SUBSTITUTE HOUSE BILL 1218

State of Washington 67th Legislature 2021 Regular Session

By House Health Care & Wellness (originally sponsored by Representatives Bateman, Simmons, Sells, Lekanoff, Peterson, Stonier, Davis, Taylor, Dolan, Orwall, Cody, Santos, Ortiz-Self, Fitzgibbon, Slatter, Bronoske, Callan, Valdez, Ramel, Riccelli, Macri, Goodman, and Harris-Talley)

READ FIRST TIME 02/12/21.

AN ACT Relating to improving the health, safety, and quality of 1 2 life for residents in long-term care facilities through emergency preparedness, improvements in communications, resident information, 3 notice of sanctions; amending RCW 4 and 18.51.009, 18.51.260, 74.42.420, 74.42.460, 70.129.020, 70.129.030, 70.129.040, 70.129.080, 5 70.129.090, 70.129.110, 70.129.150, and 70.129.180; reenacting and 6 7 amending RCW 70.129.010; adding new sections to chapter 18.20 RCW; 8 adding new sections to chapter 18.51 RCW; adding new sections to chapter 70.97 RCW; adding new sections to chapter 70.128 RCW; adding 9 new sections to chapter 70.129 RCW; and creating a new section. 10

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

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NEW SECTION. Sec. 1. The legislature finds that:

(1) Residents in licensed long-term care facilities have been disproportionately impacted and isolated by the COVID-19 pandemic and over 50 percent of all COVID-19 deaths in Washington have been associated with long-term care facilities;

17 (2) According to a University of Washington report, social 18 isolation creates a "double pandemic" that disrupts care and 19 exacerbates the difficulties of dementia, depression, suicide risk, 20 chronic health conditions, and other challenges faced by long-term 21 care residents and providers;

(3) A "digital divide" exists in many parts of Washington,
 particularly for older adults of color with low incomes and those in
 rural communities;

4 (4) Residents with sensory limitations, mental illness,
5 intellectual disabilities, dementia, cognitive limitations, traumatic
6 brain injuries, or other disabilities may not be able to fully
7 utilize digital tools which exacerbates their social isolation;

8 (5) Long-term care facilities already have the legal 9 responsibility to care for their residents in a manner and in an 10 environment that promotes the maintenance or enhancement of each 11 resident's quality of life. A resident should have a safe, clean, 12 comfortable, and homelike environment as detailed in chapter 70.129 13 RCW; and

14 (6) The COVID-19 pandemic has exposed systematic weaknesses in 15 the state's long-term care system and there is a need to enact 16 additional measures to protect and improve the health, safety, and 17 quality of life of residents.

18 <u>NEW SECTION.</u> Sec. 2. A new section is added to chapter 18.20
19 RCW to read as follows:

20 The department must require an assisted living facility that is 21 subject to a stop placement order or limited stop placement order under RCW 18.20.190 to publicly post in a conspicuous place at the 22 facility a standardized notice that the department has issued a stop 23 24 placement order or limited stop placement order for the facility. The 25 standardized notice shall be developed by the department to include the date of the stop placement order or limited stop placement order, 26 27 any conditions placed upon the facility's license, contact 28 information for the department, contact information for the administrator or provider of the assisted living facility, and a 29 30 statement that anyone may contact the department or the administrator 31 or provider for further information. The notice must remain posted 32 until the department has terminated the stop placement order or limited stop placement order. 33

34 <u>NEW SECTION.</u> Sec. 3. A new section is added to chapter 18.20 35 RCW to read as follows: 36 (1) The department shall require each assisted living facility 37 to:

1 (a) Create and regularly maintain a current resident roster 2 containing the name and room number of each resident and provide a 3 written copy immediately upon an in-person request from any long-term 4 care ombuds;

(b) Create and regularly maintain current, accurate, and 5 6 aggregated contact information for all residents, including contact information for the resident representative, if any, of 7 each resident. The contact information for each resident must include the 8 resident's name, room number, and, if available, telephone number and 9 10 email address. The contact information for each resident 11 representative must include the resident representative's name, relationship to the resident, phone number, and, if available, email 12 and mailing address; 13

14 (c) Record and update the aggregated contact information required 15 by this section, upon receipt of new or updated contact information 16 from the resident or resident representative; and

17 (d) Upon the written request of any long-term care ombuds that 18 includes reference to this section and the relevant legal functions 19 and duties of long-term care ombuds, provide a copy of the aggregated 20 contact information required by this section within 48 hours, or 21 within a reasonable time if agreed to by the requesting long-term 22 care ombuds by electronic copy to the secure email address or 23 facsimile number provided in the written request.

(2) In accordance with the federal older Americans act, federal regulations, and state laws that govern the state long-term care ombuds program, the department shall inform assisted living facilities that:

(a) Any long-term care ombuds is authorized to request and obtain
 from assisted living facilities the information required by this
 section in order to perform the functions and duties of long-term
 care ombuds as set forth in federal and state laws;

32 (b) The state long-term care ombuds program and all long-term care ombuds are considered a "health oversight agency," so that the 33 federal health insurance portability and accountability act and 34 chapter 70.02 RCW do not preclude assisted living facilities from 35 providing the information required by this section when requested by 36 any long-term care ombuds, and pursuant to these laws, the federal 37 older Americans act, federal regulations, and state laws that govern 38 39 the state long-term care ombuds program, facilities are not required 40 to seek or obtain consent from residents or resident representatives

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1 prior to providing the information required by this section in 2 accordance with the requirements of this section;

3 (c) The information required by this section, when provided by an 4 assisted living facility to a requesting long-term care ombuds, 5 becomes property of the state long-term care ombuds program and is 6 subject to all state and federal laws governing the confidentiality 7 and disclosure of the files, records, and information maintained by 8 the state long-term care ombuds program or any local long-term care 9 ombuds entity; and

10 (d) The assisted living facility may not refuse to provide or 11 unreasonably delay providing the resident roster, the contact 12 information for a resident or resident representative, or the 13 aggregated contact information required by this section on any basis, 14 including on the basis that the facility must first seek or obtain 15 consent from one or more of the residents or resident 16 representatives.

(3) Nothing in this section shall interfere with or diminish the
authority of any long-term care ombuds to access facilities,
residents, and resident records as otherwise authorized by law.

