WSR 22-01-208 PROPOSED RULES DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES [Filed December 21, 2021, 3:13 p.m.]

Original Notice.

Preproposal statement of inquiry was filed as WSR 20-10-082. Title of Rule and Other Identifying Information: WAC 110-145-1300 What is the purpose of this chapter?, 110-145-1305 What definitions do I need to know to understand this chapter?, 110-145-1315 When will the department grant me a license?, 110-145-1325 What is required to apply for a group care facility license?, 110-145-1330 How does the department determine my suitability to become a licensed provider or a staff member or volunteer of a licensed provider? 110-145-1335 What additional steps must I complete prior to licensing?, 110-145-1340 How long do I have to complete the licensing application process?, 110-145-1380 May a group care facility be issued more than one type of license?, 110-145-1385 When may I be certified to provide care to children?, 110-145-1410 How do I appeal the decision of the office of administrative hearings' administrative law judge?, 110-145-1480 What are the general ratios of staff to children under care?, 110-145-1490 What is the preservice training requirements for staff and volunteers having direct care responsibility to children/youth?, 110-145-1495 What is the service training requirement for staff and volunteers having responsibility to provide care to children/youth?, 110-145-1505 What HIV/AIDS and bloodborne pathogens training is required?, 110-145-1510 What personnel records must I keep at my facility?, 110-145-1520 What are the requirements for children's records?, 110-145-1530 What information can be shared about a child or a child's family?, 110-145-1535 What incidents involving children must I report?, 110-145-1540 What are my reporting responsibilities when a child is missing from care (except for overnight youth shelters)?, 110-145-1545 What are my reporting requirements in my licensed facility serving runaway or homeless youth?, 110-145-1555 What does the department require for my buildings and property?, 110-145-1600 What are the general requirements for bedrooms?, 110-145-1605 What are the requirements for sharing bedrooms?, 110-145-1610 What are the requirements for beds in a facility?, 110-145-1625 What are the requirements for the use of electronic monitors to monitor children?, 110-145-1630 Are time-delay mechanisms allowed on windows and doors?, 110-145-1660 Are guns allowed on a licensed facility's property?, 110-145-1665 What are the fire safety requirements for all group residential facilities?, 110-145-1700 What must I include in a child's orientation to my facility?, 110-145-1710 What are the requirements about nondiscrimination?, 110-145-1730 What are the educational and vocational instruction requirements for children placed by the department (except interim facilities)?, 110-145-1740 Can children in my care receive services through the extended foster care program?, 110-145-1750 What are the requirements for supervising children?, 110-145-1760 What are the travel requirements for children in care?, 110-145-1775 What belongings must be provided to a child leaving my facility?, 110-145-1795 How often do children need to be provided meals?, 110-145-1800 What are the requirements for handling a child's special diet?, 110-145-1805 Are there special requirements for serving milk?, 110-145-1815 Are written policies and procedures required describing a facility's discipline methods?, 110-145-1820 When may a child be re-

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Hearing Location(s): On January 25, 2022, telephonic. Oral comments may be made by calling 360-902-8084 and leaving a voicemail that includes the comment and an email or physical mailing address where department of children, youth, and families (DCYF) will send its response. Comments received through and including January 25, 2022, will be considered.

Date of Intended Adoption: February 1, 2022.

Submit Written Comments to: DCYF Rules Coordinator, P.O. Box 40975, email dcyf.rulescoordinator@dcyf.wa.gov. Submit comments online at https://dcyf.wa.gov/practice/policy-laws-rules/rule-making/ participate/online, by January 25, 2022.

Assistance for Persons with Disabilities: Contact DCYF rules coordinator, phone 360-902-7956, email

dcyf.rulescoordinator@dcyf.wa.gov, by January 21, 2022.

Purpose of the Proposal and Its Anticipated Effects, Including Any Changes in Existing Rules: The proposed rules recognize and define LGBTQIA+ terminology, reaffirm that foster care providers must comply with federal and state nondiscrimination laws, complete LGBTQIA+ culture training, and support and engage with all children in their care with dignity and respect regardless of actual or perceived race, ethnicity, culture, sex, or sexual orientation and gender identity. Additionally, the proposed rules update the standards for shared bedrooms based on a child's gender identity.

For group care facilities, child placing agencies, and adoption services, the proposed rules require licensing applications and associated documents to be electronically submitted to the department by uploading them into a department-provided licensing provider portal.

The proposed rules also make nonsubstantive, technical corrections, including corrections necessary after the creation of DCYF and the associated decodification of chapter 388-148 WAC and its recodification to chapter 110-148 WAC.

Reasons Supporting Proposal: DCYF is charged with safeguarding the health, safety, and well-being of the children and youth that it serves. The proposed rules are intended to prevent harassment, discrimination, and other treatment that undermines the self-esteem, health, and physical, mental, and social well-being of LGBTQ+ [LGBTQIA+] children and youth who participate in programs administered by the department.

Statutory Authority for Adoption: RCW 74.15.030.

Statute Being Implemented: RCW 74.15.030.

Rule is not necessitated by federal law, federal or state court decision.

Name of Proponent: DCYF, governmental.

Name of Agency Personnel Responsible for Drafting: Tyler Farmer, Olympia, Washington, 360-628-2151; Implementation and Enforcement: DCYF, statewide.

A school district fiscal impact statement is not required under RCW 28A.305.135.

A cost-benefit analysis is not required under RCW 34.05.328. DCYF is not among the agencies listed as required to comply with RCW 34.05.328 (5) [(a)](i). Further, DCYF does not voluntarily make that section applicable to the adoption of this rule.

This rule proposal, or portions of the proposal, is exempt from requirements of the Regulatory Fairness Act because the proposal:

Is exempt under RCW 19.85.025(3) as the rules adopt, amend, or repeal a procedure, practice, or requirement relating to agency hearings; or a filing or related process requirement for applying to an agency for a license or permit. Is exempt under RCW 19.18.025.

Explanation of exemptions: The rule making proposed for chapter 110-148 WAC affects only foster family homes, which are not small businesses.

The proposed rule does not impose more-than-minor costs on businesses. Following is a summary of the agency's analysis showing how costs were calculated. There are nominal to no costs associated with the proposed rules. The electronic filing requirement being implemented for group care facilities, child placing agencies, and adoption services will be done using equipment they already have, and DCYF anticipates that electronic filing will reduce the filers' processing time. The necessary software and training will be provided by DCYF.

> December 21, 2021 Brenda Villarreal Rules Coordinator

OTS-1222.15

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1300 What is the purpose of this chapter? (1) This chapter contains licensing requirements for generalized group care facilities, group homes, crisis residential centers, emergency respite centers, group receiving centers, overnight youth shelters, staffed residential homes, and resource and assessment centers. These licensing regulations are designed to ensure children in group care facilities are safe, healthy, and protected from all forms of child abuse and neglect according to RCW 26.44.020(1) and chapter ((388-15)) 110-30 WAC.

(2) These separately licensed programs may provide specialized services such as day treatment services, services to pregnant and parenting youth (maternity services), HOPE beds, responsible living skills programs, and services to medically fragile children, and children with intellectual and developmental disabilities. You must hold a group care license to provide the specialized services outlined in

this chapter. These services can be provided through your own program or by using community resources.

[WSR 18-14-078, recodified as § 110-145-1300, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1300, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-05-024, filed 2/7/20, effective 3/9/20)

WAC 110-145-1305 What definitions do I need to know to understand this chapter? The following words and terms are for the purpose of this chapter and are important to understand these requirements:

"Abuse or neglect" means the injury, sexual abuse, sexual exploitation, negligent treatment or maltreatment of a child as defined in RCW 26.44.020.

"Adult" means a person ((eighteen)) 18 years old or older, not in the care of the department.

"Agency" is defined in RCW 74.15.020(1).

"Asexual" means the lack of a sexual attraction or desire for other individuals.

"Assessment" means the appraisal or evaluation of a child's physical, mental, social and emotional condition.

"Bisexual" means individuals who have an emotional or physical attraction to individuals of the same and different genders.

"Business hours" means hours during the day in which state business is commonly conducted. Typically, the hours between 9 a.m. and 5 p.m. on weekdays are considered to be standard hours of operation. "Capacity" means the age range, gender, and maximum number of

children on your current license.

"Care provider" means any person who is licensed or authorized to provide care for children and cleared to have unsupervised access to children under the authority of a license.

"Case manager" means a facility employee who coordinates the planning efforts of all the persons working on behalf of a child.

"Case plan" means a written document adhered to and followed by a foster child's parents, foster parents, the department, and all other caregivers. A case plan may include, but is not limited to:

(a) A description of the type of home or facility in which a child is to be placed, including a discussion of the safety and appropriateness of the placement and how the department plans to carry out the voluntary placement agreement entered into or judicial determination made with respect to the child;

(b) A plan for assuring that the child receives safe and proper care and that services are provided to the child, parents or quardians, and foster parents in order to improve the conditions in the parents' home, facilitate returning the child to their own home or the permanent placement of the child, and address the needs of the child while in foster care, including a discussion of the appropriateness of the services that have been provided to the child under the plan; (c) The health and education records of the child, including the

most recent information available regarding:

(i) The names and addresses of the child's health and educational providers;

(ii) The child's grade level performance;

(iii) The child's school records;

(iv) A record of the child's immunizations;

(v) The child's known medical conditions;

(vi) The child's medications; and

(vii) Any other relevant health and education information con-

cerning the child determined to be appropriate by the department;

(d) Relevant professional assessments of the child;

(e) Court orders concerning the child; and

(f) Any other relevant plan, assessment, knowledge, material, or information concerning the child determined to be appropriate by the department.

"Chapter" means chapter 110-145 WAC. "Child," "children," or "youth" for this chapter, means a person who is one of the following:

(a) Under ((eighteen)) <u>18</u> years old;

(b) Up to ((twenty-one)) 21 years of age and enrolled in services through the department of social and health services developmental disabilities administration (DDA) the day prior to their ((eighteenth)) <u>18th</u> birthday and pursuing either a high school or equivalency course of study (((GED/HSEC))), such as a GED or HSEC, or vocational program;

(c) Up to ((twenty-one)) 21 years of age and participates in the extended foster care program;

(d) Up to ((twenty-one)) 21 years of age with intellectual and developmental disabilities;

(e) Up to ((twenty-five)) 25 years of age and under the custody of juvenile rehabilitation.

"Child placing agency((" or ")) (CPA)" means an agency licensed to place children for temporary care, continued care, or adoption.

"Compliance agreement" means a written improvement plan to address the changes needed to meet licensing requirements.

(("Crisis residential center (secure)" means a licensed facility open twenty-four-hours a day, seven days a week that provides temporary residential placement, assessment and services in a secure facility to prevent youth from leaving the facility without permission per RCW 13.32A.030(15).

"Crisis residential center (semi-secure)" means a licensed facility open twenty-four hours a day, seven days a week that provides temporary residential placement, assessment and services for runaway youth and youth in conflict with their family or in need of emergency placement.))

"CW" means the division of child welfare within DCYF. CW provides case management to children and families involved in the child welfare system.

"Day treatment" is a specialized service that provides educational and therapeutic group experiences for emotionally disturbed children.

"DDA" means the developmental disabilities administration in the department of social and health services. DDA provides services and case management to children and adults who meet the eligibility criteria.

"Deescalation" means strategies used to defuse a volatile situation, to assist a child to regain behavior control, and to avoid a physical restraint or other behavioral intervention.

"Department" ((or "DCYF")) means the department of children, youth, and families (DCYF).

"Developmental disability" is a disability as defined in RCW 71A.10.020.

"Direct care" means direct, hands-on personal care and supervision to group care children and youth.

"DOH" means the department of health.

"Electronic monitoring" means video or audio monitoring or recording used to watch or listen to children as a way to monitor their behavior.

"Emergency respite center (ERC)" means a licensed facility that may be commonly known as a crisis nursery, which provides emergency or crisis care for nondependent children birth through ((seventeen)) 17 years for up to ((seventy-two)) 72 hours to prevent child abuse or neglect per RCW 74.15.020 (d). ERCs may choose to be open up to ((twentyfour)) 24 hours a day, seven days a week. Facilities may also provide family assessment, family support services, and referrals to community services.

"FBI" means the Federal Bureau of Investigation.

"Full-time" as used throughout this chapter when describing work experience means a minimum of 1,664 work hours in a calendar year or the equivalent of 32 work hours per week.

"Gay" means a sexual orientation to describe individuals who are emotionally or physically attracted to someone of the same gender. Gay is sometimes an umbrella term for the LGBTQIA+ community.

"Gender" or "gender identity" means an individual's inner sense of being a female, male, a blend of both or neither, or another gender. This may or may not correspond with an individual's sex assigned at birth.

"Gender expression" means individuals' outward communication of their gender through behavior or appearance. This may or may not conform to their sex assigned at birth or socially defined behaviors and characteristics typically associated with being either masculine or feminine.

"Gender fluid" means individuals whose gender identities are flexible, not permanent.

"Group care" is a general term for a licensed facility that is maintained and operated for a group of children on a ((twenty-fourhour)) <u>24-hour</u> basis to provide a safe and healthy living environment that meets the developmental needs of the children in care, per RCW 74.15.020 (1)(f).

"Group home" is a specific license for residential care that provides care and supervision for children or youth.

"Group receiving center" means a licensed facility that provides the basic needs of food, shelter, and supervision for children placed by the department, generally for ((thirty)) 30 or fewer days.

"Guardian" has the same meaning in this chapter as defined in RCW 26.33.020(11).

"Guns or weapons" means any device intended to shoot projectiles under pressure or that can be used to attack. These include μ but are not limited to, BB guns, pellet guns, air rifles, stun guns, antique guns, handguns, rifles, shotguns, and archery equipment.

"Health care staff" means anyone providing qualified medical consultation to your staff or medical care to the children and youth in your care.

"Hearing" means the administrative review process conducted by an administrative law judge.

"I, my, you, and your" refers to an applicant for a license issued under this chapter, and to any party holding a license under this chapter.

"Infant" means a child less than ((twelve)) 12 months of age.

"Intellectual and developmental disability" means children with deficits in general mental abilities and impairment in everyday adaptive functioning.

"Interim facility" means an overnight youth shelter, emergency respite center or a resource and assessment center.

(("LD" means the licensing division of DCYF. LD licenses and monitors foster homes, child placing agencies, and licensed group care facilities.))

"Intersex" is an umbrella term used to describe a wide range of natural bodily variations when the body is born with a combination of chromosomes, internal organs, or external genitalia that do not develop as expected.

"Lesbian" means females or women who have an emotional or physi-cal attraction for other females or women.

"LGBTQIA+" means lesbian, gay, bisexual, transgender, queer or questioning, intersex, and asexual. The "+" represents identities not specifically named in the LGBTQIA acronym, e.g., pansexual, gender nonbinary, and Two-Spirit.

"License" means a permit issued by us that your facility meets the licensing standards established in this chapter.

"Licensed health care provider" means an $M\bar{D}$ (medical doctor), DO (doctor of osteopathy), ND (doctor of naturopathy), PA (physician's assistant), or an ARNP (advanced registered nurse practitioner).

"Licensing division (LD)" means the division within DCYF that licenses and monitors foster homes, child placing agencies, and licensed group care facilities.

"Licensing provider portal" means the internet connected provider application system used by the department and agencies to securely store digital employment and licensing documents and data.

"Local fire authority" means your local fire inspection authority having jurisdiction in the area where your facility is located.

"Maternity service" as defined in RCW 74.15.020. These are also referred to as pregnant and parenting youth programs.

"Medically fragile" means the condition of a child who requires the availability of ((twenty-four-hour)) <u>24-hour</u> skilled care from a health care professional or specially trained staff or volunteers in a group care setting. These conditions may be present all the time or frequently occurring. If the technology, support, and services being received by the medically fragile children are interrupted or denied, the child may, without immediate health care intervention, experience death.

"Missing child" means any child less than ((eighteen)) 18 years of age in licensed care or under the care, custody, and authority of DCYF and the child's whereabouts are unknown, the child has left care without the permission of the child's caregiver or DCYF, or both. This does not include children in a dependency guardianship.

"Multidisciplinary teams (MDT)" means groups formed to assist children who are considered at risk youth or children in need of services, and their parents.

"Negative action" means a court order, court judgment, or adverse action taken by an agency, in any state, federal, local, tribal, or foreign jurisdiction, that results in a finding against the applicant reasonably related to the individual's suitability, and competence to

care for or have unsupervised access to children in out-of-home care. This may include, but is not limited to:

(a) A decision issued by an administrative law judge;

(b) A final determination, decision, or finding made by an agency following an investigation;

(c) An adverse licensing action, including termination, revocation, or denial of a license or certification, or if there is a pending adverse action, the voluntary surrender of a license, certification, or contract in lieu of an adverse action;

(d) A revocation, denial, or restriction placed on any professional license; or

(e) A final decision of a disciplinary board.

"Nonambulatory" means not able to walk or exit to safety without the physical assistance of another individual.

"Nonbinary" is a term of self-identification for individuals who do not identify within the limited and binary terms that have described gender identity, e.g., female and male. Nonbinary is also an umbrella term for many identities such as gender expansive, gender fluid, and genderqueer.

"Out-of-home placement" means a child's placement in a home or facility other than the child's parent, guardian, or legal custodian.

"Overnight youth shelter" means a licensed nonprofit agency that provides overnight shelter to homeless or runaway youth in need of emergency sleeping arrangements.

"Parent" has the same meaning in this chapter as defined in RCW 26.26A.010(15).

"Probationary license" means a license issued as part of a corrective action to an individual or agency that has previously been issued a full license but is out of compliance with minimum licensing requirements and has entered into an agreement aimed at correcting deficiencies.

"Property or premises" means a facility's buildings and adjoining grounds that are managed by a person or agency in charge.

"Psychotropic medication" means a type of medicine that is prescribed to affect or alter thought processes, mood, sleep, or behavior. These include antipsychotic, antidepressant, and antianxiety medications.

"Queer" is a term used to express LGBTQIA+ identities and orientations. The term is sometimes used as an umbrella term for all LGBTQIA+ individuals.

"Questioning" means individuals who are exploring their sexual orientation, gender identity, or gender expression at any age.

"Relative" means a person who is related to a child ((per)) under RCW 74.15.020.

"Resource and assessment center" means an agency that provides short-term emergency and crisis care for a period up to ((seventytwo)) 72 hours, (excluding Saturdays, Sundays, and holidays) to children who have been removed from their parent's or guardian's care by child protective services or law enforcement.

"Secure crisis residential center" means a licensed facility open 24 hours a day, seven days a week that provides temporary residential placement, assessment and services in a secure facility to prevent youth from leaving the facility without permission per RCW 13.32A.030(15).

"Semi-secure crisis residential center" means a licensed facility open 24 hours a day, seven days a week that provides temporary residential placement, assessment and services for runaway youth and youth in conflict with their family or in need of emergency placement.

"Sexual orientation" means an individual's emotional or physical attraction to other individuals.

"SOGIE" is an acronym for sexual orientation, gender identity, and expression which are distinct identifiers everyone has. LGBTQIA+ is a subdistinction within SOGIE self-identifiers. SOGIE includes LGBTQIA+ as well as heterosexual, cisgender, and nonquestioning individuals.

"Staff" or "staff member" means a person who provides services for your facility and is paid by your facility. The definition of staff member includes paid interns.

"Staffed residential home" means a licensed facility that provides ((twenty-four-hour)) <u>24-hour</u> care to six or fewer children who require more supervision than can be provided in a foster home.

"Transgender" is an umbrella term for individuals whose gender identity or expression is different from cultural expectations based on the sex they were assigned at birth. Gender-affirming medical care is not a prerequisite to identify as transgender. Being transgender does not imply any specific sexual orientation.

"Treatment plan" means individual plans that identify the service needs of the child, including the child's parent or guardian, and identifies the treatment goals and strategies for achieving those goals.

"Two-Spirit" means a modern, pan-indigenous, umbrella term used by some indigenous North Americans to describe Native people in their communities who fulfill a traditional third-gender or other gendervariant, ceremonial, and social role in their cultures. Being Two-Spirit does not imply any specific sexual orientation.

"Volunteer" means a person who provides services for your facility without compensation.

"Washington state patrol fire protection bureau((" or "))(WSP/ FPB)" means the state fire marshal.

"We, our, and us" refers to DCYF and its staff.

"Young child" refers to a child age ((twelve)) <u>12</u> months through eight years old.

[Statutory Authority: RCW 43.43.832, 74.13.031, 74.15.030 and P.L. 115-12. WSR 20-05-024, § 110-145-1305, filed 2/7/20, effective 3/9/20. WSR 18-14-078, recodified as § 110-145-1305, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-145-1305, filed 5/23/18, effective 6/23/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-145-1305, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1305, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1315 When will the department grant me a license? (1) We issue you a group care license to care for children on a

((twenty-four)) 24 hour basis when you, your staff, and volunteers, property_ and premises meet the licensing regulations contained in this chapter((τ)) and all required documents are in the department's licensing file. Documents required under this section must be submitted to the department through the licensing provider portal.

(2) Additional requirements specific to your program can be found in WAC ((388-145-1890 to 388-145-2200)) 110-145-1890 through 110-145-2200.

[WSR 18-14-078, recodified as § 110-145-1315, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1315, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-05-024, filed 2/7/20, effective 3/9/20)

WAC 110-145-1325 What is required to apply for a group care facility license? (1) You, the person responsible for the license, must submit a ((completed)) complete application ((which is available from the DCYF LD)) using the licensing provider portal.

(2) You must submit a completed background authorization form for your executive director, agency staff, including those not directly working with children, consultants, volunteers, and anyone paid by the facility per chapter 110-04 WAC.

(3) You must ensure that all paid agency staff and any other paid adults working at your facility, including those not directly working with children, complete a FBI fingerprint check and a child abuse and neglect history check of every state in which the individual has lived in the preceding five years prior to conducting the background check.

(4) You must ensure that agency volunteers who provide direct care complete a FBI fingerprint check and a child abuse and neglect history check of every state in which the individual has lived in the preceding five years prior to conducting the background check.

(5) You must ensure that agency volunteers who do not provide direct care and have lived outside of Washington state during any portion of the previous three years complete a FBI fingerprint check.

(6) You must ensure all staff, volunteers, or subcontractors meet the requirements in chapter 110-04 WAC. An individual is not authorized to work in the facility until DCYF issues a background check clearance authorization for the individual.

(7) If you have both a license issued by LD and a contract with the department, you must adhere to the most stringent background check requirement.

[Statutory Authority: RCW 43.43.832, 74.13.031, 74.15.030 and P.L. 115-12. WSR 20-05-024, § 110-145-1325, filed 2/7/20, effective 3/9/20. WSR 18-14-078, recodified as § 110-145-1325, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832, and 2017 c 20 § 4. WSR 18-05-037, § 388-145-1325, filed 2/13/18, effective 3/16/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031. WSR 16-06-041, § 388-145-1325, filed 2/24/16, effective 3/26/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2),

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74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1325, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-05-024, filed 2/7/20, effective 3/9/20)

WAC 110-145-1330 How does the department determine my suitability to become a licensed provider or a staff member or volunteer of a **licensed provider?** (1) The department determines your suitability as a licensed provider after receiving:

(a) Your application $((\tau))$ submitted through the licensing provid-<u>er por</u>tal;

(b) Background authorizations for ((those)) the persons listed in WAC $110-145-1325((_{\tau}))$; and

(c) All ((required)) documentation ((outlined in)) required under this chapter.

(2) The department determines the suitability of a licensee, staff member, or volunteer after receiving their background authorization referenced in subsection (1) of this section.

(3) You, your staff members, and volunteers must not have had a license or contract denied or revoked from an agency that regulates the care of children or vulnerable adults, unless the department determines that you do not pose a risk to a child's safety, well-being, and long-term stability.

(4) You, your staff members, and volunteers must not have been found to have committed abuse or neglect of a child or vulnerable adult, unless the department determines that you do not pose a risk to a child's safety, well-being, and long-term stability.

(5) You must demonstrate that you, your staff members, and volunteers have:

(a) The understanding, ability, physical health, emotional stability, and personality suited to meet the physical, mental, emotional, cultural, and social needs of the children under your care; and

(b) The ability to furnish children with a nurturing, respectful, and supportive environment regardless of the child's actual or perceived race, ethnicity, religion, or SOGIE.

(6) At any time, we may require you, your staff members, and volunteers to give us additional information. We may also require an evaluation of your facility or property, or of a staff member or volunteer working for your facility or agency, by an evaluator we recommend. Any evaluation requested by the department will be at your expense. The evaluator must be given written permission to share information with us prior to and throughout the evaluation process.

(7) Any staff member or volunteer who is found to have misrepresented or provided fraudulent information may be disqualified.

(8) Before granting or renewing a license, your licensor will assess your ability to provide a safe environment for children and to provide the quality of care needed by children placed in your care. Your licensor will also determine that you meet training requirements.

[Statutory Authority: RCW 43.43.832, 74.13.031, 74.15.030 and P.L. 115-12. WSR 20-05-024, § 110-145-1330, filed 2/7/20, effective 3/9/20. WSR 18-14-078, recodified as § 110-145-1330, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040,

Washington State Register

74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-145-1330, filed 5/23/18, effective 6/23/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1330, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1335 What additional steps must I complete prior to **licensing?** (1) You must submit ((to your licensor)), through the licensing provider portal, a detailed written program description for ((DLR)) LD approval. ((In)) The description ((you)) must outline:

(a) Your mission and goals;

(b) A description of the services you will provide to children and their families;

(c) Your written policies covering gualifications, duties, and ongoing training for developing and upgrading staff skills; and

(d) A description of your agency's policies and procedures.

(e) For staffed residential facilities in family homes, you must provide a written plan to the child's ((DSHS worker)) DCYF caseworker for the supervision of children in your care if you work outside of your staffed residential home.

