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TRAINING

SECTION I—PURPOSE AND DEFINITIONS

WAC 388-112-0001 What is the purpose of this chapter? The residential long-term care training requirements under this chapter apply to:

(1) All adult family homes licensed under chapter 70.128 RCW; and

(2) All boarding homes licensed under chapter 18.20 RCW.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0001, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0005 What definitions apply to this chapter? "Caregiver" means anyone providing hands-on personal care to another person including but not limited to cueing, reminding, or supervision of residents, on behalf of an adult family home or boarding home, except volunteers who are directly supervised.

"Challenge test" means a competency test taken without first taking the class for which the test is designed.

"Competency" means the minimum level of information and skill trainees are required to know and be able to demonstrate.

"Designee" means a person in a boarding home who supervises caregivers and who is designated by a boarding home administrator to take the trainings in this chapter required of the boarding home administrator. A boarding home administrator may have more than one designee.

"Direct supervision" means oversight by a person who has demonstrated competency in the basic training (and specialty training if required), or who has been exempted from the basic training requirements, is on the premises, and is quickly and easily available to the caregiver.

"DSHS" refers to the department of social and health services.

"Home" refers to adult family homes and boarding homes.

"Indirect supervision" means oversight by a person who has demonstrated competency in the basic training (and specialty training if required), or who has been exempted from the basic training requirements, and who is quickly and easily available to the caregiver, but not necessarily on-site.

"Learning outcomes" means the specific information, skills and behaviors desired of the learner as a result of a specific unit of instruction, such as what they would learn by the end of a single class or an entire course. Learning outcomes are generally identified with a specific lesson plan or curriculum.

"Resident" means a person residing and receiving long-term care services at a boarding home or adult family home. As applicable, the term resident also means the resident's legal guardian or other surrogate decision maker.

"Routine interaction" means contact with residents that happens regularly.

[Statutory Authority: RCR 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0005, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0010 When do the training requirements go into effect? The training requirements of this chapter begin September 1, 2002, or one hundred twenty days from the date of employment, whichever is later, and apply to:

(1) Adult family home providers, resident managers, and caregivers, and boarding home administrators, designees, and caregivers, who are hired or begin to provide hands-on personal care to residents subsequent to September 1, 2002; and

(2) Existing adult family home providers, resident managers, and caregivers, and boarding home administrators, designees, and caregivers, who on September 1, 2002, have not successfully completed the training requirements under RCW 74.39A.010, 74.39A.020, 70.128.120, or 70.128.130 and this chapter. Existing adult family home providers, resident managers, and caregivers, and boarding home administrators, designees, and caregivers, who have not successfully
completed the training requirements under RCW 74.39A.010, 74.39A.020, 70.128.120, or 70.128.130 are subject to all applicable requirements of this chapter. However, until September 1, 2002, nothing in this chapter affects the current training requirements under RCW 74.39A.010, 74.39A.020, 70.128.120, or 70.128.130.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0015, filed 7/11/02, effective 8/11/02.]

SECTION II—ORIENTATION

WAC 388-112-0015 What is orientation? Orientation provides basic introductory information appropriate to the residential care setting and population served. The department does not approve specific orientation programs, materials, or trainers for homes. No test is required for orientation.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0015, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0020 What content must be included in an orientation? Orientation may include the use of videotapes, audiotapes, and other media if the person overseeing the orientation is available to answer questions or concerns for the person(s) receiving the orientation. Orientation must include introductory information in the following areas:

1. The care setting;
2. The characteristics and special needs of the population served;
3. Fire and life safety, including:
   a. Emergency communication (including phone system if one exists);
   b. Evacuation planning (including fire alarms and fire extinguishers where they exist);
4. Ways to handle resident injuries and falls or other accidents;
5. Potential risks to residents or staff (for instance, aggressive resident behaviors and how to handle them); and
6. The location of home policies and procedures.
7. Communication skills and information, including:
   a. Methods for supporting effective communication among the resident/guardian, staff, and family members;
   b. Use of verbal and nonverbal communication;
   c. Review of written communications and/or documentation required for the job, including the resident's service plan;
8. Expectations about communication with other home staff; and
9. Whom to contact about problems and concerns.
10. Universal precautions and infection control, including:
    a. Proper hand washing techniques;
    b. Protection from exposure to blood and other body fluids;
    c. Appropriate disposal of contaminated/hazardous articles;
    d. Reporting exposure to contaminated articles, blood, or other body fluids; and
    e. What staff should do if they are ill.
11. Resident rights, including:
   a. The resident's right to confidentiality of information about the resident;
   b. The resident's right to participate in making decisions about the resident's care, and to refuse care;
   c. Staff's duty to provide the personal care to each resident, and assist the resident to exercise his or her rights;
   d. How and to whom staff should report any concerns they may have about a resident's decision concerning the resident's care;
   e. Staff's duty to report any suspected abuse, abandonment, neglect, or exploitation of a resident;
   f. Advocates that are available to help residents (LTC ombudsmen, organizations); and
   g. Complaint lines, hot lines, and resident grievance procedures.

12. In adult family homes, safe food handling information must be provided to all staff, prior to handling food for residents.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0020, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0025 Is competency testing required for orientation? There is no competency testing required for orientation.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0025, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0030 Is there a challenge test for orientation? There is no challenge test for orientation.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0030, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0035 What documentation is required for orientation? The home must maintain documentation of completion of orientation, issued by the home, that includes:

1. The trainee's name;
2. A list of the specific information taught;
3. Signature of the person overseeing orientation, indicating completion of the required information;
4. The trainee's date of employment;
5. The name of the home giving the orientation; and
6. The date(s) of orientation.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0035, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0040 Who is required to complete orientation, and when must it be completed? Adult family home

1. All paid or volunteer staff in adult family homes who begin work September 1, 2002 or later must complete orientation before having routine interaction with residents. Orientation must be provided by appropriate adult family home staff.

