Title 275 WAC
DEPARTMENT OF SOCIAL AND HEALTH SERVICES (INSTITUTIONS)

275-16 Liability for costs of care and hospitalization of the mentally ill.
275-18 Standards for certification of approval for drug treatment centers.
275-19 Alcoholism treatment facilities.
275-20 Costs of care of mentally deficient persons residing in state institutions.
275-25 County plan for mental health, drug abuse, developmental disabilities, alcoholism.
275-27 Bureau of developmental disabilities services and home aid resources rules.
275-32 Special supervision—County juvenile probation programs.
275-34 Diversion.
275-36 Group homes for the mentally and physically handicapped.
275-39 Medically fragile children's facilities.
275-40 Annual inspection of all jails and detention facilities by the director of institutions or his designee.
275-48 Payments to persons released from correctional institutions.
275-52 Institutional industries commission hearings—Sale of products.
275-53 Sale of items produced by vocational training students in correctional institutions.
275-55 Voluntary admission—Involuntary commitment, treatment and/or evaluation of mentally ill persons.
275-59 Criminally insane person committed to the care of the Department of Social and Health Services—Evaluation, placement, care and discharge.
275-76 Adult correctional institutions—Detainer.
275-80 Adult correctional institutions—Visits.
275-82 Adult correctional institutions—Classification of residents—Administrative segregation.
275-85 Resident of adult correctional institution escorted leave of absence.
275-87 Adult correctional institutions—Residents' property.
275-88 Adult correctional institutions—Discipline.
275-91 Adult correctional institutions—Medical care—Health care.
275-92 Adult correctional institutions—Release programs—Work—training.
275-93 Adult correctional institutions—Release programs—Furlough.

275-96 Adult correctional institutions—Correspondence and telephone usage.
275-102 Adult probation and parole—Interstate compact.
275-110 Impact account—Criminal justice cost reimbursement.
275-150 Referendum 37 funding of facilities for the care, training, and rehabilitation of persons with sensory, physical, or mental handicaps.
275-216 State institutions other than adult correctional institutions—Trial visit to community—Resident needing public assistance.

DISPOSITION OF CHAPTERS FORMERLY CODIFIED IN THIS TITLE

Chapter 275-12
IMPLEMENTATION OF THE COMMUNITY MENTAL HEALTH SERVICES ACT

275-12-005 Definitions. [Order 810, § 275-12-005, filed 7/6/73; Order 68-3, § 275-12-005, filed 3/5/68; Emergency Regulation, § 275-12-005, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75. Later Promulgation, see WAC 275-12-220.

275-12-010 Annual allocation of funds. [Order 972, § 275-12-010, filed 9/26/74; Order 810, § 275-12-010, filed 7/6/73; Order 68-3, § 275-12-010, filed 3/5/68; Emergency Regulation, § 275-12-010, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.

275-12-015 Formula for allocation of available funds. [Order 810, § 275-12-015, filed 7/6/73; Order 68-3, § 275-12-015, filed 3/5/68; Emergency Regulation, § 275-12-015, filed 1/25/68.] Repealed by Order 972, filed 9/26/74.

275-12-020 Submission of county plan. [Order 68-3, § 275-12-020, filed 3/5/68; Emergency Regulation, § 275-12-020, filed 1/25/68.] Repealed by Order 810, filed 7/6/73.

275-12-021 Authorization of program. [Order 810, § 275-12-021, filed 7/6/73.] Repealed by Order 1072, filed 12/5/75. Later Promulgation, see WAC 275-12-230.

275-12-025 Authorization of program by county commissioners. [Order 68-3, § 275-12-025, filed 3/5/68; Emergency Regulation, § 275-12-025, filed 1/25/68.] Repealed by Order 810, filed 7/6/73.

275-12-026 Plan—Submission. [Order 810, § 275-12-026, filed 7/6/73.] Repealed by Order 1072, filed 12/5/75.

275-12-030 Appointment of program administrative board. [Order 810, § 275-12-030, filed 7/6/73; Order 68-3, § 275-12-030, filed 3/5/68; Emergency Regulation, § 275-12-030, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75. Later Promulgation, see WAC 275-12-420.

275-12-035 Responsibilities of county commissioners. [Order 810, § 275-12-035, filed 7/6/73; Order 68-3, § 275-12-035, filed 3/5/68; Emergency Regulation, § 275-12-
<table>
<thead>
<tr>
<th>Title 275 WAC</th>
<th>Title 275 WAC: DSHS (Institutions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>035, filed 1/25/68. Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-040</td>
</tr>
<tr>
<td>Evaluation by administrative board. [Order 810, § 275-12-040, filed 7/6/73; Order 68-3, § 275-12-040, filed 3/5/68; Emergency Regulation, § 275-12-040, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-040</td>
</tr>
<tr>
<td>275-12-045 Administrative provisions. [Order 810, § 275-12-045, filed 7/6/73; Order 68-3, § 275-12-045, filed 3/5/68; Emergency Regulation, § 275-12-045, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-045</td>
</tr>
<tr>
<td>Later Promulgation, see WAC 275-12-280.</td>
<td>275-12-045</td>
</tr>
<tr>
<td>275-12-050 Reports required by plan. [Order 68-3, § 275-12-050, filed 3/5/68; Emergency Regulation, § 275-12-050, filed 1/25/68.] Repealed by Order 810, filed 7/6/73.</td>
<td>275-12-050</td>
</tr>
<tr>
<td>275-12-055 Records—Accessibility. [Order 810, § 275-12-055, filed 7/6/73; Order 68-3, § 275-12-055, filed 3/5/68; Emergency Regulation, § 275-12-055, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-055</td>
</tr>
<tr>
<td>275-12-060 Medical records. [Order 810, § 275-12-060, filed 7/6/73; Order 68-3, § 275-12-060, filed 3/5/68; Emergency Regulation, § 275-12-060, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-060</td>
</tr>
<tr>
<td>275-12-065 Fiscal control and accounting procedures. [Order 810, § 275-12-065, filed 7/6/73; Order 68-3, § 275-12-065, filed 3/5/68; Emergency Regulation, § 275-12-065, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-065</td>
</tr>
<tr>
<td>275-12-070 Discrimination prohibited. [Order 810, § 275-12-070, filed 7/6/73; Order 68-3, § 275-12-070, filed 3/5/68; Emergency Regulation, § 275-12-070, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-070</td>
</tr>
<tr>
<td>Later Promulgation, see WAC 275-12-450.</td>
<td>275-12-070</td>
</tr>
<tr>
<td>275-12-075 Uniformity in personnel practices. [Order 68-3, § 275-12-075, filed 3/5/68; Emergency Regulation, § 275-12-075, filed 1/25/68.] Repealed by Order 810, filed 7/6/73.</td>
<td>275-12-075</td>
</tr>
<tr>
<td>275-12-080 Scope and quality of services. [Order 810, § 275-12-080, filed 7/6/73; Order 68-3, § 275-12-080, filed 3/5/68; Emergency Regulation, § 275-12-080, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-080</td>
</tr>
<tr>
<td>275-12-085 Annual revision. [Order 810, § 275-12-085, filed 7/6/73; Order 68-3, § 275-12-085, filed 3/5/68; Emergency Regulation, § 275-12-085, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-085</td>
</tr>
<tr>
<td>275-12-090 Inter-county cooperation. [Order 810, § 275-12-090, filed 7/6/73; Order 68-3, § 275-12-090, filed 3/5/68; Emergency Regulation, § 275-12-090, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-090</td>
</tr>
<tr>
<td>275-12-095 Supervisor of community mental health and drug abuse services. [Order 810, § 275-12-095, filed 7/6/73; Order 68-3, § 275-12-095, filed 3/5/68; Emergency Regulation, § 275-12-095, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-095</td>
</tr>
<tr>
<td>275-12-100 Community mental health program coordinator or administrator. [Order 68-3, § 275-12-100, filed 3/5/68; Emergency Regulation, § 275-12-100, filed 1/25/68.] Repealed by Order 810, filed 7/6/73.</td>
<td>275-12-100</td>
</tr>
<tr>
<td>275-12-105 Contracts for services. [Order 810, § 275-12-105, filed 7/6/73; Order 68-3, § 275-12-105, filed 3/5/68; Emergency Regulation, § 275-12-105, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-105</td>
</tr>
<tr>
<td>275-12-110 Statewide cooperation. [Order 810, § 275-12-110, filed 7/6/73; Order 68-3, § 275-12-110, filed 3/5/68; Emergency Regulation, § 275-12-110, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-110</td>
</tr>
<tr>
<td>275-12-112 Reports required by plan. [Order 810, § 275-12-112, filed 7/6/73.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-112</td>
</tr>
<tr>
<td>275-12-115 Expenditures and payments—State share. [Order 810, § 275-12-115, filed 7/6/73; Order 68-3, § 275-12-115, filed 3/5/68; Emergency Regulation, § 275-12-115, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.</td>
<td>275-12-115</td>
</tr>
</tbody>
</table>

[Title 275 WAC—p 2] (1980 Ed.)
<table>
<thead>
<tr>
<th>WAC Section</th>
<th>Description</th>
<th>Title 275 WAC</th>
</tr>
</thead>
<tbody>
<tr>
<td>275-12-330</td>
<td>Supervisor of community mental health and drug treatment services. [Order 1072, § 275-12-330, filed 12/5/75. Formerly WAC 275-12-095.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-565</td>
</tr>
<tr>
<td>275-12-335</td>
<td>Review of applications for federal funds. [Order 1072, § 275-12-335, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-575</td>
</tr>
<tr>
<td>275-12-350</td>
<td>Liability. [Order 1072, § 275-12-350, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-600</td>
</tr>
<tr>
<td>275-12-400</td>
<td>Annual plan. [Order 1072, § 275-12-400, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-620</td>
</tr>
<tr>
<td>275-12-420</td>
<td>Annual plan—Appointment of program administrative board. [Order 1072, § 275-12-420, filed 12/5/75. Formerly WAC 275-12-026 and 275-12-030.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-625</td>
</tr>
<tr>
<td>275-12-440</td>
<td>Annual plan—Fiscal control and accounting. [Order 1072, § 275-12-440, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-630</td>
</tr>
<tr>
<td>275-12-450</td>
<td>Annual plan—Discrimination prohibited. [Order 1072, § 275-12-450, filed 12/5/75. Formerly WAC 275-12-070.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-670</td>
</tr>
<tr>
<td>275-12-460</td>
<td>Annual plan—Inter-county cooperation. [Order 1072, § 275-12-460, filed 12/5/75. Formerly WAC 275-12-090.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-710</td>
</tr>
<tr>
<td>275-12-470</td>
<td>Revision of plans. [Order 1072, § 275-12-470, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-720</td>
</tr>
<tr>
<td>275-12-500</td>
<td>Notification of rights. [Order 1072, § 275-12-500, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-725</td>
</tr>
<tr>
<td>275-12-510</td>
<td>Mental health services. [Order 1072, § 275-12-510, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-730</td>
</tr>
<tr>
<td>275-12-515</td>
<td>Drug treatment services. [Order 1072, § 275-12-515, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-740</td>
</tr>
<tr>
<td>275-12-520</td>
<td>Mental health outpatient service. [Order 1072, § 275-12-520, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-750</td>
</tr>
<tr>
<td>275-12-525</td>
<td>Drug treatment outpatient service. [Order 1072, § 275-12-525, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-800</td>
</tr>
<tr>
<td>275-12-530</td>
<td>Mental health inpatient service. [Order 1072, § 275-12-530, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-12-810</td>
</tr>
<tr>
<td>275-12-535</td>
<td>Drug treatment inpatient service. [Order 1072, § 275-12-535, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-13-010</td>
</tr>
<tr>
<td>275-12-540</td>
<td>Day treatment service. [Order 1072, § 275-12-540, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-13-020</td>
</tr>
<tr>
<td>275-12-550</td>
<td>Emergency service. [Order 1072, § 275-12-550, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-13-030</td>
</tr>
<tr>
<td>275-12-560</td>
<td>Mental health consultation/education service. [Order 1072, § 275-12-560, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.</td>
<td>275-13-080</td>
</tr>
</tbody>
</table>

(1980 Ed.)
Certificate of Approval to a Drug Treatment Center

Purpose. [Order 657, § 275-14-010, filed 2/17/72] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Definitions. [Order 856, § 275-14-020, filed 9/13/73; Order 673, § 275-14-020, filed 4/27/72; Order 657, § 275-14-020, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Certificate of approval. [Order 673, § 275-14-030, filed 4/27/72; Order 657, § 275-14-030, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Issuance and renewal of certificate. [Order 657, § 275-14-040, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Revocation—Denial of certificate. [Order 657, § 275-14-050, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Provisional certificate. [Order 856, § 275-14-055, filed 9/13/73.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Hearing. [Order 657, § 275-14-060, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Evaluation. [Order 673, § 275-14-070, filed 4/27/72; Order 657, § 275-14-070, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Director. [Order 657, § 275-14-080, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Staffing. [Order 657, § 275-14-090, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Staff training and qualifications. [Order 657, § 275-14-100, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Submission of applications. [Order 657, § 275-14-110, filed 2/17/72.] Repealed by Order 673, filed 4/27/72. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Board of directors. [Order 673, § 275-14-120, filed 4/27/72; Order 657, § 275-14-120, filed 2/17/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.
275-14-100 Purpose. [Order 986, § 275-150-100, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.


Required services-Social and recreational activities. [Order 986, § 275-15-335, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.


Required services—Follow-through on client after discharge or referral. [Order 986, § 275-15-355, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.


Title 275 WAC—p 6

(1980 Ed.)
Chapter 275-28
COMMUNITY MENTAL RETARDATION SERVICES ACT


275-28-100 Reports required by plan. [Order 6, §§ 275-28-100, filed 5/13/68; Emergency Regulation, § 275-28-100, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later Promulgation, see WAC 275-29-230.


275-28-120 Information from medical and personal records—Confidential. [Order 6, §§ 275-28-120, filed 5/13/68; Emergency Regulation, § 275-28-120, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later Promulgation, see WAC 275-29-150.

Chapter 275-29
COMMUNITY DEVELOPMENTAL DISABILITIES AND MENTAL RETARDATION SERVICES ACT

275-29-010 Purpose. [Order 1070, §§ 275-29-010, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.

275-29-020 Definitions. [Order 1070, §§ 275-29-020, filed 11/21/75. Formerly WAC 275-28-120.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.

275-29-030 Allocation of funds. [Order 1070, §§ 275-29-030, filed 11/21/75. Formerly WAC 275-28-140.] Repealed by Order 1142, filed 8/12/76. Later Promulgation, see chapter 275-25 WAC.

275-29-040 Department determination of eligibility for state funding. [Order 1070, §§ 275-29-040, filed 11/21/75. Later Promulgation, see WAC 275-29-150.]

(1980 Ed.)
<table>
<thead>
<tr>
<th>Title 275 WAC</th>
<th>DSHS (Institutions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>275-120-045 Eligibility—Indigency as inability to earn support. [Order 1065, § 275-120-045, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.</td>
<td></td>
</tr>
</tbody>
</table>
Title 275 WAC

Title 275 WAC: DHSH (Institutions)

filed 7/17/80. Statutory Authority: RCW 43.60A.070.


Chapter 275-16 WAC

LIABILITY FOR COSTS OF CARE AND HOSPITALIZATION OF THE MENTALLY ILL

WAC

275-16-010 Authority.

275-16-030 Schedule of charges.

275-16-040 Factors in determining ability to pay.

275-16-045 Exempt income.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER


275-16-050 Notice of responsibility—Contents and service. [Order 1, § 275-16-050, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, and 7/28/67.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.

275-16-060 Appeal procedure—Court review. [Order 1, § 275-16-060, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, and 7/28/67.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.


275-16-080 Modification or vacation of findings. [Order 1, § 275-16-080, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, and 7/28/67.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.

275-16-090 Subsequent enrichment—Recovery. [Order 1, § 275-16-090, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, and 7/28/67.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.


275-16-100 Payment under prior law. [Order 1, § 275-16-100, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, and 7/28/67.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.

WAC 275-16-010 Authority. (1) The following rules regarding hospitalization charges are hereby adopted under the authority of Title 71 RCW.

(2) "Hospitalization" includes treatment, transportation, examination, diagnosis, care, detention, training, pharmaceutical services, outpatient services and other services provided for patients needing mental health treatment. [Statutory Authority: RCW 72.01.090. 78-03-029 (Order 1270), § 275-16-010, filed 2/17/78; Order 1, § 275-16-010, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, and 8/2/67.]

WAC 275-16-030 Schedule of charges. Hospitalization charges shall be due and payable on or before the tenth day of each calendar month for services rendered during the preceding month, based upon the following schedule:

(1) COSTING AND BILLING RATES

<table>
<thead>
<tr>
<th>Service</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>INPATIENT SERVICES</strong></td>
<td></td>
</tr>
<tr>
<td>Per diem</td>
<td></td>
</tr>
<tr>
<td>Hospital Costs</td>
<td>$74.23</td>
</tr>
<tr>
<td>Physician Costs</td>
<td>3.24</td>
</tr>
<tr>
<td>Total</td>
<td>77.47</td>
</tr>
<tr>
<td><strong>OUTPATIENT SERVICES</strong></td>
<td></td>
</tr>
<tr>
<td>Per diem</td>
<td></td>
</tr>
<tr>
<td>Outpatient</td>
<td>34.17</td>
</tr>
<tr>
<td>Day Care</td>
<td></td>
</tr>
<tr>
<td><strong>ANCILLARY SERVICES</strong></td>
<td>Per Relative Value Unit/</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Radiology</td>
<td>3.09</td>
</tr>
<tr>
<td>Medical Clinics</td>
<td>1.37</td>
</tr>
<tr>
<td>Total</td>
<td>4.46</td>
</tr>
<tr>
<td>Pathology</td>
<td>0.21</td>
</tr>
<tr>
<td>Medical Clinics</td>
<td>1.11</td>
</tr>
<tr>
<td>Total</td>
<td>1.32</td>
</tr>
<tr>
<td>Physical Therapy</td>
<td>3.09</td>
</tr>
<tr>
<td>Occupational Therapy</td>
<td>1.23</td>
</tr>
<tr>
<td>Speech Therapy</td>
<td>1.74</td>
</tr>
<tr>
<td>Dental</td>
<td>65.04</td>
</tr>
<tr>
<td>Podiatry</td>
<td>1.17</td>
</tr>
<tr>
<td>Total</td>
<td>196.54</td>
</tr>
</tbody>
</table>

(1980 Ed.)
**WAC 275-16-040 Factors in determining ability to pay.** Ability to pay will be determined on the following basis:

<table>
<thead>
<tr>
<th>MONTHLY FAMILY INCOME RANGE</th>
<th><strong>RANGE OF MONTHLY PAYMENT DUE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 0 — $ 300</td>
<td>$ 0 — $ 200</td>
</tr>
<tr>
<td>$ 301 — $ 600</td>
<td>$ 0 — $ 500</td>
</tr>
<tr>
<td>$ 601 — $ 1000</td>
<td>$ 0 — $ 900</td>
</tr>
<tr>
<td>$ 1001 — $ 1500</td>
<td>$ 0 — $ 1400</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MONTHLY INDIVIDUAL INCOME RANGE</th>
<th><strong>RANGE OF MONTHLY PAYMENT DUE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>$ 0 — $ 300</td>
<td>$ 0 — $ 275</td>
</tr>
<tr>
<td>$ 301 — $ 600</td>
<td>$ 0 — $ 575</td>
</tr>
<tr>
<td>$ 601 — $ 1000</td>
<td>$ 0 — $ 925</td>
</tr>
<tr>
<td>$ 1001 — $ 1500</td>
<td>$ 0 — $ 1475</td>
</tr>
<tr>
<td>$ 1501 — $ 2000</td>
<td>$ 0 — $ 1975</td>
</tr>
</tbody>
</table>

*The family income range is also intended to enable payment to the state for situations in which support for a family is available from other sources during the period of hospitalization of the person who normally provides for the family income.

**Actual amount of payment due for each patient within each range to be determined by department in accordance with the provisions of these regulations.*

(2) Nothing herein is to be construed as precluding the consideration of assets other than monthly income in making findings of financial responsibility. [Statutory Authority: RCW 72.01.090. 78-03-029 (Order 1270), § 275-16-040, filed 2/17/78; Order 1, § 275-16-040, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, 8/2/67, and 7/28/67.]

**WAC 275-16-045 Exempt income.** Patients whose total resources are insufficient to pay for the actual cost of care shall be entitled to a monthly exemption from income in the amount of $25 or such amount as specified in WAC 388-29-125. [Statutory Authority: RCW 72.01.090. 78-03-029 (Order 1270), § 388-16-045 (codified as WAC 275-16-045), filed 2/17/78.]

---

**Chapter 275-18 WAC**

**STANDARDS FOR CERTIFICATION OF APPROVAL FOR DRUG TREATMENT CENTERS**

**WAC 275-18-010 Authority.** These regulations are adopted pursuant to and in accordance with chapter 69.54 RCW. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-010, filed 7/28/78.]

**WAC 275-18-020 Definitions.**

1. "Drug abuse treatment professional" shall mean a person who is capable of assessing the emotional, social and behavioral background and status of a client, determining the optimal treatment plan, and providing and supervising the counseling services necessary to carry out the plan. Two years of full-time equivalent experience as a drug treatment staff person under the supervision of a person qualified to be a drug treatment professional, or a masters or doctoral degree in the behavioral sciences and one year of such experience, shall be sufficient to establish a person as qualified to be a drug abuse treatment professional.

2. "Medical practitioner" shall mean a person licensed by the state pursuant to chapter 18.71 RCW to practice medicine, or pursuant to chapter 18.57 RCW to practice osteopathy and surgery, and who is registered with the drug enforcement administration to prescribe controlled substances. The term shall also include a physician’s assistant approved by the state pursuant to chapter 18.71A RCW, an advanced registered nurse or specialized registered nurse with an appropriate specialty licensed pursuant to chapter 18.88 RCW and approved by the state pursuant to chapter 308-120 WAC, or an osteopathic physician’s assistant approved by the state pursuant to chapter 18.57A RCW, when practicing within the limits of their profession and under the supervision of a physician or osteopathic physician and surgeon who is registered by the drug enforcement administration to prescribe controlled substances. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-020, filed 7/28/78. Formerly chapter 275-14 WAC.]
WAC 275-18-030 Certification of approval. (1) Any agency or organization which receives or intends to receive state or federal funds for the purpose of providing care, treatment or rehabilitation for drug abuse problems, or which advertises or represents itself as providing care, treatment or rehabilitation for drug abuse problems, must apply to the department for approval as a drug treatment center.

(2) No agency or organization may provide drug abuse treatment unless it is approved by the department as a drug treatment center. The department may waive the requirements of this subsection where it determines that such treatment is incidental to the provision of other services, and is not a primary function of the agency.

(3) The department shall visit and examine each facility making application for approval as a drug treatment center.

(4) If the department finds that the applicant organization meets the requirements of this chapter and chapter 69.54 RCW, based on the application, the site visit and such other reports and information as may be available, it may certify the applicant organization as an approved drug treatment center. Such approval shall be for a period of not more than one year, and may be renewed in the same manner as the original certification of approval. The certification shall specify the modalities of service for which approval is granted.

(5) In individual cases the department may waive, at its discretion, specific rules which are inappropriate because of the cultural patterns of the persons served or for other reasons, and may approve alternate methods of achieving the intent of the specific rule, if such waiver does not endanger the safety or welfare of any persons in care. Such waivers may be granted on a temporary basis to allow reasonable time to achieve compliance, if a plan and timetable for compliance is approved by the department. Approvals granted pursuant to this paragraph shall be provisional on meeting the specifications of the alternate standard or timetable.

(6) The department may deny approval to any applicant, or revoke approval of any drug treatment center, if it determines that the applicant or drug treatment center is not complying with the provisions of this chapter or chapter 69.54 RCW, or fails to meet the timelines or alternate methods granted under subsection (5). Such denial or revocation may be appealed pursuant to chapter 34.04 RCW and rules promulgated thereunder. Any such applicant or center may apply again for approval at any time. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322). § 275-18-030, filed 7/28/78. Formerly WAC 275-14-030.]

WAC 275-18-040 Treatment clinical requirements. (1) All approved drug treatment centers providing drug treatment services shall have the capacity to provide both individual and group counseling services by a drug abuse treatment professional or qualified treatment staff person under the direct supervision of a drug abuse treatment professional. Except for situations beyond the control of both the client and the program, and so documented in the client record, there shall be at least one face-to-face group or individual event for each client every month, and at least one such event every week for residential and day treatment services, lasting at least 45 minutes.

(2) For all approved drug treatment centers providing drug treatment services, there shall be a review of each case by a drug abuse treatment professional at least every 90 days, assessing the adequacy of the treatment plan in light of the client’s current status and progress.

(3) All types of treatment services using chemotherapy, including the use of psychotropics, shall provide the following medication services:

(a) Medication evaluation by a medical practitioner, at least once every 90 days, and

(b) If a detoxification or maintenance service, medication dispensary.

(4) If urinalysis is used, sample collection, analysis and policies regarding use of results shall meet department standards.

(5) Day treatment and residential treatment services shall provide activities therapy on a scheduled basis by a qualified staff person for all clients at least three times a week. Schedules shall allow for adequate exercise and sleep.

(6) Residential treatment services shall provide room, board and client sundries as needed, with the following minimum requirements:

(a) All food service facilities and practices shall comply with chapter 248-84 WAC, governing food service sanitation.

(b) Foods served shall meet the nutritional needs of clients, considering age, sex, activity level and special medical needs. Meals shall be well-balanced, palatable, properly prepared and sufficient in quality and quantity to meet the 1974 dietary allowances of the food and nutrition board, national research council.

(c) Menus for general diets and any special or modified therapeutic diets shall be prepared at least a week in advance and retained for inspection by the department for at least one year.

(d) Table service shall be available to those who can and will eat at a table. Meals shall be served three times each day, at the customary meal times, whenever clients are present in the facility.

(e) Sundries shall include items reasonably needed for good grooming and personal hygiene, and clothing that is neat, clean and seasonable.

(f) Sleeping arrangements shall provide for separation of sleeping areas from cooking, eating, therapy and administrative activities; adequate heating, ventilation, access to emergency exits and bedding shall be provided to assure the health and safety of the clients.

(7) Approved drug treatment programs shall assure availability, directly or by referral, of employment placement and educational and vocational guidance services and, when necessary, psychiatric services and therapy.

(8) The physical plant, premises and equipment shall be maintained in a clean and sanitary condition, free of
The facility shall be located in an area free from hazardous conditions and accessible to other resources necessary to carry out the program. Facilities shall comply with applicable local building, fire and health codes. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-040, filed 7/28/78.]

WAC 275-18-050 Treatment intake requirements. (1) Approved drug treatment centers providing treatment services shall provide the following intake services to every client admitted, completed within 45 days of initiation of treatment services:

(a) An intake interview, conducted by a drug abuse treatment professional or other qualified staff under the close supervision of a drug abuse treatment professional, which shall include a social history, a health history, and a history of drug abuse and previous drug treatment;

(b) A clinical assessment of the applicant's problems, situation and prognosis with and without treatment, signed by the drug abuse treatment professional in subsection (1)(a);

(c) A treatment plan which includes the type and amount of services to be provided, the specific problems to be addressed or objectives to be attained, and the anticipated length of stay, completed or approved by a drug abuse treatment professional and agreed to by the client;

(d) A copy of the policies and rules of the program will be provided to the applicant prior to signing any consent forms, and ample opportunity provided to read the policies and rules and ask pertinent questions.

(2) In inpatient, residential and day treatment services, or where chemotherapy is provided, or in other treatment services where indicated by the client's health history or status, a medical intake must be conducted which shall include:

(a) A complete physical examination by a medical practitioner as soon as practical, and in no case later than 21 days after admission, with particular attention paid to those conditions which would represent a threat to the health of the client or other clients in light of the treatment methods employed. Female clients should receive a gynecological examination and an evaluation of the need for contraceptive services if such services have not been received in the last 12 months.

(b) A laboratory examination as prescribed by the medical intake in accordance with the provisions of the department.

(c) A report by the medical practitioner of current medical findings, diagnosis, and orders for the immediate care of the client. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-050, filed 7/28/78.]

WAC 275-18-060 Medication. (1) When medication is being considered as part of the treatment regimen, the client's treatment plan shall be reviewed by a medical practitioner who is trained in the use of the medication under consideration.

(2) Drugs prescribed pursuant to treatment plans shall be controlled and monitored by drug abuse treatment professionals. Only a medical practitioner, a registered nurse, or the client may administer medication.

(3) Residential and inpatient treatment services shall store all medications in a locked cabinet or similar container.

(4) Methadone treatment clients carrying take-home methadone between the program site and the individual client's residence shall carry such medication properly labeled to include the name and address of the methadone treatment program, the date the medication was prescribed, the name of the person for whom the medication is intended, instructions for use of the medication, the name of the prescribing physician, and the name of the drug. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-060, filed 7/28/78. Formerly chapter 248-136 WAC.]

WAC 275-18-070 Client caseload. The maximum clientele of any methadone treatment facility shall not exceed 250 persons, except in emergency situations as approved by the department. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-070, filed 7/28/78. Formerly WAC 248-136-160.]

WAC 275-18-080 Incarcerated clients. In those instances where a person, previously accepted as a client in a methadone program, is incarcerated, it shall be permissible for a properly authorized, qualified representative of such methadone program to enter the facility in which the person is incarcerated and to dispense methadone for either detoxification or maintenance purposes during the period of incarceration or until a medically acceptable detoxification has been accomplished; provided, that such entry into an incarcerating facility and dispensing of methadone shall be subject to the permission of the authority operating the facility and shall be made in accordance with regulations of the facility. Proper precautions shall be taken to prevent unauthorized persons from handling methadone or persons other than the intended client from receiving methadone. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-080, filed 7/28/78. Formerly WAC 248-136-140.]

WAC 275-18-090 Discharge and follow-up. (1) Each approved drug treatment center shall establish criteria and procedures for client completion and termination of treatment. Procedures shall include appeal and a fair and impartial review of involuntary terminations. Completion, once conferred, may not be revoked.

(2) Each approved drug treatment center shall establish a follow-up policy which provides for contact to be attempted after discharge with each client completing treatment.

(3) Clients not seen face to face at least once every thirty days must be discharged effective on the thirtieth day following the last face-to-face contact, unless lack of contact is due to conditions beyond the control of the client and the approved drug treatment center and the
reason is documented in the client record. Discharged clients may be seen on an after-care or follow-up basis without readmission, at a frequency less than once every thirty days. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-090, filed 7/28/78.]

WAC 275-18-100 Reporting. (1) Each approved drug treatment center shall submit in a timely and accurate manner such reports as may be required by the county drug abuse coordinator to prepare a county plan or performance and status report, or by the department to prepare the state plan or to effectively administer the drug abuse program.

(2) Each approved drug treatment center shall submit upon request a progress report at least quarterly to approved screening and referral and criminal justice diversion programs on each client referred by such programs, and permit a face-to-face interview at least once every six months of such clients by the referring agency, subject to the provisions of WAC 275-18-130. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-100, filed 7/28/78.]

WAC 275-18-110 Intervention clinical requirements. (1) Approved drug treatment centers providing intervention services shall have a current list of available services, including all approved drug treatment centers in the state, and local services, if any, for legal, employment, education, training, mental health and physical health problems.

(2) All intervention services except casefinding shall be provided by a drug abuse treatment professional or a qualified person under the supervision of a drug abuse treatment professional.

(3) Emergency services shall be available 24 hours a day, seven days a week. Emergency services may include crisis telephone service, emergency medical, and mobile emergency services.

(4) Screening and referral services and criminal justice diversion services shall meet the intake standards of WAC 275-18-050(1)(a), (1)(b) and (1)(c). Clients referred to an approved drug treatment center and returned to the screening and referral service or criminal justice diversion service shall be given priority attention. Every reasonable effort shall be made to handle such clients expeditiously and re-refer within 72 hours of their intake, with close attention to their needs during the re-referral period.

(5) Criminal justice diversion services shall monitor progress of referred clients at least quarterly. A face-to-face interview with the client for the purpose of reviewing the adequacy of current and planned services in light of current client needs shall be conducted at least once every six months. Adequate liaison and client advocacy with appropriate elements of the criminal justice system shall be maintained for each client still active with a treatment program. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-110, filed 7/28/78.]

WAC 275-18-120 Clinical records. (1) Approved drug treatment centers providing treatment services shall maintain a clinical record on each client. Each record shall contain at a minimum the following:

(a) A client history, remote and recent insofar as pertinent to the current need for treatment;

(b) Diagnostic/evaluative statements, including reports of any special studies, psychological testing, laboratory examinations, physical examinations, etc.;

(c) For clients receiving methadone, a "consent to methadone treatment" form signed by the client and a record of medications dispensed;

(d) A treatment plan, describing direct client services and medications to be provided or prescribed to the client in response to problems at intake or arising in the course of therapy;

(e) Any "release of information" consent forms signed by the client;

(f) Progress notes for each occasion of medication adjustment, individual, family or group therapy, and summaries at least weekly for day treatment and residential services;

(g) Reports of case conferences or significant collaborative contacts;

(h) Reports of significant new problems, and modifications needed in treatment plan;

(i) Quarterly summaries of progress and status, including results of quarterly case reviews; and

(j) Reports of follow-up attempts and contacts.

(2) Intervention services shall maintain clinical records as follows:

(a) Casefinding services shall maintain records of the number of contacts made, the ethnic, gender and age distribution of contacts, the number of subsequent admissions and such other data as is pertinent to the objectives of the casefinding program;

(b) Emergency services shall maintain clinical records of each client contact, including where known the name, age, sex and race of the client, the problem presented, the services provided, and the immediate outcome.

(c) Screening and referral services shall maintain clinical records of each client, including subsections (1)(a), (1)(b), (1)(d), (1)(e), and (1)(f).

(d) Criminal justice diversion service shall maintain all record components described in subsection (1), except subsections (1)(c) and (1)(f). [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-120, filed 7/28/78.]

WAC 275-18-130 Availability of records for inspection and confidentiality of clinical records. (1) General records of operation of an approved drug treatment center shall be available for inspection by the department on request. Such records shall include all policy and procedure documents required herein, clinical records, fiscal records, personnel records, meeting minutes and such other documents as may be needed to verify the provision of services and compliance with these regulations.

(2) All records relating to the identity, status, whereabouts, diagnosis, treatment, or urinalysis results of a
drug abuse client of an approved drug treatment center that are maintained by the department, the approved drug treatment center, or any agency providing services pursuant to WAC 275-18-190, and all information contained in such records, including any indication of whether or not any individual has applied for or received drug abuse related services, shall be confidential and may only be disclosed as expressly authorized in this section.

(3) The records or information described in subsection (2) may be disclosed with the client's written consent to medical personnel or bona fide treatment staff of an approved drug treatment center for the purpose of diagnosis and treatment of the client, to the client's attorney, or to government or private officials for the purpose of determining the client's right to or eligibility for benefits related to his own drug involvement. Each disclosure under this paragraph shall be made only after a prior written consent is signed and dated by the client, bearing the client's name, the name of the agency or facility disclosing the information, the name of the person to whom the information is disclosed, the purpose of the disclosure, the specific type of information to be disclosed, a statement that the consent is subject to written revocation at any time, an expiration date not later than that reasonably necessary to accomplish the stated purpose of the disclosure, the signature of the parent or legal guardian if client is under age 14, and the signature of the administrator of the program making the disclosure. A copy of such consent forms shall be maintained in the client's record. Only information necessary to satisfy the purpose of the disclosure may be disclosed.

(4) The records or information described in subsection (2) may be disclosed without consent of the client to a qualified medical authority or to a mental health professional working pursuant to chapter 71.05 RCW who has determined that the life or health of the client is in danger, that treatment without the records or information could be injurious to the client, and that timely consent of the client is not possible. The disclosure shall be limited to information necessary to meet the medical emergency.

(5) The records or information described in subsection (2) may be disclosed without the consent of the client to persons authorized by the department for the purposes of conducting program evaluation, management or fiscal audit, or scientific research into the causes and treatment of drug abuse. Information or records so disclosed shall not be removed from the agency unless all client identifying information is deleted or disguised.

(6) Where a client commits or threatens to commit a crime on the premises or against staff of the approved drug treatment center, nothing in this section shall be construed as prohibiting staff from seeking the assistance of, or reporting such a crime to, a law enforcement agency, but such report shall not identify any suspect as a client nor disclose any information about any client not essential to the investigation.

(7) In each instance of disclosure, the agency or person making the disclosure shall advise the recipient that such information or records are confidential under federal and state law, and may not be further disclosed to any other person except as provided for in federal and state regulations.

(8) Clinical records described in WAC 275-18-120 shall be maintained a minimum of five years after discharge.

(9) In the event an approved drug treatment center is closed, clinical records may be forwarded to any other approved drug treatment center with the client's consent. Clinical records still subject to minimum retention requirements, where client consent is not obtained, shall be sealed and labeled as follows: "Records of (insert name of approved drug treatment center) required to be maintained pursuant to WAC 275-18-130, until (insert minimum destruction date)." Sealed records shall be forwarded to the department, and shall be disclosed only under such circumstances and to such extent as would be permissible for the program in which they originated. The department shall destroy the records as soon as possible after the date specified on the label. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-130, filed 7/28/78.]

**WAC 275-18-140 Governance.** (1) Approved drug treatment centers which are private corporations shall have a board of directors that has final authority and responsibility for the program. The board of directors shall meet at least quarterly and keep minutes. No member of the board of directors shall benefit financially from the operation of the agency, or be a spouse, parent, sibling or offspring of a person so benefiting, except for reasonable reimbursement for expenses incurred in performing the duties of a board member. Composition of the board shall reflect the composition of the community from which the program's clients come, to the extent feasible.

(2) Approved drug treatment centers which are public agencies shall have an advisory board that meets the standards set forth in subsection (1) for boards of directors except that advisory boards shall not have final authority and responsibility for the program. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-140, filed 7/28/78.]

**WAC 275-18-150 Fiscal management.** (1) Each year there shall be prepared a formal, written budget of expected program revenues, which shall be categorized by source, and expenses, which shall be categorized by program components and/or program services. Said budget must be reviewed and approved by the board of directors of the approved drug treatment center prior to the beginning of each fiscal year of operation, and may not be modified, altered or amended without the board of directors' prior approval.

(2) There shall be a fiscal management system providing for the application of cost accounting procedures. The cost accounting procedures shall produce information that reflects the fiscal experience and current financial position of the approved drug treatment center. The
cost accounting procedure shall have the capacity to determine the direct and indirect costs attributable to each program component of the approved drug treatment center. Documentation shall be provided that describes the mechanism used to determine the basis for allocating costs.

(3) Financial records must be available for audit by the department.

(4) Where the clients are charged for services, there shall be a written fee schedule based on ability to pay. The rate and charge policies shall be approved by the board of directors. This fee schedule shall be readily accessible to clients. No client shall be refused service because of inability to pay.

(5) There shall be a reporting mechanism that provides information regarding the fiscal performance of the approved drug treatment center which:

(a) Shows the relationship of budget and actual expenditures, including both revenues and expenses by category;
(b) Includes, based upon the cost accounting system, such information as cost per unit of service, cost per client day and cost per client. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-150, filed 7/28/78.]

WAC 275-18-160 Program evaluation. (1) Approved drug treatment centers shall have an evaluation procedure that measures progress toward predetermined goals and objectives. Each approved drug treatment center shall adopt both short and long-range goals that are realistic and operationally defined.

(2) Evaluation reports shall be made at least annually, and shall be available for inspection by the department. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-160, filed 7/28/78.]

WAC 275-18-170 Staffing. (1) All approved drug treatment centers shall have, and must adhere to, written personnel policies covering the qualifications of staff, job descriptions, hours of work, rate of pay, personnel benefits, hiring practices, termination procedures, promotional requirements, leave days, evaluation procedures and grievance procedures. Said personnel policies must be provided to all employees.

(2) Approved drug treatment centers must maintain personnel records for each employee, and employees shall have access to his or her own records. Each record shall contain, at a minimum, an employment application, all employee evaluations, all records of pertinent training received, all appropriate consent forms and a statement of reasons for termination if the individual is no longer employed.

(3) Approved drug treatment centers shall comply with federal and state statutory and regulatory provisions regarding nondiscrimination and affirmative action in employment and client services.

(4) All staff of approved drug treatment centers must be evaluated at least annually.

(5) Employees who are present or former clients of the approved drug treatment center shall have personnel records separate from clinical records. No indication of client status or client activity, including urinalysis results, may be entered in the personnel record of such an employee.

(6) Exclusion from employment shall not be based on former drug use, former mental dysfunction or former criminal convictions.

(7) There shall be a formal grievance procedure for staff complaints and appeal of personnel actions, which shall provide for fair and impartial review of personnel policies, actions and other decisions affecting staff.

(8) All approved drug treatment centers shall make available to each staff person with clinical duties a minimum of 100 hours of in-service training, pertinent academic training and case consultation per year. Records of training and case consultation offered and received must be maintained.

(9) Approved drug treatment programs shall provide sufficient staff to permit each staff person at least two days off per week, and at least 25% of their work week in activities other than direct client services.

(10) The ratio of full-time equivalent counseling staff to clients shall not exceed the following:

(a) Outpatient treatment: 35 clients per full-time equivalent counseling staff.
(b) Residential treatment: 15 clients per full-time equivalent counseling staff.
(c) Day treatment: 8 clients per full-time equivalent counseling staff. Follow-up and after-care clients shall not be included in calculating these ratios.

(11) A responsible staff member shall be present and on duty at any time when a client is permitted on the premises of the program.

(12) No addict or ex-addict shall be employed as a counselor in a methadone treatment program from which he is receiving treatment. Treatment shall include receiving medications and/or counseling services.

(13) All clinical services shall be under the direction of a drug abuse treatment professional. All staff who are not themselves drug abuse treatment professionals shall be under the supervision of a drug abuse treatment professional when performing clinical duties. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-170, filed 7/28/78.]

WAC 275-18-180 Availability of services. (1) Approved drug treatment programs shall make services available during off hours to clients who are not able to receive services during the usual 9:00 a.m. to 5:00 p.m. work day.

(2) Approved drug treatment centers offering residential and emergency services must provide for access to services 24 hours a day, seven days a week.

(3) No otherwise eligible client may be denied services because of physical or sensory handicap, marital status, religion, race, sex, age, sexual preference, or current legal status. Clients under the age of fourteen may be refused services, or under age eighteen for residential services, if consent of parent or other legal guardian...
WAC 275-18-190 Required services provided by other agencies. (1) Services required by this chapter of approved drug treatment centers may be provided by an agency not under direct administrative control of the approved drug treatment center, provided that a written agreement is entered into between the approved drug treatment center and that agency, which shall include the services provided, the unit cost and total cost, if any, the duration of the agreement, the minimum and/or maximum available service, the procedures for referral, an assurance of confidentiality, the method for transmitting client information, and the division of responsibility for care. The approved drug treatment center shall retain responsibility for assuring that these regulations are complied with. Written agreements are not required where the rule permits the service to be provided by referral.

(2) Prior approval of the department of the agreement described in subsection (1) is required when state funds are subcontracted to fulfill such an agreement.

(3) The approved drug treatment center shall inform any agency providing clinical services to program clients, or otherwise able to access confidential client information, of the obligations, restrictions and procedures with respect to disclosure of such information.

(4) If services required by WAC 275-18-040(1), (2) or (5), 275-18-050(1) or 275-18-110(4) or (5) are provided by agreement pursuant to subsection (1), the agency providing such services must be an approved drug treatment center. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-190, filed 7/28/78.]

WAC 275-18-200 Client rights. (1) All approved drug treatment centers shall adopt and adhere to written policies and procedures to assuring the right of each client to:

(a) Be treated in a manner that promotes dignity and self-respect;

(b) Be protected from invasion of privacy: Provided, That, reasonable searches may be conducted in the client's presence to detect and prevent contraband from being brought in or possessed on the premises;

(c) Have all clinical and personal information treated confidentially in communications with individuals not directly associated with the approved drug treatment center;

(d) Actively participate in the development or modification of the client's own treatment regimen;

(e) Review his or her own treatment records with the responsible treatment staff person upon request once every three months, except medication records;

(f) Be fully informed regarding fees to be charged and methods of payment available;

(g) Be provided reasonable opportunity to practice the religion of his or her choice, alone and in private, insofar as such religious practice does not infringe on the rights and treatment of others, and to be excused from any religious practice;

(h) Not be denied communication with significant others in emergency situations;

(i) Not be subjected to physical abuse, corporal punishment, or denied food, clothing or other basic necessities;

(j) Not be denied the choice to enter into or dissolve a marriage: Provided, That, the approved drug treatment center is not obligated to make special provisions for conjugal visits or sleeping quarters.

(2) No posted mail, telegrams, phone calls or other forms of private communication shall be monitored, censored, opened or otherwise reviewed by anyone other than the addressee or intended recipient of same: Provided, That, mail, telegrams, phone calls and all other forms of private communication may be prohibited, except as provided in subsection (1)(h), when such prohibition is the policy of the agency. All mail or other tangible forms of communication intended for clients denied said privileges must be returned unopened to the sender, or retained unopened in a secure place for the client when said privileges are reinstated.

(3) No client shall be used to carry the basic responsibility for maintenance of the facility or treatment. However, duties such as household tasks, office work and facility repairs may be performed insofar as they are appropriate to the program and are clearly indicated in the treatment plan as essential for the treatment of the client.

(4) Policy and procedures for fair and impartial hearing of client grievances regarding these rights and agency decisions affecting the client's welfare or status as a client must be adopted and adhered to.

(5) A copy of the agency policy regarding subsections (1), (2), (3) and (4) shall be signed by each client and maintained in the clinical record.

(6) Nothing herein shall restrict or prohibit an agency from providing advice or counsel on matters relating to a client's decision to exercise any of the rights set forth in this section. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-200, filed 7/28/78.]

Chapter 275-19 WAC

ALCOHOLISM TREATMENT FACILITIES

WAC

275-19-010 Purpose.
275-19-020 Facility services.
275-19-030 Definitions.
275-19-040 Department approval and accrediting procedures.
275-19-050 Suspension or revocation of approval.
275-19-060 Inspections.
275-19-070 All facilities—Availability of services.
275-19-075 All facilities—Clients' rights.
275-19-080 All facilities—Facilities standards.
275-19-090 All facilities—Court commitments.
275-19-100 All facilities—Purpose and applicability.
275-19-110 All facilities—Governing body.
275-19-120 All facilities—Administration.

(1980 Ed.)
Chapter 275-19  Title 275 WAC:  DSHS (Institutions)

275-19-130 All facilities—Administrator.
275-19-140 All facilities—Personnel.
275-19-150 All facilities—Student practice.
275-19-160 All facilities—Volunteers.
275-19-170 All facilities—Records.
275-19-180 Residential and outpatient facilities—Case management.
275-19-190 Treatment register—Residential facilities.
275-19-200 All detoxification services—Purpose.
275-19-210 All detoxification services—Clients.
275-19-220 All detoxification services—General.
275-19-230 All detoxification services—Admission screening.
275-19-240 All detoxification services—Counseling.
275-19-250 All detoxification services—Social and recreational activities.
275-19-260 All detoxification services—Discharge and referral.
275-19-270 Modified medical detoxification—Additional requirements.
275-19-280 Social setting detoxification—Additional requirements.
275-19-300 Intensive inpatient treatment facilities—Purpose.
275-19-320 Intensive inpatient treatment facilities—Required services.
275-19-350 Intensive inpatient treatment facilities—Discharge or referral.
275-19-400 Alcoholism long-term treatment facilities—Purpose.
275-19-420 Alcoholism long-term treatment facilities—Written program statement.
275-19-430 Alcoholism long-term treatment facilities—Required services.
275-19-440 Alcoholism long-term treatment facilities—Discharge or referral.
275-19-500 Alcoholism recovery house facilities—Purpose.
275-19-510 Alcoholism recovery house facilities—Clients.
275-19-520 Alcoholism recovery house facilities—Written program statement.
275-19-530 Alcoholism recovery house facilities—Required services.
275-19-540 Alcoholism recovery house facilities—Discharge and referral.
275-19-600 Alcoholism outpatient treatment—Purpose.
275-19-610 Alcoholism outpatient treatment—Required services.
275-19-700 Information and referral services—Purpose.
275-19-710 Information and referral services—Required services.
275-19-720 Information and referral services—Community services.
275-19-800 Alcohol information school—Purpose.
275-19-810 Alcohol information school—Student assessment.
275-19-820 Alcohol information school—Curriculum.
275-19-830 Alcohol information school—Fees.
275-19-920 Emergency service patrol—Required services.
275-19-930 Emergency service patrol—Staff.

WAC 275-19-010 Purpose. Rules and regulations relating to alcoholism treatment facilities are hereby adopted pursuant to chapter 70.96A RCW. The purpose is to provide standards and procedures for departmental approval of public and private alcoholism treatment facilities, to fix fees to be charged by the department for inspections of approved facilities or facilities seeking approval, and to set forth rules for the acceptance of persons into approved public treatment programs. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-010, filed 2/1/80.]

WAC 275-19-020 Facility services. (1) Alcoholism facilities may be approved by the department pursuant to these rules and regulations to provide the following services:

   (a) Alcohol detoxification services are those services required for the care and/or treatment of persons intoxicated or incapacitated by alcohol during the period in which the person recovers from the transitory effects of acute intoxication.

   (b) Alcoholism intensive inpatient treatment services are those services provided to the detoxified alcoholic in a structured residential setting.

   (c) Alcoholism long-term treatment services are those services provided on a long-term basis (ninety days or more) in a residential care setting with personal care services for alcoholics with impaired self-maintenance capabilities who need personal guidance and assistance to maintain sobriety and good health.

   (d) Alcoholism recovery house services are those services that provide an alcohol-free residential setting with social and recreational activities for detoxified alcoholics to aid their adjustment to sobriety and their engagement in occupational training, gainful employment or other types of community activities.

   (e) Alcoholism outpatient treatment services are a variety of diagnostic and primary alcoholism treatment services provided according to a prescribed plan in a nonresidential setting.

   (f) Information and referral services provide a community-based resource for information concerning alcohol, alcohol abuse and alcoholism; assess the individual's and/or family's involvement with alcohol, assist the individual and/or family in designing a continuum of care and coordinate referrals to and from the appropriate alcoholism treatment programs or other community resources.

   (g) Alcohol information school provides the individual student with information regarding the use and abuse of alcohol and attempts to motivate the individual with a drinking problem to evaluate the problem and seek treatment.

   (h) Emergency service patrol services are those services which give assistance in the streets and in other public places to persons who are intoxicated.

(2) A facility may be approved for more than one service if the facility complies with the specific requirements for approval of each service provided. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-020, filed 2/1/80.]

WAC 275-19-030 Definitions. For the purpose of these rules and regulations, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise:

   (1) The meaning of all adjectives and adverbs such as adequate, approved, competent, substantial, qualified, necessary, reasonable, satisfactory, sufficiently, effectively, appropriately, or suitable used in these rules and regulations to qualify a person, a procedure, equipment, or buildings shall be determined by the Washington state department of social and health services.

[Title 275 WAC—p 18] (1980 Ed.)
(2) "Administrator" means the individual appointed as the chief executive officer by the governing body of a facility to act in its behalf in the overall management of the alcoholism treatment facility.

(3) "Alcoholic" means a person with alcoholism.

(4) "Alcoholism" means an illness characterized by lack of control as to the consumption of alcoholic beverages or the consumption of alcoholic beverages to the extent that a person's health is substantially impaired or endangered or his social and economic function is substantially disrupted.

(5) "Alcoholism counselor" means a person who is knowledgeable about the nature and treatment of alcoholism, is knowledgeable about community resources which provide services alcoholics may need, knows and understands the principles and techniques of alcoholism counseling and is skilled in the application of these principles and techniques.

(6) "Alcoholism treatment facility" means a hospital, sanitarium, treatment center or other place whose primary function is the treatment of alcoholism and/or alcohol abuse.

(7) "Approved" means having met the standards of the department contained in these rules and regulations and having been approved pursuant to RCW 70.96A.090.

(8) "Approved public treatment facility" means a treatment facility which is operated under the direction and control of the department, or a treatment facility which is providing treatment for the department either through contract with the department or through a county subcontract, that has been approved by the department pursuant to these rules and regulations and chapter 70.96A RCW.

(9) "Approved treatment facility" means an alcoholism treatment facility, either public or private, profit or nonprofit which has been approved by the department pursuant to these rules and regulations and chapter 70.96A RCW.

(10) "Cancel" means a permanent invalidation of the approval of an alcoholism treatment facility.

(11) "Client" means any person receiving services for the treatment of an alcohol–related problem.

(12) "Counseling, individual" means an interaction between an alcoholism counselor and a client.

(13) "Counseling, group (or group therapy)" means an interaction between two or more clients, and an alcoholism counselor(s).

(14) "Detoxification" means care and treatment of an intoxicated person during the period in which the person recovers from the transitory effects of acute intoxication.

(15) "Detoxified" means withdrawn from the consumption of alcohol and recovered from the transitory effects of intoxication and any associated acute physiological withdrawal reactions.

(16) "Department" means the Washington state department of social and health services.

(17) "Facilities" means rooms, areas and equipment to serve a specific function.

(18) "Governing body" means the individual or group which is legally responsible for the conduct of an alcoholism treatment facility.

(19) "Incapacitated by alcohol" means that a person, as a result of the use of alcohol, has his or her judgment so impaired that he or she is incapable of realizing what his or her condition is and making a rational decision with respect to the need for treatment and constitutes a danger to him or herself, to any other person or to property.

(20) "Inpatient" means a client to whom the alcoholism treatment facility is providing treatment, including room and meals, on a 24-hour basis.

(21) "Intoxication" means acute alcohol poisoning or temporary impairment of a person's mental or physical functioning caused by alcohol in his/her body.

(22) "Intoxicated" means in the state of intoxication.

(23) "Licensed nurse" means either a registered nurse or a licensed practical nurse.

(a) "Licensed practical nurse" is a person duly licensed under the provision of the Licensed Practical Nurse Act of the state of Washington, chapter 18.78 RCW.

(b) "Registered nurse" means a person duly licensed under the provision of the law regulating the practice of registered nursing in the state of Washington, chapter 18.88 RCW.

(24) "May" means permissive.

(25) "Modified medical detoxification" is detoxification service provided to individuals for whom the consequences of withdrawal from alcohol are so severe as to merit assistance with medication, usually tranquilizers or sedative hypnotics.

(26) "Outpatient" means a client to whom the alcoholism treatment facility does not provide room or meals on a 24-hour–a–day basis.

(27) "Physician" means a doctor of medicine or a doctor of osteopathy duly licensed in the state of Washington.

(28) "Provisional approval" means a status of approval granted to alcoholism treatment facilities which are requesting approval for the first time in order to provide them with the time to develop policies, procedures, files and program outlines required by chapter 275–19 WAC.

(29) "Qualified alcoholism counselor" means an alcoholism counselor who meets the following minimum requirements:

(a) Have no history or substantial evidence of alcohol or other drug misuse for a period of two years immediately prior to the time of employment as a qualified alcoholism counselor and no misuse of alcohol or other drugs while a qualified alcoholism counselor.

(b) Specialist I—A qualified alcoholism counselor, Specialist I, shall possess these qualifications:

(i) A high school diploma or equivalent.

(ii) Two thousand hours (approximately one year) of supervised work experience, in a counseling capacity, in an approved alcoholism agency or facility. (May include hours spent in supervised field experience under academic supervision.)
(iii) Satisfactory completion of a minimum of 12 quarter credits or 8 semester credits of course work in an accredited institution of higher learning (college or university), of which (i) at least 6 quarter (4 semester) credits must be in specialized alcoholism courses, and (ii) the remaining 6 (4 semester) credits may be in either such courses or in counseling, psychology, sociology, or social work.

(c) Specialist II—A qualified alcoholism counselor, Specialist II, shall possess these qualifications:

Education and experience, as described in Option A or Option B:

Option A:

(i) A bachelor's degree from an accredited college or university; and

(ii) A minimum of 12 quarter (8 semester) credits of specialized alcoholism courses in an accredited college or university, exclusive of field experience; and

(iii) Two thousand hours (approximately one year) of supervised work experience in a counseling capacity, in an approved alcoholism agency or facility. (May include hours spent in supervised field experience under academic supervision.)

Option B:

(i) Qualified as an alcoholism counselor, Specialist I, and, thereafter;

(ii) Two years of successful full-time experience with duties comparable to those of an Alcoholism Counselor, Specialist I, in an approved alcoholism facility; and

(iii) A minimum of 12 quarter (8 semester) credits in specialized alcoholism courses, which may include those under (b)(iii)(i) of this subsection for Alcoholism Counselor, Specialist I.

(d) Complete the following education every two years of employment.

(i) A minimum of 3 quarter (2 semester) credits, granted by a college or university, in subject areas that will increase the counselor's knowledge and skills in counseling and aiding the alcoholic to recover; and

(ii) A minimum of two short courses, retreats, or workshops directly relating to alcoholism or alcoholism and other drug dependences. Inservice training does not satisfy this requirement.

(e) Meet the knowledge and competence requirements in the document "Guidelines for Qualifications of Alcoholism Counselors" published by the office on alcoholism.

(f) If a counselor is certified as an alcoholism counselor by the Alcoholism Certification Board of the Alcoholism Professional Staff Society of Washington State or the Northwest Indian Alcoholism Drug Specialists Certification Board, it is presumed that he/she is a qualified alcoholism counselor so long as these certification boards maintain standards of practice that equal or exceed guidelines published by the office on alcoholism.

(30) "Residential facilities" means facilities that provide board and room as part of their treatment program.

(31) "Revoke" means a permanent invalidation of the approval of an alcoholism treatment facility.

(32) "Secretary" means the secretary of the Washington state department of social and health services or his/her designee.

(33) "Shall" means compliance is mandatory.

(34) "Should" means compliance is suggested or recommended but is not required.

(35) "Social setting detoxification" is detoxification service provided to individuals in a supportive, homelike environment within which a person can recover from the effects of intoxication. Prescription medication is not provided for the management of withdrawal discomfort.

(36) "Substantial compliance" means being in conformity with the requirements of the major components of each section of chapter 275-19 WAC which applies to the class or classes of alcoholism treatment services for which an alcoholism treatment facility is approved or has applied for approval.

(37) "Suspend" means invalidation of the approval of an alcoholism treatment facility for any period less than one calendar year or until the agency is notified of reinstatement. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-030, filed 2/1/80.]
designee for department review prior to inspection of a facility.

(6) If written documents submitted to the department do not meet the requirements of these rules and regulations and/or do not validate the need for the services requested in the application, the office on alcoholism shall notify the applicant agency in writing. The applicant agency shall have thirty days to respond in writing to the contents of the notice. If a response is not received with thirty days, the chief of the office on alcoholism or his/her designee may refuse to grant approval and shall notify the applicant agency in writing of the action taken. If written documents submitted to the department do not meet the requirements of these rules and regulations, the chief of the office on alcoholism or his/her designee shall have the facility inspected to ensure compliance with the requirements of these rules and regulations and chapter 70.96A RCW. After inspection the chief of the office on alcoholism or his/her designee shall either approve the facility to provide one or more of the services listed in WAC 275-19-020 or refuse to grant approval. The chief of the office on alcoholism or his/her designee shall send written notification of department approval of the facility as an approved alcoholism treatment facility or shall send written notification of the deficiencies which resulted in the refusal to grant approval.

(7) The department may grant provisional approval to alcoholism treatment facilities when department staff are unable to determine without a period of operation whether the facility will comply with chapter 70.96A RCW and these rules and regulations. Provisional approval shall expire automatically after six months and may not be renewed. Such expiration shall not be considered a suspension or revocation pursuant to WAC 275-19-050.

(8) (a) The secretary or his/her designee may, at his/her discretion, exempt an alcoholism treatment facility from compliance with parts of these regulations when it has been found after thorough investigation and consideration that such exemption may be made in an individual case without jeopardizing the safety or health of the clients in the particular alcoholism treatment facility.

(b) All exemptions granted pursuant to the foregoing provisions shall be reduced to writing and filed with the department of social and health services and the alcoholism treatment facility.

(9) The chief of the office on alcoholism or his/her designee shall issue an annual certificate of approval to those approved alcoholism treatment facilities which remain in substantial compliance with these rules and regulations and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-040, filed 2/1/80.]

WAC 275-19-050 Suspension or revocation of approval. (1) Each approved public or private treatment facility shall file with the department within thirty days of request, data, statistics, schedules, and information the department reasonably requires.

(2) Failure to be in substantial compliance with the requirements of chapter 70.96A RCW or these rules and regulations shall constitute grounds for the suspension or revocation of the approval in accordance with RCW 34.04.170.

(3) The department may cancel approval if an agency ceases to provide the class or classes of services for which it has been approved.

(4) When the department intends to suspend, revoke or cancel approval, the chief of the office on alcoholism or his/her designee shall have served upon the approved alcoholism treatment facility a notice of intent to suspend, revoke or cancel their approval. Such notice shall provide for an administrative hearing and meet the requirements of RCW 34.04.090. The subsequent hearing and judicial review shall follow administrative procedures as specified in the Administrative Procedure Act, chapter 34.04 RCW and the rules and regulations promulgated thereunder. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-050, filed 2/1/80.]

WAC 275-19-060 Inspections. (1) Any approved public or private treatment facility and any facility seeking departmental approval shall be open to departmental inspection. The facility, its programs, including all individual and group counseling sessions with clients and general records of operation, shall be open for inspection in accordance with federal and state confidentiality laws by the department upon request. Such records shall include all policy and procedure documents required herein, personnel records, clinical records, fiscal records, meetings minutes and such other documents as may be needed to verify the provision of services and compliance with these regulations. Department inspection may be made during any time in which the facility is serving clients, provided, that such inspection shall not unduly disrupt client activity. Inspections shall be reasonably calculated to check substantial compliance with these rules and regulations, and chapter 70.96A RCW.

(2) All facilities shall pay a fee of fifty dollars for an inspection. Only one such inspection fee shall be charged during any calendar year, regardless of the number of inspections which may be made. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-060, filed 2/1/80.]

WAC 275-19-070 All facilities—Availability of services. (1) Approved alcoholism treatment facilities shall provide services to persons with alcohol and alcohol-related problems or to their families without regard to race, color, creed, national origin, religion, sex, sexual preference, age or handicap.