(2) You must have a site inspection by your ((DLR)) LD licensor or someone designated by ((DLR)) <u>LD</u> who can verify that your premises have:

(a) Adequate storage for staff and client files;

(b) A landline working telephone;

(c) Adequate space for privacy when interviewing parents and children;

(d) Room or area used for administrative purposes;

(e) Adequate space for visitation;

(f) Appropriate furnishings for the children in your facility; and

(q) Your license clearly posted (if inspection is for a renewal license).

(3) All facilities described in this chapter, (except for staffed residential homes for five or fewer children), are required to meet the health requirements to receive a certificate of compliance from the ((Washington state department of health (DOH))) DOH and the fire safety requirements from the ((Washington state patrol fire protection bureau (WSP/FPB))) <u>WSP/FPB</u>.

(4) You, your employees, and volunteers are required to submit, through the licensing provider portal, a negative tuberculosis (TB) test or an X-ray, unless you provide documentation of a negative TB test in the previous twelve months. If there is a positive TB test, then the individual must submit a physician's statement identifying that there is no active TB or risk of contagion to children in care.

(a) We may grant an exception to the TB test requirement, in consultation with a licensed health care provider.

(b) This exception would require a statement from a licensed health care provider (MD, DO, ND, PA or ARNP) indicating that a valid medical reason exists for not having a TB test.

(5) If you are being licensed to care for children under the age of two, you, your employees, and volunteers working in the facility caring for children under the age of two are required to provide, through the licensing provider portal, documentation verifying you have current pertussis and influenza vaccinations. The department may license you to serve children under the age of two even though you, your employees, or volunteers are unable to obtain an influenza vaccination for medical reasons. In this case, a licensed health care provider's statement is required noting that the influenza vaccination would result in severe medical consequences to the person and that there is no other form of the influenza vaccine that would not cause severe medical consequences. All other employees or volunteers must still be vaccinated. We recommend_L ((+)) but do not require $((+))_L$ these immunizations for you, your employees $_{\it L}$ and volunteers when you serve children age two and older.

(6) You must ((have)) submit, through the licensing provider portal, proof of current immunizations for any children living on the premises, not in out-of-home care. We may, in consultation with a licensed health care provider, grant exceptions to this requirement if you have a statement from a licensed health care provider ((+)), e.q., MD, DO, ND, PA or ARNP((+)).

[WSR 18-14-078, recodified as § 110-145-1335, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-145-1335, filed 8/19/16, effective 9/19/16. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, and 74.13.031. WSR 16-01-121, § 388-145-1335, filed 12/18/15, effective 1/18/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1335, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1340 How long do I have to complete the licensing application process? (1) You must complete your licensing application ((and submit)) by submitting all ((DLR)) required documents within ninety days of submitting the application through the licensing provider portal and background authorization forms to the department.

(2) If you do not meet this ((ninety-day)) 90-day deadline, your licensor may withdraw your application.

(3) As a courtesy, a renewal notification and renewal materials will be sent ((one hundred and twenty)) 120 days prior to your license expiration date. If you do not receive this renewal notice it is your responsibility to contact your licensor.

(4) You must send the renewal application and all required background authorization forms to your licensor at least ((ninety)) 90 days prior to the expiration of your current license.

[WSR 18-14-078, recodified as § 110-145-1340, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020,

13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1340, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1380 May a group care facility be issued more than one type of license? (1) A group care facility may not be licensed by ((DLR)) LD for more than one type of license in the same building (a group care facility and a CPA for example), unless the department determines that care of one type of client does not interfere with the care of another type of client, and you have approval from the ((DLR)) LD administrator. We may require separation of resident populations between the programs. You must meet the requirements for both licenses.

(2) If you have multiple licenses from different agencies in the same location, you must obtain approval from ((DLR)) LD prior to providing services and accepting placements.

[WSR 18-14-078, recodified as § 110-145-1380, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1380, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1385 When may I be certified to provide care to children? (1) When you meet the licensing requirements, you may apply to us through the licensing provider portal for certification of your facility, rather than a license, if the following conditions apply: (a) You are exempt from needing a license (((per)) <u>under</u> chapter 74.15 RCW((+)), and you wish to serve department-funded children; or

(b) You are licensed by authority of an Indian tribe within the state under RCW 74.15.190.

[WSR 18-14-078, recodified as § 110-145-1385, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1385, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1410 How do I appeal the decision of the office of administrative hearings' administrative law judge? (1) The decision of the administrative law judge is the final decision of the department unless you or the department files a petition for review with ((DSHS)) DCYF board of appeals within ((twenty-one)) 21 calendar days after the administrative law judge's decision is mailed to the parties.

(2) The procedure for requesting or responding to a petition for review with the board of appeals is described in ((WAC 388-02-0560 through 388-02-0635)) chapter 110-03 WAC.

(3) We will not appeal decisions made by the board of appeals.

(4) If you disagree with the board of appeals, you may file a petition in superior court and ask for further review (RCW 34.05.510 to 34.05.598).

[WSR 18-14-078, recodified as § 110-145-1410, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1410, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1480 What are the general ratios of staff to children under care? (1) You must have at least one case manager providing case management services for every ((twenty-five)) 25 children in care.

(2) If you provide care as a group receiving center, emergency respite center, or a resource and assessment center, you must have at least one case manager for every ((fifteen)) 15 children in care.

(3) If you provide care as a secure, semi-secure, and regular crisis residential center, you must have one case manager at a minimum, and must maintain a ratio of one case manager for every $((\frac{6}{2}))$ six children in care.

(4) Staffing ratios specific to your program are outlined in WAC ((388-145-1890 through 388-145-2200)) 110-145-1890 through 110-145-2200.

(5) If you have both a license and a contract for services, you must adhere to the most stringent staffing ratios.

(6) To keep the proper ratio of staff to children, the executive director, health care staff, on-site program manager, support staff_ and maintenance staff may serve temporarily as direct care staff if they meet all other direct care staff qualifications and training.

(7) You must have relief staff so that all staff can have the equivalent of two days off a week. This is not required for family members if you have a staffed residential facility in a family residence.

(8) Children must be supervised during sleeping hours by at least one awake staff when:

(a) There are more than six children in care; and

(b) The major focus of the program is behavioral rather than the development of independent living skills such as a teen parent program or responsible living skills program; or

(c) The behavior of at least one of the youth poses a risk to self or others.

(9) Staffing ratios may be higher than the minimum listed if necessary for the health and safety of children ((and/or)), staff, or both, or per contract requirement.

(10) You must have one back-up or on-call person available at all times to report to the facility as soon as possible but no later than ((thirty)) 30 minutes.

[WSR 18-14-078, recodified as § 110-145-1480, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1480, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1490 What ((is)) are the preservice training requirements for staff and volunteers ((having direct)) who directly care responsibility to ((children/youth)) children and youth? (1) Prior to having unsupervised ((contact with)) access to children, staff, and volunteers must have a minimum of ((sixteen)) 16 hours of preservice training, including policies and procedures, job responsibilities and facility administration. ((This))

(2) The requirement in subsection (1) of this section is in addition to required first aid and cardiopulmonary training (CPR) in WAC ((388-145-1500)) 110-145-1500 and required ((HIV/AIDS/bloodborne)) bloodborne pathogen training in WAC ((388-145-1505)) 110-145-1505.

(3) Preservice training must be relevant to the type of children and families and the program services you provide. Preservice training ((will usually)) may include ((the following)), but is not limited to:

(a) Child abuse and neglect identification and reporting requirements;

(b) Incident reporting;

(c) Accessing community resources;

- (d) Client confidentiality;
- (e) Family dynamics and family intervention techniques;
- (f) Licensing regulations specific to your facility;
- (g) Child development;
- (h) Grief and loss;
- (i) Cultural needs of children in care;
- (j) Sexually exploited youth;
- (k) Behavior management and crisis intervention techniques;
- (1) Conflict resolution or problem-solving skills;
- (m) Substance abuse;

(n) Sexually aggressive and physically aggressive((\neq)) and assaultive training;

- (o) Effects of trauma on children;
- (p) Youth supervision requirements; ((and))

(q) Fire safety and emergency planning; and

(r) Foundational LGBTQIA+ culture.

(((2) New)) (4) Newly hired staff and volunteers must work shifts with fully trained staff until the new staff and volunteers have completed all ((required)) preservice training requirements under this section.

[WSR 18-14-078, recodified as § 110-145-1490, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020,

13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1490, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1495 What is the in-service training requirement for staff and volunteers having responsibility to provide care to ((children/youth)) children and youth? (1) If you have employees in your agency, you must offer in-service training programs for developing and upgrading staff skills. If you have five or more employees or volunteers, your training plan must be in writing.

(2) Staff must complete a minimum of ((twenty-four)) 24 hours of ongoing education and in-service training annually. Training must be relevant to the problems experienced by the children you serve, ((which usually will)) and may include, but is not limited to:

(a) Crisis intervention techniques, including verbal deescalation, positive behavior support, and physical ((response/restraint)) response and restraint training as approved by the department;

(b) Behavior management techniques;

(c) Substance abuse;

(d) Suicide prevention, assessment, and intervention;

(e) Family intervention techniques;

(f) Indian child welfare and working with Native American children;

(q) Cultural diversity;

(h) Mental health issues and interventions;

(i) Mediation skills;

(j) Conflict ((management/problem solving)) management and problem-solving skills;

(k) Child abuse and neglect;

(1) Characteristics and management of sexually aggressive or otherwise predatory behavior and physically assaultive behavior;

- (m) Emergency procedures;
- (n) ((HIV/AIDS/bloodborne)) Bloodborne pathogens; ((and))
- (o) Fire safety and emergency planning; and
- (p) Foundational LGBTQIA+ culture.

(3) You must discuss with your staff updated policies and procedures_L as well as_L the rules contained in this chapter.

(4) Your training on behavioral management must be approved by DLR and must include nonphysical, age-appropriate methods of redirecting and controlling behavior.

(5) You must document all training including a description of the training provided and the date of the training. This information must be kept in each employee's file or in a separate training file.

[WSR 18-14-078, recodified as § 110-145-1495, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1495, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1505 What ((HIV/AIDS and)) bloodborne pathogens training is required? (1) You or any of your staff who provide supervision or direct care to children, must have training on ((HIV/AIDS, and)) bloodborne pathogens, including infection control standards.

(2) You must use infection control requirements and educational material consistent with the current approved curriculum published by the department of health, office on HIV/AIDS.

(3) Staff providing direct care to children must use universal precautions when coming in contact with the bodily fluids of a child.

[WSR 18-14-078, recodified as § 110-145-1505, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1505, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1510 What personnel records must I ((keep at my fa- cility)) submit to the department? (1) You must ((keep)) submit to the department, through the licensing provider portal, the following personnel records ((on file)) for each ((staff)) person who is employed by or volunteers at your facility((. You must keep the following)):

(a) An employment or volunteer application, including work and education history;

(b) Education documentation;

(c) Job description of the position at your facility;

(d) Signed confidentiality statement;

(e) Signed mandated reporter statement;

(f) A record of participation in the program's orientation

((and/or)) and preservice training and in-service training;

(g) Behavior management training documentation;

(h) ((First aid/CPR/HIV/AIDS/bloodborne)) First aid, CPR, and bloodborne pathogens training documentation;

(i) A copy of a food handlers permit, if applicable;

(j) A copy of a valid driver's license for staff transporting clients or employees;

(k) A copy of a government issued photo ID;

(1) A copy of current auto insurance ((+)) if using private vehicle to transport ((+));

(m) A log with background check information, containing dates of request and completion of the checks on all staff, interns, volunteers, and service contractors;

(n) A record of a negative Mantoux, tuberculin skin tests results, X-ray, or a medical exemption to the skin test or X-ray; and

(o) A record of required staff immunizations.

(2) You must maintain a written record of case consultation by a master's level consultant as defined in WAC ((388-145-1460)) <u>110-145-1460</u> for case managers with a bachelor's degree.

[WSR 18-14-078, recodified as § 110-145-1510, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1510, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1520 What are the requirements for children's records? (1) Any identifying and personal information about a child and the child's family must be kept confidential as required by chapter 26.33 RCW. These records must be kept in a secure place inaccessible to clients, unauthorized staff, and the public. Children's records must never be submitted to the department through the licensing pro-<u>vider portal.</u>

(2) During a child's placement, the child's record must be kept secure at the site.

(3) Your facility must attempt to obtain the following information for the child's record, as appropriate to your program:

(a) The child's name, birth date, and legal status;

(b) Name and telephone number of the child's ((DSHS worker and/ or)) DCYF caseworker or case manager and the child's tribal ICW case manager for each child in care, if appropriate;

(c) Written consent, if any, for providing medical care and emergency surgery ((+)) unless that care is authorized by a court order(()));

(d) Names, addresses, and telephone numbers of persons authorized to take the child in care out of the facility;

(e) Copies of the current legal authority to place, if any;

(f) Current case plans;

(q) Social summary;

(h) Documentation of a child's treatment provided by your staff with the signature of the person making the entry to the progress notes;

(i) Information related to suspected child abuse ((and/or)) or neglect referrals made to children's administration, including the concern, date and person taking the report;

(j) Intake procedures completed including an assessment of the youth's likelihood to stay in your facility;

(k) Date and time of orientation;

(1) A log and written report that identifies all incidents requiring physical restraints for a child;

(m) Any incident reports involving youth; and

(n) A copy of any discharge summaries and family assessments in the child's case record.

 $(((3) \text{ In addition}_{r}))$ (4) Your records must contain the following information if available:

(a) Names, ((address)) addresses, and telephone numbers of parents or persons to be contacted in case of emergency;

(b) Information on specific cultural needs of the child;

(c) Medical history including any medical problems, name of doctor, type of medical coverage and provider, date of any illnesses or accidents while at the facility;

(d) Mental health history and any current mental health, chemical dependency, and behavioral issues, including medical and psychological reports when available;

(e) Other pertinent information related to the child's health, including basic medical information, such as current prescription medications, immunizations, allergies, dental records ((and/or)), and eye exams;

(f) Child's school records, report cards, school pictures, and individual education plans (IEP), 504 plans;

(q) Special instructions including supervision requirements and suggestions for managing problem behavior;

(h) Inventory of the child's personal belongings at the time of placement;

(i) Approved list of individuals the child may have contact with;

(j) The child's visitation plan; and

(k) For pregnant and parenting youth, information on the ((mother/father)) mother and father of the youth's child, if available.

((((++))) (5) If a child's placement extends beyond ((seventy-two)) 72 hours, you must obtain the child's immunization records. If the child is not current with immunizations, they must be updated as soon as medically possible. Immunization records are not required to be current for children placed in:

(a) Interim facilities;

(b) Group receiving centers; or

(c) Crisis residential centers.

 $((\frac{5}{5}))$ <u>(6)</u> If you are unable to obtain this information from the department, you must document your attempt to obtain the requested information in the child's file.

[WSR 18-14-078, recodified as § 110-145-1520, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1520, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1530 What information can be shared about a child or a child's family? (1) Information about a child or the child's family is confidential and must only be shared with people directly involved in the case plan for a child.

(2) For children placed by the department, you may discuss information about the child, the child's family and the case plan only with:

(a) A representative of the department, including staff from ((DCFS, DLR and DDA)) CWP and LD;

(b) A representative of the department of health, the department of social and health services, the office of the state fire marshal, and the office of the family and children's ombuds;

(c) A group residential program staff;

(d) The child's attorney;

(e) The child's assigned guardian ad litem ((or court-appointed special advocate; and/or)); and

(f) Others designated by the child's ((DSHS worker)) <u>DCYF case-</u> worker.

(3) You may check with your child's ((DSHS worker)) DCYF caseworker for guidance about sharing information with the child's teacher, counselor, doctor, respite care provider, any other professional, or others involved in the case plan.

[WSR 18-14-078, recodified as § 110-145-1530, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1530, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1535 What incidents involving children must I re**port?** (1) You must report the following incidents immediately and in no instance later than ((forty-eight)) 48 hours after the incident to your local ((children's administration)) DCYF intake staff and the child's ((DSHS worker)) DCYF caseworker or ((child placing agency (CPA))) CPA case manager and the child's tribal Indian child welfare (ICW) case manager as applicable:

(a) Death, serious illness or injury, or psychiatric care that requires medical treatment or hospitalization of a child in care;

(b) Any time you suspect physical or sexual abuse, neglect, or exploitation of a child as required under chapter 26.44 RCW;

(c) Sexual contact between two or more children that is not considered typical play between preschool age children;

(d) Any disclosure by a child in care of sexual or physical abuse;

(e) Any child's suicide attempt that results in injury requiring medical treatment or hospitalization;

(f) Any use of physical restraint alleged to have been improperly applied or excessive;

(q) Physical assault between two or more children that results in injury requiring off-site medical attention or hospitalization;

(h) Physical assault of an employee, volunteer, or others by a child in care that results in injury requiring off-site medical attention or hospitalization;

(i) Any medication given or consumed incorrectly that requires off-site medical attention; or

(j) Property damage that is a safety hazard and not immediately corrected or may affect the children's health and safety.

(2) You must report the following incidents related to a child in care as soon as possible or in no instance later than ((forty-eight)) 48 hours after the incident, to the child's ((DSHS worker)) DCYF caseworker or CPA case manager and the child's tribal ICW case manager as applicable:

(a) Suicidal or homicidal thoughts, gestures, or attempts that do not require professional medical treatment;

(b) Unexpected health problems outside the usual range of reactions caused by medications that do not require professional medical attention;

(c) Any incident of medication incorrectly administered or consumed;

(d) Any professional treatment for emergency medical or emergency psychiatric care;

(e) Physical assault between two or more children that results in injury but does not require professional medical treatment;

(f) Physical assault of a foster parent, employee, volunteer, or others by a child that results in injury but does not require professional medical treatment;

(g) Drug or alcohol use by a child in your care;

(h) Any inappropriate sexual behavior $\bar{b}y$ or toward a child; or

(i) Use of prohibited physical restraints for behavior management.

(3) You must maintain a written record of any report with the date, time, and staff person who makes the report.

(4) Programs that provide care to medically fragile children who have nursing care staff on duty may document the incidents described in subsection ((s)) (2) (b) and (c) of this section in the facility daily logs, rather than contacting the ((DSHS worker)) <u>DCYF caseworker</u> or DSHS case manager and the child's tribal Indian child welfare (ICW) case manager, if agreed to in the child's case plan.

[WSR 18-14-078, recodified as § 110-145-1535, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-145-1535, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1535, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1540 What are my reporting responsibilities when a child is missing from care, ((+)) except for overnight youth shelters((+))? (1) As soon as you or your staff have reason to believe a child in your care is missing as defined in WAC ((388-145-1305 or)) 110-145-1305, has refused to return to or remain in your care, or whose whereabouts are otherwise unknown, you are required to notify the following:

(a) The child's assigned ((DSHS worker)) DCYF caseworker, as appropriate;

(b) ((CA)) <u>DCYF</u> intake, if the ((DSHS worker)) <u>DCYF caseworker</u> is not available or it is after normal business hours.

(2) You are required to ((contact)) notify local law enforcement within six hours if the child is missing. However, if one or more of the following factors is present, you must contact law enforcement immediately:

(a) The child is believed to have been taken from placement. This means the child's whereabouts are unknown, and it is believed that the child has been concealed, detained, or removed by another person;

(b) The child is believed to have been lured from placement or has left placement under circumstances that indicate the child may be at risk of physical or sexual assault or exploitation;

(c) The child is age thirteen or younger;

(d) The child has one or more physical or mental health conditions that if not treated daily will place the child at severe risk; (e) The child is pregnant or parenting and ((the infant/child))

their infant or child is believed to be with ((him or her)) them;

(f) The child has severe emotional problems (e.g., suicidal thoughts) that if not treated will place the child at severe risk; (g) The child has an intellectual and developmental disability

that impairs the child's ability to care for ((him/herself)) themselves;

(h) The child has a serious alcohol ((and/or)) or substance abuse problem; or

(i) The child is at risk due to circumstances unique to that child.

(3) After contacting local law enforcement, you must also contact the national center for missing and exploited children at ((1 (800)))843-5678)) <u>1-800-843-5678</u> and report the child missing from care.

(4) If the child leaves school or has an unauthorized absence from school, you should consult with the child's ((DSHS worker)) DCYF caseworker to assess the situation and determine when you should call law enforcement. If any of the factors listed in subsection((s)) (2)(a) through (i) of this section are present, you and the child's ((DSHS worker)) DCYF caseworker may decide it is appropriate to delay notification to law enforcement for up to four hours after the end of the school day to give the child the opportunity to return on their own.

(5) You must provide the following information to law enforcement and to the child's ((DSHS worker)) DCYF caseworker when making a missing child report, if available:

(a) When the child left;

(b) Last known location of the child;

(c) What the child was wearing;

(d) Any known behaviors or interactions that may have caused the child's departure;

(e) Possible places where the child may go;

(f) Special physical or mental health conditions or medications that affect the child's safety;

(q) Known companions who may be aware or involved in the child's absence;

(h) Other professionals, relatives, significant adults, or peers who may know where the child would go; and

(i) Recent photo of the child.

(6) You must ask law enforcement for the missing person report number and provide it to the ((CA DSHS worker)) <u>DCYF caseworker</u> or staff <u>and the child's tribal Indian child welfare (ICW) case manager</u>.

(7) At any time after making an initial report you learn of a missing child's whereabouts, you must report that information to the child's ((DSHS worker)) <u>DCYF caseworker and the child's tribal Indian</u> child welfare (ICW) case manager.

(8) If a child is returned to your care, it is your responsibility to cancel the run report and notify all persons you have informed of the child's return.

(9) Youth participating in the extended foster care (EFC) program are exempt from these requirements. You must follow all other reporting requirements as defined in WAC ((388-145-1535)) <u>110-145-1535</u>.

[WSR 18-14-078, recodified as § 110-145-1540, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-145-1540, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1540, filed 12/11/14, effective 1/11/15.1

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1545 What are my reporting requirements in my licensed facility serving runaway or homeless youth? ((((1))) If you are licensed as an overnight youth shelter or are otherwise licensed to provide residential services for runaway or homeless youth, and you learn that a youth staying in your facility does not have parental permission to be there, you or your staff must: (((a))) <u>(1)</u> Within ((seventy-two hours ()) <u>72 hours</u>, preferably

((twenty-four)) <u>24</u> hours((+)), notify the parent by telephone or other reasonable means unless compelling reasons exist. You must provide the youth's whereabouts, give a description of the youth's physical and emotional condition, and report the circumstances surrounding the youth's contact with your facility. You must document this notification in the youth's file.

(((b))) <u>(2)</u> If compelling reasons exist, you must notify ((children's administration)) DCYF intake. This includes reason to believe notifying the youth's parents will result in abuse or neglect of the youth as defined in RCW 26.44.020.

(((c))) <u>(3)</u> You or your staff must also review the public information on missing youth made available by the Washington state patrol at least once every eight hours while a youth is present at your facility. If a youth is listed as missing, you must immediately notify ((children's administration)) DCYF intake with the information listed in ((((1)(a) above)) subsection (1) of this section.

[WSR 18-14-078, recodified as § 110-145-1545, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1545, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1555 What does the department require for my buildings and property? (1) You must maintain your buildings, premises, and equipment in a clean and sanitary condition, free of hazards, and in good repair. You must furnish your facility appropriately, based on the age and activities of the children in your care. You must:

(a) Provide handrails for steps, stairways, and ramps if required by the department;

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(b) Have emergency lighting devices available and in operational condition;

(c) Provide appropriate furnishings, based on the age and activities of the children in your care;

(d) Have washable, water-resistant floors in bathrooms, kitchens, and other rooms exposed to moisture. Washable short-pile carpeting may be approved in kitchen areas if kept clean and sanitary;

(e) Provide tamper-proof or tamper-resistant electrical outlets or blank covers installed in areas accessible to children under the age of six or other persons with limited capacity or who might be endangered by access to them; and

(f) Have easy access to rooms occupied by children in case an emergency arises.

(2) You must have adequate indoor and outdoor space, ventilation, toilet and bathing facilities, light, and heat to ensure the health and comfort of all members of the household.

(3) The cleanliness and care of your premises must meet generally accepted health standards for the storage and preparation of food.

(4) You must make reasonable attempts to keep the premises free from pests, such as rodents, flies, cockroaches, fleas, and other insects using the least toxic methods.

(5) People must be able to easily open doors from the inside and outside in all areas of the facility that are occupied, unless the building or structure has a fire sprinkler protection system and was previously approved by the local fire marshal or building official with jurisdiction. This includes closets, bathrooms, and bedrooms. You must also have easy access to the outside in case of an emergency.

(6) Facilities must have nonbreakable light fixture covers or shatter-resistant light bulbs or tubes in food preparation and dining areas. ((DLR)) LD will review your facility to determine other areas that may be a concern for the safety of children.

(7) You must have an immediate plan to address hazardous conditions on your property or in your facility. The department may remove children from your care if hazardous conditions are not immediately remedied.

(8) Your facility must be accessible to emergency vehicles and your address must be clearly visible on your facility or mailbox so that first responders can easily find your location.

(9) Your facility must be located on a well-drained site, free from hazardous conditions. You must discuss with your licensor any potential hazardous conditions, considering the children's ages, behaviors, and abilities.

(10) You must have a working landline telephone at all times. Individuals calling your facility must be able to leave a message at all times.

(11) You must post emergency numbers and the physical address of the facility in an easily visible location near the telephone. This must include the Washington state poison control number (1-800-222-1222).

(12) Utility rooms with mop sinks that do not have windows opening to the outside must be ventilated with a mechanical exhaust fan to the outside of the building.

(13) The use of window blinds or other window coverings with pull cords capable of forming a loop and posing a risk of strangulation to children are prohibited under RCW ((43.215.360)) 43.216.380.

(14) Infants and toddlers are not allowed to use wheeled baby walkers.

[WSR 18-14-078, recodified as § 110-145-1555, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, and 74.13.031. WSR 17-22-039, § 388-145-1555, filed 10/24/17, effective 11/24/17. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1555, filed 12/11/14, effective 1/11/15.1

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1600 What are the general requirements for bedrooms? (1) Each child must have or share a bedroom, approved by the licensor, with privacy and space that is appropriate and adequate to meet the child's developmental needs.

