

CERTIFICATION OF ENROLLMENT

HOUSE BILL 2788

Chapter 85, Laws of 1998

55th Legislature
1998 Regular Session

NURSING ASSISTANT TRAINING

EFFECTIVE DATE: 6/11/98

Passed by the House February 10, 1998
Yeas 96 Nays 0

CLYDE BALLARD
**Speaker of the
House of Representatives**

Passed by the Senate March 3, 1998
Yeas 48 Nays 0

BRAD OWEN
President of the Senate

Approved March 20, 1998

GARY LOCKE
Governor of the State of Washington

CERTIFICATE

I, Timothy A. Martin, Chief Clerk of the House of Representatives of the State of Washington, do hereby certify that the attached is **HOUSE BILL 2788** as passed by the House of Representatives and the Senate on the dates hereon set forth.

TIMOTHY A. MARTIN
Chief Clerk

FILED

March 20, 1998 - 5:09 p.m.

**Secretary of State
State of Washington**

HOUSE BILL 2788

Passed Legislature - 1998 Regular Session

State of Washington 55th Legislature 1998 Regular Session

By Representatives Backlund, Cody, Dyer and Kenney

Read first time 01/20/98. Referred to Committee on Health Care.

1 AN ACT Relating to nursing assistant training; and amending RCW
2 74.39A.050.

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

4 **Sec. 1.** RCW 74.39A.050 and 1997 c 392 s 209 are each amended to
5 read as follows:

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

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

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

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

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

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

10 (6) Prompt and specific enforcement remedies shall also be
11 implemented without delay, pursuant to RCW 74.39A.080, RCW 70.128.160,
12 chapter 18.51 RCW, or chapter 74.42 RCW, for providers found to have
13 delivered care or failed to deliver care resulting in problems that are
14 serious, recurring, or uncorrected, or that create a hazard that is
15 causing or likely to cause death or serious harm to one or more
16 residents. These enforcement remedies may also include, when
17 appropriate, reasonable conditions on a contract or license. In the
18 selection of remedies, the safety, health, and well-being of residents
19 shall be of paramount importance.

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

29 (8) No provider or staff, or prospective provider or staff, with a
30 stipulated finding of fact, conclusion of law, an agreed order, or
31 finding of fact, conclusion of law, or final order issued by a
32 disciplining authority, a court of law, or entered into a state
33 registry finding him or her guilty of abuse, neglect, exploitation, or
34 abandonment of a minor or a vulnerable adult as defined in chapter
35 74.34 RCW shall be employed in the care of and have unsupervised access
36 to vulnerable adults.

37 (9) Under existing funds the department shall establish internally
38 a quality improvement standards committee to monitor the development of
39 standards and to suggest modifications.

1 (10) Within existing funds, the department shall design, develop,
2 and implement a long-term care training program that is flexible,
3 relevant, and qualifies towards the requirements for a nursing
4 assistant certificate as established under chapter 18.88A RCW. This
5 subsection does not require completion of the nursing assistant
6 certificate training program by providers or their staff. The long-
7 term care teaching curriculum must consist of a fundamental module, or
8 modules, and a range of other available relevant training modules that
9 provide the caregiver with appropriate options that assist in meeting
10 the resident's care needs. Some of the training modules may include,
11 but are not limited to, specific training on the special care needs of
12 persons with developmental disabilities, dementia, mental illness, and
13 the care needs of the elderly. No less than one training module must
14 be dedicated to workplace violence prevention. The nursing care
15 quality assurance commission shall work together with the department to
16 develop the curriculum modules (~~and~~). The nursing care quality
17 assurance commission shall direct the nursing assistant training
18 programs to accept some or all of the skills and competencies from the
19 curriculum modules (~~hour for hour~~) towards meeting the requirements
20 for a nursing assistant certificate as defined in chapter 18.88A RCW.
21 A process may be developed to test persons completing modules from a
22 caregiver's class to verify that they have the transferable skills and
23 competencies for entry into a nursing assistant training program. The
24 department may review whether facilities can develop their own related
25 long-term care training programs. The department may develop a review
26 process for determining what previous experience and training may be
27 used to waive some or all of the mandatory training. The department of
28 social and health services and the nursing care quality assurance
29 commission shall work together to develop an implementation plan by
30 December 12, 1998.

Passed the House February 10, 1998.

Passed the Senate March 3, 1998.

Approved by the Governor March 20, 1998.

Filed in Office of Secretary of State March 20, 1998.