(2) Services for men and women shall reflect an awareness of the special needs of each gender. All residential facilities shall provide equivalent, clearly defined, and well supervised sleeping quarters and bath accommodations for the male and female clients. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-070, filed 2/1/80.]

[Title 275 WAC—p 21]
All approved alcoholism treatment facilities shall take reasonable efforts to assure the right of each client to:

(a) Be treated in a manner that promotes dignity and self-respect.
(b) Be treated without regard to race, color, creed, national origin, religion, sex, sexual preference, or age.
(c) Be treated without regard to physical or mental disability unless such disability makes treatment afforded by the facility nonbeneficial or hazardous.
(d) Be protected from invasion of privacy: Provided, That, reasonable searches may be conducted to detect and prevent contraband from being brought in or possessed on the premises.
(e) Have all clinical and personal information treated confidentially in communications with individuals not directly associated with the approved alcoholism treatment center.
(f) Review his or her own treatment record with a treatment staff person upon request.
(g) Be fully informed regarding fees to be charged and methods of payment available.
(h) Be provided reasonable opportunity to practice the religion of his or her choice, alone and in private, insofar as such religious practice does not infringe on the rights and treatment of others, or the treatment program. The client also has the right to be excused from any religious practice.
(i) Not be denied communication with significant others in emergency situations.
(j) Not be subjected by facility staff to physical abuse, corporal punishment, or other forms of abuse administered against their will including being denied food, clothing or other basic necessities.

(2) Policies and procedures for the review of client grievances regarding these rights and agency decisions affecting the client’s welfare or status as a client shall be adopted and adhered to. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-075, filed 2/1/80.]

All facilities—Facilities standards. (1) The building(s) provided by alcoholism treatment facilities shall meet all applicable state and county requirements.
(2) Room for group and subgroup activities will be provided.
(3) There shall be private space for personal consultation.
(4) Medications shall be secured and dispersed in accordance with the requirements of chapter 248-22 WAC. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-080, filed 2/1/80.]

All facilities—Court commitments. (1) In the event a client, who has been committed to a treatment program per chapter 70.96A RCW, leaves the facility without authorization, that fact shall be promptly reported to the committing authority.
(2) In the event that a client demonstrates a continuing inability or unwillingness to properly participate in and benefit from treatment programs, after due consultation with the client and with the referral or committing source, the client may be referred or transferred to an alternative source of treatment, or be discharged as appropriate.

(3) Approved private treatment facilities may accept court-ordered commitments on whatever conditions deemed appropriate by the facility. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-090, filed 2/1/80.]

All facilities—Purpose and applicability. (1) The purpose of WAC 275-19-100 through 275-19-199 is to provide standards for administrative procedures, personnel, records, and case management for all approved alcoholism treatment facilities.
(2) All approved alcoholism treatment facilities shall meet the provisions of WAC 275-19-110 through 275-19-199. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-100, filed 2/1/80.]

All facilities—Governing body. (1) A facility providing alcoholism treatment services shall have an effective governing body which is legally responsible for the conduct of the alcoholism service or services provided.
(2) A governing body shall:
(a) Adopt bylaws which establish a mechanism for selection of officers and members of the governing body.
(b) Maintain a current job description for the position of administrator which delineates the qualifications for and the responsibilities of the position.
(c) Establish the philosophy and overall objectives for the alcoholism treatment facility and each distinct part thereof.
(d) Adopt administrative policies which establish the mechanism for delegation of responsibility and accountability for operation and maintenance of the alcoholism treatment facility.
(e) Adopt policies for the care of clients in the facility and every distinct part thereof. These policies shall govern the admission of clients, the length of treatment, the type and scope of services provided to clients, and the transfer or discharge of clients, and shall provide for a continuing evaluation of the alcoholism treatment program(s).
(f) Provide for the personnel, facilities, equipment, supplies and special services which are necessary to clients' needs for services and to maintain and operate the facility in accordance with applicable laws and regulations.
(g) Review and approve written personnel policies.
(3) The bylaws, job description for the administrator, philosophy and objectives, administrative policies and policies regarding the care of clients shall be consistent with applicable federal and state laws and regulations. They shall be written, current, dated and signed by officers of the governing body, and readily available to all members of the governing body and other persons in accordance with their responsibilities or involvement in
implementation. [Statutory Authority: RCW 70.96A-.090, 80–02–136 (Order 1486), § 275–19–110, filed 2/1/80.]

WAC 275–19–120 All facilities—Administration. (1) The administrative organization shall assure free-flow of clinical and managerial information and shall facilitate the delivery of services.

(2) There shall be a policies and procedures manual that describes in detail the program services and includes all policies and procedures required by these rules and rule 2.17, of Title 42 Code of Federal Regulations (42 CFR) Part 2 (Confidentiality of Alcohol and Drug Abuse Patient Records). This manual shall be available to all staff members.

(3) The lines of authority and responsibility shall be explicitly stated in writing and shall delineate all staff positions, including volunteers.

(4) The administrative organization shall develop a plan for coordination of efforts and interfacing with other community agencies, public and private, comprising the county alcoholism services system and ancillary services. [Statutory Authority: RCW 70.96A.090, 80–02–136 (Order 1486), § 275–19–120, filed 2/1/80.]

WAC 275–19–130 All facilities—Administrator. (1) There shall be a chief administrator at least twenty-one years of age who is directly responsible for the operation of the alcoholism treatment facility.

(2) The administrator shall possess the knowledge and skills in fiscal accounting, personnel management, and other administrative functions necessary to provide adequate supervision to the facility.

(3) At any time the administrator is not on duty or on call, there shall be a person on duty or on call to whom the administrator has delegated the authority and responsibility to act in his/her stead. Any person to whom the administrator’s authority and responsibility are delegated shall be a competent person at least twenty-one years of age who is not currently a client of the facility.

(4) The administrator shall establish and maintain a current written plan of organization which includes all positions and delineates the function, responsibilities, authority, and relationships of all positions, including volunteers, within the alcoholism treatment facility.

(5) The administrator shall ensure that written policies and procedures are developed, review and revised as necessary to keep them current. They shall be dated and signed by the administrator having responsibility for approval of the policies and procedures. [Statutory Authority: RCW 70.96A.090, 80–02–136 (Order 1486), § 275–19–130, filed 2/1/80.]

WAC 275–19–140 All facilities—Personnel. (1) There shall be sufficient qualified alcoholism counselors, clerical and other support staff who are not of the present client population, to ensure the attainment of program service objectives and properly maintain the alcoholism treatment facility. This shall not preclude the assignment of work to a client when the assignment is part of the client’s treatment program, the client’s work assignment has therapeutic value, and the client works under the immediate supervision of a member of the staff.

(a) Personnel employed as alcoholism counselors shall be qualified alcoholism counselors as defined in WAC 275–19–030; or

(b) There shall be an individualized training and educational plan developed for any person employed as an alcoholism counselor who is not a qualified alcoholism counselor as defined in WAC 275–19–030. This training and educational plan shall be designed to bring the individual up to the required standards within two years from the date of employment as an alcoholism counselor.

(2) All staff members who have contact with clients and the public shall have adequate training regarding alcoholism and alcohol abuse.

(3) There shall be a written job description for each position classification within the facility.

(a) Each job description shall include: The job title, the definition of the position, the title of the immediate supervisor, a summary of the duties and responsibilities and the minimum qualifications.

(b) Qualifications listed in a job description shall include the education, training, experience, knowledge and special abilities required for the position.

(c) The appropriate job description shall be explained to each employee, and shall be used thereafter as one of the means for evaluating the individual’s performance.

(d) The job descriptions shall be dated and shall be reviewed and revised so they are kept current.

(4) There shall be an education program which affords each employee opportunity to develop the competencies needed to perform the duties and responsibilities assigned to him or her.

(a) A planned, supervised, orientation shall be provided to each new employee to acquaint him or her with the organization of the facility, physical plant layout, his or her particular duties and responsibilities, the policies, procedures, and equipment which are pertinent to his or her work and the disaster plan for the facility.

(b) A planned training program shall be provided to any employee who has not been prepared for his or her job responsibilities through completion of a formal education program.

(c) A record shall be maintained of the orientation, on-the-job training, and continuing education received by the employee. The data contained in this record shall be sufficient to allow determination whether or not the employee has received training or education necessary for the performance of his or her functions.

(5) Each employee shall have a tuberculin test upon employment and thereafter in accordance with the guidelines laid out in chapter 248–22 WAC.

(6) Employees with a communicable disease in an infectious stage shall not be on duty.

(7) For each employee there shall be a current personnel record which includes the following:

(a) An application form, which includes or is supplemented by a resume indicating the employee’s education, training, and work experience.

(1980 Ed.)
(b) Verification of the employee's professional, technical, or vocational education or training.

(c) A copy of the employee's current job description which has been signed and dated by the employee.

(d) A copy of a current and valid license, certificate, or permit for any employee for whom a license, certificate or permit is required.

(e) Written performance evaluations for the initial six months of employment and for each year of employment thereafter. The completed evaluation form shall be signed and dated by the evaluator and the employee.

(f) Evidence of adequate health supervision including a record of tuberculin skin tests or chest X-rays, and accidents occurring on duty.

(g) A copy of the employee's individualized training and education plan.

(h) A current record of all training and education which the employee has completed since the date of employment.

(i) An assurance of confidentiality statement which has been signed and dated by the employee. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-140, filed 2/1/80.]

WAC 275-19-150 All facilities—Student practice. If an alcoholism treatment facility provides a setting for student practice in a formal educational or training program, there shall be a written agreement with the educational agency or institution concerned. This agreement shall define the nature and scope of student activities within the facility, and ensure supervision of student activities in the interest of clients' welfare. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-150, filed 2/1/80.]

WAC 275-19-160 All facilities—Volunteers. (1) Volunteers may be used in an alcoholism treatment facility as a staff supplement where their participation is positive and productive in relation to the treatment philosophy. They shall show a strong commitment to the philosophy of the program and meet certain criteria in terms of understanding, dependability and attitude.

(2) Volunteers working in treatment staff roles (counselors, counselor aides, co-therapists, etc.) should have at least one year of continuous freedom from the abuse of alcohol or other substances.

(3) There shall be a brief but comprehensive orientation program for all volunteers.

(4) Programs using volunteers shall have a written plan describing how volunteers will be utilized and a written work description for each position fill by a volunteer.

(5) Volunteers working in treatment staff roles shall be directly supervised by a qualified alcoholism counselor. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-160, filed 2/1/80.]

WAC 275-19-170 All facilities—Records. (1) All alcoholism treatment facilities shall have an accurate and complete record system which:

(a) Provides for maintenance of a current and complete record for each client.

(b) Provides a systematic method of identifying and filing client's records so each record can be located readily.

(c) Ensures confidentiality of patients' case records by storing and handling them under conditions which meet all pertinent federal, state and local regulations governing such records.

(d) Includes all required state and county data.

(e) Reflect all financial transactions of the facility. The accounting system shall meet all federal, state and county requirements.

(2) Client file records required in this section shall be retained by the treatment facility for a minimum of five years following the discharge or transfer of the client.

In the event an approved alcoholism treatment facility is closed, clinical records may be forwarded to any other approved alcoholism treatment center with the client's consent. Clinical records still subject to minimum retention requirements, where client consent is not obtained, shall be sealed and labeled as follows: "Records of (insert name of approved alcoholism treatment facility) required to be maintained pursuant to WAC 275-19-170, until a date not later than December 31, (insert year)." Sealed records shall be forwarded to the department, and shall be disclosed only under such circumstances and to such extent as would be permissible for the program in which they originated. The department shall destroy the records as soon as possible after the date specified on the label.

(3) Residential facilities shall have individual case records which include:

(a) Identifying sociological data including the client's full name, sex, birthdate, social security number, and home address.

(b) Date of admission.

(c) The name, address, and telephone number of the client's next of kin or other responsible person.

(d) The name, address, and telephone number of the client's personal physician, if any.

(e) A record of the evaluation and assessment of each client's involvement with alcohol.

(f) A record of observations of the client's condition.

(g) Progress notes on response to care and treatment which relate to the treatment plan and note all significant events during treatment.

(h) A record of a client's signed voluntary admission and consent to care and treatment or a commitment record.

(i) At completion of treatment, a discharge summary which includes the date of discharge, and a summary of the client's progress in meeting the goals and objectives in the treatment plan.

(j) A properly completed authorization for release of information form, which meets all federal and state requirements, for each disclosure of information concerning the client.

(k) Each entry in a client's record shall be dated and shall be authenticated by the signature of the person making the entry.
(4) Outpatient treatment facilities shall have individualized case records which include the following:
   (a) Identifying sociological data including the client's full name, sex, birthdate, social security number, and home address.
   (b) The date the client entered treatment.
   (c) The name, address and telephone number of the client's next of kin or other responsible person.
   (d) The name, address, and telephone number of the client's personal physician, if any.
   (e) A record of the evaluation and assessment of the client's involvement with alcohol.
   (f) Progress notes on the client's response to treatment which relate to the treatment plan and note all significant events during treatment.
   (g) The client's voluntary signed consent to treatment.
   (h) A record of referral or transfer which shall include the date and place of said referral or transfer.
   (i) At completion of treatment, a discharge summary which includes the date of discharge, and a summary of the client's progress in meeting the goals and objectives in the treatment plan.
   (j) Each entry in a client's record shall be dated and shall be authenticated by the signature of the person making the entry.
   (k) A properly completed authorization for release of information form, which meets all federal and state requirements, for each disclosure of information concerning the client.
   (5) Information and referral facilities shall have individual case records which include:
      (a) Identifying sociological data including the client's full name, sex, birthdate, social security number, and home address.
      (b) The date of contact(s).
      (c) A record of the client's problem statement.
      (d) A record of the client's problem assessment.
      (e) A record of any referral.
      (f) A properly completed authorization for release of information form, which meets all federal and state requirements, for each disclosure of information concerning the client.
   (g) Each entry in a client's record shall be dated and shall be authenticated by the signature of the person making the entry.
   (6) Alcohol information schools shall have individual case records which include:
      (a) Identifying sociological data including the client's full name, sex, birthdate, social security number, and home address.
      (b) Dates in attendance.
      (c) Source of referral.
      (d) A record of the assessment of the client's involvement with alcohol.
      (e) A record of any referral.
      (f) A properly completed authorization for release of information form, which meets all federal and state requirements, for each disclosure of information concerning the client.
      (7) Emergency service patrols shall maintain a log which includes:
         (a) The time and origin of the call received.
         (b) The time of arrival at the scene.
         (c) The location of the pickup.
         (d) The name, sex and the race of the person transported.
         (e) The destination of transport (either home or detox facility).
         (f) The time of transport completion.
         (g) In nonpickup cases, notation shall be made of the reason why said pickup was not made.
   (h) Each entry in the log shall be dated and shall be authenticated by the signature of the person making the entry. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-170, filed 2/1/80.]

WAC 275-19-180 Residential and outpatient facilities—Case management. (1) For each client there shall be a case manager who will be responsible for completeness of records and documentation of progress toward attainment of the treatment objectives.
   (2) Case managers shall be:
      (a) Qualified alcoholism counselors in all intensive inpatient, long-term treatment, recovery house, and outpatient facilities.
      (b) Qualified alcoholism counselors or licensed nurses in detoxification facilities.
   (3) The treatment rationale will be designed to achieve total abstinence for all diagnosed alcoholics.
   (4) For each client, there shall be an individualized treatment plan which is designed to help the person understand and overcome his or her illness and which takes into account the person's current health status; any medical treatment prescribed; and the client's physical, mental, emotional, and social needs. The client shall be encouraged to participate in developing the treatment plan to the extent he or she is able. The plan shall establish specific, time-linked treatment objectives leading toward a responsible, independent life style and the termination of services.
   (5) The case manager shall review each active case in his or her caseload regularly to ensure that the treatment plan is valid and that there is movement toward treatment goals.
      (a) Case managers in detoxification facilities shall review each active case at least once daily.
      (b) Case managers in intensive inpatient facilities shall review each active case at least once each week.
      (c) Case managers in long-term, recovery house and outpatient alcoholism treatment facilities shall review each active case at least once each month.
      (d) Case managers shall be responsible to follow up on clients who have missed appointments and to pursue all opportunities to keep the client in treatment.
   (6) Concurrent drug abuse patterns or tendencies toward other drug abuse shall be explored in each client. The client shall be warned of the danger of mixing drugs
and alcohol, and be warned of the tendency to cross-
addiction.

(7) Support services to help modify the client's life style might include but are not limited to the following:
(a) Alcoholics Anonymous affiliation;
(b) Psychological or psychiatric guidance and/or counseling;
(c) Special programs for specific or minority groups;
(d) Occupational therapy;
(e) Vocational rehabilitation;
(f) Recreational therapy and vocational development;
(g) Spiritual/philosophical counseling and guidance;
(h) Activity/socialization programs.
(8) Medical backup procedures should be available to provide:
(a) Hospital services to meet life-threatening situations to clients;
(b) Consultation for a nonmedical staff;
(c) Psychiatric and/or psychological consultation.
(9) Any treatment that includes Antabuse shall be supervised by a qualified alcoholism counselor and shall meet the requirements for the self-administration of drugs as required in chapter 248-22 WAC unless administered by a licensed nurse acting under a physician's orders. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-180, filed 2/1/80.]

WAC 275-19-190 Treatment register—Residential facilities. All residential treatment facilities shall have a permanent, current register of all persons admitted for care or treatment. This shall include the following data for each person: Date of admission, full name, address, date of discharge or transfer, and the name and address of the place to which discharged or transferred. Data on clients shall be entered into the register in chronological order according to the date and time of admission. When an alcoholism treatment facility provides more than one category of alcoholism treatment service, there shall be a separate register for each distinct part of the facility. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-180, filed 2/1/80.]

WAC 275-19-200 All detoxification services—Purpose. The purpose of WAC 275-19-200 through 275-19-299 is to provide program standards and procedures for residential facilities offering detoxification services to individuals incapacitated and/or intoxicated by alcohol as described in WAC 275-19-020. To be approved as an alcoholism treatment facility to provide alcoholism detoxification services, the facility must comply with the requirements of WAC 275-19-010 through 275-19-299 and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-200, filed 2/1/80.]

WAC 275-19-210 All detoxification services—Clients. (1) Admission of clients to an alcoholism detoxification facility shall be limited to persons who need detoxification services and do not manifest signs and symptoms of a condition which warrants acute care and treatment in a hospital.

WAC 275-19-220 All detoxification services—General. There shall be an organized treatment program and staff which shall provide the following services:
(1) Screening of each person prior to admission to determine whether he or she manifests signs or symptoms of serious illnesses or severe trauma which warrant acute care and treatment in a hospital and whether he or she needs detoxification.
(2) Detoxification of intoxicated persons.
(3) Counseling of alcoholics regarding their illness.
(4) Referral of detoxified alcoholics to other appropriate alcoholism treatment programs.
(5) Adequate transportation to clients to meet the requirements of RCW 70.96A.110(4). [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-220, filed 2/1/80.]

WAC 275-19-230 All detoxification services—Admission screening. There shall be policies and procedures covering the screening of persons prior to admission. There shall be designed to insure that any screening is done by a person who is knowledgeable about alcoholism, skilled in observation and in eliciting information pertinent to assessment of a health problem, and competent to recognize significant signs and symptoms of illness or trauma. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-230, filed 2/1/80.]

WAC 275-19-240 All detoxification services—Counseling. (1) There shall be on staff at least one qualified alcoholism counselor and such additional qualified counselors as necessary to provide the alcoholism counseling services needed by clients. The alcoholism treatment facility may meet this requirement by having in effect a written agreement with another approved alcoholism treatment facility.
(2) Counseling services shall be designed to facilitate motivation of the person to accept referral into a continuum of care for alcoholism. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-240, filed 2/1/80.]

WAC 275-19-250 All detoxification services—Social and recreational activities. There shall be definite provision for social and recreational activities to promote and assist a client's engagement in normal activities in accordance with his or her interests, needs and potential. Such service may be provided by a day room or lounge in which persons can watch television, participate in games, or engage in social and recreational activities. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-250, filed 2/1/80.]

(1980 Ed.)
WAC 275-19-260 All detoxification services—Discharge and referral. Clients discharged shall be referred to an approved alcoholism treatment facility when appropriate and/or other health care facility when necessary. The client should be assisted to these agencies or to his or her home when necessary. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-260, filed 2/1/80.]

WAC 275-19-270 Modified medical detoxification—Additional requirements. Any alcoholism treatment facility which provides modified medical detoxification services shall comply with the following additional requirements:

(1) The client's physical and health care needs shall be met by practices that meet the standards set forth in chapter 248-22 WAC. The facility may provide juices, snack foods and other like foods capable of being ingested by a person undergoing detoxification in lieu of formal menus as specified in chapter 248-22 WAC.

(2) All personnel other than physicians and licensed nurses who are providing client care in the absence of licensed physicians or nurses in the facility shall possess a valid and current red cross card or certificate for first aid and cardiopulmonary resuscitation or the equivalent. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-270, filed 2/1/80.]

WAC 275-19-280 Social setting detoxification—Additional requirements. Alcoholism treatment facilities which provide social setting detoxification services shall comply with the following additional requirements:

(1) The physical plant and equipment of social detoxification facilities shall meet the requirements set forth in chapter 248-22 WAC.

(2) No more than twenty clients shall be served in any one facility.

(3) The facility shall be located within five miles driving distance of a hospital or shall have physician trained mobile intensive care paramedic services as defined in chapter 248-19 WAC available within ten minutes.

(4) The facility shall be located in an area which is properly drained and is served by a street which is usable under all weather conditions.

(5) Each client shall be provided equipment, supplies and assistance he or she needs to maintain his or her personal comfort, cleanliness and grooming. Each client shall be provided at least one comfortable pillow and adequate, lightweight warm bedding, clean bed linen, towels and washcloths.

(6) There shall be a physician who serves as a medical consultant to the facility.

(7) The facility shall have written policies and procedures for the following areas of client care. These policies and procedures shall be approved by the consulting physician.

(a) Client screening.
(b) Client care and observation.
(c) Referral to medical evaluation.

(d) Transfer of clients to a modified medical detoxification services (if available).
(e) Transfer of clients to a hospital.
(8) The facility shall have in effect written agreements with the following:

(a) A modified medical detoxification facility if one exists in the community. The agreement shall assure that clients in need of modified medical detoxification services will be admitted;

(b) One or more hospitals within the five-mile limitation. The agreement shall assure that a person will be received at the hospital for a medical evaluation and/or admitted to the hospital when the individual's condition necessitates acute care and treatment.

(9) Prescription medication shall not be provided for management of withdrawal discomfort in a social detoxification facility.

(10) If a client admitted to the facility has in his/her possession any prescription medications, the staff shall attempt to contact the prescribing physician to check on the accuracy of the prescription, its usage and document the attempts in the client file.

(11) All prescription medications shall be dispersed by the self-administration method. Self-administration of medications by a client shall be in accord with the following:

(a) The client shall be physically and mentally capable of administering his or her own drug properly.

(b) Any legend drug which a client has for self-administration shall have been prescribed for the client by a physician or other legal authorized practitioner acting within the scope of his license and shall have been dispensed in a legibly and securely labeled container by a pharmacist.

(c) Prescription drugs, over-the-counter drugs purchased independently by the client and other medicine or materials used by a client shall be relinquished to the staff and shall be kept in individually keyed and locked storage units (e.g., drawers, medicine cabinets, compartments). Access to and use of such drugs and materials shall be restricted to the particular client for self-administration. All such individual–locked storage units shall be in a central location where personnel can maintain surveillance over the client's self-administration of drugs.

(d) Any medications retained for the client shall be released to the person upon discharge. A receipt shall be secured for all medications released to the client. Any medications left at the facility by the client shall be given to the consulting physician for destruction.

(12) The facilities shall have a disaster plan which meets the requirements of chapter 248-22 WAC.

(13) The facility shall have policies and procedures governing safety measures which meet the requirements of chapter 248-22 WAC.

(14) A client's next of kin, legal guardian or other person or agency responsible for the client shall be notified as rapidly as possible should a serious change in the client's condition, transfer of a client to a hospital or death of the client occur.
(15) The facility shall have a current schedule of names and telephone numbers posted at the facility's telephone through which the following can be contacted rapidly in case of an emergency.

(a) Emergency medical service (Medic I, or its equivalent if one exists).

(b) Ambulance service.

(c) Hospital emergency room.

(d) Police and fire departments.

(e) Facility administrator or his/her designee.

(16) All personnel providing client care shall have completed, prior to employment, the standard Red Cross first aid class and cardio-pulmonary resuscitation or its equivalency, and shall complete within six months of their employment the advanced Red Cross first aid class or its equivalent.

All personnel providing client care shall have completed a minimum of forty hours of classroom training in alcoholism prior to employment or within six months of the date of employment.

(17) All furnishings and the general decor shall reflect a home-like environment. Each of the following areas shall be provided and structured as stated:

(a) The dining area shall have provisions for family-type eating arrangements.

(b) The kitchen shall be capable of providing nutrition at all times and three thousand calories per day for each resident. A kitchen should be essentially similar to what is found in a home setting. At a minimum, it must allow for preparation of snacks, soup and sandwiches, decaffeinated coffee, and juice. The fixtures should include a refrigerator, stove, freezer, storage facilities, sink and dishwasher. All fixtures must be in good working order.

(e) The washroom shall include shower facilities, toilets, and sinks. All must be in good working order. Curtains should be used rather than doors for showers. There shall be no locks.

(d) Sleeping areas shall be structured as to permit observation of residents and encourage resident communication.

(e) A lounge shall have adequate space for relaxation, group discussion, and peer group interaction.

(f) The reception area shall be separate from living areas in order to maintain the comfort and privacy of residents. There shall be a client reception desk and a comfortable chair for use by those seeking admission.

(g) There shall be an area designated as the counseling area. This area shall be available to those desiring private discussion or counsel.

(h) There shall be a telephone available for use by residents.

(i) Laundry facilities shall include a washer, dryer, ironing board, and iron. All must be in good working order.

(j) There shall be a storage area adequate for storage of housekeeping equipment and supplies.

(k) A safekeeping cabinet shall be available for storage of resident valuables. The key to this cabinet shall be available to staff but not to residents. [Statutory Authority: RCW 70.96A.090, 80-02-136 (Order 1486), § 275-19-280, filed 2/1/80.]

WAC 275-19-300 Intensive inpatient treatment facilities—Purpose. The purpose of WAC 275-19-300 through 275-19-399 is to provide specific program standards for facilities providing intensive inpatient alcoholism treatment services as defined in WAC 275-19-020. To be approved as an alcoholism treatment facility to provide intensive alcoholism treatment services, the facility must comply with the requirements of WAC 275-19-010 through 275-19-199, chapter 248-22 WAC, the rules and regulations in this section, and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090, 80-02-136 (Order 1486), § 275-19-300, filed 2/1/80.]

WAC 275-19-310 Intensive inpatient treatment facilities—Clients. Persons needing detoxification shall not be admitted or retained but shall be referred or transferred to an alcoholism detoxification facility unless they manifest signs and symptoms of a condition that warrants acute care and treatment in a hospital. [Statutory Authority: RCW 70.96A.090, 80-02-136 (Order 1486), § 275-19-310, filed 2/1/80.]

WAC 275-19-320 Intensive inpatient treatment facilities—Required services. There shall be an organized alcoholism intensive inpatient treatment program and staff which provide the following services:

(1) Education of clients regarding alcohol and alcoholism;

(2) Intensive individual and group counseling;

(3) Social and recreational activities;

(4) Discharge and referral to necessary supportive organizations and agencies;

(5) A client follow-up program that provides for periodic supportive and evaluative contact for a period of one year following discharge;

(6) An invitation and encouragement to family members to participate in their own treatment program and in the treatment of the alcoholic.

(7) Family members should be informed of the desirability of participation in family counseling, Alateen, Alateen and other self-help or specific group or individual resources and be encouraged to pursue these upon return to their home communities in those instances when the treatment staff or family member determines a need for those services. [Statutory Authority: RCW 70.96A.090, 80-02-136 (Order 1486), § 275-19-320, filed 2/1/80.]

WAC 275-19-330 Intensive inpatient treatment facilities—Written program statement. There shall be a written description of the current treatment program which includes:

(1) A specific and detailed treatment regimen;

(2) A description of the various therapeutic methods employed in the total treatment program, including such items as:

[Title 275 WAC—p 28]
(a) Individual counseling;
(b) Group counseling;
(c) Chemotherapy;
(d) Aversion therapy;
(e) Nutritional therapy;
(f) Social, recreational activities;
(g) Educational lectures;
(b) Alcoholics Anonymous meetings, etc.
(3) A description of any follow-up treatment and evaluation;
(4) A concise statement of all costs charged for services provided to clients. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-330, filed 2/1/80.]

WAC 275-19-340 Intensive inpatient treatment facilities—Social and recreational activities. There shall be a definite provision for social and recreational activities to promote and assist a client's engagement in normal activities in accordance with his/her interests, needs and potential. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-340, filed 2/1/80.]

WAC 275-19-350 Intensive inpatient treatment facilities—Discharge or referral. (1) Upon completion of the course of treatment, the client shall be counseled to establish contact with such services or agencies as the staff has determined will assist in maintaining sobriety (Alcoholics Anonymous, outpatient services of a community alcoholism center, etc.). The client shall be assisted in identifying and making contact with any agencies as may be necessary.

(2) If the treatment center is discharging a client to an agency (Community Alcoholism Center, private practitioner, etc.) for after-care services, a discharge summary shall be forwarded to the said agency. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-350, filed 2/1/80.]

WAC 275-19-400 Alcoholism long-term treatment facilities—Purpose. The purpose of WAC 275-19-400 through 275-19-499 is to provide specific operational program standards for facilities providing alcoholism long-term treatment services as described in WAC 275-19-020. To be approved as an alcoholism treatment facility to provide alcoholism long-term treatment services, the facility must comply with the specific requirements of WAC 275-19-010 through 275-19-199, chapter 248-22 WAC, the rules and regulations in this section and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-400, filed 2/1/80.]

WAC 275-19-410 Alcoholism long-term treatment facilities—Clients. Persons needing detoxification shall not be admitted or retained but shall be referred or transferred to an alcoholism detoxification treatment facility unless they manifest signs and symptoms of a condition that warrants acute care and treatment in a hospital. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-410, filed 2/1/80.]

WAC 275-19-420 Alcoholism long-term treatment facilities—Written program statement. There must be a written description of the current treatment program which includes:
(1) A specific and detailed treatment regimen;
(2) A description of the various therapeutic methods employed in the total treatment program, including such items as:
(a) Individual counseling;
(b) Group counseling;
(c) Social and recreational activities;
(d) Educational lectures;
(e) Alcoholics Anonymous meetings, etc.
(3) A description of any follow-up treatment and evaluation;
(4) A concise statement of all costs charged for services provided to clients. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-420, filed 2/1/80.]

WAC 275-19-430 Alcoholism long-term treatment facilities—Required services. There shall be an organized alcoholism long-term treatment program and staff which provide the following services:
(1) Education of clients regarding alcohol and alcoholism;
(2) Individual and group counseling;
(3) Education concerning social and life coping skills;
(4) Social and recreational activities;
(5) Occupational training through cooperation with government and/or private occupational training programs for those clients who need this assistance;
(6) Discharge referral to necessary supportive organizations and agencies;
(7) A client follow-up program that provides periodic supportive and evaluative contact after discharge for a period of one year. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-430, filed 2/1/80.]

WAC 275-19-440 Alcoholism long-term treatment facilities—Discharge or referral. (1) Upon completion of the course of treatment, the client shall be counseled to establish contact with such services or agencies as the staff has determined will assist in maintaining sobriety (Alcoholics Anonymous, outpatient services of a community alcoholism center, etc.). The client shall be assisted in identifying and making contact with any agencies as may be necessary.

(2) If the treatment center is discharging a client to an agency (community alcoholism center, private practitioner, etc.) for after-care services, a discharge summary shall be forwarded to the said agency. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-440, filed 2/1/80.]

WAC 275-19-500 Alcoholism recovery house facilities—Purpose. The purpose of WAC 275-19-500 through 275-19-599 is to provide specific operational program standards for facilities providing alcoholism recovery house services as described in WAC 275-19-020.
To be approved as an alcoholism treatment facility to provide alcoholism recovery house services, the facility must comply with the specific requirements of WAC 275-19-010 through 275-19-199, chapter 248-22 WAC, the requirements of this section, and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-500, filed 2/1/80.]

WAC 275-19-510 Alcoholism recovery house facilities—Clients. Persons needing detoxification shall not be admitted or retained but shall be referred or transferred to an alcoholism detoxification facility unless they manifest signs and symptoms of a condition that warrants acute care and treatment in a hospital. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-510, filed 2/1/80.]

WAC 275-19-520 Alcoholism recovery house facilities—Written program statement. There must be a written description of the current treatment program which includes:
(1) A specific and detailed treatment regimen;
(2) A description of the various therapeutic methods employed in the total treatment program, including such items as:
(a) Individual counseling;
(b) Group counseling;
(c) Occupational training;
(d) Social and recreational activities;
(e) Educational programs;
(f) Alcoholics Anonymous meetings, etc.
(3) A description of any follow-up treatment and evaluation;
(4) A concise statement of all costs charged for services provided to the clients. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-520, filed 2/1/80.]

WAC 275-19-530 Alcoholism recovery house facilities—Required services. There shall be an organized alcoholism recovery house program and staff which provide the following services:
(1) Education of clients regarding alcohol and alcoholism;
(2) Individual and group counseling;
(3) Social and recreational activities;
(4) Assistance in registering and participating in educational and/or occupational training programs when appropriate for clients;
(5) Assistance, when needed, to clients in seeking and obtaining gainful employment;
(6) Referral to necessary supportive organizations and agencies;
(7) A client follow-up program that provides periodic supportive evaluative contact after discharge for a period of one year following discharge. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-530, filed 2/1/80.]

WAC 275-19-540 Alcoholism recovery house facilities—Discharge and referral. (1) Upon completion of the course of treatment, the client shall be counseled to establish contact with such services or agencies as the staff has determined will be of use that will assist in maintaining sobriety (Alcoholics Anonymous, outpatient services of a community alcoholism center, etc.). The client shall be assisted in identifying and making contact with any agencies that may be necessary.
(2) If the treatment center is discharging a client to an agency (community alcoholism center, private practitioner, etc.) for after-care services, a discharge summary shall be forwarded to the said agency. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-540, filed 2/1/80.]

WAC 275-19-600 Alcoholism outpatient treatment—Purpose. The purpose of WAC 275-19-600 through 275-19-699 is to provide specific program standards and objectives for approval of facilities providing alcoholism outpatient treatment services as described in WAC 275-19-020. To be approved as an alcoholism treatment facility to provide alcoholism outpatient treatment services, the facility must comply with the requirements of WAC 275-19-010 through 275-19-199 and the rules and regulations in this section and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-600, filed 2/1/80.]

WAC 275-19-610 Alcoholism outpatient treatment—Required services. Facilities providing alcoholism outpatient treatment as described in WAC 275-19-020 shall provide the following types of alcoholism treatment services to clients and their families.
(1) Assessment of each client's needs regarding specific alcohol-related problems as perceived by the client, center staff, and involved others.
(2) Immediate evaluation for persons in a crisis.
(3) Individual, group counseling and educational services on a scheduled basis which are conducted by a qualified alcoholism counselor or other treatment staff person under the direct supervision of a qualified alcoholism counselor.
(4) Referral of clients for ancillary services as necessary and follow-up efforts to ensure the efficacy of such referrals.
(5) A client follow-up program for those completing treatment that maintains periodic supportive and evaluative contact for a period of one year following discharge. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-610, filed 2/1/80.]

WAC 275-19-700 Information and referral services—Purpose. The purpose of WAC 275-19-700 through 275-19-799 is to provide specific program standards and objectives for approval of facilities providing alcoholism information and referral services as described in WAC 275-19-020. To be approved as an alcoholism treatment facility to provide alcoholism information and referral services, the facility must comply with the requirements of WAC 275-19-010 through 275-19-199, the rules and regulations in this section and
chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-700, filed 2/1/80.]

WAC 275-19-710 Information and referral services—Required services. (1) Approved facilities providing alcohol information and referral services shall provide for the following direct services to clients and their families:
   (a) Interview and assess client's involvement with alcohol.
   (b) Determine which agency might best serve him or her needs.
   (c) Assist the client in designing a continuum of care.
   (d) Coordinate the referral of persons experiencing problems with the excessive use of alcohol and his or her family to and from appropriate treatment resources.

   (2) The treatment rationale shall be designed to achieve total abstinence from alcohol for all alcoholics. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-710, filed 2/1/80.]

WAC 275-19-720 Information and referral services—Community services. (1) Facilities providing information and referral services shall provide the communities which they serve with information and education concerning alcohol, alcohol abuse, alcoholism and their related problems and shall serve as consultant to community agencies.

   (2) The facilities shall develop a priority list of services to be provided in the community. The following list of services should be considered when developing community service priorities.
   (a) Provide consultation services to school districts and their personnel.
   (b) Assist in the development of alcohol education curriculum for schools.
   (c) Provide speakers bureau for groups and organizations.
   (d) Disseminate the news releases in articles for media publication.
   (e) Conduct workshops for professionals in social services and related fields.
   (f) Provide educational programs on alcohol, alcohol abuse and alcoholism to the community. Educational programs may take the form of workshops, television and radio programs, newspaper publicity, lecture series, movie presentations, etc.
   (g) Provide assistance to industry for development of industrial alcoholism programs.
   (h) Provide training for professional personnel and to lay public regarding effective techniques of assisting the problem drinker and the alcoholic with his/her illness.
   (i) Serve as a consultant to community agencies concerning services available to the problem drinker, the alcoholic and their families.
   (j) Develop working relationships with the probation department and the courts including:
   (i) Provide courts with recommendations on persons charged with alcohol-related offenses;
   (ii) Provide court involved clients with referral necessary for treatment and follow-up.
   (k) Develop working relationships with social service and related agencies within the community. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-720, filed 2/1/80.]

WAC 275-19-800 Alcohol information school—Purpose. The purpose of WAC 275-19-800 through 275-19-899 is to provide specific program standards and objectives for approval of facilities providing alcohol information school services, as described in WAC 275-19-020. To be approved as an alcoholism treatment facility to provide alcohol information school services, the facility must comply with the requirements of WAC 275-19-010 through 275-19-199, the rules and regulations in this section, and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-800, filed 2/1/80.]

WAC 275-19-810 Alcohol information school—Student assessment. (1) There shall be an assessment of each enrolled student's involvement with alcohol by a qualified alcoholism counselor, prior to the classroom instruction.

   (2) The alcohol assessment of students shall be by an individual interview or group diagnostic screening mechanism that meets the guidelines published by the office on alcoholism.

   (3) Students showing signs of alcohol abuse and/or alcoholism shall be scheduled for an individual interview with a qualified alcoholism counselor for attempts to refer to specific treatment resources. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-810, filed 2/1/80.]

WAC 275-19-820 Alcohol information school—Curriculum. (1) The alcohol information school shall provide a school curriculum which meets the guidelines published by the office on alcoholism.

   (2) The alcohol information school curriculum shall include the following:
   (a) Adequate information regarding alcohol, alcohol abuse, and alcoholism.
   (b) Information on the current laws addressing drinking alcoholic beverages and driving a motor vehicle.
   (c) Information on the effect of the use of alcohol on driving ability.
   (d) Information regarding the availability of alcoholism treatment resources, for the primary alcoholic and his/her family.
   (e) Information on the dangers of the use of alcohol in combination with other drugs.
   (f) Information on the impact of alcohol abuse and alcoholism on the family.

   (3) The curriculum shall consist of not less than eight nor more than twelve hours of classroom instruction.

   (4) Not more than three hours of instruction shall be conducted in any one day.

[Title 275 WAC—p 31]
(5) A test or tests shall be administered to each enrolled student which will reveal the degree of subject retention and assist in evaluating the efficiency and effectiveness of the curriculum. [Statutory Authority: RCW 70.96A.090. 80–02–136 (Order 1486), § 275–19–820, filed 2/1/80.]

WAC 275–19–830 Alcohol information school—Fees. Student fees shall be limited to not more than two hundred fifty dollars for the classroom instruction and assessment. These fees shall be in accordance with guidelines established by the office on alcoholism. [Statutory Authority: RCW 70.96A.090. 80–02–136 (Order 1486), § 275–19–830, filed 2/1/80.]

WAC 275–19–900 Emergency service patrol—Purpose. The purpose of WAC 275–19–900 through 275–19–999 is to provide the specific standards and objectives for approval of facilities providing emergency service patrol services, as described in WAC 275–19–020. To be approved as an alcoholism treatment facility to provide emergency service patrol services, the facility must comply with the requirements of WAC 275–19–010 through 275–19–199, the rules and regulations in this section, and chapter 70.96A RCW. [Statutory Authority: RCW 70.96A.090. 80–02–136 (Order 1486), § 275–19–900, filed 2/1/80.]

WAC 275–19–910 Emergency service patrol—Clients. Service shall be limited to those persons in the state of intoxication and/or incapacitated by alcohol. [Statutory Authority: RCW 70.96A.090. 80–02–136 (Order 1486), § 275–19–910, filed 2/1/80.]

WAC 275–19–920 Emergency service patrol—Required services. There shall be an organized program and staff which shall provide the following services:

(1) Respond to calls from police, merchants and other interested persons for assistance with intoxicated persons who are in a public place.
(2) Patrol an assigned area and give direct assistance to those who are intoxicated in a public place.
(3) A general assessment of the client’s condition with regard to his/her state of inebriation.
   (a) If a person is intoxicated but subdued and is willing to accept this service, transport him/her to his/her home, approved alcoholism treatment facility or other health facility.
   (b) If the person appears to be incapacitated, unconscious or who has threatened, or inflicted physical harm on another, every reasonable effort shall be made to take the person into protective custody and transport the person to an approved alcoholism treatment facility or other health facility. [Statutory Authority: RCW 70.96A.090. 80–02–136 (Order 1486), § 275–19–920, filed 2/1/80.]

WAC 275–19–930 Emergency service patrol—Staff. Those persons providing emergency service patrol pickup duties shall:

(1) Possess a current valid Washington state driver’s license with the proper endorsements.

(2) Possess a current and valid Red Cross card or certificate for first aid and cardiopulmonary resuscitation.
(3) Be trained and skilled in handling crisis situations with intoxicated persons. [Statutory Authority: RCW 70.96A.090. 80–02–136 (Order 1486), § 275–19–930, filed 2/1/80.]

Chapter 275–20 WAC

COSTS OF CARE OF MENTALLY DEFICIENT PERSONS RESIDING IN STATE INSTITUTIONS

WAC 275–20–010 Authority.
275–20–030 Schedule of per capita cost.
275–20–035 Exempt income.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER


WAC 275–20–010 Authority. The following rules regarding costs of care of mentally/physically deficient persons are hereby adopted under the authority of chapter 72.33 RCW. [Statutory Authority: RCW 72.01.090. 78–03–029 (Order 1270), § 275–20–010, filed 2/17/78; Order 2, § 275–20–010, filed 2/23/68.]

WAC 275–20–030 Schedule of per capita cost. Resident charges will be collected on the basis of the following:

<table>
<thead>
<tr>
<th>Institution</th>
<th>Per Capita Monthly Rate</th>
<th>Per Capita Daily Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lakeland Village</td>
<td>$2,576.60</td>
<td>$84.71</td>
</tr>
<tr>
<td>Rainier School</td>
<td>2,343.91</td>
<td>77.06</td>
</tr>
<tr>
<td>Yakima Valley School</td>
<td>2,220.42</td>
<td>73.00</td>
</tr>
<tr>
<td>Fircrest School</td>
<td>2,611.58</td>
<td>85.86</td>
</tr>
<tr>
<td>Interlake School</td>
<td>2,396.53</td>
<td>78.79</td>
</tr>
<tr>
<td>Frances Haddon Morgan</td>
<td>2,957.41</td>
<td>97.23</td>
</tr>
<tr>
<td>School for Blind—nonresident</td>
<td>2,023.32</td>
<td>66.52</td>
</tr>
<tr>
<td>School for Deaf—nonresident</td>
<td>1,459.70</td>
<td>47.99</td>
</tr>
<tr>
<td>Cerebral Palsy Center</td>
<td>3,415.79</td>
<td>112.30</td>
</tr>
</tbody>
</table>

(Order 1341), § 275-20-030, filed 9/22/78. Statutory Authority: RCW 72.01.090. 78-03-029 (Order 1270), § 275-20-030, filed 2/17/78; Order 1191, § 275-20-030, filed 2/18/77; Order 1071, § 275-20-030, filed 12/2/75; Order 982, § 275-20-030, filed 11/14/74, effective 1/11/75; Order 903, § 275-20-030, filed 1/29/74; Order 808, § 275-20-030, filed 6/15/73, effective 8/1/73; Order 15, § 275-20-030, filed 5/11/71; Order 2, § 275-20-030, filed 2/23/68.

WAC 275-20-035 Exempt income. Residents whose total resources are insufficient to pay the actual cost of care shall be entitled to a monthly exemption from income in the amount of $25 or such amount as specified in WAC 388-29-125. [Statutory Authority: RCW 72.01.090, 78-03-029 (Order 1270), § 275-20-035, filed 2/23/68.]

WAC 275-20-080 Judicial review—Appeal procedure. (1) In all cases where a determination is made that the estate of a mentally or physically deficient person who resides at a state residential school is able to pay all or any portion of the monthly charges for care, support and treatment, a notice and finding of financial responsibility shall be personally served on the guardian of the resident's estate, or if no guardian has been appointed then to his spouse or parents or other person acting in a representative capacity and having property in his possession belonging to the resident of a state school and the superintendent of the state school. In those cases where a resident is an adult acting under no legal disability, such notice and finding of financial responsibility shall be personally served on him or her. The notice shall set forth the amount the department has determined that such estate is able to pay per month, not to exceed the monthly charges fixed in accordance with RCW 72.33.660, and the responsibility for payment to the department of social and health services shall commence thirty days after personal service of such notice and finding of responsibility. (2) Appeal from the determination of financial responsibility, as determined pursuant to the foregoing provisions contained in this chapter, may be made by the guardian of the resident's estate or if no guardian has been appointed by his spouse or parents or other person acting in a representative capacity and having property in his possession belonging to a resident of a state school. In those cases involving an adult resident acting under no legal disability, the appeal may be made by such resident personally. Such appeal shall be made to the secretary of the department of social and health services in writing within thirty days of the receipt of the department's notice and finding of financial responsibility. The written notice of appeal shall be served upon the secretary by registered or certified mail. If no appeal is so received by the secretary within this thirty day period, the notice containing the determination of financial responsibility shall be considered final. If an appeal is made as prescribed the execution of the determination and finding of financial responsibility will be held in abeyance, pending a decision on the appeal.

(1980 Ed.)

(3) Appeal hearings may be held in any county seat most convenient to the appellant. (4) The secretary's decision may be appealed to the courts in accordance with existing provisions of the administrative procedures act. [Statutory Authority: RCW 72.33.660, 79-08-044 (Order 1418), § 275-20-080, filed 7/19/79.]

Chapter 275-25 WAC

COUNTY PLAN FOR MENTAL HEALTH, DRUG ABUSE, DEVELOPMENTAL DISABILITIES, ALCOHOLISM

WAC


DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER


275-25-525 Program requirements. [Order 1142, § 275-25-525, filed 8/12/76.] Repealed by 78-04-002 (Order 1278), filed 3/2/78. Statutory Authority: RCW 71.20.030, 71.20.050, and 71.20.070.

WAC 275-25-010 Definitions. (1) All terms used in this chapter which are not defined herein shall have the same meaning as indicated in the act. (2) "Act" means: (a) The Alcoholism Act (chapter 70.96 and 70.96A RCW) as now existing or hereafter amended, or (b) The State and Local Services for Mentally Retarded and Developmentally Disabled Act (chapter 71-20 RCW) as now existing or hereafter amended, or (c) The Community Mental Health Services Act (chapter 71.24 RCW) as now existing or hereafter amended. (3) "County" means each county or two or more counties acting jointly.

[Title 275 WAC—p 33]
(4) "Department" means the department of social and health services.
(5) "Indian" shall mean any
(a) Person who is enrolled in or who is eligible for enrollment in a recognized Indian tribe; any person determined to be or eligible to be found to be an Indian by the secretary of the interior; and any Eskimo, Aleut or other Alaskan native.
(b) Canadian Indian person who is a member of a treaty tribe, Metis community or other nonstatus Indian community from Canada.
(c) Unenrolled Indian person who is considered to be an Indian by a federally or nonfederally recognized Indian tribe or the urban Indian/Alaska community.
(6) "Plan" means the application a county submitted to the secretary for review and approval under the act(s); or an annual revision of an existing plan.
(7) "Population" means the aggregate number of persons located in the designated county as computed by the United States census bureau in accordance with that agency's latest report, or of the office of program planning and fiscal management.
(8) "Secretary" means the secretary of the department or such employee or such unit of the department as the secretary may designate. [Order 1142, § 275–25–010, filed 8/12/76. Formerly chapter 275–12, 275–13 and 275–29 WAC.]

WAC 275–25–020 Plan development and submission. (1) All dates in this section refer to the year preceding the calendar year covered by the plan.
(2) The requirements of this section shall apply to the following program areas:
(a) Mental health
(b) Drug abuse
(c) Developmental disabilities
(d) Alcoholism.
(3) The secretary shall announce the amount of funds available to each county for each program area no later than August 1.
(4) Each county or combination of counties shall submit a preliminary plan for each program area to the secretary no later than October 1, including the following data:
(a) A statement of priorities;
(b) A precise and definitive work statement, including a listing of all program components, anticipated services and subcontractors; their relationship to the priority statement, and the method(s) for integrating the various program components and services;
(c) A forecast of all revenues and expenditures;
(d) An evaluation of the current years plan.
(e) A county and/or agency client participation schedule based on client ability to pay: Provided, That, no client may be denied service because of inability to pay.
(5) The preliminary plan shall be accompanied by a letter of transmittal signed by the county governing body or county executive. Such transmittal shall not be construed as approval or adoption of the preliminary plan by the county governing body or county executive.
(6) The secretary shall make written comment to each county regarding the preliminary plan within thirty days after receipt of the plan.
(7) Each county shall submit its final plan for each program area immediately after its adoption by the county governing body, but in no case later than December 15. The final plan shall include all of the data items in WAC 275–25–020(4) except that the forecast of revenues and expenditures shall be replaced by the adopted budget.
(8) The secretary may request such additional information and documentation, or changes in the plan, as are reasonably necessary prior to granting approval or denial.
(9) The secretary may grant provisional approval of an adopted plan, or portion of an adopted plan, and require the applicant to revise the adopted plan prior to granting approval.
(10) The secretary shall inform the county of the approval, provisional approval, or denial of an adopted plan within thirty days after receipt of the plan.
(11) A county whose adopted plan has been approved by the secretary may submit a modified plan to the secretary for review and approval at any time.
(12) Preparation, submission, and processing of a county's plan shall not be delayed due to any appeal, administrative review, or proceedings pursuant to the Administrative Procedure Act. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275–25–020, filed 7/28/78; Order 1142, § 275–25–020, filed 8/12/76.]

WAC 275–25–030 Program operation—General provisions. (1) The provisions of this section shall apply to all programs operated under authority of the act(s).
(2) The county and all contractors and subcontractors must comply with all applicable law or rule governing the department's approval of payment of funds for the program(s). Verification may be in the manner and to the extent requested by the secretary.
(3) No state funds will be paid to a county for costs of services provided by the county or other person or organization who or which was not licensed, certified, and/or approved as required by law or by rule whether or not the plan was approved by the secretary.
(4) The secretary may impose such reasonable fiscal and program reporting requirements as he or she deems necessary for effective program management.
(5) Funding. (a) A plan must be approved by the secretary prior to the granting of state funds for services to be provided under the plan.
(b) Payments to counties shall be made on the basis of monthly vouchers submitted to the department for costs incurred under an approved plan. The form and content of the vouchers shall be specified by the department.
(c) The secretary may make advance payments to counties, where such payments would facilitate sound program management.
(d) If the department receives evidence that a county or contractor performing under the plan is: [Title 275 WAC—p 34]
(i) Not in compliance with applicable state law or rule; or
(ii) not in substantial compliance with the plan; or
(iii) unable or unwilling to provide such records or data as the secretary may reasonably require, then the secretary may withhold all or part of subsequent monthly disbursement to the county until such time as satisfactory evidence of corrective action is forthcoming. Such withholding or denial of funds shall be subject to appeal pursuant to the Administrative Procedures Act (chapter 34.04 RCW).

(6) Contracting. A county may contract for the performance of any of the services specified in the approved plan. All contracts and subcontracts shall include:

(a) A precise and definitive work statement including a description of the services to be provided;
(b) Specific agreement by the contractor to abide by the act(s) and the rules;
(c) Specific authority for the secretary and the state auditor to inspect all records and material which the secretary deems pertinent to the contract; and agreements by the contractor that such records will be made available for inspection;
(d) Specific authority for the secretary to make periodic inspection of the contractor's program or premises in order to evaluate performance under the contract.
(e) Specific agreement by the contractor to provide such program and fiscal data as the secretary may reasonably require.

(7) Records: Maintenance. Client records shall be maintained for every client for whom services are provided and shall document: Client demographic data; diagnosis or problem statement; treatment or service plan; treatment or services provided including medications prescribed.

(8) Records: Confidentiality. (a) Medical or treatment records and information regarding clients obtained pursuant to the administration of the acts and these rules shall be confidential. Such records shall not be published or open to public inspection, except that such records and information:

(i) Shall in their entirety be subject to the inspection of the secretary or of his or her authorized representatives for the purpose of program review, evaluation and research, comparative cost studies, and other responsible purposes.
(ii) Shall be released pursuant to WAC 275-55-260 except as otherwise provided by law.
(b) Under all circumstances current patient authorizations shall be sought in writing when any exchange of patient information is anticipated. Whether or not patient authorization is received, the patient must be informed that information may be released to other primary treatment agencies for purposes of providing services and to the department for purposes of program evaluation and research.
(c) Client records shall be maintained at all times on the site of the agency providing service except where information is exchanged pursuant to this section. Where such information is exchanged the agency providing the patient information shall retain the original records and shall provide the recipient agency with information in the form of legible and durable copy.
(d) A client shall have the right to review his/her treatment records with a staff member: Provided, That information confidential to other individuals shall not be reviewed by the client.

(9) Liability. Neither the promulgation of these rules nor anything contained in these rules shall be construed as affecting the relative status or civil rights or liabilities between the county and community agency, and/or any other person, partnership, corporation, association, or other organization performing services under a plan or required herein and their employees, persons receiving services, or the public generally; nor shall the use or implied use herein of the word "duty" or "responsibility" or both import or imply liability other than provided for by the statutes or general laws of the State of Washington, to any person for injuries due to negligence predicated upon failure to perform on the part of an applicant, or a board established under the act(s), or an agency, or its employees, or persons performing services on its behalf, but failure to comply with any compulsory rules shall be cause for the department to refuse to provide funds under the plan. [Order 1142, § 275-25-030, filed 8/12/76.]

WAC 275-25-040 Appeal procedure. (1) Any agency making application to participate in a county program operated under authority of the act(s), which is dissatisfied with the disposition of its application, or the community board(s) as defined in the act(s) or the community social services board, which is dissatisfied with any aspect of the plan, may appeal for a hearing before the county governing body. The county governing body shall review the appeal and notify the agency or board of its disposition within thirty (30) days after the appeal has been received.

(2) A county which is dissatisfied with the department's disposition of its plan may request an administrative review.

(3) All requests for administrative reviews shall:

(a) Be made in writing to the appropriate program office within the department;
(b) Specify the date of the decision being appealed;
(c) Specify clearly the issue to be resolved by the review;
(d) Be signed by, and include the address of the county or its representative;
(e) Be made within thirty (30) days of notification of the decision which is being appealed.

(4) An administrative review and redetermination shall be provided by the department within thirty (30) days of the submission of the request for review, with written confirmation of the findings and the reasons for the findings to be forwarded to the county as soon as possible.

(5) Any county dissatisfied with the finding of an administrative review or who chooses not to request an administrative review may initiate proceedings pursuant to the Administrative Procedures Act (chapter 34.04 RCW). [Order 1142, § 275-25-040, filed 8/12/76.]
WAC 275-25-300  Alcoholism program—WAC section numbers. WAC 275-25-300 through 275-25-499 shall apply to the alcoholism program(s). [Order 1142, § 275-25-300, filed 8/12/76. Formerly chapter 275-13 WAC.]

WAC 275-25-310 Approved treatment facilities. Any public or private alcoholism treatment facility seeking state and/or county funds for provision of alcoholism services shall receive approval from the department prior to the receipt of such funds. [Order 1142, § 275-25-310, filed 8/12/76.]

WAC 275-25-330 Service priority. The plan for the provision of county alcoholism services shall give priority to clients requiring detoxification services and shall ensure that such needs are adequately met before state monies are expended for other service needs. [Order 1142, § 275-25-330, filed 8/12/76.]

WAC 275-25-340 Funding formula—Alcoholism. (1) The department will establish and publish annually the allocation of funds available to the counties for alcoholism services.

(2) Funds appropriated by the legislature for such services shall be distributed according to the following:
   (a) Not more than nine percent to the department for administration.
   (b) Sufficient funds to continue the current level (Calendar Year 1976) of service of the state-wide intensive inpatient treatment programs for which the department currently contracts.
   (c) Sufficient funds to continue at their current level of service the following special projects:
      (i) The Washington state Indian commission on alcohol and drug abuse;
      (ii) Alcoholism evaluation and improvement project;
      (iii) State employees alcoholism program;
      (iv) Corrections programs;
      (v) Migratory farm labor projects;
      (vi) State-wide education and prevention program;
      (vii) Long-term alcoholism treatment programs for which the department currently contracts.
   (3) The remainder is to be distributed to the counties, and each county is to receive a sum calculated according to the county’s percentage of the total distribution to all counties. Such percentage is equal to the population of the county divided by the population of all counties as last determined by the office of program planning and fiscal management: Provided, That, each county shall receive at least fifteen thousand dollars. [Order 1142, § 275-25-340, filed 8/12/76.]

WAC 275-25-500 Developmental disabilities program—WAC section numbers. WAC 275-25-500 through 275-25-699 shall apply to developmental disabilities programs. [Order 1142, § 275-25-500, filed 8/12/76. Formerly chapter 275-29 WAC.]

WAC 275-25-520 Services—Developmental disabilities. Counties may purchase and/or provide any or all of the services listed in chapter 71.20.060 [or] [and] 71-20.070 RCW. However, only the following services are eligible for state funds whenever such services are purchased or provided for developmentally disabled persons who are determined eligible by the department's bureau of developmental disabilities, case services, and in accordance with the approved county plans.

(1) Transportation: The movement of developmentally disabled persons to and from the places where they are receiving other services, when the person’s disabilities and/or other circumstances prevent them from using public or family transportation.

(2) Information and Referral: A listing of all available resources for developmentally disabled persons for use by such persons, their families, professionals, and the general public.

(3) Recreation: Community recreation activities not included in the developmental center programs designed to:
   (a) Help meet individual therapeutic needs in self-expression.
   (b) Develop skills leading to enjoyable and instructive use of leisure time.
   (c) Integrate the developmentally disabled individual into community sponsored recreational activities.

(4) Professional Services: The development and provision of local resources for professional treatment of families of developmentally disabled persons and developmentally disabled individuals. Professional services may include diagnosis, evaluation, family counseling, medical, dental, and psychiatric services when the developmentally disabled person is unable to obtain such services through private care or public resources available for such purposes.

(5) Program Evaluation: Assessment of program quality and measurement of effectiveness.

(6) Planning and Administration: Planning, organizing, coordinating, budgeting, staffing, and establishing the direction or controlling the policies, goals and objectives for the county developmental disabilities program with respect to and in conjunction with local, state, and federal policies, goals and objectives. Administration includes requirements for general administration regarding personnel, purchasing, filing, correspondence, clerical, etc.

(7) Consultation and staff development services: Activities which provide professional information and improve skills of the developmental center staff and others providing services to developmentally disabled person.

(8) Developmental Center Services:
   (a) Early childhood developmental services provided by a developmental center certified as required by chapter 275-27 WAC to developmentally disabled infants and young children.
   (b) Social and living skills, prework, or specific job training to developmentally disabled infants through developmental center certified as required by chapter 275-27 WAC to adults.
   (c) Counties may continue to contract and receive funding for services from existing agencies without certification until September 30, 1978. [Title 275 WAC—p 36] (1980 Ed.)
(9) Start-up and Emergency Needs: assistance in establishing new developmental disabilities programs and sustaining existing developmental disabilities programs in times of emergency.

(10) Alternative Living: the development of alternative living resources and assistance with supplemental support services other than direct fiscal support to the client. [Statutory Authority: RCW 71.20.030, 71.20-.050, and 71.20.070. 78-04-002 (Order 1278), § 275-25-520, filed 3/2/78; Order 1142, § 275-25-520, filed 8/12/76.]

Reviser's Note: RCW 34.04.058 requires the use of underlining and deletion marks to indicate amendments to existing rules, and deems ineffectual changes not filed by the agency in this manner. The bracketed material in the above section does not appear to conform to the statutory requirement.

WAC 275-25-530 Funding formula—Developmental disabilities. The annual allocation of funds to counties shall be based on the following criteria:

(1) The department may withhold up to ten percent of allocated funds to provide funding for new programs, for state-wide priority programs, and for emergency needs.

(2) Each county shall be guaranteed a minimum amount for basic developmental disabilities services subject to the availability of state and federal funds.

(3) The remainder of the funds shall be distributed either on a county per capita basis or on a rate per client basis, whichever will more equitably support developmental disabilities programs. [Order 1142, § 275-25-530, filed 8/12/76.]

WAC 275-25-700 Mental health programs—WAC section numbers. WAC 275-25-700 through 275-25-799 shall apply to the mental health program. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-25-700, filed 7/28/78; Order 1142, § 275-25-700, filed 8/12/76. Formerly chapter 275-12 WAC.]

WAC 275-25-710 Definitions—Mental health and drug treatment. (1) "Mental health specialist" means (a) a psychiatrist or psychologist, or (b) other person having an advanced degree in the social or behavioral sciences and who has had at least two years' experience in the direct treatment of mentally ill or emotionally disturbed persons who has at least two years' experience in the direct treatment of mentally ill or emotionally disturbed persons under the supervision of a mental health specialist.

