaints received from consumers served by the system.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-674, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-674, filed 3/25/93, effective 4/25/93.]

WAC 246-290-676 Filtration technology and design criteria. (1) General.

(a) The purveyor proposing to construct new water treatment facilities or to make additions to existing water treatment facilities for surface and GWI sources shall ensure that the facilities comply with the treatment, design, and reliability requirements of Part 6 of chapter 246-290 WAC.

(b) The purveyor shall submit an engineering report to the department describing how the treatment facilities will be designed to comply with the requirements specified in Subparts A, B, and C of Part 6 of chapter 246-290 WAC.

(2) Filtration technology.

(a) The purveyor shall select a filtration technology acceptable to the department using criteria such as those outlined in department guidance on surface water treatment. The following filtration technologies are considered acceptable:

(i) Conventional;

(ii) Direct;

(iii) Diatomaceous earth; and

(iv) Slow sand.

(b) In addition to the technologies specified in subsection (1) of this section, alternate filtration technologies may be acceptable, if the purveyor demonstrates to the department's satisfaction all of the following:

(i) Through acceptable third party testing, that system components do not leach or otherwise add substances to the finished water that would violate drinking water standards, or otherwise pose a threat to public health;

(ii) The technology's effectiveness in achieving at least 99 percent (2 log) removal of *Giardia lamblia* cysts or cyst surrogate particles. The purveyor shall further demonstrate the technology's removal capability through research conducted:

(A) By a party acceptable to the department; and

(B) In accordance with protocol and standards acceptable to the department.

(iii) Through on-site pilot plant studies or other means, that the filtration technology:

(A) In combination with disinfection treatment consistently achieves 99.9 percent (3 log) removal and inactivation of *Giardia lamblia* cysts and 99.99 percent (4 log) removal and inactivation of viruses; and

(B) Meets the applicable turbidity performance requirements as determined by the department for the specific treatment process being considered, but in no case to exceed 1.0 NTU for the finished water.

(3) Pilot studies.

(a) The purveyor shall ensure pilot studies are conducted for all proposed filtration facilities, except where waived based on engineering justification acceptable to the department.

(b) The purveyor shall obtain department approval for the pilot study plan before the pilot filter is constructed and before the pilot study is undertaken.

(c) The pilot study plan shall identify at a minimum:

(i) Pilot filter design;

(ii) Water quality and operational parameters to be monitored;

(iii) Type of data to be collected, frequency of data collection, and length of pilot study; and

(iv) Pilot plant operator qualifications.

(d) The purveyor shall ensure that the pilot study is:

(i) Conducted to simulate proposed full-scale design conditions;

(ii) Conducted over a time period that will demonstrate the effectiveness and reliability of the proposed treatment system during changes in seasonal and climatic conditions; and

(iii) Designed and operated in accordance with good engineering practices and that ANSI/NSF standards 60 and 61 are considered.

(e) When the pilot study is complete, the purveyor shall submit a project report to the department for approval in accordance with WAC 246-290-110.

(4) Design criteria.

(a) The purveyor shall ensure that water treatment facilities for surface and GWI sources are designed and constructed in accordance with good engineering practices documented in references such as those identified in WAC 246-290-200.

(b) Filtration facilities.

(i) The purveyor shall ensure that all new filtration facilities and improvements to any existing filtration facilities (excluding disinfection) are designed to achieve at least:

(A) 99 percent (2 log) removal of *Giardia lamblia* cysts; and

(B) 90 percent (1 log) removal of viruses.

(ii) The purveyor proposing to use an alternate filtration technology that does not meet the requirements of (b)(i)(B) of this subsection shall demonstrate to the department's satisfaction that the potential for viral contamination of the source is low. The purveyor shall base the demonstration on results of a watershed evaluation acceptable to the department.

(iii) The purveyor shall ensure that all new filtration facilities contain provisions for filtering to waste with appropriate measures for backflow prevention.

(c) The purveyor shall ensure that disinfection systems for new filtration facilities or improvements to existing disinfection facilities are designed to meet the requirements of WAC 246-290-662.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-676, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-676, filed 3/25/93, effective 4/25/93.]

WAC 246-290-678 Reliability for filtered systems. (1) The purveyor shall ensure that reliability features are included in all water treatment facilities used to treat surface or GWI sources.

(2) Reliability features shall include but not be limited to:

(a) Alarm devices to provide warning of treatment process failures including coagulation, filtration, and disinfection. Alarm devices shall warn individuals responsible for taking corrective action and/or provide for automatic plant shutdown until corrective action can be taken;

(b) Standby replacement equipment available to assure continuous operation and control of coagulation, clarification, filtration and disinfection processes;

(c) Multiple filter units that provide redundant capacity when filters are out of service for backwash or maintenance, except where waived based on engineering justification acceptable to the department.

(3) The department may accept alternatives to the requirements specified in subsection (2) of this section, if the purveyor demonstrates to the department's satisfaction that the proposed alternative will assure an equal degree of reliability.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-678, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-678, filed 3/25/93, effective 4/25/93.]

WAC 246-290-686 Compliance requirements for unfiltered systems. (1) The purveyor using an unfiltered surface or GWI source shall comply with:

(a) Subparts A and D of Part 6 of chapter 246-290 WAC; and

(b) All other applicable sections of this chapter.

(2) The purveyor purchasing water from a system using a surface or GWI source shall comply with:

(a) The applicable requirements of Subpart A of Part 6 of chapter 246-290 WAC;

(b) The disinfection, monitoring and reporting requirements under WAC 246-290-692 (5)(b), 246-290-694 (8)(b) and 246-290-696(4) respectively when purchasing completely treated surface or GWI water; or

(c) The treatment technique, monitoring and reporting requirements as directed by the department when the purveyor is purchasing incompletely treated surface or GWI water.

(3) The purveyor using an unfiltered GWI source shall be subject to the effective dates, compliance requirements, and violations specified in Table 12.

Table 12
COMPLIANCE REQUIREMENTS FOR SYSTEMS USING UNFILTERED GWI SOURCES

REQUIREMENTS BECOME EFFECTIVE	APPLICABLE PART 6 REQUIREMENTS	VIOLATION TYPE	
		Turbidity MCL	Treatment Technique
Six months after GWI determination	Only Analytical, Monitoring and Reporting Requirements (WAC 246-290-638, 246-290-694 and 246-290-696 respectively)	Refer to 40 CFR 141.13 and 141.22	Not in effect yet
Eighteen months after GWI determination	Subparts A and D	No longer in effect	In effect as defined in WAC 246-290-632

(4) Purveyors of **community** systems using surface water sources had the option to remain unfiltered if they demonstrated compliance with the department's criteria to remain unfiltered by December 30, 1991.

(5) A purveyor that served water to the public before January 1, 1991, using a GWI source may have that source remain unfiltered, if, within eighteen months of GWI determination, the purveyor complies with Part 6 of this chapter and, the source water quality and site-specific conditions under WAC 246-290-690 or 246-290-691 as demonstrated through monitoring conducted in accordance with WAC 246-290-694.

(6) The purveyor with sources that are approved to remain unfiltered shall comply with the source water quality

and site-specific conditions under WAC 246-290-690 or 246-290-691 as demonstrated through monitoring conducted in accordance with WAC 246-290-694.

(7) The purveyor shall install filtration when the system fails to meet one or more of the source water quality and site-specific conditions under WAC 246-290-690 and 246-290-691, or the department determines that installation of filtration is necessary to protect the health of consumers served by the water system.

(8) The purveyor, in response to a written notification by the department, shall install filtration within eighteen months.

(9) The purveyor may comply with the requirements to install filtration by:

(a) Constructing a water treatment facility that is designed, operated, and maintained in accordance with Subparts A, B, and C of Part 6 of this chapter;

(b) Satisfying the source water quality and site-specific criteria specified in WAC 246-290-691 and constructing treatment facilities that are designed, operated, and maintained to provide a limited alternative to filtration in accordance with WAC 246-290-692; or

(c) Abandoning the surface water or GWI source, and:

(i) Developing an alternate, department-approved ground water source; or

(ii) Purchasing completely treated water from a department-approved public water system.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-686, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-686, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-686, filed 3/25/93, effective 4/25/93.]

WAC 246-290-690 Criteria to remain unfiltered. (1) For a system not using the "limited alternative to filtration" option to remain unfiltered, the purveyor using a surface water or GWI source shall meet the source water quality and site-specific conditions under this section, as demonstrated through monitoring conducted in accordance with WAC 246-290-694.

(2) Source water quality conditions necessary to remain unfiltered.

(a) Coliform limits.

(i) The purveyor shall ensure that representative source water samples taken before the first point of disinfection have a fecal coliform density less than or equal to 20/100 ml in ninety percent or more of all samples taken during the six previous calendar months the system served water to the public. Samples collected on days when source water turbidity exceeds 1.0 NTU shall be included when determining compliance with this requirement.

(ii) The purveyor shall submit a written report to the department if no source fecal coliform data has been submitted for days when source turbidity exceeded 1.0 NTU. The report shall document why sample results are not available and shall be submitted with the routine monitoring reports for the month in which the sample results are not available.

(b) Turbidity limits.

(i) The purveyor shall ensure that the turbidity level in representative source water samples taken before primary disinfection does not exceed 5.0 NTU.

(ii) A system failing to meet the turbidity requirements in (b)(i) of this subsection may remain unfiltered, if:

(A) The purveyor demonstrates to the department's satisfaction that the most recent turbidity event was caused by unusual and unpredictable circumstances; and

(B) Including the most recent turbidity event, there have not been more than:

(I) Two turbidity events in the twelve previous calendar months the system served water to the public; or

(II) Five turbidity events in the one-hundred-twenty previous calendar months the system served water to the public.

(iii) The purveyor of a system experiencing a turbidity event shall submit a written report to the department documenting why the turbidity event(s) occurred. The purveyor shall submit the report with the routine monitoring reports for the month in which the turbidity event(s) occurred.

(iv) The purveyor of a system with alternate, department-approved sources or sufficient treated water storage may avoid a turbidity event by implementing operational adjustments to prevent water with a turbidity exceeding 5.0 NTU from being delivered to consumers.

(v) When an alternate source or treated water storage is used during periods when the turbidity of the surface or GWI source exceeds 5.0 NTU, the purveyor shall not put the surface or GWI source back on-line, until the source water turbidity is 5.0 NTU or less.

(3) Site-specific conditions to remain unfiltered.

(a) Level of inactivation.

(i) The purveyor shall ensure that the *Giardia lamblia* cyst and virus inactivation levels required under WAC 246-290-692(1) are met in at least eleven of the twelve previous calendar months that the system served water to the public.

(ii) A system failing to meet the inactivation requirements during two of the twelve previous calendar months that the system served water to the public may remain unfiltered, if the purveyor demonstrates to the department's satisfaction that at least one of the failures was caused by unusual and unpredictable circumstances.

(iii) To make such a demonstration, the purveyor shall submit to the department a written report documenting the reasons for the failure. The purveyor shall submit the report with the routine monitoring reports for the month in which the failure occurred.

(b) Redundant disinfection components or automatic shut-off.

The purveyor shall ensure that the requirement for redundant disinfection system components or automatic shut-off of water to the distribution system under WAC 246-290-692(3) is met at all times the system serves water to the public.

(c) Disinfectant residual entering the distribution system.

(i) The purveyor shall ensure that the requirement for having a residual entering the distribution system under WAC 246-290-692(4) is met at all times the system serves water to the public.

(ii) A system failing to meet the disinfection requirement under (c)(i) of this subsection may remain unfiltered, if the purveyor demonstrates to the department's satisfaction that the failure was caused by unusual and unpredictable circumstances.

(iii) To make such a demonstration, the purveyor shall submit to the department a written report documenting the reasons for the failure. The purveyor shall submit the report with the routine monitoring reports for the month in which the failure occurred.

(d) Disinfectant residuals within the distribution system.

(i) The purveyor shall ensure that the requirement for maintaining a residual within the distribution system under WAC 246-290-692(5) is met on an ongoing basis.

(ii) A system failing to meet the disinfection requirements under (d)(i) of this subsection may remain unfiltered, if the purveyor demonstrates to the department's satisfaction that the failure was caused by something other than a deficiency in source water treatment.

(iii) To make such a demonstration, the purveyor shall submit to the department a written report documenting the reasons for the failure. The purveyor shall submit the report with the routine monitoring reports for the month in which the failure occurred.

(e) Watershed control.

(i) The purveyor shall develop and implement a department-approved watershed control program.

(ii) The purveyor shall monitor, limit, and control all facilities and activities in the watershed affecting source quality to preclude degradation of the physical, chemical, microbiological (including viral), and radiological quality of the source. The purveyor shall demonstrate, through ownership and/or written agreements acceptable to the department, control of all human activities that may adversely impact source quality.

(iii) At a minimum, the purveyor's watershed control program shall:

(A) Characterize the watershed hydrology and land ownership;

(B) Identify watershed characteristics and activities that may adversely affect source water quality; and

(C) Monitor the occurrence of activities that may adversely affect source water quality.

(iv) If the department determines significant changes have occurred in the watershed, the purveyor shall submit, within ninety days of notification, an updated watershed control program to the department for review and approval.

(v) The department may require an unfiltered system to conduct additional monitoring to demonstrate the adequacy of the watershed control program.

(vi) A purveyor shall be considered out of compliance when failing to:

(A) Have a department-approved watershed control program;

(B) Implement the watershed control program to the satisfaction of the department; or

(C) Conduct additional monitoring as directed by the department.

(f) On-site inspections.

(i) The department shall conduct on-site inspections to assess watershed control and disinfection treatment.

(ii) The department shall conduct annual inspections unless more frequent inspections are deemed necessary to protect the health of consumers served by the system.

(iii) For a system to remain unfiltered, the on-site inspection shall indicate to the department's satisfaction that the watershed control program and disinfection treatment comply with (e) of this subsection and WAC 246-290-692, respectively.

(iv) The purveyor with unsatisfactory on-site inspection results shall take action as directed by the department in accordance with a department-established schedule.

(g) Waterborne disease outbreak.

(i) To remain unfiltered, a system shall not have been identified by the department as the cause of a waterborne disease outbreak attributable to a failure in treatment of the surface or GWI source.

(ii) The purveyor of a system identified by the department as the cause of a waterborne disease outbreak may remain unfiltered, if the purveyor demonstrates to the department's satisfaction that system facilities and/or operations have been sufficiently modified to prevent another waterborne disease outbreak.

(h) Total coliform MCL.

(i) For a system to remain unfiltered, the purveyor shall ensure that the MCL for total coliform under WAC 246-290-310 is met in at least eleven of the twelve previous calendar months the system served water to the public.

(ii) A system failing to meet the criteria in (i) of this subsection, may remain unfiltered, if the purveyor demonstrates to the department's satisfaction that the total coliform MCL violations were not caused by a deficiency in source water treatment.

(iii) The department shall determine the adequacy of source water treatment based on results of total coliform monitoring at the entry to the distribution system in accordance with WAC 246-290-694(3).

(i) THM MCL and monitoring.

For a system to remain unfiltered, the purveyor shall comply with the THM monitoring and MCL requirements under WAC 246-290-300 and 246-290-310, respectively.

(j) Laboratory services.

(i) For a system to remain unfiltered, the purveyor shall retain the services of the public health laboratory or another laboratory certified by the department to analyze samples for total and fecal coliform. Laboratory services shall be available on an as needed basis, seven days a week, including holidays. The purveyor shall identify in the annual comprehensive report required under WAC 246-290-696 the certified laboratory providing these services.

(ii) The department may waive this requirement, if the purveyor demonstrates to the department's satisfaction that an alternate, department-approved source is used when the turbidity of the surface or GWI source exceeds 1.0 NTU.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-690, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 93-08-011 (Order 352B), § 246-290-690, filed 3/25/93, effective 4/25/93.]

WAC 246-290-691 Criteria for unfiltered systems with a "limited alternative to filtration" to remain unfiltered. (1) For a system providing a limited alternative to filtration, the purveyor using a surface water or GWI source shall meet the source quality and site-specific conditions under this section.

(2) Source water turbidity requirements.

(a) The purveyor shall ensure that the turbidity level in representative source water samples taken before primary disinfection does not exceed 5.0 NTU.

(b) A system with more than two turbidity events in the twelve previous calendar months the water was served to the public or more than five turbidity events in the one hundred twenty previous calendar months the water was served to the public shall expand the scope of its next annual comprehensive report required under WAC 246-290-696(6) to include:

(i) A description of the events;

(ii) A summary of previous turbidity events;

(iii) A proposed plan of corrective action; and

(iv) A schedule for implementing the action plan.

(3) Site-specific requirements.

(a) Level of inactivation.

(i) The purveyor shall ensure that the removal and/or inactivation levels required under WAC 246-290-630(11) are met in at least eleven of the twelve previous calendar months that the system served water to the public.

(ii) A system failing to meet the inactivation requirements in (a)(i) of this subsection in two or more months of the previous twelve calendar months the system served water to the public shall expand the scope of its annual comprehensive report required under WAC 246-290-696(6) to include:

(A) A description of the failure(s);

(B) A summary of previous inactivation failures;

(C) A proposed plan of corrective action; and

(D) A schedule for implementing the action plan.

(b) Watershed control.

(i) The watershed must not be allowed to be inhabited, except for those designated individuals and for those periods of time each year that would be directly associated with the protection of the watershed.

(ii) The purveyor shall develop and implement a department-approved watershed control program.

(iii) The purveyor shall monitor, limit, and control all facilities and activities in the watershed affecting source quality to preclude degradation of the physical, chemical, microbiological (including viral), and radiological quality of the source. The purveyor shall demonstrate, through ownership and/or written agreements acceptable to the department, control of all human activities that may adversely impact source quality.

(iv) At a minimum, the purveyor's watershed control program shall:

(A) Characterize the watershed hydrology and land ownership;

(B) Identify watershed characteristics and activities that may adversely affect source water quality; and

(C) Monitor the occurrence of activities that may adversely affect source water quality.

(v) If the department determines significant changes have occurred in the watershed, the purveyor shall submit, within ninety days of notification, an updated watershed control program to the department for review and approval.

(vi) The purveyor may be required to conduct additional monitoring to demonstrate the adequacy of the watershed control program.

(vii) A purveyor shall be considered out of compliance when failing to:

(A) Have a department-approved watershed control program;

(B) Implement the watershed control program to the satisfaction of the department;

(C) Conduct additional monitoring as directed by the department; or

(D) Prevent the human inhabitation of the watershed, except during the periods of time when conducting watershed protection activities as provided in (b)(i) of this subsection.

(c) On-site inspections.

(i) The purveyor shall submit to on-site inspections by the department to assess watershed control and disinfection treatment.

(ii) The purveyor shall submit to annual inspections by the department unless more frequent inspections are deemed necessary to protect the health of consumers served by the system.

(iii) The purveyor with unsatisfactory on-site inspection results shall take action as directed by the department in accordance with a department-established schedule.

(d) Waterborne disease outbreak.

(i) The system shall not be identified by the department as the cause of a waterborne disease outbreak attributable to a failure in treatment of the surface or GWI source.

(ii) A system identified by the department as the cause of a waterborne disease in (d)(i) of this subsection shall expand the scope of its annual comprehensive report required under WAC 246-290-696(6) to include:

(A) A description of the outbreak;

(B) A summary of previous waterborne disease outbreaks attributed to the system;

(C) A proposed plan of corrective action; and

(D) A schedule for implementing the action plan.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-691, filed 3/9/99, effective 4/9/99.]

WAC 246-290-692 Disinfection for unfiltered systems. (1) General requirements.

(a) The purveyor without a limited alternative to filtration shall provide continuous disinfection treatment to ensure at least 99.9 percent (3 log) inactivation of *Giardia lamblia* cysts and 99.99 percent (4 log) inactivation of viruses at all times the system serves water to the public.

(b) The purveyor with a limited alternative to filtration shall meet the treatment requirements in WAC 246-290-630(11) at all times the system serves water to the public.

(c) The purveyor may be required to provide greater levels of inactivation of *Giardia lamblia* cysts, other pathogenic microorganisms of public health concern, and viruses to protect the health of consumers.

(d) Failure to meet the inactivation level requirements of WAC 246-290-690 (3)(a) or 246-290-691 (3)(a) shall be considered a violation.

(2) Determining the level of inactivation.

(a) Each day the system without a limited alternative to filtration serves water to the public, the purveyor, using procedures and $CT_{99.9}$ values specified in 40 CFR 141.74, Vol.

54, No. 124, (published June 29, 1989, and copies of which are available from the department), shall determine:

(i) CT values using the system's treatment parameters and calculate the total inactivation ratio achieved by disinfection; and

(ii) Whether the system's disinfection treatment process is achieving the minimum levels of inactivation of *Giardia lamblia* cysts and viruses required by the department. For purposes of determining compliance with the inactivation requirements specified in subsection (1) of this section, no credit shall be granted for disinfection applied to a source water with a turbidity greater than 5.0 NTU.

(b) Each day the system with a limited alternative to filtration serves water to the public, the purveyor, using appropriate guidance, shall determine:

(i) CT values using the system's treatment parameters and calculate the total inactivation ratio achieved by disinfection; and

(ii) Whether the system's treatment process is achieving the minimum levels of inactivation of *Giardia lamblia* cysts, viruses, or other pathogenic organisms of health concern that would be greater than what would be expected from the combination of filtration plus chlorine disinfection.

(c) The purveyor shall be considered in compliance with the daily inactivation requirement when a total inactivation ratio equal to or greater than 1.0 is achieved.

(d) The purveyor of a system using a disinfectant or combination of disinfectants may use CT values lower than those specified in (a) of this subsection, if the purveyor demonstrates to the department's satisfaction that the required levels of inactivation of *Giardia lamblia* cysts, viruses, and, if providing a limited alternative to filtration, any other pathogenic organisms of public health concern, can be achieved using the lower CT values.

(e) The purveyor of a system using preformed chloramines or adding ammonia to the water before chlorine shall demonstrate to the department's satisfaction that the system achieves at least 99.99 percent (4 log) inactivation of viruses.

(3) The purveyor using either unfiltered or "limited alternative to filtration" treated sources shall ensure that disinfection facilities provide either:

(a) Redundant components, including an auxiliary power supply with automatic start-up and alarm, to ensure continuous disinfection. Redundancy shall ensure that both the minimum inactivation requirements and the requirement for a 0.2 mg/L residual disinfectant concentration at entry to the distribution system are met at all times water is delivered to the distribution system; or

(b) Automatic shut-off of delivery of water to the distribution system when the residual disinfectant concentration in the water is less than 0.2 mg/L. Automatic shut-off shall be allowed only in systems where the purveyor demonstrates to the department's satisfaction that automatic shutoff will not endanger health or interfere with fire protection.

(4) Disinfectant residual entering the distribution system.

(a) The purveyor shall ensure that water entering the distribution system contains a residual disinfectant concentration, measured as free or combined chlorine, of at least 0.2 mg/L at all times the system serves water to the public; and

(b) Failure to provide a 0.2 mg/L residual at entry to distribution for more than four hours on any day shall be considered a treatment technique violation.

(5) Disinfectant residuals within the distribution system.

(a) The purveyor shall ensure that the residual disinfectant concentration in the distribution system, measured as total chlorine, free chlorine, combined chlorine, or chlorine dioxide, is detectable in at least ninety-five percent of the samples taken each calendar month.

(b) The purveyor of a system that purchases completely treated surface or GWI water as determined by the department shall comply with the requirements specified in (a) of this subsection.

(c) Water in the distribution system with an HPC level less than or equal to 500 organisms/ml is considered to have a detectable residual disinfectant concentration.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-692, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-692, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-692, filed 3/25/93, effective 4/25/93.]

WAC 246-290-694 Monitoring for unfiltered systems. (1) Source coliform monitoring for systems without a limited alternative to filtration.

(a) The purveyor shall ensure that source water samples of each surface or GWI source are representative and:

(i) Collected before the first point of disinfectant application; and

(ii) Analyzed for fecal coliform density in accordance with methods acceptable to the department.

(b) The purveyor shall ensure source samples are collected for fecal coliform analysis each week the system serves water to the public based on the following schedule:

Population Served			Minimum Number/week*
25	-	500	1
501	-	3,300	2
3,301	-	10,000	3
10,001	-	25,000	4
>25,000			5

*Must be taken on separate days.

(c) Each day the system serves water to the public and the turbidity of the source water exceeds 1.0 NTU, the purveyor shall ensure one representative source water sample is collected before the first point of disinfectant application and analyzed for fecal coliform density. This sample shall count toward the weekly source coliform sampling requirement.

(d) A purveyor shall not be considered in violation of (c) of this subsection, if the purveyor demonstrates to the department's satisfaction that, for valid logistical reasons outside the purveyor's control, the additional fecal coliform sample could not be analyzed within a time frame acceptable to the department.

(2) Source coliform monitoring for systems with a limited alternative to filtration.

(a) The purveyor shall ensure that source water samples of each surface or GWI source are:

(i) Collected before the first point of primary disinfection; and

(ii) Analyzed for fecal coliform density in accordance with methods acceptable to the department.

(b) At a minimum, the purveyor shall ensure source samples are collected for fecal coliform analysis at a frequency equal to ten percent the number of routine coliform samples collected within the distribution system each month under WAC 246-290-300, or once per calendar month, whichever is greater, up to a maximum of one sample per day.

(3) Coliform monitoring at entry to distribution for systems without a limited alternative to filtration.

(a) The purveyor shall collect and have analyzed one coliform sample at the entry point to the distribution system each day that a routine or repeat coliform sample is collected within the distribution system under WAC 246-290-300(3) or 246-290-320(2), respectively.

(b) The purveyor shall use the results of the coliform monitoring at entry to distribution along with inactivation ratio monitoring results to demonstrate the adequacy of source treatment.

(4) Source turbidity monitoring for systems without a limited alternative to filtration.

(a) The purveyor shall continuously monitor and record turbidity:

(i) On representative source water samples before the first point of primary disinfectant application; and

(ii) In accordance with the analytical techniques under WAC 246-290-638.

(b) If source water turbidity is not the same as the turbidity of water delivered to consumers, the purveyor shall continuously monitor and record turbidity of water delivered.

(5) Source turbidity monitoring for systems with a limited alternative to filtration. The purveyor shall:

(a) Continuously monitor turbidity on representative source samples before the first point of primary disinfection application;

(b) Record continuous turbidity measurements at equal intervals, of at least four hours, in accordance with a department-approved sampling schedule; and

(c) Conduct monitoring in accordance with the analytical techniques under WAC 246-290-638.

(6) Monitoring the level of inactivation.

(a) Each day the system is in operation, the purveyor shall determine the total level of inactivation of *Giardia lamblia* cysts, viruses, and, if providing a limited alternative to filtration, any other pathogenic organisms of health concern, achieved through disinfection.

(b) At least once per day, the purveyor shall monitor the following parameters to determine the total inactivation ratio achieved through disinfection:

(i) Temperature of the disinfected water at each residual disinfectant concentration sampling point used for CT calculations; and

(ii) If using chlorine, pH of the disinfected water at each chlorine residual disinfectant concentration sampling point used for CT calculations.

(c) Each day during peak hourly flow, the purveyor shall:

(i) Determine disinfectant contact time, T, to the point at which C is measured; and

(ii) Measure the residual disinfectant concentration, C, of the water at the point for which T is calculated. The C measurement point must be before or at the first consumer.

(7) Monitoring the residual disinfectant concentration entering the distribution system for either unfiltered systems, or systems using a limited alternative to filtration.

(a) Systems serving more than thirty-three hundred people.

(i) The purveyor shall continuously monitor and record the residual disinfectant concentration of water entering the distribution system and report the lowest value each day.

(ii) If the continuous monitoring equipment fails, the purveyor shall measure the residual disinfectant concentration on grab samples collected at least every four hours at the entry to the distribution system while the equipment is being repaired or replaced. The purveyor shall have continuous monitoring equipment back on-line within five working days following failure.

(b) Systems serving thirty-three hundred or less people.

(i) The purveyor shall collect grab samples or use continuous monitoring and recording to measure the residual disinfectant concentration entering the distribution system.

(ii) A purveyor choosing to take grab samples shall collect:

(A) Samples at the following minimum frequencies:

Population Served			Number/day
25	-	500	1
501	-	1,000	2
1,001	-	2,500	3
2,501	-	3,300	4

(B) At least one of the grab samples at peak hourly flow based on historical flows for the system; and

(C) The remaining sample or samples at intervals evenly spaced over the time the system is disinfecting water that will be delivered to the public.

(iii) When grab samples are collected and the residual disinfectant concentration at the entry to distribution falls below 0.2 mg/L, the purveyor shall collect a grab sample every four hours until the residual disinfectant concentration is 0.2 mg/L or more.

(8) Monitoring residual disinfectant concentration within the distribution system for either unfiltration systems, or systems using a limited alternative to filtration.

(a) The purveyor shall measure the residual disinfectant concentration within the distribution system at the same time and location that a routine or repeat coliform sample is collected in accordance with WAC 246-290-300(3) or 246-290-320(2) or once per day, whichever is greater.

(b) The purveyor of a system that purchases completely treated surface or GWI water as determined by the department shall comply with the requirements of (a) of this subsection or as otherwise directed by the department under WAC 246-290-300 (2)(c). At a minimum, the purveyor shall measure the residual disinfectant concentration within the distribution system at the same time and location that a routine or repeat coliform sample is collected in accordance with WAC 246-290-300(3) or 246-290-320(2).

(c) The purveyor may measure HPC within the distribution system in lieu of measuring the residual disinfectant concentration in accordance with this subsection.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-694, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-694, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-694, filed 3/25/93, effective 4/25/93.]

WAC 246-290-696 Reporting for unfiltered systems. (1) The purveyor shall report to the department as soon as possible, but no later than the end of the next business day, when:

(a) A waterborne disease outbreak potentially attributable to the water system occurs;

(b) The turbidity of water delivered to the public exceeds 5.0 NTU;

(c) The minimum level of inactivation required by the department is not met;

(d) The residual disinfectant concentration falls below 0.2 mg/L at the entry point to the distribution system. The purveyor shall also report whether the residual was restored to 0.2 mg/L or more within four hours; or

(e) The surface or GWI source is taken off-line due to an emergency.

(2) The purveyor shall report results of monitoring conducted in accordance with WAC 246-290-694 to the department. Monthly report forms shall be submitted within ten days after the end of each month the system served water to the public.

(3) The purveyor shall report, at a minimum, all the information requested by the department using a department-approved form or format including:

(a) Water quality information, including the results of both:

(i) Source coliform monitoring; and

(ii) Source turbidity monitoring.

(b) Disinfection monitoring information, including:

(i) Level of inactivation achieved;

(ii) Residual disinfectant concentrations entering the distribution system; and

(iii) Residual disinfectant concentrations within the distribution system.

(c) A summary of water quality complaints received from consumers served by the water system.

(4) The purveyor of a system that purchases completely treated water shall:

(a) Report results of distribution system residual disinfectant concentration monitoring to the department using department-approved forms or format; and

(b) Submit forms to the department in accordance with subsection (2) of this section or as otherwise directed by the department.

(5) A person certified under chapter 246-292 WAC shall complete and sign the monthly report forms required in this section.

(6) Beginning in 1992, by October 10th of each year, the purveyor shall submit to the department an annual comprehensive report that summarizes the:

(a) Effectiveness of the watershed control program and identifies, at a minimum, the following:

(i) Activities in the watershed that are adversely affecting source water quality;

(ii) Changes in the watershed that have occurred within the previous year that could adversely affect source water quality;

(iii) Activities expected to occur in the watershed in the future and how the activities will be monitored and controlled;

(iv) The monitoring program the purveyor uses to assess the adequacy of watershed protection including an evaluation of sampling results; and

(v) Special concerns about the watershed and how the concerns are being addressed;

(b) System's compliance with the criteria to remain unfiltered under WAC 246-290-690, or, when applicable, the criteria required if the system provides a limited alternative to filtration under WAC 246-290-691; and

(c) Significant changes in system design and/or operation that have occurred within the previous year that impact the ability of the system to comply with the criteria to remain unfiltered, or, if applicable, the ability of the system to provide a limited alternative to filtration in accordance with WAC 246-290-692.

(7) The purveyor of a system attempting to remain unfiltered or to remain with a limited alternative to filtration shall submit a *Filtration Decision Report* at the request of the department. The report shall:

(a) Provide the information by which the department may determine whether a system continues to meet the criteria to remain unfiltered or, if applicable, the criteria allowing the provision of a limited alternative to filtration; and

(b) Be submitted on a schedule as specified by the department.

[Statutory Authority: RCW 43.02.050. 99-07-021, § 246-290-696, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 43.20.050. 94-14-001, § 246-290-696, filed 6/22/94, effective 7/23/94; 93-08-011 (Order 352B), § 246-290-696, filed 3/25/93, effective 4/25/93.]

WAC 246-290-990 Water system evaluation and project review and approval fees. (1) The fees for the review and approval of water system plans, project reports, construction documents, existing systems, and related evaluations required under chapters 246-290, 246-291, 246-293, and 246-295 WAC shall be as follows:

(a) Water system plans required under WAC 246-290-100, 246-290-105, 246-291-140, 246-293-220, 246-293-230, and 246-294-060.

Project Type	Group B	Group A <100 Services	Group A 100 to 500 Services	Group A 501 to 999 Services	Group A 1,000 to 9,999 Services	Group A 10,000 or more Services
Water system plan (New and Updated)	$120	$425	$1,039	$1,964	$3,191	$4,723
Minor water system plan alteration	$29	$101	$255	$489	$793	$1,163

(b) Satellite management agency (SMA) plans for Group A and Group B water systems required under WAC 246-295-040.

Project Type	Total Active or Approved Services <100 Services	100 to 500 Services	501 to 999 Services	1,000 to 9,999 Services	10,000 or more Services
SMA plan for ownership (New and Updated)	$425	$1,039	$1,964	$3,191	$4,723
SMA approval amendment	$89 per hour or appropriate fee from category above, whichever is less				
SMA plan for operation only (New and Updated)	$1,039	$1,039	$1,039	$1,039	$1,039

Note: SMAs owning water systems and submitting planning documents to the department for review shall be charged only the SMA fee.

(c) New plan elements required under WAC 246-290-100, 246-290-105, 246-290-125, 246-290-132, 246-290-135, 246-290-691, and 246-291-140 including:

(i) Conservation; and

(ii) Wellhead protection, shall be reviewed separately by the department and the fee assessed shall reflect the time spent for this review and shall be calculated based on eighty-nine dollars per hour. After the initial submittal, updated information shall be reviewed as part of the updated water system plan and the review fee shall be included in the applicable updated plan review fee listed under (a) or (b) of this subsection.

(d) Project reports required under WAC 246-290-110 and design reports required under WAC 246-291-120.

Project Type	Group B	Group A <100 Services	Group A 100 to 500 Services	Group A 501 to 999 Services	Group A 1,000 to 9,999 Services	Group A 10,000 or more Services
All types of filtration or other complex treatment processes	$301	$612	$951	$1,378	$1,899	$2,518
Chemical addition only, such as ion exchange, hypochlorination, or fluoridation	$89	$178	$301	$454	$641	$858
Complete water system (an additional fee shall be assessed for review of treatment facility, if any)	$178	$425	$671	$981	$1,349	$1,777
System modifications requiring a detailed evaluation to determine whether the system, as modified, will comply with regulations (an additional fee shall be assessed for review of treatment facility, if any)	$120	$301	$489	$735	$1,039	$1,402

Note: In accordance with WAC 246-290-125, project reports are not required for minor projects that are described in sufficient detail in an approved water system plan, and have been reviewed as part of the process for approving the water system plan.

(e) Special reports or plans required under WAC 246-290-230, 246-290-235, 246-290-250, 246-290-470, 246-290-636, 246-290-640, 246-290-654, 246-290-676, 246-291-230 including:

(i) Corrosion control recommendation report;

(ii) Corrosion control study;

(iii) Plan to cover uncovered reservoirs;

(iv) Predesign study;

(v) Uncovered reservoir plan of operation;

(vi) Tracer study plan;

(vii) Surface water or GWI treatment facility operations plan;

(viii) Filtration pilot study; or

(ix) GWI determination reports, shall be reviewed by the department and the fee assessed shall reflect the time spent for this review and shall be calculated based on eighty-nine dollars per hour.

(f) Construction documents required under WAC 246-290-120 and design reports required under WAC 246-291-120.

Project Type	Group B	Group A <100 Services	Group A 100 to 500 Services	Group A 501 to 999 Services	Group A 1,000 to 9,999 Services	Group A 10,000 or more Services
All types of filtration or other complex treatment processes	$301	$612	$951	$1,378	$1,899	$2,518
Chemical addition only, such as ion exchange, hypochlorination, or fluoridation	$89	$178	$301	$454	$641	$858
Complete new water system except treatment (an additional fee shall be assessed for review of treatment facility, if any)	$243	$547	$793	$1,103	$1,473	$1,899
New source only (an additional fee shall be assessed for review of treatment facility, if any)	$178	$331	$454	$612	$793	$1,010
One or more of the following submitted as a package and not requiring a detailed evaluation as determined by the department: Water line installation, booster pump station, modifications to source pumping, piping-valving, controls or storage reservoir (an additional fee shall be assessed for review of treatment facility, if any)	$120	$209	$331	$489	$671	$887
Documents submitted for projects such as water line installation, booster pump stations, modifications to source pumping, piping/valving, controls or storage reservoirs as determined by the department where such projects:						
Comply with design standards established by the department;						
Are prepared by a professional engineer in accordance with WAC 246-290-040; and						
Do not require a detailed evaluation by the department.	$57	$104	$173	$243	$337	$443

(g) Existing system approval required under WAC 246-290-140 and 246-291-130. For the purpose of this subsection the department shall determine whether a system is expanding or nonexpanding.

Project Type	Group B	Group A <100 Services	Group A 100 to 500 Services	Group A 501 to 999 Services	Group A 1,000 to 9,999 Services	Group A 10,000 or more Services
NONEXPANDING system not requiring a detailed evaluation by the department	$232	$465	$700	$934	$1,168	$1,402
NONEXPANDING system requiring a detailed evaluation as determined by the department	$349	$700	$1,060	$1,402	$1,753	$2,104
EXPANDING system not requiring a detailed evaluation by the department	$465	$934	$1,402	$1,870	$2,338	$2,805
EXPANDING system requiring a detailed evaluation as determined by the department	$583	$1,168	$1,753	$2,338	$2,922	$3,507

(h) Monitoring waivers requested under WAC 246-290-300.

Project Type	Group B	Group A <100 Services	Group A 100 to 500 Services	Group A 501 to 999 Services	Group A 1,000 to 9,999 Services	Group A 10,000 or more Services
Inorganic chemical monitoring waiver	Not applicable	$80 per source	$110 per source	$139 per source	$168 per source	$197 per source
Organic chemical monitoring waiver	Not applicable	$144 per source	$202 per source	$262 per source	$320 per source	$378 per source
Use waiver	Not applicable	$173 per source	$232 per source	$296 per source	$349 per source	$407 per source
Area wide waiver renewal	Not applicable	$173 per source	$214 per source	$255 per source	$296 per source	$326 per source
Inorganic chemical monitoring waiver renewal	Not applicable	$44 per source	$57 per source	$68 per source	$80 per source	$91 per source
Organic chemical monitoring waiver renewal	Not applicable	$86 per source	$120 per source	$157 per source	$191 per source	$226 per source
Use waiver renewal	Not applicable	$120 per source	$162 per source	$202 per source	$243 per source	$285 per source
Coliform monitoring waiver including departmental inspection requested by purveyor	Not applicable	$367	$454	$577	$735	Not applicable
Coliform monitoring waiver with third-party inspection report	Not applicable	$115	$115	$115	$115	Not applicable

(i) Other evaluations and approvals. As applicable, these fees will be charged in addition to the basic fees assessed under (a) through (h) of this subsection.

Project Type	Group B	Group A <100 Services	Group A 100 to 500 Services	Group A 501 to 999 Services	Group A 1,000 to 9,999 Services	Group A 10,000 or more Services
Well-site evaluation and approval including the site inspection and hydrogeologic information review.	$178	$267	$315	$390	$489	$612
Regulatory monitoring plan[1]	No plan required	$173	$232	$291	$349	$407
Unfiltered system annual comprehensive report	Not applicable	$349	$583	$817	$1,051	$1,284

Project Type	Group B	Group A <100 Services	Group A 100 to 500 Services	Group A 501 to 999 Services	Group A 1,000 to 9,999 Services	Group A 10,000 or more Services
1A comprehensive document containing coliform, inorganic chemical and organic chemical monitoring plans in accordance with WAC 246-290-300.						
Water system compliance report	$101	$101	$101	$101	$101	$101

(2) To determine the appropriate fee for a noncommunity system, calculate the service equivalent by taking the average population served each day of operation and dividing by twenty-five for a transient noncommunity (TNC) system and two and one-half for nontransient noncommunity (NTNC) system. Use the number of service equivalents to find out what Group A size category to look under and submit the appropriate fee. (All noncommunity systems are Group A systems as described in WAC 246-290-020.)

(3) Additional review and approval fees may be assessed as follows:

(a) The basic fee covers an evaluation, or the review of an initial submittal and one resubmittal if required. If additional resubmittals are required, an additional twenty-five percent of the original fee will be assessed for each additional resubmittal. For water system plan and SMA plan preparation the basic fee also covers a preplanning conference. When the department is asked to participate in other meetings involving the plan such as community meetings, public hearings, or meetings with elected officials, the department is authorized to charge additional fees at the rate of eighty-nine dollars per hour;

(b) Fees for department project approval based on local technical review will be determined on a case-by-case basis as outlined in the applicable memorandum of understanding between the department and the respective local agency;

(c) Fees for services which the department determines are not described under subsection (1) of this section, will be calculated based on a rate of eighty-nine dollars per hour.

Examples of these services include, but are not limited to:

(i) Review and inspection of water reuse projects;

(ii) Collection of water quality samples requested by purveyor;

(iii) Review of alternate technologies requested by purveyor, manufacturer or authorized representative;

(iv) Sanitary surveys, including the time spent as part of the annual on-site inspections for systems under WAC 246-290-690(3) that is in addition to the time necessary to assess watershed control and disinfection treatment;

(v) Well field designations; or

(vi) Transfers of ownership under WAC 246-290-035 or 246-294-060.

(d) Additional fees assessed by the department shall be billed to the purveyor using an itemized invoice.

(4) If the legislature revises the water system operating permit fee under RCW 70.119A.110 to incorporate into it one or more fees for service currently assessed separately under this section, and the purveyor has paid that consolidated fee, the department shall not assess or collect a separate fee under this section for any such service.

(5) All fees required under this section except as noted in subsection (3) of this section, shall be submitted prior to the department's approval. Payment of fees shall be in the form of a check or money order made payable to: The Department of Health. Payment of a fee shall not guarantee approval of the submitted document or evaluation request.

(6) Purveyors unable to determine the appropriate fee payment to submit should contact the department.

[Statutory Authority: RCW 43.70.250. 00-02-015, § 246-290-990, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-290-990, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 43.20B.020. 98-11-068, § 246-290-990, filed 5/19/98, effective 6/19/98; 97-12-032, § 246-290-990, filed 5/30/97, effective 6/30/97; 95-20-079, § 246-290-990, filed 10/4/95, effective 11/4/95; 93-01-006 (Order 315), § 246-290-990, filed 12/3/92, effective 1/3/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-290-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 87-14-066 (Order 2493), § 440-44-048, filed 7/1/87; 83-14-038 (Order 1980), § 440-44-048, filed 6/30/83.]

Chapter 246-292 WAC

WATER WORKS OPERATOR CERTIFICATION

WAC

WAC 246-292-160 Water works certification fees. (1) Operator fees:

(a) Applicable fees shall be as indicated in Table 2;

Table 2
WATER WORKS OPERATOR FEES

OPERATOR CLASSIFICATION	APPLICATION FEE	REAPPLICATION FEE	ANNUAL RENEWAL FEE	LATE FEE
WTPO	$55.00	$27.00	$27.00*	$27.00*
WDM	$55.00	$27.00	$27.00*	$27.00*
WDS	$55.00	$27.00	$27.00*	$27.00*
CCS	$33.00	$27.00	$27.00*	$27.00*
BAT	$33.00	$27.00	$27.00	$27.00
BTO	$33.00	$27.00	$27.00	$27.00

* The annual renewal fee and late fee for a WTPO, WDM, WDS and CCScertification shall be twenty-seven dollars regardless of the number of classifications held.

(b) A late fee shall be assessed to operators failing to submit the required fee within the time period specified on the renewal form; and

(c) The fee for application for reciprocity shall be one hundred eleven dollars per classification.

(2) Group A system fees:

(a) Applicable fees shall be as indicated in Table 3.

Table 3
ANNUAL SYSTEM CERTIFICATION FEES

SYSTEM SIZE* (Number of Equivalent Services)	SYSTEM FEE
Less than 601 Services	$ 83.00
601 through 6,000 Services	$ 251.00
6,001 through 20,000 Services	$ 335.00
More than 20,000 Services	$ 503.00

* Systems designated by the department as approved satellite management agencies (SMAs) shall pay a fee based on total services in all systems owned by the SMA.

(b) Group A system fees shall be paid in conjunction with the system's annual operating permit fee required in chapter 246-294 WAC.

(c) A late fee shall be assessed against any system not submitting the applicable fee to the department within the designated time period. The late fee shall be based on the water system's classification and shall be an additional ten percent of the applicable system fee or twenty-seven dollars, whichever is greater.

(d) The system fee for issuance of a temporary certificate shall be fifty-five dollars for each temporary position.

(3) Fees shall be nonrefundable and transfers of fees shall not be allowed.

(4) Payment of fees required under this chapter shall be in the form of a check or money order made payable to the department of health and shall be mailed to Department of Health, P.O. Box 1099, Olympia, Washington 98507-1099, or such successor organization or address as designated by the department.

[Statutory Authority: RCW 43.70.250. 00-02-015, § 246-292-160, filed 12/27/99, effective 1/27/00; 99-12-022, § 246-292-160, filed 5/24/99, effective 6/24/99. Statutory Authority: RCW 43.20B.020. 98-12-015, § 246-292-160, filed 5/22/98, effective 6/22/98. Statutory Authority: Chapter 70.119 RCW. 94-04-004, § 246-292-160, filed 1/20/94, effective 2/20/94.]

Chapter 246-310 WAC
CERTIFICATE OF NEED

WAC

WAC 246-310-990 Certificate of need review fees. (1) An application for a certificate of need under chapter 246-310 WAC shall include payment of a fee consisting of the following:

(a) A review fee based on the facility/project type;

(b) When more than one facility/project type applies to an application, the review fee for each type of facility/project must be included.

Facility/Project Type	Review Fee
Ambulatory Surgical Centers/Facilities	$10,600
Amendments to Issued Certificates of Need	$6,700
Emergency Review	$4,300
Exemption Requests	
• Continuing Care Retirement Communities (CCRCs)/Health Maintenance Organization (HMOs)	$4,300
• Bed Banking/Conversions	$ 700
• Determinations of Nonreviewability	$1,000
• Hospice Care Center	$ 900
• Nursing Home Replacement/Renovation Authorizations	$ 900
• Nursing Home Capital Threshold under RCW 70.38.105 (4)(e) (Excluding Replacement/Renovation Authorizations)	$ 900
• Rural Hospital/Rural Health Care Facility	$ 900
Extensions	
• Bed Banking	$ 400
• Certificate of Need/Replacement Renovation Authorization Validity Period	$ 400
Home Health Agency	$12,800
Hospice Agency	$11,400
Hospital (Excluding Transitional Care Units-TCUs, Ambulatory Surgical Center/Facilities, Home Health, Hospice, and Kidney Disease Treatment Centers)	$21,000
Kidney Disease Treatment Centers	$13,000
Nursing Homes (Including CCRCs and TCUs)	$24,000

(2) The fee for amending a pending certificate of need application shall be as follows:

(a) When an amendment to a pending certificate of need application results in the addition of one or more facility/project types, the review fee for each additional facility/project type must accompany the amendment application;

(b) When an amendment to a pending certificate of need application results in the removal of one or more facility/project types, the department shall refund to the applicant the difference between the review fee previously paid and the review fee applicable to the new facility/project type; or

(c) When an amendment to a pending certificate of need application results in any other change as identified in WAC 246-310-100, a fee of one thousand one hundred dollars must accompany the amendment application.

(3) When a certificate of need application is returned by the department in accordance with the provisions of WAC 246-310-090 (2)(b) or (e), the department shall refund seventy-five percent of the review fees paid.

(4) When an applicant submits a written request to withdraw a certificate of need application before the beginning of review, the department shall refund seventy-five percent of the review fees paid by the applicant.

(5) When an applicant submits a written request to withdraw a certificate of need application after the beginning of review, but before the beginning of the ex parte period, the department shall refund one-half of all review fees paid.

(6) When an applicant submits a written request to withdraw a certificate of need application after the beginning of the ex parte period the department shall not refund any of the review fees paid.

(7) Review fees for exemptions and extensions shall be nonrefundable.

[Statutory Authority: RCW 70.38.105(5). 99-23-089, § 246-310-990, filed 11/16/99, effective 12/17/99. Statutory Authority: Chapter 70.38 RCW. 96-24-052, § 246-310-990, filed 11/27/96, effective 12/28/96. Statutory Authority: RCW 70.38.135, 43.70.250 and 70.38.919. 92-02-018 (Order 224), § 246-310-990, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-990, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.38 RCW. 90-15-001 (Order 070), § 440-44-030, filed 7/6/90, effective 8/6/90. Statutory Authority: RCW 43.20A.055. 89-21-042 (Order 2), § 440-44-030, filed 10/13/89, effective 11/13/89; 87-16-084 (Order 2519), § 440-44-030, filed 8/5/87; 87-12-049 (Order 2494), § 440-44-030, filed 6/1/87; 84-13-006

(Order 2109), § 440-44-030, filed 6/7/84; 83-21-015 (Order 2037), § 440-44-030, filed 10/6/83. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-030, filed 6/4/82.]

Chapter 246-318 WAC
HOSPITALS

WAC

246-318-010 through 246-318-99910 Repealed.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-318-010 Definitions. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-010, filed 3/5/93, effective 4/5/93; 92-02-018 (Order 224), § 246-318-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-18-001, filed 11/30/90, effective 12/31/90; 89-22-106 (Order 010), § 248-18-001, filed 11/1/89, effective 12/2/89; 88-18-021 (Order 2680), § 248-18-001, filed 8/30/88. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-18-001, filed 3/20/86. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-17-077 (Order 275), § 248-18-001, filed 8/16/84; 83-19-058 (Order 269), § 248-18-001, filed 9/20/83; 83-01-003 (Order 245), § 248-18-001, filed 12/2/82. Statutory Authority: RCW 70.41.030. 81-05-029 (Order 209), § 248-18-001, filed 2/18/81; Order 135, § 248-18-001, filed 12/6/76; Order 119, § 248-18-001, filed 5/23/75; Order 106, § 248-18-001, filed 1/13/75; Order 91, § 248-18-001, filed 10/3/73; Order 83, § 248-18-001, filed 4/9/73; Order 50, § 248-18-001, filed 12/17/70; Regulation 18.001, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-013 License expiration dates—Notice of decision—Adjudicative proceeding. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-013, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-013, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.41.030. 90-06-019 (Order 039), § 248-18-015, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 82-24-002 (Order 249), § 248-18-015, filed 11/18/82; Order 119, § 248-18-015, filed 5/23/75; Order 69, § 248-18-015, filed 1/13/72.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-015 Exemptions and interpretations. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-015, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-015, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-010, filed 5/30/90, effective 6/30/90. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-18-010, filed 3/20/86. Statutory Authority: RCW 70.41.30 [70.41.030]. 81-05-029 (Order 209), § 248-18-010, filed 2/18/81; Order 142, § 248-18-010, filed 2/8/77; Order 119, § 248-18-010, filed 5/23/75; Order 50, § 248-18-010, filed 12/17/70; Order 22, § 248-18-010, filed 6/27/69; Order 10, § 248-18-010, filed 1/2/69; Regulation 18.010, effective 3/11/60; Subsection (3), filed 2/17/61.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-017 Single license to cover two or more buildings—When permissible. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-017, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-017, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 85-23-020 (Order 2305), § 248-18-017, filed 11/13/85; Order 119, § 248-18-017, filed 5/23/75.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-020 Approval of plans. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-020, filed 5/30/90, effective 6/30/90; Order 119, § 248-18-020, filed 5/23/75; Regulation 18.020, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-025 Required approval for occupancy after completion of new construction. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-025, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-025, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 82-13-084 (Order 230), § 248-18-025, filed 6/22/82; Order 123, § 248-18-025, filed 3/18/76.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-030 Governing body and administration. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-020 (Order 2463), § 248-18-031, filed 1/13/87. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-17-077 (Order 275), § 248-18-031, filed 8/16/84.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-033 Medical staff. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-033, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-17-077 (Order 275), § 248-18-033, filed 8/16/84.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-035 Infection control program. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-035, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-035, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-18-035, filed 11/30/90, effective 12/31/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 89-21-039 (Order 4), § 248-18-035, filed 10/12/89, effective 11/12/89; Order 119, § 248-18-035, filed 5/23/75; Order 107, § 248-18-035, filed 1/13/75.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-040 Personnel. [Statutory Authority: RCW 43.43.830 through 43.43.842. 93-16-030 (Order 381), § 246-318-040, filed 7/26/93, effective 8/26/93. Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-18-040, filed 11/30/90, effective 12/31/90; 86-08-086 (Order 2362), § 248-18-040, filed 4/2/86. Statutory Authority: RCW 70.41.030 and 43.20.050. 82-24-003 (Order 250), § 248-18-040, filed 11/18/82. Statutory Authority: RCW 43.20.050. 80-02-003 (Order 191), § 248-18-040, filed 1/4/80; Order 121, § 241-18-040, filed 9/18/75; Order 119, § 248-18-040, filed 5/23/75; Order 91, § 248-18-040, filed 10/3/73; Order 76, § 248-18-040, filed 1/9/73; Regulation 18.040, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-042 Criminal history, disclosure, and background inquiries. [Statutory Authority: RCW 43.43.830 through 43.43.842. 93-16-030 (Order 381), § 246-318-042, filed 7/26/93, effective 8/26/93.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-150 Maintenance. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-004 (Order 175), § 248-18-150, filed 3/9/79; Order 119, § 248-18-150, filed 5/23/75; Order 9, § 248-18-150, filed 1/2/69; Regulation 18.150, filed 8/4/67; Regulation 18.150, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-155 Housekeeping. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-155, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-004 (Order 175), § 248-18-155, filed 3/9/79.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-160 Laundry. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-081 (Order 176), § 248-18-160, filed 4/2/79; Order 119, § 248-18-160, filed 5/23/75; Regulation 18.160, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-170 Sewage, garbage, and waste. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-004 (Order 175), § 248-18-170, filed 3/9/79; Order 119, § 248-18-170, filed 5/23/75; Regulation 18.170, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-180 Dietary and/or food service. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-180, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-07-048 (Order 257), § 248-18-180, filed 3/18/83; Order 119, § 248-18-180, filed 5/23/75; § 248-18-180, filed 12/6/67; Regulation 18.180, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-190 Patient care services, general. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050 and 70.41.030. 84-02-036 (Order 271), § 248-18-190, filed 12/30/83. Statutory Authority: RCW 43.20.050 and chapter 70.41 RCW. 81-22-014 (Order 216), § 248-18-190, filed 10/23/81; Order 119, § 248-18-190, filed 5/23/75; Regulation 18.190, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-200 Abuse reports—Children and developmentally disabled adults. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 78-08-060 (Order 162), § 248-18-202, filed 7/24/78.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-210 Pediatric services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-210, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-216, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-220 Obstetrical services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-220, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-220, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-221, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-221, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-230 Intermediate care nursery service—Neonatal intensive care nursery service. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-230, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-224, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-240 Critical care service. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-240, filed 11/30/90, effective 12/31/90.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-250 Renal dialysis services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-250, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-250, filed 11/30/90, effective 12/31/90.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-260 Long-term care services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-260, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-260, filed 11/30/90, effective 12/31/90.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-270 Alcoholism and/or substance abuse unit. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-270, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-270, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-22-003 (Order 277), § 248-18-235, filed 10/26/84.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-280 Psychiatric units and services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-280, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-280, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-23-012 (Order 113), § 248-18-240, filed 11/13/90, effective 12/14/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-240, filed 9/20/83. Statutory Authority: RCW 43.20.050 and chapter 70.41 RCW. 81-22-014 (Order 216), § 248-18-240, filed 10/23/81; Order 119, § 248-18-240, filed 5/23/75; Regulation 18.240, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-290 Surgery—Operating rooms and areas—Special procedure rooms—Surgical treatment or diagnostic areas. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-290, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-290, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-251, filed 11/13/85.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-300 Anesthesia services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-300, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-300, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-253, filed 11/13/85.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-310 Post-anesthesia recovery areas. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-310, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-310, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-256, filed 11/13/85.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-320 Processing and sterilizing services. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-320, filed 12/27/90, effective 1/31/91.

Statutory Authority: RCW 70.41.030 and 43.20.050. 85-05-034 (Order 281), § 248-18-260, filed 2/15/85; Order 119, § 248-18-260, filed 5/23/75; Regulation 18.260, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-330 Use of medical gases, combustible anesthetics. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-330, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-081 (Order 176), § 248-18-270, filed 4/2/79; Order 119, § 248-18-270, filed 5/23/75; Regulation 18.270, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-350 Emergency care services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-350, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-350, filed 12/27/90, effective 1/31/91; Order 142, § 248-18-285, filed 2/8/77; Order 119, § 248-18-285, filed 5/23/75; Order 110, § 248-18-285, filed 3/14/75; Order 106, § 248-18-285, filed 1/13/75.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-370 Laboratory. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-370, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-370, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-23-056 (Order 2560), § 248-18-300, filed 11/18/87; Order 119, § 248-18-300, filed 5/23/75; Regulation 18.300, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-380 Diagnostic and therapeutic radiology and other imaging services. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-380, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-380, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-109 (Order 008), § 248-18-311, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-390 Physical and occupational therapy services. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-390, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-030 (Order 2464), § 248-18-312, filed 1/14/87.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-400 Respiratory care services. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-400, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-081 (Order 176), § 248-18-315, filed 4/2/79.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-420 Hospital pharmacy. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-420, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-420, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050 and 70.41.030. 84-02-036 (Order 271), § 248-18-331, filed 12/30/83. Formerly WAC 248-18-330.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-440 Records and reports—Medical record system. [Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-440, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-440, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 88-18-021 (Order 2680), § 248-18-440, filed 8/30/88; 85-23-020 (Order 2305), § 248-18-440, filed 11/13/85; Order 142, § 248-18-440, filed 2/8/77; Order 135, § 248-18-440, filed 12/6/76; Order 119, § 248-18-440, filed 5/23/75; Regulation 18.440, effective 3/11/60.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-450 Discharge planning. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-450, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 88-18-020 (Order 2679), § 248-18-445, filed 8/30/88.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-500 Applicability of WAC 246-318-500 through 246-318-99902. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-500, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-500, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-500, filed 9/20/83. Statutory Authority: RCW 70.41.30 [70.41.030]. 81-05-029 (Order 209), § 248-18-500, filed 2/18/81; Order 119, § 248-18-500, filed 5/23/75; Order 50, § 248-18-500, filed 12/17/70; Regulation 18.500, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-510 Programs, drawings and construction. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-510, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-510, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-510, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.30 [70.41.030]. 81-05-029 (Order 209), § 248-18-510, filed 2/18/81. Statutory Authority: RCW 43.20.050. 80-03-062 (Order 193), § 248-18-510, filed 2/26/80; Order 123, § 248-18-510, filed 3/18/76; Order 119, § 248-18-510, filed 5/23/75; Order 9, § 248-18-510, filed 1/2/69; Regulation 18.520(2)(d), filed 8/4/67; Regulation 18.520 (part), filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-520 Design and construction standards, general. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-520, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-520, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-105 (Order 009), § 248-18-515, filed 11/1/89, effective 12/2/89; 88-23-083 (Order 2729), § 248-18-515, filed 11/18/88. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-18-515, filed 3/20/86. Statutory Authority: RCW 70.41.30 [70.41.030]. 81-05-029 (Order 209), § 248-18-515, filed 2/18/81; Order 119, § 248-18-515, filed 5/23/75; Order 50, § 248-18-515, filed 12/17/70; Order 22, § 248-18-515, filed 6/27/69; Regulation 18.530, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-530 Site and site development. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-530, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-530, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-520, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-520, filed 9/20/83; Order 119, § 248-18-520, filed 5/23/75; Order 106, § 248-18-520, filed 1/13/75; Regulation 18.540, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-540 General design requirements. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-540, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-540, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-719, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 89-22-105 (Order 009), § 248-18-719, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-550 General requirements for support facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-550, filed 3/5/93, effective 4/5/93. Statutory

Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-550, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-105 (Order 009), § 248-18-711, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-560 Maintenance and mechanical facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-560, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-560, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-705, filed 5/30/90, effective 6/30/90; Order 119, § 248-18-705, filed 5/23/75; Regulation 18.750, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-570 Administrative facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-570, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-570, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-525, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-525, filed 9/20/83; Order 119, § 248-18-525, filed 5/23/75; Regulation 18.550, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-580 Receiving, storage and distribution facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-580, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-580, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 85-05-034 (Order 281), § 248-18-700, filed 2/15/85; Order 119, § 248-18-700, filed 5/23/75; Regulation 18.740, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-590 Central sterilizing and processing service facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-590, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-590, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-680, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 85-05-034 (Order 281), § 248-18-680, filed 2/15/85; 83-19-058 (Order 269), § 248-18-680, filed 9/20/83; Order 119, § 248-18-680, filed 5/23/75; Regulation 18.700, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-600 Environmental services facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-600, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-600, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-690, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-690, filed 9/20/83; Order 119, § 248-18-690, filed 5/23/75; Regulation 18.720, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-610 Laundry facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-610, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-610, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-695, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-695, filed 9/20/83; Order 119, § 248-18-695, filed 5/23/75; Regulation 18.730, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-620 Dietary facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-620, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-620, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-685, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-07-048 (Order 257), § 248-18-685, filed 3/18/83; Order 119, § 248-18-685, filed 5/23/75; Regulation 18.710, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-630 Laboratory and pathology facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-630, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-630, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-660, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 87-23-056 (Order 2560), § 248-18-660, filed 11/18/87. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-660, filed 9/20/83; Order 119, § 248-18-660, filed 5/23/75; § 248-18-660, filed 10/3/67; Regulation 18.660, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-640 Pharmacy. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-640, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-640, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 83-13-067 (Order 262), § 248-18-670, filed 6/16/83; Order 119, § 248-18-670, filed 5/23/75; Regulation 18.680, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-650 Radiology and other imaging facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-650, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-650, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-109 (Order 008), § 248-18-656, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-660 Nuclear medicine facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-660, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-660, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-665, filed 5/30/90, effective 6/30/90; Order 119, § 248-18-665, filed 5/23/75; Regulation 18.670, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-670 Electrocardiography facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-670, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-670, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-030 (Order 2464), § 248-18-662, filed 1/14/87.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-680 Electroencephalography facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-680, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-680, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-030 (Order 2464), § 248-18-663, filed 1/14/87.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-690 Nursing unit. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-690, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-690, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-530, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 43.20.050 and chapter 70.41 RCW. 81-22-014 (Order 216), § 248-18-530, filed 10/23/81; Order

119, § 248-18-530, filed 5/23/75; Regulation 18.560, § § 1, 2 and 3, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-700 Pediatric nursing unit. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-700, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-700, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-541, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-710 Emergency facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-710, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-710, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-645, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-645, filed 9/20/83; Order 119, § 248-18-645, filed 5/23/75; Order 106, § 248-18-645, filed 1/13/75; Regulation 18.630, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-720 Surgery suite. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-720, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-720, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-565, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-565, filed 11/13/85. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-565, filed 9/20/83; Order 119, § 248-18-565, filed 5/23/75; Order 107, § 248-18-565, filed 1/13/75; Regulation 18.590, § 1, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-730 Recovery/post anesthesia care unit (PACU). [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-730, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-730, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-560, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-560, filed 11/13/85. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-560, filed 9/20/83; Order 119, § 248-18-560, filed 5/23/75; Regulation 18.580, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-740 Critical care facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-740, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-740, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-740, filed 11/30/90, effective 12/31/90.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-750 Facilities for care of patients in labor. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-750, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-750, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-606, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-760 Obstetrical delivery facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-760, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-760, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-601, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-770 Birthing rooms. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-770, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-770, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-608, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-780 Obstetrical recovery unit. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-780, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-780, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-610, filed 5/23/75; Order 107, § 248-18-610, filed 1/13/75; Regulation 18.600, § 13, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-790 Newborn nursery facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-790, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-790, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-616, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-800 Intermediate care nursery and neonatal intensive care nursery. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-800, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-800, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-637, filed 11/1/89, effective 12/2/89.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-810 Alcoholism and substance abuse nursing unit. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-810, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-810, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-22-003 (Order 277), § 248-18-532, filed 10/26/84.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-820 Psychiatric facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-820, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-820, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-23-012 (Order 113), § 248-18-536, filed 11/13/90, effective 12/14/90.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-830 Rehabilitation facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-830, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-830, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-675, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-675, filed 9/20/83; Order 119, § 248-18-675, filed 5/23/75; Regulation 18.690, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-840 Outpatient care facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-840, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-840, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-568, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-568, filed 11/13/85.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

246-318-850 Special procedure facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-850, filed

	3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-850, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-650, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-650, filed 9/20/83; Order 119, § 248-18-650, filed 5/23/75; Regulation 18.640, filed 1/25/62.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.
246-318-860	Dialysis facilities. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-860, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-860, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-860, filed 11/30/90, effective 12/31/90.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.
246-318-870	Long-term care unit. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-870, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-870, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-870, filed 11/30/90, effective 12/31/90.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.
246-318-990	Fees. [Statutory Authority: RCW 70.41.100 and 43.20B.020. 98-13-035, § 246-318-990, filed 6/8/98, effective 7/9/98. Statutory Authority: RCW 43.70.250, 43.70.110 and 43.20B.020. 95-12-097, § 246-318-990, filed 6/7/95, effective 7/8/95. Statutory Authority: RCW 43.70.250. 92-12-028 (Order 273), § 246-318-990, filed 5/28/92, effective 6/28/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-318-990, filed 12/27/90, effective 1/31/91.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.
246-318-99902	Appendix B—Dates of documents adopted by reference in chapter 246-318 WAC. [Statutory Authority: RCW 70.41.030. 93-07-011 (Order 338), § 246-318-99902, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-99902, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-99902, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 89-22-105 (Order 009), § 248-18-99902, filed 11/1/89, effective 12/2/89; 88-16-086 (Order 2667), § 248-18-99902, filed 8/2/88; 87-04-061 (Order 2466), § 248-18-99902, filed 2/4/87. Statutory Authority: RCW 70.41.030 and 43.20.050. 85-05-033 (Order 280), § 248-18-99902, filed 2/15/85; 82-24-001 (Order 248), § 248-18-99902, filed 11/18/82.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.
246-318-99910	Appendix J—Guidelines for laboratory quality assurance program in hospitals. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-99910, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-24-038 (Order 2560), § 248-18-99910, filed 11/25/87.] Repealed by 99-04-052, filed 1/28/99, effective 3/10/99. Statutory Authority: RCW 70.41.030 and 43.70.040.

