

Title 246 WAC

DEPARTMENT OF HEALTH

Chapters

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**DISPOSITION OF CHAPTERS FORMERLY
CODIFIED IN THIS TITLE**

**Chapter 246-09
REFUND OF FEES**

246-09-060 Refund of fees. [Statutory Authority: RCW 43.01.072, 90-08-003 (Order 044), § 246-09-060, filed 3/22/90, effective 4/22/90.] Decodified by 91-02-049 (Order 121), filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.040. Recodified as WAC 246-08-560.

**Chapter 246-334
DISPOSITION OF HUMAN REMAINS**

246-334-010 Definitions. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-334-010, filed 12/27/90, effective 1/31/91; Regulation .112.010, filed 2/18/66.] Repealed by 92-02-019 (Order 225B), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050.

246-334-020 Approval required for tissue preservation. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-334-020, filed 12/27/90, effective 1/31/91; Regulation .112.020, filed 2/18/66.] Repealed by 92-02-019 (Order 225B), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050.

246-334-030 Approval required for tissue preservation—Provisions for approval. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-334-030, filed 12/27/90, effective 1/31/91; Regulation .112.030, filed 2/18/66.] Repealed by 92-02-019 (Order 225B), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050.

246-334-040 Approval required for tissue preservation—Exemptions from approval. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-334-040, filed 12/27/90, effective 1/31/91; Regulation .112.040, filed 2/18/66.] Repealed by 92-02-019 (Order 225B), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050.

246-334-050 Records. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-334-050, filed 12/27/90, effective 1/31/91; Regulation .112.050, filed 2/18/66.] Repealed by 92-02-019 (Order 225B), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050.

246-334-060 Labels. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-334-060, filed 12/27/90, effective 1/31/91; Regulation .112.060, filed 2/18/66.] Repealed by 92-02-019 (Order 225B), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050.

**Chapter 246-975
AMBULANCES**

246-975-001 Declaration of purpose. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080, 82-04-041 (Order 1752), § 248-17-010, filed 1/29/82; Order 1150, § 248-17-010, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-010 Definitions. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 18.73 RCW, 89-22-108 (Order 007), § 248-17-020, filed 11/1/89, effective 12/2/89. Statutory Authority: RCW 18.73.080, 84-17-036 (Order 2138), § 248-17-020, filed 8/10/84; 82-19-080 (Order 1881), § 248-17-020, filed 9/21/82; 82-04-041 (Order 1752), § 248-17-020, filed 1/29/82; Order 1150, § 248-17-020, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-020 License(s) required. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080, 82-04-041 (Order 1752), § 248-17-030, filed 1/29/82; Order 1150, § 248-17-030, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-030 License expiration dates. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080, 82-04-041 (Order 1752), § 248-17-040, filed 1/29/82; Order 1150, § 248-17-040, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-040 License expiration dates. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080, 82-04-041 (Order 1752), § 248-17-050, filed 1/29/82; Order 1150, § 248-17-050, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-050 Denial, suspension, revocation of license—Notice—Adjudicative proceeding. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 1989 1st ex.s. c 9 § 106, 90-06-019 (Order 039), § 248-17-060, filed 2/28/90, effective 3/1/90; Order 1150, § 248-17-060, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-060 Ambulance vehicle and equipment. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-060, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-070, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-070 Extrication equipment. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080, 82-19-080 (Order 1881), § 248-17-080, filed 9/21/82; Order 1150, § 248-17-080, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-080 Variances. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-080, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-090, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-090 Radio communications equipment—Ambulance vehicle. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-090, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-100, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-100 First aid vehicle and equipment. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080, 82-19-080 (Order 1881), § 248-17-110, filed 9/21/82; Order 1150, § 248-17-110, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

246-975-110 Extrication equipment. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-975-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080, 82-19-080 (Order 1881), § 248-17-120, filed 9/21/82; Order 1150, § 248-17-120, filed

- 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-120 Variances. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-120, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-130, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-130 Air ambulance services. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 82-04-041 (Order 1752), § 248-17-135, filed 1/29/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-140 Radio communications equipment. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-140, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-140, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-150 Variances from the requirements of this chapter. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-150, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-150, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-160 Ambulance operator, ambulance director requirements. [Statutory Authority: Chapter 18.73 RCW. 91-06-026 (Order 126), § 246-975-160, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-160, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-160, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-170 Liability insurance. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-170, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-170, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-180 First aid vehicle operator, first aid vehicle director requirements. [Statutory Authority: Chapter 18.73 RCW. 91-06-026 (Order 126), § 246-975-180, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-180, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-180, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-190 Personnel requirements. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 82-19-080 (Order 1881), § 248-17-190, filed 9/21/82; Order 1150, § 248-17-190, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-200 Advanced first aid training. [Statutory Authority: Chapter 18.73 RCW. 91-06-026 (Order 126), § 246-975-200, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-200, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-200, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-210 Basic life support—Emergency medical technician qualifications and training. [Statutory Authority: Chapter 18.73 RCW. 91-06-026 (Order 126), § 246-975-210, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 82-04-041 (Order 1752), § 248-17-211, filed 1/29/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-220 Emergency medical technician training—Course content, registration, and instructor qualifications. [Statutory Authority: Chapter 18.73 RCW. 91-06-026 (Order 126), § 246-975-220, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-212, filed 8/10/84; 82-04-041 (Order 1752), § 248-17-212, filed 1/29/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-230 Emergency medical technician—Certification and recertification. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.081. 91-02-013, (Order 120), § 248-17-213, filed 12/21/90, effective 12/21/90. Statutory Authority: Chapter 18.73 RCW. 89-22-108 (Order 007), § 248-17-213, filed 11/1/89, effective 12/2/89. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-213, filed 8/10/84; 82-19-080 (Order 1881), § 248-17-213, filed 9/21/82; 82-04-041 (Order 1752), § 248-17-213, filed 1/29/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-240 Emergency medical technician—Reciprocity and challenges. [Statutory Authority: Chapter 18.73 RCW. 91-06-026 (Order 126), § 246-975-240, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-214, filed 8/10/84; 82-04-041 (Order 1752), § 248-17-214, filed 1/29/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-250 Emergency medical technician and first responder—Specialized training. [Statutory Authority: Chapter 18.73 RCW. 91-06-026 (Order 126), § 246-975-250, filed 2/26/91, effective 3/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 82-04-041 (Order 1752), § 248-17-215, filed 1/29/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-260 Emergency medical technician—Scope of care authorized—Prohibition. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 82-04-041 (Order 1752), § 248-17-216, filed 1/29/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-270 Revocation, suspension or modification of certificate. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-270, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-220, filed 8/10/84; 82-19-080 (Order 1881), § 248-17-220, filed 9/21/82; Order 1150, § 248-17-220, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

- 246-975-280 Notice of decision—Adjudicative proceeding. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-280, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 1989 1st ex.s. c 9 § 106. 90-06-019 (Order 039), § 248-17-230, filed 2/28/90, effective 3/1/90; Order 1150, § 248-17-230, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-290 Inspections and investigations. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-290, filed 12/27/90, effective 1/31/91; Order 1150, § 248-17-240, filed 9/2/76.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-300 First responder qualifications and training. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-300, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-250, filed 8/10/84.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-310 First responder training course contents, registration and instructor qualification. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-310, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-255, filed 8/10/84.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-320 First responder—Certification and recertification. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-320, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 18.73 RCW. 89-22-108 (Order 007), § 248-17-260, filed 11/1/89, effective 12/2/89. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-260, filed 8/10/84.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-330 Recertification—General requirements. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-330, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 18.73 RCW. 89-22-108 (Order 007), § 248-17-261, filed 11/1/89, effective 12/2/89.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-340 First responder—Reciprocity, challenges and reinstatement. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-340, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-265, filed 8/10/84.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-350 First responder—Scope of care authorized, prohibited. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-350, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-270, filed 8/10/84.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-360 First responder—Revocation or suspension of certificate. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-360, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.73.080. 84-17-036 (Order 2138), § 248-17-275, filed 8/10/84.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-975-990 Ambulances and first-aid vehicles licensing and inspection fees. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-975-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20B.110. 89-16-064 (Order 2839), § 440-44-023, filed 7/31/89, effective 8/31/89. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-023, filed 6/4/82.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

Chapter 246-977

ADVANCED LIFE SUPPORT TECHNICIANS

- 246-977-001 Declaration of purpose. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-977-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205. 78-09-055 (Order 1329), § 248-15-010, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-010 Definitions. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-977-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205. 87-19-025 (Order 2532), § 248-15-020, filed 9/10/87; 84-17-035 (Order 2137), § 248-15-020, filed 8/10/84; 81-23-016 (Order 1718), § 248-15-020, filed 11/12/81; 78-09-055 (Order 1329), § 248-15-020, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-020 Medical program director. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-977-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205. 87-19-025 (Order 2532), § 248-15-025, filed 9/10/87.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-030 Physician's trained mobile intravenous therapy technician—Airway management technician—Mobile intensive care paramedic, selection, general training, and knowledge standards. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-977-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205. 84-17-035 (Order 2137), § 248-15-030, filed 8/10/84; 81-23-016 (Order 1718), § 248-15-030, filed 11/12/81; 78-09-055 (Order 1329), § 248-15-030, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-040 Physician's trained mobile IV therapy technician—Training and knowledge standards. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-977-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205. 89-06-003 (Order 2764), § 248-15-040, filed 2/16/89; 78-09-055 (Order 1329), § 248-15-040, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-050 Physician's trained mobile airway management technician—Training and knowledge standards. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-977-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205. 89-06-003 (Order 2764), § 248-15-050, filed 2/16/89; 81-23-016 (Order 1718), § 248-15-050, filed 11/12/81; 78-09-055 (Order 1329), § 248-15-050, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-060 Physician's trained mobile intensive care paramedic—Training and knowledge standards. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-977-060, filed 12/27/90, effective 1/31/91. Statutory

- Authority: RCW 18.71.205, 78-09-055 (Order 1329), § 248-15-060, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-070 Testing. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-977-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205, 78-09-055 (Order 1329), § 248-15-070, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-080 Certification and recertification. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-977-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205, 84-17-035 (Order 2137), § 248-15-080, filed 8/10/84; 81-23-016 (Order 1718), § 248-15-080, filed 11/12/81; 78-09-055 (Order 1329), § 248-15-080, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-090 Certification of individuals who have not completed a training course conducted by approved training physicians in the state of Washington. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-977-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205, 81-23-016 (Order 1718), § 248-15-091, filed 11/12/81.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-100 Revocation, suspension or modification of certificate. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-977-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.71.205, 84-17-035 (Order 2137), § 248-15-100, filed 8/10/84; 78-09-055 (Order 1329), § 248-15-100, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.
- 246-977-110 Notice of decision—Adjudicative proceeding. [Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-977-110, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 18.71.205, 90-06-019 (Order 039), § 248-15-110, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 18.71.205, 78-09-055 (Order 1329), § 248-15-110, filed 8/22/78.] Repealed by 93-01-148 (Order 323), filed 12/23/92, effective 1/23/93. Statutory Authority: RCW 43.70.040 and chapters 18.71, 18.73 and 70.168 RCW.

Chapter 246-03 WAC

**STATE ENVIRONMENTAL POLICY ACT—
GUIDELINES**

WAC

- 246-03-001 Purpose.
- 246-03-010 Definitions.
- 246-03-020 Adoption by reference.
- 246-03-030 Timing and procedures for specified major actions.
- 246-03-040 Exemptions for emergency actions.
- 246-03-050 Determination of lead agency and responsible official.
- 246-03-060 Recommended timing for threshold determination.
- 246-03-070 Threshold determination process.
- 246-03-080 Adjudicative proceeding.
- 246-03-090 Scoping.
- 246-03-100 Issuance of draft EIS.
- 246-03-110 Policies and procedures for conditioning or denying permits or other approvals.
- 246-03-120 Public hearings.

- 246-03-130 Responsibilities of the department as a consulted agency.
- 246-03-140 SEPA committee.
- 246-03-150 SEPA public information.
- 246-03-160 Severability.

WAC 246-03-001 Purpose. This chapter implements the state-wide rules in chapter 197-11 WAC as they apply to the department of health. These rules are promulgated under RCW 43.21C.120 (the State Environmental Policy Act) and chapter 197-11 WAC (SEPA rules).

[Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-03-001, filed 12/27/90, effective 1/31/91.]

WAC 246-03-010 Definitions. In addition to the definitions contained in WAC 197-11-700 through 197-11-799, the following terms shall have the listed meanings:

Acting agency means an agency with jurisdiction which has received an application for a license, or which is proposing an action.

Agency guidelines shall mean chapter 246-03 WAC.

Department shall mean the department of health.

Environmental report shall mean a document prepared by the applicant, when required by the department, for use in the preparation of a draft EIS.

Licensing means the agency process in granting, renewing or modifying a license.

Private applicant means any person or entity, other than an agency as defined in this section, applying for a license from an agency.

Secretary shall mean the secretary of the department of health.

SEPA committee means the departmental committee which oversees the department's SEPA activities. The committee's composition and responsibilities are outlined in WAC 246-03-140.

SEPA guidelines shall mean chapter 197-11 WAC.

[Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-03-010, filed 12/27/90, effective 1/31/91.]

WAC 246-03-020 Adoption by reference. The department of health adopts the following sections or subsections of chapter 197-11 WAC by reference:

WAC

- 197-11-010 Authority.
- 197-11-020 Purpose.
- 197-11-030 Policy.
- 197-11-040 Definitions.
- 197-11-050 Lead agency.
- 197-11-055 Timing of the SEPA process.
- 197-11-060 Content of environmental review.
- 197-11-070 Limitations on actions during SEPA process.
- 197-11-080 Incomplete or unavailable information.
- 197-11-090 Supporting documents.
- 197-11-100 Information required of applicants.
- 197-11-300 Purpose of this part.
- 197-11-305 Categorical exemptions.
- 197-11-310 Threshold determination required.
- 197-11-315 Environmental checklist.
- 197-11-330 Threshold determination process.
- 197-11-335 Additional information.

- 197-11-340 Determination of nonsignificance (DNS).
 197-11-350 Mitigated DNS.
 197-11-360 Determination of significance (DS)/initiation of scoping.
 197-11-390 Effect of threshold determination.
 197-11-400 Purpose of EIS.
 197-11-402 General requirements.
 197-11-405 EIS types.
 197-11-406 EIS timing.
 197-11-408 Scoping.
 197-11-410 Expanded scoping. (Optional)
 197-11-420 EIS preparation.
 197-11-425 Style and size.
 197-11-430 Format.
 197-11-435 Cover letter or memo.
 197-11-440 EIS contents.
 197-11-442 Contents of EIS on nonproject proposals.
 197-11-443 EIS contents when prior nonproject EIS.
 197-11-444 Elements of the environment.
 197-11-448 Relationship of EIS to other considerations.
 197-11-450 Cost-benefit analysis.
 197-11-455 Issuance of DEIS.
 197-11-460 Issuance of FEIS.
 197-11-500 Purpose of this part.
 197-11-502 Inviting comment.
 197-11-504 Availability and cost of environmental documents.
 197-11-508 SEPA register.
 197-11-510 Public notice.
 197-11-535 Public hearings and meetings.
 197-11-545 Effect of no comment.
 197-11-550 Specificity of comments.
 197-11-560 FEIS response to comments.
 197-11-570 Consulted agency costs to assist lead agency.
 197-11-600 When to use existing environmental documents.
 197-11-610 Use of NEPA documents.
 197-11-620 Supplemental environmental impact statement—Procedures.
 197-11-625 Addenda—Procedures.
 197-11-630 Adoption—Procedures.
 197-11-635 Incorporation by reference—Procedures.
 197-11-640 Combining documents.
 197-11-650 Purpose of this part.
 197-11-655 Implementation.
 197-11-660 Substantive authority and mitigation.
 197-11-680 Appeals.
 197-11-700 Definitions.
 197-11-702 Act.
 197-11-704 Action.
 197-11-706 Addendum.
 197-11-708 Adoption.
 197-11-710 Affected tribe.
 197-11-712 Affecting.
 197-11-714 Agency.
 197-11-716 Applicant.
 197-11-718 Built environment.
 197-11-720 Categorical exemption.
 197-11-722 Consolidated appeal.
 197-11-724 Consulted agency.
 197-11-726 Cost-benefit analysis.
 197-11-728 County/city.
 197-11-730 Decision maker.
 197-11-732 Department.
 197-11-734 Determination of nonsignificance (DNS).
 197-11-736 Determination of significance (DS).
 197-11-738 EIS.
 197-11-740 Environment.
 197-11-742 Environmental checklist.
 197-11-744 Environmental document.
 197-11-746 Environmental review.
 197-11-748 Environmentally sensitive area.
 197-11-750 Expanded scoping.
 197-11-752 Impacts.
 197-11-754 Incorporation by reference.
 197-11-756 Lands covered by water.
 197-11-758 Lead agency.
 197-11-760 License.
 197-11-762 Local agency.
 197-11-764 Major action.
 197-11-766 Mitigated DNS.
 197-11-768 Mitigation.
 197-11-770 Natural environment.
 197-11-772 NEPA.
 197-11-774 Nonproject.
 197-11-776 Phased review.
 197-11-778 Preparation.
 197-11-780 Private project.
 197-11-782 Probable.
 197-11-784 Proposal.
 197-11-786 Reasonable alternative.
 197-11-788 Responsible official.
 197-11-790 SEPA.
 197-11-792 Scope.
 197-11-793 Scoping.
 197-11-794 Significant.
 197-11-796 State agency.
 197-11-797 Threshold determination.
 197-11-799 Underlying governmental action.
 197-11-800 Categorical exemptions.
 197-11-810 Exemptions and nonexemptions applicable to specific state agencies.
 197-11-820 Department of licensing.
 197-11-845 Department of social and health services.
 197-11-880 Emergencies.
 197-11-890 Petitioning DOE to change exemptions.
 197-11-900 Purpose of this part.
 197-11-902 Agency SEPA policies.
 197-11-904 Agency SEPA procedures.
 197-11-906 Content and consistency of agency procedures.
 197-11-908 Environmentally sensitive areas.
 197-11-910 Designation of responsible official.
 197-11-912 Procedures on consulted agencies.
 197-11-914 SEPA fees and costs.
 197-11-916 Application to ongoing actions.
 197-11-917 Relationship to chapter 197-10 WAC.
 197-11-918 Lack of agency procedures.
 197-11-920 Agencies with environmental expertise.
 197-11-922 Lead agency rules.
 197-11-924 Determining the lead agency.
 197-11-926 Lead agency for governmental proposals.
 197-11-928 Lead agency for public and private proposals.
 197-11-930 Lead agency for private projects with one agency with jurisdiction.

- 197-11-932 Lead agency for private projects requiring licenses from more than one agency, when one of the agencies is a county/city.
- 197-11-934 Lead agency for private projects requiring licenses from a local agency, not a county/city, and one or more state agencies.
- 197-11-936 Lead agency for private projects requiring licenses from more than one state agency.
- 197-11-938 Lead agencies for specific proposals.
- 197-11-940 Transfer of lead agency status to a state agency.
- 197-11-942 Agreements on lead agency status.
- 197-11-944 Agreements on division of lead agency duties.
- 197-11-946 DOE resolution of lead agency disputes.
- 197-11-948 Assumption of lead agency status.
- 197-11-950 Severability.
- 197-11-955 Effective date.
- 197-11-960 Environmental checklist.
- 197-11-965 Adoption notice.
- 197-11-970 Determination of nonsignificance (DNS).
- 197-11-980 Determination of significance and scoping notice (DS).
- 197-11-985 Notice of assumption of lead agency status.
- 197-11-990 Notice of action.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-020, filed 12/27/90, effective 1/31/91.]

WAC 246-03-030 Timing and procedures for specified major actions. (1) Regulations and licenses relating to radioactive material.

(a) Scope of major action.

(i) Regulations relating to radioactive material shall include the adoption or amendment by the department of any regulations incorporating general standards for issuance of licenses authorizing the possession, use and transfer of radioactive material pursuant to RCW 70.98.080, and 70.121.030.

(ii) The issuance, revocation or suspension of individual licenses under RCW 70.98.080 shall be exempt. However, the following licenses shall not be exempt: Licenses to operate low level waste burial facilities or licenses to operate or expand beyond design capacity mineral processing facilities, or their tailings areas, whose products, or byproducts, have concentrations of naturally occurring radioactive materials in excess of exempt concentrations as specified in WAC 246-232-010.

(b) Timing of SEPA requirements for regulations for radioactive material.

(i) A final EIS or determination of nonsignificance, whichever is determined appropriate by the lead agency's responsible official, shall be completed for proposed regulations relating to radioactive material prior to the hearing preceding final adoption of such regulations.

(ii) The responsible official shall mail to the department of ecology headquarters office in Olympia for listing in the "SEPA register" (see WAC 197-11-508) a copy of any determination of nonsignificance, a copy of the draft EIS, and a copy of the final EIS. Copies of the draft EIS shall also be mailed to those agencies identified in WAC 197-11-455, and of the final EIS to those agencies identified in WAC 197-11-460. The responsible official shall also give

public notice in the form and manner specified in RCW 43.21C.080 of the determination of nonsignificance or final EIS.

(c) Timing of SEPA requirements for licenses for uranium or thorium mills or radioactive waste burial facilities.

(i) The applicant shall be responsible for completing an environmental checklist, furnishing additional information needed by the department to make the threshold determination, and preparing an environmental report regarding the environmental impact of proposed activities for independent evaluation by the department, prior to issuance of a draft EIS by the responsible official. The environmental report shall be submitted within ninety days following determination of significance. The following material presents a more detailed description of the responsibilities of the private applicant as well as of the responsible official.

(ii) The applicant shall be responsible for contacting the responsible official during the early stages of the applicants planning activities to obtain an outline of SEPA requirements.

(iii) Thereafter the private applicant shall be responsible for preparation of an environmental checklist. The responsible official shall review each environmental checklist and, within fifteen days of the responsible official's receipt of the checklist, shall prepare and issue either a determination of nonsignificance as per WAC 197-11-340 or a determination of significance as per WAC 197-11-360.

(iv) When the responsible official has issued a determination of nonsignificance, the official shall send the determination and environmental checklist to the applicant and to all agencies with jurisdiction for review and comment as per WAC 197-11-340.

(v) When the responsible official makes a determination of significance, the preparation of an environmental report shall be completed in a manner consistent with the requirements for a draft EIS and shall be the responsibility of the private applicant. If the applicant desires, he may contract with an outside consultant for the preparation of the environmental report. The department may also contract with an outside consultant for the preparation of a draft or final EIS. The department or the department's contracted consultant will independently evaluate the environmental report and be responsible for the reliability of any information used in the draft or final EIS. Unless the scope or complexity of the proposal indicates otherwise, the final EIS shall be issued as described in WAC 197-11-460(6).

(vi) The responsible official shall request review of the draft EIS from the agencies listed in WAC 197-11-455 and from such other agencies as he determines.

(vii) The responsible official shall mail a copy of the draft EIS to the department of ecology headquarters in Olympia for listing in the "SEPA register" (see WAC 197-11-508) and also to those agencies listed in WAC 197-11-455.

(viii) When the responsible official determines that substantial changes are needed or that new information has become available, the preparation of an amended or new environmental report is the responsibility of the private applicant.

(ix) The responsible official shall mail a copy of the final EIS to the department of ecology headquarters office in

Olympia for listing in the "SEPA register" (see WAC 197-11-508). The responsible official shall also mail copies of the final EIS to those agencies specified in WAC 197-11-460 and shall give public notice of the completion of the final EIS in the form and manner specified in RCW 43.21C.080.

(2) Water system plans for public water systems as per WAC 246-290-100 and RCW 70.116.050.

(a) Scope of major action. Water system plans are plans developed and submitted to the department for review and approval pursuant to WAC 246-290-100 and RCW 70.116.050.

(b) Timing and procedures for water system plans prepared by private applicants.

(i) In general, when a private applicant has prepared a water system plan for review and approval by the department, the private applicant shall be responsible for completing an environmental checklist, furnishing additional information needed by the department to make the threshold determination, and preparing the draft and final EIS under the direction of the responsible official. The following material presents a more detailed description of the responsibilities of the private applicant as well as the responsible official.

(ii) Follow steps outlined in subsection (1)(c)(ii) through (iv) of this section.

(iii) When the responsible official makes a determination of significance, the preparation of a draft and final EIS shall be in compliance with WAC 197-11-400 through 197-11-620 and shall be the responsibility of the private applicant. If the applicant desires, he may contract with an outside consultant for preparation of the draft or final EIS. Unless the scope or complexity of the proposal indicates otherwise, the final EIS shall be completed within sixty days of the end of the comment period for the draft EIS.

(iv) See subsection (1)(c)(vi) and (vii) of this section.

(v) When the responsible official determines that substantial changes are needed or that new information has become available, the preparation of an amended or a new draft EIS is the responsibility of the private applicant.

(vi) See subsection (1)(c)(ix) of this section.

(vii) Every water system plan submitted by a private applicant to the department for review and approval shall be accompanied by either a determination of nonsignificance or a final EIS.

(c) Timing and procedure for water system plans prepared by agencies. Every water system plan submitted by an agency to the department for review and approval shall be accompanied by either a determination of nonsignificance or a final EIS.

(3) New public water supply systems and major extensions of existing public water supply systems.

(a) Scope of major action. The approval of engineering reports or plans and specifications pursuant to chapter 246-290 WAC for all surface water source development, all water system storage facilities greater than one-half million gallons, new transmission lines longer than one thousand feet and larger than eight inches in diameter located in new rights of way and major extensions to existing water distribution systems involving use of pipes greater than eight inches in diameter, which are designed to increase the existing service area by more than one square mile.

(b) Timing and procedures for projects proposed by private applicants.

(i) In general, when a private applicant seeks the approval of the department for a new public water supply or a major extension to an existing public water supply, the private applicant shall be responsible for completing an environmental checklist, furnishing additional information needed by the department to make the threshold determination, and preparing the draft and final EIS under the direction of the responsible official. The following material presents a more detailed description of the responsibilities of the private applicant as well as of the responsible official.

(ii) Follow steps outlined in subsection (1)(c)(ii) through (iv) of this section.

(iii) See subsection (2)(b)(iii) of this section.

(iv) See subsection (1)(c)(vi) and (vii) of this section.

(v) See subsection (2)(b)(v) of this section.

(vi) See subsection (1)(c)(ix) of this section.

(vii) Whenever preliminary engineering reports, or plans and specifications for a new public water supply system or a major extension to an existing public water supply system are submitted by a private applicant to the secretary for review and approval pursuant to chapter 246-290 WAC, these reports, plans and specifications shall be accompanied by a determination of nonsignificance or a final EIS.

(c) Timing and procedures for projects proposed by an agency. Whenever preliminary engineering reports, plans and specifications for a new public water supply system or a major extension to an existing public water supply system are submitted by an agency to the secretary for review and approval pursuant to chapter 246-290 WAC, these reports, plans and specifications shall be accompanied by a determination of nonsignificance or a final EIS.

(4) Certificates of need.

(a) Scope of major action. Certificate of need applications are subject to SEPA requirements whenever the applicant proposes to construct a new hospital or to construct major additions to the existing service capacity of such an institution: *Provided*, That such applications are not subject to SEPA requirements when the proposed construction consists of additions which provide less than twelve thousand square feet of floor area and with associated parking facilities designed for forty automobiles or less: *Provided further*, That certificate of need applications for "substantial acquisitions" are not subject to SEPA requirements.

(b) Timing and procedures for hospital certificates of need. Where a state or local agency other than the department is lead agency for hospital construction, the department shall not issue a certificate of need approving this hospital construction until the applicant has supplied it with a determination of nonsignificance or a final EIS, and until seven days after the issuance by the lead agency of any final EIS. Nothing in this subsection shall preclude the department from making a commitment to issue a certificate of need to an applicant subject to the timely receipt of an appropriate environmental impact statement or determination of nonsignificance.

(5) Approval of sewerage general plans and/or water general plans described in RCW 36.94.010.

(a) Scope of major action. Sewerage general plans and water general plans shall mean and include those described in RCW 36.94.010.

(b) Timing and procedures for water general plans. Every water general plan submitted by a county to the department for review and approval shall be accompanied by either a determination of nonsignificance or a final EIS.

(6) Plans and specifications for new sewage treatment works or for major extensions to existing sewage treatment works pursuant to chapter 246-271 WAC.

Scope of major action. Plans and specifications for new sewage treatment works or for major extensions to existing sewage treatment works are those which are reviewed and approved by the department pursuant to WAC 246-271-050.

(7) Construction of any building, facility or other installation for the purpose of housing department personnel or for prisons or for fulfilling other statutorily directed or authorized functions.

(a) Scope of major action. The construction of buildings, facilities or other installations for the purpose of housing department personnel or for other authorized functions shall be subject to SEPA requirements, but such construction shall not be subject to SEPA requirements when it consists of additions which provide less than twelve thousand square feet of floor area and with associated parking facilities designed for forty automobiles or less.

(b) Timing and procedures.

(i) The responsible official shall, prior to the request for construction bids, prepare an environmental checklist for each construction project of the type described in (a) of this subsection.

(ii) Within fifteen days of the request for construction bids, the responsible official shall make (A) a written declaration of nonsignificance where the responsible official determines that the proposed construction will not have a significant adverse environmental impact or (B) a written declaration of significance where the responsible official determines that the proposed construction will have a significant adverse environmental impact.

(iii) Where the responsible official has made a determination of significance, the preparation of the draft and final EIS shall be in compliance with WAC 197-11-400 through 197-11-620, and shall be the responsibility of the responsible official. Unless the scope or complexity of the proposal indicates otherwise, the final EIS shall be completed within sixty days of the end of the comment period for the draft EIS.

(iv) See subsection (1)(c)(vi) of this section.

(v) The responsible official shall mail to the department of ecology headquarters office in Olympia for listing in the "SEPA register" a copy of any determination of nonsignificance, a copy of the draft EIS, and a copy of the final EIS. Copies of the draft EIS shall also be mailed to those agencies identified in WAC 197-11-455, and of the final EIS to those agencies identified in WAC 197-11-460. The responsible official shall also give public notice in the form and manner specified in RCW 43.21C.080 of the determination of nonsignificance or final EIS.

(8) Approval of final plans for construction of a private psychiatric hospital pursuant to WAC 246-322-020, or construction of an alcoholism treatment facility pursuant to WAC 246-326-020.

(a) Scope of major action. The approval of final plans for construction of a private psychiatric hospital pursuant to WAC 246-322-020, or construction of an alcoholism

treatment center pursuant to WAC 246-326-020 shall be subject to SEPA requirements: *Provided*, That such construction shall not be subject to SEPA requirements when it consists of additions which provide less than twelve thousand square feet of floor area and with associated parking facilities designed for forty automobiles or less.

(b) Timing and procedures for construction of the type described. Where a state or local agency other than the department is lead agency for construction of the type described in (a) of this subsection, the department shall not approve final plans for construction of a private psychiatric hospital or alcoholism treatment center until the applicant for such approval has supplied the department with a final declaration of nonsignificance or a final EIS for the construction in question, and until seven days after the issuance by the lead agency of any final EIS.

[Statutory Authority: RCW 43.21C.120, 92-02-018 (Order 224), § 246-03-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-03-030, filed 12/27/90, effective 1/31/91.]

WAC 246-03-040 Exemptions for emergency actions. If the secretary makes a written declaration that actions must be undertaken immediately or within a time too short to allow full compliance with SEPA requirements; and that such actions are necessary to avoid an imminent threat to public health or safety, or to prevent an imminent danger to public or private property, or to prevent an imminent threat of serious environmental degradation; then such actions may be undertaken without complying with SEPA requirements: *Provided*, That the department is the lead agency for such actions.

[Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-03-040, filed 12/27/90, effective 1/31/91.]

WAC 246-03-050 Determination of lead agency and responsible official. (1) The department shall be the lead agency for the following actions:

(a) Adoption or amendment of regulations relating to radioactive source materials; proposals to construct, operate, or expand any uranium or thorium mill, or any tailings areas generated by uranium or thorium milling, or any low level radioactive waste burial facilities. The responsible official would be the division director, division of radiation protection, environmental health programs. Lead agency determination for other mineral processing proposals should be made in accordance with WAC 197-11-924 through 197-11-948;

(b) Approval of comprehensive plans for public water supply systems when such plans are developed by private applicants and unless indicated otherwise by WAC 197-11-932, 197-11-934 and 197-11-936, and approval of new public water supply systems or major extensions of existing public water supply systems when such systems are being proposed by a private applicant unless indicated otherwise by WAC 197-11-932, 197-11-934, and 197-11-936. The responsible official would be the section head, water supply and waste section, division of environmental health;

(c) Construction of any building, facility, or other installation for the purpose of housing department personnel or for fulfilling other statutorily directed or authorized

functions. The responsible official would be a capital programs representative from the management services division, comptroller's office;

(2) Determination of the lead agency for department major actions not listed above shall be made in accordance with the procedures and requirements of WAC 246-03-140 (4)(c) and 197-11-922 through 197-11-948.

[Statutory Authority: RCW 43.21C.120. 92-02-018 (Order 224), § 246-03-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-050, filed 12/27/90, effective 1/31/91.]

WAC 246-03-060 Recommended timing for threshold determination. In most cases the time required to complete a threshold determination should not exceed fifteen days. (WAC 197-11-310.)

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-060, filed 12/27/90, effective 1/31/91.]

WAC 246-03-070 Threshold determination process. In making a threshold determination, the responsible official shall follow the process outlined in WAC 197-11-330 through 197-11-390.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-070, filed 12/27/90, effective 1/31/91.]

WAC 246-03-080 Adjudicative proceeding. Any person has the right to an adjudicative proceeding to contest the department's final threshold determination that an EIS is or is not necessary and/or the sufficiency of the final EIS. The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), the rules in this chapter, and by chapter 246-08 WAC. If any provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

(1) A person contesting a department's decision shall within twenty-eight days of the department's official notice of issuance of a final threshold determination or final EIS:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt by the department of health; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved; and

(ii) The grounds for contesting the department decision.

(2) The initial order should be made within sixty days of the department's receipt of the application. When a party files a petition for administrative review, the review order should be made within sixty days of the department's receipt of the petition. The time to enter an order is extended by as many days as the proceeding is continued on motion by any party.

(3)(a) If the adjudicative order is that an EIS should be filed, the presiding officer or reviewing officer shall remand the matter to the department of health to file an EIS.

(b) If the adjudicative order is that the final EIS is not sufficient, the presiding officer or reviewing officer shall remand the matter to the department of health to correct the insufficiency.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-080, filed 12/27/90, effective 1/31/91.]

WAC 246-03-090 Scoping. When the department receives a scoping notice from a lead agency, the department shall submit any comments to the lead agency within twenty-one days from the date of issuance of the determination of significance. When the department is lead agency the steps in WAC 197-11-408 and 197-11-410 shall be followed.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-090, filed 12/27/90, effective 1/31/91.]

WAC 246-03-100 Issuance of draft EIS. When the department is lead agency, it shall issue the draft EIS in accordance with WAC 197-11-455.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-100, filed 12/27/90, effective 1/31/91.]

WAC 246-03-110 Policies and procedures for conditioning or denying permits or other approvals. (1) The policies and goals in this section are supplementary to existing authorities of the department.

(2) It is the policy of the department to avoid or mitigate adverse environmental impacts which may result from the department's decisions.

(3) The department shall use all practical means, consistent with other essential considerations of state policy, to improve and coordinate plans, functions, programs, and resources to the end that the state and its citizens may:

(a) Fulfill the responsibilities of each generation as trustee of the environment for succeeding generations;

(b) Assure for all people of Washington safe, healthful, productive, and aesthetically and culturally pleasing surroundings;

(c) Attain the widest range of beneficial uses of the environment without degradation, risk to health or safety, or other undesirable and unintended consequences;

(d) Preserve important historic, cultural, and natural aspects of our national heritage;

(e) Maintain, wherever possible, an environment which supports diversity and variety of individual choice;

(f) Achieve a balance between population and resource use which will permit high standards of living and a wide sharing of life's amenities; and

(g) Enhance the quality of renewable resources and approach the maximum attainable recycling of depletable resources.

(4) The department recognizes that each person has a fundamental and inalienable right to a healthful environment and that each person has a responsibility to contribute to the preservation and enhancement of the environment.

(5) The department shall ensure that presently unquantified environmental amenities and values will be given appropriate consideration in decision-making along with economic and technical considerations.

(6)(a) When the environmental document for a proposal shows it will cause significant adverse impacts, the responsible official shall consider whether:

(i) The environmental document identified mitigation measures that are reasonable and capable of being accomplished;

(ii) Other local, state, or federal requirements and enforcement would mitigate the significant adverse environmental impacts; and

(iii) Reasonable mitigation measures are sufficient to mitigate the significant adverse impacts.

(b) The responsible official may:

(i) Condition the approval for a proposal if mitigation measures are reasonable and capable of being accomplished and the proposal is inconsistent with the policies in this section; or

(ii) Deny the permit or approval for a proposal if reasonable mitigation measures are insufficient to mitigate significant adverse environmental impacts and the proposal is inconsistent with the policies in this section.

(c) The procedures in WAC 197-11-660 shall also be followed when conditioning or denying permits or other approvals.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-110, filed 12/27/90, effective 1/31/91.]

WAC 246-03-120 Public hearings. A public hearing on the environmental impact of a proposal shall be held as specified in WAC 197-11-535.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-120, filed 12/27/90, effective 1/31/91.]

WAC 246-03-130 Responsibilities of the department as a consulted agency. Other lead agencies may request the department for consultation during the SEPA process. The department shall then provide consultation in accordance with the requirements of WAC 197-11-502, 197-11-545 and 197-11-570.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-130, filed 12/27/90, effective 1/31/91.]

WAC 246-03-140 SEPA committee. (1) There is hereby created a SEPA committee to oversee the department's SEPA activities.

(2) The SEPA committee shall be composed of:

(a) One representative from the division of drinking water, environmental health programs;

(b) One representative from the facility licensing and certification section;

(c) One capital programs representative from the comptroller's office, management services division; and

(d) One representative from the division of radiation protection, environmental health programs.

(3) A representative from the office of the attorney general will provide legal support to the committee.

(4) The SEPA committee shall:

(a) Oversee the department's SEPA activities to ensure compliance with these agency guidelines, the state SEPA guidelines, and the policies and goals set forth in the State Environmental Policy Act;

(b) Oversee the future revision of these agency guidelines so as to reflect:

(i) Future amendment of SEPA or the state SEPA guidelines;

(ii) The creation of new department programs.

(c) Designate the responsible official for any major action for which the department is lead agency when such designation has not occurred elsewhere in these agency guidelines.

[Statutory Authority: RCW 43.21C.120. 92-02-018 (Order 224), § 246-03-140, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-140, filed 12/27/90, effective 1/31/91.]

WAC 246-03-150 SEPA public information. (1) When the department is lead agency, the responsible official shall retain SEPA documents required by this chapter and shall make them available to the public in accordance with chapter 42.17 RCW.

(2) When the department is lead agency, the responsible official shall transmit copies of the following documents to the department of ecology headquarters office in Olympia:

(a) All draft and final EISs. (See WAC 197-11-455 and 197-11-460.)

(b) All determinations of nonsignificance (see WAC 197-11-340).

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-150, filed 12/27/90, effective 1/31/91.]

WAC 246-03-160 Severability. If any provision of this chapter or its application to any person or circumstances is held invalid, the remainder of this chapter, or the application of the provision to other persons or circumstances, shall not be affected.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-03-160, filed 12/27/90, effective 1/31/91.]

Chapter 246-05 WAC

LOCAL PUBLIC HEALTH—GUIDELINES

WAC

246-05-020 Appendix—County, city, or town in a public health district, department, or county-city department.

WAC 246-05-020 Appendix—County, city, or town in a public health district, department, or county-city department.

APPENDIX

Guidelines¹

for Negotiating Support by a

County, City, or Town in

Maintaining and Operating the Local Public Health Agency

Agency

(District, Department, or County-City Department)

A. Every county, city, and town should furnish the support necessary to provide the following basic public health services^{2,3}:

1. Personal health protection services

Epidemiologic services

Tuberculosis

Sexually transmitted diseases

Other communicable diseases

Immunizations

Family planning

Child health services

Crippled children's services

- Maternal and infant services
- Nutrition and/or WIC services
- Chronic disease prevention, detection, hazard control
- 2. Environmental health protection services
 - Food
 - Water
 - Solid waste disposal
 - Liquid waste disposal
 - Living environment
 - Chemical and physical hazards
 - Vector control
- 3. Laboratory services necessary to support any of the programs listed in A 1 and 2 of this appendix (provide or purchase)
- 4. Vital records, birth, and death registration
- 5. Health promotion, information, and education
- B. In addition, counties, cities, and towns at their option may choose to support additional public health protection and promotion actions or services. These may include, but not be limited to:
 - Dental health
 - School health services
 - Jail health services
 - Mental health services
 - Alcoholism services
 - Developmental disabilities
 - Health screening programs for the aging (Senior Citizens Services Act)
 - Home health services
 - Primary care for special population groups
 - Emergency health services
 - Community health planning
 - Any program area identified by local or state health officials when the health of the general population is shown to be at risk of adverse health effects.
- C. Potential sources of funds:
 1. Fees for permits and licenses
 2. Charges for services
 3. Contracts with counties, cities, schools, and other agencies
 4. State and federal funds
 5. Sales of property
 6. Miscellaneous gifts and sales, e.g., sale of publications
 7. County funds for special services not needed or desired by all participating counties and cities
 8. City funds for special services
 9. Reserve funds for special purposes
 10. County general fund base support
- D. Determination of equitable share for each municipality (county or city) of its fiscal support of basic health services:

1. The level of the basic health services budget and the respective county and city general fund contributions necessary to balance that budget should be determined through a negotiation process. The negotiators may wish to use some form of formula in this determination. Negotiating the formula is a basic part of the negotiation process. A number of formulas may be considered. Most formulas involve one or more of the following factors: Population (per capita), assessed valuation, use, need, or proportion of budget. No single formula is mandated state-wide, but a formula, once adopted by a local health board, should apply to all member jurisdictions. Agreements need not be limited to a single year. Multiyear contracts may be negotiated with the agreement adopting a basic formula but providing for annual adjustments of variable factors such as valuation or population.

2. The following formulas are presented as guidelines. Options 1 through 3 provide for a county base support while options 4 and 5 have no county base built into the formula. The county base is a variable replacing previous statutory millages for public health and tuberculosis. The base may vary. In multicounty health districts, the county *base* public health support is to be determined annually by the district health board in consultation with the respective boards of county commissioners and divided among the member counties in proportion to each county's assessed valuation. An acceptable alternative method is to vary the *base* among the county members of the health district as the board of health, in consultation with the respective boards of county commissioners, shall determine.

Option 1:

$$C = 1/2 B \frac{A_c}{A_t} + 1/2 B \frac{P_c}{P_t}$$

Where:

C = Contribution of city or county needed to balance the budget (basic plus optional dollars)

B = Dollars needed to balance the basic plus optional dollar portion of the local public health agency annual budget

A_c = The assessed valuation of the component governmental unit, i.e., the city, town, or unincorporated area of the county

A_t = The total assessed valuation of the governmental jurisdictions encompassed by the local public health agency

P_c = Population of the component governmental unit, i.e., the city, town, or unincorporated area of the county

P_t = Total population of the governmental jurisdictions encompassed by the health district

Variation 1:

Derive the proportion of assessed valuation and population in the formula from the average of several years instead of the current year only.

Option 2:

$$C = B \frac{A_c}{A_t}$$

Where:

C = Contribution of city or county needed to balance the budget (basic plus optional dollars)

B = Dollars needed to balance the basic plus optional portion of the local public health agency annual budget

A_c = The assessed valuation of the component governmental unit, i.e., the city, town, or unincorporated area of the county

A_t = The total assessed valuation of the governmental jurisdictions encompassed by the local public health agency

Option 3:

$$C = B \frac{P_c}{P_t}$$

Where:

C = Contribution of city or county needed to balance the budget (basic plus optional dollars)

B = Dollars needed to balance the basic plus optional portion of the local public health agency annual budget

P_c = Population of the component governmental unit, i.e., the city, town, or unincorporated area of the county

P_t = Total population of the governmental jurisdictions encompassed by the local public health agency

Variation 1:

The per capita share is graduated by grouping or classes of cities so that small cities pay less than large cities.

Variation 2:

The county *base* remains the same but the per capita share is applied only to the cities.

Option 4:

- (1) Charge each city or county the full estimated cost of environmental health services
- (2) Charge each county the full cost of tuberculosis services
- (3) Charge each city and county the remainder of tax necessary on a per capita basis
- (4) Reduce each city's charge by giving credit to them for the county property taxes paid by the property owners of each city
- (5) Small cities may be charged a reduced share per capita

Option 5:

Half of the necessary funds are divided among the cities and counties in proportion to a statistical report of the services provided to each. The other half are provided on the basis of population or another of the options identified.

¹Pertains also to a county, city, or town which has withdrawn from a health district to operate its own health department or decides to contract with another municipality for such health services.

²Basic services are those services required by state law and regulations or provided under service contracts with the department of social and health services.

³A list of all applicable laws, administrative regulations, and available current service contracts will be provided by the state board of health upon request.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-05-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.46.080 and 43.20.050, 83-19-057 (Order 268), § 248-990-990, filed 9/20/83; 83-04-011 (Order 253), § 248-990-990, filed 1/24/83; Order 104, Appendix—Guidelines (codified as WAC 248-990-990), filed 9/25/74; Appendix, filed 8/4/67.]

Chapter 246-08 WAC PRACTICE AND PROCEDURE

WAC

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246-08-001	Application of chapter 248-08 WAC.
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246-08-030	Administrative law judge—Authority—Application of law—Assignment—Disqualification.
246-08-040	Representation.
246-08-050	Prehearing conference.
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246-08-090	Subpoenas.
246-08-100	Teleconference hearing.
246-08-110	Rules of evidence.
246-08-120	Contents of orders.
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246-08-140	Reconsideration.
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246-08-160	Interpreters.
246-08-170	Group hearing.
246-08-180	Continuance.
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246-08-200	Judicial review of final adjudicative order.
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	ADMINISTRATIVE PROCEDURES
246-08-320	Delegation of authority by secretary.
246-08-330	Declaratory orders—Forms, content, and filing.
246-08-340	Declaratory orders—Procedural rights of persons in relation to petition.
246-08-350	Declaratory orders—Disposition of petition.
246-08-360	Petition for rule making—Form, content, and filing.
246-08-370	Petition for rule making—Consideration and disposition.
246-08-380	Updating mailing lists.
246-08-390	Acquisition, retention and security of health care information.

POLICIES

246-08-520	Nondiscrimination.
246-08-560	Refund of fees.

43.70.040. 91-02-049 (Order 121), recodified as § 246-08-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-413, filed 2/28/90, effective 3/1/90.]

ADJUDICATIVE PROCEEDINGS

WAC 246-08-001 Application of chapter 246-08 WAC. (1) Scope. This chapter applies to adjudicative proceedings, begun on or after July 1, 1989, in programs administered by the department of health except those professional licensing programs for which the secretary is not the disciplinary authority as defined under RCW 18.130.040 (2)(b). The definition of the word "begun" is the department's receipt of the application for an adjudicative proceeding. Proceedings begun before July 1, 1989, are governed by the procedural rules in effect on June 30, 1989. Legal authority for adopting this chapter is RCW 34.05.220 (1)(a).

(2) Conflict in rules. If a provision in this chapter conflicts with a provision in the chapter containing the program's substantive rules, the provision in the chapter containing the program's substantive rules governs.

(3) Physical and mailing addresses. The presiding officer is generally an administrative law judge from the office of administrative hearings. Presiding officer administrative and field office addresses are listed under WAC 10-04-020. The reviewing officer is generally the secretary or the secretary's designee. The reviewing officer's address is the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-001, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-410, filed 2/28/90, effective 3/1/90; Regulation 08.410, effective 3/11/60.]

WAC 246-08-020 Application for an adjudicative proceeding. (1) Uniform Disciplinary Act application. A person contesting a decision or statement of charges under the Uniform Disciplinary Act shall file a written application for an adjudicative proceeding with the administrative hearings unit. The application must be filed within twenty days of the person's receipt of the decision or statement of charges.

(2) Other program application. A person contesting a department decision in a program not governed by the Uniform Disciplinary Act shall file a written application for an adjudicative proceeding by a method showing proof of receipt with the administrative hearings unit within twenty-eight days of receipt of the decision.

(3) Application contents. The application must include or have attached:

(a) A specific statement of the issue or issues and law involved;

(b) The grounds for contesting the department decision or statement of charges; and

(c) A copy of the contested department decision or statement of charges.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW (1992 Ed.)

WAC 246-08-030 Administrative law judge— Authority—Application of law—Assignment—Disqualification. (1) Authority. The administrative law judge shall:

(a) Hear and decide the issue anew (de novo);

(b) Determine the order of presentation of evidence;

(c) Administer oaths and affirmations;

(d) Issue subpoenas;

(e) Rule on procedural matters, objections, and motions;

(f) Rule on offers of proof and receive relevant evidence;

(g) Interrogate witnesses called by the parties in an impartial manner to develop any facts deemed necessary to fairly and adequately decide the matter;

(h) Call additional witnesses and request additional exhibits deemed necessary to complete the record and receive such evidence subject to full opportunity for cross-examination and rebuttal by all parties;

(i) Take any appropriate action necessary to maintain order during the hearing;

(j) Permit or require oral argument or briefs and determine the time limits for submission thereof;

(k) Permit photographic and recording equipment at hearings subject to conditions imposed by the administrative law judge to preserve confidentiality or to prevent disruption;

(l) Permit a person to waive any right conferred upon that person by chapter 34.05 RCW and/or chapter 246-08 WAC, except to the extent precluded by another provision of law; and

(m) Take any other action necessary and authorized by any applicable rule.

(2) Application of law. The administrative law judge shall:

(a) Apply as the first source of law governing an issue the rules of the department as adopted in the Washington Administrative Code (WAC);

(b) If there is no department rule governing the issue, resolve the issue on the basis of the best legal authority and reasoning available, including that found in federal and Washington Constitutions, statutes and regulations, and court decisions;

(c) Not declare any department rule invalid;

(d) If the validity of any department rule is raised as an issue at any proceeding, permit arguments to be made on the record concerning that issue for subsequent review purposes; and

(e) If the sole issue is one of federal or state law requiring adjustments for classes of people the department serves or regulates, dismiss the application without permitting argument to be made on the record regarding the validity of the law.

(3) Assignment of administrative law judge. If the notice of hearing does not state the name of the presiding administrative law judge, the chief administrative law judge of the office of administrative hearings shall:

(a) Make such assignment five days or more before the hearing; and

(b) Disclose the assignment to any party or representative making inquiry.

(4) Motion of prejudice.

(a) A motion of prejudice with a supporting affidavit under RCW 34.12.050 shall be filed at least three days before the hearing or any earlier stage of the adjudicative proceeding when the administrative law judge may be required to issue a discretionary ruling.

(b) The chief administrative law judge or designee shall rule upon subsequent motions of prejudice filed by the same party in the same proceeding.

(5) Petition for disqualification. An individual petitioning to disqualify an administrative law judge under RCW 34.05.425 shall file such petition with the administrative law judge assigned to preside over the proceeding.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-425, filed 2/28/90, effective 3/1/90.]

WAC 246-08-040 Representation. (1) Appellant representation.

(a) The appellant may represent himself or herself, or the appellant may be represented by a lawyer or paralegal or by a relative, friend, or other person.

(b) The appellant may not be represented in an adjudicative proceeding by an employee of the department.

(c) Nothing in this regulation shall be construed as prohibiting an employee of the department from:

(i) Acting as a witness on behalf of an appellant; or

(ii) Referring an appellant to legal resources in the community; or

(iii) Assisting the appellant in obtaining nonconfidential information available to the appellant; or

(iv) Advising the appellant of possible arguments made against the contested decision.

(2) Department representation. The department may be represented by a department employee or by the office of the attorney general.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-428, filed 2/28/90, effective 3/1/90.]

WAC 246-08-050 Prehearing conference. (1) Request, purpose, order, and objection. Upon the administrative law judge's own motion or upon request of a party, the administrative law judge may direct the parties or the parties' representatives to engage in a prehearing conference.

(a) The purpose of a prehearing conference is to consider:

(i) Simplification of issues;

(ii) The necessity or desirability of amendments to the pleadings;

(iii) The possibility of obtaining stipulations, admissions of fact, and admissions of the authenticity of documents to avoid unnecessary proof;

(iv) Limitations on the number and consolidation of the examination of witnesses;

(v) Procedural matters;

(vi) Distribution of written testimony and exhibits to the parties before the hearing; and

(vii) Such other matters as may aid in the disposition or settlement of the proceeding.

(b) The administrative law judge may conduct a prehearing conference by telephone conference call, in person, or other manner.

(c) Following the prehearing conference, the administrative law judge shall issue an order reciting the:

(i) Action taken at the conference;

(ii) Amendments allowed to the pleadings; and

(iii) Agreements the parties made concerning all of the matters considered.

(d) If no objection to such order is filed with the administrative law judge within ten days after the date such order is served, the order shall control the subsequent course of the proceeding unless modified for good cause by subsequent order.

(2) Conference on day of hearing. Nothing in this rule shall limit the administrative law judge during any proceeding from conducting a conference before the taking of testimony or recessing the hearing and conducting a conference. The administrative law judge shall state on the record the results of such conference.

(3) Not a limit to informal settlement. Nothing in this rule shall limit the right of any agency to informally settle a matter to make an adjudicative proceeding unnecessary.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-431, filed 2/28/90, effective 3/1/90.]

WAC 246-08-060 Notice of hearing. (1) Served by. The department or the office of administrative hearings shall serve a notice of hearing on the parties and representatives.

(2) Contents.

(a) If the hearing is conducted by teleconference call, the notice shall so state.

(b) The notice shall state:

(i) If a limited English-speaking or hearing impaired party or witness needs an interpreter, a qualified interpreter shall be appointed; and

(ii) There shall be no cost to the party or witness for the interpreter.

(c) The notice shall include a form for a party to:

(i) Indicate the need for an interpreter; and

(ii) Identify the primary language or hearing impaired status of the person.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-434, filed 2/28/90, effective 3/1/90.]

WAC 246-08-070 Filing and service of papers. (1) Service required when filing. A party filing a pleading, brief, or other paper, except an application for an adjudicative proceeding, with the administrative hearings unit, or the administrative law judge shall serve a copy of the paper upon:

(a) Every other party; or

(b) If the other party is represented or has an agent, the other party's representative or agent.

(2) Filing and service made by. Unless otherwise provided by law, filing and service shall be made by:

- (a) Personal service;
- (b) First class, registered, or certified mail;
- (c) Telegraph;
- (d) Electronic telefacsimile transmission and same-day mailing of copies; or
- (e) Commercial parcel delivery company.