Boarding home

2. Boarding home administrators (or their designees), caregivers, and all paid or volunteer staff who begin work
SECTION III—BASIC TRAINING

WAC 388-112-0045 What is basic training? Basic training includes the core knowledge and skills that caregivers need in order to provide personal care services effectively and safely. DSHS must approve basic training curricula.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0045, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0050 Is there an alternative to the basic training for some health care workers? Certain health care workers may complete the modified basic training instead of basic training if they meet the requirements in WAC 388-112-0105.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0050, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0055 What knowledge and skills must be taught in basic training? (1) The basic training knowledge and skills must include all of the learning outcomes and competencies published by the department for the following core knowledge and skills:

(a) Understanding and using effective interpersonal and problem solving skills with the resident, family members, and other care team members;
(b) Taking appropriate action to promote and protect resident rights, dignity, and independence;
(c) Taking appropriate action to promote and protect the health and safety of the resident and the caregiver;
(d) Correctly performing required personal care tasks while incorporating resident preferences, maintaining the resident's privacy and dignity, and creating opportunities that encourage resident independence;
(e) Adhering to basic job standards and expectations.

(2) The basic training learning outcomes and competencies may be obtained from the DSHS aging and adult services administration.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0055, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0060 Is competency testing required for basic training? Passing the DSHS competency test is required for successful completion of basic training as provided under WAC 388-112-0290 through 388-112-0315.

For licensed adult family home providers and employees, successfully completing basic training includes passing the safe food handling section or obtaining a valid food handler permit.

[Statutory Authority: RCW 18.20.090, 70.128.040, 70.128.230, and 2005 c 505. 06-01-046, § 388-112-0060, filed 12/15/05, effective 1/15/06. Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0060, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0065 Is there a challenge test for basic training? Individuals may take the DSHS challenge test instead of the required training. If a person does not pass a challenge test on the first attempt, they may not retake the challenge test and must attend a class.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0065, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0070 What documentation is required for successful completion of basic training? (1) Basic training must be documented by a certificate of successful completion of training, issued by the instructor or training entity, that includes:

(a) The name of the trainee;
(b) The name of the training;
(c) The name of the home or training entity giving the training;
(d) The instructor's name and signature; and
(e) The date(s) of training.

(2) The trainee must be given an original certificate. A copy of the certificate must be kept by the home.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0070, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0075 Who is required to complete basic training, and when? Adult family homes

(1) Adult family home providers (including entity representatives as defined under chapter 388-76 WAC) must complete basic training and demonstrate competency before operating an adult family home.

(2) Adult family home resident managers must complete basic training and demonstrate competency before providing services in an adult family home.

(3) Caregivers in adult family homes must complete basic training within one hundred twenty days of when they begin providing hands-on personal care or within one hundred twenty days of September 1, 2002, whichever is later. Until competency in the basic training has been demonstrated, caregivers may not provide hands-on personal care without indirect supervision.

Boarding homes

(4) Boarding home administrators (or their designees), except administrators with a current nursing home administrator license, must complete basic training and demonstrate competency within one hundred twenty days of employment or within one hundred twenty days of September 1, 2002, whichever is later.

(5) Caregivers must complete basic training within one hundred twenty days of when they begin providing hands-on personal care or within one hundred twenty days of September 1, 2002, whichever is later. Until competency in the basic training has been demonstrated, caregivers may not provide hands-on personal care without direct supervision.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0075, filed 7/11/02, effective 8/11/02.]

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SECTION IV—MODIFIED BASIC TRAINING

WAC 388-112-0080 What is modified basic training? Modified basic training is a subset of the basic training curriculum designed for certain health care workers defined in WAC 388-112-0105, whose previous training includes many of the outcomes taught in the full basic training. DSHS must approve modified basic training curricula.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0080, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0085 What knowledge and skills must be included in modified basic training? (1) Modified basic training must include all of the learning outcomes and competencies published by DSHS for the following core knowledge and skills:

(a) Resident rights, including mandatory reporting requirements;
(b) Medication assistance regulations;
(c) Nurse delegation regulations;
(d) Assessment and observations in home and community settings;
(e) Documentation in home and community settings;
(f) Service planning in home and community care settings;
(g) Resource information, including information on continuing education; and
(h) Self-directed care regulations for home care.

(2) The modified basic training learning outcomes and competencies may be obtained from the DSHS aging and adult services administration.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0085, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0090 Is competency testing required for modified basic training? Passing the DSHS competency test is required for successful completion of modified basic training as provided in WAC 388-112-0290 through 388-112-0315.

For licensed adult family home providers and employees, successfully completing modified basic training includes passing the safe food handling section or obtaining a valid food handler permit.

[Statutory Authority: RCW 18.20.090, 70.128.040, 70.128.230, and 2005 c 505. 06-01-046, § 388-112-0090, filed 12/15/05, effective 1/15/06. Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0090, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0095 Is there a challenge test for modified basic training? Individuals may take the department's challenge test instead of the required training. If a person does not pass a challenge test on the first attempt, they may not re-take the challenge test and must attend the class.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0095, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0100 What documentation is required for successful completion of modified basic training? (1)

Modified basic training must be documented by a certificate of successful completion of training, issued by the instructor or training entity, that includes:

(a) The name of the trainee;
(b) The name of the training;
(c) The name of the home or training entity giving the training;
(d) The instructor's name and signature; and
(e) The date(s) of training.

(2) The trainee must be given an original certificate. A home must keep a copy of the certificate on file.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0100, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0105 Who may take modified basic training instead of the full basic training? Modified basic training may be taken, instead of the full basic training, by a person who can document that they have successfully completed training as a registered or licensed practical nurse, certified nursing assistant, physical therapist, occupational therapist, or medicare-certified home health aide.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0105, filed 7/11/02, effective 8/11/02.]

SECTION V—SPECIALTY TRAINING

WAC 388-112-0110 What is specialty training? (1) Specialty or "special needs" training, including caregiver specialty training, provides instruction in caregiving skills that meet the special needs of people living with mental illness, dementia, or developmental disabilities. Specialty trainings are different for each population served and are not interchangeable. Specialty training may be integrated with basic training if the complete content of each training is included. DSHS must approve specialty training curricula for managers and caregivers, except for adult family home caregiver specialty training.

(2) Manager specialty training for boarding home administrators (or designees), adult family home providers and resident managers:

(a) Developmental disabilities specialty training, under WAC 388-112-0120, is the required training on that specialty for adult family home providers and resident managers, and for boarding home administrators (or designees.)

(b) Dementia specialty training, under WAC 388-112-0125, and mental health specialty training, under WAC 388-112-0135, are the required trainings on those specialties for adult family home providers and resident managers, and for boarding home administrators (or designees.)

(3) Caregiver specialty training for boarding homes:

(a) Developmental disabilities specialty training, under WAC 388-112-0120, is the required training on that specialty for boarding home caregivers.