(2) For facilities licensed after December 31, 1986, bedrooms must have:

(a) Adequate ceiling height for the safety and comfort of the occupants (((normally this would be)) typically, seven and ((a)) onehalf feet); and

(b) A window that can open to the outside, ((allowing)) allows natural light into the bedroom, and ((permitting)) permits emergency access or exit.

(3) Each bedroom must have unrestricted direct access to outdoors, as well as one direct access to common use areas such as hallways, corridors, living rooms, day rooms, or other common use areas.

(4) Approval may be granted to a building or structure that does not have direct access to the outdoors if it has a fire sprinkler protection system and was previously approved by the local fire marshal or building official with jurisdiction.

(5) You must not use hallways, kitchens, living rooms, dining rooms, or unfinished basements as bedrooms.

(6) You must not use common areas of the facility such as hallways, kitchens, living rooms, and dining rooms as bedrooms for anyone in the household without permission of the ((DLR)) <u>LD</u> licensor and ((DSHS worker)) <u>DCYF caseworker</u>, if applicable.

(7) An adult must be on the same floor or within easy hearing distance and access to where children under six years of age are sleeping.

[WSR 18-14-078, recodified as § 110-145-1600, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, and 74.13.031. WSR 17-22-039, § 388-145-1600, filed 10/24/17, effective 11/24/17. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1600, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1605 What are the requirements for sharing bedrooms? (1) A provider must consider what bedroom placement is in the best interest of a foster child in consultation with the child's DCYF caseworker.

(2) Shared bedrooms must provide enough floor space for the safety and comfort of children.

 $((\frac{(2)}{)})$ (3) When a teen parent and $((\frac{his}{her}))$ their infant sleep in the same room, the room must contain at least $((\frac{eighty}))$ 80 square feet of usable floor space. You must allow only one parent and $((\frac{in-fant(s)}{)})$ infants to occupy a bedroom.

(((3))) <u>(4)</u> No more than four children ((shall)) <u>can</u> sleep in the same room, with the exception of interim facilities. This includes foster children and any other children.

(((4))) (5) Children over age one may share a bedroom with an adult who is not the child's parent only if necessary for close supervision due to the child's medical or developmental condition and the child's licensed health care provider recommends it in writing.

(((5))) <u>(6)</u> An individual ((that is)) in the extended foster care program may share a bedroom with a <u>younger</u> child of the same gender. If the <u>younger</u> child is unrelated to the individual in the extended foster care program, the child must be at least ((ten)) <u>10</u> years of age. A provider may place a child who identifies as transgender, gender fluid, or both in a bedroom with a child of the same or similar gender identity.

(((6))) <u>(7)</u> Foster children may not share the same bedroom with a child of another gender <u>identity</u> unless all children are under age six. In circumstances of transgender, gender fluidity, or both, a provider may place a child in a bedroom with another child of the same or <u>similar gender identity</u>.

(((7))) (8) An exception may be granted to subsections (3) ((though (6))) through (7) in this section with an administrative approval if it is supported by the <u>LD</u> licensor ((-)) and the ((child(ren)'s DSHS worker)) children's DCYF caseworker, ((as)) if appropriate((+)), and is in the best interest of the child.

[WSR 18-14-078, recodified as § 110-145-1605, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-145-1605, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1605, filed 12/11/14, effective 1/11/15.]

<u>AMENDATORY SECTION</u> (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1610 What are the requirements for beds in a facility? (1) You must provide an appropriately sized separate bed for each child, with clean bedding and a mattress in good condition.

(2) Some children may soil the bed, and you may need to plan accordingly. You must provide waterproof mattress covers or moisture-resistant mattresses if needed. Each child's pillow must be covered with waterproof material or be washable.

(3) A mat may be used for napping but not as a substitute for a bed.

(4) You must provide an infant with a crib that ensures the safety of the infant, and complies with chapter 70.111 RCW, ((Consumer Product Safety Improvement Act of 2008)) Infant Crib Safety Act. These regulations include:

(a) A maximum of 2 and 3/8" between vertical slats of the crib; and

(b) Cribs, infant beds, bassinets, and playpens must be made of wood, metal, or approved plastic, with secure latching devices and clean, firm, snug fitting mattresses covered with waterproof material that can easily be disinfected.

(5) You must place infants on their backs for sleeping, unless advised differently by the child's licensed health care provider.

(6) You must not have loose blankets, pillows, crib bumpers, or stuffed toys with a sleeping infant.

(7) You may swaddle infants using one lightweight blanket upon the advice and training of a licensed health care provider. You must keep the blanket loose around the hips and legs when swaddling in order to avoid hip dysplasia. You may swaddle infants under two months of age unless a licensed health care provider directs otherwise. You must not dress a swaddled infant in a manner that allows them to overheat.

(8) You must not use wedges and positioners with a sleeping infant unless advised differently by the infant's licensed health care provider.

(9) You must not use weighted blankets for children under three years of age or for children of any age with mobility limitations.

(10) You may use a weighted blanket upon the advice and training from a licensed health care provider for children over the age of three years who do not have mobility limitations. You must meet the following requirements:

(a) The weight of the blanket must not exceed ((ten)) 10 percent of the child's body weight;

(b) Metal beads are choking hazards and must not be used in a weighted blanket;

(c) You must not cover the child's head with a weighted blanket or place it above the middle of the child's chest:

(d) The weighted blanket must not hinder a child's movement; and (e) The weighted blanket must not be used as a restraint.

(11) You must not allow children to use loft style beds or upper bunks if the child is vulnerable due to age, development, or condition, such as preschool children, expectant mothers, and children with a disability.

[WSR 18-14-078, recodified as § 110-145-1610, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-145-1610, filed 5/23/18, effective 6/23/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-145-1610, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1610, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1625 What are the requirements for the use of electronic monitors to monitor children? (1) ((CA)) DCYF prohibits the use of video and audio monitoring of children in the interior of a group residential facility unless all of the following are met:

(a) The ((DLR)) LD administrator grants approval for the use of an electronic monitoring device in your facility following a request by the child's ((DSHS worker)) DCYF caseworker;

(b) The court approves implementation of the monitoring as part of the child's case plan; and

(c) You maintain a copy of the approval.

(2) The prohibition of audio or visual monitoring does not include monitoring of the following:

(a) Infants or children through four years of age;

(b) Medically fragile or sick children;

(c) Video recording equipment to document actions of a child as directed in writing by the child's physician;

(d) Video recording for special events such as birthday parties or vacations; or

(e) The use of door or window alarms or motion detectors.

[WSR 18-14-078, recodified as § 110-145-1625, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-145-1625, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1625, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1630 Are time-delay mechanisms allowed on windows and doors? (((1))) The use of time-delay mechanisms on windows and doors of a group care facility (except for staffed residential homes licensed for five or fewer children) may be approved if:

((-(a))) (1) They meet the fire codes and approval of the WSP/FPB; $((\frac{b}{b}))$ There is an exterior door $((\frac{b}{b}))$ that ensures escape in the event of an evacuation;

(((c))) (3) The time-delay ((mechanism(s))) mechanisms automatically unlock((s)) when the fire alarm goes off;

(((d))) (4) The licensee has approval from the ((DLR)) <u>LD</u> licensor stating that the program is in compliance with ((the children's administration's)) DCYF's behavior management guidelines; and

(((e))) <u>(5)</u> The licensee has written approval ((of the DLR)) <u>from</u> the LD administrator.

[WSR 18-14-078, recodified as § 110-145-1630, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1630, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1660 Are guns allowed on a licensed facility's property? (1) You must not permit guns, ammunition, and other weapons on the premises of your facility, with the exception of law enforcement. (2) You may allow a child under your care to use a firearm only

if:

(a) The child's ((DSHS worker)) DCYF caseworker approves;

(b) The youth has completed an approved gun safety or hunter safety course; and

(c) Adults who have completed a gun or hunter safety course are supervising use.

[WSR 18-14-078, recodified as § 110-145-1660, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1660, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1665 What are the fire safety requirements for all group residential facilities? (1) You must comply with the regulations developed by the ((chief of the Washington state patrol through the director of the fire protection bureau ())WSP/FPB(()). These regulations are contained in the current fire code and Washington state amendments as adopted by the state of Washington. Contact the WSP/FPB for specific requirements.

(2) If you operate a staffed residential home for five or fewer children you must meet the fire safety requirements outlined in chapter ((388-148)) 110-148 WAC for child foster homes.

(3) You and your staff must be familiar with safety procedures related to fire prevention, including fire drill procedures. (4) You and your staff must be able to:

(a) Operate all fire extinguishers installed on the premises;

(b) Test smoke detectors ((+)), more specifically, single station types((+));

(c) Conduct frequent inspections at your facility to identify fire hazards and take action to correct any hazards noted during the inspection;

(d) Ensure children are able to escape from every floor in your facility ((+)). In most cases, this includes a functional fire ladder available from upper stories ((+)); and

(e) Ensure windows open to the outside and are large enough for emergency personnel to enter and exit wearing rescue gear, unless the building or structure has a fire sprinkler protection system and was previously approved by the local fire marshal or building official with jurisdiction.

(5) You must have easy access to all rooms in your facility in case of emergencies.

(6) Barriers are required for fireplaces, wood stoves, and other heating systems for facilities licensed for children less than six

years of age. You must not leave open-flame devices unattended or use them for a purpose other than for what they were designed.

(7) Emergency vehicles must be able to access your facility. Your address must be clearly visible on your facility or mailbox so that emergency personnel can easily find your location.

(8) We may require you to have an inspection by WSP/FPB or the local fire authority if we have questions about fire safety, or if local ordinances or WSP/FPB require these inspections.

[WSR 18-14-078, recodified as § 110-145-1665, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, and 74.13.031. WSR 17-22-039, § 388-145-1665, filed 10/24/17, effective 11/24/17. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1665, filed 12/11/14, effective 1/11/15.1

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1700 What must I include in a child's orientation to my facility? (1) As part of admission, staff must give an orientation to all children over the age of six_{L} ((+)) as developmentally appropriate(($\frac{1}{1}$ that)). The orientation will include(($\frac{1}{1}$)), but (($\frac{1}{1}$)) not be limited to:

(a) A description of the program and services;

(b) A map ((and/or)) or tour of the physical facility;

(c) A review of your fire evacuation plan;

(d) The department-approved policy that states that a child may not have guns and other weapons, alcohol, tobacco, and drugs within the facility;

(e) Orientation on personal protection and personal boundaries; and

(f) The department-approved policy on client visitation that includes access to the youth's attorney and ((DSHS worker)) DCYF caseworker.

(2) Written documentation of this orientation must be kept in each child's file.

[WSR 18-14-078, recodified as § 110-145-1700, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1700, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1710 What are the requirements about nondiscrimina-(1) You must follow all state and federal laws regarding nontion? discrimination while providing services to children in your care.

(2) You must ((treat)) support and engage foster children in your care with dignity and respect regardless of actual or perceived race, ethnicity, culture, ((sexual orientation and gender identity)) sex, or SOGIE.

(3) You must connect a child with resources that ((meets a)) supports the child's needs regarding race, religion, culture, ((sexual orientation)) and ((gender identity)) SOGIE.

[WSR 18-14-078, recodified as § 110-145-1710, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1710, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1730 What are the educational and vocational instruction requirements for children placed by the department, ((+)) except interim facilities(()))? (1) You must meet the following requirements for providing education and vocational instruction to the children placed by the department. For each child you must:

(a) Follow the educational plan approved by the child's ((DCFS worker)) DCYF caseworker;

(b) Support the child in regular school attendance. If a child is absent from school you must follow the school's reporting requirements. Notify the child's ((DSHS worker)) DCYF caseworker if the child is absent from school more than three consecutive school days;

(c) Receive approval from the child's ((DCFS worker)) DCYF caseworker prior to making any changes to a child's educational plan;

(d) Support the child's educational plan by providing each child with necessary school supplies and a suitable place to study;

(e) Develop a plan for a child's transportation to and from school;

(f) Provide or arrange for independent living skills education for developing self-sufficiency for children over the age of ((fifteen)) <u>15</u> years; and

(g) Encourage older youth to pursue a post-secondary education when appropriate.

(2) If the instruction is given on your premises, you must:

(a) Receive approval from the child's ((DSHS worker)) DCYF caseworker if the child is placed in your care by the department;

(b) Have the program certified by the office of the superintendent of public instruction (OSPI) and provide classrooms separate from the living area; and

(c) Send ((DLR)) LD a written description of how you will provide an educational program for children under your care.

(3) If a child is not enrolled and attending school within three consecutive school days after being placed in your care, you must contact the child's school and ((DSHS worker)) DCYF caseworker in order to develop a plan which could involve long distance learning if appropriate.

[WSR 18-14-078, recodified as § 110-145-1730, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW

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74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1730, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1740 Can children in my care receive services through the extended foster care program? Your facility can serve youth enrolled in the extended foster care program. You must adhere to WAC ((388-25-0500 through 388-25-0548)) 110-90-0010 through 110-90-0200.

[WSR 18-14-078, recodified as § 110-145-1740, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1740, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1750 What are the requirements for supervising children? (1) You must provide and arrange supervision that is appropriate for the child's age, and developmental level including:

(a) Appropriate adult supervision including ongoing and periodic checks of the children in your facility;

(b) Personal attention;

(c) Emotional support;

(d) Structured daily routines and living experiences; and

(e) Additional supervision as needed and required by the department. This supervision may require auditory or visual supervision at all times.

(2) You must also ensure that:

(a) Children under five years of age and children who are vulnerable due to their disability are not left unattended in a bathtub or shower;

(b) Cribs, bassinets, cradles, playpens, and swings are not used as a substitute for supervising or interactive play with infants and young children;

(c) Children who help with activities involving food preparation are supervised based on their age and skills;

(d) Children are assisted to develop self-control and judgment skills; and

(e) Children are encouraged to assume age-appropriate responsibility for their decisions and actions.

(3) Prior to placement, you must inquire if a child poses a risk to the other children in your facility or has special supervision needs by obtaining information from the parent($(\frac{1}{r} - \log a)$) or guardian, the child's ((DSHS worker)) DCYF caseworker, therapist, or previous placements. You must also:

(a) Develop a plan to address those needs;

(b) Obtain approval <u>for the plan</u> from the child's ((DCFS worker)) DCYF caseworker if the child is under the care and authority of the department; and

(c) Inform your licensor of the plan.

(4) All high-risk activities, including the use of power driven machines or other hazardous equipment, must be properly supervised by an adult. When participating in high-risk activities, children must:

(a) Be instructed how to use and required to use appropriate safety equipment, such as helmets and life vests; and

(b) Be in continuous visual or auditory range at all times, unless approved by the child's ((DSHS worker)) DCYF caseworker.

[WSR 18-14-078, recodified as § 110-145-1750, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1750, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1760 What are the travel requirements for children in care? You must get written approval from the child's ((DCFS worker)) DCYF caseworker for children in the care and custody of the department, or the child's parent or quardian for ((the)) children not in the department's care and custody prior to any travel over ((seventy-two)) 72 hours, and any out-of-country travel.

[WSR 18-14-078, recodified as § 110-145-1760, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1760, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1775 What belongings must be provided to a child leaving my facility? (1) You must permit a child who leaves your facility to take their personal belongings with them. This includes belongings the child brought with them or acquired in your care, such as clothing, mementos, bicycles, gifts, and any saved money.

(2) If it is not possible for the child to take their belongings at the time they leave, you are required to secure them for up to ((thirty)) 30 days and cooperate with the child's ((DSHS worker)) DCYF caseworker to transfer them to the child, as soon as possible.

[WSR 18-14-078, recodified as § 110-145-1775, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1775, filed 12/11/14, effective 1/11/15.]

WAC 110-145-1795 How often do children need to be provided meals? You must provide all children a minimum of three meals and two snacks in each ((twenty-four)) 24-hour period. You may vary from this guideline only if you have written approval from the child's physician and ((DSHS worker)) DCYF caseworker.

[WSR 18-14-078, recodified as § 110-145-1795, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1795, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1800 What are the requirements for handling a child's special diet? You must have approval of the child's ((DSHS worker)) DCYF caseworker and written instructions by a physician, parent or guardian before serving nutrient concentrates, nutrient supplements, vitamins, and modified diets ((+)), such as therapeutic and allergy diets((+)).

[WSR 18-14-078, recodified as § 110-145-1800, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1800, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1805 Are there special requirements for serving milk? (1) The milk or milk products you serve must be pasteurized and follow these recommended guidelines:

(a) Children under the age of ((twelve)) 12 months must receive formula or breast milk unless written authorization from the child's licensed health care provider requires a different liquid intake; and

(b) Children between the age of ((twelve)) <u>12</u> and ((twenty-four)) 24 months must receive whole milk unless you have written authorization from a licensed health care provider not to serve whole milk.

(2) Before serving a child breast milk you must have approval of the child's ((DSHS worker)) DCYF caseworker, licensed health care provider, and parent or guardian. If breast milk is provided by anyone other than a baby's biological mother, it must be obtained through a licensed breast milk bank.

(3) When you are using bottles to feed infants you must sterilize and use them according to product standards and commonly acceptable practices. You must refrigerate filled bottles if you do not use them immediately, and you must empty the bottle if not used within ((twen-

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ty-four)) 24 hours. If more than one child is bottle-fed, the child's name and date the bottle is prepared must be on each bottle.

(4) You must hold infants $(\overline{\tau})$ under the age of six months $(\overline{\tau})$ for all bottle feedings. Infants who are six months of age or over who are developmentally able may hold their own bottles as long as an adult remains in the room and within sight. You must take bottles from the child when the child finishes feeding, when the bottle is empty, or when the child falls asleep. You must not prop bottles when feeding infants.

(5) To prevent burns, formula or breast milk must not be warmed in a microwave oven.

[WSR 18-14-078, recodified as § 110-145-1805, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832, and 2017 c 20 § 4. WSR 18-05-037, § 388-145-1805, filed 2/13/18, effective 3/16/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1805, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1815 Are written policies and procedures required describing a facility's discipline methods? (1) You must provide a written statement with your application and reapplication for licensure describing the discipline methods you use. This plan must be approved by your ((DLR)) LD licensor.

(2) You and authorized care providers have the responsibility for discipline; you may not delegate that responsibility to a child.

(3) You must not withhold a child's need for necessary services including contact with the child's ((DSHS worker)) DCYF caseworker, case manager, and legal representatives. You must not withhold approved contact with a child's family, without further approval from the child's ((DSHS worker)) DCYF caseworker.

(4) For additional information you may refer to ((the children's administration's)) DCYF's behavior management ((guide)) guidelines.

(5) If your discipline methods change, you must immediately provide a new statement to your LD licensor describing your current practice.

(6) You must use positive methods of guidance and discipline that promote self-control, self-responsibility, self-direction, self-esteem, and cooperation. Positive methods may include:

(a) Redirecting children;

(b) Giving choices when appropriate;

(c) Time-out as a method of quidance, ((allowing the child)) to allow children time to change ((his/her)) their behavior;

(d) Planning in order to prevent problems; and

(e) Using positive reinforcement and encouraging children to express their feelings and ideas.

(7) You must use discipline that is appropriate to the child's age and level of development.

(8) You must not use corporal punishment or verbally abusive, neglectful, humiliating, or frightening punishment.

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(9) You must not discipline children in the following ways:

- (a) Physical punishment;
- (b) Cursing;
- (c) Threats;
- (d) Humiliation or intimidation; or

(e) Methods that interfere with a child's basic needs, including withholding of food.

[WSR 18-14-078, recodified as § 110-145-1815, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1815, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1820 When may a child be restrained? (1) You must use efforts other than physical restraint to redirect or deescalate a situation, unless the child's behavior poses an immediate risk to the physical safety of the child or another person, or of serious property damage. If restraint is necessary, it must be reasonable and necessary to:

(a) Prevent a child from harming self or others; or

(b) Protect property from serious damage.

(2) All staff must be trained in ((a DLR)) an LD-approved behavior management training prior to using physical restraint.

(3) You must not use physical restraint as a form of punishment or discipline. You must not use mechanical restraints unless ordered by the child's physician and approved by the department. You must not use physical restraint techniques that restrict breathing, ((or)) inflict pain as a strategy for behavior control, or is likely to cause injury that is more than temporary. These include, but are not limited to:

(a) Restriction of body movement by placing pressure on joints, chest, heart, or vital organs;

(b) Sleeper holds, which are holds used by law enforcement officers to subdue a person;

(c) Arm twisting;

(d) Hair holds;

(e) Choking or putting arms around the throat; or

(f) Chemical restraints, such as pepper spray.

(4) When you have to use physical or mechanical restraints on a regular basis, you must get prior written approval from the child's ((DSHS worker)) DCYF caseworker and approval by your ((DLR)) LD licensor.

(5) You must develop policies and procedures, approved by the department, when your behavior management practices include use of physical restraint, including:

(a) Who may authorize the use of physical restraint; and

(b) The circumstances when physical restraint may be used, including time limitations, reevaluation procedures, and supervisory monitoring.

[WSR 18-14-078, recodified as § 110-145-1820, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1820, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1825 What must I do following an incident that involved using physical restraint? (((-1))) Your executive director or program supervisor must:

((-(a))) (1) Review any incident with the staff who used physical restraint to ensure that the decision to use physical restraint and its application were appropriate; and

(((b))) <u>(2)</u> Report the incident if it meets the criteria listed in WAC ((388-145-1535)) 110-145-1535.

[WSR 18-14-078, recodified as § 110-145-1825, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1825, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1830 Are there requirements for time-out or quiet ((((1))) Locked time-out or locked deescalation rooms are prorooms? hibited in all facilities. In certain circumstances, facilities may have time-out rooms or deescalation rooms that allow for securing the youth in a room, requiring a staff to be present, holding the door closed so the youth may not exit. In these cases you must meet the following requirements:

(((a))) <u>(1)</u> Have a window that allows for visual monitoring of all areas of the room;

(((b))) (2) Have approval from the ((Washington state patrol fire protection bureau)) WSP/FPB or a certificate of compliance stating that the facility is in compliance with the fire codes with Washington state amendments;

((-+)) (3) Have approval from the ((-+)) LD licensor stating the facility is in compliance with the ((children's administration's)) <u>department's</u> behavior management guidelines; and

(((d))) (4) Have current written approval of the ((DLR)) LD administrator.

[WSR 18-14-078, recodified as § 110-145-1830, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1830, filed 12/11/14, effective 1/11/15.]

WAC 110-145-1835 Am I required to assess a child's need for immediate medical attention? (1) When a child first enters out-of-home $care_{L}$ ((+))other than overnight youth shelters(() you must ensure that a child receives)), an initial health screen ((or physical exam)) is required as soon as possible, but no later than five days after ((the child enters)) entering your program. ((The initial health screen involves a review of the child for any health needs requiring immediate attention.)) You do not need to take a child to get this screen if you received the child directly from a hospital, pediatric interim care, or the child is receiving services through a child advocacy center or sexual assault clinic.

(2) You must also make reasonable attempts to obtain the following health history:

(a) Allergies;

(b) All currently prescribed medications; and

(c) Any special physical or mental health issues.

(3) If the child remains in placement beyond ((seventy-two)) 72 hours, you must contact the child's ((DSHS worker)) DCYF caseworker, $((\frac{\text{child placing agency}})) \underline{CPA}, \underline{or} \text{ parent}((\tau)) \text{ or } ((\frac{\text{legal}}{\text{legal}})) \text{ guardian to}$ obtain the following information:

(a) The date of the child's last physical and dental exams;

- (b) ((A)) Their history of immunizations; and
- (c) Clinical and medical diagnoses and treatment plans.

(4) When a child leaves the facility, the health history of the child must be provided to the child's ((DSHS worker)) DCYF caseworker or the next caregiver.

(5) You should refer to the department of health's dental care brochures, Publications Nos. 920-923 through 920-928, as ((a)) guides for ((ensuring)) maintaining proper dental care for children.

[WSR 18-14-078, recodified as § 110-145-1835, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-145-1835, filed 5/23/18, effective 6/23/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1835, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1840 When must I get an early and periodic screening, diagnosis, and treatment (EPSDT) exam for a child? Children who are in out-of-home care must receive an ((early and periodic screening, diagnosis and treatment ()) EPSDT(()) exam within ((thirty)) 30 days, unless they have had an EPSDT exam in the previous ((thirty)) 30 days, except for overnight youth shelters and children placed by DDA through a voluntary placement agreement. Children also receive subsequent periodic EPSDT exams; information on these required exams may be obtained from the child's ((DCFS worker)) DCYF caseworker.

[WSR 18-14-078, recodified as § 110-145-1840, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1840, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1845 What are the requirements for obtaining consent for ((emergent)) emergency and routine medical care? (1) The department is the legal custodian for children it places in care. We have the authority to consent to ((emergent)) emergency and routine medical services on behalf of a child under the age of ((eighteen)) 18. Youth in care over the age of ((eighteen)) 18 must consent to their own medical care or have an identified person who has been granted the legal authority to consent on their behalf. We delegate some of the authority to providers. You must contact the child's ((DSHS worker or children's administration)) DCYF caseworker or intake for specific information for each child.

(2) If you care for children in the custody of another agency, tribal court or other court, you must follow the direction of that agency or court regarding permission to provide consent for medical care.

(3) In case of medical emergency, contact the child's ((DSHS worker or children's administration)) DCYF caseworker and the child's tribal ICW case manager or intake as soon as possible.

(4) It is your responsibility to ensure that a child receives the necessary medical attention if injured or harmed. In the event of a life-threatening medical emergency, you must contact 911 prior to transporting the child to a medical facility.

[WSR 18-14-078, recodified as § 110-145-1845, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1845, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1855 What are the general requirements for managing a child's medication? (1) Medication must not be used for behavior control, unless prescribed for that purpose by a physician or another person legally authorized to prescribe medication.