(3) Filing complete. Filing with the administrative hearings unit shall be complete upon actual receipt during office hours at the appropriate office. Filing with the administrative law judge shall be complete upon actual receipt during office hours at the office of the administrative law judge.

(4) Service complete. Service shall be complete when:

- (a) Personal service is made;
- (b) Mail is properly stamped, addressed, and deposited in the United States mail;
- (c) A properly addressed telegram is deposited with a telegraph company with charges prepaid;
- (d) An electronic telefacsimile transmission produces proof of transmission; or
- (e) A commercial parcel is delivered to the parcel delivery company with charges prepaid.

(5) Proof of service. Where proof of service is required by statute or rule, filing the papers with the department or the administrative law judge, together with one of the following, shall constitute proof of service:

- (a) An acknowledgement of service;
- (b) A certificate of service including the date the papers were served upon all parties and the signature of the serving party indicating service was completed by:
 - (i) Personal service;
 - (ii) Mailing a copy properly addressed with postage prepaid to each party to the proceeding, or the party's representative or authorized agent;
 - (iii) Telegraphing a copy properly addressed with charges prepaid to each party to the proceeding, or the party's representative or authorized agent; or
 - (iv) Transmitting a copy by electronic telefacsimile device and, on the same day, mailing a copy to each party to the proceeding, or the party's representative or authorized agent; or
 - (v) Depositing a copy properly addressed with charges prepaid with a commercial parcel delivery company.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-070, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-437, filed 2/28/90, effective 3/1/90.]

WAC 246-08-080 Vacating an order of dismissal for reason of default or withdrawal. (1) Right to request. A party against whom a dismissal for reason of default or withdrawal is entered shall have the right to file a written petition requesting that the order be vacated.

(2) Contents. The request shall state the grounds relied upon.

(3) Filed at. The request shall be filed at the administrative hearings unit for other programs within twenty-one days from the date the dismissal order was served.

(4) Grounds to vacate an order of dismissal. If, in the reasoned opinion of the administrative law judge, good cause to grant the relief is shown, the administrative law judge shall vacate the order of dismissal and reinstate the application.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-440, filed 2/28/90, effective 3/1/90; Regulation 08.440, effective 3/11/60.]

WAC 246-08-090 Subpoenas. (1) Statutory requirements. The administrative law judge, the department, and attorneys for parties may issue a subpoena. A subpoena shall be issued and enforced and witness fees paid, as provided under RCW 34.05.446.

(2) Contents. Every subpoena shall:

- (a) Identify the party causing issuance of the subpoena;
- (b) State the name of the agency as the department of health;
- (c) State the title of the proceeding; and
- (d) Command the person to whom the subpoena is directed to attend and give testimony or produce designated books, documents, or things under the person's control at the time and place set for the hearing.

(3) Service. A subpoena may be served by any suitable person eighteen years of age or older by:

- (a) Exhibiting and reading the subpoena to the witness;
- (b) Giving the witness a copy; or
- (c) Leaving a copy at the place of the witness' residence.

(4) Proof of service. When a subpoena is served by other than an officer authorized to serve process, proof of service shall be made by affidavit.

(5) Quashing, modifying, conditioning. The administrative law judge, upon request made promptly and in any event at or before the time specified for compliance in the subpoena, may:

- (a) Quash or modify the subpoena if the subpoena is unreasonable and oppressive; or
- (b) Condition denial of the request upon the advancement by the person in whose behalf the subpoena is issued of the reasonable cost of producing the books, papers, documents, or tangible things.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-446, filed 2/28/90, effective 3/1/90.]

WAC 246-08-100 Teleconference hearing. (1) When authorized. The administrative law judge may conduct all or part of the hearing by telephone, television, or other electronic means if each participant in the hearing has an opportunity to participate in, to hear, and, if technically and economically feasible, to see the entire proceeding while it is taking place.

(2) Documentary evidence. When the hearing is conducted by electronic means, documentary evidence shall be submitted in advance as provided under WAC 246-08-110(2).

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-449, filed 2/28/90, effective 3/1/90.]

WAC 246-08-110 Rules of evidence. (1) Objections. The administrative law judge shall rule upon objections to the admissibility of evidence pursuant to RCW 34.05.452.

(2) Submission in advance. The administrative law judge may order:

(a) A party to submit documentary evidence to the administrative law judge and to the other parties sufficiently in advance of the hearing to permit study and preparation of cross-examination and rebuttal evidence;

(b) Documentary evidence not submitted in advance as required in subsection (2)(a) of this section, shall not be received in evidence in the absence of a clear showing the offering party had good cause for failure to produce the evidence sooner, unless the evidence is submitted for impeachment purposes; and

(c) The authenticity of all documents submitted in advance in a proceeding, when such submission is required, to be deemed admitted unless written objection is filed before the hearing. However, a party shall be permitted to challenge such authenticity at a later time upon a clear showing of good cause for failure to file such written objection.

(3) Portions of a document. When portions only of a document are relied upon, the offering party shall identify the pertinent excerpts and state the purpose the materials are offered. Only the excerpts, in the form of copies, shall be received in the record. However, the whole of the original documents, except any portions containing confidential material protected by law, shall be made available for examination and for use by all parties.

(4) Expert witness limitation. No former employee of the department shall, except with the permission of the department, appear as an expert witness on behalf of other parties in a proceeding where the expert witness previously took an active part in the investigation as a department representative.

(5) Witness refusal to answer. The refusal of a witness to answer any question ruled proper shall, in the discretion of the administrative law judge, be grounds for striking all testimony previously given by such witness on the related matter.

(6) Stipulation, admission. A party bound by a stipulation or an admission of record may, at any time during the proceeding, withdraw it in whole or in part by showing to the satisfaction of the administrative law judge that:

(a) Such stipulation or admission was made inadvertently or under a bona fide mistake of fact contrary to the true fact; and

(b) The party's withdrawal, at the time proposed, will not unjustly prejudice the rights of other parties to the proceeding.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-452, filed 2/28/90, effective 3/1/90.]

WAC 246-08-120 Contents of orders. Every order shall correctly caption both the name of the agency and the proceeding and shall designate the parties and representatives participating in the proceeding.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-461, filed 2/28/90, effective 3/1/90.]

WAC 246-08-130 Petition for review—Response to petition—Disqualification of review judge. (1) Initial orders that may become final orders.

(a) If a petition for review is not filed within twenty-one days from service of the initial order, the initial order shall, subject to the provisions of this section, become the final order.

(b) An initial order shall not become the final order in proceeding governed by the Uniform Disciplinary Act. Each party shall have the right to file a petition for review of the administrative law judge's order. Whether a petition for review is or is not filed, the secretary or designee shall enter the final order.

(2) Who may petition. Each party has the right to file a petition for review of an order entered by an administrative law judge.

(3) Petition contents. The petition for review shall:

(a) Specify the portions of the order to which exception is taken; and

(b) Refer to the evidence of record relied upon to support the petition.

(4) Petition time limits.

(a) The period to timely file a petition for review is twenty-one days from the date the initial decision was served.

(b) The secretary or designee shall extend the twenty-one day period to file a petition for review upon request of a party when:

(i) The request is made during the twenty-one day period; and

(ii) Good cause for the extension is shown.

(c) The secretary or designee shall waive the twenty-one day limit for filing a petition for review when:

(i) A petition for review is filed within thirty days of the date the initial order becomes final; and

(ii) The petitioner demonstrates good cause for failure to file a timely petition. Good cause includes:

(A) A mistake, inadvertence, or excusable neglect on the part of the petitioner; or

(B) An unavoidable casualty or misfortune preventing the petitioner from timely filing a petition for review.

(5) Petition filing and service. The petition for review shall be in writing and filed with the secretary or designee. The petitioner shall serve copies of the petition upon the other parties or their representative at the time the petition is filed. A petition in a proceeding governed by the Uniform Disciplinary Act and/or a petition in other programs shall be filed on the secretary or designee at the administrative hearings unit.

(6) Notice of petition. When a petition for review is filed, the secretary or designee shall send a copy of the petition to the nonpetitioning party or, if represented, to the representative with a notice of the right to file a response.

(7) Response time limit, filing, service.

(a) The nonpetitioning party shall file any response with the secretary or designee within seven days of the date that office served a copy of the petition on the nonpetitioning party or representative.

(b) The nonpetitioning party shall serve a copy of the response upon the petitioner and any other party or, if represented, on the representative at the time the response is filed.

(c) A secretary or designee may extend the period to file a response upon request of a party showing good cause.

(8) Disqualification. The secretary or designee shall disclose the assignment of the reviewing officer to any party or representative making inquiry. An individual petitioning to disqualify a reviewing officer under RCW 34.05.425 shall file such petition with the reviewing officer assigned to the proceeding.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-130, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-464, filed 2/28/90, effective 3/1/90.]

WAC 246-08-140 Reconsideration. Within ten days of service of a review order, any party may file a petition for reconsideration. The petition shall state the specific grounds upon which relief is requested. A petition for reconsideration shall be filed at the administrative hearings unit.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-140, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-470, filed 2/28/90, effective 3/1/90; Regulation 08.470, effective 3/1/60.]

WAC 246-08-150 Adjudicative proceedings—Notice to limited-English-speaking parties. When the department is notified or otherwise made aware that a limited-English-speaking person is a party in an adjudicative proceeding, all notices concerning the hearing, including notices of hearing, continuance, and dismissal, shall either be in the primary language of the party or shall include a notice in the primary language of the party which describes the significance of the notice and how the party may receive assistance in understanding and responding to, if necessary, the notice.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-515, filed 2/28/90, effective 3/1/90.]

WAC 246-08-160 Interpreters. (1) A "hearing impaired person" means a person who, because of a hearing impairment or speech defects, cannot readily understand or communicate in spoken language. A "hearing impaired person" includes a person who is deaf, deaf and blind, or hard of hearing.

(2) An "impaired person" means a person involved in an adjudicative proceeding and is a:

- (a) Hearing impaired person; or
- (b) Limited-English-speaking person.

(3) An "intermediary interpreter" means a hearing impaired interpreter:

(a) The registry of interpreters for the deaf certified with a reverse skills certificate;

(b) Meeting the requirements under subsection (9) of this section; and

(c) Able to assist by:

(i) Providing an accurate interpretation between spoken and sign language or between variants of sign language; and

(ii) Acting as an intermediary between a hearing impaired person and a qualified interpreter for the hearing impaired.

(4) A "limited-English-speaking person" means a person who because of a non-English-speaking cultural background cannot readily speak or understand the English language.

(5) A "qualified interpreter" means a person:

(a) Readily able to interpret spoken English and translate written English to and for an impaired person; and

(b) Readily able to interpret or translate statements of an impaired person into spoken English; and

(c) Meeting the requirements of subsection (9) of this section provided, for hearing impaired persons, a qualified interpreter shall be certified by the registry of interpreters for the deaf with a:

(i) Specialist certificate-legal;

(ii) Master's comprehensive skills certificate; or

(iii) Comprehensive skills certificate.

(6) When an impaired person is a party to any adjudicative proceeding or witness therein, the administrative law judge shall, in the absence of a written waiver signed by the impaired person, appoint a qualified interpreter to assist the impaired person throughout the proceedings. The right to a qualified interpreter may not be waived except when:

(a) The impaired person requests a waiver through the use of a qualified interpreter;

(b) The impaired person's representative, if any, consents; and

(c) The administrative law judge determines the waiver is knowingly, voluntarily, and intelligently complete.

(7) Waiver of a qualified interpreter shall not preclude the impaired person from claiming the right to a qualified interpreter at a later time during the proceeding.

(8) In a proceeding, neither the participant's relatives nor the involved agency employees shall be appointed as interpreters. Subsection (8) of this section shall not prohibit the office of administrative hearings from hiring an employee whose sole function is to interpret in an adjudicative proceeding.

(9) The administrative law judge shall make a preliminary determination that an interpreter is able in the particular proceeding to accurately interpret communication to and from the impaired person. The administrative law judge's determination shall be based on the:

(a) Testimony or stated needs of the impaired person;

(b) Interpreter's education, certifications, and experience in interpreting for contested cases and/or adjudicative proceedings;

(c) Interpreter's understanding of the basic vocabulary and procedure involved in the proceeding; and

(d) Interpreter's impartiality.

The parties or the parties' representative may question the interpreter as to the interpreter's qualifications and impartiality.

(10) The administrative law judge shall appoint another qualified interpreter if during the proceeding, in the opinion of the impaired person, the administrative law judge, or a qualified observer, the interpreter does not provide accurate and effective communication with the impaired person.

(11) If the communication mode or language of a hearing impaired person is not readily interpretable, the interpreter or hearing impaired person shall notify the administrative law judge who shall appoint and pay an intermediary interpreter to assist the qualified interpreter.

(12) An interpreter shall, before beginning to interpret, take an oath that:

(a) A true interpretation will be made to the examined person of all the proceedings in a language or in a manner the person understands; and

(b) The interpreter will repeat the statements of the person being examined to the administrative law judge, in the English language, to the best of the interpreter's skill and judgment.

(13) Mode of interpretation. Interpreters for:

(a) Limited-English-speaking persons shall use a simultaneous mode of interpretation where the administrative law judge and interpreter agree simultaneous interpretation advances fairness and efficiency; otherwise, the interpreter shall use the consecutive mode of foreign language interpretation; and

(b) Hearing impaired persons shall use the simultaneous mode of interpretation unless an intermediary interpreter is needed. If an intermediary interpreter is needed, interpreters shall use the mode the qualified interpreter considers to provide the most accurate and effective communication with the hearing impaired person.

(c) When an impaired person is a party to a proceeding, the:

(i) Interpreter shall translate all statements made by other hearing participants;

(ii) Administrative law judge shall ensure sufficient, extra time is provided to permit translation; and

(iii) Administrative law judge shall ensure the interpreter translates the entire proceeding to the party to the extent the party has the same opportunity to understand the statements made during the proceedings as a nonimpaired party has when listening to uninterpreted statements.

(14) An examiner shall not examine a qualified interpreter, without the written consent of the parties to the communication, as to the:

(a) Communication the interpreter interprets under circumstances where the communication is privileged by law; and

(b) Information the interpreter obtains while interpreting a pending proceeding.

(15) The administrative law judge shall explain to the impaired party:

(a) A written decision or order is issued in English; and

(b) The party may contact the interpreter for a translation of the decision at no cost to the party; and

(c) If the party has a right to review the order, the party is orally informed during the hearing of the right and of the time limits to request a review.

(16) At the hearing, the interpreter for a limited-English-speaking party shall provide to the administrative law judge the interpreter's telephone number written in the primary

language of the impaired party. The interpreter's telephone number shall be attached to the order mailed to the impaired party. A copy of the order shall also be mailed to the interpreter for use in translation.

(17) In any proceeding involving a hearing impaired person, the administrative law judge may, with the consent of the agency involved in the hearing, order the testimony of the hearing impaired person and the interpretation of the proceeding by the qualified interpreter be visually recorded for use as the official transcript of the proceeding. Where simultaneous translation is used for interpreting statements of limited-English-speaking persons, the foreign language statements shall be recorded simultaneously with the English language statements by means of a separate tape recorder.

(18) A qualified interpreter appointed under this section shall be entitled to a reasonable fee for services, including waiting time and reimbursement for actual necessary travel expenses. The agency involved in the hearing shall pay the interpreter fee and expenses. The interpreter services fee for a hearing impaired person shall be under the standards established by the department of social and health services, office of deaf services.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-08-525, filed 2/28/90, effective 3/1/90.]

WAC 246-08-170 Group hearing. (1) When applicable. When two or more appellants file applications contesting a similar issue, the applications may be consolidated by the department or the administrative law judge and heard as a group. The administrative law judge may consolidate on the administrative law judge's own motion or on a party's request.

(2) Withdrawal from group.

(a) An appellant scheduled for a group hearing may request to withdraw from the group hearing in favor of an individual hearing. An appellant's request to withdraw from a group hearing shall be granted if the motion is filed before the:

(i) Administrative law judge has made a discretionary ruling; and

(ii) Date of the hearing.

(b) The administrative law judge may grant a motion to withdraw filed at any time when good cause is shown.

(3) Right to representation. Each appellant in a group hearing shall retain the right to representation of the appellant's choice.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-08-535, filed 2/28/90, effective 3/1/90.]

WAC 246-08-180 Continuance. (1) Authority to grant. The administrative law judge may:

(a) Order postponements, continuances, extensions of time, and adjournments on the administrative law judge's own motion; or

(b) Grant postponements, continuances, extensions of time, and adjournments upon the request of any party, with notice to all other parties, showing good and sufficient cause.

(2) When, how requested. A request for a continuance made before the hearing date may be either oral or in writing. The party seeking the continuance shall:

(a) Notify the other parties before presenting the request to the administrative law judge; and

(b) Inform the administrative law judge whether the other parties agreed to the continuance. If the other parties did not agree to the continuance, the administrative law judge shall promptly schedule a prehearing conference to receive evidence and/or argument and to rule on the request.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-545, filed 2/28/90, effective 3/1/90.]

WAC 246-08-190 Computation of time. (1) When computing a period of time prescribed or allowed by an applicable statute or rule, the day of the act, event, or default after which the designated period of time begins to run shall not be included.

(2) The last day of the computed period shall be included unless the last day is a Saturday, Sunday, or a legal holiday.

(3) When the last day is a Saturday, Sunday, or a legal holiday, the period shall run until the end of the next day which is neither a Saturday, Sunday, nor a holiday.

(4) When the period of time prescribed or allowed is seven days or less, the intermediate Saturday and Sunday, and any legal holiday, shall be excluded in the computation.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-565, filed 2/28/90, effective 3/1/90.]

WAC 246-08-200 Judicial review of final adjudicative order. (1) Right to judicial review; exclusive remedy. An appellant or intervener aggrieved, as described under RCW 34.05.530, by the final decision or order in a department of health adjudicative proceeding may appeal the decision or order to court. Judicial review shall only be obtained under chapter 34.05 RCW. Judicial review may not be obtained through any other procedure. Chapter 34.05 RCW contains the pertinent provisions of law.

(2) Instituting judicial review; filing and serving the petition. As described under RCW 34.05.542(2), within thirty days after the secretary or designee mails the final decision, the petitioner shall file the petition for judicial review with the court and serve a copy of the petition on the department of health, the office of the attorney general, and all parties of record.

(a) A petition shall be filed in the superior court, at the petitioner's option, for:

(i) Thurston County;

(ii) The county of the petitioner's residence or principal place of business; or

(iii) Any county where property affected by the decision is located.

(b) Service of a copy of the petition for judicial review on the department of health may be had by personally serving a copy of the petition on the administrative hearings unit.

(c) Service of a copy of the petition for judicial review on the office of the attorney general may be had by mailing a copy of the petition, postage prepaid, to the Office of the Attorney General, Highway-Licenses Building, P.O. Box 40109, Olympia, WA 98504-0109.

(d) Service of a copy of the petition for judicial review on other parties of record may be had by mailing the copy of the petition to the other parties, properly addressed and postage prepaid.

[Statutory Authority: RCW 34.05.220. 92-02-018 (Order 224), § 246-08-200, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-08-575, filed 2/28/90, effective 3/1/90.]

WAC 246-08-210 Variances, waivers, and exemptions. The following procedure for considering requests for exemptions, waivers, or variances applies to all those rules and regulations of the Washington state board of health wherein the board of health has reserved the power to grant exemptions, waivers, and variances:

(1) The secretary of the department of health or a designee shall recommend, pursuant to the standards contained in the regulation from which the exemption, waiver, or variance is requested, that the request be granted or denied.

(2) Written summaries of all exemptions, waivers, or variances proposed to be granted by the secretary of the department of health or a designee shall be sent to all members of the board of health and may include written forms upon which the members may indicate approval or disapproval of the request.

(3) Upon receipt by the secretary of the department of health or a designee of written approval by eight members of the board of health, and provided no member disapproves, the approval shall take effect and the secretary of the department of health or a designee shall notify the requesting party of the approval in writing.

(4) If any member of the board of health shall disapprove the request within thirty days of notification by the secretary of the department of health or a designee, the request shall be discussed by the board at its next regular meeting.

(5) If a request is recommended for denial by the secretary of the department of health or a designee, the request and recommendation shall be reviewed by the board at its next regular meeting.

Consideration by the board of requests for exemptions, waivers, and variances shall not be considered adjudicative proceedings as that term is defined in chapter 34.05 RCW. Statements and written material regarding the request may be presented to the board at or before its meeting wherein the application will be considered. Allowing cross-examination of witnesses in such matters shall be within the discretion of the board.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-210, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW. 90-01-134 (Order 016), § 248-08-596, filed 12/20/89, effective 1/20/90. Statutory Authority: RCW 43.20.050. 85-15-063 (Order 289), § 248-08-596, filed 7/18/85; 84-16-031 (Order 272), § 248-08-596, filed 7/25/84. Formerly WAC 248-08-595.]

ADMINISTRATIVE PROCEDURES

WAC 246-08-320 Delegation of authority by secretary. Under RCW 43.70.040, certain powers and duties may be delegated by the secretary. Writings evidencing delegations of authority are on file in the secretary's office and may be inspected between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday, excluding holidays.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-320, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-320-340, filed 2/28/90, effective 3/1/90.]

WAC 246-08-330 Declaratory orders—Forms, content, and filing. A petition for a declaratory order shall generally adhere to the following form:

(1) At the top of the page shall appear the wording "Before the state department of health." On the left side of page below the foregoing the following caption shall be set out: "In the matter of the petition of (name of petitioning party) for a declaratory order." Opposite the foregoing caption shall appear the word "petition."

(2) The body of the petition shall be set out in numbered paragraphs. The first paragraph shall state the name and address of the petitioning party. The second paragraph shall state all rules or statutes that may be brought into issue by the petition. Succeeding paragraphs shall set out the state of facts relied upon in form similar to that applicable to complaints in civil actions before the superior courts of this state. The concluding paragraphs shall contain the prayer of the petitioner. The petition shall be subscribed and verified in the manner prescribed for verification of complaints in the superior courts of this state.

(3) The original and two legible copies shall be filed with the Department of Health, 1300 Quince Street, Mailstop: EY-12, Olympia, WA 98504. Petitions shall be on white paper, 8 1/2" x 11" in size.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-330, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-320-350, filed 2/28/90, effective 3/1/90.]

WAC 246-08-340 Declaratory orders—Procedural rights of persons in relation to petition. If a petition for a declaratory order is set for specified proceedings under RCW 34.05.240 (5)(b), the department shall give not less than seven days advance written notice of the proceedings to the petitioner and all persons described under RCW 34.05.240(3). The notice shall contain the time, date, place, and nature of the proceedings and shall describe how interested persons may participate in the proceeding.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-340, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-320-360, filed 2/28/90, effective 3/1/90.]

WAC 246-08-350 Declaratory orders—Disposition of petition. A declaratory order entered by the department or a decision declining to enter a declaratory order shall be in writing and shall be served upon the petitioner and all other persons described under RCW 34.05.240(3).

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-350, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-320-370, filed 2/28/90, effective 3/1/90.]

WAC 246-08-360 Petition for rule making—Form, content, and filing. A petition for adoption, amendment, or repeal of a rule shall generally adhere to the following form:

(1) At the top of the page shall appear the wording "Before the state department of health." On the left side of the page below the foregoing the following caption shall be set out: "In the matter of the petition of (name of petitioning party) for rule making." Opposite the foregoing caption shall appear the word "petition."

(2) The body of the petition shall be set out in numbered paragraphs. The first paragraph shall state the name and address of the petitioning party and whether petitioner seeks the adoption of new rule or rules, or amendment or repeal of existing rule or rules. The second paragraph, in case of a proposed new rule or amendment of an existing rule, shall set forth the desired rule in its entirety. Where the petition is for repeal of an existing rule, such shall be stated and the rule proposed to be repealed shall either be set forth in full or shall be referred to by agency rule number. The third paragraph shall set forth concisely the reasons for the proposal of the petitioner and shall contain a statement as to the interest of the petitioner in the subject matter of the rule. Additional numbered paragraphs may be used to give full explanation of petitioner's reason for the action sought.

(3) Petitions shall be dated and signed by the person or entity named in the first paragraph or by his attorney. The original and two legible copies of the petition shall be filed with the Department of Health, 1300 Quince Street, Mailstop: EY-12, Olympia, WA 98504. Petitions shall be on white paper 8 1/2" x 11" in size.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-360, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-320-400, filed 2/28/90, effective 3/1/90.]

WAC 246-08-370 Petition for rule making—Consideration and disposition. (1) Each petition for the adoption, amendment, or repeal of a rule shall be considered by the department and the department may, in its discretion, solicit comments or invite discussion concerning the matter before disposition of the petition.

(2) If the department denies the petition, the denial shall be served upon the petitioner.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-08-370, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220, 90-06-018 (Order 038), § 248-320-410, filed 2/28/90, effective 3/1/90.]

WAC 246-08-380 Updating mailing lists. (1) Periodically, the department may cause the following notice, or a notice substantially similar, to be mailed: "In order to maintain as current a mailing list as possible, and to eliminate mailing notices to those who no longer have need for such notices, the department will discontinue use of its old mailing lists, effective (date to be specified). If you wish to continue receiving copies of notices of intention to adopt, amend or repeal rules after that date, please fill out the

attached form and return it to the department at the address indicated on the form. If you do not return the form indicating your desire to continue to receive notices to adopt, amend or repeal rules, your name or the names of your organization will be removed from the mailing lists."

(2) The notice regarding updating of mailing lists is to be mailed by first-class mail.

(3) The form to be filled out by those persons or organizations wishing to continue to receive department notices to adopt, amend, or repeal rules shall specify interest areas covered by these notices, thereby enabling those on mailing lists to limit correspondence received.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-380, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.05.220. 90-06-018 (Order 038), § 248-320-500, filed 2/28/90, effective 3/1/90.]

WAC 246-08-390 Acquisition, retention and security of health care information. This section sets forth the process by which the department of health or disciplining authority obtains and protects health care information under RCW 70.02.050. This section does not apply to health care information obtained by the department through other sources.

(1) Acquisition.

(a) The department shall request health care information in writing.

(b) Health care providers shall provide the requested information pursuant to RCW 70.02.050.

(2) Retention. The department shall maintain health care information obtained under this section as long as necessary to perform agency functions.

(3) Security. The department shall secure the records and protect confidentiality.

(a) The manager of the program within the department that requested the records shall act as the custodian of records, and shall provide access to the information only as necessary to perform agency responsibilities.

(b) The custodian shall monitor the location and security of the information.

(4) The department shall not make health care information obtained under RCW 70.02.050 available for public inspection and copying except as may be required by chapter 42.17 RCW. No health care information containing patient identifying data shall be made available for public inspection and copying under chapter 42.17 RCW. Health care information obtained under this section may be released to public agencies or entities as required by law or upon agreement by the agency or entity that the health care information will be used only for authorized statutory purposes and will not be disclosed further.

[Statutory Authority: RCW 70.02.050(3). 92-07-080 (Order 253), § 246-08-390, filed 3/17/92, effective 4/17/92.]

POLICIES

WAC 246-08-520 Nondiscrimination. No person in the state of Washington shall, on the grounds of sex, race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity administered or supervised by

the Washington state department of health as required by the federal government as a prerequisite for fiscal grants-in-aid (Sec. 601, Civil Rights Act of 1964; 78 Stat. 252; 42 U.S.C. 2000d) and chapter 49.60 RCW.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-520, filed 12/27/90, effective 1/31/91; Order 18, § 248-10-010, filed 2/11/69.]

WAC 246-08-560 Refund of fees. (1) The department of health shall refund fees it collects that are paid in excess of the stated fee, or paid erroneously.

(2) The payee must provide the department with a cancelled check or a cash receipt as proof of payment when requesting a refund.

(3) The department shall make refunds of five dollars or less only upon written request within 13 months from date of payment.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-08-560, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.01.072. 90-08-003 (Order 044), § 246-09-060, filed 3/22/90, effective 4/22/90.]

Chapter 246-100 WAC

COMMUNICABLE AND CERTAIN OTHER DISEASES

WAC

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WAC 246-100-006 Purpose. The following rules and regulations are adopted under the authority of chapter 43.20 RCW to protect the health and well-being of the public by controlling communicable and certain other diseases.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-006, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-006, filed 5/19/87.]

WAC 246-100-011 Definitions. The following definitions shall apply in the interpretation and enforcement of chapter 246-100 WAC:

(1) "Acquired immunodeficiency syndrome (AIDS)" means an illness characterized by the diseases and conditions defined and described by the Centers for Disease Control, U.S. Public Health Services, Morbidity and Mortality Weekly Report (MMWR), August 14, 1987, Volume 36, Number 1S.

(2) "AIDS counseling" means counseling directed toward:

(a) Increasing the individual's understanding of acquired immunodeficiency syndrome; and

(b) Assessing the individual's risk of HIV acquisition and transmission; and

(c) Affecting the individual's behavior in ways to reduce the risk of acquiring and transmitting HIV infection.

(3) "Board" means the Washington state board of health.

(4) "Carrier" means a person harboring a specific infectious agent and serving as a potential source of infection to others, but who may or may not have signs and/or symptoms of the disease.

(5) "Case" means a person, alive or dead, having been diagnosed to have a particular disease or condition by a health care provider with diagnosis based on clinical or laboratory criteria or both.

(6) "Category A disease or condition" means a reportable disease or condition of urgent public health importance, a case or suspected case of which must be reported to the local or state health officer immediately at the time of diagnosis or suspected diagnosis.

(7) "Category B disease or condition" means a reportable disease or condition of public health importance, a case of which must be reported to the local health officer no later than the next working day following date of diagnosis.

(8) "Category C disease or condition" means a reportable disease or condition of public health importance, a case of which must be reported to the local health officer within seven days of diagnosis.

(9) "Child day care facility" means an agency regularly providing care for a group of children for less than twenty-four hours a day and subject to licensing under chapter 74.15 RCW.

(10) "Communicable disease" means an illness caused by an infectious agent which can be transmitted from one person, animal, or object to another person by direct or indirect means including transmission via an intermediate host or vector, food, water, or air.

(11) "Contact" means a person exposed to an infected person, animal, or contaminated environment which might provide an opportunity to acquire the infection.

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

(13) "Detention" or "detainment" means physical restriction of activities of an individual by confinement, consistent with WAC 246-100-206(8), for the purpose of monitoring and eliminating behaviors presenting imminent danger to public health and may include physical plant, facilities, equipment, and/or personnel to physically restrict activities of the individual to accomplish such purposes.

(14) "Food handler" means any person preparing, processing, handling, or serving food or beverages for people other than members of his or her household.

(15) "Food service establishment" means any establishment where food or beverages are prepared for sale or service on the premises or elsewhere, and any other establishment or operation where food is served or provided for the public with or without charge.

(16) "Health care facility" means:

(a) Any facility or institution licensed under chapter 18.20 RCW, boarding home, chapter 18.46 RCW, maternity homes, chapter 18.51 RCW, nursing homes, chapter 70.41 RCW, hospitals, or chapter 71.12 RCW, private establishments, clinics, or other settings where one or more health care providers practice; and

(b) In reference to a sexually transmitted disease, other settings as defined in chapter 70.24 RCW.

(17) "Health care provider" means any person having direct or supervisory responsibility for the delivery of health care or medical care who is:

(a) Licensed or certified in this state under Title 18 RCW; or

(b) Is military personnel providing health care within the state regardless of licensure.

(18) "HIV testing" means conducting a laboratory test or sequence of tests to detect the human immunodeficiency virus (HIV) or antibodies to HIV performed in accordance with requirements to WAC 246-100-207.

(19) "Infection control measures" means the management of infected persons, persons suspected to be infected, and others in such a manner as to prevent transmission of the infectious agent.

(20) "Isolation" means the separation or restriction of activities of infected persons, or of persons suspected to be infected, from other persons to prevent transmission of the infectious agent.

(21) "Laboratory director" means the director or manager, by whatever title known, having the administrative responsibility in any medical laboratory.

(22) "Local health department" means the city, town, county, or district agency providing public health services to persons within the area, as provided in chapter 70.05 RCW and chapter 70.08 RCW.

(23) "Local health officer" means the individual having been appointed under chapter 70.05 RCW as the health

officer for the local health department, or having been appointed under chapter 70.08 RCW as the director of public health of a combined city-county health department.

(24) "Medical laboratory" means any facility analyzing specimens of original material from the human body for purposes of patient care.

(25) "Nosocomial infection" means an infection acquired in a hospital or other health care facility.

(26) "Outbreak" means the occurrence of cases of a disease or condition in any area over a given period of time in excess of the expected number of cases.

(27) "Post-test counseling" means counseling after the HIV test when results are provided and directed toward:

(a) Increasing the individual's understanding of human immunodeficiency virus (HIV) infection;

(b) Affecting the individual's behavior in ways to reduce the risk of acquiring and transmitting HIV infection;

(c) Encouraging the individual testing positive to notify persons with whom there has been contact capable of spreading HIV;

(d) Assessing emotional impact of HIV test results; and

(e) Appropriate referral for other community support services.

(28) "Pretest counseling" means counseling provided prior to HIV testing and aimed at:

(a) Helping an individual to understand:

(i) Ways to reduce the risk of human immunodeficiency virus (HIV) transmission;

(ii) The nature, purpose, and potential ramifications of HIV testing;

(iii) The significance of the results of HIV testing; and

(iv) The dangers of HIV infection; and

(b) Assessing the individual's ability to cope with the results of HIV testing.

(29) "Principal health care provider" means the attending physician or other health care provider recognized as primarily responsible for diagnosis and treatment of a patient or, in the absence of such, the health care provider initiating diagnostic testing or therapy for a patient.

(30) "Quarantine" means the separation or restriction on activities of a person having been exposed to or infected with an infectious agent, to prevent disease transmission.

(31) "Reportable disease or condition" means a disease or condition of public health importance, a case of which, and for certain diseases, a suspected case of which, must be brought to the attention of the local health officer.

(32) "School" means a facility for programs of education as defined in RCW 28A.31.102 (preschool and kindergarten through grade twelve).

(33) "Sexually transmitted disease (STD)" means a bacterial, viral, fungal, or parasitic disease or condition which is usually transmitted through sexual contact, including:

(a) Acute pelvic inflammatory disease;

(b) Chancroid;

(c) Chlamydia trachomatis infection;

(d) Genital and neonatal herpes simplex;

(e) Genital human papilloma virus infection;

(f) Gonorrhea;

(g) Granuloma inguinale;

(h) Hepatitis B infection;

(i) Human immunodeficiency virus infection (HIV) and acquired immunodeficiency syndrome (AIDS);

(j) Lymphogranuloma venereum;

(k) Nongonococcal urethritis (NGU); and

(l) Syphilis.

(34) "State health officer" means the person designated by the secretary of the department to serve as statewide health officer, or, in the absence of such designation, the person having primary responsibility for public health matters in the state.

(35) "Suspected case" means a person whose diagnosis is thought likely to be a particular disease or condition with suspected diagnosis based on signs and symptoms, laboratory evidence, or both.

(36) "Unusual communicable disease" means a communicable disease which is not commonly seen in the state of Washington but which is of general public health concern including, but not limited to, Lassa fever, smallpox, typhus, and yellow fever.

(37) "Veterinarian" means an individual licensed under provisions of chapter 18.92 RCW, veterinary medicine, surgery, and dentistry and practicing animal health care.

[Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-011, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-011, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-07-095 (Order 325), § 248-100-011, filed 3/22/89; 88-17-057 (Order 317), § 248-100-011, filed 8/17/88. Statutory Authority: RCW 43.20.050. 88-07-063 (Order 308), § 248-100-011, filed 3/16/88; 87-11-047 (Order 302), § 248-100-011, filed 5/19/87.]

WAC 246-100-016 Confidentiality. Identifying information about any individual with a reportable disease or condition pursuant to chapter 246-100 WAC shall be protected by persons with knowledge of such identity.

(1) Health care providers, employees of a health care facility or medical laboratory, and other individuals with knowledge of a person with sexually transmitted disease, following the basic principles of health care providers, which respect the human dignity and confidentiality of patients:

(a) May disclose identity of a person or release identifying information only as specified in RCW 70.24.105; and

(b) Shall establish and implement policies and procedures to maintain confidentiality related to a patient's medical information.

(2) For the purpose of RCW 70.24.105(6), customary methods for exchange of medical information shall be limited as follows:

(a) Health care providers may exchange confidential medical information related to HIV testing, HIV test results, and confirmed HIV or confirmed STD diagnosis and treatment in order to provide health care services to the patient. Meaning:

(i) The information shared impacts the care or treatment decisions concerning the patient; and

(ii) The health care provider requires the information for the patient's benefit.

(b) "Health care services to the patient" means personal interaction, treatment, consultation, or intervention for patient care.

(c) Health care facility administrators are authorized to permit access to medical information as necessary to fulfill

professional duties. Health care facility administrators shall advise those persons permitted access under this section of the requirement to maintain confidentiality of such information as defined under this section and chapter 70.24 RCW. Professional duties means the following or functionally similar activities:

- (i) Medical record or chart audits;
- (ii) Peer reviews;
- (iii) Quality assurance;
- (iv) Utilization review purposes;
- (v) Research review board reviews under chapter 42.48

RCW;

- (vi) Risk management; and
- (vii) Reviews required under federal or state law or rules.

(d) Health care facility administrators and health care providers responsible for office management are authorized to permit access to a patient's medical information and medical record by health care facility and medical staff or office staff to carry out duties required for care and treatment of a patient and the management of medical information and the patient's medical record.

(e) Health care facility administrators are authorized to permit exchange of medical information for training and teaching of health care providers and students when exchange of confidential medical information is necessary for such training and specifically related to the care of the patient.

(3) Health care providers, employees of a health care facility or medical laboratory, and other individuals with knowledge of a person with a reportable disease or condition, other than those specified in subsections (1) and (2) of this section, shall release identifying information only to other individuals responsible for protecting the health and well being of the public through control of communicable and certain other diseases.

(4) Local and state health department personnel shall maintain individual case reports as confidential records consistent with WAC 246-100-091.

(5) The Washington state public health laboratory, other laboratories approved as public health referral laboratories, and any persons, institutions, or facilities submitting specimens or records containing patient-identifying information shall maintain the identifying information accompanying submitted laboratory specimens as confidential records.

(6) Statistical summaries and epidemiologic studies based on individual case reports may be public information provided no individual is identified.

[Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-016, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-016, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.105. 90-07-033 (Order 043), § 248-100-016, filed 3/14/90, effective 4/14/90. Statutory Authority: Chapter 70.24 RCW. 88-21-093 (Order 322), § 248-100-016, filed 10/19/88; 88-17-057 (Order 317), § 248-100-016, filed 8/17/88. Statutory Authority: RCW 43.20.050. 87-11-047 (Order 302), § 248-100-016, filed 5/19/87.]

WAC 246-100-021 Responsibilities and duties—Health care providers. Every health care provider, as defined in chapter 246-100 WAC, shall:

(1) Provide adequate, understandable instruction in control measures designed to prevent the spread of disease to:

- (a) Each patient with a communicable disease under his or her care,
- (b) Family of a patient with a communicable disease,
- (c) Contacts and others as appropriate to prevent spread of disease.

(2) Ensure notification of the local health officer or local health department regarding:

(a) Cases of reportable diseases and conditions. See WAC 246-100-071, 246-100-076, and 246-100-081;

(b) Outbreaks or suspected outbreaks of disease. See WAC 246-100-071, 246-100-076, and 246-100-081;

(c) Known barriers which might impede or prevent compliance with orders for infection control or quarantine; and

(d) Name, address, and other pertinent information for any case or carrier refusing to comply with prescribed infection control measures.

(3) Cooperate with public health authorities during investigation of:

(a) Circumstances of a case or suspected case of a reportable disease or condition or other communicable disease, and

(b) An outbreak or suspected outbreak of illness.

Comply with requirements in WAC 246-100-206, 246-100-211, and 246-100-217.

[Statutory Authority: RCW 43.20.050, 70.24.130 and 70.104.055. 92-02-019 (Order 225B), § 246-100-021, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-021, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.104 RCW. 90-10-036 (Order 049), § 248-100-021, filed 4/26/90, effective 5/27/90. Statutory Authority: RCW 43.20.050. 87-11-047 (Order 302), § 248-100-021, filed 5/19/87.]

WAC 246-100-026 Responsibilities and duties—Veterinarians. (1) Veterinarians shall:

(a) Notify the local health officer of any human case, suspected case, outbreak, or suspected outbreak of reportable disease listed in WAC 246-100-076;

(b) Notify the state veterinarian, Washington state department of agriculture, within one working day of any animal case, suspected case, outbreak, or suspected outbreak of:

- (i) Anthrax,
- (ii) Brucellosis,
- (iii) Equine encephalitis,
- (iv) Plague,
- (v) Rabies,
- (vi) Psittacosis, and
- (vii) Tuberculosis.

(2) Upon receipt of a report of human disease, the state health officer shall immediately notify the state veterinarian of reports of:

- (a) Anthrax,
- (b) Brucellosis,
- (c) Psittacosis,
- (d) Equine encephalitis,
- (e) Plague,
- (f) Rabies, and
- (g) Tuberculosis in an animal handler.

(3) Upon receipt of a report of animal disease, the state veterinarian shall notify the state health officer of reports of:

- (a) Anthrax,
- (b) Brucellosis excluding Strain 19 disease,
- (c) Psittacosis,
- (d) Equine encephalitis,
- (e) Plague,
- (f) Rabies, and
- (g) Tuberculosis.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-026, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-026, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-026, filed 3/16/88.]

WAC 246-100-031 Responsibilities and duties—Laboratory directors. The director of each medical laboratory in the state shall:

(1) Register the laboratory with the department as described in WAC 246-100-221.

(2) Submit microbiologic cultures or subcultures or appropriate clinical material to the Washington state public health laboratory or other laboratory designated by the state health officer, as described in WAC 246-100-231.

(3) Report to the local health officer or state health officer certain positive test results, as described in WAC 246-100-236.

(4) Cooperate with local and state health department personnel in the investigation of an outbreak, suspected outbreak, case, suspected case, carrier, or contact of a communicable disease or reportable disease or condition, as described in WAC 246-100-241.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-031, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-031, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-031, filed 5/19/87.]

WAC 246-100-036 Responsibilities and duties—Local health officers. (1) The local health officer shall review and determine appropriate action for:

(a) Each reported case or suspected case of a reportable disease or condition;

(b) Any disease or condition considered a threat to public health;

(c) Each reported outbreak or suspected outbreak of disease, requesting assistance from the department in carrying out investigations when necessary; and

(d) Instituting disease prevention and infection control, isolation, detention, and quarantine measures necessary to prevent the spread of communicable disease, invoking the power of the courts to enforce these measures when necessary.

(2) Local health officers shall:

(a) Submit reports to the state health officer as required in chapter 246-100 WAC;

(b) Establish a system at the local health department for maintaining confidentiality of written records and written and telephoned disease case reports consistent with WAC 246-100-016;

(c) Notify health care providers within the health district regarding requirements in this chapter;

(d) Distribute appropriate report forms to persons responsible for reporting;

(e) Notify the principal health care provider, if possible, prior to initiating a case investigation by the local health department;

(f) Make HIV testing, AIDS counseling, and pretest and post-test counseling, as defined in this chapter, available for voluntary, mandatory, and anonymous testing and counseling as required by RCW 70.24.400;

(g) Make information on anonymous HIV testing, AIDS counseling, and pretest and post-test counseling, as described under WAC 246-100-208 and 246-100-209, available;

(h) Use identifying information on HIV-infected individuals provided according to WAC 246-100-072 only:

(i) For purposes of contacting the HIV-positive individual to provide test results and post-test counseling; or

(ii) To contact sex and injection equipment-sharing partners; and

(i) Destroy documentation of referral information established in WAC 246-100-072 and this subsection containing identities and identifying information on HIV-infected individuals and at-risk partners of those individuals immediately after notifying partners or within three months, whichever occurs first.

(3) Each local health officer has the authority to:

(a) Carry out additional steps determined to be necessary to verify a diagnosis reported by a health care provider;

(b) Require any person suspected of having a reportable disease or condition to submit to examinations required to determine the presence of the disease or condition; and

(c) Investigate any case or suspected case of a reportable disease or condition or other illness, communicable or otherwise, if deemed necessary.

(4) Local health officers shall conduct investigations and institute control measures consistent with those indicated in the fifteenth edition 1990 of *Control of Communicable Diseases in Man*, edited by Abram S. Benenson, published by the American public health association, except:

(a) When superseded by more up-to-date measures, or

(b) When other measures are more specifically related to Washington state.

[Statutory Authority: RCW 43.20.050 and 70.24.130, 92-02-019 (Order 225B), § 246-100-036, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-036, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW, 89-02-008 (Order 324), § 248-100-036, filed 12/27/88. Statutory Authority: RCW 43.20.050, 88-07-063 (Order 308), § 248-100-036, filed 3/16/88.]

WAC 246-100-041 Responsibilities and duties—State health officer. (1) The state health officer shall have authority to:

(a) Require reporting of cases and suspected cases of disease and conditions in addition to those required in WAC 246-100-076 for a period of time less than thirty-six months when:

(i) The disease or condition is newly recognized or recently acknowledged as a public health concern, and

(ii) Epidemiologic investigation based on reports of cases may contribute to understanding of the disease or condition, and

(iii) Written notification is provided to all local health officers regarding:

(A) Additional reporting requirements, and

(B) Rationale or justification for specifying the disease or condition as reportable.

(b) Require laboratories to submit specimens indicative of infections in addition to those required in WAC 246-100-231 for a period of time less than thirty-six months, provided:

(i) The infection is of public health concern, and

(ii) Written notification is provided to all local health officers and all directors of medical laboratories registered as described in WAC 246-100-221 explaining:

(A) Actions required, and

(B) Reason for the addition.

(2) The state health officer's authorization to require reporting of cases or submission of laboratory specimens, other than those specified in WAC 246-100-076 and 246-100-231, shall expire thirty-six months from the date of written notification of local health officers and laboratory directors unless amended rules are adopted by the state board of health.

(3) The state health officer shall distribute periodic epidemiologic summary reports and an annual review of public health issues to local health officers and local health departments.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-041, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-041, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-041, filed 5/19/87.]

WAC 246-100-046 Responsibilities and duties—Cases, suspected cases, carriers, contacts, and others. (1) Persons shall cooperate with public health personnel during:

(a) Investigation of the circumstances of a case, suspected case, outbreak, or suspected outbreak of a communicable or other disease or condition; and

(b) Implementation of infection control measures, including isolation and quarantine measures.

(2) Individuals having knowledge of a person with a reportable disease or condition may notify the local health officer as described in WAC 246-100-071.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-046, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-046, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-046, filed 5/19/87.]

WAC 246-100-071 Responsibility for reporting to and cooperating with the local health department. (1) A principal health care provider in attendance on a case of any reportable disease or condition shall report the case to the local health department as required in this chapter.

(2) Other health care providers in attendance on a case of a reportable disease or condition shall report the case to the local health department unless the case has already been reported.

(3) Health care facilities where more than one health care provider may be in attendance on a case of a reportable disease or condition may establish administrative procedures to assure forwarding of reports to the local health department without duplication. Neither the submission of a specimen to a public health laboratory as required in WAC 246-100-231 nor the laboratory reporting a positive test result as required in WAC 246-100-236 relieves the principal health

care provider or health care facility from responsibility for reporting to the local health department.

(4) Individuals knowing about a person suspected to have any reportable disease or condition may report the name, other identifying information, and other known information described in WAC 246-100-081 to the local health department.

(5) School principals, school nurses, and day care center operators knowing of a case or suspected case of a reportable disease or condition in the school or center shall notify the local health department.

(6) Each school teacher and day care worker knowing of a case or suspected case of a reportable disease or condition shall report the name and other identifying information to the principal, school nurse, or day care center operator.

(7) Medical laboratories shall report laboratory evidence of certain reportable diseases to the local or state health department as described in WAC 246-100-236.

(8) Health care providers, health care facilities, laboratory directors, and individuals shall cooperate with the local health officer in the investigation of a case or suspected case of a reportable disease or condition, and shall, when requested by the local health officer, provide in a timely manner any information related to the clinical, laboratory, and epidemiologic circumstances of the case or suspected case.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-071, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-071, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-071, filed 5/19/87.]

WAC 246-100-072 Rules for notification of partners at-risk of HIV infection. (1) A health care provider may consult with the local health officer or an authorized representative about an HIV-infected individual without identifying the individual.

(2) Only under the specific circumstances listed below, a principal health care provider shall report the identity of sex or injection equipment-sharing partners of an HIV-infected individual to the local health officer or an authorized representative:

(a) After being informed of the necessity to notify sex and injection-equipment sharing partners, the HIV-infected individual either refuses or is unable to notify partners that partners:

(i) May have been exposed to and infected with HIV; and

(ii) Should seek HIV-pretest counseling and consider HIV testing; and

(b) The HIV-infected individual neither accepts assistance nor agrees to referral to the local health officer or an authorized representative for assistance in notifying partners.

(3) Only in the specific circumstances listed below, a principal health care provider shall report the identity of an individual with a positive HIV test result to the local health officer or an authorized representative:

(a) The principal health care provider provided pretest counseling as described in WAC 246-100-209(1) before the individual was tested; and

(b) The principal health care provider made efforts, but was unable to meet face-to-face with the individual to notify the individual of the HIV-test result and to provide post-test

counseling as required in WAC 246-100-209 in order to assure partner notification.

(4) A health care provider shall not disclose the identity of an HIV-infected individual or the identity of sex and injection equipment-sharing partners at risk of HIV infection, except as authorized in RCW 70.24.105, WAC 246-100-072, or 246-100-076.

(5) Local health officers and authorized representatives shall:

(a) Confirm conditions in subsections (2) and (3) of this section were met prior to initiating partner notification or receiving referral of identity of an HIV-infected individual; and

(b) Use identifying information, provided according to this section, on HIV-infected individuals only for contacting the HIV-infected individual to provide post-test counseling or to contact sex and injection equipment-sharing partners; and

(c) Destroy documentation of referral information established under this subsection, containing identities and identifying information on the HIV-infected individual and at-risk partners of that individual, immediately after notifying partners or within three months of the date information was received, whichever occurs first.

[Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-072, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-072, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-02-008 (Order 324), § 248-100-072, filed 12/27/88.]

WAC 246-100-076 Reportable diseases and conditions. (1) The following diseases and conditions shall be reported as individual case reports to the local health department in accordance with requirements and procedures described throughout chapter 246-100 WAC:

(a) Category A diseases require an immediate report at the time a case is suspected or diagnosed and include:

- (i) Anthrax,
- (ii) Botulism (including food-borne, infant, and wound),
- (iii) Cholera,
- (iv) Diphtheria, noncutaneous,
- (v) Measles (rubeola),
- (vi) Paralytic shellfish poisoning,
- (vii) Plague,
- (viii) Poliomyelitis, and
- (ix) Rabies.

(b) Category B diseases or conditions require a case report within one day of diagnosis and include:

- (i) Brucellosis,
- (ii) Gastroenteritis of suspected food-borne or water-borne origin,
- (iii) Hemophilus influenzae invasive disease (excluding otitis media) in children age five years and under,
- (iv) Hepatitis A and B, acute,
- (v) Leptospirosis,
- (vi) Listeriosis,
- (vii) Meningococcal disease,
- (viii) Paratyphoid fever (see salmonellosis),
- (ix) Pertussis,
- (x) Rubella, including congenital,
- (xi) Salmonellosis, including paratyphoid fever and typhoid fever,

- (xii) Shigellosis,
- (xiii) Syphilis—primary, secondary, or congenital (for other, see Category C),
- (xiv) Typhoid fever, including carrier (see salmonellosis),

(xv) Unusual communicable disease (see definition WAC 246-100-011).

(c) Category C diseases or conditions require a case report within seven days of diagnosis and include:

(i) Acquired immunodeficiency syndrome (AIDS) and class IV human immunodeficiency virus (HTLV III or LAV diseases classified by centers for disease control, United States public health service, MMWR, 5/23/86),

- (ii) Amebiasis,
- (iii) Campylobacteriosis,
- (iv) Chancroid,
- (v) Chlamydia trachomatis infection,
- (vi) Ecoli 0157:H7 infection,
- (vii) Encephalitis, viral,
- (viii) Giardiasis,
- (ix) Gonorrhea,
- (x) Granuloma inguinale,
- (xi) Herpes simplex, initial genital infection,
- (xii) Herpes simplex, neonatal,
- (xiii) Hepatitis non-A, non-B, and unspecified,
- (xiv) Kawasaki syndrome,
- (xv) Legionellosis,
- (xvi) Leprosy (Hansen's disease),
- (xvii) Lyme disease,
- (xviii) Lymphogranuloma venereum,
- (xix) Malaria,
- (xx) Mycobacteriosis, including tuberculosis,
- (xxi) Mumps,
- (xxii) Nongonococcal urethritis,
- (xxiii) Pelvic inflammatory disease, acute,
- (xxiv) Pseudomonas folliculitis of suspected waterborne origin,

- (xxv) Psittacosis,
- (xxvi) Q fever,
- (xxvii) Relapsing fever (borreliosis),
- (xxviii) Reye Syndrome,
- (xxix) Rheumatic fever,
- (xxx) Rocky mountain spotted fever,
- (xxxi) Syphilis—other (see also Category B),
- (xxxii) Tetanus,
- (xxxiii) Tick paralysis,
- (xxxiv) Toxic shock syndrome,
- (xxxv) Trichinosis,
- (xxxvi) Tuberculosis,
- (xxxvii) Tularemia,
- (xxxviii) Vibriosis,
- (xxxix) Yersiniosis, and
- (xxxx) Severe adverse reaction to immunization.

(2) Any cluster or pattern of cases, suspected cases, deaths, or increased incidence of any disease or condition beyond that expected in a given period which may indicate an outbreak, epidemic, or related public health hazard shall be reported immediately by telephone to the local health officer. Such patterns include, but are not limited to, suspected or confirmed outbreaks of food borne or water-borne disease, chickenpox, influenza, viral meningitis,

nosocomial infection suspected due to contaminated products or devices, or environmentally related disease.

(3) Local health officers may require reporting of additional diseases and conditions.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-076, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-076, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-076, filed 5/19/87.]

WAC 246-100-081 Reports—Content—Time—Hospital monthly report permitted for certain diseases.

(1) Health care providers, health care facilities, and others as required in chapter 246-100 WAC shall report each case of a reportable disease or condition (Category A, B, and C), to the local health officer including the following information:

- (a) Name,
- (b) Address,
- (c) Age,
- (d) Sex,
- (e) Diagnosis or suspected diagnosis of disease or condition,

(f) Identity of the principal health care provider (minimally first and last name), and

(g) Name and address or telephone number of the person providing the report.

(2) Local health officers may require other information of epidemiologic or public health value including but not limited to:

- (a) Immunization status,
- (b) History and circumstances of possible exposure or source,
- (c) Identity of contacts at risk for disease, if known,
- (d) Occupation, school, or day care of case,
- (e) Date of onset of disease or condition, and
- (f) Race.