(b) Caregiver dementia training, under WAC 388-112-0130, and caregiver mental health training, under WAC 388-112-0140, are the required trainings on those specialties for boarding home caregivers.

(4) Caregiver specialty training for adult family homes:
The provider or resident manager who has successfully completed the manager specialty training, or a person knowledgeable about the specialty area, trains adult family home caregivers in the specialty needs of the individual residents in the adult family home, and there is no required curriculum.

WAC 388-112-0115 What specialty training, including caregiver specialty training, is required if a resident has more than one special need? If an individual resident has needs in more than one of the special needs areas, the home must determine which of the specialty trainings will most appropriately address the overall needs of the person and ensure that the specialty training that addresses the overall needs is completed as required. If additional training beyond the specialty training is needed to meet all of the resident's needs, the home must ensure that additional training is completed.

WAC 388-112-0120 What knowledge and skills must manager and caregiver developmental disabilities specialty trainings include? (1) Manager and caregiver developmental disabilities specialty trainings must include all of the learning outcomes and competencies published by DSHS for the following core knowledge and skills:

(a) Overview of developmental disabilities;
(b) Values of service delivery;
(c) Effective communication;
(d) Introduction to interactive planning;
(e) Understanding behavior;
(f) Crisis prevention and intervention; and
(g) Overview of legal issues and individual rights.

(2) For adult family homes, the division of developmental disabilities (DDD) will provide in-home technical assistance to the adult family home upon admission of the first resident eligible for services from DDD and, thereafter, as determined necessary by DSHS.

WAC 388-112-0125 What knowledge and skills must manager dementia specialty training include? (1) Manager dementia specialty training must include all the learning outcomes and competencies published by DSHS for the following core knowledge and skills:

(a) Introduction to the dementias;
(b) Differentiating dementia, depression, and delirium;
(c) Caregiving goals, values, attitudes and behaviors;
(d) Caregiving principles and dementia problem solving;
(e) Effects of cognitive losses on communication;
(f) Communicating with people who have dementia;
(g) Sexuality and dementia;
(h) Rethinking "problem" behaviors;
(i) Hallucinations and delusions;
(j) Helping with activities of daily living (ADLs);
(k) Drugs and dementia;
(l) Working with families;
(m) Getting help from others; and
(n) Self-care for caregivers.

(2) The manager dementia specialty training learning outcomes and competencies may be obtained from the DSHS aging and adult services administration.

WAC 388-112-0130 What knowledge and skills must caregiver dementia training include? (1) Caregiver dementia training must include all the learning outcomes and competencies published by DSHS for the following core knowledge and skills:

(a) Introduction to the dementias;
(b) Dementia, depression, and delirium;
(c) Resident-based caregiving;
(d) Dementia caregiving principles;
(e) Communicating with people who have dementia;
(f) Sexuality and dementia;
(g) Rethinking "problem" behaviors;
(h) Hallucinations and delusions;
(i) Helping with activities of daily living (ADLs); and
(j) Working with family and friends.

(2) The learning outcomes and competencies for caregiver dementia training may be obtained from the DSHS aging and adult services administration.

WAC 388-112-0135 What knowledge and skills must manager mental health specialty training include? (1) Manager mental health specialty training must include all the learning outcomes and competencies published by DSHS for the following core knowledge and skills:

(a) Introduction to mental illness;
(b) Culturally compassionate care;
(c) Respectful communications;
(d) Understanding mental illness - major mental disorders;
(e) Understanding mental illness - baseline, decompensation, and relapse planning; responses to hallucinations and delusions;
(f) Understanding and interventions for behaviors perceived as problems;
(g) Aggression;
(h) Suicide;
(i) Medications;
(j) Getting help from others; and
(k) Self-care for caregivers.

(2) The manager mental health specialty training learning outcomes and competencies may be obtained from the DSHS aging and adult services administration.
There is a challenge test for all the specialty trainings, including caregiver mental health training, as provided by a certificate of successful completion of training, issued by the instructor or training entity, that includes:

1. The trainee's name;
2. The name of the training;
3. The name of the home or training entity giving the training;
4. The instructor's name and signature; and
5. The date(s) of training.

The trainee must be given an original certificate. The home must keep a copy of the certificate on file.

WAC 388-112-0140 What knowledge and skills must caregiver mental health training include? (1) Caregiver mental health training must include all the learning outcomes and competencies published by DSHS for the following core knowledge and skills:

- Understanding major mental disorders;
- Individual background, experiences and beliefs;
- Responding to decompensation, relapse, hallucinations and delusions;
- Interventions for behaviors perceived as problems;
- Aggression; and
- Suicide.

(2) The learning outcomes and competencies for caregiver mental health training may be obtained from the DSHS aging and adult services administration.

WAC 388-112-0145 Is competency testing required for specialty training, including caregiver specialty training? Passing the DSHS competency test is required for successful completion of specialty training for adult family home providers and resident managers, and for boarding home administrators (or designees) and caregivers, as provided under WAC 388-112-0290 through 388-112-0315. Competency testing is not required for adult family home caregivers.

WAC 388-112-0150 Is there a challenge test for specialty training, including caregiver specialty training? There is a challenge test for all the specialty trainings, including caregiver specialty trainings, except the adult family home caregiver training. Individuals may take the DSHS challenge test instead of required specialty training. A person who does not pass a challenge test on the first attempt must attend the class.

WAC 388-112-0155 What documentation is required for successful completion of specialty training, including caregiver specialty training? Specialty training, including caregiver specialty training, as applicable, must be documented by a certificate of successful completion of training, issued by the instructor or training entity, that includes:

1. The trainee's name;
2. The name of the training;
3. The name of the home or training entity giving the training;
4. The instructor's name and signature; and
5. The date(s) of training.

The trainee must be given an original certificate. The home must keep a copy of the certificate on file.

WAC 388-112-0160 Who is required to complete manager specialty training, and when? Adult family homes

1. Adult family home providers (including entity representatives as defined under chapter 388-76 WAC) and resident managers must complete manager specialty training and demonstrate competency before admitting and serving residents who have special needs related to mental illness, dementia, or a developmental disability.

2. If a resident develops special needs while living in a home without a specialty designation, the provider and resident manager have one hundred twenty days to complete manager specialty training and demonstrate competency.

Boarding homes

3. If a boarding home serves one or more residents with special needs, the boarding home administrator (or designee) must complete manager specialty training and demonstrate competency within one hundred twenty days of employment or within one hundred twenty days of September 1, 2002, whichever is later. A boarding home administrator with a current nursing home administrator license is exempt from this requirement, unless the administrator will train their facility caregivers in a caregiver specialty.