(2) Only you, a licensed foster parent, or another authorized care provider, such as a respite provider, are allowed to have access to medications for a child in your care.

(3) You must not use medication in an amount or frequency other than that prescribed by an appropriately licensed health care provider or psychiatrist.

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(4) You must not reduce or stop a child's prescribed medication without the written approval of the child's physician. You must report this information to the child's ((DSHS worker)) DCYF caseworker. In addition to the physician, you must coordinate starting or stopping a child's psychotropic medication with the child's ((social worker)) DCYF caseworker to determine what consent is needed. The ((social worker)) DCYF caseworker may need to obtain consent from the child age ((thirteen)) 13 or older, the parent or guardian, or the court.

(5) You must follow the direction of the agency or court regarding giving or applying prescription and nonprescription medications if you care for children in the custody of another agency, or tribal or other court. If this is in conflict with ((children's administration)) the department's policy, you must notify the child's ((DCFS worker)) DCYF caseworker.

(6) You must not give medications to a child that has been prescribed for someone else.

(7) You must keep a record of all prescription and nonprescription medications given to children in care. This documentation includes:

- (a) Child's name;
- (b) Time of medication;
- (c) Dosage of medication; and
- (d) Name of person administering medication.

(8) You must obtain a signature from a licensed health care provider within ((seventy-two)) 72 hours of obtaining a medication order by phone.

[WSR 18-14-078, recodified as § 110-145-1855, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-145-1855, filed 5/23/18, effective 6/23/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1855, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1875 Can I accept medication from a child's parent or guardian? (1) The only medicine you may accept from the child's parent, guardian, or responsible relative is medicine in the original container labeled with:

- (a) The child's first and last name;
- (b) The date the prescription was filled;
- (c) The medication's expiration date; and

(d) Legible instructions for administration (manufacturer's instructions or prescription label) of the medication.

(2) You must notify the child's ((DSHS worker)) <u>DCYF caseworker</u> if you have any concerns about medication being provided to you by the child's parent ((or)), guardian, or relative.

[WSR 18-14-078, recodified as § 110-145-1875, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020,

13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1875, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1880 When may children take their own medicine? (1)You may permit children under your care to take their own medicine as long as:

(a) They are physically and mentally capable of properly taking the medicine;

(b) You monitor that the youth is taking the medication according to the prescription or manufacturer's instructions to ensure proper amount and frequency; and

(c) You must keep the written approval by the child's ((DSHS worker)) DCYF caseworker in your records.

(2) When a child is taking their own medication, the medication and medical supplies must be kept locked or inaccessible to unauthorized persons.

(3) In emergency respite centers, a parent or guardian may provide written approval.

(4) In overnight youth shelters, youth may take their own prescription or nonprescription medications if you follow the require-ments outlined in subsection (1)(a) and (b) in this section.

[WSR 18-14-078, recodified as § 110-145-1880, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1880, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1885 What are the immunization regulations? (1) Immunization standards for all children in your facility are based on the advisory committee for immunizations practices of the Center for Disease Control (ACIP/CDC). Children placed in your care by the department are required to be immunized according to advisory committee on immunization practices as established in the recommended immunization schedule for persons Aged 0-18 Years, United States, 2012 and as amended each subsequent year, except for rotavirus and human papilloma virus.

(2) Except for overnight youth shelters, if a child who has not received all recommended immunizations is placed in your care, you must take the child to a health care provider as soon as medically possible for catch-up immunizations according to the ACIP/CDC catch-up schedule.

(3) You must contact each child's ((DSHS worker)) DCYF caseworker and your LD licensor if a serious infection or a communicable disease is a threat to the children in your care. The department may remove a foster child from your facility when the threat of a serious infection or communicable disease creates a risk to the health of any child placed in your facility.

[WSR 18-14-078, recodified as § 110-145-1885, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1885, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1915 What are the requirements for secure CRCs? ((-(1))) Secure CRCs must meet each of these requirements: (((a))) <u>(1)</u> Be a free-standing facility, separate unit, or sepa-

rate building within a campus;

(((b))) <u>(2)</u> Maintain a recreation area as outlined in WAC ((388-145-1570 and 388-145-1575)) 110-145-1570 and 110-145-1575.

[WSR 18-14-078, recodified as § 110-145-1915, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1915, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-1930 What steps must be taken after a youth is admitted into any CRC? (1) You must notify the parents or guardians of the youth who has been admitted to the CRC if the youth is not under the care and authority of the department. If you are unable to contact the youth's parents or quardians within ((forty-eight)) 48 hours, you must:

(a) Contact the department and request that the case be reviewed for dependency filing under chapter 13.34 RCW or "child in need of services" filing under chapter 13.32A RCW; and

(b) Document this information in the youth's case file.

(2) You must notify ((CA)) <u>DCYF</u> intake of the youth's admission to the CRC within ((twenty-four)) 24 hours of admission.

(3) If you decide that a youth is unlikely to stay in a regular facility, you must make reasonable efforts to transfer the youth to a secure facility.

[WSR 18-14-078, recodified as § 110-145-1930, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1930, filed 12/11/14, effective 1/11/15.]

WAC 110-145-1960 What additional recordkeeping is required for all CRCs? (1) In addition to meeting the reporting requirements listed in WAC ((388-145-1535 through 388-145-1550)) 110-145-1535 through 110-145-1550, you must also maintain for a minimum of six years, the following:

(a) Hourly logs of where the child is physically located;

- (b) Records of a multidisciplinary team, if convened;
- (c) The time and date a placement is made;
- (d) The names of the person and agency making the placement; and
- (e) Reasons for the placement.

(2) If the child has a ((DCFS worker)) DCYF caseworker, you must send the ((DCFS worker)) DCYF caseworker the following information within seven days of the child's discharge. The information must include a written summary that addresses the following:

- (a) Community-based referrals;
- (b) Assessment information on the family and child;
- (c) Family reconciliation attempts;
- (d) Contacts with families and professionals involved;
- (e) Medical and health related issues; and
- (f) Any other concerns, such as legal issues and school problems.

[WSR 18-14-078, recodified as § 110-145-1960, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-1960, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2000 Can my emergency respite center have more than one type of license? If you are licensed by ((the division of licensed resources (DLR))) LD as an emergency respite center, you may also be licensed as a child care center ((by the department of early learning (DEL))) under the provisions of chapter 110-300 WAC. You must meet the requirements for both licenses and have written department approval ((for both)) to hold dual licenses ((from DLR and DEL)).

[WSR 18-14-078, recodified as § 110-145-2000, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2000, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2060 What are the requirements for supervision of children at my group receiving center? (1) Children must be within visual or auditory range at all times during waking hours.

(2) You must ensure that staff providing direct care and supervision of the children are free of other administrative duties at the time of care.

(3) When a child is known to have exhibited behavior that poses a safety risk to other children, you must develop a safety and supervision plan with the child's ((DSHS worker)) DCYF caseworker to address the risk.

[WSR 18-14-078, recodified as § 110-145-2060, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2060, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2065 What services must I provide for medically fragile children? (1) Your licensed group home or staffed residential facility may also provide specialized care, to medically fragile children who need intensive personal care. The children may require skilled health care, physical therapy, or other forms of therapy.

(2) If you are serving this population as a specialty, you must ensure the following services are provided, if prescribed by a physician:

(a) An individualized treatment plan suited to the unique needs of each child in care;

(b) Care by physicians, including surgeons, general and family practitioners, and specialists in the child's particular diagnosis on either a referral, consultative, or ongoing treatment basis;

(c) Sufficient nursing staff to meet the nursing care needs of the children, including at least one registered nurse licensed ((with)) by the state of Washington;

(d) Regular nursing consultation that includes at least one weekly on-site visit by a registered nurse, who initially assesses each child and updates the assessments as needed on subsequent visits. These assessments and updates must be documented. You must also keep records of the weekly on-site visits;

(e) Your nursing consultant must advise you and your staff on your infant care program, $\left(\left(\frac{1}{2}\right)\right)$ if $\left(\left(\frac{1}{2}\right)\right)$ applicable, and develop a written agreement with you about your child health program. The consultant must also advise and assist ((non-medical)) nonmedical staff at your facility in maintaining child health records, meeting daily health needs, and caring for children with minor illnesses and injuries;

(f) The nurse's name and telephone number must be posted or otherwise available in your home or facility;

(g) If you care for four or more infants, you must arrange for monthly on-site visits with a registered nurse that is trained or experienced in the care of young children; and

(h) If you care for children with intellectual and developmental disabilities requiring nursing services, you must have a registered nurse on staff or under contract.

[WSR 18-14-078, recodified as § 110-145-2065, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2065, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2070 What recordkeeping requirements exist for medically fragile children? ((((1))) In addition to meeting standard requirements for keeping records per WAC ((388-145-1520 and 388-145-1525)) <u>110-145-1520</u> and <u>110-145-1525</u>, you must also keep the following information for medically fragile children that have been in placement for more than ((thirty)) 30 days in your facility:

((((a))) (1) Report of a physical examination and diagnosis by a physician and information about the child's daily care including treatment plans, medications, observations, medical examinations, physicians' orders, proper treatment for allergic reactions, consent authorizations, releases, diagnostic reports, and revisions of assessments;

(((b))) (2) Upon discharge, a summary including diagnoses, treatments, and prognosis by the person responsible for providing care, and any instructions and referrals for continuity of care; and

((-(-))) (3) Evidence of meeting criteria for eligibility for services from the developmental disabilities administration, if appropriate.

[WSR 18-14-078, recodified as § 110-145-2070, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2070, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2095 What steps must I take when a youth first enters an overnight youth shelter? ((-(1))) When a youth first enters an overnight youth shelter, you must:

(((a))) <u>(1)</u> Determine whether the parents <u>or guardians</u> are aware of the whereabouts of the youth;

(((b))) <u>(2)</u> Follow reporting requirements in WAC ((388-145-1545)) 110-145-1545; and

(((c))) <u>(3)</u> Notify the police or ((children's administration)) DCYF intake (either the local CPS number or toll-free 1-886-ENDHARM) of any youth ((twelve)) 12 years of age or younger who is unaccompanied by an adult and is requesting service, and you are unable to serve the child due to ((his or her)) their age.

[WSR 18-14-078, recodified as § 110-145-2095, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW

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74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2095, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2100 What services must be offered at an overnight youth shelter? (1) At a minimum, all overnight youth shelters must offer an intake assessment on the youth including:

(a) Emergency telephone number contacts (((phone numbers)));

(b) Areas of possible problems, such as medical problems, family situation and suicide evaluation;

- (c) History of assault or predatory behavior; and
- (d) Drug ((and/or)) and alcohol involvement.
- (2) You must also assess the youth's:
- (a) Outstanding warrants;
- (b) Physical and medical needs, including medication;
- (c) School status;
- (d) Immediate needs for counseling; and
- (e) Options for the near future.
- (3) You must also offer a youth the following:
- (a) Individual crisis intervention;

(b) Assistance in accessing emergency resources, including child protective services (CPS) and emergency medical services;

- (c) Resource information;
- (d) Educational or vocational services;
- (e) Housing information;
- (f) Medical care or services;
- (q) Substance abuse services;
- (h) Mental health services;
- (i) Information regarding other treatment agencies;
- (j) Food programs;
- (k) Disability services; and
- (1) Other ((DSHS)) <u>DCYF</u> services.

(4) If the overnight youth shelter cannot directly provide these services, staff must have information for referrals to programs or organizations that would provide these services to youth.

[WSR 18-14-078, recodified as § 110-145-2100, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2100, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2145 What are the facility and room requirements for programs offering services for pregnant and parenting youth? (1) If you have a residential program for pregnant and parenting youth with infants, you must meet the room requirements for group care facilities, per WAC ((388-145-1600 through 388-145-1605)) 110-145-1600 through 110-145-1605.

(2) If your facility offers medical clinics, you must have a separate, adequately equipped examination room with adequate nursing equipment.

[WSR 18-14-078, recodified as § 110-145-2145, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2145, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-145-2180 Who may place children at an RAC? A ((DCFS worker)) DCYF caseworker may place a child in a resource and assessment center. These centers may not be used to address placement disruptions for children being removed from a foster home or group care facility.

[WSR 18-14-078, recodified as § 110-145-2180, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-145-2180, filed 12/11/14, effective 1/11/15.]

OTS-1227.10

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1300 What is the purpose of this chapter? (1) This chapter contains licensing requirements for all child placing agencies and the people who operate these programs. This chapter also includes regulations for adoption services provided by child placing agencies. These licensing regulations are designed to ensure children who are in care are safe, healthy, and protected from all forms of child abuse and neglect according to RCW 26.44.020(1) and chapter ((388-15)) 110-30 WAC.

(2) If you are a child placing agency <u>(CPA)</u> that certifies foster homes, the homes you certify must meet the full licensing requirements outlined in chapter ((388-148)) 110-148 WAC, child foster home licensing requirements.

[WSR 18-14-078, recodified as § 110-147-1300, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1300, filed 12/11/14, effective 1/11/15.]

WAC 110-147-1305 What definitions do I need to know to understand this chapter? The following words and terms are for the purpose of this chapter and are important to understanding these requirements: "Abuse or neglect" means the injury, sexual abuse, sexual exploitation, negligent treatment or maltreatment of a child as defined in RCW 26.44.020. "Adult" means a person ((eighteen)) 18 years old or older, not in the care of the department. "Agency" is defined in RCW 74.15.020(1). "Asexual" means the lack of a sexual attraction or desire for other individuals. "Assessment" means the appraisal or evaluation of a child's physical, mental, social ((and/or)) or emotional condition. "Bisexual" means individuals who have an emotional or physical attraction to individuals of the same and different genders. "Business hours" means hours during the day in which business is commonly conducted. Typically, the hours between 9 a.m. and 5 p.m. on weekdays are considered to be standard business hours. (("CA" means children's administration.)) "Capacity" means the age range, gender, and maximum number of children on your current license. "Care provider" means any person who is licensed or authorized to provide care for children and cleared to have unsupervised access to children under the authority of a license. "Case manager" means the private agency employee who coordinates the planning efforts of all the persons working on behalf of a child. "Case plan" means a written document adhered to and followed by a foster child's parents or quardians, foster parent or parents, the department, and all other careqivers. A case plan may include, but is not limited to: (a) A description of the type of home or facility in which a child is to be placed, including a discussion of the safety and appropriateness of the placement and how the department plans to carry out the voluntary placement agreement entered into or judicial determination made with respect to the child; (b) A plan for assuring that the child receives safe and proper care and that services are provided to the parents or guardians, child, and foster parents in order to improve the conditions in the parents' or quardians' home, facilitate return of the child to their own safe home or the permanent placement of the child, and address the needs of the child while in foster care, including a discussion of the appropriateness of the services that have been provided under the plan; (c) The health and education records of the child, including the most recent information available regarding: (i) The names and addresses of the child's health and educational

providers;

(ii) The child's grade level performance;

(iii) The child's school record;

(iv) A record of the child's immunizations;

(v) The child's known medical conditions; (vi) The child's medications; and

(vii) Any other relevant health and education information concerning the child determined to be appropriate by the department.

(d) Relevant professional assessments of the child;

(e) Court orders concerning the child; and

(f) Any other relevant plan, assessment, knowledge, material, or information concerning the child determined to be appropriate by the department.

"Caseworker" means the primary agency worker assigned to the child through DCYF or other government agency.

"Certification" means a licensed child placing agency (CPA) re-view that a foster home being supervised by that CPA meets licensing regulations. The final decision for licensing is the responsibility of ((CA)) the department of children, youth, and families.

"Chapter" means chapter ((388-147)) <u>110-147</u> WAC.

"Child," "children," or "youth" for this chapter, means a person who is one of the following:

(((1))) <u>(a)</u> Under ((eighteen)) <u>18</u> years of age;

(((2))) (b) Up to ((twenty-one)) 21 years of age and enrolled in services through the department of social and health services, developmental disabilities administration (DDA) the day prior to his or her ((eighteenth)) 18th birthday and pursuing either a high school or equivalency course of study (GED/HSEC), or vocational program;

(((3))) <u>(c)</u> Up to ((twenty-one)) <u>21</u> years of age and participates in the extended foster care program;

(((4))) (d) Up to ((twenty-one)) 21 years of age with intellectual and developmental disabilities;

(((5))) (e) Up to ((twenty-one)) 25 years of age and under the custody of the ((Washington state)) juvenile ((justice)) rehabilitation ((administration)) system.

"Child placing agency((" or ")) (CPA)" means an agency licensed to place children for foster care or adoption.

"Compliance agreement" means a written improvement plan to address the changes needed to meet licensing requirements.

(("DCFS" means the division of children and family services within children's administration. DCFS provides case management to children and families involved in the child welfare system.))

"DDA" means the department of social and health services, developmental disabilities administration.

"Department ((or DSHS))" means the department of ((social and health services)) children, youth, and families (DCYF).

"Developmental disability" is a disability as defined in RCW 71A.10.020.

(("DLR" means the division of licensed resources within children's administration. DLR licenses and monitors foster homes, child placing agencies, and licensed group care facilities.))

"FBI" means the Federal Bureau of Investigation.

"Foster home or foster family home" means a person(s) licensed to regularly provide ((twenty-four-hour)) 24-hour care in their home to children.

"Gay" means a sexual orientation to describe individuals who are emotionally or physically attracted to someone of the same gender. Gay is sometimes an umbrella term for the LGBTQIA+ community.

"Gender" or "gender identity" means an individual's inner sense of being a female, male, a blend of both or neither, or another gender. This may or may not correspond with an individual's sex assigned at birth.

"Gender expression" means individuals' outward communication of their gender through behavior or appearance. This may or may not conform to their sex assigned at birth or socially defined behaviors and characteristics typically associated with being either masculine or feminine.

"Gender fluid" means individuals whose gender identities are flexible.

"Guardian" has the same meaning in this chapter as defined in RCW 26.33.020(11).

"Guns or weapons" means any device intended to shoot projectiles under pressure or that can be used to attack. These include, but are not limited to, BB guns, pellet guns, air rifles, stun guns, antique guns, handguns, rifles, shotguns and archery equipment.

"Health care staff" means anyone providing qualified medical consultation to your staff or medical care to the children and youth in your care.

"Hearing" means the administrative review process conducted by an administrative law judge.

"I, <u>"</u>my, <u>"</u>you, <u>"</u>and <u>"your</u>" refer((s)) to an applicant for a license issued under this chapter, and to any party holding a license under this chapter.

"Infant" means a child less than ((twelve)) 12 months of age.

"Intellectual and developmental disability" means children with deficits in general mental abilities and impairment in everyday adaptive functioning.

"Intersex" is an umbrella term used to describe a wide range of natural bodily variations when the body is born with a combination of chromosomes, internal organs, or external genitalia that do not develop as expected.

"Lesbian" means females or women who have an emotional or physical attraction for other females or women.

"LGBTQIA+" means lesbian, gay, bisexual, transgender, queer or questioning, intersex, and asexual. The "+" represents identities not specifically named in the LGBTQIA acronym, e.g., pansexual, gender nonbinary, and Two-Spirit.

"License" means a permit issued by us confirming that your agency meets the licensing standards established in this chapter.

"Licensed health care provider" means ((an MD ()) a medical doctor((), DO ()) (MD), doctor of osteopathy((), ND ()) (DO), doctor of naturopathy((), PA ()) (ND), physician's assistant (PA), or an ((ARNP ()) advanced registered nurse practitioner (ARNP).

"Licensing division (LD)" means the division within DCYF that licenses and monitors foster homes, child placing agencies, and licensed group care facilities.

"Licensing provider portal" means the internet-connected provider application system used by the department and agencies to securely store digital employment and licensing documents and data.

"Licensor" means either:

(((1) A DLR)) (a) An LD employee who recommends approvals for, or monitors licenses or certifications for facilities and agencies established under this chapter; or

(((2))) (b) An employee of a ((child placing agency)) CPA who certifies or monitors foster homes supervised by the ((child placing agency)) CPA.

"Maternity service" as defined in RCW 74.15.020. These are also referred to as pregnant and parenting youth programs.

"Medically fragile" means the condition of a child who requires the availability of ((twenty-four-hour)) 24-hour skilled care from a health care professional or specially trained family or foster family member. These conditions may be present all the time or frequently oc-

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curring. If the technology, support_L and services being received by the medically fragile children are interrupted or denied, the child may, without immediate health care intervention, experience death.

"Missing child" means any child less than ((eighteen)) 18 years of age in licensed care or under the care, custody, and authority of ((CA)) DCYF and the child's whereabouts are unknown ((and/or)) or the child has left care without the permission of the child's caregiver or ((CA)) DCYF. This does not include children in dependency guardianship.

"Nonambulatory" means not able to walk or exit to safety without the physical assistance of another individual.

"Nonbinary" is a term of self-identification for individuals who do not identify within the limited and binary terms that have described gender identity, e.g., female and male. Nonbinary is also an umbrella term for many identities such as gender expansive, gender fluid, and genderqueer.

"Out-of-home placement" means a child's placement in a home or facility other than the child's parent, guardian, or legal custodian.

"Parent" has the same meaning in this chapter as defined in RCW 26.26A.010(15).

"Probationary license" means a license issued as part of a corrective action to an individual or agency that has previously been issued a full license but is out of compliance with minimum licensing requirements and has entered into an agreement aimed at correcting deficiencies.

"Property or premises" means a facility's buildings and adjoining grounds that are managed by a person or agency in charge.

"Oueer" is a term used to express LGBTOIA+ identities and orientations. The term is sometimes used as an umbrella term for all LGBTQIA+<u>individuals</u>.

"Ouestioning" means individuals who are exploring their sexual orientation, gender identity, or gender expression at any age.

"Relative" means a person who is related to a child as defined in RCW 74.15.020.

"Respite" means brief, temporary relief care provided by an inhome or out-of-home provider paid by the department. The respite provider fulfills some or all of the care provider responsibilities for a short time.

"Sexual orientation" means an individual's emotional or physical attraction to other individuals.

"SOGIE" is an acronym for sexual orientation, gender identity, and expression which are distinct identifiers everyone has. LGBTQIA+ is a subdistinction within SOGIE self-identifiers. SOGIE includes LGBTQIA+ as well as heterosexual, cisqender, and nonquestioning individuals.

"Transgender" is an umbrella term for individuals whose gender identity or expression is different from cultural expectations based on the sex they were assigned at birth. Gender-affirming medical care is not a prerequisite to identify as transgender. Being transgender does not imply any specific sexual orientation.

"Treatment plan" means individual plans that identify the service needs of the child, including the child's parent or guardian, and identifies the treatment goals and strategies for achieving those goals.

"Two-Spirit" means a modern, pan-indigenous, umbrella term used by some indigenous North Americans to describe Native people in their communities who fulfill a traditional third-gender or other gendervariant, ceremonial, and social role in their cultures. Being Two-Spirit does not imply any specific sexual orientation.

"Volunteer" means a person who provides services without compensation, for your agency.

"Washington state patrol fire protection bureau((" or ")) <u>(WSP/FPB)</u>" means the state fire marshal.

"We, " "our, " and "us" refer((s)) to ((the department of social and health services)) DCYF, including ((DLR)) LD and ((DCFS)) child welfare staff.

"Young child" refers to a child age ((twelve)) 12 months through eight years old.

[WSR 18-14-078, recodified as § 110-147-1305, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-147-1305, filed 5/23/18, effective 6/23/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-147-1305, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1305, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1315 When will the department grant me a license? (1) We issue you a ((child placing agency)) CPA license when you, your staff and volunteers, property and premises meet the regulations contained in this chapter, and all required documents are in the department's licensing file. Documents required under this section must be submitted to the department through the licensing provider portal.

(2) If you are providing adoption services, you must meet the additional requirements in WAC ((388-147-1660 to 388-147-1730)) 110-147-1660 through 110-147-1730.

(3) If your licensed program is providing specialized services for medically fragile children, day treatment services, or maternity services for pregnant and parenting youth, you must meet additional requirements in chapter ((388-145)) <u>110-145</u> WAC.

[WSR 18-14-078, recodified as § 110-147-1315, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1315, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1325 What is required to apply for a ((child placing agency)) CPA license? (1) You must submit ((a completed)) an application ((which is available from the division of licensed resources)) using the department's licensing provider portal; and

(2) You, your executive director, agency staff, consultants, interns, volunteers, and anyone who may have unsupervised access to children per chapter ((388-06A)) 110-04 WAC are required to:

(a) Submit a completed background authorization form;

(b) Complete an FBI fingerprint check if the individual over ((eighteen)) <u>18</u> years of age has lived out_of_state during any portion of the previous three years; and

(c) Ensure that no employee, volunteer, or subcontractor has unsupervised access to children until a full and satisfactory background check is completed and documentation qualifying the individual for unsupervised access, has been returned to you. Your employees are allowed to work while awaiting fingerprint results, under the provisions of ((WAC 388-06-0500 through 388-06-0540)) chapter 110-05 WAC.

[WSR 18-14-078, recodified as § 110-147-1325, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031. WSR 16-06-041, § 388-147-1325, filed 2/24/16, effective 3/26/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1325, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1330 How does the department determine my suitability to become a licensed provider? (1) The department determines your suitability as a licensed provider after receiving:

(a) Your application $((\tau))$ through the licensing provider portal; (b) <u>Background</u> ((authorization(s))) <u>authorizations</u> for ((those)) persons listed in WAC ((388-147-1325(2),)) 110-147-1325(2); and

(c) All ((required)) documentation ((outlined in)) required under this chapter.

(2) You, your employees, and volunteers must not have had a license or contract denied or revoked from an agency that regulates the care of children or vulnerable adults, unless the department determines that you do not pose a risk to a child's safety, well-being, and long-term stability.

(3) You, your employees, and volunteers must not have been found to have committed abuse or neglect of a child or vulnerable adult, unless the department determines that you do not pose a risk to a child's safety, well-being, and long-term stability.

(4) You must demonstrate that you, your employees, and volunteers have:

(a) The understanding, ability, physical health, emotional stability, and personality suited to meet the physical, mental, emotional, cultural, and social needs of the children under your care; and

(b) The ability to furnish children with a nurturing, respectful, and supportive environment.