20 (4) For the purposes of this section, "resident representative"21 has the same meaning as in RCW 70.129.010.

22 <u>NEW SECTION.</u> Sec. 4. A new section is added to chapter 18.20 23 RCW to read as follows:

(1) Each assisted living facility shall be responsive to incoming communications and respond within a reasonable time to phone and electronic messages.

27 (2) Each assisted living facility must have a communication system, including a sufficient quantity of working telephones and 28 other communication equipment, to ensure that residents have 24-hour 29 30 access to communications with family, medical providers, and others, 31 and also to allow for emergency contact to and from facility staff. The telephones and communication equipment must provide for auditory 32 privacy, not be located in a staff office or station, be accessible 33 and usable by persons with hearing loss and other disabilities, and 34 not require payment for local calls. An assisted living facility is 35 not required to provide telephones at no cost in each resident room. 36

37 <u>NEW SECTION.</u> Sec. 5. A new section is added to chapter 18.20 38 RCW to read as follows:

1 (1) Each assisted living facility shall develop and maintain a comprehensive disaster preparedness plan to be followed in the event 2 of a disaster or emergency, including fires, earthquakes, floods, 3 infectious disease outbreaks, loss of power or water, and other 4 events that may require sheltering in place, evacuations, or other 5 6 emergency measures to protect the health and safety of residents. The facility shall review the comprehensive disaster preparedness plan 7 annually, update the plan as needed, and train all employees when 8 they begin work in the facility on the comprehensive disaster 9 preparedness plan and related staff procedures. 10

11 (2) The department shall adopt rules governing the comprehensive 12 disaster preparedness plan. At a minimum, the rules must address: Timely communication with the residents' emergency contacts; timely 13 communication with state and local agencies, long-term care ombuds, 14 and developmental disabilities ombuds; contacting and requesting 15 16 emergency assistance; on-duty employees' responsibilities; meeting 17 residents' essential needs; procedures to identify and locate residents; and procedures to provide emergency information to provide 18 19 for the health and safety of residents. In addition, the rules shall establish standards for maintaining personal protective equipment and 20 infection control capabilities, as well as department inspection 21 22 procedures with respect to the plans.

23 Sec. 6. RCW 18.51.009 and 1994 c 214 s 22 are each amended to 24 read as follows:

25 RCW 70.129.007, 70.129.105, ((and)) 70.129.150 through 26 70.129.170, and section 20 of this act apply to this chapter and 27 persons regulated under this chapter.

28 Sec. 7. RCW 18.51.260 and 1987 c 476 s 26 are each amended to 29 read as follows:

30 (1) Each citation for a violation specified in RCW 18.51.060 which is issued pursuant to this section ((and which has become 31 final)), or a copy or copies thereof, shall be prominently posted, as 32 prescribed in regulations issued by the director, until the violation 33 is corrected to the satisfaction of the department up to a maximum of 34 one hundred twenty days. The citation or copy shall be posted in a 35 place or places in plain view of the patients in the nursing home, 36 37 persons visiting those patients, and persons who inquire about placement in the facility. 38

1 (2) The department shall require a nursing home that is subject to a stop placement order or limited stop placement order under RCW 2 18.51.060 to publicly post in a conspicuous place at the nursing home 3 a standardized notice that the department has issued a stop placement 4 order or limited stop placement order for the nursing home. The 5 6 standardized notice shall be developed by the department to include 7 the date of the stop placement order or limited stop placement order, any conditions placed upon the nursing home's license, contact 8 information for the department, contact information for the 9 administrator or provider of the nursing home, and a statement that 10 anyone may contact the department or the administrator or provider 11 for further information. The notice must remain posted until the 12 department has terminated the stop placement order or limited stop 13 14 placement order.

15 <u>NEW SECTION.</u> Sec. 8. A new section is added to chapter 18.51
16 RCW to read as follows:

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(1) The department shall require each nursing home to:

18 (a) Create and regularly maintain a current resident roster 19 containing the name and room number of each resident and provide a 20 written copy immediately upon an in-person request from any long-term 21 care ombuds;

22 (b) Create and regularly maintain current, accurate, and aggregated contact information for all residents, including contact 23 24 information for the resident representative, if any, of each resident. The contact information for each resident must include the 25 resident's name, room number, and, if available, telephone number and 26 27 email address. The contact information for each resident 28 representative must include the resident representative's name, relationship to the resident, phone number, and, if available, email 29 30 and mailing address;

31 (c) Record and update the aggregated contact information required 32 by this section, upon receipt of new or updated contact information 33 from the resident or resident representative; and

(d) Upon the written request of any long-term care ombuds that includes reference to this section and the relevant legal functions and duties of long-term care ombuds, provide a copy of the aggregated contact information required by this section within 48 hours, or within a reasonable time if agreed to by the requesting long-term

care ombuds, by electronic copy to the secure email address or
 facsimile number provided in the written request.

3 (2) In accordance with the federal older Americans act, federal
4 regulations, and state laws that govern the state long-term care
5 ombuds program, the department shall inform nursing homes that:

6 (a) Any long-term care ombuds is authorized to request and obtain 7 from nursing homes the information required by this section in order 8 to perform the functions and duties of long-term care ombuds as set 9 forth in federal and state laws;

(b) The state long-term care ombuds program and all long-term 10 11 care ombuds are considered a "health oversight agency," so that the 12 federal health insurance portability and accountability act and chapter 70.02 RCW do not preclude nursing homes from providing the 13 information required by this section when requested by any long-term 14 care ombuds, and pursuant to these laws, the federal older Americans 15 16 act, federal regulations, and state laws that govern the state long-17 term care ombuds program, nursing homes are not required to seek or 18 obtain consent from residents or resident representatives prior to providing the information required by this section in accordance with 19 the requirements of this section; 20

(c) The information required by this section, when provided by a nursing home to a requesting long-term care ombuds, becomes property of the state long-term care ombuds program and is subject to all state and federal laws governing the confidentiality and disclosure of the files, records, and information maintained by the state longterm care ombuds program or any local long-term care ombuds entity; and

(d) The nursing home may not refuse to provide or unreasonably delay providing the resident roster, the contact information for a resident or resident representative, or the aggregated contact information required by this section, on any basis, including on the basis that the nursing home must first seek or obtain consent from one or more of the residents or resident representatives.