4. If a resident develops special needs while living in a boarding home, the boarding home administrator (or designee) has one hundred twenty days to complete manager specialty training and demonstrate competency. A boarding home administrator with a current nursing home administrator license is exempt from this requirement, unless the administrator will train their facility caregivers in a caregiver specialty.

WAC 388-112-0165 Who is required to complete caregiver specialty training, and when? Adult family homes

If an adult family home serves one or more residents with special needs, all caregivers must receive training regarding the specialty needs of individual residents in the home. The provider or resident manager knowledgeable about the specialty area may provide this training.

Boarding homes

If a boarding home serves one or more residents with special needs, caregivers must complete caregiver specialty training and demonstrate competency.

1. If the caregiver specialty training is integrated with basic training, caregivers must complete the caregiver specialty training within one hundred twenty days of when they begin providing hands-on personal care to a resident having special needs or within one hundred twenty days of September 1, 2002, whichever is later.

2. If the caregiver specialty training is not integrated with basic training, caregivers must complete the relevant caregiver specialty training within ninety days of completing basic training.
(3) Until competency in the caregiver specialty has been demonstrated, caregivers may not provide hands-on personal care to a resident with special needs without direct supervision.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0190, filed 7/11/02, effective 8/11/02.]

SECTION VI—NURSE DELEGATION CORE TRAINING

WAC 388-112-0170 What is nurse delegation core training? Nurse delegation core training is required before a nursing assistant may be delegated a nursing task. DSHS approves instructors for nurse delegation core training.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0170, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0175 What knowledge and skills must nurse delegation core training include? Only the curriculum developed by DSHS, "Nurse Delegation for Nursing Assistants," meets the training requirement for nurse delegation core training.

[Statutory Authority: 2008 c 146, RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0175, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0180 Is competency testing required for nurse delegation core training? Passing the DSHS competency test is required for successful completion of nurse delegation core training, as provided under WAC 388-112-0290 through 388-112-0315.

[Statutory Authority: 2008 c 146, RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0180, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0185 Is there a challenge test for nurse delegation core training? There is no challenge test for nurse delegation core training.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-065, § 388-112-0185, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0190 What documentation is required for successful completion of nurse delegation core training? (1) Nurse delegation core training must be documented by a certificate of successful completion of training, issued by the instructor or training entity, that includes:

(a) The name of the trainee;
(b) The name of the training;
(c) The name of the training entity giving the training;
(d) The instructor's name and signature; and
(e) The date(s) of training.

(2) The trainee must be given an original certificate. Homes must keep a copy of the certificate on file.

[Ch. 388-112 WAC—p. 8]
WAC 388-112-01964 What documentation is required for successful completion of specialized diabetes nurse delegation training? (1) Specialized diabetes nurse delegation training must be documented by a certificate of successful completion of training, issued by the instructor or training entity, that includes:
   (a) The name of the trainee;
   (b) The name of the training;
   (c) The name of the training entity giving the training;
   (d) The instructor's name and signature; and
   (e) The date(s) of training.
   (2) The trainee must be given an original certificate. Adult family homes and boarding homes must keep a copy of the certificate on file.

WAC 388-112-01965 Who is required to complete the specialized diabetes nurse delegation training, and when? Specialized diabetes nurse delegation training is required before a nursing assistant, certified or registered, who meets the qualifications in WAC 388-112-0195, may be delegated the task of insulin injections.

SECTION VII—CONTINUING EDUCATION

WAC 388-112-0200 What is continuing education? Continuing education is additional caregiving-related training designed to increase and keep current a person's knowledge and skills. DSHS does not preapprove continuing education programs or instructors.

WAC 388-112-0205 How many hours of continuing education are required each year? (1) Individuals subject to a continuing education requirement must complete at least ten hours of continuing education each calendar year (January 1 through December 31) after the year in which they successfully complete basic or modified basic training.
   (2) One hour of completed classroom instruction or other form of training (such as a video or on-line course) equals one hour of continuing education.

WAC 388-112-0210 What kinds of training topics are required for continuing education? Continuing education must be on a topic relevant to the care setting and care needs of residents, including but not limited to:
   (1) Resident rights;
   (2) Personal care (such as transfers or skin care);
   (3) Mental illness;
   (4) Dementia;
   (5) Developmental disabilities;
   (6) Depression;
   (7) Medication assistance;
   (8) Communication skills;
   (9) Positive resident behavior support;
   (10) Developing or improving resident centered activities;
   (11) Dealing with wandering or aggressive resident behaviors;
   (12) Medical conditions; and
   (13) In adult family homes, safe food handling.

WAC 388-112-0215 Is competency testing required for continuing education? Competency testing is not required for continuing education.

WAC 388-112-0220 May basic or modified basic training be completed a second time and used to meet the continuing education requirement? Retaking basic or modified basic training may not be used to meet the continuing education requirement.

WAC 388-112-0225 May specialty training be used to meet continuing education requirements? Manager specialty training and caregiver specialty training, except any specialty training completed through a challenge test, may be used to meet continuing education requirements.
   (1) If one or more specialty trainings are completed in the same year as basic or modified basic training, the specialty training hours may be applied toward the continuing education requirement for up to two calendar years following the year of completion of the basic and specialty trainings.
   (2) If one or more specialty trainings are completed in a different year than the year when basic or modified basic training was taken, the specialty training hours may be applied toward the continuing education requirement for the calendar year in which the specialty training is taken and the following calendar year.

WAC 388-112-0230 May nurse delegation core training be used to meet continuing education requirements? Nurse delegation training under WAC 388-112-0175 may be applied toward continuing education requirements for the calendar year in which it is completed.
SECTION VIII—CPR AND FIRST-AID TRAINING

WAC 388-112-0250 What is CPR training? Cardiopulmonary resuscitation (CPR) training is training provided by an authorized CPR instructor. Trainees must successfully complete the written and skills demonstrations tests.

WAC 388-112-0255 What is first-aid training? First-aid training is training that meets the guidelines established by the Occupational Safety and Health Administration and listed at www.osha.gov. Topics include:

1. General program elements, including:
   a. Responding to a health emergency;
   b. Surveying the scene;
   c. Basic cardiopulmonary resuscitation (CPR);
   d. Basic first aid intervention;
   e. Standard precautions;
   f. First aid supplies; and
   g. Trainee assessments.