(5) At any time, we may require you or your employees and volunteers to give additional information. We may also require an evaluation of your facility or property, or of a staff ((person)) working for your agency, by an evaluator recommended by us. Any evaluation requested by the department will be at your expense. You must give the

evaluator written permission to share information with us prior to and throughout the evaluation process.

(6) Any employee, intern, or volunteer who is found to have misrepresented or provided fraudulent information may be disqualified.

(7) Before granting or renewing a license, your licensor will:

(a) Assess your ability to provide a safe environment for children and to provide the quality of care needed by children placed in your care((. Your licensor will also)); and

(b) Determine that you, your employees, and volunteers meet training requirements.

[WSR 18-14-078, recodified as § 110-147-1330, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1330, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1335 What additional steps must I complete prior to licensing? (1) You must submit ((to your licensor)) through the licensing provider portal a detailed written program description for ((DLR)) <u>LD</u> approval. ((In the)) <u>This</u> description ((you)) must outline:

(a) Your mission and goals;

(b) A description of the services you will provide to children and their families;

(c) Your written policies covering qualifications, duties, and on-going training for developing and upgrading staff skills; and

(d) A description of your agency's policies and procedures.

(2) You must have a site inspection by your ((DLR)) <u>LD</u> licensor or someone designated by ((DLR)) LD who can verify that your Washington state premises have:

(a) Adequate storage for staff and client files;

(b) A working telephone;

(c) Adequate space for privacy when interviewing parents or guardians and children;

(d) Room or area used for administrative purposes;

(e) Adequate space for visitation, if needed; and

(f) Your license must be clearly posted, ((+)) if the inspection is for a renewal license((+)).

(3) You and your staff are required to submit through the licensing provider portal a negative tuberculosis (TB) test or an X-ray, unless you have had a negative TB test in the previous ((twelve)) 12 months. If there is a positive TB test, then the individual must submit a physician's statement identifying that there is no active TB or risk of contagion to children in care.

(a) We may grant an exception to the TB test, in consultation with a licensed health care provider.

(b) This exception would require a statement from a licensed health care provider (MD, DO, ND, PA or ARNP) indicating that a valid medical reason exists for not having a TB test.

[WSR 18-14-078, recodified as § 110-147-1335, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040,

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74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-147-1335, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1335, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1340 How long do I have to complete the licensing application process? (1) You must submit a complete ((your)) licensing application and ((submit all DLR required documents within ninety days of submitting the application and)) background authorization forms ((to the department)) for your CPA license, and for licensed foster families certified by your CPA, to LD through the licensing provider portal.

(2) For your CPA license:

(a) Once you receive background clearance notifications for the staff identified on your application, you must submit all required documents within 90 days.

(b) If you do not meet ((this ninety-day)) the 90-day deadline, your licensor may withdraw your application.

((((3))) <u>(c)</u> As a courtesy, a renewal notification and renewal materials will be sent ((one hundred and twenty)) 120 days prior to your license expiration date. If you do not receive this renewal notice it is your responsibility to contact your licensor.

((-(+))) (d) You must send the renewal application and all reguired background authorization forms to your licensor at least ((ninety)) 90 days prior to the expiration of your current license.

(3) For licensed foster families certified by your CPA:

(a) Once you receive background clearance notifications for all identified household members, you must submit all LD required documents within 90 days.

(b) If you do not meet this 90-day deadline, you may withdraw your application rather than be denied a license.

(c) As a courtesy, a renewal notification will be sent 90 days prior to the foster home license expiration date.

(d) You must send the foster home license renewal application and all required background authorization forms to your licensor 90 days prior to the expiration of the current license; you must send the foster home license renewal application and all required background authorization forms to your licensor by the expiration of the current license.

[WSR 18-14-078, recodified as § 110-147-1340, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1340, filed 12/11/14, effective 1/11/15.]

WAC 110-147-1345 What are the roles of the department and the **CPA?** (1) We license CPAs, including tribal CPAs, to supervise foster homes. You are authorized to certify to the department that a foster home meets the licensing regulations contained in chapter ((388-148)) <u>110-148</u> WAC.

(2) You have the discretion to certify or not to certify a foster home.

(3) You may, at your discretion, have additional regulations for a foster home to become and remain a licensed foster home under your supervision.

(4) The department has the final approval for licensing a foster home that you have certified.

[WSR 18-14-078, recodified as § 110-147-1345, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1345, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1350 How must I certify a foster home for licensing by the department? (1) You must use applications, home study forms, and procedures that are approved by the department.

(2) A foster home must be certified by your ((child placing agency) CPA as meeting the licensing requirements in chapter ((388-148)) 110-148 WAC in order to be licensed by the department.

(3) A CPA social service staff person must review and sign approval for the foster home licensing application packet before the application is submitted to ((DLR)) LD.

[WSR 18-14-078, recodified as § 110-147-1350, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1350, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1375 May an agency be issued more than one type of **license?** (1) An agency may not be licensed by ((DLR)) <u>LD</u> for more than one type of license in the same building (<u>a</u> group care facility and a CPA for example), unless the department determines that care of one type of client does not interfere with the care of another type of client, and you have approval from the ((DLR)) LD administrator. We may require separation of client populations between the programs. You must meet the requirements for both licenses.

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(2) If you have multiple licenses issued by different ((DSHS)) DCYF licensing agencies in the same location, you must obtain approval from ((DLR)) LD prior to providing services and accepting placements.

[WSR 18-14-078, recodified as § 110-147-1375, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1375, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1420 Can employees, volunteers, and subcontractors be disqualified from having access to the children in my agency? (1) The department must disqualify employees, volunteers, or subcontractors if they do not meet the regulations of chapter ((388-147)) 110-147 WAC or cannot have unsupervised access to children because of their background check as outlined in chapter ((388-06A)) 110-04 WAC.

(2) We will notify you if a person in your agency is disqualified from having unsupervised access to children. This could also lead to denial, suspension, or revocation of your license.

[WSR 18-14-078, recodified as § 110-147-1420, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031. WSR 16-06-041, § 388-147-1420, filed 2/24/16, effective 3/26/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1420, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1430 How do I appeal the decision of the office of administrative hearings' administrative law judge? (1) The decision of the administrative law judge is the final decision of the department unless you or the department files a petition for review with the ((DSHS)) <u>DCYF</u> board of appeals within ((twenty-one)) <u>21</u> calendar days after the administrative law judge's decision is mailed to the parties.

(2) The procedure for requesting or responding to a petition for review with the board of appeals is described in ((WAC 388-02-0560) through WAC 388-02-0635)) chapter 110-03 WAC.

(3) We will not appeal decisions made by the board of appeals.

(4) If you disagree with the board of appeals, you may file a petition in superior court and ask for further review ((+)) as described <u>in</u> RCW 34.05.510 to 34.05.598((+)).

[WSR 18-14-078, recodified as § 110-147-1430, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020,

13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1430, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1440 Who must I employ at my agency? (1) You must employ sufficient numbers of qualified staff to meet the physical, safety, health, and emotional needs of the children placed in your care, appropriate for their age and developmental level. Requirements for specific staff are detailed below.

(2) Employees and caregivers must:

(a) Demonstrate competency, good judgment, and self-control in the presence of children and when performing duties;

(b) Report suspected abuse, neglect, and exploitation to ((children's administration)) DCYF intake and to the designated administrator or supervisor;

(c) Know and comply with rules established in this chapter $_{L}$ as well as all other applicable laws; and

(d) Comply with federal and state antidiscrimination laws related to personnel policies and procedures.

[WSR 18-14-078, recodified as § 110-147-1440, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1440, filed 12/11/14, effective 1/11/15.]

NEW SECTION

WAC 110-147-1443 Am I required to follow each child's case plan? You and all employees, staff members, and volunteers must adhere to, follow, and comply with the case plan for each of the children in your care.

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AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1490 What are the requirements for volunteers working directly with ((children/youth)) children? (((1))) These volunteers must meet the licensing requirements listed in this chapter, including meeting the qualifications for case aide staff, and must:

(((a))) <u>(1)</u> Be at least ((twenty-one)) <u>21</u> years of age, unless they are between ((eighteen)) 18 and ((twenty-one)) 21 years of age with an internship or practicum program as per WAC ((388-147-1460(2))) 110-14<u>7-1460(2);</u>

(((b))) <u>(2)</u> Be supervised at all times by at least one paid staff member or a designated volunteer meeting the qualifications of a program manager, working on-site. ((+))Volunteers meeting program manager qualifications may provide direct care unsupervised((+)); and ((-)) (3) Receive preservice training that addresses the needs

of the population of children in care.

[WSR 18-14-078, recodified as § 110-147-1490, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1490, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1500 What is the preservice training requirement for staff and volunteers having direct care responsibility to ((children/ youth)) children? (1) Prior to having responsibility for direct care, staff and volunteers must have a minimum of ((sixteen)) 16 hours of the following preservice training, including policies and procedures, job responsibilities and facility administration. This is in addition to the first aid and cardiopulmonary resuscitation training (CPR) in WAC ((388-147-1510)) <u>110-147-1510</u> and the ((HIV/AIDS/bloodborne)) bloodborne pathogen requirements in WAC ((388-147-1515)) 110-147-1515. Preservice training must be relevant to the type of children and families and the program services you provide. Preservice training ((will usually)) may include ((the following)), but is not limited to:

(a) Child abuse and neglect identification and reporting requirements;

- (b) Incident reporting;
- (c) Accessing community resources;
- (d) Client confidentiality;
- (e) Family dynamics and family intervention techniques;
- (f) Child development;
- (q) Grief and loss;
- (h) Cultural needs of children in care;
- (i) Sexually exploited youth;
- (j) Behavior management and crisis intervention techniques;
- (k) Conflict resolution or problem-solving skills;
- (1) Substance abuse;
- (m) Sexually aggressive and physically assaultive training;
- (n) Effects of trauma on children; ((and))
- (o) Youth supervision requirements; and
- (p) Foundational LGBTQIA+ culture.

(2) If your agency is providing international adoption services, you must also provide training that covers the Hague Convention Articles and the Hague Council on Accreditation (COA) requirements.

(3) New staff and volunteers must work shifts with fully trained staff until the new staff has completed all required training.

[WSR 18-14-078, recodified as § 110-147-1500, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1500, filed 12/11/14, effective 1/11/15.]

WAC 110-147-1505 What is the requirement for staff in-service training? (1) If you have employees in your agency, you must offer in-service training programs for developing and upgrading staff skills. Your training plan must be in writing.

(2) You must submit an in-service training plan for staff for approval by the department, with a minimum of ((twelve)) 12 hours of annual training for applicable case management, case aide and foster home licensing staff. This training plan must be relevant to the type of children and families you serve, and the program services you provide. You must provide information relevant to the problems experienced by the children you serve, which may include suicide prevention, substance abuse, child abuse and neglect, mental health issues, cultural sensitivity, foundational LGBTQIA+ culture, and predatory behavior.

(3) You must discuss with your staff updated policies and procedures, as well as the rules contained in this chapter, including the Haque Council on Accreditation if you are providing international adoption services.

(4) Your training on behavioral management must be approved by ((DLR)) LD and must include nonphysical age-appropriate methods of redirecting and controlling behavior, as described in the ((children's administration)) department's behavior management guide.

(5) You must document all training including a description of the training provided and the date of the training. This information must be kept in each employee's file or in a separate training file.

[WSR 18-14-078, recodified as § 110-147-1505, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1505, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1515 What ((HIV/AIDS/bloodborne)) bloodborne pathogens training is required? (1) If you or any of your staff provide supervision or direct care to children, ((HIV/AIDS/bloodborne)) bloodborne pathogens training is required. This training should include infection control standards.

(2) You must use infection control requirements and educational material consistent with the current approved curriculum published by the department of health ((, office on HIV/AIDS)).

(3) Staff providing direct care to children must use universal precautions when coming in contact with the bodily fluids of a child.

[WSR 18-14-078, recodified as § 110-147-1515, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1515, filed 12/11/14, effective 1/11/15.]

WAC 110-147-1520 What personnel records must I keep at my agen-(1) You must both submit to the department through the licensing cv? provider portal and keep on file personnel records ((on file)) for each ((staff)) person who is employed or volunteers at your agency.

(2) For staff who will not have unsupervised access to children you must keep the following:

(a) An employment application, including work and education history;

(b) Education documentation;

(c) Job description of the position at your agency;

(d) Signed mandated reporter statement;

(e) A record of participation in the program's orientation; and

(f) A record of participation in ongoing staff development training.

(3) In addition, you must keep the following for staff who have unsupervised access to children:

(a) A log with background check information, containing dates of request and completion of the checks on all staff, interns, volunteers, and service contractors;

(b) A record of a negative Mantoux, tuberculin skin tests results, X-ray, or a medical exemption to the skin test or X-ray per WAC ((388-147-1335(3))) 110-147-1335(3);

(c) ((First Aid/CPR/HIV/AIDS/bloodborne)) First aid, CPR, and bloodborne pathogens training documentation;

(d) A copy of government-issued photo ID;

(e) A copy of a valid driver's license for staff transporting clients or employees; and

(f) A copy of current auto insurance, ((+)) if using private vehicle to transport ((+)).

(4) You must maintain a written record of case consultation by a master's level consultant as defined in WAC ((388-145-1470)) <u>110-145-1470</u> for case managers with a bachelor's degree.

[WSR 18-14-078, recodified as § 110-147-1520, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1520, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1525 What are the requirements for children's records? (1) You must retain a record of each child placed by your agency. This record must contain all identifying legal, medical, and social information.

(2) Any identifying and personal information about a child and the child's family must be kept confidential as required by chapter 26.33 RCW. These records must be kept in a secure place inaccessible to clients, unauthorized staff, and the public. Children's records must never be submitted to the department through the licensing provider portal.

Certified on 12/30/2021 [64]

(3) During a child's placement, the child's record must be maintained and you must attempt to obtain the following information for

(b) Name and telephone number of the child's ((DSHS worker)) DCYF caseworker for each child in care;

(c) Written consent, if any, for providing medical care and emergency surgery ((+)) unless that care is authorized by a court order((+));

(d) A copy of the current legal authority to place;

(e) Current case plans;

(f) Social summary;

(g) Documentation of a child's therapy treatment provided by your staff with the signature of the person making the entry to the therapy or progress notes;

(h) Log of the child's placement history with your agency; and

(i) Information related to suspected child abuse and/or neglect referrals made to children's administration, including the concern, date and person taking the report.

(4) In addition, your records must contain the following information if available:

(a) Names, ((address)) addresses, and telephone numbers of parents or persons to be contacted in case of emergency;

(b) Information on specific cultural needs of the child;

(c) Medical history including any medical problems, name of doctor, type of medical coverage and provider, date of any illnesses or accidents while placed in your agency's care;

(d) Mental health history and any current mental health, chemical dependency, and behavioral issues, including medical and psychological reports when available;

(e) Other pertinent information related to the child's health, including basic medical information, such as current prescription medications, immunizations, allergies, dental records ((and/or)), or eye exams;

(f) Immunization records_L ((+)) if a child's placement extends beyond $((\frac{\text{thirty}}{)}) \frac{30}{30} \text{ days}((+))$. If the child is not current with immunization, they must be updated as soon as medically possible. Immunization records are not required to be current for children placed in a foster home licensed by a ((child placing agency)) CPA to provide emergency respite services on a voluntary placement agreement;

(g) Child's school records, report cards, school pictures, and individual education plans (IEP);

(h) Special instructions including supervision requirements and suggestions for managing problem behavior;

(i) Inventory of the child's personal belongings at the time of placement;

(j) Approved list of individuals with whom the child may have contact;

(k) The child's visitation plan; and

(1) For pregnant and parenting youth, information on the ((mother/father)) other parent of the youth's child, if available.

(5) If you are unable to obtain this information from the department, you must document your attempt to obtain the requested information in the child's file.

[WSR 18-14-078, recodified as § 110-147-1525, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW

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74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1525, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1530 How long should my agency keep the child records? (1) If you have child files with information not returned to the department, you must keep them for six years following the termination or expiration of any license or contract you have with the department. Children's records must never be submitted to the department through the licensing provider portal.

(2) If your agency closes, you must return all child file information to the department for any child who is or was in the custody of the department and whose records were not previously destroyed according to ((WAC 388-147-1530(1))) <u>subsection (1) of this section</u>.

(3) Adoption records should be maintained according to WAC ((388-147-1720(2))) 110-147-1720(2).

(4) You must inform your ((DLR)) LD regional licensor about the closure of your agency and where the child files will be kept.

[WSR 18-14-078, recodified as § 110-147-1530, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1530, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1535 What information can be shared about a child or a child's family? (1) Information about a child or the child's family is confidential and must only be shared with people directly involved in the case plan for a child.

(2) You may discuss information about the child, the child's family, and the case plan only with:

(a) A representative of the department, including staff from ((DCFS)) <u>child welfare</u>, ((DLR)) <u>LD</u>, and DDA;

(b) A representative of the department of health, the office of the state fire marshal, and the office of the family and children's ombuds;

(c) An agency program staff;

(d) The child's attorney;

(e) The child's assigned guardian ad litem or court-appointed special advocate; or

(f) Others designated by the child's ((DSHS worker)) DCYF caseworker.

(3) You may check with your child's ((DSHS worker)) DCYF caseworker for quidance about sharing information with the child's teacher, counselor, doctor, respite care provider, any other professional, or others involved in the case plan.

[WSR 18-14-078, recodified as § 110-147-1535, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1535, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1540 What incidents involving children must I re**port?** (1) You must report the following incidents immediately and in no instance later than ((forty-eight)) $\frac{48}{48}$ hours after the incident to your local ((children's administration)) DCYF intake staff and the child's ((DSHS worker)) DCYF caseworker and tribal Indian child welfare (ICW) case manager as applicable:

(a) Death, serious illness or injury, or psychiatric care that requires medical treatment or hospitalization of a child in care;

(b) Any time you suspect physical or sexual abuse, neglect, or exploitation of a child as required under chapter 26.44 RCW;

(c) Sexual contact between two or more children that is not considered typical play between preschool children;

(d) Any disclosure by a child in care of sexual or physical abuse;

(e) Any child's suicide attempt that results in injury requiring medical treatment or hospitalization;

(f) Any use of physical restraint alleged to have been improperly applied or excessive;

(q) Physical assault between two or more children that results in injury requiring off-site medical attention or hospitalization;

(h) Physical assault of a foster parent, employee, volunteer, or others by a child in care that results in injury requiring off-site medical attention or hospitalization;

(i) Any medication given or consumed incorrectly that requires off-site medical attention; or

(j) Property damage that is a safety hazard and not immediately corrected or may affect the children's health and safety.

(2) You must report the following incidents related to a child in care as soon as possible or in no instance later than ((forty-eight)) 48 hours after the incident, to the child's ((DSHS worker)) DCYF caseworker and tribal ICW case manager as applicable:

(a) Suicidal or homicidal thoughts, gestures, or attempts that do not require professional medical treatment;

(b) Unexpected health problems outside the usual range of reactions caused by medications that do not require professional medical attention;

(c) Any incident of medication incorrectly administered or consumed;

(d) Any professional treatment for emergency medical or emergency psychiatric care;

(e) Physical assault between two or more children that results in injury but does not require professional medical treatment;

(f) Physical assault of a foster parent, employee, volunteer, or others by a child that results in injury but does not require professional medical treatment;

(g) Drug or alcohol use by a child in your care;

(h) Any inappropriate sexual behavior by or toward a foster child; or

(i) Use of prohibited physical restraints for behavior management.

(3) Programs that provide care to medically fragile children who have nursing care staff on duty may document the incidents described in ((WAC 388-147-1540)) subsection (2)(b) and (c) of this section in the facility daily logs, rather than contacting the child's ((DSHS worker)) DCYF caseworker or case manager, if agreed to in the child's case plan.

[WSR 18-14-078, recodified as § 110-147-1540, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-147-1540, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1540, filed 12/11/14, effective 1/11/15.1

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1545 What are my reporting responsibilities when a child is missing from care? (1) As soon as you or your staff have reason to believe a child in your care is missing as defined in WAC ((388-147-1305)) <u>110-147-1305</u> or has refused to return to or remain in your care, or whose whereabouts are otherwise unknown, you are required to notify the following:

(a) The child's assigned ((DSHS worker)) DCYF caseworker, as appropriate;

(b) ((Children's administration)) DCYF intake, if the ((DSHS worker)) DCYF caseworker is not available or it is after normal business hours.

(2) You are required to contact local law enforcement within six hours if the child is missing. However, if one or more of the following factors are present, you must contact law enforcement immediately:

(a) The child is believed to have been taken from placement. This means the child's whereabouts are unknown, and it is believed that the child has been concealed, detained or removed by another person;

(b) The child is believed to have been lured from placement or has left placement under circumstances that indicate the child may be at risk of physical or sexual assault or exploitation;

(c) The child is age ((thirteen)) 13 or younger;

(d) The child has one or more physical or mental health conditions that if not treated daily, will place the child at severe risk;

(e) The child is pregnant or parenting and the ((infant/child)) infant or child is believed to be with ((him or her)) them;

(f) The child has severe emotional problems, ((+))e.g., suicidal thoughts ((+)), that if not treated, will place the child at severe risk;

(q) The child has an intellectual and developmental disability that impairs the child's ability to care for ((him/herself)) themself;

(h) The child has a serious alcohol ((and/or)) or substance abuse problem; or

(i) The child is at risk due to circumstances unique to that child.

(3) After contacting local law enforcement, you must also contact the national center for missing and exploited children at ((1 - (800))843-5678)) 1-800-843-5678 and report the child missing from care.

(4) If the child leaves school or has an unauthorized absence from school, you should consult with the child's ((DSHS worker)) DCYF caseworker to assess the situation and determine when you should call law enforcement. If any of the factors listed in subsection((s)) (2) (a) through (i) of this section are present, you and the child's ((DSHS worker)) DCYF caseworker may decide it is appropriate to delay notification to law enforcement for up to four hours after the end of the school day to give the child the opportunity to return on their own.

(5) You must provide the following information to law enforcement and to the child's ((DSHS worker)) DCYF caseworker when making a missing child report, if available:

(a) When the child left;

(b) The last known location of the child;

(c) What the child was wearing;

(d) Any known behaviors or interactions that may have caused the child's departure;

(e) Possible places where the child may go;

(f) Special physical or mental health conditions or medications that affect the child's safety;

(g) Known companions who may be aware or involved in the child's absence;

(h) Other professionals, relatives, significant adults or peers who may know where the child would go; and

(i) Recent photo of the child.

(6) You must ask law enforcement for the missing person report number and provide it to the child's ((DSHS worker)) DCYF caseworker or staff.

(7) At any time after making an initial report you learn of a missing child's whereabouts, you must report that information to the child's ((DSHS worker)) DCYF caseworker.

(8) If a child is returned to your care, it is your responsibility to cancel the run report and notify all persons you have informed of the child's run.

(9) Youth participating in the extended foster care (EFC) program are exempt from these requirements. You must follow all other reporting requirements as defined in WAC ((388-147-1540)) 110-147-1540.

[WSR 18-14-078, recodified as § 110-147-1545, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-147-1545, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1545, filed 12/11/14, effective 1/11/15.1

WAC 110-147-1550 What changes must I report to my licensor? (1)You must immediately report ((to your licensor)) through the licensing provider portal changes in the original licensing application. You must report changes in:

(a) Your location or designated space, including address;

(b) Your phone number;

(c) Your program description ((and/or)) or population served;

(d) Structure of your facility or premises from events causing damage, such as a fire, or from remodeling;

(e) Addition of any new staff person, employee, intern, contractor, or volunteer, who might have unsupervised contact with the children in care;

(f) Medical illness or incapacity that may affect the ability of any of your program staff to complete their duties;

(g) Staff arrests or convictions of which you are aware, that occur between the date of your license and the expiration date of your license;

(h) Any staff changes including the executive director, program ((manager/supervisor)) manager or supervisor, or master's level consultants;

(i) Death, retirement, or incapacity of the person who holds the license;

(j) Name of licensed corporation, or the name by which your facility is commonly known; and

(k) Your articles of incorporation and bylaws.

[WSR 18-14-078, recodified as § 110-147-1550, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1550, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1555 What does the department require for my buildings and property? (1) You must maintain your buildings, premises, and equipment in a clean and sanitary condition, free of hazards, and in good repair. You must have a working telephone at your agency at all times.

(2) All homes certified by your agency must meet the health and safety requirements outlined in chapter ((388-148)) 110-148 WAC.

[WSR 18-14-078, recodified as § 110-147-1555, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1555, filed 12/11/14, effective 1/11/15.]

WAC 110-147-1595 What are the requirements about nondiscrimination? (1) You must follow all state and federal laws regarding nondiscrimination while providing services to children in your care.

(2) You must ((treat)) support and engage foster children in your care with dignity and respect regardless of actual or perceived race, ethnicity, religion, culture, ((sexual orientation and gender identity)) or SOGIE. You must connect a child with resources that ((meets a child's)) supports and affirms their needs regarding race, ethnicity, religion, culture, ((sexual orientation and gender identity)) and SO-GIE.

[WSR 18-14-078, recodified as § 110-147-1595, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1595, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1610 How often should the case manager contact the foster child and family? The case manager must contact a foster child and the foster child's foster family((τ)) according to a case plan that reflects the child's needs. Case managers must make in home health and safety visits as required by ((children's administration)) the department's policy. Each foster child and one or both foster parents must be seen at each visit.

[WSR 18-14-078, recodified as § 110-147-1610, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1610, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1615 Can children in my care receive services through the extended foster care program? Foster parents can serve youth enrolled in the extended foster care program. You must adhere to chapter ((388-25)) 110-50 WAC.

[WSR 18-14-078, recodified as § 110-147-1615, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1615, filed 12/11/14, effective 1/11/15.]