(3) Health care providers, health care facilities, and others required in chapter 246-100 WAC to report cases of disease or conditions shall:

(a) Immediately telephone the report of each case or suspected case of Category A disease or condition, WAC 246-100-076, to the local health department,

(b) Telephone a report of Category B disease or condition, WAC 246-100-076, to the local health department no later than one working day following diagnosis,

(c) Submit a written report of each Category C disease or condition, WAC 246-100-076, to the local health department within seven days of diagnosis including:

(i) Completion of an individual case report form provided or approved by the local health department, or

(ii) A telephone report if:

(A) Telephone reports are approved by the local health officer, and

(B) The local health officer assumes responsibility for completion of the written case report form.

(4) Hospitals may:

(a) Elect a monthly reporting system only for certain category C diseases or conditions including:

- (i) Chlamydia trachomatis infection;
- (ii) Kawasaki syndrome;
- (iii) Leprosy (Hansen's disease);
- (iv) Mumps;
- (v) Mycobacteriosis, excluding tuberculosis;

(vi) Pelvic inflammatory disease, acute including those diseases classified as pelvic inflammatory disease in international classification of diseases, 9th revision, clinical modification, volume I and II, 1980;

(vii) Reye syndrome; and

(viii) Toxic shock syndrome.

(b) Be waived from requirements to report:

(i) Initial genital herpes simplex infection,

(ii) Nongonococcal urethritis, and

(iii) Pseudomonas folliculitis of suspected waterborne origin.

(5) Hospitals shall:

(a) Report immediately by telephone any outbreak or suspected outbreak (see WAC 246-100-076).

(b) Include in monthly reports permitted only for certain diseases specified in subsection (4) of this section, at least:

(i) Name of case,

(ii) Date of admission or outpatient visit, and

(iii) Name of principal health care provider.

(6) Principal health care providers shall report each case of disease or condition, including those listed in subsection (4) of this section within seven days of diagnosis and as specified in subsection (3) of this section.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-081, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-081, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-081, filed 5/19/87.]

WAC 246-100-086 Reporting diseases and conditions directly to department. (1) Health care providers and health care facilities shall telephone reports directly to the department for diseases and conditions under WAC 246-100-076 when:

(a) A local health department is closed at the time a case or suspected case of a category A reportable disease occurs, and

(b) A local health department is closed at the time an outbreak or suspected outbreak occurs (see WAC 246-100-076).

(2) The twenty-four hour department telephone number for reporting diseases or conditions under WAC 246-100-076 is (206) 361-2914 or SCAN 245-2914.

(3) Health care providers and health care facilities shall telephone reports of pesticide poisoning cases or suspected pesticide poisoning cases under RCW 70.104.055 directly to the department of health by dialing the twenty-four hour toll-free telephone number 1-800-356-2323.

[Statutory Authority: RCW 43.20.050 and 70.104.055, 92-02-019 (Order 225B), § 246-100-086, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-086, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.104 RCW, 90-10-036 (Order 049), § 248-100-086, filed 4/26/90, effective 5/27/90. Statutory Authority: RCW 43.20.050, 87-11-047 (Order 302), § 248-100-086, filed 5/19/87.]

WAC 246-100-091 Handling of reports by local health department—Handling of reports by department.

(1) The local health officer or local health department shall:

(a) Notify the department immediately by telephone of any report of a case or suspected case of a category A disease or condition,

(b) Submit a department-approved individual case report form for each case of any reportable disease or condition to the department within seven days of completing the investigation and report. (The state health officer may waive the requirement to submit an individual case report if pertinent information was provided by phone.)

(c) Submit a written report on forms approved by the department for a cluster or outbreak of food borne or waterborne disease within seven days of completing the investigation. (The state health officer may waive the requirements to submit a written report if pertinent information was provided to the department by phone.)

(d) Maintain confidentiality procedures related to disclosure of identity of cases and suspected cases as specified in subsection (2) of this section.

(2) The state health officer and designees shall establish and maintain confidentiality procedures related to employee handling of all reports of cases and suspected cases, prohibiting disclosure of report information identifying an individual case or suspected cases except:

(a) To employees of the local health department, or other official agencies needing to know for the purpose of administering public health laws,

(b) To health care providers, specific designees of health care facilities, laboratory directors, and others for the purpose of collecting additional information about a case or suspected case as required for disease prevention and control.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-091, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-091, filed 5/19/87.]

WAC 246-100-166 Immunization of day care and school children against certain vaccine-preventable diseases. (1) Definitions for purposes of this section:

(a) "Certificate of immunization status (CIS) form" means a form provided by the department labeled DOH 348-013, including data entry spaces for immunization information including:

- (i) Name of child or student,
- (ii) Birth date,
- (iii) Sex,
- (iv) Type of vaccine,
- (v) Date of each dose of vaccine received specifying day, month, and year,
- (vi) Signature of parent, legal guardian, or adult in loco parentis, and
- (vii) Documented exemptions, if applicable and as specified in subsection (5) of this section.

(b) "Chief administrator" means:

- (i) The person with the authority and responsibility for the immediate supervision of the operation of a school, day care center, or
- (ii) A designee of the chief administrator assigned in writing to carry out the requirements of RCW 28A.210.160 through the statutory or corporate board of directors of the school district or school, or
- (iii) Person or persons with the authority and responsibility for the general supervision of the operation of the school district or school.

(c) "Child" means any person regardless of age admitted to any day care center, preschool, kindergarten, or grades one through twelve program of education in:

(i) Any public school district, or

(ii) Any private school or private institution subject to approval by the state board of education or described in RCW 28A.305.130 and 28A.195.010 through 28A.195.060, or

(iii) Any licensed day care facility which regularly provides care for a group of thirteen or more children for periods of less than twenty-four hours subject to licensure by the department of social and health services as described in chapter 74.15 RCW.

(d) "Full immunization" means vaccinated in accordance with schedules and immunizing agents approved by the state board of health in WAC 246-100-166 against:

- (i) Diphtheria,
- (ii) Tetanus,
- (iii) Pertussis or whooping cough,
- (iv) Measles or rubeola,
- (v) Rubella,
- (vi) Mumps,
- (vii) Poliomyelitis, and
- (viii) Haemophilus influenzae type b disease.

(e) "Immunizing agents" means any vaccine or other biologic licensed and approved by the bureau of biologics, United States Food and Drug Administration (FDA), or meeting World Health Organization (WHO) requirements, for immunization of persons against:

- (i) Diphtheria, tetanus, pertussis (DTP, DT, Td);
- (ii) Measles;
- (iii) Mumps;
- (iv) Poliomyelitis, types I, II, and III (TOPV, IPV);
- (v) Rubella; and
- (vi) Haemophilus influenzae type b vaccine (Hib);
- (f) "National immunization guidelines" means schedules

for immunization described in:

- (i) 1991 American Academy of Pediatrics *Report of the Committee on Infectious Diseases* (Red Book); or
- (ii) Immunization Practices Advisory Committee (ACIP) on General Recommendations on Immunization, April 7, 1989; and
- (iii) Immunization Practices Advisory Committee (ACIP) on Haemophilus b Conjugate Vaccines for Prevention of *Haemophilus Influenzae* Type b Disease Among Infants and Children Two Months of Age and Older, January 11, 1991.

(g) "Parent" means a person who is:

- (i) The mother, father, legal guardian, or any adult in loco parentis of a child seventeen years of age or younger; or
- (ii) A person eighteen years of age or older; or
- (iii) An emancipated minor.

(h) "Transfer student" means a student previously enrolled in grades kindergarten through twelve moving from one school district or system to another at any time during the school year, excluding students transferring within a district or system when the school transfers records within the district.

(2) Full immunization schedule. Each day care, preschool, and school shall establish and maintain require-

ments for full immunization of children attending day care and preschool through grade twelve.

(3) For day care and preschool children, full immunization means a child received vaccines as follows:

Age at Entry	Requirement(*)
between 2-3 months	1-DTP/DT,1-OPV/IPV,1-Hib
between 4-5 months	2-DTP/DT,2-OPV/IPV,2-Hib
between 6-14 months	3-DTP/DT,2-OPV/IPV,3-Hib(**)
between 15 months and kindergarten entry	4-DTP/DT,3-OPV/IPV,1-Hib(+), 1-MMR(++)

(*) Children who do not meet the requirements for their age group must initiate or continue a schedule of immunization prior to day care or preschool entry and must be notified by the day care/preschool administrator of additional doses of vaccine as those doses come due.

(**) Children immunized with Hib vaccine from Merck Sharp and Dohme (PedvaxHIB) should receive vaccine at 2 months, 4 months, and 12 months of age.

(+) Those children entering day care or preschool after 15 months of age must have received one dose of Hib vaccine at or after 15 months of age (not required of those receiving three doses of Merck Sharp and Dohme vaccine). Hib vaccine is not required of children 60 months (5 years) and older.

(++) Children who have had measles, rubella, or mumps disease, respectively, must show proof of past infection with the disease by providing an acceptable measles, rubella, or mumps antibody titer result and appropriate immunization against the remaining disease(s).

(4) For a child entering kindergarten or first grade (school entry level), full immunization means a child received vaccines as follows:

(a) A minimum of four doses of either DTP, DT, or Td (not tetanus toxoid alone) with last dose after four years of age consistent with national immunization guidelines defined in subsection (1) of this section, or

(b) Three doses of Td (not tetanus toxoid alone) if the series began at seven years of age or older, and

(c) A minimum of three doses of trivalent oral poliomyelitis vaccine (TOPV) or enhanced trivalent inactivated poliomyelitis vaccine (IPV) with last dose received after four years of age and consistent with national immunization guidelines defined in subsection (1) of this section, and

(d) One dose of live virus measles vaccine at or after one year of age unless a child provides proof of past infection with measles virus (an acceptable measles virus antibody titer result), and

(e) One dose of live virus rubella vaccine at or after one year of age unless a child provides proof of past infection with rubella virus (an acceptable rubella antibody titer result), and

(f) One dose of live virus mumps vaccine administered at or after one year of age unless a child provides proof of past infection with mumps virus (an acceptable mumps virus antibody titer result).

(5) For transfer students and those above kindergarten or first grade, full immunization means a child received vaccines as follows:

(a) A minimum of three doses of either DTP, DT, or Td, (not tetanus toxoid alone) with the last dose after four years of age consistent with national immunization guidelines defined in subsection (1) of this section; or

(b) Three doses of Td, (not tetanus toxoid alone) if the series began at seven years of age or older; and

(c) A minimum of three doses of trivalent oral poliomyelitis vaccine (TOPV), or enhanced trivalent inactivated poliomyelitis vaccine (IPV) with the last dose received after four years of age and consistent with national immunization guidelines defined in subsection (1) of this section (not required of persons eighteen years of age and older); and

(d) One dose of live virus measles vaccine at or after one year of age unless a child provides proof of past infection with measles virus (an acceptable measles virus antibody titer result); and

(e) One dose of live virus rubella vaccine at or after one year of age unless a child provides proof of past infection with rubella virus (an acceptable rubella antibody titer result); and

(6) For transfer students in grades 1 or 2 through 12 enrolling on or after August 1, 1991, one dose of live virus mumps vaccine administered at or after one year of age unless a child provides proof of past infection with mumps virus (an acceptable mumps virus antibody titer result).

(7) For a child entering sixth grade or reaching age thirteen years, whichever occurs first, full immunization means a child received the following vaccines (in addition to those listed in subsection (5) of this section):

(a) A second dose of live virus measles vaccine administered at or after one year of age and separated by at least one month between first and second dose, unless a child provides proof of past infection with measles virus (an acceptable measles virus antibody titer result); and

(b) One dose of live virus mumps vaccine administered at or after one year of age unless a child provides proof of past infection with mumps virus (an acceptable mumps virus antibody titer result).

(8) A second dose of measles vaccine and one dose of mumps vaccine is recommended, but not required, of currently enrolled students above sixth grade.

(9) Conditions for day care, preschool, and school attendance when a child is not fully immunized:

(a) When a child lacks full immunization, the day care, preschool, or school shall require satisfactory progress toward full immunization (conditional status) as a condition of school attendance including:

(i) Documented proof of start or continuance of child's schedule of immunization;

(ii) Assurance the scheduled immunization is consistent with the national immunization guidelines defined in subsection (1) of this section;

(iii) Notification of child's parent(s) of when the schedule must be completed; and

(iv) Exclusion of child from attendance as described in subsection (13) of this section if child has not received required immunizations on schedule and if sufficient time has elapsed (one month from date due) for completion of next dose.

(10) Schools, preschools, and day care centers shall require documented proof related to immunization including:

(a) Completion of a certificate of immunization status (CIS) form by a parent as documented proof of:

(i) Full immunization, or

(ii) Initiation or continuation of a schedule (conditional status), or

(iii) Exemption.

(b) Information from a written personal immunization record, as the source of the immunization data entered on the CIS form (substitution of a personal immunization record for a CIS form is prohibited);

(c) Acceptance of only the CIS form (no other state or local immunization forms) from new enrollees registering in kindergarten through grade twelve;

(d) In addition to current CIS form, acceptance of previous CIS forms, or locally developed forms approved by the department indicating the month and year of each immunization as the official immunization status for children enrolled prior to September 1, 1979.

(11) Schools, preschools, and day care centers shall accept medical exemptions and:

(a) Require a signature of a licensed medical doctor (M.D.), doctor of osteopathy (D.O.), physician assistant, or nurse practitioner practicing within the limits of the medical or nurse practice acts to certify medical reasons to defer one or more immunizations on the CIS form;

(b) Admit children and keep on file a CIS form for children with:

(i) Temporary exemption from immunization for medical reasons if the required immunizations are received upon expiration of the exemption, or

(ii) Permanent exemptions.

(c) Include a statement on the CIS form informing the parent that should an outbreak of vaccine preventable disease for which the child is exempted occur, the child may be excluded from school or day care for the duration of the outbreak by order of the local health department as described in subsection (13) of this section; and

(d) Keep on file a list of children so exempted and transmit the list to the local health department if requested.

(12) Schools, preschools, and day care centers shall:

(a) Allow a parent to exempt his/her child from the required immunizations for religious, philosophical, or personal objections when the CIS form indicates:

(i) Type or exemption, and

(ii) Signature of parent.

(b) Keep on file a CIS form for each child so enrolled;

(c) Include a statement on the CIS form informing the parent that should an outbreak of vaccine preventable disease for which the child is exempted occur, the child may be excluded from school for the duration of the outbreak by order of the local health department as described in subsection (13) of this section; and

(d) Keep on file a list of children so exempted and transmit the list to the local health department if requested.

(13) Schools, preschools, and day care centers shall exclude children from school as follows:

(a) Exclude any child from school for failure to provide a completed CIS form as defined in subsection (1) of this section before or on the child's first day of attendance consistent with procedures required by the state board of education, Title 180 WAC;

(b) Exclude from attendance any child in a day care center for failure to provide a completed CIS form as defined in subsection (1) of this section before or on the child's first day of attendance;

(c) The chief administrator shall retain records on excluded children for at least three years including:

(i) Name,

(ii) Address, and

(iii) Date of exclusion.

(D) A health officer may exclude children from school, preschool, and day care attendance in the event of a child's exposure to a disease according to chapter 246-110 WAC, including children presenting proof of:

(i) Initiation of a schedule of immunization,

(ii) Medical exemption,

(iii) Religious exemption,

(iv) Philosophical exemption, or

(v) Personal exemption.

(14) Schools, preschools, and day care centers shall maintain records and require:

(a) A completed CIS form retained in the files for every child enrolled;

(b) Return of original CIS form or a legible copy to the parent in the event of the child's withdrawal or transfer from school (withholding a record for any reason, including nonpayment of school, preschool, or day care fees is prohibited).

(c) Access to immunization records by agents of the state or local health department for each child enrolled.

(15) Persons or organizations administering immunizations, either public or private, shall:

(a) Furnish each person immunized, or his or her parent, with a written record of immunization containing information required by the state board of health; and

(b) Provide immunizations and records in accordance with chapter 246-100 WAC.

(16) Chief administrators of schools, preschools, and day care centers shall forward a written annual report to the department and local health department on the immunization status of children as follows:

(a) For schools: By November 1 of each year on forms provided by the department (except in the event of a late school opening when the report is due thirty days after the first day of school);

(b) For preschools and day care centers: By February 1 of each year on forms provided by the department.

[Statutory Authority: RCW 28A.210.140 and 43.20.050. 91-15-066 (Order 182B), § 246-100-166, filed 7/22/91, effective 8/22/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-166, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-166, filed 3/16/88.]

WAC 246-100-171 Special settings—Food service establishments. (1) Food handlers with communicable disease in an infectious or carrier state shall not handle food or beverages if the infectious agent can be transmitted through food or beverages.

(2) Employers or persons in charge of food service establishments shall prohibit persons from work as food handlers with a known disease, condition, and/or carrier state including, but not limited to:

(a) Amebiasis;

(b) B hemolytic streptococcal infection;

(c) Campylobacter;

(d) Cholera;

(e) Hepatitis A and Hepatitis unspecified;

(f) Salmonellosis, including typhoid and paratyphoid;

(g) Shigellosis;

(h) Staphylococcal infections; and

(i) Signs of undiagnosed infection including:

(A) Diarrhea (with episodes of over forty-eight hours requiring approval by a health care provider or local health officer prior to return to work);

(B) Skin lesions;

(C) Vomiting; or

(D) Fever.

(3) Work restrictions, control measures, and removal of work restrictions on food handlers and food service establishments shall be consistent with:

(a) *Control of Communicable Diseases in Man*, 15th edition, Abram S. Benenson (editor), American public health association, 1990;

(b) Chapter 246-215 WAC food service sanitation, rules, and regulations of the Washington state board of health; and

(c) Chapter 69.06 RCW, food and beverage establishments, workers permits.

(4) Employers and persons in charge of food service establishments shall:

(a) Require notification or approval of removal of work restriction by a health care provider or local health officer for persons working with diseases, carrier states, conditions and signs listed in subsection (2) of this section; and

(b) Cooperate with public health officials investigating cases, outbreaks, or suspected outbreaks.

(5) The local health department has authority to:

(a) Require an examination of a person or persons to determine presence of infection,

(b) Adopt more stringent rules for excluding a food handler from work, and

(c) Protect public safety consistent with chapter 246-215 WAC by ordering food items to be:

(i) Placed under a hold order,

(ii) Destroyed immediately,

(iii) Surrendered,

(iv) Sampled, and

(v) Submitted for laboratory testing.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-171, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-171, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-171, filed 3/16/88.]

WAC 246-100-176 Special settings—Schools.

Private and public schools, vocational schools, colleges, and universities shall cooperate with local and state health officers in carrying out requirements in chapters 246-110 and 246-100 WAC.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-176, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-176, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-176, filed 3/16/88.]

WAC 246-100-181 Special settings—Child day care facilities. Child day care facilities shall:

(1) Establish policy and procedures for prevention and control of communicable diseases in employees, voluntary staff, and children that:

(a) Are consistent with "child health care plan guidelines" available from division of health, office of licensing and certification, personal care facilities survey section, ET-33, Olympia, Washington 98504; and/or

(b) Are consistent with additional or more stringent recommendations of the local health department; and

(c) Include a provision for reporting illness to the local health department when required in chapter 246-100 WAC and WAC 388-73-056.

(2) Consult with a health care provider or the local health department for information about infectious or communicable disease, as necessary.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-181, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-181, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-181, filed 3/16/88.]

WAC 246-100-186 Special settings—Health care facilities. Health care facilities shall:

(1) Adopt written policy and procedures restricting work of employees, staff, students, and volunteers diagnosed to have a communicable disease from direct contact with patients, residents, and recipients of care during the period of communicability when:

(a) Transmission of the disease to recipients of care or other employees can occur in that particular job environment, and

(b) The disease can cause serious illness.

(2) Permit employees, staff, students, and volunteers to return to work when measures have been taken to prevent transmission of disease if:

(a) Measures are consistent with recommendations of an infection control committee or equivalent authorized group if existing, and

(b) Measures are consistent with recommendations of local health officer.

(3) Comply with applicable state licensure law and department rules regarding communicable disease screening and control.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-186, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-186, filed 3/16/88.]

WAC 246-100-191 Animals, birds, pets—Measures to prevent human disease. (1) All persons and entities are prohibited from:

(a) Sale of milk, meat, hides, and hair from animals infected with anthrax; and

(b) Sale and display of turtles except as permitted under Title 21 CFR, Food and Drug Administration, part 1240.62, 1986.

(2) Except for bonafide public or private zoological parks, persons and entities are prohibited from:

(a) Importing into Washington state any bat, skunk, fox, raccoon, or coyote without a permit from the director of the Washington state department of agriculture, as required in WAC 16-54-125; and

(b) Acquiring, selling, bartering, exchanging, giving, purchasing, or trapping for retention as pets or for export any:

(i) Bat,

(ii) Skunk,

(iii) Fox,

(iv) Raccoon, and

(v) Coyote.

(3) Local health officers shall determine whether or not to order the destroying or testing of animals other than cats and dogs if:

(a) The animal has bitten or otherwise exposed a person, and

(b) Rabies is suspected.

(4) When an animal has bitten or otherwise exposed a person, the local health officer shall institute any or all of the following as judged appropriate:

(a) Order testing and destruction of the animal,

(b) Order restriction of dogs and cats for ten days observation,

(c) Require examination and recommendation by a veterinarian related to signs of rabies, or

(d) Specify other appropriate actions for animals considered low risk for rabies.

(5) When an animal other than a bat is found to be rabid, the local health officer shall immediately institute a community-wide rabies control program including:

(a) Issuance of orders to pick up and impound all stray and unlicensed dogs and cats,

(b) Issuance of orders to owners of dogs and cats requiring proof of rabies vaccination of animals by a veterinarian within six previous months,

(c) Restriction of household mammals to owners' premises except when on a leash, or

(d) Institute actions other than subsection (5)(a), (b), and (c) of this section when judged appropriate.

(6) A person destroying an animal as described in this section shall:

(a) Avoid damaging the brain; and

(b) Transport the dead animal's head, brain, or body in a manner approved by the local health department.

(7) To improve surveillance for rabies, laboratories shall inform the local health officer prior to testing specimens and samples for rabies.

(8) When a cat or dog has been bitten or exposed to a rabid or suspected rabid animal, the local health officer shall require:

(a) Destruction of the exposed animal; or

(b) Revaccination, if currently vaccinated, including observation by owner for ninety days; or

(c) If not currently vaccinated, vaccination and strict isolation for six months with revaccination one month prior to release from isolation; or

(d) Any other action judged appropriate by the local health officer.

(9) A person importing a dog and/or a cat into Washington state shall comply with WAC 16-54-120.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-191, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-191, filed 3/16/88.]

WAC 246-100-196 Animal bites—Report to local health department. Health care providers shall:

(1) Report all cases of humans exposed to secretions or bitten by domestic or wild animals, especially bats and carnivores, to the local health department or designated local authority;

(2) Report bites of rodents and lagomorphs only when an animal exhibits unusual behavior; and

(3) Use protocols established in *Communicable Diseases in Man*, 15th edition, Abram S. Benenson, editor, 1990, when treating wounds caused by animal bites.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-196, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-196, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-196, filed 3/16/88.]

WAC 246-100-201 Birds—Measures to prevent psittacosis. (1) Definitions specific to this section:

(a) "Breeder" means a person or persons propagating birds for purpose of sale, trade, gift, or display;

(b) "Displayer" means a person, owner, or entity other than a public or private zoological park showing, exhibiting, or allowing a person or persons to handle or access a bird in a place open to the public or in a health care facility;

(c) "Leg band" means a smooth plastic or metal cylinder, either open (seamed) or closed (seamless), designed to be used to encircle a leg of a bird including permanent inscription of identification indicating:

(i) Code for individual bird, and

(ii) Code for breeder source except when open bands identify vendor rather than breeder.

(d) "Psittacine bird" or "bird" means all birds commonly known as:

(i) Parrots,

(ii) Macaws,

(iii) Cockatoos,

(iv) Lovebirds,

(v) Parakeets, and

(vi) All other birds of the order psittaciformes.

(e) "Vendor" means a person or entity selling, trading, or giving a bird to another person or entity.

(2) A person selling, trading, or otherwise transferring a bird shall identify each bird by:

(a) A coded and closed (seamless) leg band;

(b) A United States department of agriculture open (seamed) leg band; or

(c) An open (seamed) leg band only in cases where an original and closed (seamless) leg band was lost or required replacement due to injury or potential injury to the bird.

(3) A vendor transferring a bird to other than the general public shall maintain a record of transfer including acquisition, sales, and trade of a bird, for at least one year and including:

(a) Date of transaction;

(b) Name and address of the recipient and source;

(c) Number and type, including the common name of the bird transferred; and

(d) Leg band codes, including breeder or vendor and individual bird codes, omitting individual bird code only upon initial transfer of a bird propagated by the breeder.

(4) A vendor transferring a bird to the general public shall provide each buyer or recipient with:

(a) A sales slip or written document including all information required in subsection (3)(a), (b), (c), and (d) of this section; and

(b) A written warning or caution notice including:

(i) Information about possible human infection or disease caused by birds, especially psittacosis, parrot fever, and ornithosis;

(ii) Signs of infection or a sick bird including:

- (A) Nasal discharge,
- (B) Sneezing,
- (C) Coughing,
- (D) Ruffled feathers,
- (E) Lethargy, and
- (F) Diarrhea.

(iii) Signs and symptoms of an illness in a human including, but not limited to:

- (A) Chills,
- (B) Fever,
- (C) Headache,
- (D) Cough, and
- (E) Muscle aches.

(iv) Information that nasal discharge and droppings of an infected or sick bird may cause illness in humans; and

(v) Advice to consult veterinarian or health care provider, as appropriate, if signs or symptoms occur.

(5) A vendor shall post a readable sign in a public area with a warning described in subsection (4)(b) of this section.

(6) When investigation of a human case of psittacosis indicates probable infection from a bird, the local health officer shall:

(a) Order collection of blood or other appropriate samples from the suspect bird or birds for appropriate laboratory tests to rule out disease; or

(b) Use protocols established in *Communicable Diseases in Man*, 15th edition, Abram S. Benenson, editor, 1990; and

(c) Have authority to enforce requirements of this section on a nonpsittacine bird or birds when:

- (i) There is suspected exposure to an infected bird, or
- (ii) There is evidence a bird caused a disease.

(7) When a local health officer orders a quarantine of a bird or birds, the vendor shall:

- (a) Cooperate with the local health officer, and
- (b) Assume costs associated with action.

(8) Upon confirmation of psittacosis, vendors shall follow directions issued by the local health officer to:

(a) Place the birds under antibiotic treatment with environmental cleaning and sanitizing; or

(b) Destroy all birds on the premises followed by environmental cleaning and sanitizing; and

(c) Assume costs associated with psittacosis prevention and control action ordered by local and state health officer;

- (d) Prohibit sale or addition of birds to inventory; and
- (e) Prevent contact of any bird with the public.

(9) A person exhibiting or displaying a bird or birds in a place or area used or occupied by the public shall exhibit the bird or birds in a manner preventing human exposure to the birds and bird discharges except:

- (a) In single-purpose pet shops and aviaries, and
- (b) At bird shows if:

(i) A room containing a bird or birds is separated from other areas and activities, and

(ii) The room entrance has a sign warning a person about potential exposure to psittacosis.

(10) Shipment and embargo of birds.

(a) Any person or entity receiving a psittacine bird or birds from points outside Washington state shall:

- (i) Comply with Title 9 CFR, parts 92.3 and 92.8(b);
- (ii) Refuse receipt of any bird originating from premises where psittacosis infection is suspected or known; and

(iii) Refuse receipt of any bird from a premise quarantined for psittacosis.

(b) The state health officer is authorized to:

(i) Order placement and removal of an embargo upon shipment of a live bird or birds into Washington state, and

(ii) Order any action necessary to control an outbreak or potential outbreak of psittacosis in Washington state.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-201, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-201, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-201, filed 3/16/88.]

WAC 246-100-206 Special diseases—Sexually transmitted diseases. (1) Definitions.

(a) "Behaviors presenting imminent danger to public health (BPID)" means the following activities, under conditions specified below, performed by an individual with a laboratory confirmed HIV infection:

(i) Anal or vaginal intercourse without a latex condom; or

(ii) Shared use of blood-contaminated injection equipment;

(iii) Donating or selling HIV-infected blood, blood products, or semen; and

(iv) Under the following specified conditions:

(A) The infected individual received post-test counseling as described in WAC 246-100-209 prior to repeating activities in subsection (1)(a)(i) and (ii) of this section; and

(B) The infected individual did not inform the persons, with whom activities described in subsection (1)(a)(i) and (ii) of this section occurred, of his or her infectious status.

(b) "Behaviors presenting possible risk" means:

(i) Actual actions resulting in "exposure presenting a possible risk" limited to:

(A) Anal, oral, or vaginal intercourse excluding conjugal visits; or

(B) Physical assault; or

(C) Sharing of injection equipment or sharp implements; or

(D) Throwing or smearing of blood, semen, or vaginal fluids; or

(ii) Threatened action if:

(A) The threatening individual states he or she is infected with HIV; and

(B) The threatened behavior is listed in subsection (1)(b)(i)(A), (B), (C), and (D) of this section; and

(C) The threatened behavior could result in "exposure presenting a possible risk."

(c) "Conduct endangering public health" means:

(i) Anal, oral, or vaginal intercourse for all sexually transmitted diseases;

(ii) For HIV and Hepatitis B:

(A) Anal, oral, or vaginal intercourse; and/or

(B) Sharing of injection equipment; and/or

(C) Donating or selling blood, blood products, body tissues, or semen; and

(iii) Activities described in subsection (1)(d)(i) and (ii) of this section resulting in introduction of blood, semen, and/or vaginal fluids to:

(A) Mucous membranes;

(B) Eyes;

(C) Open cuts, wounds, lesions; or

(D) Interruption of epidermis.

(d) "Exposure presenting possible risk" means one or more of the following:

(i) Introduction of blood, semen, or vaginal fluids into:

(A) A body orifice or a mucous membrane;

(B) The eye; or

(C) An open cut, wound, lesion, or other interruption of the epidermis.

(ii) A needle puncture or penetrating wound resulting in exposure to blood, semen, and/or vaginal fluids.

(e) "Reasonably believed" or "reason to believe," in reference to a sexually transmitted disease, means a health officer's belief which:

(i) For the purpose of investigating the source and spread of disease, is based upon a credible report from an identifiable individual indicating another person is likely to have a sexually transmitted disease (STD) or to have been exposed to a STD; and

(ii) For the purpose of issuing a written order for an individual to submit to examination, counseling, or treatment is based upon:

(A) Laboratory test results confirming or suggestive of a STD; or

(B) A health care provider's direct observation of clinical signs confirming an individual has or is likely to have a STD; or

(C) Obtaining information directly from an individual infected with a STD about the identity of his or her sexual or needle-sharing contacts when:

(I) Contact with the infected individual occurred during a period when the disease may have been infectious; and

(II) The contact was sufficient to transmit the disease; and

(III) The infected individual is, in the health officer's judgment, credible and believable.

(f) "Substantial exposure" means physical contact resulting in exposure presenting possible risk, limited to:

(i) A physical assault upon the exposed person involving blood or semen;

(ii) Intentional, unauthorized, nonconsensual use of needles or sharp implements to inject or mutilate the exposed person;

(iii) An accidental parenteral or mucous membrane or nonintact skin exposure to blood, semen, or vaginal fluids.

(2) Health care providers shall:

(a) Report each case of sexually transmitted disease as required in chapter 246-100 WAC, and

(b) Instruct each patient regarding:

(i) Communicability of the disease, and

(ii) Requirements to refrain from acts that may transmit the disease to another.

(c) Ensure completion of a prenatal serologic test for syphilis in each pregnant woman pursuant to RCW 70.24.090 including:

(i) Submission of a blood sample for syphilis to a laboratory approved to perform prenatal serologic tests for syphilis, as required in RCW 70.24.090, at the time of the first prenatal visit, and

(ii) Decide whether or not to omit the serologic test for syphilis if the test was performed elsewhere during the current pregnancy.

(3) Laboratories, health care providers, and other persons shall deny issuance of a certificate or statement implying an individual is free from sexually transmitted disease.

(4) Local health officers, health care providers, and others, in addition to requirements in chapter 246-100 WAC, shall comply with the provisions in chapter 70.24 RCW.

(5) Prevention of ophthalmia neonatorum.

(a) Health care providers diagnosing or caring for a patient with gonococcal or chlamydial ophthalmia neonatorum shall report the case to the local health officer or local health department in accordance with the provisions of this chapter.

(b) The principal health care provider attending or assisting in the birth of any infant or caring for an infant after birth, shall ensure instillation of a department-approved prophylactic ophthalmic agent into the conjunctival sacs of the infant within the time frame established by the department in policy statement of ophthalmia agents approved for the prevention of ophthalmia neonatorum in the newborn, issued June 19, 1981.

(6) State and local health officers or their authorized representatives shall:

(a) Have authority to conduct or cause to be conducted an interview and investigation of persons infected or reasonably believed to be infected with a sexually transmitted disease; and

(b) Use procedures and measures described in WAC 246-100-036(4) in conducting investigations.

(7) State and local health officers and their authorized representatives shall have authority to:

(a) Issue written orders for medical examination, testing, and/or counseling under chapter 70.24 RCW, only after:

(i) All other efforts to protect public health have failed, including reasonable efforts to obtain the voluntary cooperation of the person to be affected by the order; and

(ii) Having sufficient evidence to "reasonably believe" the individual to be affected by the order:

(A) Has a sexually transmitted disease; and

(B) Is engaging in "conduct endangering public health"; and

(iii) Investigating and confirming the existence of "conduct endangering public health" by:

(A) Interviewing sources to assess their credibility and accuracy; and

(B) Interviewing the person to be affected by the order; and

(iv) Including in a written order all information required in RCW 70.24.024.

(b) Issue written orders for treatment under RCW 70.24.022 only after laboratory test results, or direct observation of clinical signs or assessment of clinical data by a physician, confirm the individual has, or is likely to have, a sexually transmitted disease;

(c) Issue written orders to cease and desist from specified activities, under RCW 70.24.024 only after:

(i) Determining the person to be affected by the order is engaging in "conduct endangering public health"; and

(ii) Laboratory test results, or direct observation of clinical signs or assessment of clinical data by a physician, confirm the individual has, or is likely to have, a sexually transmitted disease; and

(iii) Exhausting procedures described in subsection (7)(a) of this section; and

(iv) Enlisting, if appropriate, court enforcement of the orders described in subsections (7)(a) and (b) of this section; and

(d) Seek court orders for detainment under RCW 70.24.034, only for persons infected with HIV and only after:

(i) Exhausting procedures described in subsection (7)(a), (b), and (c) of this section; and

(ii) Enlisting, if appropriate, court enforcement of orders to cease and desist; and

(iii) Having sufficient evidence to "reasonably believe" the person is engaging in "behaviors presenting an imminent danger to public health."

(8) Conditions for detainment of individuals infected with sexually transmitted disease.

(a) A local health officer may notify the state health officer if he or she determines:

(i) The criteria for "behaviors presenting imminent danger to public health (BPID)" are met by an individual; and

(ii) Such individual fails to comply with a cease and desist order affirmed or issued by a court.

(b) A local or state health officer may request the prosecuting attorney to file an action in superior court to detain an individual specified in subsection (8)(a) of this section.

(c) The requesting local or state health officer or authorized representative shall:

(i) Notify the department prior to recommending the detainment setting where the individualized counseling and education plan may be carried out consistent with subsections (8)(d), (e), and (f) of this section;

(ii) Make a recommendation to the court for placement of such individual consistent with subsections (8)(d) and (f) of this section; and

(iii) Provide to the court an individualized plan for education and counseling consistent with subsection (8)(e) of this section.

(d) State board of health requirements for detainment of individuals demonstrating BPID:

(i) Sufficient number of staff, caregivers, and/or family members to:

(A) Provide round-the-clock supervision, safety of detainee, and security; and

(B) Limit and restrict activities to prevent BPID; and

(C) Make available any medical, psychological, or nursing care when needed; and

(D) Provide access to AIDS education and counseling; and

(E) Immediately notify the local or state health officer of unauthorized absence or elopement; and

(ii) Sufficient equipment and facilities to provide:

(A) Meals and nourishment to meet nutritional needs; and

(B) A sanitary toilet and lavatory; and

(C) A bathing facility; and

(D) Bed and clean bedding appropriate to size of detainee; and

(E) A safe detention setting appropriate to chronological and developmental age of detainee; and

(F) A private sleeping room; and

(G) Prevention of sexual exploitation.

(iii) Sufficient access to services and programs directed toward cessation of BPID and providing:

(A) Linguistically, socially, culturally, and developmentally appropriate ongoing AIDS education and counseling; and

(B) Psychological and psychiatric evaluation and counseling; and

(C) Implementation of court-ordered plan for individualized counseling and education consistent with subsection (8)(e) of this section.

(iv) If required, provide access to isolation and/or restraint in accordance with restraint and seclusion rules in WAC 275-55-263 (2)(c);

(v) Maintain a safe, secure environment free from harassment, physical danger, and sexual exploitation.

(e) Washington state board of health standards for an individualized counseling and education plan for a detainee include:

(i) Consideration of detainee's personal and environmental characteristics, culture, social group, developmental age, and language;

(ii) Identification of habitual and addictive behavior and relapse pattern;

(iii) Identification of unique risk factors and possible cross-addiction leading to behavior presenting imminent danger to public health;

(iv) Identification of obstacles to behavior change and determination of specific objectives for desired behavior;

(v) Provision of information about acquisition and transmission of HIV infection;

(vi) Teaching and training of individual coping skills to prevent relapse to BPID;

(vii) Specific counseling for chemical dependency, if required;

(viii) Identification of and assistance with access to community resources, including social services and self-help groups appropriate to provide ongoing support and maintenance of behavior change; and

(ix) Designation of a person primarily responsible for counseling and/or education who:

(A) Completed pretest and post-test counselor training approved by the office on AIDS; and

(B) Received training, as approved by the office on AIDS, focused on facilitating behavior change related to preventing BPID; and

(C) Has a post-graduate degree in social work, psychology, counseling, psychosocial nursing, or other allied profession; and

(D) Completed at least one year clinical experience after post-graduate education with a primary focus on individualized behavior change; and

(E) Is a certified counselor under chapter 18.19 RCW.

(x) Designation and provision of a qualified counselor under WAC 275-19-145 when the detainee is assessed to have a drug or alcohol problem.

(f) The state board of health designates the following settings appropriate for detainment provided a setting meets requirements in subsection (8)(d)(i), (ii), (iii), (iv), and (v) of this section:

(i) Homes, care facilities, or treatment institutions operated or contracted by the department;
 (ii) Private homes, as recommended by the local or state health officer;

(iii) Boarding homes licensed under chapter 18.20 RCW;

(iv) Nursing homes licensed under chapter 18.51 RCW;

(v) Facilities licensed under chapter 71.12 RCW, including:

(A) Psychiatric hospitals, per chapter 246-322 WAC;

(B) Alcoholism treatment centers if certified for substance use under chapter 275-19 WAC;

(C) Adult residential rehabilitation centers, per chapter 246-325 WAC;

(D) Private adult treatment homes, per chapter 246-325 WAC;

(E) Residential treatment facilities for psychiatrically impaired children and youth, per chapter 246-323 WAC;

(vi) A hospital licensed under chapter 70.41 RCW.

(9) Jail administrators may order pretest counseling, post-test counseling, and HIV testing of persons detained in jail according to RCW 70.24.360 only under the following conditions:

(a) The jail administrator documents and reports to the local health officer, within seven days after the incident, any incident perceived to be actual or threatened "behaviors presenting possible risk"; and

(b) The local health officer:

(i) Determines the documented behavior or behaviors meet the criteria established in the definition of "behaviors presenting a possible risk"; and

(ii) Interviews the detained individual to evaluate the factual basis for alleged actual or threatened behavior; and

(iii) Makes a fact determination, based upon the documented behavior, the interview with the detained individual, and/or independent investigation, that sufficient factual evidence exists to support the allegation of actual or threatened "behaviors presenting possible risk"; and

(iv) Arranges for testing of the individual who is the source of the behavior to occur within seven days of the request from the jail administrator; and

(v) Reviews with the detained individual who is the source of the behavior the documentation of the actual or threatened behavior to try to assure understanding of the basis for HIV testing; and

(vi) Provides written approval of the jail administrator's order prior to HIV testing in accordance with subsection (7)(a)(i) of this section.

(c) The jail administrator maintains HIV test results and identity of the tested individual as a confidential, nondisclosable record, as provided in RCW 70.24.105.

(10) When an individual experiences a substantial exposure to another individual's body fluids and requests HIV testing of that other individual, the state and local health officers have authority to order pretest counseling, HIV testing, and post-test counseling of that other individual providing:

(a) The alleged exposure occurred when the individual was employed or acting as an authorized volunteer in one of the following employment categories:

(i) Law enforcement officer;

(ii) Firefighter;

(iii) Health care provider;

(iv) Staff of health care facilities; and

(b) The alleged substantial exposure occurred on the job; and

(c) The request to the health officer for testing and counseling of the individual was made within seven days of the occurrence of the alleged exposure; and

(d) The local health officer:

(i) Determines that the alleged exposure meets the criteria established in the definition of "substantial exposure"; and

(ii) Ensures that pretest counseling of the individual to be tested, or a legal representative, occurs; and

(iii) Arranges for testing of the individual who is the source of the exposure to occur within seven days of the request from the person exposed; and

(e) The exposed individual agrees to be tested for HIV if such testing is determined appropriate by the health officer; and

(f) Records on HIV testing ordered by a health officer are maintained only by the ordering health officer.

(11) For the purpose of RCW 49.60.172 concerning the absence of HIV infection as a bona fide occupational qualification only, "significant risk" means a job qualification which requires person-to-person contact likely to result in direct introduction of blood into the eye, an open cut or wound, or other interruption of the epidermis, when:

(a) No adequate barrier protection is practical; and

(b) Determined only on case-by-case basis consistent with RCW 49.60.180.

[Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-206, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-206, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-07-095 (Order 325), § 248-100-206, filed 3/22/89; 88-21-093 (Order 322), § 248-100-206, filed 10/19/88; 88-17-056 (Order 316), § 248-100-206, filed 8/17/88. Statutory Authority: RCW 43.20.050. 87-11-047 (Order 302), § 248-100-206, filed 5/19/87.]

WAC 246-100-207 Human immunodeficiency virus (HIV) testing—Ordering—Laboratory screening—Interpretation—Reporting. (1) Any person ordering or prescribing an HIV test for another, except for seroprevalent studies under chapter 70.24 RCW or provided under subsections (2) and (3) of this section, shall:

(a) Provide or refer for pretest counseling described under WAC 246-100-209;

(b) Obtain or ensure informed specific consent of the individual to be tested separate from other consents prior to ordering or prescribing an HIV test, unless excepted under provisions in chapter 70.24 RCW; and

(c) Provide or refer for post-test counseling described under WAC 246-100-209 if HIV test is positive for or suggestive of HIV infection.

(2) Blood banks, tissue banks, and others collecting or processing blood, sperm, tissues, or organs for transfusion/transplanting shall:

(a) Obtain or ensure informed specific consent of the individual prior to ordering or prescribing an HIV test, unless excepted under provisions in chapter 70.24 RCW;

(b) Explain that the reason for HIV testing is to prevent contamination of the blood supply, tissue, or organ bank donations; and

(c) At the time of notification regarding a positive HIV test, provide or ensure at least one individual counseling session.

(3) Persons subject to regulation under Title 48 RCW and requesting an insured, subscriber, or potential insured or subscriber to furnish the results of an HIV test for underwriting purposes, as a condition for obtaining or renewing coverage under an insurance contract, health care service contract, or health maintenance organization agreement shall:

(a) Before drawing blood to perform an HIV test, provide written information to the individual tested explaining:

- (i) What an HIV test is;
- (ii) Behaviors placing a person at risk for HIV infection;
- (iii) The purpose of HIV testing in this setting is to determine eligibility for coverage;
- (iv) The potential risks of HIV testing; and
- (v) Where to obtain HIV pretest counseling.

(b) Obtain informed specific written consent for an HIV test. The written informed consent shall include:

(i) An explanation of confidential treatment of test result reports limited to persons involved in handling or determining applications for coverage or claims for the applicant or claimant; and

(ii) Requirements under subsection (3)(c) of this section.

(c) Establish procedures to inform an applicant of the following:

(i) Post-test counseling specified under WAC 246-100-209(4) is required if an HIV test is positive or indeterminate;

(ii) Post-test counseling is done at the time any positive or indeterminate HIV test result is given to the tested individual;

(iii) The applicant is required to designate a health care provider or health care agency to whom positive or indeterminate HIV test results are to be provided for interpretation and post-test counseling; and

(iv) When an individual applicant does not identify a designated health care provider or health care agency and the applicant's HIV test results are positive or indeterminate, the insurer, health care service contractor, or health maintenance organization shall provide the test results to the local health department for interpretation and post-test counseling.

(4) Laboratories and other places where HIV testing is performed shall demonstrate complete and satisfactory participation in an HIV proficiency testing program approved by the Department Laboratory Quality Assurance Section, Mailstop K17-9, 1610 N.E. 150th, Seattle, Washington 98155.

(5) The department laboratory quality assurance section shall accept substitutions for EIA screening only as approved by the United States Food and Drug Administration (FDA) and a published list or other written FDA communication.

(6) Medical laboratories testing for the presence of HIV shall:

(a) Send an HIV test prevalence results report by telephone or in writing to the department office on AIDS (Mailstop K17-9, 1610 N.E. 150th, Seattle, Washington 98155), quarterly or more often; and

(b) Include in the report:

(i) Number of samples tested;

(ii) Number of samples repeatedly reactive by enzyme immuno assay (EIA);

(iii) Number of samples tested by western blot assay (WBA) or other confirmatory test as approved by department office on AIDS;

(iv) Number of positive test results by WBA or other confirmatory test as approved by department office on AIDS;

(v) Number of specimens tested by viral culture; and

(vi) Number of positive test results from viral cultures.

(7) Persons informing a tested individual of positive laboratory test results indicating HIV infection shall do so only when:

(a) HIV is isolated by viral culture technique; or

(b) HIV antibodies are identified by a sequence of tests which are reactive and include:

(i) A repeatedly reactive screening test such as the enzyme immunoassay (EIA); and

(ii) An additional, more specific, assay such as a positive western blot assay (WBA) or other tests as defined and described in the AIDS office manual, April, 1988, Department of Health, Office on AIDS, P.O. Box 47840, Olympia, Washington 98504-7840.

(c) Such information consists of relevant, pertinent facts communicated in such a way that it will be readily understood by the recipient.

[Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-207, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-207, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW and RCW 70.24.130. 89-20-006 (Order 334), § 248-100-207, filed 9/22/89, effective 10/23/89. Statutory Authority: Chapter 70.24 RCW. 89-14-003 (Order 329), § 248-100-207, filed 6/22/89; 88-17-058 (Order 318), § 248-100-207, filed 8/17/88.]

WAC 246-100-208 Counseling standard—AIDS counseling. (1) Principal health care providers shall counsel or ensure AIDS counseling for:

(a) Each pregnant woman; and

(b) Each patient seeking treatment of a sexually transmitted disease.

(2) Drug treatment programs under chapter 70.96A RCW shall provide or ensure provision of AIDS counseling for each person in a drug treatment program.

(3) Health care providers, persons, and organizations providing AIDS counseling shall:

(a) Assess the behaviors of each individual counseled for risk of acquiring and transmitting human immunodeficiency virus (HIV);

(b) Maintain a nonjudgmental environment during counseling which:

(i) Considers the individual's particular circumstances; and

(ii) Is culturally, socially, linguistically, and developmentally appropriate to the individual being counseled.

(c) Focus counseling on behaviors increasing the risk of HIV acquisition and transmission;

(d) Provide or ensure provision of personalized risk reduction education to individuals who:

(i) Are men who had sex with other men at any time since 1977;

(ii) Used intravenous substances at any time since 1977;

(iii) Engaged in sex for money or drugs at any time since 1977;

(iv) Have had sexual and/or injection equipment-sharing contact with persons listed in subsection (3)(d)(i), (ii), and (iii) of this section;

(v) Have been exposed to or known to have had a sexually transmitted disease at any time since 1977;

(vi) Are at increased risk of HIV infection by definition of United States Public Health Service, Centers for Disease Control;

(vii) Are enrolled in a drug treatment program under chapter 69.54 RCW; or

(viii) Received multiple transfusions of blood, plasma, or blood products from 1977 to 1985.

(e) Encourage individuals assessed to be at other than virtually no risk of HIV infection to:

(i) Receive AIDS risk reduction counseling;

(ii) Consider information about the nature, purpose, and potential ramifications of HIV testing;

(iii) Receive pretest counseling;

(iv) Consider confidential or anonymous voluntary HIV testing if appropriate; and

(v) "Virtually no risk of HIV infection" means persons with medical histories absent of and reporting none of the following factors:

(A) Transfusion with blood or blood products at any time since 1977;

(B) Residence at any time in countries where HIV is considered endemic since 1977;

(C) Unprotected sex between men at any time since 1977;

(D) Use of intravenous substances at any time since 1977, especially when sharing injection equipment;

(E) Engagement in sex for money or drugs at any time since 1977;

(F) Sexual and/or injection equipment-sharing contacts at any time since 1977 with persons listed in subsection (3)(e)(iii)(C), (D), and (E) of this section;

(G) Exposure to a sexually transmitted disease; and

(H) Increased risk of HIV infection by definition of United States Public Health Service, Centers for Disease Control.

(4) Persons and organizations providing AIDS counseling may provide additional or more comprehensive counseling than required in this section.

[Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-208, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-208, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 88-17-058 (Order 318), § 248-100-208, filed 8/17/88.]

WAC 246-100-209 Counseling standards—Human immunodeficiency virus (HIV) pretest counseling—HIV post-test counseling. (1) Health care providers and other persons providing pretest counseling shall:

(a) Assess the individual's risk of acquiring and transmitting HIV by evaluating information about the individual's possible risk-behaviors;

(b) Provide at least one individual counseling session prior to HIV testing;

(c) Inform any individual planning to be tested for HIV that:

(i) If the test result is positive, the tested individual needs to notify sex and injection equipment-sharing partners that partners:

(A) May have been exposed to and infected with HIV; and

(B) Should seek HIV pretest counseling and consider HIV testing; and

(ii) Unless HIV testing is anonymous, the principal health care provider is required to refer identities of at-risk partners to the local health officer or authorized representative if:

(A) The HIV-infected individual either refuses or is unable to notify partners of exposure, possible infection, and need for pretest counseling and HIV testing; or

(B) The HIV-infected individual neither accepts assistance nor agrees to referral to the local health officer or an authorized representative for assistance in notifying partners; and

(iii) Unless HIV testing is anonymous, the principal health care provider is required to refer the identify of the individual testing positive to the local health officer or an authorized representative if the principal health care provider made efforts, but was unable to meet face-to-face with the individual to:

(A) Notify the individual of the HIV test result; and

(B) Provide post-test counseling, as required in this section, to assure partner notification.

(2) When an individual is assessed by a counselor or health care provider as "virtually no risk of HIV infection," as defined in WAC 246-100-208 (3)(e)(v) a counselor or the health care provider shall, in addition to subsection (1)(a) of this section:

(a) Maintain a nonjudgmental environment during counseling which:

(i) Considers the individual's particular circumstances; and

(ii) Is culturally, socially, linguistically, and developmentally appropriate to the individual being counseled.

(b) Explain the nature, purpose, value, and reason for the HIV tests;

(c) Explain the possible effect of HIV testing and a positive HIV test result related to employment, insurance, housing, and other potential legal, social, and personal consequences;

(d) Develop and maintain a system of referral and make referrals that:

(i) Are accessible and confidential for those counseled;

(ii) Are acceptable to and supportive of those counseled;

(iii) Provide assistance to those counseled in maintaining risk reduction behaviors.

(e) Provide at least one individual counseling session at the time HIV test results are disclosed to individuals testing positive; and

(f) Maintain disclosure and confidentiality requirements in WAC 246-100-016.

(3) If the individual is assessed by a health care provider to be other than "virtually no risk of HIV infection," as defined in WAC 246-100-208 (3)(e)(v), the person providing pretest counseling shall maintain requirements in subsection (1) and (2) of this section and:

(a) Focus counseling on behaviors increasing the risk of HIV acquisition and transmission;

(b) Provide personalized risk reduction education to individuals who:

(i) Are men engaging in unprotected intercourse with other men at any time since 1977;

(ii) Used intravenous substances at any time since 1977, especially those sharing injection equipment;

(iii) Engaged in sex for money or drugs at any time since 1977;

(iv) Have had sexual and/or injection equipment-sharing contacts at any time since 1977 with persons listed in subsection (3)(b)(i), (ii), and (iii) of this section;

(v) Have been exposed to or diagnosed with a sexually transmitted disease;

(vi) Are at increased risk of HIV infection by definition of United States Public Health Services, Centers for Disease Control;

(vii) Are required by RCW 70.24.095 and 70.24.340 to receive HIV counseling and testing.

(c) Inform any individual planning to be tested for HIV of the need to notify sexual and injection equipment-sharing partners if test results are positive;

(d) Advise individuals listed in subsection (3)(b)(i), (ii), and (iii) of this section not to donate or sell blood, blood products, semen, organs, or other body tissues; and

(e) Emphasize or reemphasize the following counseling messages:

(i) The following will eliminate or decrease the risk of HIV infection:

(A) Sexual abstinence;

(B) A mutually monogamous relationship between uninfected people; and

(C) Following safer sex guidelines.

(ii) Do not share intravenous drugs and injection equipment;

(iii) Do not engage in behaviors in which blood, vaginal fluid, or semen is exchanged;

(iv) Condoms, even if used properly, do not supply absolute protection from HIV infection;

(v) Condoms may reduce risk of HIV infection if the condom is:

(A) Latex and used with a water-based lubricant rather than an oil-based lubricant, if a lubricant is used;

(B) Used in conjunction with spermicide during vaginal or anal intercourse; and

(C) Worn from start to finish of vaginal, oral, and anal intercourse.

(vi) Dental dams may reduce risk of HIV infection if the dental dam is:

(A) Latex; and

(B) Used from start to finish of oral intercourse.

(vii) The sexual behaviors having highest risk for HIV infection are those involving the exchange of blood or semen, especially receptive anal and vaginal intercourse;

(viii) Anal intercourse may increase the risk of condom failure and HIV infection;

(ix) Infected women should postpone pregnancy until more is known about how to prevent prenatal and perinatal transmission of HIV infection;

(x) Sexual negotiation skills can be learned to enhance risk reduction; and

(xi) Other sexually transmitted diseases, especially those causing genital ulcers, may increase the risk of acquiring or transmitting HIV infection.