2. Type of injury training, including:
   a. Shock;
   b. Bleeding;
   c. Poisoning;
   d. Burns;
   e. Temperature extremes;
   f. Musculoskeletal injuries;
   g. Bites and stings;
   h. Confined spaces; and
   i. Medical emergencies; including heart attack, stroke, asthma attack, diabetes, seizures, and pregnancy.

3. Site of injury training, including:
   a. Head and neck;
   b. Eye;
   c. Nose;
   d. Mouth and teeth;
   e. Chest;
   f. Abdomen; and
   g. Hand, finger and foot.

4. Successful completion of first aid training, following the OSHA guidelines, also serves as proof of the CPR training.

WAC 388-112-0260 What are the CPR and first-aid training requirements? Adult family homes

1. Adult family home providers (including entity representatives as defined under chapter 388-76 WAC), resident managers, and caregivers must complete ten hours of continuing education each calendar year (January 1 through December 31) after the year in which they successfully complete basic or modified basic training.

2. Continuing education must be on a topic relevant to the care setting and care needs of residents in adult family homes.

3. Continuing education must include 0.5 hours per year on safe food handling in adult family homes.

Boarding homes

4. Boarding home administrators (or their designees) and caregivers must complete ten hours of continuing education each calendar year (January 1 through December 31) after the year in which they successfully complete basic or modified basic training. A boarding home administrator with a current nursing home administrator license is exempt from this requirement.

5. Continuing education must be on a topic relevant to the care setting and care needs of residents in boarding homes.

[Statutory Authority: RCW 18.20.090, 70.128.040, 70.128.230, and 2005 c 505. 06-01-046, § 388-112-0255, filed 12/15/05, effective 1/15/06. Statutory Authority: RCW 18.20.090, 70.128.040, 70.128.230, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0255, filed 7/11/02, effective 8/11/02.]
the licensed nurse is an adult family home provider or resident manager, the valid CPR card or certificate must be obtained prior to providing care for residents.

(3) Adult family home caregivers must obtain and maintain a valid CPR and first-aid card or certificate:

(a) Within thirty days of beginning to provide care for residents, if the provision of care for residents is directly supervised by a fully qualified caregiver who has a valid first-aid and CPR card or certificate; or

(b) Before providing care for residents, if the provision of care for residents is not directly supervised by a fully qualified caregiver who has a valid first-aid and CPR card or certificate.

Boarding homes

(4) Boarding home administrators who provide direct care, and caregivers must possess a valid CPR and first-aid card or certificate within thirty days of employment, and must maintain valid cards or certificates. Licensed nurses working in boarding homes must possess a valid CPR card or certificate within thirty days of employment, and must maintain a valid card or certificate.

WAC 388-112-02610 What is HIV/AIDS training? It is recommended that the HIV/AIDS training be taught in classroom style by an experienced and knowledgeable instructor who can answer technical questions. The Washington state department of health's "KNOW HIV Prevention Education for Health Care Facility Employees" manual is the state model, designed as a complete training. HIV/AIDS training must be based on this curriculum, be a minimum of forty-eight hours of training on topics related to HIV/AIDS training, and when?

(1) Causes of HIV and how it is spread, including:

(a) Reported cases in the United States and Washington state; and

(b) Risk groups and risky behaviors.

(2) Transmission and infection control, including:

(a) Infection control precautions;

(b) Factors affecting the risk for transmission; and

(c) Risks for transmission to health care workers.

(3) Legal and ethical issues, including:

(a) Confidentiality;

(b) Informed consent;

(c) Legal reporting requirements;

(d) Ethical issues; and

(e) Civil rights.

(4) Psychosocial issues, including:

(a) Personal impact of HIV continuum;

(b) The human response to death and dying;

(c) Issues for care providers;

(d) Family issues; and

(e) Special populations.


[Statutory Authority: 2008 c 146, RCW 18.20.090, 74.08.090, chapter 70.128 RCW. 09-03-066, § 388-112-02615, filed 1/14/09, effective 2/14/09.]


[Statutory Authority: 2008 c 146, RCW 18.20.090, 74.08.090, chapter 70.128 RCW. 09-03-066, § 388-112-02620, filed 1/14/09, effective 2/14/09.]

WAC 388-112-02625 What documentation is required for completion of HIV/AIDS training? HIV/AIDS training must be documented by:

(1) Proof of registration, certification or licensure from the department of health; or

(2) A certificate of completion of the state developed twenty-eight hour revised fundamentals of caregiving, completed after December 19, 2003; or

(3) A certificate of completion of HIV/AIDS training issued by the instructor or training entity that includes:

(a) The name of the trainee;

(b) The name of the training curriculum;

(c) The name of the home or training entity giving the training;

(d) The instructor's name and signature; and

(e) The date(s) of the training session(s).

(4) The trainee must be given an original certificate. The facility or entity must keep a copy of the certificate on file.

[Statutory Authority: 2008 c 146, RCW 18.20.090, 74.08.090, chapter 70.128 RCW. 09-03-066, § 388-112-02625, filed 1/14/09, effective 2/14/09.]

WAC 388-112-02630 Who is required to complete HIV/AIDS training, and when? Adult family home and boarding home staff who have potential exposure to bodily fluids must complete HIV/AIDS training.

(1) Licensed, certified or registered staff must meet the HIV/AIDS training requirements for their specific department of health license, certification or registration prior to obtaining a health care credential.

(2) All other adult family home and boarding home staff must complete the HIV/AIDS training, as defined in WAC 388-112-02610 within thirty days of employment.

[Statutory Authority: 2008 c 146, RCW 18.20.090, 74.08.090, chapter 70.128 RCW. 09-03-066, § 388-112-02630, filed 1/14/09, effective 2/14/09.]

SECTION IX—RESIDENTIAL CARE ADMINISTRATOR TRAINING

WAC 388-112-0265 What is residential care administrator training? Residential care administrator training is a minimum of forty-eight hours of training on topics related to the management of adult family homes. DSHS must approve residential care administrator training curricula.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0265, filed 7/11/02, effective 8/11/02.]
WAC 388-112-0270 Who must take the forty-eight hour adult family home residential care administrator training and when? Providers licensed prior to December 31, 2006: Before operating more than one adult family home, the provider (including an entity representative as defined under chapter 388-76 WAC) must successfully complete the department approved forty-eight hour residential care administrator training.