WAC 110-147-1620 What are the requirements for supervising chil**dren?** (1) Your agency is responsible to provide adequate supervision at all times. You should arrange and maintain supervision of children during times of crisis when one or more family members or staff members may be unavailable to provide the necessary supervision or coverage for other children in care.

(2) When special supervision is required and agreed upon between the department and the agency, the agency must ensure the necessary supervision is being provided. This supervision may require auditory or visual supervision at all times.

(3) Prior to placement, you must inquire if a child poses a risk to the other children or has special supervision needs by obtaining information from the parent, ((legal)) guardian, the child's ((DSHS worker)) DCYF caseworker, therapist, or previous placements. You must:

(a) Develop a plan to address those needs;

(b) Obtain approval from the child's ((DSHS worker)) DCYF caseworker if the child is under the care and authority of the department; and

(c) Inform the foster parent who will be caring for the child.

(4) All high-risk activities, including the use of power driven machines or other hazardous equipment, must be properly supervised by an adult. When participating in high-risk activities, children must:

(a) Be instructed how to use and required to use appropriate safety equipment, such as helmets and life vests; and

(b) Be in continuous visual or auditory range at all times, unless approved by the child's ((DSHS worker)) DCYF caseworker.

[WSR 18-14-078, recodified as § 110-147-1620, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1620, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1630 Where may I obtain a child's health history? You may obtain the health history from the child's ((DSHS worker or)) DCYF caseworker, parent, or guardian making the placement for all children placed in your facility.

[WSR 18-14-078, recodified as § 110-147-1630, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1630, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1635 Am I required to assess a child's need for immediate medical attention? (1) When a child first enters out-of-home care, an initial health screen is required as soon as possible, but no later than five days after entering your program.

(2) You must also make reasonable attempts to obtain the following health history:

(a) Allergies;

(b) All currently prescribed medications; and

(c) Any special physical or mental health issues.

(((2))) <u>(3)</u> If the child remains in placement beyond ((seventytwo)) 72 hours, you must contact the child's ((DSHS worker)) DCYF caseworker, parent, or ((legal)) guardian to obtain the following information:

(a) The date of the child's last ((physical/dental)) physical and dental exams;

(b) ((A)) Their history of immunizations; and

(c) Clinical and medical diagnoses and treatment plans.

(((3))) (4) When a child leaves your care, the health history of the child must be retained by your agency or returned to the department.

(5) You should refer to the department of health's dental care brochure, Publication Nos. 920-923 through 920-928, as guides for maintaining proper dental care for children.

[WSR 18-14-078, recodified as § 110-147-1635, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-147-1635, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1635, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1640 When must I get an early and periodic screening, diagnosis, and treatment (EPSDT) exam for a child? (1) Children who enter out-of-home care, except for children placed by DDA through a voluntary placement agreement, must receive an ((early and periodic screening, diagnosis and treatment ()) EPSDT(()) exam within ((thirty)) 30 days, unless they have had an EPSDT exam in the previous ((thirty)) 30 days. ((Exception:)) DCYF caseworkers will notify you when subsequent EPSDT exams are required.

(2) For children placed by DDA through a voluntary placement agreement (((for children placed by DDA)), follow the direction of DDA regarding the need for an EPSDT exam after placement((+)). ((Children also receive subsequent periodic EPSDT exams; information on these required exams may be obtained from the child's DSHS worker.))

[WSR 18-14-078, recodified as § 110-147-1640, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW

74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1640, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1645 What are the requirements for obtaining consent for emergent and routine medical care? (1) The department is the legal custodian for children it places in care. We have the authority to consent to emergent and routine medical services on behalf of a child under the age of ((eighteen)) 18. Youth in care over the age of ((eighteen)) 18 must consent to their own medical care or have an identified person who has been granted the legal authority to consent on their behalf. We delegate some of the authority to providers. You must contact the child's ((DSHS worker or children's administration)) DCYF caseworker or DCYF intake for specific information for each child.

(2) If you care for children in the custody of another agency, tribal court or other court, you must follow the direction of that agency or court regarding permission to provide consent for medical care.

(3) In case of medical emergency, contact the child's((DSHS worker or children's administration)) DCYF caseworker or DCYF intake as soon as possible.

(4) It is your responsibility to ensure that a child receives the necessary medical attention if injured or harmed. In the event of a life threatening medical emergency, you must contact 911 prior to transporting the child to a medical facility.

[WSR 18-14-078, recodified as § 110-147-1645, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1645, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1650 Can I accept medication from a child's parent or guardian? (1) The only medicine you may accept from the child's parent, quardian, or responsible relative is medicine in the original container labeled with:

- (a) The child's first and last name;
- (b) The date the prescription was filled;
- (c) The medication's expiration date; and

(d) ((Legible instructions for administration ()) Dosage instructions for the medication that are either the manufacturer's instructions or included on the prescription label(() of the medication)).

(2) You must notify the child's ((DSHS worker)) DCYF caseworker if you have any concerns about medication being provided to you by the child's parent or guardian.

[WSR 18-14-078, recodified as § 110-147-1650, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1650, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1660 What qualifications must adoption services staff meet? (1) Your agency must have staff serving in the roles of executive director, program manager, and case managers as identified in WAC ((388-147-1440 through 388-148-1490)) 110-147-1440 through 110-148-1490.

(2) Staff may serve in multiple roles, but must meet the qualifications of each program role.

(3) Agencies providing intercountry adoptions must also have an individual on staff with experience in providing intercountry adoptions.

[WSR 18-14-078, recodified as § 110-147-1660, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1660, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1690 What steps must I take prior to entering into a contract with an adoptive applicant? (1) The applicant((((s)))) must submit an application to your agency.

(2) You must complete an adoption home study as outlined in WAC ((388 - 147 - 1695)) 110 - 147 - 1695.

(3) Once you have approved an application, but before you sign a contract for services, you must give the applicants a written statement about:

(a) The adoption agency's fixed fees and fixed charges to be paid by the applicant per WAC ((388-147-1680)) <u>110-147-1680</u>;

(b) An estimate of fixed fees or additional itemized expenses to be paid by applicant; and

(c) Specific services covered by fees that you offer for child placement or adoption.

[WSR 18-14-078, recodified as § 110-147-1690, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1690, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-147-1720 How do I maintain children's records? (1) Your ((child placing agency)) CPA must retain a record of each child you place in permanent custody. This record must contain all available identifying legal, medical, and social information and must be kept confidential, as required by chapter 26.33 RCW. Children's records must never be submitted to the department through the licensing provider portal.

(2) If your agency closes, you must make arrangements for a period of ((ninety-nine)) 99 years for the retention of adopted children's records who were not in the custody of the department. You must inform your ((DLR)) LD regional licensor about the closure of your agency and where these children's records will be kept.

[WSR 18-14-078, recodified as § 110-147-1720, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-147-1720, filed 12/11/14, effective 1/11/15.]

OTS-1238.12

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1300 What is the purpose of this chapter? (1) This chapter contains licensing requirements for all foster homes licensed directly by the department or certified through a child placing agency. Unless noted otherwise, these requirements apply to you if you are licensed to provide foster care.

(2) Licensing requirements are designed to ensure children who are in foster care are safe, healthy and protected from all forms of child abuse and neglect according to RCW 26.44.020(1) and chapter ((388-15)) 110-30 WAC.

[WSR 18-14-078, recodified as § 110-148-1300, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1300, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1305 What definitions do I need to know to understand this chapter? The following definitions are for the purpose of this chapter and are important to understanding these requirements:

"Abuse or neglect" means the injury, sexual abuse, sexual exploitation, negligent treatment or maltreatment of a child as defined in RCW 26.44.020. "Adult" means a person ((eighteen)) 18 years of age and older, not in the care of the department. "Agency" is defined in RCW 74.15.020(1). (("CA" means children's administration.)) "Asexual" means the lack of a sexual attraction or desire for other individuals. "Bisexual" means individuals who have an emotional or physical attraction to individuals of the same and different genders. "Capacity" means the age range((, gender)) and maximum number of children on your current license. "Care provider" means any person who is licensed or authorized to provide care for children, and cleared to have unsupervised access to children under the authority of a license. "Case manager" means the private agency employee who coordinates the planning efforts of all the persons working on behalf of a child. "Case plan" means a written document adhered to and followed by a foster child's parent or parents, foster parent or parents, the department, and all other careqivers. A case plan may include, but is not limited to: (a) A description of the type of home or facility in which a child is to be placed, including a discussion of the safety and appropriateness of the placement and how the department plans to carry out the voluntary placement agreement entered into or judicial determination made with respect to the child; (b) A plan for assuring that the child receives safe and proper care and that services are provided to the parents, child, and foster parents in order to improve the conditions in the parents' home, facilitate return of the child to their own safe home or the permanent placement of the child, and address the needs of the child while in foster care, including a discussion of the appropriateness of the services that have been provided to the child under the plan; (c) The health and education records of the child, including the most recent information available regarding: (i) The names and addresses of the child's health and educational providers; (ii) The child's grade level performance; (iii) The child's school record; (iv) A record of the child's immunizations; (v) The child's known medical conditions; (vi) The child's medications; and (vii) Any other relevant health and education information concerning the child determined to be appropriate by the department; (d) Relevant professional assessments of the child; (e) Court orders concerning the child; and (f) Any other relevant plan, assessment, knowledge, material, or information concerning the child determined to be appropriate by the

department.

"Caseworker" means the primary agency worker assigned to the child through DCYF or another government agency.

"Certification" means either:

((((1))) (a) Our review of whether you meet the licensing requirements, even though you do not need to be licensed; or

(((2))) (b) A licensed child placing agency (CPA) representing that a foster home being supervised by that CPA meets licensing re-

quirements. The final decision for licensing is the responsibility of ((CA)) DCYF. "Chapter" means chapter ((388-148)) <u>110-148</u> WAC. "Child," "children," or "youth" for this chapter, means a person who is one of the following: (((1))) <u>(a)</u> Under ((eighteen)) <u>18</u> years of age; (((2))) (b) Up to ((twenty-one)) 21 years of age and enrolled in services through department of social and health services, developmental disabilities administration (DDA) the day prior to his or her ((eighteenth)) 18th birthday and pursuing either a high school or equivalency course of study (GED/HSEC), or vocational program; (((3))) <u>(c)</u> Up to ((twenty-one)) <u>21</u> years of age and participates in the extended foster care program; (((4))) (d) Up to ((twenty-one)) 21 years of age with intellectual and developmental disabilities; (((5))) <u>(e)</u> Up to ((twenty-one)) <u>25</u> years of age and under the custody of ((the Washington state)) juvenile ((justice)) rehabilitation ((administration)). "Child placing agency ((or)) (CPA)" means an agency licensed to place children for foster care or adoption. "Child welfare" or "CW" means the division of child welfare within DCYF. CW provides case management to children and families involved in the child welfare system. "Compliance agreement" means a written improvement plan to address the changes needed to meet licensing requirements. (("DCFS" means the division of children and family services within children's administration. DCFS provides case management to children and families involved in the child welfare system.)) "DDA" means the department of social and health services, developmental disabilities administration. "Department" or ((DSHS)) "DCYF" means the department of ((social and health services)) children, youth, and families. "Developmental disability" is a disability as defined in RCW 71A.10.020. (("DLR" means the division of licensed resources within children's administration. DLR licenses and monitors foster homes, child placing agencies, and group care facilities.)) "FBI" means the Federal Bureau of Investigation. "Foster home or foster family home" means a person(s) licensed to regularly provide ((twenty-four-hour)) 24-hour care in their home to children. "Gay" means a sexual orientation to describe individuals who are emotionally or physically attracted to someone of the same gender. Gay is sometimes an umbrella term for the LGBTQIA+ community. "Gender" or "gender identity" means an individual's inner sense of being a female, male, a blend of both or neither, or another gender. This may or may not correspond with an individual's sex assigned at birth. "Gender expression" means individuals' outward communication of their gender through behavior or appearance. This may or may not conform to their sex assigned at birth or socially defined behaviors and characteristics typically associated with being either masculine or feminine. "Gender fluid" means individuals whose gender identities are flexible, not permanent. "Guardian" has the same meaning in this chapter as defined in RCW 26.33.020(11).

"Guns or weapons" means any device intended to shoot projectiles under pressure or that can be used to attack. These include but are not limited to BB guns, pellet guns, air rifles, stun guns, antique guns, handguns, rifles, shotguns and archery equipment.

"Hearing" means the administrative review process conducted by an administrative law judge.

"I, my, you, and your" refers to an applicant for a license issued under this chapter, and to any party holding a license under this chapter.

"Infant" means a child less than ((twelve)) <u>12</u> months of age. "Intellectual and developmental disability" means children with deficits in general mental abilities and impairment in everyday adaptive functioning.

"Intersex" is an umbrella term used to describe a wide range of natural bodily variations when the body is born with a combination of chromosomes, internal organs, or external genitalia that do not develop as expected.

"Lesbian" means females or women who have an emotional or physical attraction for other females or women.

"LGBTQIA+" means lesbian, gay, bisexual, transgender, queer or questioning, intersex, and asexual. The "+" represents identities not specifically named in the LGBTQIA acronym, e.g., pansexual, gender nonbinary, and Two-Spirit.

"License" means a permit issued by us confirming that you and your home meet the licensing standards established in this chapter.

"Licensed health care provider" means ((an MD ()) a medical doctor((-)) (MD), ((-DO-(-))) doctor of osteopathy (DO), ((ND-(-))) doctor of naturopathy (ND), ((PA ())physician's assistant (PA), or an ((ARNP ()) advanced registered nurse practitioner (ARNP).

"Licensing division (LD)" means the division within DCYF that licenses and monitors foster homes, child placing agencies, and licensed group care facilities.

"Licensor" means either:

(((1))) <u>(a)</u> A ((DLR)) <u>LD</u> employee who recommends approvals for, or monitors licenses or certifications for facilities and agencies established under this chapter; or

(((2))) (b) An employee of a ((child placing agency)) CPA who certifies or monitors foster homes supervised by the ((child placing agency)) CPA.

"Maternity services" as defined in RCW 74.15.020. These are also referred to as pregnant and parenting youth programs.

"Medically fragile" means the condition of a child who requires the availability of ((twenty-four-hour)) 24-hour skilled care from a health care professional or specially trained family or foster family member. These conditions may be present all the time or frequently occurring. If the technology, support_L and services being received by the medically fragile children are interrupted or denied, the child may, without immediate health care intervention, experience death.

"Missing child" means any child less than ((eighteen)) 18 years of age in licensed care or under the care, custody, and authority of ((CA)) DCYF and the child's whereabouts are unknown ((and/or)) or the child has left care without the permission of the child's caregiver or ((CA)) DCYF. This does not include children in dependency quardianship.

"Nonambulatory" means not able to walk or exit to safety without the physical assistance of another individual.

"Nonbinary" is a term of self-identification for individuals who do not identify within the limited and binary terms that have described gender identity, e.g., female and male. Nonbinary is also an umbrella term for many identities such as gender expansive, gender fluid, and genderqueer.

"Out-of-home placement" means a child's placement in a home or facility other than the home of a child's parent, quardian, or legal custodian.

"Parent" has the same meaning in this chapter as defined in RCW 26.26A.010(15).

"Probationary license" means a license issued as part of a corrective action to an individual or agency that has previously been issued a full license but is out of compliance with minimum licensing requirements and has entered into an agreement aimed at correcting deficiencies.

"Property or premises" means your buildings and grounds adjacent to your residential property that are owned or managed by you.

"Psychotropic medication" means a type of medicine prescribed to affect or alter thought processes, mood, sleep, or behavior. These include anti-psychotic, anti-depressant, and anti-anxiety medications.

"Queer" is a term used to express LGBTQIA+ identities and orientations. The term is sometimes used as an umbrella term for all LGBTQIA+ individuals.

"Questioning" means individuals who are exploring their sexual orientation, gender identity, or gender expression at any age.

"Relative" means a person who is related to a child as defined in RCW 74.15.020.

"Respite" means brief, temporary relief care provided by an inhome or out-of-home provider paid by the department. The respite provider fulfills some or all of the care provider responsibilities for a short time.

"Sexual orientation" means an individual's emotional or physical attraction to other individuals.

"SOGIE" is an acronym for sexual orientation, gender identity, and expression which are distinct identifiers everyone has. LGBTQIA+ is a subdistinction within SOGIE self-identifiers. SOGIE includes LGBTQIA+ as well as heterosexual, cisqender, and nonquestioning individuals.

"Transgender" is an umbrella term for individuals whose gender identity or expression is different from cultural expectations based on the sex they were assigned at birth. Gender-affirming medical care is not a prerequisite to identify as transgender. Being transgender does not imply any specific sexual orientation.

"Treatment plan" means individual plans that identify the service needs of the child, including the child's parent or guardian, and identifies the treatment goals and strategies for achieving those goals.

"Two-Spirit" means a modern, pan-indigenous umbrella term used by some indigenous North Americans to describe Native people in their communities who fulfill a traditional third-gender or other gendervariant, ceremonial, and social role in their cultures. Being Two-Spirit does not imply any specific sexual orientation.

"Washington state patrol fire protection bureau or WSP/FPB" means the state fire marshal.

"We, our, and us" refers to the department of ((social and health services)) children, youth, and families, including ((DLR and DCFS)) LD and CW staff.

"Young child" refers to a child age ((twelve)) 12 months through eight years old.

[WSR 18-14-078, recodified as § 110-148-1305, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-148-1305, filed 5/23/18, effective 6/23/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1305, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1305, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1315 How is an application submitted? (1) You must complete your licensing application packet with all ((DLR)) LD required documents within ((ninety)) <u>90</u> days of submitting the applica-tion and background authorization forms to the department. ((Application packets are available from the division of licensed resources and licensed child placing agencies.))

(2) If you do not meet this ((ninety-day)) 90-day deadline, your licensor may withdraw your application.

[WSR 18-14-078, recodified as § 110-148-1315, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1315, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1320 When will the department grant me a foster family license? (1) We issue you a license when you and everyone in your household meet the licensing requirements contained in this chapter, and all required documents are in the licensing file. In addition, you must maintain all requirements in this chapter and provide verification to your licensor, if requested.

(2) You and other caregivers over the age of ((eighteen)) 18 must:

(a) Complete first aid ((training)) and age-appropriate ((+)) adult or infant((+)), cardiopulmonary resuscitation((+))(CPR) training. Training must be department approved and accredited with nationally recognized standards; and

(b) Complete ((HIV/AIDS and)) bloodborne pathogens training including infection control standards consistent with educational materials published by the department of health((, office on HIV/AIDS)).

(3) You, your household members, individuals living on any part of your property, and anyone else having unsupervised contact with

your foster children must pass a background check, as required by chapter 110-04 WAC:

(a) Anyone ((sixteen)) 16 years old or older must pass a background check;

(b) Anyone younger than ((sixteen)) 16 years old must pass a background check if the department determines one is warranted to ensure the safety of a child;

(c) Anyone ((eighteen)) 18 years old or older must pass an FBI fingerprint-based background check, unless the individual is unable to obtain fingerprints due to a mental or physical disability and can provide documentation of such disability to the department; and

(d) Anyone ((eighteen)) 18 years old or older must complete a child abuse and neglect registry check from each state they have lived in over the past five years indicating:

(i) No license denials or revocations from an agency that regulates the care of children or vulnerable adults, unless the department determines that you do not pose a risk to a child's health, safety, well-being and long-term stability; and

(ii) No finding or substantiation of abuse or neglect of a child or a vulnerable adult, unless the department determines that you do not pose a risk to a child's safety, well-being, and long-term stability.

(4) You and your household members over the age of ((eighteen)) 18 must ((submit)) complete a ((negative)) tuberculosis ((test or an X-ray, unless you can demonstrate a medical reason prohibiting the TB test, or have had a negative TB test within the twelve months prior to receipt of the application)) (TB) screening. The department may require a medical evaluation or TB test that is a purified protein derivative skin test or a blood test, based on the results of the TB screening. If there is a positive evaluation or TB test, then the individual must submit a physician's statement identifying that there is no active TB or risk of contagion to children in care.

(5) For any children living in the household not receiving outof-home care, you must have proof of current immunizations for ((any children living in the household, not including children in out-ofhome care.)) all vaccine-preventable diseases detailed in WAC 246-105-030. For all children receiving out-of-home care, we may grant a medical exception to this requirement if the immunization is contrary to the child's health as documented by a licensed health care provider on a certificate of exemption.

(6) You and all household members must have pertussis and influenza immunizations to serve foster children who are:

(a) Under the age of two; or

(b) Medically fragile as defined in WAC 110-148-1305.

(c) A medical exception may be granted if the immunization is contrary to your or the household member's health as documented by a licensed health care provider.

(7) Before granting or renewing a license, your licensor will assess your ability to provide a safe home and to provide the quality of care needed by children placed in your home. Your licensor will also determine that you meet training requirements.

(8) Foster children under the care and authority of the department living in your home do not need to obtain a criminal history check, FBI fingerprint check, or TB test.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a) (36) (A). WSR 20-03-095, § 110-148-1320, filed

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1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1320, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832, and 2017 c 20 § 4. WSR 18-05-037, § 388-148-1320, filed 2/13/18, effective 3/16/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, and 74.13.031. WSR 16-01-121, § 388-148-1320, filed 12/18/15, effective 1/18/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1320, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1330 May I receive more than one in-home family license? (1) In rare situations and at our discretion, we may allow a family to be licensed for foster care and another type of in-home family care. The ((DLR)) LD senior administrator may grant approval if it appears to be in the best interest of a child.

(2) If you have more than one in-home family license:

(a) It must be clear that the health and safety of children is not compromised; and

(b) The total number of children allowed in your home will not be higher than ((CA's)) DYCF's allowed maximum capacity. All licensing agencies must be in agreement.

[WSR 18-14-078, recodified as § 110-148-1330, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1330, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1340 What do I do to renew my license? (1) As a courtesy a renewal notice will be sent to you ((one hundred and twenty)) 120 days prior to your license expiration date. If you do not receive this renewal notice it is your responsibility to contact your licensor.

(2) You must send the application and background authorization form to renew your license prior to the expiration date of your cur-rent license. Your license ((can)) may be closed if we do not receive your application prior to your license expiration date.

[WSR 18-14-078, recodified as § 110-148-1340, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1340, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1350 What are the roles of the department and the **CPA?** (1) We have the legal authority to license homes for the care of children in out-of-home placement. You may choose to be supervised by us, or by a ((child placing agency ())CPA(())).

(2) We license CPAs, including tribal CPAs, to supervise foster homes. The CPA is authorized to certify to the department that you meet the licensing requirements contained in this chapter.

(3) A CPA has the discretion whether or not to certify you. If you disagree with a ((child placing agency's)) CPA's decision, you must abide by the ((child placing agency's)) CPA's grievance process to challenge the decision.

(4) A CPA may, at their discretion, have additional requirements for you to become and remain a licensed foster home under their supervision.

(5) The department has the final approval for licensing you, if you are certified by a CPA.

[WSR 18-14-078, recodified as § 110-148-1350, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1350, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1355 Can I be licensed as a foster home if I also work for a ((child placing agency)) CPA or ((children's administration)) <u>DCYF</u>? (1) If you or your ((relative(s))) relatives work for a CPA in the roles of administration, supervision, foster home certification, placement, payment authorization, or case management, you may not be certified by that CPA as a foster home.

(2) If you go to work for the agency that has already certified your home, and you serve in one of these roles, you must be recertified through another agency or become licensed directly by the department within six months of employment.

(3) You or your ((relative(s))) relatives may not have financial interest in an agency and be licensed or certified by that agency.

(4) If you or your relative works for ((DSHS)) DCYF, you must follow department policy regarding licensure.

[WSR 18-14-078, recodified as § 110-148-1355, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1355, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1365 What are the personal requirements for foster parents? (1) You must be at least ((twenty-one)) 21 years old to apply for a license.

(2) You must demonstrate you have:

(a) The understanding, ability, physical health, emotional stability, and personality suited to meet the physical, mental, emotional, cultural, and social needs of children under your care;

(b) ((You must have)) Sufficient regular income to maintain your own family, without the foster care reimbursement made for the children in your care; and

(c) ((At least one applicant in the home must have functional literacy; and

(d) You must)) To be able to communicate with the child, the department, health care providers, and other service providers.

(3) You must adhere to, follow, and comply with the case plan for the children in your care.

(4) You may not use drugs or alcohol, whether legal or illegal, in a manner that affects your ability to provide safe care to children.

((-(4))) (5) You and everyone residing on your premises or who you allow to have unsupervised access to children must demonstrate they have the ability to furnish children with a nurturing, respectful, and supportive environment.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a) (36) (A). WSR 20-03-095, § 110-148-1365, filed 1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1365, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-148-1365, filed 5/23/18, effective 6/23/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1365, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1365, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1375 What training am I required to have before I become licensed? (1) Before you are licensed for the first time, ((orientation and)) preservice training will be required for, at a minimum, the primary caregiver (((at a minimum))) in your home.

(2) All members of the household over the age of ((eighteen)) 18 who provide care must have and maintain the following training:

(a) First aid;

(b) Age appropriate cardiopulmonary resuscitation (CPR); and

(c) ((HIV/AIDS to include)) <u>B</u>loodborne pathogens and infection control standards consistent with educational materials published by the department of health ((, office on HIV/AIDS)).

(3) The department-approved first aid and CPR training must be accredited with nationally recognized standards. It also must include an in-person exercise demonstrating that you are capable of performing CPR.

(4) You must keep records in your home showing completed current first-aid and age appropriate CPR training for all care providers.

(5) Training for CPR is not required if you have a statement from a physician that the training is not advised for medical reasons. In that case, another person with current CPR training must be on the premises when children are present.

(6) Applicants with current and active medical licenses or certificates; ((+)) nurses, physicians and EMS personnel $((+))_{L}$ may submit their licenses or certificates to satisfy the first aid ((and)), CPR, and bloodborne pathogens requirement.

[WSR 18-14-078, recodified as § 110-148-1375, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1375, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1380 What training must I complete after I am licensed? (1) You and your licensor must develop an individual in-service training plan pursuant to the department's foster home training policy. The training plan will be based on the type of children in your care and your previous training and experience.