WAC 246-318-010 through 246-318-99910 Repealed. See Disposition Table at beginning of this chapter.

Chapter 246-320 WAC
HOSPITAL LICENSING REGULATIONS

WAC

WAC 246-320-001 Purpose and applicability of chapter. This chapter is adopted by the Washington state department of health to implement the provisions of chapter 70.41 RCW and establish minimum health and safety requirements for the operation, maintenance, and construction of acute care hospitals.

(1) Compliance with the regulations in this chapter does not constitute release from the requirements of applicable state and local codes and ordinances. Where regulations in this chapter exceed other codes and ordinances, the regulations in this chapter will apply:

(2) The department will review references to codes and regulations in this chapter, and:

(a) Update as necessary; and

(b) Adopt a revised list of referenced standards, if required.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-001, filed 1/28/99, effective 3/10/99.]

WAC 246-320-010 Definitions. For the purposes of this chapter and chapter 70.41 RCW, the following words and phrases will have the following meanings unless the context clearly indicates otherwise:

(1) "Abuse" means injury or sexual abuse of a patient under circumstances indicating the health, welfare, and safety of the patient is harmed. Person "legally responsible" will include a parent, guardian, or an individual to whom parental or guardian responsibility is delegated (e.g., teachers, providers of residential care and treatment, and providers of day care):

(a) "Physical abuse" means damaging or potentially damaging nonaccidental acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal behavior, harassment, or other actions which may result in emotional or behavioral problems, physical manifestations, disordered or delayed development.

(2) "Accredited" means approved by the joint commission on accreditation of healthcare organizations (JCAHO).

(3) "Administrative business day" means Monday, Tuesday, Wednesday, Thursday, or Friday, 8:00 a.m. to 5:00 p.m., exclusive of recognized state of Washington holidays.

(4) "Agent," when used in a reference to a medical order or a procedure for a treatment, means any power, principle, or substance, whether physical, chemical, or biological, capable of producing an effect upon the human body.

(5) "Airborne precaution room" means a room that is designed and equipped to care for patients known or suspected to be infected with microorganisms transmitted by airborne droplet nuclei (small-particle residue [five microns or smaller in size] of evaporated droplets containing microorganisms that remain suspended in the air and can be widely dispersed by air currents within a room or over a long distance).

(6) "Alcoholism" means an illness characterized by lack of control as to the consumption of alcoholic beverages, or the consumption of alcoholic beverages to the extent an individual's health is substantially impaired or endangered, or his or her social or economic function is substantially disrupted.

(7) "Alteration":

(a) "Alteration" means any change, addition, remodel or modification in construction, or occupancy to an existing hospital or a portion of an existing hospital.

(b) "Major alteration" means any physical change within an existing hospital that changes the occupancy (as defined in state building code) and scope of service within a room or area, results in reconstruction to major portions of a floor or department, or requires revisions to building systems or services.

(c) "Minor alteration" means any physical change to an existing hospital which does not affect the structural integrity of the hospital building, which does not affect fire and life safety, and which does not add beds or facilities over those for which the hospital is licensed.

(8) "Ambulatory" means an individual physically and mentally capable of walking or traversing a normal path to safety, including the ascent and descent of stairs, without the physical assistance of another person.

(9) "Area" means a portion of a room or building that is separated from other functions in the room or portions of the building by a physical barrier or adequate space.

(10) "Assessment" means the: (a) Systematic collection and review of patient-specific data; (b) process established by a hospital for obtaining appropriate and necessary information about each individual seeking entry into a health care setting or service; and (c) information to match an individual's need with the appropriate setting and intervention.

(11) "Authentication" means the process used to verify that an entry is complete, accurate, and final.

(12) "Bathing facility" means a bathtub or shower, but does not include sitz bath or other fixtures designated primarily for therapy.

(13) "Birthing room" or "labor-delivery-recovery (LDR) room" or "labor-delivery-recovery-postpartum (LDRP) room" means a room designed and equipped for the care of a woman, fetus, and newborn, and to accommodate her support people during the complete process of vaginal childbirth.

(14) "Child" means an individual under the age of eighteen years.

(15) "Clean" when used in reference to a room, area, or facility means space or spaces and/or equipment for storage and handling of supplies and/or equipment which are in a sanitary or sterile condition.

(16) "Communication system" means telephone, intercom, nurse call or wireless devices used by patients and staff to communicate.

(17) "Critical care unit or service" means the specialized medical and nursing care provided to patients facing an immediate life-threatening illness or injury. The care is provided by multidisciplinary teams of highly experienced and skilled physicians, nurses, pharmacists or other allied health professionals who have the ability to interpret complex therapeutic and diagnostic information and access to highly sophisticated equipment.

(18) "Department" means the Washington state department of health.

(19) "Detoxification" means the process of ridding the body of the transitory effects of intoxication and any associated physiological withdrawal reaction.

(20) "Dialysis facility" means a separate physical and functional nursing unit of the hospital serving patients receiving renal dialysis.

(21) "Dialysis station" means an area designed, equipped, and staffed to provide dialysis services for one patient.

(22) "Dietitian" means an individual meeting the eligibility requirements for active membership in the American Dietetic Association described in Directory of Dietetic Programs Accredited and Approved, American Dietetic Association, edition 100, 1980.

(23) "Direct access" means access to one room from another room or area without going through an intervening room or into a corridor.

(24) "Double-checking" means verification of patient identity, agent to be administered, route, quantity, rate, time, and interval of administration by two persons legally quali-

fied to administer such agent prior to administration of the agent.

(25) "Drugs" as defined in RCW 18.64.011(3) means:

(a) Articles recognized in the official U.S. pharmacopoeia or the official homeopathic pharmacopoeia of the United States;

(b) Substances intended for use in the diagnosis, cure, mitigation, treatment, or prevention of disease in man or other animals;

(c) Substances (other than food) intended to affect the structure or any function of the body of man or other animals; or

(d) Substances intended for use as a component of any substances specified in (a), (b), or (c) of this subsection but not including devices or component parts or accessories.

(26) "Drug dispensing" means an act entailing the interpretation of an order for a drug or biological and, pursuant to that order, proper selection, measuring, labeling, packaging, and issuance of the drug for a patient or for a service unit of the facility.

(27) "Easily cleanable" means readily accessible and made with materials and finishes fabricated to permit complete removal of residue or dirt by accepted cleaning methods.

(28) "Electrical receptacle outlet" means an outlet where one or more electrical receptacles are installed.

(29) "Emergency triage" means the immediate patient assessment by a registered nurse, physician, or physician assistant to determine the nature and urgency of the person's medical need and the time and place care and treatment is to be given.

(30) "Facilities" means a room or area and equipment serving a specific function.

(31) "Failure or major malfunction" means an essential environmental, life safety or patient care function, equipment or process ceasing operation or capability of working as intended and any back up, reserve or replacement to the function, equipment or process has not occurred or is nonexistent. Such as, but not limited to, the:

(a) Normal electrical power ceases and the emergency generator(s) do not function;

(b) Ventilation system ceases to operate or reverses air flow and causes contaminated air to circulate into areas where it was not designated or intended to flow; or

(c) Potable water in the hospital becomes contaminated so it cannot be used.

(32) "Family" means individuals important to and designated by a patient who need not be relatives.

(33) "Faucet controls" means wrist, knee, or foot control of the water supply:

(a) "Wrist control" means water supply is controlled by handles not less than four and one-half inches overall horizontal length designed and installed to be operated by the wrists;

(b) "Knee control" means the water supply is controlled through a mixing valve designed and installed to be operated by the knee;

(c) "Foot control" means the water supply is controlled through a mixing valve designed and installed to be operated by the foot.

(34) "Governing authority/body" means the person or persons responsible for establishing the purposes and policies of the hospital.

(35) "Grade" means the level of the ground adjacent to the building. The ground must be level or slope downward for a distance of at least ten feet away from the wall of the building. From there the ground may slope upward not greater than an average of one foot vertical to two feet horizontal within a distance of eighteen feet from the building.

(36) "He, him, his, or himself" means an individual of either sex, male or female, and does not mean preference for nor exclude reference to either sex.

(37) "High-risk infant" means an infant, regardless of gestational age or birth weight, whose extrauterine existence is compromised by a number of factors, prenatal, natal, or postnatal needing special medical or nursing care.

(38) "Hospital" means any institution, place, building, or agency providing accommodations, facilities, and services over a continuous period of twenty-four hours or more, for observation, diagnosis, or care of two or more individuals not related to the operator who are suffering from illness, injury, deformity, or abnormality, or from any other condition for which obstetrical, medical, or surgical services would be appropriate for care or diagnosis. "Hospital" as used in this chapter does not include:

(a) Hotels, or similar places furnishing only food and lodging, or simply domiciliary care;

(b) Clinics, or physicians' offices where patients are not regularly kept as bed patients for twenty-four hours or more;

(c) Nursing homes, as defined and which come within the scope of chapter 18.51 RCW;

(d) Maternity homes, which come within the scope of chapter 18.46 RCW;

(e) Psychiatric or alcoholism hospitals, which come within the scope of chapter 71.12 RCW; nor

(f) Any other hospital or institution specifically intended for use in the diagnosis and care of those suffering from mental illness, mental retardation, convulsive disorders, or other abnormal mental conditions.

(g) Furthermore, nothing in this chapter will be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any hospital conducted for those who rely primarily upon treatment by prayer or spiritual means in accordance with the creed or tenets of any well-recognized church or religious denominations.

(39) "Individualized treatment plan" means a written statement of care planned for a patient based upon assessment of the patient's developmental, biological, psychological, and social strengths and problems, and including:

(a) Treatment goals, with stipulated time frames;

(b) Specific services to be utilized;

(c) Designation of individuals responsible for specific service to be provided;

(d) Discharge criteria with estimated time frames; and

(e) Participation of the patient and the patient's designee as appropriate.

(40) "Infant" means a baby or very young child up to one year of age.

(41) "Infant station" means a space for a bassinet, incubator, or equivalent, including support equipment used for the care of an individual infant.

(42) "Inpatient" means a patient receiving services that require admission to a hospital for twenty-four hours or more.

(43) "Intermediate care nursery" means an area designed, organized, staffed, and equipped to provide constant care and treatment for mild to moderately ill infants not requiring neonatal intensive care, but requiring physical support and treatment beyond support required for a normal neonate and may include the following:

(a) Electronic cardiorespiratory monitoring;

(b) Gavage feedings;

(c) Parenteral therapy for administration of drugs; and

(d) Respiratory therapy with intermittent mechanical ventilation not to exceed a continuous period of twenty-four hours for stabilization when trained staff are available.

(44) "Interventional service facility" means a facility other than operating room (OR) where invasive procedures are performed.

(45) "Invasive procedure" means a procedure involving puncture or incision of the skin or insertion of an instrument or foreign material into the body including, but not limited to, percutaneous aspirations, biopsies, cardiac and vascular catheterizations, endoscopies, angioplasties, and implantations. Excluded are venipuncture and intravenous therapy.

(46) "JCAHO" means joint commission on accreditation of healthcare organizations.

(47) "Labor room" means a room in which an obstetric patient is placed during the first stage of labor, prior to being taken to the delivery room.

(48) "Labor-delivery-recovery (LDR) room," "birthing room," or "labor-delivery-recovery-postpartum (LDRP) room" means a room designed and equipped for the care of a woman, fetus, and newborn and to accommodate her support people during the complete process of vaginal childbirth.

(49) "Licensed practical nurse," abbreviated LPN, means an individual licensed under provisions of chapter 18.78 RCW.

(50) "Long-term care unit" means a group of beds for the accommodation of patients who, because of chronic illness or physical infirmities, require skilled nursing care and related medical services but are not acutely ill and not in need of the highly technical or specialized services ordinarily a part of hospital care.

(51) "Maintainable" means able to preserve or keep in an existing condition.

(52) "Maintenance" means the work of keeping something in suitable condition.

(53) "Major permanent loss of function" means sensory, motor, physiological, or intellectual impairment not present on admission requiring continued treatment or lifestyle change. When this condition cannot be immediately determined, the designation will be made when the patient is discharged with continued major loss of function, or two weeks have elapsed with persistent major loss of function, whichever occurs first.

(54) "Medical staff" means physicians and may include other practitioners appointed by the governing authority to practice within the parameters of the governing authority and medical staff bylaws.

(55) "Medication" means any substance, other than food or devices, intended for use in diagnosing, curing, mitigating, treating, or preventing disease.

(56) "Movable equipment" means equipment not built-in, fixed, or attached to the building.

(57) "Must" means compliance is mandatory.

(58) "Multidisciplinary treatment team" means a group of individuals from the various disciplines and clinical services who assess, plan, implement, and evaluate treatment for patients.

(59) "Neglect" means mistreatment or maltreatment; an act or omission evincing; a serious disregard of consequences of a magnitude constituting a clear and present danger to an individual patient's health, welfare, and safety.

(a) "Physical neglect" means physical or material deprivation, such as lack of medical care, lack of supervision necessary for patient level of development, inadequate food, clothing, or cleanliness.

(b) "Emotional neglect" means acts such as rejection, lack of stimulation, or other acts of commission or omission which may result in emotional or behavioral problems, physical manifestations, and disordered development.

(60) "Neonate" or "newborn" means a newly born infant under twenty-eight days of age.

(61) "Neonatal intensive care nursery" means an area designed, organized, equipped, and staffed for constant nursing, medical care, and treatment of high-risk infants who may require:

(a) Continuous ventilatory support, twenty-four hours per day;

(b) Intravenous fluids or parenteral nutrition;

(c) Preoperative and postoperative monitoring when anesthetic other than local is administered;

(d) Cardiopulmonary or other life support on a continuing basis.

(62) "Neonatologist" means a pediatrician who is board certified in neonatal-perinatal medicine or board eligible in neonatal-perinatal medicine, provided the period of eligibility does not exceed three years, as defined and described in *Directory of Residency Training Programs* by the Accreditation Council for Graduate Medical Education, American Medical Association, 1998 or the *American Osteopathic Association Yearbook and Directory,* 1998.

(63) "Newborn nursery care" means the provision of nursing and medical services described by the hospital and appropriate for well and convalescing infants including supportive care, ongoing physical assessment, and resuscitation.

(64) "New construction" means any of the following:

(a) New buildings to be licensed as a hospital;

(b) Additions to an existing hospital;

(c) Conversion of an existing building or portions thereof for use as a hospital;

(d) Alterations to an existing hospital.

(65) "Nonambulatory" means an individual physically or mentally unable to walk or traverse a normal path to safety without the physical assistance of another.

(66) "Notify" means to provide notice of required information to the department by the following methods, unless specifically stated otherwise in this chapter:

(a) Telephone;

(b) Facsimile;

(c) Written correspondence; or

(d) In person.

(67) "Nursing unit" means a separate physical and functional unit of the hospital including a group of patient rooms, with ancillary, administrative, and service facilities necessary for nursing service to the occupants of these patient rooms.

(68) "Nutritional assessment" means an assessment of a patient's nutritional status conducted by a registered dietitian.

(69) "Nutritional risk screen" means a part of the initial assessment that can be conducted by any trained member of the multidisciplinary treatment team.

(70) "Observation room" means a room for close nursing observation and care of one or more outpatients for a period of less than twenty-four consecutive hours.

(71) "Obstetrical area" means the portions or units of the hospital designated or designed for care and treatment of women during the antepartum, intrapartum, and postpartum periods, and/or areas designed as nurseries for care of newborns.

(72) "Operating room (OR)" means a room within the surgical department intended for invasive and noninvasive procedures requiring anesthesia.

(73) "Outpatient" means a patient receiving services that generally do not require admission to a hospital bed for twenty-four hours or more.

(74) "Outpatient services" means services that do not require admission to a hospital for twenty-four hours or more.

(75) "Patient" means an individual receiving (or having received) preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative health services at the hospital.

(76) "Patient care areas" means all nursing service areas of the hospital where direct patient care is rendered and all other areas of the hospital where diagnostic or treatment procedures are performed directly upon a patient.

(77) "Patient related technology" means equipment used in a patient care environment to support patient treatment and diagnosis, such as electrical, battery and pneumatic powered technology as well as support equipment and disposables.

(78) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association, and the legal successor thereof.

(79) "Pharmacist" means an individual licensed by the state board of pharmacy to engage in the practice of pharmacy under the provisions of chapter 18.64 RCW as now or hereafter amended.

(80) "Pharmacy" means the central area in a hospital where drugs are stored and are issued to hospital departments or where prescriptions are filled.

(81) "Physician" means an individual licensed under provisions of chapter 18.71 RCW, Physicians, chapter 18.22 RCW, Podiatric medicine and surgery, or chapter 18.57 RCW, Osteopathy—Osteopathic medicine and surgery.

(82) "Prescription" means an order for drugs or devices issued by a practitioner duly authorized by law or rule in the state of Washington to prescribe drugs or devices in the course of his or her professional practice for a legitimate medical purpose.

(83) "Pressure relationships" of air to adjacent areas means:

(a) Positive (P) pressure is present in a room when the:

(i) Room sustains a minimum of 0.001 inches of H_20 pressure differential with the adjacent area, the room doors are closed, and air is flowing out of the room; or

(ii) Sum of the air flow at the supply air outlets (in CFM) exceeds the sum of the air flow at the exhaust/return air outlets by at least 70 CFM with the room doors and windows closed;

(b) Negative (N) pressure is present in a room when the:

(i) Room sustains a minimum of 0.001 inches of H_20 pressure differential with the adjacent area, the room doors are closed, and air is flowing into the room; or

(ii) Sum of the air flow at the exhaust/return air outlets (in CFM) exceeds the sum of the air flow at the supply air outlets by at least 70 CFM with the room doors and windows closed;

(c) Equal (E) pressure is present in a room when the:

(i) Room sustains a pressure differential range of plus or minus 0.0002 inches of H_20 with the adjacent area, and the room doors are closed; or

(ii) Sum of the air flow at the supply air outlets (in CFM) is within ten percent of the sum of the air flow at the exhaust/return air outlets with the room doors and windows closed.

(84) "Procedure" means a particular course of action to relieve pain, diagnose, cure, improve, or treat a patient's condition usually requiring specialized equipment.

(85) "Protective precaution room" means a room designed and equipped for care of patients with a high risk for contracting infections, such as bone marrow and organ transplant patients.

(86) "Protocols" and "standing order" mean written descriptions of actions and interventions for implementation by designated hospital personnel under defined circumstances and authenticated by a legally authorized person under hospital policy and procedure.

(87) "Psychiatric service" means the treatment of patients pertinent to the psychiatric diagnosis whether or not the hospital maintains a psychiatric unit.

(88) "Psychiatric unit" means a separate area of the hospital specifically reserved for the care of psychiatric patients (a part of which may be unlocked and a part locked), as distinguished from "seclusion rooms" or "security rooms" as defined in this section.

(89) "Reassessment" means ongoing data collection comparing the most recent data with the data collected on the previous assessment(s).

(90) "Recovery unit" means a special physical and functional area for the segregation, concentration, and close or continuous nursing observation and care of patients for a period of less than twenty-four hours immediately following anesthesia, obstetrical delivery, surgery, or other diagnostic or treatment procedures which may produce shock, respiratory obstruction or depression, or other serious states.

(91) "Registered nurse" means an individual licensed under the provisions of chapter 18.79 RCW and practicing in

accordance with the rules and regulations promulgated thereunder.

(92) "Remodel" means the reshaping or reconstruction of a part or area of the hospital.

(93) "Restraint" means any method used to prevent or limit free body movement including, but not limited to, involuntary confinement, an apparatus, or a drug given not required to treat a patient's medical symptoms.

(94) "Room" means a space set apart by floor-to-ceiling partitions on all sides with proper access to a corridor and with all openings provided with doors or windows.

(95) "Seclusion room" means a small, secure room specifically designed and organized for temporary placement, care, and observation of one patient and for an environment with minimal sensory stimuli, maximum security and protection, and visual observation of the patient by authorized personnel and staff. Doors of seclusion rooms are provided with staff-controlled locks.

(96) "Self-administration of drugs" means a patient administering or taking his or her own drugs from properly labeled containers: Provided, That the facility maintains the responsibility for seeing the drugs are used correctly and the patient is responding appropriately.

(97) "Sensitive area" means a room used for surgery, transplant, obstetrical delivery, nursery, post-anesthesia recovery, special procedures where invasive techniques are used, emergency or critical care including, but not limited to, intensive and cardiac care or areas where immunosuppressed inpatients are located and central supply room.

(98) "Sexual assault" or "rape" mean consistent with applicable law and regulation and based on the hospital's definition.

(99) "Sinks":

(a) "Clinic service sink (siphon jet)" means a plumbing fixture of adequate size and proper design for waste disposal with siphon jet or similar action sufficient to flush solid matter of at least two and one-eighth inch diameter.

(b) "Scrub sink" means a plumbing fixture of adequate size and proper design for thorough washing of hands and arms, equipped with knee, foot, electronic, or equivalent control, and gooseneck spout without aerators including brush and handsfree soap dispenser.

(c) "Service sink" means a plumbing fixture of adequate size and proper design for filling and emptying mop buckets.

(d) "Handsfree handwash sink" means a plumbing fixture of adequate size and proper design to minimize splash and splatter and permit hand washing without touching fixtures, with adjacent soap dispenser with foot control or equivalent and single service hand drying device.

(e) "Handwash sink" means a plumbing fixture of adequate size and proper design for washing hands, with adjacent soap dispenser and single service hand drying device.

(100) "Soiled" (when used in reference to a room, area, or facility) means space and equipment for collection or cleaning of used or contaminated supplies and equipment or collection or disposal of wastes.

(101) "Special procedure" means a distinct and/or special diagnostic exam or treatment, such as, but not limited to, endoscopy, angiography, and cardiac catheterization.

(102) "Staff" means paid employees, leased or contracted persons, students, and volunteers.

(103) "Stretcher" means a four-wheeled cart designed to serve as a litter for the transport of an ill or injured individual in a horizontal or recumbent position.

(104) "Surgical procedure" means any manual or operative procedure performed upon the body of a living human being for the purpose of preserving health, diagnosing or curing disease, repairing injury, correcting deformity or defect, prolonging life or relieving suffering, and involving any of the following:

(a) Incision, excision, or curettage of tissue or an organ;

(b) Suture or other repair of tissue or an organ including a closed as well as an open reduction of a fracture;

(c) Extraction of tissue including the premature extraction of the products of conception from the uterus; or

(d) An endoscopic examination with use of anesthetizing agents.

(105) "Surrogate decision-maker" means an individual appointed to act on behalf of another. Surrogates make decisions only when an individual is without capacity or has given permission to involve others.

(106) "Through traffic" means traffic for which the origin and destination are outside the room or area serving as a passageway.

(107) "Toilet" means a room containing at least one water closet.

(108) "Treatment" means the care and management of a patient to combat, improve, or prevent a disease, disorder, or injury, and may be:

(a) Pharmacologic, surgical, or supportive;

(b) Specific for a disorder; or

(c) Symptomatic to relieve symptoms without effecting a cure.

(109) "Treatment room" means a hospital room for medical, surgical, dental, or psychiatric management of a patient.

(110) "Water closet" means a plumbing fixture fitted with a seat and device for flushing the bowl of the fixture with water.

(111) "Will" means compliance is mandatory.

(112) "Window" means a glazed opening in an exterior wall.

(a) "Maximum security window" means a window that can only be opened by keys or tools under the control of personnel. The operation will be restricted to prohibit escape or suicide. Where glass fragments may create a hazard, safety glazing and other appropriate security features will be incorporated. Approved transparent materials other than glass may be used.

(b) "Relite" means a glazed opening in an interior partition between a corridor and a room or between two rooms to permit viewing.

(c) "Security window" means a window designed to inhibit exit, entry, and injury to a patient, incorporating approved, safe transparent material.

(113) "Work surface" means a flat hard horizontal surface such as a table, desk, counter, or cart surface.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-010, filed 1/28/99, effective 3/10/99.]

WAC 246-320-025 On-site licensing survey. The purpose of this section is to provide annual on-site survey requirements in accordance with chapter 70.41 RCW.

(1) The department will:

(a) Conduct at least one on-site licensing survey each calendar year to determine compliance with the provisions in chapter 70.41 RCW and this chapter;

(b) Notify the hospital in writing of state survey findings;

(c) Contact the hospital to discuss the findings of an on-site licensing or joint commission on accreditation of health-care organizations (JCAHO) survey when appropriate; and

(d) Not conduct the annual on-site licensing survey when requested by a hospital accredited by JCAHO in accordance with subsections (2) and (3) of this section.

(2) A hospital accredited by the JCAHO may request exclusion from an annual on-site licensing survey during the year of the JCAHO survey. To request exclusion, a hospital must submit to the department:

(a) A written request asking to be excluded from the annual on-site licensing survey during the calendar year in which the hospital will be surveyed by the JCAHO;

(b) The written request at least thirty days prior to the beginning of the calendar year for which the exclusion from an annual on-site licensing survey will be made;

(c) Verification of current JCAHO accreditation; and

(d) A copy of the decisions and findings of the JCAHO survey within thirty days of receipt of the final JCAHO survey report.

(3) The department will grant an exclusion from the annual on-site licensing survey when:

(a) The hospital:

(i) Meets the requirements in subsection (2) of this section; and

(ii) Verifies current JCAHO accreditation;

(b) The department determines the JCAHO survey standards used at the time of the JCAHO survey exceed or are substantially equivalent to chapter 70.41 RCW and this chapter.

(4) A hospital excluded from an annual on-site licensing survey in accordance with this section:

(a) Is not subject to an annual on-site licensing survey during the calendar year the hospital is surveyed by the JCAHO and for twelve months after the date of the JCAHO survey; and

(b) Must notify the department in writing of any changes in JCAHO accreditation status within ten days of receipt of the accreditation report from the JCAHO.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-025, filed 1/28/99, effective 3/10/99.]

WAC 246-320-045 Application for license—License expiration dates—Notice of decision—Adjudicative proceeding. The purpose of this section is to ensure hospitals are licensed in accordance with chapter 70.41 RCW.

(1) An applicant not currently licensed must submit to the department an application for licensure and applicable fee in accordance with RCW 70.41.100.

(2) The department will, prior to issuing an initial license, verify compliance with the provisions of chapter 70.41 RCW and this chapter which include, but are not limited to:

(a) Approval of construction documents;

(b) Receipt of a certificate of need as provided in chapter 70.38 RCW;

(c) Compliance with local codes and ordinances, including approval to occupy; and

(d) Conducting an on-site licensing survey in accordance with WAC 246-320-025.

(3) The licensed hospital must submit to the department:

(a) No later than November 30 of each calendar year, an application for licensure or verification of license information and applicable fee in accordance with RCW 70.41.100; and

(b) An application addendum indicating any changes to the information previously provided.

(4) The department will issue hospital licenses initially and reissue hospital licenses as often thereafter as necessary each calendar year so as to cause approximately one-third of the total number of hospital licenses to expire on the last day of the calendar year. Licenses issued pursuant to this chapter may be valid for any period not to exceed thirty-six months.

(5) The department may issue a provisional license to permit the operation of the hospital for a period of time to be determined by the department if there is failure to comply with the provisions of chapter 70.41 RCW or this chapter.

(6) The department may deny, suspend, modify, or revoke a license in any case in which it finds that there has been a failure or refusal to comply with the requirements of chapter 70.41 RCW or this chapter.

(a) The department's notice of a denial, suspension, modification, or revocation of a license will be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest a license decision.

(b) A license applicant or holder contesting a department license decision will within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the office of the Adjudicative Clerk, Department of Health, PO Box 47879, Olympia, WA 98504-7879; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act chapter 34.05 RCW, this chapter, and chapters 246-08 and 246-10 WAC. If a provision in this chapter conflicts with chapter 246-08 or 246-10 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-045, filed 1/28/99, effective 3/10/99.]

WAC 246-320-065 Exemptions, alternative methods, and interpretations. The purpose of this section is to provide hospitals a mechanism to request an interpretation, exemption, or approval to use an alternative method. The provisions of this chapter are not intended to prevent use of

any systems, materials, alternate design, or methods of construction as alternatives to those prescribed by these rules.

(1) A hospital requesting exemption from the provisions of this chapter must submit a written request to the department asking for an exemption. The request must specify the section or sections, explain the reason for the exemption and, when appropriate, include supporting documentation.

(2) A hospital requesting approval for use of alternative materials, design, and methods must submit a written request to the department asking for approval to use an alternative. The request must explain the reason(s) for the use of an alternative and must be supported by technical documentation.

(3) The department may:

(a) Exempt a hospital from complying with portions of this chapter when:

(i) The hospital complies with subsection (1) of this section.

(ii) After review and consideration, such exemption will not:

(A) Negate the purpose and intent of these rules;

(B) Place the safety or health of the patients in the hospital in jeopardy;

(C) Lessen any fire and life safety or infection control provision of other codes or regulations; and

(D) Effect any structural integrity of the building;

(b) Approve the use of alternative materials, designs, and methods when:

(i) The hospital complies with subsection (2) of this section; and

(ii) After review and consideration, such alternative:

(A) Meets the intent and purpose of these rules; and

(B) Is at least equivalent to the methods prescribed in these rules.

(4) A hospital requesting an interpretation of a rule or regulation contained in this chapter must submit a written request to the department. The request must specify the section or sections for which an interpretation is needed and details of the circumstances to which the rule is being applied. The hospital must provide any other information the department deems necessary.

(5) The department will, in response to a written request, send a written interpretation of a rule or regulation within thirty calendar days after the department has received complete information relevant to the requested interpretation.

(6) The department and hospital will keep a copy of each exemption or alternative granted or interpretation issued pursuant to the provisions of this section on file and available at all times.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-065, filed 1/28/99, effective 3/10/99.]

WAC 246-320-085 Single license to cover two or more buildings—When permissible. The purpose of this section is to allow a single hospital license to cover more than one building.

The department may issue a single hospital license to include two or more buildings, provided:

(1) The applicant or hospital:

(a) Meets the licensure requirements of chapter 70.41 RCW and this chapter; and

(b) Operates the multiple buildings as a single integrated system with:

(i) Governance by a single authority or body over all buildings or portions of buildings under the single license; and

(ii) A single medical staff for all hospital facilities under the single license;

(2) The hospital arranges for safe, appropriate, and adequate transport of patients between buildings.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-085, filed 1/28/99, effective 3/10/99.]

WAC 246-320-105 Criminal history, disclosure, and background inquiries. The purpose of this section is to ensure criminal history background inquiries are conducted for any employee or prospective employee who has or will have unsupervised access to children, vulnerable adults, and developmentally disabled adults.

(1) Hospitals will:

(a) Require a disclosure statement as specified under RCW 43.43.834 for each prospective employee, volunteer, contractor, student, and any other person associated with the licensed hospital having unsupervised access to:

(i) Children under sixteen years of age;

(ii) Vulnerable adults as defined under RCW 43.43.830; and

(iii) Developmentally disabled individuals;

(b) Require a Washington state patrol background inquiry as specified in RCW 43.43.834 for each prospective employee, volunteer, contractor, student, and any other person applying for association with the licensed hospital prior to allowing the person unsupervised access to:

(i) Children under sixteen years of age;

(ii) Vulnerable adults as defined under RCW 43.43.830; and

(iii) Developmentally disabled individuals.

(2) The department will:

(a) Review records required under this section;

(b) Investigate allegations of noncompliance with RCW 43.43.830 through 43.43.842, when necessary, in consultation with law enforcement personnel; and

(c) Use information collected under this section solely for the purpose of determining eligibility for licensure or relicensure as required under RCW 43.43.842.

(3) The department may require the hospital to complete additional disclosure statements or background inquiries, if the department has reason to believe that offenses specified under RCW 43.43.830 have occurred since completion of the previous disclosure statement or background inquiry, for any person associated with the licensed facility having unsupervised access to:

(a) Children under sixteen years of age;

(b) Vulnerable adults as defined under RCW 43.43.830; and

(c) Developmentally disabled individuals.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-105, filed 1/28/99, effective 3/10/99.]

WAC 246-320-125 Governance. The purpose of the governance section is to provide organizational guidance and

oversight and to ensure resources and staff to support safe and adequate patient care.

The governing authority will:

(1) Adopt and periodically review bylaws which address legal accountabilities and responsibilities. Bylaws will provide for medical staff communication and conflict resolution with the governing authority;

(2) Establish and review governing authority policies, promote performance improvement, and provide for organizational management and planning;

(3) Establish a process for selecting and periodically evaluating a chief executive officer;

(4) Establish and appoint a medical staff; and

(5) Approve bylaws, rules, and regulations as adopted by the medical staff before they can become effective.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-125, filed 1/28/99, effective 3/10/99.]

WAC 246-320-145 Leadership. The purpose of the leadership section is to ensure care is provided consistently throughout the hospital and in accordance with patient and community needs.

The hospital leaders will:

(1) Design hospital-wide patient care services and define department specific scope of services appropriate to the scope and level of care required by the patients served and resources available; and

(a) Approve the scope of service of each department;

(b) Integrate and coordinate patient care services; and

(c) Provide for the uniform performance of patient care processes;

(2) Ensure all patients have access to safe and appropriate care;

(3) Establish and implement processes for:

(a) Gathering, assessing and acting on information regarding patient and family satisfaction with the services provided; and

(b) Complaint resolution for patients, families, employees, providers and others;

(4) Plan, promote, and conduct organization-wide performance-improvement activities to provide effective leadership and coordinated delivery of patient care;

(5) Ensure clinical services are provided in a timely manner;

(6) Ensure nursing policies and procedures, nursing standards of patient care, and standards of nursing practices are established and approved by the nurse executive or a designee(s), and nursing services are directed by:

(a) A nurse executive; or

(b) An identified registered nurse leader on a team to function at the executive level;

(7) Determine who has the authority to establish and approve hospital policies;

(8) Ensure individuals conducting business in the hospital comply with hospital policies and procedures;

(9) Adopt and implement policies and procedures in accordance with chapter 26.44 RCW to ensure suspected abuse to a child, adult dependent or developmentally disabled person is reported within one administrative day to:

(a) Local police or appropriate law enforcement agency;

(b) The department of health; or

(c) Other state agencies as appropriate;

(10) Notify the department whenever any of the following events have been confirmed to have occurred:

(a) An unanticipated death or major permanent loss of function, not related to the natural course of a patient's illness or underlying condition;

(b) A patient suicide while the patient was under care in the hospital;

(c) An infant abduction or discharge to the wrong family;

(d) Sexual assault or rape of a patient or staff member while in the hospital;

(e) A hemolytic transfusion reaction involving administration of blood or blood products having major blood group incompatibilities;

(f) Surgery performed on the wrong patient or wrong body part;

(g) A failure or major malfunction of a facility system such as the heating, ventilation, fire alarm, fire sprinkler, electrical, electronic information management, or water supply which affects any patient diagnosis, treatment, or care service within the facility; or

(h) A fire which affects any patient diagnosis, treatment, or care area of the facility.

(11) Provide notification to the department as required in subsection (10) of this section within two administrative business days of hospital leaders learning of the confirmed event. The hospital is encouraged to confirm these events through a review or assessment by the hospital quality improvement or risk management processes. Each notice to the department:

(a) Must include:

(i) The hospital's name;

(ii) The type of event which is being reported from subsection (10) of this section; and

(iii) The date the event occurred;

(b) Will allow the department to be informed of events which in the interest of the public will be reviewed to determine if the department must either conduct an investigation or review the event during the next regularly scheduled onsite licensing survey;

(c) Will be confidentially maintained by the department, in accordance with the protections of the Public Disclosure Act, chapter 42.17 RCW, and other applicable laws and reporting requirements provided in RCW 70.41.150, 70.41.200, and 70.41.210; and

(d) Does not relieve a hospital from complying with any other applicable reporting or notification requirements, such as those relating to law enforcement or professional regulatory agencies.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-145, filed 1/28/99, effective 3/10/99.]

WAC 246-320-165 Management of human resources. The purpose of the management of human resources section is to ensure the hospital provides competent staff consistent with scope of services.

Hospitals will:

(1) Establish, review, and update written job descriptions for each job classification;

(2) Conduct periodic staff performance reviews;

(3) Ensure qualified and competent staff are available to operate each department;

(4) Ensure supervision of staff;

(5) Document verification of current staff licensure, certification, or registration;

(6) Complete tuberculosis screening for new and current employees consistent with the current guidelines of the Centers for Disease Control and Prevention (CDC) as defined by WAC 246-320-99902(15);

(7) Provide orientation to the work environment;

(8) Provide information on infection control to staff upon hire and annually which includes:

(a) Education on general infection control in accordance with WAC 296-62-08001 bloodborne pathogens exposure control; and

(b) General and department specific infection control measures related to the work of each department in which the staff works; and

(9) Establish and implement an education plan that verifies or arranges for the appropriate education and training of staff on prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-165, filed 1/28/99, effective 3/10/99.]

WAC 246-320-185 Medical staff. The purpose of the medical staff section is to contribute to a safe and adequate patient care environment through the development of a medical staff structure and mechanisms to assure consistent clinical competence.

The hospital medical staff will:

(1) Adopt medical staff bylaws, rules, and regulations that define the medical staff, the organizational structure of the medical staff and address:

(a) Qualifications for membership;

(b) Verification of application data;

(c) Appointment process;

(d) Reappointment process;

(e) The length of appointment and reappointment;

(f) Process for granting of delineated clinical privileges;

(g) Provision for continuous care of patients;

(h) Assessment of credentialed practitioner's performance; and

(i) Due process;

(2) Include licensed physicians and may include other individuals granted privileges by the governing authority to provide patient care services; and

(3) Forward recommendations for membership, initial, renewed, or revised clinical privileges, in accordance with the bylaws, rules and regulations, and policies of the medical staff to the governing authority for action.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-185, filed 1/28/99, effective 3/10/99.]

WAC 246-320-205 Management of information. The purpose of the management of information section is to obtain, manage, and use information to improve patient outcomes and the performance of the hospital in patient care, governance, management, and support services.

Hospitals will:

(1) Facilitate patient care by providing medical staff and other practitioners timely access to information systems, resources, and services;

(2) Maintain confidentiality, security, and integrity of data and information;

(3) Initiate and maintain a medical record for every individual assessed or treated including a process to review records for completeness, accuracy, and timeliness. Medical records must:

(a) Contain information to identify the patient, the patient's clinical data to support the diagnosis, course and results of treatment, author identification, consent documents, and promote continuity of care;

(b) Be accurately written, dated, timed, promptly filed, retained in accordance with RCW 70.41.190 and chapter 5.46 RCW, and accessible;

(c) Indicate:

(i) The legally authorized practitioner authenticated the medical record after the record was transcribed; and

(ii) Entries are dated and authenticated in a timely manner;

(d) Include verbal orders by authorized individuals which are accepted and transcribed by qualified personnel;

(4) Establish a systematic method for identifying each medical record(s) to allow ready identification of area of service, filing, and retrieval of all the patient's record(s); and

(5) Adopt and implement policies and procedures that address:

(a) Access to and release of confidential data in medical records in accordance with chapter 70.02 RCW; and

(b) Transmittal of pertinent medical data to ensure continuity of care.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-205, filed 1/28/99, effective 3/10/99.]

WAC 246-320-225 Improving organizational performance. The purpose of the improving organizational performance section is to ensure that performance improvement activities of staff, medical staff, and outside contractors result in continuous improvement of patient health outcomes.

Hospitals will:

(1) Have a hospital-wide approach to process design and performance measurement, assessment, and improvement of patient care services in accordance with RCW 70.41.200 and including, but not limited to:

(a) A written performance improvement plan that is periodically evaluated and approved by the governing authority;

(b) Performance improvement activities which are collaborative and interdisciplinary and include at least one member of the governing authority; and

(c) Review of serious or undesirable patient outcomes in a timely manner;

(2) Systematically collect and assess data on important processes or outcomes related to patient care and organization functions. The hospital must prioritize and take appropriate action to improve and/or continue measurement in

response to data assessment. The hospital will collect and assess data including, but not limited to:

(a) Processes or outcomes related to:

(i) Operative, other invasive, and noninvasive procedures that place patients at risk;

(ii) Infection rates;

(iii) Mortality;

(iv) Medication use;

(v) Hospital incurred injuries, such as, but not limited to, falls and restraint use;

(vi) Events listed in WAC 246-320-145 (10)(a) through (f);

(vii) Discrepancies or patterns of discrepancies between preoperative and postoperative (including pathologic) diagnosis, including those identified during the pathologic review of specimens removed during surgical or invasive procedures;

(viii) Significant adverse drug reactions (as defined by the hospital);

(ix) Confirmed transfusion reactions;

(x) Adverse events or patterns of adverse events during anesthesia use; and

(xi) Other hospital specific measurements;

(b) The needs, expectations, and satisfaction of patients; and

(c) Quality control and risk management activities.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-225, filed 1/28/99, effective 3/10/99.]

WAC 246-320-245 Patient rights and organizational ethics. The purpose of the patient rights and organizational ethics section is to help improve patient outcomes by respecting each patient and conducting all relationships with patients and the public in an ethical manner.

Hospitals will:

(1) Provide patients with a written statement of patients rights;

(2) Respect, inform, and support a patient's right to treatment and service by adopting and implementing policies and procedures that:

(a) Ensure the patient's right to:

(i) Confidentiality, privacy, security, complaint resolution, spiritual care, and communication. If communication restrictions are necessary for patient care and safety, they are documented and explained to the patient and family;

(ii) Access protective services; and

(iii) Be involved in all aspects of their care including:

(A) Their right to refuse care and treatment; and

(B) Resolving dilemmas about care decisions;

(b) Result in:

(i) Obtaining informed consent;

(ii) Participation of family in care decisions when appropriate;

(c) Address ethical issues in patient care, including:

(i) Obtaining and honoring advance directives;

(ii) Withholding resuscitative services and forgoing or withdrawing life-sustaining treatment; and

(iii) Providing care at the end of life;

(d) Ensure procurement and donation of organs and other tissues, if done, is in accordance with RCW 68.50.500 and 68.50.560, medical staff input and family/surrogate decision-makers direction;

(e) Address research, investigation, and clinical trials including:

(i) Internal procedures to authorize the research;

(ii) Assurance that practitioners follow informed consent laws; and

(iii) Assurance that if the patient refuses to participate, their refusal will not compromise their access to services.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-245, filed 1/28/99, effective 3/10/99.]

WAC 246-320-265 Infection control program. The purpose of the infection control program section is to identify and reduce the risk of acquiring and transmitting nosocomial infections and communicable diseases between patients, employees, medical staff, volunteers, and visitors.

Hospitals must develop and implement an infection control program and will:

(1) Designate a member or members of the staff to:

(a) Oversee, review, evaluate, and approve the activities of the infection control program and the infection control aspects of appropriate hospital policies and procedures; and

(b) Provide consultation;

(2) Assure staff managing the infection control program have:

(a) Documented evidence of a minimum of two years experience in a health related field; and

(b) Training in the principles and practices of infection control;

(3) Adopt and implement written policies and procedures consistent with the published guidelines of the centers for disease control and prevention (CDC) regarding infection control in hospitals, to guide the staff. Where appropriate, policies and procedures are specific to the service area and address:

(a) Receipt, use, disposal, processing, or reuse of hospital and nonhospital equipment to assure prevention of disease transmission;

(b) Prevention of cross contamination between soiled and clean items during sorting, processing, transporting, and storage;

(c) Environmental management and housekeeping functions, including:

(i) The process for approval of disinfectants, sanitation procedures, and equipment;

(ii) Cleaning areas used for surgical procedures as appropriate, before, between, and after cases;

(iii) General hospital-wide daily and periodic cleaning; and

(iv) A laundry and linen system that will ensure:

(A) The supply of linen/laundry is adequate to meet the needs of the hospital and patients;

(B) Standards used for processing linens assure that clean linen/laundry is free of toxic residues and within industry standard pH range(s); and

(C) Processing and storage in accordance with WAC 246-320-595 (3);

(d) Occupational health consistent with current practice;

(e) Attire;

(f) Traffic patterns;

(g) Antisepsis and hand washing;

(h) Scrub technique and surgical preparation;

(i) Biohazardous waste management in accordance with applicable federal, state, and local regulations;

(j) Barrier and transmission precautions; and

(k) Pharmacy and therapeutics; and

(4) Establish and implement a plan for:

(a) Public health coordination, including a system for reporting communicable diseases in accordance with chapter 246-100 WAC Communicable and certain other diseases; and

(b) Surveillance and investigation consistent with WAC 246-320-225 Improving organizational performance.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-265, filed 1/28/99, effective 3/10/99.]

WAC 246-320-285 Pharmacy services. The purpose of the pharmacy services section is to assure that patient pharmaceutical needs are met in a planned and organized manner.

Hospitals must meet the requirements in chapter 246-873 WAC board of pharmacy, and will:

(1) Prepare, dispense, and administer medications in accordance with current law, regulation, licensure, and professional standards of practice;

(2) Assure medication use processes are organized and systematic throughout the hospital under direction of a pharmacist and coordinated with the medical staff;

(3) Have a process for selection of medications based on objective evaluation of their relative therapeutic merits, safety, and cost; and

(4) Adopt and implement policies and procedures that support safe storing, handling, managing, controlling, prescribing, dispensing, and administering medications in accordance with chapter 246-873 WAC board of pharmacy and address:

(a) Prescribing and procuring medications not available on-site;

(b) Ensuring prescriptions or orders are verified and patients are identified before medication is administered; and

(c) Ensuring medication effects on patients are monitored and documented.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-285, filed 1/28/99, effective 3/10/99.]

WAC 246-320-305 Food and nutrition services. The purpose of the food and nutrition services section is to assure that patients nutritional needs are met in a planned and organized manner.

Hospitals will:

(1) Designate an individual who is qualified by experience, education, or training to be responsible for management of food and nutrition services;

(2) Designate a registered dietitian to be responsible for policies and procedures which address providing adequate nutritional care for patients;

(3) Have a registered dietitian who is available to assess nutritional status and plan, when indicated by a patient's individual nutritional risk screen;

(4) Develop and regularly update an interdisciplinary plan for medical nutritional therapy based on current standards for patients at nutritional risk. Monitor and document each patient's response to the medical nutritional therapy plan in the medical record;

(5) Provide meals and document, implement, and monitor a system to assure meals are nutritionally balanced, planned in advance, and respect patient's cultural diversity; and

(6) Adopt and implement policies and procedures to assure that food service complies with chapter 246-215 WAC Food service.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-305, filed 1/28/99, effective 3/10/99.]

WAC 246-320-325 Laboratory, imaging, and other diagnostic, treatment or therapeutic services. Hospitals will:

(1) If providing laboratory services, adopt and implement policies and procedures which require availability of pathology and clinical laboratory services on a timely basis and reflect accepted standards of care for those services;

(2) If providing imaging services, adopt and implement policies and procedures which reflect accepted standards of care for that service; and

(3) If providing other diagnostic, treatment or therapeutic services, adopt and implement policies and procedures which reflect accepted standards of care for those services.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-325, filed 1/28/99, effective 3/10/99.]

WAC 246-320-345 Inpatient care services. The purpose of the inpatient care services section is to guide the development of the plan for patient care. This is accomplished by ensuring availability of materials and resources and through establishing, monitoring, and enforcing policies and procedures that promote the delivery of quality health care.

Hospitals will:

(1) Provide sufficient and appropriate personnel, space, equipment, reference materials, and supplies for the care and treatment of patients;

(2) Have a registered nurse in the hospital at all times and available for consultation;

(3) Have a mechanism to plan and document care that is provided in an interdisciplinary and collaborative manner, including:

(a) Development of an individualized patient plan of care, when appropriate; and

(b) Periodic review and revision based on reassessment of patient condition;

(4) Adopt and implement patient care policies and procedures that are designed to guide personnel, and review periodically, and revise as necessary to reflect current practice;

(5) Have patient care policies and procedures which address:

(a) Criteria for admission of patients to general and specialized patient care service areas;

(b) Reliable method for personal identification of each patient;

(c) Conditions that require transfer of patients within the facility to specialized patient care areas and to outside facilities;

(d) Identifying potential patients who are organ and/or tissue donors;

(e) Patient safety measures;

(f) Staff access to patient areas;

(g) Use of restraints;

(h) Patient care orders, including:

(i) Who can give and receive orders as defined by the hospital and consistent with professional licensing laws;

(ii) Written orders authenticated by a legally authorized practitioner for all drugs, intravenous solutions, blood, medical treatments, and nutrition; and

(iii) Authentication of orders in a timely manner;

(i) Use of preestablished patient care guidelines or protocols. When used, they must be documented in the medical record and preapproved or authenticated by an authorized practitioner;

(j) Care and handling of persons whose conditions require special medical or medical-legal consideration;

(k) Medications meeting requirements in chapter 246-873 WAC board of pharmacy and WAC 246-320-285 Pharmacy services;

(l) A hospital-approved procedure for double checking certain drugs, biologicals, and agents by appropriately licensed personnel;

(m) Emergency drugs, including:

(i) Immediate access; and

(ii) Dosages appropriate to the patient population;

(n) Preparation and administration of intravenous solutions, medications, and admixtures developed under the direction of a pharmacist;

(o) Preparation and administration of blood and blood products;

(p) Anesthesia services; and

(q) Discharge planning;

(6) Complete and document:

(a) An initial assessment of each patient's physical condition, emotional, and social needs. The assessment is based upon the patient's diagnosis, care setting, desire for care, response to any previous treatment, consent to treatment, and education needs. Initial assessment includes:

(i) Patient history and physical assessment;

(ii) Current needs;

(iii) Need for discharge planning; and

(iv) Immunization status for pediatric patients;

(b) Current physical examination, within thirty days prior to admission, with update as needed by an authorized practitioner on a timely basis if patient status has changed;

(c) Additional specialized assessments when warranted by the patient's condition or needs, including:

(i) Nutritional status;

(ii) Functional status; and

(iii) Social, psychological, and/or physiological status;

(d) Reassessments in accordance with plan of care and patient's condition; and

(e) Discharge plans when appropriate, coordinated with:

(i) Inpatient and family or caregiver as appropriate; and

(ii) Receiving agency or agencies, when necessary.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-345, filed 1/28/99, effective 3/10/99.]

WAC 246-320-365 Specialized patient care services. The purpose of the specialized patient care services section is to guide the development of the plan for patient care. This is accomplished by ensuring availability of materials and resources and through establishing, monitoring, and enforcing policies and procedures that promote the delivery of quality health care in specialized patient care areas.

Hospitals will:

(1) Meet the requirements in Inpatient care services, WAC 246-320-345;

(2) Adopt and implement policies and procedures which address accepted standards of care for each specialty service;

(3) Assure physician oversight for each specialty service by a physician with experience in those specialized services;

(4) Assure staff for each nursing service area are supervised by a registered nurse who provides a leadership role to plan, provide, and coordinate care;

(5) If providing surgery and interventional services:

(a) Adopt and implement policies and procedures that address appropriate access:

(i) To areas where invasive procedures are performed; and

(ii) To information regarding practitioner's delineated privileges for operating room staff;

(b) Provide:

(i) Emergency equipment, supplies, and services available in a timely manner and appropriate for the scope of service; and

(ii) Separate refrigerated storage equipment with temperature alarms, when blood is stored in the surgical department;

(6) If providing a post anesthesia recovery unit (PACU), adopt and implement written policies and procedures requiring:

(a) The availability of an authorized practitioner in the facility capable of managing complications and providing cardiopulmonary resuscitation for patients when patients are in the PACU; and

(b) The immediate availability to the PACU of a registered nurse trained and current in advanced cardiac life support measures;

(7) If providing obstetrical services:

(a) Have capability to perform cesarean sections twenty-four hours per day; or

(b) Meet the following criteria when the hospital does not have twenty-four hour cesarean capability:

(i) Limit planned obstetrical admissions to "low risk" obstetrical patients as defined in WAC 246-329-010(13) childbirth centers;

(ii) Inform each obstetrical patient in writing, prior to the planned admission, of the hospital's limited obstetrical services as well as the transportation and transfer agreements;

(iii) Maintain current written agreements for adequately staffed ambulance and/or air transport services to be available twenty-four hours per day; and

(iv) Maintain current written agreements with another hospital to admit the transferred obstetrical patients;

(c) Ensure one licensed nurse trained in neonatal resuscitation is in the hospital when infants are present;

(8) If providing an intermediate care nursery, have nursing, laboratory, pharmacy, radiology, and respiratory care services appropriate for infants:

(a) Available in a timely manner; and

(b) In the hospital during assisted ventilation;

(c) Ensure one licensed nurse trained in neonatal resuscitation is in the hospital when infants are present;

(9) If providing a neonatal intensive care nursery, have:

(a) Nursing, laboratory, pharmacy, radiology, and respiratory care services appropriate for neonates available in the hospital at all times;

(b) An anesthesia practitioner, neonatologist, and a pharmacist on call and available in a timely manner twenty-four hours a day; and

(c) One licensed nurse trained in neonatal resuscitation in the hospital when infants are present;

(10) If providing a critical care unit or services, have:

(a) At least two licensed nursing personnel skilled and trained in care of critical care patients on duty in the hospital at all times when patients are present, and:

(i) Immediately available to provide care to patients admitted to the critical care area; and

(ii) Trained and current in cardiopulmonary resuscitation including at least one registered nurse with:

(A) Training in the safe and effective use of the specialized equipment and procedures employed in the particular area; and

(B) Successful completion of an advanced cardiac life support training program; and

(b) Laboratory, radiology, and respiratory care services available in a timely manner;

(11) If providing an alcoholism and/or chemical dependency unit or services:

(a) Adopt and implement policies and procedures that address development, implementation, and review of the individualized treatment plan, including the participation of the multidisciplinary treatment team, the patient, and the family, as appropriate;

(b) Ensure provision of patient privacy for interviewing, group and individual counseling, physical examinations, and social activities of patients; and

(c) Provide staff in accordance with WAC 246-324-170(3);

(12) If providing a psychiatric unit or services:

(a) Adopt and implement policies and procedures that address development, implementation, and review of the individualized treatment plan, including the participation of the multidisciplinary treatment team, the patient, and the family, as appropriate;

(b) Ensure provision of patient privacy for interviewing, group and individual counseling, physical examinations, and social activities of patients;

(c) Provide staff in accordance with WAC 246-322-170(3); and

(d) Provide:

(i) Separate patient sleeping rooms for children and adults;

(ii) Access to at least one seclusion room;

(iii) For close observation of patients;

(13) If providing a long-term care unit or services, provide an activities program designed to encourage each long-term care patient to maintain or attain normal activity and achieve an optimal level of independence;

(14) If providing an emergency care unit or services, provide basic, outpatient emergency care including:

(a) Capability to perform emergency triage and medical screening exam twenty-four hours per day;

(b) At least one registered nurse skilled and trained in care of emergency department patients on duty in the hospital at all times, and:

(i) Immediately available to provide care; and

(ii) Trained and current in advanced cardiac life support;

(c) Names and telephone numbers of medical and other staff on call must be posted; and

(d) Communication with agencies as indicated by patient condition;

(15) If providing renal dialysis service:

(a) Meet WAC 246-320-99902(2) for:

(i) The cleaning and sterilization procedures if dialyzers are reused;

(ii) Water treatment, if necessary to ensure water quality; and

(iii) Water testing for bacterial contamination and chemical purity;

(b) Test dialysis machine for bacterial contamination monthly or demonstrate a quality assurance program establishing effectiveness of disinfection methods and intervals;

(c) Take appropriate measures to prevent contamination, including backflow prevention in accordance with WAC 246-320-525 (4)(a);

(d) Provide for the availability of any special dialyzing solutions required by a patient; and

(e) Through a contract provider, that provider must meet the requirements in this section.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-365, filed 1/28/99, effective 3/10/99.]

WAC 246-320-385 Outpatient care services. The purpose of the outpatient care services section is to guide the development of the plan for patient care. This is accomplished by ensuring availability of materials and resources and through establishing, monitoring, and enforcing policies and procedures that promote the delivery of quality health care.

Hospitals will:

(1) Meet requirements in WAC 246-320-345 (1), (3), and (4) inpatient care services;

(2) Assure appropriate physician oversight for outpatient services;

(3) Provide patient services in accordance with a written order or protocol by an authorized practitioner; and

(4) Explain a patient's plan of care, when needed, to the patient, their family, and as appropriate, social network and support system.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-385, filed 1/28/99, effective 3/10/99.]

WAC 246-320-405 Management of environment for care. The purpose of the management of environment for care section is to reduce and control environmental hazards and risks, prevent accidents and injuries, and maintain safe conditions for patients, visitors, and staff.

(1) The hospital will designate a person or persons responsible to develop, implement, monitor, and follow-up on safety, security, hazardous materials, emergency preparedness, life safety, patient related technology, utility system, and physical plant elements of the management plan.

(2) Safety. The hospital will:

(a) Establish and implement a plan to:

(i) Maintain a physical environment free of hazards; and

(ii) Reduce the risk of injury to patients, staff, and visitors;

(b) Report and investigate safety related incidents and when appropriate correct and/or take steps to avoid reoccurrence in the future; and

(c) Educate and review periodically with staff, policies and procedures relating to safety and job-related hazards.

(3) Security. The hospital will:

(a) Establish and implement a plan to maintain a secure environment for patients, visitors, and staff, including a plan to prevent abduction of patients;

(b) Educate staff on security procedures; and

(c) If they have a designated security staff, assure security staff have a minimum level of training and competency commensurate with their assigned responsibility, as defined by the hospital.

(4) Hazardous materials and waste. The hospital will:

(a) Establish and maintain a program to safely control hazardous materials and waste in accordance with applicable federal, state, and local regulations;

(b) Provide space and equipment for safe handling and storage of hazardous materials and waste;

(c) Investigate all hazardous materials or waste spills, exposures, and other incidents, and report to appropriate agency(s);

(d) Educate staff on policies and procedures relating to safe control of hazardous materials and waste.

