

Title 275 WAC

SOCIAL AND HEALTH SERVICES, DEPARTMENT OF (INSTITUTIONS)

Chapters

275-16	Liability for costs of care and hospitalization of the mentally ill.	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 Repealed by Order 1072, filed 12/5/75.
275-19	Alcohol and drug 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.	275-12-015	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 Repealed by Order 972, filed 9/26/74.
275-26	Developmentally disabled community training program.	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 Repealed by Order 810, filed 7/6/73.
275-27	Division of developmental disabilities services rules.	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 Repealed by Order 1072, filed 12/5/75.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.
275-31	Division of developmental disabilities program option rules.	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 Repealed by Order 810, filed 7/6/73.
275-33	Transfer of juvenile offenders to the department of corrections.	275-12-026	Plan—Submission. [Order 810, § 275-12-026, filed 7/6/73.] Repealed by Order 1072, filed 12/5/75.
275-35	Consolidated juvenile services programs.	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 Repealed by Order 1072, filed 12/5/75.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.
275-36	Group homes for the mentally and physically handicapped.	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, § 275-12-035, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.
275-37	Division of juvenile rehabilitation—Rules, practices, and procedures.	275-12-040	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.
275-38	IMR program and reimbursement system.	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. Later promulgation, see WAC 275-12-280.
275-48	Payments to persons released from correctional institutions.	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.
275-54	Juvenile involuntary treatment.	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.
275-55	Voluntary admission—Involuntary commitment, treatment and/or evaluation of mentally ill persons.	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.
275-56	Community mental health programs.	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.
275-59	Criminally insane person committed to the care of the department of social and health services—Evaluation, placement, care and discharge.	275-12-070	Discrimination prohibited. [Order 810, § 275-12-070, filed 7/6/73; Order 68-3, § 275-12-070, filed 12/5/75.]
275-60	Workshops in institutions of the mental health division.		
275-76	Adult correctional institutions—Detainer.		
275-80	Adult correctional institutions—Visits.		
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.		
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	275-12-005	

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3/5/68; Emergency Regulation, § 275-12-070, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75. Later promulgation, see WAC 275-12-450.

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.

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.

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.

275-12-090 Intercounty 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. Later promulgation, see WAC 275-12-460.

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. Later promulgation, see WAC 275-12-330.

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.

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. Later promulgation, see WAC 275-12-320.

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.

275-12-112 Reports required by plan. [Order 810, § 275-12-112, filed 7/6/73.] Repealed by Order 1072, filed 12/5/75.

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. Later promulgation, see WAC 275-12-170.

275-12-120 Local share. [Order 810, § 275-12-120, filed 7/6/73; Order 68-3, § 275-12-120, filed 3/5/68; Emergency Regulation, § 275-12-120, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75. Later promulgation, see WAC 275-12-260.

275-12-125 Eligible costs. [Order 810, § 275-12-125, filed 7/6/73; Order 68-3, § 275-12-125, filed 3/5/68; Emergency Regulation, § 275-12-125, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75. Later promulgation, see WAC 275-12-170.

275-12-130 Expenditures and payments—Ineligible costs. [Order 68-3, § 275-12-130, filed 3/5/68; Emergency Regulation, § 275-12-130, filed 1/25/68.] Repealed by Order 810, filed 7/6/73.

275-12-135 Application review. [Order 810, § 275-12-135, filed 7/6/73; Order 68-3, § 275-12-135, filed 3/5/68; Emergency Regulation, § 275-12-135, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75.

275-12-136 Appeal procedure. [Order 810, § 275-12-136, filed 7/6/73; Order 68-3, § 275-12-136, filed 3/5/68; Emergency Regulation, § 275-12-136, filed 1/25/68.] Repealed by Order 1072, filed 12/5/75. Later promulgation, see WAC 275-12-310.

275-12-200 Appendix I—Mental health service areas. [Order 68-3 (Appendix I), filed 3/5/68.] Repealed by Order 1072, filed 12/5/75.

275-12-205 Appendix II—Mental health area priority rating schedule, Table VIII. [Order 68-3 (Appendix II),

filed 3/5/68.] Repealed by Order 1072, filed 12/5/75.

275-12-210 Purpose. [Order 1072, § 275-12-210, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-220 Definitions. [Order 1072, § 275-12-220, filed 12/5/75. Formerly WAC 275-12-005.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-230 Authorization of program. [Order 1072, § 275-12-230, filed 12/5/75. Formerly WAC 275-12-021.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-240 Eligibility for grants to counties. [Order 1072, § 275-12-240, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-250 Annual allocation of funds. [Order 1072, § 275-12-250, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-260 Local share. [Order 1072, § 275-12-260, filed 12/5/75. Formerly WAC 275-12-120.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-270 Expenditures and payments—State share—Eligible costs. [Order 1072, § 275-12-270, filed 12/5/75. Formerly WAC 275-12-115 and 275-12-125.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-280 Administrative procedures. [Order 1072, § 275-12-280, filed 12/5/75. Formerly WAC 275-12-045.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-290 Review of plans. [Order 1072, § 275-12-290, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-310 Agency appeal procedure. [Order 1072, § 275-12-310, filed 12/5/75. Formerly WAC 275-12-136.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-320 Contracts for services. [Order 1072, § 275-12-320, filed 12/5/75. Formerly WAC 275-12-105.] Repealed by Order 1142, filed 8/12/75. Later promulgation, see chapter 275-25 WAC.

275-12-330 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.

275-12-340 Review of applications for federal funds. [Order 1072, § 275-12-340, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-350 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.

275-12-400 Biennial base 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.

275-12-410 Annual plan. [Order 1072, § 275-12-410, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-12-420 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.

275-12-440 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.

275-12-450 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.
- 275-12-460 Annual plan—Intercounty 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.
- 275-12-470 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.
- 275-12-500 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.
- 275-12-510 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.
- 275-12-515 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.
- 275-12-520 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.
- 275-12-525 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.
- 275-12-530 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.
- 275-12-535 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.
- 275-12-540 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.
- 275-12-550 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.
- 275-12-560 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.
- 275-12-565 Drug consultation/education service. [Order 1072, § 275-12-565, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-575 Methadone maintenance/detoxification service. [Order 1072, § 275-12-575, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-600 Personnel. [Order 1072, § 275-12-600, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-610 Training. [Order 1072, § 275-12-610, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-620 Mental health physical facility standards. [Order 1072, § 275-12-620, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-625 Drug facility standards. [Order 1072, § 275-12-625, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-630 Client financial participation. [Order 1072, § 275-12-630, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-700 Records—Accessibility. [Order 1072, § 275-12-700, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-710 Medical records. [Order 1072, § 275-12-710, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-720 Mental health records—Content. [Order 1072, § 275-12-720, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-725 Drug treatment records—Content. [Order 1072, § 275-12-725, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-730 Records—Storage. [Order 1072, § 275-12-730, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-740 Records—Consultation/education services. [Order 1072, § 275-12-740, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-750 Records—Extraordinary occurrence. [Order 1072, § 275-12-750, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-800 Admissions—State hospitals. [Order 1072, § 275-12-800, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-12-810 Informing counties of discharge. [Order 1072, § 275-12-810, filed 12/5/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

Chapter 275-13

**ALCOHOLISM PROGRAMS—OPERATIONAL PROCEDURES—
PROCEDURES FOR FINANCIAL ASSISTANCE TO COUNTIES**

- 275-13-010 Purpose. [Order 921, § 275-13-010, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-020 Definitions. [Order 921, § 275-13-020, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-030 Annual allocation of funds. [Order 921, § 275-13-030, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-040 Authorization of program. [Order 921, § 275-13-040, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-050 Submission of plan. [Order 921, § 275-13-050, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-060 Appointment of county alcoholism administrative board. [Order 921, § 275-13-060, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-070 Responsibilities of county commissioners. [Order 921, § 275-13-070, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-080 Approval by administrative board. [Order 921, § 275-13-080, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-090 Administrative provisions. [Order 921, § 275-13-090, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-100 Records—Accessibility. [Order 921, § 275-13-100, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-13-110 Medical records. [Order 921, § 275-13-110, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

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275-13-120 Fiscal control and accounting procedures. [Order 921, § 275-13-120, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-130 Discrimination prohibited. [Order 921, § 275-13-130, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-140 Scope and quality of services. [Order 921, § 275-13-140, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-150 Annual revision. [Order 921, § 275-13-150, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-160 Intercounty cooperation. [Order 921, § 275-13-160, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-170 Supervisor of alcoholism services. [Order 921, § 275-13-170, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-180 Contracts for services. [Order 921, § 275-13-180, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-190 Intergovernmental coordination for federal funds. [Order 921, § 275-13-190, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-200 Reports required by plan. [Order 921, § 275-13-200, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-210 Expenditures and payments—State share. [Order 921, § 275-13-210, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-220 Local share. [Order 921, § 275-13-220, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-230 Eligible costs. [Order 921, § 275-13-230, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-240 Application review. [Order 921, § 275-13-240, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

275-13-250 Appeal procedure. [Order 921, § 275-13-250, filed 4/8/74.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

Chapter 275-14

CERTIFICATE OF APPROVAL TO A DRUG TREATMENT CENTER

275-14-010 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.

275-14-020 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 WAC 275-18-020.

275-14-030 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 WAC 275-18-030.

275-14-035 Renewal of certificate of approval. [Order 856, § 275-14-035, 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.

275-14-040 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.

275-14-050 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.

275-14-055 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.

275-14-060 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.

275-14-070 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.

275-14-080 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.

275-14-090 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 WAC 275-18-170.

275-14-100 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.

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

275-14-120 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.

275-14-130 Explanation of program. [Order 657, § 275-14-130, 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.

275-14-140 Medical. [Order 657, § 275-14-140, 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.

275-14-150 Drugs. [Order 657, § 275-14-150, 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.

275-14-160 Treatment of juveniles. [Order 657, § 275-14-160, 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.

275-14-170 Nondiscrimination. [Order 657, § 275-14-170, 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.

275-14-180 Nontransferability. [Order 657, § 275-14-180, 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.

275-14-190 Public funds. [Order 657, § 275-14-190, 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.

- 275-14-200 Compliance with laws. [Order 657, § 275-14-200, 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.
- 275-14-210 Severability. [Order 673, § 275-14-210, filed 4/27/72.] Repealed by 78-08-086 (Order 1322), filed 7/28/78. Statutory Authority: RCW 69.54.040. Later promulgation, see chapter 275-18 WAC.

Chapter 275-15

FACILITIES FOR TREATMENT OF ALCOHOLISM

- 275-15-010 Purpose. [Order 1193, § 275-15-010, filed 3/3/77; Order 986, § 275-15-010, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-020 Facility services. [Order 1193, § 275-15-020, filed 3/3/77; Order 986, § 275-15-020, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-030 Definitions. [Order 1193, § 275-15-030, filed 3/3/77; Order 986, § 275-15-030, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-040 Department approval and accrediting procedures. [Order 1193, § 275-15-040, filed 3/3/77; Order 986, § 275-15-040, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-050 Suspension, revocation, or restriction of approval and accreditation. [Order 1193, § 275-15-050, filed 3/3/77; Order 986, § 275-15-050, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-060 Inspections. [Order 986, § 275-15-060, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-070 Approved treatment facilities—Availability of services. [Order 986, § 275-15-070, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-080 Court commitments. [Order 986, § 275-15-080, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-100 Purpose. [Order 986, § 275-15-100, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-110 Governing body. [Order 986, § 275-15-110, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-120 Administrator. [Order 986, § 275-15-120, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-130 Personnel. [Order 986, § 275-15-130, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-140 Student practice. [Order 986, § 275-15-140, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-150 Individualized treatment plan. [Order 986, § 275-15-150, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-160 Register and treatment records. [Order 986, § 275-15-160, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-200 Detoxification service—Purpose. [Order 986, § 275-15-200, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-205 Clients. [Order 986, § 275-15-205, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-210 Required services—General. [Order 986, § 275-15-210, filed 12/16/74.] Repealed by 80-02-136 (Order

- 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-215 Required services—Domiciliary and health care needs. [Order 986, § 275-15-215, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-220 Required services—Medical screening. [Order 986, § 275-15-220, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-225 Required services—Emergency medical policies and orders. [Order 986, § 275-15-225, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-230 Required services—Provisions for medical coverage. [Order 986, § 275-15-230, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-235 Required services—Nursing. [Order 986, § 275-15-235, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-240 Required services—Counseling. [Order 986, § 275-15-240, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-245 Required services—Social and recreational activities. [Order 986, § 275-15-245, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-250 Required services—Discharge and referral. [Order 986, § 275-15-250, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-255 Transfer agreement. [Order 986, § 275-15-255, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-300 Purpose. [Order 1193, § 275-15-300, filed 3/3/77; Order 986, § 275-15-300, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-305 Clients. [Order 1193, § 275-15-305, filed 3/3/77; Order 986, § 275-15-305, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-310 Required services—General. [Order 1193, § 275-15-310, filed 3/3/77; Order 986, § 275-15-310, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-315 Required services—Domiciliary and health care needs. [Order 986, § 275-15-315, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-320 Required services—Education. [Order 986, § 275-15-320, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-325 Required services—Individual and group counseling. [Order 986, § 275-15-325, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-330 Required services—Social and recreational activities. [Order 986, § 275-15-330, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-335 Required services—General health supervision. [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.
- 275-15-340 Required services—Safety measures. [Order 986, § 275-15-340, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.
- 275-15-345 Required services—Notification regarding change in client's condition. [Order 986, § 275-15-345, filed

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12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-350 Required services—Discharge or referral. [Order 986, § 275-15-350, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-355 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.

275-15-360 Written program statement. [Order 986, § 275-15-360, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-400 Alcoholism long-term treatment service. [Order 1193, § 275-15-400, filed 3/3/77; Order 986, § 275-15-400, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-500 Alcoholism recovery house service. [Order 1193, § 275-15-500, filed 3/3/77; Order 986, § 275-15-500, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-600 Alcoholism outpatient treatment—Purpose. [Order 986, § 275-15-600, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-605 Required services. [Order 986, § 275-15-605, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-610 Facility standards. [Order 986, § 275-15-610, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-615 Administration. [Order 1193, § 275-15-615, filed 3/3/77; Order 986, § 275-15-615, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-620 Program service objectives—Staff. [Order 986, § 275-15-620, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-625 Records. [Order 986, § 275-15-625, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-630 Case management. [Order 986, § 275-15-630, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-700 Information and referral service regulations—Purpose. [Order 986, § 275-15-700, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-705 Required services. [Order 986, § 275-15-705, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-710 Community services. [Order 986, § 275-15-710, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-715 Location. [Order 986, § 275-15-715, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-800 Alcohol information school regulations—Purpose. [Order 986, § 275-15-800, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-805 Functions. [Order 986, § 275-15-805, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-810 Required instruction. [Order 986, § 275-15-810, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

275-15-815 Fees. [Order 1193, § 275-15-815, filed 3/3/77; Order 986, § 275-15-815, filed 12/16/74.] Repealed by 80-02-136 (Order 1486), filed 2/1/80. Statutory Authority: RCW 70.96A.090.

Chapter 275-17

DRUG TREATMENT PROGRAMS

275-17-010 Program established. [Order 1036, § 275-17-010, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

275-17-020 Eligible persons. [Order 1036, § 275-17-020, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

275-17-030 Priorities. [Order 1036, § 275-17-030, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

275-17-040 Conditions of admission—Documentation required. [Order 1036, § 275-17-040, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

275-17-050 Scope of program. [Order 1036, § 275-17-050, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

275-17-060 Discharge from program. [Order 1036, § 275-17-060, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

275-17-070 Notifications required. [Order 1036, § 275-17-070, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

275-17-080 Liability for costs of care. [Order 1036, § 275-17-080, filed 7/10/75.] Repealed by Order 1212, filed 5/20/77.

Chapter 275-18

STANDARDS FOR CERTIFICATION OF APPROVAL FOR DRUG TREATMENT CENTERS

275-18-010 Authority. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-010, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

275-18-020 Definitions. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-020, filed 7/28/78. Formerly chapter 275-14 WAC.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

275-18-030 Certification of approval. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-030, filed 7/28/78. Formerly WAC 275-14-030.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

275-18-040 Treatment clinical requirements. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-040, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

275-18-050 Treatment intake requirements. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-050, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

275-18-060 Medication. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-060, filed 7/28/78. Formerly chapter 248-136 WAC.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

275-18-070 Client caseload. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-070, filed 7/28/78. Formerly WAC 248-136-160.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

275-18-080 Incarcerated clients. [Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-18-080, filed 7/28/78. Formerly WAC 248-136-140.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

- 275-18-090 Discharge and follow-up. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-090, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-100 Reporting. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-100, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-110 Intervention clinical requirements. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-110, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-120 Clinical records. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-120, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-130 Availability of records for inspection and confidentiality of clinical records. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-130, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-140 Governance. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-140, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-150 Fiscal management. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-150, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-160 Program evaluation. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-160, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-170 Staffing. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-170, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-180 Availability of services. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-180, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-190 Required services provided by other agencies. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-190, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-18-200 Client rights. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-18-200, filed 7/28/78.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-24-030 Counties eligible. [Order 5, § 275-24-030, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-030, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.
- 275-24-040 Unexpended funds. [Order 5, § 275-24-040, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-040, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.
- 275-24-050 Priority of applications. [Order 5, § 275-24-050, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-050, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.
- 275-24-060 Reimbursement to eligible counties. [Order 5, § 275-24-060, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-060, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.
- 275-24-070 Form and contents of application for funds. [Order 5, § 275-24-070, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-070, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.
- 275-24-080 Payment procedure. [Order 5, § 275-24-080, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-080, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.
- 275-24-090 Appointment of advisory committee. [Order 5, § 275-24-090, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-090, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.

Chapter 275-28

COMMUNITY MENTAL RETARDATION SERVICES ACT

- 275-28-010 Definitions. [Order 6, § 275-28-010, filed 5/13/68; Emergency Regulation, § 275-28-010, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-020.
- 275-28-020 Annual allocation of funds. [Order 6, § 275-28-020, filed 5/13/68; Emergency Regulation, § 275-28-020, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-030 Allocation of funds. [Order 845, § 275-28-030, filed 8/9/73; Order 6, § 275-28-030, filed 5/13/68; Emergency Regulation, § 275-28-030, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-030.
- 275-28-040 Submission of county plan. [Order 6, § 275-28-040, filed 5/13/68; Emergency Regulation, § 275-28-040, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-050 Authorization of program by county commissioners. [Order 6, § 275-28-050, filed 5/13/68; Emergency Regulation, § 275-28-050, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-060 Appointment of community board. [Order 6, § 275-28-060, filed 5/13/68; Emergency Regulation, § 275-28-060, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-070 Responsibilities of county commissioners. [Order 6, § 275-28-070, filed 5/13/68; Emergency Regulation, § 275-28-070, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-080 Evaluation by community board. [Order 6, § 275-28-080, filed 5/13/68; Emergency Regulation, § 275-28-080, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-090 Administrative provisions of plans. [Order 6, § 275-28-090, filed 5/13/68; Emergency Regulation, § 275-28-090, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-210.
- 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.
- 275-28-110 Nature of records—Generally. [Order 6, § 275-28-110, filed 5/13/68; Emergency Regulation, § 275-

Chapter 275-24

**ADMINISTRATION AND DISTRIBUTION OF PROBATION
SUBSIDY FUNDS**

- 275-24-010 Definitions. [Order 5, § 275-24-010, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-010, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.
- 275-24-020 Program established. [Order 5, § 275-24-020, filed 4/26/68; Emergency Regulation, Order 68-4, § 275-24-020, filed 3/12/68.] Repealed by Order 1225, filed 7/25/77.

Title 275 WAC

Title 275 WAC: DSHS (Institutions)

- 28-110, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-150.
- 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 275-29-160.
- 275-28-130 Fiscal control and accounting procedures. [Order 6, § 275-28-130, filed 5/13/68; Emergency Regulation, § 275-28-130, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-240.
- 275-28-140 Discrimination prohibited. [Order 6, § 275-28-140, filed 5/13/68; Emergency Regulation, § 275-28-140, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-250.
- 275-28-150 Uniformity in personnel practices. [Order 6, § 275-28-150, filed 5/13/68; Emergency Regulation, § 275-28-150, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-160 Scope and quality of services. [Order 6, § 275-28-160, filed 5/13/68; Emergency Regulation, § 275-28-160, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-170 Annual revision of county plan. [Order 6, § 275-28-170, filed 5/13/68; Emergency Regulation, § 275-28-170, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-180 Intercounty cooperation. [Order 6, § 275-28-180, filed 5/13/68; Emergency Regulation, § 275-28-180, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-260.
- 275-28-190 Community mental retardation program coordinator or administrator. [Order 6, § 275-28-190, filed 5/13/68; Emergency Regulation, § 275-28-190, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-200 Contracts for services. [Order 6, § 275-28-200, filed 5/13/68; Emergency Regulation, § 275-28-200, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-120.
- 275-28-210 State-wide cooperation. [Order 6, § 275-28-210, filed 5/13/68; Emergency Regulation, § 275-28-210, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-140.
- 275-28-220 Expenditures and payments—Eligible costs. [Order 6, § 275-28-220, filed 5/13/68; Emergency Regulation, § 275-28-220, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-050.
- 275-28-230 Expenditures and payments—Ineligible costs. [Order 6, § 275-28-230, filed 5/13/68; Emergency Regulation, § 275-28-230, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-240 Application review. [Order 6, § 275-28-240, filed 5/13/68; Emergency Regulation, § 275-28-240, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75.
- 275-28-250 Appeal procedure. [Order 6, § 275-28-250, filed 5/13/68; Emergency Regulation, § 275-28-250, filed 3/19/68.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-29-100.

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 275-28-010.] 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 275-28-030.] 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.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-050 Expenditures and payments to counties—Eligible costs. [Order 1070, § 275-29-050, filed 11/21/75. Formerly WAC 275-28-220.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-060 Expenditures and payments to day training centers, group training homes, and to the parent or guardian of a retarded or developmentally disabled person. [Order 1070, § 275-29-060, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-070 Certification and licensing of developmental disabilities agencies. [Order 1070, § 275-29-070, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-080 Certification—Developmental centers and group training homes. [Order 1070, § 275-29-080, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-090 Sanctions. [Order 1070, § 275-29-090, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-100 Appeal procedure. [Order 1070, § 275-29-100, filed 11/21/75. Formerly WAC 275-28-250.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-110 Authorization of program by county commissioners. [Order 1070, § 275-29-110, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-120 Contracts for services. [Order 1070, § 275-29-120, filed 11/21/75. Formerly WAC 275-28-200 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-130 Community developmental disabilities and mental retardation program coordinators or administrators. [Order 1070, § 275-29-130, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-140 Statewide cooperation. [Order 1070, § 275-29-140, filed 11/21/75. Formerly WAC 275-28-210 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-150 Nature of records—Generally. [Order 1070, § 275-29-150, filed 11/21/75. Formerly WAC 275-28-110 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-160 Confidential and privileged information. [Order 1070, § 275-29-160, filed 11/21/75. Formerly WAC 275-28-120 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-170 Liability. [Order 1070, § 275-29-170, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-200 Submission of county plan. [Order 1070, § 275-29-200, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-210 Administrative provisions of plans. [Order 1070, § 275-29-210, filed 11/21/75. Formerly WAC 275-28-090 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-220 Plan—Community board requirements. [Order 1070, § 275-29-220, filed 11/21/75.] Repealed by Order

- 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-230 Reports required by plan. [Order 1070, § 275-29-230, filed 11/21/75. Formerly WAC 275-28-100 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-240 Plan—Fiscal control and accounting procedures. [Order 1070, § 275-29-240, filed 11/21/75. Formerly WAC 275-28-130 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-250 Plan—Discrimination prohibited. [Order 1070, § 275-29-250, filed 11/21/75. Formerly WAC 275-28-140 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-260 Plan—Intercounty cooperation. [Order 1070, § 275-29-260, filed 11/21/75. Formerly WAC 275-28-180 (part).] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-270 Plan—Scope and quality of services. [Order 1070, § 275-29-270, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-280 Five-year plan. [Order 1070, § 275-29-280, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-290 Review of the annual county plan and its revisions by the community board. [Order 1070, § 275-29-290, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-300 Community organization. [Order 1070, § 275-29-300, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-310 Community program services. [Order 1070, § 275-29-310, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-320 Transportation services. [Order 1070, § 275-29-320, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-330 Information and referral services. [Order 1070, § 275-29-330, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-340 Treatment services. [Order 1070, § 275-29-340, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-350 Diagnostic and evaluation services. [Order 1070, § 275-29-350, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-360 Recreation service. [Order 1070, § 275-29-360, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-370 Family counseling services. [Order 1070, § 275-29-370, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-380 Vocational training and education programs. [Order 1070, § 275-29-380, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-390 Home training and care service. [Order 1070, § 275-29-390, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-400 Medical and dental service. [Order 1070, § 275-29-400, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-410 Consultant services. [Order 1070, § 275-29-410, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-420 Psychiatric services. [Order 1070, § 275-29-420, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-500 Agency administration. [Order 1070, § 275-29-500, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-510 Agency governing board. [Order 1070, § 275-29-510, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-520 Agency director. [Order 1070, § 275-29-520, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-530 Financial management. [Order 1070, § 275-29-530, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-540 Agency planning for program. [Order 1070, § 275-29-540, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-550 Individual support system. [Order 1070, § 275-29-550, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-560 Components of all services. [Order 1070, § 275-29-560, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-570 Staff. [Order 1070, § 275-29-570, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-580 Program measurement. [Order 1070, § 275-29-580, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-590 Population movement. [Order 1070, § 275-29-590, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-600 Facilities. [Order 1070, § 275-29-600, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.
- 275-29-610 Program evaluation. [Order 1070, § 275-29-610, filed 11/21/75.] Repealed by Order 1142, filed 8/12/76. Later promulgation, see chapter 275-25 WAC.

Chapter 275-32

SPECIAL SUPERVISION—COUNTY JUVENILE PROBATION PROGRAMS

- 275-32-005 Authority. [Order 1209, § 275-32-050 (codified as WAC 275-32-005), filed 5/4/77.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-010 Definitions. [Order 1209, § 275-32-010, filed 5/4/77; Order 861, § 275-32-010, filed 10/11/73; Order 795, § 275-32-010, filed 4/26/73; Order 11, § 275-32-010, filed 3/31/70; Order 7, § 275-32-010, filed 9/12/69.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-015 County's resolution of intention to participate. [Order 1209, § 275-32-015, filed 5/4/77. Formerly WAC 275-32-110.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-020 Program established. [Order 795, § 275-32-020, filed 4/26/73; Order 7, § 275-32-020, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-025 Application for participation. [Order 1209, § 275-32-025, filed 5/4/77. Formerly WAC 275-32-100.]

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Title 275 WAC: DSHS (Institutions)

- Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-030 Counties eligible. [Order 861, § 275-32-030, filed 10/11/73; Order 795, § 275-32-030, filed 4/26/73; Order 7, § 275-32-030, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-035 Announcement of program approval. [Order 1209, § 275-32-035, filed 5/4/77. Formerly WAC 275-32-130.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-040 Reimbursement. [Order 861, § 275-32-040, filed 10/11/73; Order 795, § 275-32-040, filed 4/26/73; Order 7, § 275-32-040, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-045 Modification of approved program plan. [Order 1209, § 275-32-045, filed 5/4/77. Formerly WAC 275-32-160.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-050 Limitations on use of funds. [Order 795, § 275-32-050, filed 4/26/73; Order 7, § 275-32-050, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-075.
- 275-32-060 Eligible probationers for special supervision. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-065 Assignment of funds. [Order 1209, § 275-32-065, filed 5/4/77. Formerly WAC 275-32-120.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-070 Personnel standards for special supervision programs. [Order 795, § 275-32-070, filed 4/26/73; Order 7, § 275-32-070, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-075 Restrictions on spending. [Order 1209, § 275-32-075, filed 5/4/77. Formerly WAC 275-32-050.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-080 Workloads for special supervision program. [Order 1209, § 275-32-080, filed 5/4/77; Order 795, § 275-32-080, filed 4/26/73; Order 7, § 275-32-080, filed 9/12/69.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-085 Fiscal accountability and departmental audit. [Order 1209, § 275-32-085, filed 5/4/77. Formerly WAC 275-32-190.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-090 Supporting services. [Order 795, § 275-32-090, filed 4/26/73; Order 7, § 275-32-090, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-095 Program review and monitoring. [Order 1209, § 275-32-095, filed 5/4/77. Formerly WAC 275-32-200.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-100 Application for establishing special supervision programs. [Order 795, § 275-32-100, filed 4/26/73; Order 7, § 275-32-100, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-025.
- 275-32-105 Exceptions to rules. [Order 1209, § 275-32-105, filed 5/4/77.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-110 Resolution of intention. [Order 795, § 275-32-110, filed 4/26/73; Order 7, § 275-32-110, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-015.
- 275-32-115 Treatment plan. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-115, filed 2/17/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-120 Application for funds. [Order 795, § 275-32-120, filed 4/26/73; Order 7, § 275-32-120, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-065.
- 275-32-125 Receipts that exceed program costs. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-125, filed 2/17/78.] Repealed by 79-06-033 (Order 1401), filed 5/16/79. Statutory Authority: RCW 13.06.030.
- 275-32-130 Notification of approval of plan. [Order 795, § 275-32-130, filed 4/26/73; Order 7, § 275-32-130, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-035.
- 275-32-135 Standard cost and workload standards. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-135, filed 2/17/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-140 Procedures in applying for reimbursement. [Order 795, § 275-32-140, filed 4/26/73; Order 7, § 275-32-140, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-145 Earning of credits. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-145, filed 2/17/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-150 Alternate plans. [Order 861, § 275-32-150, filed 10/11/73; Order 795, § 275-32-150, filed 4/26/73; Order 7, § 275-32-150, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-155 County planning process. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-155, filed 2/17/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-160 Revision of plans. [Order 795, § 275-32-160, filed 4/26/73; Order 7, § 275-32-160, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-045.
- 275-32-165 County's cooperation with other agencies. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-165, filed 2/17/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-170 Salaries and wages. [Order 795, § 275-32-170, filed 4/26/73; Order 7, § 275-32-170, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-175 Alternate plans. [Statutory Authority: RCW 13.06.030. 78-03-030 (Order 1269), § 275-32-175, filed 2/17/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-32-180 Operating expenses and equipment. [Order 795, § 275-32-180, filed 4/26/73; Order 7, § 275-32-180, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77.
- 275-32-190 Auditing of records. [Order 795, § 275-32-190, filed 4/26/73; Order 7, § 275-32-190, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-085.
- 275-32-200 Inspections. [Order 795, § 275-32-200, filed 4/26/73; Order 7, § 275-32-200, filed 9/12/69.] Repealed by Order 1209, filed 5/4/77. Later promulgation, see WAC 275-32-095.

Chapter 275-34

DIVERSION

- 275-34-010 Definitions. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-020 Planning—Committees—Creation of plans. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-030 Planning—Submission of plans—Time limits. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-040 State funding. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-050 Program plan—Required elements. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-060 Diversion unit—Specifications in plans. [Statutory Authority: Chapter 13.40 RCW. 80-15-081 (Order 1559), § 275-34-060, filed 10/20/80, effective 1/1/81. Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-060, filed 4/13/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-070 Approval of plan by secretary. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-080 Modification of approved plan. [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.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-090 Separate administration—Exceptions. [Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-090, filed 4/13/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-100 Exceptions to rules. [Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-100, filed 4/13/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.

- 275-34-110 Program review and monitoring. [Statutory Authority: 1977 ex. sess. c 291. 78-05-020 (Order 1288), § 275-34-110, filed 4/13/78.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-120 Refusal of services. [Statutory Authority: Chapter 13.40 RCW. 80-15-081 (Order 1559), § 275-34-120, filed 10/20/80, effective 1/1/81.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.
- 275-34-140 Substantial violation. [Statutory Authority: Chapter 13.40 RCW. 80-15-081 (Order 1559), § 275-34-140, filed 10/20/80, effective 1/1/81.] Repealed by 85-09-003 (Order 2221), filed 4/4/85. Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040.

Chapter 275-39

MEDICALLY FRAGILE CHILDREN'S FACILITIES

- 275-39-005 Authority. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-005, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-010 Facility certification. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-010, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-015 Purpose. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-015, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-020 Eligibility for services of a MFCF. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-020, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-025 Definitions. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-025, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-030 Medically fragile child. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-030, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-035 Intensive support medical services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-035, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-040 Philosophy, objectives, and goals. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-040, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-045 Policy and procedure manuals. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-045, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-050 Governing body. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-050, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-055 Chief executive officer. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-055, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-056 Qualified mental retardation professional. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-056, filed 10/21/80.] Repealed by

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Title 275 WAC: DSHS (Institutions)

82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-060 Organization chart. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-060, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-065 Management audit plan. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-065, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-070 Research statement. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-070, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-075 Written policies. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-075, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-080 Licensure and professional standards. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-080, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-085 Suspension and dismissal. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-085, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-090 Sufficient staffing and resident work. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-090, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-100 Staff training program. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-100, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-105 Staff treatment of residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-105, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-110 Admission criteria and evaluations. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-110, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-115 Availability of rules and procedures. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-115, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-120 Number of residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-120, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-125 Review of preadmission evaluation. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-125, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-130 Quarterly review of resident's status. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-130, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-135 Record and reports of reviews. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-135, filed 10/21/80.] Repealed by 82-23-058

(Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-140 Release from the MFCC. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-140, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-145 Transfer to another facility. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-145, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-150 Emergencies or death of a resident. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-150, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-155 Resident's civil rights. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-155, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-160 Residents' bill of rights. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-160, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-165 Delegation of rights and responsibilities. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-165, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-170 Resident finances. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-170, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-175 Staff-resident communications. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-175, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-180 Communication with residents and parents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-180, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-185 Dental services—Diagnostic services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-185, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-190 Dental services—Treatment. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-190, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-195 Dental services—Oral health education and training. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-195, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-200 Dental services—Records. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-200, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-205 Dental services—Formal arrangements. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-205, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-210 Dental services—Staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-210, filed 10/21/80.] Repealed by 82-23-058 (Order

	1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-280	Medical services—Preventive health services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-280, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-211	Educational services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-211, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-285	Medical services—Physician (qualified consultant). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-285, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-215	Food and nutrition services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-215, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-290	Nursing services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-290, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-220	Food and nutrition services—Diet requirements. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-220, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-295	Nursing services—Inservice training. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-295, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-225	Food and nutrition services—Meal service. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-225, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-300	Nursing services—Staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-300, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-230	Food and nutrition services—Menus. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-230, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-305	Nursing services—Supervision of health services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-305, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-235	Food and nutrition services—Food storage. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-235, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-310	Nursing services—Director of nursing services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-310, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-240	Food and nutrition services—Work areas. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-240, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-315	Nursing services—A staff nurse. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-315, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-245	Food and nutrition services—Dining areas and service. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-245, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-320	Pharmacy services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-320, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-250	Food and nutrition services—Training of residents and direct-care staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-250, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-325	Pharmacy services—Pharmacist. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-325, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-255	Food and nutrition services—Staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-255, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-330	Pharmacy services—Drugs and medications. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-330, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-260	Food and nutrition services—Dietitian (qualified consultant). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-260, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-335	Pharmacy services—Drug storage. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-335, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-265	Medical services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-265, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-340	Physical and occupational therapy services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-340, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-270	Medical services—Goals and evaluations. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-270, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-345	Physical and occupational therapy services—Records and evaluations. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-345, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
275-39-275	Medical services—Arrangements with outside resources. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-275, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.	275-39-350	Physical and occupational therapy services—Staff and facilities. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-350, filed 10/21/80.] Repealed by 82-23-058 (Order 1906),

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filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-355 Physical and occupational therapy services—Occupational therapist (qualified consultant). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-355, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-360 Physical and occupational therapy services—Occupational therapy assistant. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-360, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-365 Physical and occupational therapy services—Physical therapist (qualified consultant). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-365, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-370 Physical and occupational therapy services—Physical therapist assistant. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-370, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-375 Psychological services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-375, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-380 Psychological services—Psychologist. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-380, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-385 Recreational services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-385, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-390 Recreational services—Records. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-390, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-395 Recreational services—Staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-395, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-400 Residential services—Responsibilities of living unit staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-400, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-405 Residential services—Resident evaluation and program plans. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-405, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-410 Residential services—Resident activities. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-410, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-415 Residential services—Personal possessions. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-415, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-420 Residential services—Control and discipline of residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-420, filed 10/21/80.] Repealed by 82-23-058 (Order 1906),

filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-425 Residential services—Physical restraint of residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-425, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-430 Residential services—Mechanical devices used for physical restraint. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-430, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-435 Residential services—Chemical restraint of residents. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-435, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-440 Residential services—Behavior modification programs. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-440, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-445 Residential services—Resident clothing. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-445, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-450 Residential services—Health, hygiene, grooming and toilet training. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-450, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-455 Residential services—Grouping and organization of living units. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-455, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-460 Residential services—Resident living staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-460, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-465 Residential services—Resident living areas. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-465, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-470 Residential services—Resident bedrooms—Space and occupancy. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-470, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-475 Residential services—Resident bedrooms—Furniture and bedding. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-475, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-480 Residential services—Storage space in living units. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-480, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-485 Residential services—Resident bathrooms. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-485, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

275-39-490 Residential services—Heating and ventilation in living units. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-490, filed 10/21/80.]

<p>275-39-495</p> <p>275-39-500</p> <p>275-39-505</p> <p>275-39-510</p> <p>275-39-515</p> <p>275-39-520</p> <p>275-39-525</p> <p>275-39-530</p> <p>275-39-535</p> <p>275-39-545</p> <p>275-39-550</p> <p>275-39-555</p> <p>275-39-560</p>	<p>Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Residential services—Floors in living units. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-495, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Residential services—Emergency lighting. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-500, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Respiratory therapy services—Respiratory therapist (qualified consultant). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-505, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Training and habilitation services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-510, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Training and habilitation services—Staff. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-515, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Training and habilitation services—Needed services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-520, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Training and habilitation services—Agreements with outside resources. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-525, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Training and habilitation services—Quality standards for outside resources. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-530, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Training and habilitation services—Planning and evaluation. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-535, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Speech pathology and audiology services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-545, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Speech pathology and audiology services—Evaluations and assessments. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-550, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Speech pathology and audiology services—Staff and facilities. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-555, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Speech pathology and audiology services—Speech pathologist or audiologist (qualified consultant). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-560, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p>	<p>275-39-565</p> <p>275-39-570</p> <p>275-39-575</p> <p>275-39-580</p> <p>275-39-585</p> <p>275-39-590</p> <p>275-39-595</p> <p>275-39-600</p> <p>275-39-605</p> <p>275-39-610</p> <p>275-39-615</p> <p>275-39-620</p> <p>275-39-625</p> <p>275-39-630</p> <p>275-39-635</p>	<p>Social services—Required services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-565, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Social services—Social workers. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-570, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Social services—Social worker (qualified consultant). [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-575, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Records—Maintenance of resident records. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-580, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Records—Admission records. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-585, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Records—Record entries during residence. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-590, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Records—Confidentiality. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-595, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Records—Central record service. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-600, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Records—Staff and facilities. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-605, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Facility support services—Administrative support services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-610, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Facility support services—Communication system. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-615, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Facility support services—Engineering and maintenance. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-620, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Facility support services—Laundry services. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-625, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Facility requirements—Equipment. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-630, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.</p> <p>Safety and sanitation—Emergency plan and procedures. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-635, filed 10/21/80.] Repealed by 82-23-058 (Order 1906),</p>
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- filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-640 Safety and sanitation—Evacuation drills. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-640, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-645 Safety and sanitation—Fire protection. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-645, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-655 Safety and sanitation—Fire protection waivers. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-655, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-660 Safety and sanitation—Paint. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-660, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-665 Safety and sanitation—Building accessibility and use. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-665, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-670 Safety and sanitation—Sanitation records and reports. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-670, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.
- 275-39-675 Safety and sanitation—Health and safety laws. [Statutory Authority: RCW 74.26.040. 80-15-083 (Order 1557), § 275-39-675, filed 10/21/80.] Repealed by 82-23-058 (Order 1906), filed 11/17/82. Statutory Authority: RCW 74.26.040.

Chapter 275-40**ANNUAL INSPECTION OF ALL JAILS AND DETENTION FACILITIES BY THE DIRECTOR OF INSTITUTIONS OR HIS DESIGNEE**

- 275-40-010 Annual inspection. [Order 9, § 275-40-010, filed 12/5/69.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-40-020 Reports. [Order 9, § 275-40-020, filed 12/5/69.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-40-030 Special subjects of inspection and reports. [Order 9, § 275-40-030, filed 12/5/69.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-40-040 Inspection results and ratings. [Order 9, § 275-40-040, filed 12/5/69.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-40-050 Training programs. [Order 9, § 275-40-050, filed 12/5/69.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-40-060 Annual report to legislature. [Order 9, § 275-40-060, filed 12/5/69.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-40-070 Review and revision. [Order 9, § 275-40-070, filed 12/5/69.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.

Chapter 275-44**FURLOUGHS FOR PERSONS CONFINED IN STATE CORRECTIONAL INSTITUTIONS**

- 275-44-005, 275-44-025, 275-44-030, 275-44-040, 275-44-050, 275-44-060, 275-44-070, 275-44-080, 275-44-090, 275-44-100, 275-44-110, 275-44-120, 275-44-125, 275-44-130. [Order 743, filed 11/30/72.] Repealed

by Order 805, filed 5/31/73. Later promulgation, see chapter 275-93 WAC.

- 275-44-010 Person confined in state correctional institution—Furlough. [Order 599, § 275-44-010, filed 9/8/71.] Repealed by Order 743, filed 11/30/72.
- 275-44-015 Person confined in state correctional institution—Application for furlough. [Order 599, § 275-44-015, filed 9/8/71.] Repealed by Order 743, filed 11/30/72.
- 275-44-020 Person confined in state correctional institution—Conditions imposed when granting furlough. [Order 599, § 275-44-020, filed 9/8/71.] Repealed by Order 743, filed 11/30/72. Later promulgation, see chapter 275-93 WAC.

Chapter 275-52**INSTITUTIONAL INDUSTRIES COMMISSION HEARINGS—SALE OF PRODUCTS**

- 275-52-010 Hearings. [Order 756, § 275-52-010, filed 12/14/72.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-52-015 Subject of hearings. [Order 756, § 275-52-015, filed 12/14/72.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.
- 275-52-020 Sale of produce. [Order 740, § 275-52-020, filed 11/22/72.] Repealed by 82-04-023 (Order 82-3), filed 1/26/82. Statutory Authority: RCW 42.17.250.

Chapter 275-53**SALE OF ITEMS PRODUCED BY VOCATIONAL TRAINING STUDENTS IN CORRECTIONAL INSTITUTIONS**

- 275-53-050 Sale of items produced by vocational training students. [Order 769, § 275-53-050, filed 1/26/73.] Repealed by 86-02-052 (Order 85-12), filed 12/31/85. Statutory Authority: RCW 72.01.090. Later promulgation, see chapter 137-20 WAC.
- 275-53-055 Requirements of sale and notice. [Order 769, § 275-53-055, filed 1/26/73.] Repealed by 86-02-052 (Order 85-12), filed 12/31/85. Statutory Authority: RCW 72.01.090.
- 275-53-060 Display. [Order 769, § 275-53-060, filed 1/26/73.] Repealed by 86-02-052 (Order 85-12), filed 12/31/85. Statutory Authority: RCW 72.01.090.
- 275-53-065 Proceeds of sale. [Order 769, § 275-53-065, filed 1/26/73.] Repealed by 86-02-052 (Order 85-12), filed 12/31/85. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-20-015.

Chapter 275-82**ADULT CORRECTIONAL INSTITUTIONS—CLASSIFICATION OF RESIDENTS—ADMINISTRATIVE SEGREGATION**

- 275-82-005 Definitions. [Order 1217, § 275-82-005, filed 6/15/77; Order 874, § 275-82-005, filed 11/16/73.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090. Later promulgation, see chapter 137-32 WAC.
- 275-82-010 Administrative segregation. [Order 1217, § 275-82-010, filed 6/15/77; Order 874, § 275-82-010, filed 11/16/73.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.
- 275-82-015 Notice of meeting. [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.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.
- 275-82-020 Representation of resident. [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.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.

- 275-82-025 Conduct of meeting. [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.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.
- 275-82-030 Decision. [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.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.
- 275-82-035 Segregation status—Rights retained. [Order 1217, § 275-82-035, filed 6/15/77; Order 874, § 275-82-035, filed 11/16/73.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.
- 275-82-040 Appeal. [Order 1217, § 275-82-040, filed 6/15/77; Order 874, § 275-82-040, filed 11/16/73.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.
- 275-82-045 Review of administrative segregation status. [Order 1217, § 275-82-045, filed 6/15/77; Order 874, § 275-82-045, filed 11/16/73.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.
- 275-82-050 Transfer of resident. [Order 874, § 275-82-050, filed 11/16/73.] Repealed by 85-01-059 (Order 84-15), filed 12/17/84. Statutory Authority: RCW 72.01.090.

Chapter 275-85

**RESIDENT OF ADULT CORRECTIONAL INSTITUTION
ESCORTED LEAVE OF ABSENCE**

- 275-85-005 Escorted leave of absence—Definitions. [Order 796, § 275-85-005, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-010.
- 275-85-010 Escorted leave of absence—Purpose. [Order 796, § 275-85-010, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-005.
- 275-85-015 Escorted leave of absence—Reasons allowed. [Order 878, § 275-85-015, filed 11/29/73; Order 796, § 275-85-015, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-015.
- 275-85-020 Escorted leave of absence—Conditions. [Order 796, § 275-85-020, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-020.
- 275-85-025 Escorted leave of absence—Application. [Order 796, § 275-85-025, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-025.
- 275-85-030 Escorted leave of absence—Approval. [Order 796, § 275-85-030, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-030.
- 275-85-035 Escorted leave of absence—Escort. [Order 796, § 275-85-035, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-035.
- 275-85-040 Escorted leave of absence—Expenses. [Order 796, § 275-85-040, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-040.

- 275-85-045 Escorted leave of absence—Expenses—Paid by resident. [Order 796, § 275-85-045, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-045.
- 275-85-050 Escorted leave of absence—Expenses—Paid by state. [Order 796, § 275-85-050, filed 5/10/73.] Repealed by 85-07-042 (Order 85-07), filed 3/19/85. Statutory Authority: RCW 72.01.380. Later promulgation, see WAC 137-52-050.

Chapter 275-87

**ADULT CORRECTIONAL INSTITUTIONS—RESIDENTS'
PROPERTY**

- 275-87-005 Contraband—Definitions. [Order 845, § 275-87-005, filed 8/9/73.] Repealed by 83-20-035 (Order 83-08), filed 9/27/83. Statutory Authority: 72.08.103, 72.09.050, 72.13.080 and 72.15.040. Later promulgation, see WAC 137-36-020.
- 275-87-010 Confiscation. [Order 845, § 275-87-010, filed 8/9/73.] Repealed by 83-20-035 (Order 83-08), filed 9/27/83. Statutory Authority: 72.08.103, 72.09.050, 72.13.080 and 72.15.040.
- 275-87-015 Disposition of illegal items. [Order 845, § 275-87-015, filed 8/9/73.] Repealed by 83-20-035 (Order 83-08), filed 9/27/83. Statutory Authority: 72.08.103, 72.09.050, 72.13.080 and 72.15.040.
- 275-87-020 Disposition of other items. [Order 845, § 275-87-020, filed 8/9/73.] Repealed by 83-20-035 (Order 83-08), filed 9/27/83. Statutory Authority: 72.08.103, 72.09.050, 72.13.080 and 72.15.040. Later promulgation, see WAC 137-36-040.
- 275-87-025 Records. [Order 845, § 275-87-025, filed 8/9/73.] Repealed by 83-20-035 (Order 83-08), filed 9/27/83. Statutory Authority: 72.08.103, 72.09.050, 72.13.080 and 72.15.040.

Chapter 275-88

ADULT CORRECTIONAL INSTITUTIONS—DISCIPLINE

- 275-88-005 Purpose. [Order 849, § 275-88-005, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-005.
- 275-88-006 Definitions. [Order 1185, § 275-88-006, filed 2/3/77.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-006.
- 275-88-010 Supplementary rules. [Order 1185, § 275-88-010, filed 2/3/77; Order 849, § 275-88-010, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-010.
- 275-88-015 Notification. [Order 1185, § 275-88-015, filed 2/3/77; Order 849, § 275-88-015, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-015.
- 275-88-020 Definition of misconduct. [Order 1185, § 275-88-020, filed 2/3/77; Order 849, § 275-88-020, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-020.
- 275-88-025 General infractions. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-025.
- 275-88-030 Serious infractions. [Order 1185, § 275-88-030, filed 2/3/77; Order 1060, § 275-88-030, filed 10/8/75;

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- Order 1031, § 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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-030.
- 275-88-035 Reporting to law enforcement authorities. [Order 1185, § 275-88-035, filed 2/3/77; Order 849, § 275-88-035, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-035.
- 275-88-040 Infractions—On-site adjustment. [Order 1185, § 275-88-040, filed 2/3/77; Order 849, § 275-88-040, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-040.
- 275-88-045 Infractions—Report on. [Order 849, § 275-88-045, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-045.
- 275-88-050 General infraction report—Action on report. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-050.
- 275-88-055 Appeal to hearing committee. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090.
- 275-88-060 Appeal to hearing committee—Composition of 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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090.
- 275-88-065 Appeal to hearing committee—Disqualification or absence of member. [Order 1185, § 275-88-065, filed 2/3/77; Order 849, § 275-88-065, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090.
- 275-88-067 Appeal to hearing committee—Other participants. [Order 849, § 275-88-067, filed 8/23/73.] Repealed by Order 1185, filed 2/3/77.
- 275-88-070 Appeal to hearing committee—Jurisdiction. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090.
- 275-88-075 Prehearing procedures—Rights of residents. [Order 1185, § 275-88-075, filed 2/3/77; Order 849, § 275-88-075, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-075.
- 275-88-080 Prehearing procedures—Restriction of resident. [Order 1185, § 275-88-080, filed 2/3/77; Order 878, § 275-88-080, filed 11/29/73; Order 849, § 275-88-080, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-080.
- 275-88-085 Hearing committee—Preparation for hearing. [Order 1185, § 275-88-085, filed 2/3/77; Order 878, § 275-88-085, filed 11/29/73; Order 849, § 275-88-085, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-085.
- 275-88-090 Conduct of hearing. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-090.
- 275-88-093 Decision of hearing committee. [Order 1185, § 275-88-093, filed 2/3/77; Order 849, § 275-88-093, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-093.
- 275-88-095 Finding of no infraction. [Order 849, § 275-88-095, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-095.
- 275-88-097 Lay advisors. [Order 1185, § 275-88-097, filed 2/3/77; Order 972, § 275-88-097, filed 9/26/74; Order 849, § 275-88-097, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-097.
- 275-88-100 Sanctions—Authority to impose. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-100.
- 275-88-105 Sanctions—Types. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-105.
- 275-88-110 Sanctions—Limitations. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-110.
- 275-88-115 Appeal to superintendent. [Order 1185, § 275-88-115, filed 2/3/77; Order 849, § 275-88-115, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-115.
- 275-88-120 Reports to the parole board. [Order 849, § 275-88-120, filed 8/23/73.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-120.
- 275-88-130 Time limitations. [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.] Repealed by 84-17-058 (Order 84-13), filed 8/14/84, effective 10/10/84. Statutory Authority: RCW 72.01.090. Later promulgation, see WAC 137-28-130.

Chapter 275-91**ADULT CORRECTIONAL INSTITUTIONS—MEDICAL CARE—HEALTH CARE**

- 275-91-010 Health care—Policy. [Order 827, § 275-91-010, filed 7/26/73.] Repealed by Order 1252, filed 11/21/77.
- 275-91-011 Medical/dental care—General policy. [Order 1252, § 275-91-011, filed 11/21/77.] Repealed by 84-16-066 (Order 84-11), filed 7/30/84, effective 9/4/84.

	Statutory Authority: RCW 72.01.050, 72.01.090 and 72.09.050. Later promulgation, see WAC 137-91-011.	275-92-060	Work-training release—Plan development. [Order 857, § 275-92-060, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-020	Health care—Scope of services. [Order 827, § 275-91-020, filed 7/26/73.] Repealed by Order 1252, filed 11/21/77.	275-92-065	Work-training release—Plan restrictions. [Order 857, § 275-92-065, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-021	Medical/dental services. [Order 1252, § 275-91-021, filed 11/21/77.] Repealed by 84-16-066 (Order 84-11), filed 7/30/84, effective 9/4/84. Statutory Authority: RCW 72.01.050, 72.01.090 and 72.09.050. Later promulgation, see WAC 137-91-021.	275-92-070	Work-training release—Plan denial. [Order 857, § 275-92-070, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-030	Health care—Program. [Order 827, § 275-91-030, filed 7/26/73.] Repealed by Order 1252, filed 11/21/77.	275-92-075	Work-training release—Plan imposing additional conditions. [Order 857, § 275-92-075, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-031	Right to refuse treatment. [Order 1252, § 275-91-031, filed 11/21/77.] Repealed by 84-16-066 (Order 84-11), filed 7/30/84, effective 9/4/84. Statutory Authority: RCW 72.01.050, 72.01.090 and 72.09.050.	275-92-080	Transfer to supervised facility. [Order 857, § 275-92-080, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-040	Health care—Records. [Order 827, § 275-91-040, filed 7/26/73.] Repealed by Order 1252, filed 11/21/77.	275-92-100	Supervised facility. [Order 857, § 275-92-100, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-041	Involuntary treatment—Appeals. [Order 1252, § 275-91-041, filed 11/21/77.] Repealed by 84-16-066 (Order 84-11), filed 7/30/84, effective 9/4/84. Statutory Authority: RCW 72.01.050, 72.01.090 and 72.09.050.	275-92-105	Supervised facility—Provision of supervision. [Order 857, § 275-92-105, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-050	Use of allied health professionals. [Order 1252, § 275-91-050, filed 11/21/77.] Repealed by 84-16-066 (Order 84-11), filed 7/30/84, effective 9/4/84. Statutory Authority: RCW 72.01.050, 72.01.090 and 72.09.050. Later promulgation, see WAC 137-91-050.	275-92-110	Supervised facility—Limits of confinement. [Order 857, § 275-92-110, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-060	Records. [Order 1252, § 275-91-060, filed 11/21/77.] Repealed by 84-16-066 (Order 84-11), filed 7/30/84, effective 9/4/84. Statutory Authority: RCW 72.01.050, 72.01.090 and 72.09.050. Later promulgation, see WAC 137-91-060.	275-92-115	Supervised facility—Sponsor-escort. [Order 857, § 275-92-115, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
275-91-070	Supplemental care. [Order 1252, § 275-91-070, filed 11/21/77.] Repealed by 84-16-066 (Order 84-11), filed 7/30/84, effective 9/4/84. Statutory Authority: RCW 72.01.050, 72.01.090 and 72.09.050. Later promulgation, see WAC 137-91-070.	275-92-200	Work-training release plan revocation—Noncompliance with rules. [Order 857, § 275-92-200, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-205	Work-training release plan revocation—Violation of law or rules. [Order 857, § 275-92-205, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-210	Work-training release plan revocation—Minor violation—Disciplinary procedure. [Order 857, § 275-92-210, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-215	Work-training release plan revocation—Minor violation—Hearing and decision. [Order 857, § 275-92-215, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-220	Work-training release plan revocation—Minor violation—Appeal. [Order 857, § 275-92-220, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-225	Work-training release plan revocation—Major violation—Allegation. [Order 857, § 275-92-225, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-230	Work-training release plan revocation—Major violation—Service of notice of allegation. [Order 857, § 275-92-230, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-235	Work-training release plan revocation—Major violation—Arrest and detention. [Order 857, § 275-92-235, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-240	Work-training release plan revocation—Hearing—Notice. [Order 857, § 275-92-240, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-245	Work-training release plan revocation—Hearing—Waiver. [Order 857, § 275-92-245, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-250	Work-training release plan revocation—Hearing—Scheduling. [Order 857, § 275-92-250, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-255	Work-training release plan revocation—Hearing—Procedures. [Order 857, § 275-92-255, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-260	Work-training release plan revocation—Hearing—Stipulations and admissions of record. [Order 857, § 275-92-260, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
		275-92-265	Work-training release plan revocation—Hearing—Rules of evidence. [Order 857, § 275-92-265, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.

Chapter 275-92

ADULT CORRECTIONAL INSTITUTIONS--RELEASE PROGRAMS--WORK TRAINING

Title 275 WAC**Title 275 WAC: DSHS (Institutions)**

- 275-92-270 Work-training release plan revocation—Hearing—Continuances. [Order 857, § 275-92-270, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
- 275-92-275 Work-training release plan revocation—Hearing—Findings and conclusions. [Order 857, § 275-92-275, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
- 275-92-280 Work-training release plan revocation—Hearing—Disposition. [Order 857, § 275-92-280, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
- 275-92-285 Work-training release plan revocation—Hearing—Decision. [Order 857, § 275-92-285, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
- 275-92-290 Work-training release plan revocation—Hearing—Appeal. [Order 857, § 275-92-290, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
- 275-92-295 Termination of work-training release. [Order 857, § 275-92-295, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
- 275-92-300 Exceptions. [Order 857, § 275-92-300, filed 9/27/73.] Repealed by Order 1216, filed 6/15/77.
- 275-92-310 Definitions. [Order 1216, § 275-92-310, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see Title 137 WAC.
- 275-92-315 Secretary's authority to grant or deny. [Order 1216, § 275-92-315, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-020.
- 275-92-320 Reasons for which given. [Order 1216, § 275-92-320, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-030.
- 275-92-325 Application—Who may apply. [Order 1216, § 275-92-325, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-040.
- 275-92-330 Application—Consideration. [Order 1216, § 275-92-330, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-050.
- 275-92-335 Application—Decision. [Order 1216, § 275-92-335, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-060.
- 275-92-340 Plan—Investigation. [Order 1216, § 275-92-340, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-070.
- 275-92-345 Plan—Approval or denial. [Order 1216, § 275-92-345, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-080.
- 275-92-350 Plan—Restrictions. [Order 1216, § 275-92-350, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-090.
- 275-92-355 Standard rules. [Order 1216, § 275-92-355, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-100.
- 275-92-400 Supervised facility. [Order 1216, § 275-92-400, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100.
- 275-92-405 Provisions of supervision. [Order 1216, § 275-92-405, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-120.
- 275-92-407 Supervision—Individual work release placement. [Statutory Authority: RCW 72.65.100. 81-05-001 (Order 1595), § 275-92-407, 2/5/81.] Repealed by 85-08-022 (Order 85-05), filed 4/1/85. Statutory Authority: RCW 72.65.100.
- 275-92-410 Limits of confinement. [Order 1216, § 275-92-410, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-140.
- 275-92-415 Sponsor-escort. [Order 1216, § 275-92-415, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-150.
- 275-92-510 Termination of plan. [Order 1216, § 275-92-510, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-160.
- 275-92-515 Service of notice of proposed termination. [Order 1216, § 275-92-515, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-170.
- 275-92-520 Termination hearing—Notice. [Order 1216, § 275-92-520, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-180.
- 275-92-525 Facility review committee. [Order 1216, § 275-92-525, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-190.
- 275-92-530 Termination hearing—Waiver. [Order 1216, § 275-92-530, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-200.
- 275-92-535 Termination hearing—Rules of evidence. [Order 1216, § 275-92-535, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-210.
- 275-92-540 Termination hearing—Findings and conclusions. [Order 1216, § 275-92-540, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-220.
- 275-92-545 Termination hearing—Disposition. [Order 1216, § 275-92-545, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-230.
- 275-92-550 Termination hearing—Decision. [Order 1216, § 275-92-550, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-240.
- 275-92-555 Termination hearing—Appeal. [Order 1216, § 275-92-555, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-250.
- 275-92-560 Time limits. [Order 1216, § 275-92-560, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-260.
- 275-92-565 Exceptions. [Order 1216, § 275-92-565, filed 6/15/77.] Repealed by 82-08-055 (Order 82-06), filed 4/5/82. Statutory Authority: RCW 72.65.100. Later promulgation, see WAC 137-56-270.

Chapter 275-93

ADULT CORRECTIONAL INSTITUTIONS--RELEASE PROGRAMS--FURLOUGH

- 275-93-005 Furlough of person confined in state correctional institution—Definitions. [Order 805, § 275-93-005, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-010.
- 275-93-010 Furlough of person confined in state correctional institution—Secretary's authority to grant or deny. [Order 805, § 275-93-010, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-020.
- 275-93-020 Furlough of person confined in state correctional institution—Purposes. [Order 805, § 275-93-020, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-030.
- 275-93-040 Furlough of person confined in state correctional institution—Who may apply. [Statutory Authority: RCW 72.66.080. 81-03-076 (Order 1590), § 275-93-040, filed 1/21/81; Order 805, § 275-93-040, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-040.
- 275-93-050 Furlough of person confined in state correctional institution—Conditions imposed. [Order 805, § 275-93-050, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-050.
- 275-93-060 Furlough of person confined in state correctional institution—Duration. [Order 805, § 275-93-060, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-060.
- 275-93-070 Furlough of person confined in state correctional institution—Sponsor's responsibilities. [Order 805, § 275-93-070, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-070.
- 275-93-080 Furlough of person confined in state correctional institution—Criteria for evaluating application. [Order 805, § 275-93-080, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-080.
- 275-93-090 Furlough of person confined in state correctional institution—Application for furlough. [Order 805, § 275-93-090, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-090.
- 275-93-100 Furlough of person confined in state correctional institution—Notifying resident of decision on application. [Order 805, § 275-93-100, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-100.
- 275-93-110 Furlough of person confined in state correctional institution—Escape. [Order 878, § 275-93-110, filed 11/29/73; Order 805, § 275-93-110, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-110.
- 275-93-120 Furlough of person confined in state correctional institution—Revocation or suspension. [Order 805, § 275-93-120, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority:

275-93-130

275-93-140

RCW 72.66.080. Later promulgation, see WAC 137-60-120.

Furlough of person confined in state correctional institution—Law enforcement officers to be notified. [Order 805, § 275-93-130, filed 5/31/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-130.

Furlough of person confined in state correctional institution—Exceptions to rules. [Order 845, § 275-93-140, filed 8/9/73.] Repealed by 82-07-006 (Order 82-04), filed 3/4/82. Statutory Authority: RCW 72.66.080. Later promulgation, see WAC 137-60-140.

Chapter 275-96

ADULT CORRECTIONAL INSTITUTIONS--CORRESPONDENCE AND TELEPHONE USAGE

- 275-96-005 Definitions. [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.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140. Later promulgation, see WAC 137-48-020.
- 275-96-010 Communication—Purpose. [Order 1087, § 275-96-010, filed 1/16/76; Order 838, § 275-96-010, filed 7/26/73.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140.
- 275-96-015 Communication—General limitations. [Order 1087, § 275-96-015, filed 1/16/76; Order 838, § 275-96-015, filed 7/26/73.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140.
- 275-96-020 Incoming letters—Limitations and controls. [Order 838, § 275-96-020, filed 7/26/73.] Repealed by Order 1087, filed 1/16/76. For later promulgations, see WAC 275-96-022 and 275-96-025.
- 275-96-021 Outgoing mail. [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).] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140. Later promulgation, see WAC 137-48-040.
- 275-96-022 Incoming mail. [Order 1087, § 275-96-022, filed 1/16/76. Formerly WAC 275-96-020 (part).] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140. Later promulgation, see WAC 137-48-040.
- 275-96-025 Special rules—Incoming publication limitations and controls. [Order 1087, § 275-96-025, filed 1/16/76; Order 838, § 275-96-025, filed 7/26/73. Formerly WAC 275-96-020 (part).] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140.
- 275-96-030 Special rules regarding packages—Limitations and controls. [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.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140.
- 275-96-035 Outgoing letters—Limitations and controls. [Order 838, § 275-96-035, filed 7/26/73.] Repealed by Order 1087, filed 1/16/76. For later promulgations, see WAC 275-96-021 and 275-96-070.
- 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. Later promulgation, see WAC 276-96-030.

Title 275 WAC**Title 275 WAC: DSHS (Institutions)**

275-96-045 Handling of mail. [Order 838, § 275-96-045, filed 7/26/73.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140.

275-96-050 Treatment of cash and checks. [Order 838, § 275-96-050, filed 7/26/73.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140.

275-96-055 Legal mail. [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.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140.

275-96-060 Stationery and postage. [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.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140. Later promulgation, see WAC 137-48-060.

275-96-065 Use of telephone. [Order 838, § 275-96-065, filed 7/26/73.] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140. Later promulgation, see WAC 137-48-080.

275-96-070 Procedure for disapproval of resident mail. [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).] Repealed by 83-20-036 (Order 83-09), filed 9/27/83. Statutory Authority: RCW 72.08.380, 72.09.050 and 72.12.140. Later promulgation, see WAC 137-48-050.

Chapter 275-102**ADULT PROBATION AND PAROLE--INTERSTATE COMPACT**

275-102-475 Definitions. [Order 1011, § 275-102-475, filed 2/28/75.] Repealed by 83-01-139 (Order 82-20), filed 12/22/82. Statutory Authority: RCW 9.95.270. Later promulgation, see WAC 137-68-010.

275-102-480 Detained or arrested probationer or parolee--Right to preliminary hearing. [Order 1011, § 275-102-480, filed 2/28/75.] Repealed by 83-01-139 (Order 82-20), filed 12/22/82. Statutory Authority: RCW 9.95.270. Later promulgation, see WAC 137-68-020.

275-102-485 Preliminary hearing--Preparation. [Order 1011, § 275-102-485, filed 2/28/75.] Repealed by 83-01-139 (Order 82-20), filed 12/22/82. Statutory Authority: RCW 9.95.270. Later promulgation, see WAC 137-68-030.

275-102-490 Preliminary hearing--Conduct. [Order 1011, § 275-102-490, filed 2/28/75.] Repealed by 83-01-139 (Order 82-20), filed 12/22/82. Statutory Authority: RCW 9.95.270. Later promulgation, see WAC 137-68-040.

275-102-495 Preliminary hearing--Disposition of decision. [Order 1011, § 275-102-495, filed 2/28/75.] Repealed by 83-01-139 (Order 82-20), filed 12/22/82. Statutory Authority: RCW 9.95.270. Later promulgation, see WAC 137-68-050.

Chapter 275-120**WASHINGTON SOLDIERS' HOME AND COLONY--
WASHINGTON VETERANS' HOME**

275-120-010 Definitions. [Order 1065, § 275-120-010, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-015 Application for membership. [Order 1065, § 275-120-015, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-020 Conditions of eligibility for admission. [Order 1065, § 275-120-020, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-025 Eligibility--State residency. [Order 1065, § 275-120-025, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-030 Eligibility--Military service. [Order 1065, § 275-120-030, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-035 Eligibility--Transfer of property. [Order 1065, § 275-120-035, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-040 Eligibility--Property resources. [Order 1065, § 275-120-040, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

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.

275-120-050 Eligibility--Income. [Order 1065, § 275-120-050, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-055 Eligibility--Surviving spouse of veteran. [Order 1065, § 275-120-055, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-060 Eligibility--Married couple. [Order 1065, § 275-120-060, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-065 Use of income by member. [Order 1065, § 275-120-065, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-070 Veterans home or soldiers home revolving fund. [Order 1065, § 275-120-070, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-075 Aid and attendance account. [Order 1065, § 275-120-075, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-080 Members' rights and responsibilities--Notification. [Order 1065, § 275-120-080, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-085 Supplementary rules--Promulgation. [Order 1065, § 275-120-085, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-090 Supplementary policies and procedures. [Order 1065, § 275-120-090, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-095 Violation--Investigation. [Order 1065, § 275-120-095, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-100 Penalties. [Order 1065, § 275-120-100, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-105 Fair hearing. [Order 1065, § 275-120-105, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

275-120-110 Furlough. [Order 1065, § 275-120-110, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.

- 275-120-115 Discharge. [Order 1065, § 275-120-115, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-120-120 Discharge—Honorable. [Order 1065, § 275-120-120, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-120-125 Discharge—Disciplinary. [Order 1065, § 275-120-125, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-120-130 Transfer. [Order 1065, § 275-120-130, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-120-135 Readmission. [Order 1065, § 275-120-135, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-120-140 Burial. [Order 1065, § 275-120-140, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-120-145 Population level. [Order 1065, § 275-120-145, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-120-150 Administrative appeal. [Order 1065, § 275-120-150, filed 11/10/75.] Repealed by 80-09-069 (Order 80-01), filed 7/17/80. Statutory Authority: RCW 43.60A.070.
- 275-16-040 Factors in determining ability to pay. [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.] Repealed by 81-08-020 (Order 1627), filed 3/25/81. Statutory Authority: RCW 81.02.412[71.02.412].
- 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.
- 275-16-070 Judgment upon finding of responsibility. [Order 1, § 275-16-070, 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.

Chapter 275-216

STATE INSTITUTIONS OTHER THAN ADULT CORRECTIONAL INSTITUTIONS—TRIAL VISIT TO COMMUNITY—RESIDENT NEEDING PUBLIC ASSISTANCE

- 275-216-010 Trial visits—Definitions. [Order 874, § 275-216-010, filed 11/16/73.] Repealed by 81-19-084 (Order 1699), filed 9/17/81. Statutory Authority: RCW 72.01.090.
- 275-216-020 Trial visits—Client needing public assistance—Institution's responsibility. [Order 874, § 275-216-020, filed 11/16/73.] Repealed by 81-19-084 (Order 1699), filed 9/17/81. Statutory Authority: RCW 72.01.090.

Chapter 275-16 WAC

LIABILITY FOR COSTS OF CARE AND HOSPITALIZATION OF THE MENTALLY ILL

WAC

- 275-16-010 Authority.
- 275-16-015 Definitions.
- 275-16-030 Schedule of charges.
- 275-16-035 Available assets of estate of patients and responsible relatives.
- 275-16-045 Exempt income.
- 275-16-055 Notice of finding of responsibility (NFR).
- 275-16-065 Determination of liability.
- 275-16-075 Unusual and exceptional circumstances.
- 275-16-085 Other pertinent factors.
- 275-16-095 Failure to cooperate with department.
- 275-16-105 Petition for review.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

- 275-16-020 Investigation and determination of liability. [Order 1, § 275-16-020, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, 8/2/67, 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. The following rules regarding hospitalization charges are hereby adopted under the authority of Title 71 RCW.

[Statutory Authority: RCW 81.02.412 [71.02.412]. 81-08-020 (Order 1627), § 275-16-010, filed 3/25/81. 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 275-16-015 Definitions. (1) "Adjusted charges" are those charges levied upon a patient who is or has been confined to a state hospital for the mentally ill, either by voluntary or involuntary admission, and their estates and responsible relatives, which are less than the actual cost of hospitalization as reflected in the schedule of charges herein and which has been established by the issuance of a notice of finding of responsibility.

(2) "Adjusted gross income" is that gross income of the estate of the patient and responsible relatives less any deductions, contributions or payments mandated by law including, but not necessarily limited to, income tax and social security.

(3) "Dependent" means any spouse, minor son or daughter, or permanently disabled son or daughter, of the patient living in the patient's household. If the patient is a minor, then the same definitions shall apply in determining the dependency of members of the parent's household. If a minor son or daughter is not living in the patient's household, that son or daughter shall not be

considered a dependent unless the patient is in fact contributing more than fifty percent of that child's support in accordance with a court order or court-recognized agreement.

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

(5) "Determination officer" is that duly appointed and qualified claims investigator who is delegated authority by the secretary to conduct or cause to have conducted an investigation of the financial condition of the estate of the patient and responsible relatives; to evaluate the results of such investigations; to make determinations of the ability to pay hospitalization charges from such investigations and evaluations; and to issue notices of findings of responsibility to the responsible parties.

(6) "Estate of patient and responsible relative" means the total assets available to the patient and his responsible relatives to reimburse the department for hospitalization charges incurred by the patient in a state hospital for the mentally ill in accordance with these regulations.

(7) "Gross income" means the total assets available to the estate of the patient and responsible relatives expressed in terms of their cash equivalent on a monthly basis. It includes gross wages for service; net earnings from self-employment; and all other assets of the estate prior to any mandatory deductions.

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

[Statutory Authority: RCW 81.02.412 [71.02.412]. 81-08-020 (Order 1627), § 275-16-015, filed 3/25/81.]