(2) "Community mental health specialist" means a mental health specialist who has had at least two years' experience in the direct treatment of mentally ill or emotionally disturbed persons in a community mental health agency or other community-based mental health practice. Community mental health specialist also means any other person who has had at least five years such experience.

(3) "Child mental health specialist" shall mean a mental health specialist who has completed a minimum of 100 hours of specialized training devoted to the study of child development and the treatment of children and has the equivalent of one year of full-time experience in the treatment of children under the supervision of a child mental health specialist.

(4) "Drug treatment specialist" shall mean a person having at least a bachelor's degree in the social sciences and a minimum of one year's experience in the direct treatment of persons with drug abuse problems. Drug treatment specialist shall also mean any other person who has at least two years' such experience.

(5) "Geriatric mental health specialist" shall mean a mental health specialist who has completed a minimum of one hundred hours of specialized training devoted to the study of the problems and treatment of the elderly, and in addition, the equivalent of one year of full-time experience in the treatment of the elderly, under the supervision of a geriatric mental health specialist.

(6) "Psychiatrist" shall mean a person having a license as a physician or surgeon in this state, who has in addition completed three years of graduate training in psychiatry in a program approved by the American Medical Association or the American Osteopathic Association.

(7) "Psychologist" shall mean a person who has been licensed as a psychologist pursuant to chapter 18.83 RCW.

(8) "Psychiatric nurse" shall mean a registered nurse who has a bachelor's degree from an accredited college or university, and who has had, in addition, at least one year's experience in the direct treatment of mentally ill or emotionally disturbed persons under the supervision of a mental health specialist. Psychiatric nurse shall also mean any other registered nurse who has had three years' such experience. [Order 1142, § 275-25-710, filed 8/12/76.]

WAC 275-25-720 Priorities. (1) The plan for the provision of county mental health services shall give priority to the seriously disturbed of all ages and shall also address children and their families, the elderly, the economically disadvantaged, Indians, minorities and high risk groups.

(2) The plan shall ensure that appropriate provisions are made to priority groups before state moneys are allocated to other service needs. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-25-720, filed 7/28/78; Order 1142, § 275-25-720, filed 8/12/76.]

WAC 275-25-730 Services—Mental health and drugs. The plan shall address service requirements in each of the following areas. Where direct provision of the service by the county is not appropriate, the plan shall so state and specify what other arrangements are available for county residents:

(1) Emergency.

(2) Inpatient.

(3) Outpatient.


(5) Consultation/education. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-25-730, filed 7/28/78; Order 1142, § 275-25-730, filed 8/12/76.]
WAC 275-25-740 Clinical requirements. (1) When the use of psychotropic medications is being considered as part of any client's treatment regimen, the treatment plan shall be reviewed by a professional who is a psychiatrist, physician, or psychiatric nurse, and who is trained in the administration of psychotropic medications.

(2) Medical consultation and/or referral shall be utilized in cases which involve physical complaints, suspected toxicity or confusional states which are indicative of organic brain syndrome (with indicators as listed in the APA diagnostic and statistical manual — (current edition)). Each agency shall provide training to all non-medical clinical staff which will enable them to identify the specific indicators which signal the need for medical consultation.

(3) In any case where there appears to be a substantial potential for suicide, there shall be consultation with at least one mental health specialist before disposition of the case is determined. Each agency shall provide training to all clinical staff which will enable them to identify the specific indicators of substantial suicide potential.

(4) A physician shall have chief clinical responsibility for all patients within mental health inpatient service. When treatment is directed by a nonpsychiatrist physician, regular case consultation shall be provided by a psychiatrist. [Order 1142, § 275-25-740, filed 8/12/76.]

WAC 275-25-750 Staffing requirements. Each agency providing any of the following services shall ensure that:

(1) Mental health service directed primarily to persons under age 18 is provided under the direction of a child mental health specialist;

(2) Mental health service directed primarily to persons ages 18 through 59 is provided under the direction of a community mental health specialist;

(3) Mental health service directed primarily to persons sixty years of age or over is provided under the direction of a geriatric mental health specialist;

(4) Clinical staff, who are not mental health specialists, receive regular supervision and/or consultation from a mental health specialist;

(5) Of the staff providing direct mental health services at least one must be a mental health specialist;

(6) Day treatment service has a minimum of one staff for every four clients under age 13, a minimum of one staff for every six clients ages 14 through 17, and a minimum of one staff for every eight clients age 18 or over. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-25-750, filed 7/28/78; Order 1142, § 275-25-750, filed 8/12/76.]

WAC 275-25-755 Client rights—Notification of client. (1) All agencies providing services under the act shall post a statement of client rights. Such statement shall inform the client of the client's right to:

(a) Be treated with dignity;
(b) Be protected from invasion of privacy;
(c) Have information about him/her treated confidentially;

(d) Actively participate in the development or modification of his/her treatment program;

(e) Be provided treatment in accordance with accepted quality-of-care standards and which is responsive to his/her best interests and particular needs;

(f) Review his/her treatment records with the therapist at least bimonthly: Provided, That information confidential to other individuals shall not be reviewed by the client;

(g) Be fully informed regarding fees to be charged and methods for payment.

(2) Clients shall be informed of their rights pursuant to WAC 275-55-170 upon admission to inpatient service. [Order 1142, § 275-25-755, filed 8/12/76.]

WAC 275-25-760 State hospitals—Referral. (1) State hospitals shall receive patients upon referral from community mental health agencies under chapter 71.24 RCW. The hospitals will notify, by telephone, the county designated mental health agency(ies) or mental health professional of:

(a) A patient's admission within twenty-four (24) hours of such admission (excluding Saturdays, Sundays, and holidays).

(b) A patient's discharge either prior to discharge or as soon as possible thereafter. Such notification shall include the patient's status, treatment recommendations, and discharge plan, and shall be followed with a written resume of this information.

(2) Nothing herein contained shall be construed so as to prevent the state hospital from refusing to admit or from discharging a patient when the hospital determines that its services are not appropriate.

(3) When a patient is admitted without a referral pursuant to subsection (1), the county of residence may, after investigation, request referral or transfer to a community mental health agency. The state hospital shall comply with such request unless referral is deemed inappropriate by the superintendent or his designee. When the state hospital and the county cannot agree about the appropriateness of such request, the matter may be submitted by either the superintendent of the state hospital or the county to the director of the bureau of mental health for determination.

(4) Each county shall designate either a county mental health agency(ies) or mental health professional to receive and act upon information from the state hospitals. [Order 1142, § 275-25-760, filed 8/12/76.]

WAC 275-25-770 Funding formula—Mental health. The annual allocation of funds to counties shall be based on the following criteria:

(1) The department may withhold up to ten percent of allocated funds to provide funding for new programs, for state-wide priority programs, and for emergency needs.

(2) Each county or federally designated catchment area, whichever is smaller, shall be guaranteed fifty thousand dollars for mental health staffing requirements, subject to the availability of state and federal funds.
(3) The remainder of the funds shall be distributed to the counties on a per capita basis.

(4) Funds for the administration of the Involuntary Treatment Act shall be disbursed to the counties under a contract separate from the mental health general award. This requirement can be waived at the request of any county. [Statutory Authority: RCW 69.54.040. 78-08-120 (Order 1484), § 275–25–770, filed 1/30/80; 78–08–086 (Order 1322), § 275–25–770, filed 7/28/78; Order 1142, § 275–25–770, filed 8/12/76.]


WAC 275–25–810 Drug abuse services. (1) The plan for each county or combination of counties shall address service requirements for each of the following modalities:

(a) Outpatient treatment services,
(b) Day treatment services,
(c) Residential treatment services,
(d) Inpatient treatment services,
(e) Prison/jail treatment services,
(f) Rehabilitation services,
(g) Intervention services,
(h) Prevention services, and
(i) Support services.

Where provision of a service within the county is not appropriate, the plan shall specify how the service will be made available to county residents.

(2) Each preliminary and final county plan shall include all of the following services:

(a) Outpatient individual therapy,
(b) Emergency treatment for acute toxicity, and
(c) Screening and referral to appropriate local or statewide facilities.

(3) Each preliminary and final county plan shall include a prevention effort budgeted to be at least 10% of the amount awarded to the county under WAC 275–25–840. [Statutory Authority: RCW 69.54.040. 78–08–086 (Order 1322), § 275–25–810, filed 7/28/78.]

WAC 275–25–820 Annual performance and status report. Each county or combination of counties shall submit a performance and status report no later than March 15 of each year, which shall include a report on previous year activity, information on the need for services and descriptions of current service delivery capability. [Statutory Authority: RCW 69.54.040. 78–08–086 (Order 1322), § 275–25–820, filed 7/28/78.]

WAC 275–25–830 County management. (1) Each county or combination of counties shall designate in the county plan an individual as the county drug abuse coordinator, who shall assist in the preparation of the annual county plan and the annual performance and status report and administer the county drug abuse program. (2) Each county or combination of counties shall have a county drug abuse board appointed by the county legislative body or bodies, which will advise the county legislative body or bodies and the county drug abuse coordinator on preparation and administration of the annual county plan and the preparation of the annual performance and status report. The county drug abuse board may be the same board designated for the mental health program: Provided, That, the board shall have standing drug abuse subcommittee and shall have at least 25% of its membership appointed to represent the drug abuse program and its clients. Counties may propose for department approval alternate board structures, which the department may authorize if the alternate structure is more efficient or effective and meets the intent of this section.

(3) Appointment, terms, composition and expenses of the county drug abuse board shall be as required for mental health boards by RCW 71.24.060. [Statutory Authority: RCW 69.54.040. 78–08–086 (Order 1322), § 275–25–830, filed 7/28/78.]

WAC 275–25–840 Funding formulae. The annual allocation of funds appropriated from state revenues shall be based on the following criteria:

(1) The department may withhold up to twenty five percent of allocated state funds for statewide programs, special projects and emergency needs.

(2) Each county shall receive five thousand dollars for basic drug abuse services, subject to availability of state funds.

(3) The remainder of allocated state funds shall be distributed on a per capita basis, based on the most recent estimates of population size by the office of financial management. [Statutory Authority: RCW 69.54.040. 78–08–086 (Order 1322), § 275–25–840, filed 7/28/78.]

Chapter 275–27 WAC

BUREAU OF DEVELOPMENTAL DISABILITIES SERVICES AND HOME AID RESOURCES RULES

WAC

275–27–040 Application for services.
275–27–050 Determination for necessary services.
275–27–060 Individual program plan.
275–27–210 Home aid resources.
275–27–230 Placement services.
275–27–240 Financial services.
275–27–250 Guardianship services.
275–27–300 Completion of individual program plan—Residential schools.
2/5–27–310 Exclusion of child from educational program—Residential schools.
275–27–320 Discipline—Expulsion—Suspension.
275–27–400 Reasonable notice and consultation.
275–27–500 Appeals.
275–27–600 Bureau certification of developmental centers.
275–27–605 Procedures for bureau certification, denial, suspension or revocation—Appeals.
275–27–615 Center structure and maintenance.
275–27–620 Staff training.

[Title 275 WAC—p 39]
WAC 275-27-020 Definitions. (1) "Mental retardation" means significantly sub-average general intellectual functioning existing concurrently with deficits in adaptive behavior manifested before age eighteen and exhibiting an intelligence quotient at or below sixty-seven using Stanford-Binet, or at or below sixty-nine using Wechsler, or a social quotient of sixty-nine or below using Vineland Social Maturity Scale: Provided, That, other appropriate analogous scale(s) receives the prior approval of the secretary.

(2) "Department" means the department of social and health services of the state of Washington.

(3) "Secretary" means the secretary of the department of social and health services.

(4) "Bureau" means the bureau or division of developmental disabilities of the department of social and health services.

(5) "Director" means the director of the bureau of developmental disabilities.

(6) "Respite care" means temporary services provided to a developmentally disabled individual and/or his family on either an emergency or planned basis without which the individual may need residential placement.

(7) "Individual" means the person for whom bureau services are requested.

(8) "Informed consent" means an agreement obtained from an individual or his authorized representative, for such individual's participation in an activity. The following information is necessary to informed consent:

(a) an explanation of the procedures to be followed including an identification of those which are experimental;

(b) a description of the attendant discomforts and risks;

(c) a description of the benefits to be expected;

(d) a disclosure of appropriate alternative procedures;

(e) an offer to answer any inquiries concerning the procedures; and

(f) instruction that consent may be withdrawn and participation discontinued at any time.

(9) "Residential facilities" means those facilities providing domiciliary care and other services, including, but not limited to, state residential facilities, group homes, skilled nursing facilities, intermediate care facilities, congregate care facilities, boarding homes, children's foster homes, adult family homes, and group training homes.

(10) "Nonresidential facilities" means facilities including, but not limited to, developmental centers and sheltered workshops.

(11) "Emergency" means a sudden, unexpected occurrence demanding immediate action.

(12) "Best interest" includes, but is not limited to, individual client program elements designed to:

(a) achieve or maintain economic self-support;

(b) achieve or maintain self-sufficiency;

(c) prevent or remedy neglect, abuse, or exploitation of individuals unable to protect their own interest;

(d) preserve, rehabilitate or reunite families;

(e) prevent or reduce inappropriate institutional care by providing the least restrictive setting, such as community-based services, home-based services or other forms of less-intensive service, to meet the individual's medical and personal needs. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-020, filed 3/16/78; Order 1143, § 275-27-020, filed 8/11/76.]

WAC 275-27-030 Determination of eligibility. (1) An individual shall be eligible for services upon application pursuant to WAC 275-27-040, provided that the bureau has determined that the individual has a mental or physical deficiency as defined in RCW 72.33.020 and/or is developmentally disabled as defined in RCW 71.20.015. Eligibility criteria to determine such deficiency and/or developmental disability shall be:

(a) mental retardation; or

(b) cerebral palsy, epilepsy, autism, auditory impairment, or visual impairment having the following additional characteristics:

(i) originates before such person reaches age 18; and

(ii) has continued or can be expected to continue indefinitely; and

(iii) constitutes a substantial handicap to such individual's ability to function normally in society.

(2) The director may authorize exception to criteria specified above upon determination that there are no other services available and that enforcement of such criteria will be extremely detrimental to the health and welfare of the individual.

(3) Prior to determining whether an individual is eligible for bureau services, the bureau may require a supporting affidavit of a physician and/or clinical psychologist certifying that the individual has a mental and/or physical deficiency, or is developmentally disabled.

(4) If the applicant wishes the bureau to consider documents not on file with the department, then the applicant must sign departmental consent forms authorizing the bureau to acquire such documents.

(5) Within five working days of the receipt of the completed application and supporting documents, the bureau shall determine whether the individual is eligible for bureau services. [Order 1143, § 275-27-030, filed 8/11/76.]

WAC 275-27-040 Application for services. (1) All applications for bureau services shall be filed with one of the bureau case services offices in the form and manner required by the director.

(2) An application may be made by an individual, or advocate for, or parent(s) or guardian of such an individual.

(3) All applications shall include written informed consent to bureau services requested by the individual,
parent of an individual under age eighteen, or court authorized guardian. If an individual, who is over eighteen years of age and has no guardian, is unable to give informed consent, then consent may be received from next-of-kin. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-040, filed 3/16/78; Order 1143, § 275-27-040, filed 8/11/76.]

WAC 275-27-050 Determination for necessary services. (1) Within thirty days from the date of the bureau's decision that an individual is developmentally disabled, the appropriate bureau office shall evaluate the individual's needs to determine which services, if any, are necessary to stabilize or ameliorate the disabling condition and are in the client's best interest.

(2) Upon completion of the evaluation, an individual program plan with determination of necessary services shall be prepared pursuant to WAC 275-27-060. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-050, filed 3/16/78; Order 1143, § 275-27-050, filed 8/11/76.]

WAC 275-27-060 Individual program plan. (1) The bureau shall develop a written individual program plan for each person who is determined eligible for bureau services within 30 days. Interim services may be provided if deemed necessary.

(2) The individual program plan shall include the services adjudged to be in the best interests of the client and shall include short and long term training and habilitation goals for the client's progress. To the extent possible, all services shall be goal oriented and time limited.

(3) The program plan shall be reviewed at least annually by the bureau client program coordinator with those directly involved with the client.

(4) A client, his parent(s), or guardian may request review or modification of the program plan at any time based on changed circumstances.

(5) Development, review and significant modifications of the individual program plan shall include, to the maximum extent possible, appropriate bureau staff, the client, his parent(s) or guardian and personal representative(s) of the agency or facility which is, or will be, primarily responsible for the implementation of specific provisions of the plan. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-060, filed 3/16/78; Order 1143, § 275-27-060, filed 8/11/76.]

WAC 275-27-210 Home aid resources. (1) The secretary shall make payments for the provision of home aid resources as set forth in this section provided that no local, private, federal, or other state resource is available for the individual's needs.

(2) Home aid resources shall be provided as follows:

(a) planned or emergency respite care as defined in WAC 275-27-020(6); (b) transportation services where such transportation cannot be provided by the individual, the parent of an individual under age 18, or guardian;

(c) the purchase, rental, loan or refurbishment of specialized equipment; and

(d) specialized therapies.

(3) Transportation, equipment and therapies as set forth in WAC 275-27-210(2), (b), (c), and (d) shall be provided only upon receipt of information documenting that such service(s) will substantially reduce the need for residential placement and with approval of the director.

(4) Home aid resources shall be:

(a) specified in the client's program plan;

(b) specifically goal-oriented and time-limited

(c) agreed to by the client receiving services and/or the parent(s) or guardian entitled to custody, and the services provider.

(d) extension of any service beyond the time limits specified in the program plan shall be authorized by the director of the bureau. [Order 1143, § 275-27-210, filed 8/11/76.]

WAC 275-27-230 Placement services. (1) Unless an individual is placed pursuant to court order, the bureau's case services section shall be responsible for placement services for all eligible bureau clients into and out of state schools, into and out of other residential facilities, and into and out of nonresidential programs.

(2) The placement determination shall include, to the maximum extent feasible, the client, his parent(s) or guardian and all other responsible parties.

(3) The emergency admission of any individual to a state school shall not exceed thirty days.

(4) A temporary admission of any individual to a state school for respite care or diagnostic services shall not exceed 30 days.

(5) Placement by the bureau in a developmental center is limited as follows:

(a) The center must be certified as required by this chapter;

(b) Placement and funding is limited to those cases where the local school district is not responsible for provision of center services: Provided, That:

(i) the bureau shall aid the client in obtaining required services from the local school district;

(ii) eligible individual enrolled in a developmental center program on or before December 31, 1977, may continue to receive developmental center services funded by the bureau until September 1, 1978, unless funding for services from the local district is obtained prior to that date;

(iii) exceptions may be granted by the bureau for developmental center services during nonschool months. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-230, filed 3/16/78; Order 1143, § 275-27-230, filed 8/11/76.]

[Title 275 WAC—p 41]
WAC 275-27-240 Financial services. The bureau's case services may include services to protect the financial interests of developmentally disabled individuals. [Order 1143, § 275-27-240, filed 8/11/76.]

WAC 275-27-250 Guardianship services. Whenever there is a bona fide doubt as to whether an adult person eligible to receive services pursuant to these rules and regulations is capable of giving informed consent for such services, the bureau's case services shall include assuring that a determination is made whether such person does or does not require a guardian; and if such person requires a guardian, assure initiation of and/or assist in guardianship proceedings. [Order 1143, § 275-27-250, filed 8/11/76.]

WAC 275-27-300 Completion of individual program plan—Residential schools. (1) Upon admission from bureau's case services section, the state residential school shall take actions necessary to review and complete the individual program plan. (WAC 275-27-060). Residents of a common school age shall be placed in an educational program and other programs as deemed appropriate.

(2) The completed individual program plan for residential schools shall include assessment, training and habilitation goals, and long and short term objectives.

(3) Assessment shall include the following:
   (a) Scholastic assessment;
   (b) Physical assessment;
   (c) Adjustment assessment.

(4) Upon completion of assessment the residential school shall determine training and habilitation goals for the resident.

(a) Training and habilitation goals shall be directed to maximizing the resident's potential, stabilizing or ameliorating the resident's disabling condition, and in the resident's best interests.

(b) Training and habilitation goals shall include consideration of future community placement and an estimate as to when such placement is possible.

(c) Training and habilitation goals shall specify in measurable terms the behavioral changes desired, expected results, and necessary resources.

(5) For those residents of common school age as determined by chapter 392-173 WAC completion of the individual program plan shall meet requirements of chapter 392-173 WAC.

(6) The requirements of this section shall be completed within 30 days of admission. Upon completion of the requirements of this section, the parent, legal guardian, or committing court shall be notified of decisions made pursuant to this 500. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-300, filed 3/16/78.]

WAC 275-27-310 Exclusion of child from educational program—Residential schools. (1) Exclusion from all or any portion of the education program shall be made only pursuant to one of the following findings:

(a) An education program of benefit to the child cannot be made available at the institution, and no agency, school district, or other institution with whom the institution may contract can accommodate such child if such a determination is made it shall be affirmed by the director of the bureau who shall report any such exclusion and documentation to the secretary of the department of social and health services and the superintendent of public instruction for appropriate action and development of alternative plans to provide an education program of benefit; or

(b) The institution superintendent, through consultation with medical, clinical, and educational staff determines that the child is presently incapable of inclusion for a full school day. A current written medical report shall document the decision for exclusion and be made part of the child's file.

(2) Children excluded shall have assessments at least semi-annually and these assessments will be reviewed on a monthly basis.

(3) In addition to the above determination, a child's absence for more than three consecutive weeks or for more than one-third of his own total regular program over a period of two months except for reasons of illness documented by a physician or extended vacation from the institution shall constitute unjustified exclusion; in such case, the residential school must either take necessary action so that the education program is provided to the student or follow exclusion procedures specified in subsections (1) and (4).

(4) If the institution determines an exclusion from all or a portion of the educational program is appropriate under criteria as specified above, then notification of the decision and right to appeal shall be given pursuant to WAC 275-27-400. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-400, filed 3/16/78.]

WAC 275-27-320 Discipline—Expulsion—Suspension. Appropriate discipline in, and expulsion or suspension from, a state residential school and/or an educational or other program provided by a state residential school shall be restricted to established rules of conduct prescribed by the state residential school superintendent in accordance with RCW 28A.58.101: Provided, That rules of conduct established by a residential school must be approved by the director of the bureau. Suspension or expulsion may be undertaken only pursuant to notice and administrative hearing as provided for in WAC 275-27-400 and 275-27-500, except that interim suspension may be undertaken for cause specified in WAC 180-40-130. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-400, filed 3/16/78.]

WAC 275-27-400 Reasonable notice and consultation. (1) A notification of department decision with respect to eligibility, development, or modification of the individual program plan, proposed services, termination of bureau services, placements and admission or readmission to, or discharge from state schools, shall be
delivered to the client and the parent(s), guardian, or advocate of such individual by certified mail or in person. Termination of the bureau services shall not be implemented for a period of thirty days after notification of the department's decision to terminate services. Other decisions of the department may be acted upon by the department even though the thirty day period in which to appeal pursuant to WAC 275-27-500(1) has not expired provided that the client, or parent of a client under age eighteen, or guardian authorized to determine residential placements for the client may at any time, withdraw consent to any bureau service.

(2) The notice shall set forth a statement of the reasons for the decision, and information pertaining to such person(s) right to appeal pursuant to WAC 275-27-500.

(3) All parties affected by such department decision shall be consulted, whenever possible, during the decision process by the responsible case services regional office in person, and/or by telephone.

(4) The bureau shall notify the school district in which a school aged child is to be placed when a placement decision is reached. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-400, filed 3/16/78; Order 1143, § 275-27-400, filed 8/11/76.]

WAC 275-27-500 Appeals. (1) Upon receipt of notification pursuant to WAC 275-27-400, the person about whom the decision was made, and/or the parent(s) of a client under age eighteen, or court authorized guardian of such person shall have thirty days in which to appeal this decision to the secretary for an administrative hearing pursuant to the Administrative Procedure Act, chapter 34.04 RCW.

(2) Appeal shall be undertaken by delivering written notice of appeal in person or by mail to the address specified in the notice of right to appeal.

(a) If the department has not acted upon the decision, the written notice of appeal shall stay the decision pending the administrative hearing determination.

(b) The person(s) making such appeal shall indicate whether or not such person(s) is/are represented by legal counsel.

(3) Within ten days after receipt of notice of appeal, the department shall schedule the matter for a hearing. Once scheduled, a hearing may not be continued unless the appellant stipulates to continuance or good cause is shown therefor.

(4) The administrative procedure used at such hearing shall be substantially in compliance with the Washington Administrative Procedure Act.

(5) The appellant(s) shall be permitted advance inspection of all affidavits, exhibits, or evidence available to the department's authorities.

(6) A tape recorded, or reliable verbatim record shall be made of the hearing.

(7) A copy of the director's decision, on behalf of the secretary, shall be sent by certified mail or delivered in person to the appellant(s), and a copy sent to the secretary. [Statutory Authority: RCW 72.01.090, 72.33.040, 72.33.125, and 72.33.165. 78-04-033 (Order 1280), § 275-27-500, filed 3/16/78; Order 1143, § 275-27-500, filed 8/11/76.]

WAC 275-27-600 Bureau certification of developmental centers. (1) An agency must be certified as a developmental center by the bureau to be eligible for state and/or federal funds provided through the bureau for either:

(a) early childhood developmental service; or

(b) social and living skills, prework, or specific job training to developmentally disable adults. (Effective date of this subsection is October 1, 1978.)

(2) In order to be certified as a developmental center, the agency must comply with all certification requirements contained in this chapter: Provided, That the bureau may grant provisional certification to an agency which does not meet all requirements contained in this chapter to enable such agency to start serving or continue to serve clients while taking necessary action to comply with all requirements contained herein. Limitations on provisional certification are as follows:

(a) Provisional certification is discretionary and not renewable.

(b) The bureau may specify conditions and time limitations for compliance with these rules as a prerequisite to provisional certification.

(c) Provisional certification cannot exceed six months.

(3) Bureau certification is for a period of two years.

(4) An agency may be certified as an early childhood developmental center and/or an adult developmental training center to provide one of the four options specified in WAC 275-27-680(2).

(5) Facilities certified or requesting certification shall be open to inspection by the bureau during periods of center operation. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-600, filed 3/2/78.]

WAC 275-27-605 Procedures for bureau certification, denial, suspension or revocation—Appeals. (1) In order to be certified, an agency must apply on application forms provided by the bureau. Application for renewal shall be made no more than ninety nor less than sixty days prior to the date of expiration of the certificate.

(2) Failure to comply with any of the requirements of this chapter shall be grounds for denial, suspension, or revocation of certification.

(3) Bureau decisions to deny, suspend or revoke certification shall be subject to appeal to administrative hearing pursuant to chapter 34.04 RCW and rules and regulations promulgated thereunder. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-605, filed 3/2/78.]

WAC 275-27-610 Governing board. (1) The center shall be the responsibility of a governing board consisting of at least three members. The board shall be responsible for the following:

[Title 275 WAC—p 43]
(a) Determining and/or carrying out the corporate mission;
(b) Prioritizing short- and long-term goals and objectives;
(c) Hiring or designating a director;
(d) Approving the agency budget;
(e) Establishing policies and procedures;
(f) Orienting new members.

2. The board shall maintain copies of and is responsible for carrying out laws, and rules and regulations that are relevant to the functioning of the agency including:
(a) Wage and hour regulations;
(b) Insurance coverage;
(c) Civil rights compliance;
(d) Section 504 of the Vocational Rehabilitation Act of 1973. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-610, filed 3/2/78.]

WAC 275-27-615 Center structure and maintenance. (1) Facilities shall meet applicable standards for fire, health, and safety.

(2) Facilities shall have at least an annual inspection by the appropriate local fire authority and shall submit a letter or report of compliance to the bureau upon request.

(3) The center structure, its component parts, facilities, equipment and furnishings shall be kept clean and in good repair and maintained in the interest of the clients' safety and well being. No hazard shall exist from structural conditions. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-615, filed 3/2/78.]

WAC 275-27-620 Staff training. (1) Staff training and/or preparation time must be available for all trainees and supervisors at a minimum of one hour for each day of operation.

(2) All centers must have a staff training program. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-620, filed 3/2/78.]

WAC 275-27-630 Client training. (1) Each developmental center shall complete a skills and needs assessment for each client within 30 days of attendance in the program and at least annually following the initial assessment. The Progress Assessment Chart is the required reporting tool which shall be submitted to the bureau.

(2) Each center must participate in the individual program plan process coordinated by the bureau for each client. The center's portion of the plan must be prepared within thirty days of attendance at the center, must be in writing, must be based on the client assessment and must include the goals and objectives for the client within the center's program. The center's portion of the plan must be reviewed every six months and rewritten at least annually.

(3) The training activities at a center will be conducted according to written training programs. The training programs must be based upon the assessment and individual program plan. They must be systematized in method of presentation, with a measurable step-by-step process to assist the client in the acquisition of skills and information. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-630, filed 3/2/78.]

WAC 275-27-635 Reimbursement of clients. (1) Clients must be reimbursed for work performed while in prework or specific job training, when the agency benefits financially from the clients' involvement on contracts (or direct sales) for products and/or services. The center must obtain the appropriate certificates from the department of labor and/or labor and industries.

(2) Reimbursement of clients for work performed must be based on productivity measured against the established norm, and documentation must include each client's rate of production and earnings. Client rate shall be reassessed at least semi-annually.

(3) The center must maintain evidence of definitive time study procedures for all remunerative work as well as competitive bidding procedures for contract work. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-635, filed 3/2/78.]

WAC 275-27-640 Protection of client rights. Each developmental center must have comprehensive written policies to protect the rights of the developmentally disabled clients enrolled in the program and shall be responsible for the implementation and enforcement of all policies. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-640, filed 3/2/78.]

WAC 275-27-660 Early childhood developmental centers—Services. (1) Mandatory minimum services must include educational services, therapeutic intervention, and parent education programs appropriate to the age and needs of infants and young children under six years of age.

(2) An early childhood developmental center shall provide a minimum of one hour training per day each day the child attends. The center must be open and provide a program a minimum of three days each week. Services may be delivered by center staff in the child's residence if an exception is obtained from the bureau. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-660, filed 3/2/78.]

WAC 275-27-665 Early childhood developmental center—Staffing. The direct service staff (teachers and aides) ratio must be at a minimum of one staff to five children. Each child shall have one staff member responsible for the coordination of the individual training plan. In addition, for each of the therapy programs (speech, physical, occupational or recreation therapy), there must be at least one therapist for every twenty children who require that particular therapy. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-665, filed 3/2/78.]

(1980 Ed.)
WAC 275-27-680 Adult developmental training center—Services. (1) An adult developmental training center shall provide a minimum of four hours training per day per client, unless exceptions are included in the individual program plan. The center must be open and provide training a minimum of three days a week. Services may be delivered by center staff at the adult’s residence if an exception is obtained from the bureau.

(2) The four options for providing services in an adult developmental center are: living and social skills training only; prework training in conjunction with living and social skills training; specific job training only; and living and social skills training, prework training, and specific job training.

(a) Living and social skills training is a variety of self-help skills training services that will increase the individual’s ability to function independently. The living and social skills training program must include training components appropriate to the needs of the client. Appropriate training components may include at least the following: personal care and hygiene, independent living, functional academics, mobility, social behaviors, community awareness, sex education, speech and language development, and recreation training.

(b) Prework training is specialized services that will provide individual with acceptable work habits and attitudes to prepare them for employment or additional vocational training.

(i) The prework training component must be provided in conjunction with living and social skills training. When prework training constitutes the majority of a client’s developmental center program, the length of time the client may spend in prework shall be limited to one year. Individual exceptions for additional prework training may be granted by the bureau.

(ii) Prework training must include: work orientation and/or work training and/or job readiness.

(c) Specific job training is vocational or work skill training that will prepare an individual for a particular job either in a workshop setting or in competitive employment.

(i) Specific job training must provide specialized training for a particular job, and may be provided by a center only when sufficient or appropriate DVR services are not available.

(ii) Specific job training shall be limited to one year or less for each client enrolled. Six-month extensions can be granted through the bureau according to the individual program plan. [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-680, filed 3/2/78.]

WAC 275-27-685 Adult developmental training center—Staffing. Each adult developmental training center must have a person who is responsible for program development (ratio one to sixty). Each client shall have one staff member responsible for the coordination of the individual training plan. Living and social skills training and prework training shall have a minimum ratio of one to seven (direct service staff); and specific job training shall be provided at a one to nine ratio (direct service staff). [Statutory Authority: RCW 72.01.090, 72.33.165, 72.33.800, and 72.33.810. 78-04-003 (Order 1277), § 275-27-685, filed 3/2/78.]

Chapter 275-32 WAC

SPECIAL SUPERVISION—COUNTY JUVENILE PROBATION PROGRAMS

WAC

275-32-005 Authority.
275-32-010 Definitions.
275-32-015 County’s resolution of intention to participate.
275-32-025 Application for participation.
275-32-035 Announcement of program approval.
275-32-045 Modification of approved program plan.
275-32-060 Eligible probationers for special supervision.
275-32-065 Assignment of funds.
275-32-075 Restrictions on spending.
275-32-080 Workloads for special supervision program.
275-32-085 Fiscal accountability and departmental audit.
275-32-095 Program review and monitoring.
275-32-105 Exceptions to rules.
275-32-115 Treatment plan.
275-32-135 Standard cost and workload standards.
275-32-145 Earning of credits.
275-32-155 County planning process.
275-32-165 County's cooperation with other agencies.
275-32-175 Alternate plans.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER


(1980 Ed.)
(2) A commitment for diagnostic services as described in RCW 72.05.130(2) will be counted as a full commitment if during a calendar year the number of diagnostic commitments exceeds the base rate established by the department. No additional charge will be made if a regular commitment is effected within 45 days following the termination of the diagnostic service. For commitments for diagnostic services below the base rate, no charge will be made unless a regular commitment results within 45 days of the diagnostic period. In these cases one-half count will be charged.

(a) The base diagnostic commitment rate shall be determined by dividing the number of juveniles committed to the department for diagnosis pursuant to RCW 72.05.130(2) during calendar [year] 1974 and 1975 by county population figures for years 1974 and 1975. This ratio is to be expressed in a rate per hundred thousand population.

(b) A county may select as its base commitment number that ratio, as figured above, for that particular county or the average base diagnostic commitment rate for all counties state-wide. The county and state population shall be certified by OPP&FM pursuant to RCW 13.06.050.

(c) An expected annual diagnostic commitment number shall be calculated by the department at the end of each payment period for each participating county and for the state as a whole.

(d) "Expected annual diagnostic commitment number," means the product of the base diagnostic commitment rate and the annual county population figures for the period computed. Where semi-annual payment periods are selected by the county, the expected diagnostic commitment number will be adjusted accordingly.

(3) "Department" means the department of social and health services.

(4) "Secretary" means the secretary of the department of social and health services, or such officer of the department as he/she may designate to administer these rules.

(5) "Juvenile court" will have the same meaning as defined in RCW 13.04.030.

(6) "Special supervision program" will have the same meaning as defined in RCW 13.06.030.

(7) "Supervisor" means an individual who is knowledgeable in such areas as human growth and development; generic casework techniques; dynamics of human behavior; psychological and psychiatric terms and concepts; juvenile and adult law and court procedures; community resources and allied agencies.

(8) "Supervision" means guidance, counseling, providing direction, caseload audit, consultation, caseload management, teaching, and evaluation of the on-the-job performance of the probation officer.

(9) "Foster family home" means a home licensed under WAC 388-75-153.

(10) "Group home" means a home licensed under WAC 388-75-503. [Order 1209, § 275-32-010, filed
WAC 275–32–015 County’s resolution of intention to participate. The resolution of intention will consist of a resolution adopted by the board of county commissioners of the county making application indicating the intent of the county to establish or continue a special supervision program. The resolution of intention must accompany the formal application and be submitted to the secretary prior to September 1 and state that the program will begin on or about January 1. [Order 1209, § 275–32–015, filed 5/4/77. Formerly WAC 275–32–110.]

WAC 275–32–025 Application for participation. An application prepared by an appropriate county official(s) designated by the county commissioners shall be submitted with the resolution of intention to the department. [Order 1209, § 275–32–025, filed 5/4/77. Formerly WAC 275–32–100.]

WAC 275–32–035 Announcement of program approval. The secretary will give each application individual consideration and will notify the county by November 1 of each year whether or not the plan as submitted is approved. If an application for participation is disapproved the secretary will submit in writing the reason(s) for disapproval. The county may at any time request a review and reconsideration of the application. [Order 1209, § 275–32–035, filed 5/4/77. Formerly WAC 275–32–130.]

WAC 275–32–045 Modification of approved program plan. Approved plans may be modified only with prior approval of the department. In the event it appears necessary to effect a modification in the program plan, the department shall be notified of this intention and a revised application should be submitted. No reimbursement may be claimed for expenses incurred for a modified plan prior to the date of the approval of the revised plan by the secretary. [Order 1209, § 275–32–045, filed 5/4/77. Formerly WAC 275–32–160.]

WAC 275–32–060 Eligible probationers for special supervision. Youth between the ages of 8 and 18 who have been adjudicated as youthful offenders by a juvenile court will be eligible for this program. [Statutory Authority: RCW 13.06.030. 79–06–033 (Order 1401), § 275–32–060, filed 5/16/79; Order 1209, § 275–32–060, filed 5/4/77; Order 795, § 275–32–060, filed 4/26/73; Order 7, § 275–32–060, filed 9/12/69.]

WAC 275–32–065 Assignment of funds. (1) A county may claim funds available under chapter 13.06 RCW if: the county complies with reasonable fiscal and program reporting requirements established by the secretary; the funds were requested in an application which has been approved by the secretary; the expenditures were directly utilized for special supervision programs and were for:

(a) the salaries and benefits of supervisors, probation officers, and clerical and program support personnel, provided the supervisors and probation officers possess at a minimum an educational equivalent equal to graduation from an accredited college or university or have prior to July 1, 1969 a combination of education and experience as a juvenile court probation officer equal to four years;

(b) operating expenses and equipment costs required to operate special supervision programs;

(c) training for special supervision program staff;

(d) alternative living arrangements defined in WAC 275–32–010(9) and (10);

(e) detention care when reasonably necessary to achieve rehabilitation which include a substantial element of special services and/or a program in addition to routine supervision and care;

(f) special services which may include psychiatric, psychological, social work, dental, medical, employment, vocation counseling and testing services, training for foster parents, and vocational training;

(2) Each proposal will require and will be given individual consideration based on specific relevant circumstances and background. [Order 1209, § 275–32–065, filed 5/4/77. Formerly WAC 275–32–120.]

WAC 275–32–075 Restrictions on spending. The special supervision program shall be a new and independent segment of a juvenile court probation department. A county may not claim reimbursement for:

(1) any juvenile probation program established prior to July 1, 1969;

(2) costs of construction of residential or office facilities;

(3) salaries or benefits of county administrative personnel above the level of supervisor. [Order 1209, § 275–32–075, filed 5/4/77. Formerly WAC 275–32–050.]

WAC 275–32–080 Workloads for special supervision program. (1) The maximum workloads for staff in special supervision programs are:

(a) The workload of a probation officer working in a special supervision program may not exceed 30 cases.

(b) Supervisors: the maximum number of probation officers supervised by a full-time supervisor working in a special supervision program shall not exceed five officers.

(c) Clerical: there shall be at least one stenographer–clerical position available for each two probation officers employed to work in a special supervision program. In addition, there shall be a full–time stenographer or secretary for each full–time supervisory position.

(d) In the event a county has fewer than five probation officers employed in a special supervision program, then the amount of supervisory time required will be at the rate of one–fifth of a supervisor’s time for each probation officer. Clerical assistance will be prorated on the basis set forth in subsection (1)(c) of this section.
WAC 275-32-085 Fiscal accountability and departmental audit. The department reserves the right to audit the total accounting records of the counties pertaining to claims made for reimbursement for special supervision programs. Any errors disclosed in post audits will be reimbursed to the department through deductions from future earnings made by counties and claimed as a reimbursement. [Order 1209, § 275-32-085, filed 5/4/77. Formerly WAC 275-32-190.]

WAC 275-32-085 Exceptions to rules. The secretary may at his/her discretion waive specific requirements of this chapter. Requests for a "waiver of compliance" shall be submitted in writing to the secretary and shall include an explanation of the circumstances that justify such action. The secretary will give each request individual consideration. The secretary will promptly advise the county in writing of his/her decision and explain the basis for the decision. Requirements prescribed by chapter 13.06 RCW and other legislation are not subject to waiver by the secretary. [Order 1209, § 275-32-105, filed 5/4/77.]

WAC 275-32-115 Treatment plan. A written program plan shall be prepared for each youth assigned to a special supervision program. The plan shall include, but not be limited to, identification of client problems, reasons for referral to a special supervision program, assessment of treatment needs, and a rehabilitation plan. The department may perform periodic reviews to insure that the program plans are developed and followed to the best ability of the court. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-115, filed 2/17/78.]

WAC 275-32-135 Standard cost and workload standards. The standard cost and workload standards as defined below shall be established biennially by the Bureau of Juvenile Rehabilitation. Standard cost is the per capita cost of providing community treatment services for youths assigned to the special supervision programs. Workload standards is defined as the ratio of youths receiving special supervision services to the commitment reduction number. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-135, filed 2/17/78.]

WAC 275-32-145 Earning of credits. Earning of credits as identified in RCW 13.06.050(6) will be limited to regular commitments. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-145, filed 2/17/78.]

WAC 275-32-165 County's cooperation with other agencies. In reviewing each submitted application as per WAC 275-32-035, the secretary shall consider the general coordination of services available in that county. The secretary may make such county's cooperation with local public and private agencies providing services to juveniles, a condition to the county's receipt of funds under this program. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-165, filed 2/17/78.]

WAC 275-32-175 Alternate plans. For those counties, who as an alternate plan, elect to receive from the state the salary of one full-time probation officer, the salary level will be the same as the salary schedule adopted by the Washington state department of personnel for compensating juvenile parole counselors. The annual salary will be that in effect on January 1, of each year. In the event a probation officer has a bachelor's degree, preferably with major study in psychology, sociology or other social services and one year of social service experience or graduate training in social work, psychology or closely allied field, he/she will be paid at the level of Juvenile Parole Counselor I; and in the event a probation officer under this plan has the basic qualifying education, plus two years experience in social work, probation, parole, counseling, youth group work, or two years of graduate study in social work, psychology or a closely related field, or a combination of the two, then

[Title 275 WAC—p 48] (1980 Ed.)
the Juvenile Parole Counselor II salary schedule will apply. [Statutory Authority: RCW 13.06.030, 78–03–030 (Order 1269), § 275–32–175, filed 2/17/78.]

Chapter 275–34 WAC
DIVERSION

WAC

275-34-010 Definitions. (1) "Department" means department of social and health services.
(2) "Secretary" means the secretary of the department of social and health services or his/her designee.
(3) "Juvenile court" and "court" will have the same meaning as detailed in RCW 13.04.021.
(4) "Diversion unit" means any person or entity specially funded by the legislature or so designated by the county or court and approved by the state to arrange and supervise diversion agreements in accordance with the requirements of chapter 13.40 RCW.
(5) "Diversion agreement" means a written agreement between a divertee and a diversion unit.
(6) "Divertee" means any alleged juvenile offender who has entered into a diversion agreement with a diversion unit and who is still under the supervision of such unit.
(7) "Restitution" means financial reimbursement by the juvenile offender to the victim(s) in an amount equal to
(a) actual damages sustained by loss of, or injury to, property and
(b) for personal physical injury, the cost of medical treatment and the amount of lost wages.
Restitution shall not include reimbursement for mental anguish, pain and suffering, or other intangible losses. Any restitution assessed by the diversion agreement shall not exceed an amount which the youth could reasonably be expected to pay during the operation of the agreement.
(8) "Juvenile," "youth," and "child," mean any individual who is under the chronological age of eighteen years and who has not previously been transferred to adult court for criminal prosecution. These terms shall also mean a juvenile over eighteen years of age who entered into an agreement prior to his eighteenth birthday as provided in RCW 13.40.080.
(9) "Community service" means compulsory service, without compensation, performed for the benefit of the community by the offender as punishment for committing an offense. It is the expectation that the majority of community service will be performed at public and private nonprofit agencies. The community service shall not supplant a service being provided by the agency. If profit making agencies are going to be utilizing youth through those criteria, the program must have the prior approval of the appropriate regional administrator. Equal offers must be made to all similar services within the community. [Statutory Authority: Chapter 13.40 RCW. 80–15–081 (Order 1559), § 275–34–010, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78–05–020 (Order 1288), § 275–34–010, filed 4/13/78.]

WAC 275–34–020 Planning—Committees—Creation of plans. (1) When requesting state funding of community diversion programs, the administrator of the juvenile court or probation department or the office of the chief county executive shall initiate diversion program planning for their respective judicial districts by selecting members for and organizing planning committees. All planning committees shall, insofar as possible, consist of people representing a broad range of interest in youth. To ensure such representation, representatives of the county juvenile probation department, local law enforcement, the county prosecuting attorney's office, a juvenile, the county executive office, the regional law and justice planning office, and private nonprofit agencies shall be requested to belong to such committee or otherwise participate in such planning. Special efforts will be made to recruit racial minorities and women to serve on the planning committee. Committee membership shall not exceed ten nor be less than five. Committee members shall serve for a one-year period with reappointment at the pleasure of the juvenile probation department administrator and/or the chief county executive.
(2) The members of the planning committee shall select a chairperson by a majority vote.
(3) The committee shall be responsible for the preparation of annual written diversion program plans. Plans submitted for funding shall bear the signatures of the juvenile court administrator in counties that are administered by the superior court and by the probation department administrator in counties that are not administered by the superior court and the chief county executive. Plans shall be in accordance with the requirements of chapter 13.40 RCW and the requirements of this chapter. [Statutory Authority: Chapter 13.40 RCW. 80–15–081 (Order 1559), § 275–34–020, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78–05–020 (Order 1288), § 275–34–020, filed 4/13/78.]

WAC 275–34–030 Planning—Submission of plans—Time limits. (1) Written plans prepared by planning committees shall be submitted to the department for its review and approval. Approved plans will be financed by the department, with the exceptions contained in this chapter, through moneys provided the department for this purpose.
(2) All plans and applications shall be submitted on or before June 1 and relate to program implementation on
or about January 1 of the following year; biennial plans are permissible. [Statutory Authority: Chapter 13.40 RCW. 80–15–081 (Order 1559), § 275–34–030, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78–05–020 (Order 1288), § 275–34–030, filed 4/13/78.]

WAC 275–34–040 State funding. (1) State funds may be provided by the department and spent for a diversion program for wages of personnel directly responsible for the implementation or operation of a diversion program, necessary operating and equipment expenses, expenses caused by training of community volunteers, and expenses incurred for the program through contracts with third parties for the performance of educational, informational, or counseling interviews with divertees.

(2) The term “necessary operating and equipment expenses” as used herein shall not be construed to include expenses caused by building construction or the creation of substantial capital improvements. Such equipment purchased by funds under this section becomes the property of the state of Washington and must be entered into the state inventory through the regional administrator.

(3) State funds shall not be provided to defray diversion program expenses which were, prior to July 1, 1978, financed with county originated dollars.

(4) No person will be denied services on the grounds of race, color, national origin, creed, religion, sex or handicap. [Statutory Authority: Chapter 13.40 RCW. 80–15–081 (Order 1559), § 275–34–040, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78–05–020 (Order 1288), § 275–34–040, filed 4/13/78.]

WAC 275–34–050 Program plan—Required elements. The program plan shall

(1) identify all diversion program staff by title and responsibility,

(2) document total cost of program operation by line item cost,

(3) describe the process of divertee assignment to diversion unit,

(4) describe the procedure whereby the divertee’s needs and obligations are assessed,

(5) describe the control and monitoring procedures to be used with regard to such program,

(6) describe the process for termination of diversion agreement,

(7) describe the manner by which the amount of restitution due will be decided upon, collected, and paid to the victim,

(8) state whether the program will operate and be administered separate from the court and, if no such separation is anticipated, explain why a connection between the court and the diversion program is necessary and advisable in accordance with WAC 275–34–090,

(9) indicate the estimated number of clients to receive diversion services during the contract period and describe how these figures were derived,

(10) describe how violators of diversion agreements will be returned to or referred to the court for disposition,

(11) justify why this particular plan for diversion was decided upon,

(12) include a statement indicating the contractors and/or third party contractors willingness to participate in an evaluation program, and

(13) include dispositional guidelines and standards to insure juveniles are handled in an equitable and fair manner. [Statutory Authority: Chapter 13.40 RCW. 80–15–081 (Order 1559), § 275–34–050, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78–05–020 (Order 1288), § 275–34–050, filed 4/13/78.]

WAC 275–34–060 Diversion unit—Specifications in plans. Proposed plans shall specify that the diversion unit shall

(1) maintain a record system separate and apart from existing juvenile court records,

(2) make provisions to insure that divertees and potential divertees are afforded due process as detailed in RCW 13.40.080(4) through (6),

(3) to the extent possible, involve members of the community in the implementation of community service assignments, restitution, and counseling interviews,

(4) provide for monitoring and supervision of diversion agreements, and


WAC 275–34–070 Approval of plan by secretary. The secretary will give each application individual consideration and will notify each applicant as to whether the applicant’s plan has been approved or disapproved. All subsequent proposed plans and applications, assuming those plans and applications are submitted in a timely fashion, notice of department approval or disapproval shall be given the applicants on or before September 1 of the year in which the proposed plan is submitted. If a proposed plan and application is disapproved, the secretary shall submit in writing the reason(s) therefore. Subsequent to a plan’s disapproval, the applicant may request reconsideration by the secretary of the disapproved proposed plan. [Statutory Authority: Chapter 13.40 RCW. 80–15–081 (Order 1559), § 275–34–070, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78–05–020 (Order 1288), § 275–34–070, filed 4/13/78.]

WAC 275–34–080 Modification of approved plan. Approved plans may be modified only with the prior approval of the department. State funds will not be used to pay expenses incurred prior to the date of approval of a revised plan if those expenses are not in accord with the approved plan. The diversion unit coordinator, with the...
approval of the DJR regional administrator, shall be allowed to modify the contract, as long as the total of the modification is less than five percent and the total modification for the contract period has not exceeded seven and one-half percent of the contract amount. For larger modifications, a written statement describing the changes to be made and an explanation of the reasons for modification accompanied by a written endorsement of the planning committee shall be submitted to the department. The secretary shall review the proposed modification and notify the applicant of approval or disapproval within thirty days. [Statutory Authority: Chapter 13.40 RCW. 80-15-081 (Order 1559), § 275-34-080, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-080, filed 4/13/78.]

WAC 275-34-090 Separate administration—Exceptions. Diversion units as funded herein shall be administered and operated separately from the court; provided that, counties other than those in class AA and A may request of the department an exemption from this requirement. Exemptions may be granted by the department if the existence of the following conditions are clearly demonstrated by the applicant:

(1) past efforts at diversion were operated solely by the court,
(2) resources necessary for diversion programs do not exist within the county or judicial district, and
(3) resources for diversion programs cannot reasonably be established within the county or judicial district.

Requests for exemptions shall be included in the annually submitted plans. [Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-090, filed 4/13/78.]

WAC 275-34-100 Exceptions to rules. The secretary may in his or her discretion waive the specific requirements of this chapter. Requests for such a waiver shall be prepared by the applicant and be submitted with the annual written proposed plan. Such requests shall include an explanation of the circumstances which the applicant contends justifies such waiver. The secretary will give each waiver request individual consideration and promptly advise the applicant in writing of the secretary's decision regarding the waiver and explain the basis for such decision. Waivers may also be requested, in a like fashion to the procedure discussed herein, when an applicant submits proposed modifications as per WAC 275-34-070. Nothing herein shall be construed to affect requirements specifically imposed by law on diversion plans or programs. Counties may request a waiver permitting the state to contract directly with private agencies existing within the community for the provision of services for youth who have entered into diversion agreements pursuant to this chapter. [Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-100, filed 4/13/78.]

WAC 275-34-110 Program review and monitoring. A formal inspection of diversion programs will be made at least once a year by the staff of the department and at such other times that the secretary may require. This inspection or inspections shall be made in cooperation with officials responsible for the administration of diversion programs. The purpose of these inspections will be to verify that the proposed plan or plans previously approved by the secretary are, in fact, the programs provided by the contractor/grantee and/or any third party contractee and further, that these programs are operated in compliance with the standards established pursuant to Chapter 13.40 RCW and serve to meet the intent of the law. The inspection(s) shall consider all services provided for, and requirements placed on, juveniles assigned to diversion programs. [Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-110, filed 4/13/78.]

WAC 275-34-120 Refusal of services. (1) A diversion unit may refuse to enter into an agreement with a juvenile. The unit shall refer the youth for court action with a detailed written statement for the reason of such refusal.

(2) In order to standardize the diversion units across the state, the following are guidelines. These guidelines will be utilized by the division in monitoring diversion units to ensure consistency.

(3) The following factors shall be considered by the agency in making the determination to accept or reject the youth for diversion.

(a) Any youth currently on parole;
(b) Any youth currently on probation subsidy;
(c) Any youth being supervised by the juvenile court;
(d) Any youth who has a court hearing for a criminal complaint pending;
(e) Any youth who failed to abide by the terms of an earlier diversion agreement, within six months;
(f) Any youth who has a felony as part of their criminal history, within the past year;
(g) Any youth who has a total of four misdemeanors or gross misdemeanors all within the past year; and
(h) Any youth under institutional confinement. [Statutory Authority: Chapter 13.40 RCW. 80-15-081 (Order 1559), § 275-34-120, filed 10/20/80, effective 1/1/81.]

WAC 275-34-140 Substantial violation. (1) In order to standardize the diversion units across the state, the following are guidelines. These guidelines will be utilized by the division in monitoring diversion units to ensure consistency.

(2) The following conditions may be considered in determining if a substantial violation has occurred.

(a) Two unexcused absences at the community service placement or restitution site.
(b) Appearance at a community service or restitution site in possession or under the influence of alcohol or drugs.
(c) Failure to complete the terms of the diversion agreement within the specified time frames.
(d) Any other reason as determined by the diversion units. [Statutory Authority: Chapter 13.40 RCW. 80-
Chapter 275-36 WAC
GROUP HOMES FOR THE MENTALLY AND PHYSICALLY HANDICAPPED

WAC 275-36-010 Definitions. (1) "Secretary" means the secretary of the department or such officer of the department as he may designate to carry out in whole or in part the administration of the provisions of these rules and regulations, and chapter 72.33 RCW in relation to group homes.

(2) "Department" means the department of social and health services of the state of Washington.

(3) "Bureau" means the bureau of developmental disabilities of the department of social and health services.

(4) A "group home" means a residential facility capable of serving among others, a small number of mentally and/or physically handicapped individuals (maximum of 20) who are able to participate in a variety of jobs, sheltered workshops, day care centers, activity centers, educational facilities, and/or other community based programs that are meaningful for their training, rehabilitation, and/or general well-being.

(a) A group home is usually a single dwelling, a series of apartments or other buildings with sound structure which shall offer a pleasant and healthful environment for human life and welfare.

(b) The building for a group home may be an owned or leased house, apartment or apartments, or a segment of a larger facility.

(c) Group homes must be located within reasonable proximity to those community resources that are necessary adjuncts to a training or education and/or rehabilitation program.

(d) Living quarters shall emulate a home-like atmosphere and the residents will take part, insofar as they are capable, in their own personal care and in the care of their quarters.

(e) A group home may be an extension of programs of existing residential facilities serving mentally and physically handicapped individuals and will be viewed as an element in a comprehensive plan for mental retardation services in a region.

(5) "Mental deficiency" means a state of subnormal development of the human organism in consequence of which the individual affected is mentally incapable of assuming those responsibilities expected of the socially adequate person such as self-direction, self-support, and social participation. [RCW 72.33.020(1)]

(6) "Physical deficiency" means a state of physical impairment of the human organism in consequence of which the individual affected is physically incapable of assuming those responsibilities expected of the socially adequate person such as self-direction, self-support, and social participation. [RCW 72.33.020(2)]

(7) "Parent" means the person or persons having the legal rights to the custody of a child by reason of kinship by birth or adoption. [RCW 72.33.020(3)]

(8) "Court" means the superior court of the state of Washington. [RCW 72.33.020(6)]

(9) "Guardian" means a person or an appropriate agency appointed by the superior court of the state of Washington to supervise and administer all or a portion of the affairs of a person and/or his estate.

(10) "Placement" means an extramural status for the resident's best interests granted by the secretary after reasonable notice and consultation with the parents or guardian of such resident. [RCW 72.33.020(11)]

(11) "County mental retardation board" means the board established by the authority of the community mental retardation services act, chapter 110, Laws of 1967 ex. sess.

(12) "Living space" means living rooms, indoor recreation areas, and dining areas. [Order 1070, § 275-36-010, filed 11/21/75; Order 8, § 275-36-010, filed 9/25/69.]

WAC 275-36-020 Approval and certification of group homes. In order for a group home to be approved and to maintain an approved status pursuant to chapter 72.33 RCW and these rules and regulations, it shall:

(1) Comply with all relevant state and local laws and ordinances applicable to group homes, institutions, and boarding homes for aged and infirm, and comply with
standards of care, training and maintenance, established by the bureau of developmental disabilities.

(2) Establish or utilize an existing citizen's board or advisory committee composed of a representative group of people interested and knowledgeable in mental retardation and who are not employed by a group home, do not have a beneficial interest in a group home and who are not relatives by blood or marriage of a group home operator, administrator, or employee.

(a) The said committee shall have a membership of at least five persons, plus a representative of the bureau of developmental disabilities. The representative shall be a non-voting member of the board or the committee.

(b) The citizen board or advisory committee shall meet at least quarterly, keep minutes of its meetings, and send copies of such minutes to the county mental retardation board and appropriate department of social and health services employees as designated by the bureau of developmental disabilities.

(3) The role of the advisory board shall be to:

(i) Visit the group home periodically and observe the program in operation.

(ii) Keep abreast of all developments affecting the lives of residents in the group home.

(iii) Be aware and advise the group home administrator regarding the policies, rules, practices and procedures in the group home which directly affect the residents.

(iv) Become an advocate for all the residents regarding their legal rights, social environment, and training programs.

(v) Review and advise the group home administrator regarding the group home's budget and administrator's monthly report.

(vi) Work in conjunction with, and in support of, the administrator, lending professional experience to the group home.

(vii) Give advice to the group home operator/administrator as necessary to insure quality care and program.

(viii) Discuss recommendations with appropriate group home staff and forward them in writing to the bureau.

(3) Submit budgets, staffing patterns, plans for in-service training programs, plans for health care and a statement of its operating policies and procedures to the bureau and the local county mental retardation board. These documents shall be submitted annually or at other times as required.

(4) Permit the county mental retardation board to inspect the group home and report to the department any deficiencies in its programs.

(5) Utilize all appropriate community resources to enhance the physical, social, and mental well-being of its residents.

(6) File with the bureau a statement of assurance which shall provide, in substance, that in operation and administration of the group home no person shall be refused admission to, or employment in the group home, or otherwise denied participation in the activities of the group home on the grounds of race, color, creed or national origin. [Order 1070, § 275-36-020, filed 11/21/75; Order 8, § 275-36-020, filed 9/25/69.]

WAC 275-36-030 Certification of group homes. Upon determination by the department of satisfactory compliance with the rules and regulations prescribed herein, through inspection pursuant to WAC 275-36-061, the bureau may certify a group home as approved for the placement of residents under the provisions of chapter 72.33 RCW. This certification is required annually. Initial application for certification shall be reviewed by the county and recommendations shall be forwarded by the county to the bureau. The county may submit recommendations to the bureau pursuant to WAC 275-36-020(4) prior to annual certification by the department. [Order 1070, § 275-36-030, filed 11/21/75; Order 8, § 275-36-030, filed 9/25/69.]

WAC 275-36-040 Temporary initial certification or interim renewal certification. Temporary initial certification or temporary interim renewal certification may be granted after appropriate licensure has been obtained, the group home has been inspected pursuant to WAC 275-36-061, and upon assurance that the group homes will comply with these rules and regulations within a specified period of time acceptable to the secretary. [Order 1070, § 275-36-040, filed 11/21/75; Order 8, § 275-36-040, filed 9/25/69.]

WAC 275-36-050 Eligibility for placement in group home. Any person who would benefit from a group home placement, and is eligible for such placement pursuant to rules and regulations adopted pursuant to chapter 72.33 RCW relating to admission, placement, and discharge may be placed in a group home by the department. [Order 1070, § 275-36-050, filed 11/21/75; Order 8, § 275-36-050, filed 9/25/69.]

WAC 275-36-061 Supervision. (1) The secretary or his designee shall at least annually inspect and evaluate the operation of the group home to insure that proper standards of operation are maintained.

(2) The secretary or his designee shall periodically but at least semi-annually evaluate the individual placement of residents under the provisions of chapter 72.33 RCW relating to admission, placement, and discharge in order to make certain that the interests, needs and welfare of the resident continue to be effectively served in the group home.

(3) The secretary or his designee shall be informed by the group home administrator if a resident of a group home is in need of exceptional services, such as intensive medical care, that cannot be provided by private or local resources. [Order 1070, § 275-36-061, filed 11/21/75. Formerly WAC 275-36-080.]

WAC 275-36-071 Payment for service. (1) The department shall make payment to group homes upon the submission of itemized state vouchers for the care, the supervision, and the training rendered to residents placed in such group homes, such vouchers to be prepared in such form as may be prescribed by the department or
shall make payment directly to the resident for such costs where necessary to maximize benefits under federal programs.

(2) All payments from the department pursuant to this chapter shall be supplemental to all other financial resources of the resident.

(3) Insofar as reasonably possible the resident will pay from his own earnings or other financial resources the charges for his care. Resident payments will be made directly to the group home operator and payment so made shall be reported by the group home operator to the secretary or his designee: Provided, That the first $65.00 of earned income and one-half the remainder shall be exempt from payment each month: Provided further, That an estate valued at $1,500.00 or less shall be exempt, and all unearned income shall not be exempt. Where a guardian controls the income and/or estate of an individual in a group home, such guardian will reimburse the group home pursuant to the above criteria. [Order 1070, § 275–36–071, filed 11/21/75. Formerly WAC 275–36–090.]