(5) Emergency preparedness. The hospital will:

(a) Establish and implement a disaster plan designed to meet both internal and external disasters. The plan is:

(i) Specific to the hospital;

(ii) Relevant to the area;

(iii) Internally implementable, twenty-four hours a day, seven days a week; and

(iv) Reviewed and revised periodically;

(b) Ensure the disaster plan identifies:

(i) Who is responsible for each aspect of the plan; and

(ii) Essential and key personnel who would respond to a disaster;

(c) Include in the plan:

(i) Provision for staff education and training; and

(ii) A debriefing and evaluation after each disaster incident or drill.

(6) Life safety. The hospital will:

(a) Establish and implement a plan to maintain a fire-safe environment of care that meets fire protection requirements established by the Washington state patrol, fire protection bureau;

(b) Investigate fire protection deficiencies, failures, and user errors; and

(c) Orient, educate, and drill staff on policies and procedures relating to life safety management and emergencies.

(7) Patient related technologies. The hospital will:

(a) Establish and implement a plan to:

(i) Complete a technical and an engineering review to ensure that patient related technology will function safely and with appropriate building support systems;

(ii) Inventory all patient related technologies that require preventive maintenance;

(iii) Address and document preventive maintenance (PM); and

(iv) Assure quality delivery of service, independent of service vendor or methodology;

(b) Investigate, report, and evaluate procedures in response to system failures; and

(c) Educate staff regarding relevant patient related medical technology.

(8) Utility systems. The hospital will:

(a) Establish and implement a plan to:

(i) Maintain a safe, controlled, comfortable environment;

(ii) Assess and minimize risks of utility system failures, and ensure operational reliability of utility systems;

(iii) Investigate utility systems management problems, failures, or user errors and report incidents and corrective actions; and

(iv) Address and document preventive maintenance (PM);

(b) Educate staff on utility management policies and procedures.

(9) Physical plant. The hospital will provide:

(a) Storage;

(b) Plumbing with:

(i) A water supply providing hot and cold water under pressure which conforms to the quality standards of the department;

(ii) Hot water supplied for bathing and handwashing purposes not exceeding 120°F;

(iii) The cross connection controls meeting requirements in WAC 246-320-525 (4)(a); and

(iv) Medical gas piping meeting requirements in WAC 246-320-99902 (6) and (10);

(c) Ventilation:

(i) To prevent objectionable odors and/or excessive condensation; and

(ii) With air pressure relationships meeting the requirements in WAC 246-320-525 (Table 525-3);

(d) Interior finishes suitable to the function in accordance with WAC 246-320-525(6);

(e) Electrical with:

(i) Patient call systems in accordance with WAC 246-320-525 (Table 525-1); and

(ii) Tamper resistant receptacles in waiting areas and where noted in Table 525-5 and WAC 246-320-99902(3).

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-405, filed 1/28/99, effective 3/10/99.]

WAC 246-320-500 Applicability of WAC 246-320-500 through 246-320-99902. The purpose of the new construction regulations is to provide minimum standards for a safe and effective patient care environment consistent with other applicable rules and regulations without redundancy and contradictory requirements. Rules allow flexibility in achieving desired outcomes and enable hospitals to respond to changes in technologies and health care innovations.

(1) These regulations apply to a hospital as defined in RCW 70.41.020:

(a) Including:

(i) New buildings to be licensed as a hospital;

(ii) Conversion of an existing building or portion thereof for use as a hospital;

(iii) Additions to an existing hospital;

(iv) Alterations to an existing hospital; and

(v) Buildings or portions of buildings licensed as a hospital and used for outpatient care facilities;

(b) Excluding nonpatient care areas used exclusively for administration functions.

(2) The requirements of chapter 246-320 WAC in effect at the time the application, fee, and construction documents are submitted to the department for review will apply for the duration of the construction project.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-500, filed 1/28/99, effective 3/10/99.]

WAC 246-320-505 Design, construction review, and approval of plans. (1) Drawings and specifications for new construction, excluding minor alterations, must be prepared by, or under the direction of, an architect registered under chapter 18.08 RCW. The services of a consulting engineer registered under chapter 18.43 RCW must be used for the various branches of the work where appropriate. The services of a registered professional engineer may be used in lieu of the services of an architect if work involves engineering only.

(2) A hospital must submit construction documents for proposed new construction to the department for review and approval prior to occupying the new construction, as specified in this subsection, with the exception of administration areas that do not affect fire and life safety, mechanical and electrical for patient care areas. Compliance with these standards and regulations does not relieve the hospital of the need to comply with applicable state and local building and zoning codes. The construction documents must include:

(a) A written program containing, at a minimum:

(i) Information concerning services to be provided and operational methods to be used; and

(ii) A plan to show how they will ensure the health and safety of occupants during construction and installation of finishes. This includes taking appropriate infection control measures, keeping the surrounding area free of dust and fumes, and assuring rooms or areas are well-ventilated, unoccupied, and unavailable for use until free of volatile fumes and odors;

(b) Drawings and specifications to include coordinated architectural, mechanical, and electrical work. Each room, area, and item of fixed equipment and major movable equipment must be identified on all drawings to demonstrate that the required facilities for each function are provided; and

(c) Floor plan of the existing building showing the alterations and additions, and indicating:

(i) Location of any service or support areas; and

(ii) Required paths of exit serving the alterations or additions.

(3) A hospital will:

(a) Respond in writing when the department requests additional or corrected construction documents;

(b) Notify the department in writing when construction has commenced;

(c) Submit to the department for review any addenda or modifications to the construction documents;

(d) Assure construction is completed in compliance with the final "department approved" documents; and

(e) Notify the department in writing when construction is completed and include a copy of the local jurisdiction's approval for occupancy.

(4) A hospital will not use any new or remodeled areas until:

(a) The construction documents are approved by the department; and

(b) The local jurisdictions have issued an approval to occupy.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-505, filed 1/28/99, effective 3/10/99.]

WAC 246-320-515 Site and site development. Hospitals will:

(1) Provide a site with:

(a) Adequate utilities meeting requirements in WAC 246-320-525 (6)(a),(i), and (k);

(b) Potable water supply meeting requirements in WAC 246-320-99902(14) and chapter 246-290 WAC Class "A" public water systems or chapter 246-291 WAC Class "B" public water systems;

(c) Natural drainage or properly designed/engineered drainage system;

(d) Public or on-site sanitary sewage utilities meeting requirements in chapter 246-271 WAC Public sewage or chapter 246-272 WAC On-site sewage systems;

(e) Access to community emergency services; and

(f) Convenient access to public transportation where available;

(2) Provide parking area, drives, and walkways:

(a) Convenient for patients, staff, and visitors, while avoiding interference with patient privacy and comfort;

(b) Arranged to prevent conflicting traffic between service, patient, staff, and emergency access vehicles;

(c) With surfaces useable in all weather and traffic conditions; and

(d) Illuminated at night;

(3) Provide service roads and parking for service and emergency vehicles;

(4) Plan sufficient space and location for:

(a) Loading dock that is not adjacent to mechanical air intakes;

(b) Garbage storage and disposal;

(c) Service entrance close to storage and elevators;

(d) Access for emergency vehicles;

(e) Heliport service, if planned; and

(f) Oxygen tank or other bulk gas or liquid storage if planned.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-515, filed 1/28/99, effective 3/10/99.]

WAC 246-320-525 General design. Hospitals will:

(1) Meet all the general design elements in this section for patient care and support areas as described in WAC 246-320-535 through 246-320-99902;

(2) Assure architectural components meet WAC 246-320-99902(9), including:

(a) Aisles between fixed elements having sufficient clear width to allow unimpeded movement of equipment and personnel within rooms or suites;

(b) Ceiling heights in occupied areas or areas intended for patient use must be sufficiently high to meet the functional needs and equipment requirements of the space. Suspended tracks, rails, lights, or other obstructions located in path of travel can not be less than seven feet above finished floor to lowest point of obstruction;

(c) A corridor system throughout the hospital designed for traffic circulation providing patient privacy and preventing through traffic in examination, observation, treatment, and diagnostic areas, with:

(i) Width of eight feet and restrictions of no more than seven inches for nonambulatory patient areas;

(ii) Minimum existing width of seven feet permitted in alteration projects; and

(iii) Five feet width for corridors serving ambulatory patient traffic;

(d) Handrails on both sides of corridors on long-term care units and inpatient orthopedic and rehabilitation units;

(e) Doors:

(i) With minimum clear opening of three feet ten inches for patient care areas and two feet ten inches elsewhere. Existing clear opening of three feet eight inches for patient care areas and two feet six inches elsewhere are permitted during an alteration;

(ii) Designed to prevent swinging into corridor widths, except for small unoccupied spaces less than twenty square feet in area, telephone, electrical closets or barrier-free accessible toilets;

(iii) With provision for staff to gain immediate emergency access to patient occupied rooms or areas;

(iv) Swing outward from toilet rooms, showers, and other small rooms; and

(v) With vision panels in all pairs of opposite swinging doors;

(f) At least one elevator in a multistory hospital designed for patient transport;

(g) Stairways with skid-resistant floor surfaces and ramps with skid-resistant or carpeted floor surfaces;

(h) Design and construction to control the entrance and infestation by pests;

(i) Allowance for satisfactory amount of unobstructed light in twenty-four hour stay patient rooms (except in nurseries) with a clear glass area of at least one-tenth of the floor space meeting the following criteria:

(i) Windows located in an outside wall complying with one of the following:

(A) Twenty feet or more from another building or opposite wall or court; or

(B) Ten feet or more from the property line except when facing on street or public right of way greater than twenty feet in width; or

(ii) Relites into an interior atrium or court where the wall opposite is twenty or more feet from the relite;

(iii) Sills located:

(A) No higher than three feet above the finished floor; and

(B) No higher than four feet above the finished floor in critical care patient rooms;

(iv) Exterior grade a minimum of six inches below the window sill; and

(v) If any operable portions or vents are provided, use sixteen mesh screens to cover the opening;

(3) Provide heating, ventilation, and cooling including:

(a) A heating and cooling system with capacity to maintain a temperature range in accordance with Table 525-3;

(b) Insulated piping and duct systems;

(c) Air balancing of distribution systems to maintain air changes, ventilation requirements, and pressure relationships meeting requirements in Table 525-3;

(d) An air handling duct system meeting requirements in WAC 246-320-99902(5) with:

(i) Fiberglass-lined ducts, if installed, serving sensitive areas with ninety percent efficiency filters installed downstream of the duct lining;

(ii) Fiberglass-lined ducts, if installed, meeting the erosion test method described in UL Publication #181; and

(iii) Fiberglass-lined ducts, if installed, will not be located downstream of humidification units;

(e) Use of space above ceilings for return plenums only in nonsensitive areas where exhaust and return plenums are allowed with:

(i) Exposed insulation on pipes and ducts meeting requirements of American Society for Testing and Materials C107; and

(ii) Cementitious fire proofing used on structure;

(f) Air supply and exhaust locations meeting requirements in WAC 246-320-99902(13), including:

(i) Outdoor air intakes:

(A) Located as far as practical, on directionally different exposures whenever possible, and not less than thirty feet from:

(I) Combustion equipment exhaust stacks or outlets;

(II) Ventilation exhaust outlets from the hospital or adjoining buildings, including fume hoods and ethylene oxide systems, except plumbing vent stacks which may be ten feet away horizontally;

(III) Medical-surgical vacuum and exhaust systems outlets;

(IV) Areas that may collect vehicular exhaust and other noxious fumes; and

(V) Cooling towers;

(B) Which may be close to outlets that exhaust air suitable for recirculation, however, exhaust air must not short-

circuit into the intakes of outdoor air units or fan systems used for smoke control; and

(C) Serving central systems must have the bottom of the intakes located:

(I) As high as practical, but not less than six feet above ground level; or

(II) If installed above the roof, not less than three feet above the roof level;

(ii) Required exhausts:

(A) Located a minimum of ten feet above ground level; and

(B) Located away from doors, occupied areas, and operable windows;

(g) Filters installed in central ventilation or air conditioning systems as follows:

(i) Filter beds and filter efficiencies meeting requirements in Table 525-4;

(ii) Filter bed number two located downstream of the last component of any central air handling unit except:

(A) Steam injection-type humidifier permitted fifteen feet or more downstream of filter bed number two;

(B) Terminal reheat coils permitted downstream of filter bed number two; and

(C) Terminal cooling coils permitted downstream of filter bed number two with additional filtration downstream of coil meeting requirements of filter bed number two;

(iii) Filter frames airtight to the enclosing duct work and provided with gaskets or seals to provide positive seal against air leakage; and

(iv) A manometer or equivalent installed across each filter bed serving sensitive areas of central air systems;

(h) Exhaust hoods or other approved exhaust devices provided over equipment likely to produce excessive heat, moisture, odors, or contaminants, and properly designed for intended use;

(i) Exhaust hoods provided in food preparation in compliance with WAC 246-320-99902(10);

(j) Laboratory hoods or biological safety cabinets constructed for handling infectious materials with:

(i) A minimum face velocity of seventy-five feet per minute at maximum operating level of sash;

(ii) An independent exhaust system with the exhaust fan located at the discharge end of the system;

(iii) Ducts with welded joints or equivalent from the hood to filter enclosure;

(iv) Filters in the exhaust stream rated at 99.97% efficiency by the dioctyl-phthalate (DOP) test method;

(v) Features designed and equipped to permit the safe removal of contaminated filters; and

(vi) Ventilation alarm system;

(k) Laboratory hoods or biological safety cabinets constructed for venting radioactive particulate aerosols in accordance with the Bureau of Radiological Health with:

(i) A minimum face velocity of one hundred feet per minute at maximum operating level of sash;

(ii) An independent exhaust system with exhaust fan at discharge end of system;

(iii) Ducts with welded joints or equivalent from the hood to the filter enclosure;

(iv) Exhaust stream filters with 99.97% efficiency using the DOP test method;

(v) Features designed and equipped to permit the safe removal of contaminated filters; and

(vi) Provisions for washdown;

(l) Laboratory hoods or biological safety cabinets constructed for processing strong oxidizing agents with:

(i) A minimum face velocity of one hundred feet per minute at maximum operating level of sash;

(ii) An independent exhaust system and explosion-proof exhaust fan at discharge end of the system;

(iii) Ducts of welded stainless steel or equivalent throughout the exhaust system; and

(iv) Hood and exhaust duct system equipped with complete coverage washdown facilities;

(m) Exhaust systems for ETO sterilizers with ventilation and monitoring in accordance with manufacturer's recommendations and chapter 296-62 WAC;

(4) Design and install plumbing components meeting requirements in WAC 246-320-99902(14), including:

(a) Backflow prevention:

(i) Devices on plumbing fixtures, equipment, facilities, buildings, premises, or areas which may cause actual or potential cross-connections of systems in order to prevent the backflow of water or other liquids, gases, mixtures, or substances into a water distribution system or other fixtures, equipment, facilities, buildings, or areas; and

(ii) Meeting requirements of WAC 246-320-99902(1) for practices, procedures, interpretations, and enforcement;

(b) Trap primers in floor drains and stand pipes subject to infrequent use;

(c) Wrist, knee, or foot faucet controls or equivalent and gooseneck spouts without aerators on:

(i) Handwash sinks in patient care areas. Handwash sinks for personnel use where intended to control cross infection must be designed to permit hand washing without touching fixtures or bowl and to minimize splash and splatter; and

(ii) Sinks in patient toilet rooms;

(d) Handsfree faucet controls and gooseneck spouts without aerators on scrub sinks;

(e) Drinking fountains or equivalent at locations accessible to the public with at least one on each floor;

(f) Insulation on:

(i) Hot water piping systems;

(ii) Cold water and drainage piping; and

(iii) Piping exposed to outside temperatures;

(g) Hot water supply meeting requirements in WAC 246-320-99902(14);

(h) Equipment to deliver hot water at point of use as follows:

(i) Handwash and bathing fixtures at 120°F or less;

(ii) Laundry:

(A) 160°F or more for laundry washers; or

(B) 120°F or more for laundry washers using chemical sanitization;

(iii) Mechanical dishwashers:

(A) 120°F or more for mechanical dishwashers using chemical sanitization;

(B) 140°F or more for mechanical dishwashers using high temperature sanitization; and

(C) 180°F or more for sanitization cycle in high temperature mechanical dishwashers;

(i) Sewage disposal systems meeting requirements in chapters 246-271 WAC Public sewage and 246-272 WAC On-site sewage systems;

(j) Vacuum and medical gas, and waste gas evacuation systems meeting requirements in WAC 246-320-99902 (6), (8), (11) and Table 525-2;

(k) If the facility is a purveyor of water supply or sewage treatment facilities, they must meet the following additional requirements:

(i) Chapter 246-290 WAC Class "A" public water systems;

(ii) Chapter 246-291 WAC Class "B" public water systems;

(iii) Chapter 246-271 WAC Public sewage; and

(iv) Chapter 246-272 WAC On-site sewage systems;

(5) Provide electrical service meeting the requirements in WAC 246-320-99902(3) including:

(a) General service as follows:

(i) Electrical receptacle outlets meeting requirements in Table 525-5. Provide outlets with ground fault circuit interrupter when installed within five feet of wet areas, bathing facilities, dialysis stations, and at a sink plane or above except when electrical outlets are located in cabinets;

(ii) All patient care areas limited to twelve single electrical receptacle outlets or six duplex electrical receptacle outlets, or equivalent, per twenty amp circuit; and

(iii) Additional electrical receptacle outlets conveniently located to accommodate nonpatient related equipment;

(b) Service to critical care units and areas as follows:

(i) Dedicated circuits to serve designated electrical receptacle outlets located at the head of each bed;

(ii) Capacity limited to six single electrical receptacle outlets or three duplex electrical receptacle outlets or equivalent per twenty amp circuit; and

(iii) Branch circuit panels serving receptacle outlets must be located within the area they serve;

(c) Emergency electrical service with:

(i) Critical emergency power electrical receptacle outlets meeting requirements in Table 525-5; and

(ii) Additional emergency power and lighting meeting requirements in WAC 246-320-99902 (3) and (6);

(d) Lighting fixtures with:

(i) Number, type, and location to provide adequate illumination for the functions of each area;

(ii) A reading light and control, conveniently located for patient use at each bed in the patient rooms;

(iii) Protective lens or diffusers on overhead light fixtures in:

(A) All patient care areas; and

(B) Areas where patient care equipment and supplies are processed;

(iv) A night light or equivalent low level illumination;

(v) Night light switches and general illumination switches located adjacent to the opening side of patient room doors, except in psychiatric patient security and seclusion rooms locate switches outside of the rooms; and

(vi) Lighting fixtures in psychiatric security and seclusion rooms of tamper-resistant design;

(e) Electrical/electronic equipment including:

(i) Communications systems meeting requirements in Table 525-1;

(ii) Nurse call annunciator at department or unit control point and additional control points; and

(iii) Film illuminators, or equivalent, accommodating at least two X-ray films in all areas where films are viewed, except in private offices;

(6) Provide interior finishes suitable to the function of an area including:

(a) Floor finishes with:

(i) Easily cleanable and/or maintainable surfaces;

(ii) Skid-resistant surfaces at entrances and other areas used while wet;

(iii) A coved base integral with floors or top set base with toe tight to the walls; and

(iv) Seamless floors with integral cove base in sensitive areas;

(b) Carpets in areas used by patients, if installed:

(i) Made from easily cleanable and/or maintainable material;

(ii) Constructed to prevent or reduce static build-up;

(iii) With an average pile density of four thousand ounces per cubic yard. Exception: Loop pile carpet with density of five thousand ounce per cubic yard or greater is required in long-term care units;

(iv) With a maximum pile height of.312 inches;

(v) With padding, if used, that is water resistant and permanently bonded to the carpet backing;

(vi) Adhered to the floor;

(vii) With edges covered and top set base with toe at all wall junctures; and

(viii) Are not permitted in any sensitive areas, toilets, bathrooms, and areas where flooding or infection control is an issue;

(c) Ceiling finishes or construction with:

(i) Monolithic or bonded construction in patient rooms of psychiatric nursing units, security and seclusion rooms;

(ii) Easily cleanable or maintainable surfaces;

(iii) Smooth surface without visible joints or crevices in areas where surgical asepsis must be maintained;

(d) Wall finishes with:

(i) Protection from impact in high traffic areas;

(ii) Easily cleanable surfaces;

(iii) Smooth surface without open joints or crevices in areas where surgical asepsis must be maintained; and

(iv) Water-resistant paint, glaze, or similar water-resistant finish extending above the splash line in all rooms or areas subject to splash or spray;

(7) Provide bathrooms and toilet rooms with:

(a) Handwash sinks in each toilet, except where provided in adjoining single patient room, or connecting dressing or locker rooms;

(b) Skid-resistant floor surfaces in tubs and showers;

(c) Backing to support mounting all accessories;

(d) Accessories at bathing facilities, toilets, dressing rooms, and examination rooms, except in psychiatric units as follows:

(i) Toilet paper holder at water closets;

(ii) Towel bar, hook, or ring at bathing facilities; and

(iii) Robe hook;

(e) A mirror and shelving or equivalent at each handwash sink in:

(i) Toilet room;

(ii) Patient room;

(iii) Birthing room;

(iv) Dressing room; and

(v) Locker room, except where located in adjoining toilet room;

(f) Dispensers at all sinks, for single-use towels or equivalent, mounted to avoid contamination from splash and splatter;

(g) Soap dispenser or equivalent at each sink and bathing facility; and

(h) Grab bars that are easily cleanable, resistant to corrosion, functionally designed, and securely mounted:

(i) In areas designed for barrier free access meeting the requirements in WAC 51-40-1106; and

(ii) In areas not designed for barrier free access:

(A) On two sides of each standard bathtub and shower; and

(B) With at least one horizontal grab bar extending eighteen inches or more in front of the water closet;

(8) Provide signage for identification:

(a) Meeting requirements in WAC 51-40-1106; and

(b) Of electric panel boards in accordance with WAC 246-320-99902(3).

Table 525-1 COMMUNICATION SYSTEM

Area/Room Name	WAC	System Type
Surgical Facilities		
Surgery Suite	246-320-635	
All Operating Rooms		MES
PACU	246-320-645	
Recovery Stage 1		MES, PNC
Recovery Stage 2		MES, PNC
Recovery Infants and Pediatrics		MES, PNC
Recovery (Electro Convulsive Therapy)		MES
Patient Holding Area		MES, PNC
Patient Induction		MES, PNC
Outpatient Preoperative		MES, PNC
Obstetrical Services		
OB Cesarean/Surgical	246-320-655	MES
Birthing (Labor Delivery Recovery)	246-320-665	MES, PNC
Infant Station		MES
Adult Station		MES, PNC
Interventional Services	246-320-675	
Cardiology/Angiography		
Cath Labs & Angio Rooms		MES
Endoscopy Recovery		MES
Bronchoscopy		MES
Lithotripsy		MES
Inpatient Services		
Nursing	246-320-685	
Medical & Surgical Beds		MES, PNC
Protective Precaution Room (Transplant)		MES, PNC
Airborne Precaution Room		MES, PNC
Specialized Patient Care Services		
Pediatrics	246-320-695	MES, PNC
Nursery		
Intermediate Care Nursery	246-320-715	MES
NICU	246-320-715	MES
Newborn	246-320-705	MES
Critical Care	246-320-725	
Coronary Care		MES, PNC
Intensive Care		MES, PNC
Alcoholism & Substance Abuse	246-320-735	MES, PNC
Psychiatric	246-320-745	
Psychiatric Activities		MES
Psychiatric Patient		MES
Psychiatric Seclusion		MES
Rehabilitation (Nursing)	246-320-755	MES, PNC
Long-Term Care	246-320-765	MES, PNC

Table 525-1 COMMUNICATION SYSTEM

Area/Room Name	WAC	System Type
Dialysis	246-320-775	PNC
General Requirements		
Nursing Support Area		Annunciator
Inpatient Treatment		MES
Inpatient Exam Rooms		MES
Patient Dressing		PNC
Patient Shower Bathroom & Toilet		PNC
Imaging Services		
General Radiology	246-320-785	
General X-ray, Fluoroscopy		MES
Mammography		MES
Needle Biopsy		MES
CT Scan		MES
MRI		MES
Nuclear Medicine	246-320-795	MES
Diagnostic & Treatment		
Emergency	246-320-805	
Trauma		MES, PNC
Treatment		MES
Exam		MES, PNC
Receiving/Triage		MES
Rehabilitation (Outpatient)	246-320-755	
Physical Therapy & Hydrotherapy		MES

NOTES:

Patient Nurse Calls installed as follows:

- Located at head of bed.
- Signals from toilet and bathing facilities to have distinctive light and distinctive audible signals.
- A properly located signal device mounted no higher than six feet above the floor and activated by a nonconductive pull cord within easy grasp by a patient slumped forward on the floors of either the toilet, bathing facility, or dressing room.
- PNC required in any area not within direct observation of staff.

Medical Emergency Signals installed as follows:

- When MES is part of a nurse call system, it must register by light at corridor door or treatment area and register by light and audible signal at a location where staff are always available.
- Call signals initiated by staff within a department by remote or other means must register at a staff control point from which assistance is always available.
- In areas where PNC are not required, a medical emergency system is a method for staff to signal for immediate assistance. The system must signal where staff are always available and indicate location of emergency.
- Signal device located within easy reach by staff.

When both Patient Nurse Call and Medical Emergency Signal are required, installed as follows:

- Register by light and outside each patient station or register by light and audible signal at the nurse's station.

Abbreviations:

PNC = Patient Nurse Call MES = Medical Emergency Signal

Washington State Hospital Regulatory Reform
Tables of Information
Table 525-2 Medical Gases, Vacuum, and Waste Gas Evacuation

		Number of Outlets Required			
Area/Room Name	WAC	Oxygen	Medical Air	Nitrous Oxide*	Vacuum
Surgical Facilities					
Surgery Suite	246-320-635				
Cystoscopic		1	1		2
Operating Room		2	1	1	2(B)
Operating Patient Holding		1			1
PACU	246-320-645				
Recovery Stage 1		1			2
Recovery Stage 2		1(D)			1(D)
Recovery (ECT)		1			1
Recovery (Infants and Pediatrics)		1	1		1
Obstetrical Services					
OB Cesarean/Surgical	246-320-655	1(A)	1(A)	1	2(A)
Birthing (Labor Delivery Recovery)	246-320-665	1(A)	1(A)		1(A)
Interventional Services	246-320-675				

Washington State Hospital Regulatory Reform
Tables of Information
Table 525-2 Medical Gases, Vacuum, and Waste Gas Evacuation

Area/Room Name	WAC	Number of Outlets Required Oxygen	Medical Air	Nitrous Oxide*	Vacuum
Cardiology/Angiography					
Cath Labs & Angio Rooms		1	1	(C)	2
Electrophysiology		1	1	(C)	2
Endoscopy		1			1
Bronchoscopy		1			1
Lithotripsy		1	1	(C)	1
Inpatient Services					
Nursing, Medical & Surgical	246-320-685	1			1
Protective Precaution Room (Transplant)		1			1
Airborne Precaution Room	246-320-685	1			1
Specialized Patient Care Services					
Pediatrics	246-320-695	1	1		1
Nursery					
Intermediate Care Nursery	246-320-715	2	2		1
NICU	246-320-715	2	2		1
Newborn	246-320-705	1	1		1
Critical Care	246-320-725				
Coronary Care		1	1		2
Intensive Care		1	1		2
Alcoholism & Substance Abuse	246-320-735	1(E)			1(E)
Psychiatric (Medical)	246-320-745	1			1
Rehabilitation (Nursing)	246-320-755	1			1
Long-Term Care	246-320-765	1(D)			1(D)
Dialysis	246-320-775	(D)			(D)
General Requirements					
Treatment & Exam Rooms		1			1
Imaging Services					
General Radiology	246-320-785				
General X-ray, Fluoroscopy		1(D)			1(D)
Mammography		NA	NA	NA	NA
Needle Biopsy		1(D)			1(D)
Ultrasound		1(D)			1(D)
CT Scan		1(D)			1(D)
MRI		1			1
Nuclear Medicine	246-320-795	(E)			(E)
Diagnostic & Treatment					
Emergency	246-320-805				
Trauma		2	1	(C)	2
Treatment		2	1		2
Exam		1			1
Rehabilitation (Outpatient)	246-320-755				
Physical Therapy & Hydrotherapy		NA	NA	NA	NA
Clinical Support Services		NA	NA	NA	NA

* Method for gas evacuation must be provided in areas where nitrous oxide is used.

NOTES

(A) Separate outlets for infants.
(B) If used for delivery, must include A.
(C) Required only when general anesthesia is used.
(D) Portable equipment may be used in a ratio of one for every five bed, stretcher, bassinet, or equivalent with a minimum of one unit.
(E) Portable equipment shall be provided on-site for emergent situations.

Table 525-3 GENERAL PRESSURE RELATIONSHIPS, VENTILATION TEMPERATURE AND HUMIDITY OF CERTAIN HOSPITAL AREAS

Area/Room Name	WAC	Pressure Relationship to Adjacent Areas	Minimum Air Changes of Outdoor Air Per Hour Supplied To Room	Minimum Total Air Changes Per Hour Supplied To Room	All Air Exhausted Directly To Outdoors	Air Recirculated Within Room Units Evacuation	Capacity (°F) to Attain Temperature [11] Cooling	Heating	Individual Room Temp Control	Interpretive Guidelines
Surgical Facilities										
Surgery Suite	246-320-635									
Operating Rooms with [10]		P	3	15	Optional	No[1]	68	76	Yes	Refer to ASHRAE Guidelines for Recommended Humidity Limits for all areas
Recirculating Air Systems										
Operating Rooms with[6]		P	15	15	Yes	No	68	76	Yes	
(All Outdoor Air Systems)										
Sterile Supply Room		P	4	6	Optional	No	-	72	Yes	"
PACU	246-320-645									
Recovery Stage 1		E	2	6	Optional	No[1]	75	75	Yes	"
Recovery Stage 2		E	2	6	Optional	No[1]	75	75	Yes	"
Recovery (ECT)		E	2	4	Optional	No[1]	75	75	Yes	"
Recovery Infants & Pediatrics		E	2	6	Optional	No[1]	75	75	Yes	"
Obstetrical Services										
OB Cesarean/Surgical with[10]	246-320-655	P	3	15	Optional	No[1]	68	76	Yes	"
Recirculating Air Systems										
OB Cesarean/Surgical with[6]	246-320-655	P	15	15	Yes	No	68	76	Yes	"
All Outdoor Air Systems										
Birthing (Labor Delivery Recovery)	246-320-665	P	2	4	Optional	No[1]	75	75	Yes	"
Interventional Services	246-320-675									
Cardiology/Angiography										
Cath Labs & Angio Rooms		P	2	6	Optional	No	75	80	Yes	"
Electrophysiology		P	2	6	Optional	No	75	80	Yes	"
Endoscopy		N or E	2	6	Yes	No	75	80	Yes	"
Bronchoscopy/Cough Inducing Procedures		N	2	12	Yes	No	-	72	Yes	"
Lithotripsy		P	2	4	Optional	Optional	75	75	Yes	"
Inpatient Services										
Nursing	246-320-685									
Medical & Surgical Beds[9]		P	2	4	Optional	Optional	75	75	Yes	"
Protective Precaution Room (Transplant)		P	2	15	Optional	Optional	75	75	Yes	"
Airborne Precaution Room[3]		N	2	12	Yes	No	75	75	Yes	"
Ante Room (if provided)[3]		N or P	2	10	Yes	No	-	-	-	"
Specialized Patient Care Services										
Pediatrics[9]	246-320-695	P	2	4	Optional	Optional	75	75	Yes	"
Nursery										"
Intermediate Care Nursery	246-320-715	P	5	12	Optional	No	75	80	Yes	"
NICU	246-320-715	P	5	12	Optional	No	75	80	Yes	"
Newborn	246-320-705	P	2	6	Optional	No[1]	75	80	Yes	"
Critical Care	246-320-725									
Coronary Care		P	2	6	Optional	No	75	80	Yes	"
Intensive Care		P	2	6	Optional	No	75	80	Yes	"
Alcoholism & Substance Abuse[9]	246-320-735	P	2	4	Optional	Optional	75	75	Yes	"
Psychiatric (Medical)[9]	246-320-745	P	2	4	Optional	Optional	75	75	Yes	"
Rehabilitation (Nursing)[9]	246-320-755	P	2	4	Optional	Optional	75	75	Yes	"
Long-Term Care[9]	246-320-765	P	2	4	Optional	Optional	75	75	Yes	"
Dialysis	246-320-775									
Patient Area		P	2	4	Optional	Optional	75	75	Yes	"
Reuse		N	4	10	Optional	Optional	75	75	Yes	"
Reverse Osmosis		P	2	6	Optional	Optional	75	75	Yes	"
Imaging Services										
General Radiology	246-320-785									

Table 525-3 GENERAL PRESSURE RELATIONSHIPS, VENTILATION TEMPERATURE AND HUMIDITY OF CERTAIN HOSPITAL AREAS

Area/Room Name	WAC	Pressure Relationship to Adjacent Areas	Minimum Air Changes of Outdoor Air Per Hour Supplied To Room	Minimum Total Air Changes Per Hour Supplied To Room	All Air Exhausted Directly To Outdoors	Air Recirculated Within Room Units Evacuation	Capacity (°F) to Attain Temperature [11] Cooling	Heating	Individual Room Temp Control	Interpretive Guidelines
General X-ray, Fluoroscopy		NA	2	6	Optional	Optional	75	80	Yes	"
Mammography		NA	2	6	Optional	Optional	75	80	Yes	"
Needle Biopsy		NA	2	6	Optional	Optional	75	80	Yes	"
CT Scan		NA	2	6	Optional	Optional	75	80	Yes	"
MRI		NA	2	6	Optional	Optional	75	80	Yes	"
Dark Room		N	2	10	Yes	No	-	-	Yes	"
Nuclear Medicine	246-320-795	N	2	6	Yes	No				
Diagnostic & Treatment										
Emergency	246-320-805									
Trauma[2]		P	5	12	Optional	No	68	75	Yes	"
Treatment		N or P	2	6	Optional	Optional	75	75	Yes	"
Exam		N or P	2	6	Optional	Optional	-	72	Yes	"
Rehabilitation (Outpatient)	246-320-755									
Physical Therapy & Hydrotherapy		N	2	6	Optional	Optional	-	80	Yes	"
General Requirements										
Treatment Room		N or P	2	6	Optional	Optional	75	75	Yes	"
Exam Room		N or P	2	6	Optional	Optional	75	75	-	"
Patient Corridor		NA	2	4	Optional	Optional				"
Patient Toilet		N	Optional	10	Yes	No	-	72	No	"
Patient Bathing		N	Optional	10	Yes	No	-	72	No	"
Clean Utility		P	2	4	Optional	Optional	-	72	No	"
Soiled Utility		N	2	10	Yes	No	-	72	No	"
Janitor's Closet		N	Optional	10	Yes	No	-	72	No	"
Medication		P	2	4	Optional	Optional	-	-	-	"
Clinical Support Services										
Receiving Storage and Distribution	246-320-565	NA	NA	NA	NA	NA				"
Central Sterilizing	246-320-575									
Clean Workroom Sterile Storage		P	2	4	Optional	Optional	-	72	No	"
ETO Sterilizer[7]		N	2	10	Yes	No				"
Laundry (Part of CSSR)		N	2	10	Yes	No				"
Soiled Receiving/ Decontamination		N	Optional/2	10	Yes	No	-	72	No	"
Environmental Services	246-320-585	N	2	10	Yes	No	-	72	No	"
Laundry	246-320-595									
Laundry General		N	2	10	Yes	No	-	72	No	"
Soiled Linen Sorting & Storage		N	Optional	10	Yes	No	-	72	No	"
Clean Linen Storage		P	Optional/2	2	Optional	Optional	-	72	No	"
Linen & Trash Chute Room		N	Optional	10	Yes	No	-	72	No	"
Dietary	246-320-605									
Dietary Dry Storage		NA	Optional	2	Optional	No	-	72	No	"
Food Preparation Centers[5]		NA	2	10	Yes	No	-	72	No	"
Ware Washing		N	Optional	10	Yes	No	-	72	No	"
Lab General	246-320-625	N	2	6	Yes	No	-	72	Yes	"
Bacteriology		N	2	6	Yes	No	-	72	Yes	"
Biochemistry		P	2	6	Optional	No	-	72	Yes	"
Cytology		N	2	6	Yes	No	-	72	Yes	"
Glass Washing		N	2	10	Yes	Optional	-	72	Yes	"
Histology		N	2	6	Yes	No	-	72	Yes	"
Media Transfer		P	2	4	Optional	No	-	72	Yes	"
Pathology		N	2	6	Yes	No	-	72	Yes	"
Serology		P	2	6	Optional	No	-	72	Yes	"
Sterilizing		N	Optional	10	Yes	No	-	72	Yes	"
Autopsy		N	2	12	Yes	No	-	72	Yes	"

Table 525-3 GENERAL PRESSURE RELATIONSHIPS, VENTILATION TEMPERATURE AND HUMIDITY OF CERTAIN HOSPITAL AREAS

Area/Room Name	WAC	Pressure Relationship to Adjacent Areas	Minimum Air Changes of Outdoor Air Per Hour Supplied To Room	Minimum Total Air Changes Per Hour Supplied To Room	All Air Exhausted Directly To Outdoors	Air Recirculated Within Room Units Evacuation	Capacity (°F) to Attain Temperature [11] Cooling	Capacity (°F) to Attain Temperature [11] Heating	Individual Room Temp Control	Interpretive Guidelines
Body Holding Nonrefrigerated[4]		N	Optional	10	Yes	No	-	72	Yes	"
Pharmacy	246-320-615	P	2	4	Optional	Optional	-	72	Yes	"

Abbreviations

N=Negative
P=Positive
NA=Not applicable (Continuous Direction Control Not Required)
E=Equal

Notes:

[1] Recirculating room units meeting the filtering requirements for the space may be used.

[2] The term "trauma room" used in Table 525-3 is the operating room space, in the trauma center routinely used for emergency surgery. The first aid room and/or "emergency room" used for general initial treatment of accident victims may be ventilated as quoted for the "treatment room."

[3] The airborne precaution room described in the standards might be used in the average community hospital. The assumption is the precaution procedures will be for infectious patients and the room should also be suitable for normal private patient use when not needed for airborne precaution.

[4] The nonrefrigerated body-holding room would be applicable only for facilities not performing autopsies on-site and using the space for a short period while waiting for body transfer to be completed.

[5] Food preparation centers shall have ventilation systems with an excess of air supply for positive pressure when hoods are not in operation.

[6] The number of air changes may be reduced when areas are not occupied if provisions are made to ensure the number of air changes required is reestablished when the space is occupied.

[7] See WAC 246-320-99902(11) and 296-62-07355 general occupational health standards for ethylene oxide.

[8] Consistent with scope of service and function of room.

[9] For renovations, existing window induction units may remain.

[10] May consider increasing air changes to 5 minimum air changes of outdoor air per hour supplied to room and 25 minimum total air changes per hour supplied to room per ASHRAE Guidelines.

[11] HVAC equipment must be designed to heat or cool to at least temperature shown.

Table 525-4 VENTILATION AND AIR CONDITIONING SYSTEMS FILTER EFFICIENCIES IN HOSPITALS

Area/Room Name	WAC	Filter Bed 1 %	Filter Bed 2 %
Surgical Facilities			
Surgery Suite	246-320-635		
All Operating Rooms		25	90
Organ Transplant		25	90 (A)
PACU	246-320-645		
Recovery Stage 1		25	90
Recovery Stage 2		25	90
Recovery Infants & Pediatrics		25	90
Recovery (ECT)		25	90
Obstetrical Services			
OB Cesarean/Surgical	246-320-655	25	90
Birthing (Labor Delivery Recovery)	246-320-665	25	90 (B)
Interventional Services	246-320-675		
Cardiology/Angiography			
Cath Labs & Angio Rooms		25	90
Endoscopy		25	90
		25	90
Lithotripsy		25	90 (B)
Inpatient Services			
Nursing	246-320-685		
Medical & Surgical Beds		25	90 (B)
Protective Precaution Room (Transplant)		25	90 (A)
Airborne Precaution Room	246-320-685	25	90 (B)
Ante Room (if planned)			
Specialized Patient Care Services			
Pediatrics	246-320-695	25	90 (B)
Nursery			
Intermediate Care Nursery	246-320-715	25	90 (B)

Table 525-4 VENTILATION AND AIR CONDITIONING SYSTEMS FILTER EFFICIENCIES IN HOSPITALS

Area/Room Name	WAC	Filter Bed 1 %	Filter Bed 2 %
NICU	246-320-715	25	90 (B)
Newborn	246-320-705	25	90 (B)
Critical Care	246-320-725		
Coronary Care		25	90 (B)
Intensive Care		25	90 (B)
Alcoholism & Substance Abuse	246-320-735	25	90 (B)
Psychiatric (Medical)	246-320-745	25	90 (B)
Rehabilitation (Nursing)	246-320-755	25	90 (B)
Long-Term Care	246-320-765	25	90 (B)
Dialysis	246-320-775	25	90 (B)
General Requirements			
Treatment Room		25	90 (B)
Exam Room		25	90 (B)
Patient Corridor		25	90 (B)
Patient Toilet		25	90 (B)
Patient Bathing		25	90 (B)
Clean Utility		25	NA
Soiled Utility		25	NA
Janitor's Closet		25	NA
Medication		25	90 (B)
Imaging Services			
General Radiology	246-320-785		
General X-ray, Fluoroscopy		25	90 (B)
Mammography		25	90 (B)
Needle Biopsy		25	90 (B)
CT Scan		25	90 (B)
MRI		25	90 (B)
Nuclear Medicine	246-320-795		
Diagnostic & Treatment			
Emergency	246-320-805		
Trauma		25	90
Treatment		25	90 (B)
Exam		25	90 (B)
Rehabilitation (Outpatient)	246-320-755		
Physical Therapy & Hydrotherapy		25	90 (B)
Clinical Support Services			
Receiving Storage & Distribution	246-320-565	NA	NA
Central Sterilizing	246-320-575	25	90 (B)
Environmental Services	246-320-585	NA	NA
Laundry	246-320-595	80	NA
Dietary	246-320-605		
Food Preparation		80	NA
Storage, Bulk		25	NA
Lab	246-320-625		
Bacteriology		25	90
Biochemistry		25	NA
Cytology		25	NA
Glass Washing		25	NA
Histology		25	NA
Media Transfer		25	90
Pathology		25	NA
Serology		25	NA
Sterilizing		25	90
Autopsy		25	NA
Body Holding Nonrefrigerated		NA	NA

Table 525-4 VENTILATION AND AIR CONDITIONING SYSTEMS FILTER EFFICIENCIES IN HOSPITALS

Area/Room Name	WAC	Filter Bed 1 %	Filter Bed 2 %
Pharmacy	246-320-615	25	90
Administration		25	NA

Notes

(A) 99.9% recirculating air.
(B) 80% acceptable with total outside air.
NA Not applicable.

Filtration requirement in this table does not apply to renovated spaces where recirculation is optional, except for sensitive areas as defined in WAC 246-320-010.

Table 525-5 PATIENT CARE AREA SINGLE ELECTRICAL RECEPTACLE OUTLET REQUIREMENTS

Area/Room Name	WAC	Total	Critical Emergency Power	Special Requirements (Hospital Grade)
Surgical Facilities				
Surgery Suite	246-320-635			
All Operating Rooms		16	12	Hospital Grade
PACU	246-320-645			
Recovery Stage 1		6	4	Hospital Grade
Recovery Stage 2		4	2	Hospital Grade
Recovery Infants and Pediatrics		6	4	Hospital Grade
Recovery (ECT)		4	2	Hospital Grade
Obstetrical Services				
OB Cesarean/Surgical	246-320-655	16	12	Hospital Grade
Birthing (Labor Delivery Recovery)	246-320-665	6	2	Hospital Grade
Infant Station		4	2	Hospital Grade
Cardiology/Angiography				
Cath Labs & Angio Rooms		8	4	Hospital Grade
Endoscopy		8	2	Hospital Grade
		8	2	Hospital Grade
Lithotripsy		2	2	Hospital Grade
Inpatient Services				
Nursing				
Medical & Surgical Beds	246-320-685	4	2	Hospital Grade
Protective Precaution Room (Transplant)		4	2	Hospital Grade
Airborne Precaution Room	246-320-685	4	2	Hospital Grade
Specialized Patient Care Services				
Pediatrics	246-320-695	4	2	Hospital Grade (C)
Pediatric Critical Care		14	12	Hospital Grade
Nursery				
Intermediate Care Nursery	246-320-715	8	6	Hospital Grade
NICU	246-320-715	14	12	Hospital Grade
Newborn	246-320-705	4(A)	2(A)	Hospital Grade
Critical Care	246-320-725			
Coronary Care		14	12	Hospital Grade
Intensive Care		14	12	Hospital Grade
Alcoholism & Substance Abuse	246-320-735	2	0	Hospital Grade (C)
Detox beds	246-320-735	4	2	Hospital Grade (C)
Psychiatric (Medical)	246-320-745	4	2	Hospital Grade (C)
Rehabilitation (Nursing)	246-320-755	2	0	Hospital Grade
Long-Term Care	246-320-765	4	2	Hospital Grade
Dialysis (inpatient)	246-320-775	4(B)	2(B)	Hospital Grade
General Nursing Room Requirements				
Treatment Rooms		4	2	Hospital Grade
Exam Rooms		2	0	Hospital Grade (C)

Table 525-5 PATIENT CARE AREA SINGLE ELECTRICAL RECEPTACLE OUTLET REQUIREMENTS

Area/Room Name	WAC	Total	Critical Emergency Power	Special Requirements (Hospital Grade)
Patient Toilet		per written program		
Clean Utility		2	0	
Soiled Utility		2	0	
Imaging Services				
General Radiology	246-320-785	per written program		Hospital Grade
General X-ray, Fluoroscopy		4	0	
Mammography		4	0	
Needle Biopsy		4	0	
CT Scan		4	2	
MRI		4	0	
Nuclear Medicine	246-320-795	4	0	
Diagnostic & Treatment				
Emergency	246-320-805			
Trauma		8	6	Hospital Grade
Treatment		4	2	Hospital Grade
Exam		2	0	Hospital Grade (C)
Rehabilitation (Outpatient)	246-320-755			
Physical Therapy & Hydrotherapy		2	0	Hospital Grade
Clinical Support Services				
Receiving Storage & Distribution	246-320-565	NA	NA	NA
Central Sterilizing	246-320-575	per written program		
Environmental Services	246-320-585	NA	NA	
Laundry	246-320-595	NA	NA	
Dietary	246-320-605	NA	NA	
Lab	246-320-625	per written program		
Critical Equipment		per written program		
Blood Storage		per written program		
Pharmacy	246-320-615	per written program		

Notes
(A) Between every two basinets and according to program.
(B) Each station according to program.
(C) Tamper resistant safety receptacles.
(NA) Not Applicable (no minimum outlet requirement for nonpatient care areas).

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-525, filed 1/28/99, effective 3/10/99.]

WAC 246-320-535 Support facilities. Hospitals will:

(1) Provide staff facilities with:

(a) Space for personal belongings;

(b) A toilet; and

(c) A handwash sink;

(2) Provide clean storage room or area with:

(a) Storage shelves; and/or

(b) Space for carts and equipment;

(3) Provide clean utility room with:

(a) A work counter;

(b) A handwash sink; and

(c) Storage space;

(4) Provide housekeeping supply room with:

(a) A service sink or equivalent;

(b) Soap and towel dispensers or equivalent;

(c) A mop rack;

(d) Storage area for housekeeping carts, supplies, and equipment; and

(e) At least one housekeeping room per floor;

(5) Provide medication distribution and storage in accordance with chapter 246-873 WAC, hospital pharmacy standards, and meeting at least one of the following:

(a) A separate room under visual control of nursing staff located to minimize traffic with:

(i) A handwash sink;

(ii) A working surface;

(iii) Sturdily constructed, lockable drug storage;

(iv) An enclosed cabinet or equivalent for storage;

(v) Storage space for medication cart when appropriate;

(vi) Space and electrical receptacle for refrigerator; and

(vii) Self-closing positive latching locked entry doors; or

(b) Permanently affixed nurse server storage units with:

(i) Convenient access to a refrigerator and hand washing sink;

(ii) A work surface;

(iii) Sturdy construction; and

(iv) Self-closing, positive latching, automatic locking doors and/or drawers;

(c) Medication distribution cart(s), stored in locked room or continuously attended area; or

(d) Automated dispensing unit, designed and installed in accordance with chapter 246-873 WAC;

(6) Provide nourishment facilities in a clean room with:

(a) A refrigerator;

(b) A work counter or space unless combined with a clean utility room;

(c) Storage for utensils and food stuffs;

(d) A handwash sink unless combined with a clean utility room;

(e) Space for a waste container unless combined with a clean utility room;

(f) Dishwasher with a two-compartment sink or a three-compartment sink if area will be used to wash dishes, glasses, or pitchers in accordance with WAC 246-215-100 food service, equipment and utensil cleaning and sanitizing; and

(g) Self-dispensing ice machine, if needed, consistent with scope of service;

(7) Provide soiled storage room separate and with no direct connection to clean storage or utility rooms with:

(a) A clinical service sink with bedpan flushing attachment, unless a soiled utility room is on the same nursing unit or bedpan flushing devices are furnished in all toilet rooms adjoining patient rooms;

(b) Space for waste container, linen hampers, carts, and other large equipment;

(c) A handwash sink or equivalent; and

(d) Self-closing door(s);

(8) Provide soiled utility room separate and with no direct connection to clean utility or storage room with:

(a) A double-compartment sink large enough to accommodate equipment to be cleaned;

(b) A work surface;

(c) Storage cabinets sufficient to store cleaning supplies;

(d) A clinical service sink with bedpan flushing attachment unless bedpan flushing devices are furnished in all toilet rooms adjoining patient rooms;

(e) Space for waste containers, linen hampers, and other large equipment; and

(f) Self-closing door(s).

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-535, filed 1/28/99, effective 3/10/99.]

WAC 246-320-545 Maintenance, engineering, mechanical, and electrical facilities. Hospitals will:

(1) Provide boiler and/or mechanical equipment rooms with insulation, sound deadening and mechanical ventilation to minimize transfer of heat and noise to rooms occupied by patients and employees;

(2) Provide maintenance shop, if planned, located and designed for easy delivery and removal of equipment and to minimize noise and dust to the rest of the hospital with:

(a) Storage for solvents, flammable and combustible liquids in accordance with WAC 246-320-99902(11); and

(b) Storage for supplies and equipment;

(3) Provide electrical switch gear and telecommunications room(s) with mechanical ventilation and/or cooling as required to maintain adequate operating temperature for equipment;

(4) Provide area with file space and adequate storage for facility drawings, records, and operation manuals; and

(5) Provide separate room or area specifically for storage, repair, and testing of electronic or other medical equipment according to program.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-545, filed 1/28/99, effective 3/10/99.]

WAC 246-320-555 Admitting, lobby, and medical records facilities. Hospitals will provide:

(1) Admitting, lobby, and medical records facilities with:

(a) Support facilities meeting requirements in WAC 246-320-535(4) housekeeping supply room; and

(b) Adequate storage for office equipment, forms, and supplies;

(2) An admitting area with provision for auditory privacy during interviews;

(3) A lobby area with:

(a) A waiting area;

(b) Access to public toilet(s) for each sex;

(c) A drinking fountain;

(d) A public telephone; and

(e) An information desk or directory signage;

(4) A medical records area with:

(a) Active and inactive records storage;

(b) Total space appropriate for the duration and type of storage planned; and

(c) Security.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-555, filed 1/28/99, effective 3/10/99.]

WAC 246-320-565 Receiving, storage, and distribution facilities. Hospitals will:

(1) Provide receiving, storage, and distribution facilities with support facilities meeting the requirements in WAC 246-320-535(3) clean utility;

(2) Locate bulk and general supply storage to:

(a) Avoid disturbance to the operation of the hospital; and

(b) Prevent contamination or damage of goods during movement to and from storage;

(3) Provide bulk and general supply storage constructed in accordance with WAC 246-320-525 (2)(h), and to prevent spoilage, contamination, damage, and corrosion of goods stored therein including:

(a) Protection against inclement weather during transfer of supplies;

(b) Secured spaces with appropriate environmental conditions in accordance with federal and state laws and rules on supplies and drug storage if pharmaceuticals are stored; and

(c) Off-floor storage when required to prevent contamination and water damage to stores;

(4) Provide receiving and unloading area or areas consistent with scope of service with:

(a) Administrative work space near receiving and break-out areas;

(b) Security and protection for supplies; and

(c) Location to prevent vehicle exhaust from entering the hospital;

(5) Provide clean storage rooms designed and equipped for storage of all clean and sterilized items with:

(a) Space for shelving and/or cart storage;

(b) Fixed storage units and shelving at least six inches above floor and located for easy cleaning; and

(c) Areas used for break out not restricting egress;

(6) Provide storage consistent with scope of service for:

(a) Flammable and combustible liquid storage in accordance with WAC 246-320-99902(11);

(b) Laboratory chemicals in accordance with WAC 246-320-99902(7);

(c) Medical compressed gases in accordance with WAC 246-320-99902(6); and

(d) Gaseous oxidizing materials in accordance with WAC 246-320-99902(12) for materials including, but not limited to, oxygen, nitrous oxide, fluorine, and chlorine trifluoride with segregation either by space or in a separate room or separate building.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-565, filed 1/28/99, effective 3/10/99.]

WAC 246-320-575 Central processing service facilities. Hospitals will:

(1) Provide central processing service facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(1) staff facilities; and

(b) WAC 246-320-535(4) housekeeping supply room;

(2) Locate central processing service facilities to:

(a) Prevent through traffic to other hospital operations;

(b) Avoid contamination of clean and sterile supplies and equipment;

(c) Prevent objectionable heat and noise in patient care areas; and

(d) Facilitate delivery and return of supplies and equipment to and from other services;

(3) Provide central processing service facilities with:

(a) Areas within the unit to provide for proper handling of supplies and equipment;

(b) Work flow designed to maintain separation of clean or sterile items from soiled or contaminated items;

(c) Device for communication between clean and soiled functions and between administrative and clean and soiled functions; and

(d) Room or area located to permit access from public areas without entering processing areas;

(4) Locate soiled receiving and decontamination rooms to preclude transport of soiled or contaminated items through other clean areas of central processing service with:

(a) Facilities for receiving, disassembling, and cleaning of supplies and equipment physically separated from all clean areas of central processing service; and

(b) Work flow from decontamination room directly into clean preparation room;

(5) Provide soiled receiving and decontamination room or rooms with:

(a) Space for soiled collection carts;

(b) An area with a floor drain connected to a sanitary sewage system for cleaning and disinfecting carts and large equipment unless cart wash facilities are provided elsewhere;

(c) At least one double-compartment sink adequately sized to accommodate the equipment being cleaned;

(d) Additional sinks or mechanical washers as required by types and volume of items to be processed;

(e) Work counter or equivalent space adjacent to each sink or mechanical washer for collection and separation of soiled or contaminated items and washed items;

(f) Storage for cleaning supplies and equipment;

(g) Handsfree handwash sink;

(h) Clinical service sink consistent with scope of service program;

(i) Seamless floors with integral cove base; and

(j) Emergency eyewash;

(6) Provide clean workroom, preparation and repackaging areas with:

(a) Space and facilities arranged for assembling and packing supplies and equipment for sterilization;

(b) Work surfaces;

(c) Storage;

(d) Space for mobile equipment;

(e) A handwash sink located to prevent splash or spray on clean items; and

(f) A separate room to avoid accumulation and spread of lint, if preparation of linen is a function in central processing;

(7) Locate sterilizing equipment to facilitate movement of supplies/materials from assembling/packaging to storage of clean and sterile supplies with:

(a) Easy access for maintenance;

(b) Ventilation according to manufacturer;

(c) Unalterable air gap for drain and cross-connection control on all incoming water lines;

(d) Pressure sterilizers with recording thermometers and automatic controls; and

(e) If an ethylene oxide sterilizer is installed, include:

(i) Mechanical aerator;

(ii) Ventilation and monitoring in accordance with manufacturer's recommendations and chapter 296-62 WAC biological agents;

(iii) Separate room for ethylene oxide gas sterilizer and cylinder storage; and

(iv) Readily accessible emergency deluge shower with floor drain;

(8) Provide separate room or area for clean and sterile items including:

(a) Provisions for issuance without transport through areas of central processing and sterilizing service; and

(b) Enclosed cabinets, or covered carts, or equivalent if storage is in the preparation area.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-575, filed 1/28/99, effective 3/10/99.]

WAC 246-320-585 Environmental services facilities. Hospitals will:

(1) Provide a primary housekeeping area with:

(a) Storage area consistent with scope of service, including:

(i) Racks, bins, shelves, or cabinets;

(ii) Storage for pesticides, cleaning compounds, and toxic substances;

(iii) Space for mobile housekeeping equipment;

(iv) Eyewash; and

(v) Handwash sink;

(b) Cleanup area for large mobile equipment with:

(i) Service sink for cleaning small equipment and janitorial tools;

(ii) Soap dispenser and single use hand drying device; and

(iii) Area with floor drain for cleaning large mobile equipment unless equipment wash area is provided elsewhere; and

(c) Administrative area;

(2) Provide waste handling area located to prevent objectionable smoke and odors in other areas of the hospital including:

(a) Storage area in a separate, well-ventilated room or outside, enclosed space with:

(i) Emergency shower;

(ii) Eyewash;

(iii) Handwash sink; and

(iv) Floor drain connected to sanitary sewage system;

(b) Waste container wash area, if provided, with floor drain connected to a sanitary sewage system and hose bibs with hot and cold water;

(c) Waste dumpsters and compactor storage area with drain connected to a sanitary sewage system and hose bibs with hot and cold water; and

(d) Incineration facilities, if planned, located in a separate well-ventilated room or outside enclosed space with incinerator, meeting requirements in WAC 246-320-99902(4) and other federal, state, and local rules and regulations.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-585, filed 1/28/99, effective 3/10/99.]

WAC 246-320-595 Laundry and/or linen handling facilities. Hospitals will:

(1) Provide laundry and/or linen handling facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(1) staff facilities; and

(b) WAC 246-320-535(4) housekeeping supply room;

(2) Locate laundry and/or linen facilities to:

(a) Avoid through traffic to other hospital patient care areas; and

(b) Avoid excessive heat, noise and odors traveling to patient care areas and other departments;

(3) Provide laundry and linen handling facilities with:

(a) Space for movement and storage of clean and soiled carts;

(b) Separate linen processing areas or rooms with:

(i) Capacity for receiving, holding, and sorting of soiled and clean linen consistent with scope of service;

(ii) Floor drain(s) located in the soiled linen area;

(iii) Handwash sink in soiled and clean processing areas;

(iv) Negative air pressure gradient with direction of air flow from clean side of room to dirty side of room if room is shared; and

(v) A folding area on clean side;

(c) Separate clean linen storage room located to avoid sources of moist or contaminated air with:

(i) Storage for reserve supply of linens, blankets, and pillows; and

(ii) Space for carts and/or shelves;

(d) The following additional provisions if laundry is done on site:

(i) Equipment capacity for processing laundry consistent with scope of service;

(ii) Arrangement for uninterrupted work flow from soiled to clean function;

(iii) Commercial washing machine(s);

(iv) Floor drains consistent with scope of service or as required by equipment;

(v) Commercial dryer(s);

(vi) Dryer exhaust to the exterior and make-up air; and

(vii) Sewing area;

(4) If commercial laundry service is used, provide separate clean and soiled storage rooms, located for convenient dispatch to vendor.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-595, filed 1/28/99, effective 3/10/99.]

WAC 246-320-605 Food and nutrition facilities. Hospitals will:

(1) Meet the requirements in chapter 246-215 WAC Food service;

(2) Provide food and nutrition facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(1) staff facilities, with door closures if opening directly into food preparation or storage areas; and

(b) WAC 246-320-535(4) housekeeping supply room;

(3) Locate dietary facility to prevent through traffic to other hospital operations with:

(a) Kitchen area located to:

(i) Prevent unnecessary traffic through dietary department;

(ii) Avoid food contamination from other hospital operations; and

(iii) Prevent objectionable heat, noise, and odors to patient care areas;

(b) Dietary facility to facilitate:

(i) Delivery of stores;

(ii) Disposal of kitchen waste; and

(iii) Transport of food to nursing units;

(c) Dining area, if planned, adjacent to employee food service area;

(4) Provide the dietary facility with:

(a) Office space;

(b) Receiving area readily accessible to the refrigeration and food storage areas;

(c) Bulk, refrigerated and frozen food storage spaces conveniently located to receiving area and to avoid through traffic in food preparation area with:

(i) At least one dry storage room located in or adjacent to the kitchen with:

(A) Access from an outside delivery entrance;

(B) Proper construction, ventilation, and temperature to minimize spoilage;

(C) Space for large containers and mobile equipment;

(D) Bottom shelves for food storage at least six inches above floor; and

(E) Storage units located and designed to allow for easy and regular cleaning of shelves, walls, and floors;

(ii) Capacity to stock a quantity of food supplies to accommodate emergencies;

(5) Provide kitchen facilities and food preparation areas including:

(a) Patient tray preparation area with:

(i) Space for mobile equipment such as food tray carts;

(ii) Serving equipment;

(iii) Closed or covered storage units for food containers, dishes, and trays;

(iv) Refrigerator and/or frozen food storage unit; and

(v) Beverage service equipment;

(b) Provision for bulk ice;

(6) Provide employee food service area, if planned, separate from, but convenient to the kitchen;

(7) Provide a dishwashing and utensil washing room or area to:

(a) Avoid traffic through other areas of the kitchen; and

(b) Permit unloading of tray carts and receiving of soiled dishes without obstructing traffic in corridors; and

(8) Provide access to cart washing or cleaning area conveniently located adjacent to service corridor or elevator.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-605, filed 1/28/99, effective 3/10/99.]