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

	Western State Hospital	Child Study and Treatment Center	Eastern State Hospital
(a) INPATIENT SERVICES -			
Hospital Costs Per Day	\$124.58	\$212.06	\$145.21
Physician Costs	*	7.14	*
*Physician costs will be billed on a fee for service basis			
(b) OUTPATIENT SERVICES -			
Per diem			
Outpatient	—	—	—
Day Care Per Day	—	71.17	—
Per Hour	—	11.86	—
(c) ANCILLARY SERVICES -			
Per relative value unit / ¹			
Radiology	4.91	4.91	3.99
Pathology	.35	.35	.36
Medical Clinics	2.60	2.64	2.05
Electroencephalogram	—	—	1.00
Electrocardiogram	—	—	.30
Inhalation Therapy	—	—	—
Physical Therapy	1.85	1.85	2.29

	Western State Hospital	Child Study and Treatment Center	Eastern State Hospital
Occupational Therapy	—	—	21.27
Speech Therapy	—	—	15.53
Dental	22.95	22.95	37.66
Podiatry	.92	.92	1.00
Optometry	—	—	1.00

(2) Services required by the patient that cannot be provided by hospital staff are purchased from private sources and charged at actual cost.

¹/California Medical Association. *Relative Value Studies*. Fifth edition. San Francisco: 693 Sutter Publication, Inc., 1969, 135 pp.

[Statutory Authority: RCW 71.02.412. 86-17-075 (Order 2414), § 275-16-030, filed 8/19/86; 85-17-038 (Order 2273), § 275-16-030, filed 8/15/85; 84-17-011 (Order 2131), § 275-16-030, filed 8/3/84; 83-18-029 (Order 2019), § 275-16-030, filed 8/31/83; 82-17-070 (Order 1866), § 275-16-030, filed 8/18/82; 80-06-087 (Order 1508), § 275-16-030, filed 5/28/80. Statutory Authority: RCW 72.01.090. 79-03-019 (Order 1372), § 275-16-030, filed 2/21/79; 78-03-029 (Order 1270), § 275-16-030, filed 2/17/78; Order 1190, § 275-16-030, filed 2/18/77; Order 1086, § 275-16-030, filed 1/15/76; Order 1002, § 275-16-030, filed 1/14/75; Order 947, § 275-16-030, filed 6/26/74; Order 812, § 275-16-030, filed 6/28/73; Order 14, § 275-16-030, filed 5/11/71; Order 6, § 275-16-030, filed 1/10/69; Order 1, § 275-16-030, filed 2/23/68; Emergency Rules (part), filed 1/26/68, 10/24/67, 8/2/67, and 7/28/67.]

WAC 275-16-035 Available assets of estate of patients and responsible relatives. (1) The department will include, but not necessarily be limited to, in their determination of the assets of the estates of present and former patients of state hospitals for the mentally ill and their responsible relatives, cash, stocks, bonds, savings, security interests, insurance benefits, guardianship funds, trust funds, governmental benefits, pension benefits and personal property.

(2) Real property shall also be an available asset to the estate: *Provided*, That the patient's home shall not be considered an available asset if that property is owned by the estate and serves as the principal dwelling and actual residence of the patient, the patient's spouse, and/or minor children and disabled sons or daughters: *Provided further*, That if the home is not being used for residential purposes by the patient, the patient's spouse, and/or minor children and disabled sons or daughters, and in the opinion of two physicians, there is no reasonable expectancy that the patient will be able to return to the home during the remainder of his life, the home shall be considered an asset available to the estate.

(3) In determining if a particular asset is available to the estate of a patient who is eligible or potentially eligible for Medicaid, the determination officer will apply the standards of WAC 388-92-045.

[Statutory Authority: RCW 81.02.412 [71.02.412]. 81-08-020 (Order 1627), § 275-16-035, filed 3/25/81.]

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.]

WAC 275-16-055 Notice of finding of responsibility (NFR). The determination officer's assessment of the ability and liability of the estate to pay hospitalization charges shall be issued in the form of a notice of finding of responsibility, hereinafter referred to as an NFR, as prescribed by RCW 71.02.413. The NFR will be served upon those responsible parties as otherwise required by law, will indicate the charges being assessed, and explain the procedure for appeal therefrom. When the NFR is for full hospitalization charges as specified in WAC 275-16-030, the financially responsible person will be informed of the current charges and that those charges are periodically recomputed by the department in accordance with RCW 71.02.410. When the NFR is for adjusted charges, those charges will be expressed in a daily rate. Charges for ancillary services will be set aside when the NFR is for adjusted charges.

[Statutory Authority: RCW 81.02.412 [71.02.412], 81-08-020 (Order 1627), § 275-16-055, filed 3/25/81.]

WAC 275-16-065 Determination of liability. (1) In determining the ability of the estate of the patient and responsible relative to pay hospitalization charges, first priority shall be given to any third party benefits which might be available. The availability of third party benefits, such as medical insurance, health insurance, Medicare, Medicaid, CHAMPUS, CHAMPVA, shall be considered as an available asset of the estate and shall justify a finding for actual costs of hospitalization during such period as the coverage is in effect.

(2) In the absence of third party benefits, charges shall be based upon the available assets of the estate giving consideration to any unusual and exceptional circumstances and other pertinent factors. No financial determination of the ability of the estate to pay hospitalization charges shall conflict with the eligibility requirements for Medicaid for those patients who are eligible or potentially eligible for such benefits.

(3) The ability of the estate to pay adjusted charges will be determined by applying the following formula:

$$X = (Z-E)F$$

$$\text{Where } Z = (A-Y-N-R) \div D$$

Z = available income per family member

X = adjusted charges (daily)

A = gross income

Y = mandatory deductions

N = allowance for unusual and exceptional circumstances

R = allowance for other pertinent factors

D = number of dependents

E = exempt income

F = a factor which converts the monthly figures to a daily rate (.0328767).

All calculations are expressed in monthly terms except the final adjusted charge which is converted to a daily

rate. All final figures are rounded out to the nearest cent.

(4) The adjusted gross income (A-Y) is determined by first developing the gross income of the estate. Gross income (A) includes not only gross wages for services rendered, and/or net earnings from self-employment, but all other available assets converted to some reasonable monthly figure. All mandatory deductions (Y), such as income tax and social security, are deducted from the gross income to arrive at the adjusted gross income.

(5) Approved allowances for unusual and exceptional circumstances (N) and for other pertinent factors (R) are then subtracted from the adjusted gross income.

(6) The available income (A-Y-N-R) is then divided by the number of dependents in the household of the patient (D) to determine the available income per family member.

(7) Exempt income (E) as defined in WAC 275-16-045 is then subtracted from the available income per family member to arrive at the monthly adjusted charges.

(8) The monthly adjusted charges are multiplied by the factor of .0328767 which converts the monthly figure to a daily rate.

[Statutory Authority: RCW 81.02.412 [71.02.412], 81-08-020 (Order 1627), § 275-16-065, filed 3/25/81.]

WAC 275-16-075 Unusual and exceptional circumstances. Unusual and exceptional circumstances for these purposes will cover those expenses other than usual or common; rare and extraordinary; that are of a medical nature and *must* be supplied to the patient for his health, medical or physical well being. Such expenses do not include those expenses that are reimbursable from insurance benefits or can be reasonably obtained from welfare agencies, health maintenance organizations, free clinics, or other free private or governmental sources. The existence and necessity of such unusual and exceptional circumstances must be attested to in writing, by the institution superintendent, that those expenses resulting therefrom are an integral part of the patient's treatment plan and that allowance for such circumstances is necessary for the medical and/or mental well-being of the patient. Upon such written certification, the resources necessary to meet the unusual and exceptional circumstances will not be considered as an asset available to the estate of the patient and responsible relatives for these purposes: *Provided*, That any such attestation by the institution superintendent must conform with the eligibility criteria of Medicaid if the patient is eligible or potentially eligible for such benefits.

[Statutory Authority: RCW 81.02.412 [71.02.412], 81-08-020 (Order 1627), § 275-16-075, filed 3/25/81.]

WAC 275-16-085 Other pertinent factors. In considering other pertinent factors in determining the ability of the estate of the patient and responsible relatives to pay, the determination officer may consider those factors related to the well-being, education and training,

child support obligations set by court order or by administrative finding under chapter 74.20A RCW, and/or rehabilitation of the patient and his or her immediate family, to whom the patient owes a duty of support. The patient and/or responsible relatives must show the existence and the necessity for the pertinent factors as defined. Upon such a showing, the determination officer may consider such resources necessary to reasonably provide for such pertinent factors as assets not available to the estate of the patient and responsible relatives: *Provided*, That any allowance for other pertinent factors must not conflict with Medicaid eligibility requirements for those patients who are eligible or potentially eligible for such benefits.

[Statutory Authority: RCW 81.02.412 [71.02.412]. 81-08-020 (Order 1627), § 275-16-085, filed 3/25/81.]

WAC 275-16-095 Failure to cooperate with department. Any patient, former patient, guardian, or other responsible party or parties who, after diligent effort by the department, has been shown to have failed to cooperate with the financial investigation by the department; or fails to comply with, or ignores, departmental correspondence; or supplies false or misleading information; or willfully conceals assets or potential assets; will be subject to a determination by the department that the estate of the patient and responsible relatives has the ability to pay full hospitalization charges: *Provided*, That no person adjudged incompetent by a court of this state at the time of said investigation shall be penalized by his or her actions: *Provided further*, That such a finding of liability to pay full hospitalization charges shall in no way diminish the responsible party's right to appeal such a finding of responsibility.

[Statutory Authority: RCW 81.02.412 [71.02.412]. 81-08-020 (Order 1627), § 275-16-095, filed 3/25/81.]

WAC 275-16-105 Petition for review. (1) After a finding of responsibility becomes final in accordance with RCW 71.02.413, the responsible party may petition for a review of such findings to the secretary. The petitioner must show a substantial change in the financial ability of the estate to pay the charges in a petition for review. The burden of proof of a change in financial ability rests with the petitioner.

(2) A petition for review shall be in writing and to the following address:

Secretary, DSHS
Attn: Determination Officer
P.O. Box 9768
Olympia, WA 98504

(3) The determination officer, upon receipt of the petition for review, may conduct or cause to have conducted such investigation as may be necessary to verify the alleged changes in financial status or to determine any other facts which would bear upon the financial ability of the estate to pay.

(4) Based upon the review of the facts, the determination officer may modify or vacate the NFR under the provisions of RCW 71.02.415.

(5) The NFR will not be modified or vacated, if such modification or vacation inflicts or causes the loss of Medicaid eligibility; jeopardizes the eligibility for other third-party benefits; or has the potential end result of diminishing or jeopardizing the recovery of hospitalization cost by the department without a clear showing of real benefit, financial or otherwise, to the patient and/or responsible relatives.

(6) Nothing herein is intended to preclude the reinvestigation and/or review of the finding of responsibility by the department of its own volition.

[Statutory Authority: RCW 81.02.412 [71.02.412]. 81-08-020 (Order 1627), § 275-16-105, filed 3/25/81.]

Chapter 275-19 WAC

ALCOHOL AND DRUG TREATMENT FACILITIES

WAC

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 275-19-985 All methadone treatment facilities—Take-home medication requirements.
 275-19-990 All methadone treatment facilities—Additional requirements.
- 275-19-540 Alcoholism recovery house facilities—Discharge and referral. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-540, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-630 Alcoholism outpatient—Intensive outpatient treatment. [Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-630, filed 11/4/83.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-19-720 Information and referral services—Community services. [Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-720, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-720, filed 2/1/80.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

- 275-19-090 All facilities—Court commitments. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-090, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-120 All facilities—Administration. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-120, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-190 Treatment register—Residential facilities. [Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-190, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-190, filed 2/1/80.] Repealed by 84-24-029 (Order 2171), filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 69.54.040 and 70.96A.090.
- 275-19-330 Intensive inpatient treatment facilities—Written program statement. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-330, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-340 Intensive inpatient treatment facilities—Social and recreational activities. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-340, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-350 Intensive inpatient treatment facilities—Discharge or referral. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-350, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-420 Alcoholism long-term treatment facilities—Written program statement. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-420, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-440 Alcoholism long-term treatment facilities—Discharge or referral. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-440, filed 2/1/80.] Repealed by 81-24-081 (Order 1727), filed 12/2/81. Statutory Authority: RCW 70.96A.090.
- 275-19-520 Alcoholism recovery house facilities—Written program statement. [Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-520, filed

WAC 275-19-010 Purpose. Rules and regulations relating to alcoholism, alcohol abuse, drug addiction, and drug abuse treatment facilities are hereby adopted pursuant to chapters 69.54 and 70.96A RCW. The purpose is to provide standards and procedures for departmental approval of alcoholism, alcohol abuse, drug addiction, and drug abuse treatment facilities, and to set fees to be charged by the department for inspection and accreditation of approved facilities or facilities seeking approval.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-010, filed 11/30/84, effective 1/1/85. 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) The department shall approve and accredit alcoholism, alcohol abuse, drug addiction, and drug abuse treatment facilities pursuant to these rules and regulations to provide the following services:

(a) Alcoholism and alcohol abuse detoxification: Provides care and treatment of persons intoxicated or incapacitated by alcohol during the period in which the person recovers from the transitory effects of acute intoxication.

(b) Drug addiction and drug abuse detoxification: Provides care and treatment of persons intoxicated or incapacitated by drugs during the period in which the person recovers from the transitory effects of acute intoxication or withdrawal.

(c) Alcoholism intensive inpatient treatment: Provides a concentrated residential program consisting of a combination of education, individual therapy, group therapy, and related activities to detoxified alcoholics.

(d) Drug addiction intensive inpatient treatment: Provides a concentrated residential program consisting of a combination of education, individual therapy, group therapy, and related activities to detoxified addicts.

(e) Alcoholism long-term treatment: Provides care and treatment on a long-term basis (ninety days or more) in a residential setting with personal care services for alcoholics with impaired self-maintenance capabilities needing personal guidance and assistance to maintain abstinence and good health.

(f) Drug addiction long-term treatment: Provides care and treatment on a long-term basis (ninety days or more) in a residential setting with personal care services for drug addicts with impaired self-maintenance capabilities needing personal guidance and assistance to maintain abstinence and good health.

(g) Alcoholism recovery house: Provides care and treatment in a residential setting with social and recreational activities for detoxified alcoholics to aid their adjustment to abstinence and aid their engagement in occupational training, gainful employment, or other types of community service.

(h) Drug addiction recovery house: Provides care and treatment in a residential setting with social and recreational activities for detoxified addicts to aid their adjustment to abstinence and aid their engagement in occupational training, gainful employment, or other types of community activities.

(i) Alcoholism extended care recovery house: Provides care and treatment in a residential setting in excess of sixty days for clients needing prolonged treatment services.

(j) Drug addiction extended care recovery house: Provides care and treatment in a residential setting in excess of sixty days for clients needing prolonged treatment services.

(k) Alcoholism and alcohol abuse outpatient treatment: Provides alcoholism and alcohol abuse treatment services according to a prescribed plan in a nonresidential setting.

(l) Drug addiction and drug abuse outpatient treatment: Provides drug addiction and drug abuse treatment services according to a prescribed plan in a nonresidential setting.

(m) Alcoholism intensive outpatient treatment: Provides a concentrated, nonresidential program consisting of a combination of educational sessions, individual therapy, group therapy, and related activities to detoxified alcoholics and their families.

(n) Drug addiction intensive outpatient treatment: Provides a concentrated, nonresidential program consisting of a combination of educational sessions, individual therapy, group therapy, and related activities to detoxified addicts and their families.

(o) Crisis intervention facilities services: Provides services aimed at alleviating acute emotional, behavioral, and/or physical distress resulting from the individual's use of alcohol and/or drugs.

(p) DWI client assessment: A diagnostic service designed to evaluate and assess clients' involvement with alcohol and other drugs, and recommend an appropriate course of action.

(q) Alcohol information school: An educational program providing students with information regarding the use and abuse of alcohol. The goal of the school is to help students not currently presenting a significant alcohol problem to make informed decisions about the use of alcohol.

(r) Drug information school: An educational program providing students with information regarding the use and abuse of drugs. The goal of the school is to help

students not currently presenting a significant drug problem to make informed decisions about the use of drugs.

(s) Emergency service patrol: Provides assistance in the streets and in other public places to persons who are intoxicated.

(t) Methadone treatment: Provides methadone (or other drugs approved by the department) as a substitute for opiates, in addition to counseling and other types of psychological or social therapy.

(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 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-020, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-020, filed 11/4/83. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-020, filed 12/2/81; 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) "Accredited" means the approval of a treatment facility pursuant to chapters 69.54 and/or 70.96A RCW and these rules and regulations to provide one or more of the treatment services listed in WAC 275-19-020.

(2) "Acute detoxification" means detoxification service provided to individuals for whom the consequences of withdrawal from alcohol or other drugs are so severe as to merit assistance from medical and/or nursing personnel.

(3) "Administrator" means the individual appointed as the chief executive officer by the operators of a facility to act in the facility's behalf in the overall management of the treatment facility.

(4) "Alcohol abuse" means use of alcohol in amounts hazardous to individual health or safety.

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

(6) "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 a person's health is substantially impaired or endangered or his or her social and economic function is substantially disrupted.

(7) "Approved" means having met the standards of the department contained in these rules and regulations and having been accredited pursuant to chapters 69.54 and/or 70.96A RCW.

(8) "Approved treatment facility" means a treatment facility, either public or private, profit or nonprofit, approved by the department pursuant to these rules and regulations and chapters 69.54 and/or 70.96A RCW.

(9) "Authenticated" means written verification of any entry in a patient treatment record by means of a signature including minimally first initial and last name, or initials if the file includes an authentication record.

(10) "Authentication record" means a document which is part of each patient treatment record and includes identification of all individuals initialing entries in

the treatment record: Full printed name, signature including minimally first initial and last name, and initials that may appear after entries in the treatment record.

(11) "Bureau" means the Washington state department of social and health services bureau of alcohol and substance abuse.

(12) "Bureau of alcohol and substance abuse" means the Washington state department of social and health services bureau of alcohol and substance abuse.

(13) "Cancel" means a termination of the department's approval of a treatment service or facility.

(14) "Chemotherapy" means the use of prescribed medication to assist in client treatment for drug or alcohol dependency.

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

(16) "Department of licensing" means the Washington state department of licensing.

(17) "Detoxification" means care and treatment of a person during the period in which the person recovers from the transitory effects of acute intoxication or withdrawal.

(18) "Detoxified" means withdrawn from the consumption of alcohol, or other drugs, and recovered from the transitory effects of intoxication, or any associated acute physiological withdrawal reactions.

(19) "Drug abuse" means use of a drug in amounts hazardous to individual health or safety.

(20) "Drug addiction" means chronic, compulsive, or uncontrollable drug use to the extent a person cannot stop use of the drug. Drug addiction is usually characterized by a process including progressive use, development of tolerance, and a withdrawal syndrome if use of the drug is discontinued.

(21) "Face to face" means an individual or group therapeutic contact with a client not including educational sessions.

(22) "Facilities" means rooms, areas, and equipment.

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

(24) "Intensive outpatient treatment" means a concentrated, nonresidential program consisting of a combination of education sessions, individual therapy, group therapy, and related activities provided to clients and their families.

(25) "Intoxication" means acute alcohol and/or drug poisoning or temporary impairment of a person's mental or physical functioning caused by alcohol and/or other drugs.

(26) "Licensed nurse" means either a registered nurse per chapter 18.88 RCW or a licensed practical nurse per chapter 18.78 RCW.

(27) "Negative urine" means the results of a urinalysis which do not confirm the presence of any controlled substances, other than drugs medically prescribed for the patient submitting the urine sample.

(28) "Operators" means the individual or group legally responsible for the treatment facility.

(29) "Physician" means a person duly licensed to practice medicine or osteopathic medicine in the state of Washington per chapter 18.57 or 18.71 RCW.

(30) "Positive urine" means the results of a urinalysis which confirm the presence of one or more controlled substances, other than drugs legitimately prescribed for the patient submitting the urine sample.

(31) "Probation alcohol assessment facility" means a qualified probation department for a district or municipal court within the state of Washington meeting the standards contained in these rules and regulations governing the operation of a DWI client assessment service as described in WAC 275-19-020 (1)(p).

(32) "Residential facilities" means facilities providing board and room as part of the treatment program.

(33) "Revoke" means a termination of the department's approval of a treatment facility.

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

(35) "Shall" means compliance is mandatory.

(36) "Sick physical" means an initial diagnostic examination of an applicant for admission to a treatment facility, for the purpose of determining whether the individual is currently physiologically dependent on opiates.

(37) "Stabilization" means a patient's condition:

(a) Where the program physician has determined that the currently prescribed dose of medication has suppressed physiological withdrawal signs, has not produced sedation, euphoria, or other signs of over-medication, and has provided reasonable comfort for the patient; and

(b) Where the program physician determines no future dose increases should be necessary. Stabilization is evidenced by constant dose levels for fourteen days or by a determination entered into the clinical record by the program physician.

(38) "Subacute detoxification" means detoxification service provided to individuals in a supportive, homelike environment where a person can recover from the effects of intoxication. Prescription medication is not provided for the management of withdrawal discomfort.

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

(40) "Suspend" means termination of the department's approval of a treatment facility for a specified period of less than one calendar year or until specific conditions have been met and the agency has been notified of reinstatement.

(41) "Take-home medication" means methadone dispensed for self-administration off the premises of the treatment facility.

(42) "Transfer patient" means any patient transferring from one methadone program to another methadone program, with a maximum interruption in methadone medication of thirty days.

(43) "Urinalysis" means the qualitative analysis of a patient's urine sample for controlled substances.

[Statutory Authority: RCW 69.54.040, 86-22-020 (Order 2438), § 275-19-030, filed 10/29/86. Statutory Authority: RCW 69.54.040 and 70.96A.090, 84-24-029 (Order 2171), § 275-19-030, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040, 83-23-008 (Order 2044), § 275-19-030, filed 11/4/83. Statutory Authority: RCW 70.96A.090, 81-24-081 (Order 1727), § 275-19-030, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-030, filed 2/1/80.]

WAC 275-19-040 Department approval and accrediting procedures. (1) Treatment facilities seeking department approval and accreditation of one or more of the services listed in WAC 275-19-020 shall submit a written application to the bureau of alcohol and substance abuse on a form provided by the bureau.

(a) Such application shall provide evidence that the agency meets the requirements of these rules and regulations, chapters 69.54 and/or 70.96A RCW.

(b) The applicant shall send a copy of the application to the county coordinator in each county where services are to be provided.

(c) After processing the application, the bureau shall send written notification of approval or denial of approval to the applicant and if approved to the appropriate county coordinator.

(2) The department may grant provisional approval to treatment facilities when the bureau staff are unable to determine whether the facility, without a period of operation, will comply with chapters 69.54 and/or 70.96A RCW, and these rules and regulations. Provisional approval shall be granted for a maximum period of six months and may not be renewed more than once.

(3) If an approved treatment facility plans to move to a different location, open a branch office, or change ownership, the facility shall submit a written application to the bureau thirty days in advance of the change, and the bureau shall respond to the application within thirty days. Such application shall be submitted in accordance with WAC 275-19-040(1).

(4) The secretary or his or her designees may exempt a 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, health, or treatment of the clients in the particular treatment facility, or jeopardize the functioning of other service providers.

All exemptions granted shall be in writing and filed with the department and the treatment facility.

(5) The bureau shall issue a certificate of approval, valid for not more than one year, to approved treatment facilities in substantial compliance with these rules and regulations and chapters 69.54 and/or 70.96A RCW. This certificate shall be displayed in a conspicuous place in the facility.

(6) Fees shall be set and charged by the bureau of alcohol and substance abuse for inspections and certification of approved treatment facilities. Such fees shall be reasonably based upon the cost to the bureau of the inspections and maintenance of certification and shall not exceed the actual costs. Only one such fee shall be

charged to a treatment facility during any twelve-month period, regardless of the number of inspections made.

(7) Additional methadone facility application materials. In addition to the material submitted in a regular application for approval of a treatment facility, methadone treatment facilities shall submit to the department the following:

(a) A completed copy of the federal food and drug administration application for approval as a methadone program.

(b) A completed copy of the federal drug enforcement agency application for an approval to provide methadone.

(c) A copy of the facility's urinalysis procedures and policies.

(d) A copy of the facility's criteria for establishing and revising planned detoxification dates for patients.

(e) A copy of the facility's dispensary procedures and policies.

(8) Other required permits, licenses, and approvals for methadone treatment facilities. Prior to being certified by the department, methadone treatment facilities must possess the following:

(a) Approval from the federal drug enforcement administration;

(b) A license to operate a methadone treatment facility from the county in which the facility is (to be) located, unless the county has no such licensure requirement; and

(c) Registration with the Washington state board of pharmacy.

[Statutory Authority: RCW 69.54.040, 86-22-020 (Order 2438), § 275-19-040, filed 10/29/86. Statutory Authority: RCW 69.54.040 and 70.96A.090, 84-24-029 (Order 2171), § 275-19-040, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090, 81-24-081 (Order 1727), § 275-19-040, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-040, filed 2/1/80.]

WAC 275-19-050 Suspension, cancellation, or revocation of approval. (1) Failure to be in substantial compliance with the requirements of chapters 69.54 and/or 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.

(2) The department may cancel approval if a facility ceases to provide the services for which the facility has been approved.

(3) The department may cancel approval if a facility fails to pay the required certification fee within thirty days after a certificate of approval is issued.

(4) Disqualified applicants.

(a) Each and every individual named in an application for treatment facility approval shall be considered separately and jointly as applicants and, if anyone be deemed unqualified by the department in accordance with the law or these rules and regulations, the approval may be denied, suspended, or revoked.

(b) Approval may be denied, suspended, or revoked for any of the following:

(i) Obtaining or attempting to obtain approval by fraudulent means or misrepresentation;

(ii) Knowingly permitting, aiding, or abetting the commission of any illegal act on the premises of the treatment facility;

(iii) Misappropriation of the property of the patients.

(5) When the department intends to suspend, revoke, or cancel approval, the chief of the office on alcoholism and/or the chief of the office of drug abuse or their designees shall have served upon the approved 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 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-050, filed 11/30/84, effective 1/1/85. 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 treatment facility or any facility seeking departmental approval shall be open to departmental inspection during any time the facility is serving clients, provided such inspection does not unduly disrupt client activity. The facility, the facility's programs (except for individual counseling sessions), and general records of operation shall be open for inspection in accordance with federal and state confidentiality laws. Such records shall include all policy and procedure documents required herein, personnel records, clinical records, fiscal records, and such other documents as may be needed to verify the provision of services and compliance with these regulations, and chapters 69.54 and/or 70.96A RCW.

(2) The facility administrator shall ensure a notice of the inspection is posted in a conspicuous place in the facility when the bureau gives an advance notice of the inspection.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-060, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-060, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-060, filed 2/1/80.]

WAC 275-19-070 All facilities—Availability of services. (1) Approved treatment facilities shall provide services to clients or to their families without regard to race, color, creed, national origin, religion, sex, sexual preference, age, or handicap consistent with WAC 275-19-075 (1)(c).

(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, toilet, and bath accommodations for the male and female clients.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-070, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-070, filed 2/1/80.]

WAC 275-19-075 All facilities—Clients' rights. (1) All approved treatment facilities shall take reasonable efforts to assure each client:

(a) Be treated in a manner promoting 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 disability, unless such disability makes treatment afforded by the facility nonbeneficial or hazardous. Reasonable actions shall be taken to accommodate disabled persons within the treatment program.

(d) Be protected from invasion of privacy: *Provided*, That reasonable searches may be conducted or other means used to detect and prevent contraband from being possessed or used on the premises.

(e) Have all clinical and personal information treated confidentially in communications with individuals not directly associated with the approved treatment facility.

(f) Have the opportunity to review his or her own treatment records in the presence of a 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 has the right to refuse participation in 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) A copy of these rights shall be posted in a conspicuous place in the facility.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-075, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-075, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-075, filed 2/1/80.]

WAC 275-19-080 All facilities—Facilities standards. (1) All treatment facilities shall meet applicable state and county requirements.

(2) Room for therapeutic activities will be provided which will meet the facility's treatment goals, objectives, and program needs.

(3) There shall be private space for personal consultation.

(4) Adequate heating, ventilation, and access to emergency exits shall be provided to assure the health and safety of clients.

(5) The physical plant, premises, and equipment shall be maintained in a clean and sanitary condition, free of hazards, and in good repair. The facility shall be located in an area free from hazardous conditions and accessible to other resources necessary to carry out the program.

(6) Facilities shall comply with applicable state and local building, fire, and health codes.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-080, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-080, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-080, filed 2/1/80.]

WAC 275-19-100 All residential facilities--Room and board standards. (1) Residential treatment facilities shall provide room, board, and client sundries if the client is not able to provide sundries for himself or herself.

(2) Sundries shall include items reasonably needed for good grooming and personal hygiene, and clothing that is neat, clean, and seasonable. Clients may be allowed a personal and incidental expense account in lieu of providing sundries. Goods and services sold to clients by the treatment center as sundries and charged to personal and incidental expense accounts shall be charged at cost.

(3) All food services and practices shall comply with chapter 248-84 WAC governing food storage, preparation, and service.

(4) Sleeping arrangements shall provide for clean bedding and separation of sleeping areas from cooking, eating, therapy, and administrative activities.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-100, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-100, filed 2/1/80.]

WAC 275-19-110 All facilities--Operators. (1) Treatment facilities shall be operated by a profit or nonprofit corporation, a partnership, an individual proprietor, an Indian tribe, or a unit of city, county, state, or federal government.

(2) A facility providing treatment services shall have an operator or operators legally responsible for the conduct of the service or services provided. The legally responsible operator or operators shall as a minimum:

(a) Obtain all required state, county, and city licenses, permits, and approvals.

(b) Maintain a current job description for the position of administrator meeting the requirements set forth in WAC 275-19-140 (4)(b).

(c) Establish the philosophy and overall objectives for the treatment facility and each distinct part thereof.

(d) Provide for the personnel, facilities, equipment, and supplies necessary for the care of clients and the maintenance and operation of the facility in accordance with applicable laws and regulations.

(e) Review and approve written personnel policies.

(f) Ensure the administration and operation of the facility is in compliance with these rules and applicable federal, state, and local laws and regulations.

(3) The owners of a partnership shall have a written partnership agreement outlining all of the business elements of the partnership. The partnership agreement shall be signed and dated by each partner.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-110, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-110, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-110, filed 2/1/80.]

WAC 275-19-130 All facilities--Administrator. (1) There shall be an administrator directly responsible for the operation of the treatment facility.

(2) The administrator shall demonstrate 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 or her stead. The administrator's authority and responsibility shall not be delegated to a person currently a client of the facility.

(4) The administrator shall ensure staff receive managerial and clinical information necessary to facilitate the delivery of services.

(5) The administrator shall ensure a written program manual meeting the requirements of WAC 275-19-135 is developed and adhered to. This manual shall be reviewed and revised as necessary, but no less than once each year.

(6) The administrator shall file with the department within thirty days of request, data, statistics, schedules, and other information the department reasonably requires.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-130, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-130, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-130, filed 2/1/80.]

WAC 275-19-135 All facilities--Program manual. All treatment facilities shall have a written program manual containing at a minimum:

(1) A cover sheet noting the date of the last review and update of the manual, signed by the person or persons making the review.

(2) A copy of the organization's articles of incorporation showing the state seal if the operator is a corporation, or a copy of the partnership agreement if the operator is a partnership.

(3) A copy of the facility's bylaws, if the operator is a corporation.

(4) A current copy of all city and state business licenses required by WAC 275-19-040, 275-19-080, and 275-19-110.

(5) The facility's philosophy on alcoholism and/or drug addiction.

(6) A list of the overall objectives of the organization.

(7) An organizational chart including all positions and specifying the functions of all the positions, including volunteers, within the facility.

(8) A delegation of authority policy meeting the requirements of WAC 275-19-130(3).

(9) Written personnel policies and procedures governing the qualifications of staff, job descriptions, hours of work, personnel benefits, hiring practices, termination procedures, promotional requirements, leave days, employee evaluations, employee grievance procedures, and staff ethical standards.

(10) A written plan describing how volunteers will be utilized per WAC 275-19-160.

(11) A written description of each treatment and educational program offered by the facility. Descriptions of each program shall include:

(a) Policies and procedures sufficient to describe how the service meets the applicable requirements of WAC 275-19-100 through 275-19-930.

(b) Client admission criteria.

(c) The objectives of the program.

(d) The number of hours of service and length of treatment or educational program.

(e) The criteria for client transfer and discharge from the program.

(f) An outline of each lecture and educational session included in the program. The outline shall be sufficient in detail for another trained staff person to deliver the educational session or lecture in the absence of the regular instructor. These outlines may be kept separate from the program manual.

(12) Follow-up policies and procedures providing for contact to be attempted after discharge with each client completing treatment.

(13) A procedure for the continuing evaluation of the services provided by the facility.

(14) Written policies and procedures governing implementation of the case management and case file maintenance requirements of WAC 275-19-170 and 275-19-180.

(15) Written policies and procedures governing the implementation of federal regulations on confidentiality of alcohol and drug abuse patient records (42 C.F.R., Part 2).

(16) A copy of the facility's client rights required in WAC 275-19-075.

(17) A copy of the facility's client grievance procedures.

(18) Written policies and procedures governing implementation of the physical and laboratory examination requirements of WAC 275-19-165(2).

(19) A copy of the facility's policies regarding the use of self-help groups (i.e., AA, NA, Alanon, and Naranon).

(20) Copies of all other policies relating to client care.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-135, filed 11/30/84, effective 1/1/85.]

WAC 275-19-140 All facilities--Personnel. (1) There shall be sufficient qualified counselors, clerical, and other support staff not currently clients to ensure the attainment of program service objectives and to properly maintain the treatment facility.

(2) Qualified counselors carrying a caseload shall not exceed one hundred hours of face-to-face client contact per full-time equivalent counselor per month. Residential treatment, excluding detoxification, shall in addition maintain a client to staff ratio not to exceed fifteen clients for each counselor.

(3) Personnel employed as counselors shall be qualified counselors or counselor trainees as described in WAC 275-19-145.

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

(a) Verification (transcripts, certificates, licenses, resumes, etc.) of the employee's qualifications for the assigned position.

(b) A copy of the employee's current job description, signed and dated by the employee, which includes: The job title, a summary of the duties and responsibilities, the minimum qualifications, and the title of the immediate supervisor.

(c) A record of an orientation acquainting the person with the contents of the program manual, the disaster plan for the facility, and the confidentiality of client information.

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

(e) Evidence of a tuberculin skin test or chest x-ray, as specified in chapter 248-26 WAC, and a record of any accidents occurring on duty.

(f) There shall be sufficient evidence in the records of the qualified counselors, assessment officers, and information school instructors to determine whether they have received the training and education necessary to meet and maintain the qualified status. The record shall include the date the person became a qualified counselor, assessment officer, or information school instructor.

(g) A signed and dated commitment to maintain confidentiality.

(h) Evidence employees providing client care in a detoxification center in the absence of licensed physicians or nurses have a valid and current red cross card or certificate for first-aid (or its equivalent) and annual training in cardiopulmonary resuscitation.

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

(6) All approved treatment facilities shall adhere to written personnel policies covering the qualifications of staff, job descriptions, hours of work, personnel benefits, hiring practices, termination procedures, promotional requirements, leave days, employee evaluations, grievance procedures, and staff ethical standards.

(7) Approved treatment facilities shall comply with state statutory and regulatory provisions regarding non-discrimination and affirmative action in employment and client services.

(8) Employees who are or were clients of the approved treatment facility shall have personnel records separate from clinical records. No indication of current or previous client status or client activity, including urinalysis results, may be entered in the personnel record of such an employee.

(9) Work may be assigned to the 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.

(10) Exclusion from employment shall not be based on former alcohol or drug use, former mental dysfunction, or former criminal convictions except as provided in chapters 9.96A and 49.60 RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-140, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-140, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-140, filed 2/1/80.]

WAC 275-19-145 All facilities—Qualified counselors, instructors, and assessment officers. (1) A "qualified alcoholism counselor" is a person having adequate education, experience, and knowledge regarding the nature and treatment of alcoholism, is knowledgeable about community resources providing 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. A qualified alcoholism counselor shall:

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

(b) Possess these qualifications:

(i) Satisfactory completion of a minimum twenty-four quarter (sixteen semester) credits of course work in an accredited institution of higher learning (college or university). Twelve quarter (eight semester) credits must be in specialized alcoholism courses exclusive of field experience credits. These twelve credits must include distinct courses in:

- (A) Introduction to or survey of alcoholism,
- (B) Physiological actions of alcohol and other drugs,
- (C) Alcoholism counseling.

The remaining twelve quarter (eight semester) credits may be in alcoholism, polydrug abuse, counseling, psychology, social work, human service, or social services.

(ii) Persons qualified as alcoholism counselors prior to January 1, 1984, shall have satisfactorily completed a minimum of twelve quarter credits (eight semester credits) of course work in an accredited institution of higher learning (college or university). Six quarter (four semester) credits must be in specialized alcoholism courses. The remaining six quarter (four semester) credits may be in alcoholism, counseling, psychology, sociology, or social work.

(iii) Shall have completed two thousand hours (approximately one year) of work experience supervised by a qualified alcoholism counselor in a counseling capacity in an approved alcoholism agency or facility. Work experience may include hours spent in supervised field experience under academic supervision.

(c) Shall maintain the qualified counselor status by completing the following requirements within each two years of service.

(i) Sixty clock hours of continuing education, including at least fifteen clock hours in which alcoholism or counseling alcoholic people or families is the primary part of the course content, as evidenced by the course description and/or syllabus. The remaining forty-five clock hours may be in such alcoholism specific subject areas, in subject areas that will increase the counselor's

knowledge and skills in counseling, and aiding the alcoholic person or family to recover, or in the management of treatment services.

(ii) For any portion of these sixty clock hours of continuing education, each college quarter credit shall be equivalent to fifteen clock hours of continuing education, each college semester credit shall be equivalent to twenty-two and one-half hours of continuing education.

(iii) In-service training does not satisfy this requirement, but short courses or workshops meeting the conditions in this section may be used.

(iv) Workshops and trainers must be approved by the bureau of alcohol and substance abuse.

(2) A "qualified drug abuse counselor" is a person capable of assessing the emotional, social, and behavioral background and status of a client, determining an appropriate 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 qualified drug abuse counselor or a masters or doctoral degree in the behavioral sciences and one year of such experience shall be sufficient to establish a person to be a qualified drug abuse counselor. A qualified drug abuse counselor shall:

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

(b) Qualification may also be gained by demonstrating and documenting he or she:

(i) Has earned a high school diploma or has received the equivalent;

(ii) Has at least one year of full-time experience as a drug abuse treatment trainee in an approved drug abuse treatment center under the supervision of a qualified drug abuse counselor;

(iii) Has demonstrated competency as a substance abuse counselor as measured by a competency evaluation approved by the department. The competency evaluation shall consist of an assessment of his or her knowledge and skill in the areas of referral, crisis intervention, treatment planning, intake and evaluation, communications, treatment modalities and methods, confidentiality, professional integrity, and the nature of substance abuse.

(c) Qualifying experience for purposes of this subsection shall not include experience gained while a client in a drug abuse treatment facility. Part-time experience may be accumulated to meet the experience requirements.

(d) Subsequent to initial qualification, a person will remain qualified as a drug abuse counselor as long as he or she has taken at least fifty hours per year of continuing education and training in subject matter relevant to the duties and responsibilities of a qualified, drug abuse counselor exclusive of case staffing, case conferences, and supervisory meetings. A maximum of twenty-five hours of this requirement may be in training sponsored by his or her employer.

(e) The qualified drug abuse counselor shall attest to and document at least once every two years these conditions are met.

(f) A drug abuse counselor failing to remain qualified may requalify in the manner prescribed for initial qualification.

(3) Counselor trainees may be employed by an approved treatment facility, provided the following conditions are met:

(a) The trainee has no history of alcohol or other drug misuse for a period of one year immediately prior to the time of employment as a counselor trainee and no misuse of alcohol or other drugs while employed as a counselor trainee.

(b) Each trainee must be directly supervised and tutored by a qualified counselor who shall be responsible for the professional conduct of that trainee. The qualified counselor must:

(i) Observe the trainee in the various clinical activities.

(ii) Instruct the trainee in counseling techniques, attitudes, and theories.

(iii) Assign and review all intake histories, assessments, and treatment plans prepared by the trainee.

(iv) Review client files and serve as case manager for all cases assigned to trainee. A note giving the results of the review must be placed in each client file.

(v) Instruct the trainee in the preparation and maintenance of case files and client confidentiality.

(vi) Instruct the trainee on the accepted standards of professional ethics for counselors.

(c) An individualized training and education plan shall be prepared by the treatment facility administrator for each person employed as a counselor trainee. The training and education plan shall be designed to bring the trainee up to the qualified counselor status within two years of the date the person is employed as a counselor trainee.

(4) A "qualified assessment officer" is a person who:

(a) Is employed as a probation officer for a district or municipal court within the state of Washington;

(b) Meets the requirements of a qualified alcoholism counselor as defined in WAC 275-19-145(1), except the two thousand hours of supervised work may be satisfied by completing an equivalent number of hours of supervised work doing assessments within a probation department.

(5) Assessment officer trainees may be employed by an approved probation assessment facility provided the following conditions are met:

(a) The trainee has no history of alcohol or other drug misuse for a period of one year immediately prior to the time of employment as an assessment officer trainee and no misuse of alcohol or other drugs while employed as an assessment officer trainee.

(b) Each trainee must be directly supervised and tutored by a qualified assessment officer. The qualified assessment officer must:

(i) Observe the trainee in conducting assessments.

(ii) Instruct the trainee in assessment techniques, attitudes, and theories.

(iii) Assign and review all assessments prepared by the trainee.

(iv) Review all client files prepared by the trainee. A note giving the results of the review must be placed in each client file.

(c) An individualized training and education plan shall be prepared by the probation assessment facility administrator for each person employed as an assessment officer trainee. The training and education plan shall be designed to bring the trainee up to the qualified assessment officer status within two years of the date the person is employed as an assessment officer trainee.

(6) A "qualified alcohol or drug information school instructor" is a person possessing a certificate of completion of the alcohol or drug information school instructor's training course offered or authorized by the bureau of alcohol and substance abuse.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-145, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-145, filed 11/4/83.]

WAC 275-19-150 All facilities--Student practice.

(1) If a 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. The 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.

(2) Student interns may provide counseling services provided the requirements set forth in WAC 275-19-145 (3)(a) and (b) are met.

(3) Each student shall sign a confidentiality statement which shall be kept on file at the treatment facility.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-150, filed 11/30/84, effective 1/1/85. 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 working in counselor staff roles shall be directly supervised by a qualified counselor.

(2) Volunteers shall meet the qualifications of the position they are assigned.

(3) Programs using volunteers shall have a written plan describing how volunteers will be utilized and a written job description for each position filled by a volunteer.

(4) Each volunteer shall sign and date a commitment to maintain confidentiality which shall be kept on file by the agency.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-160, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-160, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-160, filed 2/1/80.]

WAC 275-19-165 All facilities--Outpatient and residential intake and clinical requirements. (1) Approved outpatient and residential treatment facilities except detoxification facilities shall provide the following:

(a) An intake interview, conducted by a qualified counselor or other qualified staff working under the direct supervision of a qualified counselor. The interview shall include a social history, a medical history, a history of alcohol abuse and/or drug abuse, and previous alcohol and/or drug treatment. This interview must be completed within twenty-four hours of admission.

(b) An evaluation and assessment of the client's involvement with alcohol and/or drugs supported by a list of the signs and symptoms observed. The evaluation and assessment must be completed within twenty-one days of admission or by the third visit, whichever comes earlier, in an outpatient facility and within five days of admission in a residential facility.

(c) An individual treatment plan designed to help the person understand his or her alcohol or drug problem, taking into account all case history and diagnostic information. The plan shall include the specific problems to be addressed, the objectives to be accomplished in treating the problems, the time-linked means to be used in achieving the objectives, and the anticipated length of treatment. The initial treatment plan must be prepared within twenty-one days of admission or by the third visit, whichever comes earlier, in an outpatient facility and within five days of admission in a residential facility.

(d) A copy of the program rules governing the client will be provided to the applicant prior to signing any treatment consent forms.

(2) All facilities shall have written policies and procedures specifying the program's physical and laboratory examination requirements. The policies shall include at least the following basic requirements:

(a) Residential drug addiction or drug abuse treatment clients must have a complete physical and laboratory examination.

(b) All methadone treatment clients must have physical and laboratory examinations performed in accordance with federal regulations governing the use of methadone for treating narcotic addicts.

(c) All clients showing current intravenous drug use must have a physical examination.

(d) All clients showing current dependence of barbiturates or benzodiazepines must be examined by a physician to determine if they should be referred to a program or hospital capable of providing gradual withdrawal.

(3) Physical examinations, if required, must be completed and the report placed in the client's file no later than twenty-one days following admission. Physical examinations completed by a private physician ninety days or less prior to intake may be accepted.

(4) There shall be at least one face-to-face group or individual session for each client every month in outpatient programs, and at least one such session every week in residential programs.

(5) All approved treatment facilities shall have a documented review of each case by a qualified counselor. These reviews shall assess the adequacy of the treatment

plan in light of the client's current status and progress. The reviews shall be conducted according to the following minimum schedule:

(a) Once every two weeks in recovery houses,

(b) Once each month in extended care recovery houses,

(c) Once every two weeks in long-term,

(d) Once each week in intensive inpatient,

(e) Once each month in outpatient,

(f) Once every twenty hours of client services in intensive outpatient.

(6) All treatment services using chemotherapy shall provide the following medication services:

(a) Medication evaluation by a medical practitioner at least once every ninety days except for medications prescribed by the client's own physician.

(b) A medication dispensary if the program is providing methadone treatment.

(7) Medications shall be secured and disbursed in accordance with the requirements of chapter 248-26 WAC.

(8) Clients using disulfiram must be participating in a counseling program.

(9) Upon completion of the course of treatment, except in detoxification facilities, an aftercare plan shall be developed assisting the client in maintaining treatment goals. The client shall be assisted in identifying and making contact with any agencies or services as may be necessary.

(10) When referring a client to another approved treatment facility, the following documentation shall be sent to that facility prior to the arrival of the client, or accompany the client to the facility, provided a release of confidential information has been authorized by the client:

(a) A copy of the client intake form.

(b) A record of the assessment.

(c) A record of the client's treatment history.

(d) The reason for the referral (self, family, court order).

(e) Court mandated or agency recommended follow-up treatment.

(f) A copy of the discharge summary.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-165, filed 11/30/84, effective 1/1/85.]

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

(a) Providing for maintenance of a current and complete record for each client;

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

(c) Ensuring confidentiality of patients' case records by storing and handling the records under conditions meeting all pertinent federal, state, and local regulations governing such records;

(d) Including all required state and county data; and

(e) Reflecting all financial transactions of the facility.

(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 treatment facility is closed, clinical records may be forwarded to any other approved 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 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.

(3) Residential and outpatient facilities shall have individual case records including the following:

(a) An intake form including the client's full name; sex; birthdate; home address; date of admission; name, address, and telephone number of the client's next of kin or other responsible person; name and city of the client's personal physician, if any.

(b) A record of the assessment of the client's involvement with alcohol and/or drugs including the signs and symptoms.

(c) An individualized treatment plan as prescribed in WAC 275-19-165 (1)(c). Doctor's standing orders shall be considered as a treatment plan in inpatient detoxification facilities.

(d) Progress notes on the client's response to treatment relating to the treatment plan and noting all significant events occurring during treatment. At least one progress note every work shift must be entered in inpatient detoxification client's file.

(e) A record of the treatment plan review required by WAC 275-19-165(5).

(f) Each entry in a client's record shall be authenticated.

(g) A copy of any program rules signed and dated by the client.

(h) A voluntary consent to treatment form, signed and dated by the client.

(i) A properly completed authorization for release of information form.

(j) A copy of the client's aftercare plan.

(k) At completion of treatment, a discharge summary including the date of discharge, and a summary of the client's progress in meeting the objectives outlined in the treatment plan. In detoxification facilities, the summary shall outline the client's physical condition relating to detoxification or withdrawal.

(l) Medical records in accordance with chapter 248-26 WAC.

(4) DWI client assessment service facilities including probation assessment facilities shall have individual case records including at a minimum:

(a) An intake form including the client's full name, sex, birthdate, and home address.

(b) The dates of contacts.

(c) A copy of the completed Washington alcohol screening inventory showing the client's score.

(d) A copy of the client's driving record obtained from the department of licensing files.

(e) A record of the client's blood alcohol level at the time of arrest or documentation the information was not available.

(f) A record of the client's alcoholism and/or drug treatment history.

(g) The name of the court referring the client for assessment, including the name of the sentencing judge.

(h) A record of the evaluation and assessment of the client's involvement with alcohol and other drugs as required by WAC 275-19-185.

(i) A properly completed authorization for the release of information form.

(j) Copies of any assessment reports sent to the department of licensing, referring court, the client's attorney, or other person or agency.

(k) Copies of all correspondence relating to the client.

(l) Each entry in a client's record shall be authenticated.

(5) Alcohol information schools or drug information schools shall have individual case records including:

(a) An intake form, including the client's full name, sex, birthdate, and home address;

(b) Dates in attendance;

(c) Source of referral;

(d) Copies of all reports, letters, certificates, and other correspondence sent to attorneys, courts, department of licensing, or any other agency;

(e) A record of any referral of the client to other services;

(f) A properly completed authorization for release of information form;

(g) A copy of the completed post-test as written in *An Instructor's Guide to Alcohol Information School*, published January 1980, as now or hereafter amended.

(h) Each entry in a client's record shall be authenticated.

(6) Emergency service patrols shall maintain a log including:

(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 and sex of the person transported,

(e) The destination of transport (either home or inpatient detoxification facility), and

(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 signed by the person making the entry.

(7) All residential treatment facilities shall have a permanent, current register of all persons admitted for care or treatment. This shall include at a minimum the date of admission, the client's name, and the date of discharge or transfer.

[Statutory Authority: RCW 69.54.040 and 70.96A.090, 84-24-029 (Order 2171), § 275-19-170, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040, 83-23-008 (Order 2044), § 275-19-170, filed 11/4/83. Statutory Authority: RCW 70.96A.090, 81-24-081 (Order 1727), § 275-19-170, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-170, filed 2/1/80.]

WAC 275-19-180 Residential and outpatient facilities--Case management. (1) The treatment rationale shall be designed to achieve total abstinence for all diagnosed alcoholics and drug addicts.

(2) Concurrent drug and alcohol use shall be explored with each client.

(3) For each client there shall be a case manager responsible for completeness of records and documentation of progress toward an attainment of the treatment objectives.

(4) Case managers shall be:

(a) Qualified counselors in all intensive inpatient, long-term treatment, recovery house, extended care recovery house, outpatient, and intensive outpatient facilities.

(b) Qualified counselors or licensed nurses in detoxification facilities. Only qualified counselors shall conduct the assessments of the client's involvement with alcohol or drugs and provide counseling services in a detoxification facility.

(5) Case managers shall conduct the client evaluation and assessment, develop the individualized treatment plan, conduct the treatment plan reviews required by WAC 275-19-165 (1)(b) and (c) and 275-19-165(5), and develop aftercare plans and discharge summaries.

(6) Case managers shall be responsible to follow up on clients missing appointments and to pursue all opportunities to keep the client in treatment. In the event a client, who has been court ordered to a treatment program aborts the treatment program, that fact shall be promptly reported to the committing authority provided an authorization for the release of confidential information is on file.

(7) There shall be a documented quarterly review of the adequacy of at least four case files of each counselor by the clinical supervisor.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-180, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-180, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-180, filed 2/1/80.]

WAC 275-19-185 Assessment procedures. (1) The procedures for assessing DWI client's involvement with alcohol and other drugs shall include as a minimum the following:

(a) A written test of each client, using as a minimum, the Washington alcohol screening inventory.

(b) A review of the following:

(i) When available, the client's blood alcohol level at the time of arrest for any alcohol-related offense;

(ii) A copy of the client's driving record.

(c) A diagnostic interview with each client which gathers as a minimum:

(i) A history of the client's involvement with alcohol and drugs, including frequency of use, volume, and type of substance used.

(ii) The client's statement concerning his or her current physical condition.

(iii) Sociological data describing the client's most recent living situation (e.g., family, environment, employment, and school).

(2) A written assessment, based upon the information collected per WAC 275-19-185(1), shall be completed. It shall include as a minimum the following:

(a) The client's raw score and percentile score from the Washington alcohol screening inventory.

(b) The client's own assessment of his or her involvement with alcohol or other drugs.

(c) The qualified counselor's or the qualified assessment officer's evaluation of the information required by WAC 275-19-185 (2)(a) and (b), a diagnostic statement specifically describing the client's involvement with alcohol or other drugs, and the signs and symptoms leading to that assessment.

(3) Inform the client of the results of the assessment. If the assessment concludes the person has an alcohol or drug problem requiring treatment, the person shall be advised to seek appropriate, approved alcoholism or drug treatment. If the assessment concludes the person requires only alcohol or drug education, the person shall be advised to attend an approved alcohol or drug information school.

(4) All reports required by the courts and the department of licensing shall be properly completed and shall be submitted in a timely manner.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-185, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-185, filed 11/4/83.]

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 and/or drugs as described in WAC 275-19-020. To be approved as a treatment facility to provide detoxification services, the facility must comply with the requirements of WAC 275-19-010 through 275-19-299 and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-200, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-200, filed 2/1/80.]

WAC 275-19-210 All detoxification facilities--Clients. Admission of clients to a detoxification facility shall be limited to persons needing detoxification services and not manifesting signs and symptoms of a condition warranting medical treatment not provided at the facility. Detoxification facilities shall provide services to incapacitated persons unless uncontrollable because of violent behavior.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-210, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-210, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-210, filed 2/1/80.]

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 warranting treatment in a hospital and whether he or she needs detoxification;

(2) Detoxification of intoxicated persons or persons in withdrawal;

(3) Counseling of clients regarding their illness by a qualified counselor;

(4) Referral of clients to other appropriate treatment services.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-220, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-220, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-220, filed 2/1/80.]

WAC 275-19-230 All detoxification facilities--Admission screening. All clients shall be screened prior to admission by a person knowledgeable about alcoholism and/or drug addiction, 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 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-230, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-230, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-230, filed 2/1/80.]

WAC 275-19-240 All detoxification facilities--Counseling. (1) There shall be on staff at least one qualified counselor and such additional qualified counselors as necessary to provide the counseling services needed by the clients. The treatment facility may meet this requirement by having in effect a written agreement with another approved treatment facility.

(2) Counseling services shall be designed to facilitate motivation of the person to accept referral into a continuum of care for alcoholism and/or drug addiction.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-240, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-240, filed 2/1/80.]

WAC 275-19-250 All detoxification facilities--Social and recreational activities. There shall be a specific area designated for the provision of social activities for clients.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-250, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-250, filed 2/1/80.]

WAC 275-19-260 All detoxification facilities--Discharge and referral. Clients discharged shall be referred to an approved treatment facility when appropriate and/or other health care facility when necessary.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-260, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-260, filed 2/1/80.]

WAC 275-19-270 Acute detoxification--Additional requirements. Any treatment facility providing acute detoxification services shall comply with the following additional requirements:

(1) The client's physical and health care needs shall be met by practices meeting the standards set forth in chapter 248-26 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 248-26 WAC.

(2) All personnel providing client care in the absence of licensed physicians or nurses in the facility shall possess:

(a) A valid and current red cross card or certificate for first aid; and

(b) Cardiopulmonary resuscitation or the equivalent annually.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-270, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-270, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-270, filed 2/1/80.]

WAC 275-19-280 Subacute detoxification--Additional requirements. Treatment facilities providing subacute detoxification services shall comply with the following additional requirements:

(1) Subacute detoxification facilities shall meet the requirements set forth in chapter 248-26 WAC.

(2) No more than twenty clients shall be served in any one facility or separate units within a 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 248-15 WAC available within ten minutes.

(4) Prescription medication shall not be provided for management of withdrawal discomfort.

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

(6) All personnel providing client care in the absence of licensed physicians or nurses in the facility shall possess:

(a) A valid and current red cross card or certificate for first aid; and

(b) Cardiopulmonary resuscitation or the equivalent annually.

(7) All personnel except licensed physicians providing client care shall have completed a minimum of forty hours of documented training in alcoholism and/or drug addiction prior to or within six months of the date of employment.

(8) All furnishings and the general decor shall reflect a homelike 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) Sleeping areas shall be arranged so as to permit observation of residents and encourage resident communication.

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

(d) 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 entry.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-280, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-280, filed 12/2/81; 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 treatment services as defined in WAC 275-19-020. To be approved as a treatment facility to provide intensive treatment services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-300 through 275-19-399, chapter 248-26 WAC, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-300, filed 11/30/84, effective 1/1/85. 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 or withdrawal shall not be admitted or retained but shall be referred or transferred to a detoxification facility unless they manifest signs and symptoms of a condition warranting acute care and treatment in a hospital.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-310, filed 11/30/84, effective 1/1/85. 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 program and staff sufficient to provide the following services by qualified counselors:

- (1) Education of clients regarding alcohol, alcoholism, drugs, and drug addiction;
- (2) Intensive individual and group counseling;
- (3) A minimum of twenty hours of counseling services per week for each client;
- (4) Social and recreational activities;
- (5) Aftercare planning;
- (6) Discharge and referral to necessary supportive organizations and agencies; and
- (7) An invitation and encouragement to family members to participate in their own treatment program and in the treatment of the client. Family members shall be informed of the desirability of participation in family counseling, Alanon, Naranon, Alateen, and other self-help or specific group or individual resources, and be encouraged to pursue these subsequent to treatment.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-320, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-320, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-320, filed 2/1/80.]

WAC 275-19-400 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 long-term treatment services as described in WAC 275-19-020. To be approved as a treatment facility to provide long-term treatment services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-400 through 275-19-499, chapter 248-26 WAC, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-400, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-400, filed 2/1/80.]

WAC 275-19-410 Long-term treatment facilities--Clients. Persons needing detoxification or withdrawal shall not be admitted or retained but shall be referred or transferred to a detoxification facility unless they manifest signs and symptoms of a condition warranting acute care and treatment in a hospital.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-410, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-410, filed 2/1/80.]

WAC 275-19-430 Long-term treatment facilities--Required services. There shall be an organized program and staff sufficient to provide the following services by qualified counselors:

- (1) Education of clients regarding alcohol and alcoholism, drugs, and drug addiction;
- (2) Individual and group counseling;
- (3) Education concerning social and life-coping skills;
- (4) Social and recreational activities;
- (5) When appropriate, assistance in finding employment;
- (6) Aftercare planning; and
- (7) Discharge referral to necessary supportive organizations and agencies.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-430, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-430, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-430, filed 2/1/80.]

WAC 275-19-500 Recovery house facilities--Purpose. The purpose of WAC 275-19-500 through 275-19-549 is to provide specific operational program standards for facilities providing recovery house services as described in WAC 275-19-020. To be approved as a treatment facility to provide recovery house services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-500 through 275-19-549, chapter 248-26 WAC, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-500, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-500, filed 2/1/80.]

WAC 275-19-510 Recovery house facilities—Clients. Persons needing detoxification shall not be admitted or retained but shall be referred or transferred to a detoxification facility unless they manifest signs and symptoms of a condition warranting acute care and treatment in a hospital.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-510, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-510, filed 2/1/80.]

WAC 275-19-530 Recovery house facilities—Required services. There shall be an organized program and staff sufficient to provide the following services by qualified counselors:

(1) A minimum of four and one-half hours of counseling services per week for each client. If group counseling services are provided, not more than fifteen clients may be in a group;

(2) When appropriate, assistance in finding employment;

(3) Referral to necessary supportive organizations and agencies.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-530, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-530, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-530, filed 2/1/80.]

WAC 275-19-550 Extended care recovery house facilities—Purpose. The purpose of WAC 275-19-550 through 275-19-599 is to provide specific operational program standards for facilities providing extended care recovery house services as described in WAC 275-19-020. To be approved as a treatment facility to provide extended care recovery house services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-550 through 275-19-599, chapter 248-26 WAC, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-550, filed 11/30/84, effective 1/1/85. Statutory Authority: Chapter 70.96A RCW. 83-18-027 (Order 2017), § 275-19-550, filed 8/31/83.]

WAC 275-19-560 Extended care recovery house facilities—Clients. Persons needing detoxification shall not be admitted or retained but shall be referred or transferred to a detoxification facility unless they manifest signs and symptoms of a condition warranting acute care and treatment in a hospital.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-560, filed 11/30/84, effective 1/1/85.]

WAC 275-19-570 Extended care recovery house facilities—Required services. There shall be an organized program and staff sufficient to provide the following services:

(1) A minimum of four and one-half hours of treatment services per week by qualified counselors to include the following:

(a) Education regarding living sober and drug-free;

(b) Individual and/or group counseling conducted by qualified counselors. If group counseling services are provided, not more than fifteen clients may be in a group.

(2) When appropriate, assistance in finding employment.

(3) Referral to necessary supportive organizations and agencies.

(4) A program designed to provide treatment services to alcoholics or drug addicts meeting one of the following admissions criteria:

(a) Received detoxification services three or more times within three months prior to the referral agency's current client evaluation date. Detoxification or withdrawal services must have been received in a licensed hospital or in a state-approved detoxification facility.

(b) Received intensive inpatient treatment in a state-approved treatment facility for a period of seven days or more within six months prior to the referral agency's current client evaluation date.

(c) Received long-term, recovery house, or extended care recovery house treatment in a state-approved treatment facility for a period of seven days or more within six months prior to the referral agency's current client evaluation date.

(d) Accepted voluntary treatment in lieu of being involuntarily committed to extended care recovery house treatment. A copy of the signed, dated, and completed involuntary commitment petition having been filed with the superior court; the client's signed voluntary admission to treatment, and any other supporting information must accompany clients sent to an extended care recovery house treatment facility. These documents must be placed in the client's file at the extended care recovery house facility.

(e) Has been involuntarily committed to an extended care recovery house treatment facility per RCW 70.96A.140.

(5) The program shall be designed to provide client care and treatment for a period in excess of sixty days.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-570, filed 11/30/84, effective 1/1/85.]

WAC 275-19-600 Outpatient treatment facilities—Purpose. The purpose of WAC 275-19-600 through 275-19-649 is to provide specific program standards and objectives for approval of facilities providing outpatient treatment services as described in WAC 275-19-020. To be approved as a treatment facility to provide outpatient treatment services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-600 through 275-19-649, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-600, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-600, filed 2/1/80.]

WAC 275-19-610 Outpatient treatment facilities-- Required services. There shall be an organized program and staff sufficient to provide the following services by qualified counselors:

- (1) Assessment of each client's needs regarding specific alcohol-related and/or drug-related problems as perceived by the client, center staff, and, if possible, involved others;
- (2) Immediate evaluation for persons in a crisis;
- (3) Individual and group counseling on a scheduled basis;
- (4) Education on alcohol and drugs; and
- (5) Discharge and referral to necessary supportive organizations and agencies.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-610, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-610, filed 11/4/83. Statutory Authority: RCW 70.96A.090. 81-24-081 (Order 1727), § 275-19-610, filed 12/2/81; 80-02-136 (Order 1486), § 275-19-610, filed 2/1/80.]

WAC 275-19-650 Intensive outpatient facilities-- Purpose. The purpose of WAC 275-19-650 through 275-19-699 is to provide specific operational program standards for facilities providing intensive outpatient services as described in WAC 275-19-020. To be approved as a treatment facility to provide intensive outpatient treatment services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-650 through 275-19-699, chapter 248-26 WAC, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-650, filed 11/30/84, effective 1/1/85.]

WAC 275-19-660 Intensive outpatient facilities-- Required services. There shall be an organized program and staff sufficient to provide the following services by qualified counselors:

- (1) Assessment of each client's needs regarding specific alcohol and/or drug-related problems as perceived by the client, facility staff, and if possible involved others.
- (2) Screening criteria shall be developed and applied including such diagnostic techniques as needed to assure the appropriateness of placement in this treatment modality. The diagnosis shall, at a minimum, include an assessment of the client's:
 - (a) Progression in the disease of alcoholism and/or drug addiction;
 - (b) Motivation for recovery and the ability to attain and maintain abstinence on an outpatient basis;
 - (c) Social support systems, including family or significant others, financial condition, and employment status; and
 - (d) Physical health and general mental status.
- (3) Program requirements. The following services shall be provided to clients and their families:

- (a) The program shall deliver a minimum of seventy-two hours of treatment services within a maximum of twelve weeks. The first four weeks of treatment must

consist of a minimum of three sessions of at least one hour each on three separate days of each week.

(b) A review of each active case by the client's case manager not less than once in every twenty hours of treatment. This review shall be noted in the client's case file.

(c) Individual counseling sessions with each client every twenty hours of treatment and additionally as needed.

(d) Education of clients regarding alcohol, alcoholism, and/or drugs and drug addiction;

(e) No more than twenty percent of treatment time shall consist of film presentations.

(f) Group therapy sessions. Sessions shall be limited in attendance to no more than twelve clients per counselor.

(g) Whenever possible, the client's family or other social support system shall be substantially involved in the treatment program.

(h) Upon completion of intensive outpatient treatment, the client shall be referred to a structured after-care program.

(i) All clients and their families shall be encouraged to participate in Alcoholics Anonymous, Alanon, Alateen, Narcotics Anonymous, and Naranon as appropriate.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-660, filed 11/30/84, effective 1/1/85.]

WAC 275-19-700 Crisis intervention facilities-- Purpose. The purpose of WAC 275-19-700 through 275-19-749 is to provide specific program operational standards for facilities providing crisis intervention services as defined in WAC 275-19-020. To be approved as a facility to provide crisis intervention services, the facility must comply with the applicable requirements of WAC 275-19-700 through 275-19-749, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-700, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-700, filed 11/4/83. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-700, filed 2/1/80.]

WAC 275-19-710 Crisis intervention facilities-- Required services. Approved facilities providing crisis intervention services must meet the following requirements:

- (1) Have and maintain a current list of all approved alcohol and drug treatment facilities in the state.
- (2) Have a current list of local services, if any, for legal, employment, education, training, mental health and physical health problems.
- (3) Have services available twenty-four hours per day, seven days a week.
- (4) All personnel providing client services must have completed a minimum of forty hours of training in crisis intervention techniques, alcoholism, and drug abuse.
- (5) Crisis intervention facilities shall maintain records of each client contact including the problem presented, the outcome of the case, a record of any referral made, the signature of the person handling the case, and, where known, the name, age, sex, and race of the client.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-710, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-710, filed 2/1/80.]

WAC 275-19-750 DWI client assessment services-- Purpose. The purpose of WAC 275-19-750 through 275-19-799 is to provide specific program standards for approval of facilities providing DWI client assessment services as described in WAC 275-19-020. To be approved as a treatment facility to provide DWI client assessment services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-750 through 275-19-799, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-750, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-750, filed 11/4/83.]

WAC 275-19-760 DWI client assessment services-- Clients. Admission of clients to a treatment facility providing DWI client assessment services shall be limited to persons who have been arrested for a violation of driving while under the influence of intoxicating liquor or drugs (RCW 46.61.502), or actual physical control of a motor vehicle while under the influence of intoxicating liquor or drugs (RCW 46.61.504), or petitioning for a deferred prosecution (chapter 10.05 RCW) for those offenses.

[Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-760, filed 11/4/83.]

WAC 275-19-770 DWI client assessment services-- Required services. (1) Qualified counselors or qualified assessment officers as defined in WAC 275-19-145 shall provide the following services:

(a) Assess client's involvement with alcohol and other drugs using, as a minimum, the Washington alcohol screening inventory and a diagnostic interview as required by WAC 275-19-185.

(b) Prepare a written assessment statement of each client's involvement with alcohol and other drugs which includes all of the information required by WAC 275-19-185.

(c) Inform each client of the right to select and be referred to an approved alcohol or drug treatment facility for services which are consistent with the assessment.

(2) Provide any requested reports of the assessment, in the format required, to the court of jurisdiction, the department of licensing, and any other authorized agency or person.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-770, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-770, filed 11/4/83.]

WAC 275-19-800 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 information school services, as described in WAC 275-19-020. To be approved as a treatment facility to provide information

school services, the facility must comply with the requirements of WAC 275-19-010 through 275-19-199, 275-19-800 through 275-19-899, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-800, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-800, filed 2/1/80.]

WAC 275-19-810 Information school--School requirements. (1) The course shall be taught by a qualified information school instructor as defined in WAC 275-19-145. This requirement shall become effective July 1, 1984.

(2) Prior to beginning the first lesson, the instructor shall:

(a) Advise the students the course:

(i) Does not assume they are all alcoholics or drug addicts.

(ii) Is not a therapy session.

(b) Clearly identify and share the class rules with the students.

(c) Share the course objectives with the students.

(3) Seating shall be adequate and comfortable.

(4) Rooms shall be well-lit and well-ventilated.

(5) All reports required by the courts and the department of licensing shall be properly completed and shall be submitted in a timely manner.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-810, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-810, filed 11/4/83. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-810, filed 2/1/80.]

WAC 275-19-820 Information school--Curriculum.

(1) The information course must be taught following the content and objectives outlined in *An Instructor's Guide to Alcohol Information School*, published January 1980, as now or hereafter amended.

(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 or 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.

(5) The post-test as written in *An Instructor's Guide to Alcohol Information School*, published January 1980, as now or hereafter amended, shall be administered to

each enrolled student after the instruction sessions are completed.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-820, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-820, filed 11/4/83. Statutory Authority: RCW 70.96A.090. 80-02-136 (Order 1486), § 275-19-820, filed 2/1/80.]

WAC 275-19-830 Information school--Fees. All students shall be advised of the designated fees at the time of enrollment for the school.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-830, filed 11/30/84, effective 1/1/85. Statutory Authority: RCW 70.96A.040. 83-23-008 (Order 2044), § 275-19-830, filed 11/4/83. 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 a treatment facility to provide emergency service patrol services, the facility must comply with the applicable requirements of WAC 275-19-010 through 275-19-199, 275-19-900 through 275-19-999, and chapters 69.54 and/or 70.96A RCW.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-900, filed 11/30/84, effective 1/1/85. 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. Services shall be limited to those persons in the state of intoxication and/or incapacitated by alcohol or drugs.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-910, filed 11/30/84, effective 1/1/85. 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 in a public place.

(2) Patrol an assigned area and give direct assistance to those intoxicated in a public place.

(3) A general assessment of the client's condition with regard to his or her state of inebriation, and the presence of a physical condition requiring medical attention.

(a) If a person is intoxicated but subdued and is willing to accept this service, transport him or her to his or her home, approved treatment facility, or other health facility.

(b) If the person appears to be incapacitated, unconscious, or 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 treatment facility or other health facility.

[Statutory Authority: RCW 69.54.040 and 70.96A.090. 84-24-029 (Order 2171), § 275-19-920, filed 11/30/84, effective 1/1/85. 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.]

WAC 275-19-940 All methadone treatment facilities--Intake requirements. (1) Sick physicals. Methadone treatment facilities shall provide each patient, upon application by the patient for admission to methadone treatment, a sick physical by a program physician or other appropriately licensed health professional. Methadone treatment facilities shall not prescribe methadone for a patient until a sick physical has been completed and a diagnosis of current physiological dependence on an opiate drug has been reached, except as provided in subsections (8) and (9) of this section. The sick physical shall include observations of the presence or absence of the following signs which shall be documented in the clinical file:

- (a) Rinorrhea.
- (b) Pupillary dilation.
- (c) Piloerection.
- (d) Elevated body temperature.
- (e) Elevated pulse rate.
- (f) Elevated blood pressure.
- (g) Elevated respiration rate.
- (h) Lacrimation.
- (i) Intravenous injection site scars.

(2) Overall health evaluation. Methadone treatment facilities shall conduct and document in the client file an overall health evaluation of each patient by a program physician or other appropriately licensed health practitioner within one week of admission to methadone treatment.

(3) Physician involvement in sick physicals. Methadone treatment facilities shall make a program physician available for consultation by telephone or in person when sick physicals are conducted by anyone other than a program physician. A program physician shall conduct sick physicals for all juvenile patients and for all adult patients with unusual or ambiguous signs or symptoms.

(4) Follow-up examination. Following the initial dose of methadone and following all subsequent dose increases, methadone treatment facilities shall conduct and document an in-person, physical examination of the patient. Such an examination shall be conducted as close to possible to the time when methadone blood levels are

highest, typically three to four hours after a dose is provided to the patient. The examination shall establish adequacy of dose, including signs and symptoms of withdrawal, patient comfort, and side effects from over-medication.

(5) Documentation of addiction history. Methadone treatment facilities shall note all observations, tests, reported symptoms, and documents certifying addiction history, and shall retain such documentation in the patient's clinical record. Methadone treatment facilities shall include in each patient file a summary analysis of all diagnostic data.

(6) Documentation of doses. Methadone treatment facilities shall note the date and amount of the initial dose and the date and amount of all dose changes in the patient's clinical record.