WAC 275–36–081 Resident remuneration. Whenever appropriate or required by law, individual residents who perform work for the group home shall be given remuneration in accordance with the minimum wage law unless exemption has been granted to the minimum wage under applicable laws of federal department of labor and state department of labor and industries. [Order 1070, § 275–36–081, filed 11/21/75. Formerly WAC 275–36–100.]

WAC 275–36–091 Group home administration. (1) The group home shall have written statements to include the following:

(a) Its philosophy, objectives and goals;

(b) A description of the facility, admission criteria and programs;

(c) Its policies and procedures that protect the financial interests of residents and provide accountability of resident funds;

(d) Its policy explaining how the staff shall respond to behavior problems of the residents.

(2) The group home administrator shall sign and file with the bureau group home document administrative policy §1 prohibiting mistreatment, neglect, or abuse of residents. All group home staff shall sign a similar document compiled by and kept on file at the group home.

(3) Written statements shall be approved by the bureau. [Order 1070, § 275–36–091, filed 11/21/75.]

WAC 275–36–101 Personnel. (1) The facility shall maintain current personnel policies and practices in writing and these shall be made available to all employees.

(2) All personnel may be initially screened by the group home advisory board to determine if they are capable of fulfilling specific job requirements.

(3) The performance of each employee shall be evaluated in writing regularly at least annually by the group home administrator.

WAC 275–36–110 Staffing. (1) Administrative staff:

(a) The group home shall designate staff to be responsible for administration of the group home and group home programs as outlined in these standards, and to perform other duties as required.

(b) The administrator(s) shall have administrative ability, leadership ability, and general knowledge of mental retardation.

(c) The administrator(s) shall designate another staff member or members to be responsible for the administration and supervision of the group home in his absence.

(2) Resident care and training staff services:

(a) There shall be sufficient, appropriately qualified, and adequately trained personnel to conduct the resident training and care program in accordance with the standards as specified herein.

(b) Resident care and training staff services shall include the care, maintenance and training of residents, dietary services, household maintenance services, clerical services, record-keeping services, and implementation of the resident's program plans in accordance with the standards as specified herein.

(c) The proportion of direct resident care staff services to non-direct resident care staff services for each group home shall be approved by the bureau of developmental disabilities. [Order 1070, § 275–36–110, filed 11/21/75.]

WAC 275–36–120 Staff ratios. (1) Administration:

(a) A group home licensed to serve 12 or less residents shall have a minimum of one paid half-time (20 hours per week) administrator.

(b) A group home licensed to serve 13 or more residents shall have a minimum of one paid full-time administrator.

(c) Notwithstanding subdivisions (a) and (b), organizations or corporations operating more than one group home shall utilize a single full-time administrator for two or more such homes, at the discretion of the bureau.

(2) Resident care and training staff services:

(a) Children group homes.

(i) A minimum of one resident care and training staff member shall be on duty at all times to serve in the capacity of facilitating the group home's program.

(ii) The group home shall normally have two resident care and training staff members on duty during waking hours whenever between six and twelve children are on the premises, and shall normally have three resident care and training staff members on duty during waking hours whenever between thirteen and twenty children are in the home.

(iii) Whenever only one resident care and training staff member is on duty, there shall be provisions for a second person to be on call in case of emergency.
(iv) Group homes serving children with special needs requiring additional training and supervision should have a minimum of one additional resident care and training staff member during waking hours whenever children are on the premises.

(v) Reduced staff coverage is permissible when the group home is complying with approved vacation or sick-leave plans: Provided, That at least one staff member shall be on duty at all times.

(b) Adult group homes.

(i) A minimum of one resident care and training staff member shall be on duty at all times to serve in the capacity of facilitating the group home's program.

(ii) A minimum of two resident care and training staff members shall normally be on duty during the waking hours whenever between nine and fifteen residents are on the premises.

(iii) A minimum of three resident care and training staff members shall normally be on duty during waking hours whenever sixteen or more residents are on the premises.

(iv) Whenever only one resident care and training staff member is on duty, there shall be provisions for a second person to be on call in case of emergency.

(v) Reduced staff coverage is permissible when the group home is complying with approved vacation or sick-leave plans: Provided, That at least one staff member shall be on duty at all times.

(vi) Group homes serving adults with special needs requiring additional training and supervision should have a minimum of one additional resident care and training staff member during waking hours whenever adult residents are on the premises.

(c) The secretary or his designee may grant exemption of up to six months from specific resident care and training staff minimum ratio requirements to any group home. [Order 1070, § 275–36–120, filed 11/21/75.]

WAC 275–36–130 In-service staff training. (1) The group home shall have an orientation for all new employees to acquaint them with the philosophy, organization, program, practices, and goals of the group home.

(2) The group home, in cooperation with the bureau shall provide on-the-job training for each employee and participate in programs relating to the developmentally disabled so that skills in working with the residents are increased. [Order 1070, § 275–36–130, filed 11/21/75.]

WAC 275–36–140 Resident records. (1) The group home shall maintain and keep current a record for each resident that will serve as a basis for review, study, and evaluation of the overall programs provided by the group home for its residents.

(2) All information contained in a resident's record shall be considered privileged and confidential, shall be used in the best interest of the resident, and shall be made available to all training and care staff, and to the department and the community mental retardation and developmental disabilities board in accordance with chapter 71.20 RCW and rules and regulations promulgated thereunder.

(1980 Ed.)

(3) Any transfer or inspection of records, except pursuant to subsection (2), shall be authorized by a release of information form, signed by the resident of legal age or a parent of residents under 18, or a legal guardian. [Order 1070, § 275–36–140, filed 11/21/75.]

WAC 275–36–150 Personal care and hygiene. (1) The group home shall have a means and procedure for providing and ensuring personal care and hygiene services, health services and dental services for each resident.

(2) Written policies and procedures that govern the safe supervision and handling of all drugs shall be developed by the group home in conjunction with a qualified pharmacist, nurse or physician.

(3) There shall be a written policy governing the self-administration of drugs whether prescribed or not.

(4) Food consumed in the group home shall generally be prepared on the group home grounds. [Order 1070, § 275–36–150, filed 11/21/75.]

WAC 275–36–160 Transportation. (1) The group home shall arrange and aid the residents' utilization of transportation to:

(a) Religious activities;

(b) Recreational activities;

(c) Appointments with doctors, dentists, psychologists, etc.;

(d) Return from school/work because of illness, injury, etc.;

(e) Field trips;

(f) Daily commuting between developmental centers, sheltered workshops and independent employment when public transportation is not available or appropriate;

(g) The residents' family.

(2) The group home shall have a licensed, well-functioning vehicle, properly maintained in accordance with motor vehicle safety laws and standards. [Order 1070, § 275–36–160, filed 11/21/75.]

WAC 275–36–170 Program plan. The group home shall develop in cooperation with the bureau of developmental disabilities' case service staff a detailed written plan for each resident, encompassing the areas of physical and mental health, education and functional and social competence. The plan shall be developed so that program is the least restrictive alternative commensurate with his abilities and potential. Said plan shall be kept current and evaluated and reviewed at least annually by the bureau. [Order 1070, § 275–36–170, filed 11/21/75.]

WAC 275–36–180 Training. The group home shall, as specified in the program plan, provide each resident an on-going training program in:

(1) Self-help skills;

(2) Community skills;

(3) Development of interpersonal and social relationships;

[Title 275 WAC—p 55]
WAC 275-36-190 Educational and vocational training. (1) Educational services facilitating the intellectual, sensorimotor, and affective development of the individual shall be available to all children.

(a) Residents who are over eighteen years of age shall be offered participation in appropriate community colleges or adult basic education or continuing education programs when they are available.

(b) Residents eighteen years of age and under shall attend a public school program.

(2) Residents eighteen years and older not attending a public school program shall be provided a community-based vocational program as described in their program plan.

(3) The group home staff shall consult with educators regarding:

(a) Specific programs of residents;

(b) Coordination and reinforcement of school and group home program goals.

(4) The group home staff shall consult with workshop and developmental center staff to coordinate and reinforce vocational and group home program goals. [Order 1070, § 275–36–190, filed 11/21/75.]

WAC 275-36-200 Family involvement. The group home shall actively involve the resident's family, guardian, or representative in planning and decision making which affect the individual resident. [Order 1070, § 275–36–200, filed 11/21/75.]

WAC 275-36-210 Facility requirements. (1) The group home shall have eighty square feet of living space per resident.

(2) The secretary or his designee may grant exemption from specific living space requirements to existing group home: Provided, That it is shown to the satisfaction of the department that space provided is reasonably adequate to meet the needs of the residents, or that the home is making a reasonable attempt to comply with living space requirements under a specific time deadline.

(3) If one central dining room is utilized, it must be equipped and of adequate size so that the total resident population and staff may eat meals at one time.

(4) Residents shall be provided with a bedroom which shall not be used for other purposes by the group home, and which shall be furnished in a manner consistent with general community norms for bedrooms. [Order 1070, § 275–36–210, filed 11/21/75.]

Chapter 275–39 WAC

MEDICALLY FRAGILE CHILDREN’S FACILITIES

WAC 275–39-005 Authority.

275–39-010 Facility certification.

275–39-015 Purpose.

275–39-020 Eligibility for services of a MFCF.


275–39-035 Intensive support medical services.

275–39-040 Philosophy, objectives, and goals.

275–39-045 Policy and procedure manuals.

275–39-050 Governing body.

275–39-055 Chief executive officer.

275–39-056 Qualified mental retardation professional.

275–39-060 Organization chart.

275–39-065 Management audit plan.


275–39-075 Written policies.

275–39-080 Licensure and professional standards.

275–39-085 Suspension and dismissal.

275–39-090 Sufficient staffing and resident work.

275–39-100 Staff training program.

275–39-105 Staff treatment of residents.

275–39-110 Admission criteria and evaluations.

275–39-115 Availability of rules and procedures.

275–39-120 Number of residents.


275–39-130 Quarterly review of resident's status.

275–39-135 Record and reports of reviews.

275–39-140 Release from the MFCF.

275–39-145 Transfer to another facility.

275–39-150 Emergencies or death of a resident.

275–39-155 Resident's civil rights.

275–39-160 Residents' bill of rights.

275–39-165 Delegation of rights and responsibilities.

275–39-170 Resident finances.

275–39-175 Staff-resident communications.

275–39-180 Communication with residents and parents.

275–39-185 Dental services—Diagnostic services.

275–39-190 Dental services—Treatment.

275–39-195 Dental services—Oral health education and training.

275–39-200 Dental services—Records.

275–39-205 Dental services—Formal arrangements.

275–39-210 Dental services—Staff.

275–39-211 Educational services.

275–39-215 Food and nutrition services—Required services.

275–39-220 Food and nutrition services—Diet requirements.

275–39-225 Food and nutrition services—Meal service.

275–39-230 Food and nutrition services—Menus.

275–39-235 Food and nutrition services—Food storage.

275–39-240 Food and nutrition services—Work areas.

275–39-245 Food and nutrition services—Dining areas and service.

275–39-250 Food and nutrition services—Training of residents and direct-care staff.

275–39-255 Food and nutrition services—Staff.

275–39-260 Food and nutrition services—Dietitian (qualified consultant).

275–39-265 Medical services—Required services.

275–39-270 Medical services—Goals and evaluations.

275–39-275 Medical services—Arrangements with outside resources.

275–39-280 Medical services—Preventive health services.

275–39-285 Medical services—Physician (qualified consultant).

275–39-290 Nursing services—Required services.

275–39-295 Nursing services—Inservice training.

275–39-300 Nursing services—Staff.

275–39-305 Nursing services—Supervision of health services.

275–39-310 Nursing services—Director of nursing services.

275–39-315 Nursing services—A staff nurse.

275–39-320 Pharmacy services—Required services.

275–39-325 Pharmacy services—Pharmacist.

275–39-330 Pharmacy services—Drugs and medications.

275–39-335 Pharmacy services—Drug storage.

275–39-340 Physical and occupational therapy services—Required services.

275–39-345 Physical and occupational therapy services—Records and evaluations.

275–39-350 Physical and occupational therapy services—Staff and facilities.

275–39-355 Physical and occupational therapy services—Occupational therapist (qualified consultant).
WAC 275-39-005 Authority. Chapter 74.26 RCW directs the department of social and health services, division of developmental disabilities to establish a controlled program to develop and review an alternative service delivery system for certain multiply handicapped children, also to be referred to as medically fragile children, who have intensive medical needs but who are not required to reside in a hospital setting for their needs to be met.

The following regulations are adopted pursuant to legislative direction to provide minimum standards and qualifications for various elements of the program. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-005, filed 10/21/80.]

WAC 275-39-010 Facility certification. A MFCF is a medically fragile children's facility certified as an institution for the mentally retarded (IMR) for the specialized care of medically fragile children as defined in WAC 275-39-030. A MFCF is subject to the regulations of this chapter (chapter 275-39 WAC) and to the regulations and statutes applicable to institutions for the mentally retarded (IMRs). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-010, filed 10/21/80.]

WAC 275-39-015 Purpose. The purposes for establishing a residential alternative for medically fragile children are:

1. To provide residential care more cost efficiently than is otherwise available in a hospital setting;
2. To provide appropriate care in a more home-like setting than might otherwise be available in a hospital setting;
3. To provide "active treatment" for each child which includes an individual habilitation plan. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-015, filed 10/21/80.]

WAC 275-39-020 Eligibility for services of a MFCF. To be eligible for the services of a MFCF, a person shall:

1. Be a medically fragile child as defined herein;
2. Need intensive support medical services, as described herein, which can be provided outside of a hospital setting or other residential medical facility but is not available in a less restrictive environment than a MFCF. Each applicant must be individually considered as to whether his/her needs can be met in a less restrictive environment;
3. Be developmentally disabled as defined herein;
4. If not developmentally disabled, as defined herein:

(1980 Ed.)
(a) At risk of being or becoming developmentally disabled and/or is or is at risk of having substantial functional limitations; and

(b) Be granted an exception to rule by the division of developmental disabilities. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–020, filed 10/21/80.]

WAC 275–39–025 Definitions. As used in this chapter:

(1) "Active treatment" in a MFCF requires the following:

(a) The individual's regular participation, in accordance with an individual plan of care, in professionally developed and supervised activities, experiences, or therapies.

(b) An individual written plan of care that sets forth measurable goals or objectives stated in terms of desirable behavior and that prescribes an integrated program of activities, experiences or therapies necessary for the individual to reach those goals or objectives. The overall purpose of the plan is to help the individual function at the greatest physical, intellectual, social, or vocational level he can presently or potentially achieve.

(c) An interdisciplinary professional evaluation that:

(i) Is completed, for a recipient, before admission to the institution but not more than three months before and, for an individual applying for medicaid after admission, before the institution requests payment;

(ii) Consists of complete medical, social, and psychological diagnosis and evaluations and an evaluation of the individual's need for institutional care; and

(iii) Is made by a physician, a social worker and other professionals, at least one of whom is a qualified mental retardation professional.

(d) Reevaluation medically, socially, and psychologically at least quarterly by the staff involved in carrying out the resident's individual plan of care. This must include a review of the individual's progress toward meeting the plan objectives, the appropriateness of the individual plan of care, assessment of his continuing need for institutional care; and

(e) An individual postinstitutionalization plan, as part of the individual plan of care, developed before discharge by a qualified mental retardation professional and other appropriate professionals. This must include provision for appropriate services, protective supervision, and other follow-up services in the resident's new environment.

(2) "Ambulatory" means able to walk without assistance.

MFCF means an institution for the mentally retarded (also referred to an ICF/MR) which provides services exclusively for medically fragile children.

(3) "Developmentally disabled" refers to a person who is disabled due to one or more of the following:

(a) Mental retardation as defined in WAC 275–27–020(1); or

(b) Cerebral palsy, epilepsy, autism, auditory impairment or visual impairment having the following additional characteristics:

(i) Originates before such person reaches age eighteen;

(ii) Has continued or can be expected to continue indefinitely; and

(iii) Constitutes a substantial handicap to such individual's ability to function normally in society.

(4) "Individual habilitation plan" is a plan of care developed by an interdisciplinary team delineating training goals, plans, implementation, responsibilities, initiation and completion times, and evaluation techniques formulated for the use of direct care and special service personnel in the training and habilitation of clients in IMR facilities. The IHP is a part of the resident's total plan of care.

(5) "Living unit" means a resident living unit that includes sleeping areas and may include dining and activity areas.

(6) "Medical plan of care" is reflected in the physicians orders and should be a part of the individual habilitation plan.

(7) "Mobile nonambulatory" means unable to walk without assistance, but able to move from place to place with the use of a device such as a walker, crutches, a wheelchair, or a wheeled platform.

(8) "Nonambulatory" means unable to walk without assistance.

(9) "Nonmobile" means unable to move from place to place.

(10) "Nursing plan of care" is an integral part of the comprehensive individual habilitation plan.

(11) "Qualified mental retardation professional" means a person who has specialized training or one year of experience in treating or working with the mentally retarded and is one of the following:

(a) A psychologist with a master's degree from an accredited program.

(b) A licensed doctor of medicine or osteopathy.

(c) An educator with a degree in education from an accredited program.

(d) A social worker with a bachelor's degree in:

(i) Social work from an accredited program;

(ii) A field other than social work and at least three years of social work experience under the supervision of a qualified social worker; or

(iii) Pediatric medical social work experience or training.

(e) A physical or occupational therapist.

(f) A speech pathologist or audiologist.

(g) A registered nurse.

(h) A therapeutic recreation specialist who is a graduate of an accredited program.

(i) A rehabilitation counselor who is certified by the committee on rehabilitation counselor certification.

(12) "Resident living" means pertaining to residential services provided by a MFCF.
(13) "Total plan of care" is a term describing the entire resident record to include but not be limited to assessments and evaluations, medical and nursing orders, flow sheets, progress notes and the individual habilitation plan.

(14) "Training and habilitation services" means those intended to aid the intellectual, sensorimotor, and emotional development of a resident. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-025, filed 10/21/80.]

WAC 275-39-030 Medically fragile child. A medically fragile child is a person who is:

(1) Under twenty-two years of age; and

(2) Under the care of a physician and such physician has diagnosed the child's condition as sufficiently serious to warrant eligibility; and

(3) Presently residing in, or in immediate jeopardy of residing in, a hospital or other residential medical facility for the purpose of receiving intensive support medical services; and

(4) Have disabilities within one of the following four functional/medical definitional categories:

(a) Respiratory impaired; with an acquired or congenital defect of the oropharynx, trachea, bronchial tree, or lung requiring continuing dependency on a respiratory assistive device in order to allow the disease process to heal or the individual to grow to a sufficient size to live as a normal person;

(b) Respiratory with multiple physical impairments; with acquired or congenital defects of the central nervous system or multiple organ systems requiring continued dependency on a respiratory assistive device and/or other medical, surgical, and physical therapy treatments in order to allow the disease process to heal or the individual to gain sufficient size to permit surgical correction of the defect or the individual to grow large and strong enough and acquire sufficient skills in self-care to allow survival in a nonmedical/therapy intensive environment;

(c) Multiply physically impaired; with congenital or acquired defects of multiple systems and at least some central nervous system impairment that causes loss of urine and stool sphincter control as well as paralysis or loss or reduction of two or more extremities, forcing the individual to be dependent on a wheelchair or other total body mobility device, also requiring medical, surgical, and physical therapy intervention in order to allow the individual to grow to a size that permits surgical correction of the defects or allows the individual to grow large and strong enough and acquire sufficient skills in self-care to allow survival in a nonmedical/therapy intensive environment;

(d) Static encephalopathies; with severe brain insults of acquired or congenital origin causing the individual to be medically diagnosed as totally dependent for all bodily and social functions except cardiorespiratory so that the individual requires continuous long-term daily medical/nursing care. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-030, filed 10/21/80.]

WAC 275-39-035 Intensive support medical services. Intensive support medical services shall include but not be limited to a need for one or more of the following:

(1) Medication requiring observation for effect.

(2) Medications given IM or IV.

(3) Observation and control of seizure disorder.

(4) Supportive care during status epilepticus.

(5) Respiratory therapy.

(6) Oxygen — acute and unstable conditions.

(7) Nasopharyngeal/Tracheal suctioning.

(8) Tracheostomy care.

(9) Gavage or gastrostomy feedings.

(10) Skilled oral feeding techniques.

(11) Immediate recognition and treatment of aspirations.

(12) Electrolyte therapy/hydration.

(13) Observation for shunt function and increased intracranial pressure.

(14) Care of unrepaired myelomeningocele.

(15) Maintenance of protective environment (immuno-suppressed).

(16) Maintenance of normal body temperature.

(17) Catheter insertions and sterile irrigations.

(18) Special skin care.

(19) Cleft lip and/or palate care.

(20) Post—surgical nursing care.

(21) Observations for acute conditions.

(22) Sterile dressings; for example, such as might be required when a resident's body temperature regulatory devices are defective.

(23) Heat — active treatment; for example, such as might be required when a resident's body temperature regulatory devices are defective.

(24) Observation and care of demineralization fractures.


WAC 275-39-040 Philosophy, objectives, and goals. (1) The MFCF shall have a written outline of the philosophy, objectives, and goals it is striving to achieve that includes, at least:

(a) The MFCF's role in the state comprehensive program for the mentally retarded;

(b) The MFCF's goals for its residents; and

(c) The MFCF's concept of its relationship to the parents or legal guardians of its residents.

(2) The outline shall be available for distribution to staff, consumer representatives, and the interested public. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-040, filed 10/21/80.]

WAC 275-39-045 Policy and procedure manuals. The MFCF shall have manuals that:

(1) Describe the policies and procedures in the major operating units of the MFCF;

(2) Are current, relevant, and available; and

[Title 275 WAC—p 59]
WAC 275-39-050 Governing body. (1) The MFCF shall have a governing body that:
(a) Exercises general direction over the affairs of the MFCF;
(b) Establishes policies concerning the operation of the MFCF and the welfare of the individuals it serves;
(c) Establishes qualifications for the chief executive officer in the following areas:
   (i) Education;
   (ii) Experience;
   (iii) Personal factors;
   (iv) Skills; and
   (d) Appoints the chief executive officer.
(2) The governing body may consist of one individual or a group. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-050, filed 10/21/80.]

WAC 275-39-055 Chief executive officer. (1) The chief executive officer shall:
(a) Act for the governing body in the overall management of the MFCF; and
(b) Arrange for one individual to be responsible for the administrative direction of the MFCF at all times.
(2) If the MFCF is licensed as a nursing home, the chief executive officer shall be an individual licensed in the state as a nursing home administrator.
(3) If the MFCF is a hospital qualifying as an institution for the mentally retarded or persons with related conditions, the chief executive officer shall be a hospital administrator.
(4) Job titles for the chief executive officer may include any of the following: Superintendent, director, and administrator. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-055, filed 10/21/80.]

WAC 275-39-056 Qualified mental retardation professional. The MFCF shall have a qualified mental retardation professional who is responsible for:
(1) Supervising the delivery of each resident's individual plan of care;
(2) Supervising the delivery of training and habilitation services;
(3) Integrating the various aspects of the MFCF's program;
(4) Recording each resident's progress; and
(5) Initiating a monthly review of each individual plan of care for necessary changes. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-056, filed 10/21/80.]

WAC 275-39-060 Organization chart. The MFCF shall have an organization chart that shows:
(1) The major operating programs of the MFCF;
(2) The staff divisions of the MFCF;
(3) The administrative personnel in charge of the programs and divisions; and

WAC 275-39-065 Management audit plan. The MFCF shall have a plan for a continuing management audit to insure that the MFCF:
(1) Complies with state laws and regulations; and
(2) Effectively implements its policies and procedures. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-065, filed 10/21/80.]

WAC 275-39-070 Research statement. If the MFCF conducts research, it shall comply with the statement of assurance on research involving human subjects required by 45 CFR 46.104 through 46.108. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-070, filed 10/21/80.]

WAC 275-39-075 Written policies. The MFCF shall:
(1) Have written personnel policies that are available to all employees;
(2) Make written job descriptions available for all positions; and
(3) Have written policies that prohibit employees with symptoms or signs of a communicable disease from being on duty. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-075, filed 10/21/80.]

WAC 275-39-080 Licensure and professional standards. The MFCF shall:
(1) Require the same licensure, certification, or standards for positions in the facility as are required for comparable positions in community practice; and
(2) Take into account in its personnel activities the ethical standards of professional conduct developed by professional societies. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-080, filed 10/21/80.]

WAC 275-39-085 Suspension and dismissal. The MFCF shall have an authorized procedure, consistent with due process, for suspending or dismissing an employee. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-085, filed 10/21/80.]

WAC 275-39-090 Sufficient staffing and resident work. (1) The MFCF shall have a staff of sufficient size that the MFCF does not depend on residents or volunteers for services.
(2) The MFCF shall have a written policy to protect residents from exploitation if they engage in productive work. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-090, filed 10/21/80.]

WAC 275-39-100 Staff training program. (1) The MFCF shall have a staff training program, appropriate to the size and nature of the MFCF approved by the Washington state board of health, that includes:
(a) Orientation for each new employee to acquaint him/her with the philosophy, organization, program, practices, and goals of the MFCF;
(b) Inservice training for any employee who has not achieved the desired level of competence;
(c) Continuing inservice training for all employees to update and improve their skills; and
(d) Supervisory and management training for each employee who is in, or a candidate for, a supervisory position.

2) The MFCF shall have someone designated to be responsible for staff development and training. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-100, filed 10/21/80.]

WAC 275-39-105 Staff treatment of residents. (1) The MFCF shall have written policies that prohibit mistreatment, neglect, or abuse of a resident by an employee of the MFCF.

(2) The MFCF shall insure that all alleged violations of these policies are reported immediately.

(3) The MFCF shall have evidence that:
(a) All violations are investigated thoroughly;
(b) The results of the investigation are reported to the chief executive or his designated representative within twenty-four hours of the report of the incident; and
(c) If the alleged violation is verified, the chief executive officer imposes an appropriate penalty.

(4) Each employee must read and sign a copy of the MFCF policies describing acceptable forms of care that prohibit mistreatment. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-105, filed 10/21/80.]

WAC 275-39-110 Admission criteria and evaluations. (1) Except as provided in subsection (3) of this section, a MFCF may not admit an individual as a resident unless his/her needs can be met by the facility and an interdisciplinary professional team has determined that admission is the best available plan for that individual.

(2) The team shall:
(a) Conduct a comprehensive evaluation of the individual covering medical, physical, emotional, social, and cognitive factors; and
(b) Before the individual's admission:
(i) Define his/her need for service without regard to the availability of those services; and
(ii) Review all available and applicable programs of care, treatment, and training and record its findings.

(3) If admission is not the best plan but the individual shall be admitted nevertheless, the MFCF shall:
(a) Clearly acknowledge that the admission is inappropriate; and
(b) Initiate plans to actively explore alternatives.

(4) The interdisciplinary team will consist of:
(a) Qualified mental retardation professional or designee;
(b) Registered nurse from the MFCF;
(c) Direct care personnel;
(d) Parent(s), guardian, and/or resident;
(e) Physician.

(5) In addition the interdisciplinary team should include other professional consultants or staff appropriate to the individual such as:
(a) Pediatrician with training and/or experience with chronic pulmonary diseases of infancy and childhood if the child is ventilation dependent or respiratory fragile;
(b) A pediatrician with training and/or experience in rehabilitation medicine;
(c) A pediatrician with training and/or experience in neurology and/or seizures if the child has a neurologic disorder;
(d) Social worker;
(e) Therapists (occupational, respiratory, physical, speech) as appropriate;
(f) Educator;
(g) Registered dietician. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-110, filed 10/21/80.]


WAC 275-39-120 Number of residents. The MFCF shall admit only that number of individuals that does not exceed:

(1) A capacity of sixteen residents; and
(2) Its capability to provide adequate programming. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-120, filed 10/21/80.]

WAC 275-39-125 Review of preadmission evaluation. Within one week after admission, the interdisciplinary professional team shall:

(1) Review and update the preadmission evaluation with the participation of direct care personnel;
(2) Develop, with the participation of direct care personnel, a prognosis that can be used for programming and placement;
(3) Record the results of the evaluation in the resident's record kept in the living unit; and
(4) Write an interpretation of the evaluation in terms of specific actions to be taken for:
(a) The direct care personnel and the special services staff responsible for carrying out the resident's program; and
(b) The resident's parents or legal guardian. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-125, filed 10/21/80.]

WAC 275-39-130 Quarterly review of resident's status. (1) All relevant personnel of the MFCF, including personnel in the living unit, shall jointly review the status of each resident at least quarterly and produce program recommendations through the interdisciplinary team process.

(1980 Ed.)
WAC 275-39-130 Title 275 WAC: DSHS (Institutions)

(2) This review shall include but not be limited to consideration of the following:
(a) The advisability of continued residence and alternative programs.
(b) When the resident legally becomes an adult:
   (i) The need for guardianship; and
   (ii) How the resident may exercise his/her civil and legal rights.
(c) Current health status of the individual resident.

WAC 275-39-135 Record and reports of reviews. The results of the reviews required shall be:
(1) Recorded in the resident's record kept in the living unit;
(2) Made available to personnel involved in the direct care of the resident;
(3) Interpreted to the resident's parents or legal guardian who are involved in planning and decision making; and
(4) Interpreted to the resident, when appropriate.

WAC 275-39-140 Release from the MFCF. (1) The MFCF shall establish procedures for counseling a parent or guardian who requests the release of a resident concerning the advantages and disadvantages of the release.
(2) Planning for release of a resident shall include providing for appropriate services in the resident's new environment, including protective supervision and other followup services.
(3) When a resident is permanently released, the MFCF shall prepare and place in the resident's record a summary of findings, progress, and plans and forward copies to concerned care providers in the new environment. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-140, filed 10/21/80.]

WAC 275-39-145 Transfer to another facility. (1) Except as provided in subsection (2) of this section, the MFCF shall have in effect a transfer agreement with one or more hospitals sufficiently close by to make feasible the prompt transfer of the resident and his/her records to the hospital and to support a working arrangement between the MFCF and the hospital for providing inpatient hospital services to residents when needed.
(2) When a resident is transferred to another facility, the MFCF making the transfer shall:
   (a) Record the reason for the transfer and a summary of findings, progress, and plans; and
   (b) Except in an emergency, inform the resident and his parent or guardian in advance and obtain from the parent, guardian, or resident, as appropriate, written consent to the transfer. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-145, filed 10/21/80.]

WAC 275-39-150 Emergencies or death of a resident. (1) The MFCF shall notify promptly the resident's next of kin or guardian of any unusual occurrence concerning the resident, including serious illness, accident, or death.
(2) If any autopsy is performed after a resident's death:
   (a) A qualified physician who has no conflict of interest or loyalty to the MFCF shall perform the autopsy; and
   (b) The resident's family shall be told of the autopsy findings if they so desire by a qualified physician. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-150, filed 10/21/80.]

WAC 275-39-155 Resident's civil rights. The MFCF shall have written policies and procedures that insure the civil rights of all residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-155, filed 10/21/80.]

WAC 275-39-160 Residents' bill of rights. The MFCF shall have written policies and procedures that insure the following rights for each resident:
(1) Information.
   (a) Each resident and/or the resident's parent(s) or guardian, as appropriate, shall be fully informed, before or at admission, of his/her rights and responsibilities and of all rules governing resident conduct;
   (b) If the MFCF amends its policies on residents' rights and responsibilities and its rules governing conduct, each resident and/or resident's parent or guardian, as appropriate, in the MFCF at that time shall be informed;
   (c) Each resident and/or parent or guardian, as appropriate, shall acknowledge in writing receipt of the information and any amendments to it. A mentally retarded resident's written acknowledgement shall be witnessed by a third person;
   (d) Each resident and/or parent or guardian, as appropriate, shall be fully informed in writing of all services available in the MFCF. The MFCF shall provide this information either before or at the time of admission and on a continuing basis as changes occur in services during the resident's stay.
(2) Medical condition and treatment.
   (a) Each resident and/or parent or guardian, as appropriate, shall:
      (i) Be fully informed by a physician of his health and medical condition unless the physician decides that informing the resident is medically contraindicated;
      (ii) Be given the opportunity to participate in planning his/her total care and medical treatment;
      (iii) Be given the opportunity to refuse treatment; and
      (iv) Give informed, written consent before participating in experimental research;
   (b) If the physician decides that informing the resident of his/her health and medical condition is medically contraindicated, he shall document this decision in the resident's record.

[Title 275 WAC—p 62] (1980 Ed.)
(3) Transfer and discharge. Each resident shall be transferred or discharged only for:
   (a) Medical reasons;
   (b) His/her welfare or that of the other residents.
(4) Exercising rights. Each resident shall be:
   (a) Encouraged and assisted to exercise his/her rights as a resident of the MFCF and as a citizen; and
   (b) Allowed to submit complaints or recommendations concerning the policies and services of the MFCF to staff or to outside representatives of the resident's choice or both, free from restraint, interference, coercion, discrimination, or reprisal.
(5) Financial affairs. Each resident shall be allowed to manage his/her personal financial affairs. If a resident requests assistance from the MFCF in managing his/her personal financial affairs:
   (a) The request shall be in writing by the resident, parent or guardian; and
   (b) The MFCF shall comply with the recordkeeping requirements of WAC 275-39-170(4), (5).
(6) Freedom from abuse and restraints.
   (a) Each resident shall be free from mental and physical abuse;
   (b) Each resident shall be free from chemical and physical restraints unless the restraints are:
      (i) Authorized by a physician in writing for a specified period of time not to exceed eight hours;
      (ii) Used in an emergency under the following conditions:
         (A) The use is necessary to protect the resident from injuring himself/herself or others.
         (B) The use is authorized by a professional staff member identified in the written policies and procedures of the facility as having authority to do so.
   (C) The use is reported promptly to the resident's physician by that staff member; or
   (iii) Used during a behavior modification session for a mentally retarded resident under the following conditions:
      (A) The use is authorized by a qualified mental retardation professional.
      (B) The parent, legal guardian, and/or resident, as appropriate, gives his/her informed consent to the use of restraints or aversive stimuli.
(7) Privacy.
   (a) Each resident shall be treated with consideration, respect, and full recognition of his/her dignity and individuality;
   (b) Each resident shall be given privacy during treatment and care of personal needs;
   (c) Each resident's records, including information in an automatic data bank, shall be treated confidentially;
   (d) Each resident, parent or guardian shall give written consent before the MFCF may release information from his/her record to someone not otherwise authorized by law to receive it.
(8) Work. No resident may be required to perform services for the MFCF.
(9) Freedom of association and correspondence. Each resident shall be allowed to:
   (a) Communicate, associate, and meet privately with individuals of his/her choice, unless this infringes on the rights of another resident; and
   (b) Send and receive personal mail unopened.
(10) Activities. Each resident shall be allowed to participate in social, religious, and community group activities unless a qualified mental retardation professional:
   (a) Determines that these activities are contraindicated for a mentally retarded resident; and
   (b) Documents that determination in the resident's record.
(11) Personal possessions. Each resident shall be allowed to retain and use his/her personal possessions and clothing as space permits. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-160, filed 10/21/80.]

WAC 275-39-165 Delegation of rights and responsibilities. (1) The MFCF shall have written policies and procedures that provide that all rights and responsibilities of a resident pass to the resident's guardian, next of kin, or sponsoring agency or agencies, as appropriate, if the resident:
   (a) Is adjudicated incompetent under state law; or
   (b) Is determined by the interdisciplinary team to be incapable of understanding his/her rights and responsibilities.
   (2) If the resident is determined to be incapable of understanding his/her rights and responsibilities, the interdisciplinary team that made the determination shall record the specific reason in the resident's record. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-165, filed 10/21/80.]

WAC 275-39-170 Resident finances. (1) The MFCF shall have written policies and procedures that protect the financial interests of each resident.
   (2) If large sums accrue to a resident, the policies and procedures shall provide for appropriate protection of these funds and for counseling the resident concerning their use.
   (3) Each resident shall be allowed to possess and use money in normal ways or be learning to do so.
   (4) The MFCF shall maintain a current, written financial record for each resident that includes written receipts for:
      (a) All personal possessions and funds received by or deposited with the MFCF; and
      (b) All disbursements made to or for the resident.
   (5) The financial record shall be available to the resident and his/her family. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-170, filed 10/21/80.]

WAC 275-39-175 Staff-resident communications. The MFCF shall provide for effective staff, resident and parent or guardian participation and communication in the following manner.
   (1) The MFCF shall establish appropriate standing committees including but not limited to human rights, research review, and infection.
WAC 275-39-180 Communication with residents and parents. (1) The MFCF shall have an active program of communication with the residents and their families or guardians that includes:

(a) Keeping residents' families or legal guardians informed of resident activities that may be of interest to them or of significant changes in the resident's condition;

(b) Answering communications from resident's relatives promptly and appropriately;

(c) Allowing close relatives and guardians to visit at any reasonable hour, without prior notice, unless the resident's needs limit visits;

(d) Allowing parents or guardians to visit any part of the MFCF that provides services to residents;

(e) Encouraging frequent and informal visits home by the residents within the social leave parameters prescribed in WAC 388-88-117 unless medically contraindicated; and

(f) Having rules that make it easy to arrange visits home.

(2) The MFCF shall insure that individuals allowed to visit the MFCF under subsection (1)(c) of this section do not infringe on the privacy and rights of the other residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-180, filed 10/21/80.]

WAC 275-39-185 Dental services—Diagnostic services. (1) The MFCF shall provide each resident with comprehensive diagnostic dental services that include a complete extraoral and intraoral examination, using all diagnostic aids necessary to properly evaluate the resident's oral condition, not later than one month after a resident's admission to the MFCF unless he/she received the examination within six months before admission.

(2) The MFCF shall review the results of the examination and enter them in the resident's record. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-185, filed 10/21/80.]

WAC 275-39-190 Dental services—Treatment. The MFCF shall provide each resident with comprehensive dental treatment that includes:

(1) Provision for emergency dental treatment on a twenty-four hour-a-day basis by a qualified dentist; and

(2) A system that assures that each resident is reexamined as needed but at least once a year. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-190, filed 10/21/80.]

WAC 275-39-195 Dental services—Oral health education and training. The MFCF shall provide education and training in the maintenance of oral health that includes:

(1) A dental hygiene program that informs residents and all staff on nutrition and diet control measures and residents and living unit staff on proper oral hygiene methods; and

(2) Instruction of parents or guardians in the maintenance of proper oral hygiene in appropriate instances, for example when a resident leaves the MFCF. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-195, filed 10/21/80.]

WAC 275-39-200 Dental services—Records. The MFCF shall:

(1) Keep a permanent dental record for each resident;

(2) Enter a summary dental progress report at stated intervals in each resident's record kept in the living unit;

(3) Provide a copy of the permanent dental record to any facility to which the resident is transferred. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-200, filed 10/21/80.]

WAC 275-39-205 Dental services—Formal arrangements. The MFCF shall have a formal arrangement for providing each resident with the dental services required pursuant to WAC 275-39-185 through 275-39-210. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-205, filed 10/21/80.]

WAC 275-39-210 Dental services—Staff. (1) The MFCF shall have enough qualified dental personnel and support staff to carry out the dental services program.

(2) Each dentist and dental hygienist providing services to the facility shall be licensed to practice in the state. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-210, filed 10/21/80.]

WAC 275-39-211 Educational services. The MFCF shall assist residents in participation in educational activities provided by the local school district as appropriate. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-211, filed 10/21/80.]

WAC 275-39-215 Food and nutrition services—Required services. The MFCF food services should be under the direction of a registered dietician consultant and shall include:

(1) Menu planning;

(2) Initiating food orders or requisitions;

(3) Establishing specifications for food purchases and insuring that the specifications are met;

(4) Storing and handling food;

(5) Preparing and serving food;

(6) Maintaining sanitary standards in compliance with state and local regulations; and


WAC 275-39-220 Food and nutrition services—Diet requirements. (1) The MFCF shall provide each resident with a nourishing, well-balanced diet.

(1980 Ed.)
(2) Modified diets shall be:
(a) Prescribed by the resident's interdisciplinary team with a record of the prescription kept on file;
(b) Planned, prepared, and served by individuals who have received adequate instruction; and
(c) Periodically reviewed and adjusted as needed.
(3) The MFCF shall furnish a nourishing, well-balanced diet, in accordance with the recommended dietary allowances of the food and nutrition board of the National Research Council, National Academy of Sciences, adjusted for age, sex, activity, and disability, unless otherwise required by medical needs.
(4) A resident may not be denied a nutritionally adequate diet as a form of punishment. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-220, filed 10/21/80.]

WAC 275-39-225 Food and nutrition services—Meal service. (1) The MFCF must serve at least three meals daily, at regular times comparable to normal mealtimes in the community but consistent with the resident's age and medical condition and with:
(a) Not more than fourteen hours between a substantial evening meal and breakfast of the following day; and
(b) Not less than ten hours between breakfast and the evening meal of the same day.
(2) Food shall be served:
(a) In appropriate quantity;
(b) At appropriate temperature;
(c) In a form consistent with the developmental level of the resident; and
(d) With appropriate utensils.
(3) Food served and uneaten shall be discarded. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-225, filed 10/21/80.]

WAC 275-39-230 Food and nutrition services—Menus. (1) Menus shall:
(a) Be written in advance;
(b) Provide a variety of foods at each meal; and
(c) Be different for the same days of each week; adjusted for seasonal changes; and be age appropriate.
(2) The MFCF shall keep on file, for at least two years, records of menus as served and of food purchased. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-230, filed 10/21/80.]

WAC 275-39-235 Food and nutrition services—Food storage. The MFCF shall store:
(1) Dry or staple food items at least twelve inches above the floor, in a ventilated room not subject to sewage or waste water backflow or contamination by condensation, leakage, rodents or vermin; and
(2) Perishable foods at proper temperatures to conserve nutritive values. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-235, filed 10/21/80.]

WAC 275-39-240 Food and nutrition services—Work areas. The MFCF shall:
(1) Have effective procedures for cleaning all equipment and work areas; and
(2) Provide handwashing facilities, including hot and cold water, soap, and paper towels adjacent to work areas. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-240, filed 10/21/80.]

WAC 275-39-245 Food and nutrition services—Dining areas and service. The MFCF shall:
(1) Serve meals for all residents, including the mobile nonambulatory, in dining rooms, unless otherwise required for health reasons or by decision of the team responsible for the resident's program;
(2) Provide table service for all residents who can and will eat at a table, including residents in wheelchairs;
(3) Equip areas with table, chairs, eating utensils, and dishes designed to meet the developmental needs of each resident;
(4) Supervise and staff dining rooms adequately to direct self-help dining procedures and to assure that each resident receives enough food; and
(5) Dining area should be large enough to allow the children to eat together. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-245, filed 10/21/80.]

WAC 275-39-250 Food and nutrition services—Training of residents and direct-care staff. (1) The MFCF shall provide residents with systematic training to develop appropriate eating skills, using special eating equipment and utensils if it serves the developmental process.
(2) Direct-care staff shall be trained in and use proper feeding techniques.
(3) The MFCF shall assure that residents eat in an upright position unless medically contraindicated, and in a manner consistent with their developmental needs. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-250, filed 10/21/80.]

WAC 275-39-255 Food and nutrition services—Staff. (1) The MFCF shall have enough competent personnel to meet the food and nutrition needs of residents.
(2) A dietitian who directs food and nutrition services as a consultant to the MFCF shall meet the qualification requirements of WAC 275-39-260.
(3) The MFCF shall designate a staff member who is trained or experienced in food management or nutrition to direct food and nutrition services in their MFCF who shall meet the requirements of a food service supervisor in WAC 248-14-230. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-255, filed 10/21/80.]

WAC 275-39-260 Food and nutrition services—Dietitian (qualified consultant). A person who:
(1) Is eligible for registration by the American dietetic association under its requirements in effect on January 17, 1974; or

(1980 Ed.)
(2) Has a baccalaureate degree with major studies in food and nutrition, dietetics, or food service management; has one year of supervisory experience in the dietetic service of a residential health care institution; and participates annually in continuing dietetic education. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-260, filed 10/21/80.]

WAC 275-39-265 Medical services—Required services. The MFCF shall:
(1) Provide medical services through direct contact between physicians and residents and through contact between physicians and individuals working with the residents;
(2) Provide health services including treatment, medications, diet, and any other health service prescribed or planned for the resident twenty-four hours a day;
(3) Have available electroencephalographic services as needed;
(4) Have enough space, facilities, and equipment to fulfill the medical needs of residents;
(5) Provide evidence, such as utilization review committee records, that hospital and laboratory services are used in accordance with professional standards;
(6) Provide a pediatrician trained in or experienced in treatment of chronic lung disease of infancy and childhood when appropriate; a pediatrician trained in or experienced in rehabilitation medicine for infants and children when appropriate; who; and/or a pediatrician trained in or experienced in neurology when appropriate; who must:
   (a) Participate in the interdisciplinary team process including but not limited to:
      (i) Admission evaluation study, plan, and placement of the child at time of admission;
      (ii) The continuing evaluation study and program design;
      (iii) The development of a discharge plan;
      (iv) The referral to appropriate community facilities;
      (b) At least weekly participate in reevaluation of the type, extent and quality of services and programming;
      (c) Consult with other physicians, nursing staff and respiratory therapy staff;
      (d) Maintain clearly legible records for each resident;
      (7) Provide emergency physicians or emergency room facilities and services and, if appropriate, such facilities and services shall be available within thirty minutes. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-265, filed 10/21/80.]

WAC 275-39-270 Medical services—Goals and evaluations. (1) Physicians shall participate, when appropriate, in:
(a) The continuing interdisciplinary evaluation of individual residents for the purposes of beginning, monitoring, and following up on individualized habilitation programs; and
(b) The development for each resident of a detailed, written statement of:
   (i) Case management goals for physical and mental health, education, and functional and social competence; and
   (ii) A management plan detailing the various habilitation or rehabilitation services to achieve those goals, with clear designation of responsibility for implementation.
(2) The MFCF shall review and update the statement of treatment goals and management plans as needed, but at least quarterly, to insure:
   (a) Continuing appropriateness of the goals;
   (b) Consistency of management methods with the goals; and
   (c) The achievement of progress toward the goals. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-270, filed 10/21/80.]

WAC 275-39-275 Medical services—Arrangements with outside resources. The MFCF shall:
(1) Have a formal arrangement for providing each resident with medical care that includes care for medical emergencies on a twenty-four hour-a-day basis;
(2) Designate a physician, licensed to practice medicine in the state, to be responsible for maintaining the general health conditions and practices of the MFCF; and
(3) Maintain effective arrangements, for residents to receive prompt medical and remedial services that they require but that the MFCF does not regularly provide. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-275, filed 10/21/80.]

WAC 275-39-280 Medical services—Preventive health services. The MFCF shall have preventive health services for residents that include:
(1) Means for the prompt detection and referral of health problems, through adequate medical surveillance, periodic inspection, and regular medical examinations;
(2) Periodic, but not less than annual physical examinations that may include:
   (a) Examination of vision, hearing and dentition;
   (b) Screening laboratory examinations as determined necessary by the physician, and special studies when needed;
(3) Immunizations, using as a guide the recommendations of the public health service advisory committee on immunization practices and of the committee on the control of infectious diseases of the American Academy of Pediatrics;
(4) Tuberculosis control, appropriate to the MFCF population, in accordance with the recommendations of the American College of Chest Physicians or the section on diseases of the chest of the American Academy of Pediatrics or both;
(5) Reporting of communicable diseases and infections in accordance with law; and

[Title 275 WAC—p 66]
WAC 275-39-285 Medical services—Physician (qualified consultant). A physician is a person who is licensed to practice medicine in the state of Washington, and:

(1) Has graduated from a four year school of medicine approved by the Liaison Committee for Education of the American Medical Association or of the American College of Osteopathy.

(2) If a pediatrician, is qualified by the American Board of Pediatrics, Inc., or has equivalent qualifications or experience and at least two years of experience in developmental pediatrics;

(3) If a pulmonary diseases expert, is qualified by American Board of Pediatrics, Inc., as a diplomate of the Subboard for Neonatology or has equivalent qualifications;

(4) If a psychiatrist, is qualified by the American Board of Pediatrics, Inc., and the American Board of Rehabilitation Medicine, or:

(a) Is qualified by the American Board of Rehabilitation Medicine, Inc., and has at least two years experience in pediatric medicine or pediatric rehabilitation;

(b) Is qualified by the American Board of Pediatrics, Inc., and has at least two years experience in rehabilitation of children; or

(c) Has equivalent experience;

(5) If a neurologist, is qualified by the American Board of Neurologists and Psychiatry, Inc., or has equivalent experience and at least two years experience in pediatric neurology and management of seizure disorders. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-290, filed 10/21/80.]

WAC 275-39-290 Nursing services—Required services. The MFCF shall provide residents with nursing services, in accordance with their needs, that include, as appropriate, the following:

(1) Registered nurse participation in:

(a) Interdisciplinary team process including but not limited to:

(i) The admission evaluation study, plan, and placement of the resident at the time of admission;

(ii) The continuing evaluation study and program design;

(iii) The development of the discharge plan; and

(iv) The referral to appropriate community resources.

(b) At least weekly reevaluation of the type, extent, and quality of services and programming;

(c) Administration of and daily observation of the effects of seizure medications;

(d) Administration of and daily observation of the effects of cardiotoxic and diuretic medications;

(e) Management and observation of seizures, apnea and cardiac arrest;

(f) Management of ventilated dependent children;

(g) Management of tracheostomies;

(h) Management of ventilated dependent children without the assistance of mechanical devices for a period of time up to thirty minutes in order to provide for intermittent care;

(i) Evaluation of neurological, pulmonary, nutritional and cardiac status, as well as, growth and development of children;

(j) Evaluation of common acute illnesses of children;

(k) Provision of well child care;

(l) Maintenance of clearly legible records for each child.

(2) Training in habits of personal hygiene, family life, and sex education that includes but is not limited to family planning and venereal disease counseling.

(3) Control of communicable diseases and infections through:

(a) Identification and assessment;

(b) Reporting to medical authorities;

(c) Implementation of appropriate protective and preventive measures;

(d) Development of a written nursing services plan for each resident as part of the total habilitation program; and

(e) Modification of the nursing plan, in terms of the resident's daily needs, at least semiannually or more frequently where needed, in accordance with developmental changes. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-290, filed 10/21/80.]

WAC 275-39-295 Nursing services—Inservice training. (1) A registered nurse with experience in pediatric pulmonary medicine, pediatric rehabilitation, occupational and physical therapy, respiratory therapy, and seizure disorders of children shall participate, as appropriate, in the planning and implementation of training of the MFCF's personnel.

(2) The MFCF shall have direct-care personnel trained in:

(a) Detecting signs of illness or dysfunction that warrant medical or nursing intervention;

(b) Basic skills required to meet the health needs and problems of the residents;

(c) First aid for accident or illness;

(d) Management and observation of seizures, apnea and cardiac arrest;

(e) Management of ventilators including tracheostomy care;

(f) Management of respiratory dependent children without mechanical assistance for up to thirty minutes (CPR certified); and


WAC 275-39-300 Nursing services—Staff. (1) The MFCF shall have available enough nursing staff, which may include currently licensed practical nurses and other supporting personnel, to carry out the various nursing services.

(2) The individual responsible for the delivery of nursing services shall have knowledge and experience in
the field of developmental disabilities, pediatric medicine, acute pediatric care, ventilator management, sudden demise, chronic lung diseases of childhood, pediatric rehabilitation, and well child care.

(3) Nursing service personnel at all levels of experience and competence shall be:

(a) Assigned responsibilities in accordance with their qualifications. Medications must be administered and care of ventilated dependent infants and children must be provided by registered nurses only;

(b) Delegated authority commensurate with their responsibility; and

(c) Provided appropriate professional nursing supervision. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-300, filed 10/21/80.]

WAC 275-39-305 Nursing services—Supervision of health services. (1) The MFCF shall have a registered nurse to supervise the health services full time, seven days a week, on all shifts who shall have all the qualifications of a staff nurse as stated in WAC 275-39-315 and in addition shall have at least two years experience in acute care pediatric and developmental nursing.

(2) The MFCF shall have responsible staff members on duty and awake twenty-four hours a day to take prompt, appropriate action in case of injury, illness, fire, or other emergency.

(3) The health services supervisor is responsible for developing, supervising the implementation of, reviewing, and revising a written health care plan for each resident that is:

(a) Developed and implemented according to the instructions of the attending or staff physician; and

(b) Reviewed and revised as needed but not less often than quarterly. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–305, filed 10/21/80.]

WAC 275-39-310 Nursing services—Director of nursing services. The director of nursing services shall be a registered nurse who is licensed by the state of Washington, and has one year of additional education or experience in nursing service administration, as well as additional education or experience in pediatric, rehabilitative, pulmonary, and developmental nursing. The director of nursing must participate annually in continuing nursing education. The director of nursing shall also fulfill the requirements of a staff nurse, see WAC 275–39–315. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–310, filed 10/21/80.]

WAC 275-39-315 Nursing services—A staff nurse. A staff nurse shall be a registered nurse licensed in the state of Washington and:

(1) A graduate of a nursing program certified by the American Nursing Association; or

(2) A graduate of a college of nursing with a baccalaureate degree approved by the American Nursing Association; and

(3) If in a MFCF, caring for ventilator or tracheostomy dependent children, the nurse must have an additional two years training or experience in the care of chronic lung disease of children; or

(4) If in any MFCF, caring for medically fragile children other than ventilator dependent children, the nurse must have training or equivalent experience of at least one year in:

(a) Infant and child development and well child care;

(b) Rehabilitation nursing of children;

(c) Pediatric CPR;

(d) Evaluation of and management of neurological disorders and seizures; and


WAC 275–39–320 Pharmacy services—Required services. The MFCF shall:

(1) Make formal arrangements for qualified pharmacy services, including provision for emergency service;

(2) Have a current pharmacy manual that:

(a) Includes policies and procedures and defines the functions and responsibilities relating to pharmacy services; and

(b) Is revised annually to keep abreast of current developments in services and management techniques;

(3) Have a formulary system consistent with DSHS policies approved by a responsible physician and pharmacist and other appropriate staff. Copies of the MFCF's formulary system and of the American Hospital Formulary Service shall be located and available in the facility;

(4) Modify all drugs, containers, and delivery vehicles to be appropriate for and safe from infants and children;

(5) Stock syrup of ipecac; and


WAC 275–39–325 Pharmacy services—Pharmacist. (1) Pharmacy services shall be provided under the direction of a qualified licensed pharmacist.

(2) The pharmacist shall:

(a) When a resident is admitted, obtain, if possible, a history of prescription and nonprescription drugs used and enter this information in the resident’s record;

(b) Receive the original, or a direct copy, of the physician's drug treatment order;

(c) Maintain for each resident an individual record of all prescription and nonprescription medications dispensed, including quantities and frequency of refills;

(d) Participate, as appropriate, in the continuing interdisciplinary evaluation of individual residents for the purposes of beginning, monitoring, and following up on individualized habilitation programs; and

(e) Establish quality specifications consistent with DSHS policies for drug purchases and insure that they are met.

(3) A pharmacist or registered nurse shall weekly review the medication record of each resident for potential
adverse reactions, allergies, interactions, contradictions, rationality and laboratory test modifications and advise the physician of any recommended changes with reasons and with an alternate drug regimen.

(4) As appropriate to the MFCF, the responsible pharmacist, physician, nurse, and other professional staff shall write policies and procedures that govern the safe administration and handling of all drugs. The following policies and procedures shall be included:

(a) There shall be a written policy governing the self-administration of drugs, whether prescribed or not.

(b) The pharmacist or an individual under his supervision shall compound, package, label, and dispense drugs including samples and investigational drugs. Proper controls and records shall be kept of these processes.

(c) Each drug shall be identified up to the point of administration.

(d) Whenever possible, the pharmacist shall dispense drugs that require dosage measurements in a form ready to be administered to the resident.

(5) The pharmacist shall comply with all applicable regulations promulgated by the Washington State Board of Pharmacy, not otherwise stated above. [Statutory Authority: RCW 74.26.040, 80-15-083 (Order 1557), § 275-39-330, filed 10/21/80.]

WAC 275-39-330 Pharmacy services—Drugs and medications. (1) A medication shall be used only by the resident for whom it is issued. Only appropriately trained and licensed staff may administer drugs.

(2) Any drug that is discontinued or outdated and any container with a worn, illegible, or missing label shall be returned to the pharmacy for proper disposition.

(3) The MFCF shall have:

(a) An automatic stop order on all drugs, to include a notification system to the physician or nurse prior to discontinuance of any drug;

(b) A drug recall procedure that can be readily used;

(c) A procedure for reporting adverse drug reactions to the food and drug administration; and

(d) An emergency kit available to each living unit and appropriate to the needs of its residents and approved by the physician(s) in charge.

(4) Medication errors and drug reactions shall be recorded and reported immediately to the practitioner who ordered the drug. [Statutory Authority: RCW 74.26-040. 80-15-083 (Order 1557), § 275-39-330, filed 10/21/80.]

WAC 275-39-335 Pharmacy services—Drug storage. The MFCF shall:

(1) Store drugs under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security;

(2) Store poisons, drugs used externally, and drugs taken internally on separate shelves in a locked or in separate locked cabinets at all locations;

(3) Keep medication that is stored in a refrigerator containing other items in a separate compartment with proper security;

(4) Keep all drugs under lock and key unless an authorized individual is in attendance;

(5) If there is a drug storeroom separate from the pharmacy, keep a perpetual inventory of receipts and issues of all drugs from that storeroom; and

(6) Meet the drug security requirements of federal and state laws that apply to storerooms, pharmacies, and living units. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-335, filed 10/21/80.]

WAC 275-39-340 Physical and occupational therapy services—Required services. (1) The MFCF shall provide physical and occupational therapy services through direct contact between therapists and residents and through contact between therapists and individuals involved with the residents.

(2) Physical and occupational therapy staff shall provide treatment programs that are designed to:

(a) Preserve and improve abilities for independent function, such as range of motion, strength, tolerance, coordination, and activities of daily living; and

(b) Prevent, insofar as possible, irreducible or progressive disabilities through means such as the use of orthotic and prosthetic appliances, assistive and adaptive devices, positioning, behavior adaptations, and sensory stimulation.

(3) The therapist shall:

(a) Work closely with the resident's primary physician and with other medical specialists to include physiatrists, orthopedists, neurologists, and experts in pulmonary disorders all with pediatric training or experience;

(b) Record regularly and evaluate quarterly the treatment training progress; and

(c) Use the treatment training progress as the basis for continuation or change in the resident's program.

(4) The therapist shall participate in:

(a) The interdisciplinary team process including but not limited to:

(i) Admission evaluation study and plan;

(ii) The continuing evaluation study, program design, and placement of the resident at the time of admission;

(iii) The development of a discharge plan;

(iv) The referral to appropriate community facilities;

(b) Staff training;

(c) At least weekly reevaluation of the type, extent and quality of services and programming, including but not limited to:

(i) Feeding;

(ii) Gross motor;

(iii) Fine motor;

(iv) Toilet training;

(v) Self-care skills, grooming, dressing, and mobility;

(d) Maintenance of clearly legible records for each resident. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-340, filed 10/21/80.]

WAC 275-39-345 Physical and occupational therapy services—Records and evaluations. The MFCF shall have evaluation results, treatment objectives, plans and procedures, and continuing observations of treatment progress:

(1980 Ed.)
(1) Recorded accurately, summarized, and communicated to all relevant parties;

(2) Used in evaluating progress; and

(3) Included in the resident’s record kept in the living unit. [Statutory Authority: RCW 74.26.040, 80–15–083 (Order 1557), § 275–39–345, filed 10/21/80.]

WAC 275–39–350 Physical and occupational therapy services—Staff and facilities. (1) The MFCF shall have available enough qualified staff and support personnel to carry out the various physical and occupational therapy services in accordance with stated goals and objectives.

(2) Physical and occupational therapy personnel shall be:

(a) Assigned responsibilities in accordance with their qualifications;

(b) Delegated authority commensurate with their responsibilities; and

(c) Provided professional direction and consultation.

(3) Therapy assistants shall work under the supervision of a qualified therapist.


(5) The MFCF shall provide enough space and equipment and supplies for efficient and effective physical and occupational therapy services. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–350, filed 10/21/80.]

WAC 275–39–355 Physical and occupational therapy services—Occupational therapist (qualified consultant). An occupational therapist is a person who:

(1) Is a graduate of an occupational therapy curriculum accredited jointly by the Council on Medical Education of the American Medical Association and the American Occupational Therapy Association;

(2) Has two years of professional pediatric experience as an occupational therapist and is registered with the national association. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–355, filed 10/21/80.]

WAC 275–39–360 Physical and occupational therapy services—Occupational therapy assistant. An occupational therapy assistant is a person who:

(1) Has graduated from a certified occupational therapy assistant two-year college program accredited by the American Occupational Therapy Association or has an equivalent work experience to qualify for subsection (2) of this section according to the standards of the American Occupational Therapy Association; and

(2) Has two years of pediatric experience as an occupational therapy assistant. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–360, filed 10/21/80.]

WAC 275–39–365 Physical and occupational therapy services—Physical therapist (qualified consultant). A physical therapist is a person who is licensed by the state of Washington as a physical therapist, and:

(1) Has graduated from a physical therapy curriculum approved by the American Physical Therapy Association, or by the Council on Medical Education and Hospitals of the American Medical Association, or jointly by the Council on Medical Education of the American Medical Association and the American Physical Therapy Association; or

(2) Prior to January 1, 1966, was admitted to membership by the American Physical Therapy Association, or was admitted to registration by the American Registry of Physical Therapists, or has graduated from a physical therapy curriculum in a four-year college or university; or

(3) Has two years of appropriate experience as a physical therapist, and has achieved a satisfactory grade on a proficiency examination approved by the secretary, except that such determinations of proficiency shall not apply with respect to persons initially licensed by the state or seeking qualification as a physical therapist after December 31, 1977; or

(4) Was licensed or registered prior to January 1, 1966, and prior to January 1, 1970, had fifteen years of full-time experience in the treatment of illness or injury through the practice of physical therapy in which services were rendered under the order and direction of attending and referring physicians; or

(5) If trained outside the United States, was graduated since 1928 from a physical therapy curriculum approved in the country in which the curriculum was located and in which there is a member organization of the World Confederation for Physical Therapy, meets the requirements for membership in a member organization of the World Confederation for Physical Therapy, has one year of experience under the supervision of an active member of the American Physical Therapy Association and has successfully completed a qualifying examination as prescribed by the American Physical Therapy Association; or

(6) Has at least one year experience in physical therapy with infants and children. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–365, filed 10/21/80.]