WAC 246-320-615 Pharmacy. Hospitals will:

(1) Provide each pharmacy with support facilities meeting requirements in WAC 246-320-535(4) housekeeping supply room;

(2) Locate pharmacy in a separate and secure room;

(3) Provide pharmacy with:

(a) Storage, including locked storage for Schedule II controlled substances in accordance with WAC 246-873-070 and 246-873-080;

(b) All entrance doors equipped with closers;

(c) Automatic locking mechanisms on all entrance doors to preclude entrance without a key or combination;

(d) All perimeter walls of the pharmacy and vault constructed full height from floor to underside of structure above;

(e) Security devices or alarm systems for perimeter doors, windows and relites;

(f) An emergency signal device to signal at a location where twenty-four-hour assistance is available;

(g) Space for files and clerical functions;

(h) Break-out and storage area separate from clean areas; and

(i) Electrical service including emergency power to critical pharmacy areas and equipment;

(4) Provide a general compounding and dispensing unit, room, or area with:

(a) A work counter with impermeable surface;

(b) A corrosion-resistant sink, suitable for hand washing, mounted in counter or integral with counter;

(c) Storage space;

(d) A refrigeration and freezing unit; and

(e) Space for mobile equipment;

(5) Provide manufacturing and unit dose packaging area or room, if planned, with the following:

(a) Work counter with impermeable surface;

(b) Corrosion-resistant sink suitable for hand washing, mounted in counter or integral with counter; and

(c) Storage space;

(6) Locate admixture, radiopharmaceuticals, and other sterile compounding room, if planned, in a low traffic, clean area with:

(a) A preparation area;

(b) A work counter with impermeable surface;

(c) A corrosion-resistant handsfree sink, suitable for hand washing, mounted in counter or integral with counter;

(d) Space for mobile equipment;

(e) Storage space;

(f) A laminar flow hood in admixture area; and

(g) Shielding and appropriate ventilation in accordance with WAC 246-320-525 (4)(k) and (l) for storage and preparation of radiopharmaceuticals and chemotherapeutic agents;

(7) If satellite pharmacies are planned, meet:

(a) Subsections (1) and (3)(a), (b), (c), (d), (e), and (f) of this section when drugs will be stored;

(b) Subsection (3)(g), (h), and (i) of this section, if appropriate; and

(c) Subsections (4)(a) through (e) and (6)(a) through (g) of this section if planned;

(8) Provide separate outpatient pharmacy, if planned, meeting requirements for satellite pharmacy.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-615, filed 1/28/99, effective 3/10/99.]

WAC 246-320-625 Laboratory and pathology facilities. Hospitals will:

(1) Provide laboratory and pathology facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(1) staff facilities;

(b) WAC 246-320-535(4) housekeeping supply room; and

(c) WAC 246-320-535(8) soiled utility room;

(2) Locate laboratory facility to avoid outpatient traffic through inpatient areas;

(3) Provide laboratory facilities with:

(a) Electrical service including emergency power to critical laboratory areas and equipment consistent with scope of service;

(b) Noise attenuation where applicable;

(c) Piped utility valves and waste line clean-outs accessible for repair and maintenance;

(d) Work areas for technical, clerical, and administrative staff, files, and storage;

(e) Handwash sink unless other sinks in the laboratory are equipped for washing hands;

(f) Impermeable work counter or counters with sufficient height, depth, and length to accommodate equipment, procedures, and documentation;

(g) Knee hole spaces at work stations where appropriate;

(h) Corrosion resistant sinks in testing areas consistent with scope of service;

(i) Space for freestanding equipment;

(j) Storage;

(k) Clear aisle width suitable to function and to provide accessibility;

(l) Special drainage as appropriate for equipment and waste disposal;

(m) Easily accessible emergency eye washers;

(n) Blood drawing room or area separate from laboratory testing area including:

(i) Work counter;

(ii) Handwash sink;

(iii) Space to accommodate wheelchair and infants; and

(iv) Waiting area;

(o) Wheelchair accessible toilet with shelf or equivalent to accommodate specimen collection;

(p) Specimen preparation area located in or adjacent to laboratory with equipment as required in (a), (d), (f), (h), (i), (j), and (k) of this subsection;

(q) Blood bank area including:

(i) Equipment as required in (a) through (n) of this subsection; and

(ii) A blood bank refrigerator equipped with high and low temperature alarm which signals in staffed area;

(r) Chemistry area including equipment as required in (a), (b), (d), (h), (i), (j), (k), (l), and (m) of this subsection with the following additional provisions if applicable:

(i) Fume hood when any procedure produces dangerous, toxic, or noxious fumes;

(ii) Special equipment properly vented as per manufacturer's instructions; and/or

(iii) Special gases piped in or space for special gas cylinders with safety fasteners;

(s) Hematology facility located and equipped as required in (a) through (n) of this subsection;

(4) Provide the following laboratory services, if planned:

(a) Media preparation room or area meeting the ventilation requirements in WAC 246-320-525 (Table 525-3);

(b) Reagent preparation area including equipment as required in subsection (3)(f), (g), (h), (i), and (j) of this section with:

(i) Space for vibration-free balance table unless available elsewhere in laboratory; and

(ii) Equipment for preparation of reagent water or outlet for piped reagent water prepared elsewhere;

(c) Microbiology or areas where specimen may be aerosolized including:

(i) Separate enclosed room or an area located away from traffic flow; and

(ii) Equipment as required in subsection (3)(a), (d), (f), (h), (i), (j), and (k) of this section with the following additional provisions:

(A) Space for special gas cylinders with safety fasteners unless all gas is piped in; and

(B) For highly infectious materials, an additional enclosed area with counters, sink, storage, and biological safety cabinet or laminar flow hood;

(d) Cytology and/or histology in a separate area with:

(i) A staining area with forced air exhaust ventilation;

(ii) As necessary, a fume hood to exhaust tissue processing equipment;

(iii) Space for frozen section equipment as needed; and

(iv) Provisions for storing flammable materials used in the area;

(5) Locate a morgue facility, if planned, to accommodate transport of deceased via least used public corridor or corridors and provide refrigeration for body storage;

(6) Locate an autopsy room, if planned, adjacent to the morgue and provide with:

(a) An autopsy table with water supply, suction outlet, and appropriate drain;

(b) Space for dissection table or counter;

(c) A floor drain;

(d) A scrub sink;

(e) An instrument sterilizer unless provided elsewhere;

(f) A conveniently located changing room, toilet, handwash sink and shower;

(g) Space for housekeeping equipment; and

(h) Specimen holding room or area;

(7) Locate vivariums, if planned, separate from the laboratory and patient care areas and provide with:

(a) Food and supply storage;

(b) Handwash sink;

(c) Facilities for disposal of wastes and dead animals;

(d) Locked isolation of inoculated animals;

(e) Controlled access;

(f) Adequately secured areas to prevent escape; and

(g) Measures to control noise and odors.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-625, filed 1/28/99, effective 3/10/99.]

WAC 246-320-635 Surgery facilities. Hospitals will:

(1) Provide surgery facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room with adequate storage facilities consistent with scope of service;

(b) WAC 246-320-535(4) housekeeping supply room;

(c) WAC 246-320-535(5) medication distribution facility, which includes anesthesia if planned;

(d) WAC 246-320-535(8) soiled utility room with:

(i) A sink and plaster trap; and

(ii) With no direct access to operating room;

(2) Locate a separate segregated surgery suite to:

(a) Prevent traffic through surgery suite to any other area of the hospital; and

(b) Facilitate transfer of patients to recovery/post anesthesia care unit and surgical nursing units;

(3) Provide surgery suite with:

(a) A scrub-up area with direct access or close to each operating room including:

(i) At least two scrub sinks per operating room or at least three scrub sinks for every two operating rooms;

(ii) Soap dispenser at each scrub sink with foot control or equivalent;

(iii) Brush dispenser or equivalent;

(iv) Shelf;

(v) Single service towel dispenser or equivalent; and

(vi) Clock with sweep second hand or equivalent within view from scrub sinks;

(b) Sterilizing facilities located for maintenance accessibility including:

(i) Flash sterilizers consistent with scope of service;

(ii) Compliance with WAC 246-320-575 central processing, if instruments are processed in the operating room;

(iii) Sterilizers with recording thermometers and automatic controls sufficient to accommodate supplies and equipment if sterilized in suite;

(c) Patient preoperative area, if planned, including:

(i) Room or alcove out of traffic; and

(ii) Provision for toilet, handwash sink, staff work area, and privacy curtains or equivalent;

(d) A solution warmer;

(e) A blanket warmer; and

(f) Ice machines consistent with scope of service;

(4) Provide at least one major operating room with:

(a) Minimum room dimension of twenty feet;

(b) Minimum room area of four hundred eighty square feet;

(c) A ceiling mounted surgery light and general room lighting;

(d) Film illuminators or equivalent consistent with scope of service;

(e) A clock with sweep second hand or equivalent;

(f) Interval timer consistent with scope of service; and

(g) Storage for surgical supplies;

(5) Provide minor operating room, if planned, meeting the requirements in subsection (4)(c) through (g) of this section, with:

(a) Minimum dimension of fifteen feet; and

(b) Minimum room area of two hundred seventy square feet;

(6) Provide anesthesia work room, if planned, with:

(a) Space for cleaning, testing, and storing anesthesia machines, carts, supplies, and lockable storage for medications;

(b) A two-compartment sink with counter space to separate clean and soiled functions; and

(c) A writing surface;

(7) Locate control area to permit coordination of functions among operating rooms in or adjacent to surgery facilities with:

(a) Telephone;

(b) Room convenient to the surgery suite for confidential communication;

(c) File storage; and

(d) Work area;

(8) Provide clean storage facilities for equipment and supplies, including:

(a) Blood refrigeration, if blood is stored; and

(b) Mobile X-ray equipment;

(9) Provide staff facilities with:

(a) Locker rooms located within the surgery suite, including:

(i) Storage for personal effects;

(ii) Storage space for scrub clothing;

(iii) Space for collection receptacles for soiled scrub clothing; and

(iv) Separate facilities for males and females including:

(A) A clothing change area or room;

(B) A toilet and handwash sink; and

(C) Shower facilities;

(b) A lounge within the surgery suite; and

(c) Dictation and report area;

(10) Include a recovery/post anesthesia care unit in accordance with WAC 246-320-645;

(11) Provide cardiovascular, orthopedic, neurological and other special procedure areas, if planned, that require room for additional personnel and/or large equipment with:

(a) Same requirements as subsection (5) of this section except with a minimum clear floor area of six hundred square feet; and

(b) Additional equipment storage room(s) for large equipment required to support these procedures.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-635, filed 1/28/99, effective 3/10/99.]

WAC 246-320-645 Recovery/post anesthesia care unit (PACU). Hospitals will:

(1) Provide recovery/post anesthesia care unit areas or rooms with support facilities meeting requirements in:

(a) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(b) WAC 246-320-535(4) housekeeping supply room;

(c) WAC 246-320-535(5) medication distribution facility; and(d) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Locate recovery/post anesthesia care unit area or rooms adjacent to the surgery suite, avoiding through traffic to other patient care areas;

(3) Provide patient care area with:

(a) Multiple-bed area designed to provide:

(i) At least four feet wide space between side of each bed or stretcher and wall, other bed, or fixed equipment; and

(ii) At least four feet wide space between foot end of any bed and any wall or fixed equipment;

(b) Privacy curtains or equivalent;

(c) A handwash sink located convenient to every six patient stations or major fraction;

(d) Storage, shelves, drawers, or equivalent and charting surface at each patient station;

(e) Clock with sweep second hand or equivalent;

(f) Interval timer consistent with scope of service; and

(g) Airborne precaution room, if planned, with:

(i) One hundred twenty square feet;

(ii) A handwash sink with handsfree controls and gooseneck spouts without aerators;

(iii) A clock;

(iv) A charting surface;

(v) A clinic service sink or water closet with bedpan rinsing/flushing attachment adjoining room; and

(vi) Air changes and air pressure gradients in accordance with WAC 246-320-525 (Table 525-3);

(4) Provide storage for stretchers, supplies and equipment;

(5) Provide nursing support area meeting the requirements in WAC 246-320-685 (5)(b);

(6) Provide patient toilet with handwash sink where stage two recovery is planned; and

(7) Provide easily accessible staff toilet with handwash sink.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-645, filed 1/28/99, effective 3/10/99.]

WAC 246-320-655 Obstetrical delivery facilities. Hospitals will:

(1) Provide obstetrical delivery facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(1) staff facilities with dressing room;

(b) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(c) WAC 246-320-535(4) housekeeping supply room;

(d) WAC 246-320-535(5) medication distribution facility; and(e) WAC 246-320-535(8) soiled utility room;

(2) Locate delivery rooms to prevent traffic through delivery room service areas;

(3) Provide cesarean delivery room or surgery room for obstetrical services with:

(a) Minimum area of four hundred square feet;

(b) Minimum room dimension of twenty feet;

(c) A ceiling mounted surgery light and general room lighting;

(d) Film illuminators or equivalent consistent with scope of service;

(e) Clock with sweep second hand or equivalent;

(f) Interval timer consistent with scope of service;

(4) Provide scrub area located to provide direct access to the cesarean/delivery room and in accordance with WAC 246-320-635 (3)(a);

(5) Provide flash sterilizers consistent with scope of service meeting requirements in WAC 246-320-635 (3)(b);

(6) Provide anesthesia storage or anesthesia workroom meeting requirements in WAC 246-320-635(6);

(7) Include a recovery/post anesthesia care unit, if planned, in accordance with WAC 246-320-645;

(8) Provide storage for supplies and equipment.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-655, filed 1/28/99, effective 3/10/99.]

WAC 246-320-665 Birthing/delivery rooms, labor, delivery, recovery (LDR) and labor, delivery, recovery, postpartum (LDRP). Hospitals will:

(1) Provide birthing/delivery rooms, labor, delivery, recovery (LDR) and labor, delivery, recovery, postpartum (LDRP) with:

(a) Support facilities located for convenient use by staff meeting the requirements in:

(i) WAC 246-320-535(1) staff facilities with dressing room;

(ii) WAC 246-320-535(2) clean storage room, or WAC 246-320-535(3) clean utility room;

(iii) WAC 246-320-535(4) housekeeping supply room;

(iv) WAC 246-320-535(5) medication distribution facility;

(v) WAC 246-320-535(6) nourishment facilities with provision for ice; and

(vi) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(b) Toilet and bathing facilities adjoining each patient room;

(c) Nursing support area or equivalent meeting requirements in WAC 246-320-685 (5)(b); and

(d) Storage for supplies and equipment;

(2) Locate birthing rooms to prevent unnecessary traffic through the obstetrical service area; and

(3) Provide single-bed birthing room with:

(a) Four feet at each side and six feet at foot of bed;

(b) Minimum room area of two hundred square feet;

(c) A handsfree handwash sink;

(d) Privacy curtains or equivalent;

(e) One full-length wardrobe, closet, or locker for storage of personal effects; and

(f) Uncarpeted floors.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-665, filed 1/28/99, effective 3/10/99.]

WAC 246-320-675 Interventional service facilities. Hospitals will:

(1) Provide interventional service facilities with convenient and easily accessible support facilities consistent with scope of service meeting requirements in:

(a) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(b) WAC 246-320-535(4) housekeeping supply room;

(c) WAC 246-320-535(5) medication distribution facility; and(d) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Locate procedure rooms for easy access by patients, preventing through traffic, and convenient to waiting area or patient holding area;

(3) Meet requirements in WAC 246-320-785 (3) and (5) when imaging procedures are done in procedure rooms which are not located in the radiology facilities;

(4) Provide endoscopy room(s) for routine procedures, if planned, with:

(a) Minimum room dimension of fifteen feet;

(b) Minimum room area of two hundred fifty square feet;

(c) A handwash sink;

(d) Exam light or equivalent and adequate general room lighting;

(e) Clock with sweep second hand or equivalent;

(f) Supply and equipment storage; and

(g) The following consistent with scope of service:

(i) Film illuminators or equivalent;

(ii) Interval timer;

(iii) Adjoining patient toilet with handwash sink; and

(iv) Scope cleaning room with proper ventilation and facilities for cleaning and drying;

(5) Provide procedure room for cystoscopic and other endo-urological procedures, if planned:

(a) Meeting the requirements in subsection (4) of this section, with the following exceptions:

(i) Minimum room dimension of eighteen feet;

(ii) Minimum room area of three hundred square feet;

(iii) Ceiling mounted surgery light in cystoscopy; and

(iv) Scrub sink;

(b) With adequate space for equipment transformer cabinet; and

(c) With waste evacuation drainage plumbing if required by table manufacturer;

(6) Provide cardiac, diagnostic, interventional procedure room, or other special procedure room, if planned, with:

(a) Minimum room dimension of twenty feet exclusive of control booth and fixed equipment;

(b) Minimum room area of four hundred eighty square feet;

(c) A scrub sink located immediately outside of procedure room;

(d) Work surface;

(e) Supply and equipment storage;

(f) Exam light;

(g) Clock with sweep second hand;

(h) Interval timer consistent with scope of service;

(i) Washable ceiling tile; and

(j) Control room where required for equipment operation and safety;

(7) Provide lithotripsy room, if planned, with:

(a) Minimum room dimension of fifteen feet;

(b) Minimum room area of two hundred fifty square feet;

(c) Handwash sink, unless lithotripsy device is in operating room;

(d) Work surface;

(e) Supply and equipment storage;

(f) Clock with sweep second hand; and

(g) Interval timer consistent with scope of service.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-675, filed 1/28/99, effective 3/10/99.]

WAC 246-320-685 Nursing unit. Hospitals will:

(1) Provide each nursing unit with support facilities on or adjacent to each unit meeting requirements in:

(a) WAC 246-320-535(1) staff facilities;

(b) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(c) WAC 246-320-535(4) housekeeping supply room;

(d) WAC 246-320-535(5) medication distribution;

(e) WAC 246-320-535(6) nourishment facilities; and

(f) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Locate each nursing unit to avoid through traffic to any service, diagnostic, treatment, or administrative area;

(3) Provide each nursing unit with separate areas for each of the following clinical services:

(a) Beds for postpartum patients grouped together and located to avoid intermixing with beds for other types of patients;

(b) When a separate pediatric unit is planned or when rooms with pediatric beds are located together or in close proximity to each other, consistent with scope of service and WAC 246-320-695 (4)(a), (b), and (c);

(c) When a separate psychiatric unit is planned, or when ten or more psychiatric beds are planned, a psychiatric unit must be provided in accordance with WAC 246-320-745;

(d) Segregated critical care patient beds where five or more beds are planned in accordance with WAC 246-320-725; and

(e) A separate long-term care unit where ten or more beds are planned in accordance with WAC 246-320-765;

(4) Provide the following on each unit:

(a) Patient rooms located:

(i) To prohibit traffic through rooms;

(ii) To minimize entrance of odors, noise, and other nuisances; and

(iii) With direct access from corridor of nursing unit;

(b) Patient rooms designed with:

(i) A maximum capacity of four beds per room;

(ii) At least eighty square feet usable floor space per bed in multibed rooms;

(iii) At least one hundred square feet usable floor space in single-bed rooms;

(iv) Beds arranged in multibed rooms with at least:

(A) Two feet from wall, except at head;

(B) Three feet apart; and

(C) Three feet eight inches clearance at foot of bed;

(v) Handwash sink in each room located as near to entry as practical, optional in psychiatric patient rooms;

(vi) Cubicle curtains or equivalent to provide patient privacy in all multibed patient rooms arranged to provide patient access to toilet, handwash sink, wardrobe, and entry without interference to privacy of other patients; and

(vii) One full-length wardrobe, closet, or locker per bed;

(c) Patient bathing facilities including showers or tubs in the ratio of one bathing facility per eight beds or major fraction thereof. Beds having a bathing facility adjoining the patient room will be excluded from the ratio;

(d) Patient toilets with bedpan flushing equipment adjoining each patient room; and

(e) Toilet rooms serving patient beds in ratio of one per four beds or major fraction with one toilet room serving no more than two patient rooms;

(5) Provide the following on or adjacent to each unit:

(a) Self-dispensing ice machine;

(b) Nursing support area with:

(i) A writing surface;

(ii) Storage for patient charts;

(iii) A telephone; and

(iv) A clock;

(c) A room for confidential communication;

(d) A waiting room or area, convenient to the unit; and

(e) Storage for supplies and equipment;

(6) Provide at least one airborne precaution room as appropriate for isolation of airborne communicable diseases in the hospital with:

(a) Adjoining toilet, bedpan flushing equipment, and bathing facility;

(b) Handwash sink with handsfree faucet controls and gooseneck spout without aerators located in room near entry;

(c) Air changes and air pressure gradients in accordance with WAC 246-320-525 (Table 525-3);

(d) Uncarpeted floors; and

(e) Anteroom or vestibule.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-685, filed 1/28/99, effective 3/10/99.]

WAC 246-320-695 Pediatric nursing unit. Hospitals will:

(1) Provide each pediatric nursing unit with support facilities located for convenient use by staff and to prevent access by pediatric patients meeting requirements in:

(a) WAC 246-320-535(1) staff facilities;

(b) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(c) WAC 246-320-535(4) housekeeping supply room;

(d) WAC 246-320-535(5) medication distribution facility;

(e) WAC 246-320-535(6) nourishment facilities; and

(f) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Locate the pediatric unit to prevent unnecessary traffic through the service area and in accordance with WAC 246-320-405(2);

(3) Provide tamper resistant electrical outlets in all patient areas, including corridors;

(4) Meet the requirements in WAC 246-320-685(4) except as follows:

(a) Patient rooms designed with at least fifty square feet usable floor space per bassinet;

(b) Adjoining patient toilets may be omitted from bassinet rooms; and

(c) At least one airborne infection precaution room must be located in the pediatric area meeting requirements in WAC 246-320-685(6);

(5) Meet the requirements in WAC 246-320-685(5) with the waiting room for parents provided on or adjacent to the unit;

(6) Treatment and examination room with minimum dimension of eight feet and at least one hundred square feet, including:

(a) Handwash sink;

(b) Work surface; and

(c) Storage;

(7) Provide multipurpose room or area, commonly known as play room.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-695, filed 1/28/99, effective 3/10/99.]

WAC 246-320-705 Newborn nursery facilities. Hospitals will:

(1) Provide newborn nursery facilities with support facilities convenient to nursery room meeting requirements in:

(a) WAC 246-320-535(1) staff facilities with dressing room;

(b) WAC 246-320-535(3) clean utility room with additional provision of refrigerator for infant feedings;

(c) WAC 246-320-535(4) housekeeping supply room;

(d) WAC 246-320-535(5) medication distribution facility; and(e) WAC 246-320-535(8) soiled utility room;

(2) Locate the nursery facilities to prevent unnecessary traffic through the service area;

(3) Provide nursery rooms with:

(a) Enough bassinets for newborn infants consistent with scope of service;

(b) An area of twenty-four square feet per bassinet, exclusive of aisle space;

(c) At least three feet between bassinets;

(d) Handsfree handwash sink(s) with:

(i) One located at every entrance to nursery;

(ii) Additional sinks located within the nursery area in a ratio of one handwash sink for every twelve bassinets or major fraction; and

(iii) A soap dispenser with foot control or equivalent at each sink;

(e) A clock with sweep second hand or equivalent visible from all nursery rooms;

(f) A writing surface; and

(g) A telephone;

(4) Provide storage area for linen, supplies, infant formula, and equipment; and

(5) Provide security for newborns consistent with scope of service.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-705, filed 1/28/99, effective 3/10/99.]

WAC 246-320-715 Intermediate care nursery and neonatal intensive care nursery. Hospitals will:

(1) Provide each intermediate care nursery and neonatal intensive care nursery with support facilities convenient to nursery room meeting requirements in:

(a) WAC 246-320-535(1) staff facilities with dressing room;

(b) WAC 246-320-535(3) clean utility room with additional provision of refrigerator for infant feedings;

(c) WAC 246-320-535(4) housekeeping supply room;

(d) WAC 246-320-535(5) medication distribution facility; and(e) WAC 246-320-535(8) soiled utility room;

(2) Locate the nursery facilities to prevent unnecessary traffic through the service area;

(3) Provide nursery rooms with:

(a) Film illuminators or equivalent consistent with scope of service;

(b) A clock with sweep second hand or equivalent visible from all nursery rooms;

(c) A writing surface; and

(d) A telephone;

(4) Provide infant stations with:

(a) Usable floor area exclusive of aisles with:

(i) Fifty square feet in intermediate care nursery; and

(ii) Eighty square feet in neonatal intensive care nursery;

(b) Space to accommodate monitors and equipment;

(c) Work counter with provisions for a writing area; and

(d) Closed storage for supplies and equipment;

(5) Provide sinks as follows:

(a) At least one scrub sink at each entrance, including a clock with sweep second hand or equivalent within view from scrub sinks; and

(b) Handsfree handwash sinks for every eight infant stations or a major fraction thereof;

(6) Provide an airborne precaution room, if planned, meeting the requirements in subsection (4) of this section;

(7) Provide an area for breast pumping, with:

(a) Access to a:

(i) Handwash sink; and

(ii) Refrigerator;

(b) Provisions for privacy; and

(c) Storage for equipment and supplies consistent with scope of service;

(8) Provide:

(a) Conference or counseling room which allows for parent privacy convenient to intermediate care and neonatal intensive care nursery rooms;

(b) Nursing support area or equivalent meeting the requirements in WAC 246-320-685 (5)(b);

(c) Storage room for linens, supplies, infant formula, and equipment;

(d) Parent's waiting room; and

(e) Security consistent with scope of service.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-715, filed 1/28/99, effective 3/10/99.]

WAC 246-320-725 Critical care facilities. Hospitals will:

(1) Provide critical care facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(1) staff facilities;

(b) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(c) WAC 246-320-535(4) housekeeping supply room;

(d) WAC 246-320-535(5) medication distribution facility;

(e) WAC 246-320-535(6) nourishment facilities with provision for bulk ice; and

(f) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Provide a critical care facility with:

(a) Location to avoid through traffic and penetration of objectionable noise or odors from other areas of the hospital;

(b) Location of patient rooms and placement of beds in rooms to provide for direct visibility of patients from nursing support station unless there is provision for indirect viewing of patients by television;

(c) A water closet, clinical sink, or equivalent with bedpan flushing device for disposing of patient wastes, in a separate room directly accessible to each critical care patient room;

(d) Additional storage for equipment and supplies; and

(e) Airborne precaution room in accordance with WAC 246-320-685(6);

(3) Provide patient rooms with:

(a) Maximum capacity of two beds per room provided each bed has visual access to natural light;

(b) Usable floor space per bed of one hundred fifty square feet, exclusive of areas taken up by passage door swings, closets, wardrobes, portable lockers, and toilet rooms;

(c) Spacing of at least:

(i) Four feet or more between side of bed and wall;

(ii) Six feet or more between foot of bed and wall; and

(iii) Eight feet or more between beds in multibed rooms;

(d) Equipment and furnishings as follows:

(i) Curtains or equivalent means of providing visual privacy;

(ii) Clocks with sweep second hands or equivalent;

(iii) One handwash sink;

(iv) A physiological monitor with an audio alarm system for each bed;

(v) Charting area; and

(vi) An interval timer consistent with scope of service;

(e) Uncarpeted floors;

(4) Provide nursing support area or equivalent with:

(a) Space for patient monitoring equipment including:

(i) Slave oscilloscope with audio alarm for continuous display of each patient's electrocardiogram;

(ii) Rate meter; and

(iii) Recorder;

(b) Wall-mounted clock with sweep second hand or equivalent; and

(c) A writing surface.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-725, filed 1/28/99, effective 3/10/99.]

WAC 246-320-735 Alcoholism and chemical dependency nursing unit. Hospitals will:

(1) Provide each alcoholism and chemical dependency nursing unit with support facilities equipped with door closers and locks on all housekeeping, medication, storage, and utility rooms, and meeting requirements in:

(a) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(b) WAC 246-320-535(4) housekeeping supply room;

(c) WAC 246-320-535(5) medication distribution facility;

(d) WAC 246-320-535(6) nourishment facilities; and

(e) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Locate each nursing unit to avoid through traffic to any service, diagnostic, treatment, or administrative area and to control access;

(3) Provide the unit with:

(a) Patient rooms, toilet rooms, bathing facilities, and nursing support station or equivalent, as required in WAC 246-320-685;

(b) Examination and treatment room available including:

(i) Minimum room area of one hundred square feet;

(ii) Minimum dimension of eight feet;

(iii) Handwash sink;

(iv) Work surface; and

(v) Storage cabinet;

(c) Social facilities with at least four hundred square feet for unit of ten beds or less. Add twenty square feet per bed for each additional bed;

(d) Offices for staff;

(e) Interview and counseling rooms for patient confidentiality and privacy;

(f) Facilities for patients to launder personal belongings;

(g) Detoxification area, if planned, with patient rooms equipped with oxygen and suction outlets at each bed; and

(h) A staff toilet with handwash sink available on the unit.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-735, filed 1/28/99, effective 3/10/99.]

WAC 246-320-745 Psychiatric facilities. Hospitals will design psychiatric facilities to prevent opportunity for suicide and:

(1) Provide psychiatric facilities with support facilities equipped with door closers and locks on all housekeeping, medications, storage, and utility rooms and meeting requirements in:

(a) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(b) WAC 246-320-535(4) housekeeping supply room;

(c) WAC 246-320-535(5) medication distribution facility;

(d) WAC 246-320-535(6) nourishment facilities with provision for self-dispensing ice; and

(e) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Locate to avoid through traffic to any service, diagnostic, treatment and/or administrative area, and penetration of objectionable noise, or odors from other areas of the hospital;

(3) Provide psychiatric treatment facilities including:

(a) Treatment and examination room, unless available in an adjacent area or unit, with minimum dimension of eight feet and at least one hundred square feet, including:

(i) A handwash sink;

(ii) A clock with sweep second hand or equivalent;

(iii) A writing surface; and

(iv) A storage cabinet;

(b) Patient toilet rooms, adjoining each patient room, with water closets in ratio of at least one water closet and handwash sink to every four beds;

(c) A staff toilet with handwash sink available on the unit;

(d) Patient bathing facilities with showers or tubs in the ratio of at least one bathing facility per eight beds or major fraction thereof. Beds having a bathing facility adjoining the patient room will be excluded from the ratio;

(e) Administrative facilities with:

(i) Storage for personal effects of staff apart from storage for patient care supplies and equipment;

(ii) Office or private area for staff and supervisory activities; and

(iii) Lockable storage for patient personal belongings;

(f) Waiting area adjacent to the unit;

(g) A wheelchair-accessible:

(i) Water fountain; and

(ii) Public telephone;

(h) Facilities for patient laundry;

(4) Provide patient rooms:

(a) Meeting requirements in WAC 246-320-685 (4)(a) and (b) with exception of maximum capacity of two beds per patient room and optional privacy curtains; and

(b) With a wardrobe, closet, or locker per bed;

(5) Provide a nursing support station or equivalent with:

(a) A writing surface;

(b) Storage for patient charts and supplies;

(c) A telephone; and

(d) A clock;

(6) Provide a seclusion room with:

(a) Design to minimize potential for stimulation, escape, hiding, injury, or suicide;

(b) Maximum capacity of one patient;

(c) Doors to open outward into a vestibule or anteroom;

(d) At least space of eighty square feet;

(e) Minimum dimension of eight feet;

(f) Staff-controlled, lockable, adjoining toilet room; and

(g) A provision for staff to see the occupant at all times;

(7) Provide suitably equipped areas for:

(a) Dining;

(b) Occupational and recreational therapies with:

(i) Handwash sink;

(ii) Work counter; and

(iii) Storage and physical/occupational therapy displays or other training features consistent with scope of service;

(c) Day room;

(d) Physical activity and patient recreation on the unit or elsewhere on the hospital premises; and

(e) Group therapy;

(8) Provide space and privacy for interviewing, group, family, and individual counseling;

(9) Provide:

(a) All windows and relites:

(i) Meeting requirements in WAC 246-320-525 (2)(i); and

(ii) Installation of security or maximum security windows or equivalent;

(b) Tamper-resistant accessories and equipment in all rooms used by patients; and

(c) Tamper-resistant electrical receptacles;

(10) If electroconvulsive therapy (ECT) rooms are planned, meet the requirements for interventional services - cardiology/angiography in WAC 246-320-525 (Tables 1 through 5), and provide:

(a) At least an area of one hundred fifty square feet;

(b) Minimum dimension of twelve feet; and

(c) The following equipment:

(i) Emergency call;

(ii) Handwash sink;

(iii) Storage for supplies and equipment;

(iv) Space and electrical receptacles for ECT machine;

(v) Oxygen and suction outlet;

(vi) Stretcher or treatment table or equivalent;

(vii) Space for emergency medical supplies and equipment;

(viii) Space for anesthesia machine or cart and equipment;

(ix) Space for electrocardiograph (EKG) monitor; and

(x) Clock with sweep second hand or equivalent;

(11) If ECT is performed, provide a recovery facility, which may be the patient room or PACU with:

(a) Location near ECT treatment room;

(b) Oxygen and suction for each bed, stretcher, or cart; and

(c) Easy access to a clean and soiled utility room.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-745, filed 1/28/99, effective 3/10/99.]

WAC 246-320-755 Rehabilitation facilities. Hospitals will:

(1) Provide rehabilitation facilities with support facilities located for convenient use by staff meeting requirements in:

(a) WAC 246-320-535(1) staff facilities; and

(b) WAC 246-320-535(4) housekeeping supply room;

(2) Locate rehabilitation facilities for easy access by patients, avoiding outpatient traffic through inpatient areas and meeting accessibility requirements in WAC 51-40-1100;

(3) Meet the requirements in WAC 246-320-765 for an inpatient rehabilitation nursing unit;

(4) Provide outpatient rehabilitation facilities, if planned, with:

(a) Patient toilet;

(b) Changing area with lockers or other suitable clothing storage;

(c) Reception and waiting area in or convenient to the facility;

(d) Office and work space with communication device for staff;

(e) Public toilets for each sex convenient to the facility; and

(f) Ready access to emergency medical equipment;

(5) Provide physical therapy facilities, if planned, meeting requirements in subsection (4) of this section with:

(a) General treatment area including:

(i) Private areas large enough for therapist to access both sides of work station;

(ii) Arrangement to permit easy access for wheelchair or stretcher patients;

(iii) Therapy area of at least thirty-six square feet usable floor area per patient in therapy at any one time; and

(iv) Provision for patient privacy;

(b) Handwash sink in or convenient to treatment areas;

(c) Storage for hot packs and equipment;

(d) Refrigeration for cold packs;

(e) Area for physical activities and equipment; and

(f) Clean linen storage;

(6) Provide occupational therapy facilities, if planned, meeting requirements in subsection (4)(a) and (c) through (f) of this section with:

(a) Therapy areas of at least thirty-six square feet useable floor area per patient in therapy at any one time, divided and equipped for diversified work;

(b) Handwash sink with plaster trap consistent with scope of service;

(c) Storage for supplies and equipment; and

(d) Provision for patient privacy;

(7) Provide pools, spas, and tubs which remain filled between patients, if planned, meeting requirements in chapter 246-260 WAC Water recreation facilities.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-755, filed 1/28/99, effective 3/10/99.]

WAC 246-320-765 Long-term care and hospice unit. Hospitals will:

(1) Provide each long-term care and hospice unit with support facilities:

(a) Meeting requirements in:

(i) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(ii) WAC 246-320-535(4) housekeeping supply room;

(iii) WAC 246-320-535(5) medication distribution facility;

(iv) WAC 246-320-535(6) nourishment facilities;

(v) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room; and

(b) With locks and closers on all doors where housekeeping chemicals are stored;

(c) With additional general storage space for patient belongings in addition to closets and equipment storage provided in the long-term care service area; and

(d) With a self-dispensing ice machine;

(2) Locate long-term care unit to minimize through traffic and penetration of objectionable noise, or odors from other areas of the hospital;

(3) Patient personal laundry area with handwash sink;

(4) Provide long-term care unit with:

(a) Wheelchair accessible patient toilets including:

(i) Water closets in a ratio of at least one per four beds;

(ii) Bedpan flushing equipment;

(iii) Accessibility from each patient room;

(iv) A handwash sink in each adjoining toilet room for each multibed room; and

(v) Grab bars properly located and securely mounted on both sides of the water closet;

(b) Handwash sink in each patient room located as near to entry as practical;

(c) Handrails along both sides of all patient use corridors;

(d) Patient bathing facilities including:

(i) Showers or tubs in a ratio of at least one per fifteen beds or major fraction thereof;

(ii) At least one bathing by immersion fixture or equivalent accessible for wheelchairs and stretchers;

(iii) One roll-in shower or equivalent designed for ease of shower chair entry; and

(iv) Grab bars at patient bathing facilities in accordance with WAC 51-40-1100 with addition of one vertical bar at the faucet end;

(e) Waiting room or area near public toilet rooms;

(5) Provide patient rooms with:

(a) Maximum capacity of two beds per patient room;

(b) Meeting requirements in WAC 246-320-685 (4)(a) and (b);

(c) At least eighty-five square feet usable floor space per bed in multibed rooms;

(d) Space for wheelchair storage;

(e) The provision for patient privacy in all rooms;

(f) One wardrobe or closet for hanging of full-length garments; and

(g) A securable drawer for personal effects per patient;

(6) Provide a nursing support area meeting requirements in WAC 246-320-685 (5)(b);

(7) Provide office for confidential staff communications;

(8) Provide suitably equipped patient areas in the long-term care facility with:

(a) Day/dining room, recreation, activity room or rooms with windows totaling at least four hundred square feet and twenty additional square feet for each additional bed over twenty;

(b) Space and privacy for group, family, and individual counseling; and

(c) At least one wheel chair accessible toilet opening directly from main corridor adjacent to (a) and (b) of this subsection;

(9) Provide occupational therapy and physical therapy facilities as described in WAC 246-320-755 either in the long-term care unit or elsewhere in the hospital;

(10) Include the following features if planning to provide a protective facility for cognitively impaired patients:

(a) Floors, walls, and ceiling surfaces displaying contrasting colors for identification;

(b) Instruction labels on door release devices requiring direction for use;

(c) Secured outdoor space and walkways, when outdoor space is provided, including:

(i) Walls or fences at least six feet high and designed to prevent climbing and penetration;

(ii) Ambulation area with:

(A) Walking surfaces firm, stable, and free from abrupt changes in elevation; and

(B) Slip-resistant walking surfaces on areas subject to wet conditions;

(iii) Exits from the secured outdoor spaces and walkways releasing automatically upon activation of fire alarm signal or upon loss of power; and

(iv) Nontoxic plants for landscaping;

(d) Plants used for interior decoration must be nontoxic;

(11) If a hospice unit is planned, meet subsections (1) through (7) of this section and include:

(a) Medication storage room meeting WAC 246-320-535 (5)(a);

(b) Children's play room or area with tamper resistant electrical receptacle, if provided;

(c) Kitchen located to prevent objectionable heat, noise, and odors to patient care areas with:

(i) Refrigerator;

(ii) Two-compartment sink;

(iii) Domestic dishwasher, if provided with 155°F water supply;

(iv) Range with exhaust hood;

(v) Work surfaces; and

(vi) Storage;

(d) Day/dining room consistent with scope of service; and

(e) Space and privacy for interviewing group, family, and individual counseling consistent with scope of service.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-765, filed 1/28/99, effective 3/10/99.]

WAC 246-320-775 Dialysis facilities. Hospitals will:

(1) Provide dialysis facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(b) WAC 246-320-535(4) housekeeping supply room;

(c) WAC 246-320-535(5) medication distribution facility; and

(d) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(2) Locate dialysis facility to minimize outpatient traffic through inpatient areas and to facilitate transport of patients to and from other hospital services areas;

(3) Provide a dialysis facility with:

(a) Uncarpeted floors in patient care and wet areas;

(b) Coat hooks or equivalent for hanging full length garments;

(c) A patient waiting area;

(d) Patient preparation areas adjacent to dialysis stations with provisions for:

(i) A handwash sink; and

(ii) Storage;

(e) A work station for staff with writing surfaces and storage for supplies;

(f) Privacy areas for interviewing and consultation;

(g) A conveniently located toilet;

(h) Patient education room with a handwash sink if home training is planned;

(i) Chemical storage room; and

(j) Reuse room with:

(i) Capture hoods, exhausting directly to outdoors, capable of maintaining formaldehyde levels less than 0.5 parts per million in the rooms;

(ii) Eyewash; and

(iii) Handwash sink;

(4) Provide dialysis stations including:

(a) Minimum square feet per dialysis station of:

(i) Fifty square feet excluding aisles when the service uses recliner chairs; and

(ii) Eighty square feet excluding aisles when the service uses beds;

(b) A handwash sink convenient to each dialysis station;

(c) Medical emergency signal for station isolated from immediate staff assistance; and

(d) Plumbing for each dialysis station providing:

(i) A water supply system or mechanism capable of meeting the flow and pressure requirements of the manufacturer for each machine;

(ii) A waste line serving dialysis equipment with an unalterable air gap or equivalent to prevent backflow;

(iii) Connections to the dialysis equipment or equivalent to prevent backflow; and

(iv) Piping and fittings used for all dialysis functions conforming to current National Sanitation Foundation Standard No. 14 entitled "Plastics Piping Components."

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-775, filed 1/28/99, effective 3/10/99.]

WAC 246-320-785 Imaging facilities. Hospitals will:

(1) Provide imaging facilities with:

(a) Support facilities meeting requirements in:

(i) WAC 246-320-535(1) staff facilities, if planned;

(ii) WAC 246-320-535(2) clean storage room;

(iii) WAC 246-320-535(4) housekeeping supply room; and

(iv) WAC 246-320-535(8) soiled utility room;

(b) A processing or dark room if planned, including:

(i) A safe light;

(ii) Developing tank with a thermostatic mixing valve, or automatic film processor with appropriate backflow protection;

(iii) Film storage, shielded from stray radiation;

(iv) Work counter;

(v) Sink; and

(vi) Lighting for clean-up and maintenance purposes;

(c) A dressing area with rooms or booths for privacy including:

(i) Provision for clean and soiled linen storage in or near dressing rooms or booths;

(ii) At least one booth or room designed to accommodate a wheelchair in or adjacent to the dressing area;

(iii) Provisions for hanging clothing and securing valuables; and

(iv) Seat or bench in each room or booth;

(d) An image viewing area with:

(i) Film illuminator or equivalent consistent with scope of service; and

(ii) Location to prevent public view of films;

(e) A waiting area with space for wheelchair patients, stretcher patients, and ambulatory patients;

(f) A toilet connected to or convenient to radiographic room or rooms;

(g) Supply and equipment storage including protected storage for unexposed film; and

(h) Administrative facilities with:

(i) Office area, with provision for consultation; and

(ii) An active film file area;

(2) Locate imaging facilities to minimize outpatient traffic through inpatient areas and facilitate transport of patients to and from other hospital services areas;

(3) Provide each radiographic room with:

(a) Access for wheeled stretcher or bed movement;

(b) Control area with view window to allow full view of patient at all times;

(c) Grounding of table, tube stand and controls, and any associated electrical apparatus in accordance with WAC 246-320-99902(3);

(d) Easily accessible handwash sink;

(e) Provision for patient privacy; and

(f) Proper shielding of room meeting requirements in chapter 246-221 WAC Radiation protection standards;

(4) Magnetic resonance imaging (MRI) room, if planned, with:

(a) A minimum floor space consistent with scope of service and equipment plan; and

(b) Patient holding area consistent with scope of service to accommodate stretcher(s);

(5) Provide additional radiographic rooms meeting the requirements in subsection (3) of this section, WAC 246-320-675 Interventional service facilities, and WAC 246-320-795 Nuclear medicine facilities, as appropriate.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-785, filed 1/28/99, effective 3/10/99.]

WAC 246-320-795 Nuclear medicine facilities. Hospitals will:

(1) Provide nuclear medicine facilities with:

(a) Housekeeping facilities meeting requirements in WAC 246-320-535(4);

(b) Impermeable, readily decontaminated work surfaces and floors subject to spills of radioactive solutions; and

(c) A private patient clothes changing room or area including a receptacle for potentially contaminated hospital clothing;

(2) Locate the nuclear medicine facility to avoid outpatient traffic through inpatient areas with minimum exposure hazard to patients and personnel;

(3) Provide radiochemistry lab with radiation shielding and other protective devices to facilitate safe storage and handling of nuclides and waste materials including:

(a) Separate work surfaces for patient dose and clinical specimen preparation;

(b) Fume hood, if appropriate, in accordance with WAC 246-320-525 (3)(k);

(c) Lockable nuclide storage;

(d) Equipment and supply storage;

(e) Corrosion-resistant sink suitable for hand washing; and

(f) Lockable storage for all radioactive materials, equipment, and waste;

(4) Locate patient imaging room away from X-ray machines, and radioactive materials or shield the room and provide with:

(a) Administrative work surface at least ten feet away from imaging device;

(b) Space for examination bed, table, or equivalent;

(c) Work surface equipment; and

(d) Storage.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-795, filed 1/28/99, effective 3/10/99.]

WAC 246-320-805 Emergency facilities. Hospitals will:

(1) Provide emergency facilities with support facilities meeting requirements in:

(a) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(b) WAC 246-320-535(4) housekeeping supply room;

(c) WAC 246-320-535(5) medication distribution facility; and

(d) WAC 246-320-535(8) soiled utility room;

(2) Locate patient entrance to emergency facilities to provide:

(a) Ready access at grade level to pedestrian, ambulance, and other vehicular traffic;

(b) Protection of emergency patient and the interior of the emergency facility from weather when a patient is brought from an ambulance or other vehicle into the emergency facility with:

(i) Port-size to accommodate at least one vehicle twenty-two feet long, eleven feet high, and eight feet wide designed to:

(A) Permit attendants to stand on same level as entrance when removing a stretcher from vehicle; and

(B) Accommodate different levels of approach with curb cuts for pedestrian traffic;

(ii) Automatic doors;

(3) Locate an emergency facility to:

(a) Avoid traffic through emergency treatment facilities to any other area of hospital; and

(b) Facilitate transfer of patients to other hospital service areas;

(4) Provide emergency facilities with:

(a) Emergency receiving/triage area adjacent to emergency entrance, and convenient to treatment rooms;

(b) Decontamination area with shower and floor drain to sanitary sewage system adjacent to entrance;

(c) Registration area including:

(i) Office space or work space for registration, located to control access to emergency facility patient care areas; and

(ii) A communication device;

(d) Waiting area and public telephone located outside the main traffic flow;

(e) Police, press, and ambulance attendant room, if planned, located outside the main traffic flow;

(f) Work area for staff;

(g) Privacy curtains or equivalent in examination, treatment, or observation rooms;

(h) At least one patient toilet convenient to examination and treatment rooms and located so patients receiving treatment have access without entering a public corridor;

(i) Sink with plaster trap;

(j) At least one public toilet for each sex accessible to waiting area; and

(k) Storage for:

(i) Stretcher(s) and wheelchair(s) adjacent to emergency facility entrance;

(ii) Mobile cart(s) with emergency medical supplies and equipment, in a clean area, readily accessible from all rooms used for patient care or treatment;

(iii) Portable X-ray equipment, if stored in emergency facility; and

(iv) Other major portable or mobile equipment;

(5) Provide at least one major or minor treatment or exam room with negative air pressure for the management of airborne diseases. See WAC 246-320-525 (Table 525-3) for requirements for Airborne Precaution Room. This can be the same room required in subsection (7) or (8) of this section;

(6) Provide at least one major treatment or trauma room with:

(a) Dimensions and arrangement to provide:

(i) Clear space at least four feet wide at both sides and both ends of each treatment table or stretcher; and

(ii) Clear eight feet wide space between treatment tables or stretchers;

(b) Storage for clean and sterile supplies and small equipment;

(c) Work surface in each patient treatment room;

(d) A scrub sink located separate from clean and sterile supply storage, equipment, drugs, and patient treatment area;

(e) Ceiling mounted treatment light for each treatment space;

(f) Film illuminator or equivalent;

(g) Outlet for mobile X-ray machine;

(h) Clock with sweep second hand or equivalent within view of each treatment space;

(i) Storage space for major medical equipment; and

(j) Space for linen hampers and waste containers;

(7) Provide minor treatment and examination room, if planned, with:

(a) Dimensions and arrangement to provide:

(i) Clear space at least three feet at each side and end of each treatment table or stretcher; and

(ii) Clear six feet wide space between treatment tables or stretchers;

(b) Handwash sink separate from patient treatment area;

(c) Work surface separate from patient treatment area;

(d) Storage for supplies and equipment;

(e) Examination light;

(f) Readily accessible film illuminator or equivalent; and

(g) Space for linen hampers and waste containers convenient to all treatment rooms;

(8) Provide observation room, if planned, located convenient to staff work area with:

(a) At least one hundred square feet in one-bed rooms;

(b) Each multiple-bed room designed to provide:

(i) At least four feet wide space between side of each bed or stretcher and wall, other bed, or fixed equipment;

(ii) At least four feet wide space between foot end of any bed and any wall or fixed equipment; and

(iii) Six feet foot to foot;

(c) Handwash sink separate from patient treatment area; and

(9) Provide room for severely disturbed patients, if planned, for patient safety meeting the requirements in WAC 246-320-745(6).

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-805, filed 1/28/99, effective 3/10/99.]

WAC 246-320-815 Outpatient care facilities. Hospitals will:

(1) Design outpatient care facilities meeting the general design requirements in WAC 246-320-525(4) plumbing, WAC 246-320-525(6) interior finishes, and WAC 246-320-525(7) bathroom and toilet rooms;

(2) Provide outpatient care facilities with a housekeeping supply room meeting the requirements in WAC 246-320-535(4);

(3) Locate outpatient care facilities to minimize outpatient traffic through inpatient areas;

(4) Provide for the following:

(a) Easy access for outpatients;

(b) Conveniently located waiting room;

(c) Patient toilet with handwash sink;

(d) Changing area with locker or other suitable clothing storage;

(e) Administrative facilities including:

(i) Registration area or room;

(ii) Work surface or desk;

(iii) Telephone;

(iv) Clock;

(v) Storage space; and

(vi) Room for confidential communication, convenient to the unit;

(5) Provide outpatient exam or treatment facilities, if planned, with:

(a) Direct accessibility from the corridor;

(b) Support facilities meeting the requirements in:

(i) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(ii) WAC 246-320-535(5) medication distribution facility; and

(iii) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room; and

(c) Single bed rooms of at least one hundred square feet or multibed rooms with at least eighty square feet per patient, including:

(i) Privacy curtains or equivalent for each patient in multibed rooms;

(ii) Closet, locker, or equivalent for each patient;

(iii) Handwash sink in the ratio of one for every six patients or major fraction thereof in multibed rooms;

(iv) Adjoining toilet with handwash sink; and

(v) A clock;

(d) Exam or treatment rooms including:

(i) Minimum eight feet dimension with eighty square feet of floor space;

(ii) Handwash sink;

(iii) Examination table or equivalent;

(iv) Examination light or equivalent;

(v) Storage for supplies and equipment;

(vi) Film illuminator or equivalent conveniently available; and

(vii) Coat hook or equivalent;

(e) Nursing support area meeting the requirements in WAC 246-320-685 (5)(b);

(6) Meet the general design requirements in WAC 246-320-525 for the following areas if planned:

(a) Surgical suites in accordance with WAC 246-320-635;

(b) Post anesthesia care unit (PACU) in accordance with WAC 246-320-645;

(c) Interventional services in accordance with WAC 246-320-675;

(d) Airborne precaution room in accordance with WAC 246-320-685(6);

(e) Central sterilizing in accordance with WAC 246-320-575; and

(f) Any area where patients are rendered nonambulatory;

(7) Provide a room or rooms for preoperative and predischarge functions, if planned, with:

(a) Access to support facilities meeting the requirements in:

(i) WAC 246-320-535(2) clean storage room or WAC 246-320-535(3) clean utility room;

(ii) WAC 246-320-535(5) medication distribution and storage; and

(iii) WAC 246-320-535(7) soiled storage room or WAC 246-320-535(8) soiled utility room;

(b) Convenient access to main hospital operating room or provide separate operating room meeting requirements in WAC 246-320-635; and

(c) Convenient access to main hospital interventional service facilities or provide separate interventional services facilities meeting the requirements in WAC 246-320-675.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-815, filed 1/28/99, effective 3/10/99.]

WAC 246-320-990 Fees. Hospitals licensed under chapter 70.41 RCW shall:

(1) Submit an annual license fee of sixty-three dollars and fifty cents for each bed space within the licensed bed capacity of the hospital to the department;

(2) Include all bed spaces in rooms complying with physical plant and movable equipment requirements of this chapter for twenty-four-hour assigned patient rooms;

(3) Include neonatal intensive care bassinet spaces;

(4) Include bed spaces assigned for less than twenty-four-hour patient use as part of the licensed bed capacity when:

(a) Physical plant requirements of this chapter are met without movable equipment; and

(b) The hospital currently possesses the required movable equipment and certifies this fact to the department;

(5) Exclude all normal infant bassinets;

(6) Limit licensed bed spaces as required under chapter 70.38 RCW;

(7) Submit an application for bed additions to the department for review and approval under chapter 70.38 RCW subsequent to department establishment of the hospital licensed bed capacity; and

(8) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 70.41.100, 43.20B.110 and 43.70.250. 99-24-096, § 246-320-990, filed 11/30/99, effective 12/31/99. Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-990, filed 1/28/99, effective 3/10/99.]

WAC 246-320-99902 Appendix B—Dates of documents adopted by reference in chapter 246-320 WAC. (1) Accepted Procedure and Practice in Cross-contamination Control, Pacific Northwest Edition, 9th Edition, American Waterworks Association.

(2) Association for Advancement of Medical Instrumentation, (AAMI), 1997.

(3) National Fire Protection Association (NFPA) 70-1996. Required.

(4) National Fire Protection Association (NFPA) 82, Chapter 2, 1994. Required.

(5) National Fire Protection Association (NFPA) 90A and 90B, 1996. Required.

(6) National Fire Protection Association (NFPA) 99, Chapter 4, 1996. Required.

(7) National Fire Protection Association (NFPA) 99, Chapter 7, 1996. Required.

(8) National Fire Protection Association (NFPA) 101, 1997. Required.

(9) Uniform Building Code, 1997, hereafter amended by the state of Washington (chapter 51-40 WAC). Required.

(10) Uniform Fire Code, Article 74, 1997. Required.

(11) Uniform Fire Code, Article 79, 1997. Required.

(12) Uniform Fire Code, Article 80, 1997. Required.

(13) Uniform Mechanical Code, 1997, hereafter amended by the state of Washington (chapter 51-42 WAC). Required.

(14) Uniform Plumbing Code, 1997, hereafter amended by the state of Washington (chapter 51-46 WAC). Required.

(15) Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health Care Facilities, 1994. Morbidity and Mortality Weekly Report (MMWR), Volume 43, October 28, 1994.

[Statutory Authority: RCW 70.41.030 and 43.70.040. 99-04-052, § 246-320-99902, filed 1/28/99, effective 3/10/99.]

Chapter 246-322 WAC
PRIVATE PSYCHIATRIC AND ALCOHOLISM HOSPITALS

WAC
246-322-990 Private psychiatric hospital fees.

WAC 246-322-990 Private psychiatric hospital fees. Private psychiatric hospitals licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of forty-eight dollars and eighty-five cents for each bed space within the licensed bed capacity of the hospital to the department;

(2) Include all bed spaces and rooms complying with physical plant and movable equipment requirements of this chapter for twenty-four-hour assigned patient rooms;

(3) Include bed spaces assigned for less than twenty-four-hour patient use as part of the licensed bed capacity when:

(a) Physical plant requirements of this chapter are met without movable equipment; and

(b) The private psychiatric hospital currently possesses the required movable equipment and certifies this fact to the department;

(4) Limit licensed bed spaces as required under chapter 70.38 RCW;

(5) Submit applications for bed additions to the department for review and approval under chapter 70.38 RCW subsequent to department establishment of the private psychiatric hospital's licensed bed capacity; and

(6) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 43.70.250 and 43.20B.020. 99-24-060, § 246-322-990, filed 11/29/99, effective 12/30/99. Statutory Authority: RCW 43.70.250, 43.70.110 and 43.20B.020. 95-12-097, § 246-322-990, filed 6/7/95, effective 7/8/95. Statutory Authority: RCW 43.70.250. 92-12-028 (Order 273), § 246-322-990, filed 5/28/92, effective 6/28/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-322-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-323 WAC
RESIDENTIAL TREATMENT FACILITIES FOR PSYCHIATRICALLY IMPAIRED CHILDREN AND YOUTH

WAC
246-323-990 Fees.

WAC 246-323-990 Fees. Residential treatment facilities for psychiatrically impaired children and youth (RTF-CY) licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of eighty dollars and fifty cents for each bed space within the licensed bed capacity of the RTF-CY;

(2) Include all bed spaces and rooms complying with physical plant and movable equipment requirements of this chapter; and

(3) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 71.12.470, 43.70.110, 43.70.250 and 43.208.020. 99-24-094, § 246-323-990, filed 11/30/99, effective 12/31/99. Statutory Authority: RCW 43.70.250, 43.70.110 and 43.20B.020. 95-12-097, § 246-323-990, filed 6/7/95, effective 7/8/95. Statutory Authority: RCW 43.70.250. 92-15-048 (Order 287), § 246-323-990, filed 7/10/92, effective 8/10/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-323-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-324 WAC
PRIVATE ALCOHOL AND CHEMICAL DEPENDENCY HOSPITALS

WAC
246-324-990 Fees.

WAC 246-324-990 Fees. The licensee shall submit:

(1) An initial fee of forty-eight dollars and eighty-five cents for each bed space within the proposed licensed bed capacity; and

(2) An annual renewal fee of forty-eight dollars and eighty-five cents for each licensed bed space.

[Statutory Authority: RCW 43.70.250 and 43.20B.020. 99-24-060, § 246-324-990, filed 11/29/99, effective 12/30/99. Statutory Authority: Chapter 71.12 RCW and RCW 43.60.040. 95-22-013, § 246-324-990, filed 10/20/95, effective 11/20/95.]

Chapter 246-325 WAC
ADULT RESIDENTIAL REHABILITATION CENTERS AND PRIVATE ADULT TREATMENT HOMES

WAC
246-325-990 Fees.

WAC 246-325-990 Fees. Adult residential rehabilitation centers (ARRC) licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of eighty dollars and fifty cents for each bed space within the licensed bed capacity of the ARRC;

(2) Include all bed spaces in rooms complying with physical plant and movable equipment requirements in this chapter for client sleeping rooms; and

(3) Set up twenty-four-hour assigned client beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 71.12.470, 43.70.110, 43.70.250 and 43.208.020. 99-24-094, § 246-325-990, filed 11/30/99, effective 12/31/99. Statutory Authority: RCW 43.70.250, 43.70.110 and 43.20B.020. 95-12-097, § 246-325-990, filed 6/7/95, effective 7/8/95. Statutory Authority: RCW 43.70.250. 92-15-048 (Order 287), § 246-325-990, filed 7/10/92, effective 8/10/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-325-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-326 WAC
ALCOHOLISM TREATMENT FACILITIES

WAC
246-326-990 Fees.

WAC 246-326-990 Fees. Alcoholism treatment facilities licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of eighty dollars and fifty cents for each bed space within the licensed bed capacity of the alcoholism treatment facility to the department;

(2) Include all bed spaces in rooms complying with physical plant and movable equipment requirements for twenty-four-hour assigned patient rooms; and

(3) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 71.12.470, 43.70.110, 43.70.250 and 43.208.020. 99-24-094, § 246-326-990, filed 11/30/99, effective 12/31/99. Statutory Authority: RCW 43.70.250, 43.70.110 and 43.20B.020. 95-12-097, § 246-326-990, filed 6/7/95, effective 7/8/95. Statutory Authority: RCW 43.70.250. 92-12-028 (Order 273), § 246-326-990, filed 5/28/92, effective 6/28/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-326-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-338 WAC
MEDICAL TEST SITE RULES

WAC

WAC 246-338-990 Fees. (1) The department will assess and collect biennial fees for medical test sites as follows:

(a) Charge fees, based on the requirements authorized under RCW 70.42.090 and this section;

(b) Assess additional fees when a medical test site adds licensed tests that result in a change of category; and

(c) Determine fees according to criteria described in Table 990-1.

Table 990-1 License Categories and Fees

Category of License	Number of Tests/Year	Biennial Fee
Certificate of Waiver	N/A	$ 108
PPMP	N/A	$ 163
Accredited	N/A	$ 325
Limited Testing	1-750 tests	$ 543
Low Volume	751-2,000 tests	$1,086
Category A	2,001-10,000 tests, 1-3 specialties	$1,629
Category B	2,001-10,000 tests, 4 or more specialties	$1,955
Category C	10,001-25,000 tests, 1-3 specialties	$2,281
Category D	10,001-25,000 tests, 4 or more specialties	$2,715
Category E	25,001-50,000 tests	$3,259
Category F	50,001-75,000 tests	$3,802
Category G	75,001-100,000 tests	$4,453
Category H	100,001-500,000 tests	$5,105
Category I	500,001-1,000,000 tests	$5,432
Category J	> 1,000,000 tests	$5,974
Follow-up survey for deficiencies		Direct staff time
Complaint investigation		Direct staff time

(2) The following programs are excluded from fee charges when performing only waived hematocrit or hemoglobin testing for nutritional evaluation and food distribution purposes:

(a) Women, infant and children programs (WIC); and

(b) Washington state migrant council.

[Statutory Authority: RCW 70.42.090. 99-24-061, § 246-338-990, filed 11/29/99, effective 12/30/99; 96-12-011, § 246-338-990, filed 5/24/96, effective 6/24/96. Statutory Authority: Chapter 70.42 RCW. 94-17-099, § 246-338-990, filed 8/17/94, effective 9/17/94; 93-18-091 (Order 390), § 246-338-990, filed 9/1/93, effective 10/2/93; 91-21-062 (Order 205), § 246-338-990, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-990, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-120, filed 9/21/90, effective 10/22/90.]

Chapter 246-358 WAC
TEMPORARY WORKER HOUSING

WAC

WAC 246-358-600 Cherry harvest camps—Applicability. (1) WAC 246-358-600 through 246-358-680 apply only to operators of cherry harvest camps during the cherry harvest season; and

(2) WAC 246-358-600 through 246-358-680 apply to:

(a) Cherry harvest camps that consist of five or more dwelling units, or any combination of dwelling units or spaces that house ten or more occupants; and

(b) Operators of cherry harvest camps who must comply with substantive state health and safety standards to qualify for MSPA.

(3) WAC 246-358-010, 246-358-030 through 246-358-175, and WAC 246-358-990 apply to cherry harvest camps, unless a specific exemption is provided in WAC 246-358-600 through 246-358-650.

(4) WAC 246-358-600 through 246-358-680 do not apply to housing regulated by chapter 59.18 RCW, Residential Landlord-Tenant Act, or chapter 59.20 RCW, Mobile Home Landlord-Tenant Act.

(5) The department will periodically review WAC 246-358-600 through 246-358-680.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-600, filed 5/19/99, effective 5/19/99.]

WAC 246-358-610 Cherry harvest camps—Licensing. A cherry tent camp license is limited to twenty-one days.

(1) An operator must apply for an operating license prior to the use of the camp by submitting to the department:

(a) A completed application on a form provided by the department;

(b) Proof of a nitrate analysis, and proof of satisfactory results of a bacteriological water quality test as required by WAC 246-358-055(3); alternatively proof camp site is connected to a community water system; and

(c) A fee as specified in WAC 246-358-990.