34 (3) Nothing in this section shall interfere with or diminish the
 35 authority of any long-term care ombuds to access nursing homes,
 36 residents, and resident records as otherwise authorized by law.

37 (4) For the purposes of this section, "resident representative"38 has the same meaning as in RCW 70.129.010.

<u>NEW SECTION.</u> Sec. 9. A new section is added to chapter 18.51
 RCW to read as follows:

3 (1) Each nursing home must be responsive to incoming 4 communications and respond within a reasonable time to phone and 5 electronic messages.

6 (2) Each nursing home must have a communication system, including 7 a sufficient quantity of working telephones and other communication equipment to ensure that residents have 24-hour access to 8 communications with family, medical providers, and others, and also 9 to allow for emergency contact to and from facility staff. The 10 11 telephones and communication equipment must provide for auditory 12 privacy, not be located in a staff office or station, be accessible and usable by persons with hearing loss and other disabilities, and 13 14 not require payment for local calls. A nursing home is not required to provide telephones at no cost in each resident room. 15

16 Sec. 10. RCW 74.42.420 and 1979 ex.s. c 211 s 42 are each 17 amended to read as follows:

18 The facility shall maintain an organized record system containing 19 a record for each resident. The record shall contain:

20 (1) Identification information, including the information listed 21 in section 8(1) of this act;

(2) Admission information, including the resident's medical andsocial history;

(3) A comprehensive plan of care and subsequent changes to thecomprehensive plan of care;

(4) Copies of initial and subsequent periodic examinations,
 assessments, evaluations, and progress notes made by the facility and
 the department;

(5) Descriptions of all treatments, services, and medications
 provided for the resident since the resident's admission;

31 (6) Information about all illnesses and injuries including 32 information about the date, time, and action taken; and

33 (7) A discharge summary.

Resident records shall be available to the staff members directly involved with the resident and to appropriate representatives of the department. The facility shall protect resident records against destruction, loss, and unauthorized use. The facility shall keep a resident's record after the resident is discharged as provided in RCW 18.51.300.

<u>NEW SECTION.</u> Sec. 11. A new section is added to chapter 18.51
 RCW to read as follows:

(1) Each nursing home shall develop and maintain a comprehensive 3 disaster preparedness plan to be followed in the event of a disaster 4 or emergency, including fires, earthquakes, floods, infectious 5 6 disease outbreaks, loss of power or water, and other events that may 7 require sheltering in place, evacuations, or other emergency measures to protect the health and safety of residents. The nursing home shall 8 review the comprehensive disaster preparedness plan annually, update 9 the plan as needed, and train all employees when they begin work in 10 11 the nursing home on the comprehensive disaster preparedness plan and 12 related staff procedures.

(2) The department shall adopt rules governing the comprehensive 13 14 disaster preparedness plan. At a minimum, the rules must address the following if not already adequately addressed by federal requirements 15 16 for emergency planning: Timely communication with the residents' 17 emergency contacts; timely communication with state and local 18 agencies, long-term care ombuds, and developmental disabilities 19 ombuds; contacting and requesting emergency assistance; on-duty employees' responsibilities; meeting residents' essential needs; 20 21 procedures to identify and locate residents; and procedures to 22 provide emergency information to provide for the health and safety of residents. In addition, the rules shall establish standards for 23 maintaining personal protective equipment and infection control 24 25 capabilities, as well as department inspection procedures with 26 respect to the plans.

27 Sec. 12. RCW 74.42.460 and 1979 ex.s. c 211 s 46 are each 28 amended to read as follows:

The facility shall have a written staff organization plan and 29 30 detailed written procedures to meet potential emergencies and 31 disasters. The facility shall clearly communicate and periodically review the plan and procedures with the staff and residents. The plan 32 and procedures shall be posted at suitable locations throughout the 33 facility. The planning requirement of this section shall complement 34 the comprehensive disaster preparedness planning requirement of 35 section 11 of this act. 36

37 <u>NEW SECTION.</u> Sec. 13. A new section is added to chapter 70.97 38 RCW to read as follows:

1 The department shall require an enhanced services facility that is subject to a stop placement order or limited stop placement order 2 under RCW 70.97.110 to publicly post in a conspicuous place at the 3 facility a standardized notice that the department has issued a stop 4 placement order or limited stop placement order for the facility. The 5 6 standardized notice shall be developed by the department to include the date of the stop placement order or limited stop placement order, 7 any conditions placed upon the facility's license, contact 8 9 information for the department, contact information for the administrator or provider of the facility, and a statement that 10 11 anyone may contact the department or the administrator or provider 12 for further information. The notice must remain posted until the department has terminated the stop placement order or limited stop 13 14 placement order.

15 <u>NEW SECTION.</u> Sec. 14. A new section is added to chapter 70.97
16 RCW to read as follows:

17 (1) The department shall require each enhanced services facility 18 to:

(a) Create and regularly maintain a current resident roster containing the name and room number of each resident and provide a written copy immediately upon an in-person request from any long-term care ombuds;

23 (b) Create and regularly maintain current, accurate, and 24 aggregated contact information for all residents, including contact 25 information for the resident representative, if any, of each resident. The contact information for each resident must include the 26 27 resident's name, room number, and, if available, telephone number and 28 email address. The contact information for each resident representative must include the resident representative's name, 29 30 relationship to the resident, phone number, and, if available, email 31 and mailing address;

32 (c) Record and update the aggregated contact information required 33 by this section, upon receipt of new or updated contact information 34 from the resident or resident representative; and

35 (d) Upon the written request of any long-term care ombuds that 36 includes reference to this section and the relevant legal functions 37 and duties of long-term care ombuds, provide a copy of the aggregated 38 contact information required by this section within 48 hours, or 39 within a reasonable time if agreed to by the requesting long-term

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care ombuds, by electronic copy to the secure email address or
 facsimile number provided in the written request.