WAC 275–39–370 Physical and occupational therapy services—Physical therapist assistant. A physical therapist assistant is a person who:

(1) Has graduated from a two-year college–level program approved by the American Physical Therapy Association; or

(2) Has two years of appropriate experience as a physical therapist assistant, and has achieved a satisfactory grade on a proficiency examination approved by the secretary, except that such determinations of proficiency shall not apply with respect to persons seeking initial qualification as a physical therapist assistant after December 31, 1977. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–370, filed 10/21/80.]
WAC 275-39-375 Psychological services—Required services. The MFCF shall:

1. Provide psychological services through personal contact between psychologists and residents and through contact between psychologists and individuals involved with the residents;
2. Have available enough qualified staff and support personnel to furnish the following psychological services based on need:
   a. Psychological services for residents, including evaluation, consultation, therapy, and program development;
   b. Administration and supervision of psychological services;
   c. Staff training;
   d. Maintain clearly legible records for each child;
3. The psychologist shall when appropriate participate in the weekly reevaluation of the type, extent, and quality of services and programming. [Statutory Authority: RCW 74.26.040. 80---15-083 (Order 1557), § 275-39-375, filed 10/21/80.]

WAC 275-39-380 Psychological services—Psychologist. Psychologists shall:

1. Have at least a master's degree from an accredited program and experience or training in the field of mental retardation and early childhood development;
2. Must be licensed as a psychologist or carry a certificate of qualification issued by the state of Washington, department of licensing, professional licensing division;
3. Participate, when appropriate, in the continuing interdisciplinary evaluation of each individual resident, for the purposes of beginning, monitoring, and following up on the resident's individualized habilitation program;
4. Report and disseminate evaluation results in a manner that:
   a. Promptly provides information useful to staff working directly with the resident; and
   b. Maintains accepted standards of confidentiality;
5. Participate, when appropriate, in the development of written, detailed, specific, and individualized habilitation program plans that:
   a. Provide for periodic review, followup, and updating; and
   b. Are designed to maximize each resident's development and acquisition of the following: Perceptual skills, sensorimotor skills, self-help skills, communication skills, social skills, self-direction, emotional stability, and effective use of time, including leisure time. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275--39--380, filed 10/21/80.]

WAC 275-39-385 Recreational services—Required services. The MFCF shall:

1. Coordinate recreational services with other services and programs provided to each resident, in order to:
   a. Make the fullest possible use of the MFCF's resources; and
   b. Maximize benefits to the residents.
2. Design and construct or modify recreation areas and facilities so that all residents, regardless of their disabilities, have access to them; and
3. Provide recreation equipment and supplies in a quantity and variety that is sufficient to carry out the stated objectives of the activities programs and are age appropriate. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275--39--385, filed 10/21/80.]

WAC 275-39-390 Recreational services—Records. The MFCF's resident records shall include:

1. Periodic surveys of the residents' recreation interests; and
2. The extent and level of the residents' participation in the recreation program. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275--39--390, filed 10/21/80.]

WAC 275-39-395 Recreational services—Staff. (1) The MFCF shall have enough qualified staff and support personnel available to carry out the various recreation services in accordance with stated goals and objectives.

2. Staff conducting the recreation program shall have:
   a. A bachelor's degree in recreation;
   b. Demonstrated proficiency and experience of one year in conducting activities in one or more pediatric recreation program areas;
   c. Experience working with an interdisciplinary team. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275--39--395, filed 10/21/80.]

WAC 275-39-400 Residential services—Responsibilities of living unit staff. (1) The living unit staff shall make care and development of the residents their primary responsibility. This includes training each resident in the activities of daily living and in the development of self-help and social skills.

2. The MFCF shall insure that the staff are not diverted from their primary responsibilities by excessive housekeeping or clerical duties or other activities not related to resident care.
3. Members of the living unit staff from all shifts shall participate in appropriate activities relating to the care and development of the resident including, at least, referral, planning, initiation, coordination, implementation, follow-through, monitoring, and evaluation. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275--39--400, filed 10/21/80.]

WAC 275-39-405 Residential services—Resident evaluation and program plans. The MFCF shall have specific evaluation and program plans for each resident that are:

1. Available to direct care staff in each living unit; and
2. Reviewed by a member or members of an interdisciplinary professional team at least monthly with documentation of the review entered in the resident's
WAC 275-39-410 Residential services—Resident activities. (1) The MFCF shall develop an activity schedule for each resident that:
   (a) Does not allow periods of unscheduled activity to extend longer than two continuous hours;
   (b) Allows free time for individual or group activities using appropriate materials, as specified by the program team; and
   (c) Includes planned outdoor periods all year round.
   (2) Each resident’s activity schedule shall be available to direct care staff and be carried out daily.
   (3) The MFCF shall insure that a multiple-handicapped or nonambulatory resident:
       (a) Spends a major portion of the waking day out of bed;
       (b) Spends a portion of the waking day out of his bedroom area;
       (c) Has planned daily activity and exercise periods; and
       (d) Moves around by various methods and devices whenever possible.
   (4) The MFCF must record and evaluate behavior and seizure activity as indices of possible frustration associated with excess stimulation. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275-39-410, filed 10/21/80.]

WAC 275-39-415 Residential services—Personal possessions. The MFCF shall allow the residents to have personal possessions such as toys, books, pictures, games, radios, arts and crafts materials, religious articles, toiletries, jewelry, and letters. Personal items that are potentially hazardous or inappropriate or illegal shall be disallowed by the program director. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275-39-415, filed 10/21/80.]

WAC 275-39-420 Residential services—Control and discipline of residents. (1) The MFCF shall have written policies and procedures for the control and discipline of residents that are available in each living unit and to parents and guardians.
   (2) If appropriate, residents shall participate in formulating these policies and procedures.
   (3) The MFCF may not allow:
       (a) Corporal punishment of a resident;
       (b) A resident to discipline another resident, unless it is done as part of an organized self-government program conducted in accordance with written policy;
       (c) A resident to be placed in seclusion, defined as placement in a locked room;
       (d) Any disciplinary action that involves prohibition of any educational or social activity;
       (e) Use of physical restraint as a punishment;
       (f) Withholding or delaying adequate food or drink; or

WAC 275-39-425 Residential services—Physical restraint of residents. (1) Except as provided for behavior modification programs in WAC 275-39-440, the MFCF may allow the use of physical restraint on a resident only if absolutely necessary to protect the resident from injuring himself/herself or others.
   (2) The MFCF may not use physical restraint:
       (a) As punishment;
       (b) For the convenience of the staff; or
       (c) As a substitute for activities or treatment.
   (3) The MFCF shall have a written policy that specifies:
       (a) How and when physical restraint may be used;
       (b) The staff members who shall authorize its use; and
       (c) The method for monitoring and controlling its use.
   (4) An order for physical restraint may not be in effect longer than eight hours.
   (5) Appropriately trained staff shall check a resident placed in a physical restraint at least every thirty minutes and keep a record of these checks.
   (6) A resident who is in a physical restraint shall be given an opportunity for motion and exercise for a period of not less than ten minutes during each two hours of restraint. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275-39-425, filed 10/21/80.]

WAC 275-39-430 Residential services—Mechanical devices used for physical restraint. (1) Mechanical devices used for physical restraint shall be designed and used in a way that causes the resident no physical injury and the least possible physical discomfort.
   (2) A totally enclosed crib or a barred enclosure is a physical restraint.
   (3) Mechanical supports used to achieve proper body position and balance are not physical restraints. However, mechanical supports shall be designed and applied:
       (a) Under the supervision of a qualified professional; and
       (b) In accordance with principles of good body alinement, concern for circulation, and allowance for change of position. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275-39-430, filed 10/21/80.]

WAC 275-39-435 Residential services—Chemical restraint of residents. The MFCF may not use chemical restraint:
   (1) Excessively;
   (2) As punishment;
   (3) For the convenience of the staff;
   (4) As a substitute for activities or treatment; or
   (5) In quantities that interfere with a resident’s habituation program. [Statutory Authority: RCW 74.26.040. 80--15--083 (Order 1557), § 275-39-435, filed 10/21/80.]
WAC 275-39-440 Residential services—Behavior modification programs. (1) For purposes of this section:
(a) "Aversive stimuli" means things or events that the resident finds unpleasant or painful that are used to immediately discourage undesired behavior;
(b) "Time out" means a procedure designed to improve a resident's behavior by removing positive reinforcement when his/her behavior is undesirable.
(2) Behavior modification programs involving the use of aversive stimuli or time-out devices shall be:
(a) Reviewed and approved by the MFCF's human rights committee; facility committee on behavior therapy; and the qualified mental retardation professional;
(b) Conducted only with the consent of the affected resident's parents or legal guardian; and
(c) Described in written plans that are kept on file in the MFCF.
(3) A physical restraint used as a time-out device may be applied only during behavior modification exercises and only in the presence of the trainer.
(4) For time-out purposes, time-out devices, and aversive stimuli may not be used for longer than one hour, and then only during the behavior modification program and only under the supervision of the trainer. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-440, filed 10/21/80.]

WAC 275-39-445 Residential services—Resident clothing. The MFCF shall insure that each resident:
(1) Has enough neat, clean, suitable, and seasonable clothing which is age and size appropriate;
(2) Has his/her own clothing marked with his/her name when necessary;
(3) Is dressed daily in his/her own clothes unless this is contraindicated in written medical orders;
(4) Is trained and encouraged, as appropriate, to:
(a) Select his/her daily clothing;
(b) Dress himself or herself;
(c) Change his/her clothes to suit his/her activities; and
(5) Has storage space for his/her clothing that is accessible to him/her even if he/she is in a wheelchair. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-445, filed 10/21/80.]

WAC 275-39-450 Residential services—Health, hygiene, grooming and toilet training. (1) Each resident shall be trained to be as independent as possible in daily health, hygiene, and grooming practices, including bathing, brushing teeth, shampooing, combing and brushing hair, shaving, and caring for toenails and fingernails.
(2) Each resident who does not eliminate appropriately and independently shall be in a regular, systematic toilet training program and a record shall be kept of his/her progress in the program.
(3) A resident who is incontinent shall be bathed or cleaned immediately upon voiding or soiling, unless specifically contraindicated by the training program, and all soiled items shall be changed.
(4) The MFCF shall establish procedures for:
(a) Weighing each resident monthly unless the special needs of the resident require more frequent weighing;
(b) Measuring the height of each resident every three months until the resident reaches the age of maximum growth;
(c) Maintaining weight and height records for each resident; and
(d) Insuring that each resident maintains a normal weight.
(5) At least every three days, a physician shall review orders prescribing bed rest or prohibiting a resident from being outdoors.
(6) The MFCF shall furnish, maintain in good repair, and encourage the use of dentures, eyeglasses, hearing aids, braces, and other aids prescribed for a resident by an appropriate specialist. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-450, filed 10/21/80.]

WAC 275-39-455 Residential services—Grouping and organization of living units. (1) The MFCF may not house residents of grossly different ages, developmental levels, and social needs in close physical or social proximity unless the housing is planned to promote the growth and development of all those housed together.
(2) The MFCF may not segregate residents on the basis of their physical handicaps. It shall integrate residents who are mobile nonambulatory, deaf, blind, epileptic, and so forth with others of comparable social and intellectual development.

WAC 275-39-460 Residential services—Resident living staff. (1) Each resident living unit shall have sufficient, appropriately qualified, and adequately trained personnel who must be certified by the Washington state board of health or enrolled in a certified training program within twenty days of the commencement of employment to conduct the resident living program.
(2) The MFCF shall have an individual, whose training and experience is appropriate to the program, who is administratively responsible for resident living personnel.
(3) Each resident living unit, regardless of organization or design, shall have, as a minimum, overall staff—resident ratios (allowing for a five—day work week plus holiday, vacation, and sick time) as follows unless program needs justify otherwise:
For units serving children under the age of six years, severely and profoundly retarded, severely physically handicapped, or residents who are aggressive, assaultive, or security risks, or who manifest severely hyperactive or psychotic-like behavior, the overall ratio is 1 to 2. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-460, filed 10/21/80.]

(1980 Ed.)
WAC 275-39-465 Residential services—Resident living areas. The MFCF shall design and equip the resident living areas for the comfort and privacy of each resident. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-465, filed 10/21/80.]

WAC 275-39-470 Residential services—Resident bedrooms—Space and occupancy. Bedrooms shall:
1. Be at or above street grade level;
2. Be outside rooms;
3. Be equipped with or located near adequate toilet and bathing facilities;
4. Accommodate no more than four residents;
5. Measure at least eighty square feet per resident in multiple resident bedrooms and at least one hundred square feet in single resident bedrooms;
6. Measure at least one hundred square feet per resident for bedrooms housing ventilator dependent residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-470, filed 10/21/80.]

WAC 275-39-475 Residential services—Resident bedrooms—Furniture and bedding. The MFCF shall provide each resident with:
1. A separate bed of proper size and height for the convenience of the resident;
2. A clean, comfortable mattress;
3. Bedding appropriate to the weather and climate; and
4. Appropriate furniture, such as a chest of drawers, a table or desk, and an individual closet with clothes racks and shelves accessible to the resident. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-475, filed 10/21/80.]

WAC 275-39-480 Residential services—Storage space in living units. The MFCF shall provide:
1. Space for equipment for daily out-of-bed activity for all residents who are not yet mobile, except those who have a short-term illness or those few residents for whom out-of-bed activity is a threat to life;
2. Suitable storage space, accessible to the resident, for personal possessions, such as toys and prosthetic equipment; and
3. Adequate clean linen and dirty linen storage areas for each living unit. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-480, filed 10/21/80.]

WAC 275-39-485 Residential services—Resident bathrooms. The MFCF shall:
1. Have toilet and bathing facilities appropriate in number, size, and design to meet the needs of the residents;
2. Provide for individual privacy in toilets, bathtubs, and showers;
3. Equip bathrooms and bathroom appliances for use by the physically handicapped; and
4. Control the temperature of the hot water at all taps to which residents have access, by using thermostatically controlled mixing valves or other means, so that the water does not exceed 110 degrees Fahrenheit. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-485, filed 10/21/80.]

WAC 275-39-490 Residential services—Heating and ventilation in living units. (1) Each habitable room in the MFCF shall have:
(a) At least one window;
(b) Direct outside ventilation by means of windows, louvers, air conditioning, or mechanical ventilation horizontally and vertically.
(2) The MFCF shall:
(a) Maintain the temperature and humidity within a normal comfort range by heating, air conditioning or other means; and
(b) Use a heating apparatus that does not constitute a burn hazard to residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-490, filed 10/21/80.]

WAC 275-39-495 Residential services—Floors in living units. The MFCF shall have:
1. Floors that have a resilient, nonabrasive, and slip-resistant surface; and
2. Nonabrasive carpeting, if the living unit is carpeted and serves residents who crawl. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-495, filed 10/21/80.]

WAC 275-39-500 Residential services—Emergency lighting. If a living unit houses more than fifteen residents, it must have emergency lighting with automatic switches for stairs and exits. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-500, filed 10/21/80.]

WAC 275-39-505 Respiratory therapy services—Respiratory therapist (qualified consultant). A respiratory therapist is a person who:
1. Has graduated from a two year respiratory therapy school approved by the Council on Medical Education of the American Medical Association or has equivalent experience; and
2. Has at least one year experience with chronic respiratory problems of childhood. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-505, filed 10/21/80.]

WAC 275-39-510 Training and habilitation services—Required services. (1) The MFCF shall provide training and habilitation services to all residents, regardless of age, degree of retardation, or accompanying disabilities or handicaps.
(2) Individual evaluations of residents shall:
(a) Be based upon the use of empirically reliable and valid instruments, whenever these instruments are available; and
(b) Provide the basis for prescribing an appropriate program of training experiences for the resident.
(3) The MFCF shall have written training and habilitation objectives for each resident that are: {1980 Ed.}
(a) Based upon complete and relevant diagnostic and prognostic data; and
(b) Stated in specific behavioral terms that permit the progress of each resident to be assessed.

(4) The MFCF shall provide evidence of services designed to meet the training and habilitation objectives for each resident.

(5) The training and habilitation staff shall:
   (a) Maintain a functional training and habilitation record for each resident; and
   (b) Provide training and habilitation services to residents with hearing, vision, perceptual, or motor impairments. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-510, filed 10/21/80.]

WAC 275-39-515 Training and habilitation services—Staff. The MFCF shall have enough qualified training and habilitation personnel and support staff, supervised by a qualified mental retardation professional, to carry out the training and habilitation program. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-515, filed 10/21/80.]

WAC 275-39-520 Training and habilitation services—Needed services. In addition to the resident living services detailed in WAC 275-39-400 through 275-39-450, the MFCF shall provide professional and special programs and services to residents based upon their needs for these programs and services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-520, filed 10/21/80.]

WAC 275-39-525 Training and habilitation services—Agreements with outside resources. (1) If the MFCF does not employ a qualified professional to furnish a required institutional service, it shall have in effect a written agreement with a qualified professional outside the MFCF to furnish the required service.

   (2) The agreement shall:
   (a) Contain the responsibilities, functions, objectives, and other terms agreed to by the MFCF and the qualified professional; and
   (b) Be signed by the administrator or his representative and by the qualified professional. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-525, filed 10/21/80.]

WAC 275-39-530 Training and habilitation services—Quality standards for outside resources. (1) Programs and services provided by the MFCF or to the MFCF by outside agencies or individuals shall meet the standards for quality of services required in this subchapter.

   (2) All contracts for these services shall state that these standards will be met. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-530, filed 10/21/80.]

WAC 275-39-535 Training and habilitation services—Planning and evaluation. Interdisciplinary teams consisting of individuals representative of the professions or service areas that are relevant in each particular case, shall:

   (1) Evaluate each resident's needs;
   (2) Plan an individualized habilitation program which may include divisions for medical care and educational training to meet each resident's identified needs; and
   (3) At least every three months or as specified in individual habilitation plan review each resident's responses to his/her program and revise the program accordingly. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-535, filed 10/21/80.]

WAC 275-39-545 Speech pathology and audiology services—Required services. (1) The MFCF shall provide speech pathology and audiology services through direct contact between speech pathologists and audiologists and residents, and working with other personnel, including but not limited to teachers and direct-care staff.

   (2) Speech pathology and audiology services available to the MFCF shall include:
   (a) Screening and evaluation of residents with respect to speech and hearing functions;
   (b) Comprehensive audiological assessment of residents, as indicated by screening results, that include tests of puretone air and bone conduction, speech audiometry, and other procedures, as necessary, and the assessment of the use of visual cues;
   (c) Assessment of the use of amplification;
   (d) Provision for procurement, maintenance, and replacement of hearing aids, as specified by a qualified audiologist;
   (e) Comprehensive speech and language evaluation of residents, as indicated by screening results, including appraisal of articulation, voice, rhythm, and language;
   (f) Participation in the continuing interdisciplinary evaluation of individual residents for purposes of beginning, monitoring, and following up on individualized habilitation programs;
   (g) Treatment services as an extension of the evaluation process, that include:
      (i) Direct counseling with residents;
      (ii) Consultation with appropriate staff for speech improvement and speech education activities; and
      (iii) Work with appropriate staff to develop specialized programs for developing each resident's communication skills in comprehension, including speech, reading, auditory training, and hearing aid utilization, and skills in expression, including improvement in articulation, voice, rhythm, and language; and
   (h) Participation in inservice training programs for direct-care and other staff.

   (3) Maintenance of clearly legible records for each child.

   (4) The MFCF must demonstrate that speech pathology and audiology services are being provided as part of their program or initiate a contract with qualified outside services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-545, filed 10/21/80.]

(1980 Ed.)
WAC 275-39-550 Speech pathology and audiology services—Evaluations and assessments. (1) Speech pathologists and audiologists shall accurately and systematically report evaluation and assessment results in order to:

(a) Provide information, when appropriate, that is useful to other staff working directly with the resident; and

(b) Include evaluative and summary reports in the resident's record kept in the living unit.

(2) Continuing observations of treatment progress shall be:

(a) Recorded accurately, summarized, and communicated; and


WAC 275-39-555 Speech pathology and audiology services—Staff and facilities. (1) The MFCF shall have available enough qualified staff and support personnel to carry out the various speech pathology and audiology services, in accordance with stated goals and objectives.

(2) Staff who assume independent responsibilities for clinical services shall meet the qualification requirements of this chapter.

(3) The MFCF shall provide adequate, direct, and continuing supervision to personnel, volunteers, or support personnel used in providing clinical services.

(4) The MFCF shall have enough space, equipment, and supplies to provide efficient and effective speech pathology and audiology services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-555, filed 10/21/80.]

WAC 275-39-560 Speech pathology and audiology services—Speech pathologist or audiologist (qualified consultant). A speech pathologist or audiologist is a person who:

(1) Is eligible for a certificate of clinical competence in the appropriate area (speech pathology or audiology) granted by the American Speech and Hearing Association under its requirements in effect on the publication of this provision; or

(2) Meets the educational requirements for certification, and is in the process of accumulating the supervised experience required for certification. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-560, filed 10/21/80.]

WAC 275-39-565 Social services—Required services. The MFCF shall provide, as part of an interdisciplinary set of services, social services to each resident directed toward:

(1) Maximizing the social functioning of each resident;

(2) Enhancing the coping capacity of each resident's family;

(3) Asserting and safeguarding the human and civil rights of the residents and their families;

(4) Fostering the human dignity and personal worth of each resident;

(5) Assisting the resident and family with the stress of severe illness, death, and dying; and

(6) Assisting the resident and family with finding services in the community. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-565, filed 10/21/80.]

WAC 275-39-570 Social services—Social workers. (1) During the evaluation process to determine whether or not admission to the MFCF is necessary, social workers shall help the resident and his/her family:

(a) Consider alternative services, based on the resident's status and important family and community factors; and

(b) Make a responsible choice as to whether and when residential placement is indicated.

(2) Social workers shall participate, when appropriate, in the continuing interdisciplinary evaluation of individual residents for the purposes of beginning, monitoring, and following up on individualized habilitation programs.

(3) During the resident's admission to, and residence in the facility or while he/she is receiving services from the facility, social workers shall as appropriate, provide liaison between him/her, the MFCF, the family, and the community, in order to:

(a) Help the staff:

(i) Individualize and understand the needs of the resident and his/her family in relation to each other;

(ii) Understand social factors in the resident's day-to-day behavior, including staff-resident relationships; and

(iii) Prepare the resident for changes in his/her living situation;

(b) Help the family develop constructive and personally meaningful ways to support the resident's experience in the MFCF through:

(i) Counseling concerning the problems of changes in family structure and functioning; and

(ii) Referral to specific services, as appropriate; and

(c) Help the family participate in planning for the resident's return to home or other community placement.

(4) After the resident leaves the MFCF, social workers must provide systematic followup to assure referral to appropriate community agencies.

(5) The MFCF shall have available enough qualified staff and support personnel to carry out the various social services activities.

(6) Social workers providing service to the MFCF shall meet the qualification requirements of WAC 275-39-575.

(7) Social work assistants or aides employed by the MFCF shall be supervised by a social worker. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-570, filed 10/21/80.]

WAC 275-39-575 Social services—Social worker (qualified consultant). A social worker is a person who has a master's degree from a school of social work accredited or approved by the Council on Social Work
Education, and has two years of social work experience in a health care setting with experience in counseling families involved with terminal illnesses. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-575, filed 10/21/80.]

WAC 275-39-580 Records—Maintenance of resident records. (1) The MFCF shall maintain a record for each resident that is adequate for:
   (a) Planning and continuous evaluation of the resident's habilitation program;
   (b) Furnishing documentary evidence of each resident's progress and response to his/her habilitation program; and
   (c) Protecting the legal rights of the residents, the MFCF, and the staff.

   (2) Any individual who makes an entry in a resident's record shall make it legibly, date it, sign it, and include his job title and professional capacity.

   (3) The MFCF shall provide a legend to explain any symbol or abbreviation used in a resident's record. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-580, filed 10/21/80.]

WAC 275-39-585 Records—Admission records. At the time a resident is admitted, the MFCF shall enter in the individual's record the following information:
   (1) Name, date of admission, birth date and place, citizenship status, marital status, and social security number.
   (2) Father's name and birthplace, mother's maiden name and birthplace, and parents' marital status.
   (3) Name and address of parents, legal guardian, and next of kin if needed.
   (4) Sex, race, height, weight, color of hair, color of eyes, identifying marks, and recent photograph.
   (5) Reason for admission or referral problem.
   (6) Type and legal status of admission.
   (7) Legal competency status.
   (8) Language spoken or understood.
   (9) Sources of support, including social security, veterans' benefits, and insurance.
   (10) Religious affiliation, if any.
   (11) Reports of the preadmission evaluations.

WAC 275-39-590 Records—Record entries during residence. (1) Within one week after the admission of each resident, the MFCF shall enter in the resident's record:
   (a) A report of the review and updating of the preadmission evaluation;
   (b) A prognosis that can be used for programming and placement; and
   (c) A comprehensive evaluation and individual habilitation plan, designed by an interdisciplinary team.

   (2) The MFCF shall enter the following information in a resident's record during his residence:
      (a) Reports of accidents, seizures, illnesses, and treatments for these conditions;
      (b) Records of immunizations;
      (c) Records of all periods that restraints were used, with justification and authorization for each;
      (d) Reports of regular, at least quarterly, review and evaluation of the program, developmental progress, and status of each resident;
      (e) Enough observations of the resident's response to his program to enable evaluation of its effectiveness;
      (f) Records of significant behavior incidents;
      (g) Records of family visits and contacts;
      (h) Records of attendance and absences;
      (i) Correspondence pertaining to the resident;
      (j) Periodic updates of the information recorded at the time of admission;
      (k) Appropriate authorizations and consents;
      (l) Pertinent medical information including laboratory data.

   (3) The MFCF shall enter a discharge summary in the resident's record at the time he is discharged. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-590, filed 10/21/80.]

WAC 275-39-595 Records—Confidentiality. (1) The MFCF shall keep confidential all information contained in a resident's records, including information contained in an automated data bank.

   (2) The record is the property of the MFCF which shall protect it from loss, damage, tampering, or use by unauthorized individuals.

   (3) The MFCF shall have written policies governing access to, duplication of, and release of information from the record.

   (4) The MFCF shall obtain written consent of the resident, if competent, or his guardian before it releases information to individuals not otherwise authorized to receive it. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-595, filed 10/21/80.]

WAC 275-39-600 Records—Central record service. The MFCF shall:
   (1) Maintain an organized central record service for the collection and release of resident information;
   (2) Make records readily accessible to authorized personnel if a centralized system is used;
   (3) Have appropriate records available in the resident living units;
   (4) Have a master alphabetical index of all residents admitted to the MFCF; and
   (5) Retain records for a period consistent with the federal Department of Health and Human Services regulations and the statute of limitations of the state of Washington. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-600, filed 10/21/80.]

WAC 275-39-605 Records—Staff and facilities. The MFCF shall have:
   (1) Enough qualified staff and support personnel to accurately process, check, index, file, and retrieve records and record data promptly; and

[Title 275 WAC—p 77]
(2) Adequate space, equipment, and supplies to provide efficient and effective record services. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–605, filed 10/21/80.]

WAC 275–39–610 Facility support services—Administrative support services. (1) The MFCF shall provide adequate, modern administrative support to efficiently meet the needs of residents and facilitate attainment of the MFCF's goals and objectives.
(2) The MFCF shall:
(a) Document its purchasing process;
(b) Adequately operate its inventory control system and stockroom;
(c) Have appropriate storage facilities for all supplies and surplus equipment; and
(d) Have enough trained and experienced personnel to do purchase, supply, and property control functions. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–610, filed 10/21/80.]

WAC 275–39–615 Facility support services—Communication system. The MFCF shall have an adequate communication system, including telephone service, that insures:
(1) Prompt contact of on duty personnel; and

WAC 275–39–620 Facility support services—Engineering and maintenance. The MFCF shall have:
(1) An appropriate, written preventive maintenance program; and

WAC 275–39–625 Facility support services—Laundry services. The MFCF shall manage its laundry services so that it meets daily clothing and linen needs without delay. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–625, filed 10/21/80.]

WAC 275–39–630 Facility requirements—Equipment. The MFCF shall have equipment appropriate to the needs of the residents including but not limited to:
(1) Ventilatory dependent children:
(a) Either piped in oxygen and compressed air or an additional thirty-six square feet per child with oxygen and compressed air tanks with a safe storage area for a supply of used and unused tanks safe from child access;
(b) Portable O₂ and compressed air tanks;
(c) Appropriate, physician ordered respiratory equipment and attachments (humidifier, flow meters, disconnector line, compressor and tubing);
(d) Suction apparatus;
(e) Emergency respiratory resuscitation tray;
(f) Individual bag and mask for changing;
(g) Cardiac monitor.
(2) Tracheostomy dependent children:
(a) Tracheostomy tubes, two spares;
(b) Tracheostomy collar;
(c) Tracheostomy ties;
(d) Suction apparatus;
(e) Saline and gloves;
(f) Dressing, creams and hydrogen peroxide;
(g) Cardiac monitor.
(3) The physically handicapped:
(a) Mobility device (wheelchair or stretcher);
(b) Braces and crutches;
(c) Parallel bars;
(d) Mats;
(e) Tumbling ball;
(f) Set of stairs with railing.
(4) All children:
(a) Toys of age appropriate;
(b) High chairs;
(c) Play pens;
(d) Scooters;
(e) Walkers;
(f) Infant seats;
(g) Jonny Jump ups;
(h) Wagons;
(i) Self-propelled tricycles, scooters, etc.;

WAC 275–39–635 Safety and sanitation—Emergency plan and procedures. (1) The MFCF shall have a written staff organization plan and detailed written procedures to meet all potential emergencies and disasters such as fire, severe weather, and missing residents.
(2) The MFCF shall:
(a) Clearly communicate and periodically review the plan and procedures with the staff; and
(b) Post the plan and procedures at suitable locations through the facility. [Statutory Authority: RCW 74.26.040. 80–15–083 (Order 1557), § 275–39–635, filed 10/21/80.]

WAC 275–39–640 Safety and sanitation—Evacuation drills. (1) The MFCF shall hold evacuation drills at least quarterly for each shift of personnel and under varied conditions to:
(a) Insure that all personnel on all shifts are trained to perform assigned tasks;
(b) Insure that all personnel on all shifts are familiar with the use of the MFCF's firefighting equipment; and
(c) Evaluate the effectiveness of emergency and disaster plans and procedures.
(2) The MFCF shall:
(a) Actually evacuate residents to safe areas during at least one evacuation drill each year, on each shift;
(b) Make special provisions for the evacuation of the physically handicapped, such as fire chutes and mattress loops with poles;
(c) Write and file a report and evaluation of each evacuation drill;
(d) Investigate all accidents and take corrective action to prevent similar accidents in the future; and
(e) For evacuation drills including use of motor vehicles for transportation, the motor vehicle must be equipped with suitable passenger restraints to be used by the residents to reduce the possibility of injury from a motor vehicle accident or sudden stop. [Statutory Authority: RCW 74.26.040. 80--15-083 (Order 1557), § 275--39--640, filed 10/21/80.]

WAC 275--39--645 Safety and sanitation—Fire protection. Except as provided in WAC 275--39--655, all Medically Fragile Children's Facilities shall conform to the rules and regulations adopted by the Washington state fire marshall for nursing homes, chapter 212--32 WAC, or hospitals, chapter 212--28 WAC, as appropriate, establishing minimum standards for the prevention of fire and for the protection of life and property against fire. [Statutory Authority: RCW 74.26.040. 80--15-083 (Order 1557), § 275--39--645, filed 10/21/80.]

WAC 275--39--655 Safety and sanitation—Fire protection waivers. (1) The state survey agency may waive specific provisions of the life safety code required by WAC 275--39--645, for as long as it considers appropriate, if:
(a) The waiver would not adversely affect the health and safety of the residents;
(b) Rigid application of specific provisions would result in unreasonable hardship for the MFCF as determined under guidelines contained in the HCFA long-term care manual; and
(c) The waiver is granted in accordance with criteria contained in the long-term care manual.
(2) If a state agency waives provisions of the code for an existing building of two or more stories that is not built of at least two-hour fire-resistive construction, the MFCF may not house a blind, nonambulatory, or physically handicapped resident above the street-level floor unless it is built of:
(a) One-hour protected, noncombustible construction as defined in National Fire Protection Association Standard No. 220;
(b) Full sprinklered, one-hour protected, ordinary construction;
(c) Full sprinklered, one-hour protected, wood frame construction. [Statutory Authority: RCW 74.26.040. 80--15-083 (Order 1557), § 275--39--655, filed 10/21/80.]

WAC 275--39--660 Safety and sanitation—Paint. The MFCF shall:
(1) Use lead-free paint inside the facility; and
(2) Remove or cover old paint or plaster containing lead so that it is not accessible to residents. [Statutory Authority: RCW 74.26.040. 80--15-083 (Order 1557), § 275--39--660, filed 10/21/80.]

WAC 275--39--665 Safety and sanitation—Building accessibility and use. (1) The MFCF shall:
(a) Be accessible to and usable by all residents, personnel, and the public, including individuals with disabilities; and
(2) The state survey agency may waive, for as long as it considers appropriate, specific provisions of ANSI Standard No. A117.1 (1961), (reaffirmed 1971) if:
(a) The provision would result in unreasonable hardship on the MFCF if strictly enforced; and
(b) The waiver does not adversely affect the health and safety of the residents. [Statutory Authority: RCW 74.26.040. 80--15-083 (Order 1557), § 275--39--665, filed 10/21/80.]

WAC 275--39--670 Safety and sanitation—Sanitation records and reports. The MFCF shall keep:
(1) Records that document compliance with the sanitation, health, and environmental safety codes of the state or local authorities having primary jurisdiction over the MFCF; and
(2) Written reports of inspections by state or local health authorities, and records of action taken on their recommendations. [Statutory Authority: RCW 74.26-.040. 80--15-083 (Order 1557), § 275--39--670, filed 10/21/80.]

WAC 275--39--675 Safety and sanitation—Health and safety laws. The MFCF shall meet all federal, state, and local laws, regulations and codes pertaining to health and safety, such as provisions regulating:
(1) Buying, dispensing, safeguarding, administering, and disposing of medications and controlled substances;
(2) Construction, maintenance, and equipment for the MFCF;
(3) Sanitation;
(4) Communicable and reportable diseases; and
(5) Post-mortem procedures. [Statutory Authority: RCW 74.26-.040. 80--15-083 (Order 1557), § 275--39--675, filed 10/21/80.]

Chapter 275--40 WAC
ANNUAL INSPECTION OF ALL JAILS AND DETENTION FACILITIES BY THE DIRECTOR OF INSTITUTIONS OR HIS DESIGNEE
WAC 275-40-010 Annual inspection. There shall be an annual inspection of all jails and places of detention in the State of Washington by an officer of the department of institutions designated by the director. [Order 9, § 275-40-010, filed 12/5/69.]

WAC 275-40-020 Reports. An individual inspection report on prescribed forms shall be prepared following each inspection. Copies of such inspection reports shall be provided, in the case of city jails, to the chief of police, or town marshal, or other police officer responsible for the administration and maintenance of the jail, and to the appropriate responsible town or city administrative official; and, in the case of county jails, to the superior court judges of the county, and to the sheriff, or other chief law enforcement officer of the county. [Order 9, § 275-40-020, filed 12/5/69.]

WAC 275-40-030 Special subjects of inspection and reports. The inspection report shall include: (1) The examination of physical facilities, procedures and programs.
(2) The security of the facility.
(3) Compliance with state laws governing the operation of jails, and with health and fire safety regulations.
(4) The frequency of health and fire safety inspections.
(5) The suitability of facilities for the separation of various categories of prisoners.
(6) Identification procedures, record systems.
(7) Protection of prisoners’ personal property.
(8) The provision of recreational, work and educational opportunities.
(9) Medical services and mess facilities.
(10) The preservation of the prisoners' legal and civil rights.
(11) The protection of religious freedom.
(12) The relevancy and adequacy of the individual jail's rules and regulations and disciplinary procedures. [Order 9, § 275-40-030, filed 12/5/69.]

WAC 275-40-040 Inspection results and ratings. The jails shall be rated in accordance with their degree of conformity with minimum jail standards prepared by the director and distributed to the responsible jail administrators and others concerned with the conditions of the jails of the state of Washington. [Order 9, § 275-40-040, filed 12/5/69.]

WAC 275-40-050 Training programs. The training program for jail personnel shall be reviewed and, where indicated, appropriate recommendations for improvement in such programs will be made. The director, or designated officer of the department of institutions will actively cooperate with all law enforcement training organizations to stimulate programs to train jail personnel. Opportunities for training will be made known to local jail administrators. The department of institutions will cooperate, on request, in consultation with local officials on jail procedures and programs and review plan for remodeling and/or construction of jail facilities. The director or designated officer of the department of institutions will be available for consultation with architects and engineers planning jail improvements. The department of institutions will collect and make available current information on jail equipment, supplies and materials. [Order 9, § 275-40-050, filed 12/5/69.]

WAC 275-40-060 Annual report to legislature. An annual report to the legislature shall be prepared summarizing the findings, observations, and recommendations resulting from the inspections, and the report shall be distributed to members of the legislature and other appropriate local and state officials. [Order 9, § 275-40-060, filed 12/5/69.]

WAC 275-40-070 Review and revision. These rules and regulations and the recommended minimum standards for jail operations are subject to review and revision by the director of the department of institutions. [Order 9, § 275-40-070, filed 12/5/69.]

Chapter 275-48 WAC
PAYMENTS TO PERSONS RELEASED FROM CORRECTIONAL INSTITUTIONS

WAC 275-48-010 Purpose. (1) The purpose in making temporary financial assistance available to persons released from correctional institutions is to support the parolees' chances for a successful return to responsible citizenship.
(2) The legal authority for making the payments authorized by this chapter is found in RCW 72.02.040, 72.02.100, and 72.02.110. [Order 684, § 275-48-010, filed 5/25/72.]

WAC 275-48-015 Definitions. (1) Secretary—the secretary of department of social and health services or his designee.
(2) Institution—a state correctional institution or an approved work or training release facility.
(3) Releasee—any person serving a sentence for a term of confinement in a state correctional facility for convicted felons who has been released from custody by discharge, parole, court order, or expiration of the term of confinement.
(4) Weekly payment—a cash benefit paid to a releasee in lieu of the release payment.
(5) Employment—substantial gainful work which nets the releasee at least $55 per week.

(6) Income—cash available for maintenance including earnings from a work release or a manpower development and training program which includes a subsistence allowance, pension or support from the veterans' administration, social security administration, vocational rehabilitation or other source, but excluding earning accumulated during confinement. Regular net earnings of less than $55 per week are considered income. [Order 684, § 275-48-015, filed 5/25/72.]

WAC 275-48-020 Release payment. (1) A releasee who does not qualify for weekly payments and does not have income sufficient to meet his immediate needs shall upon release be provided with

(a) suitable clothing,

(b) transportation by the least expensive method of public transportation not to exceed $100 to his place of residence, the place designated in his parole plan, or to the place from which committed if such person is being discharged on expiration of sentence, or discharged from custody by a court of appropriate jurisdiction.

(c) $40 for subsistence.

(2) In accordance with an approved parole plan, the releasee may be paid by the institution an additional sum not to exceed $60 for necessary personal and living expenses. [Order 684, § 275-48-020, filed 5/25/72.]

WAC 275-48-025 Weekly payment. The secretary in his discretion and to the extent that funds are available may approve an alternate subsistence plan which will provide an eligible releasee with suitable clothing, transportation as described in WAC 275-48-020(1)(b), and a weekly maintenance payment. [Order 684, § 275-48-025, filed 5/25/72.]

WAC 275-48-030 Eligibility. (1) To be eligible for weekly payments the releasee must

(a) lack income sufficient to meet his or her needs.

(b) lack other sources of support from assistance or rehabilitation agencies or other organizations,

(c) be actively seeking employment. When the releasee believes it is not feasible for him to seek employment immediately upon release because of the need for medical attention, urgent family obligations, etc., he may submit a specific alternate plan requesting a waiver of the requirement for a maximum of six weeks following release. He may also submit an alternate plan providing for his engagement in training activities which will be expected to lead to employment. Any alternate plan must be approved by the secretary or his designee.

(2) No payment shall be made if it will result in a deduction from other income available or payable to the releasee or his family.

(3) Eligibility is determined by the institution superintendent for the initial six weeks period. Eligibility after the initial six weeks is determined by the parole officer for a maximum of twenty additional weeks.

(4) The parole officer, on the basis of new or additional information available after release, may redetermine the releasee's eligibility.

(5) A person released to a deportation detainer may be eligible based on the person's individual need, as determined by the superintendent at the time of release to the detainer, or subsequently by the interstate unit of the state central office.

(6) Releasees going out of state are eligible if they meet the requirements in subsections (1), (2), (3), and (4). The supervisor of the interstate unit for parolees will function as the parole officer for such releasees. [Order 684, § 275-48-030, filed 5/25/72.]

WAC 275-48-035 Amount—Duration—Disbursement by institution and parole officer. (1) Payment shall be in an amount which when added to net income shall not exceed $55 per week.

(2) Payments may continue for a maximum of 26 weeks.

(3) Payments are made in advance. The initial payment is made by the releasing institution at the time of release. Subsequent payments are made at the office of the parole officer. An eligible releasee on conditional discharge status, freed by court order, or whose sentence has expired shall be assigned to a parole officer for the purpose of receiving weekly payments. [Order 684, § 275-48-035, filed 5/25/72.]

WAC 275-48-040 Termination. (1) Benefits under this program may be terminated

(a) when funds are not available, or

(b) when the releasee has been employed for two weeks or has received this first full paycheck, whichever is earlier,

(c) when the parole officer has reason to believe the releasee is not actively seeking employment or is not abiding by an approved alternate plan.

(2) The parole officer shall notify the releasee in writing of the date the weekly payments terminate and of the reasons therefor. [Order 684, § 275-48-040, filed 5/25/72.]

WAC 275-48-045 Reinstatement—Reapplication. (1) A releasee whose payments have been terminated and who becomes unemployed may be reinstated if

(a) he meets initial eligibility requirements, and

(b) not more than 52 weeks have elapsed since date of release, and

(c) funds are available.

(2) A releasee not eligible for weekly payments at the time of release may reapply during the ensuing 52 weeks, and if found eligible he may receive weekly payments.

(3) Payments may be made to a releasee who has reapplied or has been reinstated for a period which when added to any prior payment period shall not exceed the maximum specified in WAC 275-48-035(2). [Order 955, § 275-48-045, filed 7/26/74; Order 684, § 275-48-045, filed 5/25/72.]
WAC 275-48-050 Appeal. (1) A releasee paid less than the maximum benefit or whose benefit has been terminated may file within 15 days of notification a written appeal to the district supervisor of the probation and parole officer to whom the release is assigned.

(2) The district supervisor shall impartially review the circumstances and take appropriate action.

(3) A written report of the review shall be forwarded by the district supervisor to the department's state office. [Order 684, § 275-48-050, filed 5/25/72.]

Chapter 275-52 WAC
INSTITUTIONAL INDUSTRIES COMMISSION HEARINGS—SALE OF PRODUCTS

WAC 275-52-010 Hearings.
275-52-015 Subject of hearings.
275-52-020 Sale of produce.

WAC 275-52-010 Hearings. The institutional industries commission shall hold public hearings in order to afford the general public an opportunity to register opinions concerning the establishment and regulation of industrial or agricultural enterprises operated within Washington state institutions. Notice of such hearings will be given in accordance with the provisions of chapter 34.04 RCW (the Administrative Procedures Act). [Order 756, § 275-52-010, filed 12/14/72.]

WAC 275-52-015 Subject of hearings. A public hearing shall be held when either of the following actions is being considered by the commission:

(1) the establishment of an enterprise involving a gross annual production of more than $25,000, or

(2) setting or increasing the yearly limit to the dollar value of the production of an enterprise. [Order 756, § 275-52-015, filed 12/14/72.]

WAC 275-52-020 Sale of produce. (1) In order to avoid waste or spoilage and consequent loss to the state, the secretary may sell at private sale by-products and surplus of agricultural and animal husbandry enterprises. Such sales shall be made according to subsections (2) and (3).

(2) Sales of surplus dairy products shall be made, at the prices established by the Regional Milk Marketing Administration of the U.S. Department of Agriculture, to established processors of fluid milk.

(3) Sales of dairy animals shall be made at public auction. [Order 740, § 275-52-020, filed 11/22/72.]

Chapter 275-53 WAC
SALE OF ITEMS PRODUCED BY VOCATIONAL TRAINING STUDENTS IN CORRECTIONAL INSTITUTIONS

WAC 275-53-050 Sale of items produced by vocational training students.
275-53-055 Requirements of sale and notice.

Chapter 275-55 WAC
VOLUNTARY ADMISSION—INVOLUNTARY COMMITMENT, TREATMENT AND/OR EVALUATION OF MENTALLY ILL PERSONS

WAC 275-55-010 Purpose.
275-55-020 Definitions.
275-55-030 Private institutions which may admit voluntary patients.
275-55-040 Voluntary admission to public or private institution—Adult patient—No conservator or guardian.
275-55-041 Voluntary adult patient—Detention.
275-55-050 Voluntary admission—Minor.
275-55-060 Voluntary admission to public institutions, hospitals, sanitariums or facilities—Minor.
275-55-061 Voluntary admission—Adult—Conservator.
275-55-070 Forwarding information to department.
275-55-080 Alternatives to admittance to inpatient treatment.
275-55-090 Voluntary patients—Limitation on length of stay—Readmission.
275-55-100 Mental health professional, psychologist, social worker, psychiatric nurse.
275-55-110 Release of voluntary and involuntary patient.
275-55-120 Conditional release of patient.
275-55-130 Voluntary minor—Release.

(1980 Ed.)
WAC 275-55-010 Purpose. These regulations are adopted pursuant to and in accordance with chapter 142, Laws of 1973, 1st ex. sess. They are adopted to provide operational procedures for the voluntary admission, involuntary commitment, treatment, and/or evaluation of mentally ill persons; to provide standards for certification of evaluation and treatment facilities; and to provide procedures for financial assistance to counties. [Order 900, § 275-55-010, filed 1/25/74.]

WAC 275-55-020 Definitions. (1) "Department" means the department of social and health services of the state of Washington.

(2) "Secretary" means the secretary of the department of social and health services or his designee.

(3) "Director" means the director of the bureau of mental health of the department of social and health services.

(4) "Facility" means an evaluation and/or treatment facility certified as such by the department.

(5) "Chapter" means chapter 142, Laws of 1973 1st ex. sess., or as thereafter amended.

(6) "Rule" means a rule within these rules and regulations.

(7) "Section" means a section of chapter 142, Laws of 1973 1st ex. sess., or as thereafter amended.

(8) "Seventy-two hour period" shall be computed by including Saturdays, but excluding Sundays and holidays as specified in RCW 1.16.050.

(9) "Designated mental health professional" means a person who has been appointed by the county commissioners to perform the duties specified in the act, and

(a) Who meets the educational and/or experience requirements as specified in WAC 275-55-100(1)(a)(b)(c) of these rules and regulations, or

(b) Where exception has been granted by the director of the bureau of mental health pursuant to WAC 275-55-100(1)(d).

(10) "Mental health professional" means a person who meets the educational and/or experience requirements as specified in WAC 275-55-100 of these rules and regulations and who is primarily involved in evaluation and treatment. The duties and responsibilities of "mental health professionals" and "designated mental health professionals" shall be as defined in chapter 71.05 RCW.

(11) "Professional person in charge" as used in the chapter and these rules, unless otherwise defined, shall mean the professional person having chief clinical responsibilities for mental health evaluation and treatment within the institution, hospital, sanitarium or facility involved, or his designee. [Order 1122, § 275-55-020, filed 6/2/76; Order 955, § 275-55-020, filed 7/26/74; Order 900, § 275-55-020, filed 1/25/74.]

WAC 275-55-030 Private institutions which may admit voluntary patients. Any private institution, hospital, or sanitarium which includes a department or ward conducted for the care and treatment of persons who are mentally ill or deranged may receive therein as voluntary patient any person suffering from mental illness or derangement for the treatment for said illness.

(1) "Mental illness or derangement" as here used shall mean mental disorder which presents likelihood of serious harm to others or self or which causes a person to be gravely disabled.

(2) "Department or ward" as here used shall mean facilities programmed and staffed appropriately to provide adequate care to the mentally ill or deranged. [Order 900, § 275-55-030, filed 1/25/74.]

WAC 275-55-040 Voluntary admission to public or private institution—Adult patient—No conservator or guardian. Any institution, hospital, or sanitarium receiving a voluntary patient 18 years or older pursuant to WAC 275-55-030 above and any public institution, hospital, or sanitarium receiving such patient shall require written application signed by the voluntary patient stating that such application is a voluntary action by the patient, the application form to state rights retained by such voluntary patient under WAC 275-55-270(1) and (2), with a copy to be retained by the patient personally. [Order 955, § 275-55-040, filed 7/26/74; Order 900, § 275-55-040, filed 1/25/74.]

WAC 275-55-041 Voluntary adult patient—Detention. If the staff of any public or private agency regards a voluntarily admitted patient seeking release as presenting, as a result of mental disorder, an imminent likelihood of serious harm to himself or others, or as gravely disabled, they may detain such a person for sufficient time in order to enable the designated county mental health professional to authorize appropriate action. [Order 1122, § 275-55-041, filed 6/2/76; Order 955, § 275-55-041, filed 7/26/74.]

WAC 275-55-050 Voluntary admission—Minor. A person under 18 years of age, or others on his behalf, may make application for and authorize treatment pursuant to the following:

(1) All voluntary applications for admissions of persons under the age of 13 shall be made by the parent(s), conservator, guardian, or other person entitled to custody. [Title 275 WAC—p 83]
WAC 275-55-050 Title 275 WAC: Institutions, hospitals, sanitariums

(2) All applications on behalf of minors more than 13 years of age shall be accompanied by a written consent of the minor.

(3) A person under the age of 18 but over the age of 13 may make application for and receive mental health care upon his own application without consent of his parent, parents, guardian, or other person entitled to custody unless such treatment involves inpatient care. [Order 1122, § 275-55-050, filed 6/2/76; Order 955, § 275-55-050, filed 7/26/74; Order 900, § 275-55-050, filed 1/25/74.]

WAC 275-55-060 Voluntary admission to public institutions, hospitals, sanitariums or facilities—Minor. Upon receipt of any application for admission of a minor to a public agency as defined in RCW 71.05.020(6), such agency shall notify the designated county mental health professional of the county of the patient's residence, who shall submit a written report and evaluation with recommendations as to whether treatment is necessary and proper on a voluntary basis, and stating reasons for voluntary commitment. After receipt of such recommendations, the professional person in charge or his designee shall make final determination as to the admission of the minor. Before receipt of such recommendations, a patient may be temporarily admitted if the professional person or his designee determines temporary admission to be in the best interest of that patient. [Order 1122, § 275-55-060, filed 6/2/76; Order 955, § 275-55-060, filed 7/26/74; Order 900, § 275-55-060, filed 1/25/75.]

WAC 275-55-061 Voluntary admission—Adult—Conservator. Application for admission of an adult patient having a conservator or guardian shall be made by said conservator or guardian pursuant to authorization by a proper court order in the conservatorship or guardianship proceedings. Any patient admitted pursuant to this rule shall be considered as a voluntary patient and shall be released upon the request of the conservator, guardian, or patient unless the involuntary proceedings are invoked. An existing court order authorizing payment to an institution for the ward's current care shall be considered such a proper court order. [Order 955, § 275-55-061, filed 7/26/74.]

WAC 275-55-070 Forwarding information to department. After six months of continuous inpatient treatment pursuant to this chapter and these rules and regulations, the public or private institution, hospital, sanitarium or facility shall forward to the director the following information concerning such voluntary patient:

(1) Name, residence, age, sex, place of birth, occupation, marital status, and date of admission to the facility.

(2) A copy of the voluntary admission form signed by the patient and/or his parent, parents, guardian, conservator, or other person entitled to his custody. [Order 1122, § 275-55-070, filed 6/2/76; Order 955, § 275-55-070, filed 7/26/74; Order 900, § 275-55-070, filed 1/25/74.]

WAC 275-55-080 Alternatives to admittance to inpatient treatment. In considering all applications for admittance or involuntary commitments to inpatient treatment as to whether the patient is suitable for care and treatment, the professional person in charge or his designee shall explore less restrictive alternatives including possible outpatient treatment and consider possible better, or equal treatment elsewhere. [Order 1122, § 275-55-080, filed 6/2/76; Order 955, § 275-55-080, filed 7/26/74; Order 900, § 275-55-080, filed 1/25/74.]

WAC 275-55-090 Voluntary patients—Limitation on length of stay—Readmission. No person shall be carried continuously as a voluntary patient for a period of more than one year. A patient may be readmitted pursuant to admission procedures at the end of any one-year period. [Order 900, § 275-55-090, filed 1/25/74.]

WAC 275-55-100 Mental health professional, psychologist, social worker, psychiatric nurse. (1) "Mental health professional" means:

(a) A psychiatrist, psychologist, psychiatric nurse, or social worker, and also

(b) Those persons with a master's degree or further advanced degree from an accredited college or university in counseling or in one of the social sciences. Such persons shall have, in addition, at least three years of experience in direct treatment of mentally ill or emotionally disturbed persons under the supervision of a mental health professional, and

(c) A licensed physician permitted to practice as a physician in the state of Washington.

(d) Persons who are otherwise qualified to perform the duties of a mental health professional but do not meet the educational requirements specified in RCW 71.05.020(11), where an exception to such requirements has been granted by the director upon submission of a written request by the county involved considering the following factors:

(i) The extent to which the county has made an effort to provide and has the capability of providing a mental health professional as defined in RCW 71.05.020(11);

(ii) The amount and type of employment experience which the applicant possesses. Such an applicant shall have had at least two years' experience in the direct treatment of emotionally disturbed or mentally ill persons under the supervision of a mental health professional;

(iii) The overall needs of the mental health program in the particular county involved;

(iv) Such factors as shall be brought to the attention of the director by the counties involved.

(2) "Psychologist" means:

(a) Those persons defined as such in RCW 71.05.020(14).

(3) "Social worker" means:

(a) Those persons defined as such in RCW 71.05.020(15).

(4) "Psychiatric nurse" shall mean a registered nurse who has a bachelor's degree from an accredited college
Mentally Ill Persons—Voluntary Admission

(1980 Ed.)
(3) The immediate objection in writing to the juvenile court as required by this rule shall be the same as a petition for initial involuntary detention of the minor, and shall be filed with the juvenile court on the next judicial day. [Order 955, § 275-55-130, filed 7/26/74; Order 900, § 275-55-130, filed 1/25/74.]

WAC 275-55-140 Involuntary commitment and detention of minor. No minor shall be involuntarily committed for care and treatment for mental disorder or for observation as to the existence of mental disorder except according to the following requirements:

(1) The facility accepting the involuntary minor patient must:
   (a) Be certified by the department of social and health services to provide evaluation and treatment to persons under 18 years of age suffering from mental disorders, or
   (b) Be a part of or operated by the department of social and health services or any federal agency and be designated to provide services to minors by the department.

(2) The involuntary commitment is pursuant to a juvenile court order: Provided, That a designated county mental health professional may detain a minor for up to 72 hours in a certified facility pending petition to the juvenile court for further commitment if it is the opinion of the designated county mental health professional that the minor presents an imminent likelihood of serious harm to himself or others. [Order 955, § 275-55-140, filed 7/26/74; Order 900, § 275-55-140, filed 1/25/74.]

WAC 275-55-150 Voluntary patient—Periodic review. When the condition and status of a voluntary patient are reviewed at least each 180 days, such patient shall be again advised orally of his right to release and in writing of his rights as set forth under WAC 275-55-130. Involuntary patients—Periodic review. When the condition and status of an involuntary patient are reviewed at least each 180 days, such patient shall be again advised orally of his right to release and shall be further advised in writing of all rights secured to him or her pursuant to WAC 275-55-270(1), (2).

(2) All involuntary patients upon admission to the facility shall be advised by the facility either orally or in writing of their rights as involuntary patients as specified in WAC 275-55-270(1), (3). In addition, if possible, a responsible member of the immediate family, guardian, and conservator, if any, and such other person as designated by the patient shall receive notification in writing of the patient’s confinement and his rights retained as an involuntary patient.

(3) All involuntary patients shall be advised orally and in writing that within 24 hours they will receive an examination and evaluation to determine whether their continued confinement within the facility is necessary, and further, if they are not released within 72 hours, they will be entitled to a judicial hearing before a superior court to decide whether their continued confinement within the facility is necessary. [Order 955, § 275-55-170, filed 7/26/74; Order 900, § 275-55-170, filed 1/25/74.]

WAC 275-55-160 Available physician or other professional person. "Available physician or other professional person" as used in section 14 as amended means such qualified person working within, or contracting to provide such services for, the facility, unless the patient provides payment for any other qualified professional. [Order 900, § 275-55-160, filed 1/25/74.]

WAC 275-55-170 Advising patient of rights. (1) Every voluntarily admitted patient shall be advised orally of his or her right to release and shall be further

[Title 275 WAC—p 86]

(1980 Ed.)
(2) The officer or mental health professional escorting the patient to the facility shall take reasonable precautions to safeguard the property of the patient which is in the immediate vicinity of the point of apprehension.

(3) Reasonable precautions shall be taken to safeguard belongings not in the immediate vicinity of the patient by the public officer and/or facility when notice of possible danger thereto is received. [Order 900, § 275–55–200, filed 1/25/74.]

WAC 275–55–210 Voluntary treatment of involuntary patient. Patients committed by court order to involuntary treatment shall have all rights of voluntary patients where the facility has converted the patient to voluntary status and the patient has signed an application to receive voluntary treatment. [Order 955, § 275–55–210, filed 7/26/74; Order 900, § 275–55–210, filed 1/25/74.]

WAC 275–55–220 Professional persons in charge. "Professional persons in charge" as used in this chapter, unless otherwise defined, shall mean the professional person having chief clinical responsibilities for mental health evaluation and treatment within the institution, hospital, sanitarium or facility involved. [Order 900, § 275–55–220, filed 1/25/74.]

WAC 275–55–230 Revocation of conditional release. (1) The secretary's designee for purposes of revocation of conditional release under RCW 71.05.340 shall be the superintendent of the state hospital or his specified designee from which the patient was conditionally released or the director of the bureau of mental health or his specified designee.

(2) The secretary's designee or the designated county mental health professional may order a revocation of a conditional release after which the conditionally released patient may be detained for a period not to exceed five days so that a court hearing may be held to consider revocation of his conditional release. The court ordering original commitment shall be notified within two judicial days of the person's detention. [Order 1122, § 275–55–230, filed 6/2/76; Order 955, § 275–55–230, filed 7/26/74; Order 900, § 275–55–230, filed 1/25/74.]

WAC 275–55–240 Release of indigent patients. No indigent patient shall be discharged or conditionally released during or at the expiration of any 14-day or longer involuntary confinement period without suitable clothing and funds of at least the minimum specified under RCW 72.02.100. If such patient has funds of less than such minimum amount, the patient shall be paid an amount necessary to reach such minimum. If the indigent patient has no funds, the total minimal amount shall be paid. Request for suitable clothing or funding therefor and funds shall be made by the person in charge of the facility or his designee to the superintendent of the nearest state hospital or his designee. Such request shall be made at least 72 hours ahead of expected release. For the purposes of this rule, the superintendent may designate a staff member of community services within the department to handle funding and clothing requests.

If funding is available, the superintendent may provide in addition to the minimum funding required by RCW 72.02.100, an additional amount of up to the optional amount specified in RCW 72.02.100 to any indigent patient who applies therefor if such extra funding is necessary for personal and/or living expenses of such patient.

As funds are available, the secretary or his designee may provide in the alternative to the funding set out above to the conditionally released patient, a weekly payment of an amount specified in RCW 72.02.110 for a period of up to the total time of conditional release.

No patient regardless of the length of commitment shall be released without transportation to his place of residence or other suitable place. If the patient has no suitable means of transportation and is also indigent, then the facility shall provide for transportation by the least expensive method of public transportation not to exceed a cost of $100, or, in the alternative, the facility itself may provide such transportation.

If the person making request for suitable clothing or funding from the superintendent of the nearest state hospital has reasonable cause to believe that the patient to be released has ample funds to assume expenses of clothing, transportation, or other payments made herein, or any one or more of such expenses, the person released shall be required to assume such expenses and the superintendent of the nearest state hospital shall be so advised.

Indigent patient for the purposes of this rule means "inability to pay" as determined by standards of WAC 275–55–290(6).

Where funding is available, the secretary or the superintendent may at his discretion provide funds or clothing pursuant to this rule and the laws of the state of Washington to voluntary patients. [Order 900, § 275–55–240, filed 1/25/74.]

WAC 275–55–250 Research. All research concerning mentally ill patients voluntarily admitted or involuntarily committed under this chapter shall be undertaken in accordance with department policy document 118–T, which is entitled, "Protection of Human Subjects in Research, Development, Demonstration, and Other Projects." Furthermore, any person involved in evaluation or research concerning persons under this chapter shall be required to sign a statement as provided for in RCW 71.05.390. Such statement will be filed with the director. [Order 1122, § 275–55–250, filed 6/2/76; Order 900, § 275–55–250, filed 1/25/74.]