(2) An operator may receive a license extension from the department for up to seven days when:

(a) The operator requests an extension for additional days at least three days before the license expiration date;

(b) The department in consultation with the local health jurisdiction will determine if an extension would serve to protect the public health.

(3) An operator must:

(a) Post the operating license in a place readily accessible to workers;

(b) Notify the department in the event of a transfer of ownership;

(c) Cooperate with the department during on-site inspections;

(d) Follow the plan of correction established with the department when existing camp site fails to meet the requirements in WAC 246-358-600 through 246-358-680; and

(e) Meet the transitional compliance schedule requirements in WAC 246-358-620 when applicable.

(4) An operator may appeal decisions of the department in accordance with chapter 34.05 RCW and chapter 246-10 WAC.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-610, filed 5/19/99, effective 5/19/99.]

WAC 246-358-620 Cherry harvest camps—Transitional compliance schedule. A transitional compliance schedule may be approved for cherry harvest camps failing to meet a specific requirement or requirements in WAC 246-358-640, 246-358-660, 246-358-670 and 246-358-680. A transitional compliance schedule:

(1) Is a written plan of compliance developed between the department and the operator that includes a timeline for making incremental improvements for meeting specific requirements in the sections identified above.

(2) Will not exceed three years. **EXCEPTION:** The secretary of the department may approve a transitional compliance schedule for up to five years for operators who face extraordinary circumstances and demonstrate a good faith effort to achieve compliance.

(3) Applies to licensed operators. If an operator does not continue to be licensed to operate a cherry harvest camp and at any time thereafter again seeks licensure, the operator will resume compliance with the transitional compliance schedule as it applied at the time last licensed.

(4) Will be approved when the operator:

(a) Identifies the specific WAC section or subsection for which the transitional compliance schedule is being requested;

(b) Provides justification for the request; and

(c) Provides a description of how the intent of the requirement(s) will be met during the transitional compliance phase.

(5) Will be approved when the department determines that the transitional compliance schedule will not:

(a) Negate the purpose and intent of these rules;

(b) Place the safety or health of the camp residents in jeopardy; and

(c) Reduce the effectiveness of any fire and life safety or infection control provision in other codes or regulations.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-620, filed 5/19/99, effective 5/19/99.]

WAC 246-358-630 Cherry harvest camps—Location of camp area and camp management plan. Licensed operators are exempted from the requirements of WAC 246-358-045, 246-358-075, 246-358-135 and 246-358-140 when meeting the requirements of this section. A licensed operator:

(1) Must locate the camp area:

(a) To prevent a health or safety hazard;

(b) On well-drained sites to prevent standing water from becoming a nuisance;

(c) Five hundred feet or more from a livestock operation unless the department determines that no health risk exists;

(d) More than two hundred feet from swamps, pools, sink holes, or other surface collections of water unless provisions are taken to prevent the breeding of mosquitoes; and

(e) On sites sufficient in size to prevent overcrowding of necessary structures.

(2) Must ensure that the housing site is maintained at all times in a sanitary condition free from garbage and other refuse.

(3) Must develop and implement a camp management plan and camp rules to assure that the camp is operated in a safe and secure manner and is kept within the approved capacity. Additionally, the licensed operator must:

(a) Inform camp residents of the camp rules, in a language the resident understands by providing individual copies of the rules to each camp resident or posting the rules in the camp area;

(b) Restrict the number of occupants in the camp to the camp capacity as determined by the department. The camp capacity will be determined by the number of tents and the number of persons per tent, area of the site and the ratio of occupants to the number of sinks, showers, and toilets.

(4) Must meet the following requirements for all tents within the camp, including tents provided by employees. The operator will:

(a) Provide a vapor barrier for all tents that are not on asphalt, concrete, or wooden platform; and

(b) Limit the number of occupants who can sleep in the tent to the number for which it was designed.

(5) May provide a tent for employee use when the following requirements are met:

(a) The tent has screened flaps over windows and doors with a means of fastening the flaps shut;

(b) The tent has a sewn-in floor; and

(c) The tent has fifty square feet per occupant.

(6) May allow an employee to provide his or her own trailer, recreational vehicle, camper or van if designed for sleeping. These vehicles are subject to the same occupancy requirements as a tent. Employees may use their own tents if the tents meet the following requirements:

(a) The tents are store-purchased; and

(b) The tents have a sewn-in floor.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-630, filed 5/19/99, effective 5/19/99.]

WAC 246-358-640 Cherry harvest camps—Adequate lighting, electricity and alternative power. Licensed operators are exempted from the lighting requirements of WAC 246-358-075, 246-358-090, 246-358-095, 246-358-100 and 246-358-125 when meeting the requirements of this section. A licensed operator must:

(1) Provide adequate lighting:

(a) To allow for safe passage of the camp residents from the tent area to the toilets and sinks twenty-four hours per day;

(b) In cooking and food handling areas as needed for safe food preparation;

(c) In shower rooms during hours of operation; and

(d) In toilets with water flush toilets twenty-four hours per day. The lighting may be natural or artificial.

(2) Provide adequate electricity or alternate power source to:

(a) Provide adequate lighting as required by subsection (1) of this section; and

(b) Power one cubic foot of mechanical refrigeration per person per day.

(3) Ensure wiring and fixtures are installed in accordance with department of labor and industries regulations, RCW 19.28.070 and local ordinances, and maintained in a safe condition.

(4) Ensure heating, cooking, water heating, and other electrical equipment is installed in accordance with state and local ordinances, codes, and regulations governing such installation.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-640, filed 5/19/99, effective 5/19/99.]

WAC 246-358-650 Cherry harvest camps—Bathing, toilet and handwashing areas. Licensed providers are exempt from the requirements of WAC 246-358-095 and 246-358-100 when meeting the requirements of this section. To meet the bathing, toileting and handwashing needs of camp residents, a licensed operator must:

(1) Provide hot and cold running water under pressure adequate to:

(a) Meet the needs of occupants as determined by the department; and

(b) Meet the requirements of WAC 246-358-680(1);

(2) Provide facilities that are kept clean and sanitary;

(3) Provide sloped, coved floors of nonslip impervious materials;

(4) Provide floor drains;

(5) Provide smooth, water impervious walls and partitions to the height of splash;

(6) Provide cleanable, nonabsorbent waste containers in or near shower rooms and toileting areas;

(7) Provide sinks and bathing facilities connected through properly trapped floor drains to an approved disposal system that complies with local ordinances;

(8) Provide water flush toilets unless privies or other methods are specifically approved by the department or local health officer according to requirements in chapter 246-272 WAC;

(9) Have a service contract for sewage pumping with a licensed waste disposal company at least weekly if vault privies or chemical toilets are approved for use. Vault privies or chemical toilets must be located at least fifty feet from any dwelling unit, space, or food handling facility;

(10) Provide an adequate supply of toilet paper in each toilet room, privy, and chemical toilet compartment;

(11) Provide clearly marked toilet rooms or chemical toilets for "men" and for "women" by signs printed in English and in the native language of the persons occupying the camp, or marked with easily-understood pictures or symbols when both men and women occupy the camp;

(12) Ensure that toilet facilities are kept in a clean and sanitary condition, cleaned at least daily;

(13) Request occupants to maintain toilet facilities in a clean and sanitary condition;

(14) Provide adequate numbers of toilets, handwashing sinks and showerheads. The department will determine the number of handwashing sinks and shower heads according to the following ratios:

HANDWASHING SINKS—One per each six to ten camp occupants or fraction thereof.

SHOWER HEADS—One per each ten to fifteen camp occupants or fraction thereof.

TOILETS—One per each ten to fifteen camp occupants of each sex with a minimum of two toilets for any facility shared by men and women; and

(15) Provide handwashing sinks in or adjacent to toileting areas.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-650, filed 5/19/99, effective 5/19/99.]

WAC 246-358-660 Cherry harvest camps—Personal storage. Licensed operators must provide storage facilities for clothing and personal articles for each camp occupant.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-660, filed 5/19/99, effective 5/19/99.]

WAC 246-358-670 Cherry harvest camps—Cold food storage areas. Licensed operators are exempt from cold storage requirements of WAC 246-358-125 when meeting the requirements of this section.

Licensed operators must provide mechanical refrigeration which:

(1) Allows for one cubic foot of storage per person; and

(2) Is capable of maintaining a temperature of forty-five degrees Fahrenheit.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-670, filed 5/19/99, effective 5/19/99.]

WAC 246-358-680 Cherry harvest camps—Food storage and preparation areas. Licensed operators are exempt from food storage and preparation requirements of WAC 246-358-125 when meeting the requirements of this section.

(1) The licensed operator must provide:

(a) Covered food preparation and cooking areas to protect the food from the elements, including dust;

(b) Food storage areas adequate to protect food from attracting rodents and insects;

(c) Easily cleanable food preparation areas;

(d) Handwashing facilities and dishwashing facilities with hot water within one hundred feet of food preparation areas;

(e) Adequate tables and chairs or benches for the camp residents; and

(f) An operable hot plate or camp stove with a minimum of one cooking surface for every four adult occupants or one family group. The department may determine that a metal or stone barbecue, with fuel provided, may be substituted for one-half of the required number of hot plates or camp stoves.

(2) At their own option, occupants may provide their own means of cooking in lieu of having a hot plate or camp stove provided by the licensed operator when:

(a) The means of cooking meets applicable safety standards; and

(b) The licensed operator documents that a camp occupant chose not to use the means of cooking provided by the licensed operator.

[Statutory Authority: RCW 70.54.110 and 43.20.050(3). 99-12-006, § 246-358-680, filed 5/19/99, effective 5/19/99.]

WAC 246-358-990 Fees. (1) License fees. An operator must submit to the department a license fee of twenty-five dollars and an on-site survey fee as specified in Table 990.

Note: A separate on-site survey fee will be charged for each housing site owned or managed by an operator which is more than thirty minutes or twenty-five miles apart.

(2) Self-survey program fee. An operator who meets the self-survey program requirements of WAC 246-358-027 must pay:

(a) An annual licensing fee, according to Table 990; and

(b) An on-site survey fee every third year.

(3) Follow-up surveys. An operator will be charged an additional on-site survey fee for any follow-up surveys, when the department determines additional on-site surveys are necessary to confirm compliance with this chapter.

(4) Complaint investigation fees. An operator will be charged for each on-site survey conducted by the department when a complaint investigation results in the complaint being found valid. This fee will be charged according to Table 990 for on-site survey.

(5) Water test fees. An operator who cannot provide written proof that the water system serving the camp is in compliance with WAC 246-358-055 at the time of survey will be:

(a) Directly billed for the cost of each required water sample collected by department staff;

(b) Cited for noncompliance with WAC 246-358-055; and

(c) If substantiated, cited for operating an unlicensed camp.

(6) Late fees. An operator who does not submit the fee and application as required by WAC 246-358-025, Licensing, may be charged a late fee of one-half the cost of the license fee. If the license fee and the application are not received by the time of the preoccupancy survey, an additional late fee of one-half the cost of the license fee may be charged. If the fee and application are not received within ten days of the preoccupancy survey the TWH may be considered unlicensed and subject to fines according to WAC 246-358-900.

(7) Refunds. The license and on-site survey fee may be refunded when the operator submits:

(a) A written request to the department; and

(b) Provides documentation that the housing was not occupied during the license period.

Table 990

Number of Units or Occupants Whichever is Greater	On-Site Survey Fee (Includes: Initial, Annual Licensing, Follow-Up, and Complaint Investigation Surveys)	License Fee	Total Fee Survey +License
1 to 4 units or 9 occupants or less*	$45.00	$25.00	$70.00
5 to 10 units or 10 to 50 occupants	$70.00	$25.00	$95.00
11 to 20 units or 51 to 100 occupants	$120.00	$25.00	$145.00
21 to 50 units or 101 to 150 occupants	$150.00	$25.00	$175.00
over 50 units or over 150 occupants	$175.00	$25.00	$200.00

Note: The on-site survey fee includes two surveys per year (one preoccupancy and one occupancy). Any additional visits (follow-up and/or complaint investigation) will be considered an additional service and will be billed separately at the rates established in Table 990.

*Operators with four or less units or nine or less occupants are not required to be licensed except when licensure is required by WAC 246-358-025.

[Statutory Authority: RCW 43.70.340. 99-24-095, § 246-358-990, filed 11/30/99, effective 12/31/99. Statutory Authority: RCW 43.70.340 and 43.70.040. 93-03-031 (Order 324), § 246-358-990, filed 1/12/93, effective 2/12/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-358-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 87-24-074 (Order 2564), § 440-44-100, filed 12/2/87; 86-05-029 (Order 2342), § 440-44-100, filed 2/19/86.]

Chapter 246-359 WAC

TEMPORARY WORKER HOUSING CONSTRUCTION STANDARD

WAC

WAC 246-359-001 Purpose and scope. (1) **Purpose.** The purpose of this chapter is to provide minimum requirements to safeguard the health and general welfare of occupants of temporary worker housing by regulating and controlling the design, construction, materials, location and maintenance of all buildings and structures within the authority of chapter 246-358 WAC (the temporary worker housing rules) and this chapter.

(2) **Scope.** This chapter implements the requirements established by RCW 70.114A.081 and 43.70.337 to provide minimum construction requirements for new, relocated, existing or altered buildings and structures or portions thereof intended for use as temporary worker housing. Such buildings and structures must be licensed by the Washington state department of health under chapter 246-358 WAC and designated as "temporary worker housing occupancies." Buildings and structures which are not licensed, inspected and approved by the department must meet the provisions of the state building code under the local authority having jurisdiction and local ordinances.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-001, filed 1/18/99, effective 2/18/99.]

WAC 246-359-005 Applicability. (1) This chapter applies only to temporary worker housing as:

(a) Defined in chapter 70.114A RCW; and

(b) Licensed under chapter 246-358 WAC (temporary worker housing rules) according to RCW 43.70.340 (Farmworker housing inspection fund—fee on labor camp operating license).

(2) Existing structures built as nonresidential buildings, according to the state building code, may be licensed as temporary worker housing by complying with the specific requirements of WAC 246-359-600, alternate construction, and approved under the authority of this chapter.

(3) Alterations to residential housing constructed according to the state building code and approved by the authority having jurisdiction must apply to:

(a) The authority having jurisdiction for issuing building permits; or

(b) The department in compliance with this chapter.

(4) Temporary worker housing meeting the requirements of subsection (1) of this section must:

(a) Be located on a rural worksite; and

(b) Comply with:

(i) WISHA labor camp provisions;

(ii) Chapter 246-358 WAC (temporary worker housing rules); and

(iii) The electrical code, chapter 296-46 WAC.

(5) Temporary worker housing built in compliance with this chapter is exempt from state building code accessibility laws, RCW 19.27.031(5).

(6) Temporary worker housing built in compliance with this chapter which is subsequently converted to another use becomes subject to all local requirements for such use as enforced by the authority having jurisdiction.

(7) This chapter does not apply to:

(a) Housing built for use by the general public which is governed by chapter 59.18 RCW (Residential Landlord-Ten-

ant Act) or chapter 59.20 RCW (Mobile Home Landlord-Tenant Act);

(b) Factory assembled structures as defined in this chapter, except for the requirements in subsection (8) of this section; and

(c) The construction of structures governed by the state building code and enforced by the authority having jurisdiction.

(8) This chapter is limited to issuing a construction permit for factory assembled structures to meet the following requirements:

(a) On-site installation; and

(b) Inspection of the site, foundation, and hook-ups, including, but not limited to: Potable water, sewage disposal systems, or gas connections.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-005, filed 1/18/99, effective 2/18/99.]

WAC 246-359-010 Definitions. For the purposes of this chapter, the following words and phrases will have the following meanings unless the context clearly indicates otherwise:

(1) "Alter" or "alteration" means any change, major repair, addition or modification in construction.

(2) "Architect" means an individual licensed by chapter 18.08 RCW to practice in the state of Washington.

(3) "Construction permit" means a permit issued by the department which allows the applicant to construct structures according to this chapter.

(4) "Construction standard" means temporary worker housing construction code as defined in RCW 70.114A.081.

(5) "Department" means the Washington state department of health.

(6) "Dormitory" means a building or portion of a building, designed to provide group sleeping accommodations for temporary workers.

(7) "Dwelling unit" means a shelter, building, or portion of a building, for a family that may include cooking, eating, sleeping and sanitation facilities and that is physically separated from other nonsleeping and common-use areas.

(8) "Engineer" means an individual licensed by chapter 18.43 RCW to practice in the state of Washington.

(9) "Factory assembled structures" or "FAS" means those structures under the authority of chapter 43.22 RCW including:

(a) Mobile and manufactured homes;

(b) Commercial coaches;

(c) Recreational vehicles;

(d) Recreational park trailers; and

(e) Factory-built housing which is any structure designed for human occupancy other than a manufactured or mobile home, where the structure or any room of which is either entirely or substantially prefabricated or assembled at a place other than a building site.

(10) "Family" means two or more persons related by blood or marriage or a group of persons living together in a dwelling unit.

(11) "Floor area" is the area included within the surrounding exterior walls of a building or portion thereof.

(12) "Habitable room" or "habitable space" is a room or space in a structure with a minimum seven foot ceiling used for living, sleeping, eating, or cooking. Bathrooms, toilet compartments, closets, halls, storage or utility space, and similar areas, are not considered habitable space.

(13) "Jurisdiction having authority" means, a local county or city building or health or zoning or public works department or state department of health or ecology or labor and industries, etc.

(14) "Labor camp" means the temporary labor camp requirements of WAC 296-307-160 of the Washington Industrial Safety and Health Act of 1993, chapter 49.17 RCW as amended September 10, 1994.

(15) "Occupant" means a temporary worker or a person who resides with a temporary worker at a housing site.

(16) "State building code" means the building code, plumbing code, mechanical code, and fire code as referenced under RCW 19.27.031.

(17) "Special inspector" means a person paid at the applicant's expense to conduct special inspections when the department determines the required inspections are not sufficient.

(18) "Temporary worker" means a person employed intermittently and not residing year-round at the same site.

(19) "Temporary worker housing" or "TWH" means a place, area, or piece of land where sleeping places or housing sites are provided by an employer for his or her employees or by another person, including a temporary worker housing operator, who is providing such accommodations for employees, for temporary, seasonal occupancy, and includes "labor camps" under RCW 70.54.110.

(20) "Temporary worker housing (TWH) occupancies" means buildings, structures or portions thereof used for occupancy by temporary workers.

(21) "WISHA" means the Washington Industrial Safety and Health Act, chapter 49.17 RCW administered by the state of Washington department of labor and industries. Temporary labor camp requirements of WAC 296-307-16001 are in force for temporary labor camps.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-010, filed 1/18/99, effective 2/18/99.]

WAC 246-359-020 Powers and duties of the department of health. The department:

(1) Is authorized and directed to enforce all the provisions of this chapter, according to the laws as enacted by the Washington state legislature.

(2) Has the power to issue written interpretations of this chapter as long as the interpretations are in conformance with the intent and purpose of this chapter and the regulated community is informed of these interpretations.

(3) May adopt and enforce rules and supplemental regulations to clarify the application of the provisions of this chapter consistent with the intent and purpose of this chapter.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-020, filed 1/18/99, effective 2/18/99.]

WAC 246-359-030 Cooperation with the department of health—Right of entry. (1) **Department authority.** The

department has authority to enter any building or area used for temporary worker housing, at reasonable times to:

(a) Inspect the site for compliance with this chapter and related standards; and

(b) Determine, based on reasonable cause, if a building or condition on the premises is unsafe, dangerous or hazardous.

(2) **Refusal of entry.** When the owner or person having lawful control or supervision authority refuses entry or has required a warrant, the department will seek remedies provided by law to secure entry to the temporary worker housing site.

(3) **Occupied temporary worker housing.** The department must present credentials to the occupant and request the right to enter a dormitory or dwelling unit when temporary workers are in residence.

(4) **Unoccupied temporary worker housing.** When a dormitory or dwelling unit does not have temporary workers in residence, the department must make a reasonable effort to locate the owner or person having lawful control or supervision of the temporary worker housing to request entry.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-030, filed 1/18/99, effective 2/18/99.]

WAC 246-359-040 Appeals. (1) The department may deny, suspend, modify, or revoke a permit in any case in which it finds that there has been a failure or refusal to comply with the requirements of chapter 70.114A RCW or this chapter.

(2) The department's notice of a denial, suspension, modification, or revocation of a license will be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest a decision.

(3) An applicant who contests a department permit decision must, within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, PO Box 47879, Olympia, WA 98504-7879; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved;

(ii) The grounds for contesting the department decision; and

(iii) A copy of the contested department decision.

(4) The proceeding is governed by the Administrative Procedure Act, chapter 34.05 RCW, this chapter, and chapters 246-08 and 246-10 WAC. If a provision in this chapter conflicts with chapter 246-08 or 246-10 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-040, filed 1/18/99, effective 2/18/99.]

WAC 246-359-050 Minor variances to the temporary worker housing construction standard. An applicant may apply for a minor variance from the requirements of this chapter by filing a written request with the department.

(1) **Responsibilities of applicant.** If requesting a minor variance, an applicant must:

(a) Submit the following information in writing:

(i) The specific requirement or requirements from which the variance is requested;

(ii) Adequate justification that the variance is needed to obtain a beneficial use of the housing or to prevent a practical difficulty; and

(iii) How the variance will achieve the same result as the requirement and any specific alternative measures to be taken to protect the health and safety of the occupants;

(b) Pay a fee set by the department according to WAC 246-359-990, Table I; and

(c) Follow the process stated in WAC 246-359-060, alternate construction, when applicable.

(2) **Department response.** The department will provide a written response to the applicant within forty-five days of receipt of the minor variance request. The written response will state the acceptance or denial of the variance, including the reasons for the department's decision. At a minimum the department will make its decision based on:

(a) The applicant's request as described in subsection (1) of this section;

(b) Research into the variance request; and

(c) Expert advice.

(3) **Applicant's response to denials.** According to chapter 34.05 RCW the applicant has twenty-one days after receiving the department's written denial, of the variance request, to contest the decision.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-050, filed 1/18/99, effective 2/18/99.]

WAC 246-359-060 Architect or engineer of record and plan submittal responsibilities. (1) The department will require construction documents to be prepared by an architect or engineer under:

(a) WAC 246-359-600, alternate construction;

(b) WAC 246-359-710, installation requirements for factory assembled structures;

(c) WAC 246-359-720, installation requirements for manufactured homes.

(2) The applicant must provide the name of the architect or engineer of record on the construction permit application.

(3) The applicant is responsible to notify the department, in writing, when the architect or engineer of record changes or is no longer able to review and coordinate all the necessary submittal documents for compatibility with the design of the building.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-060, filed 1/18/99, effective 2/18/99.]

WAC 246-359-070 Application and construction documents required for plan review. (1) To have construction documents reviewed the applicant must submit to the department:

(a) A completed and signed application, on a form provided by the department, for each structure (individual building);

(b) The required plan review fee, according to WAC 246-359-990;

(c) Two sets of construction documents, on substantial paper, including:

(i) Plans and diagrams drawn to scale;

(ii) Specifications;

(iii) Computations; and

(iv) Other documents needed to determine if the provisions of this chapter and related state rules are being met, for example solid waste disposal management plan or soil testing;

(d) When applicable, manufacturer's installation instructions as required for factory assembled structures, WAC 246-359-710, and manufactured homes, WAC 246-359-720;

(e) Proof of an adequate approved potable water supply to meet the intended use of the temporary worker housing and which meets the requirements of chapters 246-290 and 246-291 WAC (water rules) and WISHA;

(f) Copy of the on-site sewage system permit from the jurisdiction having authority;

(g) Proof of a water right permit from the department of ecology, when required;

(h) Proof of current approval from labor and industries, when required, for factory assembled structures; and

(i) Proof the project meets zoning requirements as established for height, setback and road access under the authority having jurisdiction.

(2) The plans and specifications must clearly identify in detail the location, nature and extent of the work proposed.

(3) The department will only begin plan review when:

(a) All the documents required in this section are submitted; and

(b) The plan review fee is received.

(4) The department can refund up to eighty percent of the plan review fee if the applicant submits a written request to stop the project before the plan review process is complete. Refunds are based on the plan review fee paid as required by Table I in WAC 246-359-990 and the amount of plan review completed as determined by the department.

(5) The department will charge an additional plan review fee according to Table I in WAC 246-359-990, when:

(a) Site inspections determine the project has not been built according to the approved construction documents and an additional plan review is required; or

(b) Revised construction documents are submitted after approval of the initial construction documents.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-070, filed 1/18/99, effective 2/18/99.]

WAC 246-359-080 Plan review approval and expiration of plan approval. (1) The department will notify the applicant in writing:

(a) With a "plan review approval letter" when the construction documents meet the requirements of this chapter; or

(b) With a "not approved letter" when the construction documents do not meet the requirements of this chapter and a resubmission of plans or documents is required by the department for approval.

(2) The applicant has a period of one year from the date of the plan review approval letter to submit the construction permit fee or the plan review approval will expire.

(3) The department will destroy all construction documents related to the project when the plan review approval expires.

(4) To renew action on an expired plan review the applicant must resubmit the construction documents and pay a new plan review fee to the department as required in WAC 246-359-990.

(5) Construction documents modified after the department issues approval must be resubmitted for approval with an additional fee as specified in WAC 246-359-070.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-080, filed 1/18/99, effective 2/18/99.]

WAC 246-359-090 Issuing and maintaining a construction permit. (1) The department will issue a construction permit when:

(a) Construction documents are approved according to WAC 246-359-080; and

(b) Permit and inspection fees are paid according to WAC 246-359-990.

(2) Construction can begin after the applicant is issued a construction permit by the department;

(3) The following conditions, at a minimum, must be met during construction:

(a) The "inspection record card" must be posted in a visible location at the worksite and be readily accessible to the inspector at the worksite; and

(b) The approved plans must be readily available to the inspector during all scheduled inspections.

(4) The department will void the permit and the applicant's right to continue construction when:

(a) The plans are changed, modified or altered without prior approval by the department as specified in WAC 246-359-080;

(b) Any deviation in construction or design is made from the approved plans; and

(c) The inspection record card and the approved plans are not readily and easily available to the inspector.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-090, filed 1/18/99, effective 2/18/99.]

WAC 246-359-100 Expiration and extension of construction permits. (1) **Permit expiration.** The permit will be considered null and void one year from the date the permit was issued if the applicant:

(a) Has not initiated the work authorized by the permit;

(b) Suspends or abandons the authorized work at any time after the work has begun by not calling for the next required inspection within one year after a required inspection;

(c) Has not applied for a time extension according to the requirements in subsection (2) of this section.

(2) **Permit extension.** The applicant can apply for a one time only extension when the request is made in writing to the department:

(a) Before the permit expires;

(b) Stating reasons satisfactory to the department;

(c) The original plans and specifications will be used and no changes have been made or are planned to be made; and

(d) The applicable standards have not changed.

(3) Any applicant who does not apply for an extension according to the requirements in this section cannot resume work unless the applicant:

(a) Resubmits plans according to WAC 246-359-070; and

(b) Pays full plan review and permit fee according to WAC 246-359-990.

(4) The department can refund up to eighty percent of the construction permit fee if the applicant submits a written request before construction starts. The refund will be determined by the department based on the permit fee paid as required by Table I in WAC 246-359-990.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-100, filed 1/18/99, effective 2/18/99.]

WAC 246-359-110 Construction without a permit. (1) Construction of temporary worker housing allowed by this chapter can only begin after a construction permit has been issued by the department as described in WAC 246-359-090.

(2) A person who begins any work without a construction permit will be subject to an investigation and an investigation fee as described in WAC 246-359-990 whether or not a permit is then or subsequently issued. An investigation and investigation fee will be in addition to any other "additional" inspections or fees described in WAC 246-359-990.

(3) The department will determine if the person initiating building or work without a required construction permit is:

(a) Under the authority of this chapter and must follow the construction permit process defined in this chapter; or

(b) Found to be outside the authority of this chapter and must be reported to the jurisdiction having authority and the prosecuting attorney of that jurisdiction.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-110, filed 1/18/99, effective 2/18/99.]

WAC 246-359-120 Required inspections. The department or its designee, when notified by the applicant in writing has authority to conduct all of the inspections described in this section.

(1) **Site/foundation inspection.** To be made after excavations for footings are complete, and after any required forms and reinforcing steel are in place, **but** before any concrete has been placed.

(2) **Concrete slab or under-floor inspection.** To be made after all in-slab or under-floor building service equipment, conduit, piping accessories and other ancillary equipment items are in place, **but** before any concrete is placed or floor sheathing installed, including the subfloor.

(3) **Framing/rough-in inspection.** To be made after the roof, all framing, wall, and roof members are in place including fire blocking and bracing, heating, and rough electrical and plumbing has been installed.

(4) **Final inspection.** To be made after finish grading and the building is completed and ready for occupancy.

(5) **Additional inspections.** To be made after the applicant has received notification that an additional inspection or inspections are necessary. The department will conduct the following additional inspections to:

(a) Assure the requirements of this chapter are being met, specifically to verify:

(i) Stop work orders, WAC 246-359-130, are adhered to;

(ii) Approved plans, according to WAC 246-359-080, have not been altered without prior department approval; and

(iii) A construction permit has been issued according to WAC 246-359-090;

(b) Determine compliance with other required laws or ordinances necessary to enforce this chapter; and

(c) Determine if an approved variance is being followed, when verification cannot be determined through the inspections described in subsections (1) through (4) of this section.

(6) **Special inspections.** To be made by a special inspector when the applicant is building to the alternate construction standards and the inspections required in subsections (1) through (5) of this section are not sufficient to determine compliance with the alternate construction methods.

(7) **Reinspections.** Reinspections will be conducted and a reinspection fee charged for each reinspection conducted for the following reasons:

(a) Work for which an inspection is requested and is not complete;

(b) Required corrections called for have not been made;

(c) The inspection record card is not posted or readily available at the worksite;

(d) The approved plans are not readily available to the inspector; and

(e) The inspector's request for equipment or information was not provided at the site preventing the inspector from conducting the scheduled inspection.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-120, filed 1/18/99, effective 2/18/99.]

WAC 246-359-130 Stop work orders. (1) The department, upon notifying the applicant in writing, will order work to be stopped when the work being done is found to be contrary to:

(a) The approved plans;

(b) The requirements of this chapter; or

(c) Other laws or ordinances required and necessary to enforce this chapter at a minimum as stated in WAC 246-359-005(4), applicability.

(2) If the department finds work being done contrary to subsection (1) of this section the department, in addition to notifying the applicant in writing, will post a "stop work order" on the construction site.

(3) The applicant is prohibited from continuing any work or causing any work to be performed until solutions to rectify the conditions causing the stop work order have been approved by the department.

(4) The department will document removal of the stop work order by:

(a) Providing the applicant written authorization to proceed with the work; and

(b) Removing or causing the "stop work order" to be removed.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-130, filed 1/18/99, effective 2/18/99.]

WAC 246-359-140 Certificate of completion. (1) The department will issue a "certificate of completion" when:

(a) The inspector determines the project is completed in compliance with the approved construction documents;

(b) The department determines the project is in compliance with this chapter and related rules including:

(i) Proof the potable water supply is approved and adequate to meet the requirements of chapters 246-290 and 246-291 WAC (water rules) and WISHA;

(ii) Proof the sewage disposal system has been approved by the jurisdiction having authority, for example, city or county health or public works department, state department of health or state department of ecology; and

(iii) Proof the electrical system has been approved by the jurisdiction having authority, for example, Washington state department of labor and industries or the city building or planning departments.

(2) **Approved to apply for a license.** The applicant can apply for a temporary worker housing license according to chapter 246-358 WAC after receiving a certificate of completion from the department.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-140, filed 1/18/99, effective 2/18/99.]

WAC 246-359-150 Site requirements. (1) The site used for temporary worker housing must be:

(a) Adequately drained and not subject to periodic flooding;

(b) Located a distance of at least two hundred feet from all surface water;

(c) Located so the drainage from and through the temporary worker housing will not endanger any domestic or public water supply;

(d) Graded, ditched, and made free from depressions which allow water to become a nuisance;

(e) Adequate in size to prevent overcrowding of necessary structures; and

(f) Located on a slope which is not more than one unit (inches, feet, etc.) vertical per twenty units horizontal.

(2) Any structure used for sleeping or preparing and serving food must be located at least five hundred feet from any area in which livestock is kept.

(3) All temporary worker housing structures must be located a minimum of ten feet from any other structure or building.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-150, filed 1/18/99, effective 2/18/99.]

WAC 246-359-160 Temporary worker housing minimum floor area and ceiling height. (1) Rooms used for sleeping purposes only must have a minimum of fifty square feet of floor space for each occupant.

(2) Rooms used for cooking, living, and sleeping must have a minimum of seventy square feet for the first occupant and fifty-square feet for each additional occupant.

(3) All habitable rooms and spaces including halls, bathrooms and toilet compartments must have at least a seven foot clear height from the floor to the ceiling or exposed ceiling framing.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-160, filed 1/18/99, effective 2/18/99.]

WAC 246-359-170 Wood framed construction and concrete masonry unit (CMU) general limitations. (1) When building with wood or CMU as required by WAC 246-359-200 through 246-359-580 the following requirements apply:

(a) Floor area must be limited to three thousand six hundred square feet per building;

(b) Height must be limited to one story; and

(c) All floor surfaces must be above grade, no basements.

(2) When building to WAC 246-359-600, alternate construction, the limitations in subsection (1) of this section do not apply.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-170, filed 1/18/99, effective 2/18/99.]

WAC 246-359-180 Concrete footings and foundations for wood framed construction. (1) Concrete used for footings and foundations must have a minimum compressive strength of two thousand pounds per square inch (psi). Concrete must be mixed and delivered in accordance with the requirements of ASTM C94 (Ready-Mix Concrete), or may be field mixed. Field mixed concrete will be subject to independent compressive strength testing and special inspection.

(2) Concrete footings must be placed on firm, undisturbed soil.

(3) Concrete footings must be continuous, be a minimum of twelve inches wide by six inches thick, be reinforced with a minimum of two No. 4 continuous rebar, and be at least eighteen inches below finished grade measured from the bottom of the footing.

(4) Concrete foundations must be a minimum of six inches thick, be reinforced with a minimum of two continuous horizontal No. 4 at the top, be reinforced vertically with No. 4 at twenty-four inches on center, extend at least six inches above the finished grade, and have a total height of not greater than forty-eight inches.

(5) Concrete foundations that are formed by a thickened concrete slab edge as part of a slab on grade floor must be reinforced with two pieces of No. 4 rebar in the upper part and two pieces of No. 4 rebar in the lower part of the foundation. The concrete floor will be reinforced according to WAC 246-359-430. The thickened concrete slab edge must extend at least eighteen inches below finished grade, be at least twelve inches in width, and provide a slab height of at least six inches above finished grade.

(6) Where the walls are of wood construction, the treated foundation plates or sills must be bolted to the foundation or foundation wall with not less than one-half inch nominal diameter steel bolts embedded at least seven inches into the concrete and spaced not more than seventy-two inches apart. There must be a minimum of two bolts per piece with one bolt located within twelve inches of each end of each piece. A properly sized nut and washer must be tightened on each bolt to secure the place.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-180, filed 1/18/99, effective 2/18/99.]

WAC 246-359-200 Wood framed construction. (1) Buildings constructed using wood materials must follow the requirements of WAC 246-359-001 through 246-359-340 to comply with this chapter.

(2) Wood structural members in contact with the ground, and/or concrete must be pressure treated and must bear the proper grade mark of an approved inspection/testing agency.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-200, filed 1/18/99, effective 2/18/99.]

WAC 246-359-210 Treated wood foundations for wood framed construction. (1) All lumber and plywood used for wood foundation systems must be pressure treated and bear the grade mark FDN (foundation grade) or better.

(2) Where FDN lumber and plywood is cut or drilled after treatment, the cut surface must be field treated with a preservative that is designated for that purpose.

(3) Hot-dipped zinc-coated steel nails or stainless steel fasteners will be used as fasteners for treated wood foundation walls. Electrogalvanized nails or staples and hot-dipped zinc-coated staples cannot be used.

(4) Treated wood foundations must have composite footings consisting of a minimum two-by-eight lumber footing plate set eighteen inches below finished grade on top of a layer of gravel, coarse sand or crushed stone. The gravel, sand, or crushed stone footing will have a width of not less than sixteen inches and a depth of not less than six inches, and must be placed in firm, undisturbed soil.

(5) The gravel, sand, or crushed stone footing must consist of:

(a) Washed and graded gravel free from organic, clayey or silty soils with a maximum stone size not exceeding three-fourths inch;

(b) Coarse sand free from organic, clayey, or silty soils with a minimum grain size of one-sixteenth inch; or

(c) Crushed stone with a maximum size of one-half inch.

(6) Treated wood foundation walls must be constructed of two-by-six studs at a minimum of sixteen inches on center with a double two-by-six top plate. Cover the studs with a minimum one-half inch thick pressure treated exterior plywood sheathing placed on the exterior of the studs. Treated wood foundation walls will not be greater than forty-eight inches measured from the bottom of the footing plate to the top of the double top plate.

(7) Joints in the footing plate and top plates must be staggered at least one stud space. Framing at locations where openings occur in the wall and floor systems above, and at other points of concentrated loads must have studs added at those points to support the concentrated loads.

(8) Before backfilling, cover the gravel, sand, or crushed stone appearing outside the treated wood foundation wall with strips of six-mil thick polyethylene sheeting, Type 30 felt, or equivalent material with adjacent strips lapped to provide for water seepage while preventing excessive infiltration of fine soils.

(9) Backfill on the outside to eight inches or more below the top of the treated wood foundation walls. Backfill on the inside of the treated wood foundation walls (crawl space) a minimum depth of six inches above the top of the footing plate.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-210, filed 1/18/99, effective 2/18/99.]

WAC 246-359-220 Floor framing for wood framed construction. (1) **Girders.**

(a) Girders supporting floor joists must be a minimum four-by-six Hem-Fir #2, spaced not more than eight feet on center, and placed at least twelve inches above ground.

(b) Girders must be continuous, or must be spliced over supports. When a girder is spliced over a support, a positive tie to the support must be provided.

(c) Each end of each girder member must have a minimum three inch of bearing on treated wood plates or treated wood posts.

(2) **Floor joists.**

(a) Floor joists must be a minimum two-by-six spaced sixteen inches on center or two-by-eight spaced twenty-four inches on center, Hem-Fir #2 or better, spanning not more than eight feet between supports, and placed at least eighteen inches above ground.

(b) Floor joists must be continuous or spliced only over a support with a minimum three-inch lap.

(c) The end of each joist must have not less than three inch bearing on treated wood plate.

(d) Notches on the ends of joists cannot not exceed one fourth the joist depth. Holes bored in joists cannot be within two inches of the top or bottom of the joist, and the diameter of any such hole cannot exceed one-third the depth of the joist. Notches in the top or bottom of joists cannot exceed one-sixth the depth and cannot be located in the middle third of the span.

(e) Floor joists must have solid blocking at the ends and at each support. Solid blocking cannot be less than two inches nominal in thickness and the full depth of the joist.

(3) **Interior bearing.** Interior bearing footings (pads) must be of plain concrete at least sixteen inches by sixteen inches by eight inches thick placed on firm undisturbed soil.

(4) **Ventilation.** Under floor areas (crawl spaces) must be ventilated by one-fourth inch screened openings of not less than one square foot of opening for each one hundred fifty square feet of under-floor area.

(5) **Supporting interior bearing partitions.** Interior bearing partitions perpendicular to floor joists must not be offset from support girders more than the joist depth. Interior bearing partitions parallel to the floor joists must be supported by a doubled floor joist located directly under the interior bearing partition.

(6) **Subflooring.** Subflooring must be structural wood panels (plywood or OSB), particleboard subfloor or combination subfloor-underlayment, or solid wood.

(a) Structural wood panels will be tongue-and-groove installed perpendicular to the floor joists with end joints occurring over floor joists. The minimum thickness must be five-eighth inches (eleven-sixteenths inches) over floor joists spaced sixteen inches on center and three-fourths inches (twenty-five thirty-seconds inches) over floor joists spaced twenty-four inches on center. Structural wood panels must be grade stamped for use and span. Secure structural wood panels to the floor joist system by use of either nails or glue and nails combination. In both systems, nails must be 8d

common or deformed shank, spaced six inches on center at the edges and twelve inches on center at intermediate supports.

(b) Particleboard subfloor or combination subfloor-underlayment must be installed perpendicular to the floor joists. The minimum thickness must be five-eighths inches over floor joists spaced sixteen inches on center and three-fourths inches over floor joists spaced twenty-four inches on center. Particleboard must be grade stamped for use and span. Secure particleboard to the floor joist system by use of either nails or glue and nails combination. In both systems, nails must be 8d common or deformed shank, spaced six inches on center at the support edges and twelve inches on center at intermediate supports.

(c) Solid wood must be a minimum size of one-inch by six-inch nominal tongue-and-groove wood strip flooring applied perpendicular or diagonally to the floor joists. Secure solid wood flooring to the floor joist system by use of either nails or glue and nails combination as follows for:

(i) Wood strip flooring six inches or less must be nailed to each floor joist by "2-8d" common or box nails; or

(ii) Wood strip flooring greater than six inches must be nailed to each floor joist by "3-8d" common or box nails.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-220, filed 1/18/99, effective 2/18/99.]

WAC 246-359-230 Wall framing for wood framed construction. (1) Exterior walls and interior partitions must be framed as follows:

(a) Studs must be minimum two-by-four wood, Hem-Fir stud grade or better, spaced not more than sixteen inches on center, support no more than one ceiling and one roof, nor exceed eight feet in height for exterior walls.

(b) Studs must be placed with their wide dimension perpendicular to the wall. Not less than three studs must be installed at each corner of an exterior wall.

(c) Studs must be capped with double top plates installed to provide overlapping at corners and at intersections with other partitions. End joints in double top plates must be offset at least forty-eight inches.

(d) Studs must have full bearing on a plate or sill not less than two inches nominal in thickness having a width not less than that of the wall studs.

(2) Headers. All openings four feet wide or less in bearing walls must be provided with headers consisting of either two pieces of two-by-eight Hem-Fir #2, or better, placed on edge and securely fastened together or one piece of four-by-eight Hem-Fir #2 or better. All openings over four feet and up to eight feet wide in bearing walls must be provided with headers consisting of two pieces of two-by-twelve Hem-Fir #2 or better, placed on edge and securely fastened together, or one piece of four-by-twelve Hem-Fir #2 or better.

(3) Wall bracing. Exterior walls must be braced with one of the following methods:

(a) Wood boards of five-eighths inch net minimum thickness applied diagonally to the studs and face nailed with 2-8d common nails per stud.

(b) Minimum forty-eight inch width of wood structural panel sheathing (plywood) with a minimum thickness of three-eighths inches applied vertically at each corner. Provide solid blocking at all edges not supported by studs and secure to studs with 6d common or deformed shank nails spaced at six inches on center at edges and twelve inches on center at intermediate supports. Sheathing must extend from treated plate through double top plate.

(4) Where plumbing, heating or other pipes are placed in studs, a metal tie not less than sixteen galvanized gauge and one and one-half inches wide must be fastened to each plate across and to each side of the opening.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-230, filed 1/18/99, effective 2/18/99.]

WAC 246-359-240 Exterior wall covering for wood framed construction. (1) All weather-exposed surfaces must have a weather resistive barrier. Such barrier must be of waterproof building paper or asphalt saturated felt. Building paper, felt, or equivalent materials must be covered with siding as a protection against damage. Weatherproof sheathing may be used to meet this requirement.

(2) When weatherproof sheathing is used for the weather resistive barrier protection, it must be of the exterior type not less than three-eighths inch thick. Joints must occur over framing members and must be protected by built-in edge laps, a continuous wood batten, caulking, flashing, or by an equivalent material installed per the manufacturer's specifications.

(3) All wood siding and trim must be painted to protect from weather damage.

(4) Flashing. All exterior openings exposed to the weather must be flashed in such a manner as to make them weatherproof.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-240, filed 1/18/99, effective 2/18/99.]

WAC 246-359-250 Roof framing for wood framed construction and concrete masonry units (CMU). (1) Roof framing must have a minimum slope of three units vertical to twelve units horizontal, and must be framed with one of the following methods:

(a) Factory built trusses. Installed per manufacturer's directions and spaced not more than twenty-four inches on center. Roof trusses must be supported laterally at points of bearing by solid blocking to prevent rotation and lateral displacement;

(b) Rafter spans. Allowable rafter spans for Hem-Fir #2 or better must be in accordance with the spans and load conditions listed in Tables 250-A, 250-B or 250-C;

(c) Rafters. Rafters must be framed directly opposite each other at the ridge. There must be a ridge board at least one inch nominal thickness at all ridges and not less in depth than the cut end of the rafter;

(d) Notching at the ends of rafters cannot exceed one fourth the depth. Notches in the top or bottom must not exceed one sixth the depth and must not be located in the middle one third of the span;

(e) Holes bored in rafters must not be within two inches of the top or bottom and their diameter must not exceed one third the depth of the rafter; and

(f) Rafters must be supported laterally at points of bearing by solid blocking of the same material to prevent rotation and lateral displacement.

Table 250-A
Western Wood Products Table for Hem-Fir #2
Rafter (L/240 Deflection Limit) 30# Snow Load and 10# Dead Load

Rafter Size	Spacing—inches on center	Span—feet-inches
2 x 6	12	12-7
2 x 6	16	11-5
2 x 6	24	9-7
2 x 8	12	16-7
2 x 8	16	14-11
2 x 8	24	12-2
2 x 10	12	21-0
2 x 10	16	18-2
2 x 10	24	14-10
2 x 12	12	24-4
2 x 12	16	21-1
2 x 12	24	17-3

Table 250-B
Western Wood Products Table for Hem-Fir #2
Rafter (L/240 Deflection Limit) 40# Snow Load and 10# Dead Load

Rafter Size	Spacing—inches on center	Span—feet-inches
2 x 6	12	11-5
2 x 6	16	10-5
2 x 6	24	8-7
2 x 8	12	15-1
2 x 8	16	13-4
2 x 8	24	10-10
2 x 10	12	18-9
2 x 10	16	16-3
2 x 10	24	13-3
2 x 12	12	21-9
2 x 12	16	18-10
2 x 12	24	15-5

Table 250-C
Western Wood Products Table for Hem-Fir #2
Rafter (L/240 Deflection Limit) 60# Snow Load and 10# Dead Load

Ceiling Joist Size	Spacing—inches on center	Span—feet-inches
2 x 8	12	13-0
2 x 8	16	11-3
2 x 8	24	9-2
2 x 10	12	15-10
2 x 10	16	13-9
2 x 10	24	11-3
2 x 12	12	18-5
2 x 12	16	15-11
2 x 12	24	13-0
2 x 14	12	20-7
2 x 14	16	17-10
2 x 14	24	14-6

(2) The department will allow site built trusses accompanied by structural calculations prepared by a structural engineer.

(3) Trimmer and header rafters must be doubled when the span of the header exceeds four feet. The ends of the header rafters more than six feet long must be supported by framing anchors or rafter hangers unless bearing on a beam, partition, or wall.

(4) Rafters must be nailed to adjacent ceiling joists to form a continuous tie between exterior walls when such joists are parallel to the rafters. Where not parallel, rafters must be nailed to minimum one-by-four cross ties.

(5) Rafter cross ties must be spaced not more than four feet on center, located immediately above the ceiling joists.

(6) Rafter and truss ties must be installed per manufacture's instructions.

(7) Roof assembly must have rafter and truss ties to the wall below and spaced not more than four feet on center.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-250, filed 1/18/99, effective 2/18/99.]

WAC 246-359-300 Ceiling framing for wood framed construction and concrete masonry units (CMU). (1) Notching at the ends of ceiling joists must not exceed one fourth the depth. Notches in the top or bottom must not exceed one sixth the depth and must not be located in the middle one third of the span.

(2) Holes bored in ceiling joists must not be within two inches of the top or bottom and their diameter must not exceed one third the depth of the rafter.

(3) Ceiling joists must be supported laterally at points of bearing by solid blocking to prevent rotation and lateral displacement.

(4) Allowable ceiling joist spans for Hem-Fir #2 or better must be in accordance with the spans and load conditions listed in Table 300-A.

(5) The department will allow spans using other wood species or grade or other load conditions when accompanied by structural calculations prepared by a structural engineer.

Table 300-A
Western Wood Products Table for Hem-Fir #2
Ceiling Joists 10# Dead Load

Ceiling Joist Size	Spacing—inches on center	Span—feet-inches
2 x 6	12	14-5
2 x 6	16	12-8
2 x 6	24	10-4
2 x 8	12	18-6
2 x 8	16	16-0
2 x 8	24	13-1
2 x 10	12	22-7
2 x 10	16	19-7
2 x 10	24	16-0
2 x 12	12	26-3
2 x 12	16	22-8
2 x 12	24	18-6

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-300, filed 1/18/99, effective 2/18/99.]

WAC 246-359-310 Roof sheathing for wood framed construction and concrete masonry units. Roof sheathing shall be structural wood panels (plywood, OSB) with a minimum five-eighths inch thickness, grade stamped for use and span. Secure roof sheathing panels to the roof framing with 8d common nails, spaced six inches on center at the edges and twelve inches on center at intermediate supports.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-310, filed 1/18/99, effective 2/18/99.]

WAC 246-359-320 Roof covering materials for wood framed construction and concrete masonry units (CMU). Roof sheathing must be protected by installing a material that has been designed as a roofing covering product. Installation of the selected roof covering material must be according to manufacturer's instructions and industry standards.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-320, filed 1/18/99, effective 2/18/99.]

WAC 246-359-330 Roof framing ventilation for wood framed construction and concrete masonry units (CMU). (1) Ventilation must be provided for enclosed roof framing spaces by providing sixteen-mesh screened openings at:

(a) The eaves;

(b) The gable ends;

(c) The ridge; or

(d) Any combination of (a) through (c) of this subsection.

(2) The minimum amount of ventilation openings must be at the rate of one square foot of net free opening for every three-hundred square feet of attic area.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-330, filed 1/18/99, effective 2/18/99.]

WAC 246-359-340 Nailing schedule wood framed construction and concrete masonry units. All nailing must be completed according to Table 340.

Table 340
Nailing Schedule

CONNECTION	NAILING[1]
1. Joist to sill or girder, toenail	3-8d
2. Bridging to joist, toenail each end	2-8d
3. 1" x 6" subfloor or less to each joist, face nail	2-8d
4. Wider than 1" x 6" subfloor to each joist, face nail	3-8d
5. 2" subfloor to joist or girder, blind and face nail	2-16d
6. Sole plate to joist or blocking, typical face nail Sole plate to joist or blocking, at braced wall panels	16d at 16" o.c. 3-16d per 16"
7. Top plate to stud, end nail	2-16d
8. Stud to sole plate	4-8d, toenail or 2-16d, end nail
9. Double studs, face nail	16d at 24" o.c.
10. Doubled top plates, typical face nail Doubled top plates, lap splice	16d at 16" o.c. 8-16d
11. Blocking between joists or rafters to top plate, toenail	3-8d
12. Rim joist to top plate, toenail	8d at 6" o.c.
13. Top plates, laps, and intersections, face nail	2-16d
14. Continuous header, two pieces	16d at 16" o.c. along each edge
15. Ceiling joists to plate, toenail	3-8d
16. Continuous header to stud, toenail	4-8d
17. Ceiling joists, laps over partitions, face nail	3-16d
18. Ceiling joists to parallel rafters, face nail	3-16d
19. Rafter to plate, toenail	3-8d
20. 1" brace to each stud and plate, face nail	2-8d
21. 1" x 8" sheathing or less to each bearing, face nail	2-8d
22. Wider than 1" x 8" sheathing to each bearing, face nail	3-8d
23. Built-up corner studs	16d at 24" o.c.
24. Built-up girder and beams	20d at 32" o.c. at top and bottom and staggered 2-20d at ends and at each splice
25. 2" planks	2-16d at each bearing

[1] Common or boxed nails must be used.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-340, filed 1/18/99, effective 2/18/99.]

WAC 246-359-350 Roof connections for concrete masonry units (CMU). (1) Framing members must bear on a two-inch nominal thickness pressure treated plate anchored to the CMU wall with one-half inch diameter bolts. The anchor bolts must be spaced at maximum of six feet on center and a minimum of twelve inches from end of each plate member, and must be embedded into the top of the wall bond beam a minimum of four inches.

(2) Each roof framing member must be secured to the treated plate by installation of a metal tie as approved by the department.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-350, filed 1/18/99, effective 2/18/99.]

WAC 246-359-400 Concrete masonry unit (CMU). Buildings constructed using CMU must follow the requirements of WAC 246-359-001 through 246-359-170 and WAC 246-359-400 through 246-359-580 to comply with this chapter.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-400, filed 1/18/99, effective 2/18/99.]

WAC 246-359-405 Concrete masonry units (CMU) materials. (1) Solid masonry units must not be used.

(2) **Water.** Water used in mortar or grout must be clean and free of deleterious amounts of acid, alkalis or organic material or other harmful substances.

(3) **Cement.** Cementitious materials for:

(a) Grout must be either lime or portland cement; and

(b) Mortar must be one or more of the following:

(i) Lime;

(ii) Masonry cement;

(iii) Portland cement; or

(iv) Mortar cement.

(4) **Mortar.** Mortar must consist of a mixture of cementitious materials and aggregate to which sufficient water has been added to achieve a workable, plastic consistency.

(5) **Grout.** Grout must consist of a mixture of cementitious materials and aggregate to which water has been added such that the mixture will flow without segregation of the materials.

(6) **Handling, storage and preparation of materials.** Handling, storage and preparation of materials at the site must conform to the following:

(a) Masonry materials must be stored so that at the time of use the materials are clean and structurally suitable for use.

(b) All metal reinforcement must be free from loose rust and other coatings that would inhibit reinforcing bond.

(c) Concrete masonry units must not be wetted.

(d) Mortar or grout mixed at the job site must be mixed for:

(i) A period of time not less than three minutes; or

(ii) More than ten minutes in a mechanical mixer with the amount of water required to provide the desired workability.

(e) Hand mixing of small amounts of mortar is permitted.

(f) Mortar may be retempered, except that mortar or grout which has hardened or stiffened due to hydration of the cement must not be retempered or used again.

(g) When water has been added to the dry ingredients, at the job site the mixed:

(i) Mortar must not be used after two and one-half hours has passed; and

(ii) Grout must not be used after one and one-half hours has passed.

(h) Mortar and grout dry mixes, blended in the factory, and mixed at the job site must be mixed in mechanical mixers until workable. The on-site mixing time must not exceed ten minutes if the mix is to be acceptable for use.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-405, filed 1/18/99, effective 2/18/99.]

WAC 246-359-410 Foundations and footings for concrete masonry units (CMU) walls. (1) Footings for load bearing CMU walls must be continuous concrete having a minimum twelve width-by-ten inch thickness, placed a minimum eighteen inches below the finished grade, and reinforced with a minimum of two No. 4 continuous rebar.

(2) Foundations must be one of the following:

(a) Concrete reinforced vertically and horizontally with No. 4 rebar at twenty-four inches on center; or

(b) CMU reinforced vertically and horizontally with No. 4 rebar and having all cells below finished grade fully grouted.

(3) Vertical reinforcement must be spaced at four feet on center, within twelve inches of each corner, extend at least twenty inches up into the CMU wall, and extend at least six inches into the footing with an additional six inches bent at ninety degrees and tied to the horizontal footing rebar.

(4) Foundations must be six inches in width or the width of the CMU wall, whichever is greater.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-410, filed 1/18/99, effective 2/18/99.]

WAC 246-359-420 Placing of concrete masonry units (CMU). (1) CMU must be laid in a running bond pattern with the units in each successive course overlapping the joints in the course below. At corners the length of the corner unit must alternate direction on each successive course.

(2) The mortar must be sufficiently plastic and the units must be placed with sufficient pressure to extrude mortar from the joint and produce a tight joint. Joint furrowing must not exceed the thickness of the shell.

(3) Head joints of open-end CMU designed for use as bond beams that are to be fully grouted need not be mortared.

(4) Surfaces to be in contact with mortar or grout must be clean and free of deleterious materials.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-420, filed 1/18/99, effective 2/18/99.]

WAC 246-359-430 Floors for concrete masonry units (CMU). (1) Floors must be concrete slab on grade and not less than three and one-half inches thick reinforced with "6 x 6 10/10 welded wire mesh (wwm)," and be constructed with not less than four sacks of cement per cubic yard.

(2) When concrete is used as the finished floor it must be sealed or finished according to WAC 246-359-530, interior finishes.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-430, filed 1/18/99, effective 2/18/99.]

WAC 246-359-440 Walls of concrete masonry units (CMU). (1) **Wall thickness.** CMU blocks used for bearing walls must have a minimum nominal thickness of six inches.

(2) **Rebar cover.** All rebar must be:

(a) Placed within the openings of the hollow masonry units;

(b) Completely embedded in mortar or grout; and

(c) Have a minimum cover of three-fourth inch including the masonry unit. Where masonry is exposed to weather, one and one-half inches of cover is required. Where masonry is exposed to soil, two inches of cover is required.

(3) **Reinforcement.**

(a) Masonry walls must have both vertical and horizontal reinforcement. Spliced rebar must overlap at least twenty inches. Reinforcement must be placed prior to grouting. Bolts must be accurately set and held in place to prevent dislocation during grouting.

(b) Vertical reinforcement must consist of No. 4 rebar placed four feet on center along the full length of walls, on

each side of window and door openings, and at corners. Vertical rebar must extend from the top of the foundation to the top of the wall and be grouted in place.

(c) Horizontal reinforcement must consist of bond beams located at four feet above the foundation and repeated at four foot intervals, including one at the top of the wall. Bond beams must be constructed using bond beam masonry units with one continuous No. 4 rebar, grouted in place.

(d) Lintels over door and window openings must be provided and must be sixteen inches deep consisting of bond beam or lintel masonry units extending over the opening and at least twenty inches beyond each side, and with four pieces of No. 4 rebar running the full length of the lintel, grouted in place. The span of lintels over openings must not exceed twelve feet.

(4) **Grouting.**

(a) The grout space must be clean so that all spaces to be filled with grout do not contain mortar projections greater than one-half inch, mortar droppings or other foreign material. Cleanouts must be provided where necessary to clean and clear the spaces prior to grouting. When cleanouts are needed, they must be sealed before grouting.

(b) Grout must be placed so that all spaces designated to be grouted must be filled with grout and the grout must be confined to those specific spaces.

(c) Where bond beams occur, the grout pour must be stopped a minimum of one-half inch below the top of the masonry.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-440, filed 1/18/99, effective 2/18/99.]

WAC 246-359-500 Window construction requirements. (1) All habitable rooms and spaces must be provided with windows the total area of which must be not less than one-tenth of the floor area.

(2) At least one-half of each required window must be able to open for ventilation purposes.

(3) Every sleeping room must have at least one operable window or door for emergency escape or rescue directly opening to an outside area to provide a clear escape away from the building.

(4) Escape or rescue windows must have:

(a) A minimum net clear openable area of five point seven square feet; and

(b) A finished sill height not more than forty-four inches above the floor.

(c) The following minimum net clear openable dimensions:

(i) The height dimension of twenty-four inches; and

(ii) The width dimension of twenty inches.

(5) All operable window openings must be screened with sixteen-mesh material.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-500, filed 1/18/99, effective 2/18/99.]

WAC 246-359-510 Door requirements. Temporary worker housing habitable structures:

(1) Must have a primary entrance, which is at a minimum, three foot-by-six foot eight-inch exit door made of solid core wood or other material designed for use as an exterior door.

(2) Must have at least two exit doors when accommodating ten or more occupants. When two exit doors are required, the doors must be placed a distance apart equal to at least one-half of the length of the maximum overall diagonal dimension of the building area used.

(3) Must have all exterior door openings screened with sixteen-mesh material self-closing screen doors.

(4) With a calculated occupant load of fifty occupants or more must have a screen door which swings in the direction of exiting.

(5) With latched screen doors must have a roller type latch.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-510, filed 1/18/99, effective 2/18/99.]

WAC 246-359-520 Door landings, stairways and guardrails. (1) **Door landings.** Every door must have, at a minimum, a floor area or landing with:

(a) A width not less than the width of the door or the width of the stairway served, whichever is greater; and

(b) A length not less than thirty-six inches.

(2) **Stairways.** Every stairway having two or more risers must meet the following requirements:

(a) **Rise and run.** The rise of steps and stairs must not be less than four inches nor more than eight inches. The greatest riser height within any flight of stairs must not exceed the smallest by more than three-eighths inch. The run must not be less than nine inches. Stair treads must be of uniform size and shape except the largest tread run within any flight of stairs must not exceed the smallest by more than three-eighths inch.

(b) **Headroom.** Every stairway must have a headroom clearance of not less than 6 feet eight inches.

(3) **Handrails.**

(a) At least one handrail is required when a stairway has three or more risers;

(b) The top of a handrail must be placed not less than thirty-four inches or more than thirty-eight inches above the nosing of the treads.

(c) Handrails must be continuous the full length of the stairs.

(d) The handgrip portion of a handrail must:

(i) Not be less than one and one-quarter inches nor more than two inches in cross-sectional dimension; and

(ii) Have a smooth surface with no sharp corners.

(e) Handrails projecting from a wall must have a space of not less than one and one-half inches between the wall and the handrail.

(4) **Guardrails.** Unenclosed porches, balconies, and landings, which are more than thirty inches above grade or floor below must not be less than thirty-six inches in height and must have intermediate rails spaced such that a sphere four inches in diameter cannot pass through.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-520, filed 1/18/99, effective 2/18/99.]

WAC 246-359-530 Interior finishes. (1) Floors must be finished to provide an easily cleanable surface. Acceptable finishes are paint, sheet vinyl, tile, or other materials designed for use as a finished floor surface. All materials must be installed per manufacturer's instructions.

(2) Walls and ceilings must be finished to prevent any injury to an occupant, for example, no protruding nails or other fasteners or any wires.

(3) In toileting and kitchen areas, walls must be finished to provide an easily cleanable surface impervious to moisture.

(4) If material to provide a finished surface for the walls is to be installed, then material such as one-half inch minimum thickness gypsum board (GB) must be secured to the wall structural members by fasteners approved for such attachment such as glue, nails, or screws. If GB is installed, then the joints must be fire taped and the wall surface sealed with paint or covered with another wall finish material.

(5) If materials are installed to provide a finished surface for the ceiling, then material such as five-eighths inch minimum thickness GB must be secured to the ceiling structural members by fasteners approved for such attachment such as nails or screws. If GB is installed, then the joints must be fire taped and the ceiling surface sealed with paint.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-530, filed 1/18/99, effective 2/18/99.]