(7) Documentation of physiologic addiction. Methadone treatment facilities shall document evidence supporting diagnoses of addiction for all patients who are prescribed methadone. The department shall conduct an after-the-fact review of a random sample of all patient records, examining sick physical documentation and the resulting diagnosis.

(8) Exception to sick physicals. Recently detoxified patients. Methadone treatment facilities may restart methadone medication without a sick physical for patients detoxified from methadone within the last two years, who continue to receive at least one face-to-face counseling session per month, lasting at least forty-five minutes per session.

(9) Exception to sick physicals—Penal, chronic care, and pregnant clients. Methadone treatment facilities may admit and prescribe methadone to penal, chronic care, and pregnant patients without meeting sick physical requirements, provided the facility has followed the rules outlined in federal regulations, 21 C.F.R. Part 291.505 (d)(3)(iii)(a) and (b), adopted September 19, 1980.

[Statutory Authority: RCW 69.54.040, 86-22-020 (Order 2438), § 275-19-940, filed 10/29/86.]

WAC 275-19-950 All methadone treatment facilities—Urinalysis requirements. (1) Urinalysis frequency. All patients shall submit urine samples for urinalysis at least once per month. After a patient has a positive urine, the patient shall submit four urine samples per month for urinalysis. The patient shall continue to submit at least four samples per month until the patient has at least four consecutive negative urines, after which the patient may return to once-a-month submittal.

(2) Random sampling. Methadone treatment facilities shall randomly schedule all urine sample submissions, without prior warning to the patient.

(3) Sampling procedures. Methadone treatment facilities shall ensure staff observation of all collections of urine samples. Facility staff shall seal samples immediately in patient's presence with a prenumbered seal. The patient shall initial a log of sample seal numbers next to the seal number. Methadone treatment facilities shall void and retain broken or unusable seals. Facilities shall keep logs of sample seal numbers confidential, apart

from all other patient records. Facilities shall discard contaminated samples and samples with broken seals.

(4) Required screens. Each urinalysis shall include qualitative analysis for the presence of opiates, methadone, amphetamines, cocaine, barbiturates, and other drugs as indicated by the patient's drug use history. The urinalysis may instead include qualitative analysis for metabolites of such drugs, if such analysis would yield more accurate results.

(5) Failure to give sample. Methadone treatment facilities shall treat a patient's failure to provide a urine sample upon request, for whatever reason, or a patient's refusal to initial the log of seal number in the same manner as a positive urine.

(6) Positive urines. Methadone treatment facilities shall report all positive urines to the patient and discuss in counseling within seven days of obtaining the results.

(7) Dose increase justification. Following stabilization, methadone treatment facilities shall justify all dose increases in the patient's record. Positive urines alone shall not be considered adequate justification. Additional data on desirability of dose increases shall be documented in the patient's record, including signs and symptoms of withdrawal, patient discomfort, or other medically justifiable reasons.

(8) Mandatory discharge for positive urines. Methadone treatment facilities shall discharge any patient with three consecutive positive urines collected later than ninety days after admission. Patients so discharged may not be readmitted to methadone treatment at any facility for ninety days following the first discharge and for one year following the second discharge.

(9) Mandatory discharge for absence of methadone in urine—Absence of methadone. Methadone treatment facilities shall discharge any patient receiving methadone and whose urinalysis fails to confirm the presence of methadone or methadone metabolite, unless the facility can confirm physiological reasons for the lack of detectable methadone or methadone metabolite. Conformation may include a dose level less than ten milligrams daily or a urinalysis of a second sample taken twenty-four hours after in-person administration of a dose which also fails to confirm the presence of methadone or methadone metabolite. The facility may use other medically justifiable means of confirming physiological reasons for failure to confirm presence of methadone or metabolite. Any confirmation shall be documented in detail in the patient's record. No methadone treatment facility may admit a patient who has been discharged from any methadone facility pursuant to this subsection during the previous ninety days.

(10) Urinalysis laboratories. Methadone treatment facilities shall notify the department of the name and address of all laboratories that the facility is using to conduct urinalysis for methadone clients.

[Statutory Authority: RCW 69.54.040, 86-22-020 (Order 2438), § 275-19-950, filed 10/29/86.]

WAC 275-19-960 All methadone treatment facilities—Detoxification requirements. (1) Planned detoxification dates required. Within ninety days of admission,

methadone treatment facilities shall establish and document a planned detoxification date for each patient. The planned detoxification date may be revised.

(2) Criteria for planned detoxification dates. Methadone treatment facilities shall adopt and adhere to written criteria for establishing and revising planned detoxification dates for all patients entering treatment. The criteria shall include, at a minimum, addiction history, current dose, health, employability, age, personality, support system strengths, and treatment progress to date. Planned detoxification of pregnant clients shall take into account postnatal social and psychological factors and prenatal physical factors.

(3) Planned detoxification dates for patients under age twenty-four. Methadone treatment facilities shall not plan detoxification dates in excess of the following:

(a) All patients under eighteen years of age (at time of admission) shall have a planned detoxification date not later than six months after admission.

(b) All patients eighteen to twenty-four years of age (at time of admission) shall have a planned detoxification date not later than twenty-four months after admission.

(c) Extension of planned detoxification dates beyond the limits specified in (3)(a) or (3)(b) of this section may be made only after prior approval of the department.

(4) Patient records. Methadone treatment facilities shall note in the patient's record the factors considered and how the factors affected the choice of planned detoxification date. Facilities shall also note in the patient's record all changes in planned detoxification date and the reasons for the change.

[Statutory Authority: RCW 69.54.040. 86-22-020 (Order 2438), § 275-19-960, filed 10/29/86.]

WAC 275-19-970 All methadone treatment facilities--Dispensary requirements. (1) Authorization of dispensary personnel. Methadone treatment facilities shall designate individuals authorized to enter the dispensary. Those authorizations shall be limited to persons with a clear need to enter. Facilities shall note the reasons for granting authorization in personnel records.

(2) Dispensary staffing. Methadone treatment facilities shall establish written procedures, especially record-keeping practices, designed to minimize the number of individuals who need to be in the dispensary. Procedures must require that two people shall be in the dispensary any time doses are compounded, dispensed, or administered.

(3) Methadone handling procedures. Methadone treatment facilities shall establish written procedures for all activities involving handling methadone (compounding, dispensing, etc.). Such procedures shall be designed to minimize error and minimize possibilities for diversion of methadone by staff or others.

(4) Methadone stock inventory. Methadone treatment facilities shall ensure dispensary staff measure all opened stocks of methadone before and after each period of time during which methadone is compounded, dispensed, or administered. A period of time shall be

deemed to conclude, or a new period begin, whenever any staff person enters or leaves the dispensary. Staff shall note the amount measured in methadone inventory records and verify the entry with initials or signature. All newly opened stocks of methadone shall be measured immediately and the actual amount recorded in the same manner. Methadone treatment facilities shall reconcile inventory changes with doses dispensed. If any discrepancy is uncovered during reconciliation of doses dispensed and inventory changes, and any variations in inventory between previous close and current open, the facility shall obtain statements from all dispensary staff persons involved. The program director shall investigate the discrepancy and report to the federal drug enforcement agency, Washington state board of pharmacy, and the department of social and health services.

(5) Dispensary schedule. Methadone treatment facilities shall schedule dispensing and other activities to minimize impact on neighboring businesses and residences.

(6) Quantitative analysis. Methadone treatment facilities shall conduct a quantitative analysis of all open methadone stocks whenever a transfer case is reported to the program director pursuant to WAC 275-19-990(6), or whenever the program director has other reason to believe dilution and diversion of methadone stocks may be occurring. In addition, on random occasions at least twice in any calendar year the facility shall conduct a quantitative analysis of all opened methadone stock. Methadone concentration below the manufacturer's tolerance shall be reported immediately to the federal drug enforcement administration, the Washington board of pharmacy, and the department of social and health services.

[Statutory Authority: RCW 69.54.040. 86-22-020 (Order 2438), § 275-19-970, filed 10/29/86.]

WAC 275-19-980 All methadone treatment facilities--Counseling requirements. (1) Individual and group counseling. Methadone treatment facilities shall make available sufficient individual and group counseling for each patient to accomplish treatment plan goals and objectives. Counseling shall be intensified (increased in frequency, duration, and/or mode) when problems arise, when requested by the patient, or when progress is no longer being made.

(2) Minimum counseling. Methadone treatment facilities shall provide and document, at a minimum, one face-to-face counseling session lasting at least forty-five minutes (group or individual) each week for each patient during the first ninety days after admission. Counseling may be reduced to two face-to-face sessions per month during the next twelve months, and to once per month thereafter. Facilities may not use group counseling sessions with more than twelve patients in attendance to meet this requirement.

(3) Semiannual review. Methadone treatment facilities shall conduct and document an individual counseling session lasting forty-five minutes or more with each patient, between six and seven months after admission, and once every six months thereafter. The purpose of the

session is to review treatment progress, revise or reaffirm treatment plan and planned detoxification date, and to review all relevant facts concerning the use of methadone.

(4) Counseling. Methadone treatment facilities shall ensure all counseling is provided by qualified drug abuse counselors or counselor-trainees in a manner that is physically and organizationally separate from other activities, particularly dispensing and fee collection, except to the extent necessary for coordination or for resolution of compliance problems such as nonpayment or missed doses. Facilities may not credit counseling occurring while dispensing methadone or collecting fees toward meeting the counseling requirements of this section.

(5) Counselor/patient ratio. Methadone treatment facilities shall provide at least one qualified counselor (full-time equivalent) for each fifty patients. Facilities shall assign each patient to a primary counselor, who shall be a qualified drug counselor. The primary counselor will bear responsibility for the conduct and management of all cases assigned to him or her. No more than fifty cases may be assigned to any primary counselor at one time.

(6) Counselor-trainees. Methadone treatment facilities may provide counseling services using counselor-trainees, if the counselor-trainees are under the direct, close supervision of a qualified drug counselor. A qualified drug counselor with one or more counselor-trainees may be assigned as primary counselor up to seventy-five patients, including those cases delegated to the counselor-trainees. Each qualified drug counselor may supervise as many counselor-trainees as he or she desires and delegate cases in a responsible fashion, except that no counselor-trainee may be delegated more than thirty-five patients. Primary counselor responsibility for all cases shall rest with a qualified drug counselor, regardless of whom provides counseling services.

(7) Individualized treatment plans. Methadone treatment facilities shall prepare and document individualized treatment plans for each patient, which must specify the patient's problems; the frequency, mode, and duration of counseling sessions; and the planned detoxification date.

(8) Pregnancy and drugs. Methadone treatment facilities shall provide, to any patient who requests, at least one hour per month of counseling and education on matters relating to pregnancy and street drugs, and the effects of methadone treatment when provided during pregnancy. This session may be provided in an individual or group setting at the discretion of the facility director.

(9) Family planning professional. Methadone treatment facilities shall have at least one professional, either a qualified drug counselor, physician, or physician's assistant, who has appropriate training in family planning, prenatal health, and parenting skills.

[Statutory Authority: RCW 69.54.040, 86-22-020 (Order 2438), § 275-19-980, filed 10/29/86.]

WAC 275-19-985 All methadone treatment facilities--Take-home medication requirements. (1) Minimum take-home criteria. Methadone treatment facilities

may provide all patients with take-home medication for Sundays and for any legal holiday set forth in RCW 1.16.050, at the discretion of the program physician. Take-home medication on other days shall be permitted only for stabilized patients who have been receiving methadone for a minimum of ninety days and who have had negative urines for the last sixty days.

(2) Criteria for allowing increased take-homes. Methadone treatment facilities may increase frequency of take-home medication when a patient is judged capable of handling increased frequency of take-home medication. The program physician shall consider and document in the client file the following in determining whether a patient is responsible in handling methadone:

- (a) Absence of abuse of drugs and alcohol.
- (b) Regularity of attendance, both dispensing and counseling.
- (c) Absence of known criminal activity or activities, especially drug sales.
- (d) Stability of home environment and social relationships.
- (e) Ability to safely store take-home medications.
- (f) A positive balance between therapeutic benefit and the risk of diversion of take-home medication.

(3) Restriction of take-home privileges following dose increase. For at least seven days following an increase in dose at any time during treatment, methadone treatment facilities may provide a patient with take-home medications only for Sundays and legal holidays.

(4) Maximum take-home privileges. Methadone treatment facilities shall limit the minimum weekly attendance for in-person administration of methadone, the maximum number of daily doses of take-home medication that is provided at any one time, and the maximum total amount of methadone (number of doses multiplied by dose amount) that is provided at any one time, according to the following schedule:

Months Since Admission to Methadone Treatment	Minimum Attendance (In-Person Administration)	Maximum Number of Take-Home Medication Doses	Maximum Total Amount of Take-Home Medication
0 to 3 months	6 days/week	one-day supply	100 mg.
4 to 6 months	5 days/week	one-day supply	70 mg.
7 to 24 months	3 days/week	two-day supply	120 mg.
over 24 months	2 days/week	three-day supply	150 mg.

(5) Maximum take-homes following positive urine. Methadone treatment facilities shall limit the maximum number of daily doses of take-home medication of patients who have one positive urine in the last ninety days and shall require minimum clinic attendance for in-person administration of methadone for such patients according to the following schedule:

Months Since Admission to Methadone Treatment	Minimum Attendance (In-Person Administration)	Maximum Number of Take-Home Medication Doses
0 to 6 months	6 days/week	one-day supply
7 to 24 months	5 days/week	one-day supply
over 24 months	3 days/week	two-day supply

Maximum total amount of take-home medication shall not exceed the amounts set forth in the schedule of

subsection (4) of this section. Patients who are restricted to the schedule set forth in this subsection may be placed on the schedule set forth in subsection (4) of this section if they have no additional positive urines for ninety days.

(6) Exceptional take-home; Saturday or Monday holidays. Methadone treatment facilities may provide all patients with one extra take-home dose in addition to the supply limits set forth in subsections (4) and (5) of this section, when a legal holiday falls on a Monday or a Saturday, or when two legal holidays fall on successive days, and restrictions on the patient's take-home medication will not otherwise permit sufficient take-home medication doses for both Sunday and the legal holiday or for both legal holidays.

(7) Labeling. Methadone treatment facilities shall label take-home medication containers with the name of the prescriber, complete directions for use, the name of the drug either by the brand or generic name and strength per unit dose, the name of the patient, and the date.

(8) Restarting methadone medication. Methadone treatment facilities may restart medication for patients who undergo planned detoxification, but remain in counseling (at least one face-to-face event per thirty days) for up to two years. Such patients are not considered discharged and may restart medication without sick physicals. Facilities shall not provide take-home medication to such patients, other than for Sundays and legal holidays, for at least seven days following the restart of medication. After the seven-day period has concluded, facilities may reinstate take-home medication privileges as if medication was uninterrupted.

(9) Waivers of take-home standards. Methadone treatment facilities shall request approval from the department of social and health services of any and all waivers of take-home medication requirements on a case-by-case basis in advance.

[Statutory Authority: RCW 69.54.040. 86-22-020 (Order 2438), § 275-19-985, filed 10/29/86.]

WAC 275-19-990 All methadone treatment facilities--Additional requirements. (1) Facility size. To assist in attaining the goal that Methadone treatment facilities meet the needs of individual patients and to help ensure local neighborhoods are not unduly affected, methadone treatment facilities shall not exceed a three hundred fifty patient caseload at any one time. Approval of a facility exceeding three hundred fifty patients at time of adoption of these rules shall not be revoked due to size of caseload if such facility agrees to cease admitting new patients until such time as they reach the maximum patient load and remain in compliance with the maximum patient load thereafter.

(2) Double enrollment. Methadone treatment facilities shall participate in periodic meetings, scheduled and coordinated by the department for the purpose of identifying duplicate or prohibited admissions. Facility participation shall include attendance by at least one dispensary staff person and provision of a clear, recent

photograph of any active patient and the latest photographs of all patients discharged for drug abuse or failure to consume take-home medication who are still barred from readmission by these rules. Programs shall be required to specifically identify all patients admitted since the previous meeting, all patients enrolled in a methadone treatment facility which is not the closest to their residence, and any patients identified by the department as potential duplicate admissions or barred admissions. All such meetings shall be closed to the public to preserve confidentiality of patient records.

(3) Reporting requirements. All methadone treatment facilities shall report to the department the dose level of each patient, plus such other information as the department may reasonably require, in the form and manner prescribed by the department. Such reports shall be submitted in a timely and accurate manner.

(4) Identifying patients. All methadone treatment facilities shall establish written policies and procedures to reasonably verify the identity of patients. The policies and procedures shall respect the confidentiality of patient records as set forth in federal regulations (42 C.F.R., part 2, published July 1, 1975).

(5) Patient photographs. All methadone treatment facilities shall maintain in the dispensary a file of photographs of all patients. Photographs shall be updated whenever the client's physical appearance changes significantly or every two years, whichever comes first.

(6) Transfer patients. The initial dose of all transfer patients shall be the same as the last prescribed dose at the previous facility. Doses may be increased after the initial dose in the manner and under the conditions required elsewhere in these rules. Detailed evaluation of dose adequacy is mandatory for all transfer patients requesting dose increases. If any transfer patient reporting an inadequate dose at the previous facility is determined to be stabilized at that same dose at the transfer facility, such case shall be immediately reported to the program director of the previous facility and to the department of social and health services.

(7) Transfer fees. Methadone treatment facilities may not levy unreasonable transfer fees on patients attempting to transfer to another facility. Transfer fees may not exceed the actual cost of duplicating and forwarding records.

(8) Rate setting. All services (other than admission services) required by these standards shall be included in the basic daily, weekly, or monthly rate, including dispensing, urinalysis, and counseling. Medical services unrelated to diagnosis and treatment of addiction, such as primary care and prenatal or postnatal care, may be provided at additional charge.

(9) Fees. The patient shall be provided a complete schedule of fees and applicable fee policies prior to the initiation of any treatment services.

(10) Detoxification for nonpayment. Any patient detoxified for reasons of nonpayment shall be provided an individual detoxification schedule consistent with sound medical practices approved by the program's physician.

[Statutory Authority: RCW 69.54.040. 86-22-020 (Order 2438), § 275-19-990, filed 10/29/86.]

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.
 275-20-080 Judicial review—Appeal procedure.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

- 275-20-020 Financial responsibility established. [Order 2, § 275-20-020, filed 2/23/68.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.
 275-20-040 Date payable—Reserve for personal and special needs—Clothing. [Order 2, § 275-20-040, filed 2/23/68.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.
 275-20-050 Superintendents to supply information. [Order 2, § 275-20-050, filed 2/23/68.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.
 275-20-060 Per capita cost—Determination of ability to pay. [Order 2, § 275-20-060, filed 2/23/68.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.
 275-20-070 Appeal procedure—Judicial review. [Order 2, § 275-20-070, filed 2/23/68.] Repealed by 78-03-029 (Order 1270), filed 2/17/78. Statutory Authority: RCW 72.01.090.

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 established in accordance with the methodology promulgated under chapter 275-38 WAC.

[Statutory Authority: RCW 72.33.660. 84-18-022 (Order 2144), § 275-20-030, filed 8/29/84. Statutory Authority: RCW 72.33.600. 83-18-028 (Order 2018), § 275-20-030, filed 8/31/83; 82-20-022 (Order 1885), § 275-20-030, filed 9/29/82; 81-17-025 (Order 1690), § 275-20-030, filed 8/12/81; 81-06-004 (Order 1611), § 275-20-030, filed 2/19/81; 80-12-011 (Order 1535), § 275-20-030, filed 8/25/80; 80-02-060 (Order 1480), § 275-20-030, filed 1/18/80; 79-08-044 (Order 1418), § 275-20-030, filed 7/19/79; 78-10-057 (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 1/1/75; 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 2/17/78.]

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.

(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**

- 275-25-010 Definitions.
 275-25-020 Plan development and submission.
 275-25-030 Program operation—General provisions.
 275-25-040 Appeal procedure.
 275-25-300 Alcoholism program—WAC section numbers.
 275-25-310 Approved treatment facilities.

275-25-330	Service priority.
275-25-340	Funding formula—Alcoholism.
275-25-500	Developmental disabilities program—WAC section numbers.
275-25-520	Services—Developmental disabilities.
275-25-527	Rights—Health and safety assured.
275-25-530	Funding formula—Developmental disabilities.
275-25-755	Client rights—Notification of client.
275-25-800	Applicability—WAC section numbers.
275-25-810	Drug abuse services.
275-25-840	Funding formulae.

1936), filed 1/12/83. Statutory Authority: RCW 69-54.040 and 71.24.190.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

275-25-510	Definition—Developmental disabilities. [Order 1142, § 275-25-510, 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.
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.
275-25-700	Mental health programs—WAC section numbers. [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.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69-54.040 and 71.24.190.
275-25-710	Definitions—Mental health and drug treatment. [Order 1142, § 275-25-710, filed 8/12/76.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69.54.040 and 71.24.190.
275-25-720	Priorities. [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.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69.54.040 and 71.24.190.
275-25-730	Services—Mental health and drugs. [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.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69-54.040 and 71.24.190.
275-25-740	Clinical requirements. [Order 1142, § 275-25-740, filed 8/12/76.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69-54.040 and 71.24.190.
275-25-750	Staffing requirements. [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.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69.54.040 and 71.24.190.
275-25-760	State hospitals—Referral. [Order 1142, § 275-25-760, filed 8/12/76.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69-54.040 and 71.24.190.
275-25-770	Funding formula—Mental health. [Statutory Authority: RCW 71.24.190. 81-23-043 (Order 1719), § 275-25-770, filed 11/18/81. Statutory Authority: RCW 69.54.040. 80-02-120 (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.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69-54.040 and 71.24.190.
275-25-820	Annual performance and status report. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-25-820, filed 7/28/78.] Repealed by 83-03-011 (Order 1936), filed 1/12/83. Statutory Authority: RCW 69.54.040 and 71.24.190.
275-25-830	County management. [Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-25-830, filed 7/28/78.] Repealed by 83-03-011 (Order

WAC 275-25-010 Definitions. (1) All terms used in this chapter 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) Drug and alcohol rehabilitation, education programs—drug treatment centers (chapter 69.54 RCW) as now existing or hereafter amended.

(3) "County" means each county or two or more counties acting jointly.

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

(5) "Indian" shall mean any:

(a) Person enrolled in or 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 considered to be an Indian by a federally or nonfederally recognized Indian tribe or by an urban Indian/Alaska community organization.

(6) "Plan" means the application a county submits to the secretary for review and approval under the act(s); or revision of an existing plan.

(7) "Population" means the most recent estimate of the aggregate number of persons located in the designated county as computed by the office of financial management.

(8) "Secretary" means the secretary of the department or such employee or such unit of the department as the secretary may designate.

[Statutory Authority: RCW 69.54.040 and 71.24.190. 83-03-011 (Order 1936), § 275-25-010, filed 1/12/83; Order 1142, § 275-25-010, filed 8/12/76. Formerly chapters 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 twelve-month period prior to the start of the state fiscal biennium.

(2) The requirements of this section shall apply to the following program areas:

(a) Drug abuse,

(b) Developmental disabilities, and

(c) Alcoholism.

(3) The secretary shall announce the amount of funds included in the department's biennial budget request to each county for each program area no later than December 15. The secretary shall announce the actual amount of funds appropriated and available to each county as soon as possible after final passage of the Biennial Appropriations Act.

(4) Each county shall submit a plan for each program area for the subsequent state fiscal biennium to the secretary no later than March 1, in the form and manner prescribed by the secretary in written guidelines issued no later than November 1. The plan shall include the following:

- (a) A statement of priorities;
 - (b) A work statement, including a listing of program components, anticipated service volume, and other activities to be undertaken during the period covered by the plan;
 - (c) The relationship between the work statement and the priority statement;
 - (d) The method(s) for administering the various program components and services;
 - (e) A proposed budget;
 - (f) An evaluation of progress in meeting the work statement in the current contract; and
 - (g) Such other information as the secretary may require in the written guidelines.
- (5) The secretary shall send a written review of the plan to each county within thirty days after receipt of the plan. The review shall set forth the secretary's findings and conditions for final approval of the plan.

(6) Each county shall submit a response to the written review for each program area by May 15, or thirty days after receipt of the secretary's written review, whichever is later. The response to the written review shall include:

- (a) Responses to all conditions set forth in the secretary's review of the plan;
 - (b) Any amendments to the plan desired by the county; and
 - (c) A letter by the county governing body or county executive indicating adoption of the plan as modified by the county's response to the written review.
- (7) The secretary shall review the response submitted by the county pursuant to subsection (6) of this section and approve the plan if the response meets the conditions set forth in the written review. The secretary shall advise the county of approval or denial of approval within fifteen days after receipt of the response. The county may submit amendments or additional responses and ask for reconsideration at any time.

(8) Each county shall submit a contract proposal for each program area within forty-five days of the announcement by the secretary of the actual amount of funds appropriated and available, pursuant to subsection (3) of this section. The contract proposal shall include:

- (a) A work statement, as described in subsection (4)(b) of this section;
- (b) A list of the intended subcontractors, if any, and the services to be provided by each;
- (c) A budget for the contract period; and
- (d) A letter from the county governing body or county executive indicating approval of the contract proposal.

(9) The secretary may modify deadlines for submission of plans, responses to written reviews or contract proposals when, in the secretary's judgment, the modification would enable the county to improve the program or planning process.

(10) The secretary may authorize the county to continue providing services in accordance with the previous plan and contract, and reimburse at the average level of the previous contract, in order to continue services until the contract is executed.

[Statutory Authority: RCW 69.54.040 and 71.24.190. 83-03-011 (Order 1936), § 275-25-020, filed 1/12/83. 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 contract must be negotiated and executed between the department and the county prior to any reimbursement by the department for services to be provided under the contract, except as provided for in WAC 275-25-020(10). The department shall not execute the contract unless the county's plan has been approved pursuant to WAC 275-25-020(7).

(b) Payments to counties shall be made on the basis of vouchers submitted to the department for costs incurred under the contract. 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. The secretary shall withhold advance payments from counties failing to meet the requirements of WAC 275-25-020 until such requirements are met. Any county failing to meet the requirements of WAC 275-25-020 after advance payments have been made shall repay said advance payment within thirty days of notice by the department that the county is not in compliance.

(d) If the department receives evidence a county or subcontractor performing under the contract is:

- (i) Not in compliance with applicable state law or rule; or
- (ii) Not in substantial compliance with the contract; 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 Procedure Act (chapter 34.04 RCW).

(6) **Subcontracting.** A county may subcontract for the performance of any of the services specified in the contract. All subcontracts shall include:

(a) A precise and definitive work statement including a description of the services to be provided;

(b) Specific agreement by the subcontractor to abide by the act(s) and the rules;

(c) Specific authority for the secretary and the state auditor to inspect all records and other material the secretary deems pertinent to the subcontract; and agreements by the subcontractor that such records will be made available for inspection;

(d) Specific authority for the secretary to make periodic inspection of the subcontractor's program or premises in order to evaluate performance under the contract between the department and the county.

(e) Specific agreement by the subcontractor 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) **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 contract 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 said agency's employees, or persons performing services on said agency's behalf, but failure to comply with any compulsory rules shall be cause for the department to refuse to provide funds under the contract.

[Statutory Authority: RCW 69.54.040 and 71.24.190, 83-03-011 (Order 1936), § 275-25-030, filed 1/12/83; 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 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 days of notification of the decision which is being appealed.

(4) An administrative review and redetermination shall be provided by the department within thirty 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 Procedure 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 insure that such needs are adequately met before state moneys are expended for other service needs.

[Order 1142, § 275-25-330, filed 8/12/76.]

WAC 275-25-340 Funding formula--Alcoholism. (1) For the purposes of this section, "county" shall mean the legal subdivision of the state, regardless of any agreement with another county to provide alcoholism services jointly.

(2) Of the state funds appropriated by the legislature for alcoholism services, the department may allocate funds for state-wide services, special projects, emergency needs, and not more than nine percent to the department for administration.

(3) The remainder is to be allocated to the counties based on the ratio of county population to state population: *Provided*, That each county shall be allocated at least fifty-one thousand two hundred dollars each biennium, subject to availability of appropriated funds. The

minimum sum shall be adjusted each biennium in proportion to the general inflation allowance authorized by the legislature.

[Statutory Authority: RCW 69.54.040 and 71.24.190. 83-03-011 (Order 1936), § 275-25-340, filed 1/12/83. Statutory Authority: RCW 69.54.040. 81-24-073 (Order 1726), § 275-25-340, filed 12/2/81; 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 RCW 71.20.060 and/or 71.20.070. However, only the following services are eligible for division of developmental disabilities 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 approved county plans and with service definitions, standards and guidelines issued by the division.

(1) Direct services may be provided in the following areas:

- (a) Child development services,
- (b) Employment services,
- (c) Community integration services, and
- (d) Residential services.

(2) Indirect services may be provided in the following areas:

- (a) Program evaluation,
- (b) County planning and administration, and
- (c) Consultation and staff development.

[Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850. 82-06-034 (Order 1771), § 275-25-520, filed 3/1/82. 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.]

WAC 275-25-527 Rights--Health and safety assured. A county, when contracting for specific services, must assure that client rights and client health and safety are protected.

[Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850. 82-06-034 (Order 1771), § 275-25-527, filed 3/1/82.]

WAC 275-25-530 Funding formula--Developmental disabilities. (1) For the purposes of this section, "county" shall mean the legal subdivision of the state, regardless of any agreement with another county to provide developmental disabilities services jointly.

(2) The allocation of funds to counties shall be based on the following criteria:

(a) 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.

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

(c) 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.

[Statutory Authority: RCW 69.54.040 and 71.24.190. 83-03-011 (Order 1936), § 275-25-530, filed 1/12/83; Order 1142, § 275-25-530, 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 275-25-800 Applicability--WAC section numbers. WAC 275-25-800 through 275-25-899 shall apply to drug abuse programs.

[Statutory Authority: RCW 69.54.040. 78-08-086 (Order 1322), § 275-25-800, filed 7/28/78.]

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

- (a) Outpatient treatment services,
- (b) Methadone treatment services,
- (c) Residential treatment services,
- (d) Inpatient treatment services,
- (e) Emergency treatment services,
- (f) Court evaluations, and
- (g) Prevention services.

(2) 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.

[Statutory Authority: RCW 69.54.040 and 71.24.190. 83-03-011 (Order 1936), § 275-25-810, filed 1/12/83. Statutory Authority: RCW 69.54.040. 81-24-073 (Order 1726), § 275-25-810, filed 12/2/81; 78-08-086 (Order 1322), § 275-25-810, filed 7/28/78.]

WAC 275-25-840 Funding formulae. (1) For the purposes of this section, "county" shall mean the legal subdivision of the state, regardless of any agreement

with another county to provide drug abuse services jointly.

(2) The allocation of funds appropriated from state revenues for drug abuse services shall be based on the following criteria:

(a) The department may withhold up to twenty-five percent of appropriated state funds for state-wide programs, special projects, and emergency needs.

(b) Each county shall be allocated ten thousand dollars for community drug abuse services each biennium, subject to availability of state funds.

(c) The remainder of appropriated state funds shall be allocated to counties based on the ratio of county population to state population.

[Statutory Authority: RCW 69.54.040 and 71.24.190, 83-03-011 (Order 1936), § 275-25-840, filed 1/12/83. Statutory Authority: RCW 69.54.040, 78-08-086 (Order 1322), § 275-25-840, filed 7/28/78.]

Chapter 275-26 WAC

DEVELOPMENTALLY DISABLED COMMUNITY TRAINING PROGRAM

WAC

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WAC 275-26-005 Purpose. (1) The division of developmental disabilities, for the purpose of enabling certain developmentally disabled persons as defined in WAC 275-26-025 and 275-26-520 to live in an independent setting, may provide a training and support service to clients living in the client's own home.

(2) The generally expected outcome of such services is the client's need for tenant support or alternative living services will be substantially decreased over time, depending upon the client's individual need.

[Statutory Authority: Chapter 72.33 RCW, 83-05-017 (Order 1945), § 275-26-005, filed 2/9/83.]

WAC 275-26-010 Definitions. (1) "Administrative hours" is a measure of time devoted to the function of

administration and management of the organization. Administrative hours include time spent with employees related to the employee's overall job performance or other work management functions, but does not include the time spent by administrators relating to individual tenants.

(2) "Alternative living services" means the provision of training and support services to clients renting, buying or owning living accommodations.

(3) "Average monthly staff hours" is a measure of the average number of staff hours devoted to serving participating tenants. Average monthly staff hours is calculated by dividing the sum of staff and supervisory hours (excluding any hours devoted to administrative functions) by the tenant months.

(4) "Client" means a person determined by the division to be eligible for services funded by the division.

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

(6) "Division" means the division of developmental disabilities of the department of social and health services.

(7) "Individual direct service hours" is a measure of the hours of one-to-one tenant support services received by a participating tenant, and is calculated for each service event by dividing the number of provider staff delivering a service event by the number of participating tenants in the event and multiplying by the duration of the event.

(8) "Participating tenants" means a person eligible for services from the division of developmental disabilities, referred to the provider by the division and placed in an independent living setting by the provider, receiving thirty or more individual direct service hours during the billing month, provided that a tenant entering or leaving the program during any billing month is considered a "participating tenant" if he or she received an average of one hour of individual direct service hours per day in the program.

(9) "Provider" means the tenant support agency, alternative living agency or alternative living individual provider contracted by the department to provide training and support services to clients.

(10) "Secretary" means the secretary of the department or such officer the secretary may designate to carry out in whole or in part the administration of this chapter.

(11) "Supervisory hours" is a measure of time devoted to the function of certain tenant related supervisory tasks such as consultation with employees related to individual tenants or groups of tenants and specific program services.

(12) "Support" means:

(a) Assistance to the tenant or client in performance of necessary functions or performance of necessary functions on behalf of the tenant or client. Where the client's skill has not been developed, support is provided as a substitute in those areas affecting the client's survival.

(b) Assistance to the client in the fostering and development of typical relationships in the community.

(13) "Tenant" means a person eligible for services from the division, referred by the division to and receiving services from a tenant support agency, living or preparing to live, in his or her own independent living setting.

(14) "Tenant month" represents the average number of participating tenants attending the tenant support program during the billing month. A tenant month is calculated by multiplying the number of participating tenants attending the program for the full month by the number of days in the billing month; adding the number of days attended by participating tenants leaving or entering the program (providing the tenants attending for a partial month average one hour per day of individual direct service hours); dividing the sum by the number of days of the billing month. In the event the number of tenant months results in a fraction, the number shall be rounded to two decimal places.

(15) "Tenant support agency" means the entity certified by the department to provide training and support services to tenants who are or will be renting, buying or owning an apartment or home.

(16) "Tenant support services" means the provision of an average of forty-four hours monthly of training and support services to participating tenants served by a tenant support agency.

(17) "Training" means goal-oriented instruction targeting the skills not yet developed and enhancing the skill proficiencies affecting a tenant's or client's survival or independence.

(18) "Work day" means the day or days the local division of developmental disabilities field services office is open for business.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-010, filed 2/9/83.]

WAC 275-26-012 Tenant support agencies. The rules in WAC 275-26-015 through 275-26-097 apply exclusively to the tenant support program.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-012, filed 2/9/83.]

WAC 275-26-015 Initial and interim certification. Initial certification or interim renewal certification may be granted if the tenant support agency has been examined pursuant to WAC 275-26-030 and upon assurance the tenant support agency will comply with these rules and regulations within a specified period of time acceptable to the secretary not to exceed one hundred eighty days.

(1) If the provider does not comply with the requirements of chapter 275-26 WAC within the one hundred eighty-day period the department shall initiate a process of withdrawing the tenant support initial or interim certification.

(2) Revocation, suspension or denial shall be done in accord with the rules governing administrative review (WAC 275-26-022) and the laws of the state of Washington (chapter 34.04 RCW).

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-015, filed 2/9/83.]

WAC 275-26-020 Certification. (1) Upon determination by the department of substantial compliance with WAC 275-26-030, the division may certify a tenant support agency as approved for referral of and service provision to tenants under the provision of chapter 72.33 RCW. This certification is required biennially, but may be required more frequently by the division. Initial application or proposal for certification shall be reviewed by the county and recommendations shall be forwarded by the county to the division. The county may submit recommendations to the division prior to annual certification by the department.

(2) An agency found to be substantially out of compliance with the provisions of this WAC chapter shall be subject to interim certification and revocation procedures as outlined in WAC 275-26-015.

[Statutory Authority: Chapter 72.33 RCW. 86-08-003 (Order 2349), § 275-26-020, filed 3/20/86; 83-05-017 (Order 1945), § 275-26-020, filed 2/9/83.]

WAC 275-26-022 Administrative review conference process. (1) All agencies providing tenant support services must abide by chapter 275-36 WAC as it pertains to decertification action. Any party who feels aggrieved by this decertification may request an administrative review. The request shall be signed by the provider, shall identify the challenged determination and the date thereof, and shall state as specifically as practicable the grounds for the provider's contention that the determination was erroneous. Copies of any documentation the provider intends to rely on to support the provider's position shall be included with the request.

(2) After receiving a request meeting the criteria in subsection (1) of this section, the director of the division of developmental disabilities will contact the provider to schedule a conference for the earliest mutually convenient time. The conference shall be scheduled for no later than thirty days after a properly completed request is received unless both parties agree in writing to a specific later date.

(3) The provider and appropriate representatives of the department shall attend the conference. In addition, representatives selected by the provider may attend and participate. The provider shall bring to the conference, or provide to the department in advance of the conference, any documentation the provider intends to rely on to support the provider's contentions. The parties shall clarify and attempt to resolve the issues at the conference. If additional documentation is needed to resolve the issues, a second session of the conference shall be scheduled for not later than thirty days after the initial session unless both parties agree in writing to a specific later date.

(4) Unless informal agreement has been reached at the conference, a written decision by the director of the division of developmental disabilities will be furnished to the provider within sixty days after the conclusion of the conference.

(5) If the provider desires review of an adverse decision of the director of the division of developmental disabilities, the provider shall within thirty days following

receipt of such decision request a fair hearing in writing in accordance with the Administrative Procedure Act, chapter 34.04 RCW.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-022, filed 2/9/83.]

WAC 275-26-025 Eligibility for tenant support services. In order to participate in tenant support services, the eligible person must:

- (1) Be eighteen years of age or older;
- (2) Already live or be prepared to move into an apartment or private community housing;
- (3) Have sufficient earned or unearned income to pay his or her housing, food, and other incidental costs;
- (4) Be able to identify emergencies independently and seek assistance;
- (5) Be able to be alone during night-time hours;
- (6) Be able to use or learn to use a telephone; may use adaptive equipment;
- (7) Does not consistently behave in a manner disruptive to the community;
- (8) Demonstrates basic self-help skills, such as eating, dressing, grooming, and toileting;
- (9) Demonstrates ability to use or learn to use public transportation independently and safely.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-025, filed 2/9/83.]

WAC 275-26-030 Evaluation and supervision. (1) The secretary shall review and/or evaluate the tenant support agency's operation to ensure that proper standards of operation, as set forth by law, or this chapter, are maintained. If, during the evaluation process, the provider is found not in compliance with the standards and regulations contained in chapter 275-26 WAC, the secretary shall cause a report to be filed. The report shall specify the corrective action to be implemented with specific time limits not to exceed one hundred eighty days for corrective action completion. If such corrective actions are not implemented within the specified times the tenant support agency certification, initial certification or interim certification may be withdrawn.

(2) The secretary may conduct an audit of the tenant support agency, as deemed necessary by the department.

(3) The secretary may review, as deemed necessary, each tenant's individual adjustment to ensure tenant's needs, interests, and welfare continue to be served.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-030, filed 2/9/83.]

WAC 275-26-032 Emergency and other services.

(1) The tenant support agency shall inform the division when the tenant requires services beyond levels described in WAC 275-26-005 through 275-26-090. Services described include, but are not limited to:

- (a) Medical services;
- (b) Dental services;
- (c) Behavioral intervention services.

(2) In emergencies, the tenant support agency shall inform the division of a tenant's need for services described in subsection (1) of this section within seventy-two hours or the next work day, whichever is earlier.

(3) Payment for any services described in subsection (1) of this section may be provided by the department, if not prohibited by law: *Provided however*, That other resources do not exist or have been exhausted. Such other resources shall include:

- (a) Private or public insurance;
- (b) The tenant's assets;
- (c) Assistance from private service organizations.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-032, filed 2/9/83.]

WAC 275-26-050 Tenant remuneration. Whenever appropriate or required by law, individual tenants performing work for the tenant support agency shall be given remuneration in accordance with the minimum wage law unless exemption has been granted to the minimum wage under applicable laws of the federal department of labor and state department of labor and industries.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-050, filed 2/9/83.]

WAC 275-26-055 Administration. (1) The tenant support agency shall have written statements approved by the division including, but not limited to, the following:

- (a) Agency philosophy, objectives, and goals;
- (b) Description of the tenant support agency's program, admission, and discharge criteria;
- (c) Policies and procedures protecting the financial interests of the tenants;
- (d) Policies and procedures describing designation of authority in the absence of the administrator and the agency's chain of authority;
- (e) Policies and procedures describing methods of responding to emergencies including, but not limited to:
 - (i) Natural or other disaster;
 - (ii) Medical problems;
 - (iii) Involvement of the tenant with law enforcement agencies.
- (f) Policies and procedures for notification of tenant's guardian and/or relatives in case of tenant's personal emergency.

(2) The tenant support agency director shall complete and file with the department the document entitled Division of Developmental Disabilities Administrative Policy Number 1, dated July 2, 1973, provided by the department prohibiting mistreatment, neglect or abuse of tenants. All staff working with tenants shall sign a similar document, approved by the department, compiled by the provider and kept in the staff's personnel file.

(3)(a) The tenant support agency will notify the division immediately of any serious incident involving a tenant, such as, when a tenant is missing, has had a serious injury or accident, or has been a victim or perpetrator of a felonious action, etc.

(b) Such notification will be followed by a written report of the incident submitted to the division on the next work day, unless an exception is granted by the division.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-055, filed 2/9/83.]

WAC 275-26-060 Personnel. (1) The provider shall maintain current written personnel policies and practices which shall be made available to all employees.

(2) Requirements for staff employed by the tenant support agency shall include, but not be limited to, the following:

- (a) Be eighteen years of age or older;
- (b) Demonstrate capacity to be an appropriate role model;
- (c) Exhibit mature behavior and the ability to make independent judgments.

(3) The performance of each employee shall be evaluated in writing at least annually by the tenant support agency.

(4) Personnel policies and practices shall not discriminate against staff or prospective staff based upon a person's age, sex, marital status, race, creed, color, national origin or the presence of any sensory, mental or physical handicap: *Provided*, That such sensory, mental or physical handicap does not prevent the specific performance of the job.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-060, filed 2/9/83.]

WAC 275-26-065 Staffing. (1) The tenant support agency shall provide sufficient staff to administer the program, perform training, supervision, and support services.

(2) The tenant support agency must provide the client with immediate accessibility to tenant support agency staff twenty-four hours per day, seven days each week.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-065, filed 2/9/83.]

WAC 275-26-070 Staff training. The tenant support agency shall ensure that staff receive a minimum of twelve hours of training during the first thirty days of employment. Such training will involve a combination of instruction and supervised experience (working) with tenants. A minimum of four hours per month training shall be provided each direct service staff person during the first six months of employment.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-070, filed 2/9/83.]

WAC 275-26-075 Tenant records. (1) The tenant support agency shall maintain and keep current a record, including health and training records, for each tenant served as a basis for review, study, and evaluation of the overall programs provided by the agency to the participating tenants.

(2) All information contained in a tenant's record shall be:

- (a) Considered privileged and confidential;
- (b) Used in the best interest of the tenant;

(c) Available to all training and support staff, the department and, pursuant to RCW 71.20.075, the county community developmental disabilities board.

(3) Any transfer or inspection of records, except pursuant to subsection (2) of this section, shall be authorized by a release of information form, which is signed by the tenant or, if incompetent by the guardian.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-075, filed 2/9/83.]

WAC 275-26-080 Health services. The tenant support agency shall provide training, guidance and/or support to the tenant for the purpose of health services by:

- (1) Assisting the tenant to be aware of the need for health services;
- (2) Assisting the tenant with arranging appointments with health professionals;
- (3) Assisting and ensuring transportation for the tenant to health services;
- (4) Monitoring the tenant's implementation of medical treatment prescribed by health professionals;
- (5) Communicating directly with health professionals, when indicated.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-080, filed 2/9/83.]

WAC 275-26-085 Tenant support program plan. The tenant support agency shall develop a written tenant support program plan in a format approved by the department to support individual goals designated in the individual service plan developed by the division.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-085, filed 2/9/83.]

WAC 275-26-090 Tenant services. The tenant support agency shall, as specified in the tenant's tenant support program plan, provide each tenant, based upon individual need, with community survival training and support services including, but not limited to, the following areas:

- (1) Establishment of a residence, including arrangements with landlord, public utilities, tenant insurance.
- (2) Personal health including personal hygiene, physical health, personal safety, assertiveness, human sexuality.
- (3) Household management including care of home, use of appliances, financial planning, meal planning and preparation, home safety, emergency procedures, telephone use.
- (4) Use of community resources including transportation, health services, shopping resources, banking.
- (5) Use of leisure time including planning time and activities, social relationships, role responsibilities.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-090, filed 2/9/83.]

WAC 275-26-095 Physical requirements. (1) The tenant support agency, when assisting a tenant with establishing a residence, will ensure the tenant is offered choices of housing meeting the following requirements:

- (a) One living unit serves as a residence for no more than three tenants;
- (b) Is located in a typical multi-family or single-family dwelling residential neighborhood;
- (c) Is located in a neighborhood or apartment complex not having a predominant population comprised of handicapped, ill or infirm people;
- (d) Is located in an area providing easy access to public transit and necessary resources such as grocery, bank, laundromat, churches, and other public services;
- (e) Is located in an area where access to tenant's work and/or work training involves not more than a reasonable effort;
- (f) Has necessary equipment or conditions to guarantee minimum safety for the tenant in his or her housing unit, including, but not limited to:
 - (i) Access to telephone equipment usable by the tenant;
 - (ii) A smoke detector located in proximity to sleeping rooms;
 - (iii) A flashlight in working condition;
 - (iv) First-aid supplies;
 - (v) Plan developed with tenant for evacuation;
 - (vi) Safe storage area for flammable and combustible materials;
 - (vii) No space used for residential purposes accessible only by ladder, folding stairs or a trap door;
 - (viii) An unblocked exit.

(2) The tenant support agency shall document activities with a tenant relevant to subsection (1) of this section. Such documentation shall be kept in the tenant's record.

(3) Tenant support agencies serving tenants entered into the program prior to the effective date of this amendatory act are exempt from subsections (1)(a) through (e) of this section.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-095, filed 2/9/83.]

WAC 275-26-097 Exceptions when allowed. The department may permit the provider to exceed payment for service and payment for additional expenses. Exceptions will be based on a review by the division of the participating tenant's need for extraordinary level of tenant support services. The exception must be approved by the secretary and included in the contract.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-097, filed 2/9/83.]

WAC 275-26-500 Alternative living program. The rules in WAC 275-26-520 through 275-26-580 apply exclusively to the alternative living program.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-500, filed 2/9/83.]

WAC 275-26-520 Eligibility. (1) A person considered by the department as having a need for such services may receive alternative living services.

(2) In order to receive alternative living services, the eligible person must:

- (a) Be eighteen years of age or older;
- (b) Already live or be prepared to move into private community housing;
- (c) Have sufficient earned or unearned income to pay his or her housing, food, and other incidental costs;
- (d) Demonstrate ability to identify emergencies independently and seek assistance;
- (e) Be able to be alone a majority of the time, including nighttime hours;
- (f) Be able to use a telephone, may use adaptive equipment;
- (g) Demonstrates basic self-help skills, such as eating, dressing, grooming, and toileting;
- (h) Have mastered a majority of community survival skills and require training and support in only one or two major areas, such as, money management, processing documents to receive assistance from governmental agencies, use of health services, establishing a residence.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-520, filed 2/9/83.]

WAC 275-26-530 Evaluation and supervision. (1) The secretary may review, as deemed necessary, the provider's records of a client's progress, documentation of service hours provided, and any documentation pertaining to financial transactions on behalf of a client.

(2) The secretary may review, as deemed necessary, a client's individual adjustment to ensure that the client's needs, interests, and welfare continue to be served.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-530, filed 2/9/83.]

WAC 275-26-540 Administration of alternative living services. Alternative living services will be delivered as follows:

(1) Client will be referred by the division to a provider. The provider may accept or reject such a referral.

(2) A six-month alternative living program plan shall be developed by the division with the participation of the client and provider. Such plan may be modified as needed.

(a) The client's alternative living program plan shall be based upon the individual service plan (ISP) developed by the division.

(b) The alternative living program plan shall be developed in accord with division policy relating to alternative living services.

(c) If clients require more than six months of alternative living service, revised alternative living program plans shall be developed at six-month intervals.

(3) The provider shall maintain a record of the client's progress toward the alternative living program plan goals and shall submit a written periodic progress report to the division.

(4) The division may terminate services to an individual client, based upon a review of the client's needs, interests, and welfare.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-540, filed 2/9/83.]

WAC 275-26-550 Alternative living services. Alternative living services shall, as specified in the client's alternative living program plan, be provided in areas which include, but are not limited to, the following:

(1) Establishment of a residence, including arrangements with landlord, public utilities.

(2) Personal health including personal hygiene, physical health, personal safety, assertiveness, human sexuality.

(3) Household management including care of home, use of appliances, financial planning, meal planning and preparation, home safety, emergency procedures, telephone use.

(4) Use of community resources including transportation, health services, shopping resources, banking.

(5) Use of leisure time including planning time and activities, social relationships, role responsibilities.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-550, filed 2/9/83.]

WAC 275-26-560 Provider requirements. (1) The provider shall meet the following requirements:

(a) Have experience in working with people with developmental disabilities;

(b) Demonstrate the capacity to be an appropriate role model;

(c) Meet other requirements as deemed necessary by the department.

(2) The provider is prohibited from abuse, neglect or mistreatment of a client. The provider shall treat the client with dignity and consideration, respecting the client's civil and human rights at all times.

(3) The provider shall require at time of employment all employees to read and agree to abide by the current Division of Developmental Disabilities Administrative Policy Number 1, dated July 2, 1973, regarding client abuse.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-560, filed 2/9/83.]

WAC 275-26-570 Maximum compensation. (1) The department shall pay the provider an hourly rate up to a maximum amount as designated by the department for authorized alternative living program services.

(2) The department may reimburse the provider for travel expenses incurred in transporting a client to and from needed services provided prior authorization has been granted by the secretary. Other travel expenses may be reimbursed with prior written approval of the secretary.

(3) Reimbursement for mileage expenses may be paid the provider up to a maximum of the prevailing rate paid to state employees for mileage reimbursement.

[Statutory Authority: Chapter 72.33 RCW. 83-05-017 (Order 1945), § 275-26-570, filed 2/9/83.]

Chapter 275-27 WAC

DIVISION OF DEVELOPMENTAL DISABILITIES SERVICES RULES

WAC

275-27-020	Definitions.
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DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

275-27-210	Home aid resources. [Statutory Authority: RCW 71.20.070, 84-15-058 (Order 2124), § 275-27-210, filed 7/18/84; Order 1143, § 275-27-210, filed 8/11/76.] Repealed by 86-18-049 (Order 2418), filed 8/29/86. Statutory Authority: RCW 71.20.070.
275-27-600	Bureau certification of developmental centers. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
275-27-605	Procedures for bureau certification, denial, suspension or revocation—Appeals. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
275-27-610	Governing board. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
275-27-615	Center structure and maintenance. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
275-27-620	Staff training. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
275-27-630	Client training. [Statutory Authority: RCW 72.33.810. 81-14-064 (Order 1671), § 275-27-630, filed 7/1/81. 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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
275-27-635	Reimbursement of clients. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.

- 275-27-640 Protection of client rights. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
- 275-27-660 Early childhood developmental centers—Services. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
- 275-27-665 Early childhood developmental center—Staffing. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
- 275-27-680 Adult developmental training center—Services. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.
- 275-27-685 Adult developmental training center—Staffing. [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.] Repealed by 82-06-034 (Order 1771), filed 3/1/82. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850.

WAC 275-27-020 Definitions. (1) "Mental retardation" means significantly subaverage 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: *Provided*, That other appropriate analogous scale or scales used 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) "Division" means the division of developmental disabilities of the department of social and health services.

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

(6) "Respite care" means temporary services provided to a developmentally disabled individual and/or the individual's family on either an emergency or planned basis without which the individual may need a more dependent program.

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

(8) "Informed consent" means an agreement obtained from an individual or his or her 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 programs" means those programs 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 programs" means programs including, but not limited to, county-funded habilitation services.

(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; and
- (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.

(13) "More dependent program" means a program providing less opportunity for numbers and variety of community contacts for the individual or requiring more hours of staff supervision/training/support for the individual.

[Statutory Authority: RCW 71.20.070, 84-15-058 (Order 2124), § 275-27-020, filed 7/18/84. 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 the division has determined the individual is developmentally disabled. Eligibility criteria to determine developmental disability shall be:

(a) Mental retardation, cerebral palsy, epilepsy, autism; or

(b) Auditory impairment, visual impairment, or a condition of an individual found by the secretary to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals, and

(c) Having the following additional characteristics:

(i) Originates before such person reaches age eighteen; and

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

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

(2) The director or designee may authorize exception to criteria specified in subsection (1) of this section,

upon determination there are no other services available and 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 division services, the division may require a supporting affidavit of a physician and/or clinical or certified psychologist certifying the individual is developmentally disabled.

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

(5) Within five working days of the receipt of the completed application and supporting documents, the division shall determine whether the individual is eligible for division services.

[Statutory Authority: RCW 71.20.070, 84-15-058 (Order 2124), § 275-27-030, filed 7/18/84; Order 1143, § 275-27-030, filed 8/11/76.]

WAC 275-27-040 Application for services. (1) All applications for division services shall be filed with one of the division field 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 or parents or guardian of such an individual.

[Statutory Authority: RCW 71.20.070, 84-15-058 (Order 2124), § 275-27-040, filed 7/18/84. 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 sixty days from the date of the division's decision that an individual is developmentally disabled, the appropriate division field services office shall evaluate the individual's needs to determine which services, if any, are necessary to serve the client's best interest.

(2) Upon completion of the evaluation, an individual service plan with determination of necessary services shall be prepared pursuant to WAC 275-27-060 or other department forms as appropriate.

(3) Determination of necessary services shall not be regarded as a guarantee of service authorization or delivery. Service authorization and delivery of services shall be pursuant to WAC 275-27-230.

[Statutory Authority: RCW 71.20.070, 86-18-049 (Order 2418), § 275-27-050, filed 8/29/86; 84-15-058 (Order 2124), § 275-27-050, filed 7/18/84. 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 service plan. (1) The division shall develop a written individual service plan for each person determined eligible for division services within sixty days. Interim services may be provided if deemed necessary.

(2) An individual service plan shall be based on an assessment of the individual's needs and will specify the services adjudged to be in the best interests of the client

and meet the individual's habilitation needs. The individual service plan shall be in the form and manner specified by the director.

(3) A client, his or her parent or parents, or guardian may request review or modification of the service plan at any time based on changed circumstances.

(4) Development, review, and significant modifications of the individual service plan shall include, to the maximum extent possible, appropriate division staff, the client, his or her parent or parents or guardian, and personal representative or representatives of the agency or facility which is, or will be, primarily responsible for the implementation of specific provisions of the plan.

(5) An individual service plan is a planning document, and is not an authorization for services. A plan does not guarantee the authorization or delivery of services contained therein. The authorization of such services is pursuant to WAC 275-27-230.

[Statutory Authority: RCW 71.20.070, 86-18-049 (Order 2418), § 275-27-060, filed 8/29/86; 84-15-058 (Order 2124), § 275-27-060, filed 7/18/84. 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 275-27-220 Family support services. (1) The intent of family support services is to reduce or eliminate the need for out-of-home residential placements of clients wherein the in-home placement is in the client's best interest, to allow clients to live in the most independent setting possible, and to have access to services best suited to clients' needs.

(2) Family support services include, but are not limited to, the following services:

(a) Emergency or planned respite care;

(b) Attendant care;

(c) Therapeutic services, including physical therapy, occupational therapy, behavior management therapy, and communication therapy;

(d) The purchase, rental, loan or refurbishment of specialized equipment, environmental modifications, and other adaptations;

(e) Other service pursuant to subsection (1) of this section approved by the director or designee.

(3) Family support services are time-limited. Services are authorized for a specified period. A service authorization shall state the type of, amount, and period (duration) of service. Each authorization constitutes a new service for a new period. If requested family support services are not authorized, such actions are deemed a denial of services. Family support services may be authorized below the level requested for the period. If during the authorized service period, family support services are reduced or terminated below the levels specified in service authorizations, such actions are deemed a reduction or termination of services.

(4) Service priorities shall be used to determine monthly family support service authorizations. Factors used to establish the service priorities include the following:

(a) The client's need for assistance with personal care (bathing, dressing, feeding, mobility, toileting, etc.);

(b) The client's special medical support requirements (apnea monitor, gastrostomy, tracheotomy, gavage feeding, heart monitor, respirator, ventilator, etc.);

(c) The client's risk of behavioral episodes which may result in physical injury to the client or others, and/or in damage to property;

(d) The number of primary care givers available to assist the client and/or family;

(e) The availability to the client of private, local, other state, or federal resources;

(f) The likelihood of out-of-home placement; and

(g) The client and/or family's relative need for family support services when compared with other clients and/or families' need for services.

(5) Family support services shall be authorized in accordance with policies established by the director. Monthly service authorizations shall be based on:

(a) Service requests which are for family support services prescribed in subsection (2) of this section;

(b) Service priorities based on the factors prescribed in subsection (4) of this section;

(c) Availability of requested family support services; and

(d) Monthly regional family support services funding allocations, except for emergencies as defined in WAC 275-27-020(11).

[Statutory Authority: RCW 71.20.070. 86-18-049 (Order 2418), § 275-27-220, filed 8/29/86.]

WAC 275-27-230 Authorization of services. (1) The division's field services section shall be responsible for authorizing services received by all eligible division clients including, but not limited to:

(a) Placement to and from residential habilitation centers;

(b) Other residential facilities, including, but not limited to, community IMR's, group homes, tenant support, and alternative living;

(c) Family support services; and

(d) Nonresidential programs.

(2) Authorization of services shall be based on the availability of funding and/or services.

(3) Determination of services to be authorized shall include, to the maximum extent feasible, the client, his or her parent or parents or guardian, and all other responsible parties.

(4) The emergency admission of any individual to a residential habilitation center shall not exceed thirty days.

(5) A temporary admission of any individual to a residential habilitation center for respite care or diagnostic services shall not exceed thirty days.

(6) Placement by the division in a county-funded service is limited as follows:

(a) The service must be included in a state-approved county plan;

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

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

(ii) Exceptions may be granted by the division for county-funded services during nonschool months.

[Statutory Authority: RCW 71.20.070. 86-18-049 (Order 2418), § 275-27-230, filed 8/29/86; 84-15-058 (Order 2124), § 275-27-230, filed 7/18/84. Statutory Authority: RCW 71.20.070, 72.33.125 and 72.33.850. 82-06-034 (Order 1771), § 275-27-230, filed 3/1/82. 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.]

WAC 275-27-240 Financial services. The division's field services may include services to protect the financial interests of developmentally disabled individuals.

[Statutory Authority: RCW 71.20.070. 84-15-058 (Order 2124), § 275-27-240, filed 7/18/84; Order 1143, § 275-27-240, filed 8/11/76.]

WAC 275-27-250 Guardianship services. If it appears an eligible individual requires a guardian, the division's field services may assure initiation of and/or assist in guardianship proceedings.

[Statutory Authority: RCW 71.20.070. 84-15-058 (Order 2124), § 275-27-250, filed 7/18/84; Order 1143, § 275-27-250, filed 8/11/76.]

WAC 275-27-300 Completion of individual program plan—Residential habilitation centers. (1) Upon admission from the division's field services section, the state residential habilitation center shall take actions necessary to review and complete the individual service 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 habilitation centers 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; and

(c) Adjustment assessment.

(4) Upon completion of assessment, the residential habilitation center 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 service plan shall meet requirements of chapter 392-173 WAC.

(6) The requirements of this section shall be completed within thirty 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 WAC 275-27-500.

[Statutory Authority: RCW 71.20.070, 84-15-058 (Order 2124), § 275-27-300, filed 7/18/84. 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), § 275-27-310, 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), § 275-27-320, filed 3/16/78.]

WAC 275-27-400 Notification. (1) The department shall notify the client or applicant, the parent when the client or applicant is a minor, and the guardian when the client or applicant is an adult, of the following decisions:

(a) Denial or termination of eligibility set forth in WAC 275-27-030;

(b) Development or modification of the individual service plan set forth in WAC 275-27-060;

(c) Authorization, denial, reduction, or termination of services set forth in WAC 275-27-230; and

(d) Admission or readmission to, or discharge from, a residential habilitation center.

(2) The notice shall set forth appeal rights pursuant to WAC 275-27-500 and a statement that the client's case manager can be contacted for an explanation of the reasons for the action.

(3) The department shall provide at least thirty days' advance notice of action to terminate a client's eligibility, terminate or reduce a client's service, or discharge a client from a residential habilitation center to the community, except for the transfer or removal of a client from a service set forth in WAC 275-27-500 (5)(f).

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

(5) The division shall ensure notification to the school district in which a school-aged child is to be placed when a placement decision is reached.

[Statutory Authority: RCW 71.20.070, 86-18-049 (Order 2418), § 275-27-400, filed 8/29/86; 84-15-058 (Order 2124), § 275-27-400, filed 7/18/84. 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 Fair hearings. (1) A client or applicant, the parent when the client or applicant is a minor, and the guardian when the client or applicant is an adult, has the right to appeal the following decision made by the division:

(a) Denial or termination of eligibility set forth in WAC 275-27-030;

(b) Development or modification of the individual service plan set forth in WAC 275-27-060;

(c) Authorization, denial, reduction, or termination of services set forth in WAC 275-27-230;

(d) Admission or readmission to, or discharge from, a residential habilitation center.

(2) Fair hearings are governed by the Administrative Procedure Act, the rules in this chapter, and by chapters 10-08 and 388-08 WAC. In cases of conflict between this chapter and chapter 388-08 WAC, the provisions in this chapter take precedence over the rules in chapter 388-08 WAC.

(3) The request for a fair hearing must be in writing and filed with the DSHS office of hearings within thirty

days of receipt of the decision the appellant wishes to appeal.

(4) The department shall not implement the following actions while administrative proceedings are pending:

(a) Termination of eligibility;

(b) Reduction or termination of service, except when the action to reduce or terminate the service is based on the availability of funding and/or service; or

(c) Removal or transfer of a client from a service, except when a condition in subsection (5)(f) of this section is present.

(5) The department shall implement the following actions while administrative proceedings are pending:

(a) Denial of eligibility;

(b) Development or modification of an individual service plan;

(c) Denial of service;

(d) Reduction or termination of service when the action to reduce or terminate the service is based on the availability of funding and/or service;

(e) After notification of an administrative law judge's (or review judge) ruling that the appellant has caused an unreasonable delay in the proceedings; or

(f) Removal or transfer of a client from a service when:

(i) An immediate threat to the client's life or health is present;

(ii) The client's service provider is no longer able to provide services due to termination of the provider's contract; decertification of the provider; nonrenewal of provider's contract; revocation of provider's license; or emergency license suspension; or

(iii) The client, the parent when the client is a minor, or the guardian when the client is an adult, approves the decision.

(6) When the appellant requests a hearing to appeal a decision to return a resident of a state residential school to the community, the procedures specified in RCW 72.33.161 shall govern the proceedings. These include:

(a) A placement decision shall not be implemented during any period during which an appeal can be taken or while an appeal is pending and undecided unless:

(i) The client's or his or her representative gives written consent, or

(ii) The administrative law judge (or review judge) after notice to the parties rules the appellant has caused an unreasonable delay in the proceedings.

(b) The burden of proof is on the department.

(c) The burden of proof is whether the specific placement proposed by the department is in the best interests of the resident.

(d) When a party files a petition for administrative review of an initial decision, the secretary shall rule on the petition and render the review decision. The secretary cannot delegate the authority to make the final decision. The secretary may get advice and assistance from agency employees who have not participated in the proceedings in any manner and whose duties do not include investigative or prosecutory functions and the secretary's review shall be confined to the record.

(7) The initial decision should be made within sixty days of the department's receipt of the request for a hearing. When a party files a petition for administrative review, the review decision should be made within sixty days of the department's receipt of the petition. The decision-rendering time is extended by as many days as the hearing is continued on motion by, or with the assent of, the appellant.

[Statutory Authority: RCW 71.20.070. 86-18-049 (Order 2418), § 275-27-500, filed 8/29/86. Statutory Authority: RCW 72.33.161. 84-15-038 (Order 2122), § 275-27-500, filed 7/13/84. 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 275-27-800 Community alternatives program (CAP). Purpose—Legal basis.

(1) The purpose of this program is to authorize certain home and community-based services for persons with developmental disabilities to provide an alternative to care in an institution for the mentally retarded (IMR).

(2) Community alternatives program (CAP) is a Medicaid program authorized by P.L. 97-35 Section 2176 as approved by the secretary of the U.S. Department of Health and Human Services.

[Statutory Authority: RCW 71.20.020. 84-07-018 (Order 2086), § 275-27-800, filed 3/14/84.]

WAC 275-27-810 Eligible persons. (1) To be eligible to apply for community alternatives program (CAP) services, the individual must:

(a) Meet the criteria for the division of developmental disabilities (DDD) eligibility.

(b) Meet the criteria for disability as established in the Social Security Act.

(c) Have an income of less than three hundred percent of the federal Supplemental Security Income (SSI) benefit amount.

(d) Need an IMR level of care as determined by a DDD nursing care consultant.

(i) Require twenty-four hour care and require services that cannot be provided by a family member, and

(ii) Have a documented need for habilitation services and training.

(2) Participation in CAP is by choice of the otherwise IMR-eligible person.

[Statutory Authority: RCW 71.20.020. 84-07-018 (Order 2086), § 275-27-810, filed 3/14/84.]

WAC 275-27-820 CAP—Services. (1) The following services may be authorized as specified by the individual service plan.

(a) Case management services, including intake, eligibility determination, assessment of need, placement, coordination, service authorization, and case monitoring.

(b) Habilitation services, including training, support, and supervision of developing the individual's physical skills, personal care, and social or community integration skills.

(c) Respite care for eligible individuals needing temporary support and supervision which cannot be provided by his or her family.

(d) Professional and other community-based services.

(2) The projected cost of services in the CAP individual service plan may not exceed eighty percent of the cost of care in an IMR, as determined by DDD case management services at the time of individual service plan development.

(3) The division shall review CAP eligibility annually.

[Statutory Authority: RCW 71.20.020. 84-07-018 (Order 2086), § 275-27-820, filed 3/14/84.]

Chapter 275-31 WAC

DIVISION OF DEVELOPMENTAL DISABILITIES PROGRAM OPTION RULES

WAC

275-31-005	Purpose.
275-31-010	Definitions.
275-31-020	Determination of eligibility.
275-31-030	Notification to potential applicants.
275-31-040	Application for services.
275-31-050	Individual service plan.
275-31-070	Implementation of necessary services.
275-31-080	Criteria for determining costs.
275-31-090	Method of rate determination.

WAC 275-31-005 Purpose. (1) In order for developmentally disabled individuals to live in the most independent settings possible, and in order for these individuals and families to have access to services best suited to their needs, the division of developmental disabilities may approve alternative service plans for individuals.

(2) Measurable outcomes producing a positive result for individuals will be demonstrated as a result of services provided under such alternative plans.

(3) Cost savings will be demonstrated when costs of services under alternative plans are compared with costs of services provided prior to alternative plans.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-005, filed 1/18/84.]

WAC 275-31-010 Definitions. (1) "Department" means the department of social and health services of the state of Washington.

(2) "Division" means the division of developmental disabilities of the department of social and health services.

(3) "Field services" means the section of the division providing case management services and resource management to division clients living in the community.

(4) "Individual" means the person for whom an alternative plan is being developed.

(5) "Individual habilitation plan" means an individual written plan of care prepared by an interdisciplinary team that sets 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 the individual can presently or potentially achieve.

(6) "Individual program plan" means an individual service plan or individual habilitation plan.

(7) "Individual service plan" means the written plan, specifying goals and objectives, developed by division staff, parent or parents and/or guardian, the individual, and others whose participation is relevant to identifying needs of the individual.

(8) "Less dependent program" means an alternative program which will provide increased numbers and variety of community contacts for the individual or will require fewer hours of staff supervision/support for the individual.

(9) "Provider" means the person or agency contracted by the department to provide training, support, or other services as designated in the alternative plan.

(10) "Secretary" means the secretary of the department of social and health services or such officer of the department as the secretary may designate to carry out administration of the provision of these rules.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-010, filed 1/18/84.]

WAC 275-31-020 Determination of eligibility. An individual shall be eligible for services under an alternative plan, provided that the division has determined the individual has a disability as defined in WAC 275-27-030 and the individual is receiving current services from the department.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-020, filed 1/18/84.]

WAC 275-31-030 Notification to potential applicants. (1) Field services shall, prior to March 15, 1984, contact by mail all individuals determined to have a disability as defined in WAC 275-27-030, along with the guardians and agencies entitled to custody of such disabled individuals and parents of disabled individuals who are minors. Thereafter, the aforementioned persons shall be advised once in each calendar year.

(2) Potential applicants shall be informed of the process by which they may develop an alternative plan for services.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-030, filed 1/18/84.]

WAC 275-31-040 Application for services. (1) In the case of a minor individual, an application can be made by the parent or parents, the guardian or limited guardian, or by the person or agency legally entitled to custody.

(2) In the case of an adult, an application can be made by the individual, by the guardian or limited guardian, or by the person or agency legally entitled to custody.

(3) Application will be made on the forms supplied by the department and the applicant will state the following:

- (a) The outline of services proposed;

- (b) Service providers for each service;
- (c) Tasks necessary to the delivery of each service and the person/organization responsible for each task;
- (d) All costs of services currently provided for the individual;
- (e) The cost of each service component proposed in the alternative plan;
- (f) Information explaining why the alternative plan is a less dependent program than the current program; and
- (g) Information explaining why the alternative plan is appropriate under the goals and objectives of the individual program plan.

(4) Applicants must be notified within ninety days after the alternative plan has been received by the department of the secretary's approval or denial of the plan.

(5) The notification of the department's decision is subject to appeal rights pursuant to WAC 275-27-400 and 275-27-500.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-040, filed 1/18/84.]

WAC 275-31-050 Individual service plan. The division shall ensure a current individual service plan is available for each individual prior to approval of application.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-050, filed 1/18/84.]

WAC 275-31-070 Implementation of necessary services. (1) Plans meeting all the criteria specified in RCW 72.33.125(5) shall be implemented as soon as reasonable, but not later than one hundred twenty days after the completion of the determination process.

(2) Approval and reasonableness may be reviewed for a new determination if the plan has not been implemented within one hundred twenty days.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-070, filed 1/18/84.]

WAC 275-31-080 Criteria for determining costs. (1) The term "all costs" includes, but is not limited to: Residential support, habilitation, medical care, income grants to the persons, support to assist their families or other caregivers, and nonrecurring start-up expenses. All residential costs will recognize capital investment, using federal or professional accounting conventions. The department will take the following costs into account:

(a) All costs paid by the department, including costs borne by the federal government. Income grants paid by the federal government directly to the person (or payee) will be considered.

(b) All costs of the current or proposed program.

(2) The department will estimate a monthly average cost based on a two-year prospective cost period.

(3) Where costs are paid or records kept for a group of individuals rather than for one individual in question, the department will primarily use average cost for that group, such as all individuals living at the particular group home or particular residential habilitation center,

or all the persons supported by the particular day habilitation program. Exceptions will be considered for persons receiving substantial services above the services received by the typical person in the group.

(4) The analysis of the proposed alternative service plan should show that proposed services can be provided at eighty percent of the current service cost. Exceptions will be considered for persons needing substantial services.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-080, filed 1/18/84.]

WAC 275-31-090 Method of rate determination. Prevailing rates for comparable services will ordinarily be utilized in determining reimbursement for cost components of the alternative plan.

[Statutory Authority: RCW 72.33.125. 84-03-054 (Order 2066), § 275-31-090, filed 1/18/84.]

Chapter 275-33 WAC

TRANSFER OF JUVENILE OFFENDER TO THE DEPARTMENT OF CORRECTIONS

WAC

275-33-010	Purpose.
275-33-020	Notification to juvenile.
275-33-030	Composition of board.
275-33-040	Attendance at hearing.
275-33-050	Consideration of evidence.
275-33-060	Record of decision.

WAC 275-33-010 Purpose. The purpose of this chapter is to establish standards and procedures for the conduct of review boards for juvenile offenders being considered for transfer to the department of corrections (DOC) from the department of social and health services in accordance with RCW 13.40.280.