3 (2) In accordance with the federal older Americans act, federal 4 regulations, and state laws that govern the state long-term care 5 ombuds program, the department shall inform enhanced services 6 facilities that:

7 (a) Any long-term care ombuds is authorized to request and obtain 8 from enhanced services facilities the information required by this 9 section in order to perform the functions and duties of long-term 10 care ombuds as set forth in federal and state laws;

11 (b) The state long-term care ombuds program and all long-term 12 care ombuds are considered a "health oversight agency," so that the federal health insurance portability and accountability act and 13 chapter 70.02 RCW do not preclude enhanced services facilities from 14 providing the information required by this section when requested by 15 16 any long-term care ombuds, and pursuant to these laws, the federal 17 older Americans act, federal regulations, and state laws that govern the state long-term care ombuds program, facilities are not required 18 to seek or obtain consent from residents or resident representatives 19 prior to providing the information required by this section in 20 21 accordance with the requirements of this section;

(c) The information required by this section, when provided by an enhanced services facility to a requesting long-term care ombuds, becomes property of the state long-term care ombuds program and is subject to all state and federal laws governing the confidentiality and disclosure of the files, records, and information maintained by the state long-term care ombuds program or any local long-term care ombuds entity; and

(d) The enhanced services facility may not refuse to provide or unreasonably delay providing the resident roster, the contact information for a resident or resident representative, or the aggregated contact information required by this section, on any basis, including on the basis that the enhanced services facility must first seek or obtain consent from one or more of the residents or resident representatives.

36 (3) Nothing in this section shall interfere with or diminish the
 37 authority of any long-term care ombuds to access facilities,
 38 residents, and resident records as otherwise authorized by law.

39 (4) For the purposes of this section, "resident representative"40 has the same meaning as in RCW 70.129.010.

<u>NEW SECTION.</u> Sec. 15. A new section is added to chapter 70.97
 RCW to read as follows:

3 (1) Each enhanced services facility must be responsive to 4 incoming communications and respond within a reasonable time to phone 5 and electronic messages.

6 (2) Each enhanced services facility must have a communication 7 system, including a sufficient quantity of working telephones and other communication equipment to assure that residents have 24-hour 8 access to communications with family, medical providers, and others, 9 and also to allow for emergency contact to and from facility staff. 10 11 The telephones and communication equipment must provide for auditory 12 privacy, not be located in a staff office or station, be accessible and usable by persons with hearing loss and other disabilities, and 13 14 not require payment for local calls. An enhanced services facility is not required to provide telephones at no cost in each resident room. 15

16 <u>NEW SECTION.</u> Sec. 16. A new section is added to chapter 70.97
17 RCW to read as follows:

(1) Each enhanced services facility shall develop and maintain a 18 comprehensive disaster preparedness plan to be followed in the event 19 20 of a disaster or emergency, including fires, earthquakes, floods, 21 infectious disease outbreaks, loss of power or water, and other events that may require sheltering in place, evacuations, or other 22 emergency measures to protect the health and safety of residents. The 23 24 enhanced services facility must review the comprehensive disaster 25 preparedness plan annually, update the plan as needed, and train all 26 employees when they begin work in the enhanced services facility on 27 the comprehensive disaster preparedness plan and related staff 28 procedures.

(2) The department shall adopt rules governing the comprehensive 29 30 disaster preparedness plan. At a minimum, the rules must address: 31 Timely communication with the residents' emergency contacts; timely 32 communication with state and local agencies, long-term care ombuds, and developmental disabilities ombuds; contacting and requesting 33 emergency assistance; on-duty employees' responsibilities; meeting 34 35 residents' essential needs; procedures to identify and locate residents; and procedures to provide emergency information to provide 36 for the health and safety of residents. In addition, the rules shall 37 38 establish standards for maintaining personal protective equipment and

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1 infection control capabilities, as well as department inspection 2 procedures with respect to the plans.

3 <u>NEW SECTION.</u> Sec. 17. A new section is added to chapter 70.128
4 RCW to read as follows:

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(1) The department shall require each adult family home to:

6 (a) Create and regularly maintain a current resident roster 7 containing the name and room number of each resident and provide a 8 written copy immediately upon an in-person request from any long-term 9 care ombuds;

(b) Create and regularly maintain current, accurate, and 10 aggregated contact information for all residents, including contact 11 information for the resident representative, if any, of each 12 resident. The contact information for each resident must include the 13 resident's name, room number, and, if available, telephone number and 14 15 email address. The contact information for each resident 16 representative must include the resident representative's name, relationship to the resident, phone number, and, if available, email 17 18 and mailing address;

(c) Record and update the aggregated contact information required by this section, upon receipt of new or updated contact information from the resident or resident representative; and

(d) Upon the written request of any long-term care ombuds that includes reference to this section and the relevant legal functions and duties of long-term care ombuds, provide a copy of the aggregated contact information required by this section within 48 hours, or within a reasonable time if agreed to by the requesting long-term care ombuds, by electronic copy to the secure email address or facsimile number provided in the written request.

(2) In accordance with the federal older Americans act, federal
 regulations, and state laws that govern the state long-term care
 ombuds program, the department shall inform adult family homes that:

(a) Any long-term care ombuds is authorized to request and obtain
from adult family homes the information required by this section in
order to perform the functions and duties of long-term care ombuds as
set forth in federal and state laws;

36 (b) The state long-term care ombuds program and all long-term 37 care ombuds are considered a "health oversight agency," so that the 38 federal health insurance portability and accountability act and 39 chapter 70.02 RCW do not preclude adult family homes from providing

the information required by this section when requested by any longterm care ombuds, and pursuant to these laws, the federal older Americans act, federal regulations, and state laws that govern the state long-term care ombuds program, adult family homes are not required to seek or obtain consent from residents or resident representatives prior to providing the information required by this section in accordance with the requirements of this section;

8 (c) The information required by this section, when provided by an 9 adult family home to a requesting long-term care ombuds, becomes 10 property of the state long-term care ombuds program and is subject to 11 all state and federal laws governing the confidentiality and 12 disclosure of the files, records, and information maintained by the 13 state long-term care ombuds program or any local long-term care 14 ombuds entity; and

15 (d) The adult family home may not refuse to provide or 16 unreasonably delay providing the resident roster, the contact 17 information for a resident or resident representative, or the 18 aggregated contact information required by this section, on any 19 basis, including on the basis that the adult family home must first 20 seek or obtain consent from one or more of the residents or resident 21 representatives.

(3) Nothing in this section shall interfere with or diminish the
 authority of any long-term care ombuds to access facilities,
 residents, and resident records as otherwise authorized by law.

(4) For the purposes of this section, "resident representative"has the same meaning as in RCW 70.129.010.