WAC 246-359-540 Lighting and electrical. (1) The installation of electrical systems and wiring must comply with the state electrical code, chapter 246-46 WAC, as administered by the department of labor and industries and according to the number of outlets or light fixtures required in subsection (2) of this section.

(2) Outlets and light fixtures provided in temporary worker housing must comply with the requirements of subsection (1) of this section and WISHA requirements, including:

(a) Each habitable room must have:

(i) One ceiling light fixture. Additional ceiling light fixtures will be required to comply with the foot candle requirements of chapter 246-358 WAC; and

(ii) One separate floor or wall outlet. Additional outlets will be required as determined by the department to prevent safety hazards when the housing is occupied;

(b) Laundry and toilet rooms, and rooms where people congregate must have at least one ceiling or wall light fixture. Additional ceiling or wall light fixtures will be required:

(i) To comply with the foot candle requirements of chapter 246-358 WAC; and

(ii) As determined by the department to prevent safety hazards when the housing is occupied.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-540, filed 1/18/99, effective 2/18/99.]

WAC 246-359-550 Smoke detectors. (1) Temporary worker housing must be provided with approved smoke detectors installed according to the manufacturer's instructions.

(2) Smoke detectors must:

(a) Be installed in each sleeping room;

(b) Be installed at a central point in a corridor or area which gives access to each separate sleeping room; and

(c) Emit a signal when the batteries are low.

(3) In new construction, required smoke detectors must:

(a) Receive their primary power from the building wiring, when the wiring is served from a commercial source; and

(b) Be equipped with a battery backup.

(4) Smoke detector wiring must be permanent and without a disconnecting switch except as required for overcurrent protection.

(5) Battery operated smoke detectors will be accepted:

(a) In existing buildings;

(b) In buildings without commercial power; or

(c) During when alteration, repairs or additions are being conducted to a building.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-550, filed 1/18/99, effective 2/18/99.]

WAC 246-359-560 Plumbing. (1) The installation of plumbing systems, fixtures, and fittings must comply with the Uniform Plumbing Code and Uniform Plumbing Code Standards as adopted by the state building code council, chapters 51-46 and 51-47 WAC, except for the following parts of the plumbing code which do not apply:

(a) The provisions for "water conservation performance standards";

(b) The minimum plumbing facilities and requirements for minimum numbers of fixtures, instead the following ratios will apply:

Minimum Number of Required Plumbing Fixtures					
	Water Closets		Lavatory Sinks		Bathtubs or Showers
Dwelling Units	1		1		1
	Male	Female	Male	Female	
Shared Facilities, not in individual dwelling units.	1 per 15 or fraction thereof; with a minimum of 2. (See Note)	1 per 15 or fraction thereof; with a minimum of 2.	1 per 6 or fraction thereof.	1 per 6 or fraction thereof.	1 showerhead for every 10 persons or fraction thereof, for both male and female showers.

Note: Where urinals are provided in addition to water closets, the urinals must be provided in a 1:25 ratio.

(2) The applicant must comply with the following WISHA requirements:

(a) When a toilet is in a separate building from the sleeping room, the toilet room must be at least one-hundred feet but not more than two-hundred feet from the door of each dormitory unit;

(b) Laundry sinks must be provided on a ratio of one to thirty;

(c) When handwashing sinks and bathing facilities are not provided in individual dwelling units the following ratios apply:

(i) Handwashing sinks must be provided on a ratio of one to every six; and

(ii) Bathing facilities must be provided on a ratio of one to every ten.

(3) Water and septic systems must be approved by the jurisdiction having authority, including installation or modification.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-560, filed 1/18/99, effective 2/18/99.]

WAC 246-359-565 Cooking facilities. (1) **Individual dwelling units.** Cooking facilities in individual dwelling units must be sufficient to meet the requirements of WAC 246-358-125, temporary worker housing cooking and foodhandling facilities;

(2) **Common use cooking facilities.** Cooking facilities separate from sleeping units and used by multiple individuals or families must:

(a) Meet the requirements of WAC 246-358-125, temporary worker housing cooking and foodhandling facilities;

(b) Comply with WAC 296-307-160, WISHA;

(c) Be located within one hundred feet of the dormitory structure; and

(d) Have mechanical ventilation installed with a one hundred cubic feet per minute (CFM) intermittent fan or a twenty-five CFM continual fan, vented to the outside for each cooking unit.

(3) **Dining halls with cooking facilities.** Cooking facilities which are to be provided by the licensed operator for temporary workers residing in the temporary worker housing must comply with:

(a) WAC 246-358-125(3), dining hall rules for temporary worker housing;

(b) WAC 296-307-160; and

(c) Chapter 246-215 WAC, food service sanitation rules.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-565, filed 1/18/99, effective 2/18/99.]

WAC 246-359-570 Mechanical installations. The installation of heating, ventilating, cooling, refrigeration systems, and other miscellaneous heat producing equipment must meet the requirements of the uniform mechanical code as adopted by the state building code council, chapter 51-42 WAC, except as exempted in WAC 246-359-575.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-570, filed 1/18/99, effective 2/18/99.]

WAC 246-359-575 Energy and ventilation and indoor air quality requirement exemptions. Temporary worker housing as defined in this chapter are exempt from all versions of the Washington state energy code and the ventilation and indoor air quality code.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-575, filed 1/18/99, effective 2/18/99.]

WAC 246-359-580 Heating and insulation. (1) When the temporary worker housing is occupied from October 1st through May 1st:

(a) Department approved heat producing equipment must:

(i) Be available or installed; and

(ii) Comply with WISHA and chapter 246-358 WAC.

(b) A minimum of R-11 insulating material must be used to insulate ceilings and exterior walls.

(2) When insulation is used it must be covered with material which is safe and sturdy and sufficient to protect the building occupants from the insulating material.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-580, filed 1/18/99, effective 2/18/99.]

WAC 246-359-590 Liquid petroleum gas (LP-gas) storage tanks. Installed LP-gas, such as propane, propylene, butane, normal butane or isobutane, and butylenes, must comply with uniform fire code article 82 and uniform fire code standard 82-1.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-590, filed 1/18/99, effective 2/18/99.]

WAC 246-359-600 Alternate construction. (1) The department will allow alternate construction to the requirements stated in WAC 246-359-200 through 246-359-440 of this chapter when the plans are designed and stamped by an engineer or architect licensed to practice in the state of Washington.

(2) Any changes in the structural design must be stamped by an engineer including:

(a) Fixed construction, which cannot be dismantled and stored. Such fixed construction must comply with the structural requirements of the state building code, for example, wind forces, seismic forces, snow load, live load, and dead load.

(b) Nonfixed construction which can be dismantled and stored for use when ice or snow exceed the snow loads stated in this chapter. Such nonfixed construction must comply with the structural requirements of the state building code, for example, wind forces, seismic forces, live load, and dead load with the exception of snow loads.

(3) To determine compliance with this section the department may require a special inspector to conduct special inspections.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-600, filed 1/18/99, effective 2/18/99.]

WAC 246-359-700 Approval of factory assembled structures (FAS). No FAS will be approved unless the FAS has an insignia of approval installed by the manufacturer. Alterations to manufactured housing and mobile homes must be approved by the Washington state department of labor and industries.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-700, filed 1/18/99, effective 2/18/99.]

WAC 246-359-710 Installation of factory assembled structures (FAS)—Except for manufactured homes. The

department will approve the installation of all FAS except for manufactured homes (see WAC 246-359-720) when the following requirements are met:

(1) New and relocated FAS must be installed according to the manufacturer's written instructions;

(2) If the manufacturer's written instructions are unavailable or insufficient to address safe installation the department will require installation instructions for FAS to be submitted by an engineer or architect;

(3) The department will inspect FAS installation to determine if the site is properly prepared and the FAS is anchored according to the:

(a) Manufacturer's installation instructions; or

(b) Design of either an engineer or an architect.

(4) The requirements stated in WAC 246-359-720 (5) through (8) apply to FAS installation.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-710, filed 1/18/99, effective 2/18/99.]

WAC 246-359-720 Installation requirements for manufactured homes. The department will use the following criteria for approving the installation of manufactured homes:

(1) New and relocated manufactured homes must be installed according to the manufacturer's written installation instructions;

(2) If the manufacturer's installation instructions are unavailable for manufactured homes, the department will accept the following:

(a) American National Standards Institute (ANSI) A225.1, 1994 edition, section 3; or

(b) The installation instructions of an engineer or architect licensed in Washington.

(3) The department will inspect the installation to determine if the manufactured home is placed on a properly prepared site and anchored according to the:

(a) Manufacturer's installation instructions;

(b) ANSI A225.1, 1994 edition, section 3; or

(c) Design of an engineer or architect licensed in Washington.

(4) The department will require, at a minimum, specific instructions be obtained from a licensed engineer or architect when a manufactured home is to be installed on a site where the specific soil bearing capacity is not addressed in the manufacturer's instructions.

(5) The department may review, at a minimum, the following installation requirements:

(a) Heat duct crossovers, except that heat duct crossovers supported above the ground by strapping or blocking to avoid standing water and to prevent compression and sharp bends to minimize stress at the connections are also accepted;

(b) Dryer vents exhausted to the exterior side of the wall or skirting, when installed; and

(c) Hot water tank pressure relief lines. These lines must be exhausted to the exterior side of the exterior wall or skirting and downward.

(6) Water lines, waste lines, gas lines and electrical systems must be installed according to the requirements of this chapter.

(7) When skirting is used the skirting must:

(a) Be made of a material suitable for ground contact including all metal fasteners which must be made of galvanized, stainless steel or other corrosion resistant material;

(b) Be recessed behind the siding or trim and attached in such a manner to prevent water from being trapped between the skirting and siding or trim; and

(c) Have vent openings located close to corners which:

(i) Provide cross-ventilation on at least two opposite sides;

(ii) Are designed to prevent the entrance of rodents by covering the vent openings with corrosion-resistant wire mesh with mesh opening of one-fourth inch in dimension; and

(iii) Have a net area of not less than one square foot for each one hundred fifty square feet of under floor area.

(8) Provide access to the under floor area of the manufactured home so that all areas under the home are available for inspection. The opening must not be less than eighteen inches by twenty-four inches. The cover must be of metal, pressure treated wood or vinyl.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-720, filed 1/18/99, effective 2/18/99.]

WAC 246-359-730 Manufactured home installers. A manufactured home may be installed by:

(1) The applicant;

(2) A certified installer as required by WAC 296-150M-0630;

(3) An individual supervised by an on-site certified installer; or

(4) A specialty trades person, for certain aspects of installation.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-730, filed 1/18/99, effective 2/18/99.]

WAC 246-359-740 Drain connector to factory assembled structures (FAS). (1) A FAS containing plumbing fixtures must be connected to the drain inlet by a drain connector:

(a) Approved by the department;

(b) Consisting of pipe not less than Schedule 40 with appropriate fittings and connectors; and

(c) Not less in size than the FAS outlet.

(2) The fitting connected to the drain inlet must be a directional fitting to discharge the flow into the drain inlet.

(3) A drain connector must be:

(a) Installed and maintained with a grade not less than one-fourth inch per foot;

(b) Gas-tight and no longer than necessary to make the direct connection between the mobile home outlet and drain inlet at the site.

(4) Each drain inlet must be maintained gas-tight when not in use.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-740, filed 1/18/99, effective 2/18/99.]

WAC 246-359-750 Water connector to factory assembled structures (FAS). (1) A FAS with plumbing fixtures must be connected to the approved water service outlet

by a flexible connector, such as copper tubing or other approved material, not less than three-fourths inch interior diameter.

(2) A separate water service shutoff valve installed on the supply side at or near the water service outlet for each FAS.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-750, filed 1/18/99, effective 2/18/99.]

WAC 246-359-760 Gas connections to factory assembled structures (FAS). (1) A FAS, when using gas for heating or cooking purposes, must be connected to the gas outlet by an approved mobile or manufactured home connector. Gas connectors must be of adequate size to supply the total demand of the connected FAS and have a maximum length of six feet.

(2) A shutoff valve controlling the flow of gas to the entire gas piping system must be:

(a) Installed for each FAS;

(b) Readily accessible;

(c) Identified as the "shutoff valve"; and

(d) Installed near the point of connection to the service piping or supply connection of the liquified petroleum gas (LP-gas) tank.

(3) The installation and size of each section of LP-gas piping is determined by the uniform mechanical code.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-760, filed 1/18/99, effective 2/18/99.]

WAC 246-359-800 WISHA requirements affecting building temporary worker housing. (1) A separate sleeping area must be provided for the husband and wife in all family units in which one or more children over six years of age are housed.

(2) If a camp is used during cold weather, adequate heating equipment must be provided.

Note: All heating, cooking, and water heating equipment must be installed according to state and local ordinances and codes regulating installations.

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-800, filed 1/18/99, effective 2/18/99.]

WAC 246-359-990 Fees. (1) **General fee information.**

(a) The plan review fee and permit or inspection fees for:

(i) Wood framed construction and concrete masonry units will be charged based on square footage and the time required to complete the work, according to Table I, Parts A through C;

(ii) The installation of factory assembled structures will be based on Table I, Part D; and

(b) Each fee must be received before the department will:

(i) Conduct plan review of construction or installation documents;

(ii) Issue a construction permit; or

(iii) Conduct any on-site inspection.

(2) **Plan review fee for construction and installation documents.** The plan review fee is:

(a) A separate and additional fee from the construction permit fees or inspection fees;

(b) Based on the initial plan review and assumes all documents required by WAC 246-359-070, application process and WAC 246-359-080, required documents for plan review, have been submitted.

(c) An additional plan review fee will be charged as stated in Table I, Part E when:

(i) The documents submitted are incomplete;

(ii) Plans previously reviewed and approved have been changed;

(iii) The department has determined, by inspection, that the approved plans were not followed during construction.

(3) **Variance requests.** Written variance requests must be accompanied by a fee as stated in Table I, Part E.

(4) **Construction permit fee, includes required inspections.** The construction permit fee:

(a) Is a separate and additional fee from the plan review fee;

(b) Includes the required inspections as stated in WAC 246-359-120 (1) through (4);

(c) Is based on the time required to conduct an inspection and assumes all of the requirements for application and plan review as required by subsection (2) of this section have been met and the plans are approved.

(5) **Additional inspections.** When the department determines additional inspections are necessary to determine compliance with this chapter the additional inspection fee will be charged according to Table I, Part F.

(6) **Investigation inspections.** If the department finds a person has initiated building or work without a permit, a fee will be charged according to Table I, Part F for the time taken to investigate.

(7) **Special inspections.** When an applicant is building to alternate construction standards and the required inspections in this chapter are not deemed sufficient by the department to determine compliance with this chapter special inspections may be required. The applicant must pay the full cost of the special inspections. The department will notify the applicant what is required and the reasons for requiring a special inspection.

(8) The department will provide on-site technical assistance at the applicant's request. A fee will be charged according to Table I, Part G.

Table I, Fee Table

Square footage of project review		Construction plan review fee	Construction permit or inspection fee
Part A.	Up to 1000 square feet	$330	$550
Part B.	For each additional 100 square feet feet or fraction thereof	$ 15	$ 30
Part C.	Preapproved plans For each additional 100 square feet feet or fraction thereof	$ 66 $ 3	$550 $ 30
Part D.	Factory Assembled Structures, for example, manufactured homes, park trailers, modular buildings	$ 66 $ 3	$550 $ 30
Part E.	Additional plan reviews, conducted after initial approval; and Variance requests	$47 per hour (two hour minimum)	
Part F.	Additional and investigation inspections	$47 per hour (two hour minimum)	
Part G.	On-site technical assistance visits	$47 per hour (two hour minimum)	

[Statutory Authority: RCW 70.114A.081. 99-03-065, § 246-359-990, filed 1/18/99, effective 2/18/99.]

Chapter 246-360 WAC
TRANSIENT ACCOMMODATIONS

WAC

246-360-990 Fees.

WAC 246-360-990 Fees. (1) The licensee or applicant must submit:

(a) An annual fee according to the following schedule:

NUMBER OF LODGING UNITS	FEE
3 - 10	$ 100
11 - 49	$ 200
50 - over	$ 400

(b) A late fee of fifty dollars, in addition to the full license renewal fee, if the full license renewal fee is not delivered or mailed to the department at least thirty days prior to the license expiration date;

(c) An additional fee of fifty dollars for an amended license due to changing the number of lodging units or the name of the transient accommodation.

(2) The department shall refund fees only when all the following conditions are met:

(a) A prospective new owner applies for initial licensure prior to taking ownership as required by WAC 246-360-020 (4)(b);

(b) Transfer of ownership is not finalized;

(c) The applicant requests a refund in writing; and

(d) The department receives the fee and the request for refund in the same biennium.

[Statutory Authority: RCW 70.62.220, 43.70.110 and 43.70.250. 99-23-015, § 246-360-990, filed 11/5/99, effective 12/6/99. Statutory Authority: RCW 43.70.110 and 43.70.250. 94-21-016, § 246-360-990, filed 10/6/94, effective 11/6/94. Statutory Authority: RCW 70.62.220, 70.62.230 and 43.70.250. 92-21-089 (Order 312), § 246-360-990, filed 10/21/92, effective 11/21/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-360-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 87-17-045 (Order 2524), § 440-44-075, filed 8/17/87; 85-12-029 (Order 2236), § 440-44-075, filed 5/31/85. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-075, filed 6/4/82.]

Chapter 246-560 WAC
RURAL HEALTH SYSTEM PROJECT

WAC

246-560-001 Purpose.
246-560-002 Implementation.
246-560-010 Definitions.
246-560-011 Activities.
246-560-025 Requests to receive information.
246-560-035 Eligibility.
246-560-040 Letters of interest.
246-560-045 Letter of interest review and action.
246-560-050 Criteria for inviting applications.
246-560-060 Application content.
246-560-065 Application screening criteria.
246-560-070 Repealed.
246-560-075 Reviewer selection.
246-560-077 Application review, selection, and funding.
246-560-085 Appeal process.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-560-070 Selection criteria for funded demonstration projects. [Statutory Authority: Chapter 70.175 RCW. 91-16-108 (Order 186), § 246-560-070, filed 8/7/91, effective 9/7/91.] Repealed by 99-03-043, filed 1/14/99, effective 2/14/99. Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080.

WAC 246-560-001 Purpose. (1) The purpose of these rules is to implement RCW 70.175.010 through 70.175.090, and RCW 70.185.030 through 70.185.080. The Washington health systems resources program includes rural health systems development and community-based recruitment and retention. The health systems resources program was established to provide financial and technical assistance to promote affordable access to health care services in rural and urban underserved populations of the state.

(2) The goals of the health systems resources program are:

(a) To promote affordable access to health care services to residents in rural areas of Washington state.

(b) To assure the availability of health care providers to:

(i) Residents of rural areas; and

(ii) Urban underserved populations.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-001, filed 1/14/99, effective 2/14/99. Statutory Authority: Chapter 70.175 RCW. 91-16-108 (Order 186), § 246-560-001, filed 8/7/91, effective 9/7/91.]

WAC 246-560-002 Implementation. The department may use the following methods to implement this chapter:

(1) Solicit and select projects as described in WAC 246-560-035 through 246-560-081.

(2) Offer, or contract for, services to carry out the purposes of this chapter.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-002, filed 1/14/99, effective 2/14/99.]

WAC 246-560-010 Definitions. For the purpose of this chapter the following words and phrases have the following meanings unless the context clearly indicates otherwise.

(1) "Applicant" means any interested party who has been invited to submit an application proposing a health systems resources project.

(2) "Application" means an invited proposal for a health systems resources project.

(3) "Basic health care services" means organized care modalities to prevent death, disability, and serious illness. The term includes, but is not limited to:

(a) Emergency services;

(b) Primary care physicians, physician assistants, nurse practitioners, and midwifery services;

(c) Short term inpatient care;

(d) Home health care;

(e) Community based care for chronic conditions;

(f) Dental care;

(g) Vision care;

(h) Hearing care;

(i) Hospice care;

(j) Mental health;

(k) Necessary support services; and

(l) Nutrition related services.

(4) "Catchment area" means the Washington state geographic area where people live who are to receive the basic health care services addressed by the project.

(5) "Community" means the resident individuals and organizations in a catchment area who may benefit from the basic health care services addressed by the project.

(6) "Community-based" means that the need is identified by a broad section of the community including providers, institutions in the area, and nonhealth care provider members of the community such as community members of health care boards, economic development council members, organized patient advocacy groups, and others who have an interest in the long-term viability of health care services in the catchment area.

(7) "Department" means the Washington state department of health.

(8) "Deliverable" means a document that results from project activities. The term includes, but is not limited to:

(a) A form;

(b) An agreement;

(c) A plan;

(d) Documentation of numbers served;

(e) A report; or

(f) Presentation material.

(9) "Health care delivery system" means services, personnel, and how they are organized and financed.

(10) "Interested party" means an eligible entity that has submitted a letter of interest for a health systems resources project.

(11) "Letter of interest" means a brief description of a project as described in WAC 246-560-040.

(12) "Letter of invitation" means a letter inviting an interested party who has submitted a letter of interest to submit an application.

(13) "Local project administrator" means an individual or organization representing the applicant and authorized to enter into legal agreements on behalf of the applicant.

(14) "Matching funds" means fifty percent of the total budget for recruitment and retention activities must be from a source other than this program. Matching funds may be in-kind contributions.

(15) "Metropolitan statistical area" or "MSA" means an urban area defined and described by the United States Department of Census, Bureau of the Census, and printed in the *State of Washington 1997 Data Book,* Office of Financial Management, Olympia, Washington. The boundaries of all metropolitan statistical areas are county boundaries. The urban counties include:

(a) Benton;

(b) Clark;

(c) Franklin;

(d) Island;

(e) King;

(f) Kitsap;

(g) Pierce;

(h) Snohomish;

(i) Spokane;

(j) Thurston;

(k) Whatcom; and

(l) Yakima.

(16) "Outcome" means the anticipated result or impact of the project activities.

(17) "Project" means a health systems resources project.

(18) "Rural" means a geographical area outside the boundaries of metropolitan statistical areas (MSA's) or an area within an MSA but more than thirty minutes average

travel time from a city or town or contiguous cities or towns with a population of ten thousand or more.

(19) "Successful applicant" means an applicant whose project has been selected for contracting.

(20) "Urban underserved" means an area within a MSA that is thirty minutes average travel time or less from a city or town or contiguous cities or towns with a population of ten thousand or more, that has unmet health care needs.

(21) "Workplan" means a written document, usually in matrix form, that shows the detail of what is needed to complete a project. The activities, timeline, party responsible, budget, evaluation plan, and measurable outcome is shown for each deliverable.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-010, filed 1/14/99, effective 2/14/99. Statutory Authority: Chapter 70.175 RCW. 91-16-108 (Order 186), § 246-560-010, filed 8/7/91, effective 9/7/91.]

WAC 246-560-011 Activities. (1) Health systems development activities include:

(a) The planning, development, and/or implementation of the infrastructure needed to support a cost effective health care delivery system. Examples of infrastructure development include:

(i) Telemedicine and other communications systems;

(ii) Modeling of managed care systems;

(iii) Financial business systems;

(iv) Clinical and quality assurance systems;

(v) Development of cooperative agreements and referral arrangements between similar or dissimilar entities to ensure easy transition between care levels for patients and their families; and

(vi) Development of networks of providers and others, organized to share services, negotiate contracts and, plan new services or service delivery systems.

(b) The mobilization of community leaders to design, develop, and implement a project to maintain or improve the viability of the local health care delivery system. Examples of community mobilization include:

(i) Leaders from different governmental jurisdictions evaluate the health care delivery system or parts of the system, determine where changes are needed, and develop a workplan to affect the necessary changes;

(ii) Participants in the health care delivery system determine how to pool resources to eliminate service duplication or gaps, or, to focus on new identified priorities; and

(iii) Participants in the health care delivery system determine how to restructure the system, including the necessary legal, regulatory, fiscal, or practice actions that will accomplish the needed change.

(c) The planning, development, or implementation of a new basic health care service to meet an identified gap in the health care delivery system. Examples of new service development include:

(i) A service previously unavailable in the service area; and

(ii) A service previously unavailable to a portion of the population in the service area.

(2) Recruitment and retention activities may be funded, only to the extent that matching funds are provided. They include, but are not limited to:

(a) An assessment of community characteristics or assets, including school systems, housing, churches, recreational, social and cultural opportunities;

(b) An assessment of the community, physicians and other health care providers, community leaders and citizens about the need for new or replacement health care providers;

(c) A staff development plan;

(d) A recruitment plan;

(e) A recruitment and retention financial plan;

(f) A plan for providing a new practitioner with sufficient professional, intellectual and emotional support;

(g) A plan for call coverage to ensure adequate time off for personal and family pursuits;

(h) An assessment of office and hospital facilities, equipment and support personnel to determine if they are adequate to allow a new practitioner to practice in a high-quality manner; and

(i) A retention plan.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-011, filed 1/14/99, effective 2/14/99.]

WAC 246-560-025 Requests to receive information. Any interested party may be placed on the health systems resources mailing list maintained by the Department of Health, Office of Community and Rural Health, or its successor, P.O. Box 7834, Olympia, WA 98504-7834. Contacts on the mailing list will receive instructions for the next funding cycle.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-025, filed 1/14/99, effective 2/14/99.]

WAC 246-560-035 Eligibility. (1) An interested party, may be a for-profit, not-for-profit, or governmental entity which is:

(a) Proposing services benefiting the population in a rural catchment area; and/or

(b) Proposing services benefiting an urban underserved area and including recruitment and retention activities.

(2) The majority of basic health services addressed by the project must be provided to people living in Washington state.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-035, filed 1/14/99, effective 2/14/99.]

WAC 246-560-040 Letters of interest. An interested party must submit a letter of interest to be considered for a health systems resources project. The department may solicit letters of interest.

The letter of interest must:

(1) Not exceed three pages;

(2) Include the applicant name and address;

(3) Briefly describe the catchment area and the community;

(4) Identify the health systems resources program goal(s) addressed by the project;

(5) Identify the health care problem;

(6) Briefly describe proposed activities and the anticipated outcome;

(7) Identify key health care providers, business representatives, public officials, and community leaders to be involved in the project; and

(8) Indicate projected total project costs and the amount of state funding requested. If the project includes recruitment and retention activities, indicate the source or sources of matching funds.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-040, filed 1/14/99, effective 2/14/99. Statutory Authority: Chapter 70.175 RCW. 91-16-108 (Order 186), § 246-560-040, filed 8/7/91, effective 9/7/91.]

WAC 246-560-045 Letter of interest review and action. (1) Reviewers shall score letters of interest independently using a scoring system established by the department, which is incorporated by reference.

(2) Copies of the scoring system may be requested by writing to the Washington State Department of Health, Office of Community and Rural Health, P.O. Box 47834, Olympia, Washington 98504-7834.

(3) The director of the office of community and rural health shall make the final decision regarding letters of interest based on letter of interest scores and the best utilization of resources to promote the goals of the program.

(4) The department will send a written response to all interested parties who submit a letter of interest.

(5) The department may invite applications from some, none, or all of the interested parties who submit a letter of interest.

(a) The invitation will include:

(i) Application content outline;

(ii) Directions for completing applications; and

(iii) Any letter of interest review comments to be addressed in the application.

(b) The department may request combining activities proposed by different interested parties for inclusion in a single application to:

(i) Avoid duplication;

(ii) Increase cooperation; or

(iii) Strengthen the overall health care delivery system serving the catchment area.

(c) The department will set a due date for receipt of applications.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-045, filed 1/14/99, effective 2/14/99.]

WAC 246-560-050 Criteria for inviting applications. (1) The project addresses at least one of the goals of the health systems resources program, as described in WAC 246-560-001.

(2) The project addresses needed improvements in the delivery of basic health care services, including preventive services.

(3) The project reflects a cooperative approach, which may involve several organizations, categories of health care providers, or communities.

(4) The project can serve as a model for other communities.

(5) The project reflects priorities established for a particular funding cycle as set forth in the application materials.

(6) The project addresses access to basic health care services in an area where access is severely limited or inadequate; and

(7) If recruitment and retention of providers is identified as an outcome the application demonstrates:

(a) Recruitment and retention problems have been chronic; or

(b) The community is in need of primary care practitioners; or

(c) The community has unmet health care needs for specific target populations; and

(d) There is a fifty percent local funding match.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-050, filed 1/14/99, effective 2/14/99. Statutory Authority: Chapter 70.175 RCW. 91-16-108 (Order 186), § 246-560-050, filed 8/7/91, effective 9/7/91.]

WAC 246-560-060 Application content. (1) A completed face sheet.

(2) A description of the applicant and its capacity to manage and oversee the project.

(3) A description of the proposed project including:

(a) Health systems resources program goal(s) addressed; and

(b) Health systems resources program priority addressed.

(4) A statement of the problem, including:

(a) The duration of the problem or deficiency;

(b) The number of people affected;

(c) How the problem has been documented;

(d) The community involvement in identifying the problem; and

(e) Special needs of the population to be served.

(5) A description of the catchment area(s) to be served by the project. The catchment area(s) must be a reasonable service delivery area such that:

(a) Geographic conditions, health care delivery patterns, other social and economic relationship patterns, and population characteristics make it a reasonable market; or

(b) Residents are likely to go to the proposed catchment area as a preferred source for the proposed services.

(6) A description of any model(s) used in the proposed project.

(7) A description of the relationship between the proposed project and current or previous programs designed to solve related health care problems in the catchment area.

(8) A description of the other individuals and entities involved in the project and their relationship with the applicant to implement the project. A copy of an organizational chart for the proposed project, lists of roles and responsibilities, or other items that document the relationship between the applicant and the involved activities may be submitted with the application.

(9) A workplan for what is needed to accomplish the project. For all major activities, include a timeline, entity responsible, funds needed and source of funds, and measurable outcome(s).

(10) A description of the evaluation process including measurable outcomes.

(11) A description of the plan for dissemination of information about the project.

(12) A detailed budget and budget justification for the project period, including:

(a) The amount of state funds requested;

(b) The amount, by source, of other financial or in-kind support and evidence of cost participation by the applicant and other entities involved in the project; if the application includes recruitment and retention activities, amounts by source(s) of matching funds must be identified;

(c) The steps required to financially sustain the project activities after state support had ended.

(13) Letters of agreement, support, commitment and contribution from each entity identified as participating in the project.

(14) Any additional information requested by the department in the letter of invitation.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-060, filed 1/14/99, effective 2/14/99. Statutory Authority: Chapter 70.175 RCW. 91-16-108 (Order 186), § 246-560-060, filed 8/7/91, effective 9/7/91.]

WAC 246-560-065 Application screening criteria. (1) The department will screen applications for the following criteria:

(a) Received in the Office of Community and Rural Health, P.O. Box 47834, Olympia, Washington 98504-7834, on or before the due date.

(b) One original application and two unbound copies provided, sufficiently legible to be copied. The department will determine legibility; and

(c) Application contains each of the items described in WAC 246-560-060.

(2) Applications that contain all screening criteria will be reviewed.

(3) If an application fails to contain any screening criterion, it will not be reviewed. The applicant will be notified in writing.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-065, filed 1/14/99, effective 2/14/99.]

WAC 246-560-070 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-560-075 Reviewer selection. The department may consider the input of individuals outside the department who have expertise with rural and underserved communities. Selected reviewers must sign a statement:

(1) Agreeing to refrain from discussion of letters of interest or applications outside of the review process; and

(2) Asserting that they do not have a conflict of interest. A conflict of interest includes a reviewer:

(a) Holding a position in an organization under review;

(b) Having a significant financial interest in the outcome of the review; or

(c) Participating in the development of the letter of interest or application under review.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-075, filed 1/14/99, effective 2/14/99.]

WAC 246-560-077 Application review, selection, and funding. (1) The department may, based on reviewer recommendations, funding limitations, or other considerations, offer funding to all, some or none of the applicants, and may offer to fund portions of projects.

(2) Reviewers shall score applications independently using a scoring system established by the department which is incorporated by reference.

(3) Copies of the scoring system may be requested by writing to the Washington State Department of Health, Office of Community and Rural Health, P.O. Box 47834, Olympia, Washington 98504-7834.

(4) The director of the office of community and rural health shall make the final decision regarding funding based on application scores, total funds available, and the best utilization of resources to promote the goals of the program.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-077, filed 1/14/99, effective 2/14/99.]

WAC 246-560-085 Appeal process. (1) The following departmental actions are subject to administrative appeal:

(a) A decision not to invite an application;

(b) A determination that an application does not meet initial screening criteria and will not be reviewed; or

(c) A decision not to fund all or any portion of a project.

(2) The appeal process is governed by the Administrative Procedure Act (chapter 34.05 RCW), chapter 246-10 WAC, and this chapter.

(3) To initiate an appeal, the applicant must file a written request for an adjudicative proceeding within twenty-eight days of receipt of the department's decision. The request shall be mailed, by a method showing proof of receipt, to the Adjudicative Clerk Office, P.O. Box 47879, 2413 Pacific Avenue, Olympia, Washington 98504-7879.

(4) The request must contain:

(a) A specific statement of the issue or issues and law involved;

(b) The grounds for contesting the department's decision; and

(c) A copy of the department's decision.

[Statutory Authority: RCW 70.175.010 - [70.175.]090 and 70.185.030 - [70.185.]080. 99-03-043, § 246-560-085, filed 1/14/99, effective 2/14/99.]

Chapter 246-650 WAC
NEWBORN SCREENING

WAC

WAC 246-650-990 Screening charge. The department has authority under RCW 43.20B.020 to require a reasonable charge from parents or responsible parties for the costs of newborn screening. The charge is to be collected through the facility where the specimen was obtained.

[Statutory Authority: RCW 70.83.040. 99-20-036, § 246-650-990, filed 9/29/99, effective 10/30/99. Statutory Authority: RCW 43.20B.020. 92-02-

018 (Order 224), § 246-650-990, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-650-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050 and 70.83.050. 87-11-040 (Order 303), § 248-103-030, filed 5/18/87.]

WAC 246-650-991 Specialty clinic support fee. The department has the authority under RCW 70.83.040 to collect a fee for each infant screened to fund specialty clinics that provide treatment services for hemoglobin diseases, phenylketonuria, congenital adrenal hyperplasia and congenital hypothyroidism. The specialty clinic support fee is $3.50. It is to be collected in conjunction with the screening charge from the parents or other responsible party through the facility where the screening specimen is obtained.

[Statutory Authority: RCW 70.83.040. 99-20-036, § 246-650-991, filed 9/29/99, effective 10/30/99.]

Chapter 246-802 WAC
ACUPUNCTURISTS

WAC

WAC 246-802-990 Acupuncture fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
License application	$ 50.00
License renewal	180.00
Inactive license renewal	50.00
Late renewal penalty	90.00
Expired license reissuance	90.00
Expired inactive license reissuance	50.00
Duplicate license	15.00
Certification of license	25.00
Acupuncture training program application	500.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-802-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-802-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250, chapter 18.06 RCW. 95-01-038, § 246-802-990, filed 12/12/94, effective 1/1/95. Statutory Authority: RCW 43.70.040 and 43.70.250. 92-17-035 (Order 295B), § 246-802-990, filed 8/13/92, effective 9/13/92. Statutory Authority: RCW 43.70.250. 91-13-002 (Order 173), § 246-802-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-802-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.250. 90-18-039 (Order 084), § 308-180-260, filed 8/29/90, effective 9/29/90; 90-04-094 (Order 029), § 308-180-260, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. 88-15-030 (Order PM 735), § 308-180-260, filed 7/13/88; 87-18-031 (Order PM 667), § 308-180-260, filed 8/27/87.]

Chapter 246-808 WAC
CHIROPRACTIC QUALITY ASSURANCE COMMISSION

WAC

WAC 246-808-990 Chiropractic fees and renewal cycle. (1) Licenses and registrations must be renewed on the practitioner's birthday every year as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged for chiropractic license:

Title of Fee	Fee
Application/full examination or reexamination	$300.00
Temporary permit application	150.00
Temporary practice permit	50.00
Preceptorship	100.00
License renewal	270.00
Late renewal penalty	135.00
Expired license reissuance	135.00
Inactive license renewal	150.00
Expired inactive license reissuance	75.00
Duplicate license	15.00
Certification of license	25.00

(3) The following nonrefundable fees will be charged for chiropractic x-ray technician registration:

Application	25.00
Original registration	25.00
Renewal	40.00
Late renewal penalty	40.00
Expired registration reissuance	40.00
Duplicate registration	15.00
Certification of registration	25.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-808-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-808-990, filed 2/13/98, effective 3/16/98. Statutory Authority: Chapter 18.25 RCW. 96-16-074, § 246-808-990, filed 8/6/96, effective 9/6/96.]

Chapter 246-810 WAC
COUNSELORS

WAC

WAC 246-810-990 Fees and renewal cycle. (1) Certificates and registrations must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

Title	Fee
(2) The following nonrefundable fees will be charged for registered counselor:	
Application and registration	$ 40.00
Renewal	37.00
Late renewal penalty	37.00
Expired registration reissuance	37.00
Duplicate registration	15.00
Certification of registration	15.00
(3) The following nonrefundable fees will be charged for registered hypnotherapist:	
Application and registration	95.00
Renewal	130.00
Late renewal penalty	65.00

Title	Fee
Expired registration reissuance	65.00
Duplicate registration	15.00
Certification of registration	15.00
(4) The following nonrefundable fees will be charged for certified marriage and family therapist:	
Application	50.00
Initial certification	25.00
Examination administration	25.00
Renewal	83.00
Late renewal penalty	50.00
Expired certification reissuance	50.00
Duplicate certification	10.00
Certification of certificate	10.00
Wall certificate	10.00
(5) The following nonrefundable fees will be charged for certified mental health counselor:	
Application	25.00
Initial certification	25.00
Renewal	29.00
Late renewal penalty	29.00
Expired certification reissuance	29.00
Duplicate certification	10.00
Certification of certificate	10.00
Wall certificate	10.00
(6) The following nonrefundable fees will be charged for certified social worker:	
Application	25.00
Initial certification	25.00
Renewal	42.00
Late renewal penalty	42.00
Expired certification reissuance	42.00
Duplicate certification	10.00
Certification of certificate	10.00
Wall certificate	10.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-810-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-810-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.19.050(1). 97-17-113, § 246-810-990, filed 8/20/97, effective 9/20/97. Statutory Authority: Chapter 18.19 RCW. 96-08-069, § 246-810-990, filed 4/3/96, effective 5/4/96. Statutory Authority: RCW 43.70.250. 93-14-011, § 246-810-990, filed 6/24/93, effective 7/25/93. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-810-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.250. 90-18-039 (Order 084), § 308-190-010, filed 8/29/90, effective 9/29/90; 90-04-094 (Order 029), § 308-190-010, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. 87-18-033 (Order PM 669), § 308-190-010, filed 8/27/87.]

Chapter 246-811 WAC
CHEMICAL DEPENDENCY PROFESSIONALS

WAC

WAC 246-811-010 What definitions should I know?

(1) **Approved supervisor** is an individual who meets the education and experience requirements described in WAC 246-811-030 and 246-811-045 through 246-811-049 and who is available to the person being supervised.

(2) **Approved school** means any college or university accredited by a national or regional accrediting body recognized by the commission on recognition of postsecondary accreditation, at the time the applicant completed the required education.

(3) **Official transcript** is defined as the transcript from an approved college or university, in an envelope readily identified as having been sealed by the school.

(4) **Individual formal meetings** is defined as a meeting with an approved supervisor, involving one approved supervisor and no more than four supervisees.

(5) **Addiction counseling competencies** means the knowledge, skills, and attitudes of chemical dependency counselor professional practice as described in Technical Assistance publication No. 21, Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA), U.S. Department of Health and Human Services 1998.

(6) **Related field** is defined as health education, behavioral science, sociology, psychology, marriage and family therapy, mental health counseling, social work, psychiatry, nursing, divinity, criminal justice, and counseling education.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-010, filed 6/14/99, effective 7/15/99.]

WAC 246-811-030 What are the minimum education requirements for chemical dependency professional certification?

(1) The minimum education requirements are:

(a) An associate's degree in human services or related field from an approved school; or

(b) Successful completion of ninety quarter or sixty semester college credits in courses from an approved school.

(2) At least forty-five quarter or thirty semester credits must be in courses relating to the chemical dependency profession and shall include the following topics:

(a) Understanding addiction;

(b) Pharmacological actions of alcohol and other drugs;

(c) Substance abuse and addiction treatment methods;

(d) Understanding addiction placement, continuing care, and discharge criteria, including American Society of Addiction Medicine (ASAM) criteria;

(e) Cultural diversity including people with disabilities and its implication for treatment;

(f) Chemical dependency clinical evaluation (screening and referral to include comorbidity);

(g) HIV/AIDS brief risk intervention for the chemically dependent;

(h) Chemical dependency treatment planning;

(i) Referral and use of community resources;

(j) Service coordination (implementing the treatment plan, consulting, continuing assessment and treatment planning);

(k) Individual counseling;

(l) Group counseling;

(m) Chemical dependency counseling for families, couples and significant others;

(n) Client, family and community education;

(o) Developmental psychology;

(p) Psychopathology/abnormal psychology;

(q) Documentation, to include, screening, intake, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client related data;

(r) Chemical dependency confidentiality;

(s) Professional and ethical responsibilities;

(t) Relapse prevention;

(u) Adolescent chemical dependency assessment and treatment;

(v) Chemical dependency case management; and

(w) Chemical dependency rules and regulations.

(3) All applicants, including individuals who are licensed under chapter 18.83 RCW, Psychologists; and chapter 18.79 RCW, Advance nurse practitioner, must also meet the requirements in subsection (2) of this section.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-030, filed 6/14/99, effective 7/15/99.]

WAC 246-811-045 How will my experience be counted? (1) The department of health will consider experience up to seven years prior to the date of application.

(2) Accumulation of the experience hours is not required to be consecutive. Experience that will count toward certification must meet the requirements outlined in WAC 246-811-046 through 246-811-049.

(3) Supervised experience is the practice as referred to in RCW 18.205.090 (1)(c) and is the experience received under an approved supervisor. A practicum or internship taken while acquiring the degree or semester/quarter hours is applicable.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-045, filed 6/14/99, effective 7/15/99.]

WAC 246-811-046 How many hours of experience will I need for certification? You will be required to complete two thousand five hundred, two thousand or one thousand five hundred hours of supervised experience depending upon your formal education level.

(1) Two thousand five hundred hours of chemical dependency counseling as defined in RCW 18.205.020(3), for individuals who possess an associate degree; or

(2) Two thousand hours of chemical dependency counseling for individuals who possess a baccalaureate degree in human services or a related field from an approved school; or

(3) One thousand five hundred hours of chemical dependency counseling for individuals who possess a master or doctoral degree in human services or a related field from an approved school; or

(4) One thousand five hundred hours of chemical dependency counseling for individuals who are licensed as advanced registered nurse practitioners under chapter 18.79 RCW; or

(5) One thousand five hundred hours of chemical dependency counseling for individuals who are licensed as a psychologist under chapter 18.83 RCW.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-046, filed 6/14/99, effective 7/15/99.]

WAC 246-811-047 What competencies must I become proficient at during my experience? (1) It is the intent that individuals become competent in addiction counseling competencies, as defined in WAC 246-811-010(5), through the experience requirement.

(2) Individuals must experience the addiction counseling competencies listed in (a) through (i) of this subsection.

(a) Two hundred hours of clinical evaluation. One hundred hours of the two hundred must be face-to-face patient contact hours.

(b) Six hundred hours of face-to-face counseling to include:

Individual counseling;

Group counseling;

Counseling family, couples, and significant others.

(c) Fifty hours of discussion of professional and ethical responsibilities.

(d) Transdisciplinary foundations:

Understanding addiction;

Treatment knowledge;

Application to practice;

Professional readiness.

(e) Treatment planning.

(f) Referral.

(g) Service coordination.

(h) Client, family, and community education.

(i) Documentation, to include, screening, intake, assessment, treatment plan, clinical reports, clinical progress notes, discharge summaries, and other client related data.

(3) Eight hundred fifty hours of experience are designated to subsection (2)(a) through (c) of this subsection, the remaining experience hours must be divided among subsection (2)(d) through (i) of this subsection as determined by the supervisor.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-047, filed 6/14/99, effective 7/15/99.]

WAC 246-811-048 How much of the experience requirement needs to be under supervision? (1) All of the experience must be under an approved supervisor as defined in WAC 246-811-010(1). The first fifty hours of any face-to-face client contact must be under direct observation of an approved supervisor or a chemical dependency professional. Supervision shall be based on assisting the person being supervised in acquiring proficiency in the addiction counseling competencies as defined in WAC 246-811-010(5).

(2) Approved supervisors shall attest to the department of the supervised person's satisfactory progress in becoming proficient in the addiction counseling competencies as listed

in WAC 246-811-047 (2)(a) through (i) on forms provided by the department.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-048, filed 6/14/99, effective 7/15/99.]

WAC 246-811-049 Who may act as an approved supervisor? (1) An approved supervisor is a certified chemical dependency professional or a person who meets or exceeds the requirements of a certified chemical dependency professional in the state of Washington, and who would be eligible to take the examination required for certification; and

(2) An approved supervisor has at least four thousand hours of experience in a state approved chemical dependency treatment agency.

(a) The four thousand hours are in addition to the supervised experience hours required to be eligible to become a chemical dependency professional.

(b) Twenty-eight clock hours of recognized supervisory training may be substituted for one thousand hours of experience; and

(3) An approved supervisor is not a blood or legal relative, significant other, cohabitant of the supervisee, or someone who has acted as the person supervised's primary counselor.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-049, filed 6/14/99, effective 7/15/99.]

WAC 246-811-060 What examination is required for certification? (1) All applicants must take and pass the National Association of Alcoholism and Drug Abuse Counselor (NAADAC) National Certification Examination for Addiction Counselors or International Certification and Reciprocity Consortium (ICRC) Certified Addiction Counselor Level II or higher examination.

(2) The department will accept the passing score established by the testing company.

(3) The application and application fee must be submitted to the department at least ninety days prior to the scheduled examination date. All other supporting documents, including verification of education and experience, must be submitted at least sixty days prior to the examination date.

[Statutory Authority: RCW 18.205.060(7). 00-01-122, § 246-811-060, filed 12/17/99, effective 1/17/00.]

WAC 246-811-070 To what extent will my national certification be recognized by the department? (1) A person who is certified through the National Association of Alcoholism and Drug Abuse Counselors (NAADAC) or the International Certification and Reciprocity Consortium (ICRC), is considered to have met the experience requirements of WAC 246-811-046.

(2) A person who is certified through NAADAC or ICRC is considered to have met the requirements of WAC 246-811-030 pertaining to the forty-five quarter or thirty semester credits in courses covering the subject content described in WAC 246-811-030(2). Verification of the additional forty-five quarter or thirty semester credits will be required upon application to the department.

(3) Verification of certification must be sent directly to the department from NAADAC or ICRC.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-070, filed 6/14/99, effective 7/15/99.]

WAC 246-811-075 How many hours of AIDS prevention and information education do I need? Applicants must complete four clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-075, filed 6/14/99, effective 7/15/99.]

WAC 246-811-080 What happens if my certification expires? (1) If the certification has expired for five years or less the individual must meet the requirements of chapter 246-12 WAC, Part 2.

(2) If a certification has lapsed for more than five years, the applicant will be required to demonstrate continued competency and shall be required to take an examination if an examination was not taken and passed for the initial certification. In addition, the requirements of chapter 246-12 WAC, Part 2, must be met.

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-080, filed 6/14/99, effective 7/15/99.]

WAC 246-811-990 How often do I need to renew and what are the costs for certification? (1) Certificates must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged for certified chemical dependency professional:

Title of Fee	Fee
Application	$100.00
Initial certification	125.00
Renewal	125.00
Late renewal penalty	62.50
Expired certification reissuance	62.50
Duplicate certification	10.00
Certification of certificate	10.00
Wall certificate	10.00

[Statutory Authority: RCW 18.205.060(1). 99-13-084, § 246-811-990, filed 6/14/99, effective 7/15/99.]

Chapter 246-817 WAC

DENTAL QUALITY ASSURANCE COMMISSION (Formerly chapters 246-816 and 246-818 WAC)

WAC

246-817-990 Dentist fees and renewal cycle.

WAC 246-817-990 Dentist fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2, except faculty and resident licenses.

(2) Faculty and resident licenses must be renewed every year on July 1 as provided in chapter 246-12 WAC, Part 2.

(3) The following nonrefundable fees will be charged:

Title of Fee	Fee
Original application by examination*	
Initial application	$ 325.00
Original application - Without examination	
Initial application	350.00
Initial license	350.00
Faculty license application	325.00
Resident license application	60.00
License renewal:	
Renewal	205.00
Surcharge - impaired dentist	5.00
Late renewal penalty	102.50
Expired license reissuance	102.50
Duplicate license	15.00
Certification of license	25.00
Anesthesia permit	
Initial application	50.00
Renewal - (three-year renewal cycle)	50.00
Late renewal penalty	50.00
Expired permit reissuance	50.00
On-site inspection fee	To be determined by future rule adoption.

* In addition to the initial application fee above, applicants for licensure via examination will be required to submit a separate application and examination fee directly to the dental testing agency accepted by the dental quality assurance commission.

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-817-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-817-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.040. 95-16-122, § 246-817-990, filed 8/2/95, effective 9/1/95.]

Chapter 246-822 WAC
DIETITIANS OR NUTRITIONISTS

WAC

246-822-990 Dietitian and nutritionist fees and renewal cycle.

WAC 246-822-990 Dietitian and nutritionist fees and renewal cycle. (1) Certificates must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title	Fee
Application	$75.00
Renewal	45.00
Late renewal penalty	45.00
Expired certificate reissuance	45.00
Duplicate certificate	15.00
Certification of certificate	25.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-822-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-822-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250. 91-13-002 (Order 173), § 246-822-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-822-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.250. 90-04-094 (Order 029), § 308-177-110, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 18.138.070. 89-17-071, § 308-177-110, filed 8/16/89, effective 9/16/89; 89-03-035 (Order PM 814), § 308-177-110, filed 1/11/89.]

Chapter 246-828 WAC
HEARING AND SPEECH

WAC

246-828-045 Interim permit.
246-828-061 Requirements for apprenticeship training waiver.
246-828-105 Speech-language pathology—Minimum standards of practice.
246-828-110 Repealed.
246-828-120 Repealed.
246-828-130 Repealed.
246-828-140 Repealed.
246-828-150 Repealed.
246-828-160 Repealed.
246-828-170 Repealed.
246-828-180 Repealed.
246-828-190 Repealed.
246-828-200 Repealed.
246-828-210 Repealed.
246-828-230 Repealed.
246-828-240 Repealed.
246-828-250 Repealed.
246-828-260 Repealed.
246-828-280 Repealed.
246-828-290 Purchaser recision rights.
246-828-310 Repealed.
246-828-340 Repealed.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-828-110 Bait advertising. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-110, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-140, filed 7/3/84; Order PL 159, § 308-50-140, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-120 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Misrepresenting products, services, personnel or material facts. [Statutory Authority: RCW 18.35.161 (1) and (3). 95-19-017, § 246-828-120, filed 9/7/95, effective 10/8/95. Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-120, filed 5/8/91, effective 6/8/91; 84-19-018 (Order PL 478), § 308-50-150, filed 9/12/84; Order PL 159, § 308-50-150, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-130 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Guarantees and warranties. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-130, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-160, filed 7/3/84; Order PL 159, § 308-50-160, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-140 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Character of business, etc. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-140, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-170, filed 7/3/84; Order PL 159, § 308-50-170, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-150 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Use of physician. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-150, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-180, filed 7/3/84; Order PL 159, § 308-50-180, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-160 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Use of words "prescription," "diagnosis," etc. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-160, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-190, filed 7/3/84; Order PL 261, § 308-50-190, filed 12/21/76; Order PL 190, § 308-50-190, filed 5/23/75; Order PL

159, § 308-50-190, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-170 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Deception as to visibility, construction, etc. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-170, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-200, filed 7/3/84; Order PL 159, § 308-50-200, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-180 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Deception as to batteries. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-180, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-210, filed 7/3/84; Order PL 159, § 308-50-210, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-190 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Deception representing novelty of products. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-190, filed 5/8/91, effective 6/8/91; 84-14-100 (Order PL 469), § 308-50-220, filed 7/3/84; Order PL 159, § 308-50-220, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-200 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Advertising of parts, accessories or components. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-200, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-240, filed 7/3/84; Order PL 159, § 308-50-240, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-210 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Endorsements, etc. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-210, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-250, filed 7/3/84; Order PL 159, § 308-50-250, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-230 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Association with the state of Washington. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-230, filed 5/8/91, effective 6/8/91; 85-05-020 (Order PL 518), § 308-50-270, filed 2/13/85; Readopted by 84-14-100 (Order PL 469), § 308-50-270, filed 7/3/84; Order PL 159, § 308-50-270, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-240 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Tests, acceptance or approval. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-240, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-280, filed 7/3/84; Order PL 159, § 308-50-280, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-250 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Use, imitation or simulation of trademarks, etc. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-250, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-290, filed 7/3/84; Order PL 159, § 308-50-290, filed 2/8/74.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-260 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Defamation of competitors or false disparagement of their products. [Statutory Authority: RCW 18.35.161. 91-11-032 (Order 166B), § 246-828-260, filed 5/8/91, effective 6/8/91; 91-11-031 (Order 165B), recodified as § 246-828-260, filed 5/8/91, effective 6/8/91; Readopted by 84-14-100 (Order PL 469), § 308-50-295, filed 7/3/84; Order PL 190, § 308-50-295, filed 5/23/75.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-280 Documentation of referrals. [Statutory Authority: RCW 18.35.161. 98-06-079, § 246-828-280, filed 3/3/98, effective 4/3/98; 91-11-031 (Order 165B), recodified as § 246-828-280, filed 5/8/91, effective 6/8/91; 85-10-024 (Order PL 526), § 308-50-320, filed 4/24/85; Order PL 159, § 308-50-320, filed 2/8/74.] Repealed by 99-20-063, filed 10/1/99, effective 11/1/99. Statutory Authority: RCW 18.35.161.

246-828-310 Unfair or deceptive practices, unethical conduct and unfair methods of competition—Misrepresenting products, services, personnel or other material facts during telephone solicitations. [Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-310, filed 5/8/91, effective 6/8/91; 85-05-020 (Order PL 518), § 308-50-380, filed 2/13/85.] Repealed by 99-07-020, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

246-828-340 Surety bonding—Security in lieu of bonding. [Statutory Authority: RCW 18.35.161. 98-06-079, § 246-828-340, filed 3/3/98, effective 4/3/98. Statutory Authority: RCW 18.35.161(1). 93-07-010 (Order 340B), § 246-828-340, filed 3/5/93, effective 4/5/93. Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-340, filed 5/8/91, effective 6/8/91; 85-10-024 (Order PL 526), § 308-50-410, filed 4/24/85.] Repealed by 99-07-019, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.35.161.

WAC 246-828-045 Interim permit. Interim permit requirements.

(1) The department will issue an interim permit to any applicant who has shown to the satisfaction of the department that the applicant:

(a) Is supervised by a speech-language pathologist or audiologist certified under chapter 18.35 RCW, in good standing for at least two years unless otherwise approved by the board.

(i) Supervision includes the personal and direct involvement of the supervisor. The supervisor must directly observe diagnostic and therapeutic procedures.

(ii) All purchase agreements for the sale of hearing instruments must be signed by the supervisor and the permit holder.

(iii) No certified audiologist or speech-language pathologist under chapter 18.35 RCW may assume the responsibility for more than one permit holder.

(iv) The supervisor is responsible for all acts of the interim permit holder in connection with audiology or speech-language pathology services during the duration of the permit.

(b) Has paid the application and permit fee.

(c) Has not committed unprofessional conduct as specified by the Uniform Disciplinary Act or chapter 18.35 RCW.

(2) The provisions of RCW 18.35.030, 18.35.110, 18.35.120 shall apply to any person issued an interim permit. A person issued an audiology interim permit may engage in the fitting and dispensing of hearing instruments.

(3) The interim permit shall contain the name and title of the certified supervisor under chapter 18.35 RCW who is supervising the permit holder. The supervisor shall execute and submit to the department acknowledgment of responsibility for all acts of the permit holder in connection with audiology or speech-language pathology services.

Interim permit period.

(4) The interim permit period is divided into three equal segments. The supervisor must complete a minimum of:

(a) No less than thirty-six supervisory activities spaced uniformly throughout the year.

(b) At least eighteen on-site observations (one hour equals one on-site observation). At least six on-site observations must be accrued during each segment (up to six hours may be accrued in one day).

(c) Eighteen other monitoring activities, at least six per segment.

(d) Upon the completion of each segment the supervisor must submit documentation of completion to the department on a form provided by the department.

(e) A review of all purchase agreements in the fitting and dispensing of hearing instruments prior to signing. All purchase agreements will be signed by the supervisor.

(5) The interim permit is valid for one year or for the duration of the postgraduate experience. The interim permit will expire one year from the date of its issuance. The board may extend the permit an additional six months.

Supervisor delegation.

(6) Portions of the supervisory activities including the supervision in hearing instrument fitting and dispensing may be obtained in another facility and may be under the supervision of another certified speech-language pathologist or audiologist as delegated by the supervisor of record.

(a) The audiologist supervisor of record may delegate the supervision of hearing instrument fitting and dispensing to a licensed hearing instrument fitter/dispenser who has been licensed in good standing for at least two years.

(b) Delegation of the responsibility of supervision must be approved by the department.

(7) The department may approve transfer of a permit holder to another eligible supervisor upon the written request of either the supervisor or the permit holder.

(8) It is the responsibility of the permit holder to immediately report the termination of the supervisor to the department in writing, by certified mail.

(9) The supervisor of a permit holder who desires to terminate the responsibility as supervisor must immediately notify the department in writing, by certified mail, of the termination. The supervisor is responsible for the permit holder until such time as the notification of termination to the department is deposited in the United States mail.

[Statutory Authority: RCW 18.35.161(3) and 18.35.060(6). 99-08-102, § 246-828-045, filed 4/6/99, effective 5/7/99.]

WAC 246-828-061 Requirements for apprenticeship training waiver. Requests to the board to waive all or part of the required apprenticeship training "in recognition of formal education in fitting and dispensing of hearing instruments or in recognition of previous licensure in Washington or in another state, territory or the District of Columbia" as defined in RCW 18.35.040 (1)(b) will be reviewed as follows:

(1) The board may waive part or all of the apprenticeship training in recognition of formal education in hearing instrument technology that is a certificate program at least six months in duration and is governed under the Washington state board of community and technical colleges or the equivalent agency in another state, territory, or the District of Columbia. The program must include instruction in all subject areas listed in WAC 246-828-070(2).

(2) The board may waive part or all of the apprenticeship training in recognition of:

(a) Current licensure or certification in Washington or in another state, territory, or the District of Columbia for a minimum of two years in good standing; or

(b) Previous licensure or certification, in good standing that has not been inactive for more than five years.

(3) Applicants requesting that the apprenticeship training requirement be waived that do not meet the criteria of subsection (1) or (2) of this section will be denied.

[Statutory Authority: RCW 18.35.040 and [18.35.]161.3[(3)]. 99-19-059, § 246-828-061, filed 9/15/99, effective 10/16/99.]

WAC 246-828-105 Speech-language pathology—Minimum standards of practice. Certified speech-language pathologists are independent practitioners who provide a comprehensive array of services related to the identification, assessment, habilitation/rehabilitation, of communication disorders and dysphagia. Speech-language pathologists serve in a number of roles including but not limited to clinician, therapist, teacher, consultant, researcher, and administrator. Speech-language pathologists provide services in hospitals, clinics, schools, nursing facilities, care centers, private practice, and other settings in which speech-language pathology services are relevant. Speech-language pathologists provide services to individuals of all ages.

Services must be provided and products dispensed only when benefit can reasonably be expected. All services provided and products dispensed must be evaluated for effectiveness. A certified speech-language pathologist must engage in and supervise only those aspects of the profession that are within the scope of their education, training, and experience. Speech-language pathologists must provide services appropriate to each individual in his or her care, which may include one or more of the following standard procedures:

(1) Case history, to include the following:

(a) Documentation of referral.

(b) Review of the communication, cognitive and/or swallowing problem.

(c) Review of pertinent medical, pharmacological, social and educational status.

(2) Examination of the oral mechanism for the purposes of determining adequacy for speech communication and swallowing.

(3) Screening to include: Speech and language.

(a) Hearing screening, limited to pure-tone air conduction and screening tympanometry.

(b) Swallowing screening. Children under the age of three years who are considered at risk are assessed, not screened;

(4) Assessment may include the following:

(a) Language may include parameters of phonology, morphology, syntax, semantics, and pragmatics; and include receptive and expressive communication in oral, written, graphic and manual modalities;

(b) Speech may include articulation, fluency, and voice (including respiration, phonation and resonance). Treatment shall address appropriate areas;

(c) Swallowing;

(d) Cognitive aspects of communication may include communication disability and other functional disabilities associated with cognitive impairment;

(e) Central auditory processing disorders in collaboration with other qualified professionals;

(f) Social aspects of communication may include challenging behaviors, ineffective social skills, lack of communication opportunities;

(g) Augmentative and alternative communication include the development of techniques and strategies that include selecting, and dispensing of aids and devices (excluding hearing instruments) and providing training to individuals, their families, and other communication partners in their use.

(5) Habilitation/rehabilitation of communication and swallowing to include the following:

(a) Treatment of speech disorders including articulation, fluency and voice.

(b) Treatment of language disorders including phonology, morphology, syntax, semantics, and pragmatics; and include receptive and expressive communication in oral, written, graphic and manual modalities.

(c) Treatment of swallowing disorders.

(d) Treatment of the cognitive aspects of communication.

(e) Treatment of central auditory processing disorders in which there is evidence of speech, language, and/or other cognitive communication disorders.

(f) Treatment of individuals with hearing loss, including aural rehabilitation and related counseling.

(g) Treatment of social aspects of communication, including challenging behaviors, ineffective social skills, and lack of communication opportunities.

(6) All services must be provided with referral to other qualified resources when appropriate.

[Statutory Authority: RCW 18.35.161 (3) and (10). 99-19-058, § 246-828-105, filed 9/15/99, effective 10/16/99; 98-14-055, § 246-828-105, filed 6/26/98, effective 7/27/98.]