(f) Make those counseled aware HIV retesting at a later date may be necessary or recommended.

(4) Persons providing post-test counseling shall:

(a) Follow requirements in subsection (1) of this section;

(b) Provide at least one individual counseling session at the time HIV test results are disclosed for individuals:

(i) Testing positive for HIV; or

(ii), and (iii) of this section.

(c) If the individual being counseled tested positive for HIV infection:

(i) Provide assistance to persons in notifying partners; and/or

(ii) Offer to refer individuals to the local health officer as necessary for assistance in notifying partners; and/or

(iii) Offer to refer partners for counseling and testing; and

(iv) Develop or adopt a system to avoid documenting the names of referred partners in the permanent record of the individual being counseled; and

(v) Offer referral for alcohol and drug and mental health counseling, including suicide prevention, if appropriate; and

(vi) Refer for tuberculosis screening.

[Statutory Authority: RCW 43.20.050 and 70.24.130. 92-02-019 (Order 225B), § 246-100-209, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-209, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW. 89-02-008 (Order 324), § 248-100-209, filed 12/27/88; 88-17-058 (Order 318), § 248-100-209, filed 8/17/88.]

WAC 246-100-211 Special diseases—Tuberculosis.

(1) Health care providers diagnosing or caring for a person with tuberculosis, whether pulmonary or nonpulmonary, shall:

(a) Report the case to the local health officer or local health department in accordance with the provisions of this chapter, and

(b) Report patient status to the local health officer every three months or as requested.

(2) The local health officer or local health department shall:

(a) Have primary responsibility for control of tuberculosis within the designated jurisdiction;

(b) Maintain a tuberculosis control program including:

(i) Prophylaxis,

(ii) Treatment,

(iii) Surveillance,

(iv) Case finding,

(v) Contact tracing, and

(vi) Other aspects of epidemiologic investigation;

(c) Maintain a tuberculosis register of all persons with tuberculosis, whether new or recurrent, within the local jurisdiction including information about:

(i) Identification of patient,

(ii) Clinical condition,

(iii) Epidemiology of disease,

(iv) Frequency of examinations;

(d) Impose isolation of a person with tuberculosis in an infectious stage if that person does not observe precautions to prevent the spread of the infection;

(e) Designate the place of isolation when imposed;

(f) Release the person from isolation when appropriate;

(g) Maintain and provide outpatient tuberculosis diagnostic and treatment services as necessary, including public health nursing services and physician consultation; and

(h) Submit reports of all cases to the department in accordance with the provisions of this chapter.

(3) When a person with tuberculosis requires hospitalization,

(a) Hospital admission shall occur in accordance with procedures arranged by the local health officer and the medical director or administrator of the hospital, and

(b) The principal health care provider shall:

(i) Maintain responsibility for deciding date of discharge, and

(ii) Notify the local health officer of intended discharge in order to assure appropriate outpatient arrangements.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-211, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-211, filed 5/19/87.]

WAC 246-100-216 Special diseases—Surveillance for influenza. Local health departments shall:

(1) Maintain a surveillance system for influenza during the appropriate season which may include:

(a) Monitoring of excess school absenteeism,

(b) Sample check with health care providers, clinics, and hospitals regarding influenza like illnesses,

(c) Monitoring of work place absenteeism and other mechanisms.

(2) Encourage submission of appropriate clinical specimens from a sample of patients with influenza-like illness to the Washington state public health laboratory or other laboratory approved by the state health officer.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-216, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-216, filed 5/19/87.]

WAC 246-100-217 Special condition—Pesticide poisoning. (1) Definitions. For the purposes of this section, the following words and phrases have the following meanings unless the context clearly indicates otherwise:

(a) "Case of pesticide poisoning" means a person, alive or dead, having been diagnosed as poisoned by any pesticide with the diagnosis based on clinical and/or laboratory evidence.

(b) "Pesticide" means any pesticide defined in RCW 70.104.020, as now stated and as may be amended in the future.

(c) "Pesticide applicator" means any person applying pesticides under the authority of the licensing provisions of chapter 15.58 RCW, as a pesticide applicator and/or operator and any person applying pesticides to more than one acre of land in a calendar year.

(d) "Pesticide poisoning" means the disturbance of function, damage to structure, or illness in humans resulting from the inhalation, absorption, ingestion of, or contact with any pesticide.

(e) "PIRT" means the pesticide incident reporting and tracking review panel established under the provisions of RCW 70.104.080 with responsibilities as described in RCW 70.104.090.

(f) "Suspected case of pesticide poisoning" means a case in which the diagnosis is thought more likely than not to be pesticide poisoning.

(2) Any attending physician or other health care provider recognized as primarily responsible for the diagnosis and treatment of a patient or, in the absence of a primary health care provider, the health care provider initiating diagnostic testing or therapy for a patient shall:

(a) Notify the department of any case or suspected case of pesticide poisoning, using the toll-free pesticide reporting telephone number (1-800-356-2323), within the following time limits:

(i) Immediately, when:

(A) A hospital admission is due to pesticide poisoning or suspected pesticide poisoning;

(B) A death is due to pesticide poisoning or suspected pesticide poisoning; or

(C) A threat to public health, such as multiple cases, is perceived;

(ii) Within four days for all other cases or suspected cases;

(b) Within seven days, submit to the department on a department-approved form, an individual case report for each case or suspected case of pesticide poisoning (unless the department of health waives the requirement to submit an individual case report because pertinent information was provided by phone);

(c) Comply with the same confidentiality requirements established for other reportable diseases or conditions in WAC 246-100-016; and

(d) Respond to department inquiries regarding reported cases.

(3) Health care providers notifying the department shall provide:

(a) Name of patient;

(b) Patient's home and/or mailing address;

(c) Patient's home and/or work telephone number;

(d) Age;

(e) Sex;

(f) Race/ethnicity;

(g) Diagnosis or suspected diagnosis, including:

(i) Name of pesticide, if known;

(ii) Date of exposure; and

(iii) Date of onset;

(h) Name, address, and telephone number of the principal health care provider;

(i) Name, address, and telephone number of the person reporting; and

(j) Occupation and employer's name and address, if occupational exposure.

(4) The department shall:

(a) Initiate an investigation of each report of a case or suspected case of pesticide poisoning and such cases of suspected pesticide poisoning of animals that may relate to human illness to document the incident within the following time limits:

(i) Immediately after notification is received from the health care provider of:

(A) A hospital admission due to pesticide poisoning or suspected pesticide poisoning;

(B) A death due to pesticide poisoning or suspected pesticide poisoning; or

(C) A threat to public health, such as multiple cases;

(i) Within forty-eight hours after notification is received for all other cases;

(b) Supply case report forms to health care providers for purposes of reporting cases or suspected cases of pesticide poisoning;

(c) Document the known environmental, human, and/or other variables associated with the case or suspected case of pesticide poisoning;

(d) Report the results of the pesticide investigation to the principal health care provider named in the case report form and to the local health officer in whose jurisdiction the exposure has occurred;

(e) Provide a monthly report of cases or suspected cases of pesticide poisoning to the PIRT panel, as required under RCW 70.104.055; and

(f) Complete case investigations within ninety days unless extenuating circumstances or surveillance needs require a longer investigation time.

[Statutory Authority: RCW 43.20.050 and 70.104.055. 92-02-019 (Order 225B), § 246-100-217, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-217, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.104 RCW. 90-10-036 (Order 049), § 248-100-217, filed 4/26/90, effective 5/27/90.]

WAC 246-100-221 Duties of laboratories—Annual registration of laboratories. Every person, firm, or corporation operating or maintaining a medical laboratory shall register annually with the department by completing a form provided by the department and including:

(1) Name and address of the laboratory,

(2) Name of the person or persons owning or operating the laboratory, and

(3) Other information as indicated on the form provided by the department.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-100-221, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-221, filed 5/19/87.]

WAC 246-100-226 Duties of laboratories—Approval of laboratories to perform prenatal serologic tests for syphilis. (1) Laboratories performing prenatal serologic tests for syphilis shall request approval by the department in accordance with the following:

(a) Apply by registering intent with the department,

(b) Provide personnel specifically trained in the serological procedures in use,

(c) Establish test methods approved by the department based on current recommendations of the United States public health service (USPHS) and consistent with the United States health care financing administration (HCFA) 42 CFR 82.27,

(d) Perform tests consistent with the manufacturer's recommendations,

(e) Establish quality control procedures consistent with the manufacturer's recommendations, and

(f) Maintain records of quality control results and patient's test results for at least two years.

(2) Approved laboratories shall:

(a) Subscribe to a proficiency testing program approved by the department based on recommendations by USPHS and acceptable to United States HCFA,

(b) Request the testing service to send a report of results to the department,

(c) Demonstrate satisfactory performance by maintaining a score of seventy percent on each shipment of test samples.

(3) Written department certification of approval depends upon:

(a) Satisfactory performance in a proficiency testing program for syphilis serology demonstrated for two consecutive sets of samples, and

(b) Continuous satisfactory performance in a proficiency testing program for syphilis serology.

(4) The department may:

(a) Perform on-site reviews of laboratories to determine compliance with WAC 246-100-226, and

(b) Decertify laboratories when conditions described in WAC 246-100-226 are not met.

(5) The department shall:

(a) Provide a list of department-approved laboratories to certified laboratories, local health departments, and others upon request, and

(b) Decertify any laboratory failing to perform satisfactorily on proficiency testing as described in subsection (2)(c) of this section.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-100-226, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-226, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-226, filed 5/19/87.]

WAC 246-100-231 Duties of laboratories—Submission of specimens by laboratories. (1) The director of every medical laboratory shall:

(a) Submit microbiologic cultures, subcultures, or appropriate clinical material as specified in subsection (2) of this section to the Washington state public health laboratory or other laboratory designated by the state health officer for diagnosis, confirmation, or further testing;

(b) Identify each specimen on a form provided or approved by the department including:

(i) The patient's name, and, if available,

(ii) Age, sex, date of onset of illness, first and last name of principal health care provider.

(2) When test results indicate possible infection with any of the following, laboratory action shall include:

(a) Brucellosis (*Brucella* species): Submit suspicious subcultures for confirmation and final identification;

(b) Cholera (*Vibrio cholerae*): Submit subcultures for confirmation and final identification;

(c) Diphtheria (*Corynebacterium diphtheriae*): Submit subcultures for identification and for toxin study when indicated;

(d) Malaria (*Plasmodium* species): Laboratories are encouraged to submit thick and thin stained smears for conformation, final identification, and forwarding for international epidemiologic surveillance;

(e) Meningococcal infection of blood or spinal fluid (*Neisseria meningitidis*): Submit subcultures for confirmation and final identification;

(f) Plague (*Yersinia pestis*): Submit subcultures or appropriate clinical material for confirmation;

(g) Salmonellosis, including typhoid fever (*Salmonella* species): Submit subcultures for confirmation and serotyping;

(h) Shigellosis (*Shigella* species): Submit subcultures for confirmation and serotyping;

(i) Syphilis (*Treponema pallidum*): Submit reactive or weakly reactive serologic specimens for confirmation and further definitive testing;

(j) Mycobacteriosis, including tuberculosis (*Mycobacterium* species): Submit subcultures of initial isolates for:

(i) *Mycobacterium tuberculosis*,

(ii) *Mycobacterium bovis*, and

(iii) Other mycobacterial species when isolate is suspected of causing disease.

(k) Tularemia (*Francisella tularensis*): Submit subcultures or appropriate clinical material for confirmation.

(3) When clinical impression and epidemiologic circumstances indicate a possible case of botulism, laboratory action shall include the following:

(a) Infant botulism: Submit stool for clostridium botulinum identification and toxin typing,

(b) Food borne botulism:

(i) Submit serum and stool for *C. botulinum* identification and toxin typing, and

(ii) If available, submit suspect foods (ideally in original containers).

(c) Wound botulism: Submit subculture or serum, debrided tissue, or swab sample from wound for *C. botulinum* identification.

(4) The state health officer may require submission of specimens for other infections of public health concern as described in WAC 246-100-041.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-231, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-231, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-231, filed 3/16/88; 87-11-047 (Order 302), § 248-100-231, filed 5/19/87.]

WAC 246-100-236 Duties of laboratories—Reporting of laboratory results indicative of certain reportable diseases. (1) By December 31, 1987, medical laboratories shall:

(a) Report each positive culture or other suggestive test results to the local health officer by phone, written report, or submission of specimen within two working days, unless specified otherwise, for:

(i) Anthrax (*Bacillus anthracis*),

(ii) Botulism (*Clostridium botulinum*),

(iii) Cholera (*Vibrio cholerae*),

(iv) Diphtheria (*Corynebacterium diphtheriae*) - toxigenic strains,

(v) Gonorrhea (*Neisseria gonorrhoeae*) (report within seven days),

(vi) Measles (rubeola) (measles virus),

(vii) Plague (*Yersinia pestis*),

(viii) Rabies (rabies virus),

(ix) Brucellosis (*Brucella* species),

(x) Leptospirosis (*Leptospira interrogans*),

(xi) Listeria infection of blood or spinal fluid (*Listeria monocytogenes*),

(xii) Meningococcal infection of blood or spinal fluid (*N. meningitidis*),

(xiii) Pertussis (*Bordetella pertussis*),

(xiv) Salmonellosis (*Salmonella* species),

(xv) Shigellosis (*Shigella* species), and

(xvi) Hepatitis A (positive anti-HAV IgM).

(b) Send a copy of the state form accompanying specimen submitted as required in WAC 246-100-231 or identifying information including:

(i) Type of specimen tested (e.g., serum or sputum),

(ii) Test result,

(iii) Name of reporting laboratory,

(iv) Date of report,

(v) Name of requesting health care provider or health care facility, and

(vi) Name of patient.

(2) By December 31, 1987, medical laboratories shall report positive cultures or other suggestive test results for chlamydial infection (*Chlamydia trachomatis*) to local health departments monthly including either:

(a) Identifying information specified in subsection (1)(b)(i-vi) of this section, or

(b) Aggregate numbers of positive tests including age, sex, and site of infection when known.

(3) Medical laboratories shall label or stamp reports appropriately with information indicating "reportable disease" and the telephone number of the local health department, if such labels or stamps are provided by the local health department.

(4) State and local health officers and health departments receiving reports from medical laboratories shall:

(a) Allow time for the laboratory to notify the principal health care provider prior to contact if:

(i) Delay is unlikely to jeopardize public health, and

(ii) The laboratory requests a delay.

(b) Try to contact the principal health care provider and discuss circumstances prior to contact of a patient when possible.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-100-236, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-100-236, filed 12/27/90, effective 1/31/91; 88-07-063 (Order 308), § 248-100-236, filed 3/16/88; 87-11-047 (Order 302), § 248-100-236, filed 5/19/87.]

WAC 246-100-241 Duties of laboratories—Duty to cooperate with local health departments and the department. (1) Medical laboratories shall:

(a) Cooperate with local health departments and the department in the investigation of an outbreak, suspected outbreak, case, suspected case, carrier, or contact of a communicable disease or reportable disease or condition, and

(b) Provide, in a timely manner, any information related to the laboratory features of the investigation when requested by the local or state health officer.

(2) A laboratory director may designate responsibility for working and cooperating with public health personnel to certain laboratory employees as long as designated employees are:

(a) Readily available, and

(b) Able to provide requested information in a timely manner.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-100-241, filed 12/27/90, effective 1/31/91; 87-11-047 (Order 302), § 248-100-241, filed 5/19/87.]

Chapter 246-110 WAC

CONTAGIOUS DISEASE—SCHOOL DISTRICTS AND DAY CARE CENTERS

WAC

246-110-001	Purpose.
246-110-010	Definition.
246-110-020	Control of communicable (contagious) disease.

WAC 246-110-001 Purpose. The following regulations are adopted by the board of health for the purpose of governing the presence on or about any school or day care center premises of susceptible persons who have, or have been exposed to, a communicable disease. These regulations are in addition to other requirements imposed by chapter 246-100 WAC.

In furtherance of the purpose and intent of the law and these regulations, it is recommended that parents of students whose medical supervision seems inadequate should be encouraged to obtain the services of a physician for the child. When the economic situation warrants, the parents should be guided to the appropriate source of community-sponsored medical care. These regulations are not intended to imply that any diagnosis or treatment will be performed by school or day care center personnel.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-110-001, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-110-001, filed 12/27/90, effective 1/31/91; 90-21-056 (Order 095), § 248-101-011, filed 10/15/90, effective 10/15/90.]

WAC 246-110-010 Definition. As used in this portion of these regulations, these terms shall mean:

(1) "Contact" means a person exposed to an infected person, animal, or contaminated environment which might provide an opportunity to acquire the infection.

(2) "Exposure" means such association with a person or animal in the infectious stage of a disease, or with a contaminated environment, as to provide the opportunity to acquire the infection.

(3) "Susceptible" means a person who does not possess sufficient resistance, whether natural or induced, to a pathogenic agent or disease to prevent contracting that disease when exposed thereto.

(4) "Communicable disease (contagious disease)" means an illness caused by an infectious agent which can be transmitted from one person, animal, or object to another person by direct or indirect means including transmission via an intermediate host or vector, food, water, or air. Communicable (contagious) diseases include, but are not limited to:

- (a) Chickenpox
- (b) Conjunctivitis (bacterial)
- (c) Diphtheria
- (d) Giardiasis
- (e) Hepatitis A

(f) Invasive Haemophilus influenza disease (excluding otitis media)

(g) Measles

(h) Meningitis (bacterial)

(i) Mumps

(j) Pediculosis

(k) Pertussis

(l) Rubella

(m) Salmonellosis

(n) Shigellosis

(o) Tuberculosis

(5) "School" means each building, facility, and location at or within which any or all portions of a preschool, kindergarten and grades one through twelve program of education and related activities are conducted for two or more children by or in behalf of any public school district and by or in behalf of any private school or private institution subject to approval by the state board of education.

(6) "Day care center" means an agency which regularly provides care for a group of children for periods of less than twenty-four hours and is licensed pursuant to chapter 74.15 RCW.

(7) "Outbreak" means the occurrence of cases of a disease or condition in any area over a given period of time in excess of the expected number of cases.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-110-010, filed 12/27/90, effective 1/31/91; 90-21-056 (Order 095), § 248-101-021, filed 10/15/90, effective 10/15/90.]

WAC 246-110-020 Control of communicable (contagious) disease. (1) When there is an outbreak of a contagious disease, as defined in WAC 246-110-010, such that there is the potential for a case or cases within a school or day care center, the local health officer, if appropriate, after consultation with the secretary of health or designee shall take all medically appropriate actions deemed to be necessary to control or eliminate the spread of the disease, including, but not limited to:

(a) Closing the affected school(s) or day care center(s), or part(s) thereof;

(b) Closing other schools or day care centers in the local health officer's jurisdiction;

(c) Causing the cessation of selected school or day care center activities or functions;

(d) Excluding from schools or day care centers in the local health officer's jurisdiction any students, staff, and volunteers who are infected with, or deemed to be susceptible to, the disease.

(2) Prior to taking action the health officer shall:

(a) Consult with and discuss the ramifications of action with the superintendent of the school district, or the chief administrator of the day care center or their designees on the proposed action; and

(b) Provide the board of directors and the superintendent of the school district or the chief administrator of the day care center a written decision in the form and substance of an order directing them to take action;

(3) Where these actions have been taken, the local health officer shall, in addition:

(a) Set the terms and conditions permitting schools or day care centers to reopen; activities and functions to

resume; and excluded students, staff and volunteers to be readmitted; and

(b) Pursue, in consultation with the secretary of health or designee and school and/or day care officials, the investigation of the source of disease, or order those actions necessary to the ultimate control of the disease.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-110-020, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-110-020, filed 12/27/90, effective 1/31/91; 90-21-056 (Order 095), § 248-101-221, filed 10/15/90, effective 10/15/90.]

Chapter 246-130 WAC

HUMAN IMMUNODEFICIENCY VIRUS (HIV) INFECTION TREATMENT

WAC

246-130-001	Purpose.
246-130-010	Definitions.
246-130-020	Services.
246-130-030	Reimbursements.
246-130-040	Financial eligibility.
246-130-050	Transfer of resources without adequate consideration.
246-130-060	Fiscal information.
246-130-070	Patient participation.

WAC 246-130-001 Purpose. The department shall administer federal and state funds appropriated to assist a person in need of Zidovudine, or other drugs and treatments available in the future. These drugs are used for the treatment of various stages of infection with HIV.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-087 (Order 071), § 248-168-010, filed 8/17/90, effective 9/17/90. Statutory Authority: RCW 43.20A.550. 87-22-012 (Order 2549), § 248-168-010, filed 10/26/87.]

WAC 246-130-010 Definitions. The following words and phrases have the following meaning in chapter 246-130 WAC unless the context clearly indicates otherwise:

- (1) "AIDS" means acquired immunodeficiency syndrome.
- (2) "APDP" means AIDS prescription drug program.
- (3) "Department" or "DOH" means the Washington state department of health.
- (4) "HIV" means human immunodeficiency virus.
- (5) "NPIG" means National Poverty Income Guidelines as under sections 652 and 673 (2) of the Omnibus Budget Reconciliation Act of 1981 (Public Law 9735) and as updated annually in the Federal Register on February 16.
- (6) "Patient share" means the amount of cost borne by the patient.

[Statutory Authority: RCW 43.70.120. 92-02-018 (Order 224), § 246-130-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-087 (Order 071), § 248-168-015, filed 8/17/90, effective 9/17/90.]

WAC 246-130-020 Services. To the extent federal or state funds are appropriated for the purpose of APDP approved drugs and treatments, the department shall reimburse a participating pharmacy, or health care provider, and clinic for costs of dispensing APDP approved drugs and

treatments to an eligible individual suffering from infection with HIV.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-087 (Order 071), § 248-168-020, filed 8/17/90, effective 9/17/90. Statutory Authority: RCW 43.20A.550. 87-22-012 (Order 2549), § 248-168-020, filed 10/26/87.]

WAC 246-130-030 Reimbursements. Individuals desiring reimbursement for APDP approved drugs and treatments must provide evidence of financial eligibility as established by WAC 246-130-040. The department will make reimbursement, reduced by the patient share computed in accordance with WAC 246-130-070, to eligible participants who, in the department's judgment, demonstrate the greatest need or the most likely benefit from the treatments.

[Statutory Authority: RCW 43.70.120. 92-02-018 (Order 224), § 246-130-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-087 (Order 071), § 248-168-030, filed 8/17/90, effective 9/17/90. Statutory Authority: RCW 43.20A.550. 87-22-012 (Order 2549), § 248-168-030, filed 10/26/87.]

WAC 246-130-040 Financial eligibility. (1) The department will consider a patient eligible if he or she:

- (a) Has resources at or below the exemptions listed under subsection (3) of this section; and
- (b) Is not eligible for any other resources providing similar benefits to meet the costs of the treatment; and
- (c) Has gross monthly income at or below three hundred seventy percent of the NPIG; and
- (d) The total cost of program covered medications is in excess of the patient's share as computed in accordance with WAC 246-130-070.

(2) The department shall consider the following in determining resources:

- (a) Savings, property, and other assets;
 - (b) Government and private medical insurance programs, including Medicaid, providing partial or full coverage for drug and treatments needed in the treatment of infection with HIV; and
 - (c) Local funds raised for the purpose of providing financial support for a specified patient.
- (3) The following exemptions shall not be considered in determining a patient's resources to pay for treatments covered by these regulations:

- (a) A home, defined as real property owned by a patient as a principal place of residence, together with the property surrounding and contiguous thereto not to exceed five acres; and
- (b) Commercial property, or property used for the purpose of producing income, except to the extent that its value exceeds the sum of ten thousand dollars;
- (c) Household furnishings;
- (d) An automobile; and
- (e) Savings, property, or other liquid assets, to the extent the value thereof does not exceed the sum of ten thousand dollars.

[Statutory Authority: RCW 43.70.120. 92-02-018 (Order 224), § 246-130-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-

087 (Order 071), § 248-168-040, filed 8/17/90, effective 9/17/90. Statutory Authority: RCW 43.20A.550. 87-22-012 (Order 2549), § 248-168-040, filed 10/26/87.]

WAC 246-130-050 Transfer of resources without adequate consideration. The department shall:

- (1) Consider an individual ineligible for the program if the person knowingly and willfully assigns or transfers nonexempt resources at less than fair market value for the purpose of qualifying or continuing to qualify for the program within two years preceding the date of application.
- (2) Require expiration of two years before the individual will be considered eligible between the date of transfer and reapplication.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-087 (Order 071), § 248-168-050, filed 8/17/90, effective 9/17/90. Statutory Authority: RCW 43.20A.550. 87-22-012 (Order 2549), § 248-168-050, filed 10/26/87.]

WAC 246-130-060 Fiscal information. An individual seeking coverage shall provide fiscal information upon request of the department including:

- (1) Sources and amounts of resources to verify financial eligibility,
- (2) Evidence all other available resources were used before requests for reimbursement from the state program are submitted to the department, and
- (3) Other information when required by the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-087 (Order 071), § 248-168-060, filed 8/17/90, effective 9/17/90. Statutory Authority: RCW 43.20A.550. 87-22-012 (Order 2549), § 248-168-060, filed 10/26/87.]

WAC 246-130-070 Patient participation. The patient shall be responsible for paying part of the cost of the treatment received in any month in which his or her income exceeds two hundred percent of the NPIG. The amount of the patient's share shall be one-sixth of the amount by which his or her income for the month exceeds two hundred percent of the NPIG.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-130-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.70.120. 90-17-087 (Order 071), § 248-168-070, filed 8/17/90, effective 9/17/90.]

**Chapter 246-132 WAC
CLASS IV HIV HEALTH INSURANCE
ELIGIBILITY**

WAC

- 246-132-020 Class IV human immunodeficiency virus (HIV) insurance program.
- 246-132-030 Eligibility.

WAC 246-132-020 Class IV human immunodeficiency virus (HIV) insurance program. Definitions of program covered by the department of health.

(1) "Class IV HIV insurance program" means the program authorized by chapter 70.24 RCW and financed by state funds to assure health insurance coverage for an

individual with Class IV HIV infection as defined by the state board of health meeting eligibility requirements established by the department.

(2) "Class IV HIV infection" means an illness characterized by the diseases and conditions defined and described by the state board of health in WAC 246-100-011(1) and 246-100-076.

[Statutory Authority: RCW 70.24.130 and 70.24.440. 92-02-018 (Order 224), § 246-132-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-132-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW and 1989 c 260 § 3. 90-03-052 (Order 020), § 248-180-010, filed 1/16/90, effective 2/16/90.]

WAC 246-132-030 Eligibility. (1) The department shall pay, to the extent a person is liable for group health insurance premiums, such premiums for a person who has a diagnosis of Class IV human immunodeficiency virus (HIV) infection and:

- (a) Is terminated from employment for reasons other than gross misconduct;
- (b) Has experienced a reduction in employment hours to the extent the applicant is liable for part or all of the health insurance premium;
- (c) Is entitled to benefits under Title XVIII of the Social Security Act;
- (d) Ceases to be a dependent child under the requirements of the health insurance plan; or
- (e) Is divorced or legally separated from the covered employee and has continuation coverage rights.

(2) An applicant's eligibility under the program shall cease when the individual:

- (a) Dies;
- (b) Loses insurance eligibility for a reason other than the reasons noted under subsection (1) of this section; or
- (c) Moves out of state.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-132-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.24 RCW and 1989 c 260 § 3. 90-03-052 (Order 020), § 248-180-020, filed 1/16/90, effective 2/16/90.]

**Chapter 246-170 WAC
TUBERCULOSIS—CONTROL, PREVENTION, AND
TREATMENT**

WAC

- 246-170-001 Purpose.
- 246-170-010 Definitions.
- 246-170-020 Responsibility of local health officers.
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- 246-170-050 Infection control.
- 246-170-060 Clinical services.
- 246-170-070 Home treatment.
- 246-170-080 Case monitoring.
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WAC 246-170-001 Purpose. (1) These regulations are adopted for the purpose of establishing standards necessary to assure the effective and adequate care and treatment of persons suffering from tuberculosis in hospitals, nursing homes, and other organized living groups, or outpatient settings, including patient homes.

(2) Outpatient treatment should be given the highest priority in personnel and services. A high degree of success must be achieved, requiring the dedicated service of physicians and nurses who can identify with every type of patient and a provision of a full range of type of service, including office, clinic, home visit and special clinics.

(3) These regulations are adopted pursuant to section 2, chapter 213, Laws of 1973 1st ex. sess., and RCW 70.33-020, and the requirements of these regulations shall be in addition to the requirements of WAC 246-170-080, now or as hereafter amended.

[Statutory Authority: RCW 70.33.020. 92-02-018 (Order 224), § 246-170-001, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-001, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-010, filed 8/23/73.]

WAC 246-170-010 Definitions. (1) "Primary physician" shall mean the physician who assumes the day-to-day medical care of a tuberculosis patient.

(2) "Chest clinic" shall mean an outpatient medical activity provided for persons suffering from or suspected to be suffering from disease primarily affecting the lungs.

(3) "Inpatient" shall mean medical care furnished in a hospital, nursing home or other organized living group in which the patient is a resident.

(4) "Outpatient" shall mean medical care furnished to patients who are residents in their homes or other places of residence.

(5) "Surveillance" shall mean an organized system of medical observation of persons at risk of developing active disease.

(6) "Suspect" shall mean a person who may possibly have a disease condition.

(7) "Epidemiological investigation" shall mean those specific actions taken by physicians or nurses which are taken to determine the extent of spread of infection from an active case of tuberculosis.

(8) "Register" shall mean the listing of all tuberculosis patients as required by WAC 246-170-080, now or as hereafter amended.

(9) "UV generator" shall mean a properly mounted fluorescent tube which electrically produces ultraviolet radiation with bacteriocidal properties.

(10) "Slide microscopy" shall mean the diagnostic test in which body fluids such as sputum are examined for the presence of pathogenic bacteria.

(11) "Prophylaxis" shall mean either primary treatment to prevent infection in an uninfected person or secondary treatment to treat disease in an infected person.

(12) "Infectious" shall mean the state of being the possible transmitter of tuberculosis infection to other persons.

[Statutory Authority: RCW 70.33.020. 92-02-018 (Order 224), § 246-170-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-010, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-020, filed 8/23/73.]

WAC 246-170-020 Responsibility of local health officers. County, city-county and district health officers are responsible for the control of tuberculosis within their jurisdictions. Each health officer will act as or will designate another physician to act as a tuberculosis control

officer. This individual will coordinate all aspects of the control and treatment program.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-020, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-030, filed 8/23/73.]

WAC 246-170-030 Local health department responsibilities. (1) Each health department shall staff and provide a chest clinic under the supervision of a physician specializing in pulmonary diseases. Sufficient nursing and clerical personnel shall be provided to furnish supervision of post-inpatient treatment, post-treatment surveillance, suspect evaluation, epidemiological investigation, contact workup and prophylaxis. A health department unable to provide these services shall contract for such services.

(2) A register must be kept of all known cases of tuberculosis within the jurisdiction in accordance with WAC 246-170-080, now or as hereafter amended. Reports of all newly discovered cases of tuberculosis must be made promptly to the department of social and health services.

(3) One or more physicians qualified to treat tuberculosis as determined by the local health officer with the advice of the state tuberculosis advisory committee shall be secured to assume the primary inpatient and/or outpatient care of patients. A tuberculosis clinical consultant, similarly endorsed, shall be available to provide review in case conferences of diagnoses, plans of management and dates of discharge.

(4) The health department shall also provide by contract appropriate inpatient care. Public health nursing services sufficient to meet the needs of outpatients including home care programs shall be available. Social service is necessary, and if not available within the department, shall be arranged.

[Statutory Authority: RCW 70.33.020. 92-02-018 (Order 224), § 246-170-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-030, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-040, filed 8/23/73.]

WAC 246-170-040 Inpatient services. (1) Hospitals which treat infectious tuberculosis patients shall provide the following: Private or semiprivate rooms suitably arranged for respiratory isolation with a properly installed UV generator, nursing service, complete x-ray service, respiratory therapy service, clinical laboratory services including slide microscopy, occupational therapy when reasonably available to the hospital, patient education, and social services.

(2) Nursing homes caring for infectious tuberculosis patients shall provide the following: A private or semiprivate room arranged for respiratory isolation, and nursing service.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-040, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-050, filed 8/23/73.]

WAC 246-170-050 Infection control. (1) A hospital which contracts to treat tuberculosis patients shall have an infection control committee, published infection control policies for nursing and laboratory services, a staff health surveillance program including skin testing and periodic x-ray examination, and continuing staff education. Mycobacteriological culture, identification and sensitivity

testing are procedures not recommended for hospital laboratories; these services are available in the state public health laboratory.

(2) Nursing homes caring for tuberculosis patients shall continue staff education, published infection control policies, and a staff health surveillance program.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-050, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-060, filed 8/23/73.]

WAC 246-170-060 Clinical services. (1) The following physician services shall be available for the treatment of tuberculosis patients in all hospitals treating tuberculosis patients and as appropriate in nursing homes: Internal medicine and pediatrics (primary physician), pulmonary disease (consultant), available consultation in other appropriate medical and surgical specialties, chest surgery, pathology, mycobacteriology (state laboratory).

(2) Case conferences shall be held regularly involving the primary physician, consultant and health officer to ensure accurate diagnosis, effective treatment regimen and discharge at the earliest date consistent with good management and safety from transmission. Discharge conferences must include a representative of the facility which will be supervising treatment after discharge.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-060, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-070, filed 8/23/73.]

WAC 246-170-070 Home treatment. When the home situation and clinical state are favorable, cooperative patients may be treated on an outpatient basis. Case conference between primary physician, health officer and consultant is required as in hospital practice.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-070, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-080, filed 8/23/73.]

WAC 246-170-080 Case monitoring. From the time of diagnosis every patient shall be monitored by the local health department for the purpose of assuring that treatment is continuous, appropriately reviewed and completed. The case register shall be kept in sufficient detail to allow recording of accomplishment of periodic diagnostic studies, clinical progress and changes in state of disease. Quarterly status reports on each diseased patient will be furnished to the department of health tuberculosis control program. Business and financial records including contracts and accounts shall be maintained by an administrative clerk.

[Statutory Authority: RCW 70.33.020. 92-02-018 (Order 224), § 246-170-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-080, filed 12/27/90, effective 1/31/91; Order 138, § 248-99-090, filed 2/7/77; Order 848, § 248-99-090, filed 8/23/73.]

WAC 246-170-090 Program review. To ensure effective, economical control programs health departments shall maintain adequate operational records and carry out a comprehensive program review annually. Important program criteria are: Proportion of patients brought to completion of treatment, proportion of newly discovered cases which are reactivations, proportion of completed epidemiological

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investigation of newly discovered cases, prompt evaluation of close contacts of new cases, evaluation of other significant contacts within a prescribed period, and proportion of close contacts placed on prophylaxis. Recommended values for these criteria will be published annually by the department of social and health services.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-170-090, filed 12/27/90, effective 1/31/91; Order 848, § 248-99-100, filed 8/23/73.]

Chapter 246-171 WAC

TUBERCULOSIS—FINANCIAL RESPONSIBILITY

WAC

246-171-010	Definitions.
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246-171-040	Statement of financial resources—Emergencies.
246-171-050	Financial ability—Determination.
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246-171-080	Financial ability—Standards generally.
246-171-090	Financial ability—Inability to pay.
246-171-100	Financial ability—Specific minimum standards.
246-171-110	Payment by patient.
246-171-120	Liability of estate.
246-171-130	Statement of costs.
246-171-140	Payment by county.

WAC 246-171-010 Definitions. (1) "Tuberculosis facility" shall mean any hospital, sanatorium or other facility maintained by a county for the in-patient care of persons suffering from infection or suspected infection with *Mycobacterium tuberculosis*.

(2) "Local health department" shall mean the health department which provides public health services for tuberculosis control to persons within the jurisdictional area.

(3) "Local health officer" shall mean the legally qualified physician who has been appointed as the health officer for the city, town, county or district health department or his appointed tuberculosis control officer.

(4) "Department" shall mean the Washington state department of health.

(5) "Medical director" shall mean the director of the tuberculosis facility.

(6) "Responsible person" shall mean those responsible for the support of a patient in the following order:

(a) The spouse of the patient.

(b) The parents of a minor patient.

(c) The children of the patient where they have assumed the responsibility for the support of the patient.

(d) The guardian or legal representative of the patient.

(7) "Cost of care" of a hospitalized tuberculosis patient is all reasonable cost of services as computed by procedures and methods for determining reasonable cost necessary under provisions of the Health Insurance for the Aged Act of 1965 as amended.

(8) "Current income" shall be that monthly cash which the patient or his family earns during the time of hospitalization through wages, profits from business, dividends, interest, sick pay and benefits derived from health and accident insurance collectible as a result of illness and confinement in

the tuberculosis facility. Funds derived from the liquidation of capital assets or withdrawal from savings may be used to supplement current income to the extent that such assets and savings exceed the exempt amount as specified in these regulations.

(9) "Admission" shall mean the entry of a patient into a tuberculosis facility and the completion of all necessary admission records to include financial data.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-010, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-010, filed 8/18/69.]

WAC 246-171-020 Statement of financial resources.

Prior to admission as a patient to a tuberculosis facility, every patient, or the person responsible under the laws of the state of Washington for his support, shall provide the local health officer of the county of his residence a statement of his financial resources, holdings and obligations upon forms provided by the department. Said forms shall be in duplicate, one copy to be furnished to the tuberculosis facility, and one copy to be furnished to the local health officer: *Provided*, That no individual need provide any health official or tuberculosis facility a statement of his financial resources, holdings or obligations if he agrees to pay, and subsequently does pay that portion of the cost of hospitalization remaining after deducting all costs legitimately due from medical or hospital or health insurance, medicare, or other similar legitimate applicable prepaid health care or insurance type resources: *Provided further*, That such individual is free to leave said tuberculosis facility at any time at his own discretion, with or without a medical discharge, but in no such instance will the hospital or sanatorium, nor physician nor nurse, be liable for any damages accruing from his ill health due to tuberculosis or complications thereof: *Provided further*, That an individual whose sputum, gastric contents or other bodily discharges are demonstrated to contain pathogenic *Mycobacterium* organisms, and who because of this is quarantined to protect others from the disease, shall not be liable for the cost of such hospitalization beyond that received from medical or health or hospital insurance, medicare or similar legitimate, applicable prepaid health care or insurance resources.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-020, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-020, filed 8/18/69.]

WAC 246-171-030 Statement of financial resources—Cooperation in obtaining information. Local health officers may have the assistance of the director of the tuberculosis facility, when necessary, in obtaining a statement of the patient's financial resources, holdings and obligations.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-030, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-021, filed 8/18/69.]

WAC 246-171-040 Statement of financial resources—Emergencies. If a patient must be admitted to the tuberculosis facility at night or on a holiday or weekend or as an emergency the statement shall be obtained as soon as practicable following admission.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-040, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-022, filed 8/18/69.]

WAC 246-171-050 Financial ability—Determination. Upon the filing of a financial statement as provided for under WAC 246-171-020 through 246-171-040, it shall be the duty of the local health officer to determine the financial ability of such patient, or the person responsible therefor, to contribute in whole or in part to the cost of care in such facility.

[Statutory Authority: RCW 70.33.020 and 70.30.072, 92-02-018 (Order 224), § 246-171-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-050, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-030, filed 8/18/69.]

WAC 246-171-060 Financial ability—Forms. In determining the financial responsibility of a patient, or the responsible person, it shall be the duty of the local health officer to complete the forms provided by the department. Said forms shall be made in triplicate, one copy to be furnished to the tuberculosis facility, one copy to be furnished to the department, and one to be retained by the local health officer.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-060, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-040, filed 8/18/69.]

WAC 246-171-070 Financial ability—Review of financial ability. The determination of financial ability to pay shall be reviewed at the patient's request or in the event that information of a substantial change in the patient's or responsible person's ability to pay should come to the attention of the health officer.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-070, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-050, filed 8/18/69.]

WAC 246-171-080 Financial ability—Standards generally. The patient or responsible person shall be charged that portion of the cost of care which he can pay from any and all sources of current income and capital available to him which is deemed to be in excess of his requirements to maintain the family standard of living at a level equal to that which existed prior to the patient's entry into the tuberculosis facility. In all cases, health insurance benefits accruing to the patient as a result of his hospitalization for tuberculosis shall be considered to be income in excess of that needed to maintain the family standard of living.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-080, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-060, filed 8/18/69.]

WAC 246-171-090 Financial ability—Inability to pay. If a patient or the responsible person is, in whole or in part, provided support by the Washington state department of public assistance, he shall be considered unable to pay any part of the cost of care.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-171-090, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-061, filed 8/18/69.]

WAC 246-171-100 Financial ability—Specific minimum standards. A patient, or the person responsible therefor, shall not be required to contribute to the cost of his hospital care to the extent that such contribution would require any of the following steps:

(1) Lowering of normal living expenditures from their level prior to hospitalization.

(2) Endangering the title to a home, furnishings, or automobile.

(3) Employment of any dependent not employed prior to the beginning of the patient's hospitalization.

(4) Depletion of hospitalization insurance benefits available to dependents.

(5) Depletion of real property holdings; or depletion of cash savings or securities below the value at which such assets would yield, at five percent per annum, a prescribed percentage of the current total annual living expense. The total annual living expense shall be figured at twelve times the monthly total family needs as determined on the forms provided by the department. The percentage shall be prescribed as follows: One hundred percent if either the patient or the responsible person is sixty years of age or older; sixty percent if the patient or responsible person is at least fifty but not more than fifty-nine years; thirty percent if he is at least forty but not more than forty-nine years; and ten percent if he is less than forty years of age.

(6) Reducing the patient's assets below the amount that would be allowed as an award in lieu of homestead pursuant to RCW 11.52.010.

(7) Shortening of hospital stay to less than that necessary for adequate treatment.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-171-100, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-070, filed 8/18/69.]

WAC 246-171-110 Payment by patient. The patient, or the responsible person shall, upon a determination by the local health officer that he is capable of contributing to the cost of his hospitalization, pay to the sanatorium the amount determined by the local health officer who shall be informed of the payment on a monthly basis.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-171-110, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-080, filed 8/18/69.]

WAC 246-171-120 Liability of estate. The unpaid portion of any patient's share of charges for hospitalization shall be a liability of the estate which, while there is a surviving spouse, shall be considered as capital assets of the responsible person and subject to depletion according to WAC 246-171-100(5).

[Statutory Authority: RCW 70.33.020 and 70.30.072. 92-02-018 (Order 224), § 246-171-120, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-171-120, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-090, filed 8/18/69.]

WAC 246-171-130 Statement of costs. A statement of the cost of care shall be prepared by the director of the tuberculosis facility monthly and at the time of discharge. Each statement shall show the amount charged to the patient, or responsible person, to a responsible insurance carrier or

fiscal intermediary and to the county in which the patient resided prior to his hospitalization.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-171-130, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-100, filed 8/18/69.]

WAC 246-171-140 Payment by county. The local health officer shall be responsible for payment of tuberculosis hospital expenses from county funds monthly in amounts sufficient to pay that portion of the cost of care which has not been paid by the patient or responsible person, his medical insurance carrier or fiscal intermediary. Payments received from the patient, responsible person or insurance carrier after costs have been paid from county funds shall be credited to the county's account.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-171-140, filed 12/27/90, effective 1/31/91; Order 31, § 248-118-110, filed 8/18/69.]

Chapter 246-201 WAC BASIC PLUMBING PRINCIPLES

WAC

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246-201-080	Plumbing fixtures.
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246-201-130	Pipes—Adequate air circulation.
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246-201-180	Location of water closets.
246-201-190	Disposal where no sewers.
246-201-200	Backflow requirements.
246-201-210	Sanitary maintenance.

WAC 246-201-001 Purpose and nature of regulations. These regulations embody the fundamental sanitary principles which a successful plumbing system should satisfy. These principles have been prepared with the view of specifying the results desired, and of making provision for testing the plumbing work to ascertain whether satisfactory results can be secured, but they do not attempt to specify details of construction.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-001, filed 12/27/90, effective 1/31/91; Regulation .94.001, effective 3/11/60.]

WAC 246-201-020 Water supply requirements. All premises intended for human habitation or occupancy should be provided with a water supply which meets the requirements of the Washington state department of health.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-020, filed 12/27/90, effective 1/31/91; Regulation .94.010, effective 3/11/60.]

WAC 246-201-030 Volume of flow. Buildings in which water closets and other plumbing fixtures exist should be provided with a supply of water adequate in volume and pressure for flushing purposes.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-030, filed 12/27/90, effective 1/31/91; Regulation .94.020, effective 3/11/60.]

WAC 246-201-040 Size of pipes. The pipes conveying water to water closets should be of sufficient size to supply the water at a rate which will flush the toilets adequately without unduly reducing the pressure at other fixtures.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-040, filed 12/27/90, effective 1/31/91; Regulation .94.030, effective 3/11/60.]

WAC 246-201-050 Boilers and hot water tanks. Devices for heating water and storing it in "boilers" or hot water tanks, should be so designed and installed as to prevent all dangers from explosion and also to prevent a back flow of hot water through meters connected with the public water supply.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-050, filed 12/27/90, effective 1/31/91; Regulation .94.040, effective 3/11/60.]

WAC 246-201-060 Sewage connection. Every building intended for human habitation or occupancy on premises abutting on a street in which there is a public sewer should have a connection with the sewer and, if possible, a separate connection.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-060, filed 12/27/90, effective 1/31/91; Regulation .94.050, effective 3/11/60.]

WAC 246-201-070 Water closets—Multiple dwellings. In multiple dwellings provided with a building drainage system there should be at least one private water closet for each family.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-070, filed 12/27/90, effective 1/31/91; Regulation .94.060, effective 3/11/60.]

WAC 246-201-080 Plumbing fixtures. Plumbing fixtures should be made of smooth, nonabsorbent materials, should be free from concealed fouling surfaces and should be set free of enclosures.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-080, filed 12/27/90, effective 1/31/91; Regulation .94.070, effective 3/11/60.]

WAC 246-201-090 Drainage systems. The entire building drainage system should be so designed, constructed, and maintained as to conduct the waste water or sewage quickly from the fixture to the place of disposal with velocities which will guard against fouling and the deposit of solids and will prevent clogging.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-090, filed 12/27/90, effective 1/31/91; Regulation .94.080, effective 3/11/60.]

WAC 246-201-100 Drainage pipes. The drainage pipes should be so designed and constructed as to be proof for a reasonable life of the building against leakage of water or drain air due to defective materials, imperfect connections, corrosion, settlements or vibrations of the ground or building, temperature changes, freezing, or other causes.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-100, filed 12/27/90, effective 1/31/91; Regulation .94.090, effective 3/11/60.]

WAC 246-201-110 Cleanouts. The drainage system should be provided with an adequate number of cleanouts so arranged that in case of stoppage the pipes may be readily accessible.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-110, filed 12/27/90, effective 1/31/91; Regulation .94.100, effective 3/11/60.]

WAC 246-201-120 Traps. Each fixture or combination fixture should be provided with a separate, accessible, self-scouring, reliable water-seal trap placed as near to the fixture as possible.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-120, filed 12/27/90, effective 1/31/91; Regulation .94.110, effective 3/11/60.]

WAC 246-201-130 Pipes—Adequate air circulation. The building drainage system should be so designed that there will be adequate circulation of air in all pipes, and no danger of siphonage, aspiration, or forcing of trap seals under conditions of ordinary use.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-130, filed 12/27/90, effective 1/31/91; Regulation .94.120, effective 3/11/60.]

WAC 246-201-140 Soil stacks. The soil stack should extend full size upward through the roof and have a free opening, the roof terminal being so located that there will be no danger of air passing from it to any window and no danger of clogging of the pipe by frost or by articles being thrown into it or of roof water draining into it.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-140, filed 12/27/90, effective 1/31/91; Regulation .94.130, effective 3/11/60.]

WAC 246-201-150 Water and air pressure tests. The plumbing system should be subjected to a water or air pressure test and to a final inspection in such manner as will disclose all leaks and imperfections in the work.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-150, filed 12/27/90, effective 1/31/91; Regulation .94.140, effective 3/11/60.]

WAC 246-201-160 Clogging substances. No substances which will clog the pipes, produce explosive mixtures, or destroy the pipes or their joints should be allowed to enter the building drainage system.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-160, filed 12/27/90, effective 1/31/91; Regulation .94.150, effective 3/11/60.]

WAC 246-201-170 Food receptacles and the drainage system. Refrigerators, ice boxes, or receptacles for storing food should not be connected directly with the drainage system.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-170, filed 12/27/90, effective 1/31/91; Regulation .94.160, effective 3/11/60.]

WAC 246-201-180 Location of water closets. No water closet should be located in a room or compartment which is not properly lighted and ventilated to the outer air.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-180, filed 12/27/90, effective 1/31/91; Regulation .94.170, effective 3/11/60.]

WAC 246-201-190 Disposal where no sewers. If water closets or other plumbing fixtures exist in buildings where there is no sewer within reasonable distance, suitable provisions should be made for disposing of the building sewage by a method of disposal which meets the requirements of the Washington state department of health.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-190, filed 12/27/90, effective 1/31/91; Regulation .94.180, effective 3/11/60.]

WAC 246-201-200 Backflow requirements. Where a building drainage system may be subjected to back flow of sewage, suitable provision should be made to prevent its overflow in the building.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-200, filed 12/27/90, effective 1/31/91; Regulation .94.190, effective 3/11/60.]

WAC 246-201-210 Sanitary maintenance. Plumbing systems should be maintained in a sanitary condition.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-201-210, filed 12/27/90, effective 1/31/91; Regulation .94.200, effective 3/11/60.]

Chapter 246-203 WAC GENERAL SANITATION

WAC

246-203-010	Definition—Public or common nuisance.
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246-203-030	Common towel.
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246-203-120	Disposal of garbage, trash, rubbish, offal, dead animals, and manure.
246-203-130	Keeping of animals.
246-203-140	Stagnant water.
246-203-150	Highway sanitation.
246-203-160	Sanitation of public buildings.
246-203-170	Objectionable establishments and industrial wastes.

246-203-180	Piggeries.
246-203-200	Disease producing organisms for rodent extermination forbidden.
246-203-210	Common drinking cups.

WAC 246-203-010 Definition—Public or common nuisance. For the purpose of these regulations, a public or common nuisance shall be considered as that which is set up, maintained or continued so as to be injurious to the health, or an obstruction to the use of property by interfering with the repose, health, safety or life of any considerable number of persons.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-010, filed 12/27/90, effective 1/31/91; Regulation .50.010, effective 3/11/60.]

WAC 246-203-020 Spitting. Spitting upon the floors or walls of a public building or buildings used for public assemblage, of a building used for manufacturing or industrial purposes, or upon the floors or platforms or any part of any railroad or trolley car or ferry boat, or any other public conveyance, is prohibited.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-020, filed 12/27/90, effective 1/31/91; Regulation .50.020, effective 3/11/60.]

WAC 246-203-030 Common towel. No person, firm, corporation or authorities owning, in charge of, or in control of any lavatory or wash room in any hotel, theatre, lodging house, restaurant, factory, school, church, store, office building, railway or trolley station, or public conveyance by land, water or air, or other institution or conveyance frequented by the public, or which may be used for the purpose of public assembly or as a place of employment, shall provide in or about such lavatory or washroom any towel for common use.

The term "common use" in this section shall be construed to mean, the use of all or any portion of a towel by more than one person without adequate cleansing.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-030, filed 12/27/90, effective 1/31/91; Regulation .50.030, effective 3/11/60.]

WAC 246-203-060 Water sold to the public for drinking purposes in bottles or other containers. (1) **Quality.** No water shall be sold, offered for sale or rendered available for drinking purposes in bottles or other containers unless such water is of a sanitary quality approved by the secretary of the department of health.

(2) **Inspection.** All plants for the preparation of water for sale in bottles or other containers for drinking purposes and the sources of the water supply shall be inspected as frequently as necessary by a representative of the department of health, and samples of water collected for sanitary analyses at the department of health laboratories.

(3) **Sterilizing containers.** Bottles or other containers in which water is sold for drinking purposes shall be sterilized before refilling. The method of sterilization shall be approved by the secretary of the department of health.

(4) **Water purification.** Processes of purification of waters that are to be sold for drinking purposes shall be

approved by the secretary of the department of health before the water can be sold or offered for sale.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-203-060, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-203-060, filed 12/27/90, effective 1/31/91; Regulation .50.060, effective 3/11/60.]

WAC 246-203-070 Ice sold for public use. (1) **Quality.** No ice shall be sold, offered for sale or rendered available for use to the public unless such ice is of a sanitary quality approved by the secretary of the department of health.

(2) **Information.** Any company, corporation, city or individual selling artificial ice for public consumption shall submit to the department of health complete information concerning the source of water supply used for the manufacture of the ice and a detailed description of the manufacturing processes involved.

Any company, corporation, city or individual harvesting natural ice shall file full information with the department of health with regard to the source of the ice and method of storage.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-203-070, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-203-070, filed 12/27/90, effective 1/31/91; Regulation .50.070, effective 3/11/60.]

WAC 246-203-080 Pollution of ground water prohibited. (1) No privy contents, drainage from a building, or the effluent from any sewage treatment device shall be discharged directly into any well, either abandoned or constructed for that purpose, that is carried to such a depth as to penetrate the water-bearing strata.

(2) No privy contents, drainage from a building, or the effluent from any sewage treatment device shall be discharged into any crevice, sink-hole, or other opening, either natural or artificial, in a rock formation which will or may permit the pollution or contamination of ground water, except with the approval of the secretary of the department of health.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-203-080, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-203-080, filed 12/27/90, effective 1/31/91; Regulation .50.080, effective 3/11/60.]

WAC 246-203-090 Stream pollution. If, after investigation by the state department of health of any stream, lake, or other body of water within the state or forming the boundaries thereof, it is found that the entrance of sewage or industrial wastes are contributing sufficient pollution to endanger the public health and welfare, and the correction thereof is both possible and practicable, the secretary of the department of health will issue and enforce such special orders as may be necessary for the protection of the public health and welfare.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-203-090, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-203-090, filed 12/27/90, effective 1/31/91; Regulation .50.090, effective 3/11/60.]

WAC 246-203-100 Disposal of human excreta. (1) **Waters of the state defined.** For the purpose of this

regulation, the term "waters of the state" wherever used, shall include all streams and springs, and all bodies of surface and of ground water, whether natural or artificial, within the boundaries of the state.

(2) **Privies shall be fly-proof.** No privy, cesspool, septic tank, or other receptacle for human excrement shall be constructed, maintained or used so that flies have or may have access to the excrementitious matter contained therein.

