
SUBSTITUTE SENATE BILL 6112

State of Washington

65th Legislature

2018 Regular Session

By Senate Health & Long Term Care (originally sponsored by Senators Bailey, Keiser, Darneille, Rivers, Van De Wege, and Kuderer; by request of Department of Social and Health Services)

READ FIRST TIME 02/02/18.

1 AN ACT Relating to evacuation of adult family homes; and amending
2 RCW 70.128.130.

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

4 **Sec. 1.** RCW 70.128.130 and 2012 c 164 s 704 are each amended to
5 read as follows:

6 (1) The provider is ultimately responsible for the day-to-day
7 operations of each licensed adult family home.

8 (2) The provider shall promote the health, safety, and well-being
9 of each resident residing in each licensed adult family home.

10 (3) Adult family homes shall be maintained internally and
11 externally in good repair and condition. Such homes shall have safe
12 and functioning systems for heating, cooling, hot and cold water,
13 electricity, plumbing, garbage disposal, sewage, cooking, laundry,
14 artificial and natural light, ventilation, and any other feature of
15 the home.

16 (4) In order to preserve and promote the residential home-like
17 nature of adult family homes, adult family homes licensed after
18 August 24, 2011, shall:

19 (a) Have sufficient space to accommodate all residents at one
20 time in the dining and living room areas;

1 (b) Have hallways and doorways wide enough to accommodate
2 residents who use mobility aids such as wheelchairs and walkers; and

3 (c) Have outdoor areas that are safe and accessible for residents
4 to use.

5 (5) The adult family home must provide all residents access to
6 resident common areas throughout the adult family home including, but
7 not limited to, kitchens, dining and living areas, and bathrooms, to
8 the extent that they are safe under the resident's care plan.

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

12 (7) Adult family homes shall develop a fire drill plan for
13 emergency evacuation of residents, shall have working smoke detectors
14 in each bedroom where a resident is located, and shall have working
15 fire extinguishers on each floor of the home(~~(, and shall not keep~~
16 ~~nonambulatory patients above the first floor of the home)~~). Residents
17 who need assistance evacuating must have a bedroom on the floor of
18 the home from which the resident can be evacuated to the designated
19 safe location outside the home without the use of stairs, elevators,
20 chairlifts, or platform lifts.

21 (8) The adult family home shall ensure that all residents can be
22 safely evacuated from the home in an emergency as established by the
23 department in rule. The rules established by the department must be
24 developed in consultation with the largest organization representing
25 fire chiefs in the state of Washington.

26 (9) Adult family homes shall have clean, functioning, and safe
27 household items and furnishings.

28 (10) Adult family homes shall provide a nutritious and balanced
29 diet and shall recognize residents' needs for special diets.

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

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

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

37 (12) Adult family home providers shall either: (a) Reside at the
38 adult family home; or (b) employ or otherwise contract with a
39 qualified resident manager to reside at the adult family home. The

1 department may exempt, for good cause, a provider from the
2 requirements of this subsection by rule.

3 (13) A provider will ensure that any volunteer, student,
4 employee, or person residing within the adult family home who will
5 have unsupervised access to any resident shall not have been
6 convicted of a crime listed under RCW 43.43.830 or 43.43.842, or been
7 found to have abused, neglected, exploited, or abandoned a minor or
8 vulnerable adult as specified in RCW 74.39A.056(2). A provider may
9 conditionally employ a person pending the completion of a criminal
10 conviction background inquiry, but may not allow the person to have
11 unsupervised access to any resident.

12 (14) A provider shall offer activities to residents under care as
13 defined by the department in rule.

14 (15) An adult family home must be financially solvent, and upon
15 request for good cause, shall provide the department with detailed
16 information about the home's finances. Financial records of the adult
17 family home may be examined when the department has good cause to
18 believe that a financial obligation related to resident care or
19 services will not be met.

20 (16) An adult family home provider must ensure that staff are
21 competent and receive necessary training to perform assigned tasks.
22 Staff must satisfactorily complete department-approved staff
23 orientation, basic training, and continuing education as specified by
24 the department by rule. The provider shall ensure that a qualified
25 caregiver is on-site whenever a resident is at the adult family home;
26 any exceptions will be specified by the department in rule.
27 Notwithstanding RCW 70.128.230, until orientation and basic training
28 are successfully completed, a caregiver may not provide hands-on
29 personal care to a resident without on-site supervision by a person
30 who has successfully completed basic training or been exempted from
31 the training pursuant to statute.

32 (17) The provider and resident manager must assure that there is:

33 (a) A mechanism to communicate with the resident in his or her
34 primary language either through a qualified person on-site or readily
35 available at all times, or other reasonable accommodations, such as
36 language lines; and

37 (b) Staff on-site at all times capable of understanding and
38 speaking English well enough to be able to respond appropriately to

1 emergency situations and be able to read and understand resident care
2 plans.

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