WAC 246-828-110 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-120 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-130 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-140 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-150 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-160 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-170 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-180 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-190 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-200 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-210 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-230 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-240 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-250 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-260 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-280 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-290 Purchaser recision rights. In addition to the receipt and disclosure information required by RCW 18.35.030, 18.35.185, 63.14.040 and 63.14.120, every retail agreement for the sale of hearing instruments shall contain or have attached the following notice to buyer in twelve point type or larger. The language in part 1 under "Notice to Buyer" is intended to have the same legal effect as the notices required in RCW 63.14.040(2) and 63.14.120(3) and may be substituted for those notices.

The rights summarized in the "Notice to Buyer" must be made known to the purchaser before the contract is executed. The licensee or certificate holder must provide this "Notice to Buyer" in writing to the purchaser. The purchaser must demonstrate knowledge of these rights by initialing each numbered section of the "Notice to Buyer" and by signing his or her name in the appropriate space following the "Notice to Buyer."

Notice to Buyer

Do not sign this agreement before you read it or if any spaces intended for the agreed terms are blank.

You are entitled to receive a copy of this agreement at the time you sign it.

The seller's business address must be shown on the agreement.

Section 1 CANCELLATION - WITHIN THREE DAYS Purchaser's Initial.....

You may cancel this agreement within three days, without explaining your reasons, if the seller solicited it in person and you signed it at a place other than the seller's business address.

To cancel this agreement without explaining your reasons, you must notify the seller in writing that you are canceling the agreement. You may deliver the written notice to the seller at the seller's business address. Alternatively, you may send the written notice by certified mail, return receipt requested, to the seller at the seller's business address.

Your written notice must be mailed or delivered by midnight of the third business day after you signed this agreement.

Any merchandise you received under this agreement must be in its original condition. You must return it to the seller or make it available to the seller at the same place it was delivered to you.

The seller must refund to you all deposits, including any down payment, and must return to you all goods traded in as part of the agreement.

You will incur no additional liability for canceling the agreement.

Section 2 RECISION - WITHIN THIRTY DAYS Purchaser's Initial .....

You may rescind (or terminate) the agreement within thirty days, for reasonable cause. This thirty-day period is called the "recision period."

To rescind this agreement, you must notify the seller in writing that you are rescinding the agreement for reasonable cause pursuant to RCW 18.35.185(1). (Reasonable cause does not include cosmetic concerns or a mere change of mind.) You may deliver the written notice to the seller at the seller's business address. Alternatively, you may send the written notice by certified mail, return receipt requested, to the seller at the seller's business address.

Your written notice must be mailed or delivered by midnight of the thirtieth day after you signed this agreement.

Any merchandise you received under this agreement must be in its original condition, except for normal wear and tear. You must return it to the seller or make it available to the seller at the same place it was delivered to you.

The seller must refund to you all deposits, including any down payment, and must return to you all goods traded in as part of the agreement. However, for each hearing instrument you return, the seller may keep either one hundred fifty dollars or fifteen percent of the total purchase price, whichever is less. The seller also may deduct any costs incurred in making traded-in goods ready for resale.

The seller must refund your money and return your traded goods, or have them postmarked and in the mail to you, within ten business days after receiving your notice of recision.

You will incur no additional liability for rescinding the agreement.

Section 3 EXTENSION OF RECISION PERIOD Purchaser's Initial .....

If you notify the seller within the thirty-day recision period that your hearing instrument has developed a problem that constitutes reasonable cause to rescind the agreement or that prevents you from evaluating your hearing instrument, the seller must extend the recision period. The recision period stops running on the date you notify the seller of the problem and starts running again on the date the seller notifies you that your hearing instrument is ready for redelivery.

You and the seller may agree to a recision period longer than thirty days.

Whenever the recision period is extended, the seller must provide you written notice of the last date upon which you may demand a refund and return of traded goods.

Signature of Purchaser	Date
Signature of Seller	Date
Delivery Acknowledgment - Signature of Purchaser	Date

[Statutory Authority: RCW 18.35.161 and 18.35.185(2). 99-08-103, § 246-828-290, filed 4/6/99, effective 7/5/99. Statutory Authority: RCW 18.35.161. 91-11-031 (Order 165B), recodified as § 246-828-290, filed 5/8/91, effective 6/8/91; 86-09-064 (Order PL 586), § 308-50-330, filed 4/17/86; Order PL 190, § 308-50-330, filed 5/23/75; Order PL 159, § 308-50-330, filed 2/8/74.]

WAC 246-828-310 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-828-340 Repealed. See Disposition Table at beginning of this chapter.

Chapter 246-830 WAC
MASSAGE PRACTITIONERS

WAC

WAC 246-830-990 Massage fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Written examination and reexamination	$ 65.00
Practical examination and reexamination	50.00
Initial license	55.00
Renewal	40.00
Late renewal penalty	40.00
Expired license reissuance	40.00
Certification of license	10.00
Duplicate license	10.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-830-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-830-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.108.025(1). 95-11-108, § 246-830-990, filed 5/23/95, effective 6/23/95. Statutory Authority: RCW 43.70.250. 93-14-011, § 246-830-990, filed 6/24/93, effective 7/25/93. Statutory Authority: RCW 18.108.085 and 43.70.250. 92-02-018 (Order 224), § 246-830-990, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-830-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.24.086. 88-24-042 (Order PM 788), § 308-51-210, filed 12/6/88; 87-18-031 (Order PM 667), § 308-51-210, filed 8/27/87.]

Chapter 246-834 WAC
MIDWIVES

WAC

WAC 246-834-050 Examination requirements for licensure as a midwife. This rule provides the minimum examination requirements for licensure as a midwife.

(1) The midwifery examination offered by the North American Registry of Midwives (NARM) is the official examination for midwifery licensure. All applicants must complete this examination with a passing score. This examination shall be offered by the department of health midwifery program twice a year. If the applicant passes the examination within two years prior to applying for a Washington license, the department will accept the results.

(2) In addition to the NARM examination, all applicants must pass the Washington state specific component examination.

[Statutory Authority: RCW 18.50.060. 99-03-064, § 246-834-050, filed 1/18/99, effective 2/18/99.]

WAC 246-834-060 Application requirements for licensure as a midwife. This rule provides the requirements for application for a midwife license.

(1) All applicants must submit a Washington state application for licensure, along with the applicable fees specified in WAC 246-830-990 and additional documentation as specified below. Applications must be received fifty-six days prior to the examination.

(2) Applicants must submit the following documentation:

(a) Transcripts sent directly from an approved school which indicate the applicant has received a certificate or diploma in midwifery. Those applicants applying under WAC 246-834-220 will be exempted from this requirement.

(b) One current passport type photograph, signed and dated across the bottom of the photo or on the back.

(c) Proof of high school graduation or passing the general educational development test.

(d) A current plan for consultation, emergency transfer and transport.

(e) Verification of seven clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.

(f) Applicants with disabilities who wish to request special accommodations must do so when submitting their application.

(g) Applicants who have passed the NARM examination within the past two years must have verification of the examination results sent directly from NARM to the department.

(3) It is the applicant's responsibility to complete an application for the NARM examination and submit the application along with the NARM examination fee directly to NARM. A NARM application and instructions will be provided in the state application packet sent to the applicant.

[Statutory Authority: RCW 18.50.060. 99-03-064, § 246-834-060, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-834-060, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.50.135 and 18.50.045. 92-02-018 (Order 224), § 246-834-060, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-834-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.50.135. 82-19-079 (Order PL 406), § 308-115-060, filed 9/21/82.]

WAC 246-834-070 Release of examination results. (1) Applicants shall be notified of examination results. All notices shall be by mail. The minimum passing score for both the NARM examination and the Washington state specific component examination is 75.

(2) Applicants who pass both the NARM examination and the Washington state specific component examination and meet all eligibility requirements shall receive a license to practice as a midwife, unless there are grounds for disciplinary action under chapter 18.130 RCW.

(3) Applicants who fail shall receive notice of their eligibility to be reexamined, and of the procedure for applying for reexamination.

(4) Results of the examination will not be released to anyone except as provided above unless release is authorized by the applicant in writing.

[Statutory Authority: RCW 18.50.060. 99-03-064, § 246-834-070, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-834-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.50.135. 82-19-079 (Order PL 406), § 308-115-070, filed 9/21/82.]

WAC 246-834-080 Failures. (1) An applicant who has failed either the NARM examination or the Washington state specific component examination or both must retake and pass the examination(s) which he or she failed. The applicant may sit for the examination if he or she:

(a) Applies to the department at least fifty-six days prior to the next scheduled examination; and

(b) Pays any required fee as specified in WAC 246-834-990.

(2) Applicants who fail the second retest shall be required to submit evidence to the secretary of completion of an individualized program of study approved in advance by the department prior to retaking the examination.

(3) Applicants may have their examination hand-scored by submitting a request and appropriate fee directly to NARM within ninety days of the examination administration. A copy of their request must be sent to the department. The department will inform the applicant of the results of the hand-scored examination.

[Statutory Authority: RCW 18.50.060. 99-03-064, § 246-834-080, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 18.50.135 and 18.50.045. 92-02-018 (Order 224), § 246-834-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121),

recodified as § 246-834-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.50.135. 82-19-079 (Order PL 406), § 308-115-080, filed 9/21/82.]

Chapter 246-838 WAC
PRACTICAL NURSES

WAC

246-838-040 Repealed.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-838-040 Licensure qualifications. [Statutory Authority: RCW 18.130.050 and 18.78.050. 94-08-050 § 246-838-040, filed 4/1/94, effective 5/2/94; 91-13-023 (Order 175B), § 246-838-040, filed 6/11/91, effective 7/12/91. Statutory Authority: RCW 18.78.050. 91-01-078 (Order 109B), recodified as § 246-838-040, filed 12/17/90, effective 1/31/91. Statutory Authority: RCW 18.78.050, 18.78.054, 18.78.060, 18.78.072, 18.78.090, 18.78.225, 18.130.050 and 70.24.270. 88-24-017 (Order PM 768), § 308-117-030, filed 12/1/88. Statutory Authority: RCW 18.78.050, 18.78.054, 18.78.060, 18.130.050 and SHB 1404, 1988 c 211. 88-18-005 (Order PM 768), § 308-117-030, filed 8/25/88. Statutory Authority: 18.78.050, 18.78.060 and 18.130.050. 88-08-034 (Order PM 718), § 308-117-030, filed 4/1/88. Statutory Authority: RCW 18.78.050. 84-01-061 (Order PL 452), § 308-117-030, filed 12/19/83. Formerly WAC 308-116-295.] Repealed by 99-08-104, filed 4/6/99, effective 5/7/99. Statutory Authority: Chapter 18.79 RCW.

WAC 246-838-040 Repealed. See Disposition Table at beginning of this chapter.

Chapter 246-840 WAC
PRACTICAL AND REGISTERED NURSING

WAC

246-840-020 Documents issued to nurses in Washington.
246-840-050 Licensing examination.
246-840-070 Failures—Repeat examination.
246-840-090 Licensure by interstate endorsement.
246-840-730 Mandatory reporting.
246-840-740 Sexual misconduct prohibited.

WAC 246-840-020 Documents issued to nurses in Washington. The following documents are the only documents issued to nurses in Washington.

(1) Active license. A license is issued upon completion of all requirements for licensure, confers the right to use the title licensed practical nurse or licensed registered nurse and the use of its abbreviation, L.P.N. or R.N., and to practice as a licensed practical nurse or registered nurse in the state of Washington.

A student who has graduated from a basic professional nursing course and who is pursuing a baccalaureate degree in nursing, an advanced degree in nursing or an advanced certification in nursing shall hold an active Washington RN license before participating in the practice of nursing as required to fulfill the learning objectives in a clinical course.

Exception to this requirement may be granted by the commission on an individual basis upon a petition submitted by the dean or director of a school of nursing, on a case-by-case basis.

(a) The exception allows the student to practice in a clinical setting only under the direct supervision of an RN faculty member. The commission requires that any RN faculty member supervising these students meet the requirements of direct supervision as defined in WAC 246-840-010 (13)(c)(ii) and, in addition, that supervising faculty document that all clients under the care of the student be assessed by the RN faculty each clinical day.

(b) The dean or director of the school of nursing shall ensure that each faculty member who supervises these students be provided a copy of these rules and be assigned in a manner that allows for direct supervision.

(c) Nursing students who participate in clinical courses under this section are not eligible for the nursing technician role.

(2) Inactive license. A license issued to a person previously holding an active license in this state, is in good standing and does not practice in Washington state. Refer to chapter 246-12 WAC, Part 4.

(3) Limited educational license. A limited educational license may be issued to a person who has been on inactive or lapsed status for three years or more and who wishes to return to active status. A limited educational license does not authorize practice for employment.

(4) Advanced registered nurse practitioner (ARNP) recognition document. An ARNP recognition document may be issued to any person who meets the requirements of the commission as contained in WAC 246-840-300. Only persons holding this recognition document shall have the right to use the title "advanced registered nurse practitioner" or the abbreviation "ARNP" or any title or abbreviation which may indicate that the person is entitled to practice at an advanced and specialized level as a nurse practitioner, a specialized nurse practitioner, a nurse midwife, or a nurse anesthetist. This document authorizes the ARNP to engage in the scope of practice allowed for his or her specialty area and is valid only with a current registered nurse license.

(5) ARNP interim permit. An interim permit may be issued following satisfactory completion of an advanced formal education program, registration for the first certification examination of an approved program following completion of the education and filing of an application, fee and requested documentation. If the applicant passes the examination the department shall grant advanced registered nurse practitioner status. If the applicant fails the examination, the interim permit shall expire upon notification and is not renewable.

(6) ARNP prescriptive authorization. A notation of prescriptive authorization may be placed on the ARNP recognition document issued to any person who meets the requirements of the commission as contained in WAC 246-840-410. This authorizes the ARNP to prescribe drugs within his or her scope of practice and is valid only with a current registered nurse license.

[Statutory Authority: RCW 18.79.110. 99-10-079, § 246-840-020, filed 5/4/99, effective 6/4/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-840-020, filed 2/13/98, effective 3/16/98. Statutory Authority: Chapter 18.79 RCW. 97-13-100, § 246-840-020, filed 6/18/97, effective 7/19/97.]

WAC 246-840-050 Licensing examination. (1) The current series of the National Council of the State Boards of Nursing Registered Nurse or Practical Nurse Licensing Examination (NCLEX-RN or NCLEX-PN) Computerized Adaptive Test (NCLEX CAT) shall be the official examinations for nurse licensure. In order to be licensed in this state, all nurse applicants shall take and pass the National Council Licensure Examination (NCLEX-RN or NCLEX-PN) within four attempts and within two years of completion of the nursing program.

(2) The NCLEX will consist of a Computerized Adaptive Test that will be individualized with the score for the examination reported as either pass or fail. Specific parameters of the exam will be as prescribed by contract with National Council of State Boards of Nursing, Inc. (NCSBN).

(3) Examinations shall be conducted throughout the year.

(4) The executive director of the commission shall negotiate with NCSBN for the use of the NCLEX CAT.

(5) The examination shall be administered in accord with the NCSBN security measures and contract. All appeals of examination results shall be managed in accord with policies in the NCSBN contract.

[Statutory Authority: RCW 18.79.110. 99-13-086, § 246-840-050, filed 6/14/99, effective 7/15/99. Statutory Authority: Chapter 18.79 RCW. 97-13-100, § 246-840-050, filed 6/18/97, effective 7/19/97.]

WAC 246-840-070 Failures—Repeat examination. (1) The retest may be scheduled no sooner than ninety days following the date of the last exam taken.

(2) Request to retake the exam must be submitted to the commission no less than forty-five days prior to the anticipated test date.

(3) Candidates who fail the examination will be permitted to retake the examination three times within the two-year period from the month of completion of the nursing program.

(4) Candidates who fail to pass the examination within the time period specified in subsection (3) of this section shall be required to complete a program of study approved by the commission. Upon successful completion of the approved program, the candidate shall be required to take the examination.

[Statutory Authority: RCW 18.79.110. 99-13-086, § 246-840-070, filed 6/14/99, effective 7/15/99. Statutory Authority: Chapter 18.79 RCW. 97-13-100, § 246-840-070, filed 6/18/97, effective 7/19/97.]

WAC 246-840-090 Licensure by interstate endorsement. A license to practice as a nurse in Washington may be issued without examination provided the applicant meets all of the following requirements:

FOR PRACTICAL NURSE PROGRAMS:

(1) The applicant has graduated and holds a credential from:

(a) A commission or state board approved program preparing candidates for licensure as a practical nurse; or

(b) Its equivalent as determined by the commission, which program must fulfill the minimum requirement for commission or state board approved practical nursing programs in Washington at the time of graduation.

(2) Applicants shall have passed a state board constructed test, the SBTPE (state board test pool examination), or NCLEX in their original state of licensure within four attempts and within two years of completion of the nursing program.

(3) The applicant held or currently holds a license to practice as a practical nurse in another state or territory. If the license is lapsed or inactive for three years or more, the applicant must successfully complete a commission approved refresher course before an active Washington license is issued.

(4) That grounds do not exist for denial under chapter 18.130 RCW.

(5) The applicant shall:

(a) Submit a completed application with the required fee.

(b) Applicants must complete seven clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.

FOR REGISTERED NURSE PROGRAMS:

(6) The applicant has graduated and holds a degree/diploma from a commission or state board approved school of nursing preparing candidates for licensure as a registered nurse provided such nursing program is equivalent to the minimum nursing educational standards prevailing for commission or state board approved schools of nursing in Washington at the time of the applicant's graduation.

(a) Applicants who were licensed prior to January 1, 1953, must have scored at least seventy-five percent on the commission or state board examination in the state of original licensure.

(i) Applicants licensed after January 1, 1953, but before June 1, 1982, must have passed the state board test pool examination for registered nurse licensure with a minimum standard score of 350 in each test.

(ii) Applicants licensed after July 1, 1982, must have passed with a minimum standard score as established by contract with the National Council of State Boards of Nursing.

(b) The applicant holds a valid current license to practice as a registered nurse in another state or territory.

(c) Applicants must complete seven clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.

(d) The application must be completed and notarized, the fee must be filed with the application. A notarized copy of a valid current license shall be filed with the application.

(e) Verification of licensure by examination must be obtained from the state or territory of original licensure. Any fee for verification required by the state or territory of original license must be paid by the applicant.

(7) Applicants from countries outside the United States who were granted a license in another United States jurisdiction or territory prior to December 31, 1971, and who were not required to pass the state board test pool examination must meet the following requirements:

(a) The nursing education program must meet the minimum approved standards prevailing for schools of nursing in Washington at the time of the applicant's graduation.

(b) The applicant holds a valid current license to practice as a registered nurse in another United States jurisdiction or territory.

(c) The applicant must submit to the commission:

(i) A complete notarized application. The fee must be filed with the application.

(ii) Verification of original licensure obtained in the United States jurisdiction or territory.

(iii) Notarized copies of educational preparation and licensure by examination submitted directly from the country of original licensure or from the state commission or territory of original United States licensure.

(iv) Verification of current nursing practice for three years prior to application for Washington licensure.

(v) Applicants must complete seven clock hours of AIDS education as required in chapter 246-12 WAC, Part 8.

(d) The applicant shall meet all requirements of chapter 18.79 RCW and regulations of the commission.

[Statutory Authority: RCW 18.79.110. 99-13-086, § 246-840-090, filed 6/14/99, effective 7/15/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-840-090, filed 2/13/98, effective 3/16/98. Statutory Authority: Chapter 18.79 RCW. 97-13-100, § 246-840-090, filed 6/18/97, effective 7/19/97.]

WAC 246-840-730 Mandatory reporting. Mandatory reporting assists the nursing care quality assurance commission (nursing commission) in protecting the public health and safety through the discovery of unsafe or substandard nursing practice or conduct. These rules are intended to define the information that is to be reported and the obligation of nurses and others to report.

The nursing commission does not intend every minor nursing error to be reported or that mandatory reporting serve as a substitute for employer-based disciplinary action.

Who must make reports and what must be reported to the nursing commission?

(1) Any person, including, but not limited to, registered nurses, practical nurses, advanced registered nurse practitioners, health care facilities and governmental agencies shall always report the following, except as provided for in subsections (2) and (3) of this section:

(a) Information that a nurse may not be able to practice with reasonable skill and safety as a result of a mental or physical condition;

(b) Information regarding a conviction, determination or finding, including employer-based disciplinary action, that a nurse has committed an act that would constitute unprofessional conduct, as defined in RCW 18.130.180, including violations of chapter 246-840 WAC, including, but not limited to:

(i) Conviction of any crime or plea of guilty, including crimes against persons as defined in chapter 43.830 RCW, and crimes involving the personal property of a patient, whether or not the crime relates to the practice of nursing;

(ii) Conduct which leads to dismissal from employment for cause related to unsafe nursing practice or conduct in violation of the standards of nursing;

(iii) Conduct which reasonably appears to be a contributing factor to the death of a patient;

(iv) Conduct which reasonably appears to be a contributing factor to the harm of a patient that requires medical intervention;

(v) Conduct which reasonably appears to violate accepted standards of nursing practice and reasonably appears to create a risk of physical and/or emotional harm to a patient;

(vi) Conduct involving a pattern of repeated acts or omissions of a similar nature in violation of the standards of nursing that reasonably appears to create a risk to a patient;

(vii) Drug trafficking;

(viii) Conduct involving the misuse of alcohol, controlled substances or legend drugs, whether or not prescribed to the nurse, where such conduct is related to nursing practice or violates any other drug or alcohol-related nursing commission law;

(ix) Conduct involving sexual contact with a patient under RCW 18.130.180(24) or other sexual misconduct in violation of nursing commission law under WAC 246-840-740;

(x) Conduct involving patient abuse, including physical, verbal and emotional;

(xi) Conduct indicating unfitness to practice nursing or that would diminish the nursing profession in the eyes of the public;

(xii) Conduct involving fraud related to nursing practice;

(xiii) Conduct involving practicing beyond the scope of the nurse's license;

(xiv) Nursing practice, or offering to practice, without a valid nursing permit or license, including practice on a license lapsed for nonpayment of fees;

(xv) Violation of a disciplinary sanction imposed on a nurse's license by the nursing commission.

(2) Persons who work in federally funded substance abuse treatment programs are exempt from these mandatory reporting requirements to the extent necessary to comply with 42 CFR Part 2.

(3) Persons who work in approved substance abuse monitoring programs under RCW 18.130.175 are exempt from these mandatory reporting rules to the extent required to comply with RCW 18.130.175(3) and WAC 246-840-780(3).

How is a report made to the nursing commission?

(4) In providing reports to the nursing commission, a person may call the nursing commission office for technical assistance in submitting a report. Reports are to be submitted in writing and include the name of the nurse, licensure identification, if available, the name of the facility, the names of any patients involved, a brief summary of the specific concern which is the basis for the report, and the name, address and telephone number of the individual submitting the report.

(5) Failure of any licensed nurse to comply with these reporting requirements may constitute grounds for discipline under chapter 18.130 RCW.

What are the criteria for whistleblower protection?

(6) Whistleblower criteria is defined in chapter 246-15 WAC and RCW 43.70.075.

[Statutory Authority: RCW 18.79.110. 00-01-186, § 246-840-730, filed 12/22/99, effective 1/22/00. Statutory Authority: Chapter 18.79 RCW. 97-13-100, § 246-840-730, filed 6/18/97, effective 7/19/97.]

WAC 246-840-740 Sexual misconduct prohibited. (1) **What is the nursing commission's intent in prohibiting this type of misconduct?**

Sexual or romantic conduct with a client or the client's family is serious misconduct because it harms the nurse/cli-

ent relationship and interferes with the safe and effective delivery of nursing services. A nurse does not need to be "assigned" to the client in order for the nurse/client relationship to exist. The role of the nurse in the nurse/client relationship places the nurse in the more powerful position and the nurse must not abuse this power. Under certain circumstances, the nurse/client relationship continues beyond the termination of nursing services. Not only does sexual or romantic misconduct violate the trust and confidence held by health care clients towards nursing staff, but it also undermines public confidence in nursing. Nurses can take measures to avoid allegations of such misconduct by establishing and maintaining professional boundaries in dealing with their clients.

(2) **What conduct is prohibited?**

Nurses shall never engage, or attempt to engage, in sexual or romantic conduct with clients, or a client's immediate family members or significant others. Such conduct does not have to involve sexual contact. It includes behaviors or expressions of a sexual or intimately romantic nature. Sexual or romantic conduct is prohibited whether or not the client, family member or significant other initiates or consents to the conduct. Such conduct is also prohibited between a nursing educator and student.

Regardless of the existence of a nurse/client relationship, nurses shall never use patient information derived through their role as a health care provider to attempt to contact a patient in pursuit of a nurse's own sexual or romantic interests or for any other purpose other than legitimate health care.

(3) **What should a nurse do to avoid allegations of sexual or romantic misconduct?**

Establishing and maintaining professional boundaries is critical to avoiding even the appearance of sexual or romantic misconduct. Nurses can take certain preventative steps to make sure safeguards are in place at all times, such as:

(a) Setting appropriate boundaries with patients, physically and verbally, at the outset of professional relationships, and documenting such actions and the basis for such actions;

(b) Consulting with supervisors regarding difficulties in establishing and maintaining professional boundaries with a given client; and/or

(c) Seeking reassignment to avoid incurring a violation of these rules.

(4) **What about former clients?**

A nurse shall not engage or attempt to engage a former client, or former client's immediate family member or significant other, in sexual or romantic conduct if such conduct would constitute abuse of the nurse/client relationship. The nurse/client relationship is abused when a nurse uses and/or benefits from the nurse's professional status and the vulnerability of the client due to the client's condition or status as a patient.

(a) Due to the unique vulnerability of mental health and chemical dependency clients, nurses are prohibited from engaging in or attempting to engage in sexual or romantic conduct with such former clients, or their immediate family or significant other, for a period of at least two years after termination of nursing services. After two years, sexual or romantic conduct may be permitted with a former mental health or chemical dependency client, but only if the conduct would not constitute abuse of the nurse/client relationship.

(b) Factors which the commission may consider in determining whether there was abuse of the nurse/client relationship include, but are not limited to:

(i) The amount of time that has passed since nursing services were terminated;

(ii) The nature and duration of the nurse/client relationship, the extent to which there exists an ongoing nurse/client relationship following the termination of services, and whether the client is reasonably anticipated to become a client of the nurse in the future;

(iii) The circumstances of the cessation or termination of the nurse/client relationship;

(iv) The former client's personal history;

(v) The former client's current or past mental status, and whether the client has been the recipient of mental health services;

(vi) The likelihood of an adverse impact on the former client and others;

(vii) Any statements or actions made by the nurse during the course of treatment suggesting or inviting the possibility of sexual or romantic conduct;

(viii) Where the conduct is with a client's immediate family member or significant other, whether such a person is vulnerable to being induced into such relationship due to the condition or treatment of the client or the overall circumstances.

(5) **Are there situations where these rules do not apply?**

These rules do not prohibit:

(a) The provision of nursing services on an urgent, unforeseen basis where circumstances will not allow a nurse to obtain reassignment or make an appropriate referral;

(b) The provision of nursing services to a spouse, or family member, or any other person who is in a preexisting, established relationship with the nurse where no evidence of abuse of the nurse/client relationship exists.

[Statutory Authority: RCW 18.130.180(24). 99-04-051, § 246-840-740, filed 1/28/99, effective 2/28/99.]

Chapter 246-841 WAC
NURSING ASSISTANTS

WAC

WAC 246-841-990 Nursing assistant—Fees and renewal cycle. (1) Certificates and registrations must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged for registrations:

Title of Fee	Fee
Application - registration	$ 15.00
Renewal of registration	25.00
Duplicate registration	10.00
Registration late penalty	25.00
Expired registration reissuance	25.00

(3) The following nonrefundable fees will be charged for certifications:

Application for certification	15.00
Certification renewal	25.00
Duplicate certification	10.00
Certification late penalty	25.00
Expired registration reissuance	25.00

[Statutory Authority: RCW 18.88A.050(1). 99-24-062, § 246-841-990, filed 11/29/99, effective 12/30/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-841-990, filed 2/13/98, effective 3/16/98. Statutory Authority: Chapter 18.88A RCW. 96-03-051, § 246-841-990, filed 1/12/96, effective 3/1/96. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-841-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.250. 90-04-094 (Order 029), § 308-173-130, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. 88-20-075 (Order 783), § 308-173-130, filed 10/5/88.]

Chapter 246-843 WAC
NURSING HOME ADMINISTRATORS

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-843-001 Source of authority—Title. [Statutory Authority: RCW 18.52.061. 93-13-004 (Order 371B), § 246-843-001, filed 6/3/93, effective 7/4/93. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-001, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-001, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 78-02-009 (Order PL 282), § 308-54-010, filed 1/6/78; Order PL 107, § 308-54-010, filed 3/3/71.] Repealed by 00-01-073, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52 and 34.05 RCW.

246-843-030 Board of examiners—Meetings. [Statutory Authority: RCW 18.52.100. 91-06-060 (Order 141B), recodified as § 246-843-030, filed 3/1/91, effective 4/1/91; Order PL 107, § 308-54-030, filed 3/3/71.] Repealed by 00-01-073, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52 and 34.05 RCW.

246-843-050 Board of examiners—Officers and duties. [Statutory Authority: RCW 18.52.100. 91-06-060 (Order 141B), recodified as § 246-843-050, filed 3/1/91, effective 4/1/91; Order PL 107, § 308-54-050, filed 3/3/71.] Repealed by 00-01-073, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52 and 34.05 RCW.

246-843-060 Program manager—Hiring and duties. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-060, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-060, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-060, filed 12/29/86; Order PL 126, § 308-54-060, filed 6/1/72; Order PL 107, § 308-54-060, filed 3/3/71.] Repealed by 99-03-069, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 18.52.061.

246-843-080 Application for examination. [Statutory Authority: RCW 18.52.061. 93-23-034, § 246-843-080, filed 11/10/93, effective 12/11/93. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-080, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-080, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-080, filed 12/29/86; Order PL 107, § 308-54-080, filed 3/3/71.] Repealed by 00-01-072, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075.

246-843-100 Disqualification—Reexamination. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-100, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-100, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-100, filed 12/29/86; Order PL 215, § 308-54-100, filed 11/5/75; Order PL 107, § 308-54-100, filed 3/3/71.] Repealed by 00-01-072, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075.

246-843-110 Subjects for examination. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-110, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-110, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-110, filed 12/29/86; Order PL 107, § 308-54-110, filed 3/3/71.] Repealed by 00-01-072, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapter 18.52, 34.05 RCW and RCW 18.130.075.

246-843-115 Examination procedures. [Statutory Authority: RCW 18.52.100. 91-24-022 (Order 216B), § 246-843-115, filed 11/25/91, effective 12/26/91.] Repealed by 00-01-072, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075.

246-843-120 Grading examinations. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-120, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-120, filed 3/1/91, effective 4/1/91; 81-14-037 (Order PL 381), § 308-54-120, filed 6/29/81; Order PL 107, § 308-54-120, filed 3/3/71.] Repealed by 00-01-072, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075.

246-843-122 Examination review procedures. [Statutory Authority: RCW 18.52.100. 91-24-022 (Order 216B), § 246-843-122, filed 11/25/91, effective 12/26/91.] Repealed by 00-01-072, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075.

246-843-125 Continuing education credit for preceptors for administrators-in-training programs. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-125, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-125, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14) and 18.52.110. 80-01-057 (Order PL 328), § 308-54-125, filed 12/20/79.] Repealed by 00-01-074, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52 and 34.05 RCW.

246-843-170 Temporary permits. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-170, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-170, filed 3/1/91, effec-

tive 4/1/91. Statutory Authority: RCW 18.52.100(11). 88-23-038 (Order PM 791), § 308-54-170, filed 11/9/88. Statutory Authority: RCW 18.52.100. 80-08-066 (Order 348), § 308-54-170, filed 7/1/80. Statutory Authority: RCW 18.52.100 (10) and (14). 78-02-009 (Order PL 282), § 308-54-170, filed 1/6/78; Order PL 107, § 308-54-170, filed 3/3/71.] Repealed by 00-01-072, filed 12/13/99, effective 1/13/00. Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075.

246-843-200 Standards of suitability and character. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-200, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-200, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-200, filed 12/29/86. Statutory Authority: RCW 18.52.100 (1) and (14). 78-02-009 (Order PL 282), § 308-54-200, filed 1/6/78; Order PL 107, § 308-54-200, filed 3/3/71.] Repealed by 99-03-068, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 18.52.061.

246-843-220 Complaints and hearing procedures. [Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-220, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-220, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.090(2), 18.52.150, 18.52.100 (4), (5), (6) and (14). 78-02-009 (Order PL 282), § 308-54-220, filed 1/6/78; Order PL 107, § 308-54-220, filed 3/3/71.] Repealed by 99-03-067, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 18.52.061.

246-843-225 Issuance of subpoenas—Administering oaths and affirmations—Ruling when board or hearing panel not in session. [Statutory Authority: RCW 18.52.100. 91-06-060 (Order 141B), recodified as § 246-843-225, filed 3/1/91, effective 4/1/91; 80-08-066 (Order 348), § 308-54-225, filed 7/1/80. Statutory Authority: RCW 18.52.155. 78-02-009 (Order PL 282), § 308-54-225, filed 1/6/78.] Repealed by 99-03-067, filed 1/18/99, effective 2/18/99. Statutory Authority: RCW 18.52.061.

WAC 246-843-001 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-010 General definitions. Terms used in these rules have the following meanings:

(1) "On-site, full-time administrator" is an individual in active administrative charge of one nursing home facility or collocated facilities, as licensed under chapter 18.51 RCW, a minimum of four days and an average of forty hours per week. Exception: "On-site, full-time administrator" in nursing homes with small resident populations, or in rural areas is an individual in active administrative charge of one nursing home facility, or collocated facilities, as licensed under chapter 18.51 RCW:

(a) A minimum of four days and an average of twenty hours per week at facilities with one to thirty beds; or

(b) A minimum of four days and an average of thirty hours per week at facilities with thirty-one to forty-nine beds.

(2) "Active administrative charge" is direct participation in the operating concerns of a nursing home. Operating concerns include, but are not limited to, interaction with staff and residents, liaison with the community, liaison with regulatory agencies, pertinent business and financial responsibilities, planning and other activities as identified in the most current job analysis published by the National Association of Boards of Examiners for Long-Term Care Administrators.

(3) "Person" means an individual and does not include the terms firm, corporation, institutions, public bodies, joint stock associations, and other such entities.

(4) "Nursing home administrator-in-training" means an individual in an administrator-in-training program approved by the board.

(5) "Secretary" means the secretary of the department of health or the secretary's designee.

(6) "Collocated facilities" means more than one licensed nursing facility situated on a contiguous or adjacent property, whether or not there are intersecting streets. Other criteria to qualify as a collocated facility would be determined by the nursing home licensing agency under chapter 18.51 RCW.

(7) "Recognized institution of higher learning" means an accredited degree granting institution in the United States or outside the United States that is listed in the directory of accredited institutions of postsecondary education published by the American Council on Education.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-071, § 246-843-010, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.061. 95-07-128, § 246-843-010, filed 3/22/95, effective 4/22/95; 93-13-004 (Order 371B), § 246-843-010, filed 6/3/93, effective 7/4/93. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-010, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-010, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-020, filed 12/29/86; Order PL 107, § 308-54-020, filed 3/3/71.]

WAC 246-843-015 Nursing homes temporarily without an administrator. After an administrator's position becomes vacant, a nursing home may operate under a responsible person authorized to act as administrator designee. The administrator designee may act for four continuous weeks unless an exception is granted by the nursing home licensing agency under chapter 18.51 RCW.

The administrator designee shall be qualified by experience to assume delegated duties. A Washington licensed administrator shall sign an agreement to be available to consult with the administrator designee.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-071, § 246-843-015, filed 12/13/99, effective 1/13/00.]

WAC 246-843-030 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-040 Duties and responsibilities. The board, with the assistance of the secretary, shall have the following duties and responsibilities, within the limits of chapter 18.52 RCW.

(1) Develop standards for individuals in order to receive a license as a nursing home administrator.

(2) Develop techniques, including examinations and investigations to determine whether an individual meets such standards for licensing:

(3) Approve licenses or temporary permits for individuals meeting requirements applicable to them.

(4) Discipline or deny a license holder or applicant under authority granted by RCW 18.130.160 or who fails to meet requirements of chapter 18.52 RCW.

(5) Investigate and take action on a report or complaint filed with the board or secretary that any individual licensed as a nursing home administrator has failed to comply with the requirements of chapter 18.52 RCW.

(6) Adopt rules necessary to carry out the functions of chapter 18.52 RCW.

(7) Implement requirements of chapter 18.52 RCW, including:

(a) Recommend hiring consultants to advise on matters requiring expert advice;

(b) Delegate work responsibilities to subcommittees of the board;

(c) Supervise the administrator-in-training program.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-073, § 246-843-040, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-040, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-040, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 78-02-009 (Order PL 282), § 308-54-040, filed 1/6/78; Order PL 107, § 308-54-040, filed 3/3/71.]

WAC 246-843-050 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-060 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-070 Examination. (1) The board approves subjects of examination for license. The scope, content, form, and character of examination shall be the same for all candidates taking the examination.

(2) The examination consists of the National Association of Boards of Examiners for Long-Term Care Administrators (NAB) national examination.

(3) Subjects for examination may include, but not be limited to: Resident care management, personnel management, financial management, environmental management, and governance and management.

(4) Examinations shall be given at least semiannually at times and places designated by the department.

[Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075. 00-01-072, § 246-843-070, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.100. 91-06-060 (Order 141B), recodified as § 246-843-070, filed 3/1/91, effective 4/1/91; Order PL 107, § 308-54-070, filed 3/3/71.]

WAC 246-843-071 Application. (1) An applicant must pay applicable fees and submit an application for initial credential on forms approved by the secretary. Refer to chapter 246-12 WAC, Part 2.

(2) Applications shall be completed in every respect prior to the examination date.

[Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075. 00-01-072, § 246-843-071, filed 12/13/99, effective 1/13/00.]

WAC 246-843-072 Examination candidate procedures. (1) Failure to follow written or oral instructions relative to the conduct of an examination, including ending time of the examination, is ground for disqualification from the examination.

(2) Disqualified candidates shall be notified of the reasons for disqualification.

(3) Disqualified candidates may request an adjudicative proceeding. Refer to chapter 246-11 WAC.

(4) Disqualified candidates may submit a new application, provided the candidate meets current requirements.

(5) Candidates who fail an examination may update their application, pay the appropriate fee and retake the examination until obtaining a passing score.

[Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075. 00-01-072, § 246-843-072, filed 12/13/99, effective 1/13/00.]

WAC 246-843-073 Examination score. (1) An applicant for a nursing home administrator license is required to pass the national examination with a passing score established by the National Association of Boards of Examiners for Long-Term Care Administrators (NAB).

(2) The candidate shall be notified about their examination score in writing.

(3) The board and the department shall not disclose the candidate's score to anyone other than the candidate, unless requested to do so in writing by the candidate.

(4) The NAB examination is scored using a criterion-referenced method.

(5) A permanent record of the result of examination for each candidate shall be kept by the board.

[Statutory Authority: Chapters 18.52, 34.05 RCW and RCW 18.130.075. 00-01-072, § 246-843-073, filed 12/13/99, effective 1/13/00.]

WAC 246-843-074 Examination review and appeal. (1) Each individual candidate who does not pass the examination may request informal review of failed examination questions. The request must be in writing and postmarked within thirty days of notification of the examination result. The request must state the reasons the candidate feels the result of the examination should be changed. The board will allow review of failed questions only if the potentially revised score would be a passing score. The board will consider the following to be adequate reasons for review of failed examination questions:

(a) A showing of a significant procedural error in the examination process;

(b) Evidence of bias, prejudice, or discrimination in the examination process; or

(c) Other significant errors which result in substantial disadvantage to the candidate.

(2) In addition to the written request the candidate must contact the department to make an appointment to appear personally to review the failed examination questions.

(a) The candidate's incorrect answers will be available during the review. The candidate must identify the specific questions and state the specific reason why the candidate believes his or her answers are correct on a form provided by the department during the review.

(b) The candidate will be allowed one half the time originally allotted for examination to complete the review.

(c) The candidate may not use any resource materials while completing the review.

(d) The candidate may not remove any notes or materials from the site of the review.

(e) The candidate will be notified in writing of the board's decision on the review documentation.

(3) A candidate who is not satisfied with the board's decision may request a formal hearing. Such request must be

postmarked within twenty days of service of the board's decision on the review of the failed examination questions. Refer to chapter 246-11 WAC, Section V.

[Statutory Authority: Chapter 18.52, 34.05 RCW and RCW 18.130.075. 00-01-072, § 246-843-074, filed 12/13/99, effective 1/13/00.]

WAC 246-843-080 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-090 Administrator-in-training. An applicant shall be approved to take an examination for licensure as a nursing home administrator after submitting evidence satisfactory to the board that the applicant meets the following requirements:

(1) Be at least twenty-one years old.

(2) Complete an application for licensure provided by the division of health professions quality assurance, department of health that includes all information and fees requested.Refer to chapter 246-12 WAC, Part 2.

(3) Submit documentation of a minimum of a baccalaureate degree from a recognized institution of higher learning.

(4) Completed an administrator-in-training (AIT) program as described below:

(a) A one thousand five hundred hour AIT program in a nursing home; or

(b) A one thousand hour AIT program for individuals with a minimum of two years experience as a department manager in a state licensed nursing home or hospital with supervisory and budgetary responsibility; or

(c) A five hundred hour AIT program in a nursing home for individuals with a minimum of two years experience in the last five years with supervisory and budgetary responsibility in one of the following positions or their equivalent:

Hospital administrator;

Assistant administrator in a state licensed nursing home or hospital;

Director of a hospital based skilled nursing facility;

Director of a subacute or transitional care unit;

Director of the department of nursing in a state licensed nursing home;

Health care consultant to the long-term care industry;

Director of community-based long-term care service.

(5) The AIT program shall be:

(a) Under the guidance and supervision of a qualified preceptor;

(b) Designed to provide for individual learning experiences and instruction based upon the person's academic background, training, and experience;

(c) Described in a prospectus signed by the preceptor. The prospectus shall include a description of the rotation through departments and is to be submitted to the board for approval before beginning an AIT program. Changes in the AIT program shall be immediately reported in writing to the board. The board may withdraw approval or alter conditions under which approval was given if the board finds that the approved program has not been or is not being followed.

(6) The AIT program prospectus shall include the following components:

(a) A minimum of ninety percent of the required AIT program hours are spent in a rotation through each department of a resident occupied nursing home licensed under chapter 18.51 RCW;

(b) Project assignment including at least one problem-solving assignment to improve the nursing home or nursing home procedures. A description of the project is to be submitted in writing to the board for approval before beginning the AIT program. The description of the project should indicate the definition of the project and method of approach such as data gathering. A project report that includes possible alternatives, conclusions, and final recommendations to improve the facility or procedure is to be submitted to the board for approval at least ten days before the scheduled end date of the AIT program;

(c) Planned reading and writing assignments as designated by the preceptor; and

(d) Other planned learning experiences including learning about other health and social services agencies in the community.

(7) Quarterly written reports to the board shall include a detailed outline of AIT activities during the reporting period. Reports shall be submitted by both the AIT and preceptor.

(8) The program shall provide for a broad range of experience with a close working relationship between preceptor and trainee. Toward that end, no program shall be approved if the facility has a capacity of fewer than 50 beds. Exceptions to this general rule may be granted by the board in unusual circumstances.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-070, § 246-843-090, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.061. 95-07-128, § 246-843-090, filed 3/22/95, effective 4/22/95; 93-23-034, § 246-843-090, filed 11/10/93, effective 12/11/93; 93-13-004 (Order 371B), § 246-843-090, filed 6/3/93, effective 7/4/93. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-090, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-090, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-090, filed 12/29/86; Order PL 260, § 308-54-090, filed 12/10/76; Order PL 164, § 308-54-090, filed 3/27/74, effective 1/1/75; Order PL 107, § 308-54-090, filed 3/3/71.]

WAC 246-843-093 Exemption. No AIT program is required for:

(1) An individual with a minimum of five years experience in the last seven years with extensive supervisory and budgetary responsibility in one of the following positions or their equivalent:

Hospital administrator;

Assistant administrator in a hospital or state licensed nursing home;

Director of a hospital based skilled nursing facility; or

Director of a subacute or transitional care unit.

(2) An individual who worked as a licensed nursing home administrator for a minimum of five years, in the past ten years, and whose license did not expire more than three years prior to application date.

(3) An individual who graduated from a long-term care program in a college approved by the National Association of Boards of Examiners for Long-Term Care Administrators.

(4) An individual who graduated from a degree program in a recognized educational institution that included a one thousand hour practical experience (practicum) in a nursing home. This practical experience shall be structured to allow a student a majority of time in a systematic rotation through

each department of a resident-occupied nursing home. The practical experience shall include planned readings, writing, and project assignments. The practical experience shall include regular contact with the administrator of the facility in which the practical experience was completed.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-070, § 246-843-093, filed 12/13/99, effective 1/13/00.]

WAC 246-843-095 Preceptors for administrator-in-training programs. The preceptor shall submit a statement describing his or her qualifications and an agreement to perform the duties of a preceptor.

(1) Qualifications of preceptor:

(a) The preceptor shall be employed as a licensed nursing home administrator for an accumulation of at least three years.

(b) The preceptor shall be employed full time as the nursing home administrator in the facility where the administrator-in-training is trained.

(c) The preceptor shall have an unrestricted license.

(d) The preceptor shall participate in and successfully complete any preceptor workshop or other training deemed necessary by the board.

(2) Duties of the preceptor:

(a) The preceptor shall take the time necessary and have at least a weekly face-to-face conference with the AIT about the activities of the AIT relative to the training program and the nursing home.

(b) The preceptor shall evaluate the AIT and submit quarterly reports to the board on the progress of the AIT program.

(3) A preceptor shall supervise no more than two AITs at the same time.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-070, § 246-843-095, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-095, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-095, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-095, filed 12/29/86. Statutory Authority: RCW 18.52.100 (2) and (14). 78-02-009 (Order PL 282), § 308-54-095, filed 1/6/78.]

WAC 246-843-100 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-110 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-115 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-120 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-122 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-125 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-130 Continuing education courses. A course provided to satisfy the continuing education requirement of licensed nursing home administrators shall meet the following conditions before being approved by the board:

(1) A request for approval shall be submitted on forms provided by the department at least one day prior to the start of the course;

(2) Such course of study shall consist of a minimum of one hour of organized instruction with the exception of board-approved self-study courses;

(3) Such course of study may include the following general subject areas or their equivalents, and shall be oriented to the nursing home administrator and reasonably related to the administration of nursing homes:

(a) Resident management;

(b) Personnel management;

(c) Financial management;

(d) Environmental management;

(e) Governance and management;

(f) Laws relating to Washington state nursing homes;

(4) Within one hundred eighty days after becoming licensed, nursing home administrators shall attend an approved course on laws relating to nursing homes in Washington. The board will grant retroactive credit to those licensees who obtain the required training as administrators-in-training under WAC 246-843-090. The board will approve state law training courses based on the following criteria.

A minimum of a six-hour program, with formal training objectives, that covers the following subjects: The requirements of chapter 18.52 RCW and essential areas of laws that apply to nursing homes regulated by the department of social and health services under chapter 388-97 WAC:

- Resident services, medical and social;
- Resident rights, including resident decision making, informed consent, advance directives and notices to residents;
- Enforcement;
- Criminal history inquiries;
- Differences between federal and state law.

(5) Such course of study shall issue certificates of attendance or other evidence satisfactory to the board.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-074, § 246-843-130, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-130, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-130, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(11). 88-23-038 (Order PM 791), § 308-54-130, filed 11/9/88. Statutory Authority: RCW 18.52.100(14) and 18.52.110(2). 82-20-092 (Order PL 407), § 308-54-130, filed 10/6/82. Statutory Authority: RCW 18.52.100(14) and 18.52.110. 80-01-057 (Order PL 328), § 308-54-130, filed 12/20/79; Order PL 265, § 308-54-130, filed 3/21/77; Order PL 260, § 308-54-130, filed 12/10/76; Order PL 107, § 308-54-130, filed 3/3/71.]

WAC 246-843-150 Continuing education requirements for renewal of license. (1) Licensed nursing home administrators must demonstrate completion of fifty-four hours of continuing education every three years as provided in chapter 246-12 WAC, Part 7.

(2) Licensees practicing solely out of Washington state are exempt from WAC 246-843-130(1) and must meet all other requirements.

(3) A preceptor for an administrator-in-training program may be granted continuing education credit of one hour per month of the AIT program. Credit as a preceptor is limited to twenty-four hours of continuing education in any three-year period.

[Statutory Authority: Chapter 18.52 and 34.05 RCW. 00-01-074, § 246-843-150, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-843-150, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-150, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-150, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14) and 18.52.110(2). 84-07-051 (Order PL 461), § 308-54-150, filed 3/21/84. Statutory Authority: RCW 18.52.110. 80-04-069 (Order 338), § 308-54-150, filed 3/26/80; Order PL 260, § 308-54-150, filed 12/10/76; Order PL 107, § 308-54-150, filed 3/3/71.]

WAC 246-843-170 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-200 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-205 Standards of conduct. Licensed nursing home administrators shall be on-site full time and in active administrative charge of the licensed nursing home, as licensed under chapter 18.51 RCW, in which they have consented to serve as administrator.

[Statutory Authority: Chapters 18.52 and 34.05 RCW. 00-01-067, § 246-843-205, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 18.52.061. 95-07-128, § 246-843-205, filed 3/22/95, effective 4/22/95; 93-13-004 (Order 371B), § 246-843-205, filed 6/3/93, effective 7/4/93. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-205, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-205, filed 3/1/91, effective 4/1/91; Order PL 164, § 308-54-205, filed 3/27/74.]

WAC 246-843-220 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-225 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-843-230 Endorsement. (1) The board may endorse a nursing home administrator currently licensed in another state if that state requires qualifications substantially equivalent to qualifications required by RCW 18.52.071. To obtain a license by endorsement the applicant must:

(a) Pay applicable application fee;

(b) Submit an application on forms approved by the secretary;

(c) Submit a verification form from all states in which currently or previously licensed that verifies the applicant:

(i) Was or is currently licensed;

(ii) Has not had a nursing home administrator license revoked or suspended; and

(iii) Has passed the national examination;

(d) Submit a certified transcript of baccalaureate or higher degree, mailed to the department directly from the college or university;

(e) Have completed seven clock hours of AIDS education and training. Refer to chapter 246-12 WAC, Part 8.

(2) Applicants who are:

(a) Certified by the American College of Health Care Administrators (ACHCA) may submit verification of ACHCA certification in lieu of college degree transcript.

(b) Currently certified by ACHCA are exempt from taking the current NAB national examination.

(c) Licensed as a nursing home administrator in another state and who have previously passed the national examination are exempt from taking the current NAB national examination.

[Statutory Authority: Chapter 18.52, 34.05 RCW and RCW 18.130.075. 00-01-072, § 246-843-230, filed 12/13/99, effective 1/13/00. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-843-230, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.52.100. 91-24-050 (Order 217B), § 246-843-230, filed 11/27/91, effective 12/28/91; 91-06-060 (Order 141B), recodified as § 246-843-230, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 18.52.100(14). 87-02-008 (Order PM 633), § 308-54-230, filed 12/29/86; Order PL 107, § 308-54-230, filed 3/3/71.]

WAC 246-843-231 Temporary practice permits. (1) A temporary practice permit may be issued for a period up to six months. A temporary practice permit holder is not eligible for a subsequent permit. A temporary practice permit shall be valid only for the specific nursing home for which it is issued and shall terminate upon the permit holder's departure from the nursing home, unless otherwise approved by the board. An applicant shall meet the following criteria:

(a) Submit temporary permit fee and application form approved by the secretary for initial credential;

(b) Submit verification from each state in which currently licensed that applicant is currently licensed and in good standing as a nursing home administrator in that state;

(c) Have a written agreement for consultation with a Washington state licensed nursing home administrator.

(2) Subsection (1)(b) of this section does not apply if the applicant is an administrator of a religious care facility acting under a limited licensed described in RCW 18.52.071.

[Statutory Authority: Chapter 18.52, 34.05 RCW and RCW 18.130.075. 00-01-072, § 246-843-231, filed 12/13/99, effective 1/13/00.]

WAC 246-843-990 Nursing home administrator fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application - Original license	$200.00
Administrator-in-training	100.00
Application - Endorsement	295.00
Temporary permit	190.00
Renewal	295.00
Inactive license renewal	110.00
Late renewal penalty	145.00
Expired license reissuance	147.50
Late renewal penalty - inactive	55.00
Expired inactive license reissuance	55.00
Duplicate license	15.00
Certification of license	15.00

[Statutory Authority: RCW 43.70.250, [43.70.]280 and chapter 18.52 RCW. 99-24-098, § 246-843-990, filed 11/30/99, effective 12/31/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-843-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250 and chapter 18.52 RCW.

94-09-006, § 246-843-990, filed 4/11/94, effective 5/12/94. Statutory Authority: RCW 43.70.250. 93-14-011, § 246-843-990, filed 6/24/93, effective 7/25/93; 91-09-051 (Order 154), § 246-843-990, filed 4/16/91, effective 5/17/91. Statutory Authority: RCW 43.70.040. 91-06-058 (Order 138), recodified as § 246-843-990, filed 3/1/91, effective 4/1/91. Statutory Authority: RCW 43.70.250. 90-04-094 (Order 029), § 308-54-315, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. 87-18-031 (Order PM 667), § 308-54-315, filed 8/27/87. Statutory Authority: 1983 c 168 § 12. 83-17-031 (Order PL 442), § 308-54-315, filed 8/10/83. Formerly WAC 308-54-310.]

Chapter 246-845 WAC
NURSING POOL

WAC

246-845-990 Nursing pool fees and renewal cycle.

WAC 246-845-990 Nursing pool fees and renewal cycle. (1) Registrations must be renewed every year on the date of original issuance as provided in chapter 246-12 WAC, Part 3.

(2) The following nonrefundable fees will be charged:

Title	Fee
Registration application	$100.00
Registration renewal	115.00
Late renewal penalty	57.50
Expired registration reissuance	57.50

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-845-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-845-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250. 93-14-011, § 246-845-990, filed 6/24/93, effective 7/25/93; 91-13-002 (Order 173), § 246-845-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-845-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.250. 90-04-094 (Order 029), § 308-310-010, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. 88-20-076 (Order 784), § 308-310-010, filed 10/5/88.]

Chapter 246-847 WAC
OCCUPATIONAL THERAPISTS

WAC

246-847-990 Occupational therapy fees and renewal cycle.

WAC 246-847-990 Occupational therapy fees and renewal cycle. (1) Licenses must be renewed every two years on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged for occupational therapist:

Title of Fee	Fee
Application and initial license fee	$125.00
License renewal	95.00
Limited permit fee	40.00
Late renewal fee	50.00
Expired license reissuance	50.00
Inactive license	5.00
Expired inactive license reissuance	5.00
Duplicate	15.00
Certification of license	25.00

(3) The following nonrefundable fees will be charged for occupational therapy assistant:

Title of Fee	Fee
Application and initial license fee	125.00
License renewal	70.00
Late renewal fee	50.00
Expired license reissuance	50.00
Inactive license	5.00
Expired inactive license reissuance	5.00
Limited permit fee	40.00
Duplicate	15.00
Certification of license	25.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-847-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-847-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250 and chapters 18.57, 18.57A, 18.22 and 18.59 RCW. 94-22-055, § 246-847-990, filed 11/1/94, effective 1/1/95. Statutory Authority: RCW 43.70.250. 91-13-002 (Order 173), § 246-847-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-05-030 (Order 135), recodified as § 246-847-990, filed 2/12/91, effective 3/15/91. Statutory Authority: RCW 43.24.086. 87-10-028 (Order PM 650), § 308-171-310, filed 5/1/87.]

Chapter 246-849 WAC
OCULARISTS

WAC

246-849-990 Ocularist fees and renewal cycle.

WAC 246-849-990 Ocularist fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application and examination	$125.00
Renewal	225.00
Late renewal penalty	112.50
Expired license reissuance	112.50
Duplicate license	25.00
Certification of license	25.00
Apprentice registration	25.00
Apprentice renewal	25.00
Temporary practice permit	25.00
Retired active license	50.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-849-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-849-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250. 93-14-011, § 246-849-990, filed 6/24/93, effective 7/25/93; 92-02-018 (Order 224), § 246-849-990, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-849-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.24.086. 87-18-031 (Order PM 667), § 308-55-025, filed 8/27/87. Statutory Authority: 1983 c 168 § 12. 83-17-031 (Order PL 442), § 308-55-025, filed 8/10/83. Formerly WAC 308-55-010.]

Chapter 246-850 WAC
ORTHOTICS AND PROSTHETICS RULES

WAC

246-850-060 Examination requirements.

WAC 246-850-060 Examination requirements. (1) An applicant for licensure as an orthotist must successfully complete the following examinations:

(a) The orthotic written multiple choice examination prepared and administered by the American Board for Certification in Orthotics and Prosthetics, Inc., administered after July 1, 1991. The passing score is determined by utilizing a criterion-referenced cut score methodology.

(b) The orthotic written simulation examination prepared and administered by the American Board for Certification in Orthotics and Prosthetics, Inc., administered after July 1, 1991. The passing score is determined by utilizing a criterion-referenced cut score methodology.

(2) An applicant for licensure as a prosthetist must successfully complete the following examinations:

(a) The prosthetic written multiple choice examination prepared and administered by the American Board for Certification in Orthotics and Prosthetics, Inc., administered after July 1, 1991. The passing score is determined by utilizing a criterion-referenced cut score methodology.

(b) The prosthetic written simulation examination prepared and administered by the American Board for Certification in Orthotics and Prosthetics, Inc., administered after July 1, 1991. The passing score is determined by utilizing a criterion-referenced cut score methodology.

[Statutory Authority: RCW 18.200.050(8). 99-07-122, § 246-850-060, filed 3/24/99, effective 4/24/99.]

Chapter 246-851 WAC
OPTOMETRISTS

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-851-270 Retention of minimum contact lens records. [Statutory Authority: RCW 18.54.070. 92-20-048 (Order 308B), § 246-851-270, filed 9/30/92, effective 10/31/92; 91-06-025 (Order 119B), recodified as § 246-851-270, filed 2/26/91, effective 3/29/91; Order PL 256, § 308-53-210, filed 9/13/76.] Repealed by 99-16-047, filed 7/30/99, effective 8/30/99. Statutory Authority: RCW 18.54.070(2).

246-851-340 Transmittal of patient information and records. [Statutory Authority: RCW 18.54.070. 91-06-025 (Order 119B), recodified as § 246-851-340, filed 2/26/91, effective 3/29/91; Order PL-271, § 308-53-250, filed 7/25/77.] Repealed by 99-16-047, filed 7/30/99, effective 8/30/99. Statutory Authority: RCW 18.54.070(2).

246-851-360 Required identification on prescriptions. [Statutory Authority: RCW 18.54.070. 93-18-092 (Order 393B), § 246-851-360, filed 9/1/93, effective 10/2/93; 92-20-048 (Order 308B), § 246-851-360, filed 9/30/92, effective 10/31/92; 91-06-025 (Order 119B), recodified as § 246-851-360, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 18.54.070(5). 86-13-008 (Order PM 598), § 308-53-265, filed 6/5/86.] Repealed by 99-16-047, filed 7/30/99, effective 8/30/99. Statutory Authority: RCW 18.54.070(2).

WAC 246-851-270 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-851-340 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-851-360 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-851-990 Optometry fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application	$125.00
Out-of-state seminar	100.00
License renewal	100.00
Late renewal penalty	50.00
Expired license reissuance	50.00
Duplicate license	15.00
Certification of license	25.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-851-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-851-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250. 96-20-088, § 246-851-990, filed 10/1/96, effective 11/1/96; 95-14-111, § 246-851-990, filed 6/30/95, effective 7/31/95; 92-23-006 (Order 311), § 246-851-990, filed 11/5/92, effective 12/6/92; 92-06-029 (Order 246), § 246-851-990, filed 2/26/92, effective 3/28/92. Statutory Authority: RCW 43.70.250. 91-13-002 (Order 173), § 246-851-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-06-028 (Order 137), recodified as § 246-851-990, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.24.086. 87-10-028 (Order PM 650), § 308-53-020, filed 5/1/87. Statutory Authority: 1983 c 168 § 12. 83-17-031 (Order PL 442), § 308-53-020, filed 8/10/83. Formerly WAC 308-53-310.]

Chapter 246-853 WAC
OSTEOPATHIC PHYSICIANS AND SURGEONS

WAC

WAC 246-853-990 Osteopathic fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2, except postgraduate training limited licenses.

(2) Postgraduate training limited licenses must be renewed every year to correspond to program dates.

(3) The following nonrefundable fees will be charged for osteopath:

Title of Fee	Fee
Active renewal	$475.00
Active late renewal penalty	237.50
Certification of license	50.00

(4) The following nonrefundable fees will be charged for osteopathic physician:

Endorsement application	650.00
Active license renewal	475.00
Active late renewal penalty	237.50
Active expired license reissuance	237.50
Inactive license renewal	350.00
Expired inactive license reissuance	175.00
Inactive late renewal penalty	175.00
Endorsement/state exam application	750.00
Reexam	100.00
Certification of license	50.00
Limited license application	300.00

Title of Fee	Fee
Limited license renewal	250.00
Temporary permit application	70.00
Duplicate certificate	20.00
Substance abuse monitoring surcharge	25.00

(5) The following nonrefundable fees will be charged for osteopathic physician assistant:

Application	250.00
Renewal	200.00
Late renewal penalty	100.00
Expired license reissuance	100.00
Certification of license	30.00
Practice plan	70.00
Interim permit	167.00
License after exam	83.00
Duplicate certificate	20.00
Substance abuse monitoring surcharge	25.00

[Statutory Authority: RCW 43.70.250. 99-24-063, § 246-853-990, filed 11/29/99, effective 12/30/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-853-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250 and chapters 18.57, 18.57A, 18.22 and 18.59 RCW. 94-22-055, § 246-853-990, filed 11/1/94, effective 1/1/95. Statutory Authority: RCW 43.70.250. 92-14-054 (Order 281), § 246-853-990, filed 6/25/92, effective 7/26/92; 91-21-034 (Order 200), § 246-853-990, filed 10/10/91, effective 11/10/91; 91-13-002 (Order 173), § 246-853-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-853-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.250. 90-04-094 (Order 029), § 308-138-080, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. 87-10-028 (Order PM 650), § 308-138-080, filed 5/1/87. Statutory Authority: 1983 c 168 § 12. 83-17-031 (Order PL 442), § 308-138-080, filed 8/10/83. Formerly WAC 308-138-060.]