(3) **Privies shall not drain in any waters of the state.** No privy, urinal, cesspool, septic tank or other receptacle for human excrement shall be constructed, maintained or used which directly or indirectly drains or discharges over or upon the surface of the ground, or into any waters of the state either directly or indirectly; unless the contents of such urinal, cesspool, septic tank or receptacle for human excrement are subjected to some recognized sterilization treatment approved by the department of health.

(4) **Privies shall be kept clean.** All privies, urinals, cesspools, septic tanks or other receptacles for human excrement shall be cleansed at sufficiently frequent intervals to prevent the contents from overflowing.

(5) **Treating excreta on watersheds of public water supplies.** All schools, hamlets, villages, towns or industrial settlements which are now located or may be hereafter located on the watershed of any public water supply, not provided with a sewerage system, shall provide and maintain a reasonable system approved by the state director of health for collecting and disposing of all accumulations of human excrement within their respective jurisdiction or control.

(6) **Connection with sewer.** No privy, cesspool, septic tank or similar receptacle for human excrement shall be constructed, maintained or used on premises where a sewer is at all accessible which is part of a sewerage system from which sewage is lawfully discharged into the waters of the state.

(7) **Use of human excreta for fertilizer prohibited.** The contents of privies, cesspools, septic tanks or other receptacles for human excrement shall not be placed upon the surface of the ground or be used for fertilizing purposes for crops or gardens.

(8) **No privy near foodstuffs.** No privy, urinal, toilet or other receptacle for human excrement shall be constructed, maintained or used in any room, or have direct connection with any room wherein any kind of exposed foods or foodstuffs are prepared, stored or handled.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-203-100, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-203-100, filed 12/27/90, effective 1/31/91; Regulation .50.100, effective 3/11/60.]

WAC 246-203-110 Kitchen and laundry water. No kitchen or laundry water shall be discharged or be permitted to discharge or flow into any gutter, street, roadway or public place.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-110, filed 12/27/90, effective 1/31/91; Regulation .50.110, effective 3/11/60.]

WAC 246-203-120 Disposal of garbage, trash, rubbish, offal, dead animals, and manure. (1) **Definitions.** For the purpose of these regulations the following definitions shall apply:

"Garbage" shall mean all solid and semisolid kitchen refuse subject to decay or putrefaction and all market waste of animal and vegetable matter which was intended to be used as food.

"Trash and rubbish" shall mean all waste material not of putrescible nature, which for the purpose of this regulation shall include ashes.

"Offal" shall mean waste animal matter from butcher, slaughter, or packing houses.

"Dead animals" shall mean all animals large and small which may die or which may be killed for other than food purposes.

"Manure" shall mean cleanings from all barns, stables, corrals, pens, or cars used for stabling or penning of animals or fowl.

(2) **Methods of disposal.** Garbage, offal and manure; or rubbish, trash, and ashes mixed with garbage, offal or manure shall be disposed of by incineration, burial, sanitary fill or other method approved, and within a time limit set by the health officer. Such material shall not be disposed of by being deposited in any ditch, gulch, ravine, river, stream, lake, pond, nor upon the surface of the ground, on any highway rights of way, where it may become a nuisance or menace to health through the breeding of flies, harboring of rodents, or pollution of water.

(3) **Dead animals.** The carcass of any dead animal shall be removed and disposed of by burial, incineration or other proper method within twenty-four hours after death. If the carcass is buried it shall be placed so that every part shall be covered by at least two feet of earth and at a location not less than 100 feet from any well, spring, stream or other surface waters, and in a place not subject to overflow. In all cases of death from communicable disease, the carcass, if disposed of by burial, shall first be thoroughly enveloped in unslaked lime.

Proper disposal shall be made by the owner of the animal or by the owner of the property on which the dead animal is found. Where the owner of the animal is unknown and the carcass is found upon any street, alley or other public place, it shall be removed and disposed of by the county board of health at public expense.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-120, filed 12/27/90, effective 1/31/91; Regulation .50.120, effective 3/11/60; subsection (2) amended by filing of 6/3/65.]

WAC 246-203-130 Keeping of animals. (1) Any person, firm or corporation is prohibited from keeping or sheltering animals in such a manner that a condition resulting from same shall constitute a nuisance.

(2) In populous districts, stable manure must be kept in a covered watertight pit or chamber and shall be removed at least once a week during the period from April 1st to October 1st and, during the other months, at intervals sufficiently frequent to maintain a sanitary condition satisfactory to the health officer. Manure on farms or isolated premises other than dairy farms need not be so protected and removed unless ordered by the health officer.

(3) Manure shall not be allowed to accumulate in any place where it can prejudicially affect any source of drinking water.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-130, filed 12/27/90, effective 1/31/91; Regulation .50.130, effective 3/11/60.]

WAC 246-203-140 Stagnant water. (1) All marshes or swamps, and all pools or ponds, either natural or artificial, shall be maintained by the owners free from the breeding of mosquitoes. If treatment is required to prevent the breeding of mosquitoes, it shall be accomplished by filling, draining, stocking with larvae-eating fish, treating with larvicide or mineral oil or by some other method approved by the state department of health.

(2) No person shall maintain or permit to be maintained any privy vault, cesspool, well, cistern, rain barrel, or other receptacle containing water in such condition that mosquitoes may breed therein.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-140, filed 12/27/90, effective 1/31/91; Regulation .50.140, effective 3/11/60.]

WAC 246-203-150 Highway sanitation. Any municipality, community, institution, corporation, association, firm or person who owns, operates, or maintains on or near any public highway, a place catering to the traveling public, shall maintain and operate said place in such a way that it does not constitute a menace to public health or a public nuisance.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-150, filed 12/27/90, effective 1/31/91; Regulation .50.150, effective 3/11/60.]

WAC 246-203-160 Sanitation of public buildings. (1) **Definition.** A public building shall be construed to mean any theater, show-house, public hall, public meeting place, public transportation terminal, or any other public building not covered by specific regulations: *Provided*, That a public building shall not be construed to include any store, market, supermarket, or other commercial establishment open to the general public for commercial purposes which does not cater to an audience.

(2) **Lighting and ventilation.** All public buildings shall be properly lighted and ventilated according to the type of said building and the uses to which it is put.

(3) **Water supply.**

(a) Any public place supplied with water under pressure shall be equipped with sanitary drinking fountains of an approved type.

(b) Where water supplied for drinking is not obtained from a public water supply, such water shall be of a quality approved by the secretary of the department of health. When not under pressure, drinking water shall be stored in a covered container of an approved type.

(c) The use of the common drinking cup is prohibited.

(4) **Toilet facilities.** Every public building shall be provided with adequate sanitary toilet facilities for each of the sexes; and such facilities shall be convenient and accessible. Every public building which must provide adequate sanitary toilet facilities shall provide at least one free sanitary toilet facility for each of the sexes. Where toilet facilities are voluntarily provided by any store, market, supermarket, or other commercial establishment for use by customers of such establishment or the general public, there

shall be at least one free sanitary toilet facility provided for each of the sexes. It shall be the duty of the owner, manager, or other responsible person in charge to see that the toilet system is properly installed and maintained in a usable and sanitary condition at all times.

The method of sewage disposal for all public buildings shall comply with the rules and regulations of the state board of health.

(5) **Cleaning.** All public buildings shall be kept at all times in a clean and sanitary condition and the cleaning shall be carried on under proper sanitary conditions. All rooms used for public meetings shall be cleaned after each meeting held in them, such cleaning to consist of thorough sweeping of the floors and wiping of the woodwork, together with proper airing of the rooms. No room shall be swept without the use of a proper dust-laying substance. Dry dusting is prohibited. In construing this regulation all meetings held during the course of a single day shall be regarded as one meeting.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-203-160, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-203-160, filed 12/27/90, effective 1/31/91; Order 98, § 248-50-160, filed 4/5/74; Order 89, § 248-50-160, filed 10/3/73; Regulation .50.160, effective 3/11/60.]

WAC 246-203-170 Objectionable establishments and industrial wastes. (1) No person, partnership, firm or corporation maintaining a slaughter house, rendering works, depository of dead animals, glue works, tannery, wool washing establishment, paper mill, by-product coke oven, dye works, oil refinery, dairy, creamery, cheese factory, milk station or similar establishment; or engaged in the manufacture of gas, chemicals, explosives, fertilizers, or similar products; or in the business of soap making, fish oil extraction, bone boiling or similar occupation, shall allow any noxious exhalation, odors or gases that are deleterious or detrimental to public health to escape into the air, or any substance that is deleterious or detrimental to public health to accumulate upon the premises; or be thrown or allowed to discharge into any street, roadway or public place; or be thrown or allowed to discharge into any stream or other waters of the state.

(2) All slaughter houses, rendering works, bone boiling establishments, depositories for dead animals, garbage disposal works, piggeries and similar establishments handling organic matter shall have an adequate water supply for the purpose of keeping the place clean and sanitary. All floors shall be constructed of concrete or other impervious material and shall have adequate provision for drainage to a sewer or treatment works approved by the department of health.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-203-170, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-203-170, filed 12/27/90, effective 1/31/91; Regulation .50.170, effective 3/11/60.]

WAC 246-203-180 Piggeries. (1) No pigsty or piggery shall be built or maintained on marshy ground or land subject to overflow, nor within 200 feet of any stream or other source of water supply.

(2) When garbage is fed to pigs all unconsumed garbage shall be removed daily and disposed of by burial or incineration.

(3) No organic material furnishing food for flies shall be allowed to accumulate on the premises.

(4) All garbage shall be handled and fed upon platforms of concrete or other impervious material.

(5) Unslaked lime, hypochlorite of lime, borax or mineral oil shall be used daily in sufficient quantities to prevent offensive odors and the breeding to flies.

(6) All garbage, offal and flesh fed to swine must be sterilized by cooking before feeding.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-180, filed 12/27/90, effective 1/31/91; Order 44, § 248-50-180, filed 12/11/70; Regulation .50.180, effective 3/11/60.]

WAC 246-203-200 Disease producing organisms for rodent extermination forbidden. The use of any disease-producing organisms such as the so-called "rat viruses" or any bacteria for the purpose of rodent extermination is prohibited.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-200, filed 12/27/90, effective 1/31/91; Regulation .50.200, effective 3/11/60.]

WAC 246-203-210 Common drinking cups. No person, firm, corporation or authorities owning, in charge of, or in control of any hotel, theatre, restaurant, lodging house, factory, school, church, store, office building, railway, trolley or other public conveyance station, or public conveyance by land, water or air, or other institution or conveyance frequented by the public or which may be used for the purpose of public assembly or as a place of employment, is permitted to furnish any cup, vessel or other receptacle for common use in any such place for drinking or eating purposes.

The term "common use" in this section shall be construed to mean, for use by more than one person without adequate cleansing.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-203-210, filed 12/27/90, effective 1/31/91; Regulation .50.210, effective 3/11/60.]

Chapter 246-205 WAC

DECONTAMINATION OF ILLEGAL DRUG MANUFACTURING OR STORAGE SITES

WAC

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WAC 246-205-001 Purpose and authority. (1) This chapter is adopted to protect the public's health, safety, and welfare by establishing standards, procedures, and responsibilities for:

(a) The certification of contractors and their employees authorized to perform decontamination of illegal drug manufacturing or storage sites; and

(b) Regulating the occupancy and use of property where hazardous chemicals or chemical residues commonly associated with the manufacture of illegal drugs are or may be present.

(2) The statutory authority for the adoption of this chapter is chapter 64.44 RCW.

(a) Contractor certification rules are jointly adopted by the state board of health and the department of health; and

(b) Rules in this chapter pertaining to local health officers' responsibilities are adopted by the state board of health.

(3) This chapter does not apply to industrial sites where a person's manufacturing process uses a hazardous chemical when licensed or regulated by state or federal agencies.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW, 92-10-027 (Order 268B), § 246-205-001, filed 4/29/92, effective 5/30/92. Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW, 91-04-007 (Order 125SB), § 246-205-001, filed 1/24/91, effective 4/1/91.]

WAC 246-205-010 Definitions. For the purposes of this chapter, the following words and phrases shall have the following meanings unless the content clearly indicates otherwise.

(1) "Authorized contractor" means any person or persons:

(a) Registered under chapter 18.27 RCW; and

(b) Certified by the department to decontaminate, demolish, or dispose of contaminated property as required by chapter 64.44 RCW and this chapter.

(2) "Basic course" means a training course which has been sponsored or approved by the department for workers and supervisors who perform or supervise decontamination on illegal drug manufacturing or storage sites.

(3) "Certificate" means a department issued written approval under this chapter.

(4) "Certified" means a person who has department issued written approval under this chapter.

(5) "Contaminated" or "contamination" means polluted by hazardous chemicals so that the property is unfit for human habitation or use due to immediate or long-term hazards. Property that at one time was contaminated but has been satisfactorily decontaminated according to procedures established by the state board of health is not "contaminated."

(6) "Decontamination" means the process of reducing levels of known contaminants to the lowest practical level using currently available methods and processes.

(7) "Department" means the Washington state department of health.

(8) "Disposal of contaminated property" means the disposition of contaminated property under the provisions of chapter 70.105 RCW.

(9) "Hazardous chemicals" means the following substances used in the manufacture of illegal drugs:

(a) Hazardous substances as defined in RCW 70.105D.020; and

(b) Precursor substances as defined in RCW 69.43.010 which the state board of health, in consultation with the state board of pharmacy, has determined present an immediate or long-term health hazard to humans.

(10) "Illegal drug manufacturing or storage site" means any property where a person illegally manufactures or stores a controlled substance or a law enforcement agency or the property owner believes a person illegally manufactured or stored a controlled substance.

(11) "Initial site assessment" means the first evaluation of a property to determine the nature and extent of observable damage and contamination.

(12) "List of contaminated properties" means a list of properties contaminated by illegal drug manufacturing or the storage of hazardous chemicals.

(13) "Local department" means the jurisdictional local health department or district.

(14) "Local health officer" means a health officer or authorized representative as defined under chapters 70.05, 70.08, and 70.46 RCW.

(15) "Person" means an individual, firm, association, copartnership, political subdivision, government agency, municipality, industry, public or private corporation, or other entity.

(16) "Posting" means attaching a written or printed announcement conspicuously on property which may be, or is determined to be, contaminated by illegal drug manufacturing or the storage of a hazardous chemical.

(17) "Property" means any site, lot, parcel of land, structure, or part of a structure involved in the illegal manufacture of a drug or storage of a hazardous chemical including but not limited to:

(a) Single-family residences;

(b) Units or multiplexes;

(c) Condominiums;

(d) Apartment buildings;

(e) Motels and hotels;

(f) Boats;

(g) Motor vehicles;

(h) Trailers;

(i) Manufactured housing;

(j) Any ship, booth, or garden; or

(k) Any site, lot, parcel of land, structure, or part of a structure that may be contaminated by previous use.

(18) "Property owner" means a person with a lawful right of possession of the property by reason of obtaining it by purchase, exchange, gift, lease, inheritance, or legal action.

(19) "Refresher course" means a department sponsored or approved biennial training course for decontamination workers and supervisors. An approved refresher course:

(a) Reviews the subjects taught in the initial training course; and

(b) Includes updated information on emerging decontamination technology.

(20) "Storage site" means any property used for the storage of illegally manufactured controlled substances or hazardous chemicals.

(21) "Subcontractor" means a person hired by an authorized contractor for the purpose of providing on-site services.

(22) "Supervisor" means a person employed by an authorized contractor who is on site during the decontamination of an illegal drug manufacturing or storage site and who is responsible for the activities performed.

(23) "Worker" means a person employed by an authorized contractor who performs decontamination of an illegal drug manufacturing or storage site.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW. 92-10-027 (Order 268B), § 246-205-010, filed 4/29/92, effective 5/30/92. Statutory Authority: RCW 64.44.060 and 64.44.070. 92-02-017 (Order 223SB), § 246-205-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-010, filed 1/24/91, effective 4/1/91.]

DECONTAMINATION CONTRACTOR CERTIFICATION

WAC 246-205-020 Authorized contractor services.

(1) Persons performing or causing to be performed any decontamination, demolition, or disposal of contaminated property shall use the services of an authorized contractor.

(2) Persons advertising or offering to undertake or perform any work necessary to decontaminate properties shall first comply with these rules and secure a certificate from the department under RCW 64.44.060 and this chapter.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-020, filed 1/24/91, effective 4/1/91.]

WAC 246-205-030 Courses for training workers and supervisors. The department shall:

(1) Train, test, or approve courses to train and test the authorized contractor's workers and supervisors on the essential elements in assessing and decontaminating property used as an illegal drug manufacturing or storage site;

(2) Require a biennial refresher course.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-030, filed 1/24/91, effective 4/1/91.]

WAC 246-205-040 Training course approval. (1) Persons having department approval may sponsor basic and refresher worker and supervisor training courses.

(2) Training course approval shall be contingent on department evaluation of:

(a) The breadth of knowledge and experience required to properly train workers or supervisors;

(b) Adequacy and accuracy of content; and

(c) Training techniques.

(3) Department approved training courses shall provide at a minimum, information on:

(a) Rules and regulations:

(i) Chapters 69.43 and 69.50 RCW;

(ii) Federal Occupational Health and Safety Act and Washington Industrial Safety and Health Act requirements.

(b) Chemical terminology and classifications:

(i) Definitions, physical and chemical properties, class characteristics and hazards, special cases;

(ii) Equipment such as heating mantle, condenser, glassware;

(iii) Concepts such as acid, base, and pH;

(iv) Solvents;

(v) Metals and salts;

(vi) Corrosives;

(vii) Precursor substances;

(viii) By-products and contaminants;

(ix) Poisons such as cyanide and phosphine.

(c) Surface properties of chemicals:

(i) Absorption;

(ii) Adsorption;

(iii) Chemical bonding;

(iv) Specific chemicals such as 1-phenyl-2-propanone and phenylacetic acid.

(d) Illegal drug laboratories:

(i) Laboratory types including:

(A) Methamphetamine/Amphetamine;

(B) Hallucinogens;

(C) Others such as cocaine and opiates.

(ii) Chemicals;

(iii) Equipment;

(iv) An overview of synthetic processes used; and

(v) Booby traps.

(e) Health effects:

(i) General:

(A) Effects of exposure to classes of chemicals;

(B) Use of literature such as *Material Safety Data Sheet* and *Chemical Hazards Handbook*.

(ii) Toxicology:

(A) Routes of exposure; and

(B) Exposure limits such as time weighted averages and threshold limit value.

(iii) Symptomatology; and

(iv) First aid.

(f) Incompatibility of chemicals related to clean-up:

(i) General concepts such as heat generation and poisonous gas formation; and

(ii) Specific hazards such as lithium, aluminum hydride and water, phosphorous and air.

(g) Decontamination:

(i) Structures and vehicles including cars and boats, covering:

(A) Different techniques and required equipment;

(B) Applications of specific clean-up techniques using hypothetical case examples and correlating site status with appropriate techniques; and

(C) Decision making about and prioritization of techniques based upon case-specific information.

(ii) Contents, specifically removal vs. cleaning; and

(iii) Personal decontamination of crew members prior to leaving a decontamination site.

(h) Handling of contaminated materials:

State/federal requirements for dealing with hazardous chemicals specific to:

- (i) Disposal;
- (ii) Transportation; and
- (iii) Storage.

(i) Reporting requirements.
(j) Site characterization which shall be required for supervisors only:

How to acquire and review existing site specific information including:

- (i) Source of data from health department, property owner, law enforcement, or ecology department;
- (ii) Site walk-through and assessment;
- (iii) Sampling before and after cleanup including:
 - (A) Who;
 - (B) When;
 - (C) What;
 - (D) How; and
 - (E) Where.

(k) Recordkeeping and reporting which shall be required for supervisors only:

- (i) Initial site assessment;
- (ii) Obtaining necessary information;
- (iii) Initial site testing;
- (iv) Workplan including:
 - (A) Scope;
 - (B) Content; and
 - (C) Format.
- (v) Final site testing;
- (vi) Report completion;
- (vii) Other responsibilities of authorized contractors;
- (viii) Penalties and liability.

(4) Sponsors of basic and refresher training courses proposed for department approval shall submit:

- (a) Course location and fees;
- (b) Copies of course handouts;
- (c) A detailed description of course content and the amount of time allotted to each major topic;
- (d) A description of teaching methods to be utilized and a list of all audio-visual materials;
- (e) A list of all personnel involved in course preparation and presentation and a description of their qualifications;
- (f) When specifically requested by the department, copies of all audio-visual materials proposed for utilization; and

(g) A list of two hundred questions for development of an examination.

(5) Sponsors seeking initial and renewal department approval of training courses shall:

- (a) Apply on forms provided by the department;
- (b) Submit to the department completed application with the required fee as specified under WAC 246-205-990;
- (c) Ensure initial course approval applications are received by the department sixty or more days before the requested approval date; and
- (d) Ensure training course renewal applications are received by the department thirty or more days before expiration of the current approval.

(6) The department shall:

- (a) Approve basic and refresher training courses;
- (b) Issue the course sponsor an approval valid for two years from the date of issuance;

(c) Require additional subjects to be taught to update information on new technology and determine the amount of time to be allotted to adequately cover these subjects;

(d) Provide a detailed outline of subject matter developed by the department to the sponsor for required incorporation into the training course.

(7) The course sponsor shall provide the department with a list of the names, addresses, and Social Security numbers of all persons completing a basic or refresher training course ten days or less after a course is completed.

(8) The course sponsor shall:

(a) Notify the department in writing thirty or more days before a training course is scheduled to begin; and

(b) Include the date, time, and address of the locations where training will be conducted; and

(c) Obtain department approval in advance for any changes to a training course.

(9) A department representative may, at the department's discretion, attend a training course as an observer to verify the course sponsor conducts the training course in accordance with the program approved by the department.

(10) Course sponsors conducting training outside the state of Washington shall:

(a) Reimburse the department at current state of Washington per diem and travel allowance rates for travel expenses associated with department observance of the training courses; and

(b) Submit reimbursement to the department within thirty days of receipt of the billing notice.

(11) The training course sponsor shall limit each class to a maximum of thirty participants.

(12) The department may terminate the training course approval if in the department's judgment the sponsor fails to:

(a) Maintain the course content and quality as initially approved;

(b) Make changes to a course as required by the department.

[Statutory Authority: RCW 64.44.060 and 64.44.070. 92-02-017 (Order 223SB), § 246-205-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-040, filed 1/24/91, effective 4/1/91.]

WAC 246-205-050 Worker and supervisor certification.

(1) Applicants seeking an initial certificate as a decontamination worker shall submit to the department:

(a) A completed application on a form provided by the department;

(b) A fee as prescribed in WAC 246-205-990; and

(c) Evidence of successful completion of:

(i) Eighty or more hours of hazardous material training satisfying the requirements of WAC 296-62-3040; and

(ii) A department sponsored or approved decontamination worker training course.

(2) Applicants seeking an initial certificate as a decontamination supervisor shall submit to the department:

(a) Evidence of a valid and current Washington state decontamination worker certificate;

(b) Evidence of forty or more hours of on-site experience in hazardous material or illegal drug manufacturing or storage site decontamination projects;

(c) A completed application on a form provided by the department;

(d) A fee as prescribed in WAC 246-205-990; and

(e) Evidence of successful completion of a department sponsored or approved decontamination supervisor training course.

(3) Applicants for department certification shall:

(a) Ensure the completed application is received by the department sixty or less days after the completion of the course; or

(b) Pass an examination administered by the department with a score of seventy percent or more.

(4) Persons shall supervise and perform decontamination work only following issuance of the certificate, valid for two years from the date of issuance.

(5) Persons shall make certificates available for inspection at all times during an illegal drug manufacturing or storage site decontamination project.

(6) The department may deny, suspend, or revoke a person's certificate as described under WAC 246-205-110.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-050, filed 1/24/91, effective 4/1/91.]

WAC 246-205-060 Worker and supervisor certificate renewal. (1) Certified workers and supervisors seeking a renewal certificate shall submit to the department:

(a) A completed application for certificate renewal on a form provided by the department;

(b) A fee as prescribed in WAC 246-205-990;

(c) Evidence of successful completion of a department sponsored or approved refresher training course. Refresher training shall include:

(i) A thorough review of the subjects required under WAC 246-205-030;

(ii) Update of information on state-of-the-art procedures and equipment;

(iii) Review of regulatory changes and interpretation; and

(iv) Other subjects if required by the department to update information on new technology and procedures.

(2) Workers whose certificates have been expired for more than two years shall retake the entire basic course. Supervisors whose certificates have been expired for more than two years shall retake the entire basic supervisor's course.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-060, filed 1/24/91, effective 4/1/91.]

WAC 246-205-070 Authorized contractor certification. (1) A contractor may perform decontamination, demolition, or disposal work at an illegal drug manufacturing or storage site only after the department issues the contractor a certificate.

(2) The department shall not require companies and persons providing only initial site assessment, sample collection, transportation, and testing services for drug laboratory decontamination contractors to be certified or trained under this chapter.

(3) Applicants for department certification as an authorized contractor, shall submit to the department:

(a) Evidence of being licensed, bonded, and insured as a general contractor under the provisions of chapter 18.27 RCW.

(b) Evidence of successful completion of specialized training for each employee who will do work on an illegal drug manufacturing or storage site;

(c) Documentation that the contractor has at least one department certified supervisor;

(d) A completed application on a form provided by the department; and

(e) A fee as prescribed in WAC 246-205-990.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-070, filed 1/24/91, effective 4/1/91.]

WAC 246-205-080 Reciprocity. (1) The department may provide reciprocal certification for contractors, supervisors, and workers trained and certified in another state if standards and training are substantially equivalent to those of this chapter.

(2) Applicants for reciprocity shall submit to the department:

(a) A completed application on a form provided by the department;

(b) Documentation of specialized training for illegal drug manufacturing or storage site decontamination;

(c) Evidence of successful completion of training required by Federal Occupational Safety and Health Act, Washington Industrial Safety and Health Act regulations, and WAC 296-62-3040; and

(d) A fee as prescribed in WAC 246-205-990.

(3) After reviewing the application, the department may issue the applicant a certificate or require:

(a) Additional information;

(b) A refresher course; or

(c) A department-administered examination.

[Statutory Authority: RCW 64.44.060 and 64.44.070. 92-02-017 (Order 223SB), § 246-205-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-080, filed 1/24/91, effective 4/1/91.]

WAC 246-205-090 On-site supervision. (1) During decontamination, demolition, or disposal of contaminated property at illegal drug manufacturing or storage sites, a contractor employed supervisor meeting the qualifications required in this chapter shall be on site and responsible for the activities performed.

(2) The contractor employed supervisor shall, while on site, make available for inspection, department provided certification attesting to the supervisor's training and credentials.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-090, filed 1/24/91, effective 4/1/91.]

WAC 246-205-100 Performance standards. Authorized contractors and their employees working at a decontamination site shall, at a minimum, meet the following performance standards:

(1) File a workplan with and obtain approval of the local health department;

(2) Perform work in accordance with the approved workplan;

(3) Perform work meeting the requirements of state and local building codes;

(4) Comply with applicable Federal Occupational Safety and Health Act and Washington Industrial Safety and Health Act regulations and requirements;

(5) Comply with the requirements of chapter 70.105 RCW and chapter 173-303 WAC;

(6) Comply with the requirements of applicable department of ecology and Environmental Protection Agency regulations;

(7) Comply with applicable contractor regulations;

(8) Notify the state and local jurisdictional health department of all work performed within ten days after completion of the project;

(9) Perform all decontamination work only with department certified workers and supervisors; and

(10) Comply with all other applicable laws and regulations.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-100, filed 1/24/91, effective 4/1/91.]

WAC 246-205-110 Denial, suspension, revocation of certification, and civil penalties. (1) The department shall deny an initial, renewal, or reciprocal illegal drug manufacturing or storage site decontamination worker, supervisor, or contractor certificate if the applicant fails to meet the requirements of this chapter.

(2) The department may take disciplinary action against a worker, supervisor, or contractor if the following occurs:

(a) Failure to comply with the requirements of chapter 64.44 RCW to include the performance standards or any rule adopted under chapter 64.44 RCW and this chapter;

(b) Failure of a worker or supervisor to make certificates available for inspection on site; or

(c) Committing fraud or misrepresentation in:

(i) Applying for certification;

(ii) Seeking approval of a workplan; or

(iii) Documenting completion of the work to the local health department.

(3) The department may take disciplinary action against a decontamination worker, supervisor, or contractor including, but not limited to, denial, suspension, or revocation of certification.

(4) The department may impose against a contractor a civil penalty not to exceed five hundred dollars, for each violation in addition to or in lieu of certification denial, suspension, or revocation pursuant to this rule. Each day the violation continues shall be considered a separate violation.

(5) Adjudicative proceedings are governed by chapter 34.05 RCW, the Administrative Procedure Act, chapter 246-08 WAC, and this chapter.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-110, filed 1/24/91, effective 4/1/91.]

WAC 246-205-120 Authorized contractor certification list. The department shall maintain a list of authorized illegal drug manufacturing or storage site decontamination contractors. The department's authorized contractor list shall be made available to local health officials and other appropriate agencies semi-annually, and to the public upon request.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-120, filed 1/24/91, effective 4/1/91.]

LOCAL HEALTH OFFICER RESPONSIBILITIES

WAC 246-205-520 Posting of property. (1) Within one working day of notification by a law enforcement agency or property owner that a property may be contaminated by hazardous chemicals, the local health officer shall notify the public of the potential contamination by causing a posting of a notice on the premises.

(2) The local health officer's initial notice shall:

(a) Warn the public that entry to the property may be unsafe; and

(b) Not declare the property unfit for use unless in the local health officer's opinion an immediate public health threat exists.

(3) If, in the local health officer's opinion, an immediate public health threat exists, the local health officer shall cause a posting of an order prohibiting use of all or portions of the property as required under WAC 246-205-560.

(4) The local health officer shall cause the posting, but, based on applicable local regulations or agreements, actual physical attachment of the written notice to the property may be effected by the:

(a) Health officer;

(b) Law enforcement personnel;

(c) Fire department personnel; or

(d) Other local health officer designee.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW. 92-10-027 (Order 268B), § 246-205-520, filed 4/29/92, effective 5/30/92.]

WAC 246-205-530 Environmental assessment. (1) Within fourteen days after a law enforcement agency or property owner notifies the local health officer of potential property contamination, the local health officer shall cause an inspection of the property to commence. To enable the local health officer to determine contamination, the property inspection shall include an acquisition of data such as evidence of hazardous chemical use or storage on site, the presence of chemical stains, or the presence of glassware or other paraphernalia associated with the manufacture of illegal drugs.

(2) As part of the property's inspection, the local health officer shall request copies of any law enforcement reports, forensic chemist reports, and any department of ecology hazardous material transportation manifests needed to evaluate:

(a) The length of time a person used the property as an illegal drug manufacturing or storage site;

(b) The size of the site actually used for the manufacture or storage of illegal drugs;

(c) What chemical process was involved in the manufacture of illegal drugs;

(d) What chemicals were removed from the scene; and

(e) The location of the illegal drug manufacturing or storage site in relation to the habitable areas of the property.

(3) The local health officer may coordinate the property's inspection with other appropriate agencies. At the request of the local health officer, the Washington state department of ecology may conduct an environmental

assessment and may sample the property's ground water, surface water, septic tank water, soil, and other media as necessary to enable the local health officer to evaluate the long-term public health threats.

(4) If the local health officer determines law enforcement and ecology documents do not provide enough data to determine whether the property is contaminated, the local health officer may conduct a site visit or use other methods of obtaining information, to include a review of the analytical results obtained through sampling of the property by an authorized contractor or by the local health officer.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW, 92-10-027 (Order 268B), § 246-205-530, filed 4/29/92, effective 5/30/92.]

WAC 246-205-540 Evaluation. (1) In making a determination of contamination, the local health officer shall follow guidelines developed by the Washington state department of health or other more stringent guidelines as deemed appropriate. If the local health officer determines that a contaminant is present for which no guidelines exist, and further finds that the contaminant presents a potential immediate or long term health hazard, then the local health officer shall find that the property is unfit for use.

(2) If designated unfit for use, the local health officer shall cause a posting of an order prohibiting use of all or portions of the property as required under WAC 246-205-560.

(3) If the local health officer determines the property is not contaminated and is fit for use, the local health officer shall document the findings for future use. The local health officer's documentation shall include:

- (a) Findings;
- (b) Conclusions;
- (c) Name of the property owner;
- (d) Mailing and street address of the property owner;
- (e) Parcel identification number and legal description of the property; and
- (f) Clear directions for locating the property.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW, 92-10-027 (Order 268B), § 246-205-540, filed 4/29/92, effective 5/30/92.]

WAC 246-205-550 Reporting. (1) When property is determined unfit for use, the local health officer shall report the contaminated property to the state department of health within one working day by:

- (a) Telephone; and
- (b) In writing within ten working days.

(2) The local health officer's written unfit for use report to the state department of health shall include:

- (a) Description of the findings;
- (b) Conclusions;
- (c) Name of the property owner;
- (d) Mailing and street address of the property owner;
- (e) Parcel identification number and legal description of the property to including township and section;
- (f) Tax account number;
- (g) Date property designated unfit for use; and
- (h) Clear directions for locating the property.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW, 92-10-027 (Order 268B), § 246-205-550, filed 4/29/92, effective 5/30/92.]

WAC 246-205-560 Notification. (1) Within one working day after the local health officer's determination that a property is contaminated, the local health officer or the local health officer's designee shall post in a conspicuous place on the property an order prohibiting use of all or portions of the property.

(2) Within ten working days after the local health officer's determination that a property is contaminated, the local health officer shall cause to be served, either personally or by certified mail, return receipt requested, an order prohibiting use to all known:

(a) Occupants; and

(b) Persons having an interest in the property as shown upon the records of the auditor's office of the county in which the property is located.

(3) If the whereabouts of persons described under subsection (2) of this section is unknown and the same cannot be ascertained by the local health officer in the exercise of reasonable diligence, and the health officer makes an affidavit to that effect, then the serving of the order upon such persons may be made by:

(a) Personal service; or

(b) Mailing a copy of the order by certified mail, postage prepaid, return receipt requested:

(i) To each person at the address appearing on the last equalized tax assessment roll of the county where the property is located; or

(ii) At the address known to the county assessor.

(4) The local health officer shall also mail a copy of the order addressed to each person or party having a recorded right, title, estate, lien, or interest in the property.

(5) The local health officer's order shall:

(a) Describe the local health officer's intended course of action;

(b) Describe a property owner's penalties for noncompliance with this order;

(c) Prohibit a property owner's use of all or portions of the property;

(d) Describe what measures a property owner must take to have the property decontaminated; and

(e) Indicate the potential health risks involved.

(6) The local health officer shall:

(a) File a copy of the order prohibiting use of the property with the county auditor; and

(b) Provide a copy of such order to the local building permit department.

(7) The local health officer's order shall advise that:

(a) A hearing before the local health officer or local health board shall be held upon the request of a person notified of the order as required under this chapter; and

(b) The person's request for a hearing shall be made within ten days of the local health officer's serving of the order; and

(c) The hearing shall then be held within not less than twenty days or more than thirty days after the serving of the order; and

(d) In any hearing concerning whether property is fit for use, the property owner has the burden of showing that the property is decontaminated or fit for use.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW, 92-10-027 (Order 268B), § 246-205-560, filed 4/29/92, effective 5/30/92.]

WAC 246-205-570 Contamination reduction. (1)

An owner of contaminated property who desires to reduce the contamination shall use the services of an authorized contractor.

(2) The local health officer shall provide the property owner with a list of authorized contractors upon request.

(3) Before commencing contamination reduction, the property owner shall have a written work plan to reduce contamination of the property prepared by the contractor and approved by the local health officer. The work plan shall outline the contamination reduction and waste disposal procedures the contractor intends to use.

(4) The property owner and the contractor shall follow the state department of health contamination reduction guidelines or other more stringent procedures as deemed appropriate by the local health officer.

(5) The property owner shall be:

(a) Financially responsible for any property testing which may be required to demonstrate the presence or absence of hazardous chemicals;

(b) Financially responsible for the property's contamination reduction and disposal expenses, as well as costs incurred by the local health officer resulting from the enforcement of this chapter;

(c) Responsible for keeping records documenting contamination reduction procedures and submitting notarized copies of all records to the local health officer; and

(d) Responsible for petitioning the local health officer to review the contamination reduction records and to declare the property fit for use.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW. 92-10-027 (Order 268B), § 246-205-570, filed 4/29/92, effective 5/30/92.]

WAC 246-205-580 Recording of decontamination.

(1) Within ten working days of a request for review of contamination reduction records, the local health officer:

(a) Shall review the documentation to verify reduction of contamination to acceptable levels for reoccupancy as stated in state department of health guidelines or other more stringent requirements as deemed appropriate by the local health officer;

(b) May visit the property site to assess the thoroughness of the contractor's clean-up;

(c) May require the property owner to provide more extensive testing and assessment of the property site by an independent laboratory or firm qualified to perform such testing and assessment.

(2) If, after review of the information in subsection (1) of this section, the local health officer determines the property has been decontaminated, the local health officer shall within ten working days:

(a) Record a notice in the real property records of the county auditor where the property is located indicating that to the best of his or her knowledge, the basis upon which the property was originally declared unfit for use has been addressed by decontamination in accordance with board of health and department of health rules and guidelines.

(b) Send a copy of the notice to the property owner.

(c) Send a copy of the notice to the state department of health.

(d) Send a copy of the notice to the local building permit department.

[Statutory Authority: RCW 64.40.070 [64.44.070] and chapter 64.44 RCW. 92-10-027 (Order 268B), § 246-205-580, filed 4/29/92, effective 5/30/92.]

WAC 246-205-990 Fees. (1) The department shall charge fees for issuance and renewal of certificates. The department shall set the fees by rule.

(2) The fees shall cover the cost of issuing certificates, filing papers and notices, and administering this chapter. The costs shall include reproduction, travel, per diem, and administrative and legal support costs.

(3) Fees are nonrefundable and shall be in the form of check or money order made payable to the department.

(4) The department shall require payment of the following fees upon receipt of application:

(a) Twenty-five dollars shall be assessed for each initial, renewal, or reciprocal worker certificate application.

(b) Twenty-five dollars shall be assessed for each initial, renewal, or reciprocal supervisor certificate application.

(c) Five hundred dollars shall be assessed for each initial, renewal, or reciprocal authorized contractor certificate application. The applicant's certificate shall expire annually on the expiration date of the contractor's license issued under the provisions of chapter 18.27 RCW.

(d) Two hundred dollars shall be assessed for each initial application and fifty dollars shall be assessed for each renewal application for illegal drug manufacturing or storage site decontamination training course approval.

[Statutory Authority: RCW 64.44.060 and chapter 64.44 RCW. 91-04-007 (Order 125SB), § 246-205-990, filed 1/24/91, effective 4/1/91.]

Chapter 246-215 WAC FOOD SERVICE

WAC

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246-215-270	Variance clause.
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246-215-290	Separability clause.
246-215-300	Penalty clause.

**DISPOSITION OF SECTIONS FORMERLY
CODIFIED IN THIS CHAPTER**

246-215-009	Definitions. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-009, filed 12/27/90, effective 1/31/91; 84-14-090 (Order 274), § 248-84-002, filed 7/3/84; 80-14-059 (Order 203), § 248-84-002, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-109	Construction and maintenance of physical facilities. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-109, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-055, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-019	Food supplies. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-019, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-010, filed 10/1/80; Regulation .84.010, filed 6/4/63; Regulation .84.010, effective 3/11/60.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-119	Mobile units. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-119, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-060, filed 10/1/80; Regulation .84.060, filed 6/4/63; Rules (part), effective 3/11/60.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-029	Food protection and storage. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-029, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-015, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-129	Bulk foods, storage, and display. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-129, filed 12/27/90, effective 1/31/91; 84-14-090 (Order 274), § 248-84-062, filed 7/3/84.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-039	Food preparation, display, service and transportation. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-039, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-020, filed 10/1/80; Regulation .84.020, filed 6/4/63; Regulation .84.020, effective 3/11/60.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-139	Temporary food service establishments. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-139, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-065, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-049	Personnel. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-049, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-025, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-149	Permits required, suspension and revocation procedures. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-149, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-070, filed 10/1/80; Regulation .84.070 (part), filed 6/4/63; Rules (part), effective 3/11/60.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-059	Sanitary design, construction, and installation of equipment and utensils. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-059, filed 12/27/90, effective 1/31/91; 84-14-090 (Order 274), § 248-84-030, filed 7/3/84; 80-14-059 (Order 203), § 248-84-030, filed 10/1/80; Regulation .84.030, filed 6/4/63; Regulation .84.030 effective 3/11/60.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-159	Service of notices. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-159, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-075, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-069	Equipment and utensil cleaning and sanitation. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-069, filed 12/27/90, effective 1/31/91; 84-14-090 (Order 274), § 248-84-035, filed 7/3/84; 80-14-059 (Order 203), § 248-84-035, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-169	Hearings. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-169, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-080, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-079	Sanitary facilities and controls. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-079, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-040, filed 10/1/80; Regulation .84.040, filed 6/4/63; Regulation .84.040, effective 3/11/60.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-179	Inspections. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-179, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-085, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-089	Garbage and rubbish. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-089, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-045, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.	246-215-189	Examination—Hold orders—Condemnation—Destruction of food. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-189, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-090, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
246-215-099	Insect and rodent control. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-099, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-100, filed 10/1/80.] Repealed	246-215-199	Review of plans. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-199, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-095, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
		246-215-209	Procedure when infection is suspected. [Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-215-209, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-100, filed 10/1/80.] Repealed

- by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
- 246-215-219 Variance clause. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-215-219, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-105, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
- 246-215-229 Interpretation. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-215-229, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-110, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
- 246-215-239 Sulfiting agents. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-215-239, filed 12/27/90, effective 1/31/91; 85-11-024 (Order 288), § 248-84-120, filed 5/13/85.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
- 246-215-500 Separability clause. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-215-500, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-500, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.
- 246-215-900 Penalty clause. [Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-215-900, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-900, filed 10/1/80.] Repealed by 92-08-112 (Order 261B), filed 4/1/92, effective 5/2/92. Statutory Authority: RCW 43.20.050.

WAC 246-215-001 Purpose and authority. The purpose of chapter 246-215 WAC is to establish state board of health standards for food service under RCW 43.20.050 to promote and protect the health, safety, and well-being of the public and prevent the spread of disease by food.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-001, filed 4/1/92, effective 5/2/92; 91-02-051 (Order 124B), recodified as § 246-215-001, filed 12/27/90, effective 1/31/91; 80-14-059 (Order 203), § 248-84-001, filed 10/1/80; Regulation .84.001, filed 6/4/63; Regulation .84.001, effective 3/11/60.]

WAC 246-215-010 Definitions. (1) "Abbreviations":

- (a) "FDA" means United States Food and Drug Administration.
- (b) "HACCP" means hazard analysis, critical control point.
- (c) "PPM" means parts per million.
- (d) "USA" means United States of America.
- (e) "USDA" means United States Department of Agriculture.
- (f) "WSDA" means Washington state department of agriculture.
- (2) "Adulterated" means the altered condition of food including:
- (a) Bearing or containing any poisonous or deleterious substance in a quantity rendering food injurious to health;
- (b) Bearing or containing any added poisonous or deleterious substance where no safe tolerance has been established by regulation, or exceeding such tolerance if one has been established;
- (c) Consisting in whole or in part of any filthy, putrid, or decomposed substance, or otherwise being unfit for human consumption;
- (d) Processing, preparing, packing, or holding potentially hazardous foods under improper time-temperature conditions

or under other conditions increasing the probability of food contamination with excessive microorganisms or physical contaminants;

(e) Processing, preparing, packing, or holding food under insanitary conditions increasing the probability of food contamination or cross-contamination;

(f) Holding or packaging food in containers composed, in whole or in part, of any poisonous or deleterious substance rendering the contents potentially injurious to health; or

(g) Containing any product of a diseased animal, or an animal dying by means other than by slaughter, except as permitted under WAC 246-215-020(6).

(3) "Approved" means acceptable to the health officer based on his/her determination regarding conformance with appropriate standards and public health practice.

(4) "Approved source" means foods which are obtained by the food service establishment owner from persons who comply with applicable federal, state and local laws, ordinances and regulations.

(5) "Aquatic foods" means foods grown in or harvested from water, including all types of fish, shellfish and mollusks, edible crustacea, reptiles, amphibians, and mixtures containing aquatic foods and synthetic foods, such as surimi.

(6) "Base of operation" means an approved site for servicing, cleaning, sanitizing, supplying, and maintaining a mobile food unit.

(7) "Bed and breakfast" means a private home or inn offering lodging on a temporary basis to travelers, tourists, and transient guests which provides food service only to registered guests.

(8) "Bulk food" means processed or unprocessed food in containers where consumers withdraw desired quantities.

(9) "Caterer" means a person or food service establishment contracted to prepare food in an approved facility for final cooking or service at another location.

(10) "Commissary" means an approved food service establishment where food is stored, prepared, portioned, or packaged for service elsewhere.

(11) "Corrosion-resistant" means a material maintaining original surface characteristics under prolonged contact with food, cleaning compounds, or sanitizing solutions.

(12) "Critical control point" means a location where exercising a preventive measure or procedure eliminates, prevents, or minimizes a hazard or hazards from occurring after that point.

(13) "Cross-contamination" means the process where disease causing organisms are transferred from raw or other foods to equipment or ready-to-eat foods.

(14) "Department" means the Washington state department of health.

(15) "Durable" means capable of withstanding expected use and remaining easily cleanable.

(16) "Easily cleanable" means readily accessible with materials and finish fabricated to permit complete removal of residue by normal cleaning methods.

(17) "Equipment" means all stoves, ovens, ranges, hoods, slicers, mixers, meat blocks, tables, counters, refrigerators, sinks, dish machines, steam tables, and similar items used in the operation of a food service establishment.

(18) "Extensive remodel" means construction in a food service establishment requiring a building permit or plumbing permit, except for signs and fences.

(19) "Food" means any raw, cooked, or processed edible substance, ice, beverage, or ingredient used or intended for use or for sale, in whole or in part, for human consumption.

(20) "Food additive" means substances added directly or indirectly to food.

(21) "Food contact surfaces" means those surfaces of equipment and utensils normally contacting food, and those surfaces where food may drain, drip, or splash back onto surfaces normally in contact with food.

(22) "Food service establishment" means:

(a) A place, location, operation, site, or facility where food is manufactured, prepared, processed, packaged, dispensed, distributed, sold, served, or offered to the consumer regardless of whether or not compensation for food occurs, including but not limited to:

(i) Restaurants, snack bars, cafeterias, taverns, bars;

(ii) Retail food stores, supermarkets, retail meat markets, retail fish markets, retail bakeries, delicatessens;

(iii) Institutional operations licensed by the department or local health officer, such as schools, hospitals, jails, prisons, and child care facilities;

(iv) Central preparation sites, including caterers;

(v) Satellite servicing locations;

(vi) Temporary food service establishments or mobile food units;

(vii) Bed and breakfast operations;

(viii) Remote feeding sites; and

(ix) Vending machines dispensing potentially hazardous foods.

(b) Except for the following:

(i) Private homes where food is prepared or served for consumption by household members and/or their guests;

(ii) Establishments offering only commercially prepackaged nonpotentially hazardous foods;

(iii) Commercial food processing establishments, licensed and regulated by the USDA, FDA, or WSDA; and

(iv) Farmers exempt from licensure under RCW 36.71.090.

(23) "Food service worker" means the permit holder, an individual having supervisory or management duties, and any other person working in a food service establishment.

(24) "Frozen" means the condition of a food when it is continuously stored at or below 10° F.

(25) "Game meat" means warm-blooded and cold-blooded animals, excluding fish and meat food animals as defined by USDA, noncommercially raised and processed without continuous regulatory surveillance, including, but not limited to:

(a) Mammals such as deer, elk, antelope, buffalo, and bear;

(b) Birds; and

(c) Reptiles such as alligator.

(26) "Hazard analysis critical control point (HACCP)" means a method used to reduce the risk of foodborne illness by:

(a) Identifying hazards of high risk foods;

(b) Assessing the hazards posed by each preparation step;

(c) Determining the critical points for controlling hazards;

(d) Monitoring a critical control point or points; and

(e) Implementing immediate and appropriate corrective action when control criteria are not met.

(27) "Health officer" means the city, county, city-county, or district health officer defined under RCW 70.05.010(2), or his/her authorized representative, or the representative of the department.

(28) "Hermetically sealed container" means a properly designed container, intended to keep the contents free of contamination by microorganisms and to maintain the commercial sterility of its contents after thermal processing.

(29) "Imminent or actual health hazard" means:

(a) A breakdown or lack of equipment or power causing improper temperature control for potentially hazardous foods; and/or

(b) Lack of water preventing adequate handwashing or equipment cleaning and sanitizing; and/or

(c) Emergency situations including fire, flood, building collapse, or similar accident or natural disaster; and/or

(d) A sewage backup or sewage contamination within a food service establishment; and/or

(e) An occurrence of an outbreak of foodborne illness linked to the food service establishment.

(30) "Immediate service" means foods served to the public within thirty minutes of preparation.

(31) "Menu" means a written or graphic description of foods prepared and offered for sale or service by a food service establishment.

(32) "Mislabelled" means the presence of any false or misleading written, printed, or graphic material upon or accompanying food or food containers.

(33) "Mobile food unit" means a readily movable food service establishment.

(34) "Modified atmosphere packaging" means a process that completely encases food in an impermeable or partially permeable membrane, with either a partial or complete vacuum; or a gas or mixture of gases surrounding the food. Hermetically sealed containers are not considered to be modified atmosphere packaging.

(35) "Owner" means a person owning and/or responsible for the operation of a food service establishment.

(36) "Perishable food" means foods, other than potentially hazardous foods, where deterioration or spoilage due to loss of moisture or growth of molds and bacteria may occur.

(37) "Person" means any individual, partnership, corporation, association, or other legal entity or agency of state, county, or municipal government, or agency of the federal government which is subject to the jurisdiction of the state.

(38) "Person in charge" means the individual present in a food service establishment and designated supervisor of the food service establishment at the time of inspection or any food service worker present when a designated supervisor is absent.

(39) "pH" means a measure of the amount of acid in a food product.

(40) "Potentially hazardous food" means any natural or synthetic edible item, material, or ingredient in a form supporting rapid and progressive growth of infectious or

toxigenic microorganisms or the slower growth of Clostridium botulinum. Potentially hazardous food:

(a) Includes any food of animal origin, raw, cooked, or processed;

(b) Includes certain cooked or prepared foods of plant origin, including but not limited to:

(i) Potato products;

(ii) Dry legumes;

(iii) Rice;

(iv) Sprouts; and

(v) Cut melons and cut cantaloupes.

(c) Excludes foods:

(i) With a water activity (Aw) value of 0.90 or less;

(ii) With a pH level of 4.6 or below;

(iii) Enclosed in unopened hermetically sealed containers commercially processed to achieve and maintain commercial sterility under nonrefrigerated storage and distribution conditions; and

(iv) Where laboratory evidence acceptable to the health officer indicates no likelihood of rapid or progressive growth of infectious or toxigenic microorganisms or the slower growth of Clostridium botulinum.

(41) "Restructured" means potentially hazardous foods processed and formed so surface contaminants may become incorporated inside the final product.

(42) "Sanitary design" means smooth, nonabsorbent, and easily cleanable.

(43) "Sanitized" means effective bactericidal treatment by a process providing enough accumulative heat or concentration of chemicals for enough time to reduce the bacterial count, including pathogens, to a safe level on food contact surfaces.

(44) "Sealed" means free of cracks or other openings permitting entry or passage of moisture or air.

(45) "Self-service" means any site within a food service establishment where customers dispense their own food or beverages.

(46) "Served" means offered to a person for consumption.

(47) "Single service articles" means utensils designed, fabricated, and intended by the manufacturer for one time use.

(48) "Sulfiting agents" means chemicals used to treat food to increase shelf life and enhance appearance including:

(a) Sulfur dioxide;

(b) Sodium sulfite;

(c) Sodium bisulfite;

(d) Potassium bisulfite;

(e) Sodium metabisulfite; and

(f) Potassium metabisulfite.

(49) "Temporary food service establishment" means a food service establishment operating at a fixed location for not more than twenty-one consecutive days in conjunction with a single event or celebration.

(50) "Time/temperature" means the relationship between the length of time and the specific temperatures to which potentially hazardous foods are subjected during storage, transportation, preparation, cooking, reheating, dispensing, service, or sale.

(51) "Utensil" means any food contact implement used in storing, preparing, transporting, dispensing, serving, or selling of food.

(52) "Water activity (Aw)" means a measure of the amount of moisture available for bacterial growth in a food.

(53) "Wholesome" means in sound condition, clean, free from adulteration, and otherwise suitable for use as human food.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-010, filed 4/1/92, effective 5/2/92.]

WAC 246-215-020 Food supplies. Food service establishment owners shall:

(1) Use or sell food supplies which are:

(a) From approved sources;

(b) In compliance with applicable federal, state, and local laws, ordinances, and regulations;

(c) Clean, wholesome, and free from spoilage and adulteration;

(d) Protected from becoming adulterated;

(e) Safe for human consumption; and

(f) Hermetically sealed containers, processed in an approved commercial food processing establishment, when used.

(2) Use or sell commercially pasteurized fluid milk, fluid milk products, dry milk, and dry milk products which meet the Grade "A" quality standards contained in the most current version of the federal Pasteurized Milk Ordinance, except:

(a) Grade "A" raw milk as defined under RCW 15.36.140 may be sold in the original container for off-premises consumption in retail food stores only;

(b) Unripened raw milk cheese and similar raw milk cultured products may be sold in retail stores for off-premises consumption and may be used in food service establishments, only if the foods are subsequently cooked to a minimum temperature of 165° F; and

(c) Properly fermented raw milk cheeses, produced using a flash heating process and meeting cheese composition requirements described under WAC 246-215-040 (6)(c), may be sold or used in food service establishments and are exempted from the cooking requirements of (b) of this subsection.

(3) Use or sell fresh and frozen shellfish (oysters, clams, mussels, and scallops):

(a) From sources approved by the department; or certified for interstate shipment in accordance with the National Shellfish Sanitation Program (NSSP); and

(b) Which are identified by one of the following methods:

(i) A tag or label containing name, address, state certification number, harvest date, and location attached to bags of unshucked shellfish;

(ii) A label containing name, address, and state certification number attached to containers of shucked shellfish; or

(iii) State certification numbers and harvest location provided on invoices accompanying shellfish.

(4) Use or sell eggs meeting WSDA or USDA standards. The use or sale of ungraded eggs, unpasteurized liquid eggs, except as specified in WAC 246-215-030 (1)(j), or cracked or checked eggs is prohibited.

(5) Use or sell only USDA inspected meat, meat products, poultry, and poultry products. Custom meat facilities defined in RCW 16.49.435 may process or handle

uninspected meat for the household user. Custom meat facilities shall not use or sell uninspected meat to the public.