27 <u>NEW SECTION.</u> Sec. 18. A new section is added to chapter 70.128 28 RCW to read as follows:

The department must require an adult family home that is subject 29 30 to a stop placement order or limited stop placement order under RCW 31 70.128.160 to publicly post in a conspicuous place at the adult family home a standardized notice that the department has issued a 32 stop placement order or limited stop placement order for the adult 33 family home. The standardized notice shall be developed by the 34 department to include the date of the stop placement order or limited 35 stop placement order, any conditions placed upon the adult family 36 home's license, contact information for the department, contact 37 38 information for the administrator or provider of the adult family home, and a statement that anyone may contact the department or the 39

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1 administrator or provider for further information. The notice must 2 remain posted until the department has terminated the stop placement 3 order or limited stop placement order.

<u>NEW SECTION.</u> Sec. 19. A new section is added to chapter 70.129
RCW to read as follows:

The department of social and health services and the department 6 of health, in collaboration with the state office of the long-term 7 care ombuds and representatives of long-term care facilities, shall 8 develop training materials to educate the leadership and staff of 9 local health jurisdictions on the state's long-term care system. The 10 training materials must provide information to assist local health 11 jurisdiction personnel when establishing and enforcing public health 12 measures in long-term care facilities and nursing homes, including: 13

(1) All applicable state and federal resident rights, includingthe due process rights of residents; and

16 (2) The process for local health jurisdiction personnel to report 17 abuse and neglect in facilities and nursing homes, including during 18 periods when visitation may be limited.

19 <u>NEW SECTION.</u> Sec. 20. A new section is added to chapter 70.129 20 RCW to read as follows:

(1) In circumstances in which limitations must be placed on resident visitation due to a public health emergency or other threat to the health and safety of the residents and staff of a facility or nursing home, residents must still be allowed access to an essential support person, subject to reasonable limitations on such access tailored to protecting the health and safety of essential support persons, residents, and staff.

(2) The facility or nursing home must allow private, in-person 28 29 access to the resident by the essential support person in the 30 resident's room. If the resident resides in a shared room, and the roommate, or the roommate's resident representative, if any, does not 31 consent or the visit cannot be conducted safely in a shared room, 32 then the facility or nursing home shall designate a substitute 33 34 location in the facility or nursing home for the resident and essential support person to visit. 35

36 (3) The facility or nursing home shall develop and implement 37 reasonable conditions on access by an essential support person 38 tailored to protecting the health and safety of the essential support

1 person, residents, and staff, based upon the particular public health 2 emergency or other health or safety threat.

3 (4) The facility or nursing home may temporarily suspend an individual's designation as an essential support person for failure 4 to comply with these requirements or reasonable conditions developed 5 6 and implemented by the facility or nursing home that are tailored to protecting that health and safety of the essential support person, 7 residents, and staff, based upon the particular public health 8 emergency or other health or safety threat. Unless immediate action 9 is necessary to prevent an imminent and serious threat to the health 10 or safety of residents or staff, the facility or nursing home shall 11 12 attempt to resolve the concerns with the essential support person and the resident prior to temporarily suspending the individual's 13 14 designation as an essential support person. The suspension shall last no longer than 48 hours during which time the facility or nursing 15 16 home must contact the department for guidance and must provide the 17 essential support person:

(a) Information regarding the steps the essential support person
 must take to resume the visits, such as agreeing to comply with
 reasonable conditions tailored to protecting the health and safety of
 the essential support person, residents, and staff, based upon the
 particular public health emergency or other health or safety threat;

23 (b) The contact information for the long-term care ombuds 24 program; and

(c) As appropriate, the contact information for the developmental disabilities ombuds, the agency responsible for the protection and advocacy system for individuals with developmental disabilities, and the agency responsible for the protection and advocacy system for individuals with mental illness.

30 (5) For the purposes of this section, "essential support person" 31 means an individual who is:

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(a) At least 18 years of age;

33 (b) Designated by the resident, or by the resident's 34 representative, if the resident is determined to be incapacitated or 35 otherwise legally incapacitated; and

36 (c) Necessary for the resident's emotional, mental, or physical 37 well-being during situations that include, but are not limited to, 38 circumstances involving compassionate care or end-of-life care, 39 circumstances where visitation from a familiar person will assist 40 with important continuity of care or the reduction of confusion and

1 anxiety for residents with cognitive impairments, or other 2 circumstances where the presence of an essential support person will 3 prevent or reduce significant emotional distress to the resident.

4 Sec. 21. RCW 70.129.010 and 2020 c 278 s 13 are each reenacted 5 and amended to read as follows:

6 Unless the context clearly requires otherwise, the definitions in 7 this section apply throughout this chapter.

8 (1) "Chemical restraint" means a psychopharmacologic drug that is 9 used for discipline or convenience and not required to treat the 10 resident's medical symptoms.

11 (2) "Department" means the department of state government 12 responsible for licensing the provider in question.

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(3) "Facility" means a long-term care facility.

14 (4) "Long-term care facility" means a facility that is licensed 15 or required to be licensed under chapter 18.20, 70.97, 72.36, or 16 70.128 RCW.

17 (5) "Physical restraint" means a manual method, obstacle, or 18 physical or mechanical device, material, or equipment attached or 19 adjacent to the resident's body that restricts freedom of movement or 20 access to his or her body, is used for discipline or convenience, and 21 not required to treat the resident's medical symptoms.

(6) "Reasonable accommodation" by a facility to the needs of a prospective or current resident has the meaning given to this term under the federal Americans with disabilities act of 1990, 42 U.S.C. Sec. 12101 et seq. and other applicable federal or state antidiscrimination laws and regulations.

27 (7) (("Representative" means a person appointed under RCW 28 7.70.065.

(8))) "Resident" means the individual receiving services in a long-term care facility, that resident's attorney-in-fact, guardian, or other ((legal)) representative acting within the scope of their authority.