Chapter 246-887 WAC

PHARMACY—REGULATIONS IMPLEMENTING THE UNIFORM CONTROLLED SUBSTANCES ACT

WAC

WAC 246-887-140 Schedule II. The board finds that the following substances have a high potential for abuse and have currently accepted medical use in treatment in the United States, or currently accepted medical use with severe restrictions and that the abuse of the following substances may lead to severe psychic or psychological dependence. The board, therefore, places each of the following substances in Schedule II.

(a) The drugs and other substances listed in this section, by whatever official name, common or usual name, chemical name, or brand name designated, are included in Schedule II.

(b) Substances. (Vegetable origin or chemical synthesis.) Unless specifically excepted, any of the following substances, except those listed in other schedules, whether produced directly or indirectly by extraction from substances of vegetable origin, or independently by means of chemical synthesis, or by combination of extraction and chemical synthesis:

(1) Opium and opiate, and any salt, compound, derivative, or preparation of opium or opiate, excluding apomorphine, dextrorphan, nalbuphine, naloxone, and naltrexone, and their respective salts, but including the following:

(i) Raw opium;
(ii) Opium extracts;
(iii) Opium fluid;
(iv) Powdered opium;
(v) Granulated opium;
(vi) Tincture of opium;
(vii) Codeine;
(viii) Ethylmorphine;
(ix) Etorphine hydrochloride;
(x) Hydrocodone;
(xi) Hydromorphone;
(xii) Metopon;
(xiii) Morphine;
(xiv) Oxycodone;
(xv) Oxymorphone; and
(xvi) Thebaine.

(2) Any salt, compound, isomer, derivative, or preparation thereof which is chemically equivalent or identical with any of the substances referred to in paragraph (b)(1) of this section, but not including the isoquinoline alkaloids of opium.

(3) Opium poppy and poppy straw.

(4) Coca leaves and any salt, compound, derivative, or preparation of coca leaves, and any salt, compound, derivative, or preparation thereof which is chemically equivalent or identical with any of these substances, but not including decocainized coca leaves or extractions which do not contain cocaine or ecgonine.

(5) Methylbenzoylecgonine (cocaine—its salts, optical isomers, and salts of optical isomers).

(6) Concentrate of poppy straw (The crude extract of poppy straw in either liquid, solid, or powder form which contains the phenanthrine alkaloids of the opium poppy.)

(c) Opiates. Unless specifically excepted or unless in another schedule any of the following opiates, including its isomers, esters, ethers, salts, and salts of isomers, esters, and ethers whenever the existence of such isomers, esters, ethers, and salts is possible within the specific chemical designation, dextrorphan and levopropoxyphene excepted:

(1) Alfentanil;
(2) Alphaprodine;
(3) Anileridine;
(4) Bezitramide;
(5) Bulk dextropropoxyphene (nondosage forms);
(6) Carfentanil;
(7) Dihydrocodeine;
(8) Diphenoxylate;
(9) Fentanyl;
(10) Isomethadone;
(11) Levo-alphacetylmethadol - also known as levo-alpha-acetylmethadol, levomethadyl acetate or LAAM;
(12) Levomethorphan;
(13) Levorphanol;
(14) Metazocine;
(15) Methadone;

(16) Methadone—Intermediate, 4-cyano-2-dimethylamino-4,4-diphenyl butane;

(17) Moramide—Intermediate, 2-methyl-3-morpholino-1,1-diphenylpropane-carboxylic acid;

(18) Pethidine (meperidine);

(19) Pethidine—Intermediate—A, 4-cyano-1-methyl-4-phenylpiperidine;

(20) Pethidine—Intermediate—B, ethyl-4-phenylpiperidine-4-carboxylate;

(21) Pethidine—Intermediate—C, 1-methyl-4-phenylpiperidine-4-carboxylic acid;

(22) Phenazocine;

(23) Piminodine;

(24) Racemethorphan;

(25) Remifentanil;

(26) Racemorphan;

(27) Sufentanil.

(d) Stimulants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system:

(1) Amphetamine, its salts, optical isomers, and salts of its optical isomers;

(2) Methamphetamine, its salts, optical isomers, and salts of optical isomers;

(3) Phenmetrazine and its salts;

(4) Methylphenidate.

(e) Depressants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system, including its salts, isomers, and salts of isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation:

(1) Amobarbital;

(2) Glutethimide;

(3) Pentobarbital;

(4) Phencyclidine;

(5) Secobarbital.

(f) Immediate precursors. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances:

(1) Immediate precursor to amphetamine and methamphetamine:

(2) Phenylacetone: Some trade or other names phenyl-2-propanone, P2P, benzyl methyl ketone, methyl benzyl ketone.

(3) Immediate precursors to phencyclidine (PCP):

(i) 1-phenylcyclohexylamine;

(ii) 1-piperidinocyclohexanecarbonitrile (PCC).

(g) Hallucinogenic substances.

(1) Nabilone. (Another name for nabilone: (±)-trans-3-(1,1-dimethylheptyl)-6,6a,7,8,10,10a-hexahydro-1-hydroxy-6,6-dimethyl-9H-dibenzo[b,d]pyran-9-one.)

[00-01-075, § 246-887-140, filed 12/13/99. 97-21-054, § 246-887-140, filed 10/13/97, effective 11/13/97. Statutory Authority: RCW 18.65.005 and 18.64.005. 94-07-105, § 246-887-140, filed 3/18/94, effective 3/18/94. Statutory Authority: RCW 18.64.005. 92-04-029 (Order 239B), § 246-887-140, filed 1/28/92, effective 2/29/92. Statutory Authority: RCW 18.64.005 and chapter 18.64A RCW. 91-18-057 (Order 191B), recodified as § 246-887-140, filed 8/30/91, effective 9/30/91. Statutory Authority: RCW 69.50.201. 89-17-023 (Order 226), § 360-36-420, filed 8/8/89, effective 9/8/89; 86-16-057 (Order 200), § 360-36-420, filed 8/1/86. Statutory Authority: RCW 69.50.201, 69.50.203, 69.50.205, 69.50.207, 69.50.209 and 69.50.211. 84-22-062 (Order 190), § 360-36-420, filed 11/7/84.]

Reviser's note: The brackets and enclosed material in the text of the above section occurred in the copy filed by the agency.

Reviser's note: Under RCW 69.50.201 (2)(e), the above section was **not** adopted under the Administrative Procedure Act, chapter 34.05 RCW, but was published in the Washington State Register and codified into the Washington Administrative Code exactly as shown by the agency filing with history notes added by the code reviser's office.

WAC 246-887-160 Schedule III. The board finds that the following substances have a potential for abuse less than the substances listed in Schedules I and II, and have currently accepted medical use in treatment in the United States and that the abuse of the substances may lead to moderate or low physical dependency or high psychological dependency. The board, therefore, places each of the following substances in Schedule III.

(a) The drugs and other substances listed in this section, by whatever official name, common or usual name, chemical name, or brand name designated, are included in Schedule III.

(b) Stimulants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a stimulant effect on the central nervous system, including its salts, isomers (whether optical, position, or geometric), and salts of such isomers whenever the existence of such salts, isomers, and salts of isomers is possible within the specific chemical designation:

(1) Those compounds, mixtures, or preparations in dosage unit form containing any stimulant substances listed in Schedule II which compounds, mixtures, or preparations are referred to as excepted compounds in Schedule III as published in 21 CFR 1308.13 (b)(1) as of April 1, 1984, and any other drug of the quantitative composition shown in that list for those drugs or which is the same except that it contains a lesser quantity of controlled substances;

(2) Benzphetamine;

(3) Chlorphentermine;

(4) Clortermine;

(5) Phendimetrazine.

(c) Depressants. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation which contains any quantity of the following substances having a depressant effect on the central nervous system:

(1) Any compound, mixture, or preparation containing:

(i) Amobarbital;

(ii) Secobarbital;

(iii) Pentobarbital;

or any salt thereof and one or more other active medicinal ingredients which are not listed in any schedule;

(2) Any suppository dosage form containing:

(i) Amobarbital;

(ii) Secobarbital;

(iii) Pentobarbital;

or any salt of any of these drugs and approved by the Food and Drug Administration for marketing only as a suppository;

(3) Any substance which contains any quantity of a derivative of barbituric acid, or any salt of a derivative of barbituric acid;

(4) Chlorhexadol;

(5) Lysergic acid;

(6) Lysergic acid amide;

(7) Methyprylon;

(8) Sulfondiethylmethane;

(9) Sulfonethylmethane;

(10) Sulfonmethane;

(11) Tiletamine and zolazepam or any salt thereof—some trade or other names for a tiletamine-zolazepam combination product: Telazol some trade or other names for tiletamine: 2-(ethylamino)-2-(2-thienyl) cyclohexanone—some trade or other names for zolazepam: 4-(2-fluorophenyl)-6,8-dihydro-1,3,8-trimethylpyrazolo-[3,4-e] [1,4] diazepin 7 (1H)-one flupyrazapon.

(d) Nalorphine.

(e) Anabolic steroids. The term "anabolic steroid" means any drug or hormonal substance, chemically and pharmacologically related to testosterone (other than estrogens, progestins, and corticosteroids) that promotes muscle growth, and includes:

(1) Boldenone;

(2) Chlorotestosterone;

(3) Clostebol;

(4) Dehydrochlormethyltestosterone;

(5) Dehydroepiandrosterone;

(6) Dihydrotestosterone;

(7) Drostanolone;

(8) Ethylestrenol;

(9) Fluoxymesterone;

(10) Formebulone (Formebolone);

(11) Mesterolone;

(12) Methandienone;

(13) Methandranone;

(14) Methandriol;

(15) Methandrostenolone;

(16) Methenolone;

(17) Methyltestosterone;

(18) Mibolerone;

(19) Nandrolone;

(20) Norethandrolone;

(21) Oxandrolone;

(22) Oxymesterone;

(23) Oxymetholone;

(24) Stanolone;

(25) Stanozolol;

(26) Testolactone;

(27) Testosterone;

(28) Trenbolone; and

(29) Any salt, ester, or isomer of a drug or substance described or listed in this paragraph, if that salt, ester, or isomer promotes muscle growth. Except such term does not include an anabolic steroid which is expressly intended for administration through implants to cattle or other nonhuman species and which has been approved by the secretary of health and human services for such administration. If any person prescribes, dispenses, or distributes such steroid for human use such person shall be considered to have prescribed, dispensed, or distributed an anabolic steroid within the meaning of this paragraph.

The following are implants or pellets which are exempt:

Ingredients	Trade Name	Company
Testosterone Propionate, Oestradiol Benzoate	F-TO	Animal Health Div. Upjohn International Kalamazoo, MI
Trenbolone Acetate	Finaplix-H	Hoechst-Roussel Agri-Vet Co., Somerville, NJ
Trenbolone Acetate	Finaplix-S	Hoechst-Roussel Agri-Vet Co., Somerville, NJ
Testosterone Propionate, Estradiol Benzoate	Heifer-oid	Anchor Division Boehringer Ingelheim St. Joseph, MO
Testosterone Propionate, Estradiol Benzoate	Heifer-oid	Bio-Ceutic Division Boehringer Ingelheim St. Joseph, MO
Testosterone Propionate, Estradiol Benzoate	Heifer-oid	Ivy Laboratories, Inc. Overland Park, KS
Testosterone Propionate, Estradiol Benzoate	Implus	The Upjohn Co. Kalamazoo, MI
Trenbolone Acetate, Estradiol	Revalor-s	Hoechst-Roussel Agri-Vet Co., Somerville, NJ
Testosterone Propionate, Estradiol Benzoate	Synovex H	Syntex Laboratories Palo Alto, CA

(f) The following anabolic steroid products containing compounds, mixtures, or preparations are exempt from the recordkeeping, refill restrictions, and other Controlled Substances Act requirements:

Ingredients	Trade Name	Company
Testosterone enanthate 90 mg/ml Estradiol valerate 4 mg/ml	Androgyn L.A.	Forest Pharmaceuticals St. Louis, MO
Testosterone enanthate 90 mg/ml Estradiol valerate 4 mg/ml	Andro-Estro 90-4	Rugby Laboratories Rockville Centre, NY
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	depANDROGYN	Forest Pharmaceuticals St. Louis, MO
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	DEPO-T.E.	Quality Research Laboratories Carmel, IN
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	depTESTROGEN	Martica Pharmaceuticals Phoenix, AZ
Testosterone enanthate 90 mg/ml Estradiol valerate 4 mg/ml	Duomone	Wintec Pharmaceutical Pacific, MO
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	DURATESTRIN	W.E. Hauck Alpharetta, GA
Testosterone cypionate 50 mg/ml Esterified cypionate 2 mg/ml	DUO-SPAN II	Primedics laboratories Gardena, CA

Ingredients	Trade Name	Company
Esterified estrogens 1.25 mg. Methyltestosterone 2.5 mg.	Estratest	Solvay Pharmaceuticals Marietta, GA
Esterified estrogens 0.525 mg. Methyltestosterone 1.25 mg.	Estratest HS	Solvay Pharmaceuticals Marietta, GA
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	PAN ESTRA TEST	Pan American Labs Covington, LA
Conjugated estrogens 1.25 mg. Methyltestosterone 10 mg.	Premarin with Methyltestosterone	Ayerst Labs, Inc. New York, NY
Conjugated estrogens 0.625 mg. Methyltestosterone 5 mg.	Premarin with Methyltestosterone	Ayerst Labs, Inc. New York, NY
Testosterone propionate 25 mg Estradiol benzoate 2.5 mg	Synovex H Pellets in process	Syntex Animal Health Palo Alto, CA
Testosterone propionate 10 parts Estradiol benzoate 1 part	Synovex H Pellets in process, granulation	Syntex Animal Health Palo Alto, CA
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	Testagen	Clint Pharmaceutical Nashville, TN
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	TEST-ESTRO Cypionates	Rugby Laboratories Rockville Centre, NY
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	Testosterone Cyp 50 Estradiol Cyp 2	I.D.E.-Interstate Amityville, NY
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	Testosterone Cypionate-Estradiol Cypionate Injection	Best Generics No. Miami Beach, FL
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	Testosterone Cypionate-Estradiol Cypionate Injection	Goldline Labs Ft. Lauderdale FL
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	Testosterone Cypionate-Estradiol Cypionate Injection	Schein Pharmaceuticals Port Washington, NY
Testosterone cypionate 50 mg/ml Estradiol cypionate 2 mg/ml	Testosterone Cypionate-Estradiol Cypionate Injection	Steris Labs, Inc. Phoenix, AZ
Testosterone enanthate 90 mg/ml Estradiol valerate 4 mg/ml	Testosterone Enanthate-Estradiol Valerate Injection	Goldline Labs Ft. Lauderdale FL
Testosterone enanthate 90 mg/ml Estradiol valerate 4 mg/ml	Testosterone Enanthate-Estradiol Valerate Injection	Schein Pharmaceuticals Port Washington, NY
Testosterone enanthate 90 mg/ml Estradiol valerate 4 mg/ml	Testosterone Enanthate-Estradiol Valerate Injection	Steris Labs, Inc. Phoenix, AZ

(g) Narcotic drugs. Unless specifically excepted or unless listed in another schedule, any material, compound, mixture, or preparation containing limited quantities of any of the following narcotic drugs, or any salts thereof calculated as the free anhydrous base or alkaloid, in limited quantities as set forth in paragraph (e) of this section:

(1) Not more than 1.8 grams of codeine per 100 milliliters or not more than 90 milligrams per dosage unit, with an equal or greater quantity of an isoquinoline alkaloid of opium;

(2) Not more than 1.8 grams of codeine per 100 milliliters or not more than 90 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(3) Not more than 300 milligrams of dihydrocodeinone per 100 milliliters or not more than 15 milligrams per dosage unit, with a fourfold or greater quantity of an isoquinoline alkaloid of opium;

(4) Not more than 300 milligrams of dihydrocodeinone per 100 milliliters or not more than 15 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(5) Not more than 1.8 grams of dihydrocodeine per 100 milliliters or not more than 90 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(6) Not more than 300 milligrams of ethylmorphine per 100 milliliters or not more than 15 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(7) Not more than 500 milligrams of opium per 100 milliliters or per 100 grams, or not more than 25 milligrams per dosage unit, with one or more active, nonnarcotic ingredients in recognized therapeutic amounts;

(8) Not more than 50 milligrams of morphine per 100 milliliters or per 100 grams with one or more active, nonnarcotic ingredients in recognized therapeutic amounts.

(h) Hallucinogenic substances.

(1) Dronabinol (synthetic) in sesame oil and encapsulated in a soft gelatin capsule in a United States Food and Drug Administration approved product. (Some other names for dronabinol [6aR-trans]-6a,7,8, 10a-tetrahydro-6,6,9-trimethyl-3-pentyl-6H-dibenzo[b,d] pyran-i-ol, or (-)-delta-9-(trans)-tetrahydrocannabinol.)

[00-01-075, § 246-887-160, filed 12/13/99. Statutory Authority: RCW 18.64.005. 96-01-032, § 246-887-160, filed 12/12/95, effective 1/12/96; 94-08-098, § 246-887-160, filed 4/6/94, effective 5/7/94. Statutory Authority: RCW 18.64.005. 93-14-038 (Order 376B), § 246-887-160, filed 6/29/93, effective 7/30/93; 93-06-093 (Order 343B), § 246-887-160, filed 3/3/93, effective 4/3/93; 92-04-029 (Order 239B), § 246-887-160, filed 1/28/92, effective 2/29/92. Statutory Authority: RCW 18.64.005 and chapter 18.64A RCW. 91-18-057 (Order 191B), recodified as § 246-887-160, filed 8/30/91, effective 9/30/91. Statutory Authority: RCW 69.50.201. 89-17-023 (Order 226), § 360-36-430, filed 8/8/89, effective 9/8/89. Statutory Authority: RCW 69.50.201, 69.50.203, 69.50.205, 69.50.207, 69.50.209 and 69.50.211. 84-22-062 (Order 190), § 360-36-430, filed 11/7/84.]

Reviser's note: The brackets and enclosed material in the text of the above section occurred in the copy filed by the agency.

Reviser's note: Under RCW 34.05.030 (1)(c), as amended by section 103, chapter 288, Laws of 1988, the above section was **not** adopted under the Administrative Procedure Act, chapter 34.05 RCW, but was published in the Washington State Register and codified into the Washington Administrative Code exactly as shown by the agency filing with history notes added by the code reviser's office.

Chapter 246-888 WAC
MEDICATION ASSISTANCE

WAC

WAC 246-888-010 Purpose. The legislature recognizes that individuals residing in community-based settings or their own homes, may need assistance self-administering their medications, legend drugs and controlled substances, due to physical or mental limitations. The following rules provide guidance to the individual/resident and caregiver on medication assistance and administration.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-010, filed 12/17/99, effective 1/17/00.]

WAC 246-888-020 What is self-administration with assistance and how is it different from independent self-administration or medication administration? Self-administration with assistance means assistance rendered by a nonpractitioner to an individual residing in a community-based setting or his/her own home. It includes reminding or coaching the individual to take their medication, handing the medication container to the individual, opening the medication container, using an enabler, or placing the medication in the hand of the individual/resident. The individual/resident must be able to put the medication into his or her mouth or apply or instill the medication. The individual/resident does not necessarily need to state the name of the medication, intended effects, side effects, or other details, but must be aware that he/she is receiving medications. The individual/resident retains the right to refuse medication. Assistance with the administration of intravenous and injectable medications are specifically excluded. Self-administration with assistance shall occur immediately prior to the ingestion or application of a medication.

Independent self-administration occurs when an individual/resident is independently able to directly apply a legend drug or controlled substance by ingestion, inhalation, injection or other means. In licensed boarding homes, self-administration may include situations in which an individual cannot physically self-administer medications but can accurately direct others per WAC 246-316-300. These regulations do not limit the rights of people with functional disabilities to self direct care according to chapter 74.39 RCW.

If an individual/resident is not able to physically ingest or apply a medication independently or with assistance, then the medication must be administered to the individual/resident by a person legally authorized to do so (e.g., physician, nurse, pharmacist). All laws and regulations applicable to medication administration apply. If an individual/resident cannot safely self-administer medication or self-administer with assistance and/or cannot indicate an awareness that he or she is taking a medication, then the medication must be administered to the individual/resident by a person legally authorized to do so.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-020, filed 12/17/99, effective 1/17/00.]

WAC 246-888-030 How is self-administration with assistance initiated in a community based setting? An individual/resident or his or her representative from a community based setting may request self-administration with assistance. The practitioner consults with the individual or his or her representative and the facility in making the decision. A practitioner considers such factors as the physical and mental limitations of the individual and the setting or environment in which the individual resides, for purposes of determining whether or not the individual can safely self-administer with assistance. Practitioners include: A physician, osteopathic physician, podiatric physician, dentist, licensed practical nurse, registered nurse, advanced registered nurse practitioner, and a pharmacist. Refer to chapter 69.41 RCW for a complete listing of authorized practitioners.

No additional separate assessment or documentation of the needs of the individual/resident are required in order to initiate self-administration with assistance. It is recommended that providers document their decision making process in the health record of the individual or resident health record.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-030, filed 12/17/99, effective 1/17/00.]

WAC 246-888-040 What if there is a change in the individual's situation? If there is a change in the health status of the individual/resident, medications, physical or mental limitations, or environment, the practitioner may need to be re-involved in the process.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-040, filed 12/17/99, effective 1/17/00.]

WAC 246-888-050 What is an enabler? Enablers are physical devices used to facilitate an individual's/resident's self-administration of a medication. Physical devices include, but are not limited to, a medicine cup, glass, cup, spoon, bowl, prefilled syringes, syringes used to measure liquids, specially adapted table surface, straw, piece of cloth or fabric.

An individual's hand may also be an enabler. The practice of "hand-over-hand" administration is not allowed. Medication administration with assistance includes steadying or guiding an individual's hand while he or she applies or instills medications such as ointments, eye, ear and nasal preparations.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-050, filed 12/17/99, effective 1/17/00.]

WAC 246-888-060 How can medications be altered to assist with self-administration? Alteration of a medication for self-administration with assistance includes, but is not limited to, crushing tablets, cutting tablets in half, opening capsules, mixing powdered medications with foods or liquids, or mixing tablets or capsules with foods or liquids. Individuals/residents must be aware that the medication is being altered or added to their food.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-060, filed 12/17/99, effective 1/17/00.]

WAC 246-888-070 Can all medications be altered to facilitate self-administration? A pharmacist or other practitioner practicing within their scope of practice must determine that it is safe to alter a medication. If the medication is altered, documentation of the appropriateness of the alteration must be on the prescription container, or in the individual's/resident's record.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-070, filed 12/17/99, effective 1/17/00.]

WAC 246-888-080 What other type of assistance can a nonpractitioner provide? A nonpractitioner can transfer a medication from one container to another for the purpose of an individual dose. Examples include: Pouring a liquid medication from the medication container to a calibrated spoon or medication cup.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-080, filed 12/17/99, effective 1/17/00.]

WAC 246-888-090 Is oxygen covered under this rule? Under state law, oxygen is not a medication and is not covered under this rule. While oxygen is not considered a medication under state law, oxygen does require an order/prescription from a practitioner.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-090, filed 12/17/99, effective 1/17/00.]

WAC 246-888-100 If a individual/resident is able to administer his or her own oral medication through a gastrostomy or "g-tube," can a nonpractitioner provide assistance as outlined in these rules? If the prescription is written as an oral medication via "g-tube," and if a practitioner has determined that the medication can be altered, if necessary, for use via "g-tube," the rules as outlined for self-administration with assistance would also apply.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-100, filed 12/17/99, effective 1/17/00.]

WAC 246-888-110 Are there any other requirements I need to be aware of? You should be familiar with the rules specifically regulating your residential setting. The department of social and health services has adopted rules relating to medication services in boarding homes and adult family homes.

[Statutory Authority: RCW 18.64.005 and 69.41.085. 00-01-123, § 246-888-110, filed 12/17/99, effective 1/17/00.]

Chapter 246-915 WAC
PHYSICAL THERAPISTS

WAC

246-915-990 Physical therapy fees and renewal cycle.

WAC 246-915-990 Physical therapy fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application	$100.00
License renewal	65.00
Late renewal penalty	50.00
Expired license reissuance	50.00
Duplicate license	15.00
Certification	25.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-915-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-915-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250. 91-13-002 (Order 173), § 246-915-990, filed 6/6/91, effective 7/7/91; 91-05-004 (Order 128), § 246-915-990, filed 2/7/91, effective 3/10/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-915-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.24.086. 87-10-028 (Order PM 650), § 308-42-075, filed 5/1/87. Statutory Authority: 1983 c 168 § 12. 83-17-031 (Order PL 442), § 308-42-075, filed 8/10/83. Formerly WAC 308-42-100.]

Chapter 246-918 WAC
PHYSICIAN ASSISTANTS—MEDICAL QUALITY ASSURANCE COMMISSION

WAC

246-918-171 Renewal and continuing medical education cycle revision.

246-918-990 Fees and renewal cycle.

WAC 246-918-171 Renewal and continuing medical education cycle revision. Beginning January 1, 2000, the one-year renewal cycle for physician assistants will transition to a two-year cycle and two-year continuing medical education cycle. The renewal and continuing medical education will be as follows:

(1) Effective January 1, 2000, any physician assistant whose birth year is an even number will renew their credential for twenty-four months and every two years thereafter. Those physician assistants must obtain one hundred hours of continuing medical education within the twenty-four months following the date their first two-year license is issued and every two years thereafter.

(2) Effective January 1, 2001, any physician assistant whose birth year is an odd number will renew their credential for twenty-four months and every two years thereafter. Those physician assistants must obtain one hundred hours of continuing medical education within the twenty-four months following the date their first two-year license is issued and every two years thereafter.

[Statutory Authority: RCW 18.71.017, 18.130.050(1), 18.130.040(4), 18.130.050(12) and 18.130.340. 99-23-090, § 246-918-171, filed 11/16/99, effective 1/1/00.]

WAC 246-918-990 Fees and renewal cycle. (1) Licenses must be renewed every two years on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Physician assistants, certified physician assistants, physician assistant-surgical assistants, acupuncture physician assistants:	
Application	$50.00
One-year renewal	70.00
Two-year renewal	70.00
Substance abuse monitoring surcharge (assessed at $25.00 each year as stipulated in RCW 18.71A.020(3))	50.00
Expired license reissuance	35.00
Duplicate license	15.00

[Statutory Authority: RCW 18.71.017, 18.130.050(1), 18.130.040(4), 18.130.050(12) and 18.130.340. 99-23-090, § 246-918-990, filed 11/16/99, effective 1/1/00. Statutory Authority: RCW 18.71.017 and 18.71A.020(3). 99-13-087, § 246-918-990, filed 6/14/99, effective 7/15/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-918-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.71.017 and 18.71A.020. 96-03-073, § 246-918-990, filed 1/17/96, effective 2/17/96. Statutory Authority: RCW 43.70.040. 91-06-027 (Order 131), § 246-918-990, filed 2/26/91, effective 3/29/91.]

Chapter 246-919 WAC
MEDICAL QUALITY ASSURANCE COMMISSION

WAC

WAC 246-919-421 Renewal and continuing medical education cycle revision. Beginning January 1, 2000, the one-year renewal cycle for physicians will transition to a two-year cycle and a four-year continuing medical education reporting cycle. The renewal and continuing medical education reporting cycle will be as follows:

(1) Effective January 1, 2000, any physician whose birth year is an even number will renew their credential for twenty-four months and every two years thereafter. Those physicians must obtain two hundred hours of continuing medical education within the next forty-eight months from the date of the initial two-year license and every four years thereafter.

(2) Effective January 1, 2001, any physician whose birth year is an odd number will renew their credential for twenty-four months and every two years thereafter. Those physicians must obtain two hundred hours of continuing medical education within the next forty-eight months from the date of the initial two-year license and every four years thereafter.

(3) Effective January 1, 2000, in order to attain full license status, individuals with a post-graduate limited license will pay the fee difference between the limited license application and the full license application. This license will expire on their second birthdate after issuance and every two years thereafter.

(4) Effective January 1, 2000, those physicians on a retired active status will remain on the annual renewal cycle and a four-year continuing medical education reporting cycle. Those retired active physicians must report two hundred hours of continuing medical education within the next forty-eight months and every four years thereafter.

[Statutory Authority: RCW 18.71.017, 18.130.050(1), 18.130.040(4), 18.130.050(12) and 18.130.340. 99-23-090, § 246-919-421, filed 11/16/99, effective 1/1/00.]

WAC 246-919-430 General requirements. (1) Licensed physicians must complete two hundred hours of continuing education every four years as required in chapter 246-12 WAC, Part 7.

(2) In lieu of the two hundred hours of continuing medical education, the commission will accept a current Physician's Recognition Award from the American Medical Association or a current certificate from any specialty board approved by the American Board of Medical Specialties (ABMS) which is considered by the specialty board as equivalent to the two hundred hours of continuing medical education required under WAC 246-919-430(1). The commission will also accept certification or recertification by a specialty board as the equivalent of two hundred hours of continuing medical education. A list of the approved specialty boards are designated in the *1995 Official American Boards of Medical Specialty Director of Board Certified Medical Specialist*and will be maintained by the commission. The list shall be made available upon request. The certification or recertification must be obtained in the four years preceding application for renewal.

[Statutory Authority: RCW 18.71.017, 18.130.050(1), 18.130.040(4), 18.130.050(12) and 18.130.340. 99-23-090, § 246-919-430, filed 11/16/99, effective 1/1/00. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-919-430, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.71.017 and 18.71A.020. 96-03-073, § 246-919-430, filed 1/17/96, effective 2/17/96.]

WAC 246-919-450 Categories of creditable continuing medical education activities. The following are categories of creditable continuing medical education activities approved by the commission:

Category I	Continuing medical education activities with accredited sponsorship
Category II	Continuing medical education activities with nonaccredited sponsorship (maximum of eighty hours)
Category III	Teaching of physicians or other allied health professionals (maximum of eighty hours)
Category IV	Books, papers, publications, exhibits (maximum of eighty hours)

Category V	Self-directed activities: Self-assessment, self-instruction, specialty board examination preparation, quality of care and/or utilization review (maximum of eighty hours).

[Statutory Authority: RCW 18.71.017, 18.130.050(1), 18.130.040(4), 18.130.050(12) and 18.130.340. 99-23-090, § 246-919-450, filed 11/16/99, effective 1/1/00. Statutory Authority: RCW 18.71.017 and 18.71A.020. 96-03-073, § 246-919-450, filed 1/17/96, effective 2/17/96.]

WAC 246-919-460 Continuing medical education requirement. (1) The credits must be earned in the forty-eight-month period preceding application for renewal of licensure.

(2) **Category I: Continuing medical education activities with accredited sponsorship.** The commission has approved the standards adopted by the Accreditation Council for Continuing Medical Education or its designated interstate accrediting agency, the Washington State Medical Association, in accrediting organizations and institutions offering continuing medical education programs, and will accept attendance at such programs offered by organizations and institutions offering continuing medical education programs, and will accept attendance at such programs offered by organizations and institutions so recognized as Category I credit towards the licensee's continuing medical education requirement for annual renewal of licensure. The licensee may earn all two hundred credit hours in Category I.

(3) **Category II: Continuing medical education activities with nonaccredited sponsorship.** A maximum of eighty credit hours may be earned by attendance at continuing medical education programs that are not approved in accordance with the provisions of Category I.

(4) **Category III: Teaching of physicians or other allied health professionals.** A maximum of eighty credit hours may be earned for serving as an instructor of medical students, house staff, other physicians or allied health professionals from a hospital or institution with a formal training program if the hospital or institution has approved the instruction.

(5) **Category IV: Books, papers, publications, exhibits.**

(a) A maximum of eighty credit hours may be earned under Category IV, with specific subcategories listed below. Credit may be earned only during the forty-eight-month period following presentations or publications.

(b) Ten credit hours may be claimed for a paper, exhibit, publication, or for each chapter of a book that is authored and published. A paper must be published in a recognized medical journal. A paper that is presented at a meeting or an exhibit that is shown must be to physicians or allied health professionals. Credit may be claimed only once for the scientific materials presented. Credit should be claimed as of the date materials were presented or published.

Medical editing can not be accepted in this or any other category for credit.

(6) **Category V: Self-directed activities.**

(a) A maximum of eighty credit hours may be earned under Category V.

(b) Self-assessment: Credit hours may be earned for completion of a multimedia medical education program.

(c) Self-instruction: Credit hours may be earned for the independent reading of scientific journals and books.

(d) Specialty board examination preparation: Credit hours may be earned for preparation for specialty board certification or recertification examinations.

(e) Quality care and/or utilization review: Credit hours may be earned for participation on a staff committee for quality of care and/or utilization review in a hospital or institution or government agency.

[Statutory Authority: RCW 18.71.017, 18.130.050(1), 18.130.040(4), 18.130.050(12) and 18.130.340. 99-23-090, § 246-919-460, filed 11/16/99, effective 1/1/00. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-919-460, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.71.017 and 18.71A.020. 96-03-073, § 246-919-460, filed 1/17/96, effective 2/17/96.]

WAC 246-919-800 Purpose. (1) The medical quality assurance commission recognizes that effective pain management is an essential component of quality medical care and that no single approach to the treatment of pain is exclusively correct.

(2) The commission wishes to reassure practitioners that they need not fear disciplinary action from the commission for prescribing, dispensing, or administering opioids when treating pain so long as the care provided is consistent with currently acceptable medical practices. This includes acute, chronic and intractable pain (RCW 69.50.308(g)).

(3) While many other medications may be appropriate in the treatment of pain, these regulations specifically address the use of opioids. As used in these regulations, the term opioid means any natural or synthetic medication that has morphine like activity.

[Statutory Authority: RCW 18.71.017, 18.130.050(1) and (12) and 18.130.340. 99-22-090, § 246-919-800, filed 11/2/99, effective 12/3/99.]

WAC 246-919-810 What specific guidance should a practitioner follow? (1) The commission has adopted guidelines for the management of pain in order to acquaint practitioners with recognized national standards in the field of pain treatment.

(2) These guidelines specifically address the patient evaluation and treatment plan, informed consent, periodic reviews, use of consultations, and the necessity for maintaining accurate and complete medical records.

(3) These guidelines may be revised from time to time to reflect changes in the practice of pain management.

(4) Practitioners who cannot or choose not to treat patients who have complex or chronic pain conditions should offer appropriate referrals for those patients.

[Statutory Authority: RCW 18.71.017, 18.130.050(1) and (12) and 18.130.340. 99-22-090, § 246-919-810, filed 11/2/99, effective 12/3/99.]

WAC 246-919-820 What knowledge should a practitioner possess to treat pain patients? Practitioners treating pain should be:

(1) Knowledgeable about the complex nature of pain;

(2) Familiar with the pain treatment terms used in the commission's pain treatment guidelines; and

(3) Knowledgeable about acceptable pain treatment modalities.

[Statutory Authority: RCW 18.71.017, 18.130.050(1) and (12) and 18.130.340. 99-22-090, § 246-919-820, filed 11/2/99, effective 12/3/99.]

WAC 246-919-830 How will the commission evaluate prescribing for pain? (1) The practitioner's treatment will be evaluated by a review of the provided care to see if it is clinically sound and in accordance with currently acceptable medical practice regarding the treatment of pain.

(2) No disciplinary action will be taken against a practitioner based solely on the quantity and/or frequency of opioids prescribed.

[Statutory Authority: RCW 18.71.017, 18.130.050(1) and (12) and 18.130.340. 99-22-090, § 246-919-830, filed 11/2/99, effective 12/3/99.]

WAC 246-919-990 Physician and surgeon fees and renewal cycle. (1) Licenses must be renewed every two years on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2, except postgraduate training limited licenses and retired active physician licenses.

(2) Postgraduate training limited licenses must be renewed every year to correspond to program date.

(3) Retired active physician licenses shall be renewed every year.

(4) The following nonrefundable fees will be charged:

Title of Fee	Fee
Physicians and surgeons: Chapter 18.71 RCW	
Application	$300.00
Retired active physician license renewal (which is the $100.00 renewal fee plus $25.00 substance abuse monitoring surcharge)	125.00
Retired active late renewal penalty	50.00
One-year renewal	200.00
Two-year renewal	400.00
Late renewal penalty	100.00
Expired license reissuance	200.00
Substance abuse monitoring surcharge (assessed at $25.00 each year as stipulated in RCW 18.71.310(2))	50.00
Certification of license	50.00
Duplicate license	15.00
Temporary permit	50.00
Postgraduate limited license fees: RCW 18.71.095	
Limited license application	200.00
Limited license renewal	200.00
Substance abuse monitoring surcharge	25.00
Limited duplicate license	15.00

[Statutory Authority: RCW 18.71.017, 18.130.050(1), 18.130.040(4), 18.130.050(12) and 18.130.340. 99-23-090, § 246-919-990, filed 11/16/99, effective 1/1/00. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-919-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.71.017 and 43.70.250. 97-15-100, § 246-919-990, filed 7/21/97, effective 8/21/97. Statutory Authority: RCW 18.71.017 and 18.71A.020. 96-03-073, § 246-919-990, filed 1/17/96, effective 2/17/96.]

Chapter 246-922 WAC
PODIATRIC PHYSICIANS AND SURGEONS

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-922-090 Delegation of acts to unlicensed persons. [Statutory Authority: RCW 18.22.015. 91-10-041 (Order 158B), § 246-922-090, filed 4/25/91, effective 5/26/91; 91-03-095 (Order 118B), recodified as § 246-922-090, filed 1/18/91, effective 2/18/91; 87-04-050 (Order PM 638), § 308-31-100, filed 2/3/87; 84-02-077 (Order PL 450), § 308-31-100, filed 1/4/84.] Repealed by 99-14-074, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.22.015 and 18.130.050.

WAC 246-922-010 Definitions. (1) Chiropody, podiatry, and podiatric medicine and surgery shall be synonymous.

(2) "Board" shall mean the Washington state podiatric medical board.

(3) "Secretary" shall mean the secretary of the department of health.

(4) "Supervision" shall mean that a licensed podiatric physician and surgeon whose patient is being treated has personally diagnosed the condition to be treated and has personally authorized and directed the procedures to be performed. A podiatric physician and surgeon shall be physically present in the treatment facility while the procedures are performed.

(5) "Treatment facility" means a podiatric medical office or connecting suite of offices, podiatric medical clinic, room or area with equipment to provide podiatric medical treatment, or the immediately adjacent rooms or areas. A treatment facility does not extend to any other area of a building in which the treatment facility is located.

(6) "Unlicensed person" means a person who is not a podiatric physician and surgeon duly licensed pursuant to the provisions of chapter 18.22 RCW.

(7) Orthotic devices defined:

(a) Prefabricated or off-the-shelf orthotics, are devices that are manufactured as commercially available stock items for no specific patient. It is appropriate to dispense prefabricated orthotic devices for some conditions.

(b) Direct-formed orthotics are devices formed or shaped during the molding process directly on the patient's foot.

(c) Custom-fabricated orthotics, also known as custom-made orthotics, are devices designed and fabricated, in turn, from raw materials for a specific patient, and require the generation of an image, form, or mold that replicates the patient's foot, and, in turn, involves the rectification of dimensions, contours, and volumes to achieve proper fit, comfort, and function for that specific patient.

Prefabricated orthotic devices that have been adjusted or modified may not be dispensed and sold to consumers as custom fabricated or custom-made orthotics. All orthotic devices must be correctly represented and charged to the patient.

[Statutory Authority: RCW 18.22.015 and 18.130.050. 99-14-074, § 246-922-010, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.22.015. 91-10-041 (Order 158B), § 246-922-010, filed 4/25/91, effective 5/26/91; 91-03-095 (Order 118B), recodified as § 246-922-010, filed 1/18/91, effective 2/18/91; 84-02-077 (Order PL 450), § 308-31-020, filed 1/4/84; Order PL 128, § 308-31-020, filed 7/7/72.]

WAC 246-922-090 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-922-100 Acts that may be delegated to an unlicensed person. A podiatric physician and surgeon may authorize the delegation of certain duties to nonpodiatric personnel and prohibit the delegation of certain other duties. The licensed podiatric physician and surgeon is ultimately responsible for all treatments performed at his or her direction. Duties that may be delegated to a person not licensed to practice podiatric medicine and surgery may be performed only under the supervision of a licensed podiatric physician and surgeon. The extent of delegation and the degree of supervision required to assure that the treatment is appropriate and does not jeopardize the systemic or pedal health of the patient varies with, among other considerations, the nature of the procedure and the qualifications of the person to whom the duty is delegated. A podiatric physician and surgeon may allow an unlicensed person to perform the following acts under the podiatric physician and surgeon's supervision limited to the following:

(1) Patient education in foot hygiene.

(2) Deliver a sedative drug in an oral dosage form to patient.

(3) Give preoperative and postoperative instructions.

(4) Assist in administration of nitrous oxide analgesia or sedation, but the unlicensed person shall not start the administration of the gases and shall not adjust the flow of the gases unless instructed to do so by the podiatric physician and surgeon. Patients must never be left unattended while nitrous oxide analgesia or sedation is administered to them. This regulation shall not be construed to prevent any person from taking appropriate action in the event of a medical emergency.

(5) Take health histories.

(6) Determine rate and quality of patient's radial pulses.

(7) Measure the patient's blood pressure.

(8) Perform a plethysmographic or doppler study.

(9) Observe the nature of the patient's shoes and hose.

(10) Observe and report wearing patterns on the patient's shoes.

(11) Assist in obtaining material for a culture-sensitivity test.

(12) Take scrapings from the skin or nails of the feet, prepare them for microscopic and culture examination.

(13) Perform weightbearing and nonweightbearing x-rays.

(14) Photograph patient's foot disorder.

(15) Debride hyperkeratotic tissues of the foot.

(16) Remove and apply dressing and/or padding.

(17) Make necessary adjustments to the biomechanical device.

(18) Produce impression casting of the foot.

(19) Produce the following:

(a) Removable impression insoles and modifications.

(b) Protective devices for alleviating or dispersing pressure on certain deformities or skin lesions such as ulcers, corns, calluses, digital amputation stumps (e.g., latex shields).

(20) Apply strap and/or pad to the foot and/or leg.

(21) Prepare the foot for anesthesia as needed.

(22) Know the indications for and application of cardiopulmonary resuscitation (CPR).

(23) Prepare and maintain a surgically sterile field.

(24) Apply flexible cast (e.g., Unna Boot).

(25) Apply cast material for immobilization of the foot and leg.

(26) Remove sutures.

(27) Debride nails.

(28) Administer mechanical, manipulative and electrical treatment as directed by the podiatric physician and surgeon.

(29) Counsel and instruct patients in the basics of:

(a) Their examination, treatment regimen and prophylaxis for a problem.

(b) Patient and family foot health promotion practices.

(c) Patient and family care of specific diseases affecting the foot (e.g., diabetes, cerebrovascular accident, arthritis).

(d) Performing certain exercises and their importance.

(30) Give patient or family supplementary health education materials.

[Statutory Authority: RCW 18.22.015 and 18.130.050. 99-14-074, § 246-922-100, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.22.015. 94-05-051, § 246-922-100, filed 2/10/94, effective 3/13/94; 91-10-041 (Order 158B), § 246-922-100, filed 4/25/91, effective 5/26/91; 91-03-095 (Order 118B), recodified as § 246-922-100, filed 1/18/91, effective 2/18/91; 84-02-077 (Order PL 450), § 308-31-110, filed 1/4/84.]

WAC 246-922-300 Podiatric continuing education required. The podiatric medical board encourages licensees to deliver high-quality patient care. The board recognizes that continuing education programs designed to inform practitioners of recent developments within podiatric medicine and relative fields and review of various aspects of basic professional education and podiatric practice are beneficial to professional growth. The board encourages participation in podiatric continuing education as a mechanism to maintain and enhance competence.

(1) Fifty contact hours of scientific podiatric continuing education is required every two years when the license is renewed to maintain a current license as provided in chapter 246-12 WAC, Part 7.

Five credit hours may be granted for one hour of course instruction. A maximum of ten hours may be claimed per reporting period.

(2) Approved courses shall be scientific in nature designed to provide information and enhancement of current knowledge of the mechanisms of disease and treatment, which may include applicable clinical information.

(a) Serving as a resident in an approved post-graduate residency training program shall satisfy the continuing education credit for the reporting period.

(b) Continuing education activities which do not affect the delivery of patient care, (e.g., marketing and billing), may not be claimed for continuing education credit.

[Statutory Authority: RCW 18.22.015. 99-20-096, § 246-922-300, filed 10/5/99, effective 11/5/99. Statutory Authority: RCW 43.70.280. 98-05-

060, § 246-922-300, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.22.015. 94-05-051, § 246-922-300, filed 2/10/94, effective 3/13/94; 91-10-041 (Order 158B), § 246-922-300, filed 4/25/91, effective 5/26/91.]

WAC 246-922-310 Categories of creditable podiatric continuing education activities. The following categories of creditable podiatric continuing education activities sponsored by the following organizations are approved by the board. The credits must be earned in the twenty-four month period preceding the licensee's reporting period. One contact hour is defined as a typical fifty-minute classroom instructional session or its equivalent.

(1) Scientific courses or seminars approved by the American Podiatric Medical Association and its component societies and affiliated and related organizations.

(2) Scientific courses or seminars offered by accredited, licensed, or otherwise approved hospitals, colleges, and universities and their associated foundations and institutes offering continuing education programs in podiatric medicine.

(3) Scientific courses or seminars offered by recognized nonpodiatric medical and health-care related societies (e.g., the American Medical Association, the American Physical Therapy Association) offering continuing education programs related to podiatric medicine.

(4) Scientific courses or seminars offered by other nonprofit organizations, other proprietary organizations, and individuals offering continuing education in podiatric medicine.

(5) A post-graduate residency training program accredited by the council on podiatric medical education.

[Statutory Authority: RCW 18.22.015. 99-20-096, § 246-922-310, filed 10/5/99, effective 11/5/99; 94-05-051, § 246-922-310, filed 2/10/94, effective 3/13/94; 91-10-041 (Order 158B), § 246-922-310, filed 4/25/91, effective 5/26/91.]

WAC 246-922-990 Podiatry fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2, except for postgraduate training limited licenses.

(2) Postgraduate training limited licenses must be renewed every year to correspond to program dates.

(3) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application (examination and reexamination)	$600.00
Reciprocity application	650.00
License renewal	650.00
Inactive license renewal	135.00
Inactive late renewal penalty	67.50
Active late renewal penalty	300.00
Active expired license reissuance	300.00
Expired inactive license reissuance	67.50
Duplicate license	30.00
Certification of license	50.00
Retired active status	150.00
Temporary practice permit	50.00
Limited license application	200.00
Limited license renewal	240.00
Substance abuse monitoring surcharge	25.00

[Statutory Authority: RCW 43.70.250. 99-24-064, § 246-922-990, filed 11/29/99, effective 12/30/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-922-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250 and chapters 18.57, 18.57A, 18.22 and 18.59 RCW. 94-22-055, § 246-922-990, filed 11/1/94, effective 1/1/95. Statutory Authority: RCW 43.70.250. 92-14-053 (Order 280), § 246-922-990, filed 6/25/92, effective 7/26/92; 91-13-002 (Order 173), § 246-922-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-05-029 (Order 134), recodified as § 246-922-990, filed 2/12/91, effective 3/15/91. Statutory Authority: RCW 43.70.250 and chapter 18.22 RCW. 90-16-057 (Order 072), § 308-31-055, filed 7/27/90, effective 8/27/90. Statutory Authority: RCW 43.24.086. 89-17-156, § 308-31-055, filed 8/23/89, effective 9/23/89; 87-18-031 (Order PM 667), § 308-31-055, filed 8/27/87. Statutory Authority: 1983 c 168 § 12. 83-22-060 (Order PL 446), § 308-31-055, filed 11/2/83; 83-17-031 (Order PL 442), § 308-31-055, filed 8/10/83. Formerly WAC 308-31-310.]

Chapter 246-924 WAC
PSYCHOLOGISTS

WAC

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-924-340 Continuing education—Program or course approval. [Statutory Authority: RCW 18.83.050. 91-04-021 (Order 129B), § 246-924-340, filed 1/28/91, effective 2/28/91.] Repealed by 99-14-075, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.83.090.

WAC 246-924-180 Continuing education—Purpose and scope. The ultimate aim of continuing education is to ensure the highest quality of professional work. Continuing education consists of educational activities designed to review existing concepts and techniques and to convey information and knowledge about advances in psychology as applied to the work settings. The objectives are to improve and increase the ability of the psychologist to deliver the highest possible quality of psychological work and to keep the professional psychologist abreast of current developments in a rapidly changing field. All psychologists, licensed pursuant to chapter 18.83 RCW, and holders of certificates of qualification issued pursuant to RCW 18.83.105, will be required to meet the continuing education requirements set forth in these rules as a prerequisite to license renewal.

[Statutory Authority: RCW 18.83.090. 99-14-075, § 246-924-180, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.83.050. 91-04-021 (Order 129B), § 246-924-180, filed 1/28/91, effective 2/28/91.]

WAC 246-924-230 Continuing education requirements. (1) The Washington state board of psychology (hereafter referred to as the board) requires a minimum of sixty hours of continuing education (hereafter referred to as CE) every three years.

(2) A minimum of four hours credit in ethics must be included in the sixty hours required. Areas to be covered,

depending on the licensee's primary area(s) of function are practice, consultation, research, teaching, and/or supervision.

(3) Faculty providing CE offerings shall meet the training and the full qualifications of their respective professions. All faculty shall have demonstrated an expertise in the areas in which they are instructing.

(4) The board reserves the right to require any licensee to submit evidence, e.g., course or program certificate of training, transcript, course or workshop brochure description, evidence of attendance, etc., in addition to the affidavit form in order to demonstrate compliance with the sixty hours CE requirement.

[Statutory Authority: RCW 18.83.090. 99-14-075, § 246-924-230, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-924-230, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.83.050(5). 94-12-039, § 246-924-230, filed 5/25/94, effective 6/25/94. Statutory Authority: RCW 18.83.050. 91-04-021 (Order 129B), § 246-924-230, filed 1/28/91, effective 2/28/91; 91-04-020 (Order 117B), recodified as § 246-924-230, filed 1/28/91, effective 2/28/91; Order PL 276, § 308-122-515, filed 11/16/77.]

WAC 246-924-240 Definitions of categories of creditable CE. All CE activities shall be directly relevant to maintaining or increasing professional or scientific competence in psychology. Courses or workshops primarily designed to increase practice income or office efficiency, while valuable to the licensee, are specifically noneligible for CE credit. Program sponsors or institutes should not apply for, nor expect to receive, prior or current board approval for CE status or category. Recognized activities shall include:

(1) Courses, seminars, workshops and post-doctoral institutes offered by educational institutions chartered by a state and recognized (accredited) by a regional association of schools, colleges and universities as providing graduate level course offerings. Such educational activities shall be recorded on an official transcript or certificate of completion.

(2) Courses (including correspondence courses), seminars, workshops and post-doctoral institutes sponsored by the American Psychological Association, regional or state psychological associations or their subchapters, psychology internship training centers, other professionally or scientifically recognized behavioral science organizations, and the board.

(3) Credit toward the CE requirement may be earned through teaching an approved CE program. Credit earned through teaching shall not exceed thirty hours every three years. Credit for teaching an approved CE program may be earned on the following basis:

(a) One credit hour for each sixty minutes actually spent teaching the program for the first event. Credit may be conferred for teaching similar subject matter only if the psychologist has actually spent an equal or greater amount of preparation time updating the subject matter to be taught on a later occasion.

(b) One credit hour for each sixty minutes actually spent participating in a panel presentation.

[Statutory Authority: RCW 18.83.090. 99-14-075, § 246-924-240, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.83.050(5). 94-12-039, § 246-924-240, filed 5/25/94, effective 6/25/94. Statutory Authority: RCW 18.83.050. 91-04-021 (Order 129B), § 246-924-240, filed 1/28/91, effective 2/28/91; 91-04-020 (Order 117B), recodified as § 246-924-240, filed 1/28/91, effective 2/28/91; Order PL 276, § 308-122-520, filed 11/16/77.]

WAC 246-924-250 Continuing education—Special considerations. In lieu (total or partial) of sixty hours of CE the board may consider credit hour approval and acceptance of other programs as they are developed and implemented, such as:

(1) Compliance with a CE program developed by the American Psychological Association which provides either a recognition award or certificate, may be evaluated and considered for partial or total fulfillment of the CE credit hour requirements of the board.

(2) Psychologists licensed in the state of Washington but practicing in a different state or country which has a mandatory or voluntary CE program may submit to the board evidence of completion of that other state's or country's CE requirements for evaluation and partial or total credit hour approval.

(3) Psychologists licensed in the state of Washington but practicing in a state, U.S. territory or foreign country without CE requirements, or who are not legally required to meet those CE requirements, may submit evidence of their CE activities pursued outside of Washington state directly to the board for evaluation and approval based on conformity to the board's CE requirements.

(4) The board may also accept evidence of diplomate award by the American Board of Professional Psychology (ABPP) and American Board of Psychological Hypnosis (ABPH) in lieu of sixty hours of CE for that three year period in which the diplomate was awarded.

(5) Credit hours may be earned for other specialty board or diploma certifications if and when such are established.

(6) In accordance with WAC 246-12-040 (2)(c)(ix), psychologists who have allowed their credential to expire for three years or more must document completion of forty hours of CE, of which four hours must be in ethics. This CE must have been obtained within the two most recent years immediately prior to reinstatement.

[Statutory Authority: RCW 18.83.090. 99-14-075, § 246-924-250, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.130.250 and 18.83.050. 96-08-007, § 246-924-250, filed 3/22/96, effective 4/22/96. Statutory Authority: RCW 18.83.050(5). 94-12-039, § 246-924-250, filed 5/25/94, effective 6/25/94. Statutory Authority: RCW 18.83.050. 91-04-020 (Order 117B), recodified as § 246-924-250, filed 1/28/91, effective 2/28/91; Statutory Authority: RCW 18.83.050(5). 86-04-087 (Order PL 578), § 308-122-525, filed 2/5/86; Order PL 276, § 308-122-525, filed 11/16/77.]

WAC 246-924-300 Definition of acceptable documentation and proof of CE. Licensees are responsible for acquiring and maintaining all acceptable documentation of their CE activities.

Acceptable documentation shall include transcripts, letters from course instructors, or certificate of completion or other formal certification. In all cases other than transcripts, the documentation must show the participant's name, the activity title, number of CE credit hours, date(s) of activity, faculty's name(s) and degree and the signature of verifying individual (program sponsor).

[Statutory Authority: RCW 18.83.090. 99-14-075, § 246-924-300, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.83.050(5). 94-12-

039, § 246-924-300, filed 5/25/94, effective 6/25/94. Statutory Authority: RCW 18.83.050. 91-04-021 (Order 129B), § 246-924-300, filed 1/28/91, effective 2/28/91.]

WAC 246-924-330 Continuing education—Exemptions. In the event a licensee fails to meet requirements, because of illness, retirement (with no further provision of psychological services to consumers), failure to renew, or other extenuating circumstances, each case will be considered by the board on an individual basis. When circumstances justify it, the board may grant a time extension. The board may, in its discretion, limit in part or in whole the provision of psychological services to the consumers until the CE requirements are met. In the case of retirement or illness, the board may grant indefinite waiver of CE as a requirement for relicensure, provided an affidavit is received indicating the psychologist is not providing psychological services to consumers. If such illness or retirement status is changed or consumer psychological services are resumed, it is incumbent upon the licensee to immediately notify the board and to resume meeting CE requirements for relicensure. CE credit hours will be prorated for the portion of that three year period involving resumption of such services.

[Statutory Authority: RCW 18.83.090. 99-14-075, § 246-924-330, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.83.050. 91-04-021 (Order 129B), § 246-924-330, filed 1/28/91, effective 2/28/91.]

WAC 246-924-340 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-924-990 Psychology fees and renewal cycle. (1) Licenses must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application	$225.00
Renewal	225.00
Renewal retired active	100.00
Late renewal penalty	112.50
Expired license reissuance	112.50
Duplicate license	25.00
Oral examination	250.00
Certification of license	25.00
Amendment of certificate of qualification	30.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-924-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-924-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 43.70.250. 96-08-006, § 246-924-990, filed 3/22/96, effective 4/22/96; 91-13-002 (Order 173), § 246-924-990, filed 6/6/91, effective 7/7/91. Statutory Authority: RCW 43.70.040. 91-05-028 (Order 133), recodified as § 246-924-990, filed 2/12/91, effective 3/15/91. Statutory Authority: RCW 43.70.250. 90-04-094 (Order 029), § 308-122-275, filed 2/7/90, effective 3/10/90. Statutory Authority: RCW 43.24.086. 87-10-028 (Order PM 650), § 308-122-275, filed 5/1/87. Statutory Authority: 1983 c 168 § 12. 83-17-031 (Order PL 442), § 308-122-275, filed 8/10/83. Formerly WAC 308-122-460.]

Chapter 246-926 WAC
RADIOLOGICAL TECHNOLOGISTS

WAC

WAC 246-926-990 Certification and registration fees and renewal cycle. (1) Certificates and registrations must be renewed every two years on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application - certification	$45.00
Exam fee - certification	30.00
Application - registration	35.00
Certification renewal	45.00
Registration renewal	35.00
Late renewal penalty - certification	45.00
Late renewal penalty - registration	35.00
Expired certificate reissuance	45.00
Expired registration reissuance	35.00
Certification of registration or certificate	15.00
Duplicate registration of certificate	15.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-926-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-926-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.84.040 and 18.84.100. 92-05-010 (Order 237), § 246-926-990, filed 2/7/92, effective 2/19/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-926-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.84.040. 89-01-015 (Order PM 802), § 308-183-180, filed 12/9/88.]

Chapter 246-928 WAC
RESPIRATORY CARE PRACTITIONERS

WAC

WAC 246-928-990 Respiratory care fees and renewal cycle. (1) Certificates must be renewed every two years on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged:

Title of Fee	Fee
Application	$ 70.00
Temporary practice permit	35.00
Examination application	110.00
Examination retake	25.00
Duplicate license	15.00
Certification of certificate	15.00
Renewal	50.00
Late renewal penalty	50.00
Expired certificate reissuance	50.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-928-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-928-990, filed 2/13/98, effective 3/16/98. Statutory Authority: Chapter 18.89 RCW and RCW 43.70.040. 95-18-019, § 246-928-990, filed 8/24/95, effective 9/24/95. Statutory Authority: RCW 43.70.250. 92-15-032 (Order 285), § 246-928-990, filed 7/7/92, effective 8/7/92. Statutory Authority: RCW 18.89.050 and 43.70.250. 92-02-018 (Order 224), § 246-928-990, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-928-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.24.086. 88-17-099 (Order PM 741), § 308-195-110, filed 8/23/88.]

Chapter 246-930 WAC
SEX OFFENDER TREATMENT PROVIDER

WAC

246-930-499 Repealed.

246-930-990 Sex offender treatment provider fees and renewal cycle.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-930-499 Temporary and provisional certificate during initial implementation of certification program. [Statutory Authority: RCW 18.155.040. 93-14-095, § 246-930-499, filed 7/1/93, effective 8/1/93; 92-12-027 (Order 275), § 246-930-499, filed 5/28/92, effective 6/28/92; 91-11-063 (Order 168), § 246-930-499, filed 5/16/91, effective 6/16/91.] Repealed by 99-07-018, filed 3/9/99, effective 4/9/99. Statutory Authority: RCW 18.155.040.

WAC 246-930-499 Repealed. See Disposition Table at beginning of this chapter.

WAC 246-930-990 Sex offender treatment provider fees and renewal cycle. (1) Certificates must be renewed every year on the practitioner's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged for:

Title of Fee	Fee
Sex offender treatment provider:	
Application and examination	$ 500.00
Reexamination	250.00
Initial certification	100.00
Renewal	800.00
Inactive status	300.00
Late renewal penalty	300.00
Expired certificate reissuance	300.00
Expired inactive certificate reissuance	150.00
Duplicate certificate	15.00
Extension fee	1,475.00

(3) The following nonrefundable fees will be charged for affiliate treatment provider:

Application and examination	200.00
Reexamination	100.00
Renewal	300.00
Inactive status	200.00
Late renewal penalty	150.00
Expired affiliate certificate reissuance	150.00
Expired inactive affiliate certificate reissuance	100.00
Duplicate certificate	15.00
Extension fee	850.00

[Statutory Authority: RCW 43.70.250. 99-08-101, § 246-930-990, filed 4/6/99, effective 7/1/99. Statutory Authority: RCW 43.70.280. 98-05-060, § 246-930-990, filed 2/13/98, effective 3/16/98. Statutory Authority: RCW 18.155.040. 94-13-179, § 246-930-990, filed 6/21/94, effective 7/22/94; 92-12-027 (Order 275), § 246-930-990, filed 5/28/92, effective 6/28/92; 91-11-063 (Order 168), § 246-930-990, filed 5/16/91, effective 6/16/91.]

Chapter 246-935 WAC
VETERINARY ANIMAL TECHNICIANS

WAC

246-935-140 Repealed.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-935-140 Disciplinary reinstatement procedures. [Statutory Authority: RCW 18.92.030. 91-24-098 (Order 221B), § 246-935-140, filed 12/4/91, effective 1/4/92; 91-02-060 (Order 108B), recodified as § 246-935-140, filed 12/28/90, effective 1/31/91; 89-02-006 (Order PM 804), § 308-157-010, filed 12/27/88.] Repealed by 99-14-076, filed 7/6/99, effective 8/6/99. Statutory Authority: RCW 18.92.030.

WAC 246-935-140 Repealed. See Disposition Table at beginning of this chapter.

Chapter 246-939 WAC
SURGICAL TECHNOLOGIST PROGRAM

WAC

246-939-990 Surgical technologists—Fees and renewal cycle.

WAC 246-939-990 Surgical technologists—Fees and renewal cycle. (1) Registration must be renewed every year on registrant's birthday as provided in chapter 246-12 WAC, Part 2.

(2) The following nonrefundable fees will be charged for registration:

Title of Fee	Fee
Application for registration	$50.00
Renewal of registration	125.00
Registration late fee	62.50
Duplicate registration	10.00
Expired registration reissuance	62.50
Registration issuance	25.00

[Statutory Authority: Chapter 18.215 RCW. 99-24-097, § 246-939-990, filed 11/30/99, effective 12/31/99.]

Title 250 WAC
HIGHER EDUCATION COORDINATING BOARD
(Formerly: Postsecondary Education, Council for)

Chapters

250-04 General operating rules of the commission.

250-08 Provision for hearing regarding commission actions.

250-20 State student financial aid program—Need grant and the federal program for state student incentive grant program Title 45, Code of Federal Regulations Chapter 1, Part 192.

250-61 Regulations for the Degree Authorization Act.

250-79 Running start program.