(6) Use or sell game meat:

(a) Processed in a state agriculture inspected processing plant;

(b) Processed in a processing plant with USDA voluntary inspection;

(c) Imported from outside the USA from a country having an approved program of inspection authorized by USDA or FDA; or

(d) Approved by the health officer for use in the following types of institutions:

(i) Jails and correction facilities; and

(ii) Distributing organizations limited to food banks and soup kitchens specified under RCW 69.80.020.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-020, filed 4/1/92, effective 5/2/92.]

WAC 246-215-030 Food protection. (1) Food service establishment owners shall protect food from potential or actual sources of contamination or adulteration during transporting, storing, preparing, cooking, displaying, and serving by the following methods:

(a) Covering food or food storage containers with tightly fitting covers manufactured from approved materials such as metal, plastic, plastic wrap, or aluminum foil, except:

(i) During necessary preparation or cooling periods;

(ii) When serving food to the customers;

(iii) When displaying or storing fresh, raw, unprocessed whole fruits and vegetables;

(iv) When displaying or storing raw, whole aquatic foods; and

(v) During storage, quarters or sides of meat, and primal cuts may be placed on clean sanitized hooks or racks.

(b) Prohibiting the storage of food under leaking refrigeration condensers, exposed or unprotected sewer lines, leaking water lines, or water lines with accumulations of condensed water;

(c) Storing foods above the floor level to prevent contamination and permit easy cleaning, except:

(i) Floor storage is permitted for foods stored in bulk if contained in impervious covered containers;

(ii) Storage on a floor surface is permitted when beverages are in pressurized beverage containers; or foods are protected by glass, durable plastic, cans, or other waterproof containers; and

(A) Floors beneath the foods are dry and easily cleanable; and

(B) Foods can be easily moved to allow cleaning of the floor.

(d) Prohibiting the storage of food, utensils, or single-service articles in toilet rooms, toilet room vestibules, or garbage rooms;

(e) Labeling foods removed from original containers, unless identity of the food is unmistakable;

(f) Providing protection from contamination through use of a sneeze guard, display case, packaging, or other effective measures;

(g) Minimizing hand contact with foods by:

(i) Using appropriate utensils, including single service food service gloves when practical; and

(ii) Providing tongs, bakery papers, scoops, spatulas, ladles, and similar utensils for handling foods during display or service.

(h) Prohibiting the storage of raw meats, poultry, and aquatic foods above foods requiring no additional cooking before service or in a manner increasing the probability of cross-contamination;

(i) Prohibiting the use of ice for human consumption following use for cold holding or after contamination; or

(j) Prohibiting use of pooled eggs prepared from raw eggs, except:

(i) If used for immediate service; or

(ii) If cooked to 140° F. or above within thirty minutes of breaking.

(k) Prohibiting egg breaking procedures where liquid eggs contact egg shells such as egg breaking machines;

(1) By any other methods approved by the health officer.

(2) In emergency situations when an imminent or actual health hazard exists, the owner or person in charge of a food service establishment shall take appropriate action to prevent adulteration of foods, including the following:

(a) Protecting foods from contamination;

(b) Ensuring proper temperature controls;

(c) Notifying the health officer; and

(d) Destroying contaminated, adulterated, or temperature abused foods after consultation with the health officer.

(3) Food service establishment owners shall:

(a) Prohibit application of sulfiting agents in the food service establishment;

(b) Prohibit the storage of sulfiting agents on the premises unless in packaged form, clearly labeled, and offered for retail sale; and

(c) Allow sulfiting agents only if contained within properly labeled commercially processed foods.

(4) When owners of food service establishments store or display mollusks in live holding systems, they shall protect the mollusks from contamination by:

(a) Requiring an approved source for seawater placed in the system; or

(b) Using a commercial mix for artificial seawater mixed with potable drinking water; and

(c) Completely separating mollusks from crustaceans or fish.

(5) Owners of food service establishments specified in WAC 246-215-020 (6)(d) shall establish control measures for the use of game meat. These control measures designed to prevent illness and approved by the health officer include:

(a) Requiring adequate facilities for butchering and processing;

(b) Designation of a person in charge who is responsible for:

(i) Record keeping of all game meat received and used;

(ii) Insuring separation of raw game meat from all other foods;

(iii) Adequate cooking of all game meat to 165° F. or above; and

(iv) Maintenance of temperature monitoring and control.

(c) Compliance with all other parts of this chapter, unless specified otherwise.

(6) Game meat, except sources specified in WAC 246-215-020 (6)(a), (b), and (c), may only be possessed, handled, and processed by retail food stores:

- (a) When approved by the health officer;
- (b) For hunters who bring their game meat to the retail store and receive the same game meat back after the completion of processing;
- (c) So contamination is avoided by separating raw game meat from all other foods; and
- (d) When all processing of game meat occurs at a separate time than processing of all other meat or meat products.

(7) Owners of food service establishments may sell or serve mold cultured cheeses. The sale or service of moldy cheese is prohibited unless the cheese is reconditioned by removing the mold in the following manner:

- (a) If the cheese has been held under refrigeration, a one-half inch layer is removed and the moldy portions are discarded;
- (b) If the cheese has been held at ambient temperatures, a one inch layer is removed and the moldy portions are discarded;
- (c) The cutting is performed so that mold contamination of the new surfaces is minimized; and
- (d) When cheese has high moisture content such as brie, camembert, cream cheese, or cottage cheese, or where mold filaments have deeply penetrated the surface, the entire cheese shall be discarded.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-030, filed 4/1/92, effective 5/2/92.]

WAC 246-215-040 Public health labeling. (1) Food service establishment owners shall label all food products offered for sale if enclosed in a package or container; except:

- (a) Food products produced on-site;
 - (b) Nonpotentially hazardous bakery products from approved sources; or
 - (c) Single service portions or other packaged foods which are shipped to the food service establishment enclosed within a properly labeled master carton.
- (2) Food service establishment owners shall label modified atmosphere packaged foods in compliance with WAC 246-215-060.
- (3) Food service establishment owners shall ensure labels include:
- (a) The common name of the food;
 - (b) All ingredients, including food additives, in descending order of predominance;
 - (c) The name, city, state, and zip code of the manufacturer; and
 - (d) A packaging date code, when required by law or when the food is potentially hazardous.

(4) Food service establishment owners shall ensure information contained on labels is:

- (a) Accurate;
- (b) Easily readable; and
- (c) In the English language, except that duplicate labeling in foreign languages is allowed.

(5) When labels, menus, or other printed or graphic materials are inaccurate or misleading and a report of illness or injury is associated with the food product, the health officer may:

- (a) Stop sale of the product until correctly labeled;
- (b) Require relabeling of the product; and

(c) Issue public health advisories.

(6) Whenever raw milk or raw milk cheese or similar raw milk products are offered for sale in a food service establishment, the health officer shall:

(a) Require conspicuous labeling of raw milk or products containing raw milk as "raw milk" or "contains raw milk";

(b) Require conspicuous posting of signs near the product that state: "Warning: Raw milk or foods prepared from raw milk, such as unripened or fresh cheese, may be contaminated with dangerous bacteria capable of causing severe intestinal illnesses. Contact your local health department for advice or to report a suspected illness";

(c) Exempt properly fermented raw milk cheeses from the labeling requirements contained in this subsection, provided the cheeses are produced using a flash heating process and they meet the following cheese composition requirements:

- (i) Moisture content of 40% or less;
- (ii) Saline-in-moisture content of 3.75% or greater;
- (iii) Water activity (Aw) of 0.96 or less; and
- (iv) pH of 5.40 or less.

(7) Food service establishment owners shall label packaged or bulk foods containing sulfiting agents at detectable levels as follows:

(a) Accept accurate labels placed on packaged foods by the manufacturer;

(b) Place a label on prepackaged foods stating, "This food contains a sulfiting agent";

(c) Place a sign or label on the bulk food container or in a conspicuous place nearby stating, "The following food or foods contain a sulfiting agent,";

(d) Except these foods may be sold without labeling:

- (i) Wine by the glass;
- (ii) Salad bars; and
- (iii) Delicatessens and similar take-out food facilities when food is prepared on-site.

(8) Food service establishment owners shall provide prominent and conspicuous labels on bulk food display units with at least one of the following:

(a) Manufacturer's or processor's container label plainly in view;

(b) A card, sign, or other appropriate device stating the common name of the food; or

(c) A list of ingredients and any food additives contained in the product.

(9) Food service establishment owners shall ensure accurate labels are present on bulk containers of chemicals and pet foods.

(10) When raw or undercooked meats, eggs, or aquatic foods are offered for immediate service or for sale as ready-to-eat, the health officer shall require these foods to be identified, as such:

- (a) On the menu;
- (b) On the label; or
- (c) On a sign clearly visible to the patrons.

(11) The health officer may approve alternate wording on signs required in subsections (6) and (7) of this section.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-040, filed 4/1/92, effective 5/2/92.]

WAC 246-215-050 Food preparation. (1) The health officer may require a food service establishment owner to limit or modify food preparation and may delete some menu items when the available equipment is inadequate to rapidly cool or reheat, properly cook, hot hold, cold hold, or process potentially hazardous foods.

(2) Food service establishment owners shall prepare, display, serve, and transport food:

- (a) Only with safe and necessary time-temperature steps;
- (b) With a minimum amount of hand contact;
- (c) With suitable utensils;
- (d) On clean, sanitized surfaces:

(i) Washed, rinsed, and sanitized as required under this chapter prior to use; and

(ii) Washed, rinsed, and sanitized to prevent cross-contamination.

(3) Food service establishment owners shall:

(a) Maintain the internal temperature of potentially hazardous food at 45° F. or below, or 140° F. or above, at all times except as provided in these regulations;

(b) Minimize the time potentially hazardous foods remain at room temperature during preparation to a total time of two hours;

(c) Store in-use serving utensils:

(i) In the food product, only if the handle remains out of the food item; except in ice machines;

(ii) In a running water dipper well;

(iii) In water above 140° F., or below 45° F.;

(iv) For ice machines, either on a clean dry surface or in an approved utensil holder; or

(v) By other approved methods;

(vi) Except that in-use serving utensils for nonpotentially hazardous foods may be stored on a clean surface.

(d) Discard any leftover foods already served to a customer; except that packaged, nonpotentially hazardous foods which are still packaged in a sound and sanitary condition, may be re-served. Properly dispensed, nonpotentially hazardous foods such as those dispensed by using squeeze dispensers, covered containers with proper serving utensils, or shaker dispensers, may be re-served.

(e) Ensure all foods served raw are thoroughly washed with potable water before serving;

(f) Prepare potentially hazardous salads and sandwich spread using cold ingredients prechilled to 45° F. or below;

(g) Ensure potentially hazardous foods transported or stored in ice are prechilled to 45° F. or below.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-050, filed 4/1/92, effective 5/2/92.]

WAC 246-215-060 Modified atmosphere packaging.

(1) Modified atmosphere packaging of foods in food service establishments is permitted by the health officer for the following:

(a) Nonpotentially hazardous foods;

(b) Raw meat;

(c) Natural hard or semi-soft cheeses containing live starter culture organisms; and

(d) Foods which are rapidly frozen and are stored frozen until reheated or thawed for immediate service. Foods

frozen under this subsection shall meet all of the following continuous cooling and freezing requirements:

(i) Cooling foods from 140° F. to 70° F. or below within two hours;

(ii) Cooling foods from 140° F. to 45° F. or below within four hours;

(iii) Cooling foods to below 38° F. within twelve hours; and

(iv) Freezing foods completely to below 10° F. within twenty-four hours.

(2) Food service establishment owners shall not perform modified atmosphere packaging on the premises for any foods unless allowed under subsection (1) of this section; except

(3) The health officer may allow additional foods to be modified atmosphere packaged only if an approved HACCP based procedure which controls the growth of bacterial pathogens is in place. Acceptable controls would be:

(a) Maintaining water activity below 0.93;

(b) Maintaining pH below 4.6;

(c) Using processed meats or meat products, poultry, or poultry products produced in a plant regulated by USDA and received in an intact package before modified atmosphere packaging;

(d) Properly curing the food on site using a standard recipe approved by the health officer with an initial sodium nitrite concentration of 120 ppm and 3.5% salt concentration; or

(e) Properly processing uncured meats or poultry on-site by monitoring critical control points established in the HACCP plan specified in subsection (4)(e) of this section.

(4) Whenever foods are modified atmosphere packaged under subsection (3) of this section, the health officer shall require all of the following:

(a) Store the food at 38° F. or below;

(b) Sell the food within fourteen days of packaging;

(c) Prohibit exceeding the original processor's shelf life, if applicable;

(d) Establish critical control points during processing, packaging, and storage;

(e) Monitor critical control points established in (d) of this subsection by any or all of the following:

(i) Routine laboratory testing;

(ii) Measuring refrigerated storage temperatures;

(iii) Measuring temperatures during smoking or cooking processes;

(iv) Providing other information requested by the health officer; and

(f) Maintain accurate records of critical control point monitoring specified in (e) of this subsection, for examination by the health officer;

(g) Attach the following labels:

(i) "Keep refrigerated at 38° F. or below and use within seven days of purchase, unless frozen"; and

(ii) "Sell by month/day/year" with the date established within fourteen days of packaging.

(5) Modified atmosphere packaging of aquatic foods, including fish, is prohibited by the health officer except under subsections (1)(d), (3)(a), (b), or (d) of this section.

(6) The food service establishment owner shall designate a person in charge of all modified atmosphere packaging

operations to be responsible for control measures contained in subsections (4) and (9) of this section.

(7) Modified atmosphere packaged foods packaged in USDA or FDA regulated plants and maintained in intact packages are exempted by the health officer from meeting labeling requirements contained in subsection (4)(g) of this section.

(8) The food service establishment owner shall destroy modified atmosphere packaged foods which have exceeded the requirement for foods to be sold within fourteen days of packaging (contained in subsection (4)(b) of this section), except until that date modified atmosphere packaged foods may be:

(a) Frozen; or

(b) Removed from the packaging and used in the food service establishment.

(9) Modified atmosphere packaged foods which have exceeded the requirement for foods to be sold within fourteen days of packaging (contained in subsection (4)(b) of this section) are prohibited by the health officer from sale.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-060, filed 4/1/92, effective 5/2/92.]

WAC 246-215-070 Temperature control. (1) The food service establishment owner shall:

(a) Provide metal, stem-type, numerically scaled food thermometers accurate to within 2° F. in the appropriate range for the foods being tested;

(b) Ensure thermometers are checked for accuracy;

(c) Be allowed to use digital thermometers or thermocouples to measure temperatures as long as they are accurate to within 2° F. and are capable of measuring all food temperatures contained in (e) of this subsection;

(d) Equip each refrigeration unit with a numerically scaled thermometer accurate to within 3° F. located:

(i) To be easily readable; and

(ii) In the warmest part of the unit.

(e) Ensure food service workers use thermometers to measure food temperatures to attain and maintain safety for potentially hazardous foods during:

(i) Cooking;

(ii) Reheating;

(iii) Hot holding;

(iv) Cooling; and

(v) Cold holding.

(2) Food service workers shall safely thaw potentially hazardous foods:

(a) In refrigeration units at a temperature of 45° F. or less;

(b) Under potable running water of a temperature of 70° F. or less with sufficient water velocity to agitate and float loose food particles into the overflow; or

(c) In an approved cooking unit as part of a continuous cooking process, only when the food depths or thickness for solid foods is less than four inches.

(3) Food service workers shall safely cook all parts of potentially hazardous foods requiring cooking to the following minimum internal temperatures:

(a) 165° F. or above for:

(i) Poultry or any food containing poultry;

(ii) Stuffed meats or stuffing containing meats; and

(iii) Casseroles containing potentially hazardous foods.

(b) 155° F. or above for ground, fabricated, or restructured meats; except that ground beef may be cooked to lower temperatures if specifically ordered by the immediate consumer;

(c) 150° F. or above for pork or any food containing pork;

(d) 130° F. or above for:

(i) Rare roast beef; and

(ii) Rare beef steak, except that beef steak may be cooked to a lower temperature if specifically ordered by the immediate consumer.

(e) 140° F. or above for eggs and foods containing uncooked eggs, unless specifically ordered by the immediate consumer otherwise, except:

(i) Health care facilities such as nursing homes and hospitals shall only use pasteurized eggs or eggs cooked to 140° F. or above unless a physician's statement allows otherwise; and

(ii) Traditionally uncooked or undercooked eggs when used to prepare foods such as eggs benedict, caesar salad, meringue, or hollandaise sauce shall be:

(A) Prepared for immediate service to the customer;

(B) Rapidly cooled and held at 45° F. or less; or

(C) Held hot at 140° F. or above.

(f) 140° F. or above for all other potentially hazardous foods except as specified under (a) through (e) of this subsection;

(g) Except that potentially hazardous foods that have been partially cooked or blanched shall be cooled rapidly using procedures contained in subsection (6) of this section and reheated before service as described in subsection (8) of this section.

(4) Food service establishment owners are prohibited from overnight cooking without temperature monitoring.

(5) Food service workers shall ensure potentially hazardous foods, after initial cooking or reheating, are held hot at or above the following temperatures:

(a) 130° F. for unsliced rare roast beef; or

(b) 140° F. for all other potentially hazardous foods;

(c) Except that overnight hot holding without temperature monitoring is prohibited.

(6) When potentially hazardous foods require cooling or cold holding after preparation, rapid methods of cooling from 140° F. to 45° F. shall be used. Food service workers shall use methods including:

(a) Reducing very viscous foods such as refried beans, chowders, and gravies to a thickness of two inches or less and:

(i) Placing immediately in a refrigerator or in a freezer; and

(ii) Leaving uncovered until cooled to 45° F. or below, while protecting the food from cross-contamination.

(b) Reducing foods not listed in subsection (6)(a) of this section to a thickness of four inches or less and:

(i) Placing immediately in a refrigerator or freezer; and

(ii) Leaving uncovered until cooled to 45° F. or below, while protecting the food from cross-contamination.

(c) Placing liquid foods deeper than four inches into an ice and water bath provided:

(i) The container is immersed to the depth of the food;

(ii) Ice is replaced as it melts;

- (iii) The food is frequently stirred;
- (iv) A metal stem thermometer is used; and
- (v) The food is refrigerated or frozen once cooled to 45°

F.

(d) Using other methods for rapid cooling approved by the health officer, provided the food is cooled from 140° F. to 45° F. or below within four hours.

(7) Food service workers shall ensure potentially hazardous foods requiring cold holding are kept at 45° F. or below by:

- (a) Using mechanical refrigeration;
- (b) Storing in ice provided:
 - (i) The food is prechilled to 45° F. or below;
 - (ii) The container is placed in ice to the height of the

food;

- (iii) Ice is replaced as it melts; and
- (iv) Melt water is frequently drained.

(c) Using refreezable ice or similar products with prior approval by the health officer;

(d) Except cold holding temperatures required for commercially prepared modified atmosphere processed aquatic foods are 38° F. or below.

(8) Food service workers shall ensure potentially hazardous foods previously cooked and cooled are rapidly reheated from 45° F.:

- (a) With no interruption in the reheating process;
- (b) In one hour or less;
- (c) To the following minimum temperatures:

(i) 165° F. for foods prepared in any food service establishment; or

(ii) 140° F. for foods prepared in any food processing establishment under jurisdiction of USDA or FDA only for initial reheating.

(d) In equipment designed to meet the performance standards provided in this subsection; and

(e) With frequent stirring for liquid or semi-solid potentially hazardous foods.

(9) Food service workers may reheat completely cooked potentially hazardous foods with no minimum reheating temperature only if they are:

- (a) Served either hot or cold; and
- (b) Reheated to order in individual portions when ordered by the consumer.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-070, filed 4/1/92, effective 5/2/92.]

WAC 246-215-080 Personal hygiene. (1) Food service workers shall wash their hands, including fingernails, in an approved handwashing facility by applying soap, using warm water, scrubbing thoroughly, rinsing, and then drying, using methods which prevent recontamination:

- (a) Before starting work; and
 - (b) During work, as often as necessary to prevent contamination of foods:
 - (i) After using the toilet;
 - (ii) After handling raw meat, poultry, or aquatic foods;
 - (iii) After handling unclean items;
 - (iv) After eating or smoking; and
 - (v) Before preparing ready-to-eat foods.
- (2) Food service workers shall:

- (a) Wear clean outer garments;

- (b) Maintain a high degree of personal cleanliness; and
- (c) Restrain hair as necessary.

(3) The food service establishment owner shall ensure bactericidal and viricidal hand rinses are used only in addition to approved handwashing methods.

(4) The food service establishment owner shall ensure eating or use of tobacco in any form by food service workers is permitted only in designated areas approved by the health officer.

(5) The food service establishment owner shall provide adequate facilities for the orderly storage of food service workers' clothing and personal belongings.

(6) The person in charge of the food service establishment shall ensure all food service workers:

(a) Comply with the provisions of chapter 69.06 RCW and chapter 246-217 WAC;

(b) Obtain valid food and beverage service worker permits within thirty days of employment; and

(c) Maintain current food and beverage service worker permits.

(7) The person in charge of the food service establishment must display or file the food and beverage service workers permits, or copies thereof, where they are available for inspection by the health officer upon request.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-080, filed 4/1/92, effective 5/2/92.]

WAC 246-215-090 Sanitary design, construction, and installation of equipment and utensils. (1) Food service establishment owners shall use equipment and utensils designed and of such materials and workmanship to be:

- (a) Smooth;
- (b) Easily cleanable;
- (c) Durable;
- (d) In good repair; and
- (e) In conformance with the current standards and listings of the National Sanitation Foundation or equivalent.

(2) Food service establishment owners shall ensure food contact surfaces of equipment and utensils are:

- (a) Made of food grade material;
- (b) Smooth;
- (c) Easily accessible for cleaning;
- (d) Nontoxic;
- (e) Corrosion resistant; and
- (f) Nonabsorbent.

(3) When single service articles are used, the food service establishment owner shall ensure they are:

- (a) Made from clean, sanitary, and safe materials; and
- (b) Prohibited from reuse.

(4) Food service establishment owners shall install and maintain equipment to:

- (a) Facilitate cleaning of equipment and adjacent areas; and
- (b) Avoid placement under:
 - (i) Exposed or unprotected sewer lines;
 - (ii) Open stairwells;
 - (iii) Unprotected insulation; and
 - (iv) Other sources of contamination.

(5) Owners shall ensure food service establishments using equipment or utensils requiring cleaning and sanitizing are equipped with either:

(a) Approved mechanical dishwashing facilities and a sink with a minimum of two compartments in the dishwashing area;

(b) A sink with a minimum of three compartments, a space for soiled utensils ahead of the first compartment, and a drainboard for clean utensils when no mechanical dishwasher is available, or when utensils cannot be cleaned and sanitized in the mechanical dishwasher due to size or configuration; or

(c) A sink with a minimum of two compartments, a space for soiled utensils ahead of the first compartment, and a drainboard for clean utensils when:

(i) Only single service articles are provided for use by the consumer, very minimal utensil washing is needed, and the health officer determines it is consistent with the intent of the regulations; and

(ii) Only single service articles are provided for use by the consumer, only nonpotentially hazardous foods and ingredients are used, and the health officer determines it is consistent with the intent of the regulations.

(6) Food service establishment owners shall provide sink compartments of sufficient size to accommodate the largest utensil.

(7) Food service establishment owners of bars and taverns shall provide a sink compartment for disposing of liquid waste in addition to sinks necessary for cleaning and sanitizing.

(8) Food service establishment owners shall provide sufficient food preparation sinks in which foods may be:

(a) Washed, soaked, rinsed, or drained;

(b) Cooled or thawed; or

(c) Processed in a manner requiring placement in a sink.

(9) Food service establishment owners shall prohibit use of food preparation sinks for:

(a) Handwashing;

(b) Utensil washing; and

(c) Other activities which may contaminate foods.

(10) Food service establishment owners shall provide a mop sink or equivalent fixture capable of supplying and disposing of water for cleaning floors, walls, and other nonfood contact surfaces.

(11) The health officer may exempt food service establishment owners from subsections (5)(a), (7), (8), and (10) of this section when:

(a) A plan review was approved prior to the effective date of these regulations;

(b) The food service establishment was constructed prior to the effective date of these regulations; or

(c) The menu, method of food preparation, and volume of food preparation present no health hazard.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-090, filed 4/1/92, effective 5/2/92.]

WAC 246-215-100 Equipment and utensil cleaning and sanitizing. (1) The following articles shall be thoroughly washed, rinsed, and sanitized by a food service worker after each use:

(a) Utensils; and

(b) Food contact surfaces of equipment, except cooking surfaces.

(2) All utensils and food contact surfaces of equipment used in preparation, service, display, or storage of potentially hazardous food shall be sanitized by a food service worker:

(a) Following any interruption of operations during which contamination of the food contact surfaces may have occurred; and

(b) Whenever contamination has occurred.

(3) When equipment and utensils are used for the preparation of potentially hazardous foods on a continuous or production line basis, the food service establishment owner shall ensure utensils and the food contact surfaces of equipment are washed, rinsed, and sanitized. The health officer, based on food temperatures, type of food, and amount of particle accumulation shall specify the minimum time interval between cleaning operations.

(4) The food service establishment owner shall ensure cleaning and sanitizing of food contact surfaces of equipment and utensils are accomplished by first prescraping or pre-rinsing and then by either of the following methods:

(a) Manual dishwashing in proper sequence:

(i) Washing in a clean, hot detergent solution;

(ii) Rinsing in clean, warm water;

(iii) Sanitizing by immersion for at least one minute in:

(A) A chemical sanitizing solution at proper concentration as described in C.F.R. 21.178; or

(B) A mechanically heated sink at a temperature of at least 170° F.; and

(iv) Air drying; or

(b) Mechanical dishwashing which washes and then sanitizes by:

(i) A high temperature final rinse with a minimum of 180° F. measured by the gauge;

(ii) A high temperature final rinse with a minimum of 160° F. measured at the surface of the utensil;

(iii) An approved concentration of chemical sanitizer as described in C.F.R. 21.178 which is automatically dispensed; or

(iv) A method approved by the health officer consistent with the intent of the regulations.

(5) The food service establishment owner shall ensure cleaned and sanitized equipment, utensils, and single service articles are stored to:

(a) Protect from all sources of contamination; and

(b) Minimize unnecessary handling.

(6) Food service workers shall ensure wiping cloths used for cleaning up food spills or wiping work surfaces, table surfaces, high chairs, equipment, utensils, or foodworkers' hands are:

(a) Kept in a clean, sanitary condition at all times;

(b) Moistened with an approved sanitizing solution at all times when in use; and

(c) Stored in a proper concentration of sanitizing solution between uses.

(7) Food service workers shall be responsible for monitoring sanitizing operations by:

(a) Checking temperature gauges;

(b) Measuring chemical concentrations with appropriate methods; or

(c) Using premeasured sanitizing packages or tablets, following label directions.

(8) The food service establishment owner shall ensure:

(a) Wiping cloths used for removing food spills from tableware such as plates or bowls, are clean, dry, and used for no other purposes;

(b) Cooking surfaces of equipment are cleaned at least once daily; and

(c) Nonfood contact surfaces of equipment are cleaned at such intervals to keep them clean and in a sanitary condition.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-100, filed 4/1/92, effective 5/2/92.]

WAC 246-215-110 Poisonous or toxic materials. (1)

Food service establishment owners shall allow poisonous or toxic materials on the premises only under the following conditions:

(a) When necessary and intended for the operation and maintenance of the food service establishment;

(b) When used to prevent or control pests;

(c) When used to clean and sanitize equipment, utensils, and work surfaces; or

(d) When offered for sale in a retail food store, grocery, or similar food service establishment, provided these materials are separated from food and single-service articles by:

(i) Spacing;

(ii) Partitioning;

(iii) Dividers; or

(iv) Storage below food or single-service articles.

(2) Food service establishment owners shall ensure commercially filled containers of poisonous or toxic materials are labeled in accordance with Environmental Protection Agency regulations. Small containers may be filled or taken from a properly labeled container only when identified with the common name of the material.

(3) Food service establishment owners shall ensure poisonous or toxic materials are stored and used:

(a) In accordance with the manufacturer's label requirements;

(b) In a manner preventing adulteration of food and contamination of food contact surfaces, utensils, and single-service articles; and

(c) So food service workers and other persons are protected from potential health and safety hazards.

(4) Food service establishment owners shall ensure lubricants used on food contact surfaces of equipment are nontoxic.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-110, filed 4/1/92, effective 5/2/92.]

WAC 246-215-120 Sanitary facilities and controls. (1)

Food service establishment owners shall ensure:

(a) Their water source is;

(i) Adequate in quantity and quality;

(ii) Supplied by a source approved under chapter 246-290 WAC (formerly chapter 248-54 WAC); and

(iii) Monitored according to standards established by the health officer.

(b) Use of bottled water from an approved source; and

(c) Ice used for any purpose is:

(i) Made from an approved water source; and

(ii) Manufactured, stored, transported, and handled in a sanitary manner.

(2) Food service establishment owners shall dispose of all liquid waste including gray water, mop water, and ice melt:

(a) Into a public sewer system;

(b) Into an approved on-site sewage disposal system; or

(c) In another manner approved by the health officer.

(3) Food service establishment owners shall ensure plumbing is:

(a) Sized, installed, and maintained in accordance with applicable state and local plumbing codes;

(b) Free of cross connections between potable water supplies and:

(i) Nonpotable or questionable sources of water; or

(ii) Chemical feed lines or similar devices.

(c) Indirectly drained from ice machines, food preparation sinks, beverage ice sinks, salad bars, dipper wells, and mechanical dishwashers, into:

(i) A floor sink;

(ii) Hub drain; or

(iii) A similar device.

(4) Food service establishment owners shall install a properly vented dual check valve device or an approved reduced pressure backflow assembly between copper pipe or tubing and carbonated beverage dispensing machines. Carbonated beverage dispensing machines installed before the effective date of these regulations are exempt from this requirement.

(5) Food service establishment owners shall ensure toilets for food workers are:

(a) Provided within the food service establishment; or

(b) Convenient to food workers and within two hundred feet of the food service establishment.

(6) Food service establishment owners shall ensure toilet facilities for patrons are provided within, or convenient to, the food service establishment when:

(a) Customer seating for on-premises consumption of food or drink is provided; and

(b) The food service establishment was constructed or extensively remodeled after the effective date of these regulations.

(7) Toilet facilities may be used jointly by patrons and food service workers, provided patrons accessing the facility are excluded from food preparation and storage areas.

(8) Food service establishment owners shall ensure all toilet facilities are:

(a) Of sanitary design;

(b) Kept clean;

(c) In good repair;

(d) Provided with toilet paper; and

(e) Provided with easily cleanable waste storage receptacles.

(9) Food service establishment owners shall ensure hand sinks are:

(a) Accessible to food workers at all times;

(b) Located to permit convenient use by all food workers in food preparation, food service, and utensil washing areas and in, or immediately adjacent to, toilet facilities; and

(c) Used exclusively for hand washing.

(10) Food service establishment owners shall be responsible for maintenance of hand sinks designated for use by food service workers and patrons and ensure each hand sink is:

- (a) Provided with hot, at a minimum temperature of 100° F., and cold running water provided through a mixing faucet;
- (b) Provided with hand soap;
- (c) Provided with single use towels or other hand drying devices approved by the health officer; and
- (d) Kept clean and in good repair.

(11) Food service establishment owners shall ensure hand operated automatic faucets have a minimum cycle of fifteen seconds.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-120, filed 4/1/92, effective 5/2/92.]

WAC 246-215-130 Garbage, rubbish, and litter.

The food service establishment owner shall:

(1) Properly store and dispose of all garbage, rubbish, and litter in and around a food service establishment. Storage prior to disposal shall be in containers that are:

- (a) Durable;
- (b) Easily cleanable;
- (c) Insect and rodent proof;
- (d) Nonabsorbent;
- (e) In sound condition;
- (f) Watertight; and
- (g) Kept covered with tight fitting lids except when stored in a closed, pest-proof room or enclosure.

(2) Dispose of liquid wastes as waste water when collected from:

- (a) Leaking garbage containers;
- (b) Garbage compacting operations; or
- (c) Cleaning operations.

(3) Store all other rubbish in containers or other areas in a manner approved by the health officer.

(4) Use rooms, enclosures, areas, and containers adequate in size and number for garbage storage.

(5) Prevent overflows and nuisances caused by garbage, rubbish, and litter by:

- (a) Ensuring frequent disposal;
- (b) Providing adequate cleaning facilities; and
- (c) Ensuring that containers, rooms, and areas are cleaned as needed.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-130, filed 4/1/92, effective 5/2/92.]

WAC 246-215-140 Pests and pest control.

Food service establishment owners shall:

(1) Take effective measures to minimize:

- (a) Entry of pests such as rodents and insects; and
- (b) Presence of pests.

(2) Ensure the premises are kept in such condition to prevent:

- (a) Harborage of pests; and
- (b) Feeding of pests.

(3) Ensure only pesticides labeled for use in food service areas are stored on the premises or used to eliminate or control pests.

- (4) Ensure pesticides are stored:

- (a) In cabinets;
- (b) In a physically separate place used for no other purpose; and

(c) Below or separate from food, food equipment, utensils, or single service articles.

(5) Ensure that pesticides are applied:

- (a) In accordance with label directions; and

(b) In compliance with Washington state department of agriculture rules located in chapter 16-228 WAC, pesticide regulations, to prevent adulteration of foods and contamination of food contact surfaces.

(6) Employ the services of a licensed pest control operator when the health officer determines:

(a) Measures taken by the owner of the food service establishment are ineffective; or

(b) Pest problems are severe and extend beyond the property boundaries controlled by the food service establishment owner.

(7) Ensure that automatic dispensing aerosol units, if used, are:

(a) Prohibited in all areas where food is prepared or served; and

(b) Installed and used only in areas outside the influence area of ventilation systems and at least twenty feet away from any:

- (i) Food storage area;
- (ii) Food preparation or service area;
- (iii) Unprotected food contact surfaces; and
- (iv) Utensil washing or storage area.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-140, filed 4/1/92, effective 5/2/92.]

WAC 246-215-150 Construction and maintenance of physical facilities.

Food service establishment owners shall:

(1) Ensure floors and floor coverings in all areas are:

- (a) Constructed of easily cleanable materials;
- (b) Kept clean;
- (c) In good repair; and

(d) Coved at the floor/wall junctures, except for carpeted areas.

(2) Provide proper construction of floors and floor coverings with the following characteristics:

- (a) Water impervious construction;
- (b) Grease resistance;
- (c) Durability; and

(d) Drains provided when water or pressure spray methods of cleaning are used, in any of the following areas:

- (i) Food preparation areas;
- (ii) Food and utensil storage areas;
- (iii) Utensil washing areas;
- (iv) Walk-in refrigerators;
- (v) Dressing rooms or locker rooms with shower facilities; and

(vi) Bathrooms where toilets or urinals are located.

(3) Ensure walls, windows, doors, and ceilings in all areas are clean and in good repair.

(4) Ensure that walls are constructed, in addition to requirements in subsection (3) of this section, with the following characteristics:

- (a) Smooth finish;

- (b) Nonabsorbent surfaces; and
- (c) Construction with easily cleanable materials in the following areas:
 - (i) Walk-in refrigerators and freezers;
 - (ii) Food preparation areas;
 - (iii) Utensil washing areas;
 - (iv) Dressing rooms or locker rooms with shower facilities; and
 - (v) Bathrooms.
- (5) Provide:
 - (a) Lighting of at least thirty foot candles in the following:
 - (i) Areas where food is prepared or stored;
 - (ii) Areas where utensils are washed;
 - (iii) Areas where hands are washed;
 - (iv) In bathrooms; and
 - (v) When cleaning is occurring.
 - (b) Proper shields or guards for lights in the food preparation and storage areas.
- (6) Ensure design, installation, and maintenance of ventilation systems in accordance with applicable state and local mechanical and fire codes; and
 - (a) Provide ventilation systems, when necessary, to keep all areas free of excessive:
 - (i) Heat;
 - (ii) Steam;
 - (iii) Condensation;
 - (iv) Fumes and vapors;
 - (v) Obnoxious odors; and
 - (vi) Smoke.
 - (b) Design and maintain ventilation hoods and filters to:
 - (i) Prevent grease and condensate from dripping into food or onto food contact surfaces; and
 - (ii) Allow ready removal of filters for cleaning and replacement.
- (7) Maintain the premises by:
 - (a) Allowing only articles necessary for operation and maintenance of the food service establishment to be stored there;
 - (b) Prohibiting use of any room in the food service establishment as living or sleeping quarters:
 - (i) Except when separated from all food service operations by complete partitions and solid doors; and
 - (ii) Except for bed and breakfasts.
 - (c) Allowing live animals only under the following conditions:
 - (i) Fish, crustacea, and shellfish for food purposes in aquariums;
 - (ii) Fish in aquariums for display or decor;
 - (iii) Patrol dogs accompanying security or police officers; or
 - (iv) Guide dogs or service dogs, as defined under chapter 70.84 RCW, are allowed to accompany a blind, visually handicapped, hearing impaired, or otherwise physically disabled person in all areas of a food service establishment except in food preparation areas.
 - (d) Allowing only food service workers or other persons authorized by the health officer in food preparation and storage areas.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-150, filed 4/1/92, effective 5/2/92.]

WAC 246-215-160 Mobile food units. (1) The owner of a mobile food unit shall comply with the requirements of this chapter, except as allowed in this section.

(2) The health officer may impose additional requirements to protect against health hazards related to the operation of a mobile food unit and may:

- (a) Limit the food preparation steps;
- (b) Restrict the mode of operation when facilities or equipment are inadequate to protect public health; or
- (c) Prohibit some menu items; and
- (d) When no imminent health hazard will result, may waive or modify requirements of this chapter.

(3) The person in charge of the mobile food unit shall ensure:

- (a) All foods, including ice, are from an approved source or commissary; and
- (b) All prepackaged foods are properly labeled, except when prepared in and sold from the same mobile food unit.
- (4) The person in charge of the mobile food unit shall ensure proper temperature control of potentially hazardous foods on the unit by:

(a) Prohibiting cooling of potentially hazardous foods or ingredients;

(b) Allowing only potentially hazardous foods that have been cooked and cooled in an approved commissary to be reheated in individual portions for immediate service;

(c) Allowing only foods processed in commercial food processing plants to be reheated from 45° F. to 140° F. or above within one hour when reheated at the commissary or when reheated on the mobile unit after leaving the commissary.

(d) Prohibiting cooking of raw meats greater than one inch in thickness;

(e) Preheating hot holding equipment and prechilling cold holding equipment before loading potentially hazardous food onto the mobile unit; and

(f) Monitoring temperatures of potentially hazardous foods with a thermometer.

(5) The person in charge of the mobile food unit shall ensure:

(a) Preparation steps for potentially hazardous foods are minimized to decrease risk of foodborne illness;

(b) Facilities are adequate for all food preparation steps on the mobile unit; and

(c) Daily preparation of potentially hazardous foods prepared on the mobile unit.

(6) The owner of a mobile food unit shall:

(a) Allow only food service workers and persons authorized by the health officer to be present in the mobile food unit; and

(b) Ensure that all food service workers in the mobile food unit have current food and beverage service workers permits, unless all foods are prepackaged and nonpotentially hazardous.

(7) The owner of a mobile food unit shall ensure cold holding of potentially hazardous foods is accomplished by use of:

(a) Mechanical refrigeration; or

(b) Ice, when all food is prechilled and packaged in sealed containers.

(8) The owner of a mobile food unit shall only provide single service articles for use by the consumer.

(9) When a mobile food unit has a water supply:

(a) The source and system design shall be approved by the health officer;

(b) The capacity of the system shall be sufficient to furnish enough hot and cold water for each of the following procedures if they occur on the mobile food unit:

- (i) Food preparation;
- (ii) Utensil cleaning;
- (iii) Sanitizing;
- (iv) Handwashing; and
- (v) Facility cleaning.

(10) The owner of a mobile food unit with a water system shall ensure:

(a) All liquid waste is stored in a wastewater retention tank with at least fifteen percent more capacity than the water tank; and

(b) Wastewater is retained on the mobile food unit until disposed of by a method approved by the health officer.

(11) The owner of a mobile food unit shall provide:

(a) A three-compartment sink with hot and cold running water to wash, rinse, and sanitize utensils when equipment or utensils are reused on the mobile food unit; except

(b) This requirement may be waived or modified by the health officer when:

- (i) Limited food preparation occurs; or
- (ii) Additional clean utensils are available and utensil washing can take place at an approved base of operation.

(12) The person in charge of the mobile food unit shall provide a separate handwashing facility for food workers consisting of:

- (a) A sink with potable, warm, running water;
- (b) Soap; and
- (c) Paper towels.

(13) Food workers may use a three-compartment utensil washing sink for handwashing if:

(a) The mobile food unit owner locates it in the food preparation area; and

(b) The health officer determines that periodic handwashing will not interfere with washing of utensils.

(14) When only prepackaged food items are served, the health officer may waive or modify requirements for handwashing.

(15) The person in charge of the mobile food unit shall ensure toilet facilities for food workers are available and readily accessible within two hundred feet of the unit during operation.

(16) The owner of a mobile food unit or permit applicant shall submit properly prepared plans and specifications of the mobile food unit, base of operation, and/or commissary to the health officer for approval before:

- (a) Construction or remodeling begins;
- (b) The menu of the mobile food unit is changed; or
- (c) The method of food preparation is changed.

(17) The owner or permit applicant shall include in the plan:

- (a) Menu and food preparation steps;
- (b) Floor plan;
- (c) Equipment specifications and location;
- (d) Finish schedule;
- (e) Proposed itinerary or sites to be served;

(f) Source of water and specifications of the on-board plumbing;

(g) Site used for sewage disposal;

(h) Availability of restrooms for food service workers; and

(i) Base of operation or commissary.

(18) The permit applicant shall obtain approval from the department of labor and industries, if necessary.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-160, filed 4/1/92, effective 5/2/92.]

WAC 246-215-170 Customer self-service of food and bulk food dispensing. (1) Food service establishment owners shall protect foods from adulteration and contamination during customer self-service by:

(a) Designating a person to be responsible for the customer self-service area. This person shall:

(i) Monitor the customer self-service and bulk food areas to prevent tampering and contamination of foods;

(ii) Ensure adequate temperature control of potentially hazardous foods by:

(A) Cooking, reheating, or prechilling foods before offering for sale;

(B) Monitoring food temperatures with a metal stem thermometer; and

(C) Correcting improper storage practices.

(iii) Clean up any spills that occur and rotate stock;

(iv) Clean and sanitize storage containers and utensils used for food storage or handling of foods; and

(v) Dispose of any bulk foods returned to the food service establishment or contaminated by customers.

(b) Separating all bulk food display units from any containers of chemicals which might contaminate bulk foods and from pet foods by approved methods including one of the following:

(i) Horizontal separation, different aisles, or partitions between bulk foods and chemicals or pet foods; or

(ii) Vertical separation with chemicals or pet foods stored below bulk foods.

(c) Storing and dispensing all foods on display for customer self-service or bulk foods by one of the following:

(i) Gravity dispensing units;

(ii) Display units or storage containers with covers or lids; or

(iii) Foods on display while being held hot or cold shall be protected with a properly designed sneeze guard, display case, or easily movable cover.

(2) Food service workers shall utilize:

(a) Proper utensils when required in this section using the following:

(i) Properly designed and cleaned scoops, spatulas, tongs, and similar dispensing utensils present in or on each display unit;

(ii) In-use serving utensils stored in the food with the handles extending out of the food; or

(iii) Dispensing utensils stored clean and dry between uses in a protective enclosure or utensil holder.

(b) Containers for display of ready-to-eat foods with the lowest access point at least thirty inches above floor level, except for:

(i) Raw fruits and vegetables;

- (ii) Honey;
- (iii) Oil; or
- (iv) Similar liquids as approved by the health officer.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-170, filed 4/1/92, effective 5/2/92.]

WAC 246-215-180 Bed and breakfast food service operations. (1) Owners of bed and breakfast homes and inns shall comply with all food supply, food handling, personal hygiene, food protection, food service establishment maintenance, permitting, and enforcement requirements under WAC 246-215-020, 246-215-030, 246-215-050, 246-215-060, 246-215-070, 246-215-080, 246-215-090, 246-215-100, 246-215-110, 246-215-120, 246-215-130, 246-215-140, 246-215-200, 246-215-210, 246-215-220, 246-215-230, 246-215-240, 246-215-260 and 246-215-300, except as otherwise provided in this section.

(2) The health officer may impose additional requirements to protect against health hazards related to the food service portion of a bed and breakfast operation and when no health hazard will result, may waive or modify requirements of these regulations.

(3) Owners of bed and breakfast homes and inns may prepare foods in their residential kitchen when:

- (a) All food service is limited to overnight guests;
- (b) Potentially hazardous foods items are prepared for immediate service;
- (c) Cooling and/or reheating of potentially hazardous foods prepared on-site is prohibited;
- (d) A minimum of a three-compartment sink or a sink together with a homestyle dishwasher with 155° F. water provided by a booster or a sanitizing cycle is available and used;
- (e) Food supplies for domestic use are separated from food supplies intended for customer use; and
- (f) Children under age ten and pets are kept out of the kitchen during preparation of foods for bed and breakfast guests.

[Statutory Authority: RCW 43.20.050, 92-08-112 (Order 261B), § 246-215-180, filed 4/1/92, effective 5/2/92.]

WAC 246-215-190 Temporary food service establishments. (1) The owner of a temporary food service establishment shall comply with the requirements of this chapter, except as allowed in this section.

(2) The health officer may impose additional requirements to protect against health hazards related to the operation of the temporary food service establishment and may:

- (a) Limit the preparation steps; or
- (b) Prohibit some menu items; and
- (c) When no health hazard will result, waive or modify requirements of this chapter.

(3) The owner of a temporary food service establishment shall ensure proper time/temperature control by:

- (a) Prohibiting cooling of potentially hazardous foods at temporary food service establishments, except potentially hazardous foods may be cooled before an event if:
 - (i) The food product that was cooled will be served cold; or

(ii) Individual portions of the food are reheated for immediate service;

(iii) The food was cooled in an approved facility with adequate cooling capacity and cold holding facilities; and

(iv) Cooling procedures meet requirements contained in WAC 246-215-070(6).

(b) Ensuring rapid reheating of all potentially hazardous foods from 45° F. to a minimum temperature of 165° F. within thirty minutes, except when individual portions are reheated for immediate service.

(4) The owner of a temporary food service establishment shall safely prepare foods by:

(a) Providing adequate facilities at the temporary food service establishment for all proposed food preparation steps; and

(b) Ensuring all off-site preparation is done in an approved facility.

(5) The owner of a temporary food service establishment shall:

(a) Apply for a permit to operate a temporary food service establishment, as far in advance as possible, to allow adequate time for review by the health officer;

(b) Require the person in charge of the temporary food service establishment to obtain a valid food and beverage service worker permit before beginning work;

(c) Allow only food service workers and other persons authorized by the health officer to be present in a temporary food service establishment;

(d) Require the use of only single service articles for use by consumers;

(e) Separate grills and barbecues from public access by using ropes or other approved methods; and

(f) Construct booths to minimize:

(i) Public access;

(ii) Dust;

(iii) Mud; and

(iv) Overhead contamination.

(6) The owner of a temporary food service establishment shall provide:

(a) Approved hand washing facilities for food workers at the temporary food service establishment with:

(i) Clean, warm, running water;

(ii) Soap; and

(iii) Paper towels.

(b) Readily accessible and available toilet facilities within two hundred feet of the temporary food service establishment; and

(c) Access within two hundred feet to a three compartment sink with running water to wash, rinse, and sanitize utensils when:

(i) Equipment or utensils are reused on-site; or

(ii) The temporary food service establishment operates for two or more consecutive days;

(iii) Except the health officer may approve an alternative utensil cleaning method when three compartment sinks are not available and no health hazard will exist.

(7) The health officer may allow handwashing in a three compartment utensil washing sink only if:

(a) The sink is located in the food preparation area; and

(b) Periodic handwashing will not interfere with washing of utensils.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-190, filed 4/1/92, effective 5/2/92.]

WAC 246-215-200 Permits required, suspension, revocation, enforcement. (1) Any person desiring to operate a food service establishment shall:

(a) Comply with the provisions of these regulations; and
(b) Make written application for a permit on forms provided by the health officer.

(2) Food service establishment owners operating a food service establishment:

(a) Shall possess a valid permit issued to him/her by the health officer;

(b) Shall post the permit conspicuously in the food service establishment;

(c) May be guilty of a misdemeanor pursuant to RCW 70.05.120 and/or local regulations if operating without a valid permit issued by the health officer; and

(d) May be exempt from the permit requirements for the sale of certain foods with prior authorization of the health officer and concurrence of the department.

(3) The health officer may suspend any permit to operate a food service establishment if:

(a) Continued operation of the food service establishment constitutes an imminent or actual health hazard;

(b) Operations, facilities, or equipment in the food service establishment fail to comply with these regulations;

(c) The holder of the permit does not comply with these regulations; or

(d) Interference with the health officer in the performance of his/her duties has occurred.

(4) When the health officer has suspended a food service establishment permit, the person in charge:

(a) Shall immediately cease all food service operations;

(b) Shall be notified in writing by the health officer that the food service establishment permit is immediately suspended upon service of the notice and the suspension shall remain in effect until a hearing with the health officer occurs. If the health officer finds the operation to be in compliance with the requirements of these regulations the suspension will be lifted;

(c) May request a hearing by filing a written request for a hearing with the health officer within ten days of receipt of the notice of suspension; and

(d) Shall be notified, if a written request for a hearing is not filed within ten days, that the suspension is sustained.

(5) Any food service establishment owner whose food service permit has been suspended may at any time make written application for a reinspection for the purpose of reinstatement of the permit. The application shall include a statement, signed by the owner, that in the owners's opinion, the conditions causing the suspension of the permit have been corrected.

(6) Within two working days following receipt of a written request for a reinspection, the health officer shall make a reinspection, and reinstate the permit if the owner of the food service establishment is in compliance with these regulations.

(7) The health officer may use a permit suspension process different from those specified under subsections (3), (4), (5), or (6) of this section, if adopted by the local board of health.

(8) The health officer may revoke a food service permit after providing the owner of the food service establishment an opportunity for a hearing if:

(a) Serious and repeated violation(s) of any requirements of these regulations have occurred; or

(b) Repeated interference with, or assault upon, the health officer in the performance of his/her duty has occurred.

(9) Before revocation, the health officer shall notify, in writing, the owner of the food service establishment or the person in charge of the specific reason(s) why the permit is to be revoked. The notice shall state:

(a) That the permit will be revoked at the end of the ten days following such notice unless a written request for a hearing is filed with the health officer by the owner of the food service establishment within such ten-day period; and

(b) If a request for a hearing is not filed by the owner of the food service establishment within the ten-day period, the revocation of the permit becomes final.

(10) Any owner of a food service establishment whose permit has been revoked by the health officer, after a period of six months may:

(a) Make written application for a new permit; and

(b) Request a hearing with the health officer to determine whether a new permit will be issued.

(11) The health officer may use a permit revocation process different from those specified under subsections (8), (9), and (10) of this section if adopted by the local board of health.

(12) The health officer may initiate any one, or a combination of, compliance methods which include, but are not limited to:

(a) Holding an administration conference with the food service establishment owner or person in charge;

(b) Placing the owner of the food service establishment on probation;

(c) Setting conditions for continued operation of the food service establishment, by the owner, during the probation period;

(d) Requiring additional education and/or training of employees, management, and owners of the food service establishment; and

(e) Completing a hazard analysis critical control point (HACCP) evaluation and requiring monitoring procedures be implemented for critical control points identified.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-200, filed 4/1/92, effective 5/2/92.]

WAC 246-215-210 Service of notices. (1) A notice provided for in these regulations is properly served when it is:

(a) Delivered to the holder of the permit;

(b) Delivered to the person in charge of the food service establishment; or

(c) Sent by registered or certified mail, return receipt requested, to the last known address of the holder of the permit.

(2) A copy of the notice shall be filed in the records of the health officer.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-210, filed 4/1/92, effective 5/2/92.]

WAC 246-215-220 Hearings. (1) The hearings provided for in these regulations shall be:

(a) Conducted by the health officer or his/her designee; and

(b) Conducted at a time and place designated by the health officer.

(2) The health officer or designee shall:

(a) Make a final finding based upon the complete hearing record;

(b) Sustain, modify, or rescind any notice or order considered in the hearing; and

(c) Furnish a written report of the hearing decision to the holder of the permit.

(3) An alternate hearing process, if adopted by a local board of health, may be used.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-220, filed 4/1/92, effective 5/2/92.]

WAC 246-215-230 Inspections and investigations.

(1) Inspections or investigations of a food service establishment:

(a) Shall be performed by the health officer as often as necessary for the enforcement of these regulations;

(b) Shall be required by the health officer:

(i) Before issuing a new permit to a new food service establishment; and

(ii) Following extensive remodeling of a food service establishment.

(c) May be required by the health officer:

(i) For renewal of a permit;

(ii) Before issuing a new permit to an existing food service establishment; and

(iii) For an existing food service establishment when the on-site management has changed.

(2) The person in charge of any food service establishment shall permit the health officer, after proper identification, to enter at any time, for the purpose of making inspections or investigations to determine compliance with these regulations.

(3) The person in charge of the food service establishment shall permit the health officer to examine the records of the establishment to obtain information pertaining to:

(a) Food and supplies purchased, received, or used; and

(b) Any person employed which is pertinent to an illness investigation; or

(c) Other matters which may affect health or the enforcement of these regulations.

(4) The health officer may conduct a HACCP in lieu of, or in addition to, routine inspections. The health officer may investigate to ensure monitoring of critical control points.

(5) Whenever an inspection of a food service establishment is made:

(a) The health officer shall record the findings on an inspection report form approved by the department;

(b) The health officer shall state on the completed inspection report specific violations found, and establish a specific and reasonable period of time for correction; and

(c) The health officer shall furnish a copy of the completed inspection report to the person in charge of the food service establishment at the conclusion of the inspection.

(6) The health officer shall inspect all food service establishments at least once a year.

(7) The health officer shall conduct additional inspections of food service establishments based upon the risk of foodborne illness transmission as determined by:

(a) Types of foods served;

(b) Methods of food preparation and service;

(c) Number of meals served; and

(d) Past history of compliance.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-230, filed 4/1/92, effective 5/2/92.]

WAC 246-215-240 Examination, hold orders, condemnation, and destruction of food.

(1) The person in charge of a food service establishment in which food has been improperly handled, stored, or prepared shall:

(a) Voluntarily destroy the questionable food; or

(b) Contact the health officer to determine if the food is safe for human consumption.

(2) The person in charge of a food service establishment shall denature or destroy any food if the health officer determines the food presents an imminent or actual health hazard.

(3) The health officer may examine or collect samples of food as often as necessary for enforcement of these regulations.