(2) If you fail to complete your training ((plan)) requirements, we may take corrective action by:

(a) Delaying your foster care renewal license until the requirements are met;

(b) No longer placing children in your home; or

(c) <u>Issuing a probationary license</u>, <u>suspending</u>, <u>or</u> revoking your license.

(3) We may modify training plans at any time and we may require specific training given the needs of the foster children placed in your home.

[WSR 18-14-078, recodified as § 110-148-1380, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1380, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1385 How do you decide ((how many children may be placed in)) the capacity for my home? (1) We will identify the maximum number, age range, and gender of children that may be placed with you. We will base this on your skills, the number of care providers,

the physical accommodations in your home, and the needs of the children placed in your home.

(2) The maximum number of children in a licensed foster home is:

(a) Six children in a home licensed with two caregivers. This includes your own children under the age of ((eighteen)) 18, and children in foster or respite care;

(b) Four children, in a home licensed with one caregiver. This includes your own children under the age of ((eighteen)) 18, and children in foster or respite care;

(c) If you already have the maximum number of your own children as specified in (a) or (b) in this subsection, you may be licensed for one foster child at our discretion if you meet the other licensing requirements.

(3) If you reach maximum capacity during licensure because you give birth or adopt, your licensor will determine your home's suitability for one additional child.

(4) At any one time you may care for not more than:

(a) Two children less than two years of age or who are nonambulatory, including your own children; or

(b) Four children with intellectual and developmental disabilities as defined in RCW 71A.10.020; or

(c) Three medically fragile foster children who need semi-skilled maintenance or supportive services. You must have the qualified training and experience to provide proper care.

(5) You may have placement of a teen parent and their child. Both the teen parent and their child do not have to be in the custody of the department or a CPA, however, they will count towards your maximum capacity.

[WSR 18-14-078, recodified as § 110-148-1385, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1385, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1390 Can I accept children outside the limitations of my license? (1) We have the discretion to allow you to temporarily exceed your capacity. ((We may do this when you provide care for a sibling group, respite care, placement of a relative child, or because you have demonstrated exceptional abilities to meet the needs of children.)) The placement must be in the best interest of the child and may not affect the health and safety of other children in the home.

(2) If your home is licensed for six foster children, LD will not allow you to exceed your capacity, except to allow:

(a) Parenting youths in foster care to remain with their children;

(b) Siblings to remain together;

(c) A child who has an established, meaningful relationship with the family to remain with the family; or

(d) A family with the necessary special training or skills to provide care to a child who has a severe disability.

(3) The approval must be in writing and we may require a written plan for additional supervision or other requirements before granting approval.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a)(36)(A). WSR 20-03-095, § 110-148-1390, filed 1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1390, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1390, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1395 Do I have to admit or retain all children? (1)You have the right to decline, to admit, or keep a child in your home((. However)), unless your decision violates the Washington state law against discrimination, chapter 49.60 RCW. For example, a provider must not decline a child because of the child's actual or perceived race, ethnicity, religion, sexual orientation, gender identity, or SO-GIE.

(2) Individual CPA programs may have contracts that specify a child cannot be denied admission.

((-(2))) (3) You do not have the authority to move a child to another home_L $(\overline{(+)})$ either temporarily or permanently $((+))_{L}$ without the consent of the child's ((DSHS worker)) DCYF caseworker or the ((child placing agency)) <u>CPA</u> case manager. This does not include temporary visits under ((seventy-two)) 72 hours. You must also comply with travel requirements in WAC ((388-148-1435)) 110-148-1435.

[WSR 18-14-078, recodified as § 110-148-1395, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1395, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1405 What are the requirements for keeping children's records? (1) When a child is placed in your foster home, you must keep the child's records in your home. You should have the following information, if available:

(a) The child's name, birth date, and legal status;

(b) Name and telephone number of the ((DSHS worker)) DCYF caseworker or case manager for each child in care;

(c) Names, ((address)) addresses, and telephone numbers of parents or persons to be contacted in case of emergency;

(d) Information on specific cultural needs of the child including a cultural plan for native children with input from the child's tribe, if appropriate;

(e) The child's medical history including any medical problems, name of doctor(s), type of medical coverage and provider;

(f) The child's mental health history and any current mental health, chemical dependency, and behavioral issues, including medical and psychological reports;

(q) The child's individualized family service plan;

(h) A written list of all prescription medications for the children in your care;

(((h))) <u>(i)</u> Dental care provider;

 $((\frac{(i)}{(j)}))$ Immunizations records; $((\frac{(j)}{(j)}))$ (k) Child's school records, report cards, school pictures, 504 plans, and individual education plans (IEP);

((((k))) (1) Special instructions including supervision requirements and suggestions for managing problem behavior;

(((1))) (m) Inventory of the child's personal belongings;

(((m))) <u>(n)</u> The child's visitation plan;

(((n))) (o) Written consent from the ((child placing agency)) CPA, if any, for providing medical care and emergency surgery, ((+)) unless that care is authorized by a court order((+)); and

(((o))) (p) Names, addresses, and telephone numbers of persons authorized to take the child in care out of your home.

(2) Foster parents are encouraged to obtain a copy of the child's court order or voluntary placement agreement that gives approval to place the child, and the child's case plan from the child's ((DSHS worker)) DCYF caseworker.

(3) At the end of the child's placement, you must return reports and information about the child or the child's family to the child's ((DSHS worker)) <u>DCYF caseworker</u> or case manager, or the child's next placement at the discretion of the child's ((DSHS worker)) DCYF caseworker or case manager.

[WSR 18-14-078, recodified as § 110-148-1405, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1405, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1410 What information is confidential and what information can I share about a child or a child's family? (1) Information about a child or the child's family is confidential and must only be shared with people directly involved in caring for a child on a need to know basis, or involved in the case plan for a child. You may discuss information about the child, the child's family and the case plan only with:

(a) Our representatives, including DCYF's LD and CW staff ((from DCFS, DLR and DDA));

(b) Department of health, department of social and health services, office of the state fire marshal and the office of the family and children's ombuds;

(c) A ((child placing agency)) CPA team assigned to the child;

(d) A child's tribal social services worker;

(e) Treatment and service providers identified in the child's case plan or with permission of the child's ((DSHS worker)) DCYF caseworker; and

(f) The child's guardian ad litem, court-appointed special advocate ((and/or)) and attorney.

(2) You may check with your child's ((DSHS worker)) DCYF caseworker for guidance about sharing information with the child's parent or guardian, teacher, counselor, doctor and others involved in the child's case plan.

(3) Child placing agencies and the department must share information about the child and child's family related to the case plan with you so that you can meet the child's needs.

[WSR 18-14-078, recodified as § 110-148-1410, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1410, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1415 Where can I get a child's health history? (1) You may get the health history and immunization record from the ((DSHS worker)) DCYF caseworker or ((child placing agency)) CPA making the placement for all children placed in your home. The health history should include:

- (a) The date of the child's last physical and dental examination;
- (b) Allergies;
- (c) Any special health ((problems)) issues;
- (d) A history of immunizations;
- (e) Clinical and medical diagnoses and treatment plans; and
- (f) All currently prescribed medications.

(2) When leaving the foster home, the health history of the child must go with the child to the next placement or be returned to the child's ((DSHS worker)) DCYF caseworker or CPA case manager.

[WSR 18-14-078, recodified as § 110-148-1415, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1415, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1420 What incidents involving children must I report? (1) You must report the following immediately and in no instance later than ((forty-eight)) 48 hours after the incident to your local ((children's administration)) DCYF intake staff and the ((child's DSHS worker)) DCYF caseworker or ((child placing agency +))CPA((+)) case manager and child's tribal Indian child welfare (ICW) case manager as applicable:

(a) Death, serious illness or injury, or psychiatric care that requires medical treatment or hospitalization of a child in care;

(b) Any time you suspect or a child discloses physical or sexual abuse, neglect, or exploitation of a child as required under chapter 26.44 RCW;

(c) Sexual contact between two or more children that is not considered typical play between preschool age children;

(d) Any disclosure by a child in care of sexual or physical abuse;

(e) Any child's suicide attempt that results in injury requiring medical treatment or hospitalization;

(f) Any use of physical restraint alleged to have been improperly applied or excessive;

(q) Physical assault between two or more children that results in injury requiring off-site medical attention or hospitalization;

(h) Physical assault of a foster parent, employee, volunteer, or others by a child in care that results in injury requiring off-site medical attention or hospitalization;

(i) Any medication given or consumed incorrectly that requires off-site medical attention; or

(j) Property damage that is a safety hazard and not immediately corrected or may affect the children's health and safety.

(2) You must report the following incidents related to a child in care as soon as possible or in no instance later than ((forty-eight)) 48 hours after the incident, to the child's ((DSHS worker)) DCYF caseworker or CPA case manager and the child's tribal ICW case manager, as applicable:

(a) Suicidal or homicidal thoughts, gestures, or attempts that do not require professional medical treatment;

(b) Unexpected health problems outside the usual range of reactions caused by medications that do not require professional medical attention;

(c) Any incident of medication incorrectly administered or consumed;

(d) Any treatment by a medical professional for emergency medical or emergency psychiatric care;

(e) Physical assault between two or more children that results in injury but does not require professional medical treatment;

(f) Physical assault of a foster parent, employee, volunteer, or others by a child that results in injury but does not require professional medical treatment;

(q) Drug or alcohol use by a foster child;

(h) Any inappropriate sexual behavior by or toward a foster child; or

(i) Use of prohibited physical restraints for behavior management.

[WSR 18-14-078, recodified as § 110-148-1420, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1420, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1420, filed 12/11/14, effective 1/11/15.1

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1425 What are my reporting responsibilities when a child is missing from care? (1) As soon as you have reason to believe a child in your care is missing as defined in WAC ((388-148-1305)) 110-148-1305 or has refused to return to or remain in your care, or whose whereabouts are otherwise unknown, you are required to notify the following:

(a) The child's ((assigned DSHS worker)) DCYF caseworker, as appropriate;

(b) ((CA)) <u>DCYF intake</u>, if the ((DSHS worker)) <u>DCYF caseworker</u> is not available or it is after normal business hours;

(c) The case manager, if the child is placed by a ((child placing agency program)) <u>CPA</u>.

(2) You are required to contact local law enforcement within six hours if the child is missing from care. You must contact law enforcement immediately in any of the following circumstances:

(a) The child is believed to have been taken from placement. This means the child's whereabouts are unknown, and it is believed that the child has been concealed, detained, or removed by another person;

(b) The child is believed to have been lured from placement or has left placement under circumstances that indicate the child may be at risk of physical or sexual assault or exploitation;

(c) The child is age ((thirteen)) 13 or younger;

(d) The child has one or more physical or mental health conditions that if not treated daily, will place the child at severe risk;

(e) The child is pregnant, or is parenting and the ((infant/ child)) infant or child is believed to be with ((him or her)) them;

(f) The child has severe emotional problems, ((+))e.g., suicidal thoughts ((+)), that if not treated, will place the child at severe risk;

(g) The child has an intellectual and developmental disability that impairs the child's ability to care for ((him/herself)) themself;

(h) The child has a serious alcohol ((and/or)) or substance abuse problem; or

(i) The child is at risk due to circumstances unique to that child.

(3) After contacting local law enforcement, you must also contact the national center for missing and exploited children at 1 (800)843-5678 and report the child missing from care.

(4) If the child leaves school or has an unauthorized absence from school, you should consult with the child's ((worker)) DCYF caseworker to assess the situation and determine when you should call law enforcement. If any of the factors listed in subsection ((s)) (2) (a) through (i) of this section are present, you and the child's ((worker)) DCYF caseworker may decide it is appropriate to delay notification to law enforcement for up to four hours after the end of the school day to give the child the opportunity to return.

(5) You must provide the following information to law enforcement and to the child's ((DSHS worker)) DCYF caseworker when making a missing child report, if available:

(a) When the child left;

(b) Location the child left;

(c) What the child was wearing;

(d) Any known behaviors or interactions that may have caused the child's departure;

(e) Possible places where the child may go;

(f) Special physical or mental health conditions or medications that affect the child's safety;

(g) Known companions who may be aware or involved in the child's absence;

(h) Other professionals, relatives, significant adults, or peers who may know where the child would go; and

(i) Recent photo of the child.

(6) You must ask law enforcement for the missing person report number and provide it to the child's ((DSHS worker)) DCYF caseworker or staff.

(7) At any time after making an initial report you learn of a missing child's whereabouts or the child returns to your home, you must report that information to the child's ((DSHS worker)) DCYF caseworker.

[WSR 18-14-078, recodified as § 110-148-1425, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1425, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1425, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1430 What are other reporting requirements? (1) Pursuant to RCW 74.15.100, you must notify the department's licensor before moving to a new location. You may request a continuation of your current license at the new location any time before moving or within 30 days after moving.

(2) You must report to your licensor immediately if:

(a) Your address or telephone number changes;

(b) The structure of your home is damaged or you plan to make changes to the structure; or

(c) You have any changes to your original licensing application or you relocate your home.

((-(2))) (3) You must report to your licensor any significant changes regarding people in your home and your property including:

(a) A change in your marital status;

(b) A separation from your spouse or partner;

(c) An arrest of anyone on the premises or who has access to children;

(d) The death of immediate family members living in your home;

(e) Anyone moving in or out of your home or on the property;

(f) Any serious physical or mental incapacity that may interfere with the care of children;

(g) Any changes in a medical condition, including changes in prescription drugs that impact your ability to care for children;

(h) A change in employment or significant decrease in income; and (i) If you adopt a child.

((-(3))) (4) The above changes may require the department or ((child placing agency)) CPA to complete a new assessment of your home. This assessment may or may not result in the issuance of a license.

[WSR 18-14-078, recodified as § 110-148-1430, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1430, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1435 What are the travel requirements for children in care? You must get written approval from the child's ((DCFS worker)) <u>DCYF caseworker</u> for children or youth in the care and custody of the department, prior to any travel over ((seventy-two)) 72 hours, and any out-of-country travel.

[WSR 18-14-078, recodified as § 110-148-1435, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1435, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1440 What are the requirements for my home and property? (1) Pursuant to RCW 74.15.100, your home must be located at the particular, fixed location stated on your license.

(2) Your home must have adequate indoor and outdoor space, ventilation, toilet and bathing facilities, light and heat to ensure the health and comfort of all members of the household.

((-(2))) (3) Your home must have a properly operating kitchen with a properly maintained and working:

(a) Sink;

(b) Refrigerator;

(c) Stove; and

(d) Oven.

(((3))) (4) You must keep your home, property, living areas, and furnishings:

(a) Clean, safe, and sanitary;

(b) Reasonably free from pests, such as rodents, flies, cockroaches, fleas, and other insects using the least toxic methods avail-

able; and

(c) Free from dangerous objects and conditions that may be a hazard to children.

((-(4))) (5) You must keep all toxic materials out of the reach of children and separated from food items.

((((5))) (6) You must provide adequate laundry and drying equipment, or make other arrangements for laundry on a regular basis.

(((6))) <u>(7)</u> People must be able to easily open doors from the inside and outside in all areas of the home that are occupied. This includes closets, bathrooms, and bedrooms. You must also have easy access to the outside in case of an emergency.

(((-7))) (8) The cleanliness and care of your home must meet generally accepted health standards for the storage and preparation of food.

(((+))) (9) You must develop a plan with your licensor to address hazardous conditions that are present in your home or on your property.

((-9)) (10) You are responsible for following all local and state regulations such as zoning regulations, local building codes, and fire codes. The department may require you to provide proof that you are complying with local regulations.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a)(36)(A). WSR 20-03-095, § 110-148-1440, filed 1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1440, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1440, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1445 What are the requirements for water, garbage, and sewer in my home? (1) You must maintain adequate sewage and garbage facilities, as well as recycling disposal service if it is available. You must discharge sewage into a public system or into a functioning septic system or a Washington state department of health approved or tribal authority alternative system.

(2) You must have access to a public water supply unless you have a private water supply tested by the local health district or a private water-testing laboratory approved by the Washington state department of ecology or tribal government. Testing is required at the time of licensing, relicensing and at any time the department or ((child placing agency)) <u>CPA</u> deems necessary.

(3) The temperature of running water ((may)) must not exceed ((one hundred twenty)) 120 degrees. If the provider does not have control over the main water temperature, the provider must prevent children from being burned or scalded by hot water.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a)(36)(A). WSR 20-03-095, § 110-148-1445, filed 1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1445, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1445, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1445, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1455 How must I keep children safe around bodies of water? (1) You must ensure children in your care are safe around bodies of water. You must:

(a) Keep all swimming pools and other bodies of water:

(i) Fenced with a locking gate; or ((other))

(ii) Another LD-approved safety device $((\div))$ and a site-specific supervision plan.

(b) Lock hot tubs when not in use;

(c) Make all potential water hazards, including wading pools, inaccessible to children when not in use;

(d) Equip your swimming pool with a life saving device, such as a ring buoy; and

(e) Empty your swimming pool after each use. If your swimming pool cannot be emptied after each use, the pool must have a working pump and filtering system.

(2) All swimming pools and other bodies of water must comply with state and local regulations. You must work with your licensor to establish a plan for the bodies of water based on the development level and behaviors of the children in your home.

(3) You must observe the following when foster children are swimming in pools and outdoor bodies of water:

(a) Swim only in designated swimming areas; or

(b) Require all children age ((thirteen)) 13 and under to wear U.S. Coast Guard-approved personal floatation devices when swimming outside the supervision of a lifeguard.

(4) If you have any water-based recreation devices, you must use and maintain them according to manufacturer's recommendations. All children and youth who ride in a water-based recreation device must wear a U.S. Coast Guard-approved personal floatation device at all times.

(5) An adult with current age-appropriate first aid and CPR or a lifequard must supervise children swimming under age ((twelve)) 12, and must be able to see and hear the children at all times. Children under the age of five must be within touching distance of a supervising adult or the birth parent at all times.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a)(36)(A). WSR 20-03-095, § 110-148-1455, filed 1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1455, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1455, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1470 What are the general requirements for bedrooms? (1) Each child must have a bedroom, approved by the licensor, with privacy and space that is appropriate and adequate to meet the child's developmental needs. Children may share bedrooms, in compliance with WAC 110-148-1475.

(2) Each bedroom must have unrestricted direct access to outdoors, as well as, one direct access to common use areas such as hallways, corridors, living rooms, day rooms, or other such common use areas.

(3) You must not use hallways, kitchens, living rooms, dining rooms, unfinished basements, or other common areas as bedrooms.

(4) Children must not be required to pass through private bedroom space in order to access common areas of the home.

(5) An adult must be on the same floor or within easy hearing distance and access to where children under six years of age are sleeping.

(6) You must provide an appropriately sized separate bed for each child with clean bedding and a mattress in good condition.

(7) Some children may soil the bed, and you may need to plan accordingly. You must provide waterproof mattress covers or moisture-resistant mattresses if needed. Each child's pillow must be covered with waterproof material or be washable.

(8) You must assure that children have access to clean clothing that is appropriate for their age. You must provide safe storage of children's clothing and personal possessions.

(9) You must provide an infant with a crib that ensures the safety of the infant, and complies with chapter 70.111 RCW and the ((Consumer Product Safety Improvement Act of 2008.)) current ASTM or consumer products safety commission (CPSC) guidelines, specifically 16 C.F.R. 1219 or 1220. Among other things, these requirements include:

(a) A maximum of 2 3/8" between vertical slats of the crib; and

(b) Cribs, infant beds, bassinets, and playpens must be made of wood, metal, or approved plastic, with secure latching devices and clean, firm, snuq-fitting mattresses covered with waterproof material that can easily be disinfected.

(10) You must not cosleep or bed share on any sleeping surface, ((+)) such as a bed, sofa, or chair((+)) with children in care.

(11) You must place infants on their backs for sleeping, unless advised differently by the child's licensed health care provider. (12) You must not have loose blankets, pillows, crib bumpers, or

stuffed toys with a sleeping infant.

(13) You may swaddle infants using one lightweight blanket upon the advice and training of a licensed health care provider. You must keep the blanket loose around the hips and legs when swaddling in order to avoid hip dysplasia. You may swaddle infants under two months of age unless a licensed health care provider directs otherwise. You must not dress a swaddled infant in a manner that allows them to overheat.

(14) You must not use wedges and positioners with a sleeping infant unless advised differently by the infant's licensed health care provider.

(15) You must not use weighted blankets for children under three years of age or for children of any age with mobility limitations.

(16) You may use a weighted blanket upon the advice and training from a licensed health care provider for children over the age of three years who do not have mobility limitations. You must meet the following requirements:

(a) The weight of the blanket must not exceed ((ten)) 10 percent of the child's body weight;

(b) Metal beads are choking hazards and must not be used in a weighted blanket;

(c) You must not cover the child's head with a weighted blanket or place it above the middle of the child's chest;

(d) The weighted blanket must not hinder a child's movement; and

(e) The weighted blanket must not be used as a restraint.

(17) You must not allow children to use the loft style beds or upper bunks if the child is vulnerable due to age, development, or condition, such as preschool children, expectant mothers, and children with a disability.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a) (36) (A). WSR 20-03-095, § 110-148-1470, filed 1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1470, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, and 74.13.031. WSR 17-22-039, § 388-148-1470, filed 10/24/17, effective 11/24/17. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1470, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1470, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1475 What are the requirements for sharing bedrooms? (1) A provider must consider what bedroom placement is in the best interest of a foster child in consultation with the child's DCYF caseworker and all other children in the household.

(2) Shared bedrooms must provide enough floor space for the safety and comfort of children.

(((2))) <u>(3)</u> Foster teen parents may sleep in the same room with their children. When a teen parent and ((his/her)) their infant sleep in the same room, the room must contain at least ((eighty)) <u>80</u> square feet of usable floor space. ((You must allow)) Only one parent and ((infant(s) to)) their children may occupy a bedroom.

(((3))) (4) No more than four children ((shall)) may sleep in the same room. This includes foster children and any other children.

(((4))) <u>(5)</u> Children ((over)) <u>under the</u> age ((one)) <u>of two</u> may share a bedroom with an adult ((who is not the child's parent only)), if it is ((needed for close supervision due to the child's medical or developmental condition and the child's licensed health care provider recommends it in writing)) in the best interest of the child.

(((-5))) (6) An individual in the extended foster care program may share a bedroom with a younger child of the same gender. If the younger child is unrelated to the individual in the extended foster care program, the younger child must be at least ((ten)) 10 years of age. A provider may place a child who identifies as transgender or gender fluid in a bedroom with a child of the same or similar gender identity.

(((6))) <u>(7)</u> Foster children may not share the same bedroom with a child of another gender *identity* unless all children are under age

six. In circumstances of transgender or gender fluidity, a provider may place a child in a bedroom with another child of the same or similar gender identity.

(((7))) <u>(8)</u> An exception may be granted to ((388-148-1475)) <u>sub-</u> sections (3) through (6) of this section with an administrative approval if it is supported by the licensor and the child(ren)'s ((DSHS worker)) DCYF caseworker, and is in the best interest of the child.

[WSR 18-14-078, recodified as § 110-148-1475, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1475, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1475, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1480 What are the requirements for animals? (1) All animals on your property must be safe and properly cared for in a sanitary manner.

(2) ((You must comply with city, county, state and federal statutes and regulations regarding:

(a) Animal safety;

(b) Vaccinations; and

(c) Standard veterinary care.)) Pursuant to WAC 246-100-197(3), your dog, cat, or ferret must be vaccinated and revaccinated against rabies following veterinary and USDA licensed rabies vaccine manufacturer instructions, unless a licensed veterinarian states in writing that such vaccinations may be contrary to your pet's health.

(3) You ((may)) must not have an animal in your home or on your premises that is dangerous to children in care.

(4) We have the discretion to limit the type and number of household pets and animals if we determine that there are risks to the children in your care.

(5) All pet medications must be kept in a separate locked container.

[WSR 18-14-078, recodified as § 110-148-1480, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1480, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 20-03-095, filed 1/13/20, effective 2/1/20)

WAC 110-148-1495 What are the requirements for smoking around children? (1) You must not allow smoking in your home. You ((may)) must not smoke in motor vehicles used to transport children.

(2) You may permit adults to smoke outdoors away from children in accordance with RCW 70.160.075.

(3) These requirements do not apply to traditional or spiritual Native Alaskan/Native American or religious ceremonies involving the use of tobacco.

[Statutory Authority: RCW 74.15.030, chapter 74.15 RCW, P.L. 115-123 and 42 U.S.C. § 671 (a)(36)(A). WSR 20-03-095, § 110-148-1495, filed 1/13/20, effective 2/1/20. WSR 18-14-078, recodified as § 110-148-1495, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1495, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1500 Under what conditions may I have guns and weapons on my property? (1) You must notify your licensor if you or someone else in your home has a gun or weapon on the property. This includes but is not limited to BB guns, pellet guns, air rifles, stun guns, antique guns, handguns, rifles, shotguns and archery equipment.

(2) You must always keep guns and ammunition out of reach of children. When at home, you must keep guns and ammunition in locked containers out of reach of children. You must store guns separate from the ammunition unless stored in a locked gun safe.

(3) You must keep bows and arrows and other weapons in locked containers out of reach of children.

(4) If you store guns in a container that may be easily breakable, you must secure them with a locked cable or chain placed through the trigger guards.

(5) Whenever possible, we encourage you to equip guns with a trigger guard lock.

(6) You must keep keys to the locked storage area of weapons secure from children.

(7) Children may use a gun only if the child's ((worker)) <u>DCYF</u> caseworker approves and the youth and supervising adult has completed an approved gun or hunter safety course.

[WSR 18-14-078, recodified as § 110-148-1500, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1500, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1500, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1515 What are the requirements regarding food? (1) Food served to children in your care must meet their nutritional and developmental needs, with a variety of options for adequate nutrition and meal enjoyment.

(2) Children's cultural needs should also be considered when planning meals.