Prospective providers applying for a license after January 1, 2007: Before a license for an adult family home is granted, the prospective provider must successfully complete the department approved forty-eight hour residential care administrator training for adult family homes.

WAC 388-112-0275 What knowledge and skills must residential care administrator training include? Minimally, residential care administrator training must have at least forty-eight hours of class time, and include all of the following:

(1) Business planning and marketing;
(2) Fiscal planning and management;
(3) Human resource planning;
(4) Resident health services;
(5) Nutrition and food service;
(6) Working with people who are elderly, chronically mentally ill, or developmentally disabled;
(7) The licensing process;
(8) Social and recreational activities;
(9) Resident rights;
(10) Legal issues;
(11) Physical maintenance and fire safety; and
(12) Housekeeping.

WAC 388-112-0280 Is competency testing required for residential care administrator training? Competency testing is not required for residential care administrator training.

WAC 388-112-0285 What documentation is required for residential care administrator training? (1) Residential care administrator training must be documented by a certificate of successful completion of training, issued by the instructor or training entity, that includes:

(a) The trainee's name;
(b) The name of the training;
(c) The name of the training entity giving the training;
(d) The instructor's name and signature; and
(e) The date(s) of training.

(2) The trainee must be given an original certificate. A copy of the certificate must be in the adult family home's files.

[Ch. 388-112 WAC—p. 12]

WAC 388-112-0290 What is competency testing? Competency testing, including challenge testing, is evaluating a trainee to determine if they can demonstrate the required level of skill, knowledge, and/or behavior with respect to the identified learning outcomes of a particular course.

WAC 388-112-0295 What components must competency testing include? Competency testing must include the following components:

(1) Skills demonstration of ability to perform and/or implement specific caregiving approaches, and/or activities as appropriate for the training;
(2) Written evaluation to show level of comprehension and knowledge of the learning outcomes for the training; and
(3) A scoring guide for the tester with clearly stated criteria and minimum proficiency standards.

WAC 388-112-0300 What training must include the DSHS-developed competency test? Basic, modified basic, manager specialty, caregiver specialty, and nurse delegation core training must include the DSHS-developed competency test.

WAC 388-112-0305 How must competency test administration be standardized? To standardize competency test administration, testing must include the following components:

(1) The person teaching the course must administer or supervise the administration of all testing; and
(2) The tester must follow DSHS guidelines for:

(a) The maximum length of time allowed for testing;
(b) The amount and nature of instruction given to students before beginning a test;
(c) The amount of assistance to students allowed during testing;
(d) The accommodation guidelines for students with disabilities; and
(e) Accessibility guidelines for students with limited English proficiency.

WAC 388-112-0310 What form of identification must students provide before taking a competency or challenge test? Students must provide photo identification
before taking a competency test (or challenge test, when applicable) for basic, modified basic, specialty, or nurse delegation training.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0315, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0315 How many times may a competency test be taken? (1) A competency test that is part of a course may be taken twice. If the test is failed a second time, the person must retake the course before any additional tests are administered. Licensed adult family providers and employees who fail the food handling section of the basic training competency test a second time, must obtain a valid food worker permit.

(2) If a challenge test is available for a course, it may be taken only once. If the test is failed, the person must take the classroom course.

[Statutory Authority: RCW 18.20.090, 70.128.040, 70.128.230, and 2005 c 505. 06-01-046, § 388-112-0315, filed 12/15/05, effective 1/15/06. Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0315, filed 7/11/02, effective 8/11/02.]

SECTION XI—CURRICULUM APPROVAL

WAC 388-112-0320 What trainings must be taught with a curriculum approved by DSHS? (1) The following trainings must be taught using the DSHS curriculum or other curriculum approved by DSHS:

(a) Basic;
(b) Modified basic;
(c) Manager mental health, dementia, and developmental disabilities specialty training;
(d) Caregiver specialty training in boarding homes; and
(e) Any training that integrates basic training with a manager or caregiver specialty training.

(2) The residential care administrator training must use a curriculum approved by DSHS.

(3) The nurse delegation training must use only the DSHS curriculum.

(4) A curriculum other than the DSHS curriculum must be approved before it is used. An attestation that the curriculum meets all requirements under this chapter will be sufficient for initial approval. Final approval will be based on curriculum review, as described under WAC 388-112-0330.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0320, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0325 What are the minimum components that an alternative curriculum must include in order to be approved? In order to be approved, an alternative curriculum must at a minimum include:

(1) All the DSHS-published learning outcomes and competencies for the course;
(2) Printed student materials that support the curriculum, a teacher's guide or manual, and learning resource materials such as learning activities, audio-visual materials, handouts, and books;
(3) The recommended sequence and delivery of the material;
(4) The teaching methods or approaches that will be used for different sections of the course, including for each lesson: (a) The expected learning outcomes; (b) Learning activities that incorporate adult learning principles and address the learning readiness of the student population; (c) Practice of skills to increase competency; (d) Feedback to the student on knowledge and skills; (e) An emphasis on facilitation by the teacher; and (f) An integration of knowledge and skills from previous lessons to build skills.
(5) A list of the sources or references, if any, used to develop the curriculum;
(6) Methods of teaching and student evaluation for students with limited English proficiency and/or learning disabilities; and
(7) A plan for updating material. Substantial changes to a previously approved curriculum must be approved before they are used.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0325, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0330 What is the curriculum approval process? (1) An alternative curriculum must be submitted to DSHS for approval with:

(a) Identification of where each DSHS-published required learning outcome and competency is located in the alternate curriculum;
(b) All materials identified in WAC 388-112-0325; and
(c) A letter from the boarding home administrator or adult family home provider attesting that the training curriculum addresses all of the training competencies identified by DSHS;

(2) DSHS may approve a curriculum based upon the attestation in (1)(c) above, until it has been reviewed by DSHS;

(3) If, upon review by DSHS, the curriculum is not approved, the alternative curriculum may not be used until all required revisions have been submitted and approved by DSHS.

(4) After review of the alternative curriculum, DSHS will send a written response to the submitter, indicating approval or disapproval of the curriculum and if disapproved, the reasons for denial;

(5) If the alternative curriculum is not approved, a revised curriculum may be resubmitted to DSHS for another review.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0330, filed 7/11/02, effective 8/11/02.]