(4) The health officer may, after notice to the person in charge, place a written hold order on any suspect food until a determination on its safety can be made and shall:

(a) Tag;

(b) Label; or

(c) Otherwise identify any food subject to the hold order and complete a department-approved form for all suspect food.

(5) The hold order issued by the health officer shall include:

(a) Instructions for filing a written request for a hearing with the health officer within ten calendar days; and

(b) Notification that if a hearing is not requested in accordance with the instructions provided in the hold order, and the health officer does not vacate the hold order, the food shall be destroyed under the supervision of the health officer.

(6) When foods are subject to a hold order by the health officer the food service establishment owner is prohibited from:

(a) Using;

(b) Serving; or

(c) Moving them from the food service establishment.

(7) The health officer shall permit storage of food under conditions specified in the hold order, unless storage is not possible without risk to the public health, in which case, immediate destruction shall be ordered and accomplished by the owner of the food service establishment.

(8) Based upon evidence provided at the hearing, the health officer shall either:

(a) Vacate the hold order; or

(b) Direct the owner of the food service establishment by written order to:

(i) Denature or destroy such food; or

(ii) Bring the food into compliance with the provisions of these regulations.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-240, filed 4/1/92, effective 5/2/92.]

WAC 246-215-250 Review of plans and menu. (1) The food service establishment owner shall submit properly prepared plans and specifications to the health officer for approval whenever:

- (a) A food service establishment is constructed;
- (b) An existing structure is converted for use as a food service establishment;
- (c) Significant changes to the methods of food preparation or style of service occurs; or
- (d) An existing food service establishment undergoes an extensive remodel, provided that the health officer may waive a complete plan review if:

(i) The remodel does not substantially affect the requirements of these regulations; or

(ii) The health officer requires minor modifications of the existing food service establishment to improve compliance with these regulations.

(2) The health officer shall base plan approval on:

(a) Information on proposed type of menu and style of service, including:

- (i) Type of food to be served;
- (ii) Method of food preparation and type of cooking;
- (iii) Seating capacity and anticipated maximum meals per day;
- (iv) Designation of smoking and nonsmoking sections as applicable;

(v) Methods of customer service;

(vi) Type of customer utensils; and

(vii) Number of employees per shift.

(b) Information on proposed site, including:

- (i) Site plan;
- (ii) Availability of approved public water supply;
- (iii) Availability of approved sewage disposal; and
- (iv) Accessibility for delivery traffic, garbage storage, garbage pickup frequency, and other auxiliary needs.

(c) Information on proposed facilities, including:

- (i) Floor plan;
- (ii) Finishes used on floors, walls, and ceilings;
- (iii) Number, types, and locations of sinks and drain boards;

(iv) Plumbing specifications, such as types and locations of fixtures, drains, and grease traps;

(v) Restroom design and number of fixtures;

(vi) Types and locations of lighting; and

(vii) Types and locations of ventilation, including exhaust hoods, screened windows, or doors.

(d) Information on proposed equipment, including:

- (i) Material and design of food contact surfaces;
- (ii) Refrigeration and shelving design for rapid cooling, prechilling, thawing, and separation of raw meats from other foods;

(iii) Ice-making equipment for supplying ice bath cooling, salad bar, or buffet service;

(iv) Cooking, reheating, and hot holding equipment;

(v) Shelving for dry food storage;

(vi) Mechanical dishwashing machine and associated equipment; and

(vii) Design and installation of equipment, including self-service and display equipment.

(3) The procedure for plan approval is as follows:

(a) The food service establishment owner shall submit plans as described in this chapter;

(b) The health officer shall grant approval if the health officer determines the plans are satisfactory;

(c) The food service establishment owner shall submit a food service permit application and request a preoperational inspection; and

(d) Prior to operation of the food service establishment, the health officer shall provide a preoperational inspection to determine conformance with approved plans and compliance with these regulations.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-250, filed 4/1/92, effective 5/2/92.]

WAC 246-215-260 Procedure when disease transmission is suspected. (1) When a possible foodborne illness incident is reported to any food service employee, the person in charge of the food service establishment shall:

(a) Immediately report the incident to the local health officer; and

(b) Remove from sale and refrigerate any suspect foods, until released by the health officer.

(2) When the health officer suspects that a food service establishment, or its employees, may be a source of a foodborne illness, the health officer shall take appropriate action to control the transmission of disease. Such actions shall include any or all of the following:

(a) Secure records that may enable identification of persons potentially exposed to the disease, and/or require additional assistance in locating such persons;

(b) Secure the illness history of each suspected employee;

(c) Exclude any suspected employee(s) from working in food service establishments until, in the opinion of the health officer, there is no further risk of disease transmission;

(d) Suspend the permit of the food service establishment until, in the opinion of the health officer, there is no further risk of disease transmission;

(e) Restrict the work activities of any suspected employee;

(f) Require medical and laboratory examinations of any food service employee and of his/her body discharges;

(g) Obtain any suspect food for laboratory examination; and

(h) Require the destruction of suspect food or prevent it from being served.

(3) The health officer shall prohibit food handlers with a communicable illness in a disease or carrier state from handling food if the infectious agent can be transmitted through food.

(4) The provisions of chapter 246-100 WAC, Communicable and certain other diseases shall apply.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-260, filed 4/1/92, effective 5/2/92.]

WAC 246-215-270 Variance clause. The health officer, upon written petition of the owner of the food service establishment, may grant a variance to any section of these regulations covering physical facilities, equipment standards, and food source requirements when:

(1) No health hazard would exist as a result of this action; and

(2) The variance is consistent with the intent of these regulations.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-270, filed 4/1/92, effective 5/2/92.]

WAC 246-215-280 Interpretation. (1) These regulations shall be enforced by the health officer in accordance with the interpretations contained in the 1976 edition of the United States Public Health Service, "Food Service Sanitation Manual," where applicable.

(2) When a section of these regulations conflicts with the "Food Service Sanitation Manual," these regulations shall apply.

(3) A local board of health may adopt more stringent regulations than those contained in these regulations.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-280, filed 4/1/92, effective 5/2/92.]

WAC 246-215-290 Separability clause. Should any section, paragraph, clause, or phrase of these rules and regulations be declared unconstitutional or invalid for any reason, the remaining rules and regulations shall not be affected.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-290, filed 4/1/92, effective 5/2/92.]

WAC 246-215-300 Penalty clause. Any person violating, refusing, or neglecting to comply with these regulations shall:

(1) Upon conviction be guilty of a misdemeanor under RCW 70.05.120; or

(2) May be subject to a civil penalty under local health department/district rules and regulations.

[Statutory Authority: RCW 43.20.050. 92-08-112 (Order 261B), § 246-215-300, filed 4/1/92, effective 5/2/92.]

Chapter 246-217 WAC FOOD WORKER PERMITS

WAC

246-217-001	Objective.
246-217-002	Legal authority of the state board of health.
246-217-010	Definitions.
246-217-011	Definitions.
246-217-020	Communicable disease.
246-217-030	Form of permits—Fees.
246-217-040	Requirements for permits.
246-217-050	Examination may be required.
246-217-060	Revocation of permit.
246-217-070	Right of appeal.

WAC 246-217-001 Objective. For the purpose of preventing the spread of infectious diseases and attaining a uniform sanitary standard in the state, it is deemed essential

to require all food workers in the state to demonstrate through the process of an examination that they possess an adequate knowledge of the sanitary principles and practices involved in the preparation, storage, and service of foods and beverages, and in the handling of related equipment and facilities by extending the provisions of chapter 197, Laws of 1957, and (chapter 248-86 WAC), to all such workers.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-001, filed 12/27/90, effective 1/31/91; Regulation .87.001, effective 3/11/60.]

WAC 246-217-002 Legal authority of the state board of health. RCW 69.06.010 and 69.06.020. See also RCW 43.20.050.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-002, filed 12/27/90, effective 1/31/91; Regulation .86.999, effective 3/11/60.]

WAC 246-217-010 Definitions. As used in this chapter of the rules and regulations, the following definitions shall apply:

(1) A "food service worker" shall mean a person engaged in a food and/or beverage establishment and who may contribute to the transmission of infectious diseases through the nature of his contact with food products and/or equipment and facilities. This shall not include persons engaged in food handling operations where the products are sterilized after packaging or in the processing of frozen fruits or vegetables, nor nonsupervisory personnel assisting with food services functions of churches, lodges, granges and similar organizations when such are exempted from collected retail sales tax by rule 169 of the tax commission of the state of Washington as effective May 1, 1935.

(2) The term "food establishment" shall include, but is not limited to, all food handling operations associated with school lunches, carnivals, circuses, intrastate ferries, state institutions, bakeries, shellfish processing plants, caterers, hospitals, nursing homes, maternity homes, boarding homes, child care agencies, churches, lodges, granges, clubs, and food demonstrations.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-010, filed 12/27/90, effective 1/31/91; Regulation .87.002, effective 3/11/60.]

WAC 246-217-011 Definitions. Definitions as used in this chapter of the rules and regulations and in chapter 197, Laws of 1957, (chapter 69.06 RCW) -

(1) "Act" or "this act" means chapter 197, Laws of 1957, (chapter 69.06 RCW).

(2) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association, and the legal successor thereof.

(3) "Director" means the state director of health.

(4) "Department" means the state department of health.

(5) "Jurisdictional health department" refers to one of the following:

(a) Local health district as defined in chapter 70.46 RCW.

(b) City-county health department as defined in chapter 70.08 RCW.

(c) City health department as defined in chapter 70.04 RCW.

(d) County health department as defined in chapter 70.06 RCW.

(6) All other words and designations shall have the meaning as set forth in WAC 248-100-001.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-011, filed 12/27/90, effective 1/31/91; Regulation .86.001, effective 3/11/60.]

WAC 246-217-020 Communicable disease. It shall be unlawful and a violation of these regulations for any person with a communicable disease in the infectious state or a known carrier of a communicable disease or infectious condition to handle, prepare, serve or sell food, food products, or beverages for public consumption and it shall be unlawful and a violation of these regulations for any person to knowingly employ such person so afflicted.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-020, filed 12/27/90, effective 1/31/91; Regulation .87.020, effective 3/11/60.]

WAC 246-217-030 Form of permits—Fees. (1) All permits required by this act shall be issued by the jurisdictional health department and signed by the local health officer or his authorized representative.

(2) All applicants for a permit or renewal of a permit shall pay to the jurisdictional health department a fee in the amount of eight dollars, effective August 1, 1992. Such fee shall be used by the jurisdictional health department to defray the expenses arising out of the administration of this act.

(3) The permit shall conform to the following specifications:

(a) The permit shall be six inches by five inches in size and shall consist of two sections titled as follows:

- (i) Food and beverage service worker's permit, and
- (ii) Food and beverage service worker's health record.

(b) The permit is given to the worker and the health record is kept on file in the health department.

(4) The permit shall contain the following information:

- (a) Number of the permit;
- (b) Signature of the worker;
- (c) Occupation;
- (d) Home address;

(e) The statement, "THIS CERTIFIES THAT has satisfied the requirements of chapter 197, Laws of 1957, and the state board of health for issuance of permit";

- (f) Manual chapters covered in test shall be noted;
- (g) Permit expiration date; and
- (h) Signature of health officer.

(5) On the reverse side of the permit there shall be noted the following:

"Please note: This card is valid only to the employee whose signature appears on the reverse side. It must be filed at place of employment and shown upon request to sanitarian, health officer, or deputy.

**Instructions Governing
Personal Hygiene and Sanitation**

1. Do not work if you are ill with a "catching" sickness, such as sore throat, common cold, diarrhea, or other contagious disease.
2. Notify the health department if you, any person in your home, or your place of business has a contagious disease or a disease suspected of being contagious.
3. Keep your hands and fingernails clean. Wash your hands frequently, particularly every time after going to the toilet, blowing the nose, or handling soiled objects.
4. Use disposal tissue for blowing the nose or spitting. Spitting can be a dangerous habit.
5. Do not pick pimples, boils, or your nose. This is a dangerous source of infection. If you have sores of this kind, keep them covered with a dressing.
6. Handle foods with your fingers as little as possible. Use utensils whenever you can, as in picking up butter, etc.
7. Avoid handling rims of glasses, cups, soup bowls, and eating surfaces of silver.
8. Protect food by keeping it covered from flies, keeping perishable foods and cream-filled pastries properly refrigerated."

(6) The food and beverage service worker's health record shall contain the following information:

- (a) Date issued;
- (b) Number;
- (c) Name;
- (d) Age;
- (e) Sex;
- (f) Home address;
- (g) Occupation;
- (h) Where employed;
- (i) City;
- (j) Typhoid fever No () Yes () Date . . .
- (k) Amoebic dysentery No () Yes () Date . . .
- (l) Laboratory examinations, x-rays, or skin tests:
- (i) Test Result Date . . .
- (ii) Test Result Date . . .
- (iii) Test Result Date . . .
- (m) Manual chapters covered in test shall be noted.

(7) The reverse side of the health record shall contain: "Follow-up remarks."

[Statutory Authority: RCW 43.20.050 and chapter 69.03 RCW. 92-14-093 (Order 286B), § 246-217-030, filed 6/30/92, effective 7/31/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-217-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 69.06 RCW. 87-19-069 (Order 346), § 248-86-010, filed 9/16/87; Regulation .86.010, effective 3/11/60.]

WAC 246-217-040 Requirements for permits. (1) The local health officer shall furnish to applicant for a permit or renewal of permit a copy of the latest edition of the "Food and Beverage Service Workers' Manual," as prepared by the department and approved by the director.

(2) In order to qualify for issuance of a permit or renewal of a permit, the applicant shall demonstrate his knowledge of elementary acceptable practices in the sanitary preparation, service, and storage of food and beverages, and the proper sanitation of equipment and facilities, by satisfactorily completing an examination conducted by the local health officer or his authorized representative on such subjects, based on the practices and procedures set forth in the "Food and Beverage Service Workers' Manual."

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-217-040, filed 12/27/90, effective 1/31/91; Regulation .86.020, effective 3/11/60.]

WAC 246-217-050 Examination may be required. Whenever, in the judgment of the director or any local health officer, circumstances indicate the necessity, specified persons engaged in the preparation, service, or sale of food or unbottled beverages for public consumption shall, upon request of such public health officials and at no additional charge to such persons, submit to examination by the local health officer, or a legally qualified physician designated by him for the purpose of determining the presence of a communicable disease or infection.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-217-050, filed 12/27/90, effective 1/31/91; Regulation .86.040, effective 3/11/60.]

WAC 246-217-060 Revocation of permit. The food and beverage service workers' permit may be revoked by the local health officer, or by the director, upon evidence indicating repeated or continuing violations of accepted procedures and practices in the preparation, service, or storage of food or beverage offered for public consumption, or upon demonstration of the presence of a communicable disease in the infectious state, or an infectious condition of potential hazard to the public or to the persons' co-workers, or for falsification of information required for issuance of the permit.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-217-060, filed 12/27/90, effective 1/31/91; Regulation .86.050, effective 3/11/60.]

WAC 246-217-070 Right of appeal. Any food or beverage service worker whose permit has been revoked by a local health officer, or the director, may appeal to the local board of health, or the state board of health in the event such revocation is by the director, for review of the findings. Such appeal must be in writing and must be filed with the appropriate board of health within ten days of revocation of the worker's permit. While such appeal is pending, the revocation of the worker's permit shall be stayed until such time as the appropriate board of health has reviewed the findings and entered its decision.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-217-070, filed 12/27/90, effective 1/31/91; Regulation .86.060, effective 3/11/60.]

Chapter 246-220 WAC RADIATION PROTECTION—GENERAL PROVISIONS

WAC

246-220-001	Authority.
246-220-002	Purpose.
246-220-003	Scope.
246-220-007	Statement of philosophy.
246-220-010	Definitions.
246-220-020	Records.
246-220-030	Inspections.
246-220-040	Tests and surveys.
246-220-050	Exemptions.
246-220-060	Violations.
246-220-070	Impounding.
246-220-080	Prohibited uses.
246-220-090	Communications.
246-220-100	Additional requirements.
246-220-110	Appendix A—Determination of A ₁ and A ₂ values.
246-220-120	Appendix B—Information on transportation special form licensed material.
246-220-130	Appendix C—The international system of units (SI).

WAC 246-220-001 Authority. Rules and regulations set forth herein are adopted pursuant to the provisions of chapter 70.98 RCW.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-001, filed 12/27/90, effective 1/31/91; Order 1095, § 402-12-010, filed 2/6/76; Order 1, § 402-12-010, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-002 Purpose. It is the purpose of these regulations to state such requirements as shall be applied to the use of all radiation, radiation machines, and radioactive materials to ensure the maximum protection of the public health and the maximum safety to all persons at, or in the vicinity of, the place of use, storage, or disposal thereof. These regulations are intended to be consistent with the best use of radiation machines and radioactive materials.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-002, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-12-030, filed 12/11/86; Order 1095, § 402-12-030, filed 2/6/76; Order 1, § 402-12-030, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-003 Scope. Except as otherwise specifically provided, these regulations apply to all persons who receive, possess, use, transfer, own or acquire any source of radiation, provided, however, that nothing in these regulations shall apply to any person to the extent such person is subject to regulation by the U.S. Nuclear Regulatory Commission.*

Note: *Attention is directed to the fact that regulation by the state of source material, by-product material, and special nuclear material in quantities not sufficient to form a critical mass is subject to the provisions of the agreement between the state and the U.S. Nuclear Regulatory Commission and to Part 150 of the commission's regulations (10 CFR Part 150).

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-003, filed 12/27/90, effective 1/31/91; Order 1095, § 402-12-040, filed 2/6/76; Order 1, § 402-12-040, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-007 Statement of philosophy. In accordance with the recommendations of the Environmental

Protection Agency, formerly the Federal Radiation Council, approved by the president of the United States of America, persons engaged in activities under licenses issued by the Washington state department of health pursuant to the Atomic Energy Act of 1954, as amended, shall, in addition to complying with the requirements set forth in chapter 246-221 WAC, make every reasonable effort to maintain radiation exposures, and releases of radioactive materials in effluents to unrestricted areas, as low as is reasonably achievable. Such persons should make particular efforts to keep the radiation exposure of an embryo or fetus as low as is reasonably achievable during the entire gestation period as recommended by the National Council on Radiation Protection and Measurements. The term "as low as is reasonably achievable" means as low as is readily achievable taking into account the state of technology, and the economics of improvements in relation to benefits to the public health and safety and in relation to the utilization of nuclear energy, ionizing radiation, and radioactive materials in the public interest.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-220-007, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-007, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-10-010, filed 12/8/80; Order 1095, § 402-10-010, filed 2/6/76.]

WAC 246-220-010 Definitions. As used in these regulations, these terms have the definitions set forth below. Additional definitions used only in a certain part will be found in that part.

(1) "A₁" means the maximum activity of special form radioactive material permitted to be transported in a Type A package. "A₂" means the maximum activity of normal form radioactive material permitted to be transported in a Type A package. A₁ and A₂ values are assigned to individual radionuclides and are tabulated in Appendix A of WAC 246-220-110. Methods of calculating values are also given.

(2) "Accelerator produced material" means any material made radioactive by exposing it in a particle accelerator.

(3) "Act" means Nuclear energy and radiation, chapter 70.98 RCW.

(4) "Agreement state" means any state with which the United States Nuclear Regulatory Commission has entered into an effective agreement under section 274 b. of the Atomic Energy Act of 1954, as amended (73 Stat. 689).

(5) "Airborne radioactive material" means any radioactive material dispersed in the air in the form of dusts, fumes, mists, vapors, or gases.

(6) "Airborne radioactivity area" means (a) any room, enclosure, or operating area in which airborne radioactive material exists in concentrations in excess of the amounts specified in Appendix A, Table I, Column 1 of chapter 246-221 WAC; or (b) any room, enclosure, or operating area in which airborne radioactive material exists in concentrations which, averaged over the number of hours in any week during which individuals are in the area, exceed twenty-five percent of the amounts specified in WAC 246-221-290, Appendix A, Table I, Column 1.

(7) "Brachytherapy" means a method of radiation therapy in which sealed sources are utilized to deliver a

radiation dose at a distance of up to a few centimeters, by surface, intracavitary, or interstitial application.

(8) "Byproduct material" means: (a) Any radioactive material (except special nuclear material) yielded in or made radioactive by exposure to the radiation incident to the process of producing or utilizing special nuclear material, and (b) the tailings or wastes produced by the extraction or concentration of uranium or thorium from any ore processed primarily for its source material content.

(9) "Calendar quarter" means not less than twelve consecutive weeks nor more than fourteen consecutive weeks. The first calendar quarter of each year shall begin in January and subsequent calendar quarters shall be so arranged such that no day is included in more than one calendar quarter and no day in any one year is omitted from inclusion within a calendar quarter. No licensee or registrant shall change the method of determining calendar quarters for purposes of these regulations except at the beginning of a calendar year.

(10) "Calibration" means the determination of (a) the response or reading of an instrument relative to a series of known radiation values over the range of the instrument, or (b) the strength of a source of radiation relative to a standard.

(11) "CFR" means Code of Federal Regulations.

(12) "Controlled area." See "Restricted area."

(13) "Curie" means a unit of measurement of radioactivity. One curie (Ci) is that quantity of radioactive material which decays at the rate of 3.7×10^{10} transformations per second (tps). Commonly used submultiples of the curie are the millicurie and the microcurie. One millicurie (mCi) = 0.001 curie = 3.7×10^7 tps. (Formerly referred to as disintegrations per seconds or dps.) One microcurie (uCi) = 0.000001 curie = 3.7×10^4 tps. One picocurie (pCi) = 10^{-12} Ci. One nanocurie (nCi) = 10^{-9} Ci. One tps = 60 dpm.

(14) "Department" means the department of health, division of radiation protection, which has been designated as the state radiation control agency.

(15) "Depleted uranium" means the source material uranium in which the isotope Uranium-235 is less than 0.711 percent by weight of the total uranium present. Depleted uranium does not include special nuclear material.

(16) "dpm" means disintegrations per minute. See also "curie."

(17) "Dose" as used in these regulations shall mean absorbed dose or dose equivalent as appropriate.

(a) "Absorbed dose" is the energy imparted to matter by ionizing radiation per unit mass of irradiated material at the place of interest. The special unit of absorbed dose is the rad. (See rad.)

(b) "Dose equivalent" is a quantity that expresses on a common scale for all radiation a measure of the postulated effect on a given organ. It is defined as the absorbed dose in rads times certain modifying factors. The unit of dose equivalent is the rem. (See rem.)

(18) "Dose commitment" means the total radiation dose to a part of the body that will result from retention in the body of radioactive material. For purposes of estimating the dose commitment, it is assumed that from the time of intake the period of exposure to retained material will not exceed fifty years.

(19) "Exposure" means the quotient of dQ by dm where "dQ" is the absolute value of the total charge of the ions of one sign produced in air when all the electrons (negatrons and positrons) liberated by photons in a volume element of air having "dm" are completely stopped in air. (The special unit of exposure is the roentgen (R).)*

Note: *When not underlined as above the term 'exposure' has a more general meaning in these regulations.

(20) "Exposure rate" means the exposure per unit of time, such as R/min., mR/h, etc.

(21) "Former United States Atomic Energy Commission (AEC) or United States Nuclear Regulatory Commission (NRC) licensed facilities" means nuclear reactors, nuclear fuel reprocessing plants, uranium enrichment plants, or critical mass experimental facilities where AEC or NRC licenses have been terminated.

(22) "Healing arts" means the disciplines of medicine, dentistry, osteopathy, chiropractic, podiatry, and veterinary medicine.

(23) "High radiation area" means any area, accessible to individuals, in which there exists radiation at such levels that a major portion of the body could receive in any one hour a dose in excess of 100 millirems.

(24) "Highway route controlled quantity" means a quantity of radioactive material in a single package which exceeds:

- (a) 3,000 times the A_1 or A_2 quantity as appropriate; or
- (b) 30,000 curies, whichever is least.

(25) "Human use" means the intentional internal or external administration of radiation or radioactive material to human beings.

(26) "IND" means investigatory new drug for which an exemption has been claimed under the United States Food, Drug and Cosmetic Act (Title 10 CFR).

(27) "Individual" means any human being.

(28) "Inspection" means an official examination or observation by the department including but not limited to, tests, surveys, and monitoring to determine compliance with rules, regulations, orders, requirements and conditions of the department.

(29) "Irretrievable source" means any sealed source containing licensed material which is pulled off or not connected to the wireline downhole and for which all reasonable effort at recovery, as determined by the department, has been expended.

(30) "Interlock" means a device arranged or connected such that the occurrence of an event or condition is required before a second event or condition can occur or continue to occur.

(31) "License" means a license issued by the department in accordance with the regulations adopted by the department.

(32) "Licensee" means any person who is licensed by the department in accordance with these regulations and the act.

(33) "Licensing state" means any state with regulations equivalent to the suggested state regulations for control of radiation relating to, and an effective program for, the regulatory control of NARM.

(34) "Major processor" means a user processing, handling, or manufacturing radioactive material exceeding

Type A quantities as unsealed sources or material, or exceeding four times Type B quantities as sealed sources, but does not include nuclear medicine programs, universities, industrial radiographers, or small industrial programs. Type A and B quantities are defined in Section 71.4 of 10 CFR Part 71.

(35) "NARM" means any naturally occurring or accelerator-produced radioactive material except source material.

(36) "Natural radioactivity" means radioactivity of naturally occurring nuclides.

(37) "NDA" means a new drug application which has been submitted to the United States Food and Drug Administration.

(38) "Normal form radioactive material" means radioactive material which has not been demonstrated to qualify as "special form radioactive material."

(39) "Nuclear waste" as used in WAC 246-232-090(5) means any quantity of source or byproduct material, (not including radiography sources being returned to the manufacturer) required to be in Type B packaging while transported to, through, or across state boundaries to a disposal site, or to a collection point for transport to a disposal site. Nuclear waste, as used in these regulations, is a special classification of radioactive waste.

(40) "Occupational dose" means exposure of an individual to radiation in a restricted area; or in the course of employment in which the individual's duties involve exposure to radiation: *Provided*, That occupational dose shall not be deemed to include any exposure of an individual to radiation for the purpose of diagnosis or therapy of such individual.

(41) "Ore refineries" means all processors of a radioactive material ore.

(42) "Particle accelerator" means any machine capable of accelerating electrons, protons, deuterons, or other charged particles in a vacuum and of discharging the resultant particulate or other radiation into a medium at energies usually in excess of 1 MeV.

(43) "Permittee" means a person who has applied for, and received, a valid site use permit for use of the low-level waste disposal facility at Hanford, Washington.

(44) "Person" means any individual, corporation, partnership, firm, association, trust, estate, public or private institution, group, agency, political subdivision of this state, any other state or political subdivision or agency thereof, and any legal successor, representative, agent or agency of the foregoing.

(45) "Personal supervision" means supervision such that the supervisor is physically present at the facility and in such proximity that contact can be maintained and immediate assistance given as required.

(46) "Personnel monitoring equipment" means devices (e.g., film badges, pocket dosimeters, and thermoluminescent dosimeters) designed to be worn or carried by an individual for the purpose of estimating the dose received by the individual.

(47) "Pharmacist" means an individual licensed by this state to compound and dispense drugs, and poisons.

(48) "Physician" means an individual licensed by this state to prescribe and dispense drugs in the practice of medicine.

(49) "Practitioner" means an individual licensed by the state in the practice of a healing art (i.e., physician, dentist, podiatrist, chiropractor, etc.).

(50) "Qualified expert" means an individual who has demonstrated to the satisfaction of the department possession of knowledge and training to measure ionizing radiation, to evaluate safety techniques, and to advise regarding radiation protection needs. The department reserves the right to recognize the qualifications of an individual in specific areas of radiation protection.

(51) "Rad" means the special unit of absorbed dose. One rad equals one-hundredth of a joule per kilogram of material; for example, if tissue is the material of interest, then 1 rad equals 100 ergs per gram of tissue.

(52) "Radiation" means ionizing radiation, i.e., gamma rays and x-rays, alpha and beta particles, high speed electrons, and other nuclear particles.

(53) "Radiation area" means any area, accessible to individuals, in which there exists radiation at such levels that a major portion of the body could receive in any one hour a dose in excess of 5 millirems, or in any five consecutive days a dose in excess of 100 millirems.

(54) "Radiation machine" means any device capable of producing ionizing radiation except those which produce radiation only from radioactive material.

(55) "Radiation safety officer" means one who has the knowledge, authority, and responsibility to apply appropriate radiation protection regulations and measures.

(56) "Radiation source." See "Source of radiation."

(57) "Radioactive material" means any material (solid, liquid, or gas) which emits radiation spontaneously.

(58) "Radioactive waste" means any radioactive material which is no longer of use and intended for disposal or treatment for the purposes of disposal.

(59) "Radioactivity" means the transformation of unstable atomic nuclei by the emission of radiation.

(60) "Registrable item" means any radiation machine except those exempted by RCW 70.98.180 or exempted by the department pursuant to the authority of RCW 70.98.080.

(61) "Registrant" means any person who is registered by the department in accordance with these regulations and the act.

(62) "Registration" means registration with the department in accordance with the regulations adopted by the department.

(63) "Regulations of the United States Department of Transportation" means the regulations in 49 CFR Parts 170-189, 14 CFR Part 103, and 46 CFR Part 146.

(64) "Rem" means a measure of the dose of any radiation to body tissue in terms of its estimated biological effect relative to a dose received from an exposure to one roentgen (R) of x-rays. (One millirem (mrem) = 0.001 rem.) For the purpose of these regulations, any of the following is considered to be equivalent to a dose of one rem:

(a) An exposure of 1 R of x, or gamma radiation;

(b) A dose of 1 rad due to x, gamma, or beta radiation;

(c) A dose of 0.05 rad due to particles heavier than protons and with sufficient energy to reach the lens of the eye;

(d) A dose of 0.1 rad due to neutrons or high energy protons.*

(e) A dose of 0.4 rad due to thermal neutrons.

Note: *If it is more convenient to measure the neutron flux, or equivalent, than to determine the neutron absorbed dose in rads, one rem of neutron radiation may, for purposes of these regulations, be assumed to be equivalent to fourteen million neutrons per square centimeter incident upon the body; or, if there exists sufficient information to estimate with reasonable accuracy the approximate distribution in energy of the neutrons, the incident number of neutrons per square centimeter equivalent to one rem may be estimated from the following table:

Neutron Flux Dose Equivalents

Neutron energy (MeV)	Number of neutrons per square centimeter for a dose equivalent of 1 rem (neutrons/cm ²)	Average flux density to deliver 100 millirems in 40 hours (neutrons/cm ² per second)
Thermal	970 x 10 ⁶	670
0.0001	720 x 10 ⁶	500
0.005	820 x 10 ⁶	570
0.02	400 x 10 ⁶	280
0.1	120 x 10 ⁶	80
0.5	43 x 10 ⁶	30
1.0	26 x 10 ⁶	18
2.5	29 x 10 ⁶	20
5.0	26 x 10 ⁶	18
7.5	24 x 10 ⁶	17
10.0	24 x 10 ⁶	17
10 to 30	14 x 10 ⁶	10

(65) "Research and development" means: (a) Theoretical analysis, exploration, or experimentation; or (b) the extension of investigative findings and theories of a scientific or technical nature into practical application for experimental and demonstration purposes, including the experimental production and testing of models, devices, equipment, materials, and processes. Research and development does not include the internal or external administration of radiation or radioactive material to human beings.

(66) "Restricted area" (controlled area) means any area the access to which is controlled by the licensee or registrant for purposes of protection of individuals from exposure to radiation and radioactive material. "Restricted area" shall not include any areas used for residential quarters, although a separate room or rooms in a residential building may be set apart as a restricted area.

(67) "Roentgen" (R) means the special unit of exposure. One roentgen equals 2.58 x 10⁻⁴ coulombs/kilogram of air (see "Exposure").

(68) "Sealed source" means radioactive material that is permanently bonded or fixed in a capsule or matrix designed to prevent release and dispersal of the radioactive material under the most severe conditions which are likely to be encountered in normal use and handling.

(69) "Source material" means: (a) Uranium or thorium, or any combination thereof, in any physical or chemical form, or (b) ores which contain by weight one-twentieth of one percent (0.05 percent) or more of (i) uranium, (ii) thorium, or (iii) any combination thereof. Source material does not include special nuclear material.

(70) "Source of radiation" means any radioactive material, or any device or equipment emitting or capable of producing ionizing radiation.

(71) "Source container" means a device in which radioactive material is transported or stored.

(72) "Source material milling" means any activity that results in the production of byproduct material as defined in subsection (8)(b) of this section.

(73) "Special form radioactive material" means radioactive material which satisfies the following conditions:

(a) It is either a single solid piece or is contained in a sealed capsule that can only be opened by destroying the capsule;

(b) The piece or capsule has at least one dimension not less than five millimeters (0.197 inch); and

(c) It satisfies the test requirements of 10 CFR 71.75.

(74) "Special nuclear material in quantities not sufficient to form a critical mass" means uranium enriched in the isotope U-235 in quantities not exceeding three hundred fifty grams of contained U-235; Uranium-233 in quantities not exceeding two hundred grams; Plutonium in quantities not exceeding two hundred grams; or any combination of them in accordance with the following formula: For each kind of special nuclear material, determine the ratio between the quantity of that special nuclear material and the quantity specified above for the same kind of special nuclear material. The sum of such ratios for all of the kinds of special nuclear material in combination shall not exceed "1" (i.e., unity). For example, the following quantities in combination would not exceed the limitation and are within the formula:

$$\begin{array}{r} 175(\text{grams contained U-235}) \\ \hline 350 \\ 50(\text{grams U-233}) \\ \hline 200 \\ 50(\text{grams Pu}) \\ \hline < 1 \\ 200 \end{array}$$

(75) "State" as used in WAC 246-232-090(5) means the several states of the union, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, the Trust Territory of the Pacific Islands, and the Commonwealth of the Northern Mariana Islands.

(76) "Survey" means an evaluation of the production, use, release, disposal, and/or presence of sources of radiation under a specific set of conditions to determine actual or potential radiation hazards. When appropriate, such evaluation includes, but is not limited to, tests, physical examinations and measurements of levels of radiation or concentration of radioactive material present.

(77) "Test" means (a) the process of verifying compliance with an applicable regulation, or (b) a method for determining the characteristics or condition of sources of radiation or components thereof.

(78) "These regulations" mean all parts of the rules for radiation protection of the state of Washington.

(79) "Type A packaging" means packaging designed to retain its integral containment and shielding under normal conditions of transport as demonstrated by tests described in 49 CFR 173.465 or 173.466 as appropriate. The contents are limited to A₁ or A₂ quantities. The package does not require competent authority approval.

(80) "Type A quantity" means a quantity of radioactive material less than the A₁ or A₂ value for a single radionuclide, or for which the sum of the fractions does not exceed unity for a mixture of radionuclides.

(81) "Type B packaging" means packaging approved by the United States nuclear regulatory commission for the transport of quantities of radioactivity in excess of A₁ or A₂. It is defined in detail in 10 CFR 71.4.

(82) "Type B quantity" means a quantity of radioactive material in excess of a Type A quantity. It requires Type B packaging for transportation.

(83) "Uncontrolled area." See "Unrestricted area."

(84) "United States Department of Energy" means the Department of Energy established by Public Law 95-91, August 4, 1977, 91 Stat. 565, 42 U.S.C. 7101 et seq., to the extent that the department exercises functions formerly vested in the United States Atomic Energy Commission, its chairman, members, officers and components and transferred to the United States Energy Research and Development Administration and to the administrator thereof pursuant to sections 104 (b), (c) and (d) of the Energy Reorganization Act of 1974 (Public Law 93-438, October 11, 1974, 88 Stat. 1233 at 1237, effective January 19, 1975) and retransferred to the Secretary of Energy pursuant to section 301(a) of the Department of Energy Organization Act (Public Law 95-91, August 4, 1977, 91 Stat. 565 at 577-578, 42 U.S.C. 7151, effective October 1, 1977).

(85) "Unrefined and unprocessed ore" means ore in its natural form prior to any processing, such as grinding, roasting, beneficiating, or refining.

(86) "Unrestricted area" (uncontrolled area) means any area access to which is not controlled by the licensee or registrant for purposes of protection of individuals from exposure to radiation and radioactive material, and any area used for residential quarters.

(87) "Waste handling licensees" mean persons licensed to receive and store radioactive wastes prior to disposal and/or persons licensed to dispose of radioactive waste.

(88) "Worker" means an individual engaged in work under a license or registration issued by the department and controlled by a licensee or registrant, but does not include the licensee or registrant. If students of age eighteen years or older are subjected routinely to work involving radiation, then the students are considered to be occupational workers. Individuals of less than eighteen years of age shall meet the requirements of WAC 246-221-050.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-220-010, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-12-050, filed 12/11/86; 83-19-050 (Order 2026), § 402-12-050, filed 9/16/83. Statutory Authority: Chapter 70.121 RCW. 81-16-031 (Order 1683), § 402-12-050, filed 7/28/81. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-12-050, filed 12/8/80; Order 1095, § 402-12-050, filed 2/6/76; Order 708, § 402-12-050, filed 8/24/72; Order 1, § 402-12-050, filed 7/2/71; Order 1, § 402-12-050, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-020 Records. (1) Each licensee or registrant shall maintain records relating to the receipt, use, storage, transfer, or disposal of radiation sources, and such other records as the department may require which will permit the determination of the extent of occupational and

public exposure from such radiation sources. Copies of these records shall be submitted to the department on request. These requirements are subject to such exemptions as may be provided by department rules.

(2) In accordance with the Public Disclosure Act, the department shall make available to each licensee and/or registrant departmental records pertaining to that licensee or registrant, at his/her written request.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-12-080, filed 12/8/80; Order 1095, § 402-12-080, filed 2/6/76; Order 1, § 402-12-080, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-030 Inspections. (1) Each licensee and/or registrant shall afford the department at all reasonable times opportunity to inspect sources of radiation and the premises and facilities wherein such sources of radiation are used or stored.

(2) Each licensee and/or registrant shall make available to the department for inspection, upon reasonable notice, records maintained pursuant to these regulations.

(3) In accordance with the Public Disclosure Act, the department shall make available to each licensee and/or registrant a copy of every inspection report written which covers any inspection of the licensee's and/or registrant's source of radiation, records, premises, or facilities. Copies of these inspection records shall be submitted to the licensee or registrant by the department upon the receipt of the written request of the licensee and/or registrant.

(4) Any person who resists, impedes, or in any manner interferes with, any individual who performs inspections which are related to any activity or facility registration/license issued by the department is subject to immediate license and/or registration certificate revocation as well as applicable civil and criminal penalties.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-12-090, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-12-090, filed 12/8/80; Order 1095, § 402-12-090, filed 2/6/76; Order 1, § 402-12-090, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-040 Tests and surveys. (1) Each licensee and registrant shall perform upon instructions from the department or shall permit the department to perform such reasonable tests and surveys as the department deems appropriate or necessary including, but not limited to, tests and surveys of:

- (a) Sources of radiation;
- (b) Facilities wherein sources of radiation are used or stored;
- (c) Radiation detection and monitoring instruments; and
- (d) Other equipment and devices used in connection with utilization or storage of licensed or registered sources of radiation.

(2) In accordance with the Public Disclosure Act, the department shall provide to the licensee and/or registrant copies of all tests and surveys conducted on the licensee's and/or registrant's sources of radiation, upon written request of the licensee and/or registrant. The department shall

acknowledge the receipt of the request in a timely manner by telephone or letter.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-12-100, filed 12/8/80; Order 1095, § 402-12-100, filed 2/6/76; Order 1, § 402-12-100, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-050 Exemptions. (1) The department may, upon application therefor or upon its own initiative, grant such exemptions or exceptions from the requirements of these regulations as it determines are authorized by law and will not result in undue hazard to public health and safety or property.

(2) Any U.S. Department of Energy contractor or subcontractor and any U.S. Nuclear Regulatory Commission contractor or subcontractor of the following categories operating within this state is exempt from these regulations to the extent that such contractor or subcontractor under the applicable contract receives, possesses, uses, transfers or acquires sources of radiation:

(a) Prime contractors performing work for the Department of Energy at U.S. government-owned or controlled sites, including the transportation of sources of radiation to or from such sites and the performance of contract services during temporary interruptions of such transportation;

(b) Prime contractors of the Department of Energy performing research in, or development, manufacture, storage, testing or transportation of, atomic weapons or components thereof;

(c) Prime contractors of the Department of Energy using or operating nuclear reactors or other nuclear devices in a United States government-owned vehicle or vessel; and

(d) Any other prime contractor or subcontractor of the Department of Energy or of the Nuclear Regulatory Commission jointly determine (i) that the exemption of the prime contractor or subcontractor is authorized by law, and (ii) that under the terms of the contract or subcontract, there is adequate assurance that the work thereunder can be accomplished without undue risk to the public health and safety.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-220-050, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-12-125, filed 12/8/80; Order 1095, § 402-12-125, filed 2/6/76.]

WAC 246-220-060 Violations. An injunction or other court order may be obtained prohibiting any violation of any provision of the act or any regulation or order issued thereunder. Any person who violates any provision of the act or any regulation or order issued thereunder may be guilty of a gross misdemeanor and upon conviction, may be punished by fine or imprisonment or both, as provided by law.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-060, filed 12/27/90, effective 1/31/91; Order 1095, § 402-12-130, filed 2/6/76; Order 1, § 402-12-130, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-070 Impounding. Sources of radiation shall be subject to impoundment pursuant to RCW 70.98.-160.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-12-140, filed 12/11/86; Order 1095, § 402-12-140, filed 2/6/76; Order 1, § 402-12-140, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-220-080 Prohibited uses. (1) Hand-held fluoroscopic screens shall not be used.

(2) Shoe-fitting fluoroscopic devices shall not be used.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-080, filed 12/27/90, effective 1/31/91; Order 1095, § 402-12-150, filed 2/6/76.]

WAC 246-220-090 Communications. All communications and reports concerning these regulations, and applications filed thereunder, should be addressed to the Department of Health, Division of Radiation Protection, Mailstop LE-13, Olympia, Washington 98504. The emergency telephone number in Seattle, is 206-682-5327 or 206 (NUCLEAR).

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-220-090, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-12-160, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-12-160, filed 12/8/80; Order 1095, § 402-12-160, filed 2/6/76.]

WAC 246-220-100 Additional requirements. The department may, by rule, regulation, or order, impose upon any licensee or registrant such requirements in addition to those established in these regulations as it deems appropriate or necessary to minimize danger to public health and safety or property.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-12-170, filed 12/8/80; Order 1095, § 402-12-170, filed 2/6/76.]

WAC 246-220-110 Appendix A—Determination of A_1 and A_2 values. I. Single radionuclides.

(1) For a single radionuclide of known identity, the values of A_1 and A_2 are taken from Table A-1 if listed there. The values A_1 and A_2 in Table A-1 are also applicable for radionuclides contained in (α , n) or (γ , n) neutron sources.

(2) For any single radionuclide whose identity is known but which is not listed in Table A-1, the values of A_1 and A_2 are determined according to the following procedure:

(a) If the radionuclide emits only one type of radiation, A_1 is determined according to the rules in paragraphs (i), (ii), (iii) and (iv) of this paragraph. For radionuclides emitting different kinds of radiation, A_1 is the most restrictive value of those determined for each kind of radiation. However, in both cases, A_1 is restricted to a maximum of 1000 Ci. If a parent nuclide decays into a shorter lived daughter with a half-life not greater than 10 days, A_1 is calculated for both the parent and the daughter, and the more limiting of the two values is assigned to the parent nuclide.

(i) For gamma emitters, A_1 is determined by the expression:

$$A_1 = \frac{9}{\text{GRC}} \text{ curies}$$

where GRC is the gamma-ray constant, corresponding to the dose in R/h at 1 m per Ci; the number 9 results from the choice of 1 rem/h at a distance of 3 m as the reference dose-equivalent rate.

(ii) For X-ray emitters, A_1 is determined by the atomic number of the nuclide:

for $Z < 55$ — $A_1=1000$ Ci

for $Z > 55$ — $A_1=200$ Ci

where Z is the atomic number of the nuclide.

(iii) For beta emitters, A_1 is determined by the maximum beta energy (E_{max}) according to Table A-2;

(iv) For alpha emitters, A_1 is determined by the expression:

$$A_1=1000 A_3$$

where A_3 is the value listed in Table A-3;

(b) A_2 is the more restrictive of the following two values:

(i) The corresponding A_1 ; and

(ii) The value A_3 obtained from Table A-3.

(3) For any single radionuclide whose identity is unknown, the value of A_1 is taken to be two Ci and the value of A_3 is taken to be 0.002 Ci. However, if the atomic number of the radionuclide is known to be less than 82, the value of A_1 is taken to be 10 Ci and the value of A_2 is taken to be 0.4 Ci.

II. Mixtures of radionuclides, including radioactive decay chains.

(1) For mixed fission products the following activity limits may be assumed if a detailed analysis of the mixture is not carried out:

$$A_1=10 \text{ Ci}$$

$$A_2=0.4 \text{ Ci}$$

(2) A single radioactive decay chain is considered to be a single radionuclide when the radionuclides are present in their naturally occurring proportions and no daughter nuclide has a half-life either longer than 10 days or longer than that of the parent nuclide. The activity to be taken into account and the A_1 or A_2 value from Table A-1 to be applied are those corresponding to the parent nuclide of that chain. When calculating A_1 or A_2 values, radiation emitted by daughters must be considered. However, in the case of radioactive decay chains in which any daughter nuclide has a half-life either longer than 10 days or greater than that of the parent nuclide, the parent and daughter nuclides are considered to be mixtures of different nuclides.

(3) In the case of a mixture of different radionuclides, where the identity and activity of each radionuclide are known, the permissible activity of each radionuclide R_1, R_2, \dots, R_n is such that $F_1 + F_2 + \dots + F_n$ is not greater than unity, where

$$F_1 = \frac{\text{Total activity of } R_1}{A_1(R_1)}$$

$$F_2 = \frac{\text{Total activity of } R_2}{A_1(R_2)}$$

$$F_n = \frac{\text{Total activity of } R_n}{A_1(R_n)}$$

$A_1(R_1, R_2, \dots, R_n)$ is the value of A_1 or A_2 as appropriate for the nuclide R_1, R_2, R_n .

(4) When the identity of each radionuclide is known but the individual activities of some of the radionuclides are not known, the formula given in paragraph (3) is applied to establish the values of A_1 or A_2 as appropriate. All the

radionuclides whose individual activities are not known (their total activity will, however, be known) are classed in a single group and the most restrictive value of A_1 and A_2 applicable to any one of them is used as the value of A_1 or A_2 in the denominator of the fraction.

(5) Where the identity of each radionuclide is known but the individual activity of none of the radionuclides is known, the most restrictive value of A_1 or A_2 applicable to any one of the radionuclides present is adopted as the applicable value.

(6) When the identity of none of the nuclides is known, the value of A_1 is taken to be two Ci and the value of A_2 is taken to be 0.002 Ci. However, if alpha emitters are known to be absent, the value of A_2 is taken to be 0.4 Ci.