[Statutory Authority: RCW 13.40.280. 84-10-032 (Order 2097), § 275-33-010, filed 4/30/84.]

WAC 275-33-020 Notification to juvenile. A juvenile being considered for transfer to DOC shall be notified in writing at least five days in advance of the review board hearing convened to consider the matter. Notification to the juvenile offender will include the reasons the transfer is being considered and a copy of the rules pertaining to the review board hearing. Prior to any review board hearing, the juvenile being considered for transfer to DOC, or the juvenile's attorney, shall have the right of access to, and adequate opportunity to examine any files or records of the department pertaining to the proposed transfer of the juvenile to the department of corrections.

[Statutory Authority: RCW 13.40.280. 84-10-032 (Order 2097), § 275-33-020, filed 4/30/84.]

WAC 275-33-030 Composition of board. The review board will be composed of the director of DJR or designee and two other juvenile rehabilitation administrators appointed by the chairman.

[Statutory Authority: RCW 13.40.280. 84-10-032 (Order 2097), § 275-33-030, filed 4/30/84.]

WAC 275-33-040 Attendance at hearing. Attendance at a review board shall be limited to parties directly concerned. The chairperson may exclude unauthorized persons unless the parties agree to their presence. Parties shall have the right to present evidence, cross-examine witnesses and make recommendations to the board. All relevant and material evidence is admissible which, in the opinion of the chairperson, is the best evidence reasonably obtainable, having due regard for its necessity, availability and trustworthiness.

[Statutory Authority: RCW 13.40.280. 84-10-032 (Order 2097), § 275-33-040, filed 4/30/84.]

WAC 275-33-050 Consideration of evidence. At the conclusion of the hearing, the review board will consider all evidence presented and make a decision whether continued placement of the juvenile offender in an institution for juvenile offenders presents a continuing and serious threat to the safety of others in the institution.

[Statutory Authority: RCW 13.40.280. 84-10-032 (Order 2097), § 275-33-050, filed 4/30/84.]

WAC 275-33-060 Record of decision. The chair of the review board will prepare a written record of the decision and reasons therefore. The review board shall be recorded manually, or by mechanical, electronic, or other device capable of transcription.

[Statutory Authority: RCW 13.40.280. 84-10-032 (Order 2097), § 275-33-060, filed 4/30/84.]

Chapter 275-35 WAC CONSOLIDATED JUVENILE SERVICES PROGRAMS

WAC	
275-35-010	Authority.
275-35-020	Definitions.
275-35-030	Establishment of a consolidated juvenile services program.
275-35-040	General provisions.
275-35-050	Organization.
275-35-060	Administration.
275-35-070	Monitoring of performance and evaluation of program impact.
275-35-080	Distribution of funds and fiscal management.
275-35-090	Services.
275-35-100	Exceptions to rules.

WAC 275-35-010 Authority. Rules and regulations relating to consolidated juvenile service programs are hereby adopted pursuant to chapter 13.06 RCW.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-010, filed 4/4/85.]

WAC 275-35-020 Definitions. (1) "Application" is the document requesting state funds for specific projects under the consolidated juvenile services program.

(2) "Consolidated juvenile services program" or "program" is that portion of the county's juvenile justice

system providing services to a juvenile who has been adjudicated an offender or referred to a diversion unit.

(3) "Consolidated juvenile services review committee" or "review committee" means a group of individuals whose function is to provide input and review and make comments regarding the application. Said review committee shall be selected by the program administrator in consultation with the executive body and include, but not necessarily be limited to, representatives from the following: The executive's office, juvenile court judges and staff, law enforcement, prosecuting and defense attorneys, law and justice planning personnel, state-funded diversion units, educators, ethnic minorities, children services professionals, citizens, and private sector youth-serving groups.

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

(5) "Director" means the director of the division of juvenile rehabilitation or his or her designee.

(6) "Division" means the division of juvenile rehabilitation.

(7) "Juvenile justice system" or "system" means the organizational structure and process existing in the county for handling juvenile offenders.

(8) "Participating county" means a county or counties making application under this chapter.

(9) "Planning body" means that individual or group of individuals responsible for the development of the application.

(10) "Program administrator" or "administrator" means the person designated to administer the consolidated juvenile services program. This will be the juvenile court administrator except in those counties choosing not to participate in CJS or in those instances where the juvenile court administrator chooses not to administer the program.

(11) "Project" is a single unit of work to be performed as part of a consolidated juvenile services program.

(12) "Project supervisor" or "supervisor" means a person designated to supervise a project or projects in the consolidated juvenile services program.

(13) "Regional administrator" means the regional administrator of one of the division's six administrative regions.

(14) "Regional plan" means the document approved by the division setting forth regional program emphasis and priorities for the ensuing funding period.

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

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-020, filed 4/4/85.]

WAC 275-35-030 Establishment of a consolidated juvenile services program. (1) Request to participate.

(a) A request by a county or group of counties to participate under these provisions shall include a resolution or letter of intent submitted to the division by the executive body expressing intent to participate.

(b) After official acceptance by the regional administrator, the county's application will be considered in determining the division's community program expenditure for the ensuing funding period.

(c) Other public and private sector agencies within the county shall be considered in the development of the application and may be included as subcontractors in the county's request for funding by the division.

(d) Other public and private sector agencies may apply directly to the division for program funds. In such instances said agencies shall be responsible to meet all obligations and requirements specified for participating counties under this chapter.

(2) Program planning process and approval.

(a) Based upon divisional goals, the regional administrator develops regional priorities to assist planning bodies in formulating local priorities and program strategies.

(b) Each participating county shall develop through its existing planning process a program application for the delivery of services to juvenile offenders and shall agree through submission of the application to comply with the provisions of this chapter.

(c) The application will be submitted to the review committee who will review and make comments, which shall include but not be limited to the following areas:

(i) The provision of services to identified offender groups and access to services by all offenders;

(ii) Efforts to identify and utilize existing community services;

(iii) The avoidance of service duplication;

(iv) The maintenance of existing county and private agency commitment of funds to juvenile offender programs;

(v) Appropriate linkage to and support from other elements of the county's existing juvenile justice system; and

(vi) The extent to which regional priorities have been considered.

(d) Prior to the submission of the application to the regional administrator, the comments of the review committee will be considered by the planning body who will, if needed, either modify the plan or attach to the plan the reasons for not making suggested modifications.

(e) Written guidelines and instructions for preparing the application will be provided by the division. The application shall be developed in consultation with the regional administrator to ensure the coordination of state, county, and private sector resources within regional boundaries and shall be submitted to the regional administrator for review and subsequent approval.

(f) The division may provide planning bodies and review committees with technical services in the development of the application.

(3) Definitions of juvenile offender groups. Applications submitted must address service components for at least the following groups of juvenile offenders:

(a) Divertees. Juveniles participating in diversion under chapter 13.40 RCW.

(b) Court-adjudicated offenders not committed to the department. Juveniles who have been adjudicated by the

court, but not committed to the department, and fall into one of the following categories:

(i) Minor/first offenders. Juvenile offenders defined as minor/first under chapter 13.40 RCW.

(ii) Middle offenders. Juvenile offenders who:

(A) Are not minor/first offenders as defined by chapter 13.40 RCW, or

(B) Have less than one hundred ten points on the standard sentencing scale, or

(C) Have not been committed to the department through the declaration of "manifest injustice."

(iii) High risk offenders. Juvenile offenders who:

(A) Have one hundred ten points or more on the standard sentencing scale, or

(B) Have committed a current offense that is a felony and are already on community supervision as a middle or serious offender, or

(C) Have committed a current offense which is a felony against people, or

(D) Have committed a current offense which is a felony and have evidenced increasingly serious criminal behavior within the previous twelve months, or

(E) Are defined as a serious offender by chapter 13.40 RCW and are allowed to remain in the community through the declaration of "manifest injustice."

(c) Court-adjudicated offenders committed to the department. Juveniles who have been adjudicated by the court and committed to the department, and fall into one of the following categories:

(i) Juveniles residing in the community as parolees or under the community residential placement program.

(ii) Juveniles residing in a county detention facility under a community commitment program.

(iii) Juveniles residing in a division institution or group home.

(d) Interstate compact agreement offenders. Juveniles supervised on parole through the interstate compact agreement.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-030, filed 4/4/85.]

WAC 275-35-040 General provisions. (1) Access to services and use of existing community resources.

(a) Program administrators shall ensure all juvenile offenders have access to appropriate services, activities, and opportunities.

(b) Planning bodies shall avoid duplicating existing community services. If proposed services are similar to those already existing in the community, clear evidence must be presented in the application to demonstrate why such existing services are inappropriate or unavailable to meet identified needs or why such services cannot be provided through cooperative program planning or shared funding arrangements.

(2) All juveniles served by projects covered under this chapter shall be afforded due process in all contacts, especially those which may result in a more restrictive intervention.

(3) All projects included in the application shall comply with the provisions of this chapter, applicable divisional policies and standards, juvenile court rules, as well as other applicable standards.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-040, filed 4/4/85.]

WAC 275-35-050 Organization. (1) The organizational structure of the program is the prerogative of the county or private sector agency participating under this chapter and shall not be dictated by these standards.

(2) The organizational structure shall be set forth in the application and shall reflect the program's relationship to other juvenile justice components operating within the county and region.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-050, filed 4/4/85.]

WAC 275-35-060 Administration. (1) The distribution of funds for consolidated juvenile services programs shall be contingent upon:

- (a) The designation of a program administrator, and
- (b) The designation of a single project supervisor for each subcontract awarded outside the prime contract.

Said administrators and supervisors are responsible for the implementation of the program and the accomplishment of stated activities, results, and impacts.

(2) Administrators or supervisors will meet at least quarterly with the regional administrator or designees to review progress toward the achievement of results and other matters related to the overall implementation and funding of projects within the consolidated juvenile services program.

(3) Administrators or supervisors shall submit activity, narrative, and other reports and data as requested relating to programs and/or projects covered under this chapter to the regional administrator and shall participate with the regional administrator in the development of program and/or project status reports as may be required by the division.

(4) Case records and management information.

(a) Administrators and supervisors shall ensure a case record is kept for each juvenile offender in projects covered under this chapter, except diversion units will keep only such information as is necessary to monitor and evaluate the referral and disposition activities.

(b) Records other than diversion shall minimally contain:

(i) A treatment plan based upon identified needs setting forth specific objectives and methods in concise behavioral terms; and

(ii) A termination/closing report summarizing case activity.

(c) Case records shall be current and treatment plans updated at least quarterly.

(d) The provisions of chapter 13.50 RCW pertaining to the maintenance and confidentiality of social and legal information apply to all programs and projects covered under this chapter.

(e) Administrators and/or supervisors will provide necessary statistical data to maintain case files in the division's management information system.

(5) Policies and procedures.

(a) Each administrator shall maintain written policies and procedures which shall include, but not be limited to, the following:

(i) Reporting of serious criminal incidents involving juveniles participating in the program to the regional administrator.

(ii) Reporting of misconduct or malfeasance by staff of the program to the regional administrator.

(b) These policies and procedures will be reviewed at least annually by the regional administrator or designee.

(6) Change in application.

(a) Modification of a project requires the advance written approval of the regional administrator and may, at the regional administrator's discretion, require review and comment by the review committee.

(b) Changes in the budget during a funding period are accomplished by transfer, modification, or amendment.

(i) Transfers. The reallocation of funds between line items of the contract which will not exceed four thousand dollars or five percent, whichever is less, of the total budget within a fiscal year and which will not change the overall scope of the program may be accomplished by written notification to the regional administrator.

(ii) Modifications. Reallocation of funds between line items of the contract exceeding four thousand dollars or five percent, whichever is less, of the total budget within a fiscal year requires advance written approval of the regional administrator. The regional administrator may require review and comment by the review committee.

(iii) Amendments. Amendments require the involvement of the department's contracts office, shall be processed through the division's regional office, and may, at the regional administrator's discretion, require review and comment by the review committee. Amendments are necessary when:

(A) Contract amounts are increased or decreased;

(B) Major change in the application is proposed;

(C) Increased agency staffing is requested;

(D) A change exceeds ten percent of the total contract budget;

(E) A change moves moneys into a previously vacant line item.

(7) Training. Each participating county or agency providing services under this chapter shall provide relevant staff training.

(8) Assumption of division services.

(a) The assumption of division services shall be negotiated between the regional administrator and the administrator and will be reviewed by the review committee and the division's central office prior to a final decision.

(b) Where such services are assumed, the regional administrator will provide appropriate orientation and training.

(9) Review board authority in projects covered by this chapter shall rest with the administrator.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-060, filed 4/4/85.]

WAC 275-35-070 Monitoring of performance and evaluation of program impact. (1) It shall be the responsibility of the administrator to submit activity reports, quarterly reports, corrective action plans and reports, and other such reports as specified in the division's monitoring system for the program to the regional administrator.

(2) It shall be the responsibility of the regional administrator to submit to the division's central office progress reports as specified in the division's monitoring system for the program.

(3) The regional administrator may, at any time, request a formal program/project or fiscal audit through the department and may also request other available technical services to assist in monitoring and evaluating the program/projects.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-070, filed 4/4/85.]

WAC 275-35-080 Distribution of funds and fiscal management. (1) Funding constraints.

(a) Funds for programs covered by this chapter shall be utilized for the achievement of activities, results, and impacts stated for each project.

(b) Failure on the part of any project to perform in accordance with the provisions of this chapter or to achieve established activities, results, and impacts may result in the termination or reduction of funds.

(c) The administrator shall be responsible for the management of all fiscal matters related to the program, shall comply with state and local policies and procedures and the terms and conditions of the contract, and shall provide information to the regional administrator at regular and requested intervals.

(2) Limitations of funding.

(a) Funds received by participating counties shall not be used to replace local funds for existing services.

(b) Mileage reimbursement and per diem may not exceed the current allowable state or county rate, whichever is less.

(c) Equipment purchases must be approved in advance by the regional administrator and should be processed through the regional office whenever possible and feasible.

(d) Funds for evaluation are allowable, but the design, scope, and the expected final product must be clearly specified in the application.

(e) Funds for administrative salaries, benefits, and program support may not exceed ten percent of the total contract award.

(f) Further limitations on the distribution of funds for certain expenditure categories may be set forth in the division's application and budget instructions for the program.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-080, filed 4/4/85.]

WAC 275-35-090 Services. (1) Diversion.

(a) Diversion staff shall be limited in their actions as set forth in chapter 13.40 RCW and the applicable divisional policies and standards.

(b) Diversion staff shall ensure divertees receive penalties on a priority continuum, whereby the heaviest penalty is assessed for the most serious of the divertable offenses and the least penalty is assessed for the least serious offense.

(c) Diversion staff shall develop: A statement of work; program philosophy; written policies and procedures; and shall maintain a line of communication with appropriate community entities, such as law enforcement and community service resources.

(d) Diversion staff shall contact divertees at least monthly or shall establish and maintain some other mechanism to ensure compliance with the diversion agreement; said divertee shall be terminated upon completion of the agreement.

(2) Community supervision. The administrator shall prepare minimum standards regarding frequency of contact and length of stay on a priority continuum, whereby the more serious offenders are provided more intense services for longer periods of supervision than are the less serious offenders. Said standards shall be set forth in the application.

(3) Parole services.

(a) Parole supervision must be provided for all youth committed to the department as juvenile offenders, unless legal age limits have been reached or other post-institutional plan has been arranged through the regional administrator.

(b) Staff shall plan for and coordinate the youth's release from the institution; facilitate family, foster, or group home placement; facilitate youth's school re-entry, placement in vocational training, skills training, or employment; and develop other support programs that can reasonably be expected to be effective in achieving successful reintegration.

(c) Staff shall develop and monitor requirements for all interstate parolees.

(4) Community residential services.

(a) Community residential placement program.

(i) The community residential placement program provides placements for committed youth serving sentences at the minimum security level;

(ii) It shall provide twenty-four-hour supervision and such support services as arranging school and work programs, counseling, and other similar social services;

(iii) It shall provide a transitional program for youth between residential placement and the intended community placement in order to maximize successful reintegration; and

(iv) It shall ensure availability of medical and dental care, psychiatric and psychological consultations and testing, and such other services as may be needed to enhance reintegration.

(b) Community commitment program.

(i) The community commitment program provides placement and programming for committed youth serving sentences in county detention facilities.

(ii) It shall provide a transitional program for youth between secure detention and community supervision.

(5) Other services may be supported by the division as funds are available.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-090, filed 4/4/85.]

WAC 275-35-100 Exceptions to rules. A waiver of the specific requirements of this chapter may be requested by written application to the director in situations where the imposition of such provisions can be shown to be detrimental or impractical to overall program operations. The director will give each waiver request individual consideration and promptly advise the applicant in writing of the director's decision regarding the waiver and explain the basis for such decision.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-35-100, filed 4/4/85.]

Chapter 275-36 WAC

GROUP HOMES FOR THE MENTALLY AND PHYSICALLY HANDICAPPED

WAC

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DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

275-36-060	Placement of residents in group homes. [Order 8, § 275-36-060, filed 9/25/69.] Repealed by Order 1070, filed 11/21/75.
275-36-070	Training. [Order 8, § 275-36-070, filed 9/25/69.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-36-180.

275-36-080	Supervision. [Order 8, § 275-36-080, filed 9/25/69.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-36-061.
275-36-090	Payment for service. [Order 8, § 275-36-090, filed 9/25/69.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-36-071.
275-36-100	Resident remuneration. [Order 8, § 275-36-100, filed 9/25/69.] Repealed by Order 1070, filed 11/21/75. Later promulgation, see WAC 275-36-081.
275-36-210	Facility requirements. [Order 1070, § 275-36-210, filed 11/21/75.] Repealed by 83-06-013 (Order 1950), filed 2/23/83. Statutory Authority: RCW 72.33.850.

WAC 275-36-010 Definitions. (1) "Department" means the department of social and health services of the state of Washington.

(2) "Developmentally disabled client" means an individual who has a mental or physical deficiency and is so determined by the department under WAC 275-27-030.

(3) "Division" means the division of developmental disabilities of the department of social and health services.

(4) "Group home" means a home which uses training and support services staff to assist each resident to move toward an independent life style, or the governing body of a home which uses training and support services staff to assist each resident to move toward an independent life style, or an individual appointed by the governing body to act in behalf of the governing body. The residents of a group home shall be individuals certified as eligible for division of developmental disabilities services by staff of the division, or approved by the division as compatible with developmentally disabled persons in the residential setting.

(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 residents.

(b) Group homes must be located within reasonable proximity to the community resources that are necessary to the implementation of individual service plans.

(c) Residents will take part, insofar as capable, in their own personal care and in the care of their own quarters.

(5) "Secretary" means the secretary of the department or such officer of the department as the secretary 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.

(6) "Support services" are those services provided to the resident by a staff of the group home designed to assist the resident in adjustments to community living. There are two types of support services:

(a) The resident will receive direction or assistance in accomplishing a given task or will be monitored during an activity by a staff member of the group home.

(b) Someone else will do the task for the resident.

(7) "Training" is goal-oriented individualized instruction taught to the resident by a staff member of the group home. This instruction is designed to remediate skill deficiencies affecting the survival of the resident, quality of life, or limits the resident's independence.

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-010, filed 2/23/83; 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, the group home shall:

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

(2) Permit the county developmental disabilities board to inspect the group home and report to the department any deficiencies in the group home's programs.

(3) File with the division a statement of assurance providing, 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, religion, color, creed or national origin.

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-020, filed 2/23/83; 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 division may certify a group home as approved for the placement of residents under the provisions of chapter 72.33 RCW. The certification is required biennially, if the group home is in compliance with all sections of chapter 275-36 WAC at the time of certification inspection. If the group home is not in compliance with all of the sections of chapter 275-36 WAC, an annual certification and inspection may be required. Initial application for certification shall be reviewed by the county and recommendations shall be forwarded by the county to the division. The county may submit recommendations to the division pursuant to WAC 275-36-020(2) prior to annual certification by the department.

For initial certification, the group home must submit budgets, staffing patterns, plans for in-service training, plans for health care, and a statement of the group home's operating policies and procedures to the division and the local county board. These documents shall be reviewed by the division as part of the biennial certification process or at other times to assure the documents are kept consistent with the division philosophy.

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-030, filed 2/23/83; Order 1070, § 275-36-030, filed 11/21/75; Order 8, § 275-36-030, filed 9/25/69.]

WAC 275-36-040 Provisional initial certification or interim renewal certification. (1) Provisional initial certification or temporary interim renewal certification may be granted where 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.

(2) Provisional initial certification or interim certification shall be granted for a period not to exceed six months. If the group home does not comply with the requirements of WAC 275-36-020(1) within the six-month period, the department shall withdraw provisional initial and temporary interim certification of the group home.

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-040, filed 2/23/83; 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 shall inspect and evaluate the operation of the group home to insure proper standards of operation are maintained.

(2) The secretary shall periodically but at least biennially evaluate the individual placements to make certain that the training and support service needs of the resident continue to be effectively served in the group home.

(3) The secretary 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.

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-061, filed 2/23/83; Order 1070, § 275-36-061, filed 11/21/75. Formerly WAC 275-36-080.]

WAC 275-36-065 Investigation of complaints. (1) The secretary shall investigate complaints made regarding the group home or the treatment of residents within the group home and shall cause a report to be filed. The report shall specify the corrective action to be implemented with specific time limits for corrective action completion. If such corrective actions are not implemented within specified times, the group home certification may be withdrawn.

(2) In cases where an imminent danger to the health or safety of the residents exists or if the home is not in substantial compliance with licensing and/or certification standards, the certification of a facility may be suspended immediately.

(3) Such revocation, suspension or denial shall be done in accord with the rules governing administrative hearings and the laws of the state of Washington (chapter 34.04 RCW).

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-065, filed 2/23/83.]

WAC 275-36-071 Payment for service. (1) The department shall pay for allowable group home program services provided to eligible developmentally disabled persons. Such payment by the department shall consist of two separate parts:

- (a) Staff reimbursement; and
- (b) Nonstaff rates.

(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 or her own earnings or other financial resources the charges for his or her 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. Residents making payments directly to the group home shall be given a receipt by the group home operator for such payment. Additionally, policies regarding such payments and award letter instructions are to be adhered to by the group home. 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 criteria in this section.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-071, filed 2/23/83; 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 performing 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.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-081, filed 2/23/83; 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 a governing body that is responsible for:

- (a) The group home's general philosophy and direction;
- (b) Developing written statements directing the operation of the group home including, but not limited to the following:
 - (i) The group home's objectives and goals;
 - (ii) A description of the facility's admission criteria and programs;
 - (iii) The group home's policies and procedures that protect the financial interests of residents and provide accountability of resident funds;
 - (iv) The policies and procedures that govern the staff activities in implementing group home services.
- (c) Review and approval of the group home budget.
- (d) Employment of a qualified administrator, i.e.:
 - (i) At least twenty-one years of age;
 - (ii) Holding a baccalaureate degree; and
 - (iii) At least two years' experience in training and/or care of developmentally disabled persons.

(iv) Persons employed as group home administrators before January 1, 1983, are exempt from the qualifications as stated in subsection (1)(c)(ii) of this section.

(2) Written operational statements produced by the governing body shall be approved by the secretary.

(3) The group home may operate under interim certification pending approval of written statements by the secretary, but a plan of correction with compliance to this section no later than ninety days after the plan of correction is written.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-091, filed 2/23/83; 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 which shall be made available to all employees.

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

(3) Residents shall not be routinely involved in the care, training or supervision of other residents.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-101, filed 2/23/83; Order 1070, § 275-36-101, filed 11/21/75.]

WAC 275-36-110 Staffing. (1) An administrator appointed by the governing body shall be responsible for:

(a) The daily operation and maintenance of the group home in compliance with chapter 275-36 WAC and other applicable state regulations, policies and procedures.

(b) Development and administration of policies and procedures to assure clear definition of staff roles and responsibilities; lines of authority and equitable workloads which assure support and training services for residents.

(c) Recruiting, employing or arranging for training of residential care and training staff; and terminating from employment any employee performing in an unsatisfactory manner.

(d) Reporting to the governing body on the operations of the group home.

(e) Delegating his or her authority and responsibility for the operation and maintenance of the group home in his or her absence.

(f) Notifying the division in cases of unauthorized leave of a resident.

(g) Preparation, maintenance, and safe storage of all resident, personnel, and financial records.

(h) Ensure compliance with the division policies governing group home operations.

(2) There shall be sufficient, appropriately qualified, and adequately trained resident care and training staff that shall be responsible for:

- (a) Resident training.
- (b) Resident support services.
- (c) Resident supervision.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-110, filed 2/23/83; Order 1070, § 275-36-110, filed 11/21/75.]

WAC 275-36-120 Staff ratios. (1) A group home shall have a minimum of one paid half-time (twenty hours per week) administrator.

(2) Organizations or corporations operating more than one group home may utilize a single full-time administrator for two or more such homes, at the discretion of the division.

(3) Each certified group home shall maintain minimum staffing requirements applicable to the specific license regulations under which the group home operates: *Provided*, That a certified group home shall have a minimum of one staff member on duty whenever a resident is in the facility.

(4) The group home shall have a staffing schedule approved by the division at the time of certification and whenever substantial changes occur.

(5) 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.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-120, filed 2/23/83; Order 1070, § 275-36-120, filed 11/21/75.]

WAC 275-36-130 Inservice staff training. (1) The group home shall have an orientation for all new employees to acquaint the employees with the philosophy, organization, program, practices, and goals of the group home.

(2) The group home, in cooperation with the division shall provide on-the-job training for each employee and participate in programs relating to people with developmental disabilities so skills in working with the residents are increased.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-130, filed 2/23/83; 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 the residents.

(2) All information contained in a resident's record shall be considered confidential, shall be used in the best interest of the resident, and shall be made available to all training and support staff, to the department, and pursuant to RCW 71.20.075, the county community developmental disabilities board.

(3) Any transfer or inspection of records, except pursuant to subsection (2) of this section, shall be authorized by a release of information form, signed by the resident of legal age or a parent of residents under eighteen, or a legal guardian.

(4) All record entries shall be made in ink prepared at the time or immediately following the occurrence of the event being recorded. The entries shall be legible, dated, and signed by the person making the entry.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-140, filed 2/23/83; 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 ensuring the provision of 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.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-150, filed 2/23/83; Order 1070, § 275-36-150, filed 11/21/75.]

WAC 275-36-153 First aid services. (1) Staff having the responsibility for resident care and training shall have basic first aid training and shall be oriented to written emergency policies.

(2) There shall be written policies to guide the action of resident care and training staff should a resident present a medical emergency.

(3) An adequate first aid kit and a first aid manual shall be kept in a designated location in the group home and readily available to all staff who have responsibility for resident care and training.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-153, filed 2/23/83.]

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 sheltered employment, community integration services, and independent employment when public transportation is not available or appropriate.

(2) The group home shall have available a licensed, well-functioning vehicle, properly maintained in accordance with motor vehicle safety laws and standards.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-160, filed 2/23/83; Order 1070, § 275-36-160, filed 11/21/75.]

WAC 275-36-170 Individual service plan. The group home shall participate in cooperation with staff and other interested persons in developing a written individual service plan for each resident. For adults and adolescents, the plan shall encompass the areas of age-level residence, earning competitive wages; and age-level contacts and relationships. For younger children, the plan shall encompass the areas of age-level self-reliance

living in a family setting, and age-level contacts and relationships. The plan should be developed so that the program is the least restrictive alternative commensurate with resident's support and training needs and delivered using methods to enhance the resident's competence and status in the community. The individual service plan shall be kept current, evaluated, and reviewed at least biennially by the division.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-170, filed 2/23/83; Order 1070, § 275-36-170, filed 11/21/75.]

WAC 275-36-180 Group home service plan. The group home shall, as identified in the written individual service plan, provide each resident an on-going specific service program documenting progress in:

- (1) Responding to emergencies;
- (2) Safety measures;
- (3) Self reliance;
- (4) Transportation;
- (5) Appropriate community participation;
- (6) Development of age-level contacts/relationships.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-180, filed 2/23/83; Order 1070, § 275-36-180, filed 11/21/75. Formerly WAC 275-36-070.]

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.

Residents twenty years of age and under shall attend a public school program. Exceptions may be provided with prior written approval by the division. Attendance is not required in those cases where the resident has graduated from an accredited program.

(2) Residents twenty-one years and older or having graduated from an accredited public school program, shall be provided a community-based educational and/or vocational program as described in the resident's service 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 employment and/or community integration services staff to coordinate and reinforce service goals.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-190, filed 2/23/83; 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 275-36-211 Group home set-up cost. (1) For the purpose of establishing a developmental disabilities group home, the department may enter into a contractual agreement with a group home service provider to

reimburse the service provider for actual cost incurred for administrative staff to initiate the organizational facility administration, for employee time to assure adequately trained and competent staff, and purchase of allowable supplies of the group home.

(2) The department shall reimburse the group home costs up to a maximum of three thousand seven hundred dollars for salaries and wages including fringe benefits and up to a maximum of three thousand five hundred dollars for the purchase of allowable operating supplies.

(3) The group home shall submit a billing document as approved by the department, thirty days after the effective date of the contract. The billing document shall include a detailed listing of wages and salaries paid, supplies purchased, and shall contain a signed certification of accuracy statement.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-211, filed 2/23/83.]

WAC 275-36-260 Change of ownership. On the effective date of a change of ownership as defined in WAC 275-36-010, the department certification with the previous group home operator shall be terminated. The previous owner shall give the department sixty days notice of such termination in accord with the terms of the contract. Final payment to the previous group home operator shall be withheld until all reports and required documents are submitted to and accepted by the department.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-260, filed 2/23/83.]

WAC 275-36-270 Accounting procedures for resident trust accounts. (1) The administrator shall maintain a subsidiary ledger with an account for each resident for whom the group home holds money in trust. Each account and related supporting information shall:

- (a) Be maintained at the group home;
- (b) Be kept current;
- (c) Be balanced each month; and
- (d) Show in detail, with supporting verification, all moneys received on behalf of the individual resident and the disposition of all moneys so received.

(2) Each account shall be available for audit and inspection by a department representative and be maintained for a minimum of three years. The administrator shall notify the division of developmental disabilities, field services office, of the department when:

(a) The account of any individual resident reaches the sum of one thousand four hundred fifty dollars.

(b) The accumulation toward the limit, after admission to the group home, is permitted only from savings from the clothing and personal incidental allowance and other income which the department specifically designates as exempt income from time to time.

(c) No resident account shall be overdrawn (show a debit balance). If a resident wants to spend an amount greater than is in such a resident's trust account, the group home may provide money from the home's own funds and collect the debt by installments from the portion of the resident's allowance remaining at the end of

each month. No interest may be charged to the residents for such loans.

(3) In order to ensure that residents' trust accounts are not charged for services provided by state-funded programs, any charge for medical services otherwise properly made to a resident's trust account must be supported by a written denial from the department.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-270, filed 2/23/83.]

WAC 275-36-275 Trust moneys—Imprest fund. (1) The provider may maintain a petty cash fund originating from trust moneys of an amount reasonable and necessary for the size of the facility and the needs of the residents, not to exceed two hundred fifty dollars. This petty cash fund shall be an imprest fund. All moneys over and above the trust fund petty cash amount shall be deposited intact in a trust fund checking account, separate and apart from any other bank account(s) of the facility or other facilities.

(2) Cash deposits of resident allowances must be made intact to the trust account within one week from the time that payment is received.

(3) Any related bank books, bank statements, check-book, check register, and all voided and cancelled checks, shall be made available for audit and inspection by a department representative, and shall be maintained by the group home for not less than three years.

(4) No service charges for such checking account shall be paid by resident trust moneys.

(5) The trust account per bank shall be reconciled monthly to the trust account per resident ledgers.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-275, filed 2/23/83.]

WAC 275-36-280 Trust moneys control or disbursement. Trust moneys shall be held in trust and are not to be turned over to anyone other than the resident or his or her guardian without the written consent of the resident, his or her designated agent as appointed by power of attorney, or appropriate department of social and health services personnel as designated by the DDD regional services administrator.

(1) When moneys are received, a receipt should be filled out in duplicate; one copy should be given to the person making payment or deposit, and the other copy should be retained in the receipt book for easy reference.

(2) Checks received by residents must be endorsed by the resident. Each resident receiving a check or state warrant is responsible for endorsement by his or her own signature. Only when the resident is incapable of signing his or her name may the provider assume the responsibility of securing the resident's mark "X" followed by the name of the resident and the signature of two witnesses.

(3) If both the general fund account and the trust fund account are the same bank, the trust portion of checks which include care payments can be deposited directly to the trust by including a trust account deposit slip for the correct amount with the checks and the general account deposit slip.

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(4) The resident's trust account ledger sheet must be credited with the allowance received. This should be referenced with the receipt number and must be supported by a copy of the deposit slip (one copy for all deposits made).

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-280, filed 2/23/83.]

WAC 275-36-285 Trust moneys availability. Moneys so held in trust for any resident shall be available for his or her personal and incidental needs when requested by the resident.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-285, filed 2/23/83.]

WAC 275-36-290 Accounting upon change of ownership. (1) Upon sale of the facility or other transfer of ownership, the administrator must provide the new owner with a written accounting, in accordance with generally accepted auditing procedures, of all resident funds being transferred, and obtain a written receipt for those funds from the new owner.

(2) The administrator must give each resident or representative a written accounting of any personal funds held by the facility before any transfer of ownership occurs.

(3) In the event of a disagreement with the accounting provided by the administrator, the resident retains all rights and remedies provided under state law.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-290, filed 2/23/83.]

WAC 275-36-295 Procedure for refunding or transferring trust funds. When a resident is discharged or transferred, the balance of the resident's trust account will be returned to the individual resident or transferred to the new facility with an accounting of the funds provided the resident, the resident's guardian or attorney within thirty days and a receipt obtained.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-295, filed 2/23/83.]

WAC 275-36-300 Liquidation of trust funds. If the resident has expired, the administrator of the group home shall contact the field services office of the division for assistance in determining the disposition of the remainder of the resident's trust funds.

[Statutory Authority: RCW 72.33.850. 83-06-013 (Order 1950), § 275-36-300, filed 2/23/83.]

WAC 275-36-305 Resident property records. (1) The administrator must maintain a current, written record for each resident that includes written receipts for all personal possessions with a value of fifty dollars or more per item, deposited with the group home by the resident.

(2) The property record must be available to the resident and departmental representatives for review.

(3) The record shall include but is not limited to:

- (a) The description and identifying numbers, if any;
- (b) The date of inclusion in the record;

- (c) The date and reason for removal from the record; and
 (d) The signature of the staff making the entry.

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-305, filed 2/23/83.]

WAC 275-36-310 Administrative review conference process. (1) If a group home wishes to challenge an action taken or a determination made by the division under chapter 275-36 WAC, the group home shall request in writing that the director of the division of developmental disabilities review such a determination. The written request must be received by the division within thirty days of the date the group home was notified of such a determination. The request shall be signed by the group home or the administrator of the facility, shall identify the challenged determination and the date thereof, and shall state as specifically as practicable the grounds for the group home operator's or administrator's contention that the determination was erroneous. Copies of any documentation the group home operator intends to rely on to support the group home operator's position shall be included with the request.

(2) After receiving a request meeting the criteria in subsection (1) of this section, the director of the division of developmental disabilities will contact the group home to schedule a conference for the earliest mutually convenient time. The conference shall be scheduled for no later than thirty days after a properly completed request is received unless both parties agree in writing to a specific later date.

(3) The group home and appropriate representatives of the department shall attend the conference. In addition, representatives selected by the group home may attend and participate. The group home shall bring to the conference, or provide to the department in advance of the conference, any documentation the group home intends to rely on to support the group home operator's contentions. The parties shall clarify and attempt to resolve the issues at the conference. If additional documentation is needed to resolve the issues, a second session of the conference shall be scheduled for not later than thirty days after the initial session unless both parties agree in writing to a specific later date.

(4) Unless informal agreement has been reached at the conference, a written decision by the director of the division of developmental disabilities will be furnished to the group home within sixty days after the conclusion of the conference.

(5) If the group home desires review of an adverse decision of the director of the division of developmental disabilities, the group home shall within thirty days following receipt of such decision request a fair hearing in writing in accordance with the Administrative Procedure Act, chapter 34.04 RCW.

[Statutory Authority: RCW 72.33.850, 83-06-013 (Order 1950), § 275-36-310, filed 2/23/83.]

Chapter 275-37 WAC

DIVISION OF JUVENILE REHABILITATION-- RULES, PRACTICES, AND PROCEDURES

WAC	
275-37-010	Definitions.
275-37-020	Rated bed capacity.

WAC 275-37-010 Definitions. (1) "Department" means the department of social and health services.

(2) "Director" means the director of the division of juvenile rehabilitation or his or her designee.

(3) "Division" means the division of juvenile rehabilitation.

(4) "Regional administrator" means the regional administrator of one of the division's six administrative regions.

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

(6) "Superintendent" means the superintendent of one of the division's three institutions or two forest camps.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-37-010, filed 4/4/85.]

WAC 275-37-020 Rated bed capacity. The rated bed capacity of the division is that number of confinement beds on file with the office of financial management by the first day of each biennium for operation during each ensuing fiscal year.

[Statutory Authority: RCW 13.06.030, 13.40.210 and 72.72.040. 85-09-003 (Order 2221), § 275-37-020, filed 4/4/85.]

Chapter 275-38 WAC

IMR PROGRAM AND REIMBURSEMENT SYSTEM

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275-38-955 Recoupment of undisputed overpayments.

275-38-960 Administrative review process.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

275-38-630 Settlement. [Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-630, filed 8/3/82.] Repealed by 83-17-074 (Order 2012), filed 8/19/83. Statutory Authority: RCW 74.09.120.

275-38-635 Shifting. [Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-635, filed 8/3/82.] Repealed by 83-17-074 (Order 2012), filed 8/19/83. Statutory Authority: RCW 74.09.120.

275-38-640 Date settlement becomes final. [Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-640, filed 8/3/82.] Repealed by 83-17-074 (Order 2012), filed 8/19/83. Statutory Authority: RCW 74.09.120.

275-38-642 Interest on settlements. [Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-642, filed 8/3/82.] Repealed by 83-17-074 (Order 2012), filed 8/19/83. Statutory Authority: RCW 74.09.120.

275-38-730 Maximum allowable compensation of certain administrative personnel. [Statutory Authority: RCW 74.09.120. 84-09-032 (Order 2092), § 275-38-730, filed 4/13/84; 82-16-080 (Order 1853), § 275-38-730, filed 8/3/82.] Repealed by 84-19-042 (Order 2150), filed 9/17/84. Statutory Authority: RCW 74.09.120. Later promulgation, see WAC 275-38-868.

275-38-740 Management agreements, management fees, and central office services. [Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-740, filed 8/3/82.] Repealed by 84-19-042 (Order 2150), filed 9/17/84. Statutory Authority: RCW 74.09.120. Later promulgation, see WAC 275-38-869.

275-38-830 Prospective reimbursement rates. [Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-830, filed 8/3/82.] Repealed by 83-17-074 (Order 2012), filed 8/19/83. Statutory Authority: RCW 74.09.120.

275-38-855 Method of rate determination. [Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-855, filed 8/3/82.] Repealed by 83-17-074 (Order 2012), filed 8/19/83. Statutory Authority: RCW 74.09.120.

WAC 275-38-001 Terms. Unless the context clearly requires otherwise, the following terms shall have the meaning set forth in this section when used in this chapter.

(1) "Accrual method of accounting" – A method of accounting where revenues are reported in the period when earned, regardless of when collected, and expenses are reported in the period incurred, regardless of when paid.

(2) "Active treatment in institutions for the mentally retarded" requires the following:

(a) The individual's regular participation, in accordance with an individual habilitation plan, in professionally developed and supervised activities, experiences, or therapies.

(b) A written individual habilitation plan setting forth measurable goals or objectives stated in terms of desirable behavior and prescribing an integrated program of activities, experiences, or therapies necessary for the individual to reach the 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 or she can presently or potentially achieve.

(c) An interdisciplinary professional evaluation:

(i) 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) Consisting of complete medical, social, psychological diagnosis and evaluations, and an evaluation of the individual's need for institutional care; and

(iii) 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 annually by the staff involved in carrying out the resident's individual plan of care. The reevaluation must include review of the individual's progress toward meeting the plan objectives, the appropriateness of the individual plan of care, assessment of his or her continuing need for institutional care, and consideration of alternate methods of care.

(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.

(3) "Allowable costs" - See WAC 275-38-680.

(4) "Appraisal" - The process of establishing the fair market value or reconstruction of the historical cost of an asset acquired in a past period as performed by an individual professionally designated either by the American Institute of Real Estate Appraisers as a member, appraisal institute (MAI), or by the Society of Real Estate Appraisers as a senior real estate analyst (SREA) or a senior real property appraiser (SRPA). The process includes a systematic, analytic determination, the recording and analyzing of property facts, rights, investments, and values based on a personal inspection and inventory of the property.

(5) "Arm's-length transaction" - A transaction resulting from good-faith bargaining between a buyer and seller, where neither party is legally related to the other party by blood or under law, and having adverse positions in the market place. Sales or exchanges of IMR or nursing home facilities among two or more parties where all parties subsequently continue to own one or more of the facilities involved in the transaction shall not be considered arm's-length transactions. Sale of an IMR facility subsequently leased back to the seller within five years of the date of sale shall not be considered an arm's-length transaction.

(6) "Assets" - Economic resources of the contractor, recognized, and measured in conformity with generally accepted accounting principles. Assets also include certain deferred charges which are not resources but which

are recognized and measured in accordance with generally accepted accounting principles. The value of assets acquired in a change of ownership entered into after September 30, 1984, shall not exceed the acquisition cost of the owner of record as of July 18, 1984.

(7) "Bad debts" - Amounts considered to be uncollectable from accounts and notes receivable.

(8) "Beds" - Unless otherwise specified, the number of set-up beds in the IMR facility, not to exceed the number of licensed beds.

(9) "Beneficial owner" - Any person:

(a) Directly or indirectly, through any contract, arrangement, understanding, relationship, or otherwise has or shares:

(i) Voting power including the power to vote, or to direct the voting of such ownership interest; and/or

(ii) Investment power including the power to dispose, or to direct the disposition of such ownership interest.

(b) Directly or indirectly, creates or uses a trust, proxy, power of attorney, pooling arrangement, or any other contract, arrangement, or device with the purpose or effect of divesting himself or herself of beneficial ownership of an ownership interest or preventing the vesting of such beneficial ownership as part of a plan or scheme to evade the reporting requirements of this chapter.

(c) Subject to subsection (9) of this section, has the right to acquire beneficial ownership of such ownership interest within sixty days, including but not limited to any right to acquire:

(i) Through the exercise of any option, warrant, or right;

(ii) Through the conversion of an ownership interest;

(iii) Pursuant to the power to revoke a trust, discretionary account, or similar arrangement; or

(iv) Pursuant to the automatic termination of a trust, discretionary account, or similar arrangement;

Except, any person acquiring an ownership interest or power specified in subsection (9)(c)(i), (ii), or (iii) of this section with the purpose or effect of changing or influencing the control of the contractor, or in connection with or as a participant in any transaction having such purpose or effect, immediately upon such acquisition shall be deemed to be the beneficial owner of the ownership interest acquired through the exercise or conversion of such ownership interest or power.

(d) Any person in the ordinary course of business having a pledgee of ownership interest under a written pledge agreement shall not be deemed to be the beneficial owner of such pledged ownership interest until the pledgee has taken all formal steps necessary required to declare a default and determine the power to vote or to direct the vote or to dispose or to direct the disposition of such pledged ownership interest will be exercised: *Provided, That*

(i) The pledge agreement is bona fide and was not entered into with the purpose nor with the effect of changing or influencing the control of the contractor, nor in connection with any transaction having such purpose or effect, including persons meeting the conditions set forth in subsection (9) of this section; and

(ii) The pledge agreement, prior to default, does not grant to the pledgee:

(A) The power to vote or direct or to direct the vote of the pledged ownership interest; or

(B) The power to dispose or direct the disposition of the pledged ownership interest, other than the grant of such power or powers pursuant to a pledge agreement where credit is extended and where the pledgee is a broker or dealer.

(10) "Boarding home" – Means any home or other institution licensed in accordance with chapter 18.20 RCW.

(11) "Capitalization" – The recording of an expenditure as an asset.

(12) "Capitalized lease" – A lease required to be recorded as an asset and associated liability in accordance with generally accepted accounting principles.

(13) "Cash method of accounting" – A method of accounting where revenues are recognized only when cash is received, and expenditures are expensed, and asset items are not recorded until cash is disbursed.

(14) "Change of ownership" – A change in the individual or legal organization responsible for the daily operation of an IMR facility.

(a) Events changing ownership include but are not limited to the following:

(i) The form of legal organization of the owner is changed (such as a sole proprietor forms a partnership or corporation);

(ii) Title to the IMR enterprise is transferred by the contractor to another party;

(iii) The IMR facility is leased, or an existing lease is terminated;

(iv) Where the contractor is a partnership, any event occurs dissolving the partnership;

(v) Where the contractor is a corporation, the corporation is dissolved, merges with another corporation which is the survivor, or consolidates with one or more other corporations to form a new corporation.

(b) Ownership does not change when the following occurs:

(i) A party contracts with the contractor to manage the enterprise as the contractor's agent, (i.e., subject to the contractor's general approval of daily operating decisions);

(ii) If the contractor is a corporation, some or all of the corporation's stock is transferred.

(15) "Charity allowances" – Reductions in charges made by the contractor because of the indigence or medical indigence of a resident.

(16) "Contract" – A contract between the department and a contractor for the delivery of IMR services to eligible Medicaid recipients in a facility and an entity responsible for operational decisions.

(17) "Contractor" – An entity contracting with the department to deliver IMR services to eligible Medicaid recipients.

(18) "Courtesy allowances" – Reductions in charges in the form of an allowance to physicians, clergy, and

others, for services received from the contractor. Employee fringe benefits are not considered courtesy allowances.

(19) "CSO" – The local community services office of the department.

(20) "DDD" – The division of developmental disabilities of the department.

(21) "Department" – The department of social and health services (DSHS) and employees.

(22) "Depreciation" – The systematic distribution of the cost or other base of a tangible asset less salvage, over the estimated useful life of the asset.

(23) "Donated asset" – An asset the contractor acquired without making any payment in the form of cash, property, or services. An asset is not a donated asset if the contractor made even a nominal payment in acquiring the asset. An asset purchased using donated funds is not a donated asset.

(24) "Entity" – An individual, partnership, corporation, public institution established by law, or any other association of individuals, capable of entering enforceable contracts.

(25) "Equity capital" – Total tangible and other assets necessary, ordinary, and related to patient care from the most recent provider cost report minus related total long-term debt from the most recent provider cost report plus working capital as defined in this section.

(26) "Facility" – A residential setting certified as an IMR by the department in accordance with federal regulations. A state facility is a state-owned and operated residential habilitation center. A nonstate facility is a residential setting which is not owned and operated by the state and which is licensed in accordance with chapter 18.51 RCW as a nursing home or chapter 18.20 RCW as a boarding home.

(27) "Fair market value" – The price the asset would have been purchased for on the date of acquisition in an arm's-length transaction between a well-informed buyer and seller, neither being under any compulsion to buy or sell.

(28) "Fiscal year" – The operating or business year of a contractor. All contractors report on the basis of a twelve-month fiscal year, but provision is made in this chapter for reports covering abbreviated fiscal periods.

(29) "Generally accepted accounting principles" – Accounting principles currently approved by the financial accounting standard board (FASB).

(30) "Goodwill" – The excess of the price paid for a business over the fair market value of all other identifiable and tangible assets acquired. Also, the excess of the price paid for an asset over fair market value.

(31) "Habilitative services" – Those services required by the individual habilitation plan provided or directed by qualified therapists.

(32) "Historical cost" – The actual cost incurred in acquiring and preparing an asset for use, including feasibility studies, architects' fees, and engineering studies.

(33) "Imprest fund" – A fund regularly replenished in exactly the amount expended from the fund.

(34) "IMR" – When referring to a facility, one certified to provide services to the mentally retarded or persons with related conditions. When referring to a level of care, IMR is a range of services required for the mentally retarded or persons with related conditions. When referring to a person, a recipient requiring IMR services.

(35) "Interest" – The cost incurred for the use of borrowed funds, generally paid at fixed intervals by the user.

(36) "Joint facility costs" – Any costs representing expenses incurred benefiting more than one facility, or one facility and any other entity.

(37) "Levels of care" – The classification of levels of services provided to residents by a contractor, (e.g., levels A, B, C, D, and E).

(38) "Medicaid program" – The state medical assistance program provided under RCW 74.09.500 or authorized state medical services.

(39) "Medical assistance recipient" – An individual determined eligible for medical assistance by the department for the services provided in chapter 74.09 RCW.

(40) "Nonallowable costs" – Same as "unallowable costs."

(41) "Nonrestricted funds" – Donated funds not restricted to a specific use by the donor, (e.g., general operating funds).

(42) "Nursing home" – A home, place, or institution, licensed in accordance with chapter 18.51 RCW, where skilled nursing, intermediate care, and/or IMR services are delivered.

(43) "Operating lease" – A lease under which rental or lease expenses are included in current expenses in accordance with generally accepted accounting principles.

(44) "Owner" – A sole proprietor, general or limited partner, or beneficial interest holder of five percent or more of a corporation's outstanding stock.

(45) "Ownership interest" – All interests beneficially owned by a person, calculated in the aggregate, regardless of the form such beneficial ownership takes.

(46) "Per diem (per resident day) costs" – Total allowable costs for a fiscal period divided by total resident days for the same period.

(47) "Prospective daily payment rate" – The daily amount assigned to each contractor, determined by the department to be reasonable to meet the costs of providing services required by law if the contractor provides those services in an economical and efficient manner. Such a rate is a budget for maximum expenditures necessary to provide services required by law.

(48) "Qualified mental retardation professional (QMRP)" – A therapist approved by the department having specialized training and one year's experience in working with the mentally retarded or developmentally disabled.

(49) "Qualified therapist" – Any of the following:

(a) An activities specialist having specialized education, training, or experience as specified by the department.

(b) An audiologist eligible for a certificate of clinical competence in audiology or having the equivalent education and clinical experience.

(c) A dental hygienist as defined by chapter 18.29 RCW.

(d) A dietitian: Eligible for registration by the American Dietetic Association under requirements in effect on January 17, 1974; or having a baccalaureate degree with major studies in food and nutrition, dietetics, or food service management; having one year supervisory experience in the dietetic service of a health care institution; and participating annually in continuing dietetic education.

(e) An occupational therapist being a graduate of a program in occupational therapy, or having the equivalent of such education or training.

(f) A pharmacist as defined by chapter 18.64 RCW.

(g) A physical therapist as defined by chapter 18.74 RCW.

(h) A physician as defined by chapter 18.71 RCW or an osteopathic physician as defined by chapter 18.57 RCW.

(i) A psychologist as defined by chapter 18.83 RCW.

(j) A qualified mental retardation professional.

(k) A registered nurse as defined by chapter 18.88 RCW.

(l) A social worker who is a graduate of a school of social work.

(m) A speech pathologist eligible for a certificate of clinical competence in speech pathology or having the equivalent education and clinical experience.

(50) "Recipient" – An eligible medical care recipient.

(51) "Regression analysis" – A statistical technique through which one can analyze the relationship between a dependent or criterion variable and a set of independent or predictor variables.

(52) "Regional services" – Local office division of developmental disabilities.

(53) "Related organization" – An entity which is under common ownership and/or control with, or has control of or is controlled by, the contractor. An entity is deemed to "control" another entity if one entity has a five percent or greater ownership interest in the other, or if an entity has capacity, derived from any financial or other relationship, and whether or not exercised, to influence directly or indirectly the activities of the other.

(54) "Relative" – Spouse; natural parent, child, or sibling; adopted child or adoptive parent; stepparent, stepchild, stepbrother, stepsister; father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law, sister-in-law; grandparent or grandchild; uncle, aunt, nephew, niece, or cousin.

(55) "Resident day" – A calendar day of resident care. In computing calendar days of care, the day of admission is always counted. The day of discharge is counted only when the resident was admitted on the same day. A resident is admitted for purposes of this definition when he or she is assigned a bed and a resident record is opened.

(56) "Resident living staff" – Staff whose primary responsibility is the care and development of the residents, including:

(a) Resident activity program;

(b) Domiciliary services; and/or

(c) Habilitative services under the supervision of the QMRP.

(57) "Restricted fund" – A fund where the use of the principal and/or income is restricted by agreement with or direction by the donor to a specific purpose, in contrast to a fund over which the owner has complete control. These generally fall into three categories:

(a) Funds restricted by the donor to specific operating purposes;

(b) Funds restricted by the donor for additions to property, plant, and equipment; and

(c) Endowment funds.

(58) "Secretary" – The secretary of DSHS.

(59) "Start-up costs" – The one-time preopening costs incurred from the time preparation begins on a newly constructed or purchased building until the first resident is admitted. Start-up costs include administrative and nursing salaries, utility costs, taxes, insurance, repairs and maintenance, training costs, etc. Start-up costs do not include expenditures for capital assets.

(60) "Title XIX" – The 1965 amendments to the Social Security Act, P.L. 89-07, as amended.

(61) "Unallowable costs" – Costs not meeting every test of an allowable cost, as determined in WAC 275-38-680.

(62) "Uniform chart of accounts" – A list of account titles identified by code numbers established by the department for contractors to use in reporting costs.

(63) "Vendor number" – A number assigned to each contractor delivering IMR services to IMR Medicaid recipients.

(64) "Working capital" – Total current assets necessary, ordinary, and related to resident care as reported in the most recent cost report minus total current liabilities necessary, ordinary, and related to resident care from the most recent cost report.

[Statutory Authority: RCW 74.09.120. 85-06-063 (Order 2213), § 275-38-001, filed 3/6/85; 84-19-042 (Order 2150), § 275-38-001, filed 9/17/84; 82-16-080 (Order 1853), § 275-38-001, filed 8/3/82.]

WAC 275-38-005 IMR care. (1) The department has the administrative and legal responsibility to purchase the services of an institution for the mentally retarded and persons with similar conditions (IMR), and IMR-based services for eligible developmentally disabled persons. The department has the responsibility to assure adequate care, service, and protection are provided through licensing and certification procedures.

(2) The intent of this chapter is to establish standards for habilitative training, health related care, supervision, and residential services to eligible persons.

(3) Each IMR facility shall be certified as a Title XIX IMR facility.

(4) Each IMR facility with a certified capacity of sixteen beds or more shall be certified and/or licensed as a nursing home in accordance with chapter 18.51 RCW.

(5) Each private IMR facility with a certified capacity of fifteen beds or less shall be licensed as a boarding home for the aged in accordance with chapter 18.20 RCW.

(6) Facilities certified to provide IMR services must comply with all applicable federal regulations under Title XIX, Section 1905 of the Social Security Act 42 U.S.C. as amended, as well as state regulations governing the licensing of nursing homes or boarding homes for the aged, and other relevant state regulations.

(7) The sections of this chapter will supersede and replace any and all sections affecting IMR facilities or programs in chapters 388-88 and 388-96 WAC except where specifically referenced in this chapter.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-005, filed 8/3/82.]

WAC 275-38-007 IMR facilities. (1) Contracts with IMR facilities will specify one of five levels (A, B, C, D, and E) of service. Clients will be referred for admission to IMR facilities by the DDD regional services office. Admission will be verified and classification determined by a qualified mental retardation professional employed by the department. This classification will specify one of these five levels of service.

(2) At least fifty percent of the licensed bed capacity of a facility will be occupied by persons with mental retardation or related conditions as of the date of application for certification.

(3) Facilities shall not admit any person as a resident except developmentally disabled persons after the date of certification.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-007, filed 8/3/82.]

WAC 275-38-015 Name of IMR. The division will recognize only the official name of an IMR as shown on the license.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-015, filed 8/3/82.]

WAC 275-38-020 Closure of an IMR facility. When a facility is due to cease operations, the facility has the responsibility of notifying the department in writing, giving sixty days notice. Upon receipt of notice of closure of a facility, the department shall cease referral of clients to the facility and proceed in the orderly relocation of the residents.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-020, filed 8/3/82.]

WAC 275-38-025 Adequate IMR care. Care and services rendered must be justified as essential to the resident's habilitation and health care needs, with the overall goal of the resident attaining the highest level of independence. Each IMR is obligated to assure the provision of adequate habilitative training and health care to include but not limited to:

(1) Active treatment as defined in WAC 275-38-001.

(2) Services to the resident by or under the supervision of qualified therapists in accordance with the identified needs of the individual resident.

(3) Provide routine items and supplies uniformly used for all residents.

(4) Surgical appliances, prosthetic devices, and aids to mobility required for the exclusive use of an individual resident are available to the recipient pursuant to WAC 388-86-100.

(5) Nonreusable supplies not usually provided for all residents may be individually ordered in accordance with WAC 388-86-005(2). Requests for such supplies must be authorized by a department representative.

(6) Each IMR facility is responsible for providing transportation to and from the day training programs. Responsibility for transportation may include assurance of resident's use of public transportation.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-025, filed 8/3/82.]

WAC 275-38-030 Continuity of resident care.

When a resident is transferred from one IMR facility to another, from an IMR facility to the hospital, from the hospital to an IMR facility, or to alternative community placement, essential information concerning the resident, his or her condition, regimen of care and training must be transmitted in writing by the sending facility to the receiving facility at the time of the resident's transfer.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-030, filed 8/3/82.]

WAC 275-38-035 IMR contract--Noncompliance.

When a facility is in violation of the terms of the contract, the department may temporarily suspend the referral of residents to the facility. Whenever referral is suspended under this section, the facility will immediately be notified in writing of the suspension and of the basis for the department's action. Suspension may continue until the department determines the infraction has been corrected.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-035, filed 8/3/82.]

WAC 275-38-040 Classification of IMR residents.

(1) For IMR residents the level of care determinations are made by a qualified mental retardation professional employed by the department, in accordance with his or her best professional judgment. Each IMR resident shall be classified by the level of care the resident may individually need. The levels of care are A, B, C, D, or E.

(2) In making IMR classification decisions, the departmental representative shall utilize the following guidelines:

(a) Level A residents:

(i) Require twenty-four hour licensed nursing supervision; and

(ii) May attend day training in community based programs; and

(iii) Manifest behaviors requiring highly structured behavioral management programs; or

(iv) Not able to receive adequate care or services in a lesser level of IMR.

(b) Level B residents:

(i) Require licensed nursing supervision for at least eight hours each day; and

(ii) May attend day training in community based program; and

(iii) Manifest behaviors requiring highly structured behavioral management programs; or

(iv) Not able to receive adequate care or services in a lesser level of IMR.

(c) Level C residents:

(i) Require twenty-four hours of licensed nursing supervision; and

(ii) Capable of participating in off-premises day training programs; or

(iii) Not able to receive adequate care or services in a lesser level of IMR.

(d) Level D residents:

(i) Require licensed nursing supervision for at least eight hours each day; and

(ii) Capable of participating in off-premises day training programs; or

(iii) Not able to receive adequate care or services at a lesser level of IMR.

(e) Level E residents:

(i) Require health-related supervision but not licensed nursing supervision. The facility must provide for licensed consultation to supervise the health care needs of the residents;

(ii) Capable of attending an off-premises day training program; and

(iii) Not able to receive adequate care or services at a less restrictive level of residential setting.

(3) The classification of IMR residents shall be periodically reviewed by a qualified mental retardation professional employed by the department for the purposes of:

(a) Determining the need for continued stay; and

(b) Identify the level of care required to meet the needs of the resident.

(4) Classification changes shall be made in accordance with the needs of the resident and in accord with appeal and relocation procedures outlined in WAC 275-27-500 and 275-38-060 as applicable.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-040, filed 8/3/82.]

WAC 275-38-045 Minimum staff requirements. (1)

Each level of IMR must provide staff adequate in numbers and qualifications to meet the need of the residents.

(2) Specifically, the IMR must provide at least the following:

(a) Level A:

(i) Facility-based physician staff to provide for twenty-four hour medical supervision to include examination, diagnosis, planning, implementation, and review of appropriate medical regimen for each resident;

(ii) One full-time registered nurse as director of nursing services with sufficient additional licensed nurses to provide twenty-four hour nursing supervision;

(iii) Facility-based qualified therapist staff in accordance with WAC 275-38-025;

(iv) Sufficient resident living staff to meet the needs of the residents in care level A;

(v) Sufficient qualified mental retardation professional staff to meet the needs of the residents.

(b) Level B:

(i) Facility-based physician staff sufficient to provide for medical supervision to include examination, diagnosis, planning, implementation, and review of an appropriate medical regimen for each resident;

(ii) At least one registered nurse responsible as the director of nursing services and in addition sufficient licensed nurses to provide nursing supervision of the facility for at least eight hours per day;

(iii) Facility-based qualified therapist staff in accordance with WAC 275-38-025;

(iv) Sufficient resident living staff to meet the needs of the residents in care level B;

(v) Sufficient qualified mental retardation professional staff to meet the needs of the residents.

(c) Level C:

(i) A physician as a consultant medical director to the facility;

(ii) One full-time registered nurse as director of nursing services with additional licensed nurses to provide twenty-four hour nursing supervision of the facility;

(iii) Sufficient resident living staff to meet the needs of the residents in care level C;

(iv) Sufficient qualified mental retardation professional staff to meet the needs of the residents;

(v) Consultant qualified therapist staff in accordance with WAC 275-38-025.

(d) Level D:

(i) A physician as a consultant medical director to the facility;

(ii) A licensed nurse responsible as the director of nursing services with additional licensed nurses to provide nursing supervision of the facility for at least eight hours per day;

(iii) Sufficient resident living staff to meet the needs of the residents in care level D;

(iv) Sufficient qualified mental retardation professional staff to meet the needs of the residents;

(v) Consultant qualified therapist staff in accordance with WAC 275-38-025.

(e) Level E:

(i) A physician as a consultant medical director to the facility;

(ii) A registered nurse as a consultant to the facility, responsible for the health care needs of the residents;

(iii) Sufficient resident living staff must be provided to assure at least one staff is on duty in the facility when residents are present;

(iv) Sufficient qualified mental retardation professional staff to meet the needs of the residents;

(v) Qualified consultant therapists in accordance with WAC 275-38-025.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-045, filed 8/3/82.]

WAC 275-38-050 Placement of IMR client. Placement into an IMR facility is the responsibility of the division of developmental disabilities and shall be accomplished in accordance with the applicable federal

and state regulations. The client's classification and eligibility for IMR services shall be determined by representatives of the department before payment can be approved: *Provided*, That a facility may not admit a client requiring services the facility is not able to provide.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-050, filed 8/3/82.]

WAC 275-38-055 Transfer of IMR client--Relocation. (1) The department is responsible for assuring individual client's health care and habilitative training needs are identified and met, as provided by state and federal regulations. The department is therefore responsible for assuring that each client is placed in a facility certified as capable of meeting the needs of the client.

(2) Each client admitted to a facility may be transferred or discharged only for medical reasons, or for his or her welfare or the welfare of other residents of the facility. This determination shall be made by the department based on an assessment of the resident, consultation with the service provider, and a review of the relevant records.

(3) If the services being provided to a resident are not commensurate with the resident's needs, the department is responsible for initiating and facilitating the resident's relocation.

A circumstance where the department would enforce immediate movement of a resident from an IMR facility is the revocation or suspension of the IMR certification and/or license.

(4) Upon the determination by the department that a facility will no longer operate or be allowed to operate an IMR, because of any violation of the facility's contract or these regulations or state or federal law, the department will provide notice to the resident and the guardian, next-of-kin, or responsible party that thirty days following the mailing date of the letter, the resident will be required to relocate: *Provided*, That nothing in this section shall require a pretransfer notice be given when the secretary or his or her designee determines an immediate threat to health and/or safety exists or moves may be accomplished sooner at the request of the resident or with the resident's consent.

(5) Decertification, termination, or nonrenewal of contract actions require a stop payment of Title XIX funds. Such actions do not affect the facility's right to operate as a nursing home or boarding home, but does disqualify the facility from operating as an IMR facility and receiving federal funds. When termination of federal funds is contemplated, residents must be informed.

(6) When relocation is required, a designated representative of the department will conduct a review and assessment for the classification. Thirty days prior to any implementation of a change in the level of care, resulting in the change of the services required and provided, or because of the transfer, the department shall notify, in writing, the resident and guardian, next-of-kin, or responsible party pursuant to WAC 275-38-060.

(7) Grounds for the request by a facility to have a resident relocated or discharged are limited to the following:

- (a) Medical reasons;
- (b) Resident's welfare;
- (c) The welfare of the other residents; or
- (d) Nonpayment of services provided to the resident during his or her stay at the facility.

The facility shall follow the following procedure:

(i) The facility shall send a request in writing to the department, for relocation or discharge of a resident. This request shall include the grounds for the request and substantiation of concurrence by the interdisciplinary team in the development of an appropriate individual habilitation plan.

(ii) The department shall approve or deny the request for relocation or discharge based on an on-site visit with the resident and a review of his or her records, within fifteen working days following the receipt of the request.

(iii) The facility administrator shall be informed of the department's approval or denial of the request.

(iv) If the facility's request is approved, the department shall notify, in writing, the resident or the resident's guardian, or next-of-kin, or responsible party, of the decision pursuant to WAC 275-38-060.

(v) The resident and the department will be allowed thirty days from the date that the resident is notified of relocation or discharge by the department in order to facilitate relocation.

(e) The resident has a right to request relocation and to select the IMR he or she desires for placement. If this selection is available and appropriate to the habilitation and health care needs of the resident, all reasonable attempts to accomplish relocation shall be made by the department.

(i) The resident or the resident's guardian must request such a move in writing.

(ii) Arrangements for relocation will be the responsibility of the division of developmental disabilities.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-055, filed 8/3/82.]

WAC 275-38-060 IMR resident rights--Relocation.

(1) Except in the cases specified in WAC 275-38-060(2), the resident (or guardian, next-of-kin, or responsible party of the resident if the resident has been adjudicated to be incompetent or under age eighteen) must be informed in writing thirty days prior to any relocation or reclassification to ensure orderly transfer or discharge. Such notice must include:

(a) The grounds for the proposed change and/or transfer;

(b) A statement that the resident or any other individual designated by the resident has a right to a conference with a division of developmental disabilities representative within thirty days of receipt of the notice;

(c) The right to request a fair hearing within thirty days of the notice to contest the department's decision;

(d) The method by which a fair hearing may be obtained;

(e) The right to be represented at the fair hearing by an authorized representative;

(f) The existence and locations of any legal services in the community that are available.

(2) A fair hearing request form shall be sent with the notice of relocation and/or reclassification.

(a) If the resident requests a fair hearing within the thirty day time period, the department shall not change the level of care or transfer the resident pending fair hearing decision or appeal rights, unless such action is warranted by the health or safety needs of the resident.

(b) If the secretary or his or her designee finds a change in the level of care is not appropriate, no further action shall be taken to change the level of care or transfer the resident, unless there is a change in the situation or circumstances at which time the request may be resubmitted.

(c) If the secretary or his or her designee affirms the determination to change the resident's level of care and/or transfer, and no judicial review is filed within thirty days of the receipt of notice of determination, the department shall proceed with the planned action.

(d) If the secretary or his or her designee affirms the determination to change the resident's level of care and/or transfer and a request for judicial review has been filed, any proposed change and/or transfer shall be delayed pending the outcome of the process, unless such action is warranted by the health or safety needs of the resident.

(3) Advance notice is not required:

(a) If the resident or the resident's guardian requests a transfer in writing and waives the right to a period notice.

(b) In the event of an immediate threat to the resident's life or health, or life or health of others.

(4) Advance notice and planning does not include a right to a fair hearing for a resident when the department judges the facility where the resident resides is no longer able to provide Title XIX services due to:

(a) Termination of the facility's contract.

(b) Decertification of the facility.

(c) Nonrenewal of the facility's contract.

(d) Revocation of the facility's license.

(e) Emergency license suspension.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-060, filed 8/3/82.]

WAC 275-38-065 Transfer or discharge planning.

A suitable discharge and/or transfer plan must be prepared by the division of developmental disabilities for each resident to be transferred or discharged. Transfers shall be dependent on the best interests of the resident. The plan shall include the location of available settings at the appropriate level of care consistent with the needs of the resident. The plan shall include:

(1) Coordination of communication between the staffs of the old and new facilities;

(2) Pretransfer visit, when the resident's condition permits, to the new facility, familiarizing the resident with the new surroundings, and other residents;

(3) Coordination of active participation by the resident's guardian or family in the transfer preparation;

(4) Coordination with staff members of the old and new facilities to discuss expectations and provide consultation on request;

(5) Posttransfer follow-up by the division of developmental disabilities to monitor the effects of the change.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-065, filed 8/3/82.]

WAC 275-38-075 Discharge or leave of an IMR resident. (1) A certified IMR facility having an IMR contract with the department shall contact the regional services office, division of developmental disabilities giving immediate notification of unauthorized leave, disappearance, serious accident, or other traumatic incident effecting a resident or the resident's health or welfare.

(2) Discharge and readmission is required for all residents who are admitted as hospital inpatients.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-075, filed 8/3/82.]

WAC 275-38-080 Social leave for IMR residents. (1) Social leaves should be consistent with goals and objectives of the resident's individual habilitation plan.

(2) Facility vacancies due to social leave of a resident will be reimbursed if such social leave complies with the individual habilitation plan and the following conditions:

(a) The facility shall notify the director of the division of developmental disabilities or his or her designee, of social leaves exceeding fifty-three hours.

(b) Social leaves over seven consecutive days require prior written approval by the director, division of developmental disabilities or his or her designee.

(c) Social leave in excess of seventeen days per year requires prior written approval by the director, division of developmental disabilities or his or her designee.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-080, filed 8/3/82.]

WAC 275-38-510 Prospective cost-related reimbursement. The prospective cost-related reimbursement system is the system used by the department to pay for IMR services provided to IMR residents. Reimbursement rates for such services will be determined in accordance with the principles, methods, and standards contained in this chapter.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-510, filed 8/3/82.]

WAC 275-38-515 Conditions of participation. In order to participate in the prospective cost-related reimbursement system, the person or legal organization responsible for operation of an IMR facility shall:

(1) Obtain a state certificate of need as required, pursuant to chapter 70.38 RCW;

(2) Hold the appropriate current license (e.g., nursing home, boarding home);

(3) Hold current Title XIX certification to provide IMR services;

(4) Hold a current contract to provide IMR services; and

(5) Comply with all provisions of the contract and all applicable regulations, including but not limited to the provisions of chapter 275-38 WAC.

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[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-515, filed 8/3/82.]

WAC 275-38-520 Projected budget for new contractors. (1) Each new contractor shall submit a one-year projected budget to the department at least sixty days before the contract will become effective. For purposes of this section, a "new contractor" is one:

(a) Operating a new facility;

(b) Acquiring or assuming responsibility for operating an existing facility;

(c) Obtaining a certificate of need approval due to an addition to or renovation of a facility.

(2) The projected budget shall cover the twelve months immediately following the date the contractor will enter the program. The projected budget shall be prepared on forms and in accordance with instructions provided by the department.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-520, filed 8/3/82.]

WAC 275-38-525 Change of ownership. (1) On the effective date of a change of ownership, as defined in WAC 275-38-001, the department's contract with the former owner shall be terminated. The former owner shall give the department thirty days written notice of such termination in accordance with the terms of the contract. When certificate of need is required for the new owner to acquire the facility, and the new owner wishes to continue to provide service to recipients without interruption, certificate of need shall be obtained before the former owner submits a notice of termination.

(2) If the new contractor desires to participate in the cost-related reimbursement system, the contractor shall meet the conditions specified in WAC 275-38-515, and shall submit a projected budget in accordance with WAC 275-38-520 no later than sixty days before the date of the change of ownership. The IMR contract with the new owner shall be effective as of the date of the change of ownership.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-525, filed 8/3/82.]

WAC 275-38-530 Termination of contract. (1) When a contract is terminated for any reason, the former contractor shall submit final reports in accordance with WAC 275-38-575. Payment for care provided during the final thirty days of service under a contract will be held until the contractor has filed a properly completed final annual report, and final settlement has been determined.

(2) Following final settlement, a payment withheld pursuant to subsection (1) of this section will be sent to the contractor, after any overpayment determined in connection with final settlement has been deducted. If the contractor contests the settlement determination in accordance with WAC 275-38-940, the department will hold the amount in dispute pending completion of the appeal process, but will release the balance of such payment to the contractor.