SECTION XII—HOME-BASED TRAINING

WAC 388-112-0335 What are the requirements for a boarding home or adult family home that wishes to conduct basic, modified basic, manager specialty, or caregiver specialty training? (1) A boarding home or adult family home wishing to conduct basic, modified basic, manager specialty, or caregiver specialty training for boarding home caregivers may do so if the home:
(a) Verifies and documents that all instructors meet each of the minimum instructor qualifications for the course they plan to teach;
(b) Teaches using a complete DSHS-developed or approved alternative curriculum.
(c) Notifies DSHS in writing of the home's intent to conduct staff training prior to providing the home's first training, and when changing training plans, including:
(i) Home name;
(ii) Name of training(s) the home will conduct;
(iii) Name of curriculum(s) the home will use;
(iv) Name of lead instructor and instructor's past employment in boarding homes and adult family homes; and
(v) Whether the home will train only the home's staff, or will also train staff from other homes;
(d) Ensures that DSHS competency tests are administered as required under this chapter;
(e) Provides a certificate of completion of training to all staff that successfully complete the entire course, including:
(i) The trainee's name;
(ii) The name of the training;
(iii) The name of the home giving the training;
(iv) The instructor's name and signature; and
(v) The date(s) of training;
(f) Keeps a copy of student certificates on file for six years, and gives the original certificate to the trainee;
(g) Keeps attendance records and testing records of students trained and tested on file for six years; and
(h) Reports training data to DSHS in DSHS-identified time frames
(2) An adult family home wishing to conduct caregiver specialty training that is taught by the provider, resident manager, or person knowledgeable about the specialty area, as required under WAC 388-112-0110 subsection (3), must document the specialty training as provided under WAC 388-112-0155.

WAC 388-112-0340 Do homes need department approval to provide continuing education for their staff? Homes may provide continuing education for their staff without prior approval of curricula or instructors by the department.

WAC 388-112-0345 When can DSHS prohibit a home from conducting its own training? DSHS may prohibit a home from providing its own basic, modified basic, specialty, or caregiver specialty training when:
(1) DSHS determines that the training fails to meet the standards under this chapter;
(2) The home's instructor does not meet the applicable qualifications under WAC 388-112-0375 through 388-112-0395; or
(3) The home's instructor has been a licensee, boarding home administrator, or adult family home resident manager, as applicable, of any home subject to temporary management or subject to a revocation or summary suspension of the home's license, a stop placement of admissions order, a condition on the license related to resident care, or a civil fine of five thousand dollars or more, while the instructor was the licensee, administrator, or resident manager; or
(4) The home has been operated under temporary management or has been subject to a revocation or suspension of the home license, a stop placement of admissions order, a condition on the license related to resident care, or a civil fine of five thousand dollars or more, within the previous twelve months.

(5) Nothing in this section shall be construed to limit DSHS' authority under chapters 388-76 or 388-78A WAC to require the immediate enforcement, pending any appeal, of a condition on the home license prohibiting the home from conducting its own training programs.

WAC 388-112-0350 What trainings must be taught by an instructor who meets the applicable minimum qualifications under this chapter? (1) The following trainings must be taught by an instructor who meets the applicable minimum qualifications for that training: Basic training; modified basic training; mental health, dementia, and developmental disability specialty training; and caregiver specialty training that is not taught by the boarding home administrator (or designee) or adult family home provider or resident manager.

WAC 388-112-0355 What are an instructor's or training entity's responsibilities? The instructor or training entity is responsible for:
(1) Coordinating and teaching classes,
(2) Assuring that the curriculum used is taught as designed,
(3) Selecting qualified guest speakers where applicable,
(4) Administering or overseeing the administration of DSHS competency and challenge tests,
(5) Maintaining training records including student tests and attendance records for a minimum of six years,
(6) Reporting training data to DSHS in DSHS-identified time frames, and
(7) Issuing or reissuing training certificates to students.

WAC 388-112-0360 Must instructors be approved by DSHS? (1) DSHS-contracted instructors
(a) DSHS must approve any instructor under contract with DSHS to conduct basic, modified basic, specialty, or...
nurse delegation core training classes using the training curricula developed by DSHS.

(b) DSHS may select contracted instructors through a purchased services contract procurement pursuant to chapter 236-48 WAC or through other applicable contracting procedures. Contractors must meet the minimum qualifications for instructors under this chapter and any additional qualifications established through a request for qualifications and quotations (RFQQ) or other applicable contracting procedure.

(2) Homes conducting their own training

Homes conducting their own training programs using the training curricula developed by DSHS or alternative curricula approved by DSHS must ensure that their instructors meet the minimum qualifications for instructors under this chapter.

(3) Other instructors

DSHS must approve all other instructors not described in subsection (1) and (2) of this section.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0360, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0365 Can DSHS deny or terminate a contract with an instructor or training entity? (1) DSHS may determine not to accept a bid or other offer by a person or organization seeking a contract with DSHS to conduct basic, modified basic, specialty, or nurse delegation core training classes using the training curricula developed by DSHS. The protest procedures under chapter 236-48 WAC, as applicable, are a bidder's exclusive administrative remedy. No administrative remedies are available to dispute DHS's decision not to accept an offer that is not governed by chapter 236-48 WAC, except as may be provided through the contracting process.

(2) DSHS may terminate any training contract in accordance with the terms of the contract. The contractor's administrative remedies shall be limited to those specified in the contract.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0365, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0370 What is a guest speaker, and what are the minimum qualifications to be a guest speaker for basic and developmental disabilities specialty training? Guest speakers for basic and developmental disabilities specialty training teach a specific subject in which they have expertise, under the supervision of the instructor. A guest speaker must have as minimum qualifications, an appropriate background and experience that demonstrates the guest speaker has expertise on the topic he or she will teach. The instructor must select guest speakers that meet the minimum qualifications, and maintain documentation of this background. DSHS does not approve guest speakers.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0370, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0375 What are the minimum general qualifications for an instructor teaching a DSHS curriculum or DSHS-approved alternate curriculum as defined under chapter 388-112 WAC? An instructor teaching a DSHS curriculum or DSHS-approved alternate curriculum must meet the following minimum general qualifications:

(1) Twenty-one years of age; and

(2) Has not had a professional health care or social services license or certification revoked in Washington state (however, no license or certification is required).