WAC 275–55–260 Release of information. The fact of admission and all information and records compiled, obtained or maintained in the course of providing services to either voluntary or involuntary patients is confidential and shall not be released except pursuant to the following:
(1) The following information shall be released to a patient's next of kin, attorney, guardian or conservator, if any.
   (a) That the person is presently a patient in the facility;
   (b) That the person is seriously physically ill;
   (c) That the patient has died.
(2) The following information shall be released to a patient's next of kin, attorney, guardian or conservator, if any, when requested by any such person:
   (a) A statement evaluating the mental and physical condition of the patient;
   (b) A statement of the probable duration of the patient's confinement;
   (c) Such other information as may be necessary to decide whether or not proceedings should be instituted to appoint a guardian or conservator.
(3) The fact of admission and all information and records compiled, obtained, or maintained in the course of providing services to either voluntary or involuntary recipients of services may be disclosed:
   (a) In communication between qualified professional persons to meet requirements of the chapter, in provision of services or appropriate referrals, or in the course of guardianship, provided that, the professional not employed by the facility has the medical responsibility for the patient's care, is a designated county mental professional, or is involved in providing services under the community mental health services act, chapter 71.24 RCW.
   (b) When the person receiving services, or his guardian designates persons to whom information and records may be released, or if the patient is a minor, when his parents make such designation.
   (c) To the extent necessary for a recipient to make a claim, or for a claim to be made on behalf of a recipient for aid, insurance, or medical assistance to which he may be entitled.
   (d) For program evaluation and research pursuant to WAC 275-55-250.
   (e) To the courts as necessary to the administration of this chapter.
   (f) To the attorney of the detained person.
(4) Fact and date of admission, fact and date of discharge, and last known address shall be disclosed upon request to law enforcement officers or public health officers subject to the following limitations:
   (a) The information is necessary to carry out responsibilities of their office, and
   (b) They shall be obligated to keep such information confidential in accordance with this chapter.
   (c) Additional information shall be disclosed to law enforcement officers or public health officers only after giving notice to said person and his counsel and upon a showing of clear, cogent and convincing evidence that such information is necessary and that appropriate safeguards for strict confidentiality are and will be maintained: Provided however, That in the event the said person has escaped from custody, said notice prior to disclosure is not necessary and that the facility from which the person escaped shall include an evaluation as to whether the person is of danger to persons or property and has a propensity toward violence. [Order 1122, § 275-55-260, filed 6/2/76; Order 955, § 275-55-260, filed 7/26/74; Order 900, § 275-55-260, filed 1/25/74.]

WAC 275-55-270 Patient's rights. Any institution, hospital, sanitarium or facility providing services to the mentally ill, as defined in this chapter, shall not withhold from any patient the following rights, and a list of such rights shall be prominently posted within the department or ward in which such person is housed. In addition, the institution, hospital, sanitarium or facility shall insure, unless an imminent danger to the individual or others would result, that each patient shall have the rights listed below in subdivisions (1)(a)(i), (1)(k), (2)(a), (2)(b), (3)(a), (3)(c), (3)(d), (3)(f), and (3)(g).
(1) Rights of all patients:
   (a) No patient shall be restrained from sending written communications of the fact of his detention; any such communication will be mailed to the person to whom addressed by the physician in charge of the patient and/or person in charge of the facility.
   (b) All patients shall have the right to adequate care and individualized treatment.
   (c) All patients have the right to wear their own clothes and to keep and use their own personal possessions, except when deprivation of same is essential to the protection and safety of the resident or other persons.
   (d) All patients have the right to keep and be allowed to spend a reasonable sum of his or her own money for canteen expenses and for small purchases.
   (e) All patients have the right of access to individual storage space for his or her private use.
   (f) All patients have the right to have visitors at reasonable times.
   (g) All patients have the right to have reasonable access to a telephone both to make and receive confidential calls.
   (h) All patients have the right to have ready access to letter writing material, including stamps and to send and receive uncensored correspondence through the mails.
   (i) All patients have the right not to consent to the performance of shock treatment or surgery, except emergency life-saving surgery, upon him, and not to have shock treatment or nonemergency surgery in such circumstances unless ordered by a court pursuant to a judicial hearing in which he is present and represented by counsel, and the court shall appoint a psychiatrist, psychologist, or physician designated by such person or his counsel to testify on behalf of such person.
   (j) All patients have the right to dispose of property and sign contracts unless they have been adjudicated an incompetent in a court proceeding directed to that particular issue.
   (k) All patients have the right to not have psychosurgery performed under any circumstances.
   (l) All patients have the right to object to detention or request release through writ of habeas corpus.
(m) No person shall be presumed incompetent or lose any civil rights as a consequence of receiving evaluation or treatment for mental disorder.

(n) All patients have the right of access to attorneys, courts, and other legal redress.

(2) Rights of voluntary patients:

(a) All voluntary patients have the right to release unless involuntary commitment proceedings are initiated. Specific patients' rights to release are as follows:

   (i) Adult patient—No guardian—Release at request of patient.

   (ii) Adult admitted by guardian—Release at request of guardian or patient.

   (iii) Minor—13 years or under—Release at request of parent, guardian, or other person entitled to custody.

   (iv) Minor—More than 13 years of age—Released on request of parent or guardian on next judicial day at request of minor.

(b) All voluntary patients have the right to a review of condition and status at least each 180 days.

(3) Rights of involuntary patients:

(a) Unless released within 72 hours, all involuntary adult patients have a right to a judicial hearing not more than 72 hours after initial detention to determine whether probable cause exists to detain such person after 72 hours for a further period up to 14 days.

(b) All involuntary patients have the right to communicate immediately with an attorney, and if indigent, they have the right to have an attorney appointed to represent them before and at such hearing and a right to be told the name and address of the attorney who has been designated.

(c) All involuntary patients have the right to remain silent.

(d) All involuntary patients have the right to be told that statements they make may be used against them.

(e) All involuntary patients have the right to present evidence and to cross-examine the witnesses who testify against them at the probable cause hearing.

(f) All involuntary patients have the right to refuse medication beginning 24 hours prior to any court proceeding wherein the patient has a right to attend and which bears upon the continued commitment of the patient.

(g) When taken into custody by a public officer and then placed in a facility without authorization by the county designated mental health professional, the involuntary patient shall be released within 12 hours unless the county designated mental health professional files a supplemental petition for initial detention and the detained person receives a copy. [Order 1122, § 275-55—270, filed 6/2/76; Order 955, § 275-55—270, filed 7/26/74; Order 900, § 275-55—270, filed 1/25/74.]

WAC 275-55-280 Standards for certification of evaluation and treatment facilities. (1) An evaluation and treatment facility provides a spectrum of services directly or by contractual arrangement with other approved public or private agencies, which includes one or more of the following services: Emergency evaluation and treatment, outpatient care and inpatient care to persons suffering from a mental disorder.

(2) The following standards shall apply to all agencies providing involuntary treatment as specified in the chapter:

(a) All facilities must maintain adequate accounting records.

(b) All facilities must maintain, for each patient, a clinical record which contains sufficient information to justify the diagnosis, delineate the individual treatment plan and chart the course of treatment. It is the responsibility of the facility to safeguard the record against loss, defacement, tampering or use by unauthorized persons. Information from the record shall be released only upon the written authorization of the patient or his guardian, or as provided in the chapter.

(c) All facilities must have a treatment plan which includes discharge planning to assist the patient to make suitable plans for his future beginning upon admission into a facility. These discharge plans will be entered into the patient's record and updated as appropriate.

(d) All facilities shall prepare and submit such reports as are required by the department.

(e) All facilities shall have access to necessary nonelective treatment throughout the period of treatment pursuant to this chapter.

(f) All facilities shall care for patients in a therapeutic environment in which appropriate therapeutic activities are available which may include drug and somatic therapies, occupational therapy, and recreational and diversionary activities.

(g) All facilities must maintain written procedures for managing assaultive and/or self-destructive behavior.

(h) All facilities shall have access to supportive services appropriate to treatment such as:

   (i) Casework services.

   (ii) Vocational rehabilitation.

   (iii) Legal services.

   (i) All facilities shall have access to emergency life-sustaining treatment and medication support services.

(j) All facilities shall provide treatment of each patient under the supervision of a mental health professional.

(k) All facilities shall develop and implement in-service training by each service which shall include consideration of less restrictive alternatives, appropriate patient care and other content areas which will enhance the care of persons treated pursuant to this chapter. Documentation of the training program shall be made available as part of the certification process.

(l) All facilities shall maintain written agreements for coordinating, integrating, and ensuring continuity of care within and among inpatient, emergency and outpatient services.

(m) All facilities shall maintain a written statement describing the organizational structure, objectives and the philosophy of the therapeutic environment.

(n) All facilities must be recognized elements of the county's annual mental health services plan.

(o) All facilities must consider the use of the least restrictive treatment alternative among and within each
program service and must document such consideration in the patient's record.

(p) The use of chemical and physical restraints and seclusion shall be in keeping with a therapeutic regimen, and when less restrictive alternatives are preferable for patient care, these shall be utilized.

(i) The factors necessitating the use of restraint/isolation procedures shall be recorded in the patient's chart over the signature of the authorizing physician.

(ii) In the event of an emergency use of restraint/isolation, a mental health professional must be immediately notified and provide written justification for the restraint/isolation.

(iii) No patient may be restrained/isolated for a period in excess of four hours without having been examined by a mental health professional and having such restraint/isolation so ordered by a physician.

(iv) Restraint/isolation procedures in excess of 24 hours must be authorized by a licensed physician. The facts determined by their examination and any resultant decision to continue restraint/isolation procedures shall be recorded in the patient's record. This procedure must be repeated for each subsequent 24-hour period of restraint/isolation.

(3) Evaluation and treatment facilities may be certified to provide one or more of the following services:

(a) Outpatient evaluation and treatment as set forth in WAC 275-12-520.

(b) Emergency service for involuntary clients, defined as the provision of immediate therapeutic intervention in cases involving involuntary clients. The term "emergency" refers to a set of circumstances (physiological, psychological, and/or social) which poses an imminent threat to the safety and/or well-being of the client or others. In addition to the general standards stated in WAC 275-55-280, the following shall apply to all emergency services for involuntary clients:

(i) Such service shall have the ability to respond immediately to clients, and to admit clients on a 24-hour per day, seven-day per week basis;

(ii) Such service shall have immediately available at all times, as needed, professional personnel and services including, but not limited to licensed physician, mental health professional skilled in crisis intervention, appropriate life support systems and the staff necessary to provide them, designated mental health professional for the purpose of evaluating the need for emergency detention, professional person, as defined in the chapter, for the provision of consultation and communication with the client and the staff of the service;

(iii) Such service shall have the capability to detain individuals who are a danger to self or others, and shall provide at least one seclusion room which meets the requirements of WAC 248-18-530 (5)(a) now or as hereafter amended;

(iv) Within 24 hours of admission to the service, the following evaluations shall be conducted in order to determine the nature of the disorder and the treatment(s) required: Medical evaluation by a licensed physician, and psycho-social evaluation by a mental health professional.

(c) Inpatient evaluation and treatment as set forth in WAC 275-12-530, for one or more of the following:

(i) Patients gravely disabled under initial detention,

(ii) Patients dangerous to self or others and under initial detention,

(iii) Patients gravely disabled under court commitment, and/or

(iv) Patients dangerous to self or others and under court commitment.

(v) Provided any inpatient component certified to evaluate and treat patients who are considered dangerous to self or a danger to self or others and must have access to at least one seclusion room which meets the requirements of WAC 248-18-530 (5)(a) now or as hereafter amended.

(d) One or more of the services enumerated in subdivisions (a), (b), and (c) may be provided to minors, so long as the facility is in compliance with the provisions of WAC 275-55-288. [Order 1122, § 275-55-280, filed 6/2/76; Order 1029, § 275-55-280, filed 5/29/75; Order 955, § 275-55-280, filed 7/26/74; Order 900, § 275-55-280, filed 1/25/74.]

WAC 275-55-282 Outpatient component. (1) The outpatient component is defined as a setting in which an array of treatment services are provided on a regular basis to patients not in residence in the facility. These services are intended to stabilize, sustain and encourage growth of the individual within his environment. In addition to the general standards stated in WAC 275-55-280, the following standards shall apply to all outpatient components:

(a) Such component must have access to consultation by a psychiatrist or a physician with at least one year's experience in the direct treatment of mentally ill or emotionally disturbed persons, such access to be a minimum of one hour per week for each 40 hours of direct services or non-medical staff time.

(b) Such component shall include medical consultation with the patient to assess and prescribe psychotropic medication to meet the needs of the patient, said consultation to occur at least weekly during the 14-day period, every other week during the 90-day period, and monthly during the 180-day period of involuntary treatment.

(c) Such component must provide a therapeutic program which includes generally accepted treatment modalities such as:

(i) Individual,

(ii) Group,

(iii) Family/marital,

(iv) Chemotherapy.

(d) Each outpatient client must be seen at least weekly by assigned staff during the period of involuntary treatment. A mental health professional must review each outpatient case at least weekly to ensure updating of the treatment plan and this must be recorded in the patient's record.

(e) Such component shall have available a training package for employees that fully informs them of related
services, the provisions and requirements of the chapter, these rules and regulations, and standards and guidelines promulgated by the department. Related services include but are not limited to: transportation, law enforcement, courts, prosecutors, caseworkers, and hospitals.

(f) Such component must have available outpatient services to persons discharged from the involuntary treatment system.

(g) Whenever possible, medication should be available to the client at a reduced rate through a state medication purchase contract, or through the state hospital pharmacy. [Order 1029, § 275-55-282, filed 5/29/75.]

WAC 275-55-284 Emergency component. (1) The emergency component is defined as a setting in which immediate therapeutic intervention occurs. The term "emergency" refers to a set of circumstances (physiological, psychological, and/or social) which pose an imminent threat to the safety and/or well-being of the patient or others. In addition to the general standards stated in WAC 275-55-280, the following standards shall apply to all emergency components:

(a) Such component must have the ability to respond immediately to and admit patients on a 24-hour/day, seven-day/week basis.

(b) Such component shall have access to a professional person as defined in the chapter for consultation and communication with the patient and the program component on a 24-hour/day, seven-day/week basis.

(c) Such component shall have access to a licensed physician for the purpose of medical psycho-social evaluation and a mental health professional for psycho-social evaluation within 24 hours of admission.

(d) Such component shall have immediate availability of professional personnel and services including but not limited to:

(i) Licensed physician,

(ii) Mental health professional skilled in crisis intervention,

(iii) Life support systems and personnel,

(iv) Designated mental health professional for purpose of emergency detention if necessary.

(e) The emergency component shall have the capability to detain individuals who are a danger to self or others and must have access to at least one seclusion room which meets the requirements of WAC 248-18-535 now or as hereafter amended.

(f) Medical and psycho-social evaluations must be conducted within 24 hours of admission. These evaluations must be used to determine the nature of the disorder and treatment(s) required.

(g) Any inpatient component certified to evaluate and treat patients during initial 72-hour involuntary evaluation and treatment shall have the capability to admit the patient on a 24-hour/day, seven-day/week basis.

(h) Any inpatient component certified to evaluate and treat patients who are considered dangerous to self or others shall have the capability to detain individuals who are a danger to self or others and must have access to at least one seclusion room which meets the requirements of WAC 248-18-535 now or as hereafter amended. [Order 1029, § 275-55-286, filed 5/29/75.]

WAC 275-55-288 Standards for evaluation and treatment facilities serving minors. (1) The standards for certification of evaluation and treatment facilities accepting minors shall include general standards and applicable service standards of these rules and regulations and the following:

(a) The evaluation process shall include assessment of factors contributing to the emotional dysfunctioning such as family dynamics, environmental influences, or interactions with other significant persons. These evaluations must be used to determine the nature of the disorder and the treatment(s) required.

(b) The treatment plan shall include therapeutic activities designed to ameliorate, modify, or reverse contributing conditions.

(i) Family therapy must be available as an integral part of the treatment plan;

(ii) Treatment plans should provide for support/advocacy services on the community level (for example, educational and law enforcement systems)
whenever such intervention is deemed necessary to the well-being of the minor.

(c) Any joint use by adults and minors of any given program service must be documented to indicate professional judgement/rationale for this decision and indications of special program planning must be contained within the client's record.

(d) Treatment and evaluation must be provided or supervised by a mental health professional with at least one year's experience in the direct treatment of disturbed minors, or by a mental health professional in consultation with a mental health professional with such experience (during the evaluation phase and at least once per week during the inpatient treatment phase).

WAC 275-55-290 Financial assistance to counties. To enable counties to meet the increased costs, resulting from the implementation of this chapter, unless otherwise authorized by the secretary, the department shall reimburse the counties upon submission of vouchers in a manner and form as set forth by the department for expenditures incurred to carry out the provisions of the chapter and these rules pursuant to the following:

(1) The department shall award an amount to the counties to be used to pay for all administrative costs incurred to implement this chapter pursuant to provisions of chapter 275-12 WAC and chapter 71.24 RCW. Mental health "administrative costs" are for those services not listed under the Title XIX modality schedule. Administrative costs include all travel and transportation expenses, whether for staff or patients, all investigative costs not otherwise recoverable as a Title XIX listed service, expenses for hearings, testimony, legal, courts and prosecutors, county mental health administrator and mental health agency administrative staff. Where indicated in the award contract, certain of these services may be required to be identified as Title XX eligible. Where this is required, the county and its agencies are to follow the Title XX billing instructions set forth by the department.

(2) For the period of 72-hour detention for each and every person involuntarily detained for mental disorder where specific statutory ground of detention is set forth, the department shall reimburse the counties in the amount of actual expenditures not to exceed the payment schedule established for recipients under Title XIX of the social security act and no additional reimbursement will be allowed for costs already reimbursed at a Title XIX payment schedule rate.

(4) If a patient is conditionally released pursuant to the provisions of the chapter, reimbursement to the counties shall be actual costs up to the payment schedule established for recipients under Title XIX of the social security act and no additional reimbursement will be allowed for costs already reimbursed at a Title XIX payment schedule rate.

(5) The department will reimburse for inpatient medical and hospital expenses for patients who are detained involuntarily but who then convert to a voluntary basis. Such coverage will be for the initial 17-day detention period regardless of the day within that period that the patient converts to a voluntary status. Reimbursement is not to exceed the payment schedule established for recipients under Title XIX of the social security act.

(6) Any person, or his estate, or his spouse, or the parents of a minor person who is involuntarily detained pursuant to this chapter shall be responsible for the cost of such care and treatment. The counties shall be responsible to recover the costs of evaluation, treatment and detention from the patient or his responsible relative who has the ability to pay. The basic Title XIX--FAMCO income and resources standards as found in chapter 388-83 and/or 388-92 WAC shall be used to define and determine "inability to pay" and "substantial hardship". The counties must demonstrate that a reasonable effort has been made to recover these costs of care from the patient, or his responsible relative, and from any public or private third party payment system. Each patient billing submitted to the department for reimbursement must include a statement certifying that the following process has been completed:

(a) All appropriate patient and patient family resources have been utilized and other potential third party payors have been investigated.

(b) Where possible any medical coupons have been obtained.

(c) A "category determination" has been made and the local department of social and health services office has been notified of any patients who appear to be categorically eligible.

(d) Third party collections are shown and deducted from the billing and any future such collections will be reported and adjusted into the payment cycle. [Order 1122, § 275-55-290, filed 6/2/76; Order 955, § 275-55-290, filed 7/26/74; Order 900, § 275-55-290, filed 1/25/74.]

Chapter 275-59 WAC

CRIMINALLY INSANE PERSON COMMITTED TO THE CARE OF THE DEPARTMENT OF SOCIAL AND HEALTH SERVICES--EVALUATION, PLACEMENT, CARE AND DISCHARGE

WAC 275-59-010 Purpose.
275-59-020 Definitions.
275-59-030 Mental health division.

[Title 275 WAC—p 92]
275-59-041 Schedule of maximum payment for defendant expert or professional person.
275-59-050 Time limitations and requirements.
275-59-080 Conditional release.
275-59-090 Retroactivity.

**DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER**


**WAC 275-59-010 Purpose.** These regulations are adopted pursuant to and in accordance with chapter 117, Laws of 1973, 1st ex. sess. They are adopted to provide procedures for the evaluation, placement, care and discharge of persons committed to the care of the department of social and health services, under the aforementioned Act, relating to the criminally insane. [Order 846, § 275–59-010, filed 8/9/73.]

**WAC 275-59-020 Definitions.** (1) "Secretary" means the secretary of the department of social and health services or his designee.

(2) "Department" means the state department of social and health services.

(3) "Division" means the mental health division, department of social and health services.

(4) "Treatment facility" means any facility operated or approved by the department of social and health services for the treatment of the criminally insane. Such definition shall not include any state correctional institution or facility.

(5) "Superintendent" means the person responsible for the functioning of a treatment facility.

(6) "Evaluation" means the initial procedure when a court requests the department to determine if a person charged with a crime is competent to stand trial or, if indicated and appropriate, if the person was suffering under a mental disease or defect excluding responsibility at the time of the commission of the crime.

(7) "Indigent" means any person who is financially unable to obtain counsel or other necessary expert or professional services without causing substantial hardship to himself or his family.

(8) "Mental health professional" means:

(a) A psychiatrist. This is defined as a person having a license as a physician and surgeon in this state, who has in addition, completed three years of graduate training in psychiatry in a program approved by the American Medical Association or the American Osteopathic Association.

(b) A psychologist. This is defined as a person with a doctoral degree in clinical psychology from an accredited college or university, or who has been licensed as a psychologist pursuant to chapter 18.83 RCW.

(c) A social worker. This is defined as a person with a master's or further advanced degree from an accredited school of social work, and who has had a minimum of two years of experience in the direct treatment of mentally ill or emotionally disturbed persons under the supervision of a mental health professional.

(d) A psychiatric nurse. This is defined as a registered nurse who has a master's or further advanced degree in psychiatric nursing from an accredited college or university, and who has had a minimum of two years of experience in the direct treatment of mentally ill or emotionally disturbed persons under the supervision of a mental health professional. [Statutory Authority: RCW 72.01.090. 79-03-038 (Order 1373), § 275–59-020, filed 3/1/79; Order 846, § 275–59-020, filed 8/9/73.]

**WAC 275-59-030 Mental health division.** The secretary designates to the division the responsibility for:

(1) Evaluation and treatment of any person committed to the secretary for evaluation or treatment, under chapter 10.77 RCW;

(2) Assisting the court in obtaining nondepartmental mental health professionals to participate in the evaluation or a hearing on behalf of the defendant and supervising the procedure whereby such professionals will be compensated, according to fee schedule if the person being evaluated or treated is an indigent;

(3) Assuring that any nondepartmental mental health professional requesting compensation has maintained adequate evaluation and treatment records which justify compensation;

(4) Assisting the court by designation of professionals to examine the defendant and report to the court when the defendant is not committed to the secretary;

(5) Determination of what treatment center shall have custody of persons committed to the secretary under chapter 10.77 RCW. [Statutory Authority: RCW 72.01.090. 79-03-038 (Order 1373), § 275–59-030, filed 3/1/79; Order 846, § 275–59-030, filed 8/9/73.]

**WAC 275-59-041 Schedule of maximum payment for defendant expert or professional person.** Department payments to an expert or professional person obtained by an indigent person shall not exceed a payment per hour of fivey dollars nor shall not exceed a total payment of four hundred dollars, unless an exception is approved in writing by the division director. [Statutory Authority: RCW 72.01.090. 79-03-038 (Order 1373), § 275–59-041, filed 3/1/79.]

**WAC 275-59-050 Time limitations and requirements.** If a person is committed to the secretary as criminally insane, commitment and treatment cannot exceed the maximum possible sentence for any offense charged. Therefore:

(1) The superintendent, if no superintendent then the division, with the assistance of the office of the attorney general where necessary shall determine at the time of commitment the maximum possible sentence for any offense charged, and thereby compute a maximum release date for every individual so committed.

(2) If the committed person has not been released by court order six months prior to the expiration of the maximum possible release date, the superintendent, if no
superintendent, the division, shall notify the committing court and prosecuting attorney of its computation of maximum release date and the requirement that the person must be released on that date unless civil proceedings are instituted or the court determines that the computation of maximum release date is incorrect. [Statutory Authority: RCW 72.01.090, 79–03–038 (Order 1373), § 275–59–050, filed 3/1/79; Order 846, § 275–59–050, filed 8/9/73.]

WAC 275–59–060 Individualized treatment. (1) Whenever a person is committed to the secretary as criminally insane, the treatment facility to which the person is assigned shall, within fifteen days of admission to the center, and through the use of appropriate mental health professionals, evaluate and diagnose the committed person for the purpose of devising an individualized treatment program.

(2) Every person, committed to the secretary as criminally insane, shall have an individualized treatment plan formulated by the treatment center. This plan shall be developed by appropriate mental health professionals and implemented as soon as possible but no later than fifteen days after the person's admission to the treatment center as criminally insane. Each individualized treatment plan shall include, but not be limited to:

(a) A statement of the nature of the specific problems and specific needs of the patient;
(b) A statement of the physical setting necessary to achieve the purposes of commitment;
(c) A description of intermediate and long-range treatment goals, with a projected timetable for their attainment;
(d) A statement and rationale for the plan of treatment for achieving these intermediate and long-range goals;
(e) A specification of staff responsibility and a description of proposed staff involvement with a patient in order to attain these treatment goals;
(f) Criteria for recommendation to the court for release.

(3) This individualized treatment plan shall be reviewed by the treatment center periodically, at least every six months, and a copy of the plan shall be sent to the committing court. [Statutory Authority: RCW 72.01.090. 79–03–038 (Order 1373), § 275–59–060, filed 3/1/79; Order 846, § 275–59–060, filed 8/9/73.]

WAC 275–59–080 Conditional release. (1) Any person committed to the secretary as criminally insane may make application to the secretary for conditional release.

(2) The secretary designates the superintendent of the treatment facility, if no superintendent, then the director of the division, as the person to receive and act on such application for conditional release.

(3) The person making application for conditional release shall not, under any circumstances, be released until there is a court hearing on the application and recommendations and a court order authorizing conditional release has been issued.

(4) If conditional release is denied by the court the person making the applications may reapply after a period of six months from the date of denial.

(5) If the court grants conditional release and places the person making application under the supervision of a department employee, that supervising department employee shall make monthly reports, unless indicated otherwise by the court, concerning the conditionally released person's progress and compliance with the terms and conditions of conditional release. Such reports shall be forwarded to the committing court, the division, the prosecuting attorney, and the treatment facility in which the person was most recently housed.

(6) The following persons are designated to exercise power and authority of the secretary contained in RCW 10.77.190:

(a) The director or designee of the division;
(b) The probation and parole office, if any, supervising the conditionally released person; and
(c) The treatment facility supervising the conditionally released person or from which the person was conditionally released. [Statutory Authority: RCW 72.01.090. 79–03–038 (Order 1373), § 275–59–080, filed 3/1/79; Order 846, § 275–59–080, filed 8/9/73.]

WAC 275–59–090 Retroactivity. (1) This chapter shall apply to persons committed to the secretary or the department, under prior rules and regulations, as incompetent to stand trial or as being criminally insane and therefore requires that these individuals be provided:

(a) An individualized treatment plan;
(b) An evaluation to be forwarded to the committing court;
(c) Applicability of time limitations and requirements provided herein;
(d) A maximum release date; and
(e) An opportunity to apply for conditional release. [Order 846, § 275–59–090, filed 8/9/73.]

Chapter 275–76 WAC
ADULT CORRECTIONAL INSTITUTIONS—DETAINER

WAC
275–76–005 Definitions.
275–76–010 Purposes of detainers.
275–76–020 Form of detainers.
275–76–030 Evaluation of detainer request.
275–76–040 Trial or pretrial detainers.
275–76–050 Commitment detainers.
275–76–060 Probation or parole revocation detainers.
275–76–070 Miscellaneous detainers.
275–76–080 Resident to be made available.
275–76–090 Reduced custody programs.
275–76–100 Requested resident on parole.
275–76–110 Transfer of resident to mental hospital.
275–76–120 Recommendation for withdrawal of detainer.
275–76–130 Identification of requesting authority's transferring agency.
275–76–140 Failure of requesting authority to take custody.
275–76–150 Detainer request by nonsignator of interstate agreement on detainers.

(1980 Ed.)
WAC 275-76-005 Definitions. For purposes of this chapter:
(1) "Detainer" shall mean a formal written request by a requesting authority to the superintendent of a custodial institution subject to the jurisdiction and control of the department asking that the superintendent
(a) Notify the requesting authority when the release of a particular resident is imminent, and/or
(b) Hold the resident pending transfer of the resident to the custody of the requesting authority.
(2) "Superintendent" shall refer to the chief administrator of a custodial institution subject to the jurisdiction and control of the department, or his authorized agents.
(3) "Department" shall mean the department of social and health services of the state of Washington.
(4) "Requesting authority" shall mean any criminal justice agency which files a detainer with the department or with the superintendent of a custodial institution subject to the jurisdiction and control of the department.
(5) "State administrator" shall refer to the state officer designated, in accordance with the provisions of chapter 9.100 RCW, to administer the interstate agreement on detainers within the state of Washington.
(6) "Resident" shall refer to an inmate of a correctional facility subject to the jurisdiction and control of the department. [Order 797, § 275-76-005, filed 5/10/73.]

WAC 275-76-010 Purposes of detainers. Detainers may be filed with the department or with the superintendent of a custodial institution subject to the jurisdiction and control of the department in order to accomplish any of the following purposes:
(1) "Trial or pretrial detainers" — to secure the return of a resident to the jurisdiction and custody of the requesting authority for trial on pending criminal charges or for pretrial proceedings on potential but not yet pending criminal charges;
(2) "Commitment detainers" — to secure the return of a resident to the jurisdiction and custody of the requesting authority for service of an unexpired portion of the resident’s sentence on a previous conviction;
(3) "Probation or parole revocation detainers" — to secure the return of a resident to the jurisdiction and custody of the requesting authority for a hearing on whether the resident’s probation or parole, previously granted in connection with a prior conviction and sentence, should be revoked;
(4) "Miscellaneous detainers" — to secure the return of a resident to the jurisdiction and custody of the requesting authority for such miscellaneous purposes as are necessary and valid in the context of the criminal justice system. [Order 797, § 275-76-010, filed 5/10/73.]

WAC 275-76-020 Form of detainers. A detainer filed with the department or with the superintendent of a custodial institution subject to the jurisdiction and control of the department shall contain, and describe in detail, the following information:
(1) The identity of the requesting authority;
(2) The purpose of the detainer;
(3) The legal basis for the detainer, including, in all cases, a description of the factual circumstances which provide the basis for the issuance of the detainer;
(4) The sentence or possible penalties which the resident will face if delivered to the custody of the requesting authority;
(5) A statement as to whether it is the intention of the requesting authority to execute the detainer and subject the resident to trial, hearing, or incarceration. [Order 1009, § 275-76-020, filed 2/13/75; Order 797, § 275-76-020, filed 5/10/73.]

WAC 275-76-030 Evaluation of detainer request. Whenever a superintendent receives a detainer request he shall evaluate the request to determine if it complies in form and content with the provisions of this chapter.
(1) If the superintendent determines that a detainer request is valid, he shall acknowledge in writing to the requesting authority that the detainer has been received and will be honored by the department in accordance with the provisions of the interstate agreement on detainers.
(2) If the superintendent determines that a detainer fails to comply with the provisions of this chapter and is therefore invalid, he shall forward the detainer request to the state administrator who shall then make a final determination as to the validity of the detainer.
(a) If the state administrator determines that the detainer is invalid he shall immediately
(i) Notify the requesting authority that the detainer will not be honored by the department;
(ii) Inform the requesting authority in detail of the manner in which the detainer fails to comply in form and/or content with the provisions of this chapter;
(iii) Inform the requesting authority that the detainer will be honored if refiled in compliance with the provisions of this chapter.
(b) If the administrator determines that the detainer is valid, he shall immediately inform the superintendent of his decision and ask the superintendent to acknowledge in writing to the requesting authority that the detainer has been received and will be honored by the department.
(3) If the superintendent determines that a detainer is in fact merely a request for notice as to the resident’s present status or future release date, and not a request that the resident be held pending transfer to the custody of the requesting authority, he shall inform the requesting authority that
(a) The detainer will be honored as a request for notice,
(b) The resident will not be held by the department for transfer to the custody of the requesting authority, and
(c) The requesting authority may, if it wishes, file a new detainer, requesting that the resident be held by the department for transfer to the custody of the requesting authority. [Order 797, § 275-76-030, filed 5/10/73.]
WAC 275-76-040 Trial or pretrial detainers. (1) Who may file. The authority to issue or file trial or pretrial detainers shall generally be limited to the chief prosecuting authority of the jurisdiction making the detainer request.

(a) Nonprosecutorial officials, such as state or county sheriffs or police, shall not have authority to file detainers.

(b) In federal matters a United States marshal may formally file a detainer when acting on behalf of a United States district attorney or attorney general.

(2) Supportive materials necessary. Trial or pretrial detainers shall be accompanied by a certified copy of the complaint, indictment, information, or court order which is the jurisdictional basis for the detainer.

(3) Underlying charge. The underlying charge upon which a trial or pretrial detainer is based shall be either a felony or gross misdemeanor under the laws of the state of Washington.

(4) Notice to resident. Upon receipt of a valid trial or pretrial detainer a superintendent shall immediately notify the resident against whom the detainer has been filed of the existence, nature, and content of the detainer. In addition, the superintendent shall immediately notify the resident of his right to demand final disposition of the criminal charges underlying the detainer.

(5) Final disposition. A resident against whom a trial or pretrial detainer has been filed may demand of the requesting authority that a final disposition be made of the criminal charges underlying the detainer.

(a) A requesting authority shall be required to bring a resident to trial on the charges underlying a trial or pretrial detainer within one hundred and eighty days after receiving notice from the resident of the resident's place of incarceration and of his desire for final disposition of the underlying charges; provided that, a court having jurisdiction of the underlying charge may grant any necessary or reasonable continuance.

(b) A resident's demand for final disposition of the criminal charge underlying a particular detainer shall operate as a request for final disposition of the charges underlying any and all detainers filed against the resident by requesting authorities within the state to which the request for final disposition is directed.

(c) A resident's demand for final disposition shall be deemed a waiver of extradition with respect to any and all proceedings necessary to said final disposition.

(d) A resident's demand for final disposition shall be deemed a future waiver of extradition to the requesting state for service of any sentence imposed upon the resident in connection with said final disposition.

(e) A resident's demand for final disposition shall constitute consent to be returned to the institution where presently confined upon completion of the trial or pretrial proceedings in the requesting state.

(6) Request for temporary custody. A requesting authority which has filed a valid trial or pretrial detainer may request temporary custody of the resident for the purpose of resolving the criminal charges underlying the detainer.

(a) Upon receipt of a request for temporary custody from a requesting authority which has filed a valid trial or pretrial detainer, the superintendent shall immediately give the following notice to the resident who is the subject of the detainer:

(i) Notice of the source and content of the request for temporary custody,

(ii) Notice of the resident's right to retain counsel at his own expense to assist in opposing the request for temporary custody,

(iii) Notice of the resident's right to oppose the request for temporary custody by filing with the governor, within thirty days of receipt of the request for temporary custody, a statement setting forth the reasons why the request for temporary custody should not be granted, and

(iv) Notice of the resident's right to contest, either before or after transfer, the legality of his transfer to the requesting authority pursuant to the request for temporary custody.

(b) In accordance with the provisions of chapter 9.100 RCW a request for temporary custody shall not be honored for a period of thirty days after receipt of the request, during which time the governor of the state of Washington may either approve or disapprove the transfer. If the governor either approves or fails within the thirty day time limit to disapprove the transfer, the request for transfer shall be honored at the end of said thirty day period.

(7) Resident in custody on appeal. A resident who is in custody pending disposition of his appeal from a state criminal conviction, and against whom a valid trial or pretrial detainer has been filed, may be transferred to the custody of a requesting authority pursuant to a request for final disposition or temporary custody.

(a) Whenever a request for final disposition or temporary custody is made with regard to a resident in custody pending appeal, the superintendent shall

(i) Give appropriate notice to the prosecuting attorney of the county in which the conviction was obtained and from which the appeal has been taken,

(ii) Notify and acknowledge to the resident and the requesting authority that the request for transfer has been received, and

(iii) Make a recommendation to the state administrator regarding the request for transfer.

(b) The state administrator shall determine, in the exercise of his discretion, whether the resident should be transferred pursuant to the request for final disposition or temporary custody or should be held in the custody of the department pending disposition of the appeal. The state administrator's determination shall be based upon the following factors:

(i) The recommendation of the superintendent,

(ii) The recommendation, if any, of the prosecuting attorney involved in the pending appeal,

(iii) The anticipated time for resolution of the pending appeal,

(iv) The desire of the resident, and

(v) Such other factors as may be relevant and material in the context of the individual case.
shall immediately notify the resident against whom the detainer has been filed of the existence, nature, and content of the detainer.

(9) One year time limitation. A jurisdiction wishing to file a trial or pretrial detainer against a resident held within the institutions of the state shall be required to file said detainer within one year after receiving actual notice that the resident is being held within this state. If a requesting authority fails to proceed within the one year time limit, a subsequent trial or pretrial detainer filed by that requesting authority against the resident in question will not be honored unless based upon an underlying charge of homicide or attempted homicide. [Order 797, § 275-76-040, filed 5/10/73.]

WAC 275-76-050 Commitment detainers. (1) Who may file. The authority to issue or file a commitment detainer shall be limited to the jurisdictional authority responsible for the custody of the resident in question upon his return to the requesting state. Such jurisdictional authorities would include parole agencies, probation agencies, or the agencies responsible for the administration of correctional institutions.

(2) Supportive materials. In addition to the information required by WAC 275-76-020, commitment detainers shall be accompanied by certified copies of the official court documents rendering the judgment and imposing the sentence which are the jurisdictional basis for the detainer and by a statement from the requesting agency setting forth the legal basis for its authority to execute the sentence which is the basis for the detainer.

(3) Notice to resident. Upon receipt of a valid commitment detainer, a superintendent shall immediately notify the resident against whom the detainer has been filed of the existence, nature, and content of the detainer. [Order 1009, § 275-76-050, filed 2/13/75; Order 797, § 275-76-050, filed 5/10/73.]

WAC 275-76-060 Probation or parole revocation detainers. (1) Who may file. The authority to issue or file parole or probation revocation detainers shall be limited to the parole or probation authority which has initiated the revocation proceedings.

(2) Supportive materials necessary. In addition to the material required by WAC 275-76-020, parole or probation revocation detainers shall be accompanied by certified copies of all documents necessary to establish the requesting agency’s jurisdictional authority to file and execute the detainer.

(3) Notice to resident. Upon receipt of a valid probation or parole revocation detainer, a superintendent shall immediately notify the resident against whom the detainer has been filed of the existence, nature, and content of the detainer.

(4) No right to demand final disposition. A resident against whom a probation or parole revocation detainer has been filed shall not be entitled to demand of the requesting authority that final disposition be made of the charges which are the basis for the pending revocation proceedings and the detainer. [Order 1009, § 275-76-060, filed 2/13/75; Order 797, § 275-76-060, filed 5/10/73.]

WAC 275-76-070 Miscellaneous detainers. (1) Who may file. The authority to issue or file detainers other than those specified in WAC 275-76-040, 275-76-050 and 275-76-060 shall be limited to:

(a) The chief prosecuting authority of the jurisdiction making the detainer request, or

(b) Courts of general jurisdiction within the jurisdiction making the detainer request.

(2) Supportive materials necessary. In addition to the material required by WAC 275-76-020, miscellaneous detainers shall be accompanied by certified copies of all documents necessary to establish the requesting agency’s jurisdictional authority to file and execute the detainer.

(3) Notice to resident. Upon receipt of a valid miscellaneous detainer the superintendent shall immediately notify the resident against whom the detainer has been filed of the existence, nature, and content of the detainer. [Order 1009, § 275-76-070, filed 2/13/75; Order 797, § 275-76-070, filed 5/10/73.]

WAC 275-76-080 Resident to be made available. (1) Whenever a valid detainer is filed against a resident of an institution under the jurisdiction and control of the department, the superintendent of that institution shall take all such precautions as are reasonably necessary to assure that the resident shall be made available to the requesting authority upon his release from the custody of the department.

(2) Upon receipt of a valid detainer, the superintendent shall immediately order that the custody status of the resident in question be examined and appropriate action taken to assure the availability of the resident for transfer to the requesting authority.

(3) The superintendent shall give notice to the requesting authority of the date of the requested resident's release to parole or final release as soon as possible after the superintendent receives notice of said release date.

(a) The superintendent shall promptly notify the requesting authority whenever any changes are made in the resident's proposed release date. [Order 797, § 275-76-080, filed 5/10/73.]

WAC 275-76-090 Reduced custody programs. (1) If at the time a detainer is filed against a resident, the resident is participating in a reduced custody program, such as honor camp, furlough, or work or training release programs, the superintendent shall immediately notify the person in charge of such program of the detainer and the factual circumstances which provide the basis for its issuance and such person shall then promptly evaluate the appropriateness of the resident’s continuing participation in such program.

(2) If a resident against whom a detainer has previously been filed should apply or be considered for placement in a reduced custody program, the superintendent shall consider the factual circumstances which provide
WAC 275-76-100 Requested resident on parole. If, at the time a valid detainer is filed against a resident, the resident has been released on parole, the superintendent shall immediately:

1. Notify the resident that a valid detainer has been filed against him,
2. Inform the requesting authority that the resident has been released on parole,
3. Inquire of the requesting authority as to its intended course of action with regard to the detainer, and
4. Inform the state board of prison terms and paroles that a valid detainer has been filed against the parolee-resident. [Order 797, § 275-76-100, filed 5/10/73.]

WAC 275-76-110 Transfer of resident to mental hospital. (1) If a resident against whom a valid detainer has been filed is to be transferred from an adult correctional institution to a state mental hospital, the superintendent of the correctional institution shall, in advance of the transfer:

(a) Notify the requesting authority of the proposed transfer of the resident and the reasons for the transfer; and

(b) Notify the superintendent of the mental hospital of the existence and nature of the detainer which has been filed against the resident.

(2) During the time in which a resident against whom a detainer has been filed is a patient of a state mental hospital, the superintendent of the mental hospital shall assume full responsibility for custody of the patient-resident and shall take all such precautions as are reasonably necessary to assure that the individual shall be made available to the requesting authority upon his release from the custody of the department. [Order 797, § 275-76-110, filed 5/10/73.]

WAC 275-76-120 Recommendation for withdrawal of detainer. (1) Prior to the anticipated release date of a resident against whom a valid detainer has been filed, the superintendent shall:

(a) Prepare an evaluation of the resident, outlining the resident's actions and activities while in custody in the institution and indicating whether a post-release parole plan and program has been developed for the resident,

(b) Make a recommendation to the state administrator as to whether the department should attempt to obtain the withdrawal by the requesting authority of the detainer filed against the resident,

(c) Furnish copies to the resident of said evaluation and recommendation.

(2) When the superintendent has recommended that the department seek the withdrawal of a detainer, the state administrator, after considering the circumstances of the offense for which the detainer was placed and the justification for the superintendent's recommendation, may:

(a) ask the requesting authority to withdraw the detainer, and

(b) furnish the requesting authority with the evaluation and recommendation prepared by the superintendent.

(3) When a requesting authority indicates in writing that it wishes to withdraw a previously filed detainer, the superintendent shall notify the resident and the board of prison terms and paroles, and acknowledge to the requesting authority, that the detainer has been withdrawn.

(4) The superintendent shall hold and make the resident available for transfer to the requesting authority in accordance with the provisions of this chapter whenever a requesting authority either:

(a) indicates that it intends to exercise its detainer, notwithstanding the recommendation of the state administrator and the superintendent, or

(b) fails to make a response to the state administrator's recommendation and inquiry. [Statutory Authority: RCW 72.01.090, 79-07-034 (Order 1406), § 275-76-120, filed 6/20/79; Order 797, § 275-76-120, filed 5/10/73.]

WAC 275-76-130 Identification of requesting authority's transferring agency. (1) It shall be the responsibility of a superintendent, prior to delivering a resident to the custody of an agent of the requesting authority pursuant to a detainer, to verify:

(a) The identity of the agent, and

(b) The jurisdictional authority of the agent to take custody of the resident pursuant to the detainer. [Order 797, § 275-76-130, filed 5/10/73.]

WAC 275-76-140 Failure of requesting authority to take custody. When the department has agreed to the transfer of a resident to the custody of a requesting authority on the date of the resident's release on parole or final release, the requesting authority shall be required to appear and take custody of the resident on said date. If the requesting authority fails to appear as required, the resident shall be released. [Order 797, § 275-76-140, filed 5/10/73.]

WAC 275-76-150 Detainer request by nonsignator of interstate agreement on detainers. The provision of this chapter shall be fully applicable to detainers filed with the department by a state which is not a signator to the interstate agreement on detainers, except that the procedure for transfer of a resident under such circumstances shall be governed by the provisions of chapter 10.88 RCW, the Uniform Criminal Extradition Act. [Order 797, § 275-76-150, filed 5/10/73.]

[Title 275 WAC—p 98]
Chapter 275-80 WAC

ADULT CORRECTIONAL INSTITUTIONS—VISITS

WAC
275-80-805 Definitions.
275-80-810 Visits—Purpose.
275-80-815 Visits—Registration.
275-80-840 Personal visits—General.
275-80-842 Personal visits—Who may not visit.
275-80-844 Personal visits—Approved visitor lists.
275-80-846 Personal visits—Alterations to visiting list.
275-80-848 Personal visits—Transfer of resident.
275-80-852 Personal visits—Visiting days and hours.
275-80-854 Personal visits—Hospitalized resident.
275-80-860 Professional visits.
275-80-870 Group visit—General.
275-80-872 Group visit—Arrangements.
275-80-876 Group visit—Conduct.
275-80-878 Group visit—Privacy of residents.
275-80-890 News media visits—General.
275-80-895 News media visits—Limitations.
275-80-900 Exchange of material or items.
275-80-905 Search of visitors.
275-80-910 Notice of search.
275-80-915 Refusal to be searched.
275-80-920 Search and discovery of illegal items.
275-80-925 Denial of visits.
275-80-930 Suspension of visiting rights—Duration.
275-80-935 Appeal of denial of visiting rights.
275-80-940 Exceptions.
275-80-995 Appendices.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

275-80-823 Search of visitors—Refusal to be searched. [Order 767, § 275-80-823, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
275-80-825 Exchange of material or items. [Order 767, § 275-80-825, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
275-80-874 Group visits—who may not visit. [Order 767, § 275-80-874, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.

WAC 275-80-805 Definitions. (1) "Contraband" consists of illegal items, and other items not specifically defined as illegal as specified in regulations adopted by the superintendent of an institution and approved by the secretary, which a resident of a correctional institution may not have in his possession;

(2) A "group visit" is a visit to the institution for educational or informational purposes or for the purpose of attending or participating in institutional activities;

(3) "Illegal items" are those items defined by RCW 9.94.040 as illegal when in the possession of a resident of a correctional institution, such as weapons, controlled substances, and alcoholic beverages;

(4) "Immediate family" consists of parents, stepparents, parent surrogates, legal guardians, spouses, brothers, sisters, half or stepbrothers or sisters, children, stepchildren, and dependents who might not be in direct lineal relationship;

(5) "News media" refers to representatives of the press, radio, and television;

(6) A "personal visit" is a visit to an individual resident of an adult correctional institution by a friend or relative, or by a person visiting in a professional capacity such as a clergyman, attorney, or law enforcement official; members of the parole board shall not be considered visitors under this rule;

(7) "Real suspicion" is a subjective suspicion supported by objective, articulable facts, which would reasonably lead an experienced prudent correctional institution staff member to believe that a crime is imminent, is occurring or has occurred. [Order 814, § 275-80-805, filed 6/28/73; Order 767, § 275-80-805, filed 1/10/73.]

WAC 275-80-810 Visits—Purpose. Personal visits are intended to maintain ties between the resident and his family and the community so as to facilitate his successful return to the community. Group visits and media visits are intended to establish closer contact and better understanding between the public and the correctional system. [Order 814, § 275-80-810, filed 6/28/73; Order 767, § 275-80-810, filed 1/10/73.]

WAC 275-80-815 Visits—Registration. Upon arrival at the institution, all visitors must register and upon request provide formal identification. [Order 814, § 275-80-815, filed 6/28/73; Order 767, § 275-80-815, filed 1/10/73.]

WAC 275-80-840 Personal visits—General. Personal visits will be regulated according to the following criteria:

(1) Residents shall have a maximum choice of visitors consistent with the security of the institution;

(2) Restrictions on the number of visitors allowed a resident at any one time, and the restrictions on the frequency and duration of visits, shall be no more stringent than necessary in view of practical limitations of the institution, such as staff and space;

(3) Visiting shall not be denied, terminated, or restricted as a sanction for infractions of other rules of the institution unrelated to visiting;

(4) Visitors and residents shall be treated courteously and every reasonable effort made to ensure that visits are comfortable and pleasant. [Order 814, § 275-80-840, filed 6/28/73; Order 767, § 275-80-840, filed 1/10/73.]
WAC 275-80-842 Personal visits—Who may not visit. The resident may not receive visits from:

(1) Persons not included on his visiting list for approved visitors as provided for in WAC 275-80-844 unless an exception has been granted in accordance with WAC 275-80-940;

(2) Persons associated with him in the commission of the offense for which he was incarcerated;

(3) Parolees and probationers under active supervision unless they are members of his immediate family or are participating as volunteers or employees of the department in some other approved capacity in institutional programs or activities;

(4) Persons under age 18 except with the consent of the parent or guardian. If under age 16, the visitor must be accompanied during the entire visit by a parent or guardian or any other approved visitor;

(5) Persons under 18 years of age may not participate as a member of a group visiting within the security perimeter of the institution;

(6) Persons who are members of the immediate family or close friends of a resident in the institution shall declare this fact and may enter beyond the security perimeter as part of a group only with the express permission of the superintendent. [Order 814, § 275-80-842, filed 6/28/73; Order 767, § 275-80-842, filed 1/10/73.]

WAC 275-80-844 Personal visits—Approved visitor lists. At the time of admittance, the resident shall be provided a copy of the personal visiting regulations and shall complete an application for each individual whom he wishes placed on his visiting list. The superintendent shall review each application for completeness, and, as appropriate, promptly and tentatively approve visits for the immediate family. The superintendent shall mail a visitor's questionnaire (see WAC 275-80-995(1)) to each prospective adult visitor, or to the parents or guardians of each prospective visitor under 18 years of age. Upon return and review of the questionnaire, the superintendent shall decide if the individual is to be placed on the resident's permanent visiting list, and shall notify both the resident and the prospective visitor of his decision. Denial of visiting rights must not be made on the basis of race, religion, sex, or national origin. If a person is denied placement on the resident's permanent visiting list, the superintendent shall inform the resident in writing of the reasons therefore. [Order 814, § 275-80-842, filed 6/28/73; Order 767, § 275-80-842, filed 1/10/73.]

WAC 275-80-846 Personal visits—Alterations to visiting list. (1) A resident may add names to his visiting list in accordance with limitations in WAC 275-80-842;

(2) The superintendent may delete a name from the list upon a finding of violation of visiting rules or serious abuse of visiting on the part of a visitor or resident, in which case he shall notify the visitor and the resident in writing stating the reasons for terminating the visiting rights. [Order 814, § 275-80-846, filed 6/28/73; Order 767, § 275-80-846, filed 1/10/73.]

WAC 275-80-848 Personal visits—Transfer of resident. When a resident is transferred to another adult correctional institution his approved visiting list shall be forwarded to and accepted by the receiving institution as previously approved. It shall be the responsibility of the resident to notify his visitors of such transfer. [Order 814, § 275-80-848, filed 6/28/73; Order 767, § 275-80-848, filed 1/10/73.]

WAC 275-80-852 Personal visits—Visiting days and hours. The superintendent of the institution shall establish and regulate visiting days and hours subject to the approval of the secretary. Each visitor shall be given a copy of the institution's rules concerning visits upon arrival at the institution for the first time, or by mail prior to that time. [Order 814, § 275-80-852, filed 6/28/73; Order 767, § 275-80-852, filed 1/10/73.]

WAC 275-80-854 Personal visits—Hospitalized resident. A resident who is a patient in the institution hospital may receive visitors subject to such limitations as are imposed by the attending physician. Such visits shall be supervised by an employee of the institution and visitors under the age of 18 must be accompanied by a responsible adult. [Order 814, § 275-80-854, filed 6/28/73; Order 767, § 275-80-854, filed 1/10/73.]

WAC 275-80-860 Professional visits. (1) In addition to the list of approved visitors, the resident may receive personal visits from persons visiting him in a professional capacity. No interview may take place without the resident's agreement except under subpoena;

(2) The superintendent may require advanced appointment for professional interviews unless it appears the circumstances do not permit delay;

(3) Appropriate space shall be made available for professional interviews so as to provide privacy consistent with the security needs of the institution;

(4) Upon entering the institution, any official or professional visitor shall be advised, verbally, that if information is exchanged which affects the safety or well-being of any resident, this information must be also communicated to the superintendent unless such communication would violate the confidentiality of a professional relationship. [Order 814, § 275-80-860, filed 6/28/73.]

WAC 275-80-870 Group visit—General. Each institution shall provide for reasonable access to the institution by groups of concerned citizens and for the participation by appropriate groups in activities of the residents. The full range of institutional activities shall be shown and full public access, under supervision, shall be permitted to institutional facilities and practices. Areas to which public access is not feasible for reasons of security or privacy of residents should be presented on film. [Order 814, § 275-80-870, filed 6/28/73; Order 767, § 275-80-870, filed 1/10/73.]

WAC 275-80-872 Group visit—Arrangements.

(1) Groups wishing to visit an institution shall request
permission from the superintendent in advance and schedule the visit at a time convenient to the institution. The spokesman for the group shall notify the superintendent of the approximate size of the group, the purpose of the visit, and the desired duration of the visit;

(2) An athletic team may with the approval of the superintendent arrange for a visit in order to compete with a resident team;

(3) The superintendent shall specify the sections of the institution to which the visiting group may have access and the duration of their visit. [Order 814, § 275-80-872, filed 6/28/73; Order 767, § 275-80-872, filed 1/10/73.]

WAC 275-80-876 Group visit—Conduct. (1) Group members shall conduct themselves in a dignified and orderly manner;

(2) Group members shall be permitted to converse with residents they encounter during a visit;

(3) Cameras shall not be taken into the institution or photographs taken without special authorization of the superintendent;

(4) The group shall stay together unless the staff member in charge authorizes sub-groups. [Order 814, § 275-80-876, filed 6/28/73; Order 767, § 275-80-876, filed 1/10/73.]

WAC 275-80-878 Group visit—Privacy of residents. Residents shall be afforded privacy during groups visits and shall be given advance notice that visiting groups are expected. [Order 814, § 275-80-878, filed 6/28/73; Order 767, § 275-80-878, filed 1/10/73.]

WAC 275-80-890 News media visits—General. The superintendent shall honor requests by representatives of news media for admittance to the institution. Such representatives shall be treated courteously and shall be afforded reasonable access to all areas of the institution. The right of privacy of residents shall be protected. The superintendent shall insure that representatives of news media are informed of these rules and of their responsibilities. [Order 814, § 275-80-890, filed 6/28/73.]

WAC 275-80-895 News media visits—Limitations. (1) Representatives of news media shall be advised on entering the institution that if they receive information which directly affects the safety of any resident or staff member, or indicates that a crime has been or will be committed, this information shall be communicated to the superintendent or an assistant, unless such communication would violate the confidentiality of a professional relationship;

(2) No interview with a resident may take place without his consent;

(3) When photographs are to be taken residents must be notified and given the opportunity to withdraw from the scene;

(4) If the name or photographs of a resident are to be use, written consent of the resident must be secured. [Order 814, § 275-80-895, filed 6/28/73.]

WAC 275-80-900 Exchange of material or items. (1) A visitor may not bring contraband into an institution and may give a resident, or receive from a resident, only such items or materials as have been inspected and approved by the officer in charge;

(2) If a resident is on his way to or from a visit and he is found to have contraband in his possession, his visits may be suspended, if after a disciplinary hearing, it is determined the contraband was obtained during the visit. [Order 814, § 275-80-900, filed 6/28/73.]

WAC 275-80-905 Search of visitors. (1) To prevent possible delivery of weapons, controlled substances, or contraband to residents, all visitors are subject to a frisk search and inspection of any purses, packages, briefcases, or similar containers which are brought behind the security walls of the institution or into the visiting area;

(2) If the frisk search, or independent evidence, establishes a real suspicion that smuggling of contraband or criminal activity is imminent, there may be a search of the visitor's person;

(3) Female visitors shall only be searched by female staff members;

(4) When persons visiting in a professional capacity have a need for purses, packages, briefcases, or similar containers, such material may be admitted but is subject to search;

(5) Representatives of the news media may bring into the institution equipment essential to the purpose of their visit. [Order 814, § 275-80-905, filed 6/28/73.]

WAC 275-80-910 Notice of search. (1) Signs shall be posted at the entrances to the grounds of the institution and at the entrance to the visiting area giving notice that persons proceeding beyond these points may be subject to search.

(2) If the institution intends to search a visitor, verbal notice of this intent and the consequences of refusing search shall be given before search procedures may be initiated. [Order 814, § 275-80-910, filed 6/28/73.]

WAC 275-80-915 Refusal to be searched. A visitor has the option of refusing to be searched but may then be removed from the institution and denied visiting rights or entrance to the institution for a period not to exceed 90 days. If a visitor refuses to be searched on more than one instance, their visiting rights may be denied permanently. Restoration of visiting rights denied for refusal to be searched must be authorized by the superintendent or his designee. [Order 1135, § 275-80-915, filed 8/12/76; Order 857, § 275-80-915, filed 9/27/73; Order 814, § 275-80-915, filed 6/28/73.]

WAC 275-80-920 Search and discovery of illegal items. If as a result of the search, illegal items are discovered, the superintendent shall report the matter to the local law enforcement officers for further action. The evidence and the suspect shall remain in the room in which the search took place and witnesses will be asked.
to remain until the arrival of the law enforcement officers. Institutional staff shall exercise all reasonable caution in not questioning the visitor. [Order 814, § 275–80–920, filed 6/28/73.]

WAC 275–80–925 Denial of visits. The superintendent may deny entrance to visitors if:

(1) the superintendent has prior knowledge leading him to a real suspicion that a visitor is attempting to smuggle in or out of the institution illegal or contraband items. If there is real suspicion substantially ahead of the arrival time of the visitor the superintendent should contact local law enforcement officers and allow them to handle any search procedures;

(2) there is a disturbance within the institution;

(3) there is clear and present, or imminent danger to the health and safety of any visitor, resident, or staff member;

(4) he has real suspicion to believe that criminal conduct will ensue if entrance is allowed;

(5) visiting rights have been seriously abused by the resident;

(6) there is real suspicion to believe the visitor has attempted to bring contraband into the institution;

(7) visitors fail to abide by the pertinent rules in this chapter. [Order 814, § 275–80–925, filed 6/28/73.]

WAC 275–80–930 Suspension of visiting rights—Duration. Visiting rights may be suspended for a single visitor or all visitors of a single resident depending on the seriousness of a visiting infraction. The visiting rights of a resident charged with violation of visiting rules may be suspended only after a finding of guilt pursuant to a regular disciplinary hearing and such rights may be abridged for a maximum duration of 90 days after which visiting rights shall be restored unless there remains a clear and present, or imminent danger to the health and safety of any visitor, resident, or staff member. [Order 814, § 275–80–930, filed 6/28/73.]

WAC 275–80–935 Appeal of denial of visiting rights. (1) A visitor may appeal the suspension, disapproval, or termination of his visiting rights to the superintendent of the institution. If still dissatisfied he may appeal by letter to the administrator of adult corrections. The letter should state the reason why the visitor should be permitted to visit and the circumstances surrounding the denial or termination.

(2) A group or a representative of the news media denied entrance to the institution or required to leave, may appeal to the secretary or his designee. The appeal should state the reasons the group or the representative believes he should be permitted to visit and the circumstances surrounding the denial or termination. [Order 814, § 275–80–935, filed 6/28/73.]

WAC 275–80–940 Exceptions. The superintendent may grant exceptions to normal visiting procedures in unusual circumstances to meet the special needs of a resident. [Order 814, § 275–80–940, filed 6/28/73.]

WAC 275–80–995 Appendices. (1) The text and format of the visitor's questionnaire referred to in WAC 275–80–844 are:

Read carefully:

Resident _______ Number _______ has asked that you be placed on his (her) visiting list. If you wish to visit the above named resident, please answer all questions listed below and return this form to sending institution within fifteen (15) days of the date of mailing. Please return before _______(Month)/_______(Day)/_______(Year)/

All questions must be answered. Any omission or falsification will be considered sufficient reason for your exclusion as a visitor. If you are under 16 years of age, you may visit only by special permission of the Superintendent, and only if accompanied, during the entire visit, by a parent or person who is also an approved visitor. If you are between 16 and 18 years of age, you must have the signature of your parent or guardian.

Name _____________________________ Age _______ (first) _______ (middle) _______ (last)

Address ____________________________ (number) ____________________________ (street) ____________________________ (city) ____________________________ (state) (zip)

Relationship to resident: (mother, wife, friend, attorney, etc.) 

______________________________

Number of years and months you have known resident _______

Have you been involved in illegal or criminal activity with the above-named resident? _______

Are you now under active supervision of probation or parole? Yes □ No □

"A visitor has the option of refusing to be searched. However, a refusal to be searched may result in denial of admittance to or removal from the institution and a denial of all future visiting rights for a period of up to ninety days. A second refusal to be searched may result in a denial of visiting privileges for up to six months at which time the restoration of visiting rights will be reconsidered by the institution."

I am hereby advised of the authority provided to the institution by Adult Corrections Division Policy §75–1 that can require any person entering an adult correctional institution subject to:

(A) A personal search and vehicle search whenever there is mere suspicion that a crime is being committed;

(B) Strip search whenever there is a "real suspicion" that a crime has occurred; or

[Title 275 WAC—p 102]
(C) Probe and orifice search conducted by qualified medical personnel when there is evidence to support "clear indication" of criminal action.

Signature

Signature of parent or guardian (if applicable)

Date (Month)/ (Day)/ (Year)/

COMMENTS:

DO NOT WRITE BELOW THIS LINE

☐ Approved

Superintendent's Signature

☐ Denied (If denied, give reason(s))

☐ Copy to Resident

Resident's Signature


Chapter 275–82 WAC

ADULT CORRECTIONAL INSTITUTIONS—CLASSIFICATION OF RESIDENTS—ADMINISTRATIVE SEGREGATION

WAC 275–82–005 Definitions. (1) "Administrative segregation" is any segregation of a resident of an adult correctional institution for nondisciplinary reasons.

(2) "Classification committee" is a committee, or subcommittee thereof, of staff members of an adult correctional institution concerned with the rehabilitation progress of a resident and the program activity to which he is assigned.

(3) As used in this chapter, "superintendent" shall include the designee of the superintendent. [Order 1217, § 275–82–005, filed 6/15/77; Order 874, § 275–82–005, filed 11/16/73.]