(3) The department will release a payment which would be withheld pursuant to subsection (1) of this

section, provided a bond issued by a reputable bonding company and acceptable to the department is filed by the contractor. The bond shall:

- (a) Be in an amount equal to the released payment;
 - (b) Be for a term sufficient to ensure effectiveness after final settlement and the exhaustion of administrative and judicial remedies;
 - (c) Provide the full amount of the bond shall be paid to the department if a properly completed final annual report is not filed in accordance with this chapter, or if financial records supporting this report are not preserved and made available to the department's auditors; and
 - (d) Provide an amount equal to any recovery the department determines is due from the contractor at settlement, but not exceeding the amount of the bond, shall be paid to the department in the event the contractor does not pay the refund within sixty days following receipt of written demand or the conclusion of administrative or judicial proceedings to contest settlement issues.
- (4) If a contract is terminated solely in order for the same owner to contract with the department to deliver IMR services to a different class of medical care recipients at the same IMR facility, the contractor is not required to submit final reports, and payment for the final thirty days will not be withheld.

(5) When a contract is terminated, any accumulated liabilities assumed by a new owner shall be reversed against the appropriate accounts by the contractor.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-530, filed 8/3/82.]

WAC 275-38-535 Due dates for reports. (1) Non-state facilities' annual cost reports for a calendar year shall be submitted by March 31st of the following year.

(2) State facilities' annual cost reports for a fiscal year shall be submitted by December 31st of that year.

[Statutory Authority: RCW 74.09.120. 84-19-042 (Order 2150), § 275-38-535, filed 9/17/84; 82-16-080 (Order 1853), § 275-38-535, filed 8/3/82.]

WAC 275-38-540 Requests for extensions. The department, upon a written request setting forth reasons for the necessity of an extension, may grant a thirty day extension of time for filing any required report, if the written request is received prior to the expiration of the relevant time period.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-540, filed 8/3/82.]

WAC 275-38-545 Reports. (1) In order for a contractor to receive payments under the cost-related reimbursement system for providing care to IMR residents, an annual report based on the contractor's fiscal year shall be submitted to the department.

(2) Each contractor's fiscal year for federal tax and cost reporting purposes shall coincide with the calendar year, except for state-owned and operated IMR facilities whose reporting form shall coincide with the facility's fiscal year.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-545, filed 8/3/82.]

WAC 275-38-550 Improperly completed or late reports. (1) For 1981 and subsequent annual cost reporting periods, an annual report, including the proposed settlement computed by cost center pursuant to WAC 275-38-630, must be completed in accordance with applicable statutes, departmental regulations and instructions. An annual cost report deficient in any of these respects may be returned in whole or in part to the contractor for proper completion. Annual reports must be submitted by the due date determined in accordance with WAC 275-38-535.

(2) For purposes of establishing rates effective July 1, 1982, if a contractor has not corrected errors in an annual cost report, including the proposed settlement, according to subsection (1) of this section by May 15, 1982, such report shall be excluded from computation of the redistribution pool established pursuant to WAC 275-38-855(5) and the contractor shall be subject to the provisions of subsection (3) of this section.

(3) If a report is not properly completed or is not received by the department on or before the due date of the report, including any approved extensions, all or a part of any payments due under the contract may be held by the department until the improperly completed or delinquent report is properly completed and received by the department.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-550, filed 8/3/82.]

WAC 275-38-555 Completing reports and maintaining records. (1) All reports shall be legible and reproducible. It is recommended all entries be typed or in black ink.

(2) Reports shall be completed in accordance with instructions provided by the department. If no specific instruction covers a situation, generally accepted accounting principles shall be followed.

(3) The accrual method of accounting shall be used, except for governmental institutions operated on a modified accrual method of accounting, data based on this method of accounting will be acceptable. All revenue and expense accruals shall be reversed against the appropriate accounts if not received or paid within one hundred twenty days after the accrual is made, unless special circumstances are documented justifying continuing to carry all or part of the accrual (e.g., contested billings). Accruals for vacation, holiday, sick pay, and taxes may be carried for longer periods, provided the contractor's usual policy is followed.

(4) Methods of allocating costs shall be consistently applied. Written approval must be obtained from the department if a contractor wishes to change an allocation method. Contractors operating multiservice facilities or facilities incurring joint facility costs shall allocate costs using the methods approved by the department under WAC 275-38-735.

(5) If a contractor fails to maintain records adequate for audit purposes or fails to allow inspection of such records by authorized personnel as provided in the contractor's IMR contract, the department may suspend all

or part of subsequent reimbursement payments due under the contract until compliance is forthcoming. Upon compliance, the department shall resume current contract payments and shall release payments suspended pursuant to the contractor's IMR contract.

[Statutory Authority: RCW 74.09.120. 86-18-002 (Order 2412), § 275-38-555, filed 8/21/86; 82-16-080 (Order 1853), § 275-38-555, filed 8/3/82.]

WAC 275-38-560 Certification requirement. Each required report shall be accompanied by a certification signed on behalf of the contractor responsible to the department during the report period. If the contractor files a federal income tax return, the certification shall be executed by the person normally signing this return. The certification shall also be signed by the licensed administrator of the IMR facility. If the report is prepared by someone other than an employee of the contractor, a separate statement shall be included with the certification signed by the individual preparing the report and indicating his or her status with the contractor.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-560, filed 8/3/82.]

WAC 275-38-565 Reports--False information. (1) If a contractor knowingly or with reason to know files a report containing false information, such action constitutes cause for termination of the contractor's contract with the department.

(2) Adjustments to reimbursement rates required because a false report was filed will be made in accordance with WAC 275-38-885.

(3) Contractors filing false reports may be referred for prosecution under applicable statutes.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-565, filed 8/3/82.]

WAC 275-38-570 Amendments to reports. (1) For purposes of computing settlements, an amendment to an annual report shall be filed if significant errors or omissions are discovered prior to the commencement of the department's field audit. Errors or omissions shall be deemed "significant" if errors or omissions would mean a net difference of two cents or more per resident day or one thousand dollars or more in reported costs, whichever is higher, in any cost area. To file an amendment, only pages where changes are required need to be filed, together with the certification required by WAC 275-38-560. Adjustments to reimbursement rates resulting from an amended report will be made in accordance with WAC 275-38-885.

(2) If an amendment is filed, a contractor shall also submit with the amendment an account of the circumstances relating to and the reasons for the amendment, along with supporting documentation. The department may refuse to consider an amendment resulting in a more favorable settlement to a contractor if the amendment is not the result of circumstances beyond the control of the contractor or the result of good-faith error under the system of cost allocation and accounting in

effect during the reporting period in question. Amendments may be submitted for purposes of adjusting reimbursement rates in accordance with WAC 275-38-900; however, use in this regard does not mean an amendment will be used for settlement purposes in the absence of conditions specified in subsection (2) of this section.

(3) Acceptance or use by the department of an amendment to a cost report shall in no way be construed as a release of applicable civil or criminal liability.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-570, filed 8/3/82.]

WAC 275-38-575 Reporting for an abbreviated period. (1) Reports shall be filed as required by the department when a contractor or IMR facility enters the prospective cost-related reimbursement system.

(2) If the contractor changes during a fiscal year, the former contractor shall submit a final annual report covering the period the contract was in effect during the fiscal year. The new contractor shall submit an annual report covering the period the contract is in effect during the fiscal year.

(3) An annual report shall be submitted within sixty days after the end of the abbreviated period.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-575, filed 8/3/82.]

WAC 275-38-585 Requirement for retention of reports by the department. The department will retain each required report for a period of three years following the date the report was submitted. If at the end of three years there are unresolved audit questions, the report will be retained until such questions are resolved.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-585, filed 8/3/82.]

WAC 275-38-590 Disclosure of IMR facility reports. Pursuant to chapter 388-320 WAC, all required financial and statistical reports submitted by IMR facilities to the department will be available for public disclosure.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-590, filed 8/3/82.]

WAC 275-38-595 Desk review. (1) The department will analyze each annual cost report within six months after the annual cost is properly completed and filed.

(2) If it appears from the analysis a contractor has not correctly determined or reported costs, the department may request additional information from the contractor. If the department deems it necessary in order to ensure correct reporting, the department may schedule a special field audit of the contractor.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-595, filed 8/3/82.]

WAC 275-38-600 Field audits. (1) All cost reports for calendar year 1983 shall be field audited by the department.

(2) Cost reports for years subsequent to 1983 may be field audited by auditors employed by or under contract with the department.

[Statutory Authority: RCW 74.09.120. 84-09-018 (Order 2091), § 275-38-600, filed 4/10/84; 82-16-080 (Order 1853), § 275-38-600, filed 8/3/82.]

WAC 275-38-605 Preparation for audit by the contractor. (1) The department will normally notify the contractor at least two weeks in advance of a field audit.

(2) The contractor shall provide the auditors with access to the IMR and to all financial, statistical records, and work papers supporting the data in the cost report. Such records shall be made available at a location in the state of Washington specified by the contractor, as agreed by the department.

(3) The contractor shall reconcile reported data with applicable federal income and payroll tax returns and with the financial statement as of the end of the period covered by the report. Such reconciliation shall be in suitable form for verification by the auditors.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-605, filed 8/3/82.]

WAC 275-38-610 Scope of field audits. (1) Auditors will review the contractor's record-keeping and accounting practices and, where appropriate, make written recommendations for improvements.

(2) Auditors will examine the contractor's financial and statistical records to verify:

(a) Supporting records are in agreement with reported data;

(b) Only expense items the department has specified as allowable costs have been included by the contractor in computing the costs of services provided under the contract;

(c) Allowable costs have been accurately determined and are reasonable, necessary, ordinary, and related to resident care; and

(d) Resident trust funds have been properly maintained.

(3) Auditors will prepare and provide draft audit narratives and summaries to the contractor before final narratives and summaries are prepared.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-610, filed 8/3/82.]

WAC 275-38-615 Inadequate documentation. The auditors will disallow any expenses reported as allowable costs not supported by adequate documentation in the contractor's financial records. Documentation must show the costs were incurred and were related to resident care and training.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-615, filed 8/3/82.]

WAC 275-38-620 Deadline for completion of audits. (1) Field audits will be completed within one year after a properly completed annual cost report is received by the department, provided field auditors are given

timely access to the IMR facility and to all financial and statistical records necessary to audit the report.

(2) The department will give priority to field audits of final annual reports and whenever possible will begin such field audits within sixty days after a properly completed final annual report is received.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-620, filed 8/3/82.]

WAC 275-38-625 Disclosure of audit narratives and summaries. Final audit narratives and summaries prepared by the auditor will be available for public disclosure.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-625, filed 8/3/82.]

WAC 275-38-645 Resident trust accounts. (1) The provider shall establish and maintain, as a service to the recipient, a bookkeeping system, incorporated in the business records, adequate for audit, for all resident moneys entrusted to and received by the facility for the resident.

(2) The system will apply to the resident:

(a) Incapable of handling his or her own money and whose guardian, relative, developmental disabilities regional service office administrator, or physician makes written request of the facility to accept this responsibility; if the Social Security Form SSA-780, "certificate of applicant for benefits on behalf of another," is utilized as documentation, the form must be signed by one of the persons designated in this subsection.

(b) Capable of handling his or her own money, but requests the facility in writing to accept this responsibility.

(3) It shall be the responsibility of the provider to maintain such written authorization in the resident's file.

(4) The resident must be given at least a quarterly reporting of all financial transactions in his or her trust account. The representative payee, the guardian and/or other designated agents of the recipient must be sent a copy of the quarterly accounting report.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-645, filed 8/3/82.]

WAC 275-38-650 Accounting procedures for resident trust accounts. (1) The provider shall maintain a subsidiary ledger with an account for each resident for whom the provider holds money in trust. Each account and related supporting information shall:

(a) Be maintained at the facility;

(b) Be kept current;

(c) Be balanced each month, and;

(d) Show in detail, with supporting verification, all moneys received on behalf of the individual resident and the disposition of all moneys so received.

(2) Each account shall be available for audit and inspection by a department representative and be maintained for a minimum of three years. The provider further agrees to notify the division of developmental disabilities, regional services office of the department when:

(a) The account of any individual certified on or before December 31, 1973, having an award letter limit of two hundred dollars cash, reaches the sum of one hundred seventy-five dollars.

The regional services office will re-evaluate the status of each recipient certified under the eligibility criteria prior to January 1, 1974, having an award letter specifying a two hundred dollar cash limit.

(b) The account of any individual certified on or after January 1, 1974, having an award letter limit of one thousand five hundred dollars, reaches the sum of one thousand four hundred fifty dollars.

(c) For both groups, the accumulation toward the limit, after admission to the facility, is permitted only from savings from the clothing and personal incidentals allowance and other income the department specifically designates as exempt income from time-to-time.

(d) No resident account may be overdrawn (show a debit balance). If a resident wants to spend an amount greater than in such resident's trust account, the IMR may provide money from the IMR's own funds and collect the debt by installments from the portion of the resident's allowance remaining at the end of each month. No interest may be charged to residents for such loans.

(3) In order to ensure the resident trust accounts are not charged for services provided under the Title XIX program, any charge for medical services otherwise properly made to a resident's trust account must be supported by a written denial from the department.

(a) A request for additional equipment such as a walker, wheelchair or crutches must have a written denial from the department of social and health services before a resident's trust account can be charged.

(b) Except as otherwise provided below, a request for physical therapy, drugs, or other medical services must have a written denial from the local CSO before a resident trust account can be charged.

A written denial from the local CSO is not required when the pharmacist verifies a drug is not covered by the program (e.g., items on the FDA list of ineffective or possible effective drugs, nonformulary over-the-counter (OTC) medications such as vitamins, laxatives, nose drops, etc.). The pharmacist's notation to this effect is sufficient.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-650, filed 8/3/82.]

WAC 275-38-655 Trust moneys--Imprest fund. (1) The provider may maintain a petty cash fund originating from trust moneys of an amount reasonable and necessary for the size of the facility and the needs of the residents, not to exceed five hundred dollars. This petty cash fund shall be an imprest fund. All moneys over and above the trust fund petty cash amount shall be deposited intact in a trust fund checking account, separate and apart from any other bank account(s) of the facility or other facilities.

(2) Cash deposits of resident allowances must be made intact to the trust account within one week from the time payment is received from the department, social security administration, or other payor.

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(3) Any related bankbooks, bank statements, checkbook, check register, and all voided and cancelled checks, shall be made available for audit and inspection by a department representative, and shall be maintained by the IMR for not less than three years.

(4) No service charges for such checking account shall be paid by resident trust moneys.

(5) The trust account per bank shall be reconciled monthly to the trust account per resident ledgers.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-655, filed 8/3/82.]

WAC 275-38-660 Trust moneys control or disbursement. Trust moneys shall be held in trust and are not to be turned over to anyone other than the resident or his or her guardian without the written consent of the resident, his or her designated agent as appointed by power-of-attorney, or appropriate department of social and health services personnel as designated by the DDD regional services administrator.

(1) When moneys are received, a receipt should be filled out in duplicate; one copy should be given to the person making payment or deposit, and the other copy should be retained in the receipt book for easy reference.

(2) Checks received by residents must be endorsed by the resident. Each resident receiving a check or state warrant is responsible for endorsement by his or her own signature. Only when the resident is incapable of signing his or her name may the provider assume the responsibility of securing the resident's mark "X" followed by the name of the resident and the signature of two witnesses.

(3) If both the general fund account and the trust fund account are at the same bank, the trust portion of checks including care payments can be deposited directly to trust by including a trust account deposit slip for the correct amount with the checks and the general account deposit slip.

(4) The resident's trust account ledger sheet must be credited with the allowance received. This should be referenced with the receipt number and must be supported by a copy of the deposit slip (one copy for all deposits made).

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-660, filed 8/3/82.]

WAC 275-38-665 Trust moneys availability. Moneys so held in trust for any resident shall be available for his or her personal and incidental needs when requested by the resident or one of the individuals designated in WAC 275-38-660.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-665, filed 8/3/82.]

WAC 275-38-667 Accounting upon change of ownership. (1) Upon sale of the facility or other transfer of ownership, the facility must provide the new owner with a written accounting, in accordance with generally accepted auditing procedures, of all patient funds being transferred, and obtain a written receipt for the funds from the new owner.

(2) The facility must give each patient or representative a written accounting of any personal funds held by the facility before any transfer of ownership occurs.

(3) In the event of a disagreement with the accounting provided by the facility, the patient retains all rights and remedies provided under state law.

Statutory Authority: 74.09.120. 82-16-080 (Order 1853), § 275-38-667, filed 8/3/82.]

WAC 275-38-670 Procedure for refunding trust money. When a recipient is discharged and/or transferred, the balance of the resident's trust account will be returned to the individual designated in WAC 275-38-660, within thirty days, and a receipt obtained. In certain cases it may be advisable to mail the refund to the resident's new residence.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-670, filed 8/3/82.]

WAC 275-38-675 Liquidation of trust fund. (1) Expired resident. The provider will obtain a receipt from next-of-kin, guardian, or duly qualified agent when releasing the balance of money held in trust. If there is no identified next-of-kin, guardian, or duly qualified agent, the DDD regional service office is to be contacted in writing within seven days for assistance in the release of the money held in trust. A check or other document showing payment to such next-of-kin, guardian, or duly qualified agent will serve as a receipt.

(2) Resident, unable to locate. In situations where the resident leaves the IMR facility without authorization and his or her whereabouts are unknown:

(a) The IMR will make a reasonable attempt to locate the missing resident. This includes: Contacting friends, relatives, police, the guardian, and the DDD in the area.

(b) If the resident cannot be located after ninety days, the IMR must notify the department of revenue of the existence of "abandoned property," outlined in chapter 63.28 RCW. The IMR will be required to deliver to the department of revenue the balance of the resident's trust fund account within twenty days following such notification.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-675, filed 8/3/82.]

WAC 275-38-678 Resident property records. (1) The facility must maintain a current, written record for each resident including written receipts for all personal possessions deposited with the facility by the resident.

(2) The property record must be available to the resident and resident representative as designated in WAC 275-38-645 (2)(a).

Statutory Authority: 74.09.120. 82-16-080 (Order 1853), § 275-38-678, filed 8/3/82.]

WAC 275-38-680 Allowable costs. Allowable costs are documented costs necessary, ordinary, and related to the provision of IMR services to IMR residents, and are not expressly declared nonallowable by applicable statutes or regulations. Costs are ordinary if costs are of the

nature and magnitude a prudent and cost-conscious management would pay.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-680, filed 8/3/82.]

WAC 275-38-685 Substance prevails over form. (1) In determining allowable costs, the substance of a transaction will prevail over the transaction's form. Accordingly, allowable costs will not include increased costs resulting from transactions or the application of accounting methods circumventing the principles of the prospective cost-related reimbursement system.

(2) Increased costs resulting from a series of transactions between the same parties and involving the same assets (e.g., sale and leaseback, successive sales or leases of a single facility or piece of equipment) will not be allowed.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-685, filed 8/3/82.]

WAC 275-38-690 Offset of miscellaneous revenues. (1) Allowable costs shall be reduced by the contractor whenever the item, service, or activity covered by such costs generates revenue or financial benefits (e.g., purchase discounts or rebates) other than through the contractor's normal billing for IMR services: Except, unrestricted grants, gifts, endowments, and interest therefrom, will not be deducted from the allowable costs of a nonprofit facility.

(2) Where goods or services are sold, the amount of the reduction shall be the actual cost relating to the item, service, or activity. In the absence of adequate documentation of cost, the amount of the reduction shall be the full amount of the revenue received. Where financial benefits such as purchase discounts or rebates are received, the amount of the reduction shall be the amount of the discount or rebate.

(3) Only allowable costs shall be recovered under this section. Costs allocable to activities or services not included in IMR services (e.g., costs of vending machines, residents' personal laundry, and services specified in chapter 388-86 WAC not included in IMR services) are nonallowable costs.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-690, filed 8/3/82.]

WAC 275-38-695 Costs of meeting standards. All categories of necessary and ordinary expenses a contractor incurs in providing IMR services meeting all applicable standards will be allowable costs.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-695, filed 8/3/82.]

WAC 275-38-700 Limit on costs to related organizations. (1) Costs applicable to services, facilities, and supplies furnished by organizations related to the contractor shall be allowable only to the extent the costs do not exceed the lower of the cost to the related organization or the price of comparable services, facilities or supplies purchased elsewhere. The term "related organization" is defined in WAC 275-38-001.

(2) Documentation of costs to related organizations shall be made available to the auditors at the time and place the financial records relating to the entity are audited. Payments to or for the benefit of the related organization will be disallowed where the cost to the related organization cannot be documented.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-700, filed 8/3/82.]

WAC 275-38-705 Start-up costs. Necessary and ordinary start-up costs, as defined in WAC 275-38-001, will be allowable if start-up costs are amortized over not less than sixty consecutive months beginning with the month the first resident is admitted for care.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-705, filed 8/3/82.]

WAC 275-38-715 Education and training. (1) Ordinary expenses of on-the-job training and in-service training required for employee orientation and certification training directly related to the performance of duties assigned will be allowable costs.

(2) Ordinary expenses of resident life staff training will be allowable costs.

(3) Necessary and ordinary expenses of recreational and social activity training conducted by the contractor for volunteers will be allowable costs. Expenses of training programs for other nonemployees will not be allowable costs.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-715, filed 8/3/82.]

WAC 275-38-720 Total compensation--Owners, relatives, and certain administrative personnel. For purposes of the tests in WAC 275-38-725 and 275-38-730, total compensation includes gross salary or wages and fringe benefits (e.g., health insurance) made available to all employees but excludes payroll taxes paid by the contractor.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-720, filed 8/3/82.]

WAC 275-38-725 Owner or relative--Compensation. (1) Total compensation of an owner or relative of an owner shall be limited to ordinary compensation for necessary services actually performed.

(a) Compensation is ordinary if the compensation is the amount usually paid for comparable services in a comparable facility to an unrelated employee, and does not exceed limits set out in this chapter.

(b) A service is necessary if the service is related to resident care and training and would have had to be performed by another person if the owner or relative had not performed the service.

(2) The contractor, in maintaining customary time records adequate for audit shall include such records for owners and relatives receiving compensation.

(3) For purposes of this section, if the contractor with the department is a corporation, "owner" includes all corporate officers and directors.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-725, filed 8/3/82.]

WAC 275-38-735 Disclosure and approval of joint facility cost allocation. (1) The contractor shall disclose to the department:

(a) The nature and purpose of all costs which represent allocations of joint facility costs; and

(b) The methodology of the allocation utilized.

(2) Such disclosure shall be made not later than September 30, 1980, for the following year and not later than September 30th for each year thereafter; except a new contractor shall submit the first year's disclosure together with the submissions required by WAC 275-38-520.

(3) The contractor shall demonstrate and certify:

(a) The services involved are necessary, ordinary, related to resident care, and nonduplicative; and

(b) Costs are allocated in accordance with the resident care related benefits and services received from the specific resources represented by those costs.

(4) The department shall approve such methodology not later than December 31, 1980, and not later than December 31 for each year thereafter.

(5) An amendment or revision to an approved methodology shall be submitted to the department for approval at least ninety days prior to the effective date of the amendment or revision.

(6) Where a contractor will begin to incur joint facility costs at some time other than the beginning of the calendar year, the contractor shall provide the information required in subsections (1) and (3) of this section at least ninety days prior to the date the cost will first be incurred.

(7) Joint facility costs not disclosed, allocated, and reported in conformance with this section are nonallowable costs.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-735, filed 8/3/82.]

WAC 275-38-745 Allowable interest. (1) The contractor's necessary and ordinary interest for working capital and capital indebtedness will be allowable.

(a) To be necessary, interest must be incurred in connection with a loan satisfying a financial need of the contractor and be for a purpose related to resident care and training. Interest expense relating to business opportunity or goodwill will not be allowed.

(b) To be ordinary, interest must be at a rate not in excess of what a prudent borrower would have to pay at the time of the loan in an arm's-length transaction in the money market.

(c) Interest expense shall include amortization of bond discounts and expenses related to the bond issue. Amortization shall be over the period from the date of sale to the date of maturity or, if earlier, the date of extinguishment of the bonds.

(d) Interest expense for assets acquired in a change of ownership entered into after September 30, 1984, shall be disallowed in proportion to the amount by which the

loan principal for the acquired assets exceeds the original depreciation base of the owner of the assets as of July 18, 1984.

(2) Interest paid to or for the benefit of a related organization will be allowed only to the extent the actual interest does not exceed the cost to the related organization of obtaining the use of the funds.

[Statutory Authority: RCW 74.09.120. 85-06-063 (Order 2213), § 275-38-745, filed 3/6/85; 82-16-080 (Order 1853), § 275-38-745, filed 8/3/82.]

WAC 275-38-750 Offset of interest income. (1) In computing allowable costs, interest income from the investment or lending of nonrestricted funds shall be deducted from allowable interest expense.

(2) Interest income from the investment or lending of restricted funds shall not be deducted from allowable interest expense.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-750, filed 8/3/82.]

WAC 275-38-760 Operating leases of facilities and equipment. Rental or lease costs under arm's-length operating leases of facilities and/or equipment shall be allowable to the extent the cost is not in excess of arm's-length rental or lease costs of comparable facilities or equipment.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-760, filed 8/3/82.]

WAC 275-38-765 Rental expense paid to related organizations. The expense of renting facilities or equipment from a related organization shall be allowable to the extent the rental does not exceed the related organization's costs of owning (e.g., depreciation, interest on a mortgage) or leasing the assets, computed in accordance with this chapter.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-765, filed 8/3/82.]

WAC 275-38-770 Capitalization. The following costs shall be capitalized:

(1) Expenses for equipment with historical cost in excess of one hundred fifty dollars per unit and a useful life of more than one year from the date of purchase.

(2) Expenses for equipment with historical cost of one hundred fifty dollars or less per unit if either:

(a) The item was acquired in a group purchase where the total cost exceeded one hundred fifty dollars; or

(b) The item was part of the initial stock of the IMR facility.

(3) Effective January 1, 1981, for settlement purposes for periods subsequent to that date, and for purposes of setting rates for periods beginning July 1, 1982, and subsequently, subsection (1) of this section shall be applied with the sum "five hundred dollars" replacing the sum "one hundred fifty dollars."

(4) Expenditures for building improvements and leasehold improvements, if required or authorized by the lease agreement, in excess of five hundred dollars and involving one or more of the following:

(a) Increase the interior floor space of the structure;

(b) Increase paved areas outside the structure adjacent to or providing access to the structure;

(c) Modification of the exterior or interior walls of the structure;

(d) Installation of additional heating, cooling, electrical or water-related equipment;

(e) Remodeling or redecorating enhancing the value of the structure sufficiently to justify an increase in service charges to residents;

(f) Increase the useful life of the structure by two years or more;

(g) For a leasehold improvement, the asset shall be amortized over the asset's useful life in accordance with American hospital association guidelines.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-770, filed 8/3/82.]

WAC 275-38-775 Depreciation expense. Depreciation expense on depreciable assets required in the regular course of providing resident care and training will be an allowable cost. The depreciation expense shall be:

(1) Identifiable and recorded in the contractor's accounting records, and

(2) Computed using the depreciation base, lives and methods specified in WAC 275-38-780.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-775, filed 8/3/82.]

WAC 275-38-780 Depreciable assets. (1) Tangible assets of the following types where a contractor has an economic interest through ownership are subject to depreciation:

(a) Building - The basic structure or shell and additions thereto.

(b) Building fixed equipment - Attachments to buildings, such as wiring, electrical fixtures, plumbing, elevators, heating system, and air conditioning system. The general characteristics of this equipment are:

(i) Affixed to the building and not subject to transfer; and

(ii) An estimated life longer than ten years, but shorter than the life of the building where affixed.

(c) Major movable equipment - Such items as beds, wheelchairs, desks, and x-ray machines. The general characteristics of this equipment are:

(i) A relatively fixed location in the building;

(ii) Capable of being moved as distinguished from building equipment;

(iii) A unit cost sufficient to justify ledger control;

(iv) Sufficient size and identity to make control feasible by means of identification tags; and

(v) A minimum life of approximately three years. Effective January 1, 1981, for settlement purposes for periods subsequent to that date, and for purposes of setting rates for periods beginning July 1, 1982, and subsequently, this equipment shall be characterized by a minimum life of greater than one year.

(d) Minor equipment - Such items as waste baskets, bed pans, syringes, catheters, silverware, mops, and buckets properly capitalized. No depreciation shall be

taken on items not properly capitalized (see WAC 275-38-770). The general characteristics of minor equipment are:

(i) In general, no fixed location and subject to use by various departments;

(ii) Small in size and unit cost;

(iii) Subject to inventory control;

(iv) Fairly large number in use; and

(v) Generally, a useful life of one to three years.

(e) Land improvements - Such items as paving, tunnels, underpasses, on-site sewer and water lines, parking lots, shrubbery, fences, walls, etc., where replacement is the responsibility of the contractor.

(f) Leasehold improvements - Betterments and additions made by the lessee to the leased property, which become the property of the lessor after the expiration of the lease.

(2) Land is not depreciable. The cost of land includes the cost of such items as off-site sewer and water lines, public utility charges necessary to service the land, governmental assessments for street paving and sewers, the cost of permanent roadways and grading of a nondepreciable nature, and the cost of curbs and sidewalks, replacement of which is not the responsibility of the contractor.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-780, filed 8/3/82.]

WAC 275-38-785 Depreciation base. (1) The depreciation base shall be the historical cost of the contractor in acquiring the asset from an unrelated organization and preparing depreciation base for use, less goodwill and less accumulated depreciation incurred during periods the assets have been used in or as a facility by the contractor, such accumulated depreciation to be measured in accordance with subsection (4) of this section and WAC 275-38-790, 275-38-795, and 275-38-800. If the department challenges the historical cost of an asset or a contractor is not able to provide adequate documentation of the historical cost of an asset, the department may have the fair market value of the asset at the time of purchase established by appraisal. The fair market value of items of equipment will be established by appraisals performed by vendors of the particular type of equipment. When these appraisals are conducted, the depreciation base of the asset will not exceed fair market value. Estimated salvage value shall be deducted from historical cost where the straight-line or sum-of-the-years digits method of depreciation is used.

(2) Effective January 1, 1981, for purposes of setting rates for rate periods beginning July 1, 1982, and subsequently, subsection (1) of this section shall be applied with the phrase "in an arm's-length transaction" replacing the phrase "from an unrelated organization."

(3) Effective July 1, 1982, in all cases subsection (1) of this section shall be applied with the phrase "in an arm's-length transaction" replacing the phrase "from an unrelated organization."

(4) Where depreciable assets are acquired from a related organization, the contractor's depreciation base

shall not exceed the base the related organization had or would have had under a contract with the department.

(5) Effective October 1, 1984, the depreciation base for assets acquired in a change of ownership entered into on or after July 18, 1984, shall not exceed the lower of the purchase price of the new owner or the acquisition cost base of the owner of the assets on or after July 18, 1984. Costs (including legal fees, accounting and administrative costs, travel costs, and the cost of feasibility studies) attributable to the negotiation or settlement of the assets acquired in the change of ownership, where any payment has previously been made by Title XIX, shall not be allowed.

[Statutory Authority: RCW 74.09.120. 86-01-008 (Order 2312), § 275-38-785, filed 12/5/85; 85-06-063 (Order 2213), § 275-38-785, filed 3/6/85; 82-16-080 (Order 1853), § 275-38-785, filed 8/3/82.]

WAC 275-38-790 Depreciation base--Donated or inherited assets. (1) The depreciation base of donated assets, as defined in WAC 275-38-001, or of assets received through testate or intestate distribution, shall be the lesser of:

(a) Fair market value at the date of donation or death, less goodwill. Estimated salvage value shall be deducted from fair market value where the straight-line or sum-of-the-years digits method of depreciation is used; or

(b) The depreciation base under the cost-related reimbursement program of the owner last contracting with the department, if any.

(2) If the donation or distribution is between related organizations, the base shall be the lesser of:

(a) Fair market value, less goodwill and, where appropriate, salvage value, or

(b) The depreciation base the related organization had or would have had for the asset under a contract with the department.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-790, filed 8/3/82.]

WAC 275-38-795 Lives. (1) The contractor shall use lives no shorter than guideline lives contained in the Internal Revenue Service class life ADR system or published by the American Hospital Association in computing allowable depreciation except the building. The shortest life which may be used for buildings is thirty years.

(2) Lives shall be measured from the date of the most recent arm's-length acquisition of the asset.

(3) Building improvements shall be depreciated over the remaining useful life of the building, as modified by the improvement, but not less than fifteen years, except as follows: For boarding home licensed facility building improvements required by the Fire Safety Evaluation System (FSSES) of the Life Safety Code of 1984, the improvements shall be depreciated over a period of not less than five years. This exception shall require prior approval by the department.

(4) Improvements to leased property which are the responsibility of the contractor under the terms of the

lease shall be depreciated over the useful life of the improvement, except as follows: For boarding home licensed facility building improvements required by the Fire Safety Evaluation System (FSES) of the Life Safety Code of 1984, the improvements shall be depreciated over a period of not less than five years. This exception shall require prior approval by the department.

(5) A contractor may change the estimate of an asset's useful life to a longer life for purposes of depreciation.

[Statutory Authority: RCW 74.09.120. 86-01-008 (Order 2312), § 275-38-795, filed 12/5/85; 82-16-080 (Order 1853), § 275-38-795, filed 8/3/82.]

WAC 275-38-800 Methods of depreciation. (1) Buildings, land improvements, and fixed equipment shall be depreciated using the straight-line method. Major-minor equipment shall be depreciated using either the straight-line method, the sum-of-the-years digits method, or declining balance method not to exceed one hundred fifty percent of the straight-line rate. Contractors electing to take either the sum-of-the-years digits method or the declining balance method of depreciation on major-minor equipment may change to the straight-line method without permission of the department.

(2) The annual provision for depreciation shall be reduced by the portion allocable to use of the asset for purposes not both necessary and related to resident care and training.

(3) No further depreciation shall be claimed after an asset has been fully depreciated unless a new depreciation base is established pursuant to WAC 275-38-785.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-800, filed 8/3/82.]

WAC 275-38-805 Retirement of depreciable assets.

(1) Where depreciable assets are disposed of through sale, trade-in, scrapping, exchange, theft, wrecking, or fire or other casualty, depreciation shall no longer be taken on the assets. No further depreciation shall be taken on permanently abandoned assets.

(2) Where an asset has been retired from active use but is being held for stand-by or emergency service, and the department has determined that the asset is needed and can be effectively used in the future, depreciation may be taken, as prescribed in WAC 275-38-775 through 275-38-800.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-805, filed 8/3/82.]

WAC 275-38-810 Handling of gains and losses upon retirement of depreciable assets. Settlement periods prior to January 1, 1981, and rate periods prior to July 1, 1982.

(1) For settlement purposes for periods prior to January 1, 1981, and for rate-setting purposes for periods prior to July 1, 1982, gains and losses on the retirement of depreciable assets either during the period of participation in the program or within twelve months following termination, shall be treated in accordance with this section.

(2) A gain or loss on the retirement of an asset shall be the difference between the remaining undepreciated base and any proceeds received for, or to compensate for loss of, the asset. For purposes of subsections (3) and (4) of this section, the total gain shall be reduced by one percent for each month of ownership of an asset with an expected useful life of one hundred months or longer. For an asset with an expected useful life of less than one hundred months, total gain shall be reduced by the portion thereof equal to the ratio of the actual life of the asset from the most recent arm's-length acquisition up to the date of retirement to the assets expected useful life.

(3) If the retired asset is replaced, the gain or loss shall be applied against or added to the cost of the replacement asset, provided a loss will only be so applied if the contractor has made a reasonable effort to recover at least the outstanding book value of the asset.

(4) If the retired asset is not replaced, or if the contractor is terminating the contract, the gain or loss shall be spread over the actual life of the asset up to the date of retirement, provided a loss will only be so spread if the contractor has made a reasonable effort to recover at least the outstanding book value of the asset. The difference between reimbursement actually paid for depreciation in any period beginning on or after January 1, 1978, and the reimbursement for depreciation having been paid with the base adjusted to reflect the gain or loss, will be computed. Where the difference results from a gain, the difference shall be recovered by the department. Where the difference results from a loss, the difference will be added to allowable costs for purposes of determining settlement.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-810, filed 8/3/82.]

WAC 275-38-812 Handling of gains and losses upon retirement of depreciable assets--Other periods. (1)

This section shall apply in the place of WAC 275-38-810 effective January 1, 1981, for purposes of settlement for settlement periods prior to that date, and for purposes of setting rates for rate periods beginning July 1, 1982, and subsequently.

(2) A gain or loss on the retirement of an asset shall be the difference between the remaining undepreciated base and any proceeds received for, or to compensate for loss of, the asset.

(3) If the retired asset is replaced, the gain or loss shall be applied against or added to the cost of the replacement asset, provided a loss will only be so applied if the contractor has made a reasonable effort to recover at least the outstanding book value of the asset.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-812, filed 8/3/82.]

WAC 275-38-813 Handling of gains and losses upon retirement of depreciable assets. This section shall apply in the place of WAC 275-38-812 effective October 1, 1984. Effective October 1, 1984, assets acquired in a change of ownership entered into on or after July

18, 1984, shall be subject to the following depreciation recapture provisions.

(1) A gain or loss on the retirement of an asset shall be the difference between the remaining undepreciated base and any proceeds received for, or to compensate for loss of, the asset.

(2) If the retired asset is replaced, the gain or loss shall be applied against or added to the cost of the replacement asset, provided a loss will only be so applied if the contractor has made a reasonable effort to recover at least the outstanding book value of the asset.

(3) If the retired asset is not replaced, or if the contractor is terminating the contract, the gain or loss shall be spread over the actual life of the asset up to the date of retirement, provided a loss will only be so spread if the contractor has made a reasonable effort to recover at least the outstanding book value of the asset. The difference between reimbursement actually paid for depreciation and the reimbursement for depreciation having been paid with the base adjusted to reflect the gain or loss, will be computed. Where the difference results from a gain, the difference shall be recovered by the department.

[Statutory Authority: RCW 74.09.120. 86-01-008 (Order 2312), § 275-38-813, filed 12/5/85.]

WAC 275-38-815 Recovery of excess over straight-line depreciation. If a contractor terminates the contract without selling or otherwise retiring equipment which was depreciated using an accelerated method, depreciation schedules relating to these assets for periods the contractor participated in the program shall be adjusted. The difference between reimbursement actually paid for depreciation in any period beginning on or after January 1, 1978, and the reimbursement which would have been paid for depreciation if the straight-line method had been used, will be recovered by the department.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-815, filed 8/3/82.]

WAC 275-38-820 Unallowable costs. (1) Costs will be unallowable if not documented, necessary, ordinary, and related to the provision of services to IMR residents.

(2) Unallowable costs include, but are not limited to, the following:

(a) Costs of items or services not covered by the Medicaid program. Costs of nonprogram items or services will be unallowable even if indirectly reimbursed by the department as the result of an authorized reduction in resident contribution.

(b) Costs of services and items provided to IMR residents covered by the department's medical care program but not included in IMR services respectively. Items and services covered by the medical care program are listed in chapter 388-86 WAC.

(c) Costs associated with a capital expenditure subject to Section 1122 approval (part 100, Title 42 CFR) if the department found the capital expenditure was not consistent with applicable standards, criteria or plans. If the department was not given timely notice of a proposed

capital expenditure, all associated costs will be nonallowable as of the date the costs are determined not to be reimbursable under applicable federal regulations.

(d) Costs associated with a construction or acquisition project requiring certificate of need approval pursuant to chapter 70.38 RCW if such approval was not obtained.

(e) Costs of outside activities (e.g., costs allocable to the use of a vehicle for personal purposes, or related to the part of a facility leased out for office space).

(f) Salaries or other compensation of officers, directors, stockholders, and others associated with the contractor or home office, except compensation paid for service related to resident care and training.

(g) Costs in excess of limits or violating principles set forth in this chapter.

(h) Costs resulting from transactions or the application of accounting methods circumventing the principles of the prospective cost-related reimbursement system.

(i) Costs applicable to services, facilities, and supplies furnished by a related organization in excess of the lower of the cost to the related organization or the price of comparable services, facilities or supplies purchased elsewhere.

(j) Bad debts.

(k) Charity and courtesy allowances.

(l) Cash, assessments, or other contributions, excluding dues, to charitable organizations, professional organizations, trade associations, or political parties, and cost incurred to improve community or public relations.

(m) Vending machine expenses.

(n) Expenses for barber or beautician services not included in routine care.

(o) Funeral and burial expenses.

(p) Costs of gift shop operations and inventory.

(q) Personal items such as cosmetics, smoking materials, newspapers and magazines, and clothing, except those used in resident activity programs or in IMR programs where clothing is a part of routine care.

(r) Fund-raising expenses, except those directly related to the resident activity program.

(s) Penalties and fines.

(t) Expenses related to telephones, televisions, radios, and similar appliances in residents' private accommodations.

(u) Federal, state, and other income taxes.

(v) Costs of special care services, except where authorized by the department.

(w) Expenses of key-man insurance and other insurance or retirement plans not in fact made available to all employees.

(x) Expenses of profit-sharing plans.

(y) Expenses related to the purchase and/or use of private or commercial airplanes in excess of what a prudent contractor would expend for the ordinary and economic provision of such a transportation need related to resident care.

(z) Personal expenses and allowances of owners or relatives.

(aa) All expenses of maintaining professional licenses or membership in professional organizations.

(bb) Costs related to agreements not to compete.

(cc) Goodwill and amortization of goodwill.

(dd) Expenses related to vehicles in excess of what a prudent contractor would expend for the ordinary and economic provision of transportation needs related to resident care.

(ee) Legal and consultant fees in connection with a fair hearing against the department where a decision is rendered in favor of the department or where otherwise the determination of the department stands.

(ff) Legal and consultant fees in connection with a lawsuit against the department are nonallowable.

(gg) Lease acquisition costs and other intangibles not related to resident care and training.

(hh) Interest charges assessed by the state of Washington for failure to make timely refund of overpayments and interest expenses incurred for loans obtained to make such refunds.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-820, filed 8/3/82.]

WAC 275-38-831 Reimbursement principles. (1) Medicaid program reimbursement rates established under the provisions of this chapter shall be only for facilities holding appropriate state licenses and certified to provide IMR services in accordance with applicable state and federal laws and regulations.

(2) Rates established shall be reasonable and adequate to meet the costs that must be incurred by economically and efficiently operated facilities to provide services in conformity with applicable state and federal laws and regulations.

(3) For nonstate facilities, final payment shall be the lower of their prospective rate or allowable costs.

(a) Prospective rates for nonstate facilities shall be determined in accordance with WAC 275-38-845, 275-38-846, 275-38-850, 275-38-860, 275-38-863, 275-38-865, 275-38-868, 275-38-869, 275-38-870, 275-38-875, and 275-38-880.

(b) Final payments for nonstate facilities shall be determined in accordance with WAC 275-38-886.

(4) For state facilities, final payment shall be their allowable costs.

(a) Interim rates for state facilities shall be determined in accordance with WAC 275-38-846 and 275-38-890.

(b) Final payments for state facilities shall be determined in accordance with WAC 275-38-892.

[Statutory Authority: RCW 74.09.120. 85-06-063 (Order 2213), § 275-38-831, filed 3/6/85; 84-19-042 (Order 2150), § 275-38-831, filed 9/17/84; 83-17-074 (Order 2012), § 275-38-831, filed 8/19/83.]

WAC 275-38-835 Program services not covered by the reimbursement rate. Medical services which are part of the department's medical care program but not included in IMR services are not covered by the prospective reimbursement rate. Payment is made directly to the provider of service in accordance with chapter 388-87 WAC. Items and services covered by the medical care program are listed in chapter 388-86 WAC.

(1986 Ed.)

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-835, filed 8/3/82.]

WAC 275-38-840 Prospective reimbursement rate for new contractors. (1) A prospective reimbursement rate for a new contractor will be established within sixty days following receipt by the department of a properly completed projected budget (see WAC 275-38-520). The reimbursement rate will be effective as of the effective date of the contract.

(2) The prospective reimbursement rate will be based on the contractor's projected cost of operations, and on costs and payment rates of the prior contractor, if any, and/or of other contractors in comparable circumstances.

(3) If a properly completed projected budget is not received at least sixty days prior to the effective date of the contract, the department will establish a preliminary rate based on the other factors specified in subsection (2) of this section. The preliminary prospective rate will remain in effect until an initial prospective rate can be set.

(4) Where a change of ownership is involved which is not an arm's-length transaction as defined in WAC 275-38-001, the new contractor's prospective rates in the administration and operation and property cost areas will be no higher than the rates of the old contractor, adjusted if necessary to take into account economic trends.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-840, filed 8/3/82.]

WAC 275-38-845 Rate determination. (1) Each contractor's reimbursement rate will be determined prospectively at least once each calendar year to be effective July 1st.

(2) Prospective reimbursement rates shall be determined utilizing the prior year's desk-reviewed cost reports, and/or other documents submitted by each contractor. Prospective rates shall include an adjustment for inflation in accordance with appropriations made by the state legislature as consistent with federal requirements for the period to be covered by such rates. The legislative inflation factors will be specified in division policy Directive 406.

(3) Rates may be adjusted for:

(a) Changes approved by the department in staffing and/or consultant services at a facility in order to be in compliance with applicable state and federal laws, regulations, and quality and safety standards;

(b) Capital additions, improvements, or replacements made at a facility which are approved by the department as a condition of licensure or certification; or

(c) Department changes in program standards or services; or

(d) Administrative review conducted pursuant to WAC 275-38-900 or 275-38-960.

(4) Adjustments for cost changes not otherwise specified in subsection (3) of this section shall be provided by means of an inflation adjustment pursuant to subsection (2) of this section.

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[Statutory Authority: RCW 74.09.120. 84-19-042 (Order 2150), § 275-38-845, filed 9/17/84; 83-17-074 (Order 2012), § 275-38-845, filed 8/19/83; 82-16-080 (Order 1853), § 275-38-845, filed 8/3/82.]

WAC 275-38-846 Desk review for rate determination. (1) The department shall analyze the submitted cost report and financial statements of each contractor to determine if the information is correct, complete, and reported in conformity with generally accepted accounting principles, the requirements of this chapter, and such regulations and instructions issued by the department.

(2) If the analysis finds the cost report or financial statements are not correctly determined or reported, the department may make adjustments to the reported information for purposes of establishing reimbursement rates. A schedule of such adjustments shall be provided to contractors and shall include an explanation for the adjustment and the dollar amount of the adjustment. Adjustments shall be subject to review and appeal as provided in this chapter.

[Statutory Authority: RCW 74.09.120. 83-17-074 (Order 2012), § 275-38-846, filed 8/19/83.]

WAC 275-38-850 Cost centers. (1) A contractor's overall reimbursement rate for IMR residents consists of the total of three component rates, each covering one cost center. The five cost centers are: Resident care and habilitative services; food; administration and operations; property; and return on equity;

(2) Effective January 1, 1985, a contractor's reimbursement rate for IMR residents consists of the total of three component rates, each covering one cost center. The three cost centers are: Resident care and habilitation; administration, operations, and property; and return on equity.

[Statutory Authority: RCW 74.09.120. 85-06-063 (Order 2213), § 275-38-850, filed 3/6/85; 82-16-080 (Order 1853), § 275-38-850, filed 8/3/82.]

WAC 275-38-860 Resident care and habilitation cost center rate. (1) For C and D level facilities, the resident care and habilitation cost center will reimburse for resident living services, habilitative and training services, recreation services, and nursing services in accordance with applicable federal and state regulation.

(2) For E level facilities, the resident care and habilitation cost center will reimburse for resident living services, habilitative and training services, recreation services, and nursing services in accordance with applicable federal and state regulation. The cost center will also reimburse for resident care and training staff performing administration and operations functions specified in WAC 275-38-870.

(3) A facility's resident care and habilitation cost center rate shall be determined as follows:

(a) The facility's most recent desk-reviewed costs per resident day shall be adjusted for inflation except those costs for resident care and training (RCT) and recreation staff.

(b) RCT staff and recreation staff shall be determined by multiplying the number of reimbursed RCT and recreation staff hours per resident day reported in the facility's most recent cost report by the greater of seven dollars and twenty-nine cents or the most recent reported cost for RCT and recreation staff per reported hour.

(c) The amounts determined in subsections (3)(a) and (b) of this section shall be summed to establish the facility's rate.

[Statutory Authority: RCW 74.09.120. 86-18-002 (Order 2412), § 275-38-860, filed 8/21/86; 86-01-008 (Order 2312), § 275-38-860, filed 12/5/85; 85-06-063 (Order 2213), § 275-38-860, filed 3/6/85; 84-19-042 (Order 2150), § 275-38-860, filed 9/17/84; 83-17-074 (Order 2012), § 275-38-860, filed 8/19/83; 82-16-080 (Order 1853), § 275-38-860, filed 8/3/82.]

WAC 275-38-863 Administration, operations, and property cost center rate. Effective October 1, 1985, the administration, operations, and property cost center rate shall consist of the sum of three rate components: Food, administration and operations, and property. The food rate component shall be established pursuant to WAC 275-38-865. The administration and operations rate component shall be established pursuant to WAC 275-38-870. The property rate component shall be established pursuant to WAC 275-38-875.

[Statutory Authority: RCW 74.09.120. 86-01-008 (Order 2312), § 275-38-863, filed 12/5/85; 85-06-063 (Order 2213), § 275-38-863, filed 3/6/85.]

WAC 275-38-865 Food rate component. (1) The food rate component will reimburse for the necessary and ordinary costs of bulk and raw food, dietary supplements, and beverages for meals and between-meal nourishment for residents.

(2) A facility's food rate component shall be set at the July 1, 1983, IMR food rate component, adjusted for inflation.

[Statutory Authority: RCW 74.09.120. 85-06-063 (Order 2213), § 275-38-865, filed 3/6/85; 84-19-042 (Order 2150), § 275-38-865, filed 9/17/84; 83-17-074 (Order 2012), § 275-38-865, filed 8/19/83; 82-16-080 (Order 1853), § 275-38-865, filed 8/3/82.]

WAC 275-38-868 Maximum allowable compensation of certain administrative personnel. (1) Compensation for administrative personnel shall be an allowable cost, subject to the limits contained in this section.

(2) Total compensation of the licensed administrator for services actually rendered to an IMR facility on a full-time basis (at least forty hours per week, including reasonable vacation, holiday, and sick time) will be allowable at the lower of:

(a) Actual compensation received; or

(b) The amount specified in division policy Directive 403 corresponding to the number of set-up beds in the IMR facility. Compensation of the licensed administrator will only be allowable if the department is given written notice of his or her employment within ten days after the employment begins.

(3) Total compensation of not more than one full-time licensed assistant administrator will be allowable if

there are at least eighty set-up beds in the IMR, at the lower of:

- (a) Actual compensation received; or
- (b) Seventy-five percent of the amount specified in division policy Directive 403.

(4) Total compensation of not more than one full-time registered administrator-in-training will be allowable at the lower of:

- (a) Actual compensation received; or
- (b) Sixty percent of the amount specified in division policy Directive 403.

(5) The cost of a licensed administrator, assistant administrator, or administrator-in-training is not an allowable expense in IMR facilities of fifteen beds or less. Administrative services will be provided by the QMRP in these facilities. Total compensation of wages and salaries for the QMRP will be allowable at the lower of:

- (a) Actual compensation received; or
- (b) The amount specified in division policy Directive 403.

(6) If the licensed administrator, licensed assistant administrator, registered administrator-in-training, or QMRP regularly works fewer than forty hours per week, allowable compensation shall be the lower of:

- (a) Actual compensation received, or
- (b) The maximum amount allowed multiplied by the percentage derived by dividing actual hours worked by forty hours. Further discounting is required if the person was licensed or registered and/or worked for less than the entire report period.

(7) The contractor shall maintain time records for the licensed administrator and for an assistant administrator, administrator-in-training, or QMRP, if any.

[Statutory Authority: RCW 74.09.120, 84-19-042 (Order 2150), § 275-38-868, filed 9/17/84. Formerly WAC 275-38-730.]

WAC 275-38-869 Management agreements, management fees, and central office services. (1) If a contractor intends to enter into a management agreement with an individual or firm which will manage the IMR facility as agent of the contractor, a copy of the agreement must be received by the department at least ninety days before the agreement is to become effective. A copy of any amendment to a management agreement must also be received by the department at least ninety days in advance of the date the amendment is to become effective. No management fees for periods prior to the time the department receives a copy of the applicable agreement will be allowable. When necessary for the health and safety of facility residents, the ninety-day notice requirement may be waived, in writing, by the department.

(2) Management fees will be allowed only if:

(a) A written management agreement both creates a principal or agent relationship between the contractor and the manager, and sets forth the items, services, and activities to be provided by the manager; and

(b) Documentation demonstrates the services contracted for were actually delivered.

(3) To be allowable, fees must be for necessary, non-duplicative services. Allowable fees for general management services, including the portion of a management fee not allocated to specific services such as accounting, are limited to:

(a) The maximum allowable compensation under WAC 275-38-868 of the licensed administrator and, if the facility has at least eighty set-up beds, of an assistant administrator; less

(b) Actual compensation received by the licensed administrator and by the assistant administrator, if any. In computing maximum allowable compensation under WAC 275-38-868 for a facility with at least eighty set-up beds, include the maximum compensation of an assistant administrator even if no assistant administrator is employed;

(c) For IMR facilities of fifteen or fewer beds, the maximum allowable compensation under WAC 275-38-868, less the actual compensation received by the QMRP.

(4) A management fee paid to or for the benefit of a related organization will be allowable to the extent the fee does not exceed the lesser of:

(a) The limits set out in subsection (3) of this section; or

(b) The lower of the actual cost to the related organization of providing necessary services related to resident care and training under the agreement, or the cost of comparable services purchased elsewhere.

Where costs to the related organization represents joint facility costs, the measurement of such costs shall comply with WAC 275-38-868.

(5) Central office joint facility costs for general management services, including the portion of a management expense not allocated to specific services, shall be subject to the management fee limits determined in subsections (3) and (4) of this section.

[Statutory Authority: RCW 74.09.120, 84-19-042 (Order 2150), § 275-38-869, filed 9/17/84. Formerly WAC 275-38-740.]

WAC 275-38-870 Administration and operations rate component. (1) The administration and operations rate component will include reimbursement for the necessary and ordinary costs of overall administration and management of the facility, operation and maintenance of the physical plant, resident transportation, dietary service (other than the cost of food and beverages), laundry service, medical and habilitative supplies, taxes, and insurance.

(2) A facility's administration and operations rate component shall be the lesser of:

(a) The facility's most recent desk-reviewed cost per resident day, adjusted for inflation; or

(b) The eighty-fifth percentile ranking of state and nonstate facilities' most recent desk-reviewed cost per resident day, adjusted for inflation. The ranking shall be based on cost reports used for rate determination for facilities having an occupancy level of at least eighty-five percent for the cost report period.

[Statutory Authority: RCW 74.09.120, 85-06-063 (Order 2213), § 275-38-870, filed 3/6/85; 84-19-042 (Order 2150), § 275-38-870,

filed 9/17/84; 83-17-074 (Order 2012), § 275-38-870, filed 8/19/83; 82-16-080 (Order 1853), § 275-38-870, filed 8/3/82.]

WAC 275-38-875 Property rate component. The property rate component will reimburse for the necessary and ordinary costs of leases, depreciation, and interest. A facility's property rate component shall be the facility's most recent desk-reviewed cost per resident day.

[Statutory Authority: RCW 74.09.120. 86-01-008 (Order 2312), § 275-38-875, filed 12/5/85; 85-06-063 (Order 2213), § 275-38-875, filed 3/6/85; 84-19-042 (Order 2150), § 275-38-875, filed 9/17/84; 83-17-074 (Order 2012), § 275-38-875, filed 8/19/83; 82-16-080 (Order 1853), § 275-38-875, filed 8/3/82.]

WAC 275-38-880 Return on equity. (1) The department will pay a return on equity to proprietary contractors.

(2) A contractor's net equity will be calculated using the appropriate items from the contractor's most recent desk-reviewed cost report utilizing the definition of equity capital in WAC 275-38-001 and applying relevant Medicare rules and regulations, except that goodwill is not includable in the determination of net equity and monthly equity calculations will not be used.

(3) The contractor's net equity will be multiplied by twelve percent for the twelve-month period ending on the date of the closing date of the contractor's cost report. The amount will be divided by the contractor's annual resident days for the cost report period to determine a rate per resident day. Where a contractor's cost report covers less than a twelve-month period, annual resident days will be estimated using the contractor's reported resident days. The contractor shall be paid a prospective rate which is the lesser of the amount calculated pursuant to this section or two dollars per resident day.

(4) The information on which the return on equity is calculated is subject to field audit. If a field audit determines the desk-reviewed reported equity exceeds the equity documented and calculated in conformance with Medicare rules and regulations as modified by this section, the contractor's return on equity rate for the rate period using the report shall be recalculated using the determinations of the field audit. Any payments in excess of the rate shall be refunded to the department as part of the settlement procedure established by WAC 275-38-886.

[Statutory Authority: RCW 74.09.120. 84-19-042 (Order 2150), § 275-38-880, filed 9/17/84; 83-17-074 (Order 2012), § 275-38-880, filed 8/19/83; 82-16-080 (Order 1853), § 275-38-880, filed 8/3/82.]

WAC 275-38-885 Upper limits to reimbursement rate. The reimbursement rate shall not exceed the contractor's customary charges to the general public for the services covered by the rate, except that public facilities rendering such services free of charge or at a nominal charge will be reimbursed according to the methods and standards set out in this chapter. The contractor shall immediately inform the department if the department's reimbursement rate does exceed customary charges for

comparable services. If necessary, the rate will be adjusted in accordance with WAC 275-38-900. Rates will not exceed the limits set in 42 CFR 447.316.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-885, filed 8/3/82.]

WAC 275-38-886 Settlement. (1) Effective January 1, 1985, a contractor's resident care and habilitation cost center payment shall be the lower of their prospective rate or allowable cost. A contractor's administration, operations and property cost center payment shall be their prospective rate. A contractor's return on equity payment shall be their prospective rate.

(2) A contractor's resident care and habilitation cost center payment shall be determined by the settlement procedure prescribed in this section.

(3) The settlement process shall consist of a preliminary settlement and a final settlement.

(4) The preliminary settlement process will be as follows:

(a) Providers are required to submit a proposed settlement report with the cost report.

(b) Within one hundred twenty days after receipt of the proposed settlement, the department shall verify the accuracy of the proposal and shall issue a preliminary settlement substantiating refunds, underpayments, and overpayments.

(5) The final settlement process will be as follows:

(a) After completion of the audit process, including exhaustion or mutual termination of reviews and appeals of audit findings or determinations, the department will submit a final settlement report to the contractor fully substantiating disallowed costs, refunds, underpayments, or adjustments to the contractor's financial statements, cost report, and final settlement.

(b) Where the contractor is pursuing judicial or administrative review or appeal in good faith regarding audit findings or determinations, the department may issue a partial final settlement to recover overpayments based on audit adjustments not in dispute.

(c) A preliminary settlement as issued by the department will become the final settlement if no audit is to be conducted.

(6) Repayment of amounts owed the department shall be as follows:

(a) The contractor shall have thirty days after the date the preliminary or final settlement report is submitted to the contractor to contest a settlement determination under WAC 275-38-960. After the thirty-day period has expired, a preliminary or final settlement will not be subject to review.

(b) A contractor found to have received either overpayments or erroneous payments under a preliminary or final settlement shall refund such payments to the state within thirty days after the date of the preliminary or final settlement report is submitted to the contractor.

(c) In the event the contractor fails to make repayment in the time provided in subsection (6)(b) of this section, the department shall either:

(i) Deduct the amount of refund due plus assessment of interest, at the rate of one percent per month on the

unpaid balance, from payment amounts due the contractor; or

(ii) In the instance the contract has been terminated:

(A) Deduct the amount of refund due plus an assessment of interest, at the rate of one percent per month on the unpaid balance, from any payments due; or

(B) Assess the amount due plus interest, at the rate of one percent per month on the unpaid balance, on the amount due.

(iii) Interest on the unpaid balance owed the department shall begin to accrue on the thirty-first day following receipt of written notification to the contractor of the amount owed the department.

(d) Where the facility is pursuing timely filed judicial or administrative remedies in good faith regarding settlement issues, the contractor need not refund nor shall the department withhold from the facility current payment amounts the department claims to be due from the facility but which are specifically disputed by the contractor. If the judicial or administrative remedy sought by the facility is not granted after all appeals are exhausted or mutually terminated, the facility shall make payment of such amounts due plus interest accrued from the date of filing of the appeal, as payable on judgments, within sixty days of the date such decision is made.

(7) Payment of amounts owed the contractor shall be as follows: The department shall make payment of any underpayments within thirty days after the date the settlement report is submitted to the contractor.

[Statutory Authority: RCW 74.09.120. 85-06-063 (Order 2213), § 275-38-886, filed 3/6/85; 84-19-042 (Order 2150), § 275-38-886, filed 9/17/84; 83-17-074 (Order 2012), § 275-38-886, filed 8/19/83.]

WAC 275-38-890 Interim rate. (1) A facility's interim rate shall be determined utilizing the most recent desk-reviewed costs per resident day. These costs may be adjusted to incorporate federal, state, or department changes in program standards or services.

(2) A facility's interim rate may be adjusted for federal, state, or department changes in program standards or services.

[Statutory Authority: RCW 74.09.120. 84-19-042 (Order 2150), § 275-38-890, filed 9/17/84.]

WAC 275-38-892 Final payment. (1) A settlement shall be determined to establish a facility's final payment. A settlement shall be calculated as follows:

(a) If a facility's allowable costs for the report period are greater than their interim payment, the amount owed the facility shall be the difference of cost minus interim payment.

(b) If a facility's allowable costs for the report period are less than their interim payments, the amount owed the department shall be the difference of rate minus cost.

(2) The settlement process shall consist of a preliminary settlement and a final settlement.

(3) The preliminary settlement process will be as follows:

(a) Facilities shall submit a proposed settlement report with their cost report.

(b) Within one hundred twenty days after receipt of the proposed settlement, the department shall verify the accuracy of the proposal and shall issue a preliminary settlement substantiating the settlement amount.

(4) The final settlement process will be as follows:

(a) After completion of the audit process, the department shall submit a final settlement report to the facility substantiating disallowed costs, refunds, underpayments, or adjustments to the contractor's financial statements, cost report, and final settlement.

(b) A preliminary settlement as issued by the department shall become the final settlement if an audit is not to be conducted.

[Statutory Authority: RCW 74.09.120. 84-19-042 (Order 2150), § 275-38-892, filed 9/17/84.]

WAC 275-38-895 Notification of rates. The department will notify each contractor in writing of the department's prospective reimbursement rate. Unless otherwise specified at the time the reimbursement rate is issued, the rate will be effective from the first day of the month the rate is issued until a new rate becomes effective. If a rate is changed as the result of an appeal in accordance with WAC 275-38-960, the rate will be effective as of the date the rate appealed from became effective.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-895, filed 8/3/82.]

WAC 275-38-900 Adjustments required due to errors or omissions. (1) Prospective rates are subject to adjustment by the department as a result of errors or omissions by the department or by the contractor. The department will notify the contractor in writing of each adjustment and of the effective date, and of any amount due to the department or to the contractor as a result of the rate adjustment. Rates adjusted in accordance with this section will be effective as of the effective date of the original rate.

(2) If a contractor claims an error or omission based upon incorrect cost reporting, amended cost report pages shall be prepared and submitted by the contractor. Amended pages shall be accompanied by the certification required by WAC 275-38-560 and a written justification explaining why the amendment is necessary. Such amendments shall not be accepted for settlement purposes unless the amendments meet the requirements of WAC 275-38-570, but may be used for purposes of revising a prospective rate. If changes made by the amendments are determined to be material by the department according to standards established by the department, such amended pages shall be subject to field audit. If a field audit determines the amendments are incorrect or otherwise unacceptable, any rate adjustment based on the amendment shall be null and void. Payments based upon the rate adjustment shall be subject to repayment as provided in subsection (3) of this section.

(3) The contractor shall pay an amount he or she owes the department resulting from an error or omission,

or commence repayment in accordance with a schedule determined by the department, within sixty days after receipt of notification of the rate adjustment, unless the contractor contests the department's determination in accordance with the procedures set forth in WAC 275-38-960. If the determination is contested, the contractor shall pay or commence repayment within sixty days after completion of these proceedings. If a refund is not paid when due, the amount thereof may be deducted from current payments by the department.

(4) The department shall pay any amount owed the contractor as a result of a rate adjustment within thirty days after the department notifies the contractor of the rate adjustment.

(5) No adjustments will be made to a rate after the annual settlement for the period the rate was effective has become final.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-900, filed 8/3/82.]

WAC 275-38-905 Requests for revision of a prospective rate. (1) A contractor may at any time request in writing a revision of the current rate. Each request shall include a detailed explanation of significant changes in the factors used to establish the rate, or of significant changes in actual costs incurred or anticipated.

(2) The department will inform a contractor of the disposition of a request within sixty days after receipt of the request and of any documentation necessary to support the request. Unless otherwise specified, a revised rate shall be effective as of the first day of the month in which the rate is issued.

(3) A formal request is not required for a rate increase granted to all contractors to cover the cost of meeting new federal or state requirements.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-905, filed 8/3/82.]

WAC 275-38-910 Public review of rate-setting methods and standards. The department will provide all interested members of the public with an opportunity to review and comment on proposed rate-setting methods and standards each year before setting rates.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-910, filed 8/3/82.]

WAC 275-38-915 Public disclosure of rate-setting methodology. Without identifying individual IMR facilities, the department will make available to the public full information regarding the department's rate-setting methodology.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-915, filed 8/3/82.]

WAC 275-38-920 Billing period. A contractor shall bill the department for care provided to medical care recipients from the first through the last day of each calendar month.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-920, filed 8/3/82.]

WAC 275-38-925 Billing procedures. (1) A contractor shall bill the department each month by completing and returning the IMR statement provided by the department. The IMR statement shall be completed and filed in accordance with instructions issued by the department.

(2) A contractor shall not bill the department for service provided to a resident until a department "notification to recipient in a Title XIX facility" form (award letter) relating to the resident has been received. At that time the contractor may bill for service provided back through the date the resident was admitted or became eligible.

(3) Billing shall not cover the day of a resident's death, discharge, or transfer from the IMR facility.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-925, filed 8/3/82.]

WAC 275-38-930 Charges to residents. (1) The department will notify a contractor of the amount each resident is required to pay for care provided under the contract and the effective date of such required contribution. It is the contractor's responsibility to collect that portion of the cost of care from the resident, and to account for any authorized reduction from his or her contribution in accordance with procedures established by the department.

(2) If a contractor receives documentation showing a change in the income or resources of a resident which will mean a change in his or her contribution toward the cost of care, this shall be reported in writing to the regional services office, DDD, within seventy-two hours. If necessary, appropriate corrections shall be made in the next IMR statement, and a copy of documentation supporting the change shall be attached. If increased funds for a resident are received by a contractor, the normal amount shall be allowed for clothing, personal, and incidental expense, and the balance applied to the cost of care.

(3) The contractor shall accept the reimbursement rate established by the department as full compensation for all services the contractor is obligated to provide under the contract. The contractor shall not seek or accept additional compensation from or on behalf of a resident for any or all such services.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-930, filed 8/3/82.]

WAC 275-38-935 Payment. (1) The department will reimburse a contractor for service rendered under the IMR contract and billed for in accordance with WAC 275-38-925.

(2) The amount paid will be computed using the appropriate rate assigned to the contractor.

(3) For each resident, the department will pay an amount equal to the appropriate rate or rates, multiplied by the number of resident days each rate was in effect, less the amount the resident is required to pay for his or her care (see WAC 275-38-930).

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-935, filed 8/3/82.]

WAC 275-38-940 Suspension of payment. (1) Payments to a contractor may be withheld by the department in each of the following circumstances:

(a) A required report is not properly completed and filed by the contractor within the appropriate time period, including any approved extensions. Payments will be released as soon as a properly completed report is received.

(b) Auditors or other authorized department personnel in the course of his or her duties are refused access to an IMR or are not provided with existing appropriate records. Payments will be released as soon as such access or records are provided.

(c) A refund in connection with an annual settlement or rate adjustment is not paid by the contractor when due. The amount withheld will be limited to the unpaid amount of the refund.

(d) Payment for the final thirty days of service under a contract will be held pending final settlement when the contract is terminated.

(2) No payment will be withheld until written notification of the suspension is given to the contractor, stating the reason therefor.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-940, filed 8/3/82.]

WAC 275-38-945 Termination of payments. All payments to a contractor will end no later than thirty days after any of the following occurs:

(1) A contract expires, is terminated or is not renewed;

(2) A facility license is revoked; or

(3) A facility is decertified as a Title XIX facility.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-945, filed 8/3/82.]

WAC 275-38-950 Disputes. (1) If a contractor wishes to contest the way a rule, contract provision, or policy statement relating to the prospective cost-related reimbursement system was applied to the contractor by the department, (e.g., in setting a reimbursement rate or determining a disallowance at audit), the contractor shall first pursue the administrative review process set out in WAC 275-38-960.

(2) The administrative review process in WAC 275-38-960 need not be exhausted if a contractor wishes to challenge the legal validity of a statute, rule, contract provision or policy statement.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-950, filed 8/3/82.]

WAC 275-38-955 Recoupment of undisputed overpayments. The department is authorized to withhold from the IMR current payment all amounts found by proposed or final settlement to be overpayments not identified by the IMR and challenged as overpayments as part of a good-faith administrative or judicial review.

(1986 Ed.)

Contested amounts retained by the IMR pursuant to this section may be subject to recoupment by the department from the IMR current payment upon completion of judicial and administrative review procedures to the extent the department's position or claims are upheld.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-955, filed 8/3/82.]

WAC 275-38-960 Administrative review process.

(1) Within thirty days after a contractor is notified of an action or determination the contractor wishes to challenge, the contractor shall request in writing the director of the division of developmental disabilities or his or her designee review such determination. The request shall be signed by the contractor or the licensed administrator of the facility, shall identify the challenged determination and the date thereof, and shall state as specifically as practicable the grounds for the contractor's or licensed administrator's contention the determination was erroneous. Copies of any documentation the contractor intends to rely on to support the contractor's position shall be included with the request.

(2) After receiving a request meeting the criteria in subsection (1) of this section, the director of the division of developmental disabilities will contact the contractor to schedule a conference for the earliest mutually convenient time. The conference shall be scheduled for no later than thirty days after a properly completed request is received unless both parties agree in writing to a specific later date.

(3) The contractor and appropriate representatives of the department shall attend the conference. In addition, representatives selected by the contractor may attend and participate. The contractor shall bring to the conference, or provide to the department in advance of the conference, any documentation the contractor intends to rely on to support the contractor's contentions. The parties shall clarify and attempt to resolve the issues at the conference. If additional documentation is needed to resolve the issues, a second session of the conference shall be scheduled for not later than thirty days after the initial session unless both parties agree in writing to a specific later date.

(4) Unless informal agreement has been reached at the conference, a written decision by the director of the division of developmental disabilities will be furnished to the contractor within sixty days after the conclusion of the conference.

(5) If the contractor desires review of an adverse decision of the director of the division of developmental disabilities, the contractor shall within thirty days following receipt of such decision request a fair hearing in writing in accordance with the Administrative Procedure Act, chapter 34.04 RCW.

[Statutory Authority: RCW 74.09.120. 82-16-080 (Order 1853), § 275-38-960, filed 8/3/82.]

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Chapter 275-48 WAC

PAYMENTS TO PERSONS RELEASED FROM
CORRECTIONAL INSTITUTIONS

WAC

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275-48-045	Reinstatement--Reapplication.
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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 earnings 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 re-applied 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 releasee 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 275-54 WAC

JUVENILE INVOLUNTARY TREATMENT

WAC

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- 275-54-290 Patient rights.
- 275-54-300 Confidentiality.
- 275-54-310 Confidentiality of court proceeding records.

WAC 275-54-010 Purpose. Adopted pursuant to and in accordance with chapter 354, Laws of 1985. These regulations are adopted to provide operational procedures to ensure minors in need of mental health care receive appropriate care and treatment, and to enable treatment decisions to be made in response to clinical needs and in accordance with sound professional judgment while also recognizing parents' rights to participate in treatment decisions for their minor children, and to protect minors against needless hospitalization and deprivations of liberty.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-010, filed 12/23/85.]

WAC 275-54-020 Definitions. (1) "Child psychiatrist" means a person having a license as a physician and surgeon in this state, having had graduate training in child psychiatry in a program approved by the American Medical Association or the American Osteopathic Association, and who is board eligible or board certified in child psychiatry.

(2) "Children's mental health specialist" means a mental health professional who has completed a minimum of one hundred actual hours, not quarter or semester hours, of specialized training devoted to the study of child development and the treatment of children and who has the equivalent of one year of full-time experience in the treatment of children under the supervision of a children's mental health specialist.

(3) "Commitment" means a determination by a judge or court commissioner, made after a commitment hearing, that the minor is in need of inpatient diagnosis, evaluation, or treatment or the minor is in need of less restrictive alternative treatment.