33

(8) "Resident representative" means:

34 <u>(a)(i) A court-appointed guardian or conservator of a resident,</u> 35 <u>if any;</u>

36 (ii) An individual otherwise authorized by state or federal law 37 including, but not limited to, agents under power of attorney, 38 representative payees, and other fiduciaries, to act on behalf of the 39 resident in order to support the resident in decision making; access

1 medical, social, or other personal information of the resident; manage financial matters; or receive notifications; or 2 3 (iii) If there is no individual who meets the criteria under (a) (i) or (ii) of this subsection, an individual chosen by the 4 resident to act on behalf of the resident in order to support the 5 6 resident in decision making; access medical, social, or other personal information of the resident; manage financial matters; or 7 receive notifications. 8 (b) The term "resident representative" does not include any 9 individual described in (a) of this subsection who is affiliated with 10 any long-term care facility or nursing home where the resident 11 12 resides, or its licensee or management company, unless the affiliated

13 individual is a family member of the resident.

14 Sec. 22. RCW 70.129.020 and 1994 c 214 s 3 are each amended to 15 read as follows:

16 The resident has a right to a dignified existence, self-17 determination, and communication with and access to persons and 18 services inside and outside the facility. A facility must protect and 19 promote the rights of each resident and assist the resident which 20 include:

(1) The resident has the right to exercise his or her rights as a
resident of the facility and as a citizen or resident of the United
States and the state of Washington.

(2) The resident has the right to be free of interference,
 coercion, discrimination, and reprisal from the facility in
 exercising his or her rights.

(3) In the case of a resident adjudged incompetent by a court of competent jurisdiction, the rights of the resident are exercised by the person appointed to act on the resident's behalf.

30 (4) In the case of a resident who has not been adjudged 31 incompetent by a court of competent jurisdiction, a <u>resident</u> 32 representative may exercise the resident's rights to the extent 33 provided by law.

34 Sec. 23. RCW 70.129.030 and 2013 c 23 s 184 are each amended to 35 read as follows:

36 (1) The facility must inform the resident both orally and in 37 writing in a language that the resident understands of his or her 38 rights and all rules and regulations governing resident conduct and 1 responsibilities during the stay in the facility. The notification 2 must be made prior to or upon admission. Receipt of the information 3 must be acknowledged in writing.

4 (2) The resident to the extent provided by law or ((his or her
5 legal)) resident representative to the extent provided by law, has
6 the right:

7 (a) Upon an oral or written request, to access all records 8 pertaining to himself or herself including clinical records within 9 twenty-four hours; and

10 (b) After receipt of his or her records for inspection, to 11 purchase at a cost not to exceed the community standard photocopies 12 of the records or portions of them upon request and two working days' 13 advance notice to the facility.

(3) The facility shall only admit or retain individuals whose 14 needs it can safely and appropriately serve in the facility with 15 appropriate available staff and through the provision of reasonable 16 17 accommodations required by state or federal law. Except in cases of genuine emergency, the facility shall not admit an individual before 18 19 obtaining a thorough assessment of the resident's needs and preferences. The assessment shall contain, unless unavailable despite 20 the best efforts of the facility, the resident applicant, and other 21 interested parties, the following minimum information: Recent medical 22 23 history; necessary and contraindicated medications; a licensed other health professional's diagnosis, unless the 24 medical or 25 individual objects for religious reasons; significant known behaviors 26 or symptoms that may cause concern or require special care; mental illness, except where protected by confidentiality laws; level of 27 28 personal care needs; activities and service preferences; and preferences regarding other issues important to the resident 29 applicant, such as food and daily routine. 30

31 (4) The facility must inform each resident in writing in a 32 language the resident or ((his or her)) resident representative understands before admission, and at least once every twenty-four 33 months thereafter of: (a) Services, items, and activities customarily 34 available in the facility or arranged for by the facility as 35 permitted by the facility's license; (b) charges for those services, 36 items, and activities including charges for services, items, and 37 activities not covered by the facility's per diem rate or applicable 38 39 public benefit programs; and (c) the rules of facility operations 40 required under RCW 70.129.140(2). Each resident and ((his or her))

1 resident representative must be informed in writing in advance of changes in the availability or the charges for services, items, or 2 activities, or of changes in the facility's rules. Except in 3 emergencies, thirty days' advance notice must be given prior to the 4 change. However, for facilities licensed for six or fewer residents, 5 6 if there has been a substantial and continuing change in the resident's condition necessitating substantially greater or lesser 7 services, items, or activities, then the charges for those services, 8 items, or activities may be changed upon fourteen days' advance 9 written notice. 10

11 (5) The facility must furnish a written description of residents 12 rights that includes:

13 (a) A description of the manner of protecting personal funds,14 under RCW 70.129.040;

(b) A posting of names, addresses, and telephone numbers of the state survey and certification agency, the state licensure office, the state ombuds program, and the protection and advocacy systems; and

(c) A statement that the resident may file a complaint with the appropriate state licensing agency concerning alleged resident abuse, neglect, and misappropriation of resident property in the facility.

22

(6) Notification of changes.

(a) A facility must immediately consult with the resident's physician, and if known, make reasonable efforts to notify the ((resident's legal)) resident representative ((or an interested family member)) to the extent provided by law when there is:

(i) An accident involving the resident which requires or has thepotential for requiring physician intervention;

(ii) A significant change in the resident's physical, mental, or psychosocial status (i.e., a deterioration in health, mental, or psychosocial status in either life-threatening conditions or clinical complications).

33 (b) The facility must promptly notify the resident or ((the 34 resident's)) resident representative ((shall make reasonable efforts 35 to notify an interested family member, if known,)) when there is:

36 (i) A change in room or roommate assignment; or

37 (ii) A decision to transfer or discharge the resident from the 38 facility.

39 (c) The facility must record and update the address ((and)), 40 phone number, and any other contact information of the ((resident's)) 1 resident representative ((or interested family member)), upon receipt
2 of notice from them.

3 Sec. 24. RCW 70.129.040 and 2011 1st sp.s. c 3 s 301 are each 4 amended to read as follows:

5 (1) The resident has the right to manage his or her financial 6 affairs, and the facility may not require residents to deposit their 7 personal funds with the facility.

8 (2) Upon written authorization of a resident, if the facility 9 agrees to manage the resident's personal funds, the facility must 10 hold, safeguard, manage, and account for the personal funds of the 11 resident deposited with the facility as specified in this section.

(a) The facility must deposit a resident's personal funds in excess of one hundred dollars in an interest-bearing account or accounts that is separate from any of the facility's operating accounts, and that credits all interest earned on residents' funds to that account. In pooled accounts, there must be a separate accounting for each resident's share.