WAC 275–82–010 Administrative segregation. (1) A resident may be placed in administrative segregation when it is shown by information brought out at a meeting that the resident:

(a) is dangerous to himself, to others, or to the security of the institution;

(b) is in danger from others.

(2) A resident may place himself in administrative segregation voluntarily. His request shall be made in writing.

(3) Placement in administrative segregation shall be made only after a meeting with the classification committee except as provided in WAC 275–82–015(3). [Order 1217, § 275–82–010, filed 6/15/77; Order 874, § 275–82–010, filed 11/16/73.]

WAC 275–82–015 Notice of meeting. (1) When the superintendent is considering the administrative segregation of a resident, the resident shall be notified in writing concerning:

(a) the allegations which gave rise to such consideration;

(b) the fact that a meeting with the classification committee will be held to determine whether he should be segregated;

(c) the date, time and place of the meeting;

(d) the fact that at the meeting the resident may present witnesses and documentary evidence to the committee subject to the limitations set out in WAC 275–82–025(6). The resident may ask questions of people present at the meeting. The committee may, in its discretion, ask residents, staff, or other persons to appear and present information at the meeting;

(e) the fact that he may be represented as provided in WAC 275–82–020;

(f) in the event he is alleged to have been involved in an incident for which he could face criminal charges, the fact that he has a right to remain silent and that anything he says may be used against him in a criminal prosecution.

(2) Notice shall be provided the resident not less than twenty-four hours in advance of the meeting.

(3) If the superintendent has reasonable cause to believe the resident is in immediate danger from others or is immediately dangerous to himself or to others or the security of the institution, he may place the resident in administrative segregation without a prior meeting. In such event the meeting shall be held within three working days after the resident is placed in segregation except that the time may be extended for an additional three working days. The superintendent shall notify the resident in writing that the meeting has been postponed and the reasons for the postponement. Any further postponements must be authorized in writing in advance by the director of the division of adult corrections or his designee. Such authorizations may be approved verbally by the director or his designee if necessary, with subsequent confirmation in writing. [Statutory Authority: RCW 72.01.090. 78–10–055 (Order 1345), § 275–82–015, filed 9/22/78; Order 1217, § 275–82–015, filed 6/15/77; Order 874, § 275–82–015, filed 11/16/73.]

WAC 275–82–020 Representation of resident. (1) A resident may select a willing lay person to be his "lay advisor" at the meeting. The lay advisor may be a staff member not ordinarily assigned responsibility for the resident, or a resident or other person approved by the
superintendent. He may prepare and present the resident's cause.

(2) The lay advisory may attend the meeting but shall not be responsible for presentation of the resident's case, questioning witnesses, or making other oral presentation unless requested to do so by the classification committee. [Order 1217, § 275–82–020, filed 6/15/77; Order 1002, § 275–82–020, filed 1/14/75; Order 874, § 275–82–020, filed 11/16/73.]

WAC 275–82–025 Conduct of meeting. (1) The meeting shall be held by the classification committee or by a subcommittee thereof of not less than three members. Any member who had direct involvement in the incident which gave rise to the meeting shall disqualify himself.

(2) The resident shall be present at all stages of the meeting except during consideration of the decision and during discussions involving information from anonymous sources in accordance with subsection (5).

(3) The resident may use his own recording equipment to record the meeting. The tape may be used for the purpose of appeal provided it has been given to and stored by the classification committee between the time of the recording and the appeal.

(4) A record of the meeting shall be kept which clearly indicates what information was presented.

(5) The decision to place someone in administrative segregation may be based on information from a resident whose identification is not given to the resident at the administrative segregation meeting. Such information may be given the administrative segregation committee through a written statement from the resident source or through statements from staff members who may give a statement in writing if the staff member is not able, for good cause, to attend the administrative segregation meeting.

(a) The contents of any information from an anonymous source shall be shared with the resident at the meeting to the extent that this may be done without endangering the source of the information.

(b) When considering information from an anonymous source, the name of the source and all details of such information shall be given to the administrative segregation committee out of the presence of the resident unless the nondisclosure of the name and/or details has been previously approved by a staff member of the rank of captain or above and to whom such name and information has been disclosed. Such approval shall reflect the approving official's verification that the source and information are reliable and are properly considered in deciding whether to place an individual in administrative segregation.

(6) The resident may present witnesses and documentary evidence unless the committee determines that permitting such evidence will be unduly hazardous to institutional safety or correctional goals and/or the information desired to be presented is deemed to be irrelevant, immaterial, unnecessarily duplicative of other information before the committee or found otherwise to be unnecessary to the adequate presentation of the resident's case. [Statutory Authority: RCW 72.01.090. 78–10–055 (Order 1345), § 275–82–025, filed 9/22/78; Order 1217, § 275–82–025, filed 6/15/77; Order 912, § 275–82–025, filed 3/1/74; Order 874, § 275–82–025, filed 11/16/73.]

WAC 275–82–030 Decision. (1) The committee shall reach a decision based on information presented at the meeting.

(2) The committee shall provide the resident with a written decision stating the basis for the decision and the evidence relied on by the committee. [Statutory Authority: RCW 72.01.090. 78–10–055 (Order 1345), § 275–82–030, filed 9/22/78; Order 1217, § 275–82–030, filed 6/15/77; Order 874, § 275–82–030, filed 11/16/73.]

WAC 275–82–035 Segregation status—Rights retained. A resident placed in segregation shall:

(1) be confined in an environment with healthful temperatures in cells substantially similar to those used for general population;

(2) be provided the same opportunities for personal hygiene as are available to the general population;

(3) retain his rights to correspondence, reading, and legal representation;

(4) be provided an opportunity daily for at least one hour of exercise;

(5) be visited by a physician, nurse, medic, or hospital supervisor at least three times per week. If a physician has not personally visited the resident for one week, a physician shall review the condition of the resident with the health personnel who have visited and shall review written comments and requests. A record of visits by medical personnel shall be maintained;

(6) the rights provided under subsections (2), (3), and (4) may be limited for individual residents when provision of such rights will result in a danger to the resident, to other persons, and/or to the security, safety and/or order of the institution. Decisions to limit rights in other than emergency situations shall be approved in advance by a member of the institution staff the rank of shift lieutenant or above. Limitations imposed in emergency situations by other staff shall be reviewed as soon as possible by an official the rank of shift lieutenant or above. The fact that a resident has been placed in administrative segregation shall not automatically warrant limitation of any of the rights affected by this section. [Order 1217, § 275–82–035, filed 6/15/77; Order 874, § 275–82–035, filed 11/16/73.]

WAC 275–82–040 Appeal. A resident may appeal the decision of the committee to the superintendent or his designee who should act on the appeal within three working days, and shall provide the resident with written reasons for his decision. The superintendent may reverse a decision of the committee that the resident need not be segregated.

If the superintendent reverses a decision not to segregate a resident, he shall put a written justification of his decision in the administrative segregation meeting record.
WAC 275-82-045 Review of administrative segregation status. (1) The status of a resident placed in administrative segregation shall be reviewed by the classification committee at not more than thirty day intervals to determine whether he should stay in segregation. The resident shall be given the opportunity to be present at these review sessions.

(2) A resident who appears for a review session shall be entitled to participate in the discussions to the same extent permitted at his or her initial segregation meeting. The committee shall provide the resident with a written decision stating the basis for their decision.

If the review committee determines that the resident should remain in administrative segregation, he may appeal the decision to the superintendent. [Order 1217, § 275-82-045, filed 6/15/77; Order 874, § 275-82-040, filed 11/16/73.]

WAC 275-82-050 Transfer of resident. If after a hearing the resident is transferred to another institution, the decision of the committee shall be considered valid by the receiving institution subject to a review of his status as provided in WAC 275-82-045(1). [Order 874, § 275-82-050, filed 11/16/73.]

Chapter 275-85 WAC

RESIDENT OF ADULT CORRECTIONAL INSTITUTION ESCORTED LEAVE OF ABSENCE

WAC 275-85-005 Escorted leave of absence—Definitions. (1) "Escorted leave" is a leave of absence from a correctional facility under the supervision of an escort.

(2) "Immediate family" consists of a resident's parents, stepparents, parent surrogates, legal guardians, spouse, brothers, sisters, half or stepbrothers or sisters, children, stepchildren, and dependents who might not be in a direct lineal relationship to him.

(3) "Indigent resident" is one who has a combined total net value in cash (not to exceed $200 in his institutional account), bank accounts, marketable securities, and real property other than a home not to exceed $750, or, together with his unestranged spouse, not to exceed $1,500. [Order 796, § 275-85-005, filed 5/10/73.]

WAC 275-85-010 Escorted leave of absence—Purpose. An escorted leave is allowed to permit a resident to be present in the community for legitimate personal or rehabilitative purposes under circumstances in which a furlough is impractical or impermissible. [Order 796, § 275-85-010, filed 5/10/73.]

WAC 275-85-015 Escorted leave of absence—Reasons allowed. An escorted leave may be allowed to permit a resident to

(1) Receive necessary medical care which is not available in the institution,

(2) Visit a critically ill member or attend the funeral of a member of his immediate family upon verification of such illness or death,

(3) Participate in community events as a member of a group or team,

(4) Receive instruction or take examinations in vocational or academic programs not available at the institution which are essential to the completion of a formal course of study,

(5) Participate in agricultural or industrial programs of the institution. [Order 878, § 275-85-015, filed 11/29/73; Order 796, § 275-85-015, filed 5/10/73.]

WAC 275-85-020 Escorted leave of absence—Conditions. (1) An escorted leave shall be authorized only for trips within the state.

(2) The duration of the leave shall normally not exceed forty–eight hours.

(3) The resident shall be considered to remain in the custody of the superintendent at all times.

(4) The resident shall be lodged in a city or county jail or a state institution at all times when not in transit or actually engaged in the activity for which the leave was granted.

(5) Provision for reimbursement for expenses incurred by the resident and escort must be verified in advance. [Order 796, § 275-85-020, filed 5/10/73.]

WAC 275-85-025 Escorted leave of absence—Application. A resident shall place his request for leave with his counsellor who will forward it together with his recommendation to the superintendent or his designee. [Order 796, § 275-85-025, filed 5/10/73.]

WAC 275-85-030 Escorted leave of absence—Approval. Requests for leaves shall be approved or denied by the superintendent or his designee, who, in making such decision, shall take into consideration the following factors:

(1) The nature of the emergency or the request for leave,

(2) The degree to which the resident may be considered to be a security or escape risk,

(3) Any unusual disciplinary problems which may be presented by the resident,

(4) The resident's degree of trustworthiness,

(5) Any significant health problems that might be presented as a result of a leave. [Order 796, § 275-85-030, filed 5/10/73.]

(1980 Ed.)
WAC 275-85-035 Escorted leave of absence—

Escort. (1) The person who will serve as escort must be approved by the superintendent or his designee.

(2) In granting an escorted leave, the superintendent shall make such security arrangements as are deemed appropriate and may instruct a correctional officer to wear his uniform and sidearm in appropriate circumstances when such officer is assigned to escort a resident for purposes other than bedside or funeral visits.

(3) A correctional officer serving as escort shall wear civilian clothes and be unarmed when escorting a resident to a bedside visit or a funeral.

(4) The escort shall not use physical restraints unless the resident attempts escape or becomes violent. [Order 796, § 275-85-035, filed 5/10/73.]

WAC 275-85-040 Escorted leave of absence—Expenses. (1) The escort shall receive reimbursement for meals, lodging, and transportation at the rate established in the department's travel policy.

(2) The escort shall receive his salary for all hours spent in actually escorting the resident, but not including hours sleeping or not engaged in direct supervision of the resident. The salary shall be paid at the appropriate straight time and overtime rates as provided in the merit system rules. [Order 796, § 275-85-040, filed 5/10/73.]

WAC 275-85-045 Escorted leave of absence—Expenses—Paid by resident. The expenses of the escort as enumerated in WAC 275-85-040 shall be reimbursed by the resident unless the superintendent has authorized payment at state expense in accordance with chapter 275-85 WAC. [Order 796, § 275-85-045, filed 5/10/73.]

WAC 275-85-050 Escorted leave of absence—Expenses—Paid by state. The expenses of the escort shall be reimbursed by the state if

(1) The resident is indigent in accordance with WAC 275-85-005(3), or

(2) The expenses were incurred for the purpose of the resident's participation in a community event as a member of a group or team, an academic or vocational activity, or to secure medical care. [Order 796, § 275-85-050, filed 5/10/73.]

Chapter 275-87 WAC

ADULT CORRECTIONAL INSTITUTIONS—RESIDENTS' PROPERTY

WAC

275-87-005 Contraband—Definitions.
275-87-010 Confiscation.
275-87-015 Disposition of illegal items.
275-87-020 Disposition of other items.
275-87-025 Records.

WAC 275-87-005 Contraband—Definitions. (1) "Contraband" consists of all illegal items, and other items which a resident of a correctional institution may not have in his possession, as defined in regulations adopted by the superintendent of an institution and approved by the secretary.

(2) "Illegal items" are narcotic drugs, alcoholic beverage or any weapon, firearm or any instrument which, if used, could produce serious bodily injury to the person of another (RCW 9.94.040). [Order 845, § 275-87-005, filed 8/9/73.]

WAC 275-87-010 Confiscation. The superintendent shall confiscate contraband found on the premises or in possession of a resident of a correctional institution. [Order 845, § 275-87-010, filed 8/9/73.]

WAC 275-87-015 Disposition of illegal items. Illegal items shall be held by the superintendent as evidence for law enforcement authorities. If illegal items are not needed as evidence, they shall be destroyed. [Order 845, § 275-87-015, filed 8/9/73.]

WAC 275-87-020 Disposition of other items. (1) Items for which ownership cannot be determined shall be held by the superintendent for six months and then donated to a charitable organization.

(2) Items which are determined to be owned by the resident, or by another resident, should be stored until his release, or at the owner's request, delivered to a relative or friend at the owner's expense. Receipts shall be secured for items so delivered.

(3) Items which are found to be owned by someone other than a resident shall be returned to the owner at the owner's expense.

(4) Money such as currency, personal checks, and money orders, is contraband within adult correctional institutions for men. If money is found in the possession of a resident and he claims ownership, it shall be deposited in his savings account and returned to him only upon release from the institution. If the resident disclaims ownership or if ownership is unknown, the money will be deposited to the inmate welfare fund. [Order 845, § 275-87-020, filed 8/9/73.]

WAC 275-87-025 Records. The superintendent shall maintain a log listing all confiscated items, by whom they were confiscated, ownership if known, and the date and method of disposition. [Order 845, § 275-87-025, filed 8/9/73.]

Chapter 275-88 WAC

ADULT CORRECTIONAL INSTITUTIONS—DISCIPLINE

WAC

275-88-005 Purpose.
275-88-006 Definitions.
275-88-010 Supplementary rules.
275-88-015 Notification.
275-88-020 Definition of misconduct.
275-88-025 General infractions.
275-88-030 Serious infractions.
275-88-035 Reporting to law enforcement authorities.
275-88-040 Infractions—On-site adjustment.
275-88-050 General infraction report—Action on report.

[Title 275 WAC—p 106]
275-88-055 Appeal to hearing committee.
275-88-060 Appeal to hearing committee—Composition of committee.
275-88-065 Appeal to hearing committee—Disqualification or absence of member.
275-88-070 Appeal to hearing committee—Jurisdiction.
275-88-075 Prehearing procedures—Rights of residents.
275-88-080 Prehearing procedures—Restriction of resident.
275-88-085 Hearing committee—Preparation for hearing.
275-88-090 Conduct of hearing.
275-88-093 Decision of hearing committee.
275-88-095 Finding of no infraction.
275-88-097 Lay advisors.
275-88-100 Sanctions—Authority to impose.
275-88-105 Sanctions—Types.
275-88-110 Sanctions—Limitations.
275-88-115 Appeal to superintendent.
275-88-120 Reports to the parole board.
275-88-130 Time limitations.

**DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER**

275-88-067 Appeal to hearing committee—Other participants. [Order 1185, § 275-88-005, filed 8/23/77.] Repealed by Order 1185, filed 2/3/77.

**WAC 275-88-005 Purpose.** (1) The rules in this chapter shall provide a standardized system consistent with constitutional due process for ascertaining whether misconduct by a resident of an adult correctional institution has occurred.

(2) The rules in this chapter shall not apply to proceedings of the board of prison terms and paroles. [Order 849, § 275-88-005, filed 8/23/73.]

**WAC 275-88-006 Definitions.** The following definitions apply for purposes of this chapter.

(1) In labeling the parts of these rules, use the following example:
   (a) "Rule" — WAC 275-88-085.
   (b) "Subsection" — WAC 275-88-085(1).
   (c) "Subparagraph" — WAC 275-88-085(1)(a).
   (d) All rules together are called "regulations."

(2) "Promptly" — To act as soon as possible consistent with institutional goals of safety, security and rehabilitation.

(3) "Working days" — Normal Monday through Friday work days, excluding weekends and holidays.

(4) "Director" — The director of the adult corrections division of the Washington state department of social and health services or his designee(s).

(5) "Superintendent" — A superintendent of an adult correctional institution or his designee(s). [Order 1185, § 275-88-006, filed 2/3/77.]

**WAC 275-88-010 Supplementary rules.** The superintendent of an adult correctional institution may promulgate supplementary rules, policies, and procedures including the creation of new general and/or serious infractions, the reclassification of general and/or serious infractions set out in these rules, and the creation of new sanctions. All such new or reclassified infractions and sanctions shall be approved in writing by the director or his designee before being put into effect: Provided, That such local rules may be adopted on a thirty-day emergency basis without such approval. The director may disapprove any rule, and/or procedure adopted under this rule. [Order 1185, § 275-88-010, filed 2/3/77; Order 849, § 275-88-010, filed 8/23/73.]

**WAC 275-88-015 Notification.** (1) Each resident of a correctional institution shall be advised in writing of:
   (a) His rights and responsibilities,
   (b) Acts prohibited in the institution,
   (c) Disciplinary action which may be taken in the event of misconduct.

(2) Each resident shall be provided with a copy of the rules in this chapter and upon his arrival at the institution shall be given a copy of all local disciplinary rules, policies and procedures.

(3) All amendments or additions to this chapter and all amendments or additions to local disciplinary rules, policies and procedures shall be posted at a specifically designated place or places in each institution in advance of their effective date if possible and for at least thirty days after their effective date. Residents shall be responsible for informing themselves of such postings. Complete and up-to-date copies of these rules and all local rules shall be available at each institution for resident examination.

(4) The superintendent shall insure that each resident has the opportunity to understand rules which relate to his conduct. If the resident is unable to read or understand English, the rules shall be read to him in his accustomed language. [Order 1185, § 275-88-015, filed 2/3/77; Order 849, § 275-88-015, filed 8/23/73.]

**WAC 275-88-020 Definition of misconduct. Misconduct shall consist of**

(1) Any act described in WAC 275-88-025 as a general infraction,

(2) Any act described in WAC 275-88-030 as a serious infraction, or

(3) Any act proscribed by local institutional rule adopted pursuant to WAC 275-88-010. [Order 1185, § 275-88-020, filed 2/3/77; Order 849, § 275-88-020, filed 8/23/73.]

**WAC 275-88-025 General infractions.** Any of the following types of behavior shall constitute a general infraction:

051 — Unauthorized possession of money or other negotiable instruments totaling less than five dollars ($5.00)

052 — Loaning of property for profit

053 — Possession of anything not authorized for retention or receipt by a resident and/or not issued to him by regular institutional channels

055 — Intentionally mutilating, altering, defacing or destroying items issued by the state the value of which is less than five dollars ($5.00)

103 — Refusing to obey a lawful order of any staff member

104 — Unexcused absence from work or any assignment

202 — Abusive language directed to a staff member

(1980 Ed.)
275-88-025

Title 275 WAC: DSHS (Institutions)

203 – Lying or knowingly providing a false statement to a staff member
205 – Participating in a meeting or gathering that has been disapproved in advance, in writing, by the institution
210 – Being present in an unauthorized area (notice given by each institution)
211 – Intentional failure to follow published safety or sanitary regulations
212 – Using any equipment or machinery which is not specifically authorized
213 – Using any equipment or machinery contrary to instructions or posted safety standards
214 – Intentional failure to stand count
251 – Smoking where prohibited
301 – Failure to keep one’s person and one’s quarters in accordance with published and posted standards, rules, or regulations
302 – Tattooing or self-mutilation
303 – Unauthorized use of mail or telephone
305 – Correspondence or conduct with a visitor in violation of published and posted regulations
351 – Giving, selling, or trading money or anything of value to, or accepting or purchasing money or anything of value from another resident, a member of his family, or his friend, except when authorized
400 – Attempting to commit any of the above offenses, or aiding another person to commit any of the above offenses shall be considered the same as the commission of the offense itself. [Order 1185, § 275-88-025, filed 2/3/77; Order 1031, § 275-88-025, filed 6/12/75; Order 849, § 275-88-025, filed 8/23/73.]

WAC 275-88-030 Serious infractions. Any of the following types of behavior shall constitute a serious infraction:

501 – Committing homicide
502 – Assaulting any person
503 – Extortion, blackmail, demanding or receiving money or anything of value in return for protection against others, or under threat of informing
504 – Engaging in sexual acts with others
505 – Fighting with any person (except in self-defense)
506 – Threatening another with bodily harm or with any offense against his person
507 – Committing an act not otherwise proscribed by these regulations which constitutes a felony or misdemeanor under state law
521 – Holding a person hostage
525 – Violation of conditions of furlough
550 – Escape
551 – Lying to the hearing committee
552 – Lying to a staff member with the intention of causing an innocent person to be penalized or proceeded against
553 – Intentionally or recklessly setting a fire
554 – Intentionally or recklessly destroying or damaging state property, or the property of another person
555 – Stealing (theft) or knowing possession of stolen property—the unauthorized taking of extra portions of food shall be considered the same as theft
556 – Refusing to submit to a body search when lawfully ordered to do so by institutional staff
557 – Refusing and/or failing to work or attend other regularly scheduled assignments
558 – Intentionally interfering with a staff member in the performance of his duties
559 – Gambling
600 – Tampering with or blocking any locking device
601 – Possession or introduction of an explosive or any ammunition or components thereof
602 – Possession or introduction of any gun, firearm, weapon, sharpened instrument, knife, or unauthorized tool or components thereof.
603 – Possession, introduction, transfer or use of any narcotics, controlled substance or related paraphernalia, possession, transfer or use of any intoxicant or drug not prescribed or authorized for the resident or for the resident to whom transferred, if applicable, by the medical staff, or being intoxicated, or under the influence of an unauthorized drug, narcotic, controlled substance, or other intoxicant
604 – Unauthorized possession of any officer’s or staff’s clothing
605 – Unauthorized possession of any officer’s or staff’s clothing
606 – Refusing to submit to a urinalysis or blood test under medically acceptable conditions, when requested in writing to do so by a supervisory employee of the rank of shift commander or above, by licensed medical staff, or by others designated by the superintendent
608 – Refusing to submit to a breathalyzer or other standard sobriety test
650 – Rioting
651 – Inciting others to riot
652 – Engaging in or inciting a prohibited group demonstration
653 – Intentionally interfering with the taking of count
654 – Counterfeiting, forging or unauthorized reproduction of any document, article of identification, money, security, or official paper
655 – Making intoxicants, controlled substances, narcotics
656 – Giving or offering any official staff member or a volunteer a bribe or anything of value for a favor or unauthorized service
657 – Four or more general infractions arising out of separate incidents and which have been reported in writing: Provided, That the four separate incidents all occur within a six-month period
658 – Intentional failure to perform according to an administrative action taken pursuant to WAC 275-88-050(3), after determination of appeal, or appeal time has lapsed
659 – Resisting posthearing sanctions as provided for in WAC 275-88-105
660 – Unauthorized possession of money or other negotiable instruments of five dollars ($5.00) or more

[Title 275 WAC—p 108] (1980 Ed.)
661 – Performing or to take part in performing of a marriage in the institution buildings or on the institutional grounds, except when such marriage was approved by the superintendent of the institution. Violation of the rule may, in appropriate cases, be deemed a violation of a visiting rule that can subject a resident to the sanction contained in WAC 275-88-105(1)(d), as well as other sanctions available for serious infractions.

662 – Solicitation of goods and/or services for which the provider would expect payment when the resident knows or should have known (s)he has no funds available to pay for such goods or services.

700 – Attempting to commit or aiding another person to commit a serious infraction as enumerated in WAC 275-88-030, 275-88-501 through 275-88-699. Such action shall be considered the same as commission of the offense itself.

701 – Commission of any general infraction as enumerated in WAC 275-88-205 or any local rule denominated as a general infraction in such a manner as likely to result in danger to life or limb or to create a risk to the orderly operation of the institution or the health and safety of its residents, staff, or visitors shall be considered a serious infraction, provided there is substantial evidence which establishes there was such a danger.

705 – Failure to maintain a favorable record of conduct and/or failure to perform in a faithful, diligent, industrious, orderly and peaceable manner the work, duties and tasks assigned to him as provided by RCW 9.95.070. A finding against the resident under this rule shall result only in a recommendation that good time not be certified to the board of prison terms and paroles. [Order 1185, § 275-88-030, filed 2/3/77; Order 1060, § 275-88-030, filed 6/12/75; Order 968, § 275-88-030, filed 8/29/74; Order 937, § 275-88-030, filed 5/23/74; Order 849, § 275-88-030, filed 8/23/73.]

WAC 275-88-035 Reporting to law enforcement authorities. (1) It shall be the duty of the superintendent to report any violation of a federal, state, or local law to law enforcement authorities.

(2) If a violation has been reported to law enforcement authorities, the resident shall not be questioned about the incident, outside of a formal disciplinary or administrative segregation hearing under these rules, until after it has been determined that no prosecution will occur or until a finding of guilt is made.

(3) The provisions in this rule shall not preclude the reasonable segregation of the resident in accordance with administrative segregation rules appearing in chapter 275-82 WAC. [Order 1185, § 275-88-035, filed 2/3/77; Order 849, § 275-88-035, filed 8/23/73.]

WAC 275-88-040 Infractions—On-site adjustment. In the event of a general infraction, a staff member may make an on-site adjustment which may consist of:

(1) Counseling, warning, or reprimanding the resident, and/or

(2) Causing the resident to remove himself from the situation immediately involved in the violation.

(3) An on-site adjustment under this rule cannot be considered a general infraction for the purposes of invoking WAC 275-88-030, 657. [Order 1185, § 275-88-040, filed 2/3/77; Order 849, § 275-88-040, filed 8/23/73.]

WAC 275-88-045 Infractions—Report on. (1) In the event of a general infraction a staff member may prepare and submit an infraction report. In the event of a serious infraction the staff member shall prepare and submit an infraction report.

(2) The infraction report shall include:

(a) a description of the alleged infraction;

(b) the time and place of the incident;

(c) the names of witnesses;

(d) the specific rule alleged to have been violated;

(e) a description of any action taken;

(f) a recommendation regarding further action.

(3) The infraction report shall be signed by the staff member and submitted promptly to the supervisory employee or unit team designated by the superintendent to receive such reports. [Order 849, § 275-88-045, filed 8/23/73.]

WAC 275-88-050 General infraction report—Action on report. The supervisory employee or unit team receiving a general infraction report shall decide within five working days of receipt of the report, unless an extension is granted by the superintendent, whether to:

(1) Take no further action, in which case the report shall be destroyed promptly;

(2) Refer the matter to the hearing committee; or

(3) Take administrative action as provided for in WAC 275-88-105(1).

(4) General infractions handled under this rule may be accumulated for purposes of invoking WAC 275-88-030, 657. [Order 1185, § 275-88-050, filed 2/3/77; Order 878, § 275-88-050, filed 11/29/73; Order 849, § 275-88-050, filed 8/23/73.]

WAC 275-88-055 Appeal to hearing committee. (1) If a resident is dissatisfied with an administrative decision made pursuant to WAC 275-88-050(3), he may within 48 hours after receiving notice of the administrative action, unless extended by written order of the superintendent, file a written request for review of the action by the hearing committee. His request shall include his reasons for believing that the decision was inappropriate. Filing a request for an extension does not automatically result in an extension being granted while the request is being considered.

(2) The hearing committee shall act on the request for review within five working days of receipt unless such time is extended by the superintendent. In considering a request, the hearing committee shall have the following options:

(a) Affirming the administrative decision without a hearing except as to WAC 275-88-105(1)(d),

(b) Reversing or modifying downward the administrative decision without a hearing,

[Title 275 WAC—p 109]
(c) Scheduling a hearing before the committee as provided in WAC 275-88-085.

(3) The hearing committee shall give the resident written notice of its decision, including its reasons therefore, within seventy-two hours of its decision unless extended by the superintendent.

(4) All sanctions shall be stayed pending appeal under this section. [Order 1207, § 275-88-055, filed 4/29/77; Order 1185, § 275-88-055, filed 2/3/77; Order 878, § 275-88-055, filed 11/29/73; Order 849, § 275-88-055, filed 8/23/73.]

WAC 275-88-060 Appeal to hearing committee—Composition of committee. (1) The superintendent of each major adult correctional facility shall establish a hearing committee(s) of three or more persons the membership of which shall reflect a substantial balance between various departments of the institution with not more than two members being appointed from any one department. No person shall serve as chairman for more than six consecutive months and no person except an associate or assistant superintendent shall serve more than six months in any twelve month period.

(2) At forestry honor camps and such other smaller adult correctional institutions as may be created from time to time, the hearing committee(s) shall be comprised of three or more staff members designated by the superintendent, none of whom shall be the involved resident’s regular counselor, unless no other satisfactory staff members are available.

(3) The superintendent shall also designate a staff member(s) of the institution to serve as a clerk for the hearing committee.

(4) As an alternative to the committees referred to in subsections (1) and (2) of this section, the superintendent of any adult correctional institution may, with the prior approval of the director, appoint disciplinary hearing officers. Persons so appointed may preside, individually, over all major disciplinary hearings at the institution. Such hearing officers shall have all the powers and duties otherwise possessed by the hearing committee. [Statutory Authority: RCW 72.01.090. 80-06-067 (Order 1502), § 275-88-060, filed 5/22/80; Order 1185, § 275-88-060, filed 2/3/77; Order 849, § 275-88-060, filed 8/23/73.]

WAC 275-88-065 Appeal to hearing committee—Disqualification or absence of member. (1) No member of a hearing committee may function in such capacity when he has direct personal knowledge or interest in the incident under consideration. Such member must disqualify himself by giving notice to the chairman. The superintendent shall select as his replacement a person qualified according to WAC 275-88-060.

(2) Any member of a committee who will be absent from the institution at the time of a hearing or otherwise unable to serve on the committee shall notify the superintendent who shall appoint a substitute qualified according to WAC 275-88-060.

(3) "Direct personal knowledge or interest," as that phrase is used in this rule, shall mean knowledge or interest acquired through witnessing or directly participating in the incident under consideration. This rule shall not preclude a committee member’s participation where the individual has acquired knowledge or interest indirectly or through review of the incident which is conducted as part of the individual’s regular institutional responsibilities. A committee member may disqualify himself or be disqualified by the chairman when it is felt the committee member is biased for or against the resident so that he cannot render a fair judgment in the hearing, regardless of the manner by which such bias was acquired. [Order 1185, § 275-88-065, filed 2/3/77; Order 849, § 275-88-065, filed 8/23/73.]

WAC 275-88-070 Appeal to hearing committee—Jurisdiction. The hearing committee shall have jurisdiction over all serious infractions, all general infractions referred to it in accordance with WAC 275-88-050(2), and over good time certification questions arising under WAC 275-88-070, 705. [Order 1185, § 275-88-070, filed 2/3/77; Order 878, § 275-88-070, filed 11/29/73; Order 849, § 275-88-070, filed 8/23/73.]

WAC 275-88-075 Prehearing procedures—Rights of residents. (1) Before being questioned about an alleged rule infraction, a resident alleged to have committed a rule infraction shall be advised of his right to remain silent at all stages of the investigatory proceedings.

(2) The resident shall retain his institutional status and corresponding rights and privileges prior to and during the hearing except as provided in WAC 275-88-080. [Order 1185, § 275-88-075, filed 2/3/77; Order 849, § 275-88-075, filed 8/23/73.]

WAC 275-88-080 Prehearing procedures—Restriction of resident. (1) Prior to and during a hearing before the hearing committee:

(a) A resident in minimum security status may be restricted to a security area without loss of his classification status when there is a reasonable belief that he is a substantial security risk; or

(b) A resident who is reasonably believed to be of danger to himself or to others, in serious danger from others, or a danger to the order and security of the institution may, upon written verification by the shift commander that such danger is reasonably believed to exist, be restricted to his own room or cell or placed in segregation. Such restriction must be approved by the superintendent within twenty-four hours after the confinement.

(c) A resident shall not be confined or segregated for more than seventy-two hours exclusive of weekends and holidays unless there is an intervening hearing on the incident involved or the resident or the institution for good cause require additional time not to exceed seventy-two hours to prepare its case for the hearing or there is an administrative segregation hearing in accordance with the provisions of chapter 275-82 WAC. In the
case of a resident restricted to a security area from a minimum custody area, unless a hearing is held within the time limits of this subparagraph, his continued temporarily restricted confinement shall be reviewed by the classification committee.

(2) Confinement or restriction as authorized in this rule shall not limit the right of a resident to prepare an adequate defense to the charge which will be heard by the hearing committee. He may select a willing lay person to be his representative in investigating the charge and obtaining witnesses in his behalf. Such representative may be a staff member not involved in the incident, or a resident not involved in the incident who is approved by the superintendent, or any other person approved by the superintendent. Such representative shall have reasonable access to the resident and to other witnesses inside the institution.

(3) A resident confined or restricted as authorized in this section shall be entitled to the same rights as those committed to segregation by the hearing committee following the hearing, as set forth in WAC 275-88-110.

(4) A resident confined or restricted as authorized in this section shall receive credit for time served in such manner if he is subsequently found guilty of the offense by the hearing committee. [Order 1185, § 275-88-080, filed 2/3/77; Order 878, § 275-88-085, filed 11/29/73; Order 849, § 275-88-085, filed 8/23/73.]

WAC 275-88-085 Hearing committee—Preparation for hearing. In preparation for the hearing, the clerk of the hearing committee shall at least 24 hours in advance of the hearing

(1) Provide copies of the infraction report to the resident and to the members of the committee;

(2) Advise the resident, both orally and in writing, of his right, subject to the relevant provisions and limitations of these rules:
   (a) To have a hearing;
   (b) To remain silent;
   (c) To call witnesses, including staff members, other residents, and other persons;
   (d) To question witnesses at the hearing;
   (e) To present documentary and/or other evidence on his own behalf at the hearing;
   (f) To have a lay advisor;
   (g) To have access to all reports and records utilized by the hearing committee during the fact-finding stage. Exceptions to this rule are permissible where the reports and records contain information, the disclosure of which to a resident might reasonably compromise the security and/or safety of the institution or his residents. In such cases, the resident shall be provided with a summary of such written documents with the classified information deleted.

(3) Obtain written acknowledgement of the receipt by the resident of the information provided in accordance with WAC 275-88-085(2);

(4) Determine from the resident whether he wishes to contest the allegation.

(5) Schedule the hearing within five working days after discovery of the incident, unless such time is extended by the superintendent. In the event that the procedures of WAC 275-88-050(2) are utilized or the matter is referred to the hearing committee by the supervisory employee or unit team pursuant to WAC 275-88-055(2)(c), the hearing shall be scheduled within five working days of the determination that a hearing is necessary, unless such time is extended by the superintendent. All hearings may be continued upon the request of the resident as well as the institution.


WAC 275-88-090 Conduct of hearing. (1) The chairperson of the hearing committee shall assure that the resident is competent to understand the charge against him and the proceedings, and to participate therein. He may order a postponement of the hearing to secure a report on the competence of the resident, or take such other action as will assure the fairness and orderliness of the hearing.

(2) The resident shall be present at all stages of the hearing except during the decisional deliberations and any inquiry the hearing committee may wish to make concerning the identity of unidentified witnesses. A resident may waive his presence at the hearing.

(3) The resident may use his own recording equipment to record the disciplinary hearing. The tape may be used for the purpose of appeal provided it has been given to and stored by the hearing committee clerk between the time of the recording and the appeal.

(4) The resident shall be informed of his right to remain silent.

(5) The clerk shall be responsible for presenting all appropriate paperwork to the committee but shall not be responsible for orally presenting facts and circumstances surrounding the incident to the committee.

(6) The committee shall divide the hearing into two stages consisting of

   (a) Determination of the guilt or innocence of the resident, and
   (b) Determination of further action to be taken.

(7) Evidence, testimony, questions, and examination shall be limited to facts relevant to the alleged infraction, or disposition if an infraction has been found.

(8) Where institution staff members are witnesses against the resident, every effort shall be made to have such witnesses present to testify at the hearing: Provided, That the written statements of such staff members may be considered in their absence upon a showing of good cause.

(9) The resident shall be allowed to call witnesses and present documentary evidence in his defense when permitting him to do so will not be unduly hazardous to institutional safety or correctional goals unless the witness and/or information desired to be presented is deemed to be irrelevant, immaterial, unnecessarily duplicative of other information before the hearing committee, or
otherwise found to be unnecessary to the adequate presentation of the resident's case. The testimony of all witnesses from outside the institution shall be considered in writing except where the committee determines that the presence of a witness is appropriate, in which case the hearing may be continued until such time as the witness is available. If the witness is unavailable, the committee may, in its discretion, consider the written testimony previously submitted.

(10) The resident may question witnesses against him in the discretion of the hearing committee. If the committee determines that a resident witness would be subject to risk of harm if his identity were disclosed, the resident witness' evidence may be introduced by the testimony of a staff member to whom the information was provided by the resident witness and/or the affidavit of the resident witness; or, if the staff member to whom the resident witness provided information is, for good cause, unavailable, the written statement of such uninvolved staff member. The hearing committee shall, out of the presence of all residents, inquire as to the identity of any anonymous resident witness, and as to how the testifying staff member received such information. The refusal of the staff member presenting the testimony of the unidentified resident witness to identify such resident shall make the testimony inadmissible unless the refusal to identify the witness is approved by a staff member the rank of captain or above. [Order 1207, § 275–88–090, filed 4/29/77; Order 1185, § 275–88–090; filed 2/3/77; Order 972, § 275–88–090, filed 9/26/74; Order 878, § 275–88–090, filed 11/29/73; Order 849, § 275–88–090, filed 8/23/73.]

WAC 275–88–093 Decision of hearing committee. (1) A report of the hearing shall be made by a secretary or recorder who may be a member of the committee, and shall include the charge, names of witnesses, summary of the testimony and cross examination, a description of the physical evidence used, and the decisions and reasons therefor. The report shall be placed in the resident's institutional file if he is found guilty. All reports shall be maintained by the clerk as part of the hearing committee's records. A complete taped record of the hearing may be taken but the tape shall not become a part of the resident's file, and shall be destroyed ninety days after the date of the hearing or the appeal decision, or any court proceedings resulting from the hearing, whichever is later.

(2) In reaching its decision on the guilt or innocence of the resident, the committee must rely solely on evidence presented to it and may not rely on extrinsic evidence. However, during the dispositional stage of the hearing, such factors as the resident's institutional file and prior conduct may be considered.

(3) The majority of the committee shall agree on the guilt or innocence of the resident and the disposition made.

(4) Any decision of the committee shall be based on evidence and such decision shall be in writing and shall include reasons for reaching the decision.

(5) Any member of the committee who does not fully agree with the decisions reached by the majority may file a separate statement for inclusion in the record.

(6) The resident shall be informed personally of the decisions of the committee. Such information shall be given to him orally within twenty-four hours of the hearing and in writing within seventy-two hours of the hearing unless such periods are extended by the superintendent.

(7) The resident shall be informed of his right to appeal the decisions of the committee to the superintendent. [Order 1185, § 275–88–093, filed 2/3/77; Order 849, § 275–88–093, filed 8/23/73.]

WAC 275–88–095 Finding of no infraction. If the hearing committee determines that no infraction occurred the resident shall be reinstated to his previous status and all records pertaining to the charge shall be expunged. [Order 849, § 275–88–095, filed 8/23/73.]

WAC 275–88–097 Lay advisors. (1) A resident may have the assistance of a lay advisor in preparing for a hearing. The lay advisor may be a staff member not involved in the incident or a resident not involved in the incident who is approved by the superintendent or any other person approved by the superintendent. The lay advisor may attend the hearing but shall not be responsible for presentation of the resident's case, questioning witnesses, or making other oral presentation unless requested to do so by the hearing committee. In considering the degree of involvement to be allowed a lay advisor at the hearing, the hearing committee shall consider such factors as the literacy and intelligence of the resident, the complexity of the issues, and the resident's overall ability to speak for himself and adequately present his case.

(2) Resident lay advisors shall participate in only one disciplinary case within a one-week period unless special permission to participate in additional cases is granted by the superintendent.

(3) A resident may be disqualified from participating as a lay advisor in a particular case if such participation will directly interfere with previously scheduled rehabilitative programming.

(4) If a resident is denied the opportunity to act as a lay advisor under the provisions of subparagraph (1) of this rule, he may appeal that decision to the director. However, such an appeal shall not act as a stay on the disciplinary hearing in question unless the superintendent specifically so orders.

(5) Resident lay advisors shall be provided with:
(a) Copies of all written decisions of the hearing committee and the superintendent in cases in which the lay advisors are involved;
(b) An opportunity to have private conversation with residents they are representing;
(c) Access to written information to be used by the hearing committee in the fact-finding stage as far in advance of the hearing as is reasonably possible;
(d) Reasonable access to all witnesses. [Order 1185, § 275–88–097, filed 2/3/77; Order 972, § 275–88–097,
WAC 275-88-100 Sanctions--Authority to impose.
(1) If the committee determines that a resident is guilty of a serious infraction as enumerated in WAC 275-88-030, it may impose one or more of the sanctions provided in WAC 275-88-105.

(2) If the committee determines that more than one infraction occurred, it shall not impose consecutive sanctions for the separate infractions but shall consider them together and impose penalties for the group of infractions.

(3) The committee may recommend that the execution of a proposed disciplinary action be deferred for a fixed period of time not to exceed six months subject to the good behavior of the resident. If the subsequent behavior of the resident is appropriate, the committee shall, at or prior to the end of the fixed period, cancel execution of the penalty. A suspended sentence may be revoked upon the resident’s being found guilty of either a general or serious infraction unless conditions attached to the original suspension provide more restrictive grounds for revocation. A suspended sentence may be revoked only by the institution disciplinary committee.

(4) The committee may review any decision it has previously made and may modify downward any sanction previously imposed.

(5) Sanctions shall not be imposed while an appeal from the committee's decision is under consideration by the superintendent.

(6) In all cases, regardless of whether an appeal is taken, the superintendent may review a sanction imposed and may reduce its severity. [Order 1185, § 275-88-100, filed 2/3/77; Order 1009, § 275-88-100, filed 2/13/75; Order 849, § 275-88-100, filed 8/23/73.]

WAC 275-88-105 Sanctions--Types. (1) For general infractions enumerated in WAC 275-88-025 or classified as general infractions by supplementary local rules, one or more of the following sanctions may be imposed:

(a) Reprimand and/or warning;

(b) Loss of specified privileges for not more than ten days on a first offense, twenty days on a second offense, and thirty days on a third offense within a six-month period;

(c) Confinement to room or cell except for attendance at work or school assignment, religious service, or meals, not to exceed three days;

(d) Interruption or termination of correspondence or visiting with specified individuals for a maximum of ninety days, when there has been an infraction of rules on visits or correspondence as stated in chapters 275-96 and 275-80 WAC or in local rules regarding correspondence and/or visitors.

(e) Up to 120 hours of extra work duty.

(2) For serious infractions enumerated in WAC 275-88-030, one or more of the following sanctions may be imposed:

(a) Any of the sanctions enumerated in WAC 275-88-105;

(b) Loss of specified privileges for a period of time not to exceed one month except that a resident shall not be deprived of an opportunity for daily exercise;

(c) Evening lockup or confinement to quarters for ten days;

(d) Weekend and/or holiday lockup or confinement to quarters for a thirty-day period. For purposes of this rule, a "weekend" shall be deemed to begin at the end of the Friday workday.

(e) Confinement to cell except for meals, or with meals in cell, with or without curtailment of job assignment for a period not to exceed ten days;

(f) Recommendation to the classification committee for reconsideration of custody classification and/or, when the infraction committed is directly related to the resident's program, recommendation of program change.

(g) Transfer to another institution only when as a result of the infraction committed, the resident is unable to function in the institution of present confinement, or if other disciplinary methods have been attempted and failed;

(h) Transfer to the maximum security or segregation section, but not to an isolation cell, for a period not to exceed thirty consecutive days;

(i) Confinement in an isolation cell for a period not to exceed ten consecutive days: Provided, That where a serious infraction(s) occur(s) during a period of isolation imposed under this rule, additional periods of isolation not to exceed ten days may be imposed: Provided Further, That in such situations when a resident may be in isolation for more than ten consecutive days, the director's prior approval shall be required unless the resident is released from isolation at least for seventy–two consecutive hours between the expiration of one isolation sentence and the imposition of another, where the combined time would exceed ten consecutive days.

(j) Recommendation to the board of prison terms and paroles for forfeiture of good time credit or reconsideration of minimum sentence;

(k) Restitution for damage done to any property or loss of any property assigned to the resident. Funds may be withdrawn from the resident's account to make restitution under this rule: Provided, That a resident's account shall not be reduced to less than $10.00 under this subparagraph.

(l) Recommendation to the superintendent that he not certify time credit for a resident to the board of prison terms and paroles, pursuant to RCW 9.95.070. [Order 1185, § 275-88-105, filed 2/3/77; Order 937, § 275-88-105, filed 5/23/74; Order 849, § 275-88-105, filed 8/23/73.]

WAC 275-88-110 Sanctions--Limitations. (1) No resident shall be subject to disciplinary action for violation of resident conduct rules unless there has been reasonable advance notice to the resident of the specific prohibited behavior unless such rule has been adopted on an emergency basis.
(2) Lowering the quantity or quality of food and deprivation of clothing, bedding, bed, or normal hygienic implements shall not be used as sanctions.

(3) Corporal punishment and physical restraint shall not be used as sanctions.

(4) A resident placed in segregation shall:
   (a) Be confined in an environment with healthful temperatures in cells substantially similar to those used for general population;
   (b) Be provided the same opportunities for personal hygiene as are available to the general population;
   (c) Retain his rights to correspondence, reading, and legal representation;
   (d) Be provided daily opportunity for at least one hour of exercise unless circumstances such as staffing, space, institutional security and order and/or safety, etc. make this unfeasible, in which cases such resident shall be allowed as much exercise as is feasible in the judgment of staff. Such limitations shall be approved in advance by a staff member of rank of lieutenant or higher.
   (e) Be visited by a physician, nurse, medic, or hospital supervisor at least three times per week. If a physician has not personally visited the resident for three consecutive days, a physician shall review the condition of the resident with the health personnel who have visited and shall review written comments and requests. A record of visits by medical personnel shall be maintained. Residents of forestry honor camps or small correctional institutions, as so designated by the director, shall receive medical care and observation in accordance with standard procedures in effect at such facility.
   (f) Be provided daily opportunity for at least one hour of exercise unless circumstances such as staffing, space, institutional security and order and/or safety, etc. make this unfeasible, in which cases such resident shall be allowed as much exercise as is feasible in the judgment of staff. Such limitations shall be approved in advance by a staff member of rank of lieutenant or higher.
   (e) Be visited by a physician, nurse, medic, or hospital supervisor at least three times per week. If a physician has not personally visited the resident for three consecutive days, a physician shall review the condition of the resident with the health personnel who have visited and shall review written comments and requests. A record of visits by medical personnel shall be maintained. Residents of forestry honor camps or small correctional institutions, as so designated by the director, shall receive medical care and observation in accordance with standard procedures in effect at such facility.
   (f) Be provided daily opportunity for at least one hour of exercise unless circumstances such as staffing, space, institutional security and order and/or safety, etc. make this unfeasible, in which cases such resident shall be allowed as much exercise as is feasible in the judgment of staff. Such limitations shall be approved in advance by a staff member of rank of lieutenant or higher.

(5) A resident placed in isolation shall:
   (a) Be confined in an environment with healthful temperatures in cells substantially similar to those used for the general population;
   (b) Be provided the same opportunities for personal hygiene as are available to the general population;
   (c) Retain his rights to correspondence, reading, and legal representation except that literature may be limited to educational, religious, legal or program involvement material;
   (d) Be visited by a physician, nurse, medic, or hospital supervisor at least once per day. If a physician has not personally visited the resident for three consecutive days, a physician shall review the condition of the resident with the health personnel who have visited and shall review written comments and requests. A record of visits by medical personnel shall be maintained. Residents of forestry honor camps or small correctional institutions, as so designated by the director, shall receive medical care and observation in accordance with standard procedures in effect at such facility.
   (e) Be released immediately to an appropriate setting when medical personnel recommends such release on medical or psychological grounds;
   (f) Be visited by a staff member at least twice during each daily shift to ascertain his well being. Each such visit and findings shall be recorded;
   (g) Be accessible to the counselor assigned to him. [Statutory Authority: RCW 72.01.090. 80–06–068 (Order 1503), § 275–88–110, filed 5/22/80; Order 1185, § 275–88–110, filed 2/3/77; Order 849, § 275–88–110, filed 8/23/73.]

WAC 275–88–115 Appeal to superintendent. (1) A resident may appeal the decision of the hearing committee to the superintendent by filing a written request for review and his reasons therefor with the clerk within twenty-four hours, exclusive of weekends and holidays, after receiving written notice of the decision of the committee. The superintendent may, in his discretion, consider appeals filed beyond the twenty-four hour period.

(2) The clerk shall promptly transmit the request for review and the hearing committee record to the superintendent.

(3) The superintendent shall act on the request within five working days of its receipt by affirming the decision of the committee (with reasons stated), reducing the severity of the sanctions imposed, vacating the judgment of the committee, remanding the matter for a new hearing, but he may not increase the severity of the sanctions imposed. If the matter is remanded, it shall be heard before a disciplinary committee at least two members of which did not serve on the committee previously hearing the matter.

(4) Pending the decision of the superintendent, the sanctions shall not be imposed on the resident nor shall his custody be subject to change unless there are grounds for detention as provided in WAC 275–88–080 or if the superintendent has reason to believe that he is a substantial security risk.

(5) The resident shall promptly be notified of the decision of the superintendent. [Order 1185, § 275–88–115, filed 2/3/77; Order 849, § 275–88–115, filed 8/23/73.]

WAC 275–88–120 Reports to the parole board. (1) Whenever the committee finds a resident guilty of an inherently serious infraction, and recommends either loss of good time credits or an adjustment upward of the resident's minimum term, it shall be the duty of the hearing clerk to inform the board of prison terms and paroles of that decision within ten days or, if an appeal is taken, within ten days of the superintendent's decision. Said report shall include a copy of the summary of the hearing prepared by the hearing committee reporter.

(2) In all other cases where a finding of guilt is made for an inherently serious infraction, it shall be the duty of the clerk to inform the parole board of that decision within thirty days, or if an appeal is taken, within thirty days of the superintendent's decision. Said report shall include a copy of the summary of the hearing prepared by the hearing committee reporter. [Order 849, § 275–88–120, filed 8/23/73.]

WAC 275–88–130 Time limitations. The time limitations expressed in these regulations shall not be deemed to be jurisdictional and failure to adhere to any particular time regulation shall not be grounds for automatic reversal and/or dismissal of a disciplinary proceeding. [Order 1185, § 275–88–130, filed 2/3/77;
Order 1012, § 275–88–130, filed 2/28/75; Order 878, § 275–88–130, filed 11/29/73.]

Chapter 275-91 WAC

ADULT CORRECTIONAL INSTITUTIONS—MEDICAL CARE—HEALTH CARE

WAC
275-91-011 Medical/dental care—General policy.
275-91-021 Medical/dental services.
275-91-031 Right to refuse treatment.
275-91-041 Involuntary treatment—Appeals.
275-91-050 Use of allied health professionals.
275-91-060 Records.
275-91-070 Supplemental care.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

WAC 275-91-011 Medical/dental care—General policy. The policy of the department of social and health services with regard to medical and dental care for inmates of adult correctional institutions is to provide, at a minimum, a degree of care which is designed to reasonably respond to an inmate's serious medical and dental needs. The considerations of proper medical/dental procedure, time and available resources are material in defining what is a reasonable response in any particular situation. More than the minimum level of care may be provided when such additional care comports with proper medical practice and is reasonably affordable from the department's resources. Serious medical needs are those which, if not responded to, will

(1) Cause or allow to continue significant or debilitating pain; or

(2) Cause significant deterioration of the inmate's medical condition during the period of his incarceration. [Order 1252, § 275–91–011, filed 11/21/77.]

WAC 275-91-021 Medical/dental services. The medical/dental treatment program operated by the adult corrections division shall include the following services:

(1) Regular environmental health inspections and, where appropriate, recommendations.

(2) Initial examination when the inmate enters the adult correctional system. This examination shall include:

(a) A medical history;

(b) A physical examination, including fundoscopy and ocular tonometry for residents over forty years of age, rectal examination as indicated, and other examinations as indicated;

(1980 Ed.)

(c) A chest film as indicated;

(d) Serology;

(e) Blood count;

(f) Urinalysis;

(g) Electrocardiogram as indicated;

(h) Visual and auditory acuity;

(i) Dental examination;

(j) For female residents, gonorrhea culture and Pap smear as indicated.

(3) Immunizations as indicated.

(4) Evaluation of capacity for work and recreation.

(5) Period consultations, examinations and treatment as required for the medical and dental maintenance of each inmate in accordance with the policy discussed at WAC 275-91-011. [Order 1252, § 275–91–021, filed 11/21/77.]

WAC 275-91-031 Right to refuse treatment. Except as provided herein, any inmate may, if done in a voluntary, knowing and intelligent fashion, refuse treatment proffered by department medical/dental personnel. Treatment may be provided by department medical personnel not withstanding an inmate's refusal to accept same only where

(1) Such treatment is deemed by a departmental physician as necessary for the protection of others, or

(2) A departmental physician determines that such treatment is necessary for the psychiatric or physical welfare of the inmate and that the inmate is incompetent to make a judgment regarding his or her treatment. Nothing in this chapter shall be construed to limit the power of the department to protect any inmate, through nonmedical means, regardless of such inmate's level of mental competency.

Involuntary treatment may not be of a type specifically prohibited by law.

Involuntary treatment may not continue longer than seven consecutive days unless approved of by the medical director, adult corrections division, department of social and health services. Such care may continue thereafter only with the approval of the medical director every fourteen days.

The inmate shall have the right to have any involuntary psychiatric care discontinued from twenty-four hours before an institutional or parole board hearing and until the hearing adjourns. [Order 1252, § 275–91–031, filed 11/21/77.]

WAC 275-91-041 Involuntary treatment—Appeals. An inmate given involuntary medical treatment shall be permitted to make one appeal in writing to the secretary of the department of social and health services, or his designee, the decision by the division's medical personnel to involuntarily treat the inmate.

Except where serious physical harm to the inmate or others is a likelihood if treatment is not imposed or continued, such appeal shall operate as a stay of the imposition or continuation of treatment during the pendency of the appeal. [Order 1252, § 275–91–041, filed 11/21/77.]
WAC 275-91-050 Use of allied health professionals.
Allied health professionals may be used in the medical and dental health programs at each institution. When operating under the supervision of a licensed physician or dentist, an allied health professional may conduct initial screening, treat minor illnesses, and do related tasks. [Order 1252, § 275-91-050, filed 11/21/77.]

WAC 275-91-060 Records. Medical and dental records shall be maintained at the institution in which an inmate is housed. Upon the transfer of an inmate between state institutions, that inmate's medical and dental records shall be transferred along with the inmate. Records shall include all items of material interest to medical personnel and shall include:
(1) Detailed reports of admission medical evaluation and recommendations;
(2) Progress notes regarding continuing health status including illnesses, hospitalizations, surgery, results of consultations and examinations, reports of tests done, and immunizations;
(3) Reports made by outside consultants. [Order 1252, § 275-91-060, filed 11/21/77.]

WAC 275-91-070 Supplemental care. Any inmate may, at his or her own expense, obtain medical or dental care additional to that mandated by the provisions of this chapter: Provided, That a doctor or dentist in the department's employ certifies that the proposal for supplemental treatment comports with sound medical or dental practice. The time and place of the performance of the supplemental care are subject to the convenience of the prison's custody staff. [Order 1252, § 275-91-070, filed 11/21/77.]

Chapter 275-92 WAC
ADULT CORRECTIONAL INSTITUTIONS—RELEASE PROGRAMS—WORK TRAINING

Release Programs


WAC 275-92-310 Definitions. (1) "Secretary" is the secretary of the department of social and health services.

(2) "Director" is the director of the adult corrections division, department of social and health services.

(3) "State supervisor, work/training release" is the staff member at headquarters office assigned by the director to administer and supervise the state work/training release program.

(4) "Work/training release facility supervisor" is a staff member assigned by the state supervisor to administer and supervise a specific work/training release facility.

(5) "Work/training release counselor" is a staff member assigned by the work/training release facility supervisor to supervise and counsel a caseload of work/training release residents at a specific work/training release facility.

(6) "Contract staff" is the staff members of an agency under contract to the department of social and health services to provide housing and supervision for work/training release residents.

(7) "Work/training release coordinator" is a staff member assigned by the superintendent of an adult correctional institution to act as liaison between the institution and work/training release facility personnel.

(8) "Work/training release resident" is an inmate of a major adult correctional institution who has been approved and placed in a work/training release plan.

(9) "Sponsor-escort" is a responsible citizen assigned to escort and supervise a resident during official and social activities outside of the work/training release facility.

(10) "Work/training release facility" is an institution or other establishment approved for housing and supervision of work/training release residents during their stay in a work/training release program.

(11) "One working day" is a nine hour day, 8:00 a.m. to 5:00 p.m. excluding weekends and holidays. [Order 1216, § 275-92-310, filed 6/15/77.]

WAC 275-92-315 Secretary's authority to grant or deny. The secretary or his designee may grant or deny work/training release as authorized by chapters 72.65 and 43.20A RCW and subject to the rules of this chapter. [Order 1216, § 275-92-315, filed 6/15/77.]

WAC 275-92-320 Reasons for which given. Work/training release may be authorized for one or more of the following:

(1) To take full time or part time employment;

(2) To take vocational training, including attendance at an accredited college.

(3) To make application to or be interviewed by prospective employers or to enroll in an academic or vocational training program (known as temporary work/training release). [Order 1216, § 275-92-320, filed 6/15/77.]

WAC 275-92-325 Application—Who may apply.

(1) A resident may apply for work/training release provided that:

(a) He has minimum security status;

(b) His minimum term has been fixed by the board of prison terms and paroles;

(c) He has less than two years to serve on the minimum term including anticipated good time credits.

(2) Persons convicted of rape in the first degree shall not be eligible for work/training release at any time during the first three years of confinement. [Order 1216, § 275-92-325, filed 6/15/77.]

WAC 275-92-330 Application—Consideration.

(1) The resident shall submit his application for work/training release to his counselor on forms prescribed by the department.
WAC 275-92-335 Application—Decision. (1) If the superintendent approves the work/training application, he shall forward copies of the application and plan to the work/training release facility to which the resident requests transfer; and to the state supervisor, work/training release.

(2) If the superintendent disapproves the work/training release application, he shall return the application to the counselor, stating his reasons for denial and set a date when the resident may reapply. [Order 1216, § 275–92–335, filed 6/15/77.]

WAC 275-92-340 Plan—Investigation. (1) Upon receipt of an approved work/training release application and plan from the superintendent, the work/training release facility supervisor or his designee shall complete an investigation.

(2) The work/training release investigation will verify the plan as it pertains to employment, financial resources, training, community reaction, and any other factors which may affect the resident's ability to successfully complete a work/training release program.

(3) The work/training release plan investigation will be forwarded by the work/training release facility supervisor to the state supervisor, work/training release with a recommendation for or against approval of the plan. [Order 1216, § 275–92–340, filed 6/15/77.]

WAC 275-92-345 Plan—Approval or denial. (1) The state supervisor, work/training release, or his designee has the authority to approve or disapprove a plan.

(2) Upon approval of a plan, the state supervisor, work/training release or his designee shall issue a transfer order.

(3) If approved, the resident shall sign and agree under oath, to the standard rules of work/training release. [See WAC 275–92–355]

(4) If the plan is disapproved, the state supervisor, work/training release or his designee shall state the reasons for denial in writing with a copy to the superintendent and resident and will set a date when the resident can reapply. [Order 1216, § 275–92–345, filed 6/15/77.]

WAC 275-92-350 Plan—Restrictions. (1) A resident will not be permitted to travel outside the state.

(2) The work or training site shall be within reasonable commuting distance (in most circumstances not more than 50 miles) of the work/training release facility or institution in which the resident is confined.

(3) If the resident has been placed in a work/training release facility for the purpose of developing a plan (temporary work/training release) and the plan is not secured within ten working days from the date of issuance of transfer orders, the resident may be returned to the institution without prejudice.

(4) The purpose of work/training release is to provide a short adjustment period in a work/training release facility prior to parole. Before a work/training release plan is approved, the staff will have a reasonable expectation that the resident will be paroled in a period of time which will normally not exceed six months. If a parole date is not fixed within six months of placement in a work/training release plan, the state supervisor of work/training release or his designee will review the case on an individual basis and may return the resident to the institution if it appears that the resident will be on work/training release for an extended period of time. [Order 1216, § 275–92–350, filed 6/15/77.]

WAC 275-92-355 Standard rules. In consideration of being granted work/training release, the resident must agree to observe and abide by the following rules:

(1) Continue in the approved work or training release plan until it is officially changed. Any modification of the plan must be authorized in writing by the work/training release counselor.

(2) Comply with local work/training release facility rules, and any special restrictions imposed in writing by the work/training release counselor. The resident may appeal in writing to the state supervisor, work/training release, if the resident considers any of the restrictions to be unwarranted or arbitrary.

(3) Comply with such other restrictions and/or conditions as may be imposed in the original work/training release plan by the state supervisor, work/training release or his designee.

(4) Remain confined to the work/training release facility premises at all times other than the time necessary to implement the plan or when authorized under WAC 275–92–410. Any work/training release resident approved for placement under a work/training release plan who willfully fails to return to the designated place of confinement at the time specified shall be deemed an escapee and fugitive from justice, and upon conviction shall be guilty of a felony and sentenced in accordance with the terms of chapter 9.31 RCW.