(4) "County-designated mental health professional" means a mental health professional designated by one or more counties to perform the functions of a county-designated mental health professional described in this chapter.

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

(6) "Evaluation and treatment facility" means a public or private facility or unit certified by the department to provide emergency, inpatient, residential, or outpatient mental health evaluation and treatment services for minors. A physically separate and separately operated portion of a state hospital may be designated as an evaluation and treatment facility for minors. A facility which is part of or operated by the department or federal agency does not require certification. No correctional institution or facility, juvenile court detention facility, or jail may be an evaluation and treatment facility within the meaning of this chapter.

(7) "Evaluation and treatment program" means the total system of services and facilities coordinated and approved by a county or combination of counties for the evaluation and treatment of minors under this chapter.

(8) "Gravely disabled minor" means a minor who, as a result of a mental disorder, is in danger of serious physical harm resulting from a failure to provide for his or her essential human needs of health or safety, or manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognitive or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety.

(9) "Inpatient treatment" means twenty-four-hour-per-day mental health care provided within a general hospital, psychiatric hospital, or residential treatment facility certified by the department as an evaluation and treatment facility for minors.

(10) "Involuntary patient" means a person presenting, as a result of a mental disorder, a likelihood of serious harm or is gravely disabled, and is initially detained and/or court-committed for evaluation and treatment.

(11) "Less restrictive alternative" or "less restrictive setting" means outpatient treatment provided to a minor not residing in a facility providing inpatient treatment as defined in this chapter.

(12) "Likelihood of serious harm" means either:

(a) A substantial risk physical harm will be inflicted by an individual upon his or her own person, as evidenced by threats or attempts to commit suicide or inflict physical harm on oneself;

(b) A substantial risk physical harm will be inflicted by an individual upon another, as evidenced by behavior having caused such harm or placing another person or persons in reasonable fear of sustaining such harm; or

(c) A substantial risk physical harm will be inflicted by an individual upon the property of others, as evidenced by behavior having caused substantial loss or damage to the property of others.

(13) "Mental disorder" means any organic, mental, or emotional impairment having substantial adverse effects on an individual's cognitive or volitional functions. The

presence of alcohol abuse, drug abuse, juvenile criminal history, antisocial behavior, or mental retardation alone is insufficient to justify a finding of "mental disorder" within the meaning of this section.

(14) "Mental health professional" means a person regularly involved in mental health evaluation and treatment, and qualifying as one of the following:

(a) A psychiatrist, psychologist, psychiatric nurse, or social worker.

(b) A person with a masters degree or further advanced degree in counseling or one of the social sciences from an accredited college or university. Such person shall have, in addition, at least two years of experience in direct treatment of mentally ill or emotionally disturbed persons, such experience gained under the supervision of a mental health professional.

(c) A licensed physician permitted to practice medicine or osteopathy in the state of Washington.

(d) A person otherwise qualified to perform the duties of a mental health professional but does not meet the requirements listed in subsection (14)(a), (b), or (c) of this section, where an exception to such requirements has been granted by the director upon submission of a written request by the county involved, such request to document the following:

(i) The extent to which the county has made an effort to provide and has the capability of providing a mental health professional;

(ii) The amount and type of employment experience the applicant possesses. Such an applicant shall have had at least three years' experience in the direct treatment of mentally ill or emotionally disturbed persons, such experience gained under the supervision of a mental health professional, as defined under subsection (14)(a), (b), or (c) of this section;

(iii) The overall needs of the mental health program in the particular county involved; and

(iv) Such factors as shall be brought to the attention of the director by the county involved.

(15) "Minor" means any person under the age of eighteen years.

(16) "Outpatient treatment" means any of the non-residential services mandated under chapter 71.24 RCW and provided by licensed services providers as identified by RCW 71.24.025(3).

(17) "Parent" means:

(a) A biological or adoptive parent having legal custody of the child, including either parent if custody is shared under a joint custody agreement; or

(b) A person or agency judicially appointed as legal guardian or custodian of the child.

(18) "Professional person in charge" means a physician or other mental health professional empowered by an evaluation and treatment facility with authority to make admission and discharge decisions on behalf of that facility.

(19) "Psychiatric nurse" means a registered nurse having a bachelor's degree from an accredited college or university, and having had, in addition, at least two years' experience in the direct treatment of mentally ill or emotionally disturbed persons, such experience gained

under the supervision of a mental health professional. "Psychiatric nurse" shall also mean any other registered nurse having three years of such experience.

(20) "Psychiatrist" means a person having a license as a physician in this state having completed residency training in psychiatry in a program approved by the American Medical Association or the American Osteopathic Association, and is board eligible or board certified in psychiatry.

(21) "Psychologist" means a person licensed as a psychologist under chapter 18.83 RCW.

(22) "Responsible other" means the minor, the minor's parent or estate, or any other person legally responsible for support of the minor.

(23) "Secretary" means the secretary of the department or secretary's designee.

(24) "Social worker" means a person with a masters or further advanced degree from an accredited school of social work or a degree from a graduate school deemed equivalent under rules and regulations adopted by the secretary.

(25) "Start of initial detention" means the time of arrival of the minor at the first evaluation and treatment facility offering inpatient treatment if the minor is being involuntarily detained at the time. With regard to voluntary patients, "start of initial detention" means the time at which the minor gives notice of intent to leave under the provisions of this chapter.

(26) "State-funded facility" means those long-term inpatient hospital or residential facilities receiving state funds to pay part or all of the cost of care for juveniles under one hundred eighty-day commitment and placed in these facilities by the placement committee.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-020, filed 12/23/85.]

WAC 275-54-030 Application for admission--Voluntary minor. (1) Outpatient - Any minor thirteen years or older may request and receive outpatient treatment without the consent of the minor's parents. Parental authorization is required for outpatient treatment of a minor under the age of thirteen.

(2) Inpatient - When in the judgment of the professional person in charge of an evaluation and treatment facility it is not feasible to treat a minor in a less restrictive setting and the minor is in need of inpatient treatment because of a mental disorder, and the facility provides the type of evaluation and treatment services needed by the minor, the minor may be voluntarily admitted to an evaluation and treatment facility in accordance with the following requirements:

(a) A minor under thirteen years of age may only be admitted on the application of the minor's parents.

(b) A minor thirteen years or older may be voluntarily admitted by application of the parent. Such application must be accompanied by the written consent, knowingly and voluntarily given, of the minor.

(c) A minor thirteen years or older may, with concurrence of the professional person in charge of the evaluation and treatment facility, admit himself or herself

without parental consent to the evaluation and treatment facility. Notice must be given by the facility to the minor's parents in accordance with the following requirements:

(i) Notice shall be in the form most likely to reach the parent within twenty-four hours of the minor's voluntary admission for inpatient treatment.

(ii) The notice must contain the location and telephone number of the facility providing such treatment and the name of the professional person on the staff of the facility providing that treatment who is designated to discuss the minor's need for inpatient treatment with the parent.

(iii) The minor shall be released to the parent, at the parent's request, unless the facility files a petition with the court requesting authorization to provide voluntary treatment to the minor, and setting forth the basis for the facility's belief that the minor is in need of inpatient treatment and that release would constitute a threat to the minor's health or safety.

(iv) The petition shall be signed by the professional person in charge and shall contain the following:

(A) The name and address of the petitioner.

(B) The name of the minor whose release is alleged to constitute a threat to the minor's health or safety.

(C) The name, telephone number, and address if known of every person believed by the petitioner to be legally responsible for the minor.

(D) A statement and the supporting facts for this statement that the petitioner has examined the minor and finds the minor in need of inpatient treatment and that release would constitute a threat to the minor's health or safety.

(E) A statement that the minor has been advised of the need for inpatient treatment and knowingly and voluntarily consented to such treatment.

(F) A statement concerning whether a less-restrictive alternative is available or is in the best interest of the minor.

(v) A copy of the petition shall be personally delivered to the minor and a copy shall be sent to the minor's attorney and the minor's parents.

(vi) The hearing shall be heard within three judicial days from the filing of the petition, and shall be conducted by a judge, court commissioner, or licensed attorney designated by the superior court as a hearing officer for such hearing. The hearing may be held at the treatment facility. The petition shall be presented by the prosecuting attorney.

(vii) The facility must demonstrate at the hearing by a preponderance of the evidence presented that the minor is in need of inpatient treatment and that release would constitute a threat to the minor's health or safety, and that the minor has knowingly and voluntarily consented to treatment.

(viii) The hearing shall not be conducted using rules of evidence. The admission or exclusion of evidence sought to be presented shall be within the exercise of sound discretion by the judicial officer conducting the hearing.

(ix) The parent and child may apply to the court for separate counsel to represent the parent if the parent cannot afford counsel.

(x) If by the preponderance of evidence the minor is found to be in need of inpatient treatment and that release would constitute a threat to the minor's health or safety, and that the minor's parent refuses to give parental consent for such treatment, and that the minor has knowingly and voluntarily consented to treatment, the petition shall be approved. The parent, then, will not have the right to demand immediate release until the next renewal of voluntary admission.

(d) The minor's need for continued inpatient treatment shall be reviewed and documented at least each one hundred eighty days.

(e) Written renewal of voluntary consent must be obtained from the applicant and the minor thirteen years or older no less than once every twelve months.

(f) A notice by a voluntary minor of intent to leave shall result in the following:

(i) Any minor under the age of thirteen must be discharged immediately upon written request of the parent.

(ii) Any minor thirteen years or older may give notice of intent to leave at any time. The notice need not follow any specific form so long as it is written and the intent of the minor can be discerned.

(iii) The staff member receiving notice shall date it immediately, record its existence in the minor's clinical record, and send copies of it to the minor's attorney, if any, the county-designated mental health professional, and the parent.

(iv) In the case of a minor thirteen years or older, the professional person in charge of the evaluation and treatment facility shall discharge that minor from the facility within twenty-four hours upon receipt of the minor's notice of intent to leave, unless the county-designated mental health professional serves on the minor a copy of a petition for initial detention, a notice of initial detention, and a statement of rights. The county-designated mental health professional shall file the original petition for initial detention with the court on the next judicial day following the minor's notice of intent to leave.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-030, filed 12/23/85.]

WAC 275-54-040 Emergency detention. (1) When a minor, thirteen years of age or older, is brought to an evaluation and treatment facility or emergency room for immediate mental health services, the professional person in charge of the facility shall:

(a) Evaluate the minor's mental condition to determine whether the minor suffers from a mental disorder and is in immediate need of inpatient treatment.

(b) Determine if the minor is willing to consent to voluntary admission.

(2) If the minor is unwilling to consent to voluntary admission and the professional person in charge believes the minor meets the criteria for initial detention, the facility may detain or arrange for the detention of the minor for up to twelve hours in order to enable the county-

designated mental health professional to evaluate the minor and commence initial detention proceedings.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-040, filed 12/23/85.]

WAC 275-54-050 Investigation and involuntary detention. (1) When a county-designated mental health professional receives information that a minor thirteen years or older, as a result of mental disorder, presents a likelihood of serious harm or is gravely disabled, and has investigated the specific facts and the credibility of the person or persons providing the information, and has determined voluntary admission for inpatient treatment is not possible, the county-designated mental health professional may take or cause the minor to be taken into custody and transported to an evaluation and treatment facility providing inpatient treatment.

(2) Within twelve hours of the minor's arrival at that facility, the minor shall be served with a copy of the petition for initial detention, notice of initial detention, and a statement of rights.

(3) On the next judicial day following the initial detention, the county-designated mental health professional shall file with the court the original petition for initial detention, the notice of initial detention, and the statement of rights along with an affidavit of service, and shall commence service of the petition for initial detention on the minor's parents and minor's attorney.

(4) At the time of initial detention, the county-designated mental health professional shall advise the minor both orally and in writing that a commitment hearing shall be held within seventy-two hours of the minor's provisional acceptance to the facility. Within twelve hours of the admission, the facility shall advise the minor of his or her rights, including the fact the minor has the right to communicate immediately with an attorney and the minor has a right to have an attorney appointed to represent him or her before and at the hearing if the minor is indigent.

(5) The evaluation and treatment facility must immediately accept on a provisional basis the petition and the minor and within twenty-four hours must conduct an initial evaluation of the minor's condition and either admit or release the minor. If the minor is not approved for admission, the facility shall make such recommendations and referrals for further care and treatment of the minor as necessary.

(6) If the minor is approved for inpatient admission, the minor shall be examined and evaluated by a children's mental health specialist or other mental health professional, identified in WAC 275-54-170 (2)(e), within twenty-four hours of admission to determine the child's mental condition and by a physician to determine the child's physical condition. Reasonable measures shall be taken to ensure medical treatment is provided for any condition requiring immediate medical attention.

(7) The admitting facility shall take reasonable steps to notify immediately the minor's parents of the admission. The minor has the right to associate or receive

communications from parents or others unless the professional person in charge determines such communication would be seriously detrimental to the minor's condition or treatment and so indicates in the minor's clinical records and notifies the minor's parents of this determination. In no event may the minor be denied the opportunity to consult an attorney.

(8) The minor's property shall be protected in accordance with the following:

(a) Articles brought to the facility shall be inventoried and articles not kept by the patient shall be housed by the facility giving due regard to reasonable precautions necessary to safeguard such property.

(b) The peace officer or mental health professional escorting the patient to the facility shall take reasonable precautions to safeguard the property of the patient in the immediate vicinity of the point of apprehension.

(c) Reasonable precautions shall be taken to safeguard belongings not in the immediate vicinity of the patient by the escorting officer or mental health professional, and/or facility when notice of possible danger thereto is received. Further, reasonable precautions shall be taken to lock and otherwise secure the domicile of the patient as soon as possible after the patient's initial detention.

(9) The facility may detain the minor for evaluation and treatment for a period not to exceed seventy-two hours from the time of provisional acceptance. The seventy-two-hour period shall exclude Saturdays, Sundays, or holidays. At the expiration of this time period the minor must be released unless a fourteen-day petition has been filed or the minor's good-faith application for voluntary treatment is accepted.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-050, filed 12/23/85.]

WAC 275-54-060 Fourteen-day commitment petition. (1) The professional person in charge of an evaluation and treatment facility may petition to have a minor committed for fourteen days of diagnosis, evaluation, and treatment. The petition must be filed within the seventy-two-hour initial detention period with the superior court in the county where the minor is residing or being detained.

(2) This petition shall be signed either by two physicians or by one physician and a mental health professional examining the minor, and it shall contain the following:

(a) The name and address of the petitioner.

(b) The name of the minor alleged to meet the criteria for fourteen-day commitment.

(c) The name, telephone number, and address if known of every person believed by the petitioner to be legally responsible for the minor.

(d) A statement and the supporting facts for this statement that the petitioner has examined the minor and finds the minor's condition meeting required criteria for fourteen-day commitment.

(e) A statement the minor has been advised of the need for but has been unwilling or unable to consent to voluntary treatment.

(f) A statement recommending the appropriate facility or facilities for this commitment.

(g) A statement concerning whether a less-restrictive alternative is available or is in the best interest of the minor.

(3) A copy of the petition shall be personally delivered to the minor and a copy shall be sent to the minor's attorney and the minor's parents.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-060, filed 12/23/85.]

WAC 275-54-070 Fourteen-day commitment--Hearing. (1) A fourteen-day commitment hearing shall be held within seventy-two hours from the minor's provisional acceptance. Seventy-two hours does not include Saturdays, Sundays, or legal holidays. The hearing shall be conducted at the superior court, or an appropriate place at the facility, in the county where the minor is being detained.

(a) At such hearing the court must find by preponderance of the evidence the minor has a mental disorder, presents a likelihood of serious harm or is gravely disabled, is in need of inpatient treatment of the type provided by the recommended facility, or is in need of less-restrictive alternative treatment found to be in the best interests of the minor, and the minor is unwilling or unable in good faith to consent to voluntary treatment.

(b) Rules of evidence shall not apply in fourteen-day commitment hearings.

(c) The judicial officer may exercise discretion regarding the admission or exclusion of evidence.

(d) This hearing shall be held within seventy-two hours unless a continuance is requested by the minor or the minor's attorney. The court may, for good cause, transfer the proceeding to the county of the minor's residence, or to the county in which the alleged conduct evidencing need for commitment occurred. If the county of detention is changed, subsequent petitions may be filed in the county in which the minor is detained without the necessity of a change of venue.

(e) Evidence in support of the petition shall be presented by the county prosecutor.

(f) The minor shall be present at the hearing unless the minor, with the assistance of the minor's attorney, waives the right to be present.

(g) If the parents are opposed to the petition, they may be represented at the hearing and shall be entitled to a court-appointed counsel if they are indigent.

(2) At the commitment hearing, the minor shall have the following rights:

(a) To be represented by an attorney.

(b) Present evidence on his or her behalf.

(c) To question persons testifying in support of the petition.

(d) If the minor has received medication within twenty-four hours of the hearing, the court shall be informed of that fact and the probable effects of the medication.

(3) If the court finds a less-restrictive alternative is in the best interests of the minor, the court shall order less-

restrictive alternative treatment upon conditions as necessary.

(4) If the court determines the minor does not meet the criteria for a fourteen-day commitment, the minor shall be released.

(5) A minor having been committed for fourteen days shall be released at the end of that period unless a petition for a one hundred eighty-day commitment is pending before the court.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-070, filed 12/23/85.]

WAC 275-54-080 One hundred eighty-day petition, hearing, and commitment. (1) At any time during the minor's fourteen-day commitment, the professional person in charge may petition the court for an additional one hundred eighty-day period of treatment. If this professional person is in charge of a facility other than a state-operated facility, then the evidence in support of the petition shall be presented by the county prosecutor. If the professional person in charge is employed by the state-operated facility, the evidence shall be presented by the attorney general.

(2) The petition for one hundred eighty-day commitment shall contain the following:

(a) The name and address of the petitioner or petitioners.

(b) The name of the minor alleged to meet the criteria for one hundred eighty-day commitment.

(c) A statement the petitioner is the professional person in charge of the facility responsible for the treatment of the minor.

(d) The date of the fourteen-day commitment order.

(e) A summary of the facts supporting the petition.

(f) Affidavits which describe in detail the behavior of the detained minor which supports the petition and shall state whether a less-restrictive alternative to inpatient treatment is in the best interest of the minor shall be signed by two examining physicians, one of whom shall be a child psychiatrist, or by one examining physician and one children's mental health specialist.

(3) The petition shall be filed with the clerk of the court at least three days before the expiration of the fourteen-day commitment period.

(4) The hearing shall be conducted at the superior court, or an appropriate place at the facility in the county where the minor is being detained. The court may, for good cause, transfer the proceeding to the county of the minor's residence or to the county where the alleged conduct evidencing need for commitment occurred. If the county of detention is changed, subsequent petition may be filed in the county where the minor is detained without the necessity of a change of venue.

(5) The petitioner shall serve a copy of the petition on the minor and notify the minor's attorney and the minor's parent within twenty-four hours of filing. A copy of the petition shall be provided to the minor's attorney and the minor's parent at least twenty-four hours prior to the hearing.

(6) At the time of the filing, the court shall set a hearing date which is to be within seven days of filing of the petition.

(7) The court may continue the hearing for not more than ten days upon the written request of the minor or the minor's attorney. The minor or the parents shall be afforded the same rights as in a fourteen-day commitment hearing. Treatment of the minor shall continue pending the proceeding.

(8) The court must find by clear, cogent, and convincing evidence the minor is suffering from a mental disorder and presents a likelihood of serious harm or is gravely disabled and is in need of further treatment that only can be provided in a one hundred eighty-day commitment.

(9) If the court finds the minor meets the criteria for continued commitment, and a less-restrictive alternative is not appropriate or available, the court may order the minor committed for further inpatient treatment to:

(a) A private evaluation and treatment facility if the minor's parents have assumed responsibility for payment of such treatment;

(b) The custody of the secretary if placement in a state-funded program is required.

(10) If the court finds a less-restrictive alternative is in the best interest of the minor, the court shall order less-restrictive alternative treatment upon conditions as necessary.

(11) If the minor does not meet the criteria for continued commitment, the minor shall be released.

(12) Successive one hundred eighty-day commitments are permissible on the same grounds under the same procedures as the original one hundred eighty-day commitment. Such petitions shall be filed at least five days prior to the expiration of the previous one hundred eighty-day commitment order.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-080, filed 12/23/85.]

WAC 275-54-090 Detention and commitment after eighteenth birthday. No minor may be detained or committed under chapter 354, Laws of 1985 after his or her eighteenth birthday unless commitment procedures under chapter 71.05 RCW have been initiated: *Provided*, That a minor may be detained after his or her eighteenth birthday for the purpose of completing the fourteen-day diagnosis, evaluation, and treatment.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-090, filed 12/23/85.]

WAC 275-54-100 Transfer from juvenile correctional institutions. (1) Any person committed to or confined in any juvenile correctional institution and determined to be in need of observation, diagnosis, or treatment in an inpatient evaluation and treatment facility may be transferred or moved to such facility by the secretary or the secretary's designee upon written authorization for a period of up to fourteen days, *Provided*, That:

(a) The secretary notifies the original committing court of the transfer.

(b) The inpatient evaluation and treatment facility is in agreement with the transfer.

(2) No minor transferred under the provisions of this section may be detained in an inpatient evaluation and treatment facility for more than fourteen days unless the minor is admitted as a voluntary patient or is committed for one hundred eighty-day treatment in accordance with provisions of WAC 275-54-030 and 275-54-080, or ninety-day treatment under chapter 71.05 RCW if eighteen years of age or older.

(3) Underlying jurisdiction of minors transferred, admitted, or committed under this section remains with the state correctional institutions.

(4) If a voluntarily admitted minor or minor committed under this section is no longer in need of the treatment provided by the facility or no longer meets the criteria for one hundred eighty-day commitment, the minor shall be returned to the state correctional institution to serve the remaining time of the underlying dispositional order or sentence.

(5) Time spent by the minor at the evaluation and treatment facility shall be credited toward the minor's juvenile court sentence.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-100, filed 12/23/85.]

WAC 275-54-110 Conditional release or early discharge. (1) The professional person in charge of the inpatient facility may authorize the minor's release under such conditions as appropriate. Conditional release may be revoked pursuant to WAC 275-54-150 if release conditions are not met or the minor's functioning substantially deteriorates.

(2) Minors may be discharged prior to the expiration of the commitment period if the treating physician or the professional person in charge concludes the minor no longer meets commitment criteria.

(3) Whenever the minor is conditionally released or discharged prior to the expiration of the commitment, the professional person in charge shall within three days of the conditional release or discharge notify the court and the placement committee, in the case of one hundred eighty-day commitment, in writing of the release.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-110, filed 12/23/85.]

WAC 275-54-120 Release of voluntary/involuntary minors to the custody of parents. (1) The facility shall release the minor to the custody of the minor's parent or other responsible person authorized by the parent to take custody of the minor. If the parent refuses to accept custody of the released minor, or to designate and authorize another responsible person to take custody of the minor on their behalf, the minor shall be referred and released to the appropriate juvenile authority for necessary dependency action. The facility shall furnish transportation for the minor to the minor's residence or other appropriate place.

(2) If the minor is released to someone other than the minor's parent, the facility shall make every effort to

notify the minor's parents of the release as soon as possible.

(3) No indigent minor may be released to a less-restrictive alternative or discharged from inpatient treatment without suitable clothing. As funds are available from the department, these may be used to provide necessary funds for the immediate welfare of the indigent minor upon discharge. The superintendent of the state hospital in the releasing facility's catchment area should be contacted for prior approval of such funds for these needs.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-120, filed 12/23/85.]

WAC 275-54-130 Elopement of minors. In the event of a minor's elopement from an evaluation and treatment facility, the professional person in charge shall immediately notify parents and appropriate law enforcement agencies.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-130, filed 12/23/85.]

WAC 275-54-140 Long-term placement--Designated placement committee. (1) The secretary's placement authority shall be exercised through a designated placement committee composed of children's mental health specialists and established in accordance with chapter 354, Laws of 1985.

(2) The secretary shall appoint membership of the placement committee, at least one of whom shall be a child psychiatrist representing one of the state-funded, long-term evaluation and treatment facilities for minors.

(3) The committee's responsibilities shall include:

(a) The committee shall accept immediately, authorize, and effect placement of any minor committed to the secretary for one hundred eighty-day inpatient treatment in the most appropriate state-funded, long-term evaluation and treatment facility. Placement criteria shall include:

(i) The treatment needs of the minor;

(ii) The most appropriate facility able to respond to the minor's treatment needs;

(iii) The geographic proximity of the facility to the minor's family and home community;

(iv) The immediate availability of bed space;

(v) The probable impact of the minor's placement on other residents.

(b) The committee shall approve or deny requests from the state-funded facilities for transfer of a minor between facilities.

(c) Develop, maintain, and update policies and procedures to carry out the provisions of this section. Such policies and procedures shall be reviewed and approved by the mental health division.

(d) Receive and monitor reports and make such appropriate recommendations to the mental health division as may be necessary concerning needed individual patient or program corrective action. Such reports shall include:

(i) Individual patient status reports, at a minimum providing information concerning the minor's individual

treatment plan and progress, recommendations for future treatment, anticipated discharge date, and possible less-restrictive treatment.

(ii) Incident reports covering such events as will be required by the placement committee's policies and procedures.

(iii) Individual patient discharge summaries.

(iv) Program utilization information as identified in the placement committee's policies and procedures.

(4) The responsibilities of the professional person in charge of the long-term state-funded inpatient evaluation and treatment facilities shall include:

(a) Establish policies, procedures, and practices assuring compliance with the provisions of this WAC.

(b) Provide the array and quality of evaluation and treatment services needed to respond to the needs of the minor in accordance with the provisions of WAC 275-54-200.

(c) Notify the court, the placement committee, and all responsible others of any major change in the minor's status and make such notification within three days of the date of any change in legal status, conditional release, or discharge.

(d) Provide the placement committee within ninety days of admission and at least one hundred eighty days thereafter with a report setting forth such facts as the committee requires, including the minor's individual treatment plan and progress, recommendations for future treatment, recommendations regarding less-restrictive treatment, and anticipated discharge date.

(e) Provide the placement committee with incident reports, discharges, program utilization information, and such other reports and information as may be specified in the placement committee policies and procedures.

(5) The placement committee shall provide the facility at the time of the minor's placement with formal written notification of placement. Such notification shall include authorization of the professional person in charge of the facility to carry out the secretary's responsibility for the care and custody of the minor and authorization to request the assistance of law enforcement agencies to return the minor in case of elopement.

(6) Any minor committed to the secretary shall remain at the treatment facility where the minor was held at the time of the commitment hearing, in accordance with the provisions of applicable mental health division issuance. The department's placement committee will be notified within twenty-four hours of the commitment to the secretary by the facility holding the minor.

(7) The committee will advise the treating facility as to the committee's requirements for information about the minor that will allow the committee to make a decision concerning placement of that minor.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-140, filed 12/23/85.]

WAC 275-54-150 Revocation of a less-restrictive alternative treatment or conditional release. (1) If a minor is failing to adhere to the conditions of the court-

ordered less-restrictive alternative treatment or the stipulations of a conditional release or if substantial deterioration of a minor's functioning has occurred, the county-designated mental health professional or the secretary may order the minor be taken into custody and transported to an inpatient evaluation and treatment facility.

(2) An order of apprehension and detention shall be filed by the county-designated mental health professional or the secretary, and it shall be served upon the minor who shall, at the time of the service, be informed of the right to a hearing and to representation by an attorney. The minor's parent and attorney shall be notified of the detention within two days of return.

(3) The county-designated mental health professional or secretary may modify or rescind the order of apprehension and detention at any time prior to the hearing.

(4) A petition for revocation of a less-restrictive alternative treatment shall be filed by the county-designated mental health professional or the secretary with the same court that ordered such placement. A petition for revocation of a conditional release may be filed in either the county originally ordering inpatient treatment or in the county where the minor is presently residing.

(5) In either case, as identified in subsection (4) of this section, upon motion for good cause, the hearing may be transferred to the county where the minor resides or where the alleged violations occurred. The minor may waive the hearing and be returned to inpatient treatment or to less-restrictive alternative placement or conditional release on the same or modified grounds.

(6) The petition for revocation of less-restrictive alternative treatment or conditional release shall describe the behavior of the minor indicating violation of the conditions or deterioration of routine functioning and dispositional recommendations.

(7) The hearing shall be held within seven days of the minor's return and shall determine the following:

(a) Whether the minor adhered to the conditions of the less-restrictive placement or conditional release.

(b) Whether the minor's routine functioning has substantially deteriorated.

(c) Whether the conditions of less-restrictive placement or conditional release should be modified or if the minor should be returned to inpatient treatment.

(8) If the court decides the minor is to be returned to inpatient treatment, the secretary's placement responsibility as set forth in WAC 275-54-140 shall apply.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-150, filed 12/23/85.]

WAC 275-54-160 Requirements for certifying evaluation and treatment components for minors. (1) Each county or combination of counties shall develop and coordinate an evaluation and treatment program consistent with chapter 354, Laws of 1985 and chapter 71.24 RCW. Such program shall include, but is not limited to components of outpatient services, emergency services, and short-term inpatient services. The county may directly provide such a program in its entirety, or may provide one or more components of such a program directly, or may through contract or written agreement

with an agency or agencies, provide the remaining component or components required, or may through contract or agreement arrange with an agency or agencies to provide such a program in its entirety. Component or components obtained on this basis from an agency or agencies shall be subject to all applicable provisions of these rules and of chapter 354, Laws of 1985. The county will maintain coordination responsibility over the program.

Any contract or agreement between county and agencies, or between two or more agencies, shall be required to comply with the standards for evaluation and treatment components and shall indicate the department will consider those standards in the department's site visit and certification procedure as directed by WAC 275-54-210.

(2) In addition to the responsibilities specified, the following shall be required of the county or of such individual designated by the county as administrator of the evaluation and treatment program:

(a) To identify, recommend to the department for certification, and coordinate the various facilities and components of the evaluation and treatment program.

(b) To assist the department in ensuring facilities and components are in compliance with all applicable rules and regulations set forth in chapter 354, Laws of 1985 and this chapter.

(3) Any agency desiring certification of a component or components in order to become an evaluation and treatment facility shall make application for such to the county-designated administrator of the evaluation and treatment program.

(4) The department is responsible for certifying each component of an agency desiring to become an evaluation and treatment facility. Upon formal request of the county-designated administrator of the evaluation and treatment program, the department shall:

(a) Inspect and evaluate the applicant agency's component or components for certification in accordance with the provisions of WAC 275-54-210.

(b) On-site visits for the purposes of certification will, where possible, include the county-designated administrator of the evaluation and treatment program as part of the site visit team.

(5) The department is responsible for making periodic inspections of a certified component. Such inspections may be in addition to any conducted by the county-designated administrator of the evaluation and treatment program.

(6) All facilities shall be recognized elements of the county's mental health plan. The plan shall list the agencies for which certification is requested, the components to be provided by each, the method whereby components will be coordinated among the several agencies when more than one agency provides evaluation and treatment services, and the method whereby the services of the facility will be coordinated with other elements of the county mental health program.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-160, filed 12/23/85.]

WAC 275-54-170 Certification standards for evaluation and treatment program for minors. (1) The following general requirements shall apply to any agency desiring certification as a component or components of the evaluation and treatment program:

(a) The spectrum of evaluation and treatment services provided by the agency shall include at least one of the following:

- (i) Outpatient.
- (ii) Emergency.
- (iii) Inpatient.

(b) The agency may directly provide one or more of the components specified in subsection (1)(a) of this section, or may indirectly provide one or more through contractual arrangement or agreements with other agencies. Such arrangements shall be set forth in WAC 275-54-160.

(c) The agency shall maintain a written statement describing the organizational structure, objectives, and the philosophy of the therapeutic program, such statement to include contractual affiliates (if any).

(d) The agency shall document and otherwise ensure that:

(i) Care for patients is provided in a therapeutic environment.

(ii) Patient rights as described in WAC 275-54-290 is incorporated into this environment.

(iii) The use of the least restrictive treatment alternative is considered for each patient and such consideration is documented in each patient's clinical record.

(iv) Continuity of care, coordination, and integration of services is provided.

(v) Immediate transfer from the outpatient component to the inpatient or emergency component of the agency or of the evaluation and treatment program is provided for a patient when a change in the patient's condition necessitates such transfer. In the case of the involuntary patient, such transfer shall be made pursuant to WAC 275-54-150. Patients within any component can and will be transferred without unreasonable delay to any other component, and the patient's necessary clinical information will be made available to persons responsible for the patient's treatment within any other component. In the event of a referral, the original agency will maintain responsibility for follow-up of the patient until such time as the receiving agency may assume primary service responsibility.

(vi) Referral services and assistance in obtaining supportive services appropriate to treatment including, but not limited to, community support services, vocational rehabilitation, and legal services, are provided to each patient.

(e) The agency desiring certification of the agency's component or components shall make application for such certification pursuant to WAC 275-54-160.

(2) In addition to the requirements specified for each in WAC 275-54-180, 275-54-190, and 275-54-200, the following general requirements shall apply to all facilities:

(a) Admissions. Admission to the inpatient component shall not be denied except under the following circumstances:

(i) There is a determination the person does not present a likelihood of serious harm, or an imminent likelihood of serious harm, or the person is not gravely disabled, and does not require inpatient care.

(ii) The person requires specialized medical care and support services of a type not provided by the facility.

(iii) A greater degree of control is required than can be provided by the facility.

(iv) No treatment space is available and is so documented.

(v) A less restrictive alternative provided by another facility is more appropriate and available.

(vi) For situations arising pursuant to subsection (2)(a)(ii) through (iv) of this section in the case of a seventy-two-hour detention, the county-designated mental health professional shall make arrangements for the most appropriate placement available.

(b) In general, adults and minors shall be provided services separate from one another, wherever possible. Joint use by adults and minors of a facility's inpatient services is permitted only if the minor's clinical record contains documentation that:

(i) The anticipated effects of such joint use on the minor have been considered by the professional staff, and

(ii) A professional judgment has been made that such joint use will not be deleterious to the minor. No minor shall be placed on an adult inpatient unit unless no other alternative is available, or an emergency exists, and documentation has been made pursuant to subsection (2) of this section.

(c) Admission evaluations. Within twenty-four hours of initial detention, to include Saturday, Sunday, and holidays, evaluations shall be conducted to determine the nature of the disorder, the treatment necessary, and whether or not detention is required. Such evaluations shall include at least a:

(i) Medical evaluation by a licensed physician.

(ii) Psychosocial evaluation by a mental health professional to include at least an assessment of family dynamics, interaction with other persons, educational, developmental, legal, and other social service needs of the minor.

(d) Treatment plan and clinical record. All components shall:

(i) Maintain, for each patient, a plan of treatment, and a plan for discharge including a plan for follow-up where appropriate. The treatment plan shall address the needs identified in the admission evaluation of the minor. Such treatment and discharge plans shall be entered in the patient's clinical record and shall be revised periodically as appropriate.

(ii) Maintain, for each patient, a clinical record containing sufficient information to justify the diagnosis, delineate the individual treatment plan, and document the course of treatment. The responsibility of the agency is to safeguard the record against loss, defacement, tampering, or use by unauthorized persons.

(e) Evaluation and treatment services provided to minors shall be provided by:

(i) A child mental health specialist, as defined by WAC 275-54-020(2), or

(ii) A mental health professional, as defined by WAC 275-54-020(14) directly supervised by a child mental health specialist, or

(iii) A mental health professional receiving at least one hour per week of clinical consultation from a child mental health specialist for each involuntarily detained minor provided direct client services during the week.

(f) Treatment. The evaluation and treatment program shall:

(i) Provide family therapy as needed.

(ii) Have available, as needed, professional personnel including, but not limited to, a licensed physician and a mental health professional skilled in crisis intervention.

(iii) Ensure each patient has access to necessary medical treatment and support services and access to emergency life-sustaining treatment and medication.

(iv) Have psychiatric consultation available to other physicians or mental health professionals when treatment is not provided by or under the supervision of a psychiatrist.

(g) Use of restraints and seclusion. The use of medication, physical restraints, or locked seclusion rooms in response to assaultive, self-destructive, or unruly patient behavior shall occur only to the extent necessary to ensure the safety of patients and staff, and subject to the following conditions:

(i) In the event of an emergency use of restraints or seclusion, a licensed physician must be immediately notified and shall authorize the restraints or seclusion.

(ii) No patient may be restrained or secluded for a period in excess of four hours without having been examined by a mental health professional. Such patient must be directly observed every thirty minutes and the observation recorded in the patient's clinical record.

(iii) If restraint or seclusion exceeds twenty-four hours, patient shall be examined by a licensed physician. The facts determined by his or her examination and any resultant decision to continue restraint or seclusion over twenty-four hours shall be recorded in the patient's clinical record over the signature of the authorizing physician. This procedure must be repeated for each subsequent twenty-four hour period of restraint or seclusion.

(h) Periodic evaluation. Each involuntary patient shall be evaluated periodically for release from commitment, and such evaluation will be documented in each involuntary patient's clinical record.

(i) Training. All components shall develop an inservice training plan and provide regular training to all personnel having responsibility for any aspect of patient care. Documentation of the type and amount of training received by staff members shall be maintained. Such training shall include information about:

(i) The availability and utilization of less restrictive alternatives.

(ii) Approved methods of patient care.

(iii) Managing assaultive and/or self-destructive behavior.

(iv) Related services, including, but not limited to, transportation, law enforcement, courts, prosecutors, caseworkers, family support systems, advocacy, pharmacotherapy, and hospitals.

(v) The provisions and requirements of this chapter and chapter 354, Laws of 1985 and standards and guidelines promulgated by the department.

(vi) Other appropriate subject matter.

(j) Administration. All components shall:

(i) Maintain written procedures for managing assaultive and/or self-destructive patient behavior, and assure staff has access to and are familiar with these procedures.

(ii) Maintain adequate fiscal accounting records.

(iii) Prepare and submit such reports as are required by the secretary.

(iv) Maintain a procedure for collection of fees and third-party payments.

(3) Whenever a component is also subject to licensure under other federal or state statutes or regulations, the more limiting or more specific standard shall apply.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-170, filed 12/23/85.]

WAC 275-54-180 Outpatient component. (1) The outpatient component is defined as a setting where evaluation and treatment services are provided on a regular basis to patients not in residence in the component. These services are intended to stabilize, sustain, and facilitate recovery of the individual within his or her living setting. Services may include, but are not limited to, day treatment and community support services provided directly by a licensed physician licensed pursuant to chapter 18.57 or 18.71 RCW, a psychologist licensed pursuant to chapter 18.83 RCW, a psychiatric nurse licensed pursuant to chapter 18.88 RCW, or by an agency licensed pursuant to chapter 71.24 RCW and chapter 275-54 WAC.

(2) In addition to the general requirements stated in WAC 275-54-170, the following requirements shall apply to all outpatient components:

(a) Such component shall provide a therapeutic program including, but not limited to, generally accepted treatment modalities such as:

(i) Individual.

(ii) Group.

(iii) Family/marital.

(iv) Pharmacotherapy.

(b) Such component shall provide treatment to each patient under the supervision of a mental health professional.

(c) Each patient 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 such review must be recorded in the patient's clinical record. The frequency of patient contact and case review may be modified if in the opinion of a mental health professional such is warranted and the

reasons for so doing are recorded in the patient's clinical record.

(d) 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 forty hours of direct client services provided by nonmedical staff.

(e) Such component shall include medical consultation with the involuntary patient to assess and prescribe psychotropic medication to meet the needs of the patient. Such consultation shall occur at least weekly during the fourteen-day period, and monthly during the ninety-day period and the one hundred eighty-day period of involuntary treatment unless determined otherwise by the attending physician and the reasons for so doing are recorded in the patient's clinical record.

(f) Whenever possible, medication should be made available to the patient at a reduced rate through a state medication purchase contract or through the state hospital pharmacy.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-180, filed 12/23/85.]

WAC 275-54-190 Emergency component. (1) The emergency component is defined as a hospital emergency room or another setting where prompt therapeutic intervention occurs. The term "emergency" refers to a set of circumstances (physiological, psychological, and/or social) posing an imminent threat to the safety and/or well-being of the patient or others.

(2) In addition to the general requirements stated in WAC 275-54-170, the following requirements shall apply to all emergency components:

(a) Such component shall have the ability to respond promptly to individual crisis situations and to arrange for admission to an inpatient component on a twenty-four-hour-per-day, seven-day-per-week basis.

(b) Such component shall have the capability to detain persons dangerous to self, dangerous to others, or gravely disabled.

(c) Such component shall have immediate access to life support systems and emergency medical services. A mental health professional and/or licensed physician shall be available for consultation and communication with the patient and the component staff on a twenty-four-hour-per-day, seven-day-per-week basis.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-190, filed 12/23/85.]

WAC 275-54-200 Inpatient component. (1) The inpatient component is a hospital or residential setting where an array of treatment services is provided on a twenty-four-hour-per-day basis for patients on seventy-two-hour detentions, or fourteen-day commitments, or one hundred eighty-day commitments.

(2) In addition to the general requirements stated in WAC 275-54-170, the following requirements shall apply to all inpatient components:

(a) The inpatient component shall meet the standards required for state licensing as a psychiatric hospital,

general medical hospital, skilled nursing facility, intermediate care facility, or residential treatment facility.

(b) Such component shall have the capability to admit the patient on a twenty-four-hour-per-day, seven-day-per-week basis.

(c) Such component shall have the capability to detain persons dangerous to self, others, or gravely disabled, and shall provide or have access to at least one seclusion room meeting the requirements of WAC 248-18-001 now or as hereafter amended.

(d) Such component shall provide a therapeutic program including, but not limited to, generally accepted treatment modalities such as:

- (i) Individual.
- (ii) Group.
- (iii) Family/marital.
- (iv) Pharmacotherapy.
- (v) Therapeutic community.

(e) Such component shall provide treatment to each patient under the supervision of the professional person in charge.

(f) A mental health professional must have contact with each involuntary patient daily for the purpose of observation, evaluation, and the provision of continuity of treatment.

(g) Such component shall have access to a mental health professional and a licensed physician for consultation and communication with the patient and the component staff on a twenty-four-hour-per-day, seven-day-per-week basis.

(h) Such component shall periodically evaluate each involuntary patient for conditional release, and such evaluation shall be documented in each involuntary patient's clinical record.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-200, filed 12/23/85.]

WAC 275-54-210 Certification procedure--Waivers--Provisional certification--Renewal of certification.

(1) In order to certify an agency's component or components, the department shall:

(a) Receive a formal request from the county-designated administrator of the evaluation and treatment program; and

(b) Conduct a site visit of the component or components including an inspection and examination of any records, procedures, materials, areas, programs, staff, and patients necessary to determine compliance with WAC 275-54-170, and the appropriate sections of WAC 275-54-180 through 275-54-220.

(2) The department shall issue full certification to a component only if the component is in full compliance with the applicable sections of this chapter.

(3) Variances from a rule may be granted by the department in the form of a waiver, pursuant to the provisions of WAC 275-55-371.

(4) Provisional certification may be granted by the director to a component or components which are in substantial compliance with the applicable sections of this chapter. Such provisional certification shall specify

the number and type of deficiencies temporarily allowed and the length of provisional status.

(5) Renewal of certification is required at least every other year, and may require a complete site visit of the component or components as specified in subsection (1)(b) of this section.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-210, filed 12/23/85.]

WAC 275-54-220 Decertification. The department may decertify any component in accordance with the provisions of RCW 71.05.540 (4) and (5), guidelines promulgated and procedures for investigation of complaints set forth by the director.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-220, filed 12/23/85.]

WAC 275-54-230 Appeal procedure. (1) Any agency whose component or components have been denied certification or have been decertified by the department may appeal such a decision.

(2) Such appeal shall:

- (a) Be made in writing;
- (b) Specify the date of the decision being appealed;
- (c) Specify clearly the issue to be reviewed;
- (d) Be signed by and include the address of the agency;

(e) Be made within thirty days of notification of the decision being appealed.

(3) An appeal on decisions should be made in accordance with the Administrative Procedure Act, chapter 34.04 RCW.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-230, filed 12/23/85.]

WAC 275-54-240 Involuntary evaluation and treatment costs--Seventy-two hour detentions/fourteen-day commitments. (1) Responsibility of involuntary patient.

(a) Any person, or his or her estate, or his or her spouse, or the parents of a minor becoming an involuntary patient pursuant to chapter 354, Laws of 1985 shall be responsible for the cost of such evaluation and treatment. Payment of such costs by the involuntary patient, or on behalf of the involuntary patient by third-party payors, or other legally responsible persons or entities shall be made to:

(i) The state in instances where evaluation and treatment is provided in a facility maintained and operated by the department, pursuant to RCW 71.02.411.

(ii) The local agency in instances where evaluation and treatment is provided by the agency and the agency is not a facility maintained and operated by the department.

(b) In instances where inability to pay or substantial hardship is determined for an involuntary patient pursuant to this section, any unpaid costs for evaluation and treatment provided to such involuntary patient by a nondepartment agency shall be borne by the department, subject to the provisions of WAC 275-54-240 (2) and (3).

(2) Collection by agency.

(a) Definitions. For the purposes of this section:

(i) "Involuntary patient" is as defined by WAC 275-54-020.

(ii) "Title XIX" means Title XIX of the Social Security Act.

(iii) "CSO" means community services office of the department.

(b) Collection of costs for evaluation and treatment provided an involuntary patient by an agency not operated and maintained by the department shall be the responsibility of the agency. Such agency shall make reasonable efforts to make such collection pursuant to the agency's own regulations and policies. Such effort shall also include, but is not limited to, billing all appropriate resources of the involuntary patient and the patient's family, third-party payors, and other legally responsible persons and entities.

(c) Any involuntary patient not having private insurance to cover his or her costs, not already eligible for Title XIX or other state or federal assistance for his or her costs, or not otherwise paying for his or her evaluation and treatment costs, shall be referred by the agency providing the inpatient component to a local CSO for determination of eligibility for Title XIX or other state medical benefits in accordance with applicable mental health issuance benefits. If such patient is determined so eligible by the CSO, the agency shall bill according to the instructions set forth by the department.

(d) In the case of any involuntary patient not eligible for Title XIX benefits, the agency providing the inpatient component shall be responsible for collecting the amount the patient should participate in the treatment costs. As required by subsection (2)(c) of this section and applicable mental health issuance, the amount to be collected shall be determined by the local CSO.

(e) The agency may bill the department for the balance of costs in excess of the amount of required patient participation determined by the local CSO. Such billing shall be subject to the following:

(i) Reimbursement is sought through the appropriate county as defined by WAC 275-54-240(3). All bills shall be verified by the county or the county's designee before forwarding by the county to the department for payment.

(ii) Any collections made prior to such billing shall be shown and deducted from such billing. Any collections made subsequent to such billings shall be submitted to the department.

(f) In the event an involuntary patient is determined by the agency or by the local CSO (in instances where such patient had been referred for eligibility determination) to be fully capable of paying for his or her evaluation and treatment services, and such patient refuses to do so, the agency shall have primary responsibility for collection of costs and shall not expect the department to reimburse the agency for any uncollected balance, except as stated in the applicable mental health division issuance.

(g) The agency shall maintain appropriate records and other supporting material necessary to document

billings and collection of costs for evaluation and treatment provided any involuntary patient, and shall permit authorized representatives of the county and/or the department to make such review of the records of the agency as may be deemed necessary to satisfy audit purposes. Such review shall be restricted to records for involuntary patients only.

(3) Responsibility of the county.

(a) All requests for reimbursement shall be made through the county of detention which shall review and approve requests pursuant to the following:

(i) The person being billed for was in fact an involuntary patient for the period of evaluation and treatment specified.

(ii) The date of initial detention is indicated.

(iii) Date of the seventy-two-hour (probable cause) hearing is indicated.

(iv) Date of conversion to voluntary patient status is shown (if appropriate).

(v) Date of release, transfer, or discharge is shown.

(vi) Days allowed by an approved extension request are shown (if appropriate).

(vii) The "patient participation" calculation is shown on inpatient facility invoices or the patient is shown to be eligible for Medicaid or LCP-MI.

(viii) If insurance coverage is indicated, such coverage collections have been deducted.

(b) All reimbursement payments for evaluation and treatment costs for involuntary patients shall be made directly to the service-providing agency.

(c) No payments will be made to agencies not certified pursuant to WAC 275-54-170, and not a part of a county's evaluation and treatment program pursuant to WAC 275-54-160, except in the case of licensed physicians.

(d) The counties shall maintain appropriate records and other supporting material necessary to document related administrative costs and shall submit such reports as the department shall request and shall permit authorized representatives of the department to make such review of records as may be deemed necessary to satisfy audit purposes.

(4) Responsibility of the department.

(a) In instances where an involuntary patient is unable to pay any or all of the costs of evaluation and treatment from all of the personal, family when legally responsible, or third-party payor resources available to him or her as required by WAC 275-54-240(1), or if payment would result in substantial hardship upon such patient or his or her family, the department shall be responsible for paying any uncollected balance of such costs, as set forth in the applicable mental health division issuance, except costs for which the CSO has determined the patient should continue to be liable.

(b) The department shall reimburse the counties for increased administrative costs, if any, resulting from implementation of the provisions of the Juvenile Involuntary Treatment Act. Additional costs to the counties shall be reimbursed in accordance with the following rules, subject to the availability of state and federal funds.

(c) For all increased involuntary commitment administrative costs, the department shall award an amount to the counties to pay such costs pursuant to RCW 71.05-.550. "Increased costs" as used here shall mean costs exceeding the level financed by the county for calendar year 1984, resulting from implementation of the provisions of the Involuntary Treatment Act, and subsequent amendments.

(d) Involuntary commitment administrative costs are for services not listed under the Title XIX modality schedule. Such costs include:

- (i) All travel and transportation expenses, whether for staff or involuntary patients;
- (ii) All investigative costs not otherwise recoverable as a Title XIX listed service;
- (iii) Expenses for hearings, testimony, legal services, courts, and prosecutors; and
- (iv) The percentage of total staff time of the county mental health coordinator and agency administrative staff allocated to and expended in the involuntary commitment process.

(e) State funds shall in no case be used to replace local funds from any source used to finance administrative costs for involuntary commitment procedures conducted prior to January 1, 1985.

(f) For the evaluation and treatment provided each and every involuntary patient by a qualifying agency, the department shall reimburse the agencies in the amount of the actual expenditures incurred pursuant to this chapter and applicable departmental instructions. Such reimbursement by the department shall not exceed the Title XIX rate and shall not be allowed for any costs already reimbursed by other means. Such reimbursement by the department shall cover the following involuntary evaluation and treatment statuses only:

(i) Emergency component services for individuals where a petition for initial detention is filed under WAC 275-54-050 within twelve hours of admission to that component.

(ii) Initial detention period including Saturdays, Sundays, holidays, and up to three judicial days.

(iii) Fourteen-day period, including any involuntary outpatient treatment or less restrictive placement recommended by agency staff for the remainder of this period. Reimbursement beyond this fourteen-day period shall require approval from the department consistent with the applicable mental health division issuance.

(iv) Conditional release effected pursuant to the applicable provisions of this chapter and chapter 354, Laws of 1985. Reimbursement shall be restricted to the initial seventeen-day period.

(v) Conversion to voluntary status. Reimbursement shall be restricted to inpatient or outpatient services provided during the initial seventeen-day period, regardless of the day within that period the involuntary patient converts to voluntary status.

(g) The department may withhold department reimbursement in whole or in part from any county or agency in the event of a failure to comply with the provisions of this chapter.

[Statutory Authority: 1985 c 354, 86-02-019 (Order 2323), § 275-54-240, filed 12/23/85.]

WAC 275-54-250 Involuntary evaluation and treatment costs--One hundred eighty-day commitments. (1) Responsibility of involuntary patient.

(a) Payment for costs of care for an involuntary patient on a one hundred eighty-day commitment awaiting placement in a state-funded long-term inpatient facility shall be in accordance with the provisions of WAC 275-54-240.

(b) Any minor becoming an involuntary patient on a one hundred eighty-day commitment and placed in a state-funded long-term inpatient facility by the placement committee pursuant to chapter 354, Laws of 1985, or his or her estate, or his or her parents shall be responsible for the cost of such evaluation and treatment based upon a determination by the inpatient facility of ability to pay.

(c) Payment of such costs by the involuntary patient, or on behalf of the involuntary patient by third-party payors, or other legally responsible persons or entities shall be made to:

(i) The state in instances where evaluation and treatment is provided in a facility maintained and operated by the department, pursuant to RCW 71.02.411.

(ii) The local agency in instances where evaluation and treatment is provided by the agency and the agency is supported by, but not operated by the department.

(2) Collection by agency.

(a) Definitions.

(i) "Involuntary patient" is as defined by WAC 275-54-020(10).

(ii) "Title XIX" means Title XIX of the Social Security Act.

(iii) "CSO" means community services office of the department.

(b) Collection of costs for evaluation and treatment provided an involuntary patient by an agency not operated and maintained by the department shall be the responsibility of the agency. Such agencies shall make reasonable efforts to make such collection pursuant to the agency's own regulations and policies. Such efforts shall also include, but are not limited to, billing all appropriate resources of the involuntary patient, the patient's family, third-party payors, and other legally responsible persons and entities.

(c) Any involuntary patient who is a minor not having private insurance to cover his or her costs, not already eligible for Title XIX or other state or federal assistance for his or her costs, or not otherwise paying for their evaluation and treatment costs, shall be referred by the agency providing the inpatient component to a local CSO for determination of eligibility for Title XIX benefits. If such patient is determined so eligible by the CSO, the agency shall bill according to the instructions set forth by the department.

(d) The agency providing the long-term inpatient care shall determine the amount, if any, the patient, or his or her parents, or any responsible others should contribute

to the cost of treatment. Such contributions shall be determined in accordance with the following:

(i) The agency shall have established financial screening criteria, policy, procedures, and format, and a sliding fee schedule or formula used to determine ability to contribute to the cost of inpatient care.

(ii) The financial screening criteria and the sliding fee schedule or formula shall take into consideration available income, family size, and allowable deductions.

(iii) Allowable deductions shall include unusual and exceptional circumstances and other pertinent factors as defined in WAC 275-16-075 and 275-16-085.

(iv) The agency shall establish a formal appeal policy and process allowing responsible others to appeal any financial contribution decision to the individual and agency administrative entity responsible for such decisions.

(3) Responsibility of department.

(a) The agency may bill the department for the balance of costs not collectible by actions taken in accordance with this subsection, for the care and treatment of minors on a one hundred eighty-day commitment and placed in the state-supported inpatient facility by the admissions committee.

(b) Such billing and reimbursement shall be in accordance with the instructions set forth in the department's contract for the provision of these services with the state-funded inpatient facility.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-250, filed 12/23/85.]

WAC 275-54-260 Involuntary treatment program administrative costs--Seventy-two hour/fourteen-day commitment. The mental health division will establish a maintenance of effort level for each county by January 1, 1986.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-260, filed 12/23/85.]

WAC 275-54-270 Involuntary treatment program transportation costs. (1) The minor or his or her parents shall be responsible for any transportation costs incurred in transporting a minor to an evaluation and treatment facility for seventy-two-hour detention, fourteen-day commitment, or initial one hundred eighty-day commitment to the custody of the secretary. Such responsibility shall be based upon a determination of ability to pay as prescribed in WAC 275-54-240.

(2) Where inability to pay has been determined by the local CSO in accordance with the provisions of WAC 275-54-240, and eligibility for federal or state medical assistance has been established in compliance with applicable mental health division issuance, the department shall be responsible for payment of transportation costs incurred in transporting the eligible minor to an evaluation and treatment facility for seventy-two-hour detention, fourteen-day commitment, or one hundred eighty-day commitment. Such payments shall be made in accordance with instructions set forth in mental health division issuance.

(1986 Ed.)

(3) Transportation shall be provided to involuntarily committed minors under chapter 354, Laws of 1985 by the most appropriate, safest, and most cost-effective means available. Transporting by ambulance shall be used only in those circumstances dictated by medical necessity.

(4) If a minor is released from a long-term evaluation and treatment facility and no other transportation is available, that facility shall furnish transportation to the minor's residence or other appropriate place.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-270, filed 12/23/85.]

WAC 275-54-280 Involuntary treatment program--Legal costs. (1) Responsible others shall bear the costs of attorneys appointed for the minor or his or her parent if financially able according to standards set by the court of the county in which the proceeding is held.

(2) If all responsible others are indigent as determined by these standards, the costs of the legal services shall be borne by the county in which the proceeding is held.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-280, filed 12/23/85.]

WAC 275-54-290 Patient rights. Absent a risk to self or others, minors treated under this chapter have the following rights, which shall be prominently posted in the evaluation and treatment facility:

(1) To wear their own clothes and to keep and use personal possessions;

(2) To keep and be allowed to spend a reasonable sum of their own money for canteen expenses and small purchases;

(3) To have individual storage space for private use;

(4) To have visitors at reasonable times;

(5) To have reasonable access to a telephone, both to make and receive confidential calls;

(6) To have ready access to letter-writing materials, including stamps, and to send and receive uncensored correspondence through the mail;

(7) To discuss treatment plans and decisions with mental health professionals;

(8) To have the right to adequate care and individualized treatment;

(9) Not to consent to the performance of electroconvulsive treatment or surgery, except emergency life-saving surgery, upon him or her, and not to have electroconvulsive treatment or nonemergency surgery in such circumstance unless ordered by the court pursuant to a judicial hearing in which the minor is present and represented by counsel, and the court shall appoint a psychiatrist, psychologist, or physician designated by the minor or the minor's counsel to testify on behalf of the minor. The minor's parent may exercise this right on the minor's behalf, and must be informed of any impending treatment;

(10) Not to have psychosurgery performed on him or her under any circumstances.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-290, filed 12/23/85.]

WAC 275-54-300 Confidentiality. The fact of admission and all information obtained through treatment under this chapter is confidential. Confidential information may be disclosed only:

(1) In communications between mental health professionals to meet the requirements of this chapter, in the provision of services to the minor, or in making appropriate referrals;

(2) In the course of guardianship or dependency proceedings;

(3) To persons with medical responsibility for the minor's care;

(4) To the minor, the minor's parent, and the minor's attorney, subject to RCW 13.50.100;

(5) When the minor or the minor's parent designates in writing the persons to whom information or records may be released;

(6) To the extent necessary to make a claim for financial aid, insurance, or medical assistance to which the minor may be entitled or for the collection of fees or costs due to providers for services rendered under this chapter;

(7) To the courts as necessary to the administration of this chapter;

(8) To law enforcement officers or public health officers as necessary to carry out the responsibilities of their office. However, only the fact and date of admission, and the date of discharge, the name and address of the treatment provider, if any, and the last known address shall be disclosed upon request;

(9) To law enforcement officers, public health officers, appropriate relatives, and other governmental law enforcement agencies, if a minor has escaped from custody, disappeared from an evaluation and treatment facility, violated conditions of a less-restrictive treatment order, or failed to return from an authorized leave, and then only such information as may be necessary to provide for public safety or to assist in the apprehension of the minor. The officers are obligated to keep the information confidential in accordance with this chapter;

(10) To the secretary for assistance in data collection and program evaluation or research, provided the secretary adopts rules for the conduct of such evaluation and research. The rules shall include, but need not be limited to, the requirement that all evaluators and researchers sign an oath of confidentiality substantially as follows:

"As a condition of conducting evaluation or research concerning persons who have received services from (fill in the facility, agency, or person) I,, agree not to divulge, publish, or otherwise make known to unauthorized persons or the public any information obtained in the course of such evaluation or research regarding minors who have received services in a manner such that the minor is identifiable.

I recognize unauthorized release of confidential information may subject me to civil liability under state law.

/s/....."

(11) To appropriate law enforcement agencies and to a person, when the identity of the person is known to the public or private agency, whose health and safety has

been threatened, or who is known to have been repeatedly harassed, by the patient. The person may designate a representative to receive the disclosure. The disclosure shall be made by the professional person in charge of the public or private agency or his or her designee and shall include the dates of admission, discharge, authorized or unauthorized absence from the agency's facility, and only such other information pertinent to the threat or harassment. The decision to disclose or not shall not result in civil liability for the agency or the agency's employees so long as the decision was reached in good faith and without gross negligence;

(12) To a minor's next-of-kin, attorney, guardian, or conservator, if any, the information that the minor is presently in the facility or that the minor is seriously physically ill and a statement evaluating the mental and physical condition of the minor as well as a statement of the probable duration of the minor's confinement;

(13) Upon the death of a minor, to the minor's next-of-kin;

(14) To a facility where the minor resides or will reside. This section shall not be construed to prohibit the compilation and publication of statistical data for use by government or researchers under standards, including standards to assure maintenance of confidentiality, set forth by the secretary. The fact of admission and all information obtained pursuant to this chapter are not admissible as evidence in any legal proceeding outside this chapter, except guardianship or dependency, without the written consent of the minor or the minor's parent;

(15) When disclosure of information on records is made, the date and circumstances, the name or names of the person or agencies to whom such disclosure was made, the relationship to the minor, if any, and the information disclosed shall be entered in the minor's clinical record.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-300, filed 12/23/85.]

WAC 275-54-310 Confidentiality of court proceeding records. The records and files maintained in any court proceeding are confidential and available only to the minor, the minor's parents, and the minor's attorney. The court may order release or use of these records if the court finds appropriate safeguards for strict confidentiality will be maintained.

[Statutory Authority: 1985 c 354. 86-02-019 (Order 2323), § 275-54-310, filed 12/23/85.]

Chapter 275-55 WAC

VOLUNTARY ADMISSION--INVOLUNTARY COMMITMENT, TREATMENT AND/OR EVALUATION OF MENTALLY ILL PERSONS

WAC

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- 275-55-041 Voluntary adult patient—Detention. [Order 1122, § 275-55-041, filed 6/2/76; Order 955, § 275-55-041, filed 7/26/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560. 275-55-230
 275-55-061 Voluntary admission—Adult—Conservator. [Order 955, § 275-55-061, filed 7/26/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560. 275-55-240
 275-55-070 Forwarding information to department. [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.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560. 275-55-250
 275-55-080 Alternatives to admittance to inpatient treatment. [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.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560. 275-55-260
 275-55-100 Mental health professional, psychologist, social worker, psychiatric nurse. [Order 1122, § 275-55-100, filed 6/2/76; Order 955, § 275-55-100, filed 7/26/74; Order 900, § 275-55-100, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560. 275-55-270
 275-55-100, filed 6/2/76; Order 955, § 275-55-100, filed 7/26/74; Order 900, § 275-55-100, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Conditional release of patient. [Order 955, § 275-55-120, filed 7/26/74; Order 900, § 275-55-120, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Voluntary minor—Release. [Order 955, § 275-55-130, filed 7/26/74; Order 900, § 275-55-130, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Involuntary commitment and detention of minor. [Order 955, § 275-55-140, filed 7/26/74; Order 900, § 275-55-140, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Voluntary patient—Periodic review. [Order 955, § 275-55-150, filed 7/26/74; Order 900, § 275-55-150, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Available physician or other professional person. [Order 900, § 275-55-160, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Advising patient of rights. [Order 955, § 275-55-170, filed 7/26/74; Order 900, § 275-55-170, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Involuntary patient—Evaluation and examination. [Order 1122, § 275-55-180, filed 6/2/76; Order 955, § 275-55-180, filed 7/26/74; Order 900, § 275-55-180, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Involuntary patients—Treatment prior to hearings. [Order 900, § 275-55-190, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Protection of patients' property. [Order 900, § 275-55-200, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Voluntary treatment of involuntary patient. [Order 955, § 275-55-210, filed 7/26/74; Order 900, § 275-55-210, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Professional persons in charge. [Order 900, § 275-55-220, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Revocation of conditional release. [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.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Release of indigent patients. [Order 900, § 275-55-240, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Research. [Order 1122, § 275-55-250, filed 6/2/76; Order 900, § 275-55-250, filed 1/25/74.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Release of information. [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.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
 Patient's rights. [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.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.

- 275-55-280 Standards for certification of evaluation and treatment facilities. [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.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
- 275-55-282 Outpatient component. [Order 1029, § 275-55-282, filed 5/29/75.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
- 275-55-284 Emergency component. [Order 1029, § 275-55-284, filed 5/29/75.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
- 275-55-286 Inpatient component. [Order 1029, § 275-55-286, filed 5/29/75.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
- 275-55-288 Standards for evaluation and treatment facilities serving minors. [Order 1122, § 275-55-288, filed 6/2/76; Order 1029, § 275-55-288, filed 5/29/75.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.
- 275-55-290 Financial assistance to counties. [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.] Repealed by 82-07-024 (Order 1775), filed 3/11/82. Statutory Authority: RCW 71.05.560.

WAC 275-55-010 Purpose. These regulations are adopted pursuant to and in accordance with chapters 71.05 and 72.23 RCW. These regulations are adopted to provide operational procedures for the voluntary treatment, involuntary commitment, evaluation and/or treatment of mentally ill persons; to provide standards for certification of evaluation and treatment facilities; and to provide procedures for financial assistance to counties and evaluation and treatment facilities.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-010, filed 3/11/82; 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 or her designee.

(3) "Director" means the director of the mental health division of the department of social and health services or his or her designee.

(4) "Superintendent" means the superintendent of a state hospital or his or her designee.

(5) "Chapter" means chapter 275-55 WAC.

(6) "County-designated mental health professional" means a person appointed by the county to perform the duties specified in chapters 71.05 and 72.23 RCW, and

(a) Who meets the educational and/or experience requirements as specified in WAC 275-55-020 (33)(a), (b), (c), or

(b) Where exception has been granted by the director pursuant to WAC 275-55-020 (33)(d).

(7) "Professional person in charge" as used in chapters 71.05 and 72.23 RCW, and these rules, unless otherwise defined, means the mental health professional having chief clinical responsibility for the mental health evaluation and treatment unit within the agency, or his

or her designee who must also be a mental health professional.

(8) "Available physician or other professional person" as used in RCW 71.05.090 means either a licensed physician or a mental health professional as defined in subsection (33) of this section.

(9) "Agency" means a public or private agency as specified in RCW 71.05.020 (6) and (7), respectively.

(10) "Rule" means a rule within these rules and regulations.

(11) "Facility" means an evaluation and treatment facility.

(12) "Component" means any one of the three evaluation and treatment services required to be provided within an evaluation and treatment program as specified by RCW 71.05.020(16) and WAC 275-55-020 (14)(a) and (b), and required to be certified as specified by WAC 275-55-020 (13)(b).

(13) "Evaluation and treatment facility" means a public or private agency providing one or more components in compliance with the following:

(a) The agency shall be under contract or written agreement with an evaluation and treatment program pursuant to WAC 275-55-261. Exceptions to this rule are specified in WAC 275-55-020 (13)(c).

(b) Each component of the agency shall be certified by the department pursuant to WAC 275-55-261 (3) and (6), and 275-55-263. Exceptions to this rule are specified in WAC 275-55-020 (13)(c). Certification is required for any component serving involuntary patients. Certification of a component shall not preclude such component from also serving voluntary patients. A certified component shall comply with all rules and regulations of this chapter and with chapter 71.05 RCW as applicable to both involuntary and voluntary patients.

(c) Exceptions:

(i) Any agency operating a component serving voluntary patients exclusively will not require certification of such component nor require being under contract to an evaluation and treatment program.

(ii) A physically separate and separately operated portion of a state hospital may be designated as an evaluation and treatment facility.

(iii) A facility which is part of, or operated by, the department or any federal agency will not require certification of the facility's component or components nor require being under contract to an evaluation and treatment program.

(14) "Evaluation and treatment program" means a coordinated system of evaluation and treatment services administered by an agency or a county pursuant to RCW 71.05.020(16) and WAC 275-55-261, and is provided to involuntary patients and to persons voluntarily seeking treatment for a mental disorder.

(a) Such evaluation and treatment services shall include at least all three of, but are not limited to, the following components:

(i) Outpatient.

(ii) Emergency.

(iii) Short-term inpatient.

(b) Such evaluation and treatment services shall be provided by an evaluation and treatment facility or facilities.

(15) "Medical evaluation" means an evaluation performed by a licensed physician including both a mental status and physical examination.

(16) "Patient" means a person admitted to an agency, facility, or component, voluntarily or involuntarily, for observation, evaluation, care, and/or treatment for a mental disorder.

(17) "Mental disorder" means any organic, mental, or emotional impairment having substantial adverse effects on an individual's cognitive or volitional functions, classified in accordance with the current diagnostic and statistical manual of the American psychiatric association.

(18) "Involuntary patient" means a person who, as a result of a mental disorder, presents a likelihood of serious harm (RCW 71.05.020(3)) or is gravely disabled (RCW 71.05.020(1)), and is initially detained and/or court-committed for evaluation and treatment.

(19) "Detention" means a person being held in a facility involuntarily pursuant to applicable sections of chapter 71.05 RCW, and the person not being permitted willful physical movement beyond the facility without express prior permission.

(20) "Initial detention" means the first seventy-two hour period, or part thereof, or involuntary evaluation and treatment required by a petition for initial detention, emergency detention, or supplementary petition for initial detention.

(21) "Seventy-two hour period" shall be computed to:

(a) Start on the time and date the inpatient or outpatient component of the evaluation and treatment facility provisionally accepts the person to be detained as specified in RCW 71.05.170, and

(b) Exclude Saturdays, Sundays, and holidays.

(22) Deleted.

(23) "Admission" means acceptance of a person as an inpatient or outpatient by the facility.

(24) "Discharge" means release of a patient from a component or from a facility.

(25) "Transfer," unless otherwise defined, means a move of the patient by a facility between treatment services or components of the facility, or between facilities, and may or may not include a discharge from the transferring service, component, or facility.

(26) "Release from commitment" means legal termination of the order of commitment.

(27) "Early release" means release of the involuntary patient from the order of commitment prior to the original expiration date of the commitment order.

(28) "Conditional release" means a transfer of the involuntary patient from inpatient to outpatient treatment pursuant to conditions specified for the patient by the transferring facility or component. The involuntary patient remains under order of commitment.

(29) "Shock treatment" means electroconvulsive therapy.

(30) Whenever used in this chapter, the masculine shall include the feminine and the singular shall include the plural.

(31) "County" means a county, or a combination of counties jointly agreeing to provide or cause to be provided the services required by this section.

(32) "Coordinator" means county mental health coordinator, and is the person appointed by the county to supervise and/or otherwise coordinate the community mental health program services of a county.

(33) "Mental health professional" means a person regularly involved in mental health evaluation and treatment, and qualifying as one of the following:

(a) A psychiatrist, psychologist, psychiatric nurse, or social worker.

(b) A person with a masters degree or further advanced degree in counseling or one of the social sciences from an accredited college or university. Such person shall have, in addition, at least two years of experience in direct treatment of mentally ill or emotionally disturbed persons, such experience gained under the supervision of a mental health professional.

(c) A licensed physician permitted to practice medicine or osteopathy in the state of Washington.

(d) A person otherwise qualified to perform the duties of a mental health professional but does not meet the requirements listed in subsection (33)(a), (b), or (c) of this section, where an exception to such requirements has been granted by the director upon submission of a written request by the county involved, such request to document the following:

(i) The extent to which the county has made an effort to provide and has the capability of providing a mental health professional;

(ii) The amount and type of employment experience the applicant possesses. Such an applicant shall have had at least three years' experience in the direct treatment of mentally ill or emotionally disturbed persons, such experience gained under the supervision of a mental health professional, as defined under subsection (33)(a), (b), or (c) of this section;

(iii) The overall needs of the mental health program in the particular county involved; and

(iv) Such factors as shall be brought to the attention of the director by the county involved.

(34) "Psychiatrist" means a physician licensed to practice medicine in the state of Washington having, in addition, completed three years of graduate training in psychiatry in a program approved by the American medical association or the American osteopathic association.

(35) "Psychologist" means persons defined as such in RCW 71.05.020(14).

(36) "Social worker" means persons defined as such in RCW 71.05.020(15).

(37) "Psychiatric nurse" means a registered nurse having had, in addition, at least two years' experience in the direct treatment of mentally ill or emotionally disturbed persons, such experience gained under the supervision of a mental health professional as defined in subsection (33)(a), (b), or (c) of this section.

(38) "Psychiatric nurse clinician" means a registered nurse having a masters degree or further advanced degree from an accredited college or university and whose graduate specialization was in psychiatric nursing.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-020, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-020, filed 3/11/82; 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 275-55-021 Application of rules to minors. Where no reference is made to a minor in a particular rule and no specific rule for minors is found in this chapter, or in chapter 71.05 RCW, or in RCW 72.23-.070, then the particular rule in question shall apply to the minor as well as to the adult.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-021, filed 3/11/82.]

WAC 275-55-030 Private agencies which may admit voluntary patients. Any private agency, as defined in RCW 71.05.020(7), may receive as a voluntary patient any person suffering from a mental disorder.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-030, filed 3/11/82; Order 900, § 275-55-030, filed 1/25/74.]