(b) The facility must maintain a resident's personal funds that do not exceed one hundred dollars in a noninterest-bearing account, interest-bearing account, or petty cash fund.

(3) The facility must establish and maintain a system that assures a full and complete and separate accounting of each resident's personal funds entrusted to the facility on the resident's behalf.

(a) The system must preclude any commingling of resident funds
 with facility funds or with the funds of any person other than
 another resident.

(b) The individual financial record must be available on request to the resident, or ((his or her legal)) resident representative to the extent provided by law.

31 (4) Upon the death of a resident with personal funds deposited with the facility, the facility must convey within thirty days the 32 resident's funds, and a final accounting of those funds, to the 33 individual or probate jurisdiction administering the resident's 34 estate; but in the case of a resident who received long-term care 35 services paid for by the state, the funds and accounting shall be 36 sent to the state of Washington, department of social and health 37 38 services, office of financial recovery. The department shall establish a release procedure for use for burial expenses. 39

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1 (5) If any funds in excess of one hundred dollars are paid to an adult family home by the resident or ((a)) resident representative 2 3 ((of the resident)), as a security deposit for performance of the resident's obligations, or as prepayment of charges beyond the first 4 month's residency, the funds shall be deposited by the adult family 5 6 home in an interest-bearing account that is separate from any of the home's operating accounts, and that credits all interest earned on 7 the resident's funds to that account. In pooled accounts, there must 8 be a separate accounting for each resident's share. The account or 9 accounts shall be in a financial institution as defined by RCW 10 11 ((30.22.041)) 30A.22.041, and the resident shall be notified in 12 writing of the name, address, and location of the depository. The adult family home may not commingle resident funds from these 13 accounts with the adult family home's funds or with the funds of any 14 person other than another resident. The individual resident's account 15 16 record shall be available upon request by the resident or ((the 17 resident's)) resident representative to the extent provided by law.

18 (6) The adult family home shall provide the resident or ((the 19 resident's)) resident representative full disclosure in writing, prior to the receipt of any funds for a deposit, security, prepaid 20 charges, or any other fees or charges, specifying what the funds are 21 22 paid for and the basis for retaining any portion of the funds if the 23 resident dies, is hospitalized, or is transferred or discharged from the adult family home. The disclosure must be in a language that the 24 25 resident or ((the resident's)) resident representative understands, 26 and be acknowledged in writing by the resident or ((the resident's)) resident representative. The adult family home shall retain a copy of 27 the disclosure and the acknowledgment. The adult family home may not 28 29 retain funds for reasonable wear and tear by the resident or for any basis that would violate RCW 70.129.150. 30

31 (7) Funds paid by the resident or ((the resident's)) resident representative to the adult family home, which the adult family home 32 in turn pays to a placement agency or person, shall be governed by 33 the disclosure requirements of this section. If the resident then 34 dies, is hospitalized, or is transferred or discharged from the adult 35 36 family home, and is entitled to any refund of funds under this section or RCW 70.129.150, the adult family home shall refund the 37 funds to the resident or ((the resident's)) resident representative 38 39 to the extent provided by law, within thirty days of the resident

leaving the adult family home, and may not require the resident to
 obtain the refund from the placement agency or person.

(8) If, during the stay of the resident, the status of the adult 3 family home licensee or ownership is changed or transferred to 4 another, any funds in the resident's accounts affected by the change 5 6 or transfer shall simultaneously be deposited in an equivalent 7 account or accounts by the successor or new licensee or owner, who shall promptly notify the resident or ((the resident's)) resident 8 representative to the extent provided by law, in writing of the name, 9 address, and location of the new depository. 10

11 (9) Because it is a matter of great public importance to protect 12 residents who need long-term care from deceptive disclosures and unfair retention of deposits, fees, or prepaid charges by adult 13 family homes, a violation of this section or RCW 70.129.150 shall be 14 construed for purposes of the consumer protection act, chapter 19.86 15 16 RCW, to constitute an unfair or deceptive act or practice or an 17 unfair method of competition in the conduct of trade or commerce. The resident's claim to any funds paid under this section shall be prior 18 to that of any creditor of the adult family home, its owner, or 19 licensee, even if such funds are commingled. 20

21 Sec. 25. RCW 70.129.080 and 1994 c 214 s 9 are each amended to 22 read as follows:

23 The resident has the right to privacy in communications, 24 including the right to:

25

(1) Send and promptly receive mail that is unopened;

(2) Have access to stationery, postage, and writing implements atthe resident's own expense; and

(3) Have reasonable access <u>within a reasonable time</u> to the use of
 a telephone <u>and other communication equipment</u> where calls can be made
 without being overheard.

31 Sec. 26. RCW 70.129.090 and 2013 c 23 s 185 are each amended to 32 read as follows:

33 (1) The resident has the right and the facility must not 34 interfere with access to any resident by the following:

35 (a) Any representative of the state;

36 (b) The resident's individual physician;

37 (c) The state long-term care ombuds as established under chapter 38 43.190 RCW; 1 (d) The agency responsible for the protection and advocacy system 2 for individuals with developmental disabilities as established under 3 part C of the developmental disabilities assistance and bill of 4 rights act;

5 (e) The agency responsible for the protection and advocacy system 6 for individuals with mental illness as established under the 7 protection and advocacy for mentally ill individuals act;

8 (f) Subject to reasonable restrictions to protect the rights of 9 others and to the resident's right to deny or withdraw consent at any 10 time, <u>resident representative</u>, immediate family or other relatives of 11 the resident, and others who are visiting with the consent of the 12 resident;

13 (g) The agency responsible for the protection and advocacy system 14 for individuals with disabilities as established under section 509 of 15 the rehabilitation act of 1973, as amended, who are not served under 16 the mandates of existing protection and advocacy systems created 17 under federal law.

18 (2) The facility must provide reasonable access to a resident by 19 ((his or her)) the resident representative or an entity or individual 20 that provides health, social, legal, or other services to the 21 resident, subject to the resident's right to deny or withdraw consent 22 at any time.

(3) The facility must allow representatives of the state ombuds to examine a resident's clinical records with the permission of the resident or ((the resident's legal)) resident representative to the extent provided by law, and consistent with state and federal law.