(5) Have employment or other resources in order to maintain himself financially.

(6) Not consume, ingest, inject, or possess, nonprescription narcotic or "dangerous" drugs or controlled substances, or alcoholic beverages.

(7) Agree to disburse all earnings in accordance with the approved work/training release plan and report all income to the work/training counselor. All income from any source shall be immediately placed in the resident's trust fund account by the counselor. A receipt will be issued by the counselor.

(8) Comply with all federal, state, and local laws.

(9) Residents placed on work/training release are ordinarily approved with the understanding that they will be paroled in a reasonable time, normally within six months. If it is not possible to parole the resident within

[Title 275 WAC—p 118]
a reasonable period of time, he may be returned to the institution. [Order 1216, § 275–92–355, filed 6/15/77.]

WAC 275–92–400 Supervised facility. A work/training release facility is a place for housing work/training release residents in:
(1) A state adult correctional institution;
(2) A county or city jail which has been approved for use after inspection pursuant to RCW 72.01.420; or
(3) An establishment or home approved for the housing and supervision of residents engaged in a work/training release program which has contracted with the department for the provision of such services. [Order 1216, § 275–92–400, filed 6/15/77.]

WAC 275–92–405 Provisions of supervision. In meeting its responsibilities for the care of residents, a work/training release facility shall provide:
(1) A staff on 24-hour duty and an office within the facility so that the staff can monitor the activities of the residents;
(2) A check-in and check-out system to insure that the whereabouts of the resident is known at all times; including checks on the resident at school and work;
(3) Bed checks or head counts to account for the resident's whereabouts; a minimum of three bed checks shall be required between 12:00 midnight and 8:00 a.m.;
(4) Provide adequately for the resident with respect to sleeping quarters, bathroom facilities and accommodations for cooking, dining, lounging and leisure time activities;
(5) Comply with local zoning ordinances and fire codes;
(6) Be reasonably close to population centers in order to provide access to employment and training opportunities, commercial transportation, social agencies and medical facilities. [Order 1216, § 275–92–405, filed 6/15/77.]

WAC 275–92–410 Limits of confinement. A work/training release resident shall be confined to the facility at all times except:
(1) When interviewing prospective employers or arranging for registration at a training facility;
(2) When working at paid employment or attending a training facility in a vocational or academic program;
(3) If enrolled in an on–campus training program and housed in an on–campus facility, when participating in customary and official on–campus activities or mandatory field trips;
(4) When authorized a point–to–point pass not to exceed two hours excluding travel, for the purpose of transacting personal essential business, between the hours of 8:00 a.m. and 10:00 p.m.;
(5) When authorized to participate in social and recreational activities in company with a sponsor–escort between 8:00 a.m. and 12:00 midnight;

WAC 275–92–415 Sponsor–escort. (1) A sponsor–escort shall be a responsible citizen who shall accompany and retain custody of a work/training release resident during a social or recreational activity. The sponsor–escort must be approved by the work/training release counselor; and the sponsor and the resident must sign an agreement with the department which describes his responsibilities.
(2) Persons who are on active felony probation or parole shall not be approved as sponsor–escorts. Persons who have a past felony conviction and who have earned a discharge may be approved as sponsor–escorts on an individual basis by the state supervisor, work/training release. [Order 1216, § 275–92–415, filed 6/15/77.]

WAC 275–92–510 Termination of plan. A work/training release plan may be terminated:
(1) If requested in writing by the releasee;
(2) If the contract permits, the contract agency refuses to accept or continue to serve the resident;
(3) If the plan is discontinued or modified so that it no longer meets agency standards or if the releasee becomes unable to comply with the terms of the plan;
(4) The resident lacks aptitude for the assignment or is improperly placed; or
(5) The resident has been unable to adjust or adapt to the conditions of the work/training release facility; or
(6) The resident has demonstrated through his or her behavior an unwillingness to respond to counseling by staff; or
(7) The resident's situation and circumstances have significantly changed; or
(8) The resident has failed to comply with federal or state laws or local ordinances; or
(9) The resident has failed to comply with standard work/training release rules as enumerated in WAC 275–92–355; or
(10) The resident has failed to comply with such other written facility rules as are promulgated by the facility supervisor; or
(11) The resident has failed to comply with such other specific restrictions or behavior expectations which have previously been called to the attention of the resident by the work/training release counselor and are documented in writing. [Order 1216, § 275–92–510, filed 6/15/77.]

WAC 275–92–515 Service of notice of proposed termination. (1) If a work/training release termination is proposed, the work/training release counselor may suspend the work/training release plan and place the resident in custody pending a termination hearing.
(2) The work/training release counselor shall advise the resident in writing of the factual allegations which provide the basis for the proposed termination within one working day after the suspension of the work/training release plan.
(3) The factual allegations may be amended and/or new allegations added at any time prior to the termination hearing, provided that the work/training resident
shall have notice of such new and/or amended allegations at least twenty-four hours prior to the termination hearing. [Order 1216, § 275-92-515, filed 6/15/77.]

WAC 275-92-520 Termination hearing—Notice. A work/training resident served with allegations providing the basis for a proposed work/training release termination shall be notified in writing that a hearing has been set before a review committee. The hearing will be set within five working days of the suspension of the work/training release plan, unless a longer time is approved by the state supervisor or his designee. The written notice of hearing shall be given to the resident at least twenty-four hours before the hearing and advise the resident of his rights, including the following:

1. The resident shall be present at all stages of the hearing, except during deliberation and during deliberation in appropriate circumstances.
2. The resident shall present his own case to the review committee. If there is a language or communications barrier, the review committee chairman shall appoint an advisor.
3. The resident may have an attorney present only when a felony has been alleged. Such representation is limited to advising the resident of his rights to remain silent, and does not include the right to act as an advocate throughout the hearing.
4. The resident may testify during the hearing or remain silent, and his silence will not be held against him.
5. The resident may question all witnesses appearing and testifying at the hearing.
6. Testimony and other evidence introduced shall be relevant to the issues under consideration.
7. The resident may present witnesses and written statements from persons in his own behalf.
8. Attendance at the hearing shall be limited to parties directly concerned. The review committee chairman may exclude unauthorized persons.
9. The review committee shall make an evaluation of the resident's progress, attitudes, need for program modifications, work/training alternatives, or institution programming; and shall make a recommendation to the board of prison terms and paroles regarding good time credits and readiness for parole. [Order 1216, § 275-92-520, filed 6/15/77.]

WAC 275-92-525 Facility review committee. (1) The review committee shall consist of the facility supervisor or his designee; if the facility is under contract to the department, a member of the contract staff; and may include a voluntary representative of the resident council or resident population. The facility supervisor shall serve as chairman and shall have the authority to make the final decision. The facility supervisor or his designee shall inform the resident, in writing, of the review committee's decision within three working days.

2. At institutions the classification committee may serve as the facility review committee for work/training release residents housed at the facility; except that the institution work/training release coordinator will be a member of the committee.

3. No person making an allegation, involved in the incident, or called as a witness shall be a member of the review committee. Persons called as witnesses must be approved by the review committee chairman and must have information or facts which are relative to the allegations being considered. In the event that an individual is disqualified or disqualifies himself under this rule or for any other reason, a replacement may be designated by the facility supervisor, the state supervisor, or the director. [Order 1216, § 275-92-525, filed 6/15/77.]

WAC 275-92-530 Termination hearing—Waiver. (1) At any time after having been served with an allegation providing the basis for a proposed termination, the resident may choose to waive his right to a hearing by signing an admission of the allegation and request that the hearing be dispensed with or limited only to questions of disposition.

2. The resident may admit in writing to part of the allegations and thereby limit the scope of the hearing.

3. In those cases where the allegation involves misbehavior or other culpability on the part of the resident, he shall be advised in writing that in admitting the violation and waiving the hearing, a report will be submitted to the parole board which may result in the loss of good time credits and/or the extension of the minimum term. [Order 1216, § 275-92-530, filed 6/15/77.]

WAC 275-92-535 Termination hearing—Rules of evidence. (1) All relevant and material evidence is admissible which, in the majority opinion of the review board, is the best evidence reasonably obtainable having due regard for its necessity, availability, and trustworthiness.

2. All evidence material to the issues raised in the hearing shall be offered into evidence. All evidence forming the basis for the department's decision in a matter shall be offered into evidence.

3. Every party shall have the right to question witnesses who testify in person and shall have the right to submit rebuttal evidence. This shall not be deemed to prevent the admission and consideration of hearsay evidence.

4. Documentary evidence, including written statements submitted by interested parties on behalf of the resident, may be received. Such evidence may include copies of documents, excerpts from documents and incorporation of written material by reference, including depositions. [Order 1216, § 275-92-535, filed 6/15/77.]

WAC 275-92-540 Termination hearing—Findings and conclusions. (1) At the conclusion of the hearing, the review committee will make a finding of fact within one working day as to whether or not the allegations made against the resident have been proven by a preponderance of the evidence presented at the hearing.

2. If the review committee determines that the allegations have not been proven by a preponderance of the evidence presented at the hearing, the resident shall be restored to work/training release status.
WAC 275-92-545 Termination hearing—Disposition. (1) The review committee will consider the resident's total background, adjustment on work/training release, attitude, recommendations of interested parties, and any other information relative to the resident's ability to continue in the program. The review committee shall make a determination as to whether or not the resident has earned good time credits towards parole, and whether the matter should be referred to the parole board for possible increase in the resident's minimum term.

(2) The resident shall be present at all stages of the review, except for deliberation and even during deliberation when appropriate, and shall have the opportunity to make argument in his own behalf. [Order 1216, § 275–92–545, filed 6/15/77.]

WAC 275-92-550 Termination hearing—Decision. The review committee may:

(1) Restore the resident to his work/training release status under the same or modified conditions as the original plan; or

(2) Revoke the work/training release plan and return the resident to an institution. The facility supervisor shall notify the resident orally within one working day and confirm the decision in writing within three working days.

(3) The written decision shall specify the evidence upon which the review committee relied and shall include a description of the circumstances surrounding the allegation(s) upon which the termination of work/training release is based, the reasons for the decision, a discussion of the resident's personal culpability in the actions which have led to the termination, and an evaluation of the resident's progress, attitudes, need for further programs including work training alternatives and readiness for parole. [Order 1216, § 275–92–550, filed 6/15/77.]

WAC 275-92-555 Termination hearing—Appeal. The resident may appeal the decision of the facility review committee to the state supervisor, work/training release. Appeal requests must be in writing, must be specific and based on objection to the procedures used or the information available to the committee in making its decision. Appeals must be submitted within five working days of the committee's oral decision. The state supervisor, work/training release or his designee, upon receipt of an appeal, will review the findings and decision of the review committee and either:

(1) Continue the resident in the existing work/training release plan; or

(2) Continue the resident in a work/training release program with appropriate and specific conditions for expected future behavior or modifications in the resident's plan; or

(3) Terminate work/training release and return the resident to an institution for other programming.

The reviewer's decision will be made promptly, normally not to exceed five working days, and given to the resident and committee chairman in writing. [Order 1216, § 275–92–555, filed 6/15/77.]

WAC 275-92-560 Time limits. The time limits contained in these rules shall not be deemed to be jurisdictional and failure to adhere to a particular time limit shall not be a bar to any procedure or action covered by these rules. [Order 1216, § 275–92–560, filed 6/15/77.]


Chapter 275-93 WAC

ADULT CORRECTIONAL INSTITUTIONS—RELEASE PROGRAMS—FURLOUGH

WAC 275-93-005 Furlough of person confined in state correctional institution—Definitions.

275-93-010 Furlough of person confined in state correctional institution—Secretary's authority to grant or deny.

275-93-020 Furlough of person confined in state correctional institution—Purposes.

275-93-040 Furlough of person confined in state correctional institution—Who may apply.

275-93-050 Furlough of person confined in state correctional institution—Conditions imposed.

275-93-060 Furlough of person confined in state correctional institution—Duration.

275-93-070 Furlough of person confined in state correctional institution—Sponsor's responsibilities.

275-93-080 Furlough of person confined in state correctional institution—Criteria for evaluating application.

275-93-090 Furlough of person confined in state correctional institution—Application for furlough.

275-93-100 Furlough of person confined in state correctional institution—Notifying resident of decision on application.

275-93-110 Furlough of person confined in state correctional institution—Escape.

275-93-120 Furlough of person confined in state correctional institution—Revocation or suspension.

275-93-130 Furlough of person confined in state correctional institution—Law enforcement officers to be notified.

275-93-140 Furlough of person confined in state correctional institution—Exceptions to rules.

WAC 275-93-005 Furlough of person confined in state correctional institution—Definitions. (1) "Furlough" is an authorized unaccompanied leave of absence for an eligible resident.

(2) "Furlough plan" is a resident's statement in his application of the purpose, place, dates of duration, and sponsor of a single furlough or series of furloughs.

[Title 275 WAC—p 121]
WAC 275-93-010 Furlough of person confined in state correctional institution—Secretary's authority to grant or deny. The secretary may grant or deny a furlough as authorized by chapter 72.66 RCW and subject to the rules in this chapter. [Order 805, § 275-93-010, filed 5/31/73.]

WAC 275-93-020 Furlough of person confined in state correctional institution—Purposes. A furlough may be authorized to enable the resident

1. To meet an emergency situation, such as critical illness, death, emotional crisis, or similar situation experienced by members of his family;
2. To obtain medical care not available in a facility maintained by the department;
3. To seek employment or training opportunities
   a. Provided specific job interviews have been arranged for the resident, or
   b. When the resident has been approved for work or training release status but his job or training placement has not been developed or concluded, or
4. When necessary to prepare a parole plan for a parole hearing scheduled within one hundred and twenty (120) days of the commencement of the furlough,
5. To make residential plans for parole which require his personal appearance in the community;
6. To care for business affairs in person when the inability to do so could deplete the assets or resources of the resident so seriously as to affect his family or his future economic security;
7. To visit his family for the purpose of strengthening or preserving relationships, exercising parental responsibilities, or preventing family division or disintegration;
8. For any other purpose deemed to be consistent with plans for rehabilitation of the resident. [Order 805, § 275-93-020, filed 5/31/73.]

WAC 275-93-040 Furlough of person confined in state correctional institution—Who may apply. (1) Any resident may apply for a furlough provided that

a. He is in or eligible for minimum security classification,

b. If sentenced to serve a mandatory minimum term a waiver from the board of prison terms and paroles has been secured, or there is only six months left to serve on such mandatory minimum term,

c. His minimum term has been fixed by the board of prison terms and paroles,

d. If he has a detainer pending, approval of the detaining agency must be secured. Other jurisdictions may provide approval on a class of applicants, for example, all those otherwise approved by this state, in lieu of action on individual applications.

2. A resident must have served a minimum amount of time prior to the commencement of the furlough. He will be considered to have served a minimum amount of time if

a. The furlough begins not sooner than six months after incarceration at the institution of present confinement. If he has been transferred to the institution for medical care or to participate in an educational or training program, the six-month period may be waived.

b. He is a resident of an honor camp or work release unit and the time spent in this unit and in prior institutions of confinement totals six months.

c. He is serving a sentence under twelve months and has served a minimum of ninety days, and the furlough does not begin earlier than six months prior to his expected release or scheduled parole hearing. [Order 805, § 275-93-040, filed 5/31/73.]

WAC 275-93-050 Furlough of person confined in state correctional institution—Conditions imposed. (1) The applicant must agree to abide by all terms and conditions of the approved furlough plan. Any violation may be cause for suspension or revocation of the furlough.

2. The furlough plan will specify the residence address at which the applicant will reside during the period of furlough and will designate the names and relationships of the persons with whom he will live.

3. Upon arrival at his destination the furloughed person will, when so required, report to a state probation and parole officer in accordance with instructions given prior to release on furlough. He shall report as frequently as may be required by the state probation and parole officer.

4. The furloughed person shall abide by all local, state and federal laws, ordinances, and statutes.

5. With approval of the designated state probation and parole officer, the furloughed person may accept temporary employment during a period of furlough. Earnings may be used to defray the costs of the furlough, including transportation, living expenses, family support, and incidental needs.

6. Furloughed persons may not leave the state at any time while on furlough.

7. Other limitations on movement within the state may be imposed as a condition of furlough. Unless it is part of the approved travel plan, travel outside the county to which furlough is granted must be approved by the probation and parole officer in that county.

8. A furloughed person may not, in any public place, drink intoxicating beverages or be in an intoxicated condition. All public taverns, bars, and cocktail lounges will be considered "off limits" to furloughed persons.

9. A furloughed person who drives a motor vehicle must

[Title 275 WAC—p 122] (1980 Ed.)
(a) have a valid Washington driver's license in his possession
(b) if unaccompanied by the owner, have the owner's written permission in his possession to drive any vehicle not his own or his spouse's,
(c) have at least minimum personal injury and property damage liability coverage on the vehicle he is driving
(d) observe all traffic laws.
(10) Clothing issued for use during the furlough is to be returned to the institution at the completion of the furlough.
(11) Other conditions of furlough specific to the individual may be imposed.
(12) All conditions of furlough, general and specific, shall be listed on the furlough order, and shall be discussed with the resident by his counsellor before he leaves the institution. The furlough plan must designate a sponsor for the resident while he is on furlough. The sponsor must sign a furlough identification card will be issued to the resident prior to departure, and returned at the end of the furlough.
(13) Willful failure to return from a furlough at the time specified in the furlough order constitutes an escape from confinement which is a violation of criminal law. [Order 805, § 275-93-050, filed 5/31/73.]

WAC 275-93-060 Furlough of person confined in state correctional institution—Duration. (1) Furloughs may not exceed thirty days at a given time or a total of sixty days in any twelve-month period. The sixty day total is designed to permit a reasonable pattern of short releases over the course of a year, or an extended period of release for special placement on furlough status in preparation for work release, training release, or parole planning, or a combination of these reasons.
(2) First and second furloughs will ordinarily not exceed five days.
(3) Emergency furloughs will ordinarily be limited to forty-eight hours plus travel time.
(4) Any furlough may be extended by the secretary within the maximum time limits set by this section. [Order 805, § 275-93-060, filed 5/31/73.]

WAC 275-93-070 Furlough of person confined in state correctional institution—Sponsor's responsibilities. A furlough plan must designate a sponsor for the resident while he is on furlough. The sponsor must sign a statement agreeing to
(1) provide the furloughed with appropriate living quarters for the duration of the furlough,
(2) notify the institution immediately if the furloughed does not appear as scheduled, departs from the furlough plan at any time, becomes involved in serious difficulty during the furlough, or experiences problems that affect his ability to function appropriately,
(3) assist the furloughed in other appropriate ways, such as discussing problems, providing transportation to job interviews, etc.,
(4) assure that the furloughed returns to the institution on time. [Order 805, § 275-93-070, filed 5/31/73.]

WAC 275-93-080 Furlough of person confined in state correctional institution—Criteria for evaluating application. (1) An application for furlough shall be considered with respect to
(a) consistency with the purposes described in WAC 275-44-020, and
(b) adequacy of the furlough plan, and
(c) possible risk to the community, and
(d) findings of a field investigation.
(2) The application shall be evaluated without regard to the race, sex, color, national origin, or creed of the applicant. [Order 805, § 275-93-080, filed 5/31/73.]

WAC 275-93-090 Furlough of person confined in state correctional institution—Application for furlough. (1) An application for furlough must be made on forms prescribed by the secretary, must include a furlough plan, and must be submitted by the resident to his counselor.
(2) An application for furlough, other than an emergency furlough, must be made at least seven weeks prior to the date of the furlough.
(3) Any resident whose furlough application has been rejected may reapply after such period of time has elapsed as was determined by the secretary at the time of rejection, such time period being subject to modification.
(4) A furlough plan shall specify in detail the purpose of the furlough and how it is to be achieved, the address at which the applicant would reside, the names of all persons residing at such address and their relationships to the applicant. [Order 805, § 275-93-090, filed 5/31/73.]

WAC 275-93-100 Furlough of person confined in state correctional institution—Notifying resident of decision on application. (1) The resident and his sponsor shall both be notified promptly of the disposition of his application.
(2) If a furlough is authorized, a copy of the furlough order will be mailed to the sponsor. [Order 805, § 275-93-100, filed 5/31/73.]

WAC 275-93-110 Furlough of person confined in state correctional institution—Escape. The department has the duty, as soon as possible, to notify the state patrol of the escape of a furloughEE. [Order 878, § 275-93-110, filed 11/29/73; Order 805, § 275-93-110, filed 5/31/73.]

WAC 275-93-120 Furlough of person confined in state correctional institution—Revocation or suspension. (1) Any employee of the department having knowledge of a furlough infraction shall report the facts to the secretary. Upon verification, the secretary will cause the custody of the furloughee to be regained, and for this purpose may cause a warrant to be issued.
(2) The secretary will determine whether to suspend or revoke the furlough. If the furlough is suspended, the

(1980 Ed.)
secretary will indicate when and under what circumstances the resident may reapply. [Order 805, § 275–93–120, filed 5/31/73.]

WAC 275–93–130 Furlough of person confined in state correctional institution—Law enforcement officers to be notified. (1) Appropriate law enforcement agencies will be notified of a planned furlough via the state patrol communications network at least forty-eight hours prior to the beginning of the furlough.

(2) In the event of an emergency furlough, the state patrol will be notified as early as possible but the forty-eight hour requirement will not apply. [Order 805, § 275–93–130, filed 5/31/73.]

WAC 275–93–140 Furlough of person confined in state correctional institution—Exceptions to rules. In emergency situations the secretary may authorize exceptions to the rules in chapter 275–93 WAC provided that no exception may be made to WAC 275–93-040(1)(a), (1)(b) and (1)(d), 275–93–050(6), and 275–93–060(1). [Order 845, § 275–93–140, filed 8/9/73.]

Chapter 275–96 WAC
ADULT CORRECTIONAL INSTITUTIONS—CORRESPONDENCE AND TELEPHONE USAGE

WAC

275–96–005 Definitions.
275–96–010 Communication—Purpose.
275–96–015 Communication—General limitations.
275–96–020 Outgoing mail.
275–96–022 Incoming mail.
275–96–025 Special rules—Incoming publication limitations and controls.
275–96–030 Special rules regarding packages—Limitations and controls.
275–96–045 Handling of mail.
275–96–050 Treatment of cash and checks.
275–96–055 Legal mail.
275–96–060 Stationery and postage.
275–96–065 Use of telephone.
275–96–070 Procedure for disapproval of resident mail.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER


275–96–040 Outgoing packages—Limitations and controls. [Order 1002, § 275–96–040, filed 1/14/75; Order 838, § 275–96–040, filed 7/26/73.] Repealed by Order 1087, filed 1/16/76. For later promulgation, see WAC 275–96–030.

WAC 275–96–005 Definitions. (1) "Contraband" consists of all illegal items, and other items which a resident of a correctional institution may not have in his possession, as defined in regulations adopted by the superintendent of an institution and approved by the secretary. (2) "Emergency situations" are critical illnesses, deaths, emotional crises or similar situations experienced by members of the resident's family or the resident. (3) "Illegal items" are narcotic drugs, alcoholic beverage or any weapon, firearm or any instruments which, if used, could produce serious bodily injury to the person of another (RCW 9.94.040). (4) "Legal correspondence" consists of mail addressed to or from attorneys, paraprofessionals who have a bona fide association with attorneys or a legal services agency, judges, public officials and their authorized representatives in their official capacities. (5) "Letters" are mail consisting of personal communications and enclosures which are not contraband. (6) "Mail" consists of letters, publications, or packages delivered by the United States Post Office or by other means. (7) "Packages" are pieces of mail other than letters or publications. (8) "Probable cause" consists of facts upon which a reasonable person would conclude that a crime or infraction has been, is being, or is about to be committed. (9) "Publications" are reproduced written and/or pictorial materials including books, periodicals, newspapers, pamphlets. (10) "Reception center" means the reception center at the Washington Corrections Center. (11) "Superintendent" includes the superintendent of a correctional facility and/or his designee(s). [Statutory Authority: RCW 72.01.090. 78–12–052 (Order 1358), § 275–96–005, filed 11/28/78; Order 838, § 275–96–005, filed 7/26/73.]

WAC 275–96–010 Communication—Purpose. Communication between residents and persons outside the institution is encouraged for the purpose of retaining constructive community ties, stimulating intellectual pursuits, assisting in the attainment of vocational or educational goals, and facilitating inquiry pertaining to legal concerns. Communication is deemed a right rather than a privilege and can be abridged only when there is reason to believe that the communication would endanger the security or internal order of the institution or would substantially affect the rehabilitation of the resident. [Order 1087, § 275–96–010, filed 1/16/76; Order 838, § 275–96–010, filed 7/26/73.]

WAC 275–96–015 Communication—General limitations. (1) Established limits on the quantity or weight of incoming or outgoing mail, publications, and packages may not be exceeded, except where provisions of these rules permit. It is understood that there are no established limits on the quantity of letters which may be received or sent by a resident of a correctional facility. (2) Senders are accountable by law and as hereinafter provided for obscene, harassing, threatening, or criminally-conspiring contents of any communication or package. (3) Illegal items such as contraband, weapons, explosives, controlled substances or communications relative
to an unresolved criminal case shall be held as evidence for law enforcement authorities.

(4) All mail to or from residents is subject to inspection by institution staff but may be disapproved for mailing or receipt only upon the criteria and subject to the limitations set forth in these rules. No person who inspects or participates in the inspection of correspondence shall disclose the contents of such correspondence to any person unless it appears that such correspondence violates these rules, in which case disclosure shall be only in the course of his duties. [Order 1087, § 275-96-015, filed 1/16/76; Order 838, § 275-96-015, filed 7/26/73.]

WAC 275-96-021 Outgoing mail. Outgoing mail from residents of institutions may be disapproved for mailing only if the content falls as a whole or in significant part into any one of the following categories:

(1) The mail contains threats of physical harm against any persons or threats of criminal activity.

(2) The mail threatens blackmail or extortion.

(3) The mail concerns sending contraband in or out of the institution.

(4) The mail concerns plans to escape.

(5) The mail concerns plans for activities in violation of institution rules.

(6) The mail concerns plans for criminal activity.

(7) The mail is in code and its contents are not understood by the reader.

(8) Unless a resident has received the prior permission of the superintendent to do so, the mail solicits goods or money from other than the immediate family of the resident: Provided, That this category shall not be construed to preclude the purchase of noncontraband goods where payment for such goods accompanies the purchase order.

(9) The mail contains information which, if communicated, would create a clear and present danger of violence and physical harm to a human being.

(10) The mail is addressed to a minor whose parents or guardian have objected to such correspondence; an individual who has previously been sent l e w d or threatening material by the resident and who has complained or asked that such mail not be received.

(11) The mail contains contraband. [Statutory Authority: RCW 72.01.090. 78–12–052 (Order 1358), § 275–96–021, filed 11/28/78; Order 1087, § 275–96–021, filed 1/16/76. Formerly WAC 275–96–035 (part).]

WAC 275-96-022 Incoming mail. Incoming mail to residents may be disapproved for receipt only:

(1) For the reasons set forth in WAC 275-96-021.

(2) It is from a resident of a correctional facility including intra-facility mail unless the resident has received the prior approval of the superintendent or his designee to receive such mail.

(3) No mail may be rejected solely upon the basis that it contains criticism of the institution or its personnel. [Order 1087, § 276–96–022, filed 1/16/76. Formerly WAC 275–96–020 (part).]

WAC 275–96–025 Special rules—Incoming publication limitations and controls. (1) No restriction shall be placed on the number of publications a resident may receive if mailed directly by the publisher or dealer, provided the resident has adequate storage facilities for such publications.

(2) Publications may be disapproved which contain instructions on the manufacture of homemade weapons, bombs, or explosives; escape material; hard core pornography; or the brewing of alcoholic beverages. For the purposes of this subparagraph, the term "hard core pornography" shall not be deemed to include books, pamphlets or magazines which can be purchased in a typical pharmacy, quick-service store, or news stand located in the community nearest to the institution. Rather, the term is meant to include only those items which are generally able to be purchased at stores specializing in erotic materials.

(3) A resident is responsible for arranging changes of address for publications which he receives.

(4) Publications may be inspected to insure that they conform to the requirements of this section. [Order 1087, § 275–96–025, filed 1/16/76; Order 838, § 275–96–025, filed 7/26/73. Formerly WAC 275–96–020 (part).]

WAC 275–96–030 Special rules regarding packages—Limitations and controls. (1) The resident shall decide who shall be allowed to send packages to him.

(2) A resident may receive one gift package, not to exceed fifteen pounds in weight, during each of the following calendar periods: December–January–February; March–April–May; June–July–August; and September–October–November.

(3) The superintendent may allow additional gift packages and may increase the weight limitation on soft packages at his discretion provided that the additional allowances will be applicable to all residents of the institution. Packages which are overweight may be delivered or returned. If returned, the procedures in WAC 275–96–030(6) will be followed.

(4) Packages containing materials purchased by mail order by a resident may be admitted subject to limitations in WAC 275–96–021, 275–96–025, and this section.

(5) Packages may be admitted only if the contents conform to rules governing admissible items adopted by the superintendent of each institution and approved by the secretary. These rules shall be disseminated within the institution and copies shall be made available to residents who may wish to send them to their correspondents.

(6) Incoming packages shall be inspected. If a package contains contraband which is not illegal, the package shall be, at the resident’s expense, returned to the sender or to another person designated by the resident. If the resident chooses neither of these options, the package may be donated to charity or discarded. The superintendent may, in his discretion, require that only the contraband portion of the package be returned and may allow delivery of noncontraband portions of a package.

(1980 Ed.)
(7) Reception center residents may not receive packages.

(8) Prepaid merchandise ordered by the resident from any wholesaler or retailer shall not be considered one of the four gift packages in WAC 275-96-030(2).

(9) A resident may mail packages containing materials which have been sent to him in the institution, or gifts consisting of his own hobby, craft or curio work. Such gifts must be made and mailed at his own expense.

(10) Mail which arrives at an institution with postage due may, at the option of the superintendent, be delivered to the resident with the institution paying the postage due or held for a reasonable period of time so as to allow the resident to arrange for payment of the postage due. If such arrangements are not made within the time provided, the package may be donated to charity or discarded. [Statutory Authority: RCW 72.01.090. 78-12-052 (Order 1358), § 275-96-030, filed 11/28/78; Order 1087, § 275-96-030, filed 1/16/76; Order 838, § 275-96-030, filed 7/26/73. Formerly WAC 275-96-040.]

WAC 275-96-045 Handling of mail. (1) A resident's mail, whether incoming or outgoing, shall be handled with all possible dispatch.

(2) A resident shall be notified in writing whenever any material is removed from his mail. [Order 838, § 275-96-045, filed 7/26/73.]

WAC 275-96-050 Treatment of cash and checks. (1) Cash and personal checks shall not be accepted and shall be returned to the sender.

(2) Postal money orders and cashier's checks shall be removed from the envelope and replaced with a receipt. Upon endorsement by the resident, the proceeds shall be placed in his account. [Order 838, § 275-96-050, filed 7/26/73.]

WAC 275-96-055 Legal mail. Legal correspondence may be opened and inspected for contraband in the presence of the resident only. [Statutory Authority: RCW 72.01.090. 78-12-052 (Order 1358), § 275-96-055, filed 11/28/78; Order 1087, § 275-96-055, filed 1/16/76; Order 838, § 275-96-055, filed 7/26/73.]

WAC 275-96-060 Stationery and postage. (1) The institution shall provide free writing paper and envelopes.

(2) The institution shall pay postage on three pieces of first-class domestic mail, each weighing one ounce or less, per week. Postage on additional outgoing mail shall be paid by the resident. Legal mail in excess of this limitation shall be paid for by the institution only if the resident has less than ten dollars in his account. The superintendent may approve exceptions to this limitation.

(3) Postage on outgoing mail from resident groups and persons on work release shall be provided by the sender. [Title 275 WAC—p 126]

(4) The institution shall make available postage stamps for purchase. [Statutory Authority: RCW 72.01-090. 78-12-052 (Order 1358), § 275-96-060, filed 11/28/78; Order 838, § 275-96-060, filed 7/26/73.]

WAC 275-96-065 Use of telephone. (1) Telephone facilities shall be provided in appropriate numbers and locations to permit reasonable and equitable access to all residents, except residents of the reception center and those residents in disciplinary segregation.

(2) The superintendent shall promulgate written regulations providing for access of residents to additional telephone facilities in emergency situations.

(3) Privacy shall be insured by reasonable isolation or soundproofing of telephone facilities. Telephone calls shall not be monitored, recorded, or spot-checked except by court order.

(4) The superintendent shall promulgate written regulations outlining the hours of telephone availability, maximum length of calls (not to be less than five minutes) and any limitations on telephone use.

(5) Calls shall be placed collect unless it is a local call.

(6) The superintendent shall maintain a log of all outgoing calls by residents.

(7) Reasons for calls shall be the personal concern of the resident, except in consideration of requests for emergency calls beyond normal telephone availability.

(8) Denial of telephone privileges shall not be used as a sanction against the abuse of unrelated institution rules and regulations. [Order 838, § 275-96-065, filed 7/26/73.]

WAC 275-96-070 Procedure for disapproval of resident mail. (1) When a resident is prohibited from sending a letter, a copy of the letter and a written and signed notice stating one of the authorized reasons for disapproval indicating the portion or portions of the mail causing disapproval will be given the resident.

(2) When a resident is prohibited from receiving mail, a written signed notice stating one of the authorized reasons for disapproval and indicating the portion or portions of the mail causing disapproval will be given to the sender and to the resident, who will also be told the sender's name. Letters disapproved for delivery to a resident will be returned to the sender. Packages will be disposed of in accordance with WAC 275-96-030.

(3) If either incoming or outgoing mail contains illegal material, the material may be confiscated and held for the appropriate law enforcement authorities, or destroyed.

(4) Whenever letters written by residents are withheld from mailing, the letters shall be forwarded to the director of the division of adult corrections for study. The director shall either mail the letters to the addressee within seven days, or, if the letters are deemed objectionable by the director under the standards of these rules, they shall be retained in a separate file for two years and then destroyed.

(5) Any resident who feels aggrieved by the denial of either the sending or receipt of mail may appeal such
decision to the superintendent or his designee, who shall be a person other than the person who originally disapproved the correspondence. [Statutory Authority: RCW 72.01.090, 78-12-052 (Order 1358), § 275-96-070, filed 11/28/78; Order 1087, § 275-96-070, filed 1/16/76. Formerly WAC 275-96-035 (part).]

Chapter 275-102 WAC
ADULT PROBATION AND PAROLE—INTERSTATE COMPACT

WAC 275-102-475 Definitions. (1) "Compact" is the interstate compact for supervision of probationers and parolees as codified in RCW 9.95.270.

(2) "Compact administrator" is the person appointed by the governor of the state of Washington to be responsible for the administration of the interstate compact for the supervision of adult probationers and parolees.

(3) "Deputy compact administrator" is a person appointed by the compact administrator and delegated responsibility for the administration of the interstate compact.

(4) "Sending state" is the state in which the individual was granted probation or parole and in which the jurisdiction of the case is retained.

(5) "Receiving state" is the state providing supervision of the parolee or probationer under the interstate compact.

(6) "Probationer" is a person under jurisdiction of an out-of-state superior, circuit or district court who is being supervised under the compact.

(7) "Parolee" is a person under jurisdiction of an out-of-state paroling authority who is being supervised under the interstate compact.

(8) "Parole officer" is a state probation and parole officer employed by the department of social and health services.

(9) "Supervising parole officer" is a parole officer assigned to supervise a probationer or parolee as required by the interstate compact and to act in regard to all matters connected with hearings conducted pursuant to these rules.

(10) "Violations specified" are charges and/or allegations made against probationer or parolee by a parole officer in regard to violation of law or failure to comply with the general conditions of probation or parole or special instructions and conditions as set forth by the court of jurisdiction or the paroling authority.

(11) "Preliminary hearing" is a hearing conducted in accordance with RCW 9.95B.010 through 9.95B.900.

(12) "Hearing officer" is a person authorized by the compact administrator to hear cases involving alleged violations of conditions of parole or probation. Neither the person making the allegations of violation or his direct supervisor shall act as hearing officer. [Order 1011, § 275-102-475, filed 2/28/75.]

WAC 275-102-480 Detained or arrested probationer or parolee—Right to preliminary hearing. (1) A probationer or parolee being supervised for another state under the interstate compact if detained or arrested within the state of Washington shall have the right as provided in chapter 9.95B RCW, to a preliminary hearing to determine whether there is probable cause to believe a condition or conditions of probation or parole have been violated and whether there is reason to believe the violations alleged are of such nature that a revocation of probation or parole should be considered by the sending state.

(2) The detained or arrested probationer or parolee may waive his right to such hearing in writing. [Order 1011, § 275-102-480, filed 2/28/75.]

WAC 275-102-485 Preliminary hearing—Preparation. (1) When a probationer or parolee being supervised in the state of Washington under the compact is detained by a parole officer, the parole officer shall immediately give verbal and written notice to such probationer or parolee of his right to a preliminary hearing and shall further notify the probationer or parolee of all rights guaranteed him by the rules in this chapter.

(2) Immediately following the detention of a probationer or parolee, the parole officer shall notify the deputy compact administrator of the detention. Arrangements shall promptly be made for the date, time and place for a hearing so that the hearing may be held within ten days from the date the probationer or parolee is detained by the parole officer.

(3) As soon as possible following detention of a probationer or parolee, the parole officer shall prepare charges or the violations specified and provide the probationer or parolee with a copy of said charges and also notify him of the date, time and place set for the hearing. Upon serving the probationer or parolee with the violations specified, the parole officer shall determine whether the probationer or parolee wishes to waive his right to a hearing.

(4) Prior to the hearing, the parole officer shall send to the appropriate deputy compact administrator the signed hearing waiver (if appropriate), the notice of arrest and violations specified and the violation report.

(5) A detained or arrested probationer or parolee shall have the right to consult with any person whose assistance he reasonable desires prior to the hearing. [Order 1011, § 275-102-485, filed 2/28/75.]

WAC 275-102-490 Preliminary hearing—Conduct. (1) The hearing shall be conducted by a hearing officer as defined in WAC 275-102-475(12).

(2) The hearing shall be closed to the public.

(3) The proceedings at the hearing shall be recorded.

(4) The hearing officer shall explain the purpose of the hearing, have the specified charges read aloud, and
verify that the procedures specified in WAC 275-102-485 have been followed.

(5) A supervising parole officer shall be present at the hearing, submit the written report of the alleged violations in evidence and testify as to the violations.

(6) Any person may give testimony relevant to the alleged violation or violations, introduce evidence including affidavits, and question other persons subject to the limitations in subsection (7).

(7) The detained or arrested probationer or parolee shall have the right to confront and examine any person who may have made allegations or given evidence against him unless the hearing officer determines that such a confrontation would present a substantial present or subsequent danger of harm to such person. In such instance a written general summary or the evidence, without disclosure of the identity of the witness, shall be provided to the probationer or parolee at the hearing. He shall have the opportunity to submit evidence relevant to or controverting any information contained in the summary.

(8) The hearing may be recessed for time sufficient for the hearing officer to consider the evidence and reach a decision on the issue of probable cause.

(9) The hearing officer shall render this decision on the probable cause based solely on the evidence presented at the hearing.

(10) If probable cause is found the hearing officer may receive additional evidence and argument relevant to recommendations. [Order 1011, § 275-102-490, filed 2/28/75.]

WAC 275-102-495 Preliminary hearing—Disposition of decision. (1) The hearing officer shall submit a written summary and digest of the hearing to the deputy compact administrator which may include recommendations and reasons therefore.

(2) The deputy compact administrator shall submit the summary and digest to the sending state which may include his recommendations.

(3) If the decision is that there is probable cause to believe that the parolee or probationer has committed a violation or violations of a condition or conditions of parole or probation and it appears that retaking or reincarceration by the sending state is likely to follow, the probationer or parolee may be detained by the deputy compact administrator to allow such time as may be necessary to complete the arrangements for his return to the sending state.

(4) Should it be the decision of the sending state to return this probationer or parolee, the deputy compact administrator will assist in arranging for his return to the sending state.

(5) The record of the hearing shall be retained for not less than 180 days. [Order 1011, § 275-102-495, filed 2/28/75.]

Chapter 275-110 WAC
IMPACT ACCOUNT—CRIMINAL JUSTICE COST REIMBURSEMENT

WAC 275-110-010 Purpose. The purpose of these rules is to implement the provisions of chapter 72.72 RCW (chapter 108, Laws of 1979 ex. sess.) by establishing standards and procedures for providing financial relief to cities, towns, and counties impacted by criminal behavior of certain state institutional inmates. An institutional impact account, within the general fund, is created to reimburse political subdivisions for criminal justice costs incurred directly as a result of crimes committed by offenders who are inmates of an institution as defined herein. Reimbursement is limited to appropriated funds. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-010, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-010, filed 1/25/80.]

WAC 275-110-020 Definitions. The following words and phrases shall have the following meaning when used in these regulations.

(1) "Department" means the department of social and health services.

(2) "Political subdivisions" means counties, cities and towns.

(3) "Institution" means any state institution operated by the department for the confinement of adult offenders committed pursuant to chapters 10.64, 10.77, and 71.06 RCW or juvenile offenders committed pursuant to chapter 13.40 RCW.

(4) "Secretary" means the secretary of social and health services or his designee(s).

(5) "Incremental" means efforts or costs incurred by cities, towns, and/or counties that are not otherwise incurred and are specifically and exclusively attributable to criminal behavior of state institutional residents.

(6) "Law enforcement cost" means costs incurred to apprehend escapees or to investigate crimes committed by institutional residents within or outside state institutions defined herein.

(7) "Inmate" means any person committed to a state institution by the courts for confinement as an adult offender pursuant to chapters 10.64, 10.77, and 71.06 RCW, or as a juvenile offender pursuant to chapter 13.40 RCW. [Statutory Authority: RCW 72.72.040. 80-
WAC 275-110-030 Limitation of funds. The secretary shall make reimbursement to the extent funds are available. Reimbursement shall be strictly limited to political subdivisions in which state institutions, as defined in WAC 275-110-020, are located. Only incremental costs directly, specifically, and exclusively associated with criminal activities of offenders who are inmates of state institutions shall be considered for reimbursement. Reimbursement shall be restricted to fully documented law enforcement, prosecutorial, judicial, and jail facilities costs. No such costs shall be paid under these rules if said costs are reimbursable under other chapters of the Washington Administrative Code. During each biennium, claims for incidents which occurred during the biennium will be paid in the order in which they are received until the biennial appropriation is fully expended. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-030, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-030, filed 1/25/80.]

WAC 275-110-040 Institutions and eligible impacted political subdivisions. Reimbursement shall be limited to the following city, town, and county governments impacted by the offenses from inmates assigned to institutions listed in this section.

1. Washington state penitentiary
   - Walla Walla/Walla Walla
   - Monroe/Snohomish

2. Washington state reformatory
   - Shelton/Mason

3. Washington corrections center for women
   - Purdy/Pierce

4. Purdy treatment center for women
   - Seattle/King

5. Firland correctional center
   - Yacolt/Clark

6. Larch correctional center
   - Forks/Clallam/Jefferson

7. Clearwater correctional center
   - Arlington/Snohomish

8. Indian Ridge treatment center
   - Medical Lake/Spokane

9. Pine Lodge correctional center
   - Littlerock/Thurston

10. Cedar Creek correctional center
    - Snoqualmie/King

11. Echo Glen children center
    - Chehalis/Lewis

12. Green Hill school
    - Rochester/Thurston

13. Maple Lake school
    - Tacoma/Pierce

14. Cascadia juvenile reception and diagnostic center
    - Belfair/Mason

15. Mission Creek youth camp
    - Naselle/Pacific

16. Naselle youth camp
    - Woodinville/Snohomish

17. Woodinville group home
    - East Wenatchee/Douglas

18. Canyon View group home
    - Ephrata/Grant

19. Sunrise group home
    - Richland/Benton

20. Twin Rivers group home
(1980 Ed.)

(21) Oakridge group home
   - Tacoma/Pierce

(22) Pioneer group home
   - Tacoma/Pierce

(23) Western state hospital
   - Steilacoom/Pierce

(24) Eastern state hospital
   - Medical Lake/Spokane

(25) For any institution which is not listed above, reimbursement shall be limited to the political subdivisions in which the institution is located. Such institutions include adult work release facilities and juvenile group homes housing inmates as defined in WAC 275-110-020(7). [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-040, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-040, filed 1/25/80.]

WAC 275-110-050 Maximum allowable reimbursement for law enforcement costs. Reimbursement is limited to the specific political subdivisions listed in WAC 275-110-040. For the 1979-81 biennium, the maximum reimbursement rates are: $12.30 per hour for state fiscal year 1980 and $13.17 per hour for state fiscal year 1981. These maximum allowable reimbursement rates may be exceeded only in the event that an exception is granted by the secretary as per WAC 275-110-100. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-050, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-050, filed 1/25/80.]

WAC 275-110-060 Maximum allowable reimbursement for prosecutorial costs. Reimbursement for pretrial investigations of crimes committed inside or outside institutions, impacting the political subdivision courts as set forth in WAC 275-110-040, shall be at the established rate for law enforcement efforts set forth in WAC 275-110-050. If, after investigation, criminal charges are filed, fully documented prosecutorial and defense attorney fees may be reimbursed. Reimbursement shall not exceed $30 per hour for each attorney, said reimbursement to include costs for paralegals. These maximum allowable reimbursement rates may be exceeded only in the event that an exception is granted by the secretary as per WAC 275-110-100. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-060, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-060, filed 1/25/80.]

WAC 275-110-070 Maximum allowable reimbursement for judicial costs. (1) Judicial costs shall be strictly limited to cases involving inmates of institutions listed in WAC 275-110-040 and to political subdivisions listed in WAC 275-110-040. Reimbursement is limited to judges, court reporters, expert witnesses, and transcript typing, if required.

(2) Reimbursement for judges hearing cases shall be reimbursed at $30 per hour and this cost shall include services provided by court clerks and bailiffs. Court reporters shall be reimbursed at the rate of $12.50 per hour. Requiredtyping of transcripts shall be reimbursed at $2.50 per page. If required, expert witnesses shall be reimbursed at $30 per hour, said reimbursement to be made only in the event that it would otherwise be made by the political subdivision. These maximum allowable[Title 275 WAC—p 129]
reimbursement rates may be exceeded only in the event that an exception is granted by the secretary as per WAC 275-110-100. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-070, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-070, filed 1/25/80.]

WAC 275-110-080 Maximum allowable reimbursement for jail facilities. Jail facility cost reimbursement shall be strictly limited to incremental costs as defined in WAC 275-110-020 and to political subdivisions listed in WAC 275-110-040. Requests for reimbursement must be fully documented and must include the inmate's name and all appropriate admission and release dates. Reimbursement shall be limited to $3.50 per inmate day. Reimbursement shall not be made for costs incurred for holding persons involved in civil litigation. These maximum allowable reimbursement rates may be exceeded only in the event that an exception is granted by the secretary as per WAC 275-110-100. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-080, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-080, filed 1/25/80.]

WAC 275-110-090 Billing procedure. Requests for reimbursement should be made on the standard Washington State Invoice Voucher, Form A19, with supporting and justifying materials attached. Such documentation may be subject to periodic audits at the discretion of the secretary, per WAC 275-110-120. (1) All requests for reimbursement under this section shall note the name of the offender for whom costs were incurred, and the institution to which the offender was assigned. (2) Requests for reimbursement may only be submitted by the jurisdiction's responsible fiscal officer, e.g., city manager, city supervisor, county auditor, county administrator, etc. (3) All requests for reimbursement must be submitted to: DSHS, Office of Accounting Services, Mail Stop OB-24, Olympia, Washington 98504. (4) If the appropriation for a biennium is fully expended prior to the end of the biennium, political subdivisions should continue to submit claims for the purpose of providing justification for requests for adequate funding levels in future biennia. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-090, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-090, filed 1/25/80.]

WAC 275-110-100 Exceptions. The secretary, at his discretion, may allow exceptions to these rules. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-100, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-100, filed 1/25/80.]

WAC 275-110-110 Effective date. Claims submitted according to this chapter may only be for costs incurred for appropriate actions, as defined in this chapter, taken by criminal justice agencies on or after August 30, 1979. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-110, filed 11/7/80.]

WAC 275-110-120 Audits. The department has the right to audit any or all claims. [Statutory Authority: RCW 72.72.040. 80-17-004 (Order 1569), § 275-110-120, filed 11/7/80.]

Chapter 275-150 WAC

REFERENDUM 37 FUNDING OF FACILITIES FOR THE CARE, TRAINING, AND REHABILITATION OF PERSONS WITH SENSORY, PHYSICAL, OR MENTAL HANDICAPS

WAC 275-150-010 Purpose. The purpose of these rules is to set forth the administrative procedures for the implementation of chapter 43.99C RCW and chapter 136, Laws of 1980 relating to the funding of regional and community facilities for the care, training, and rehabilitation of persons with sensory, physical, or mental handicaps. [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-010, filed 7/9/80.]

WAC 275-150-020 Definitions. (1) "Department" shall mean the department of social and health services. (2) "Secretary" shall mean the secretary of the department. (3) "Region" shall mean any of the six geographical areas in the state designated as a regional administrative area for the department. (4) "Regional director" shall mean the departmental employee appointed by the secretary or his designee to serve as the administrative head of a region. (5) "Regional advisory committee" shall mean a statutorily created committee to advise the regional director on services delivered in the region. (6) "Regional management committee" shall mean the committee of representatives appointed from various departmental programs to assure coordination of planning and service delivery activities in each region. (7) "Handicapped" shall mean persons who have developmental disabilities, mental illness, physical disabilities, blindness or deafness. (8) "Regional needs assessment" shall mean the findings and conclusions resulting from an analysis of unmet facility needs of the handicapped in each region on a county–by-county basis. (9) "Public body" shall mean the state of Washington or any agency, political subdivision, taxing district, or
municipal corporation thereof, but does not include Indian tribes.

(10) "Sponsor" shall mean a public body whose final application for Referendum 37 funding has been reviewed and approved by the secretary.

(11) "County allocation" shall mean the amount of Referendum 37 funds available for projects within a county, based on each county's population.

(12) "Class 6, 7 or 8 county" shall mean a county whose total population is less than 12,000, 8,000, or 5,000 respectively.

(13) "Class AA county" shall mean a county whose total population is more than 500,000.

(14) "Preliminary proposal" shall mean a preliminary request from a public body to the department for Referendum 37 funding.

(15) "Final application" shall mean a final request from a public body to the department for Referendum 37 funding, following approval of the preliminary proposal by the department and the legislature.

(16) "Regional plan" shall mean the list of preliminary proposals which have gone through the regional review process and which the regional director has recommended to the secretary for funding.

(17) "State-wide facilities plan" shall mean a compilation of preliminary proposals contained in the regional plans which the department has reviewed and recommended for legislative approval. [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-020, filed 7/9/80.]

WAC 275-150-030 Administration and allocation of referendum 37 funds. (1) All funds shall be administered by the department.

(2) All public bodies shall be eligible to participate in the program and may apply to the department for possible funding of projects to serve the handicapped.

(3) The share of funds allocated for projects in each county shall be determined by a division of the total funds available for projects among all counties according to the relationship which the population of each county, as based on the 1979 state office of financial management population figures, bears to the total combined population of all counties as shown by the office of financial management population figures.

(a) Each sixth, seventh, or eighth class county may receive a total allocation up to seventy-five thousand dollars if the department determines there is a demonstrated need and the share for such county is less than seventy-five thousand dollars.

(b) No single project in a class AA county shall be eligible for more than fifteen percent of such county's total allocation.

(4) An allocation of five hundred thousand dollars shall be made to the department for planning and administration. An allocation of twenty-five thousand dollars shall be made to each region from these funds for the purpose of conducting a required regional needs assessment as an aid in reaching decisions on projects to be recommended for funding. (See WAC 275-150-040.) [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-030, filed 7/9/80.]

WAC 275-150-040 Regional needs assessment. (1) The planning process for the development of preliminary proposals shall rely heavily on citizen initiative, participation of community organizations, and the handicapped.

(2) Each region shall conduct a needs assessment as one of the first steps in the planning process. Such assessment shall consider the needs and recommendations expressed by the handicapped.

(3) Each region shall be allowed administrative costs up to twenty-five thousand dollars from Referendum 37 administrative funds for the actual expenses entailed in completing the required needs assessment. (See WAC 275-150-030(4).) [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-040, filed 7/9/80.]

WAC 275-150-050 Preliminary proposals and final applications for referendum 37 funding. (1) Preliminary proposals and final applications shall be limited to construction, renovation, acquisition, and improvement of community facilities for the care, training and rehabilitation of persons with sensory, physical, or mental handicaps when used in the following limited program as designated by the department of social and health services: Nonprofit group training homes, community centers, close to home living units, sheltered workshops, vocational rehabilitation centers, developmental disability training centers, and community homes for the mentally ill.

(a) Allowable expenditures may include:

(i) Engineering studies, plans, and specifications,

(ii) Architectural plans and specifications,

(iii) Land acquisition and site preparation,

(iv) Construction, acquisition, improvement, and renovation,

(v) Mobile units providing direct service to the handicapped, and

(vi) Fixed equipment and equipment directly related to the rehabilitation of or service to the handicapped (not to include furniture or office equipment).

(b) All planned expenditures included in final applications shall be subject to review and approval by the secretary or his designee before any expenditure is authorized for reimbursement.

(c) No operating funds shall be provided through Referendum 37 funding.

(d) Referendum 37 funds shall not be used to pay off or retire any existing financial obligations, either directly or indirectly through a public body, such as mortgages or real estate contracts obtained from public or private sources.

(e) Preliminary proposals shall not be accepted if a contract has already been signed for the planned project.

(2) Proposals and applications for funding shall be made by an officially designated representative of a public body.
(a) Because Indian tribes are not legal grantees of the bond funds, Indian tribes cannot be applicants for or sponsors of Referendum 37 projects.

(b) In order to receive funding, a public body shall have ownership of or a leasehold interest in the facility involved and shall assure, in its final application, a commitment to provide the proposed service for a number of years sufficient to amortize the amount of money invested by the state in the project. A department-approved lease may substitute for ownership.

(c) Public bodies making preliminary proposals and later completing final applications shall not be required to provide a local match as a condition of such funding; however, the department shall encourage applicants to seek additional funding to supplement Referendum 37 moneys.

(3) Applicants shall not be required to develop detailed plans to accompany their preliminary proposals. However, when final applications are submitted, they shall, at a minimum, contain the following:

(a) A statement of compliance with the basic criteria of the enabling legislation and regulations established by the department.

(b) A brief summary outlining the proposed project, covering the following:

(i) Feasibility in terms of:
   (A) Documenting the need for the facility;
   (B) All costs for which funding is requested;
   (C) Identification of anticipated program operator;
   (D) Operating fund sources, departmental and other, indicating portions anticipated from each; and
   (E) Historical pattern of the operator's financial stability and plan for continued operation.

(ii) Acceptability in terms of:
   (A) Departmental state-wide and regional goals and objectives;
   (B) County plans and programs;
   (C) Commitment of a public body to operate the program, either directly or through a contractor; and
   (D) Establishing an operating plan acceptable to the department.

(iii) Adequacy in terms of:
   (A) Number of handicapped to be served, by category; and
   (B) Percent of handicapped category in the service area to be served. [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-050, filed 7/9/80.]

WAC 275-150-060 Submission of preliminary proposals. (1) A public body applying for Referendum 37 funds shall first submit to the regional director of the region in which the body is located a preliminary proposal for the project(s) which the body wishes to have included in the regional plan.

(2) The preliminary proposal shall contain a cost estimate and information outlined in WAC 275-150-080(2) "criteria for consideration of preliminary proposals."

(3) After all proposals have been reviewed and evaluated at the regional and state headquarters level, the department shall submit a state-wide facilities plan to the legislature for approval.

(4) Public bodies whose projects are included in the state-wide facilities plan and approved by the legislature shall be instructed to prepare final applications. [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-060, filed 7/9/80.]

WAC 275-150-070 Review process for preliminary proposals. (1) Each region shall design its own planning and review process for preliminary proposals. The process must include, at a minimum, opportunity for input from the following:

(a) The handicapped;

(b) County commissioners and/or county executive of each county within the region, who shall review and recommend prioritization of preliminary proposals within their county. This is to be done for all preliminary proposals, regardless of the public body applying for funding;

(c) Regional management committee;

(d) Regional advisory committee; and

(e) Public bodies eligible to apply for Referendum 37 funding.

(2) The regional advisory committee shall review all preliminary proposals. The committee shall receive input from the handicapped. Those persons representing the handicapped shall participate actively in the review process as a resource, but shall not have a vote on the committee recommendations.

(3) The regional advisory committee shall advise the regional director of its recommendations for funding. The regional director shall review the recommendations with the regional management committee before submitting the final regional recommendations to the secretary.

(4) Each region shall transmit its recommendations to the secretary in the form of a regional plan.

(a) The regional plan shall consist of plans for each county within that region.

(b) No county plan shall require funding in excess of the moneys allocated for projects in that county.

(c) The regional plan shall be based on statutory and departmental criteria applied to specific proposals and shall consider the regional agenda, needs assessment, county prioritization, and input from the handicapped.

(d) The regional plan shall include the following:

(i) A prioritized listing of all preliminary proposals submitted by public bodies within each county;

(ii) An indication as to which preliminary proposals are recommended for approval and the basis for recommending each; and

(iii) A statement affirming the recommendations are consistent with regional goals, program plans, and priorities.

(5) Departmental headquarters shall review regional plans for consistency with departmental program objectives. The review criteria described in WAC 275-150-080 shall be followed.
(6) Following review of all regional plans, departmental headquarters shall prepare a state-wide facilities plan. The first such plan shall consist of facilities verified by the department as ready to proceed. This plan shall be submitted to the two legislative fiscal committees for approval prior to December 1, 1980. Subsequent plans shall be submitted to the legislature as a separate capital budget request.

(7) Following legislative approval of the preliminary proposals in the state-wide facilities plan, the department shall request those public bodies whose preliminary proposals have received legislative approval to submit final applications. (See WAC 275-150-050(3).) [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-070, filed 7/9/80.]

WAC 275-150-080 Review criteria for preliminary proposals. (1) The following general departmental objectives shall be considered:

(a) To continue and strengthen community-based human services;
(b) To improve access to services;
(c) To maintain ties with families, homes, jobs, and schools;
(d) To enhance local responsibility, decision-making, and self-reliance; and
(e) To contribute to individual development, independence, and self-sufficiency.

(2) Specific criteria for consideration of preliminary proposals shall be:

(a) Service to the handicapped, as defined in the enabling legislation and interpreted by the department;
(b) Evidence of need, both for the quantity and quality of services to be provided;
(c) Anticipated source of operating funds;
(d) Financial stability of the service provider, especially if not a public agency;
(e) For projects involving land, local zoning which permits the proposed use;
(f) Consistency with the state-wide and regional program objectives and priorities of the department, with emphasis on community supportive services needed to release residents of state institutions or prevent their unnecessary admission to state institutions; and

(g) The provision of new services. Proposed projects should create new capacity, which may be accomplished in three ways:
(i) By creating new facilities which provide services to the handicapped not already being served;
(ii) By enriching programs in existing facilities but not necessarily increasing the number of handicapped served; or
(iii) By a combination of (i) and (ii).

(3) All preliminary proposals in the regional plan for a given county shall be consistent with that county's human service plans, goals, and objectives. [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-080, filed 7/9/80.]

WAC 275-150-090 Operation of approved referendum 37 projects. (1) Most projects will be operated by public bodies; however, they may contract with private nonprofit agencies for operation.

(2) If a facility is reimbursed by the department for program costs and has an identifiable capital component in those costs, the rate of reimbursement will be adjusted downward to take into consideration the Referendum 37 grant.

(3) Public bodies or sponsors shall obtain any licensing or certification required for construction or operation of the proposed facility either prior to final grant approval, if required in advance of construction, or prior to the time the facility is to begin operation, if required after the facility has been completed. [Statutory Authority: RCW 43.99C.045. 80-09-020 (Order 1520), § 275-150-090, filed 7/9/80.]

Chapter 275-216 WAC

STATE INSTITUTIONS OTHER THAN ADULT CORRECTIONAL INSTITUTIONS—TRIAL VISIT TO COMMUNITY—RESIDENT NEEDING PUBLIC ASSISTANCE

WAC 275-216-010 Trial visits—Definitions.
WAC 275-216-020 Trial visits—Client needing public assistance—Institution's responsibility.

WAC 275-216-010 Trial visits—Definitions. (1) "Trial visit" means a time-limited leave granted by a state institution other than an adult correctional institution to enable a client to visit in the community.

(2) "Time-limited" means a minimum of 10 calendar days and a maximum of 30 calendar days of unbroken leave, unless a re-evaluation is done.

(3) "Client" means an individual who receives any service from the agency.

(4) "Treatment team" means those persons, designated by the superintendent, responsible for providing an orderly and efficient process of making initial decisions for clients to receive a trial visit.

(5) "Administrative and disability assistance review committee" means those persons designated by the superintendent, responsible for planning, organizing, coordinating and approving trial visits.

(6) "Visitor" means a person who will not be in the home for more than 30 consecutive days. (For trial visit public assistance grant purposes only.)

(7) "Counting days" means the number of consecutive calendar days, beginning with the day of leave and terminating one day prior to the last day of leave. [Order 874, § 275–216–010, filed 11/16/73.]

WAC 275-216-020 Trial visits—Client needing public assistance—Institution's responsibility. (1) Each institution superintendent shall utilize a treatment team to develop a trial visit for a client when this treatment is considered appropriate. The treatment team shall refer all cases to the administrative and disability assistance committee.
(2) Each institution superintendent shall establish an administrative and disability assistance review committee designed to plan, organize, coordinate and approve trial visits for clients in need of public assistance.

(a) The institution superintendent or his designee shall serve as chairman of the committee.

(b) This committee shall serve as the decision making body on all cases referred from the treatment team for trial visits.

(c) This committee shall establish and maintain procedures for preparing information needed by the local office to determine eligibility for public assistance.

(d) This committee will have the responsibility of planning for all extensions of trial visits and shall notify the local office at least five working days prior to the extension date. [Order 874, § 275–216–020, filed 11/16/73.]