WAC 275-55-040 Voluntary admission to public or private agency--Voluntary adult. Any private agency receiving a voluntary patient eighteen years of age or older pursuant to WAC 275-55-030 and any public agency as defined in RCW 71.05.020(6) receiving such patient, shall require written application signed by the voluntary patient stating such application is a voluntary action by the patient, and shall advise such patient of his or her rights pursuant to WAC 275-55-211(1).

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-040, filed 3/11/82; Order 955, § 275-55-040, filed 7/26/74; Order 900, § 275-55-040, filed 1/25/74.]

WAC 275-55-050 Application for admission--Voluntary minor. (1) A person under eighteen years of age, or others on his or her behalf, may make application for and authorize treatment pursuant to RCW 72.23.070.

(2) Any person under the age of eighteen but over the age of thirteen may make application for and receive mental health care upon his or her own application without consent of his or her parent, parents, guardian, conservator, or other person entitled to custody, unless such treatment involves inpatient care.

(a) Applications for voluntary inpatient care made by persons in such age range shall be accompanied by a written consent of the parent(s), conservator, guardian, or other person entitled to custody.

(b) Prescription of psychotropic medications shall be made only with prior written consent of the parent(s), conservator, guardian, or other person entitled to custody.

(4) Every person under eighteen years of age shall have all the rights provided for persons eighteen years of age or over as set forth in this chapter, in chapters 71.05 and 72.23 RCW, except the rights specifically modified by RCW 72.23.070. Further, a copy of all such rights shall be provided to the minor upon admission.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-050, filed 3/11/82; 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 Admission to public agency--Voluntary minor. (Reference RCW 72.23.070(2)) (1) Upon receipt of any application for admission of a minor to an inpatient unit of 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 to the superintendent or the professional person in charge of such agency as to whether treatment is necessary and proper on a voluntary basis, and stating reasons for such voluntary treatment.

(2) After receipt of such recommendations, the professional person in charge shall make final determination as to the admission of the minor.

(3) Before receipt of such recommendations, a patient may be temporarily admitted if the professional person in charge determines temporary admission to be in the best interest of that patient.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-060, filed 3/11/82; 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 275-55-071 Discharge--Voluntary minor. (1) A voluntarily admitted minor over thirteen years of age shall have the right to release in accordance with RCW 72.23.070(e).

(2) Minors under thirteen years of age shall not be released at the request of the minor but shall be released immediately upon the request of such minor's parent(s), conservator, guardian, or other person entitled to custody, unless the professional person in charge objects immediately in writing to the juvenile court specifying grounds sufficient for involuntary detention of the minor.

(3) When the facility objects immediately in writing to the juvenile court specifying grounds sufficient to allow involuntary detention, as required in RCW 72.23-.070 (3)(e), and serves a copy of such objection to the parent(s), conservator, guardian or other person entitled to custody, the facility may detain the minor patient until the next judicial day at which time a petition for involuntary treatment must be filed. When the petition is filed, the minor may be held for a further reasonable time, not to exceed five judicial days, in order for the juvenile court to hear such petition.

(4) The immediate objection in writing to the juvenile court as required by this rule shall be the same as a petition for initial detention of the minor, and shall be filed with the juvenile court on the next judicial day.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-071, filed 3/11/82.]

WAC 275-55-081 Periodic review--Voluntary inpatient. The condition and status of a voluntary patient shall be reviewed at least each one hundred eighty days.

(Reference RCW 71.05.050) At the time of such review, the patient shall again be advised orally of his or her right to release and in writing of his or her rights as set forth under WAC 275-55-241 (1) and (2). The patient's review shall include but not be limited to an evaluation of the patient's individual treatment program and progress, recommendations for future treatment, and consideration of possibly less restrictive treatment. Such review shall be undertaken under the supervision and direction of the professional person in charge. Written documentation of such review shall be maintained in the patient's clinical record.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-081, filed 3/11/82.]

WAC 275-55-090 Limitation on length of stay—Readmission voluntary patients. No person shall be carried continuously as a voluntary patient for a period of more than one year. (Reference RCW 72.23.100 and 71.05.050) However, a patient may be readmitted pursuant to admission procedures at the end of any one-year period.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-090, filed 3/11/82; Order 900, § 275-55-090, filed 1/25/74.]

WAC 275-55-110 Discharge of voluntary patient—Release of clinical summary. (1) For the purposes of this section, "hospital" includes state and federal hospitals for the mentally ill.

(2) Nothing in these rules and regulations shall be construed so as to prohibit the superintendent or professional person in charge from discharging a patient at any time when, in the opinion of the superintendent or professional person in charge, the patient's condition is no longer appropriate for treatment at the hospital or facility.

(3) Upon discharge of the voluntary patient the hospital or facility shall:

(a) Seek the patient's permission for release of a clinical summary concerning the patient's condition to the physician, psychiatrist or therapist of his or her choice, or to the local treatment facility or community mental health program. However, information may be shared with others involved in providing services consistent with RCW 71.05.390.

(b) Advise the patient of his or her competency pursuant to WAC 275-55-221.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-110, filed 3/11/82; Order 1122, § 275-55-110, filed 6/2/76; Order 955, § 275-55-110, filed 7/26/74; Order 900, § 275-55-110, filed 1/25/74.]

WAC 275-55-121 Involuntary detention and commitment—Minor. No minor shall be involuntarily committed for treatment of a mental disorder or involuntarily detained for evaluation as to the existence of a mental disorder except according to the following requirements:

(1) The facility accepting the involuntary minor patient must;

(a) Be certified pursuant to WAC 275-55-331; or

(b) Be part of or operated by the department 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 and shall be in accordance with RCW 72.23.070.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-121, filed 3/11/82.]

WAC 275-55-131 Nonadmission of involuntarily detained person—Transportation. (1) Admission shall not be denied to a person under initial detention except pursuant to the circumstances specified in WAC 275-55-263 (2)(a).

(2) If the person is not admitted by a facility, transportation or arrangements for custody shall be made in accordance with RCW 71.05.190.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-131, filed 3/11/82.]

WAC 275-55-141 Protection of patient's property—Involuntary patient. (1) Articles brought to the facility shall be inventoried and articles not kept by the patient shall be housed by the facility giving due regard to reasonable precautions necessary to safeguard such property.

(2) The peace officer or mental health professional escorting the patient to the facility shall take reasonable precautions to safeguard the property of the patient 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 escorting officer or mental health professional, and/or facility when notice of possible danger thereto is received. Further, reasonable precautions shall be taken to lock and otherwise secure the domicile of the patient as soon as possible after the patient's initial detention. (Reference RCW 71.05.220)

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-141, filed 3/11/82.]

WAC 275-55-151 Evaluation and examination—Involuntary patient. Persons doing the initial detention evaluation and treatment pursuant to RCW 71.05.210 shall not include the county-designated mental health professional responsible for the detention, unless no other mental health professional is reasonably available and specific exemption has been granted by the director.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-151, filed 3/11/82.]

WAC 275-55-161 Treatment prior to hearings—Involuntary patient. Any involuntary patient may refuse all but emergency lifesaving treatment beginning twenty-four hours prior to any hearing. On admission to the facility such patient shall be informed of his or her right to refuse all treatment except lifesaving treatment during such twenty-four hour period and shall again be so informed prior to the twenty-four hour period before court hearing. The patient shall be asked if he or she wishes to decline treatment during such twenty-four

hour period, and the answer shall be in writing and signed where possible. Compliance with this procedure shall be documented in the patient's clinical record. This section does not preclude use of physical restraints and/or seclusion to protect against injury to the patient or others. (Reference RCW 71.05.200.)

[Statutory Authority: RCW 71.05.560, 84-03-035 (Order 2065), § 275-55-161, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-161, filed 3/11/82.]

WAC 275-55-171 Early release or discharge of involuntary patient--Release of clinical summary--Notification of court. (1) Nothing in these rules and regulations shall be construed so as to prohibit the superintendent or professional person in charge from granting an early release to and/or discharging an involuntary patient at any time when, in the opinion of the superintendent or professional person in charge, the involuntary patient:

(a) May be granted an early release on the grounds such patient:

(i) No longer presents a likelihood of serious harm to others, and is no longer gravely disabled; or

(ii) Is an appropriate candidate for and will accept voluntary treatment elsewhere upon referral; or

(iii) Is an appropriate candidate for and will accept voluntary treatment at the hospital or facility where the person is currently a patient.

(b) May be concurrently discharged, if granted an early release, on the grounds his or her condition is no longer appropriate for treatment at the hospital or facility.

(c) May not qualify for early release, but on the grounds his or her condition is no longer appropriate for treatment at the hospital or facility may be transferred or discharged under the provisions for conditional release as specified in WAC 275-55-181.

(2) Upon transfer or discharge of the involuntary patient not granted an early release, the hospital or facility shall notify the patient a clinical summary will be forwarded without his or her consent to the receiving facility or component for the purposes of effecting a conditional release, and such disclosure shall remain confidential.

(3) Upon early release, discharge or transfer, the patient shall be advised of his or her competency pursuant to WAC 275-55-221.

(4) Whenever an involuntary patient is granted an early release, the court ordering the original commitment shall be notified in writing of the date of release and release plans. The county-designated mental health professional shall be sent a copy of such written court notification. (Reference RCW 71.05.330)

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-171, filed 3/11/82.]

WAC 275-55-181 Conditional release--Involuntary patient. (1) At any time during the period of commitment, the superintendent or professional person in charge may determine the involuntary patient receiving inpatient services can be more appropriately served by

outpatient treatment, such treatment may be required in accordance with RCW 71.05.340.

(2) Ongoing determination for conditional release shall be based on periodic personal contacts with the patient by the facility designated to provide outpatient treatment, (see WAC 275-55-271(2)), and will be documented in the patient's clinical record. Such contacts shall occur at the following intervals during the period of conditional release:

(a) Fourteen-day period - At least once weekly.

(b) Ninety-day period - At least once each month.

(c) One hundred and eighty-day period - At least once each month.

(3) Any patient conditionally released pursuant to RCW 71.05.340 and this section shall be notified orally and in writing of the terms and conditions of the release and shall be notified in writing of any subsequent modifications of such terms and conditions. Other notifications shall be as set forth in RCW 71.05.340. All conditions and modifications thereof shall be made a part of the patient's clinical record. Written acknowledgement from the patient shall:

(a) Be obtained for receipt of the terms and conditions of release by the superintendent or the professional person in charge of the releasing facility or component.

(b) Be obtained for any subsequent modification of the terms of conditional release by the professional person in charge of the receiving facility or component.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-181, filed 3/11/82.]

WAC 275-55-191 Revocation of conditional release--Secretary's designee--Involuntary patient. (1) The secretary's designee for purposes of revocation of conditional release under RCW 71.05.340 shall be:

(a) The superintendent of the state hospital or his or her specified designee where the patient was conditionally released, or

(b) The director of the division of mental health or his or her specified designee.

(2) Revocation procedures will be as otherwise specified in RCW 71.05.340, including the responsibilities of the designated county mental health professional.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-191, filed 3/11/82.]

WAC 275-55-201 Discharge of indigent patient--Involuntary patient. (1) No indigent patient who is an inpatient in any evaluation and treatment facility shall be discharged or conditionally released during or at the expiration of any 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 provided an amount necessary to reach such minimum. If the indigent patient has no funds, the total minimal amount shall be provided. Request for suitable clothing or funding therefor and funds shall be made by the person in charge of the facility to the superintendent of the nearest state hospital and the superintendent shall furnish such clothes or funds as required under RCW

71.05.350. Such request shall be made at least seventy-two hours ahead of expected release in the case of any patient under a fourteen-day or longer involuntary confinement period.

(2) In the case of an indigent patient under initial detention, the person in charge of the facility may provide suitable clothing and funds as specified in this section, from resources of the facility, and shall immediately notify the superintendent of such action. The department may then be billed by the facility.

(3) For the purposes of this rule, the superintendent may designate a staff member within the department to handle funding and clothing requests.

(4) 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 applying therefor if such extra funding is necessary for personal and/or living expenses of such patient.

(5) As funds are available, the secretary may provide, as an alternative to the funding specified in subsection (1) of this section, for 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.

(6) No patient regardless of the length of involuntary confinement shall be released without transportation to his or her 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 one hundred dollars, or, in the alternative, the facility may provide such transportation.

(7) If the superintendent has reasonable cause to believe the patient to be released has ample funds to assume expenses of clothing, transportation, or other payments made herein, the person released shall be required to assume such expenses and the superintendent shall so advise.

(8) Where funding is available, the secretary or the superintendent may at his or her discretion provide funds or clothing pursuant to this rule and the laws of the state of Washington to voluntary patients.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-201, filed 3/11/82.]

WAC 275-55-211 Advising patient of rights. (1) Any person voluntarily admitted for inpatient treatment to any agency shall, upon admission, be advised in writing or orally by the agency of his or her right to immediate release and shall be further advised in writing of all rights secured to him or her pursuant to RCW 71.05.050 and to WAC 275-55-241 (1) and (2).

(2) All persons involuntarily admitted to the inpatient, outpatient or emergency component of a facility shall, upon admission, be advised in writing or orally by the component of the following (reference RCW 71.05.200 and 71.05.210):

(a) Each right the patient has as an involuntary patient (listed in WAC 275-55-241 (1) and (3)). In addition, when possible, a responsible member of the immediate family, guardian, or conservator, if any, and such other person as designated by the patient shall receive notification in writing of the patient's confinement and his or her rights retained as an involuntary patient. The patient shall be informed who has been notified.

(b) Within twenty-four hours of admission, the patient will undergo a medical and psychosocial evaluation to determine whether continued detention within the facility will be necessary.

(c) If the patient is not released within seventy-two hours, excluding Saturdays, Sundays, and holidays, the patient will be entitled to a judicial hearing before a superior court to decide whether the patient's continued detention within the facility is necessary.

(3) Upon discharge and/or early release as specified in WAC 275-55-110 and 275-55-171, every patient voluntarily admitted or involuntarily committed pursuant to chapter 71.05 RCW shall be advised in writing of the following: No person is presumed incompetent nor does any person lose any civil rights as a consequence of receiving evaluation and/or treatment services for a mental disorder, whether voluntary or involuntary, pursuant to Washington law dealing with mental illness. (Reference RCW 71.05.450)

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-211, filed 3/11/82.]

WAC 275-55-231 Conversion to voluntary status by involuntary patient--Rights. Patients committed by court order to involuntary treatment shall have all the rights of voluntary patients as specified in WAC 275-55-241 (1) and (2). The facility may convert the patient to voluntary status when the patient has signed an application to receive voluntary treatment.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-231, filed 3/11/82.]

WAC 275-55-241 Rights of patient. Any agency, facility or component providing services defined in this chapter to persons with a mental disorder shall not withhold from any patient the following rights, and a list of such rights shall be prominently posted within the department or ward where such person is housed if an inpatient or receiving services from an emergency component. Outpatient facilities or components shall prominently post a list of such rights drawn from the following as are appropriate to an outpatient facility or component, such list to be posted within the reception area. The agency, facility or component shall specifically ensure, unless an imminent danger to the individual or others would result, each patient shall have the rights listed in subsection (1)(a), (i), (k), (o), (2)(a), (b), (3)(a), (c), (d), (f), and (g) of this section.

(1) Rights of all patients:

(a) The right not to be restrained from sending written communications of the fact of the patient's detention, commitment, or admission; any such communication will be mailed to the person to whom

addressed by the person in charge of the facility, or his or her designee.

(b) The right to adequate care and individualized treatment.

(c) The right to wear his or her own clothes and to keep and use his or her own personal possessions, except when deprivation of same is essential to the protection and safety of the patient or other persons.

(d) The right to keep and be allowed to spend a reasonable sum of his or her own money.

(e) The right of access to individual storage space for his or her private use.

(f) The right to have visitors at reasonable times.

(g) The right to have reasonable access to a telephone, both to make and receive confidential calls.

(h) The right to have ready access to letter writing material, including stamps, and to send and receive uncensored correspondence through the mails.

(i) The right not to consent to the performance of shock treatment or surgery, except emergency life-saving surgery, upon him or her, and not to have shock treatment or nonemergency surgery in such circumstances unless ordered by a court pursuant to a judicial hearing where the patient is present and represented by counsel, and the court appoints a psychiatrist, psychologist, or physician designated by such patient or his or her counsel to testify on behalf of the patient. (Reference RCW 71.05.210, 71.05.370, and 71.05.380)

(j) The right to dispose of property and sign contracts unless the patient has been adjudicated an incompetent in a court proceeding directed to the particular issue.

(k) The right not to have psychosurgery performed under any circumstances.

(l) 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 a mental disorder.

(n) The right of access to attorneys, courts, and other legal redress.

(o) The right to have all information and records compiled, obtained, or maintained in the course of receiving services kept confidential, pursuant to the provisions of RCW 71.05.390 through 71.05.420.

(2) Rights of all voluntary patients:

(a) 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, thirteen years of age or under – Release at request of parent(s), conservator, guardian, or other person entitled to custody.

(iv) Minor, fourteen years of age or over – Release upon request of both minor and his or her parent(s), conservator, guardian or other person entitled to custody. If requested by minor only, release on next judicial day.

(b) The right to a review of condition and status at least each one hundred and eighty days. (Reference RCW 71.05.050, 72.23.070, and 71.05.380)

(3) Rights of all involuntary patients:

(a) Unless released within seventy-two hours as defined by WAC 275-55-020(21), all involuntary adult patients have a right to a judicial hearing not more than seventy-two hours, as defined, after initial detention to determine whether probable cause exists to detain such patient after seventy-two hours for a further period up to fourteen days.

(b) The right to communicate immediately with an attorney, and if indigent, the right to have an attorney appointed to represent the patient before and at such hearing, and the right to be told the name and address of the attorney appointed.

(c) The right to remain silent.

(d) The right to be told statements the patient makes may be used in the involuntary proceedings.

(e) The right to present evidence and to cross-examine witnesses testifying against the patient at the probable cause hearing.

(f) The right to refuse medication beginning twenty-four hours prior to any court proceeding wherein the patient has the right to attend and which bears upon the continued commitment of the patient.

(g) When taken into custody by a peace officer and then placed in a facility without prior authorization by the county-designated mental health professional, the involuntary patient shall be examined by a mental health professional within three hours of the patient's arrival, and shall be released within twelve hours unless the county-designated mental health professional files a supplemental petition for initial detention and the detained person receives a copy. (Reference RCW 71.05.150(5))

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-241, filed 3/11/82.]

WAC 275-55-261 Requirements for certifying evaluation and treatment components. (1) Each county or combination of counties shall develop and coordinate an evaluation and treatment program consistent with chapter 71.05 and 71.24 RCW. Such program shall include, but is not limited to components of outpatient services, emergency services, and short-term inpatient services. The county may directly provide such a program in its entirety, or may provide one or more components of such a program directly, or may through contract or written agreement with an agency or agencies, provide the remaining component(s) required, or may through contract or agreement arrange with an agency or agencies to provide such a program in its entirety. Component(s) obtained on this basis from an agency or agencies shall be subject to all applicable provisions of these rules and of chapter 71.05 RCW. The county will maintain coordination responsibility over the program.

Any contract or agreement between county and agencies, or between two or more agencies, shall be required to comply with the standards for evaluation and treatment components, WAC 275-55-263, and shall indicate

the department will consider those standards in the department's site visit and certification procedure as directed by WAC 275-55-293.

(2) In addition to the responsibilities specified, the following shall be required of the county or of such individual designated by the county as administrator of the evaluation and treatment program:

(a) To identify, recommend to the department for certification, and coordinate the various facilities and components of the evaluation and treatment program.

(b) To assist the department in ensuring facilities and components are in compliance with all applicable rules and regulations set forth in chapter 71.05 RCW and this chapter.

(3) Any agency desiring certification of a component or components in order to become an evaluation and treatment facility, shall make application for such to the county-designated administrator of the evaluation and treatment program.

(4) The department is responsible for certifying each component of an agency desiring to become an evaluation and treatment facility. Upon formal request of the county-designated administrator of the evaluation and treatment program, the department shall:

(a) Inspect and evaluate the applicant agency's component or components for certification in accordance with the provisions of WAC 275-55-293.

(b) In site visits for the purposes of certification will, where possible, include the county-designated administrator of the evaluation and treatment program as part of the site visit team.

(5) The department is responsible for making periodic inspections of a certified component. Such inspections may be in addition to any conducted by the county-designated administrator of the evaluation and treatment program.

(6) All facilities shall be recognized elements of the county's mental health plan. The plan shall list the agencies for which certification is requested, the components to be provided by each, the method whereby components will be coordinated among the several agencies when more than one agency provides evaluation and treatment services, and the method whereby the services of the facility will be coordinated with other elements of the county mental health program. (Reference RCW 71.24.130)

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-261, filed 3/11/82.]

WAC 275-55-263 Certification standards for evaluation and treatment program. (1) The following general requirements shall apply to any agency desiring certification as a component or components of the evaluation and treatment program:

(a) The spectrum of evaluation and treatment services provided by the agency shall include at least one of the following:

- (i) Outpatient.
- (ii) Emergency.
- (iii) Short-term inpatient.

(b) The agency may directly provide one or more of the components specified in subsection (1)(a) of this section, or may indirectly provide one or more through contractual arrangement or agreements with other agencies. Such arrangements shall be set forth in WAC 275-55-261(1).

(c) One or more of the components specified in subsection (1)(a) of this section may be provided to persons under the age of eighteen only when the providing agency is in compliance with the provisions of WAC 275-55-331.

(d) The agency shall maintain a written statement describing the organizational structure, objectives, and the philosophy of the therapeutic program, such statement to include contractual affiliates (if any).

(e) The agency shall document and otherwise ensure that:

(i) Care for patients is provided in a therapeutic environment.

(ii) Patient rights as described in WAC 275-55-211 and 275-55-241 are incorporated into this environment.

(iii) The use of the least restrictive treatment alternative is considered for each patient and such consideration is documented in each patient's clinical record.

(iv) Continuity of care, coordination, and integration of services is provided.

(v) Immediate transfer from the outpatient component to the inpatient or emergency component of the agency or of the evaluation and treatment program is provided for a patient when a change in the patient's condition necessitates such transfer. In the case of the involuntary patient, such transfer shall be made pursuant to RCW 71.05.340(3). Patients within any component can and will be transferred without unreasonable delay to any other component, and the patient's necessary clinical information will be made available to persons responsible for the patient's treatment within any other component. (Reference RCW 71.05.390.) In the event of a referral, the original agency will maintain responsibility for follow-up of the patient until such time as the receiving agency may assume primary service responsibility.

(vi) Referral services and assistance in obtaining supportive services appropriate to treatment including, but not limited to, community support services, vocational rehabilitation, and legal services, are provided to each patient.

(f) The agency desiring certification of the agency's component or components shall make application for such certification pursuant to WAC 275-55-261(3).

(2) In addition to the requirements specified for each in WAC 275-55-271, 275-55-281, and 275-55-291, the following general requirements shall apply to all facilities:

(a) Admissions. Admission to the inpatient component shall not be denied except under the following circumstances:

(i) There is a determination the person does not present a likelihood of serious harm, or an imminent likelihood of serious harm, or the person is not gravely

disabled, and does not require inpatient care. Reference RCW 71.05.190 for necessary action in this case.

(ii) The person requires specialized medical care and support services of a type not provided by the facility.

(iii) A greater degree of control is required than can be provided by the facility.

(iv) No treatment space is available and is so documented.

(v) A less restrictive alternative provided by another facility is more appropriate and available.

(vi) For situations arising pursuant to subsection (2)(a)(ii) through (iv) of this section, the county-designated mental health professional shall make arrangements for the most appropriate placement available.

(b) Admission evaluations. Within twenty-four hours of initial detention, to include Saturday, Sunday, and holidays, evaluations shall be conducted to determine the nature of the disorder, the treatment necessary, and whether or not detention is required. Such evaluations shall include at least a:

(i) Medical evaluation by a licensed physician.

(ii) Psychosocial evaluation by a mental health professional.

(c) Treatment plan and clinical record. All components shall:

(i) Maintain, for each patient, a plan of treatment, and a plan for discharge including a plan for follow-up where appropriate. Such treatment and discharge plans shall be entered in the patient's clinical record and shall be revised periodically as appropriate.

(ii) Maintain, for each patient, a clinical record containing sufficient information to justify the diagnosis, delineate the individual treatment plan, and document the course of treatment. The responsibility of the agency is to safeguard the record against loss, defacement, tampering, or use by unauthorized persons.

(d) Treatment. The evaluation and treatment program shall:

(i) Have available, as needed, professional personnel including, but not limited to, a licensed physician and a mental health professional skilled in crisis intervention.

(ii) Ensure each patient has access to necessary medical treatment and support services, and access to emergency life-sustaining treatment and medication.

(iii) Have psychiatric consultation available to other physicians or mental health professionals when treatment is not provided by or under the supervision of a psychiatrist.

(e) Use of restraints and seclusion. The use of medication, physical restraints, or locked seclusion rooms in response to assaultive, self-destructive, or unruly patient behavior shall occur only to the extent necessary to ensure the safety of patients and staff, and subject to the following conditions:

(i) In the event of an emergency use of restraints or seclusion, a licensed physician must be immediately notified and shall authorize the restraints or seclusion.

(ii) No patient may be restrained or secluded for a period in excess of four hours without having been examined by a mental health professional. Such patient

must be directly observed every thirty minutes, and the observation recorded in the patient's clinical record.

(iii) If restraint or seclusion exceeds twenty-four hours, patient shall be examined by a licensed physician. The facts determined by his or her examination and any resultant decision to continue restraint or seclusion over twenty-four hours shall be recorded in the patient's clinical record over the signature of the authorizing physician. This procedure must be repeated for each subsequent twenty-four hour period of restraint or seclusion.

(f) Periodic evaluation. Each involuntary patient shall be evaluated periodically for release from commitment, and such evaluation will be documented in each involuntary patient's clinical record.

(g) Training. All components shall develop an inservice training plan, and provide regular training to all personnel having responsibility for any aspect of patient care. Documentation of the type and amount of training received by staff members shall be maintained. Such training shall include information about:

(i) The availability and utilization of less restrictive alternatives.

(ii) Approved methods of patient care.

(iii) Managing assaultive and/or self-destructive behavior.

(iv) Related services, including, but not limited to, transportation, law enforcement, courts, prosecutors, caseworkers, family support systems, advocacy, pharmacotherapy, and hospitals.

(v) The provisions and requirements of this chapter and chapter 71.05 RCW, and standards and guidelines promulgated by the department.

(vi) Other appropriate subject matter.

(h) Administration. All components shall:

(i) Maintain written procedures for managing assaultive and/or self-destructive patient behavior, and assure staff has access to and are familiar with these procedures.

(ii) Maintain adequate fiscal accounting records.

(iii) Prepare and submit such reports as are required by the secretary.

(iv) Maintain a procedure for collection of fees and third-party payments.

(3) Whenever a component is also subject to licensure under other federal or state statutes or regulations, the more limiting or more specific standard shall apply.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-263, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-263, filed 3/11/82.]

WAC 275-55-271 Outpatient component. (1) The outpatient component is defined as a setting where evaluation and treatment services are provided on a regular basis to patients not in residence in the component. These services are intended to stabilize, sustain, and facilitate recovery of the individual within his or her living setting. Services may include, but are not limited to, day treatment and community support services provided directly by a licensed physician licensed pursuant to chapter 18.57 or 18.71 RCW, a psychologist licensed

pursuant to chapter 18.83 RCW, a psychiatric nurse licensed pursuant to chapter 18.88 RCW, or by an agency licensed pursuant to chapter 71.24 RCW and chapter 275-56 WAC.

(2) In addition to the general requirements stated in WAC 275-55-263(2), the following requirements shall apply to all outpatient components:

(a) Such component shall provide a therapeutic program including, but not limited to, generally accepted treatment modalities such as:

- (i) Individual.
- (ii) Group.
- (iii) Family/marital.
- (iv) Pharmacotherapy.

(b) Such component shall provide treatment to each patient under the supervision of a mental health professional.

(c) Each patient 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 such review must be recorded in the patient's clinical record. The frequency of patient contact and case review may be modified if in the opinion of a mental health professional such is warranted and the reasons for so doing are recorded in the patient's clinical record.

(d) 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 forty hours of direct client services provided by nonmedical staff.

(e) Such component shall include medical consultation with the involuntary patient to assess and prescribe psychotropic medication to meet the needs of the patient. Such consultation shall occur at least weekly during the fourteen-day period, and monthly during the ninety-day period and the one hundred eighty-day period of involuntary treatment unless determined otherwise by the attending physician and the reasons for so doing are recorded in the patient's clinical record.

(f) Whenever possible, medication should be made available to the patient at a reduced rate through a state medication purchase contract, or through the state hospital pharmacy.

[Statutory Authority: RCW 71.05.560, 84-03-035 (Order 2065), § 275-55-271, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-271, filed 3/11/82.]

WAC 275-55-281 Emergency component. (1) The emergency component is defined as a hospital emergency room or another setting where prompt therapeutic intervention occurs. The term "emergency" refers to a set of circumstances (physiological, psychological, and/or social) posing an imminent threat to the safety and/or well-being of the patient or others.

(2) In addition to the general requirements stated in WAC 275-55-263(2), the following requirements shall apply to all emergency components:

(a) Such component shall have the ability to respond promptly to individual crisis situations, and to arrange for admission to an inpatient component on a twenty-four-[hour-per-day, seven-day-per-week basis].

(b) Such component shall have the capability to detain persons dangerous to self, dangerous to others, or gravely disabled.

(c) Such component shall have immediate access to life support systems and emergency medical services. A mental health professional and/or licensed physician shall be available for consultation and communication with the patient and the component staff on a twenty-four-hour-per-day, seven-day-per-week basis.

[Statutory Authority: RCW 71.05.560, 84-03-035 (Order 2065), § 275-55-281, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-281, filed 3/11/82.]

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 275-55-291 Short-term inpatient component.

(1) The inpatient component is a hospital or residential setting where an array of treatment services is provided on a twenty-four-hour-per-day basis for patients on seventy-two hour detentions or fourteen-day commitments.

(2) In addition to the general requirements stated in WAC 275-55-263(2), the following requirements shall apply to all inpatient components:

(a) The inpatient component shall meet the standards required for state licensing as a psychiatric hospital, general medical hospital, skilled nursing facility, intermediate care facility, or residential treatment facility.

(b) Such component shall have the capability to admit the patient on a twenty-four-hour-per-day, seven-day-per-week basis.

(c) Such component shall have the capability to detain persons dangerous to self, others, or gravely disabled, and shall provide or have access to at least one seclusion room meeting the requirements of WAC 248-18-001(65) now or as hereafter amended.

(d) Such component shall provide a therapeutic program including, but not limited to, generally accepted treatment modalities such as:

- (i) Individual.
- (ii) Group.
- (iii) Family/marital.
- (iv) Pharmacotherapy.
- (v) Therapeutic community.

(e) Such component shall provide treatment to each patient under the supervision of the professional person in charge.

(f) A mental health professional must have contact with each involuntary patient daily for the purpose of observation, evaluation, and the provision of continuity of treatment.

(g) Such component shall have access to a mental health professional and a licensed physician for consultation and communication with the patient and the

component staff on a twenty-four-hour-per-day, seven-day-per-week basis.

(h) Such component shall periodically evaluate each involuntary patient for conditional release, and such evaluation shall be documented in each involuntary patient's clinical record.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-291, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-291, filed 3/11/82.]

WAC 275-55-293 Certification procedure--Waivers--Provisional certification--Renewal of certification.

(1) In order to certify an agency's component or components, the department shall:

(a) Receive a formal request from the county-designated administrator of the evaluation and treatment program; and

(b) Conduct a site visit of the component or components including an inspection and examination of any records, procedures, materials, areas, programs, staff, and patients necessary to determine compliance with WAC 275-55-263, and the appropriate sections of WAC 275-55-271 through 275-55-331.

(2) The department shall issue full certification to a component only if the component is in full compliance with the applicable sections of this chapter.

(3) Variances from a rule may be granted by the department in the form of a waiver, pursuant to the provisions of WAC 275-55-371.

(4) Provisional certification may be granted by the director to a component or components which are in substantial compliance with the applicable sections of this chapter. Such provisional certification shall specify the number and type of deficiencies temporarily allowed and the length of provisional status.

(5) Renewal of certification is required at least every other year, and may require a complete site visit of the component or components as specified in subsection (1)(b) of this section.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-293, filed 1/13/84; 83-03-010 (Order 1935), § 275-55-293, filed 1/12/83; 82-07-024 (Order 1775), § 275-55-293, filed 3/11/82.]

WAC 275-55-295 Decertification. The department may decertify any component in accordance with the provisions of RCW 71.05.540 (4) and (5), guidelines promulgated and procedures for investigation of complaints set forth by the director.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-295, filed 3/11/82.]

WAC 275-55-297 Appeal procedure. (1) Any agency whose component or components have been denied certification, or have been decertified by the department may appeal such a decision.

(2) Such appeal shall:

(a) Be made in writing;

(b) Specify the date of the decision being appealed;

(c) Specify clearly the issue to be reviewed;

(d) Be signed by, and include the address of the agency;

(e) Be made within thirty days of notification of the decision being appealed.

(3) An appeal on decisions should be made in accordance with the Administrative Procedure Act, chapter 34.04 RCW.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-297, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-297, filed 3/11/82.]

WAC 275-55-301 Alternatives to inpatient treatment. In considering all petitions for involuntary commitments to inpatient treatment as to whether the patient's presenting problem is appropriate for care and treatment, the professional person in charge of the inpatient component shall explore less restrictive alternatives, including possible outpatient or residential treatment, and shall consider possible better, or equal treatment elsewhere, preferably within the patient's home community.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-301, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-301, filed 3/11/82.]

WAC 275-55-331 Requirements for evaluation and treatment facilities serving minors. (1) The requirements for certification of components of evaluation and treatment facilities admitting minors shall be as specified in WAC 275-55-263 and in other applicable sections of this chapter, and shall include, but are not limited to, the following:

(a) The admission evaluation specified in WAC 275-55-263 (2)(b) shall include assessment of factors possibly contributing to the emotional dysfunctioning of the minor, such as family dynamics, environmental influences, or interactions with other significant persons.

(b) Family therapy shall be available, and shall be provided as needed.

(c) Treatment plans for minors shall include attention to the educational, developmental, legal, and other social service needs of minors, as appropriate.

(2) In general, adults and minors shall be provided services separate from one another, wherever possible. Joint use by adults and minors of a facility's inpatient services is permitted only if the minor's clinical record contains documentation that:

(a) The anticipated effects of such joint use on the minor have been considered by the professional staff, and

(b) A professional judgment has been made that such joint use will not be deleterious to the minor.

(3) No minor shall be placed on an adult inpatient unit unless no other alternative is available, or an emergency exists, and documentation has been made pursuant to subsection (2) of this section.

(4) Evaluation and treatment services provided to minors shall be provided by:

(a) A child mental health specialist (as defined by WAC 275-25-710(3)), or

(b) A mental health specialist (as defined by WAC 275-25-710(1)) directly supervised by a child mental health specialist, or

(c) A mental health specialist receiving at least one hour per week of clinical consultation from a child mental health specialist for each involuntarily detained minor provided direct client services during the week.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-331, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-331, filed 3/11/82.]

WAC 275-55-341 Use of restraints and seclusion by agency not certified as an evaluation and treatment facility. An agency not certified as an evaluation and treatment facility pursuant to WAC 275-55-263, or not covered by other appropriate statutes or regulations, may use restraints and seclusion only as specified in WAC 275-55-263 (2)(e).

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-341, filed 3/11/82.]

WAC 275-55-351 Research. All research concerning mentally ill persons, whose cost of care is paid for by the department and who are voluntarily admitted or involuntarily committed under this chapter or involving disclosure of personal records shall be undertaken in accordance with department rules on the protection of human research subjects as specified in chapter 388-10 WAC. 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.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-351, filed 3/11/82.]

WAC 275-55-361 Involuntary evaluation and treatment costs--Responsibility of involuntary patient. (1) Any person, or his or her estate, or his or her spouse, or the parents of a minor becoming an involuntary patient pursuant to chapter 71.05 RCW shall be responsible for the cost of such evaluation and treatment. (Reference RCW 71.05.100) Payment of such costs by the involuntary patient, or on behalf of the involuntary patient by third-party payors, or other legally responsible persons or entities shall be made to:

(a) The state in instances where evaluation and treatment is provided in a facility maintained and operated by the department, pursuant to RCW 71.02.411.

(b) The local agency in instances where evaluation and treatment is provided by the agency and the agency is not a facility maintained and operated by the department.

(2) In instances where inability to pay or substantial hardship is determined for an involuntary patient pursuant to WAC 275-55-363(4), any unpaid costs for evaluation and treatment provided to such involuntary patient by a nondepartment agency shall be borne by the department, subject to the provisions of WAC 275-55-363, and 275-55-365.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-361, filed 3/11/82.]

WAC 275-55-363 Involuntary evaluation and treatment costs--Collection by agency. (1) Definitions. For the purposes of this section:

(a) "Involuntary patient" is as defined by WAC 275-55-020(18).

(b) "Title XIX" means Title XIX of the Social Security Act.

(c) "CSO" means community services office of the department.

(2) Collection of costs for evaluation and treatment provided an involuntary patient by an agency not operated and maintained by the department shall be the responsibility of the agency. Such agency shall make reasonable efforts to make such collection pursuant to the agency's own regulations and policies. Such effort shall also include, but is not limited to, billing all appropriate resources of the involuntary patient and the patient's family, third-party payors, and other legally responsible persons and entities.

(3) Any involuntary patient not having private insurance to cover his or her costs, not already eligible for Title XIX or other state or federal assistance for his or her costs, or not otherwise paying for his or her evaluation and treatment costs, shall be referred by the agency providing the inpatient component to a local CSO for determination of eligibility for Title XIX benefits. If such patient is determined so eligible by the CSO, the agency shall bill according to the instructions set forth by the department.

(4) In the case of any involuntary patient not eligible for Title XIX benefits the agency providing the inpatient component shall determine the amount, if any, the patient should participate in the treatment costs. Such participation shall be in accordance with department instructions as set forth in the applicable mental health division issuance. Physicians, community mental health centers and other agencies not providing inpatient care are not required to make this patient participation calculation.

(5) The agency may bill the department for the balance of costs not collectable by actions taken in accordance with subsections (2), (3), and (4) of this section and not recoverable by any other means or from any other sources. Such billing shall be subject to the following:

(a) Reimbursement is sought through the appropriate county as defined by WAC 275-55-365(1). All bills shall be verified by the county or the county's designee before forwarded by the county to the department for payment.

(b) Certification is made by the agency that every reasonable effort has been made to collect payment from all appropriate resources of the involuntary patient and the patient's family, third-party payors, and other legally responsible persons and entities prior to submitting a claim through the county. This would include, where appropriate, referral to a CSO for medicaid eligibility determination.

(c) Any collections made prior to such billing shall be shown and deducted from such billing. Any collections

made subsequent to such billings shall be submitted to the department.

(6) In the event an involuntary patient is determined by the agency or by the local CSO (in instances where such patient had been referred for eligibility determination) to be fully capable of paying for his or her evaluation and treatment services, and such patient refuses to do so, the agency shall have primary responsibility for collection of costs and shall not expect the department to reimburse the agency for any uncollected balance, except as stated in the applicable mental health division issuance.

(7) The agency shall maintain appropriate records and other supporting material necessary to document billings and collection of costs for evaluation and treatment provided any involuntary patient, and shall permit authorized representatives of the county and/or the department to make such review of the records of the agency as may be deemed necessary to satisfy audit purposes. Such review shall be restricted to records for involuntary patients only.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-363, filed 3/11/82.]

WAC 275-55-365 Involuntary evaluation and treatment costs—Responsibility of county. (1) All requests for reimbursement shall be made through the county of detention which shall review and approve requests pursuant to the following:

(a) The person being billed for was in fact an involuntary patient for the period of evaluation and treatment specified.

(b) The date of initial detention is indicated.

(c) Date of the seventy-two hour (probable cause) hearing is indicated.

(d) Date of conversion to voluntary patient status is shown (if appropriate).

(e) Date of release, transfer or discharge is shown.

(f) Days allowed by an approved extension request are shown (if appropriate).

(g) The "patient participation" calculation is shown on inpatient facility invoices, or the patient is shown to be eligible for medicaid or LCP-MI.

(h) If insurance coverage is indicated, such coverage collections have been deducted.

(2) All reimbursement payments for evaluation and treatment costs for involuntary patients shall be made directly to the service-providing agency.

(3) No payments will be made to agencies not certified pursuant to WAC 275-55-263, and not a part of a county's evaluation and treatment program pursuant to WAC 275-55-261, except in the case of licensed physicians.

(4) The counties shall maintain appropriate records and other supporting material necessary to document related administrative costs, and shall submit such reports as the department shall request and shall permit authorized representatives of the department to make such review of records as may be deemed necessary to satisfy audit purposes.

[Statutory Authority: RCW 71.05.560, 82-07-024 (Order 1775), § 275-55-365, filed 3/11/82.]

WAC 275-55-367 Involuntary evaluation and treatment costs—Responsibility of department. (1) In instances where an involuntary patient is unable to pay any or all of the costs of evaluation and treatment from all of the personal, family when legally responsible, or third-party payor resources available to him or her as required by WAC 275-55-361, or if payment would result in substantial hardship upon such patient or his or her family, the department shall be responsible for paying any uncollected balance of such costs, as set forth in the applicable mental health division issuance, except costs for which the CSO has determined the patient should continue to be liable.

(2) The department shall reimburse the counties for increased administrative costs, if any, resulting from implementation of the provisions of the 1973 Involuntary Treatment Act. Additional costs to the counties shall be reimbursed in accordance with the following rules, subject to the availability of state and federal funds.

(3) For all increased involuntary commitment administrative costs, the department shall award an amount to the counties to pay such costs pursuant to RCW 71.05-.550. "Increased costs" as used here shall mean costs exceeding the level financed by the county for calendar year 1973, resulting from implementation of the provisions of the 1973 involuntary treatment act, and subsequent amendments.

(a) Involuntary commitment administrative costs are for services not listed under the Title XIX modality schedule. Such costs include:

(i) All travel and transportation expenses, whether for staff or involuntary patients;

(ii) All investigative costs not otherwise recoverable as a Title XIX listed service;

(iii) Expenses for hearings, testimony, legal services, courts, and prosecutors; and

(iv) The percentage of total staff time of the county mental health coordinator and agency administrative staff allocated to and expended in the involuntary commitment process.

(b) State funds shall in no case be used to replace local funds from any source used to finance administrative costs for involuntary commitment procedures conducted prior to January 1, 1974.

(4) For the evaluation and treatment provided each and every involuntary patient by a qualifying agency, the department shall reimburse the agencies in the amount of the actual expenditures incurred pursuant to this chapter and applicable departmental instructions. Such reimbursement by the department shall not exceed the Title XIX rate and shall not be allowed for any costs already reimbursed by other means. Such reimbursement by the department shall cover the following involuntary evaluation and treatment statuses only:

(a) Emergency component services for individuals where a petition for initial detention is filed under RCW 71.05.160 within twelve hours of admission to that component.

(b) Initial detention period including Saturdays, Sundays, holidays and up to three judicial days.

(c) Fourteen-day period, including any involuntary outpatient treatment or less restrictive placement recommended by agency staff for the remainder of this period. Reimbursement beyond this fourteen-day period shall require approval from the department consistent with the applicable mental health division issuance.

(d) Conditional release effected pursuant to the applicable provisions of this chapter and chapter 71.05 RCW. Reimbursement shall be restricted to the initial seven-day period.

(e) Conversion to voluntary status. Reimbursement shall be restricted to inpatient or outpatient services provided during the initial seventeen-day period, regardless of the day within that period the involuntary patient converts to voluntary status.

(5) The department may withhold department reimbursement in whole or in part from any county or agency in the event of a failure to comply with the provisions of this chapter.

[Statutory Authority: RCW 71.05.560. 82-07-024 (Order 1775), § 275-55-367, filed 3/11/82.]

WAC 275-55-371 Exceptions to rules—Waivers. Any person or agency subject to the provisions of this chapter may seek a waiver of any requirement of this chapter, as set forth in this section.

(1) The applicant shall file an application for a waiver with the director.

(2) Any application for a waiver from any person or agency shall state, in writing, the following:

(a) The name and address of the person or agency seeking the waiver;

(b) The specific section or subsection of this chapter sought to be waived, and the specific practice or procedure required by such section or subsection;

(c) An explanation of why a waiver of the section or subsection is necessary;

(d) The variance the applicant proposes to follow in lieu of that required by the section or subsection;

(e) A plan and timetable for compliance with the section or subsection for which the waiver is sought; and

(f) Signed documentation from the county-designated administrator of the evaluation and treatment program indicating the proposed waiver has been reviewed and what degree of support has been extended.

(3) The director shall grant or deny the waiver in writing, and shall so notify the applicant. This notice shall be given the applicant within sixty days of receipt of the original application by the director.

(a) If the waiver is granted, the notice shall include:

(i) The section or subsection waived;

(ii) Any conditions with which the applicant must comply;

(iii) The duration of the waiver, in no case to exceed one year from the date the waiver is granted;

(iv) The reason why the waiver is considered necessary.

(b) If the waiver is denied, the notice shall include reasons for the decision.

(4) Appeal of the denial of a waiver request shall be made in accordance with the Administrative Procedure Act, chapter 34.04 RCW.

(5) Requirements prescribed by chapter 71.05 RCW and other legislation are not subject to waiver by the director.

(6) A waiver granted by the director shall be attached to and become part of the county plan.

[Statutory Authority: RCW 71.05.560. 84-03-035 (Order 2065), § 275-55-371, filed 1/13/84; 82-07-024 (Order 1775), § 275-55-371, filed 3/11/82.]

Chapter 275-56 WAC

COMMUNITY MENTAL HEALTH PROGRAMS

WAC

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275-56-450	Community support services—Record of community support services.
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WAC 275-56-005 Purpose and authority. Chapter 275-56 WAC establishes rules and regulations for county administration of community mental health programs, licensing service providers, information, accountability, contracts and services. Chapter 275-56 WAC is adopted under authority of chapter 71.24 RCW.

(1) Chapter 275-56 WAC enables participation in the community mental health system by service providers which are profit or nonprofit businesses, private or public businesses, individuals or partnerships, as well as corporations. A provider may contract with a county for one or more services defined by chapter 71.24 RCW.

(2) The rules and regulations of county administration are specified in two areas:

(a) County administration and planning (WAC 275-56-020 through 275-56-060), and

(b) County fiscal administration (WAC 275-56-065 through 275-56-085).

(3) Minimum standards for licensing service providers are specified in four areas:

(a) Licensing procedures (WAC 275-56-090 through 275-56-105);

(b) Organizational administration of the provider, including (WAC 275-56-110 through 275-56-215):

(i) Administration;

(ii) Provider fiscal administration;

(iii) Personnel management;

(iv) Quality assurance;

(v) Program evaluation;

(vi) Facilities.

(c) Services administration, including (WAC 275-56-220 through 275-56-330):

(i) Accessibility and awareness of services;

(ii) Client rights;

(iii) Client entry, service planning, and service operations;

(iv) Client records.

(d) Services, including (WAC 275-56-335 through 275-56-445):

(i) Emergency services, including preadmission screening services;

(ii) Outpatient services;

(iii) Day treatment services;

(iv) Consultation and education services;

(v) Community support services.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-005, filed 4/7/83.]

WAC 275-56-010 Priority populations. Chapter 275-56 WAC establishes rules, regulations, and standards for community mental health programs providing for:

(1) Access to mental health services for residents of the state of Washington who, in priority order, are:

(a) Acutely mentally ill;

(b) Chronically mentally ill;

(c) Seriously disturbed.

(2) Mental health services recognizing the special needs of underserved groups within the priority populations, including:

- (a) Minorities,
- (b) Children,
- (c) Elderly,
- (d) Disabled, and
- (e) Low-income persons.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-010, filed 4/7/83.]

WAC 275-56-015 Definitions. For the purposes of the rules, regulations, and standards of chapter 275-56 WAC, the following words and phrases shall have the following meaning:

(1) "Acutely mentally ill" means a condition limited to a short-term severe crisis episode of:

- (a) A mental disorder as defined in this chapter;
- (b) Being gravely disabled as defined in this chapter;

or

(c) Presenting a likelihood of serious harm as defined in this chapter.

(2) "Available resources" means funds appropriated by the legislature during any biennium for the purpose of providing community mental health programs.

(3) "Case management" means assistance to the client and family or significant others to obtain, maintain or develop an appropriate place for the client in the community. This service involves assistance in obtaining the full range of needed services, routine monitoring, supervision of client's functioning, and establishing and maintaining support for the client and his or her family or significant others.

(4) "Child" or "children" means a person or persons under eighteen years of age.

(5) "Chronically mentally ill" means a person having a mental disorder and meeting at least one of the following criteria:

(a) Has undergone two or more episodes of hospital care for a mental disorder within the preceding two years;

(b) Has experienced a continuous psychiatric hospitalization or residential treatment exceeding six months duration within the preceding year; or

(c) Has been unable to engage in any substantial gainful activity by reason of any mental disorder which has lasted for a continuous period of not less than twelve months.

(6) "Clients" means persons, couples or families receiving clinical, coordinative, or supportive services.

(7) "Clinical staff member" means a regularly employed or contracted staff member or supervisor engaged to any extent in providing direct evaluative, diagnostic, or therapeutic services to clients. The term does not include volunteers or students.

(8) "Community mental health program" means the total mental health program established by a county or group of counties acting in combination for the purpose of providing mental health services in accordance with the Community Mental Health Services Act, chapter 71.24 RCW.

(9) "Community Mental Health Services Act" means chapter 71.24 RCW.

(10) "Community support services" means those services for acutely and chronically mentally ill persons which include:

(a) Discharge planning for clients leaving state hospitals and other acute care inpatient facilities;

(b) Sufficient contacts with clients, family or significant other to provide for an effective program of community maintenance; and

(c) Medication monitoring.

(11) "Consultation" means review and recommendations regarding the job responsibilities, activities, or decisions of administrative, clinical, or clerical staff, contracted employees, volunteers, or students by a person or persons with appropriate knowledge and experience to make such recommendations. This definition does not constitute a definition of consultation and education.

(12) "Consultation and education services" means those services provided to assist others in the community to understand and care for acutely and chronically mentally ill and seriously disturbed persons and includes:

- (a) Consultation to other community providers, and
- (b) Educational and public information services.

(13) "County authority" means the board of county commissioners, county council or county executive having the authority to establish a community mental health program.

(14) "Crisis" means a situation where, because of severe internal or external stresses, a person is experiencing serious disruption in cognitive, volitional, psychosocial or physiological functioning.

(15) "Day treatment services" means those services for mentally ill persons which include training in basic living and social skills, supported work, vocational rehabilitation, day activities, and may include therapeutic treatment.

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

(17) "Direct treatment services" means clinical services provided directly to clients to meet the client's mental health needs, as distinct from activities conducted with other persons, organizations, or groups on behalf of clients, and also as distinct from supervisory, consultative or training activities conducted with regard to clients or services.

(18) "Disabled" means a developmentally disabled person or one with serious physical or sensory impairment.

(19) "Elderly" means a person sixty years of age or older.

(20) "Emergency" means a situation where there is likelihood of serious harm to the person, other persons or property resulting from the actions or threatened actions of a mentally ill person, or when the person is gravely disabled.

(21) "Emergency services" means those responses and intervention services provided to persons experiencing mental health emergencies or crises and include:

- (a) Twenty-four hour telephone service;

- (b) Twenty-four hour outreach services;
- (c) Crisis resolution services; and
- (d) Preadmission screening services.
- (22) "Governing body" means the final decision-making body for a provider.
- (23) "Gravely disabled" means a condition where a person, as a result of a mental disorder:
 - (a) Is in danger of serious physical harm resulting from a failure to provide for his or her essential human needs of health or safety; or
 - (b) Manifests severe deterioration in routine functioning evidenced by repeated and escalating loss of cognition or volitional control over his or her actions and is not receiving such care as is essential for his or her health or safety.
- (24) "Material adjustment" means a budget revision equaling ten percent of a cost center.
- (25) "Mental disorder" means any organic, mental, or emotional impairment having substantial adverse effect on an individual's cognitive or volitional functions.
- (26) "Mental health services" means those services required pursuant to chapter 71.24 RCW, including:
 - (a) Emergency services, including screening for patients being considered for admission to state hospitals;
 - (b) Outpatient services;
 - (c) Day treatment;
 - (d) Consultation and education services; and
 - (e) Community support services.
- (27) "Mentally ill persons" and "the mentally ill" means a person or condition defined in this chapter as:
 - (a) Acutely mentally ill;
 - (b) Chronically mentally ill; or
 - (c) Seriously disturbed.
- (28) "Minority" or "ethnic minority" means any of the following general population groups:
 - (a) American Indian or Alaskan native,
 - (b) Asian or Pacific Islander,
 - (c) Black, or
 - (d) Hispanic.
- (29) "Outpatient services" means those services provided in less than a residential or day treatment setting for clients whose dysfunction is not so severe as to need such intense or restrictive service. Outpatient services may include, but are not limited to, evaluation, diagnosis, psychotherapy, medication management, and activities therapy.
- (30) "Preadmission screening services" means those services provided for clients being considered for voluntary admission to state hospitals to determine the appropriateness of admission and availability of alternatives.
- (31) "Properly executed accounting documents" means accounting documents processed in a manner consistent with provider policies and procedures and providing sufficient and adequate documentation for an audit of the agency's financial transactions.
- (32) "Provider" means licensed service provider as defined in chapter 71.24 RCW.
- (33) "Secretary" means the secretary of the department of social and health services.
- (34) "Seriously disturbed person" means a person who:

(a) Is gravely disabled or presents a likelihood of serious harm to self or others as a result of a mental disorder as defined in chapter 71.05 RCW;

(b) Has been on conditional release status at some time during the preceding two years from an evaluation and treatment facility or a state mental health hospital;

(c) Has a mental disorder which causes major impairment in several areas of daily living;

(d) Exhibits suicidal preoccupation or attempts; or

(e) Is a minor child diagnosed by a mental health professional as defined in RCW 71.05.020, as experiencing a mental disorder which is clearly interfering with the child's functioning in family or school or with peers or is clearly interfering with the child's personality development and learning.

(35) "Substantial gainful activity" is work that involves significant physical or mental activities done for pay or profit.

(36) "Supervision" means regular or occasional oversight of the administrative, clinical or clerical work performance of staff, students, volunteers or contracted employees by person or persons with the authority to give direction and require change.

(37) "Training" means planned educational events or activities designed to instill or enhance skills and to increase knowledge.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-015, filed 4/7/83.]

WAC 275-56-020 County administration and planning--Biennial mental health needs assessment. The county authority shall submit to the department a biennial mental health needs assessment.

(1) A biennial needs assessment of residents of the county who are acutely mentally ill, chronically mentally ill, or seriously disturbed, including minorities, children, elderly, disabled, and low-income groups in these priority populations shall be prepared for submittal to the state. The biennial needs assessment shall determine need with respect to mental health services required by the Community Mental Health Services Act.

(2) The biennial needs assessment will include:

(a) Estimates of the type and extent of significant mental health needs of the mentally ill, including estimates of the number of chronically mentally ill persons, seriously disturbed persons, and acute crises occurring in the county during the biennium.

(b) A projection of the amount and type of mental health services necessary to meet identified mental health needs of the acutely mentally ill, chronically mentally ill, and seriously disturbed.

(c) Identification of public and private resources available to meet the mental health needs of the acutely mentally ill, chronically mentally ill, and seriously disturbed, including:

(i) Identification of licensed service providers in the county.

(ii) Assessment of the capability of the current mental health program and providers to meet the needs of the mentally ill.

(d) A prioritization of unmet needs for the mentally ill.

(3) The biennial needs assessment shall be conducted in accordance with department guidelines for needs assessment.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-020, filed 4/7/83.]

WAC 275-56-025 County administration and planning--Biennial mental health plan and budget. The county authority shall submit to the department a biennial mental health plan and budget.

(1) The biennial plan shall address the needs identified in the biennial needs assessment for the acutely mentally ill, chronically mentally ill, and seriously disturbed, including minorities, children, elderly, disabled, and low-income groups in these priority populations. The biennial plan shall be developed based on available resources and priorities established in the biennial needs assessment.

(2) The biennial plan shall include the following components:

(a) A plan narrative identifying needs to be met, goals and objectives, an action plan for coordination and delivery of mental health services, and program development activities related to needs and priorities identified in the biennial needs assessment. The plan narrative shall include all mental health services required by the Community Mental Health Services Act and may include optional services.

(b) A budget identifying revenues and expenditures for mental health services, program development activities, and administration of the mental health program and services. The budget will be submitted in accordance with the requirements specified in WAC 275-56-070.

(3) The biennial plan shall be developed in accordance with the planning guidelines of the department.

(4) The secretary may modify deadlines for submission of plans, responses to written reviews or contract proposals when, in the secretary's judgment, the modification would enable the county to improve the program planning process.

(5) The secretary may authorize the county to continue providing services in accordance with the previous plan and contract, and reimburse at the average level of the previous contract, in order to continue services until the contract is executed.

(6) Any provider having applied to participate in the community mental health program who objects to county decisions regarding the biennial plan may request a hearing before the county authority. When an appeal is made, the county authority shall review the appeal and notify the provider, in writing, of the appeal disposition within thirty days after the appeal has been received.

(7) Any county objecting to the department's disposition of the county's biennial plan may request an administrative review pursuant to the Administrative Procedure Act, chapter 34.04 RCW.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-025, filed 4/7/83.]

WAC 275-56-030 County administration and planning--Availability and accessibility of required mental health services for acutely mentally ill, chronically mentally ill, and seriously disturbed persons. The biennial plan shall indicate how required mental health services are to be made available and accessible to the acutely mentally ill, chronically mentally ill, seriously disturbed including underserved groups within the priority populations, and may include optional services for these populations.

(1) The following mental health services shall be available to acutely mentally ill, chronically mentally ill, and seriously disturbed persons in accordance with the priorities established in the biennial needs assessment:

(a) Emergency services including preadmission screening services;

(b) Outpatient services;

(c) Day treatment;

(d) Consultation and education services;

(e) Community support services for the acutely mentally ill and chronically mentally ill;

(f) Inpatient services (optional); and

(g) Residential services (optional).

(2) The biennial plan shall indicate how mental health services are to be made available to priority clients throughout the county.

(a) The plan shall indicate where services are to be located.

(b) The plan shall indicate how services shall be extended to mentally ill persons who, because of situation, age, or disability, cannot travel to facilities where mental health services are routinely provided.

(3) Mental health services shall be designed for, available and accessible to children, elderly, minorities, disabled, and low-income persons who are acutely mentally ill, chronically mentally ill or seriously disturbed. In counties where a significant ethnic minority exists, the county plan shall ensure that culturally relevant services are available and accessible to this population.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-030, filed 4/7/83.]

WAC 275-56-035 County administration and planning--Providers eligible for funding. The county authority shall ensure the biennial plan is inclusive of only licensed service providers.

(1) The county may become a provider under the following conditions:

(a) No other provider is available to provide the mental health services; and

(b) The county has demonstrated to the department that the county can provide the mental health services more efficiently and cost effectively than other available providers without loss of quality of care. Evidence that the county would be more efficient and cost effective than other available providers includes but is not limited to lower administrative costs, lower unit cost for comparable services, and higher productivity.

(2) Where the county is a licensed service provider of mental health services, the department shall meet the

following responsibilities of the county authority for the services:

(a) Contract monitoring of the provider (WAC 275-56-050).

(b) Fiscal auditing of the provider (WAC 275-56-085).

(c) Review an appeal of the provider (WAC 275-56-025(6)).

(3) If a county decides not to participate in the community mental health program, the department shall assume all responsibilities of the county authority for planning and administering mental health services in that county.

(4) Providers contracting with the county for mental health services shall be licensed by the department in accordance with state minimum standards for community mental health programs.

(5) Counties proposing to contract with more than one licensed provider shall demonstrate the following criteria are met:

(a) Continuity of care is assured;

(b) Services will be provided in an efficient and cost-effective manner; and

(c) Duplication of services and administrative costs are minimized.

(6) County contracts with individual providers licensed under chapters 18.57, 18.71, 18.83 or 18.88 RCW shall require all fiscal accountability and client tracking information as required in this chapter.

(7) The department shall determine standards in this chapter applicable to individual providers which shall be incorporated in the contracts with the individual providers.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-035, filed 4/7/83.]

WAC 275-56-040 County administration and planning—Biennial plan as a basis for contracting. The county authority shall utilize the biennial plan and budget as the basis for contracting.

(1) A work statement and budget shall be incorporated into the contract with the department.

(2) The contract between the county and the department shall serve as the basis for county contracts with providers.

(3) The county shall utilize standardized contract terms and conditions consistent with department guidelines for contracting and including requirements for at least the following:

(a) Reporting of revenue, expenditures, and statistical information on all mental health services provided to priority populations by the provider; and

(b) Compliance with minimum standards for community mental health programs.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-040, filed 4/7/83.]

WAC 275-56-050 County administration and planning—County monitoring of providers. The county authority shall be responsible for monitoring providers

which have contracted with the county to provide mental health services.

(1) The county authority shall evaluate, at least annually, each provider's compliance with its contract work statement.

(2) Each biennium, the county authority shall ensure a program audit of the provider is conducted in accordance with guidelines of the department.

(3) The county shall notify the department of any findings resulting from the county's monitoring of providers indicating that the provider is not in compliance with contract terms. The county shall submit a written report of program evaluations and audits to the department within thirty days of completion.

(4) The responsibilities specified in this section may be assumed by one county where a combination of counties have established a community mental health program, and the administration of the program is provided by one county.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-050, filed 4/7/83.]

WAC 275-56-055 County administration and planning—Client tracking information. The county authority shall be responsible for ensuring that client tracking information for the chronically mentally ill is maintained on the state mental health client tracking system. The state mental health client tracking system will be a centralized file which may be used by county authorities for tracking of the chronically mentally ill.

(1) The counties shall require all providers of service to the chronically mentally ill to collect and submit the following information:

(a) A department-designated client identifier enabling the person to be uniquely identified in any mental health service he or she receives.

(b) Name of the state hospital, certified evaluation and treatment facility, other inpatient or residential facility or licensed provider referring the client, and the date of referral.

(c) Identification of the facility or provider accepting the client upon referral from another facility or provider, including designation of the licensed provider providing case management services, if any.

(d) Service utilization in the community mental health program since the most recent date of referral or release from another facility or provider, including provider name and beginning and ending dates of treatment.

(2) The client tracking information shall be provided to the state client tracking system by state hospitals, certified evaluation and treatment facilities, other inpatient or residential facilities, county-designated mental health professionals (chapter 71.05 RCW), and licensed providers under contract to the county authority or department.

(a) Referring entities referenced in this section shall provide the department with client tracking information consistent with department guidelines on notification of client referral or release.

(b) Providers accepting a client referred from another facility or provider shall notify the state client tracking system of the outcome of the referral, and any subsequent referrals, transfers, or termination of the client.

(3) The confidentiality of information contained in the client tracking file or record shall be maintained in accordance with WAC 275-56-240 and RCW 71.05.390 through 71.05.440. All county or provider staff having access to the client tracking file or record shall be instructed in these confidentiality requirements. A statement signed by the individual acknowledging his or her understanding and agreement to abide by these requirements shall be kept on file by the county or provider.

(4) If a county authority chooses to maintain a client tracking system based on other than the state mental health client tracking system, prior approval by the department is required.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-055, filed 4/7/83.]

WAC 275-56-060 County administration and planning--County coordination of services. The county authority shall ensure coordination of services for the acutely mentally ill, chronically mentally ill, and seriously disturbed, including underserved groups within these priority populations. The county shall utilize information from the state client tracking system to coordinate community support and outreach services. The county may contract with and designate a provider to meet the requirements of this section.

(1) Service providers discharging or referring chronically mentally ill clients to another service provider shall provide written notification to the state mental health client tracking system and the receiving agency of that discharge or referral within seventy-two hours.

(2) The receiving agency shall notify the state mental health client tracking system of the admission of the referred client within seventy-two hours of the admission. If the client has not been admitted within two weeks of the referral date, the receiving agency shall notify the state mental health client tracking system of the noncompleted referral.

(3) The county authority or its designee shall utilize information from the state mental health client tracking system to ensure efforts are made to provide needed services to all chronically mentally ill persons referred to providers, inpatient, or residential facilities within the county. When the county or its designee receives notification of noncompleted or inappropriate referrals, the county or its designee shall determine and document the reasons and attempt to arrange an appropriate referral.

(4) The county shall utilize information from the state client tracking system to routinely monitor continuity of care for chronically mentally ill clients.

(5) The county shall at least annually utilize client tracking information to assess the effectiveness of referral patterns and procedures.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-060, filed 4/7/83.]

(1986 Ed.)

WAC 275-56-065 County fiscal administration--Disbursement of funds advanced by the department. The county authority shall be responsible for establishing procedures to ensure proper application and use of funds advanced by the department for the community mental health program. The county shall maintain adequate documentation of disbursements of the advance account to providers.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-065, filed 4/7/83.]

WAC 275-56-070 County fiscal administration--Submittal and approval of mental health budget. The county authority shall submit a mental health budget to the department for approval consistent with guidelines of the department.

(1) The county budget shall include all available resources from the department and county mental health funds. The budget shall categorize estimated revenues and expenses according to the department's budgeting, accounting, reporting system (BARS).

(2) The mental health budgets of all providers contracting with the county shall be on file with the county. Provider budgets shall include available resources and other revenues that will support mental health services for acutely mentally ill, chronically mentally ill, and seriously disturbed clients. The provider budget shall categorize estimated revenues and expenses according to the department's standardized accounting system.

(3) The county mental health budget and all material adjustments thereof shall be reviewed and formally approved by the county authority prior to review and approval by the department.

(4) All county or provider requests for federal funding to support any aspect of the community mental health program shall be submitted to the department for review and approval before the request is submitted to any federal agency.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-070, filed 4/7/83.]

WAC 275-56-075 County fiscal administration--Accounting records. County accounting records shall clearly identify all revenues received from the department and expenditures thereof consistent with the department's budgeting, accounting, reporting system (BARS).

Accounting records shall be supported by properly executed accounting documents. Records, supporting documentation and statistical reports shall be retained for a period of five years, with the following qualifications:

(1) If any litigation, claim, or audit is started before the expiration of the five-year period, the records shall be retained until all litigation, claims, or audit findings involving the records have been resolved.

(2) Records for nonexpendable property acquired with resources from the department shall be retained for five years after final disposition.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-075, filed 4/7/83.]

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WAC 275-56-080 County fiscal administration--Reports to and audits by the department. The county shall maintain financial records and provide the department with information on the fiscal performance of the community mental health program.

(1) An original and one copy of the financial report shall be submitted to the department on a semiannual basis consistent with guidelines of the department.

(a) The report shall account for all mental health funds included in the county's contract with the department.

(b) The report shall be due in the department within forty days following the end of each reporting period.

(2) All county records of mental health funds provided to the county by the department shall be maintained in an auditable format. These records shall be available for audit upon request by the department or the department's designated audit agent.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-080, filed 4/7/83.]

WAC 275-56-085 County fiscal administration--Biennial fiscal audit of providers. The county authority or designee shall be responsible for performing a biennial fiscal audit of each provider which is under contract to the county to provide mental health services.

(1) The biennial audit shall be conducted in accordance with applicable, generally accepted auditing standards (GAAS).

(2) Documentation shall verify that the reports of such audits have been reviewed by the governing body of the provider and the county authority.

(3) The biennial audit shall be completed within twelve months following the end of the department's biennium.

(4) The county shall notify the department of any audit findings indicating the provider is not in compliance with the county's contract or with minimum standards for community mental health programs.

(5) The county may use an independent audit secured by the provider to meet the requirements of the biennial county audit.

(6) Where available resources from the department can be separated from other revenues of the provider, the audit shall apply only to available resources. Otherwise the county shall perform a biennial fiscal audit of all revenues of the provider.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-085, filed 4/7/83.]

WAC 275-56-090 Licensing procedures for providers--Applicability of minimum standards for community mental health programs. Providers (excluding individual providers licensed under chapter 18.57, 18.71, 18.83 or 18.88 RCW) shall be licensed by the department before entering into a contract with the county to provide mental health services.

(1) A provider contracting with the county for all services required by the Community Mental Health Services Act shall meet all minimum standards for

organizational administration, services administration, and services in this chapter.

(2) Where the provider contracts with the county for some but not all of the required mental health services, the department shall determine the minimum standards applicable to the provider and the contracted services.

(3) Where a provider is part of a superordinate structure (e.g., county, hospital, university), the standards shall apply only to the community mental health component of that structure.

(4) Where a provider is able to separate contracted mental health services for the acutely mentally ill, chronically mentally ill, and seriously disturbed from mental health services provided other client populations, organizational administration, services administration, and services standards shall apply only to the contracted services. The provider shall demonstrate to the department's satisfaction that the contracted services are distinct from other services with respect to the following:

- (a) Budget, revenues, and expenditures,
- (b) Staffing,
- (c) Clients served, and
- (d) Identification in the organizational structure.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-090, filed 4/7/83.]

WAC 275-56-095 Licensing procedures for providers--Application and approval. The department shall review applications for licensure and approve those which meet minimum standards for community mental health programs.

(1) Applications for licensure shall be submitted to the department on forms furnished by the department. The applicant shall indicate the services for which licensure is requested.

(a) Applications shall be signed by the applicant's governing body and administrator.

(b) The applicant shall send a copy of the application to the county authority or the designee. The county authority or the designee may review the application and send written comments to the department with a copy to the applicant. If the department does not receive a response from the county authority or the designee within thirty days, the department shall proceed with the application.

(2) An on-site review shall be conducted for the purpose of collecting and analyzing the information necessary for the department to determine whether a provider is in compliance with the minimum standards specified in this chapter. The department shall provide forty-five days written notice prior to the date scheduled for the licensure review.

(3) The department shall notify the applicant of the results of the review and make the report of the on-site review available to the applicant and county authority within sixty days of the last day of the on-site review.

(4) The applicant may appeal the department's licensure decision within thirty days of notification of decision. The appeal shall be made in accordance with the Administrative Procedure Act, chapter 34.04 RCW.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-095, filed 4/7/83.]

WAC 275-56-100 Licensing procedures for providers--Waiver of rules. Any provider or applicant subject to the provisions of this chapter may seek a waiver of any requirement of this chapter.

(1) The provider or applicant shall file a written request for a waiver with the department which shall include:

(a) The name and address of the provider or applicant seeking the waiver;

(b) The specific section or subsection of this chapter for which waiver is sought;

(c) An explanation of why a waiver of the section or subsection is necessary;

(d) A description of the alternative practice or procedure the provider proposes to follow in lieu of that required by the section or subsection, or a plan for satisfying the requirement with the section or subsection for which the waiver is sought; and

(e) Signed documentation from the county authority or designee reviewing the waiver including recommendations regarding the request.

(2) Upon receipt of a request for waiver, the department shall consider the following:

(a) Impact on accountability, efficiency, and quality of care;

(b) The degree of noncompliance being sought;

(c) Whether the waiver would run counter to the intent of chapter 71.24 RCW or other laws or regulations; and

(d) Whether any similar requests for waiver have been granted or denied.

(3) The department's response to the waiver request shall be provided in writing within sixty days of receipt of the request.

(a) If the waiver is granted, the notice shall include:

(i) The section or subsection waived;

(ii) Any conditions which the applicant must comply with;

(iii) The duration of the waiver which shall in no case exceed two years from the date of the licensure; and

(iv) That the waiver shall be subject to review and possible renewal, if requested.

(b) If the waiver request is denied, the notice shall include reasons for the decision.

(4) The denial of a waiver request may be appealed to the secretary, whose decision shall be final.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-100, filed 4/7/83.]

WAC 275-56-105 Licensing procedures for providers--Licensure status. The department shall, based on findings of a licensure review, assign the provider one of the following licensure statuses:

(1) Licensed

(a) Under this status the provider is eligible to enter into a contract with the county authority to provide those mental health services for which the provider is licensed.

(b) The department may require the provider to submit and implement a plan of correction to resolve deficiencies. The department may revoke the license if the provider does not implement the provider's plan of correction.

(c) At any time the department receives information indicating the provider has not continued to comply with minimum standards for community mental health programs, the department may conduct a new licensure review.

(d) The department may revoke the license if the review determines the provider is not in substantial compliance.

(e) If evidence indicates that the health and safety of the client is in danger, the revocation may be made effective immediately.

(2) Interim licensure

(a) Interim licensure shall be given to all providers contracting with a county authority to provide mental health services as of the effective date of this chapter.

(b) Interim licensure shall remain in effect until notification of licensure status resulting from the department's first licensure review of the provider or until two years following the effective date of this chapter.

(c) Following the department's first licensure review the provider shall have the licensure status assigned by the department.