(3) All home-canned foods must be preserved following published procedures and you must be able to provide the printed published procedures that you followed.

(4) Before you modify a child's diet, you must obtain written authorization from a licensed health care provider for children under the age of ((ten)) <u>10</u> years.

(5) The milk or milk products you serve must be pasteurized. Children between the ages of ((twelve)) <u>12</u> and ((twenty-four)) <u>24</u> months must receive whole milk unless you have written authorization from a licensed health care provider not to serve whole milk.

(6) Children under the age of ((twelve)) <u>12</u> months must receive formula or breast milk unless the child's licensed health care provider authorizes a different diet.

(7) Before serving a child breast milk you must have approval of the child's ((DSHS worker)) <u>DCYF caseworker</u>, licensed health care provider, and parent or guardian. If breast milk is provided by anyone other than a baby's biological mother, it must be obtained through a licensed breast milk bank.

(8) When you are using bottles to feed infants, you must sterilize and use them according to product standards and commonly acceptable practices. You must refrigerate filled bottles if you do not use them immediately, and you must empty the bottle if not used within ((twenty-four)) 24 hours.

(9) To prevent burns, formula or breast milk must not be warmed in a microwave oven.

[WSR 18-14-078, recodified as § 110-148-1515, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, and 74.13.031. WSR 17-22-039, § 388-148-1515, filed 10/24/17, effective 11/24/17. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1515, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1520 What services am I expected to provide for children in my care? (1) You must make all reasonable efforts to ensure that children are not abused or neglected, per RCW 26.44.020(1) and chapter ((388-15)) 110-30 WAC.

(2) You must provide and arrange for care that is appropriate for the child's age, <u>SOGIE</u>, and development including:

- (a) Emotional support;
- (b) Nurturing and affection;

(c) Structured daily routines and living experiences; and

(d) Activities that promote the development of each child. This includes cultural and educational activities in your home and the community.

(3) In caring for infants and young children you must:

(a) Hold infants, under the age of six months, for all bottle feedings;

(b) Hold infants at other times for the purposes of comfort and attention; and

(c) Allow children plenty of free time outside of a swing, crib or playpen.

(4) In caring for youth enrolled and participating in the extended foster care program you must:

(a) Provide a youth opportunity and support for achieving independence; and

(b) Allow a youth responsibility for their actions.

(5) Before making significant changes in a child's appearance, you must consult with the child's ((DSHS worker)) DCYF caseworker. These significant changes include, but are not limited to, body piercing, tattoos, and major changes in hairstyle or color.

(6) You must follow all state and federal laws regarding nondiscrimination while providing services to children in your care. You must ((treat)) support and engage with foster children in your care with dignity and respect regardless of actual or perceived race, ethnicity, culture, ((sexual orientation and gender identity)) sex, or SOGIE.

(7) You must connect a foster child with resources that ((meets a child's)) supports and affirms their needs regarding race, religion, culture, ((sexual orientation and gender identity)) and SOGIE. These <u>resources</u> include ((cultural,)) <u>emotional and developmental support</u> for a child's ethnic identity and SOGIE, educational needs, and spiritual activities in your home and community ((including)) to include tribal activities within the child's tribal community or extended tribal family. Your licensor($(_{\overline{r}})$) or the child's ($(_{\overline{DSHS} worker or})$) DCYF caseworker, CPA case manager ((and/or)), or child's tribal ICW case manager can assist you with identifying these resources.

(8) You must ((be sensitive to)) support a child's religion or spiritual practices ((. You must provide)) by providing adequate ((opportunity)) opportunities for religious or spiritual training and allowing a child meaningful participation appropriate to the child's spiritual beliefs. You may not require any child to participate in practices against their beliefs.

(9) You must support a foster child's SOGIE by using their pronouns and chosen name, and respecting the child's right to privacy concerning their SOGIE.

(10) You must provide for the child's physical needs. This includes adequate hygiene, nutritional meals and snacks, and readily available drinking water. This also includes a balanced schedule of rest, active play, and indoor and outdoor activity appropriate to the age of the child in care.

((-(10))) (11) You must guide the child to develop daily living skills according to the child's abilities and development. This may include assigning daily chores to children.

(((11))) (12) The department will identify a suitable ((perma- nent)) case plan including permanency for children in its care and custody. You ((may)) must not interfere with this plan. You may attend appropriate shared planning meetings to participate in the decision

making process and provide input on the child. You may submit information about the child's permanent plan and other issues through the caregiver's report to the court.

[WSR 18-14-078, recodified as § 110-148-1520, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1520, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1520, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1525 What are the educational and vocational instruction requirements for children in care? ((((1))) You must meet the following requirements for providing education and vocational instruction to the children under your care. For each child you must:

((-(a))) (1) Follow the educational plan approved by the child's ((DSHS worker)) DCYF caseworker;

(((b))) <u>(2)</u> Home schooling ((is)), private schooling, and alternative learning experience instruction are prohibited for all children in the care and custody of the department, unless approved by a court ruling;

(((c))) <u>(3)</u> Support the child in regular school attendance. If a child is absent from school you must follow the school's reporting requirements. Notify the child's ((DSHS worker)) DCYF caseworker if the child is absent from school more than three consecutive school days;

(((d))) <u>(4)</u> Receive approval from the child's ((DCFS worker)) <u>DCYF caseworker</u> prior to making any changes to a child's educational plan;

(((e))) (5) Support the child's educational plan by providing each child with necessary school supplies and a suitable place to study;

((-(f))) (6) Develop a transportation plan with the child's (-DSHS)worker)) <u>DCYF caseworker</u> to ensure school attendance; and

(((g))) (7) Encourage older youth to pursue a post-secondary education when appropriate.

[WSR 18-14-078, recodified as § 110-148-1525, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1525, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1525, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1530 May children participate in everyday activities under my care? (1) You may decide what family or community activities are appropriate for foster children. These activities must be appropriately supervised and may not interfere with visitation with the child's parents or guardians.

(2) Children may participate in family, community or friend social activities, organized sports activities, or field trips. Overnight stays over ((seventy-two)) 72 hours requires ((DSHS worker)) DCYF caseworker approval. Any activities requiring travel must comply with WAC ((388-148-1435)) 110-148-1435.

(3) All high-risk activities, including the use of power driven machines or other hazardous equipment, must be properly supervised by an adult. When participating in high-risk activities, children must:

(a) Be instructed on, and required to use appropriate safety equipment, such as helmets and life vests; and

(b) Be in continuous visual or auditory range at all times, unless approved by the child's ((DSHS worker)) DCYF caseworker.

(4) It may be appropriate for some children to obtain employment when:

(a) Laws regarding minors working are followed; and

(b) The child's work does not interfere with school.

(5) Youth may obtain a driver's license if you agree to act as the "((parent/guardian)) parent or guardian" for the purposes of the Intermediate Driver's License Law. If you act in this capacity for a youth in out-of-home care who is placed in your home, you will also be responsible for the youth's insurance until the youth leaves your home or ages out of care, or if you choose to cancel the youth's insurance. If you choose to cancel the youth's insurance, you must notify the youth's ((worker)) DCYF caseworker at least five days before the cancellation becomes effective.

[WSR 18-14-078, recodified as § 110-148-1530, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-148-1530, filed 5/23/18, effective 6/23/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1530, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1535 Can I provide care to youth enrolled in the extended foster care program? ((-(1))) You can serve youth enrolled in the extended foster care program if you meet the requirements in WAC ((388-25-0500 to 388-25-0548)) <u>110-90-0010 through 110-90-0200</u>. The youth enrolled and participating in the extended foster care program are considered children only for the purposes of the dependency. Otherwise the youth has the legal status and legal rights of an adult. The youth is responsible for ((his or her)) their actions, including:

(((a))) <u>(1)</u> Purchases;

(((b))) <u>(2)</u> Driving;

(((c))) <u>(3)</u> Traveling; or

(((d))) (4) Financial obligations.

[WSR 18-14-078, recodified as § 110-148-1535, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1535, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1540 What privacy must I provide for children in my (1) You must assure the right to privacy of personal mail, care? electronic mail, and phone calls unless:

(a) We ask you to provide monitoring; or

(b) The court approves implementation of the monitoring as part of the child's case plan.

(2) ((CA)) <u>DCYF</u> prohibits the use of video and audio monitoring of children in care in the interior of foster homes unless all of the following are met:

(a) The ((DLR)) LD senior administrator grants approval for the use of an electronic monitoring device in your facility following a request by the child's ((DSHS worker)) DCYF caseworker;

(b) The court approves implementation of the monitoring as part of the child's case plan; and

(c) You maintain a copy of the approval.

(3) The prohibition of audio or visual monitoring does not include monitoring of the following:

(a) Infants or children through four years of age;

(b) Medically fragile or sick children;

(c) Video recording equipment to document actions of a child as directed in writing by the child's physician;

(d) Video recording for special events such as birthday parties or vacations; or

(e) The use of door or window alarms or motion detectors.

[WSR 18-14-078, recodified as § 110-148-1540, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1540, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1540, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1545 What belongings will foster children take when they leave my home? (1) You must permit a child who leaves your home to take their personal belongings with them. This includes belongings

the child brought with them and acquired in your care, such as clothing, mementos, bicycles, gifts, and any saved money.

(2) If it is not possible for the child to take their belongings at the time they leave, you are required to secure them for up to ((thirty)) 30 days and cooperate with the child's ((DSHS worker)) DCYF caseworker to transfer them to the child, as soon as possible.

[WSR 18-14-078, recodified as § 110-148-1545, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1545, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1550 What medical and dental care must I provide to children? (1) You must ensure that children receive appropriate medical and dental care.

(2) You must make sure children have routine medical, dental, and vision care, and receive transportation to and from these scheduled appointments.

(3) You must arrange for an early and periodic screening, diagnosis and treatment (EPSDT) exam, also referred to as the well child exam (WCE), for children who are in your care for more than ((thirty)) <u>30</u> days, if that child has not had an EPSDT exam in the ((thirty)) <u>30</u> days prior to entering out-of-home care((. EXCEPTION:)), except for children placed by DDA through a voluntary placement agreement. ((+)) For children placed by DDA, follow the direction of DDA regarding the need for an EPSDT exam after placement.((+)) In addition, you must ensure that each child in your care ((has an)) completes regular EPSDT exams according to the EPSDT examination periodicity schedule: First exam by one month of age, then at two, four, six, nine, 12, 15, 18, and 24 months. Exams must be scheduled annually after 24 months of age.

(4) You must obtain and follow instructions from the child's medical provider if you give medication or treatment((τ)) and use medications as prescribed per the medication label. Prescription or overthe-counter medications ((shall)) must be clearly labeled.

(5) You must make plans to respond to illness and emergencies, including serious injuries and contact with toxic or poisonous substances.

(6) You must immediately call 911 in a life-threatening emergency and notify:

(a) The child's ((DSHS worker)) DCYF caseworker or CPA case manager ((and/or)) and child's tribal ICW case manager; and

(b) Your licensor.

(7) You must have first-aid supplies available in your home including:

- (a) Protective nonlatex gloves:
- (b) Bandages;
- (c) Scissors and tweezers;
- (d) Ace bandage;
- (e) Gauze; and

(f) Nonbreakable and mercury free thermometer.

(8) One-way resuscitation masks are recommended but not required.

[WSR 18-14-078, recodified as § 110-148-1550, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1550, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1555 What are the immunization requirements? (1) Children placed in your home by the department are required to be immunized according to the Advisory Committee on Immunization Practices of the Centers for Disease Control (ACIP/CDC) as established in the Recommended Immunization Schedule for Persons Aged 0-18 Years, United States, 2012 and as amended each subsequent year, except for rotavirus and human papillomavirus.

(2) If a child who has not received all recommended immunizations is placed in your care, you must take the child to a health care pro-vider as soon as medically possible for catch-up immunizations according to the ACIP/CDC catch-up schedule.

(3) You must contact each child's ((DSHS worker)) DCYF caseworker and your licensor if a serious infection or a communicable disease is a threat to the children in your care. The department may remove a foster child from your home when the threat of a serious infection or communicable disease creates a risk to the health of any child placed in your home.

[WSR 18-14-078, recodified as § 110-148-1555, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1555, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1560 What are the requirements for obtaining consent for emergent and routine medical care? (1) The department is the le-gal custodian for children it places in care. We have the authority to consent to ((emergent)) emergency and routine medical services on behalf of a child under the age of ((eighteen)) 18. Youth in care over the age of ((eighteen)) 18 must consent to their own medical care or have an identified person who has been granted the legal authority to consent on their behalf. We delegate some of the authority to providers. You must contact the child's ((DSHS worker or children's administration)) DCYF caseworker or DCYF intake for specific information for each child.

(2) If you care for children in the custody of another agency, tribal court or other court, you must follow the direction of that agency or court regarding permission to provide consent for medical care.

(3) In case of medical emergency, contact the child's ((DSHS worker or children's administration)) <u>DCYF caseworker or DCYF</u> intake as soon as possible.

(4) It is your responsibility to ensure that a child receives the necessary medical attention if injured or harmed. In the event of a life-threatening medical emergency, you must contact 911 prior to transporting the child to a medical facility.

[WSR 18-14-078, recodified as § 110-148-1560, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1560, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1565 How must medications be stored? (1) Prescription and over the counter medications must be kept in a locked container.

(2) ((Internal and external medication must be stored separately. (3) Human medication and animal medication must be kept separate and in locked containers.)) Life-saving medications must be accessible in an emergency.

[WSR 18-14-078, recodified as § 110-148-1565, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1565, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1570 Who may access stored medications? Only you or another authorized care provider, ((+)) such as a respite provider er((+)), is allowed to have access to medications for a child in your care except as noted in WAC ((388-148-1580)) 110-148-1580.

[WSR 18-14-078, recodified as § 110-148-1570, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1570, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1575 What are other requirements for medications? (1) You must keep a written record of all prescription medications and the dates given for the children in care. This list must go with the child when ((a child)) they leave((s)) your home.

(2) You must notify the child's ((DSHS worker)) DCYF caseworker of changes in prescribed medications.

(3) You must give prescription and over the counter medications as specified on the medication label or as prescribed by persons legally authorized to prescribe medication. This includes herbal supplements and remedies, vitamins, or minerals.

(4) You must give children nonprescription medication according to product instructions and seek medical advice regarding possible interactions with a child's other prescription and nonprescription medications.

[WSR 18-14-078, recodified as § 110-148-1575, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1575, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1580 Can children take their own medications? (1)You may permit children under your care to take their own medicine as long as:

(a) They are physically and mentally capable of properly taking the medication; and

(b) You obtain and keep written approval by the child's ((DSHS worker)) DCYF caseworker in your records.

(2) When a child is taking their own medication, the medication and medical supplies must be kept locked or inaccessible to unauthorized persons.

[WSR 18-14-078, recodified as § 110-148-1580, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1580, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1590 Can I choose to give prescribed medications, including psychotropic medication? (1) You must not start or stop giving a child's prescribed medication without approval from the child's physician.

(2) In addition to the physician, you must coordinate starting or stopping a child's psychotropic medication with the child's ((social worker)) DCYF caseworker to determine what consent is needed. The ((social worker)) caseworker may need to obtain consent from the child age ((thirteen)) 13 and older, the parent or guardian, or the court.

(3) You must not give medications to a child that has been prescribed for someone else.

[WSR 18-14-078, recodified as § 110-148-1590, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1590, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1595 Can I accept prescription medication from a child's parent or guardian? (1) The only medication you may accept from the child's parent, guardian, or responsible relative is medicine in the original container labeled with:

- (a) The child's first and last name;
- (b) The date the prescription was filled;
- (c) The medication's expiration date; and

(d) Readable instructions for administration ((+)), either the manufacturer's instructions or instructions printed on the prescription $label((+))_{L}$ of the medication.

(2) You must notify the child's ((DSHS worker)) DCYF caseworker when you receive a new prescription from a child's parent or guardian before giving it to the child.

[WSR 18-14-078, recodified as § 110-148-1595, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1595, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1600 What is respite care? (1) Respite care is provided by someone who is approved by ((the department)) LD and is paid to care for the foster children or provide relief for the foster parents. If the person provides care in their own home, they must be foster licensed. A ((non-licensed)) nonlicensed respite care provider caring for ((a child(ren))) children in your home must follow the requirements to become a ((DLR)) <u>LD</u> certified respite provider.

(2) You may arrange respite care to provide substitute care in your absence, or to support you as part of a child's case plan. If you use a respite care provider, you should seek prior approval from the child's ((DSHS worker)) <u>DCYF caseworker</u> or CPA case manager ((and/ or)), and, if applicable, the child's tribal ICW case manager.

[WSR 18-14-078, recodified as § 110-148-1600, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1600, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1605 Who can watch my foster child when I am away from home? (1) You may use a respite provider as defined in WAC ((388-148-1600)) 110-148-1600 to watch your foster child when you are away from home.

(2) You may also use a friend or relative as a substitute care provider for foster children when you are away from home without arranging for a background check. Substitute care provided on an occasional basis for less than ((seventy-two)) <u>72</u> hours will be at your own expense. You may use a substitute care provider only when you have no reason to suspect that ((he or she)) the provider would be a risk to children and has no founded child abuse or neglect history or criminal history that would disqualify him or her from caring for children. You must also:

(a) Be familiar and comfortable with the substitute care provider who will be caring for the child;

(b) Meet the substitute care provider and review the expectations regarding supervision and discipline of the foster children;

(c) Provide the substitute care provider any special care instructions; and

(d) Tell the substitute care provider how to contact you in case of an emergency.

(3) If care by the substitute care provider is a regular arrangement, you must have written approval from the child's ($(\frac{DSHS worker})$) <u>DCYF caseworker</u>. The substitute care provider must provide evidence of a cleared Washington state patrol background check and meet additional requirements for members of the household as defined in WAC ($(\frac{388-148-1320})$) <u>110-148-1320</u> (2) and (4).

(4) Based on the special needs of a child, the ((DSHS worker)) <u>DCYF caseworker</u> may require the substitute care provider to have additional skills or training.

(5) Teenagers, age sixteen and seventeen, who meet all requirements stated in this section, may supervise no more than three foster children.

(6) Foster children may provide short-term babysitting for children not in foster care. Sexually aggressive and physically assaultive youth ((may)) <u>must</u> not babysit children.

[WSR 18-14-078, recodified as § 110-148-1605, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1605, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1605, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1610 What are the requirements for supervising children in my care? (1) You must provide and arrange for adult supervision that is appropriate for the child's age and development. (2) For each child in your care you must:

(a) Provide personal attention to the child(ren), and additional supervision as needed and required by us; and

(b) Advise the child's ((DSHS worker)) DCYF caseworker about your plan for supervision of children in your care if you work outside the home. You will also provide a general plan to your licensor during the licensing process.

(3) When supervising children, you must not:

(a) Leave children under five years of age and children with intellectual and developmental disabilities unattended in a bathtub or shower; or

(b) Use cribs, bassinets, cradles, playpens and swings as a substitute for supervising or one-on-one play with infants and young children.

(4) You are encouraged to obtain and follow a written supervision plan for every child in your care from the child's ((DSHS worker)) <u>DCYF caseworker</u> or CPA case manager ((and/or)) and tribal ICW case manager.

[WSR 18-14-078, recodified as § 110-148-1610, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1610, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1615 What are the requirements for disciplining children? (1) You must use discipline that is appropriate to the child's age and level of development.

(2) You must establish limits and use positive methods of guidance that promote self-control, self-responsibility, self-direction, self-esteem, and cooperation.

(3) Positive methods include:

(a) Directing children to another activity;

(b) Giving choices when appropriate;

(c) Time out as a method of guidance, allowing the child time to change ((his/her)) their behavior;

(d) Planning in order to prevent problems; and

(e) Using positive reinforcement and encouraging children to express their feelings and ideas.

(4) You must not use physical punishment or verbally abusive, neglectful, humiliating, or frightening punishment which includes, but is not limited to:

(a) Spanking;

(b) Cursing;

(c) Threats, humiliation or intimidation; and

(d) Locked time-out rooms or methods that interfere with a child's basic needs, including withholding of food.

(5) You and authorized care providers are responsible for discipline; you ((may)) must not give that responsibility to a child.

(6) You must allow a child needed services, including contact with the child's ((DSHS worker)) DCYF caseworker, legal representatives, ((legal)) parents or guardians, or other family members.

(7) You will develop a written plan for disciplining children with your licensor and you must follow that plan.

[WSR 18-14-078, recodified as § 110-148-1615, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1615, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1620 When may a child be restrained? (1) You may use physical restraint when a child's behavior poses an immediate risk to physical safety. The restraint must be reasonable and necessary to:

(a) Prevent a child from harming self or others; or

(b) Protect property from serious damage.

(2) You must not use physical restraint as a form of punishment or discipline. You must not use mechanical restraints such as handcuffs and belt restraints unless ordered by the child's physician. You must not use physical restraint that restricts breathing, inflicts pain to manage behavior, or is likely to cause injury that is more than temporary. This includes, but is not limited to:

(a) Restriction of movement by placing pressure on joints, chest, heart, or vital organs;

(b) Sleeper holds, which are holds used by law enforcement officers to subdue a person;

(c) Arm twisting;

(d) Hair holds;

(e) Choking or putting arms around the throat; or

(f) Chemical restraints, such as pepper spray.

(3) You must document your use of physical restraint and send a copy to the child's ((DSHS worker)) <u>DCYF caseworker and LD licensor</u> within ((forty-eight)) <u>48</u> hours. If you are supervised by a ((child placing agency)) <u>CPA</u>, you must contact the case manager and keep a copy of the documentation on the premises.

(4) When you have to use physical restraints on a regular basis, you must get prior written approval from the child's ((DSHS worker)) <u>DCYF caseworker</u> as well as verbal or written approval by ((DLR)) <u>LD</u>.

[WSR 18-14-078, recodified as § 110-148-1620, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1620, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1625 Will you license or continue to license me if I violate licensing requirements? (1) We may modify, deny, suspend, or revoke your license when:

(a) You do not meet the licensing requirements in this chapter;

(b) You or others in your home may not have unsupervised access to children;

(c) We have determined that you have abused or neglected a child;

(d) You commit, permit, or assist in an illegal act on the premises of a home or facility providing care to children;

(e) You knowingly provide false information to us;

(f) You are unable to manage your property and financial responsibilities; or

(q) You cannot provide for the safety, health, and well-being of the children in your care; or

(h) You cannot or will not support a child's cultural needs including needs based on the child's race, ethnicity, religion, or SO-GIE.

(2) We will send you a certified letter telling you of the decision to modify, deny, suspend, or revoke your license. In the letter, we will also tell you what you need to do if you disagree with the decision.

(3) The department has jurisdiction over all foster home licenses and over all holders of and applicants for licenses as provided in RCW 74.15.030(5). This jurisdiction is retained even if you request to withdraw the application, or you surrender or fail to renew your license.

[WSR 18-14-078, recodified as § 110-148-1625, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, and P.L. 113-183. WSR 16-17-101, § 388-148-1625, filed 8/19/16, effective 9/19/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1625, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1635 Can people living in my home be disqualified from having access to the children in my care? (1) The department must disqualify people living in your home if they do not meet the requirements of this chapter ((388-148 WAC)), or cannot have unsupervised access to children because of their background check (chapter ((388-06A)) 110-04 WAC).

(2) We will notify you if a person in your home is disqualified from having unsupervised access to children. This could also lead to denial, suspension, or revocation of your license.

[WSR 18-14-078, recodified as § 110-148-1635, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031. WSR 16-06-041, § 388-148-1635, filed 2/24/16, effective 3/26/16. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1635, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1645 What may I do if I disagree with your decision to modify, deny, suspend, or revoke my license, or to disqualify my background check? You have the right to request an administrative hearing if you disagree with any of these actions. You must request this hearing within ((twenty-eight)) 28 calendar days of receiving a certified letter with our decision (((see)), as provided in chapters 34.05 RCW and ((chapter 388-02)) 110-03 WAC((). To request a hearing you must send a letter to the Office of Administrative Hearings, P.O. Box 42489, Olympia, Washington 98504-2489, 1-800-583-8271. The letter must have the following:

(1) A specific statement why you disagree with our decision and any laws you believe are related to your claim; and

(2) A copy of the certified letter we sent to modify, revoke, suspend, or deny your license or to disqualify your background check)).

[WSR 18-14-078, recodified as § 110-148-1645, filed 6/29/18, effective 7/1/18. Statutory Authority: RCW 74.15.010, 74.15.030, 74.15.040, 74.15.090, 74.13.031, 74.39A.056, 43.43.832. WSR 18-11-138, § 388-148-1645, filed 5/23/18, effective 6/23/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1645, filed 12/11/14, effective 1/11/15.]

AMENDATORY SECTION (Amending WSR 18-14-078, filed 6/29/18, effective 7/1/18)

WAC 110-148-1650 How do I appeal the decision of the office of administrative hearings' administrative law judge? (1) The decision of the administrative law judge is the final decision of the department unless you or the department files a petition for review with ((DSHS)) DCYF board of appeals within ((twenty-one)) 21 calendar days after the administrative law judge's decision is mailed to the parties.

(2) The procedure for requesting or responding to a petition for review with the board of appeals is described in ((WAC 388-02-0560) through WAC 388-02-0635)) WAC 110-03-0510 through 110-030-0530.

(3) We will not appeal decisions made by the board of appeals. (4) If you disagree with the board of appeals, you may file a petition in superior court and ask for further review((-, -)), as provided in RCW 34.05.510 to 34.05.598((+)).

[WSR 18-14-078, recodified as § 110-148-1650, filed 6/29/18, effective 7/1/18. Statutory Authority: Chapters 13.34 and 74.13 RCW, RCW 74.15.030(2), 74.15.311(2), 74.13.032, 13.04.011, 74.13.020, 13.34.030, 74.13.031, 13.34.145, 74.15.311, 74.15.030, and 2013 c 105. WSR 15-01-069, § 388-148-1650, filed 12/11/14, effective 1/11/15.]