27 Sec. 27. RCW 70.129.110 and 2013 c 23 s 186 are each amended to 28 read as follows:

(1) The facility must permit each resident to remain in the facility, and not transfer or discharge the resident from the facility unless:

32 (a) The transfer or discharge is necessary for the resident's33 welfare and the resident's needs cannot be met in the facility;

(b) The safety of individuals in the facility is endangered;

35 (c) The health of individuals in the facility would otherwise be 36 endangered;

37 (d) The resident has failed to make the required payment for his38 or her stay; or

39 (e) The facility ceases to operate.

34

1 (2) All long-term care facilities shall fully disclose to 2 potential residents or ((their legal)) resident representatives the 3 service capabilities of the facility prior to admission to the 4 facility. If the care needs of the applicant who is medicaid eligible 5 are in excess of the facility's service capabilities, the department 6 shall identify other care settings or residential care options 7 consistent with federal law.

8 (3) Before a long-term care facility transfers or discharges a 9 resident, the facility must:

(a) First attempt through reasonable accommodations to avoid thetransfer or discharge, unless agreed to by the resident;

(b) Notify the resident and <u>resident</u> representative ((and make a reasonable effort to notify, if known, an interested family member)) of the transfer or discharge and the reasons for the move in writing and in a language and manner they understand;

(c) Record the reasons in the resident's record; and

17 (d) Include in the notice the items described in subsection (5) 18 of this section.

(4) (a) Except when specified in this subsection, the notice of transfer or discharge required under subsection (3) of this section must be made by the facility at least thirty days before the resident is transferred or discharged.

23 (b) Notice may be made as soon as practicable before transfer or 24 discharge when:

25 (i) The safety of individuals in the facility would be 26 endangered;

27 (ii) The health of individuals in the facility would be 28 endangered;

29 (iii) An immediate transfer or discharge is required by the 30 resident's urgent medical needs; or

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16

(iv) A resident has not resided in the facility for thirty days.

32 (5) The written notice specified in subsection (3) of this 33 section must include the following:

34 (a) The reason for transfer or discharge;

35 (b) The effective date of transfer or discharge;

36 (c) The location to which the resident is transferred or 37 discharged;

38 (d) The name, address, and telephone number of the state long-39 term care ombuds;

1 (e) For residents with developmental disabilities, the mailing 2 address and telephone number of the agency responsible for the 3 protection and advocacy of individuals with developmental 4 disabilities established under part C of the developmental 5 disabilities assistance and bill of rights act; and

6 (f) For residents with mental illness, the mailing address and 7 telephone number of the agency responsible for the protection and 8 advocacy of individuals with mental illness established under the 9 protection and advocacy for mentally ill individuals act.

10 (6) A facility must provide sufficient preparation and 11 orientation to residents to ensure safe and orderly transfer or 12 discharge from the facility.

13 (7) A resident discharged in violation of this section has the 14 right to be readmitted immediately upon the first availability of a 15 gender-appropriate bed in the facility.

16 Sec. 28. RCW 70.129.150 and 1997 c 392 s 206 are each amended to 17 read as follows:

18 (1) Prior to admission, all long-term care facilities or nursing facilities licensed under chapter 18.51 RCW that require payment of 19 an admissions fee, deposit, or a minimum stay fee, by or on behalf of 20 a person seeking admission to the long-term care facility or nursing 21 22 facility, shall provide the resident, or ((his or her)) resident representative, full disclosure in writing in a language the resident 23 24 or ((his or her)) resident representative understands, a statement of the amount of any admissions fees, deposits, prepaid charges, or 25 minimum stay fees. The facility shall also disclose to the person, or 26 27 ((his or her)) resident representative, the facility's advance notice or transfer requirements, prior to admission. In addition, the long-28 term care facility or nursing facility shall also fully disclose in 29 30 writing prior to admission what portion of the deposits, admissions 31 fees, prepaid charges, or minimum stay fees will be refunded to the resident or ((his or her)) resident representative to the extent 32 provided by law, if the resident leaves the long-term care facility 33 or nursing facility. Receipt of the disclosures required under this 34 subsection must be acknowledged in writing. If the facility does not 35 provide these disclosures, the deposits, admissions fees, prepaid 36 charges, or minimum stay fees may not be kept by the facility. If a 37 38 resident dies or is hospitalized or is transferred to another facility for more appropriate care and does not return to the 39

original facility, the facility shall refund any deposit or charges 1 already paid less the facility's per diem rate for the days the 2 resident actually resided or reserved or retained a bed in the 3 facility notwithstanding any minimum stay policy or discharge notice 4 requirements, except that the facility may retain an additional 5 6 amount to cover its reasonable, actual expenses incurred as a result 7 of a private-pay resident's move, not to exceed five days' per diem charges, unless the resident has given advance notice in compliance 8 with the admission agreement. All long-term care facilities or 9 nursing facilities covered under this section are required to refund 10 11 any and all refunds due the resident or ((his or her)) resident 12 representative to the extent provided by law, within thirty days from the resident's date of discharge from the facility. Nothing in this 13 14 section applies to provisions in contracts negotiated between a nursing facility or long-term care facility and a certified health 15 16 plan, health or disability insurer, health maintenance organization, 17 managed care organization, or similar entities.

18 (2) Where a long-term care facility or nursing facility requires 19 the execution of an admission contract by or on behalf of an 20 individual seeking admission to the facility, the terms of the 21 contract shall be consistent with the requirements of this section, 22 and the terms of an admission contract by a long-term care facility 23 shall be consistent with the requirements of this chapter.

24 Sec. 29. RCW 70.129.180 and 2009 c 489 s 1 are each amended to 25 read as follows:

(1) A long-term care facility must fully disclose to residents the facility's policy on accepting medicaid as a payment source. The policy shall clearly state the circumstances under which the facility provides care for medicaid eligible residents and for residents who may later become eligible for medicaid.

31 (2) The policy under this section must be provided to residents orally and in writing prior to admission, in a language that the 32 resident or ((the resident's)) resident representative understands. 33 The written policy must be in type font no smaller than fourteen 34 35 point and written on a page that is separate from other documents. The policy must be signed and dated by the resident or ((the 36 resident's)) resident representative to the extent provided by law, 37 38 if the resident lacks capacity. The facility must retain a copy of

- 1 the disclosure. Current residents must receive a copy of the policy
- 2 consistent with this section by July 26, 2009.

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