(3) Probationary licensure

(a) Under this status the provider is eligible to contract with the county authority on conditions specified by the department.

(b) To achieve full licensure the provider shall demonstrate to the department that it has met the conditions of the probationary status.

(c) The provider shall request the department to review its corrective actions within six months of notification of probationary status or its licensure shall be revoked.

(d) The department shall review the provider's corrective actions and make a redetermination of licensure status within six months of the date of the provider's request for review.

(e) Probationary status shall only be assigned a provider as an outcome of the department's first licensure review of a provider or of a new service of that provider.

(4) Provisional licensure

A new provider or a provider planning to offer a new service may be given a provisional license for up to one year if the following conditions are met:

(a) It has an acceptable detailed plan for the development and operation of such service;

(b) It can demonstrate the availability of administrative and clinical expertise required to develop and provide the planned services; and

(c) It has the fiscal management and existing or projected resources to reasonably assure the stability and solvency of the planned service.

(5) The provider's contract with the county authority shall be terminated thirty days following the department's notification to the provider and the county authority of failure to attain or maintain licensure.

(6) Providers failing to attain licensure or whose licensure has been revoked may reapply for licensure no earlier than six months following the date of the department's notification.

(a) The application shall document the actions the provider has taken to correct deficiencies found in the prior licensure review.

(b) If the application demonstrates the provider has made every reasonable effort to correct deficiencies, the department shall schedule a licensure review to evaluate compliance with those standards previously unmet.

(7) A license shall be in effect for two years or until a review for relicensure has been conducted.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-105, filed 4/7/83.]

WAC 275-56-110 Provider administration--Policies and procedures. The provider shall have written policies and procedures for operations and administration. The provider's policies and procedures shall include:

- (1) Fiscal administration,
- (2) Personnel management,
- (3) Affirmative action,
- (4) Staff training,
- (5) Quality assurance,
- (6) Client rights,
- (7) Client records,
- (8) Client entry, service planning, operations, and
- (9) Services.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-110, filed 4/7/83.]

WAC 275-56-115 Provider administration--Governing body. The provider shall have a governing body which shall be responsible for the provider's:

- (1) Policies,
- (2) Total budget,
- (3) Biennial plan and budget for services proposed for contract with the county authority, and
- (4) Contract with the county authority for mental health services.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-115, filed 4/7/83.]

WAC 275-56-120 Provider administration--Designation of administrator. The provider shall designate an administrator responsible to the governing body for administration of the provider's mental health services. The responsibilities of the administrator shall include the acquisition, control, utilization, and planning for the physical, human, and financial resources of the provider.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-120, filed 4/7/83.]

WAC 275-56-125 Provider administration--Organizational structure. The provider shall have an organizational structure specifying lines of authority and responsibility. The provider shall have an organizational chart identifying all programs, program interrelationships and lines of authority including the governing

body, administrator, administrative staff, program managers, and staff positions, as applicable.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-125, filed 4/7/83.]

WAC 275-56-130 Provider fiscal administration--Fiscal policies and procedures. The provider shall have its current fiscal policies and procedures available in written form. Policies and procedures shall be defined in the following areas:

- (1) Accounts receivable,
- (2) Accounts payable to include purchasing,
- (3) Payroll,
- (4) General ledger, and
- (5) Internal control.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-130, filed 4/7/83.]

WAC 275-56-135 Provider fiscal administration--Written schedule of fees. The provider shall establish and use a sliding fee schedule based on the resources available to the client to pay for mental health services and the provider's actual cost of care.

(1) The fee schedule shall be approved by the department as part of the licensing process.

(2) The fee schedule shall be accessible to the provider's staff and clients.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-135, filed 4/7/83.]

WAC 275-56-140 Provider fiscal administration--Procedures to maximize revenues. The provider shall establish procedures to maximize other revenues.

(1) Fees shall be collected from third parties when available.

(2) Fees shall be collected from clients, parents of a child, or legal guardian consistent with the sliding fee schedule for billable services.

(3) Fees shall be collected for consultation and education services whenever possible.

(4) All receipts shall be deposited intact.

(5) All services rendered shall be recorded and shall be billed as appropriate.

(6) Members of the governing body, clinical staff, and consultants shall not engage in activities constituting a conflict of interest impairing the provider's ability to maximize revenues, including, but not limited to:

(a) The provider's facilities or services shall not be used by such persons for private practice unless the person compensates the provider at a reasonable rate.

(b) Governing body members, clinical staff or consultants with private practices shall not recruit clients away from the provider or be given preference for client referral made outside the provider agency unless there is no reasonable alternative.

(c) No private practice or other remunerative activity shall be conducted during hours when the staff member is being paid by the provider.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-140, filed 4/7/83.]

WAC 275-56-145 Provider fiscal administration--Budget of expected revenues and expenses. The provider shall prepare a formal, written budget of all expected revenues and expenses for mental health services. The budget shall categorize revenues by source and expenses by types of services and/or program components consistent with the department's standard accounting system. The written budget and all material budget revisions shall be reviewed and formally approved by the governing body.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-145, filed 4/7/83.]

WAC 275-56-150 Provider fiscal administration--Accounting system. The provider shall maintain an appropriate accounting system for administration of financial resources.

(1) The provider shall maintain the accounting system in accordance with applicable, generally accepted accounting principles (GAAP).

(2) Accounting records shall clearly identify all revenues by source.

(3) All expenses shall be recorded in a manner to clearly show the budget category charged.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-150, filed 4/7/83.]

WAC 275-56-155 Provider fiscal administration--Documentation and retention of accounting transactions. Accounting transactions shall be supported by properly executed documents. Financial records, supporting documentation, and statistical reports shall be retained for a period of five years, with the following qualifications:

(1) If any litigation, claim or audit is started before the expiration of the five-year period, the records shall be retained until all litigation, claims or audit findings involving the records have been resolved.

(2) Records for nonexpendable property acquired with resources from the department shall be retained for five years after final disposition of the property.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-155, filed 4/7/83.]

WAC 275-56-160 Provider fiscal administration--Fiscal management system reporting. The provider shall maintain accurate and complete information regarding the fiscal performance of its mental health program.

(1) Financial statements shall be prepared at least annually in conformity with generally accepted accounting principles (GAAP) and shall be available to the county authority and department upon request.

(2) If the provider has a contract with the county, the provider shall submit to the county at least quarterly revenue and expense reports for available resources based on the department's budgeting, accounting, reporting system (BARS). The revenue and expense reports shall include the relationship of the approved budget to actual revenue and expenditure.

(3) Providers utilizing Medicaid funding shall comply with WAC 388-87-007(9), and the terms of their Medicaid contract.

(4) Where a client utilizes more than one service of a provider at the same time, the client may not be charged for more than one service.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-160, filed 4/7/83.]

WAC 275-56-165 Provider fiscal administration--Independent audit of financial operations. The provider's financial operations shall receive an independent audit at least biennially.

(1) The audit shall be conducted in accordance with generally accepted auditing standards (GAAS).

(2) Documentation shall verify that the report of the audit has been reviewed by the governing body.

(3) The audit shall be completed within twelve months following the end of the state's biennium.

(4) The county biennial fiscal audit of the provider may be used to meet the audit requirements of this section.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-165, filed 4/7/83.]

WAC 275-56-170 Personnel management--Personnel records. A personnel record shall be kept on file by the provider for each staff member. The personnel record shall contain:

(1) Documentation verifying education, experience, and clinical training;

(2) Verification of required licensure or certification;

(3) Job description;

(4) Documentation of continuing education including in-service training received and training needs; and

(5) Documentation of the staff member's review of client rights.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-170, filed 4/7/83.]

WAC 275-56-175 Personnel management--Staff qualifications. All direct treatment services shall be provided and supervised by staff members with the appropriate clinical qualifications.

(1) All direct treatment services shall be provided by a mental health professional or under the clinical supervision of a mental health professional defined pursuant to chapter 71.05 RCW as follows:

(a) A physician or osteopath licensed pursuant to chapter 18.57 or 18.71 RCW, who is board eligible in psychiatry; or

(b) A psychologist licensed pursuant to chapter 18.83 RCW; or

(c) A psychiatric nurse or social worker; or

(d) A person having at least a masters degree in behavioral, nursing sciences, or related field from an accredited college or university and having at least two years' experience in the direct treatment of mentally ill clients under the supervision of a mental health professional; or

(e) A person professionally registered or certificated (e.g., registered nurse, occupational therapist, physical therapist) and having at least three years' experience in working with mentally ill clients under supervision of a

mental health professional. Such a person shall be defined as a mental health professional only when working within the skill areas for which he or she is registered or certificated.

(2) A clinical staff member or trainee not meeting the qualifications stated in subsection (1) of this section shall only provide direct treatment, screening, case management or support services under the following conditions:

(a) The person has been evaluated by a mental health professional and determined to possess the skills and knowledge necessary to work with the client population to be served, and in the identified function or role to be performed; and

(b) The service is provided under the supervision of a mental health professional or as part of an organized treatment team.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-175, filed 4/7/83.]

WAC 275-56-180 Personnel management--Clinical supervision. All persons providing direct treatment services shall receive appropriate clinical supervision.

(1) Clinical supervision shall be provided by a mental health professional.

(2) Full-time clinical staff members who are mental health professionals providing direct treatment services shall receive at least one hour per week of clinical supervision and/or consultation. Proportionately less time is required for part-time staff. Persons with medical and/or overall clinical responsibilities shall receive appropriate peer consultation.

(3) Other full-time clinical staff members providing direct treatment services shall receive at least two hours per week of clinical supervision from a mental health professional. Proportionately less time is required for part-time staff.

(4) Volunteers and trainees providing direct services, who are mental health professionals, shall receive at least three hours per week of clinical supervision from a mental health professional. Proportionately less time is required for persons providing direct treatment services on a part-time basis.

(5) Volunteers and trainees providing direct treatment services, who are not mental health professionals, shall receive at least one hour of clinical supervision from a mental health professional for every five hours of direct treatment services provided. Volunteers, trainees or other persons providing telephone screening or telephone crisis counseling shall not be subject to this subsection, given clinical supervision is available in person, by telephone, or by radio communication at all times.

(6) Clinical backup by a mental health professional in person, by telephone, or by radio communication shall be available to staff at all times when service is being provided.

(7) Where required by law, specialized services (e.g., medical, psychiatric, psychological, and nursing services) shall be provided or supervised by appropriately licensed or credentialed persons in accordance with respective professional standards.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-180, filed 4/7/83.]

WAC 275-56-185 Personnel management--Qualifications appropriate to the needs of the client population. The clinical qualifications of persons providing and/or supervising direct treatment services shall reflect the needs of the client population.

(1) Services to persons acutely mentally ill, chronically mentally ill, or seriously disturbed shall be provided by or under the supervision of a mental health professional with at least two years of experience in treatment of such clients.

(2) Services directed to children shall be provided by, under the supervision of, or with consultation from a child mental health specialist defined as follows:

(a) A mental health professional having completed a minimum of one hundred actual hours (not quarter or semester hours) of specialized training devoted to the study of child development and the treatment of seriously disturbed children and their families; and

(b) Having the equivalent of one year of full-time experience in the treatment of seriously disturbed children and their families under the supervision of a child mental health specialist.

(3) Services directed to the elderly shall be provided by, under the supervision of, or with consultation from a geriatric mental health specialist defined as follows:

(a) A mental health professional having completed a minimum of one hundred actual hours (not quarter or semester hours) of specialized training devoted to the problems and treatment of the elderly; and

(b) Having the equivalent of one year of full-time experience in the treatment of the elderly, under the supervision of a geriatric mental health specialist.

(4) Services directed to minority persons shall be provided by, under the supervision of or with consultation from a minority mental health specialist defined as follows:

(a) A mental health professional having completed a minimum of one hundred actual hours (not quarter or semester hours) of specialized training devoted to minority issues and treatment of minority persons; and

(b) Having the equivalent of one year of full-time experience in the treatment of persons in the minority group he or she serves. Such experience shall have been supervised by a mental health professional and shall have included consultation with minority providers and/or community leaders who are members of the minority group served.

(5) Services directed to disabled persons shall be provided by, under the supervision of or with consultation from a mental health specialist with special expertise in working with that disabled group.

(a) If the client is deaf, the specialist shall be able to communicate with the person and be knowledgeable of the special psychosocial problems of the deaf.

(b) The specialist for developmentally disabled clients shall have a minimum of one hundred actual hours (not

semester or quarter hours) of specialized training devoted to the problem and treatment of the developmentally disabled, or have one year of supervised experience in a developmental disability or special education program, or be a developmental disability or special education professional.

(6) Where the mental health specialists required under this section are unavailable, the provider shall:

(a) Document effort to acquire the services of the required specialists; and

(b) Develop a training program using in-service training or outside resources to assist existing staff members to acquire necessary skills and experience to become qualified specialists; or

(c) Contract or otherwise establish a working relationship with the required specialists to provide all or part of the direct treatment services for these populations or to supervise or provide consultation to staff members providing direct treatment services to these populations.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-185, filed 4/7/83.]

WAC 275-56-190 Personnel management—Administrative qualifications. Provider administration shall be provided by staff members with the appropriate administrative qualifications.

(1) The administrator shall have at least a masters degree in a social, behavioral, medical, nursing, or administrative discipline from an accredited college or university, and a minimum of two years' administrative experience and two years' experience in human services, or be certified in a relevant professional field (e.g., nurse, occupational therapist), providing the person, in addition, has at least three years' administrative experience and three years' experience in human services.

(2) The staff member with overall responsibility for provider clinical services shall be a mental health professional with at least five years' experience in mental health services, including at least two years in a supervisory capacity.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-190, filed 4/7/83.]

WAC 275-56-195 Personnel management—Affirmative action. The provider shall have an affirmative action program which complies with Title VII of the Civil Rights Act of 1964, the Equal Pay Act of 1963, Section 504 of the 1974 Rehabilitation Act, the department's affirmative action guidelines, and other applicable federal, state, and local laws and regulations.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-195, filed 4/7/83.]

WAC 275-56-200 Personnel management—Training opportunities. Training opportunities shall be made available to administrative, clinical and clerical staff, and volunteers through in-service programs and/or training offered by outside resources.

(1) Each full-time clinical staff member shall receive a minimum of forty hours of training per year without

loss of pay. Proportionately less training shall be received by part-time clinical staff.

(2) Volunteers, trainees or other nonprofessional persons providing telephone screening or telephone crisis counseling shall receive a minimum of thirty hours of appropriate training prior to providing telephone screening or telephone crisis counseling.

(3) Required training is in addition to routine supervision or consultation.

(4) Training shall be consistent with needs identified in the individual's personnel file.

(5) All training received by staff and volunteers shall be documented in the personnel files.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-200, filed 4/7/83.]

WAC 275-56-205 Quality assurance—Case review. A quality assurance case review process shall be established for all direct treatment services.

(1) The quality assurance review shall objectively assess the progress and outcome of treatment.

(a) The review shall be conducted by a person or persons not participating in treatment of the case under review. The review may be conducted by an outside consultant.

(b) At least one mental health professional shall participate in the review.

(c) At least fifteen cases or five percent, whichever is larger, of the provider's open cases shall be randomly sampled every three months and reviewed for quality of care.

(i) The sample shall be stratified to:

(A) Represent each mental health service at least every six months;

(B) Represent at least one case from each primary therapist or case manager every six months.

(ii) The cases shall represent acutely mentally ill, chronically mentally ill, and seriously disturbed persons appropriate to the service provided.

(2) The case review shall result in a determination of whether:

(a) The client's psychosocial, medical and treatment history, mental and medical status, and special assessments support the needs, problems, and diagnosis specified in the individual's service plan.

(b) Treatment goals follow from identified needs and problems, identify the expected outcome of treatment, and can be realistically achieved;

(c) Case progress indicates the goals of treatment have been or will be achieved;

(d) Medication and other services prescribed or assigned are utilized appropriately; and

(e) The client should continue in treatment.

(3) Client records shall be accurate and complete and shall contain the information required by this chapter.

(4) Corrective actions shall be recommended where a case review indicates inappropriate clinical care.

(a) Corrective action shall be considered for both the service program and the individual client's service plan.

(b) Recommendations for corrective action shall be submitted to the primary therapist or case manager, his or her supervisor, and other appropriate supervisors.

(c) Actions taken in regard to an individual client as a result of the review shall be documented in the client's record.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-205, filed 4/7/83.]

WAC 275-56-210 Program evaluation--Requirements. The provider shall have a system for determining the degree to which service activities meet its goals and objectives.

(1) The provider shall have an information system providing relevant, accurate, and timely data in order to monitor program goals and objectives. The provider shall maintain sufficient data to report the Washington state mental health information system minimum data set.

(2) At least one study of provider operations and intended results of services shall be completed annually. The studies shall address priority issues of concern to the provider and be related to its goals and objectives.

(3) Program evaluation or research involving human subjects shall be conducted in accordance with RCW 71.05.390, and "Guide to DSHS policy on protection of human research subjects," July 1, 1981.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-210, filed 4/7/83.]

WAC 275-56-215 Facility characteristics. Provider services shall be provided in a setting safe and conducive to the attainment of therapeutic goals.

(1) Provider facilities shall meet federal, state, and local requirements, including building, health, and fire codes.

(2) Group therapy rooms shall be of adequate size to accommodate the groups without crowding.

(3) Rooms used for client services shall be fully enclosed, have closing doors, and shall be reasonably soundproofed to reduce both distracting noises and the possibility of conversations being overheard outside the room.

(4) If physical examinations are routinely performed within the facility, a suitably equipped examination room shall be available.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-215, filed 4/7/83.]

WAC 275-56-220 Services administration--Accessibility. Services shall be accessible in a nondiscriminatory manner and at times and locations which facilitate client utilization of services.

(1) Services to acutely and chronically mentally ill and seriously disturbed clients from underserved groups, including minorities, children, the elderly, disabled, and low-income persons shall be accessible and meet the special needs of these populations.

(a) The provider shall eliminate or substantially reduce physical, communication, and sociocultural barriers to utilization of services.

(b) Services shall be compatible with the culture and in the language of ethnic minority clients where a significant ethnic minority population exists in the county.

(c) In-home services shall be available to homebound persons, where possible.

(d) Alternative service delivery models shall be provided, where possible, to enhance utilization by these underserved groups.

(2) Services shall be provided regularly on some evenings and/or weekends as determined by client and potential needs.

(3) If the provider does not offer appropriate services, the client shall be referred to such services and the provider shall facilitate the referral.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-220, filed 4/7/83.]

WAC 275-56-225 Services administration--Awareness of services. The location of the provider and services offered shall be made known to the public.

(1) The provider shall maintain listings in all telephone and other public directories of the service area.

(2) The provider shall publish and disseminate brochures and other materials describing services and hours of operation.

(3) The provider shall publish and disseminate bilingual brochures and other materials when there is a significant non-English speaking population in the service area.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-225, filed 4/7/83.]

WAC 275-56-230 Services administration--Client rights. The provider shall maintain written policies and procedures relating to client rights, and shall ensure all personnel are informed and adhere to policies and procedures.

(1) Clients, prospective clients, and/or legally responsible others shall be informed of client rights at admission.

(2) The provider shall post a written statement of client rights in public areas. A copy shall be available to clients on request. Providers of only telephone services (e.g., crisis lines) shall post the statement of client rights in a location visible to staff and volunteers during working hours.

(3) The statement of client rights shall include at least:

(a) The right to receive appropriate care and treatment, employing the least restrictive alternatives available;

(b) The right to be treated with respect and dignity;

(c) The right to receive treatment which is nondiscriminatory and sensitive to differences of race, culture, language, sex, age, national origin, disability, creed, socioeconomic status, marital status, sexual orientation, and ability to pay.

(d) The right to an individualized service plan reflecting problems and/or needs identified for or with the client.

(e) The right to confidentiality as specified in relevant statutes (chapter 71.05 RCW) and regulations (chapter 275-55 WAC).

(4) Policies of the provider shall address circumstances where confidentiality shall not be maintained, including at least:

(a) Where there is reason to suspect the occurrence of child abuse or neglect;

(b) Where there is a clear threat to do serious bodily harm to self or others;

(c) To a court under court order;

(d) The right to refuse any proposed treatment consistent with chapter 71.05 RCW;

(e) The right to review the client's case record under conditions specified in WAC 275-56-235(2);

(f) The right to receive an explanation of all medications prescribed, including expected effect and possible side effects;

(g) The right to be free of any sexual exploitation or harassment;

(h) The right to lodge a grievance with the provider if the client has reason to believe his or her rights have been violated. The statement shall include the grievance procedure.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-230, filed 4/7/83.]

WAC 275-56-235 Services administration--Protection of client rights. The provider shall protect and ensure the rights of all clients and former clients.

(1) Neither evaluation nor treatment services shall be provided to any person under fourteen years of age without the signed consent of the parent or guardian. In an emergency, such child may be seen for one session without consent of parent or guardian. Parental consent for evaluation or treatment services shall not be necessary in the case of a child referred by child protective services or other public agency because of physical, sexual, or psychological abuse or neglect by a parent or parent surrogate.

(2) When client, or the parent or guardian of a child thirteen years of age or under, requests review of his or her case record, the provider shall:

(a) Grant the request within seven days, except the request need not be granted if the provider knows or has reason to believe the parent or parent surrogate has been a child abuser or might otherwise harm the child.

(b) Review the case record in order to identify and remove any material confidential to another person.

(c) In the presence of a staff member, allow the client sufficient time and privacy to review the record to his or her satisfaction. A clinical staff member shall be available to answer questions.

(d) Permit the following persons to be present during the review, with the consent of the client;

(i) Next-of-kin,

(ii) The family physician, or

(iii) The client's attorney.

(e) Document the review session in the client's record.

(3) The written, informed consent of the client or responsible other shall be obtained before:

(a) Use of any medication.

(b) Initiation of any nonemergency service plan.

(c) Use of any unusual diagnostic or treatment procedure.

(d) Use of any audio and/or visual device to record the client's behavior.

(e) The client serves as a subject for any research.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-235, filed 4/7/83.]

WAC 275-56-240 Services administration--Confidentiality of client information. The provider shall protect the confidentiality of all information relating to clients or former clients.

(1) The provider shall disclose no confidential information, including the fact a person is or has been a client, without a current consent signed by the client or legally responsible other.

(2) Standardized forms authorizing release and/or exchange of confidential information shall be used and contain the following:

(a) The name of the client,

(b) The date,

(c) The name and address of the provider,

(d) The name and address of the person or entity to whom the information is to be provided,

(e) The reason for disclosure,

(f) The specific kind of information to be disclosed,

(g) The period of time the consent is to be in force,

(h) The signature of the client and/or responsible other, and

(i) The signature of a witness.

(3) Exceptions to subsection (1) of this section are as follows:

(a) Disclosures permitted under relevant statute (chapters 10.77 and 71.05 RCW) or regulations (chapter 275-55 WAC);

(b) To a court under court order;

(c) The fact of admission and any pertinent information and records may be disclosed:

(i) To provider personnel, as needed; however, volunteers and trainees shall have access to client records only to the extent necessary for treatment;

(ii) To the extent necessary to make an insurance or medical assistance claim;

(iii) To a county-designated mental health professional (chapter 71.05 RCW);

(iv) To a hospital or emergency medical personnel for purposes of dealing with an emergency; and

(v) To law enforcement or public health officers under the following conditions:

(A) Only to the extent necessary to carry out the responsibilities of the law enforcement or public health officer;

(B) Such persons shall be responsible for keeping all information confidential pursuant to these standards.

(vi) To a certified evaluation and treatment facility (chapter 71.05 RCW);

(vii) To the person designated by the county to track the chronically mentally ill. Such disclosures shall be

limited to the facts of admission, discharge or referral of chronically mentally ill persons;

(d) Pertinent information must be disclosed, and the provider is obligated to initiate disclosure, under the following conditions:

(i) To child protective services in accordance with RCW 26.44.030;

(ii) To law enforcement officers and the intended victim when there is a clear and serious threat of homicide or intent to do serious bodily harm to another person or persons.

(4) All disclosures made, both with and without the client's consent, shall be documented in the case record to include:

- (a) Date of disclosure;
- (b) Person or entity receiving information;
- (c) Nature of information disclosed;
- (d) Reasons for disclosure if consent has not been obtained.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-240, filed 4/7/83.]

WAC 275-56-245 Services administration--Resolving client grievances. The provider shall act promptly to hear and take appropriate steps to resolve client grievances. Procedures shall ensure the involvement of appropriate supervisory and administrative staff, and the governing body, as necessary. Confidential information shall not be disclosed to the governing body pursuant to client grievances without the signed consent of the client.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-245, filed 4/7/83.]

WAC 275-56-250 Services administration--Policies and procedures for provider operations. The provider shall have written policies and procedures relating to emergency and nonemergency client entry, individual service planning, coordination of services with state mental health facilities and other providers, medical responsibility, and financial and billing practices which shall be consistent with other requirements of this chapter.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-250, filed 4/7/83.]

WAC 275-56-255 Services administration--Screening and information and referral. Screening and information and referral shall result in an action on behalf of the prospective client.

(1) In case of a request for mental health information, accurate information shall be provided, and a determination of the need for a referral for further service shall be made.

(2) In case of a request for service:

(a) Screening shall result in an intake appointment if screening indicates that the person is acutely or chronically mentally ill or seriously disturbed and the provider offers an appropriate and available service;

(b) If the prospective client chooses to wait for services, the first available intake time shall be assigned the

client. Acutely mentally ill persons may be placed in front of any waiting list;

(c) Screening shall result in a referral to another provider if the requested services are not available from the provider. If no appropriate referral is available, such shall be documented;

(d) Where appropriate, screeners shall provide follow-up with the prospective client.

(3) Screening dispositions shall be made by or under the clinical supervision of a mental health professional, and a record shall be maintained of all referrals.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-255, filed 4/7/83.]

WAC 275-56-260 Services administration--Intake and initial evaluation. At intake a clinical staff member shall assess and document the client's presenting problems, history, mental status, need for additional examinations, and treatment needs.

(1) A formal, standardized application for services shall be completed by or for each client and shall become a part of the client's record.

(2) Information describing client rights and confidentiality of information shall be provided at the time of intake.

(3) The initial evaluation shall include:

(a) A clear statement of the presenting problems preferably in the client's own words and/or the parent's words in the case of a child.

(b) A psychosocial, substance abuse, and medical history.

(c) A history of mental health treatment covering at least the last two years.

(d) For children, a developmental history and assessment of academic background and learning problems.

(e) A mental status examination.

(f) Direct observation of client behavior.

(g) An assessment of the client's current level of functioning, strengths, needs, and problems, a provisional diagnosis (*Diagnostic and Statistical Manual*, 3rd edition), and a determination as to whether the person is acutely mentally ill, chronically mentally ill or seriously disturbed.

(h) The name and telephone number of the client's present or most recent physician, and the date of the most recent examination or treatment by the physician.

(4) The client shall be referred for a medical examination when determined necessary. All clients aged sixty and over shall be referred for a medical examination, if such examination has not been done within the preceding ninety days.

(5) The need for special psychiatric, psychological, neurological, medical or other examinations, tests or procedures shall be determined. The basis for such decisions shall be documented and appropriate referrals made. Before a diagnosis of primary degenerative dementia with senile or presenile onset is made, assessments shall be completed to rule out all forms of treatable medical or mental disorders.

(6) Fees appropriate to the client's ability to pay shall be established, and the client shall be informed of the

fees and of the provider's fee policies during the intake process.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-260, filed 4/7/83.]

WAC 275-56-265 Services administration--Drug use profile. A drug use profile shall be developed at intake and maintained throughout the client's treatment.

(1) The drug use profile shall include the names and dosages of all prescribed and nonprescribed drugs (when the information is available) used currently and during the previous six months. The record of prescribed drugs used prior to or during the course of treatment shall include, as available, names and dosages, name of prescribing person, dates and reasons for changes or discontinuance, and any significant side effects.

(2) Except in an emergency, there shall be signed consent of client or responsible other before utilization of medication. In the event the client refuses to sign, efforts to obtain signature shall be documented.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-265, filed 4/7/83.]

WAC 275-56-270 Services administration--Coordination of service. Staff responsibilities for planning, providing, and coordinating services shall be clearly assigned.

(1) Each client in a direct treatment service shall be assigned a primary therapist.

(2) When a client is served by both a primary therapist and a case manager, these persons shall confer on a regular basis, and document such conferences. In the absence of an assigned case manager, the primary therapist shall coordinate needed services on behalf of the client.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-270, filed 4/7/83.]

WAC 275-56-275 Services administration--Development of individualized service plan. An individualized service plan shall be developed for each client.

(1) The plan shall identify each problem or need to be addressed in treatment.

(2) The plan shall contain clearly stated goals for treatment.

(a) Each goal shall state the intended result to occur in client behavior, skills, attitudes, or circumstances as a result of treatment.

(b) The plan shall specify an expected timeframe for the attainment of goals and for termination.

(3) The plan shall identify the services and specific treatment modalities to be utilized.

(a) The plan shall include referral for necessary services not offered by the provider.

(b) The primary therapist and/or case manager responsible for providing and coordinating services shall be identified.

(4) The plan shall clearly show the relationships between the proposed services, intended results, and needs of the client, including how treatment goals are to be

met by the particular modalities and techniques to be utilized.

(5) An assessment and review of progress and updating of the plan shall be performed at least every ninety days in the case of outpatient, day treatment or community support services.

(6) The client shall participate in service planning and implementation according to his or her ability, and the family shall be involved where available and appropriate to the client's needs.

(7) The client or responsible other shall consent to treatment by signing the initial service plan and when significant changes are made in the plan. In the event the client refuses to sign, efforts to obtain signature shall be documented.

(8) The service plan shall be completed and a mental health professional shall review and sign the plan within thirty days. When appropriate and sufficient staff are available, the initial service plan shall be reviewed and revised as necessary by a multidisciplinary treatment team including individuals licensed under chapter 18.57, 18.71, 18.83 or 18.88 RCW.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-275, filed 4/7/83.]

WAC 275-56-280 Services administration--Group service plan. In the case of outpatient groups, a group service plan shall be developed which identifies the goals of the group, the modalities and approaches to be used to attain those goals and common need characteristics of clients to be referred to the group.

(1) Clients, staff, supervisors, and consultants shall be involved, as appropriate, in development and review of the group service plan.

(2) The supervisor of the unit or program providing the group service shall review and sign the plan initially and whenever it is revised.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-280, filed 4/7/83.]

WAC 275-56-285 Services administration--Progress notes and review. Client progress in meeting goals shall be documented in the case record.

(1) Progress notes shall be recorded in the case and group record as follows:

(a) After every client contact for outpatient services;

(b) At least weekly for day treatment services;

(c) After each event for emergency services;

(d) Providers utilizing a problem-oriented record system may record progress less frequently, provided a narrative summary of client progress is entered in the case record at least every thirty days, and the date and type of each contact is recorded.

(2) Progress notes shall document each service provided, including date, nature of service, progress toward established goals, changes in service plan, referrals, extraordinary events, and be signed by the responsible staff member.

(3) The service plan and progress shall be formally assessed at least every ninety days for outpatient, day treatment, and community support services.

(4) The assessment of progress shall cover course and progress of treatment in relationship to client needs, problems and goals, noting unusual events, assessing current status and need for continued treatment, reprojecting length of treatment, and modifying the service plan, if necessary.

(5) The clinical supervisor shall participate where possible in the formal progress assessment, and in all cases shall review, approve, and sign summaries prepared by the primary therapist or case manager.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-285, filed 4/7/83.]

WAC 275-56-290 Services administration--Transfer and termination. Continuity of care shall be assured and cases shall be closed promptly upon transfer or termination.

(1) A comprehensive summary shall be prepared by responsible staff and shall be made available to the provider assuming primary responsibility for the client. A copy shall be placed in the client's record.

(2) Cases involving planned transfer and termination shall be closed within fourteen days of final contact.

(3) Planned and/or necessary leaves from treatment for up to ninety days shall be documented in the client's record, and the case need not be closed.

(4) Other cases shall be closed within ninety days of the last attempt to contact the client. Unexplained interruptions in client contacts shall be followed up by the primary therapist or case manager, and these attempts documented in the client's record. Special efforts shall be made to contact the client when he or she is thought to be dangerous to self or others or property or gravely disabled, and shall be documented in the client's record.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-290, filed 4/7/83.]

WAC 275-56-295 Services administration--Medical responsibility. Medical responsibility shall be vested in a psychiatrist, other physician or osteopath.

(1) A physician licensed to practice pursuant to chapter 18.57 or 18.71 RCW, and at least board eligible in psychiatry, shall be responsible for medical services.

(a) Providers unable to recruit a psychiatrist may employ a physician without board eligibility in psychiatry provided:

(i) Psychiatric consultation is provided to the physician at least monthly; and

(ii) The psychiatrist is accessible in person, by telephone, or by radio communication to the physician for emergency consultation.

(iii) The physician participates in at least twenty hours per year of continuing medical education in psychiatry.

(b) The provider may divide medical responsibility among a number of physicians employed in part-time staff or consultative roles.

(2) Medications shall be reviewed at least every three months by a physician. A registered nurse or licensed practical nurse may administer medications under the

supervision of a physician. Medications shall be monitored by a physician or registered nurse (WAC 308-120-300).

(3) Medication information shall be maintained in the client record documenting at least the following for each prescribed medication:

(i) Name of medication,

(ii) Dosage and method of administration,

(iii) Purpose of medication,

(iv) Dates prescribed, reviewed and/or renewed,

(v) Observed effects and side effects, including laboratory findings and corrective actions taken for side effects,

(vi) Reasons for change or termination of medication, and

(vii) Name and signature of prescribing person.

(4) When a psychiatrist is available, he or she shall participate in multidisciplinary teams responsible for treatment planning and review.

(5) When medical problems are suspected or identified, a psychiatrist or other physician shall be consulted and included in treatment planning at regular intervals.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-295, filed 4/7/83.]

WAC 275-56-300 Services administration--Medication storage. Medication storage areas shall be inspected and inventoried at least quarterly by the administrator, or designated clinical staff member.

(1) All medication shall be kept in locked storage.

(2) Any medications kept in a refrigerator containing other items shall be kept in a separate container with proper security.

(3) No outdated medications shall be retained, and medications shall be disposed of in accordance with regulations of the state board of pharmacy.

(4) Medications for external use shall be stored separately from oral and injectable medications.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-300, filed 4/7/83.]

WAC 275-56-305 Services administration--Extraordinary occurrences. There shall be written procedures for the handling, review, and documentation of extraordinary occurrences.

(1) Procedures shall be established for responding to and reviewing situations involving:

(a) Injury to clients or staff;

(b) Suicide or homicide by a client;

(c) Client behavior so bizarre or disruptive as to threaten the program;

(d) Disaster or threatened disaster of natural or human origin.

(2) Extraordinary occurrences shall be reported to appropriate supervisory staff, administrator, and governing body.

(3) Each such occurrence shall be subject to a case review by one or more mental health professionals not participating in the treatment of the client.

(a) A corrective action plan to prevent similar occurrences shall be developed where appropriate.

(b) The review, correction action plan, and its implementation shall be documented, including entries in the client's record where appropriate.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-305, filed 4/7/83.]

WAC 275-56-310 Services administration--Policies and procedures related to client records. There shall be written policies and procedures relating to client records. Policies and procedures will include:

- (1) Record content, format, and completeness,
- (2) Maintenance of outpatient group records,
- (3) Records of emergency contacts,
- (4) Security and confidentiality of client records, including storage, access, and release of information.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-310, filed 4/7/83.]

WAC 275-56-315 Services administration--Content of client records. A record shall be established and maintained for each client completing intake.

(1) The record shall contain documentation of application for services and authorization for treatment, including:

- (a) Application for services;
- (b) Fees to be charged for services;
- (c) Signed authorization for release and/or receipt of information where appropriate, and documentation of any disclosures;
- (d) Signed consent for use of any medication.

(2) The record shall contain the individualized service plan, including screening and intake information sufficient to justify the treatment planned, reports of special evaluative procedures, progress notes, periodic treatment summaries, and transfer and termination summaries. Each entry shall be signed by the primary therapist or case manager.

(3) The record shall contain a report of each collateral contact.

(4) The record shall contain cross-references to outpatient group records as appropriate.

(5) The record shall contain records or summaries of any psychiatric inpatient services or residential treatment provided during two years prior to current intake.

(6) The record shall contain a drug use profile when applicable, established at intake and maintained throughout the course of treatment.

(7) The record shall contain documentation of any unusual events, emergencies, or special procedures.

(8) The record shall contain notes documenting case review with the supervisor's signature.

(9) The records of other immediate members of the family who are clients of the provider shall be cross-referenced.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-315, filed 4/7/83.]

WAC 275-56-320 Services administration--Outpatient group records. A record shall be established and maintained for each outpatient group including:

(1) A plan for the group, including goals and objectives;

(2) Name of staff responsible for conducting the group;

(3) A current roster of all clients and/or participants;

(4) Brief notes recorded after each session documenting group activities and events; and

(5) Modifications in the group plan.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-320, filed 4/7/83.]

WAC 275-56-325 Services administration--Telephone and outreach emergency services records. Providers of telephone and outreach emergency services shall maintain records documenting all emergency contacts.

(1) Emergency records shall document, when possible, the following:

- (a) Client name, address, and telephone number;
 - (b) Name and telephone number of person or agency making initial contact (if other than client);
 - (c) Time of initial contact;
 - (d) Responsible staff;
 - (e) Time and location of outreach;
 - (f) Nature of emergency;
 - (g) Summary of services provided;
 - (h) Referrals or other disposition;
 - (i) Names of persons and agencies cooperating in emergency response;
 - (j) Follow-up; and
 - (k) Condition of client at termination of contact.
- (2) Documentation shall occur after each contact.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-325, filed 4/7/83.]

WAC 275-56-330 Services administration--Security of client records. All client records shall be stored in a manner ensuring record security and client confidentiality.

(1) Records shall be maintained in locked cabinets, and/or shall be housed in a fully enclosed room with a lockable door.

(2) All records checked out during the working day shall be returned to the records room by the end of the day.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-330, filed 4/7/83.]

WAC 275-56-335 Services administration--Retention and destruction of client records. Records shall be retained by the provider in accordance with WAC 275-56-325 and shall be destroyed in a manner completely eradicating content and client names.

(1) Client records shall be retained for a period of not less than five years beyond the last contact with the client.

(2) When the client is a minor, the record shall be maintained for a period of not less than three years beyond the client's eighteenth birthday, or five years beyond the last contact, whichever is the longer period of time.

(3) A complete termination summary and reports of special assessment and/or examination procedures shall be retained for a period of not less than ten years beyond the last contact with the client or three years beyond the client's eighteenth birthday, whichever is the longer period of time.

(4) Emergency records such as telephone crisis logs shall be retained for not less than two years.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-335, filed 4/7/83.]

WAC 275-56-340 Emergency services--Written descriptions. There shall be written descriptions of all emergency services components specifying:

- (1) Nature, location, and availability of services;
- (2) Qualifications of staff;
- (3) Client needs addressed by these services;
- (4) Usual referral sources and procedures;
- (5) Policies for each emergency service component to include criteria for outreach response;
- (6) Policies on responding to referrals, preadmissions screening services, and liaison and communication with state hospitals, and other common referral sources, and other preadmission screening services;
- (7) Expected client outcomes stated, as much as possible, in behavioral terms; and
- (8) Expected service outcome stated in terms of appropriate admission to state hospitals and diversion to less restrictive alternatives.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-340, filed 4/7/83.]

WAC 275-56-345 Emergency services--Staffing. Emergency services shall be provided by qualified staff.

(1) Emergency services shall be directed by a mental health professional with at least two years supervised experience in emergency services.

(2) Nonprofessional staff, volunteers, and students providing telephone or outreach crisis intervention shall be directly supervised by or have immediate access to consultation from a mental health professional at all times.

(3) Staff providing preadmission screening shall be mental health professionals trained in assessing clinical status, severity of disturbance, and availability of less restrictive and/or less costly alternatives.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-345, filed 4/7/83.]

WAC 275-56-350 Emergency services--Twenty-four hour telephone services. Telephone emergency services shall be provided twenty-four hours per day, seven days per week, by the provider or in cooperation with other providers.

- (1) The telephone service shall:
 - (a) Be provided in accordance with written protocol;
 - (b) Respond promptly to calls and provide information, referral or immediate counseling to assist the caller in resolving the emergency;
 - (c) Determine the presence of an emergency and connect caller, as needed, to centralized emergency services

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(911) or, in the absence of such capability, mobilize and coordinate necessary related services (e.g., medical, police, fire, ambulance, child protective services, county-designated mental health professional);

(d) Facilitate provision of needed follow-up services; and

(e) Document all telephone contacts and disposition, including any significant departures from protocol.

(2) Emergency telephone numbers shall be prominently listed in all telephone directories in the areas served by the provider.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-350, filed 4/7/83.]

WAC 275-56-355 Emergency services--Twenty-four hour outreach services. Twenty-four hour emergency outreach services shall be provided in the home or other community setting. Outreach services shall consist of face-to-face evaluation and treatment of mental health emergencies and crises for acutely mentally ill persons of all ages, and will:

- (1) Be provided in accordance with written protocol;
- (2) Be provided promptly after screening and dispatch, and document any decision not to respond;
- (3) Seek to stabilize the emergency or crisis situation and provide immediate or continuing treatment and support in the least restrictive environment available;
- (4) Be closely coordinated with the county's involuntary treatment system, and draw upon the resources of that system as needed;
- (5) Utilize and mobilize all necessary community emergency resources;
- (6) Be appropriate to the age of the person, and involve family and significant others when indicated and possible;
- (7) Refer, when appropriate, to other services of the provider or to other resources;
- (8) Provide follow-up on emergency contacts to maintain stabilization and to ensure referrals are carried out and needed services and linkages are provided; and
- (9) Document all contacts and the contact's disposition, including any significant departures from written protocol.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-355, filed 4/7/83.]

WAC 275-56-360 Emergency services--Crisis intervention services. Sufficient evaluation and treatment services shall be provided to clients to determine severity and urgency of disturbance, to stabilize crises, and to determine need for further treatment.

(1) Crisis intervention services shall be provided in accordance with written protocol. Any significant departure from protocol shall be documented in the client's record.

(2) At a minimum, one face-to-face assessment and/or evaluation session and up to four treatment and/or crisis stabilization sessions shall be available to persons requesting services. Such clients may be referred

to another provider if assessment and/or evaluation reveals the appropriate services are not offered by the provider.

(3) No later than the fourth treatment and/or crisis stabilization session, there shall be a determination as to whether the client is an acutely or chronically mentally ill or seriously disturbed person in need of further treatment.

(4) When a client receiving brief treatment and/or crisis stabilization services is determined to be acutely or chronically mentally ill or seriously disturbed and in need of further treatment, the provider shall maintain continuity of care through transfer to other services of the provider or referral to other appropriate providers and resources.

(5) There shall be formal agreements or working relationships regarding emergency procedures and responsibilities with other emergency-related community agencies and inpatient facilities.

(6) A complete and current list of community resources shall be maintained and be available at all times to staff providing emergency services.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-360, filed 4/7/83.]

WAC 275-56-365 Emergency services--Preadmission screening services. Screening shall be provided for voluntary admission to state hospitals. Information, screening, and assessment shall be provided to persons on referral or at their own request to determine need for and appropriateness of admission to a state hospital.

(1) Information and assistance shall be provided in the same manner and subject to applicable standards for emergency services.

(2) All common referral sources shall be informed of the availability of preadmission screening services and requested to utilize these services in lieu of direct referral to a state hospital.

(3) Assessments shall include face-to-face or telephone contact with the client and discussion with the referral source when possible.

(4) The availability of appropriate alternatives shall be explored and discussed with client and referral source. Admission to a less restrictive and/or less costly alternative shall be facilitated where appropriate.

(5) Screening services shall utilize state hospitals when the following conditions are met:

(a) The client meets standards for involuntary commitment under chapter 71.05 RCW;

(b) The client will accept voluntary admission;

(c) No appropriate alternative is available to the client; and

(d) The state hospital serving the county agrees to admit the client.

(6) Pre-admission screening of involuntary clients shall be performed subject to chapter 71.05 RCW and chapter 275-55 WAC.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-365, filed 4/7/83.]

(1986 Ed.)

WAC 275-56-370 Emergency services--Record of preadmission screening services. A record of all preadmission screening services shall be maintained. The record shall document:

(1) Client name and other information required by the department;

(2) Referring agency or person;

(3) Referral information, including evidence of appropriateness for involuntary detention;

(4) Services provided, including assessments performed; and

(5) Recommendations and disposition, including staff efforts to facilitate admission to a state hospital or alternative setting.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-370, filed 4/7/83.]

WAC 275-56-375 Outpatient services--Written descriptions. There shall be written descriptions of all outpatient service components specifying:

(1) Nature, location, and availability of services;

(2) Qualifications of staff;

(3) Client needs addressed by these services;

(4) Policies for each service component; and

(5) Expected outcomes stated, as much as possible, in behavioral terms.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-375, filed 4/7/83.]

WAC 275-56-380 Outpatient services--Staffing. Outpatient services shall be provided by qualified staff.

(1) Outpatient services shall be directed by a mental health professional with at least two years of supervised postgraduate experience in mental health services, including experience with the major treatment modalities offered, and with acutely and chronically mentally ill and seriously disturbed clients.

(2) Staff providing outpatient services shall be trained and experienced in the clinical modalities and techniques they utilize.

(3) Staff shall be assigned to outpatient service programs and locations on the basis of training and experience consistent with client needs in those programs and locations.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-380, filed 4/7/83.]

WAC 275-56-385 Outpatient services--Service delivery. Outpatient services shall be provided to acutely and chronically mentally ill and seriously disturbed persons when appropriate to their treatment needs.

(1) Outpatient services shall include the following modalities:

(a) Individual therapy,

(b) Group therapy,

(c) Family therapy,

(d) Marital or couples therapy,

(e) Medication evaluation and monitoring, and

(f) Activities therapy.

(2) Outpatient services shall be provided in accordance with written protocol. Significant departures from protocol shall be documented in the client's record.

(3) Outpatient services to underserved groups (minorities, children, elderly, disabled, and low-income persons within the priority populations) shall, where possible, include alternative models of service delivery such as:

(a) Services in a location and environment appropriate to the clientele;

(b) Outreach services such as home visits, school visits or visits to other community agencies; and

(c) Services offered by natural care givers or traditional healers.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-385, filed 4/7/83.]

WAC 275-56-390 Day treatment services--Written descriptions. There shall be written descriptions of all day treatment service components specifying:

- (1) Nature, location, and availability of services;
- (2) Qualifications of staff;
- (3) Client needs addressed by these services;
- (4) Policies for each service component and each regularly scheduled session; and
- (5) Expected outcomes stated, as much as possible, in behavioral terms.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-390, filed 4/7/83.]

WAC 275-56-395 Day treatment services--Staffing. Day treatment services shall be provided by adequate numbers of qualified staff.

(1) Day treatment services shall be directed by a mental health professional with at least two years supervised postgraduate experience in day treatment or related programs for acutely and chronically mentally ill and seriously disturbed persons.

(2) One paid staff member shall be present in all day treatment sessions conducted by the provider.

(3) Minimum staff-to-client ratios for day treatment sessions shall be maintained as follows:

(a) One clinical staff member for every four scheduled clients thirteen years of age and under, with at least one such staff member a child mental health specialist;

(b) One clinical staff member for every six scheduled clients aged fourteen through seventeen, with at least one such staff member a child (adolescent) mental health specialist;

(c) One clinical staff member for every twelve scheduled clients aged eighteen and over with at least one such staff member a mental health professional, and with one such staff member a geriatric mental health specialist in sessions serving primarily elderly clients. One clinical staff member for every eight scheduled clients shall be present in any group therapy.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-395, filed 4/7/83.]

WAC 275-56-400 Day treatment services--Service delivery. Day treatment services shall be provided on a

regular basis to acutely and chronically mentally ill and seriously disturbed persons needing this type of service.

(1) Day treatment services shall be provided in accordance with written protocol. Significant departures from protocol shall be documented in the client's record.

(2) Day treatment services shall be available to clients at least three times weekly.

(3) Day treatment services shall be planned and structured activities designed for:

(a) Maintaining clients in an environment less restrictive than an inpatient setting through structuring of their day and leisure time.

(b) Developing daily living, social, and prevocational skills to increase the likelihood of clients engaging in productive activities, and attaining the capacity for independent or semi-independent living.

(c) Assisting clients in making the transition from acute inpatient services or serving as an alternative to inpatient care.

(4) The provider shall maintain formal agreements or working relationships and coordinate services where possible with other persons, agencies or facilities serving day treatment clients.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-400, filed 4/7/83.]

WAC 275-56-405 Day treatment services--Service components. Day treatment services shall include components necessary to meet the maintenance or psychosocial habilitation or rehabilitation needs of clients.

(1) Each day treatment program shall provide or arrange for the following service components:

- (a) Training in basic living and social skills;
- (b) Vocational habilitation or rehabilitation, including prevocational services;
- (c) Sheltered work, training or education;
- (d) Day activities, including socialization and recreation;
- (e) Therapeutic community or milieu therapy.

(2) The particular mix of components shall be determined by client needs.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-405, filed 4/7/83.]

WAC 275-56-410 Day treatment services--Age-appropriate services. Day treatment services shall be age-appropriate.

(1) Services to school-age children shall include or arrange for suitable educational and developmental programs.

(a) Clients with special educational needs shall be provided with special educational programs by cooperative arrangements with schools.

(b) Day treatment shall be scheduled to permit regular school attendance for clients able to function in a regular school setting.

(2) Services to children shall include parent involvement, when possible.

(3) Services to elderly shall include attention to medical and nutritional needs and shall be capable of providing or arranging for emergency medical services during all operational hours.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-410, filed 4/7/83.]

WAC 275-56-415 Consultation and education services—Written descriptions. There shall be written descriptions of all consultation and education service components specifying:

- (1) Nature and availability of services,
- (2) Target population,
- (3) Client needs to be addressed,
- (4) Policies for consultation and education services shall include fee for such services where appropriate, and
- (5) Expected outcomes stated in terms of the specific changes in skills, knowledge or awareness to be accomplished on the part of the target population and/or their clients.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-415, filed 4/7/83.]

WAC 275-56-420 Consultation and education services—Staffing. Consultation and education services shall be provided by qualified persons who will be supervised by a mental health professional.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-420, filed 4/7/83.]

WAC 275-56-425 Consultation and education services—Service delivery. Consultation and education services shall be provided to assist others in the community to understand and care for acutely and chronically mentally ill and seriously disturbed persons.

(1) Case consultation shall be available to staff of other services, including inpatient and residential facilities, and other community care givers as a means of developing or improving service delivery for the priority populations.

(2) The following components may be provided:

(a) Program consultation to other entities to assist in program design and planning for treatment and support services for acutely and chronically mentally ill and seriously disturbed persons;

(b) Continuing education programs and training for community care givers to develop and/or increase their skills in providing mental health services to the priority populations and underserved groups;

(c) Information and education for the public about mental health issues and services through various public media (newspapers, television, radio), and presentations to community groups; and

(d) Educational services for families of acutely and chronically mentally ill and seriously disturbed persons.

(3) Records shall be maintained of all consultation and education services provided.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-425, filed 4/7/83.]

(1986 Ed.)

WAC 275-56-430 Community support services—Written descriptions. There shall be written descriptions of all community support service components specifying:

- (1) Nature and availability of services;
- (2) Qualifications of staff;
- (3) Client needs addressed by such services and criteria for enrollment in community support services;
- (4) Policies for each service component and each regularly scheduled activity (e.g., state hospital liaison); and
- (5) Expected outcomes should be stated, as much as possible, in behavioral terms.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-430, filed 4/7/83.]

WAC 275-56-435 Community support services—Staffing and case management. Community support services shall be provided by qualified staff.

(1) Community support services shall be under the direction of a mental health professional with at least two years' supervised experience in direct treatment of acutely and chronically mentally ill persons.

(2) One person shall be assigned to serve as case manager for each client enrolled in community support services.

(a) The case manager shall be responsible for coordination of services, including mental health, residential, social, vocational, health, educational, income management, and other necessary support services on the client's behalf.

(b) The case manager shall provide consultation and assist other significant persons (e.g., family, landlord, clergy, police, physician, attorney) to be supportive and act in the best interests of the client.

(c) The case manager shall meet with or otherwise contact the enrolled client at intervals identified in the individual's service plan.

(d) The case manager shall participate with the primary therapist and other involved staff of the provider in treatment and discharge planning for the enrolled client, where possible, and shall periodically review available treatment records on the client.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-435, filed 4/7/83.]

WAC 275-56-440 Community support services—Coordination with inpatient facilities and other agencies. The provider shall establish and maintain working arrangements with psychiatric inpatient facilities, social and health agencies, and other community resources necessary for acutely or chronically mentally ill persons to live in the community.

(1) The provider shall maintain liaison with state mental health facilities, certified evaluation and treatment facilities (chapter 71.05 RCW), and, whenever possible, other local inpatient psychiatric facilities so as to be informed of the status of clients, former clients, and potential clients needing community support services.

(a) Contact with the inpatient facility and attending staff shall take place at least weekly when an enrolled

client is in the inpatient facility or when an inpatient has been referred for community support services.

(b) The provider shall participate in treatment and discharge planning for both voluntary and involuntary patients in these inpatient facilities when those patients are enrolled clients of the provider or have been referred for community support services.

(2) Working relationships or formal agreements shall be established and maintained with the county-designated mental health professionals (chapter 71.05 RCW); community services offices (CSO); social security and employment security offices; division of vocational rehabilitation; and residential services in the county contracting with the department or county for mental health services.

(3) Liaison shall also be developed and maintained, where possible, with sheltered workshops, community colleges, housing authorities, family advocate and self-help groups, agencies serving the elderly, and other agencies and organizations offering special services needed by the acutely or chronically mentally ill.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-440, filed 4/7/83.]

WAC 275-56-445 Community support services--Service delivery. A program of community support services shall be provided to acutely and chronically mentally ill persons to assist such persons in living in the community.

(1) Services shall be provided in accordance with written protocol. Any significant departure from protocol shall be documented in the client's record.

(2) Acutely and chronically mentally ill persons seeking or referred for community support services shall be screened, admitted to the service, and assigned a case manager if appropriate.

(3) Staff shall attempt to contact referred clients within two working days of the client's release from a state mental health facility, certified evaluation and treatment facility (chapter 71.05 RCW), or other inpatient psychiatric facility in order to describe and offer community support and other available services.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-445, filed 4/7/83.]

WAC 275-56-450 Community support services--Record of community support services. A record of all community support services shall be maintained. The record shall document:

(1) The name and other information required by the department for each client assigned a case manager or receiving other community support services.

(2) Services provided, including contacts with the client and significant others by the case manager and other community support services on the client's behalf, shall be documented in the client's record.

[Statutory Authority: RCW 71.24.035. 83-09-002 (Order 1957), § 275-56-450, filed 4/7/83.]

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.
275-59-041	Schedule of maximum payment for defendant expert or professional person.
275-59-050	Time limitations and requirements.
275-59-060	Individualized treatment.
275-59-080	Conditional release.
275-59-090	Retroactivity.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

275-59-040	Court commitment. [Order 846, § 275-59-040, filed 8/9/73.] Repealed by 79-03-038 (Order 1373), filed 3/1/79. Statutory Authority: RCW 72.01.090.
275-59-070	Attendance at hearings. [Order 846, § 275-59-070, filed 8/9/73.] Repealed by 79-03-038 (Order 1373), filed 3/1/79. Statutory Authority: RCW 72.01.090.

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 fifty 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 275-60 WAC

WORKSHOPS IN INSTITUTIONS OF THE MENTAL HEALTH DIVISION

WAC	
275-60-010	Purpose.
275-60-020	Definitions.
275-60-030	Establishment of new workshops.
275-60-040	Protection of patients/clients.
275-60-050	Organization and staffing of workshops.
275-60-060	Licensing of workshops.
275-60-070	Safety and health standards for workshops.

275-60-200	Selection and assignment of patients/clients.
275-60-300	Incentive payments for patients or clients participating in workshop programs.
275-60-400	Workshop clinical records.
275-60-500	Workshop financial records.
275-60-510	Purchases of workshop equipment and materials.
275-60-520	Pricing of items for sale by workshops.

WAC 275-60-010 Purpose. These regulations are adopted pursuant to and in accordance with RCW 43.20A.445. They are adopted to provide guidelines for the operation of workshops in institutions of the mental health division.

[Statutory Authority: RCW 74.05.560 [71.05.560], 84-13-029 (Order 2112), § 275-60-010, filed 6/13/84.]

WAC 275-60-020 Definitions. (1) "Department" means the department of social and health services of the state of Washington.

(2) "Division" means the mental health division of the department of social and health services.

(3) "Director" means the director of the mental health division or his or her designee.

(4) "Institution" means an institution operated by the mental health division.

(5) "Superintendent" means the superintendent of a mental health division institution or his or her designee.

(6) "Workshop" means a transitional, time-limited work program provided by the institution on a systematic, organized basis for the purpose of developing and maintaining individual patient's or client's capacities, which provides monetary incentives to the patients or clients and produces articles for sale.

(7) "Fair value" means the sale price of articles produced by the workshop, taking into account the cost of production as determined by the institution, and the market price of similar articles offered for sale by other sellers.

(8) "Revolving fund" means a separately maintained institutional fund allowing for accounting of workshop receipts and expenditures, apart from other institutional financial transactions.

[Statutory Authority: RCW 74.05.560 [71.05.560], 84-13-029 (Order 2112), § 275-60-020, filed 6/13/84.]

WAC 275-60-030 Establishment of new workshops. Workshops established in institutions subsequent to the enactment of RCW 43.20A.445 will be subject to the following requirements:

(1) Prior to the establishment of a new workshop, the director shall consider the availability, appropriateness, and relative cost of contracting and giving first preference to private nonprofit sheltered workshops, as defined in RCW 82.04.385, to provide workshop activities for residents of the institution.

(2) Such consideration shall include a request-for-proposal procedure to be undertaken by the director, to assess the interest and ability of private workshops to provide the service.

[Statutory Authority: RCW 74.05.560 [71.05.560], 84-13-029 (Order 2112), § 275-60-030, filed 6/13/84.]

WAC 275-60-040 Protection of patients/clients.

(1) Workshops may engage in the production of a variety of goods and services for sale, so long as the primary goal of patient/client rehabilitation is kept uppermost.

(2) Patients or clients will not be employed in any work which is unusually dangerous.

(3) Patients or clients will not be engaged in any work which is unduly physically strenuous without prior medical clearance.

(4) Patients or clients will not be employed off the institutional grounds unless prior arrangements have been made for adequate supervision.

(5) Workshops will not employ patients or clients in any activity which could reasonably be viewed as undignified or demeaning to the patients or clients.

(6) Institutions which include workshops will adopt written policies to ensure the provisions of this section are carried out.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-040, filed 6/13/84.]

WAC 275-60-050 Organization and staffing of workshops. (1) The workshop will be organized as a separate unit of the institution, with its own full-time director.

(2) Supervisory and other staff will be assigned to the workshop in such numbers as are determined by the superintendent to be necessary to accomplish the rehabilitative purposes of the workshop program.

(3) All workshop staff will be determined to meet minimum qualifications for their specific job assignments, in accordance with department of personnel regulations and departmental regulations and policies.

(4) A regular program of in-service training shall be provided to workshop staff, in accordance with the institutional training plan.

(5) Workshops may contract with educational institutions, nonprofit organizations, or individual craftsmen for the provision of technical assistance to aid patients or clients in developing needed work skills, in accordance with procedures established by the state.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-050, filed 6/13/84.]

WAC 275-60-060 Licensing of workshops. Workshops will comply with applicable state and local laws in respect to the securing of business licenses.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-060, filed 6/13/84.]

WAC 275-60-070 Safety and health standards for workshops. Workshops will be operated in accordance with all state and local health, safety, fire safety, and building regulations and standards.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-070, filed 6/13/84.]

WAC 275-60-200 Selection and assignment of patients/clients. (1) Clients to be included in workshop programs shall be selected in accordance with established institutional policies, and in conjunction with the

institution's general treatment plan for the individual patient/client.

(2) Individual workshop duty assignments shall be made in consideration of the best interests of the patient or client.

(3) Patient's or client's workshop progress shall be reviewed by staff at regular intervals of no more than thirty days.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-200, filed 6/13/84.]

WAC 275-60-300 Incentive payments for patients or clients participating in workshop programs. (1) Incentive payments for patients or clients participating in workshops shall be individually determined by the workshop director or his or her designee.

(2) Such incentive payments shall be based on a formula which takes into account the patient's or client's level of productivity, as measured by periodic comparison with staff performance on similar individual tasks, as well as measured adherence to basic work habits and compliance with the individual's institutional treatment plan and institutional regulations.

(3) The formula developed by the workshop for ascribing weights to the several factors enumerated in subsection (2) of this section shall be submitted for the approval of the director.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-300, filed 6/13/84.]

WAC 275-60-400 Workshop clinical records. Workshops shall maintain individual records of all patient or client workshop participation, to include at least the following:

- (1) Individual treatment plan;
- (2) Records of attendance;
- (3) Records of measurement of productivity;
- (4) Periodic progress reviews;
- (5) Records of progress in attaining basic work habits;
- (6) Records of progress in adhering to standards of personal behavior;
- (7) Reports of unusual occurrences;
- (8) Discharge summaries, to include staff recommendations regarding post-institution vocational or training plans.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-400, filed 6/13/84.]

WAC 275-60-500 Workshop financial records. Workshops shall maintain adequate financial records in the form approved for state agencies. Such records will include, at a minimum, the following:

(1) Records of all purchases of materials and supplies to include documentation that such materials and supplies were purchased at fair market value or the best available price;

(2) Records of all purchases of workshop equipment and equipment maintenance;

(3) Records of all contractual agreements for instructional or other services;

(4) Inventory records of unused materials and finished products awaiting sale;

(5) Records of items sold and cash received for sales;

(6) Records of sales tax collected for items sold;

(7) Records of incentive payments received by individual patients or clients.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-500, filed 6/13/84.]

WAC 275-60-510 Purchases of workshop equipment and materials. Purchases of materials and equipment for workshops shall be made in accordance with procedures established for such purchases by state agencies, and shall be subject to the procedural control of the institution's business manager.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-510, filed 6/13/84.]

WAC 275-60-520 Pricing of items for sale by workshops. (1) Prices for workshop items shall be established by the workshop director.

(2) Prices of products to be sold on the open market shall be set at fair value, as defined within these regulations.

[Statutory Authority: RCW 74.05.560 [71.05.560]. 84-13-029 (Order 2112), § 275-60-520, filed 6/13/84.]

Chapter 275-76 WAC

ADULT CORRECTIONAL INSTITUTIONS-- DETAINER

WAC

275-76-005	Definitions.
275-76-010	Purposes of detainees.
275-76-020	Form of detainees.
275-76-030	Evaluation of detainee request.
275-76-040	Trial or pretrial detainees.
275-76-050	Commitment detainees.
275-76-060	Probation or parole revocation detainees.
275-76-070	Miscellaneous detainees.
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 detainee.
275-76-130	Identification of requesting authority's transferring agency.
275-76-140	Failure of requesting authority to take custody.
275-76-150	Detainee request by nonsignator of interstate agreement on detainees.

WAC 275-76-005 Definitions. For purposes of this chapter:

(1) "Detainee" 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 detainees 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 detainees. Detainees 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 detainees" — 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 detainees" — 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 detainees" — 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 detainees" — 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 detainees. A detainee 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 detainee;

(3) The legal basis for the detainee, including, in all cases, a description of the factual circumstances which provide the basis for the issuance of the detainee;

(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 detainee 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.

(8) Procedure for transfer, handling and return of resident. The transfer, handling, and return of a resident pursuant to a request for final disposition or a request for temporary custody shall be governed by the provisions of article V of the interstate agreement on detainees, RCW 9.100.010.

(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 detainees. (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 detainees 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 detainees. (1) Who may file. The authority to issue or file parole or probation revocation detainees 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 detainees shall be accompanied by certified copies of all documents necessary to establish the requesting agency's jurisdictional authority to undertake the revocation proceedings.

(3) Notice to residents. 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 detainees. (1) Who may file. The authority to issue or file detainees 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 the basis for issuance of the detainer along with all other relevant factors normally considered in determining the appropriateness of the resident's participation in the proposed reduced custody program.

[Order 1009, § 275-76-090, filed 2/13/75; Order 797, § 275-76-090, filed 5/10/73.]

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 1009, § 295-76-110, filed 2/13/75; 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 detainees. The provision of this chapter shall be fully applicable to detainees filed with the department by a state which is not a signator to the interstate agreement on detainees, 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.]

Chapter 275-80 WAC

ADULT CORRECTIONAL INSTITUTIONS--VISITS

WAC

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DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

275-80-820	Search of visitors. [Order 767, § 275-80-820, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
275-80-822	Search of visitors—Notice. [Order 767, § 275-80-822, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
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.
275-80-830	Violations of rules—Penalty. [Order 767, § 275-80-830, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
275-80-835	Denial of visits. [Order 767, § 275-80-835, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
275-80-837	Appeal of denial of visiting privilege. [Order 767, § 275-80-837, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
275-80-850	Personal visits—Professional interviews. [Order 767, § 275-80-850, filed 1/10/73.] Repealed by Order 814, filed 6/28/73.
275-80-856	Personal visits—Exceptions. [Order 767, § 275-80-856, 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, articulatable 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, § 275-80-844, filed 6/28/73; Order 767, § 275-80-844, 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;

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(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 used, 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 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 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

(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

[Order 1135, § 275-80-995, filed 8/12/76; Order 814, § 275-80-995, filed 6/28/73.]

Chapter 275-110 WAC
IMPACT ACCOUNT--CRIMINAL JUSTICE COST
REIMBURSEMENT

WAC	
275-110-010	Purpose.
275-110-020	Definitions.
275-110-030	Limitation of funds.
275-110-040	Institutions and eligible impacted political subdivisions.
275-110-050	Maximum allowable reimbursement for law enforcement costs.
275-110-060	Maximum allowable reimbursement for prosecutorial costs.
275-110-070	Maximum allowable reimbursement for judicial costs.
275-110-080	Maximum allowable reimbursement for jail facilities.
275-110-090	Billing procedure.
275-110-100	Exceptions.
275-110-110	Effective date.
275-110-120	Audits.

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 and the department of corrections.

(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 and the secretary of corrections or their designees.

(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, 81-15-061 (Order 1682), § 275-110-020, filed 7/20/81; 80-17-004 (Order 1569), § 275-110-020, filed 11/7/80; 80-02-109 (Order 1482), § 275-110-020, filed 1/25/80.]

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.

Institution	Cities/County
(1) Washington state penitentiary	Walla Walla/Walla Walla
(2) Washington state reformatory	Monroe/Snohomish
(3) McNeil Island corrections center	Steilacoom/Pierce
(4) Washington corrections center	Shelton/Mason
(5) Purdy treatment center for women	Gig Harbor/Pierce
(6) Firland correctional center	Seattle/King
(7) Larch corrections center	Yacolt/Clark
(8) Clearwater correctional center	Forks/Clallam
(9) Olympic corrections center	Forks/Clallam
(10) Indian Ridge treatment center	Arlington/Snohomish
(11) Pine Lodge correctional center	Medical Lake/Spokane/Spokane
(12) Cedar Creek correctional center	Little Rock/Thurston
(13) Special offender center	Monroe/Snohomish
(14) Echo Glen children's center	Snoqualmie/King
(15) Green Hill school	Chehalis/Lewis
(16) Maple Lane school	Rochester/Thurston
(17) Mission Creek youth camp	Belfair/Mason
(18) Naselle youth camp	Naselle/Pacific
(19) Woodinville group home	Woodinville/King
(20) Canyon View group home	East Wenatchee/Douglas
(21) Sunrise group home	Ephrata/Grant
(22) Twin Rivers group home	Richland/Benton
(23) Oakridge group home	Tacoma/Pierce
(24) Park Creek group home	Kittitas/Kittitas
(25) Ridgeview group home	Yakima/Yakima
(26) Western state hospital	Steilacoom/Pierce
(27) Eastern state hospital	Medical Lake/Spokane/Spokane
(28) Child study and treatment center	Steilacoom/Pierce

(29) For any institution not listed in this section, reimbursement shall be limited to the political subdivisions where 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 13.06.030, 13.40.210 and 72.72.040, 85-09-003 (Order 2221), § 275-110-040, filed 4/4/85. Statutory Authority: RCW 72.72.040, 81-15-061 (Order 1682), § 275-110-040, filed 7/20/81; 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. The maximum reimbursement rates are: Twelve dollars and thirty cents per hour for the period August 30, 1979, through June 30, 1980, thirteen dollars and seventeen cents per hour for the period July 1, 1980, through May 31, 1981, fourteen dollars and fifty-one cents per hour for the period June 1, 1981, through June 30, 1982, and sixteen dollars per hour for the period July 1, 1982, through June 30, 1983. 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, 81-15-061 (Order 1682), § 275-110-050, filed 7/20/81; 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 the following rates for each attorney, said reimbursement to include costs for paralegals: Thirty dollars per hour for the period August 30, 1979, through May 31, 1981, thirty-six dollars per hour for the period June 1, 1981, through June 30, 1982, and thirty-nine dollars and sixty-nine cents per hour for the period July 1, 1982, through June 30, 1983. 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, 81-15-061 (Order 1682), § 275-110-060, filed 7/20/81; 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 except that witness (other than expert) and jury fees are further limited as provided in subsection (3) of this section. Reimbursement is limited to judges, court reporters, transcript typing, and witness and jury fees.

(2) Reimbursement for judges hearing cases including services provided by court clerks and bailiffs shall be reimbursed at thirty dollars per hour for the period August 30, 1979, through May 31, 1981, thirty-six dollars per hour for the period June 1, 1981, through June 30, 1982, and thirty-nine dollars and sixty-nine cents per hour for the period July 1, 1982, through June 30, 1983. Court reporters shall be reimbursed at the rate of twelve dollars and fifty cents per hour for the period August 30, 1979, through May 31, 1981, fifteen dollars per hour for the period June 1, 1981, through June 30, 1982, and sixteen dollars and fifty-four cents for the period July 1, 1982, through June 30, 1983. Required typing of transcripts shall be reimbursed at two dollars and fifty cents per page for the period August 30, 1979, through May 31, 1981, three dollars per page for the period June 1, 1981, through June 30, 1982, and three dollars and thirty-one cents per page for the period July 1, 1982, through June 30, 1983. If required, expert witnesses shall be reimbursed at thirty dollars per hour for the period August 30, 1979, through May 31, 1981, fifty dollars and sixty cents per hour for the period June 1, 1981, through June 30, 1982, and fifty-five dollars and seventy cents per hour for the period July 1, 1982, through June 30, 1983.

(3) Reimbursement for witness fees (other than expert) and jury fees shall be at the rate established by the local governmental legislative authority but not in excess of twenty-five dollars per day. Reimbursement of costs

of witness (other than expert) and jury fees shall be limited to those criminal cases involving offenders residing in a state adult or juvenile correctional institution.

(4) 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, 81-15-061 (Order 1682), § 275-110-070, filed 7/20/81; 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 three dollars and fifty cents per inmate day for the period August 30, 1979, through May 31, 1981, four dollars and twenty-one cents per inmate day for the period June 1, 1981, through June 30, 1982, and four dollars and sixty-eight cents per inmate day for the period July 1, 1982, through June 30, 1983. Reimbursement shall not be made for costs incurred for holding persons regarding parole revocations or for holding persons involved in civil litigation. Costs of providing security when inmates require hospitalization will be reimbursed at the rate of nine dollars per hour for the period August 30, 1979, through May 31, 1981, nine dollars and ninety-one cents per hour for the period June 1, 1981, through June 30, 1982, and ten dollars and ninety-three cents per hour for the period July 1, 1982, through June 30, 1983. 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, 81-15-061 (Order 1682), § 275-110-080, filed 7/20/81; 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, Mailstop OB-24, Olympia, Washington 98504. Requests for reimbursement of costs incurred after July 1, 1981, related to incidents involving inmates in state adult correctional

institutions should be submitted to: Department of Corrections, Division of Management and Budget, Mail Stop FN-61, 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.

(5) The department shall include in its biennial appropriation requests proposed rates based on studies of local government costs to be conducted biennially.

[Statutory Authority: RCW 72.72.040. 81-15-061 (Order 1682), § 275-110-090, filed 7/20/81; 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.
- 275-150-020 Definitions.
- 275-150-030 Administration and allocation of Referendum 37 funds.
- 275-150-040 Regional needs assessment.
- 275-150-050 Preliminary proposals and final applications for Referendum 37 funding.
- 275-150-060 Submission of preliminary proposals.
- 275-150-070 Review process for preliminary proposals.
- 275-150-080 Review criteria for preliminary proposals.
- 275-150-090 Operation of approved Referendum 37 projects.

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.]