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0375, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0380 What are the minimum qualifications for an instructor for basic or modified basic training? An instructor for basic or modified basic training must meet the following minimum qualifications in addition to the general instructor qualifications in WAC 388-112-0375:

(1) Education and work experience:

(a) Upon initial approval or hire, must have:

(i) A high school diploma and one year of professional or caregiving experience within the last five years in an adult family home, boarding home, supported living through DDD per chapter 388-820 WAC, or home care setting; or

(ii) An associate degree in a health field and six months professional or caregiving experience within the last five years in an adult family home, boarding home, supported living through DDD per chapter 388-820 WAC, or home care setting.

(b) Teaching experience:

(i) Must have one hundred hours of experience teaching adults on topics directly related to the basic training; or

(ii) Must have forty hours of teaching while being mentored by an instructor who meets these qualifications, and attend a class in adult education that meets the requirements of WAC 388-112-0400.

(c) The instructor must be experienced in caregiving practices and capable of demonstrating competency with respect to the course content or units being taught.

(d) Instructors who will administer tests must have experience or training in assessment and competency testing; and

(3) The instructor must be experienced in caregiving practices and capable of demonstrating competency with respect to the course content or units being taught.

(4) Instructors who will administer tests must have experience or training in assessment and competency testing; and

(5) If required under WAC 388-112-0075 or 388-112-0105, instructors must successfully complete basic or modified basic training prior to beginning to train others.

[Statutory Authority: RCW 18.20.090, 70.128.040, 74.39A.050, 34.05.020, 2000 c 121, and 2002 c 233. 02-15-066, § 388-112-0380, filed 7/11/02, effective 8/11/02.]

WAC 388-112-0385 What are the minimum qualifications for instructors for manager and caregiver mental health specialty? (1) Instructors for manager mental health specialty training: The minimum qualifications for instructors for manager mental health specialty, in addition to the general qualifications in WAC 388-112-0375 include:

(a) The instructor must be experienced in mental health caregiving practices and capable of demonstrating competency in the entire course content;

(b) Education

(i) Bachelor's degree, registered nurse, or mental health specialist, with at least one year of education in seminars, conferences, continuing education, or in college classes, in subjects directly related to mental health, such as, but not limited to, psychology. (One year of education equals twenty-four semester hours, thirty-six quarter hours, or one hundred
ninety-two hours of seminars, conferences, and continuing education.)

(ii) If required under WAC 388-112-0160, successful completion of the mental health specialty training, prior to beginning to train others.

(c) Work experience - Two years full-time equivalent direct work experience with people who have a mental illness; and

(d) Teaching experience

(i) Two hundred hours experience teaching mental health or closely related subjects; and

(ii) Successful completion of an adult education class or train the trainer as follows:

(A) For instructors teaching alternate curricula, a class in adult education that meets the requirements of WAC 388-112-0400, or a train the trainer class for the curriculum they are teaching;

(B) For instructors teaching DSHS-developed mental health specialty training, successful completion of the DSHS-developed train the trainer.

(e) Instructors who will administer tests must have experience or training in assessment and competency testing.

(2) Instructors for caregiver mental health specialty training:

(a) Caregiver mental health specialty may be taught by a boarding home administrator (or designee), adult family home provider, or corporate trainer, who has successfully completed the manager mental health specialty training. A qualified instructor under this subsection may teach caregiver specialty to caregivers employed at other home(s) licensed by the same licensee.

(b) Caregiver mental health specialty taught by a person who does not meet the requirements in subsection (2)(a) must meet the same requirements as the instructors for manager mental health specialty in subsection (1).

WAC 388-112-0395 What are the minimum qualifications for instructors for manager and caregiver developmental disabilities specialty? (1) The minimum qualifications for instructors for manager developmental disabilities specialty, in addition to the general qualifications under WAC 388-112-0375, include:

(a) Education and work experience:

(i) Bachelor's degree with at least two years full time work experience in the field of disabilities; or

(ii) High school diploma or equivalent, with four years full time work experience in the field of developmental disabilities, including two years full time direct work experience with people who have a developmental disability.

(b) Successful completion of developmental disabilities specialty training under WAC 388-112-0120; and

(c) Teaching experience:

(i) Two hundred hours of teaching experience; and

(ii) Successful completion of adult education or train the trainer as follows:

(A) For instructors teaching alternative curricula, a class in adult education that meets the requirements of WAC 388-112-0400, or a train the trainer class for the curriculum they are teaching;

(B) For instructors teaching DSHS-developed developmental disabilities specialty training, successful completion of the DSHS-developed train the trainer.

(d) Instructors who will administer tests must have experience in assessment and competency testing.

(2) Instructors for caregiver developmental disabilities specialty training:
(a) Caregiver developmental disabilities specialty may be taught by a boarding home administrator (or designee), adult family home provider, or corporate trainer, who has successfully completed the manager developmental disabilities specialty training. A qualified instructor under this subsection may teach caregiver specialty to caregivers employed at other home(s) licensed by the same licensee.

(b) Caregiver developmental disabilities specialty taught by a person who does not meet the requirements in subsection (2)(a) must meet the same requirements as the instructors for manager developmental disabilities specialty in subsection (1).

WAC 388-112-0400 What must be included in a class on adult education? A class on adult education must include content, student practice, and evaluation of student skills by the instructor in:

(1) Adult education theory and practice principles;
(2) Instructor facilitation techniques;
(3) Facilitating learning activities for adults;
(4) Administering competency testing; and
(5) Working with adults with special training needs (for example, English as a second language or learning and literacy issues).

WAC 388-112-0405 What physical resources are required for basic, modified basic, specialty, or nurse delegation core classroom training and testing? (1) Classroom space used for basic, modified basic, specialty, or nurse delegation core classroom training must be accessible to trainees and provide adequate space for learning activities, comfort, lighting, lack of disturbance, and tools for effective teaching and learning such as white boards and flip charts. Appropriate supplies and equipment must be provided for teaching and practice of caregiving skills in the class being taught.

(2) Testing sites must provide adequate space for testing, comfort, lighting, and lack of disturbance appropriate for the written or skills test being conducted. Appropriate supplies and equipment necessary for the particular test must be provided.

WAC 388-112-0410 What standard training practices must be maintained for basic, modified basic, specialty, or nurse delegation core classroom training and testing? The following training standards must be maintained for basic, modified basic, specialty or nurse delegation core classroom training and testing:

(1) Training, including all breaks, must not exceed eight hours within one day;
(2) Training provided in short time segments must include an entire unit, skill or concept;
(3) Training must include regular breaks; and
(4) Students attending a classroom training must not be expected to leave the class to attend to job duties, except in an emergency.