TABLE A-1.— A_1 AND A_2 VALUES FOR RADIONUCLIDES
(See footnotes at end of table)

Symbol of radionuclide	Element and atomic number	A_1 (Ci)	A_2 (Ci)	Specific activity (Ci/g)
^{227}Ac	Actinium (89)	1000	0.003	7.2×10^4
^{228}Ac		10	4	2.2×10^6
^{105}Ag	Silver (47)	40	40	3.1×10^4
$^{110\text{m}}\text{Ag}$		7	7	4.7×10^3
^{111}Ag		100	20	1.6×10^5
^{241}Am	Americium (95)	8	0.008	3.2
^{243}Am		8	0.008	1.9×10^{-1}
^{37}Ar (compressed or uncompressed)*	Argon (18)	1000	1000	1.0×10^5
^{41}Ar (uncompressed)*		20	20	4.3×10^7
^{41}Ar (compressed)*		1	1	4.3×10^7
^{73}As	Arsenic (33)		1000	4002.4×10^4
^{74}As			20	201.0×10^5
^{76}As			10	101.6×10^6
^{77}As			300	201.1×10^6
^{211}At	Astatine (85)	200	7	2.1×10^6
^{193}Au	Gold (79)	200	200	9.3×10^5
^{196}Au		30	30	1.2×10^5
^{198}Au		40	20	2.5×10^5
^{199}Au		200	25	2.1×10^5
^{131}Ba	Barium (56)	40	40	8.7×10^4
^{133}Ba		40	10	4.0×10^2
^{140}Ba		20	20	7.3×10^4
^7Be	Beryllium (4)	300	300	3.5×10^5
^{206}Bi	Bismuth (83)	5	5	9.9×10^4
^{207}Bi		10	10	2.2×10^2
^{210}Bi (RaE)		100	4	1.2×10^5
^{212}Bi		6	6	1.5×10^7
^{249}Bk	Berkelium (97)	1000	1	1.8×10^3
^{77}Br	Bromine (35)	70	25	7.1×10^5
^{82}Br		6	6	1.1×10^6
^{11}C	Carbon (6)	20	20	8.4×10^8
^{14}C		1000	60	4.6
^{45}Ca	Calcium (20)		1000	251.9×10^4
^{47}Ca			20	205.9×10^5
^{109}Cd	Cadmium (48)	1000	70	2.6×10^3
$^{115\text{m}}\text{Cd}$		30	30	2.6×10^4
^{115}Cd		80	20	5.1×10^5
^{139}Ce	Cerium (58)	100	100	6.5×10^3
^{141}Ce		300	25	2.8×10^4
^{143}Ce		60	20	6.6×10^5
^{144}Ce		10	7	3.2×10^3
^{249}Cf	Californium (98)	2	0.002	3.1
^{250}Cf		7	0.007	1.3×10^2
^{252}Cf		2	0.009	6.5×10^2
^{36}Cl	Chlorine (17)	300	10	3.2×10^{-2}
^{38}Cl		10	10	1.3×10^8
^{242}Cm	Curium (96)	200	0.2	3.3×10^3
^{243}Cm		9	0.009	4.2×10
^{244}Cm		10	0.01	8.2×10

245 _{Cm}		6	0.006	1.0X10 ⁻¹
246 _{Cm}		6	0.006	3.6X10 ⁻¹
56 _{Co}	Cobalt (27)	5	5	3.0X10 ⁴
57 _{Co}		90	90	8.5X10 ³
58 _{mCo}		1000	1000	5.9X10 ⁶
58 _{Co}		20	20	3.1X10 ⁴
60 _{Co}		7	7	1.1X10 ³
51 _{Cr}	Chromium (24)	600	600	9.2X10 ⁴
129 _{Cs}	Cesium (55)	40	40	7.6X10 ⁵
131 _{Cs}		1000	1000	1.0X10 ⁵
134 _{mCs}		1000	10	7.4X10 ⁶
134 _{Cs}		10	10	1.2X10 ³
135 _{Cs}		1000	25	8.8X10 ⁻⁴
136 _{Cs}		7	7	7.4X10 ⁴
137 _{Cs}		30	10	9.8X10
64 _{Cu}	Copper (29)	80	25	3.8X10 ⁶
67 _{Cu}		200	25	7.9X10 ⁵
165 _{Dy}	Dysprosium (66)	100	20	8.2X10 ⁶
166 _{Dy}		1000	200	2.3X10 ⁵
169 _{Er}	Erbium (68)	1000	25	8.2X10 ⁴
171 _{Er}		50	20	2.4X10 ⁶
152 _{mEu}	Europium (63)	30	30	2.2X10 ⁶
152 _{Eu}		20	10	1.9X10 ²
154 _{Eu}		10	5	1.5X10 ²
155 _{Eu}		400	60	1.4X10 ³
18 _F	Fluorine (9)	20	20	9.3X10 ⁷
52 _{Fe}	Iron (26)	5	5	7.3X10 ⁶
55 _{Fe}		1000	1000	2.2X10 ³
59 _{Fe}		10	10	4.9X10 ⁴
67 _{Ga}	Gallium (31)	100	100	6.0X10 ⁵
68 _{Ga}		20	20	4.0X10 ⁷
72 _{Ga}		7	7	3.1X10 ⁶
153 _{Gd}	Gadolinium (64)	200	100	3.6X10 ³
159 _{Gd}		300	20	1.1X10 ⁶
68 _{Ge}	Germanium (32)	20	10	7.0X10 ³
71 _{Ge}		1000	1000	1.6X10 ⁵
3 _H	Hydrogen (1) see T-Tritium			
181 _{Hf}	Hafnium (72)	30	25	1.6X10 ⁴
197 _{mHg}	Mercury (80)	200	200	6.6X10 ⁵
197 _{Hg}		200	200	2.5X10 ⁵
203 _{Hg}		80	25	1.4X10 ⁴
166 _{Ho}	Holmium (67)	30	30	6.9X10 ⁵
123 _I	Iodine(53)	50	50	1.9X10 ⁶
125 _I		1000	70	1.7X10 ⁴
126 _I		40	10	7.8X10 ⁴
129 _I		1000	2	1.6X10 ⁻⁴
131 _I		40	10	1.2X10 ⁵
132 _I		7	7	1.1X10 ⁷
133 _I		30	10	1.1X10 ⁶
134 _I		8	8	2.7X10 ⁷
135 _I		10	10	3.5X10 ⁶
111 _{In}	Indium (49)	30	25	4.2X10 ⁵
113 _{mIn}		60	60	1.6X10 ⁷
114 _{mIn}		30	20	2.3X10 ⁴
115 _{mIn}		100	20	6.1X10 ⁶
190 _{Ir}	Iridium (77)	10	10	6.2X10 ⁴
192 _{Ir}		20	10	9.1X10 ³
194 _{Ir}		10	10	8.5X10 ⁵
42 _K	Potassium (19)	10	10	6.0X10 ⁶
43 _K		20	10	3.3X10 ⁶
85 _{mKr} (uncompressed)*	Krypton (36)	100	100	8.4X10 ⁶
85 _{mKr} (compressed)*		3	3	8.4X10 ⁶
85 _{Kr} (uncompressed)*		1000	1000	4.0X10 ²
85 _{Kr} (compressed)*		5	5	4.0X10 ²
87 _{Kr} (uncompressed)*		20	20	2.8X10 ⁷
87 _{Kr} (compressed)*		0.6	0.6	2.8X10 ⁷
140 _{La}	Lanthanum (57)	30	30	5.6X10 ⁵
LSA	Low specific activity material—see § 71.4			
177 _{Lu}	Lutetium (71)	300	25	1.1X10 ⁵
MFP	Mixed fission products	10	0.4	
28 _{Mg}	Magnesium (12)	6	6	5.2X10 ⁶
52 _{Mn}	Manganese (25)	5	5	4.4X10 ⁵
54 _{Mn}		20	20	8.3X10 ³
56 _{Mn}		5	5	2.2X10 ⁷
99 _{Mo}	Molybdenum (42)	100	20	4.7X10 ⁵
13 _N	Nitrogen (7)	20	10	1.5X10 ⁹

22 _{Na}	Sodium (11)	8	8	6.3X10 ³
24 _{Na}		5	5	8.7X10 ⁶
93 _m Nb	Niobium (41)	1000	200	1.1X10 ³
95 _{Nb}		20	20	3.9X10 ⁴
97 _{Nb}		20	20	2.6X10 ⁷
147 _{Nd}	Neodymium (60)	100	20	8.0X10 ⁴
149 _{Nd}		30	20	1.1X10 ⁷
59 _{Ni}	Nickel (28)	1000	900	8.1X10 ⁻²
63 _{Ni}		1000	100	4.6X10
65 _{Ni}		10	10	1.9X10 ⁷
237 _{Np}	Neptunium (93)	5	0.005	6.9X10 ⁻⁴
239 _{Np}		200	25	2.3X10 ⁵
185 _{Os}	Osmium (76)	20	20	7.3X10 ³
191 _{Os}		600	200	4.6X10 ⁴
191 _m Os		200	200	1.2X10 ⁶
193 _{Os}		100	20	5.3X10 ⁵
32 _P	Phosphorus (15)	30	30	2.9X10 ⁵
230 _{Pa}	Protactinium (91)	20	0.8	3.2X10 ⁴
231 _{Pa}		2	0.002	4.5X10 ⁻²
233 _{Pa}		100	100	2.1X10 ⁴
201 _{Pb}	Lead (82)	20	20	1.7X10 ⁶
210 _{Pb}		100	0.2	8.8X10
212 _{Pb}		6	5	1.4X10 ⁶
103 _{Pd}	Palladium (46)	1000	700	7.5X10 ⁴
109 _{Pd}		100	20	2.1X10 ⁶
147 _{Pm}	Promethium (61)	1000	25	9.4X10 ²
149 _{Pm}		100	20	4.2X10 ⁵
210 _{Po}	Polonium (84)	200	0.2	4.5X10 ³
142 _{Pr}	Praseodymium (59)	10	10	1.2X10 ⁴
143 _{Pr}		300	20	6.6X10 ⁴
191 _{Pt}	Platinum (78)	100	100	2.3X10 ⁵
193 _m Pt		200	200	2.0X10 ⁵
197 _m Pt		300	20	1.2X10 ⁷
197 _{Pt}		300	20	8.8X10 ⁵
238 _{Pu}	Plutonium (94)	3	0.003	1.7X10
239 _{Pu}		2	0.002	6.2X10 ⁻²
240 _{Pu}		2	0.002	2.3X10 ⁻¹
241 _{Pu}		1000	0.1	1.1X10 ²
242 _{Pu}		3	0.003	3.9X10 ⁻³
223 _{Ra}	Radium (88)	50	0.2	5.0X10 ⁴
224 _{Ra}		6	0.5	1.6X10 ⁵
226 _{Ra}		10	0.05	1.0
228 _{Ra}		10	0.05	2.3X10 ²
222 _{Rn}	Radon (86)	10	2	1.5X10 ⁵
81 _{Rb}	Rubidium (37)	30	25	8.2X10 ⁶
86 _{Rb}		30	30	8.1X10 ⁴
87 _{Rb}		Unlimited	Unlimited	6.6X10 ⁻⁸
Rb (natural)		Unlimited	Unlimited	1.8X10 ⁻⁵
186 _{Re}	Rhenium (75)	100	20	1.9X10 ⁵
187 _{Re}		Unlimited	Unlimited	3.8X10 ⁻⁸
188 _{Re}		10	10	1.0X10 ⁶
Re (natural)		Unlimited	Unlimited	2.4X10 ⁻⁸
103 _m Rh	Rhodium (45)	1000	1000	3.2X10 ⁷
105 _{Rh}		200	25	8.2X10 ⁵
97 _{Ru}	Ruthenium (44)	80	80	5.5X10 ⁵
103 _{Ru}		30	25	3.2X10 ⁴
105 _{Ru}		20	20	6.6X10 ⁶
106 _{Ru}		10	7	3.4X10 ³
35 _S	Sulphur (16)	1000	60	4.3X10 ⁴
122 _{Sb}	Antimony (51)	30	30	3.9X10 ⁵
124 _{Sb}		5	5	1.8X10 ⁴
125 _{Sb}		40	25	1.4X10 ³
46 _{Sc}	Scandium (21)	8	8	3.4X10 ⁴
47 _{Sc}		200	20	8.2X10 ⁵
48 _{Sc}		5	5	1.5X10 ⁶
75 _{Se}	Selenium (34)	40	40	1.4X10 ⁴
31 _{Si}	Silicon (14)	100	20	3.9X10 ⁷
147 _{Sm}	Samarium (62)	Unlimited	Unlimited	2.0X10 ⁻⁸
151 _{Sm}		1000	90	2.6X10
153 _{Sm}		300	20	4.4X10 ⁵
113 _{Sn}	Tin (50)	60	60	1.0X10 ⁴
119 _m Sn		100	100	4.4X10 ³
125 _{Sn}		10	10	1.1X10 ⁵
85 _m Sr	Strontium (38)	80	80	3.2X10 ⁷
85 _{Sr}		30	30	2.4X10 ⁴
87 _m Sr		50	50	1.2X10 ⁷

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^{89}Sr		100	10	2.9×10^4
^{90}Sr		10	0.4	1.5×10^2
^{91}Sr		10	10	3.6×10^6
^{92}Sr		10	10	1.3×10^7
T(uncompressed)*	Tritium (1)	1000	1000	9.7×10^3
T(compressed)*		1000	1000	9.7×10^3
T(activated luminous paint)		1000	1000	9.7×10^3
T(absorbed on solid carrier)			1000	10009.7×10^3
T(tritiated water)		1000	1000	9.7×10^3
T(other forms)		20	20	9.7×10^3
^{182}Ta	Tantalum (73)	20	20	6.2×10^3
^{160}Tb	Terbium (65)	20	10	1.1×10^4
$^{96\text{m}}\text{Tc}$	Technetium (43)	1000	1000	3.8×10^7
^{96}Tc			6	63.2×10^5
$^{97\text{m}}\text{Tc}$		1000	200	1.5×10^4
^{97}Tc			1000	4001.4×10^{-3}
$^{99\text{m}}\text{Tc}$		100	100	5.2×10^6
^{99}Tc			1000	251.7×10^{-2}
$^{125\text{m}}\text{Te}$	Tellurium (52)	1000	100	1.8×10^4
$^{127\text{M}}\text{Te}$		300	20	4.0×10^4
^{127}Te		300	20	2.6×10^6
$^{129\text{M}}\text{Te}$		30	10	2.5×10^4
^{129}Te		100	20	2.0×10^7
$^{131\text{m}}\text{Te}$		10	10	8.0×10^5
^{132}Te		7	7	3.1×10^5
^{227}Th	Thorium (90)	200	0.2	3.2×10^4
^{228}Th		6	0.008	8.3×10^2
^{230}Th		3	0.003	1.9×10^{-2}
^{231}Th		1000	25	5.3×10^5
^{232}Th		Unlimited	Unlimited	1.1×10^{-7}
^{234}Th		10	10	2.3×10^4
Th (natural)		Unlimited	Unlimited	2.2×10^{-7}
Th (irradiated)**				
^{200}Tl	Thallium (81)	20	20	5.8×10^5
^{201}Tl		200	200	2.2×10^5
^{202}Tl		40	40	5.4×10^4
^{204}Tl		300	10	4.3×10^2
^{170}Tm	Thulium (69)	300	10	6.0×10^3
^{171}Tm		1000	100	1.1×10^3
^{230}U	Uranium (92)	100	0.1	2.7×10^4
^{232}U		30	0.03	2.1×10
^{233}U		100	0.1	9.5×10^{-3}
^{234}U		100	0.1	6.2×10^{-3}
^{235}U		100	0.2	2.1×10^{-6}
^{236}U		200	0.2	6.3×10^{-5}
^{238}U		Unlimited	Unlimited	3.3×10^{-7}
U (natural)		Unlimited	Unlimited	(SEE TABLE A-4)
U (enriched) < 20%		Unlimited	Unlimited	(SEE TABLE A-4)
	20% or greater	100	0.1	(SEE TABLE A-4)
U (depleted)		Unlimited	Unlimited	(SEE TABLE A-4)
U (irradiated)***				
^{48}V	Vanadium (23)	6	6	1.7×10^5
^{181}W	Tungsten (74)	200	100	5.0×10^3
^{185}W		1000	25	9.7×10^{-3}
^{187}W		40	20	7.0×10^5
^{127}Xe (uncompressed)*	Xenon (54)	70	70	2.8×10^4
^{127}Xe (compressed)*		5	5	2.8×10^4
$^{131\text{m}}\text{Xe}$ (compressed)*		10	10	1.0×10^5
$^{131\text{m}}\text{Xe}$ (uncompressed)*		100	100	1.0×10^5
^{133}Xe (uncompressed)*		1000	1000	1.9×10^5
^{133}Xe (compressed)*		5	5	1.9×10^5
^{135}Xe (uncompressed)*		70	70	2.5×10^5
^{135}Xe (compressed)*		2	2	2.5×10^5
^{87}Y	Yttrium (39)	20	20	4.5×10
^{90}Y		10	10	2.5×10^5
$^{91\text{m}}\text{Y}$		30	30	4.1×10^7
^{91}Y		30	30	2.5×10^4
^{92}Y		10	10	9.5×10^6
^{93}Y		10	10	3.2×10^6
^{169}Yb	Ytterbium (70)	80	80	2.3×10^5
^{175}Yb		400	25	1.8×10^5
^{65}Zn	Zinc (30)			30308.0×10^3

69mZn		40	20	3.3X10 ⁶
69Zn			300	205.3X10 ⁷
93Zr	Zirconium (40)	1000	200	3.5X10 ⁻³
95Zr		20	20	2.1X10 ⁴
97Zr		20	20	2.0X10 ⁶

*For the purpose for Table A-1, compressed gas means a gas at a pressure which exceeds the ambient atmospheric pressure at the location where the containment system was closed.

**The values of A₁ and A₂ must be calculated in accordance with the procedure specified in Appendix A, paragraph II(3), taking into account the activity of the fission products and of the uranium-233 in addition to that of the thorium.

***The values of A₁ and A₂ must be calculated in accordance with the procedure specified in Appendix A, paragraph II(3), taking into account the activity of the fission products and plutonium isotopes in addition to that of the uranium.

TABLE A-2
RELATIONSHIP BETWEEN A₁ AND E_{max}
FOR BETA EMITTERS

E _{max} (MeV)	A ₁ (Ci)
< 0.5	1000
0.5 - < 1.0	300
1.0 - < 1.5	100
1.5 - < 2.0	30
≥ 2.0	10

TABLE A-3
RELATIONSHIP BETWEEN A₃ AND THE ATOMIC NUMBER
OF THE RADIONUCLIDE

A ₃			
Atomic Number	Half-life less than 1000 days	Half-life 1000 days to 10 ⁶ years	Half-life greater than 10 ⁶ years
1 to 81	3 Ci	.05 Ci	3 Ci
82 and above	.002 Ci	.002 Ci	3 Ci

TABLE A-4—ACTIVITY-MASS RELATIONSHIPS FOR URANIUM/THORIUM

Thorium and uranium enrichment ¹ wt % ²³⁵ U present	Specific activity	
	Ci/g	g/Ci
0.45	5.0x10 ⁻⁷	2.0x10 ⁶
0.72 (natural)	7.06x10 ⁻⁷	1.42x10 ⁶
1.0	7.6x10 ⁻⁷	1.3x10 ⁶
1.5	1.0x10 ⁻⁶	1.0x10 ⁶
5.0	2.7x10 ⁻⁶	3.7x10 ⁵
10.0	4.8x10 ⁻⁶	2.1x10 ⁵
20.0	1.0x10 ⁻⁵	1.0x10 ⁵
35.0	2.0x10 ⁻⁵	5.0x10 ⁴
50.0	2.5x10 ⁻⁵	4.0x10 ⁴
90.0	5.8x10 ⁻⁵	1.7x10 ⁴
93.0	7.0x10 ⁻⁵	1.4x10 ⁴
95.0	9.1x10 ⁻⁵	1.1x10 ⁴
Natural Thorium	2.2x10 ⁻⁷	4.6x10 ⁶

¹ The figures for uranium include representative values for the activity of the uranium-234 which is concentrated during the enrichment process. The activity for Thorium includes the equilibrium concentration of Thorium-228.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-12-200, filed 12/11/86; Order 1095, § 402-12-200, filed 2/6/76.]

WAC 246-220-120 Appendix B—Information on transportation special form licensed material. (1) "Special form" means any of the following physical forms of licensed material:

(a) The material is in solid form having no dimension less than 0.5 millimeter or at least one dimension greater than five millimeters; does not melt, sublime, or ignite in air at a temperature of 1,000 degrees Fahrenheit; will not shatter or crumble if subjected to the percussion test described in this section; and is not dissolved or converted into dispersible form to the extent of more than 0.005 percent by weight by immersion for one week in water at 68 degrees Fahrenheit or in air at 86 degrees Fahrenheit; or

(b) The material is securely contained in a capsule having no dimension less than 0.5 millimeter or at least one dimension greater than five millimeters, which will retain its contents if subjected to the tests prescribed in this section; and which is constructed of materials which do not melt, sublime, or ignite in air at 1,475 degrees Fahrenheit, and do not dissolve, or convert into dispersible form, to the extent of more than 0.005 percent by weight by immersion for one week in water at 68 degrees Fahrenheit or in air at 86 degrees Fahrenheit.

(2) *Tests for special form licensed material.*

(a) Free drop - A free drop through a distance of thirty feet onto a flat essentially unyielding horizontal surface, striking the surface in such a position as to suffer maximum damage.

(b) Percussion - Impact of the flat circular end of a one inch diameter steel rod weighing three pounds, dropped through a distance of forty inches. The capsule or material shall be placed on a sheet of lead, of hardness number 3.5 to 4.5 on the Vickers scale, and not more than one inch thick, supported by a smooth essentially unyielding surface.

(c) Heating - Heating in air to a temperature of 1,475 degrees Fahrenheit and remaining at that temperature for a period of ten minutes.

(d) Immersion - Immersion for twenty-four hours in water at room temperature. The water shall be at pH 6-pH 8, with a maximum conductivity of ten microohms per centimeter.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-220-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-12-210, filed 12/11/86; Order 1095, § 402-12-210, filed 2/6/76.]

WAC 246-220-130 Appendix C—The international system of units (SI). This appendix does not contain any regulations, but is included for informational purposes only.

The Metric Conversion Act of 1975 (PL 94-168) urges the increasing awareness and use of the International System of Units (SI). This appendix is included to acquaint licensees and/or registrants with selected terms of SI units. Future revisions to chapters 246-220 through 246-255 WAC may use these units.

(1) *Absorbed dose.* The unit of absorbed dose is the gray (Gy) which is equal to 1 joule per kilogram. One rad is equal to 1×10^{-2} gray. A submultiple is the milligray (mGy).

(2) *Dose equivalent.* The unit of dose equivalent is the sievert (Sv) which is equal to 1 joule per kilogram as modified by the quality factor. One rem is equal to 1×10^{-2} sievert. A submultiple is the millisievert (mSv).

(3) *Exposure.* The unit of exposure is the coulombs per kilogram (C/kg). One roentgen is equal to 2.58×10^{-4} coulombs per kilogram of dry air. Multiples of this unit are the millicoulomb per kilogram (mC/kg) and the microcoulomb per kilogram (μ C/kg) of dry air at standard temperature and pressure.

(4) *Radioactivity.* The unit of measurement of radioactivity is the becquerel (Bq) and is equal to one transformation per second. One curie is equal to 3.7×10^{10} becquerels. Multiples are megabecquerel (MBq) and gigabecquerel (GBq).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-220-130, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-220-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-12-250, filed 12/8/80.]

Chapter 246-221 WAC

RADIATION PROTECTION STANDARDS

WAC

246-221-001	Purpose and scope.
246-221-010	Radiation dose to individuals in restricted areas.
246-221-020	Determination of prior accumulated dose.
246-221-030	Requirements for exceeding occupational radiation doses.
246-221-040	Exposure of individuals to concentrations of radioactive materials in restricted areas.
246-221-050	Exposure of minors.
246-221-060	Permissible levels of radiation from external sources in unrestricted areas.
246-221-070	Concentration in effluents released to unrestricted areas.
246-221-080	Leak tests.
246-221-090	Personnel monitoring.
246-221-100	Orders requiring furnishing bioassay services.
246-221-110	Surveys.
246-221-120	Caution signs, labels, and signals.
246-221-130	Exceptions from posting and labeling requirements.
246-221-140	Instruction of personnel.
246-221-150	Security and control of stored radioactive material.
246-221-160	Procedures for picking up, receiving, and opening packages.
246-221-170	Waste disposal, general requirement.
246-221-180	Method of obtaining approval of proposed disposal procedures.
246-221-190	Disposal by release into sanitary sewerage systems.
246-221-200	Disposal by burial in soil.
246-221-210	Disposal by incineration.
246-221-220	Disposal of specific wastes.

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246-221-230	Records of surveys, radiation monitoring, and disposal.
246-221-240	Reports of theft or loss of radiation sources.
246-221-250	Notification of incidents.
246-221-260	Reports of overexposures and excessive levels and concentrations.
246-221-270	Vacating premises.
246-221-280	Notifications and reports to individuals.
246-221-290	Appendix A—Concentrations in air and water above natural background.
246-221-300	Appendix B—Quantities exempt from labeling.

WAC 246-221-001 Purpose and scope. This chapter establishes standards for protection against radiation hazards. Except as otherwise specifically provided, this chapter applies to all licensees or registrants. Nothing in this chapter shall be interpreted as limiting the intentional exposure of patients to radiation for the purpose of medical diagnosis or therapy. The definitions contained in WAC 246-220-010 also apply to this chapter. WAC 246-220-007, Statement of philosophy, is directly applicable to this chapter.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-001, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-001, filed 12/27/90, effective 1/31/91; Order 1095, § 402-24-010, filed 2/6/76; Order 1, § 402-24-010, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-010 Radiation dose to individuals in restricted areas.* (1) Except as provided in subsection (2) of this section no licensee or registrant shall possess, use, store, receive, or transfer sources of radiation in such a manner as to cause any individual in a restricted area to receive in any period of one calendar quarter from all sources of radiation in the licensee's or registrant's possession a dose in excess of the limits specified in the following table:

Rem per Calendar Quarter

Whole body; head and trunk; active blood-forming organs; lens of eyes; or gonads	1.25
Hands and forearms; feet and ankles	18.75
Skin of whole body	7.5

Note: *For determining the doses specified in this section a dose from x-or gamma rays up to 10 MeV may be assumed to be equivalent to the exposure measured by a properly calibrated appropriate instrument in air at or near the body surface in the region of the highest dose rate.

(2) A licensee or registrant may permit an individual in a restricted area to receive a dose to the whole body greater than that permitted under subsection (1) of this section, provided that:

(a) During any calendar quarter the dose to the whole body from sources of radiation in the licensee's or registrant's possession shall not exceed three rems; and

(b) The dose to the whole body, when added to the accumulated occupational dose to the whole body, shall not exceed 5(N-18) rems when "N" equals the individual's age in years at the individual's last birthday; and

(c) The licensee or registrant has determined the individual's accumulated occupational dose to the whole body on department Form RHF-4 or on a clear and legible record containing all the information required in that form and has otherwise complied with the requirements of WAC 246-221-020. As used in subsection (2) of this section "dose to the whole body" shall be deemed to include any dose to

the whole body, gonads, active blood-forming organs, head and trunk, or lens of the eye; and

(d) The licensee or registrant has determined that the predicted dose to the whole body is as low as is reasonably achievable and consistent with the statements in WAC 246-220-007. The licensee or registrant shall perform an evaluation of the expected whole body dose before permitting any individual to receive a whole body dose in excess of the limits specified in subsection (1) of this section.

A written record of the prior evaluation of this exposure shall be retained for inspection by the department.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-010, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-020, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-020, filed 12/8/80; Order 1095, § 402-24-020, filed 2/6/76; Order 1, § 402-24-020, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-020 Determination of prior accumulated dose. Determination of prior dose. Each licensee or registrant shall require any individual, prior to first entry of the individual into the licensee's or registrant's restricted area during each employment or work assignment under such circumstances that the individual will receive or is likely to receive in any period of one calendar quarter an occupational dose in excess of 25 percent of the applicable standards specified in WAC 246-221-010(1) and 246-221-050 to disclose and verify in a written, signed statement, either:

(1) That the individual had no prior occupational dose during the current calendar quarter; or

(2) The nature and amount of any occupational dose which the individual may have received during that specifically identified current calendar quarter from sources of radiation possessed or controlled by other persons. Each licensee shall maintain records of such statements until the department authorizes their disposition.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-024, filed 12/8/80; Order 1095, § 402-24-024, filed 2/6/76.]

WAC 246-221-030 Requirements for exceeding occupational radiation doses. (1) Before permitting, pursuant to WAC 246-221-010(2), any individual in a restricted area to receive an occupational radiation dose in excess of the standards specified in WAC 246-221-010(1) each licensee or registrant shall:

(a) Obtain a certificate on state of Washington occupational external radiation exposure history (Form RHF-4) or on a clear and legible record containing all the information required in that form, signed by the individual, showing each period of time after the individual attained the age of 18 in which the individual received an occupational dose of radiation; and

(b) Calculate on Form RHF-4 in accordance with the instructions appearing therein, or on a clear and legible record containing all the information required in that form, the previously accumulated occupational dose received by

the individual and the additional dose allowed for that individual under WAC 246-221-010(2).

In the preparation of Form RHF-4, or a clear and legible record containing all the information required in that form, the licensee or registrant shall make a reasonable effort to obtain reports of the individual's previously accumulated occupational dose. For each period for which the licensee or registrant obtains such reports, the dose shown in the report shall be used in preparing the form. In any case where a licensee or registrant is unable to obtain reports of the individual's occupational dose for a previous complete calendar quarter, it shall be assumed that the individual has received the occupational dose specified in whichever of the following columns apply:

Part of Body	Column 1	Column 2
	Assumed Dose in Rems for Calendar Quarters Prior to January 1, 1961	Assumed Dose in Rems for Calendar Quarters Beginning on or After January 1, 1961
Whole body, gonads, active blood-forming organs, head and trunk, lens of eye	3.75	1.25

(2) The licensee or registrant shall retain and preserve records used in preparing Form RHF-4 until the department authorizes their disposition. If calculation of the individual's accumulated occupational dose for all periods prior to January 1, 1961, yields a result higher than the applicable accumulated dose value for the individual as of that date, as specified in WAC 246-221-010 (2)(b) the excess may be disregarded.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-030, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-027, filed 12/8/80.]

WAC 246-221-040 Exposure of individuals to concentrations of radioactive materials in restricted areas. (1) Requirements for exposures to individuals.

(a) No licensee shall possess, use, or transfer radioactive material in such a manner as to permit any individual in a restricted area to inhale a quantity of radioactive material in any period of one calendar quarter greater than the quantity which would result from inhalation for 40 hours per week for 13 weeks at uniform concentrations of radioactive material in air specified in WAC 246-221-290, Appendix A, Table I, Column 1^{1, 2, 3}. If the radioactive material is of such form that intake by absorption through the skin is likely, individual exposures to radioactive material shall be controlled so that the uptake of radioactive material by any organ from either inhalation or absorption or both routes of intake^{4, 5} in any calendar quarter does not exceed that which would result from inhaling such radioactive material for 40 hours per week for 13 weeks at uniform concentrations specified in WAC 246-221-290, Appendix A, Table I, Column 1.

(b) No licensee shall possess, use, or transfer mixtures of U-234, U-235, and U-238 in soluble form in such a manner as to permit any individual in a restricted area to inhale a quantity of such material in excess of the intake limits specified in Appendix A, Table I, Column 1 of this

part. If such soluble uranium is of a form such that absorption through the skin is likely, individual exposures to such material shall be controlled so that the uptake of such material by any organ from either inhalation or absorption or both routes of intake⁴ does not exceed that which would result from inhaling such material at the limits specified in WAC 246-221-290, Appendix A, Table I, Column 1 and footnote 4 thereto.

(c) For purposes of determining compliance with the requirements of this section the licensee shall use suitable measurements of concentrations of radioactive materials in air for detecting and evaluating airborne radioactivity in restricted areas and in addition, as appropriate, shall use measurements of radioactivity in the body, measurements of radioactivity excreted from the body, or any combination of such measurements as may be necessary for timely detection and assessment of individual intakes of radioactivity by exposed individuals. It is assumed that an individual inhales radioactive material at the airborne concentration in which he or she is present unless he or she uses respiratory protective equipment pursuant to this section. When assessment of a particular individual's intake of radioactive material is necessary, intakes less than those which would result from inhalation for 2 hours in any one day or for 10 hours in any one week at uniform concentrations specified in Appendix A, Table I, Column 1 need not be included in such assessment, provided that for any assessment in excess of these amounts the entire amount is included.

(2)(a) The licensee shall, as a precautionary procedure, use process or other engineering controls, to the extent practicable, to limit concentrations of radioactive materials in air to levels below those which delimit an airborne radioactivity area as defined in WAC 246-220-010.

(b) When it is impracticable to apply process or other engineering controls to limit concentrations of radioactive material in air below those defined in WAC 246-220-010, other precautionary procedures, such as increased surveillance, limitation of working times, or provision of respiratory protective equipment, shall be used to maintain intake of radioactive material by any individual within any period of seven consecutive days as far below that intake of radioactive material which would result from inhalation of such material for 40 hours at the uniform concentrations specified in Appendix A, Table I, Column 1 as is reasonably achievable. Whenever the intake of radioactive material by any individual exceeds this 40-hour control measure, the licensee shall make such evaluations and take such actions as are necessary to assure against recurrence. The licensee shall maintain records of such occurrences, evaluations, and actions taken in a clear and readily identifiable form suitable for summary review and evaluation.

(3) When respiratory protective equipment is used to limit the inhalation of airborne radioactive material pursuant to subsection (2)(b) of this section, the licensee may make allowance for such use in estimating exposures of individuals to such materials provided that such equipment is used as stipulated in Regulatory Guide 8.15, "Acceptable Programs for Respiratory Protection."⁶

(4) Notwithstanding the provisions of subsections (2) and (3) of this section, the department may impose further restrictions:

(a) On the extent to which a licensee may make allowance for use of respirators in lieu of provision of process, containment, ventilation, or other engineering controls, if application of such controls is found to be practicable; and

(b) As might be necessary to assure that the respiratory protective program of the licensee is adequate in limiting exposures of personnel to airborne radioactive materials.

(5) The licensee shall notify, in writing, the department at least 30 days before the date that respiratory protective equipment is first used under the provisions of this section.

Notes: ¹Since the concentration specified for tritium oxide vapor assumes equal intakes by skin absorption and inhalation, the total intake permitted is twice that which would result from inhalation alone at the concentration specified in H-3(s) in Appendix A, Table I, Column 1 for 40 hours per week for 13 weeks.

²For radioactive materials designated "sub" in the "isotope" column of the table, the concentration value specified is based upon exposure to the material as an external radiation source. Individual exposures to these materials may be accounted for as part of the limitation on individual dose in WAC 246-221-010. These materials shall be subject to the precautionary procedures required by subsection (2)(a) of this section.

³Multiply the concentration values specified in Appendix A, Table I, Column 1 by 6.3×10^6 ml to obtain the quarterly quantity limit. Multiply the concentration value specified in Appendix A, Table I, Column 1 of this part by 2.5×10^9 ml to obtain the annual quantity limit for Rn-222.

⁴Significant intake by ingestion or injection is presumed to occur only as a result of circumstances such as accident, inadvertence, poor procedure, or similar special conditions. Such intakes must be evaluated and accounted for by techniques and procedures as may be appropriate to the circumstances for the occurrence. Exposures so evaluated shall be included in determining whether the limitation on individual exposures in subsection (1)(a) of this section has been exceeded.

⁵Regulatory guidance on assessment of individual intakes of radioactive material is given in Regulatory Guide 8.9, "Acceptable Concepts, Models, Equations and Assumptions for a Bioassay Program," single copies of which are available from the Office of Standards Development, United States Nuclear Regulatory Commission, Washington, D.C. 20555, upon written request.

⁶Single copies of Regulatory Guide 8.15 are available for the Office of Standards Development, United States Nuclear Regulatory Commission, Washington, D.C. 20555, upon written request.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-221-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-221-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-24-030, filed 12/8/80; Order 1095, § 402-24-030, filed 2/6/76; Order 1, § 402-24-030, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-050 Exposure of minors.* (1) No licensee or registrant shall possess, use, or transfer sources of radiation in such a manner as to cause any individual within a restricted area, who is under 18 years of age, to receive in any period of one calendar quarter from all sources of radiation in such licensee's or registrant's possession a dose in excess of 10 percent of the limits specified in the table in WAC 246-221-010(1).

(2) No licensee shall possess, use, or transfer radioactive material in such a manner as to cause any individual within

a restricted area, who is under 18 years of age, to be exposed to airborne radioactive material in an average concentration in excess of the limits specified in WAC 246-221-290, Appendix A, Table II, of this chapter. For purposes of this paragraph, concentrations may be averaged over periods not greater than a week.

(3) The provisions of WAC 246-221-040 (2)(b) and (3) shall apply to exposures subject to subsection (2) of this section except that the references in WAC 246-221-040 (2)(b) and (3) to Appendix A, Table I, Column 1 shall be deemed to be referenced to Appendix A, Table II, Column 1.

Note: *For determining the doses specified in this section, a dose from x- or gamma rays up to 10 MeV may be assumed to be equivalent to the exposure measured by a properly calibrated appropriate instrument in air at or near the body surface in the region of the highest dose rate.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-050, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-035, filed 12/8/80; Order 1095, § 402-24-035, filed 2/6/76.]

WAC 246-221-060 Permissible levels of radiation from external sources in unrestricted areas.*

Note: *It is the intent of this section to limit radiation levels so that it is unlikely that individuals in unrestricted areas would receive a dose to the whole body in excess of 0.5 rem in any calendar year. If in specific instances, it is determined by the department that this intent is not met, the department may, pursuant to WAC 246-220-100, impose such additional requirements on the licensee or registrant as may be necessary to meet the intent.

(1) Except as authorized by the department pursuant to subsection (2) of this section, no licensee or registrant shall possess, use, or transfer sources of radiation in such a manner as to create in any unrestricted area from such sources of radiation in that person's possession:

(a) Radiation levels which, if an individual were continuously present in the area, could result in the individual's receiving a dose in excess of two millirems in any one hour; or

(b) Radiation levels which, if an individual were continuously present in the area, could result in the individual's receiving a dose in excess of one hundred millirems in any seven consecutive days.

(2) Any person may apply to the department for proposed limits upon levels of radiation in unrestricted areas in excess of those specified in subsection (1) of this section resulting from the applicant's possession or use of sources of radiation. Such applications should include information as to anticipated average radiation levels and anticipated occupancy times for each unrestricted area involved. The department may approve the proposed limits if the applicant demonstrates to the satisfaction of the department that the proposed limits are not likely to cause any individual to receive a dose to the whole body in any period of one calendar year in excess of 0.5 rem and that the proposed limits are consistent with WAC 246-220-007.

(3) In addition to other requirements of this part, licensees engaged in uranium fuel cycle operations subject to the provisions of 40 CFR Part 190, "Environmental

Radiation Protection Standards for Nuclear Power Operation," shall comply with that part.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-040, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-040, filed 12/8/80; Order 1095, § 402-24-040, filed 2/6/76; Order 1, § 402-24-040, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-070 Concentration in effluents released to unrestricted areas.

(1) A licensee shall not possess, use, or transfer licensed material so as to release to an unrestricted area radioactive material in concentrations which exceed the limits specified in WAC 246-221-290, Appendix A, Table II, except as authorized pursuant to subsection (2) of this section. For purposes of this section concentrations may be averaged over a period not greater than one calendar year.

(2) An application for a license or amendment may include proposed limits higher than those specified in subsection (1) of this section. The department will approve the proposed limits if the applicant demonstrates:

(a) That the applicant has made a reasonable effort to minimize the radioactivity contained in effluents released to unrestricted areas; and

(b) That it is not likely that radioactive material discharged in the effluent would result in the exposure of an individual to concentrations of radioactive material in air or water exceeding the limits specified in WAC 246-221-290, Appendix A, Table II.

(3) An application for higher limits pursuant to subsection (2) of this section shall include information demonstrating that the applicant has made a reasonable effort to minimize the radioactivity discharged in effluents to unrestricted areas, and shall include, as pertinent:

(a) Information as to flow rates, total volume of effluent, peak concentration of each radionuclide in the effluent, and concentration of each radionuclide in the effluent averaged over a period of one calendar year at the point where the effluent leaves a stack, tube, pipe, or similar conduit;

(b) A description of the properties of the effluents, including:

(i) Chemical composition,

(ii) Physical characteristics, including suspended solids content in liquid effluents, and nature of gas or aerosol for air effluents,

(iii) The hydrogen ion concentrations (pH) of liquid effluents, and

(iv) The size range of particulates in effluents released into air;

(c) A description of the anticipated human occupancy in the unrestricted area where the highest concentration of radioactive material from the effluent is expected, and, in the case of a river or stream, a description of water uses downstream from the point of release of the effluent;

(d) Information as to the highest concentration of each radionuclide in an unrestricted area, including anticipated concentrations averaged over a period of one calendar year:

(i) In air at any point of human occupancy, or

(ii) In water at points of use downstream from the point of release of the effluent;

(e) The background concentration of radionuclides in the receiving river or stream prior to the release of liquid effluent;

(f) A description of the environmental monitoring equipment, including sensitivity of the system, and procedures and calculations to determine concentrations of radionuclides in the unrestricted area and possible reconcentrations of radionuclides; and

(g) A description of the waste treatment facilities and procedures used to reduce the concentration of radionuclides in effluents prior to their release.

(4) For the purposes of this section, the concentration limits in WAC 246-221-290, Appendix A, Table II of this part shall apply at the boundary of the restricted area. The concentration of radioactive material discharged through a stack, pipe or similar conduit may be determined with respect to the point where the material leaves the conduit. If the conduit discharges within the restricted area, the concentration at the boundary may be determined by applying appropriate factors for dilution, dispersion, or decay between the point of discharge and the boundary.

(5) In addition to limiting concentrations in effluent streams, the department may limit quantities of radioactive material released in air or water during a specified period of time if it appears that the daily intake of radioactive material from air, water, or food by a suitable sample of an exposed population group, averaged over a period not exceeding one calendar year, would otherwise exceed the daily intake resulting from continuous exposure to air or water containing one-third the concentration of radioactive material specified in WAC 246-221-290, Appendix A, Table II.

(6) In addition to the limits set in subsection (1) of this section all radioactive emissions to the atmosphere must meet the requirements of chapter 246-247 WAC.

(7) The provisions of this section do not apply to disposal of radioactive material into sanitary sewerage systems, which is governed by WAC 246-221-190.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-070, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-050, filed 12/11/86; Order 1095, § 402-24-050, filed 2/6/76; Order 1, § 402-24-050, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-080 Leak tests. (1) Each sealed radioactive source possessed under the provisions of a specific license, other than hydrogen-3 (tritium), with a half-life greater than thirty days and in any form other than gas, shall be tested and results obtained for leakage and/or contamination prior to initial use and at six-month intervals or as specified by the license. If there is reason to suspect that a sealed source might have been damaged, it shall be tested for leakage and results obtained before further use.

(2) Leak tests shall be capable of detecting the presence of 0.005 microcurie of removable contamination. The results of leak tests made pursuant to subsection (1) of this section shall be recorded in units of microcuries and shall be maintained for inspection by the department. Any test conducted pursuant to subsection (1) which reveals the

presence of 0.005 microcurie or more of removable contamination shall be considered evidence that the sealed source is leaking. The licensee shall immediately withdraw the source from use and shall cause it to be decontaminated and repaired or to be disposed in accordance with WAC 246-232-080. If a sealed source shows evidence of leaking, a report shall be filed with the department within five days of the test, describing the equipment involved, the test results, and the corrective action taken. Where sealed sources are permanently mounted in devices or equipment, tests for contamination and leakage may be made by wiping appropriate accessible surfaces and measuring these wipes for transferred contamination.

(3) Leak tests are required for sealed radioactive sources that are greater than 100 microcuries for beta and gamma emitters and greater than 10 microcuries for alpha emitters.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-080, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-24-060, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-060, filed 12/8/80; Order 1095, § 402-24-060, filed 2/6/76; Order 1, § 402-24-060, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-090 Personnel monitoring. (1) Each licensee or registrant shall supply appropriate personnel monitoring equipment to, and shall require the use of such equipment by:

(a) Each individual who enters a restricted area under such circumstances that the individual receives, or is likely to receive, a dose in any calendar quarter in excess of 25 percent of the applicable value specified in WAC 246-221-010(1).

(b) Each individual under 18 years of age who enters a restricted area under such circumstances that the individual receives, or is likely to receive, a dose in any calendar quarter in excess of 5 percent of the applicable value specified in WAC 246-221-010(1).

(c) Each individual who enters a high radiation area.

(2) Personnel monitoring devices assigned to an individual:

(a) Shall not intentionally be exposed to give a false or erroneous reading;

(b) Shall be assigned to one individual per exposure interval (i.e., weekly, monthly) and used to determine exposure for that individual only;

(c) Shall not be worn by any individual other than that individual originally assigned to the device;

(d) Personnel monitoring devices that are exposed while not being worn by the assigned individual shall be processed and recorded as soon as possible. A replacement monitoring device shall be assigned to the individual immediately. A record of the circumstances of the exposure shall be retained.

(3) All personnel dosimeters (except for direct and indirect reading pocket ionization chambers and those dosimeters used to measure the dose to hands and forearms, feet, and ankles) that require processing to determine the radiation dose and that are utilized by licensees to comply with subsection (1) of this section, with other applicable provisions of chapters 246-220 through 246-255 WAC, or

with conditions specified in a licensee's license must be processed and evaluated by a dosimetry processor:

(a) Holding current personnel dosimetry accreditation from either the National Voluntary Laboratory Accreditation Program (NVLAP) of the National Institute of Standards and Technology (formerly known as the National Bureau of Standards) or the United States Department of Energy Laboratory Accreditation Program for Personnel Dosimetry Systems (DOELAP); and

(b) Approved in this accreditation process for the type of radiation or radiations included in the NVLAP or DOELAP program that most closely approximate the type of radiation or radiations for which the individual wearing the dosimeter is monitored.

(4) For the purposes of this section "dosimetry processor" means an individual or an organization that processes and evaluates personnel monitoring equipment in order to determine the radiation dose delivered to the equipment.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-221-090, filed 2/21/92, effective 3/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-070, filed 12/8/80; Order 1095, § 402-24-070, filed 2/6/76; Order 708, § 402-24-070, filed 8/24/72; Order 1, § 402-24-070, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-100 Orders requiring furnishing bioassay services. Where necessary or desirable in order to aid in determining the extent of an individual's exposure to concentrations of radioactive material, the department may incorporate license provisions or issue an order requiring a licensee or registrant to make available to the individual appropriate bioassay services and to furnish a copy of the reports of such services to the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-100, filed 12/27/90, effective 1/31/91; Order 1095, § 402-24-080, filed 2/6/76; Order 1, § 402-24-080, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-110 Surveys. Each licensee or registrant shall make or cause to be made such surveys, as defined in WAC 246-220-010, as may be necessary for the licensee or registrant to establish compliance with these regulations and are reasonable under the circumstances to evaluate the extent of radiation hazards that may be present. Records of such surveys shall be preserved as specified in WAC 246-221-230. Information on performing surveys may be found in the United States Nuclear Regulatory Commission's Regulatory Guide 8.23.

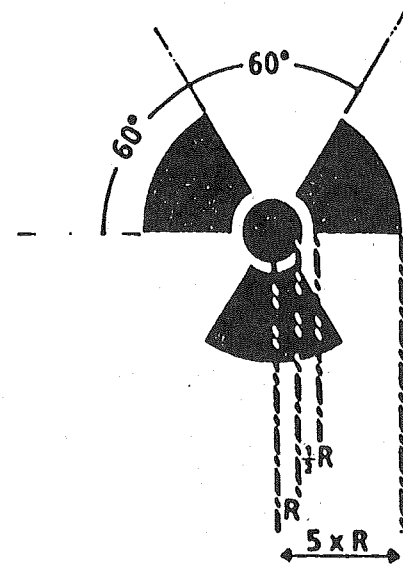
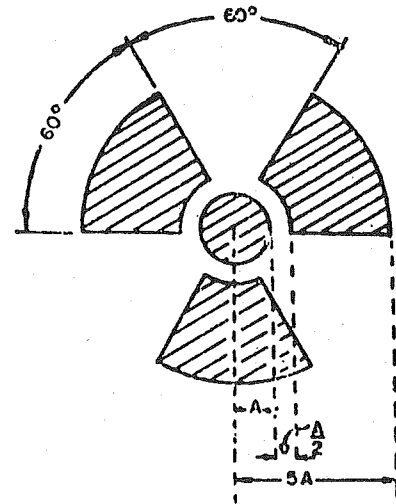
[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-110, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-085, filed 12/11/86; 83-19-050 (Order 2026), § 402-24-085, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-085, filed 12/8/80; Order 1095, § 402-24-085, filed 2/6/76.]

WAC 246-221-120 Caution signs, labels, and signals. (1) General.

(a) Except as otherwise authorized by the department, symbols prescribed by this section shall use the conventional radiation caution colors (magenta or purple on yellow

background). The symbol prescribed by this section is the conventional three-blade design: Radiation symbol

- (i) Cross-hatch area is to be magenta or purple.
- (ii) Background is to be yellow.



(b) The conventional radiation symbol as described in (a) of this subsection shall be used only for:

(i) Instructing individuals to be cognizant of a potential radiation hazard as prescribed in (c) through (j) of this subsection.

(ii) Indicating that information presented pertains to the topic of radiation.

(c) In addition to the contents of signs and labels prescribed in this section, a licensee or registrant may provide on or near such signs and labels any additional information which may be appropriate in aiding individuals to minimize exposure to radiation.

(d) Each radiation area and entrance thereto shall be conspicuously posted with a sign or signs bearing the radiation caution symbol and the words: CAUTION* -

RADIATION AREA. However, in an exceptionally large room where other activities of a nonradiological nature are conducted the entrance need not be posted provided a conspicuous barricade with an appropriate number of signs is established to delineate the radiation area.

Note: *The word "DANGER" may be substituted for "CAUTION" on signs required by (d) through (h) of this subsection.

(e) *High radiation areas.*

(i) Each high radiation area and all entrances thereto shall be conspicuously posted with a sign or signs bearing the radiation caution symbol and the words: CAUTION* - HIGH RADIATION AREA.

(ii) Each entrance or access point to a high radiation area shall be:

(A) Equipped with a control device which shall cause the level of radiation to be reduced below that at which an individual might receive a dose of one hundred millirems in one hour upon entry into the area; or

(B) Equipped with a control device which shall energize a conspicuous visible or audible alarm signal in such a manner that the individual entering the high radiation area and the licensee or a supervisor of the activity are made aware of the entry; or

(C) Maintained locked except during periods when access to the area is required, with positive control over each individual entry.

(iii) The controls required by (e)(ii) of this subsection shall be established in such a way that no individual will be prevented from leaving a high radiation area.

(iv) In the case of a high radiation area established for a period of thirty days or less, direct surveillance to prevent unauthorized entry may be substituted for the controls required by (e)(ii) of this subsection. Direct surveillance requires the continuous physical presence of an individual capable of taking all necessary precautions to prevent unwarranted exposure of individuals.

(v) Any licensee or registrant may apply to the department for approval of methods not included in (e)(ii) and (iv) of this subsection for controlling access to high radiation areas. The department will approve the proposed alternatives if the licensee or registrant demonstrates that the alternative methods of control will prevent unauthorized entry into a high radiation area, and that the requirement of (e)(ii) of this subsection is met.

(vi) *Very high radiation areas:*

(A) Each area in which there may exist radiation levels in excess of five hundred rems in one hour at one meter from a sealed radioactive source⁷ that is used to irradiate materials shall:

(I) Have each entrance or access point equipped with entry control devices which shall function automatically to prevent any individual from inadvertently entering the area when such radiation levels exist; permit deliberate entry into the area only after a control device is actuated that shall cause the radiation level within the area, from the sealed source, to be reduced below that at which it would be impossible for an individual to receive a dose in excess of one hundred mrem in one hour; and prevent operation of the source if the source would produce radiation levels in the area that could result in a dose to an individual in excess of one hundred mrem in one hour. The entry control devices

required by (e)(vi)(A) of this subsection shall be established in such a way that no individual will be prevented from leaving the area.

(II) Be equipped with additional control devices such that upon failure of the entry control devices to function as required by (e)(vi)(A)(I) of this subsection the radiation level within the area, from the sealed source, shall be reduced below that at which it would be possible for an individual to receive a dose in excess of one hundred mrem in one hour; and visible and audible alarm signals shall be generated to make an individual attempting to enter the area aware of the hazard and the licensee or at least one other individual who is familiar with the activity and prepared to render or summon assistance, aware of such failure of the entry control devices;

(III) Be equipped with control devices such that upon failure or removal of physical radiation barriers other than the source's shielded storage container the radiation level from the source shall be reduced below that at which it would be possible for an individual to receive a dose in excess of one hundred mrem in one hour; and visible and audible alarm signals shall be generated to make potentially affected individuals aware of the hazard and the licensee or at least one other individual, who is familiar with the activity and prepared to render or summon assistance, aware of the failure or removal of the physical barrier. When the shield for the stored source is a liquid, means shall be provided to monitor the integrity of the shield and to signal, automatically, loss of adequate shielding. Physical radiation barriers that comprise permanent structural components, such as walls, that have no credible probability of failure or removal in ordinary circumstances need not meet the requirements of (e)(vi)(A)(III) of this subsection;

(IV) Be equipped with devices that will automatically generate visible and audible alarm signals to alert personnel in the area before the source can be put into operation and in sufficient time for any individual in the area to operate a clearly identified control device which shall be installed in the area and which can prevent the source from being put into operation;

(V) Be controlled by use of such administrative procedure and such devices as are necessary to assure that the area is cleared of personnel prior to each use of the source preceding which use it might have been possible for an individual to have entered the area;

(VI) Be checked by a physical radiation measurement to assure that prior to the first individual's entry into the area after any use of the source, the radiation level from the source in the area is below that at which it would be possible for an individual to receive a dose in excess of one hundred mrem in one hour;

(VII) Have entry control devices required in (e)(vi)(A)(I) of this subsection which have been tested for proper functioning prior to initial operation with such source of radiation on any day that operations are not uninterruptedly continued from the previous day or before resuming operations after any unintended interruption, and for which records are kept of the dates, times, and results of such tests of function. No operations other than those necessary to place the source in safe condition or to effect repairs on controls shall be conducted with such source unless control devices are functioning properly. The licensee shall submit an

acceptable schedule for more complete periodic tests of the entry control and warning systems to be established and adhered to as a condition of the license;

(VIII) Have those entry and exit portals that are used in transporting materials to and from the irradiation area, and that are not intended for use by individuals, controlled by such devices and administrative procedures as are necessary to physically protect and warn against inadvertent entry by any individual through such portals. Exit portals for processed materials shall be equipped to detect and signal the presence of loose radiation sources that are carried toward such an exit and to automatically prevent such loose sources from being carried out of the area.

(B) Licensees with, or applicants for, licenses for radiation sources that are within the purview of (e)(vi)(A) of this subsection, and that must be used in a variety of positions or in peculiar locations, such as open fields or forests, that make it impracticable to comply with certain requirements of (e)(vi)(A) of this subsection, such as those for the automatic control of radiation levels, may apply to the department for approval, prior to use of safety measures that are alternative to those specified in (e)(vi)(C) of this subsection, and that will provide at least an equivalent degree of personnel protection in the use of such sources. At least one of the alternative measures must include an entry-preventing interlock control based on a physical measurement of radiation that assures the absence of high radiation levels before an individual can gain access to an area where such sources are used.

(f) *Airborne radioactivity areas.* Each airborne radioactivity area shall be conspicuously posted with a sign or signs bearing the radiation caution symbol and the words: CAUTION* - AIRBORNE RADIOACTIVITY AREA.

(g) *Additional requirements.*

(i) Each area or room in which any radioactive material, other than natural uranium or thorium, is used or stored in an amount exceeding 10 times the quantity of radioactive material specified in Appendix B of this part shall be conspicuously posted with a sign or signs bearing the radiation caution symbol and the words: CAUTION* - RADIOACTIVE MATERIAL.

(ii) Each area or room in which natural uranium or thorium is used or stored in an amount exceeding one hundred times the quantity specified in Appendix B of this part shall be conspicuously posted with a sign or signs bearing the radiation caution symbol and the words: CAUTION* - RADIOACTIVE MATERIAL.

(h) *Containers and articles.*

(i) Except as provided in this section, each container of radioactive material shall bear a durable, clearly visible label identifying the radioactive contents.

(ii) A label required pursuant to (h)(i) of this subsection shall bear the radiation caution symbol and the words: CAUTION* - RADIOACTIVE MATERIAL. It shall also provide sufficient information to permit individuals handling or using the containers, or working in the vicinity thereof, to take precautions to avoid or minimize exposures.

As appropriate, the information will include radiation levels, kinds of material, estimate of activity, date for which activity is estimated.

(i) Where containers are used for storage, the labels required in this subdivision shall state also the quantities and

kinds of radioactive materials in the containers and the date of measurement of the quantities.

(j) All radiation machines shall be labeled in a manner which cautions individuals that radiation is produced when the machine is being operated.

(2) **Notwithstanding the provisions of subsection (1)(h), (i) of this section labeling is not required:**

(a) For laboratory containers, such as beakers, flasks, and test tubes, used transiently in laboratory procedures when the person using such containers is present. For such containers a label identifying the radioactive contents is not required.

(b) For containers that do not contain radioactive material in quantities greater than the applicable quantities listed in WAC 246-221-300, Appendix B.

(c) For containers containing only natural uranium or thorium in quantities no greater than ten times the applicable quantities listed in WAC 246-221-300, Appendix B.

(d) For containers that do not contain radioactive material in concentrations greater than the applicable concentrations listed in WAC 246-221-290, Column 2, Table I, Appendix A.

(e) For containers when they are attended by an individual who takes the precautions necessary to prevent the exposure of any individual to radiation or radioactive material in excess of the limits established by the regulations in this part;

(f) For containers when they are in transport and packaged and labeled in accordance with regulations published by the United States Department of Transportation;

(g) For containers which are accessible only to individuals authorized to handle or use them* or to work in the vicinity thereof, provided that the contents are identified to such individuals by a readily available written record;

Note: *For example, containers in locations such as water-filled canals, storage vaults, or hot cells.

(h) For manufacturing and process equipment such as piping and tanks.

(3) Each licensee, prior to disposal of an empty container which previously held radioactive material shall properly survey for contamination and remove or deface the radioactive material label or otherwise clearly indicate that the container no longer contains radioactive materials.

⁷This paragraph does not apply to radioactive sources that are used in teletherapy, in radiography, or in completely self-shielded irradiators in which the source is both stored and operated within the same shielding radiation barrier and, in the designed configuration of the irradiator, is always physically inaccessible to any individual and cannot create high levels of radiation in an area that is accessible to any individual. This paragraph also does not apply to sources from which the radiation is incidental to some other use nor to nuclear reactor generated radiation other than radiation from byproduct, source, or special nuclear materials that are used in sealed sources in nonself-shielded irradiators.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-120, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-090, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-090, filed 12/8/80; Order 1095, § 402-24-090, filed 2/6/76; Order 1, § 402-24-090, filed 1/8/69; Rules (part), filed 10/26/66.]

Reviser's note: RCW 34.05.395 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 246-221-130 Exceptions from posting and labeling requirements. (1) A room or area is not required to be posted with a caution sign because of the presence of a sealed source, provided the radiation level 30.5 centimeters from the surface of the source container or housing does not exceed five millirem per hour.

(2) Rooms or other areas in hospitals are not required to be posted with caution signs, and control of entrance or access thereto pursuant to WAC 246-221-120 (1)(c) is not required, because of the presence of patients containing less than 30 millicuries of radioactive material provided that there are personnel in attendance who will take the precautions necessary to prevent the exposure of any individual to radiation or radioactive material in excess of the limits established in the regulations in this chapter.

(3) Caution signs are not required to be posted in areas or rooms containing radioactive material for periods of less than eight hours provided that:

(a) The material is constantly attended during such periods by an individual who shall take the precautions necessary to prevent the exposure of any individual to radiation or radioactive material in excess of the limits established in this part; and

(b) Such area or room is subject to the licensee's or registrant's control.

(4) A room or other area is not required to be posted with a caution sign, and control is not required for each entrance or access point to a room or other area which is used solely for the storage of radioactive material prepared for transport and packaged and labeled in accordance with regulations of the United States Department of Transportation.

(5) Rooms with x-ray equipment may not be required to be posted with caution signs provided that access is controlled.

(6) The interior of a teletherapy room is not required to be posted with caution signs provided such posting is conspicuously placed at the entrance(s) to the rooms.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-130, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-24-095, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-095, filed 12/8/80; Order 1095, § 402-24-095, filed 2/6/76.]

WAC 246-221-140 Instruction of personnel. Instructions required for individuals working in or frequenting any portion of a restricted area are specified in WAC 246-222-020, 246-222-030, and 246-222-040.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-140, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-24-110, filed 9/16/83; Order 1095, § 402-24-110, filed 2/6/76; Order 708, § 402-24-110, filed 8/24/72; Order 1, § 402-24-110, filed 7/2/71; Order 1, § 402-24-110, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-150 Security and control of stored radioactive material. (1) Licensed materials shall be secured from, or controlled in such a manner so as to prevent unauthorized removal from the place of storage.

(2) Licensed materials in an unrestricted area and not in storage shall be tended under the constant surveillance and immediate control of the licensee.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-24-120, filed 9/16/83; Order 1095, § 402-24-120, filed 2/6/76; Order 1, § 402-24-120, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-160 Procedures for picking up, receiving, and opening packages. (1)(a) Each licensee or registrant who expects to receive a package containing quantities of radioactive material in excess of the Type A₁ or A₂ quantities specified in WAC 246-220-110 shall:

(i) If the package is to be delivered to the licensee's or registrant's facility by the carrier, make arrangements to receive the package when it is offered for delivery by the carrier; or

(ii) If the package is to be picked up by the licensee or registrant at the carrier's terminal, make arrangements to receive immediate notification from the carrier of the arrival of the package.

(b) Each licensee or registrant who picks up a package of radioactive material from a carrier's terminal shall pick up the package expeditiously upon receipt of notification from the carrier of its arrival.

(2)(a) Each licensee or registrant, upon receipt of a package of radioactive material, shall monitor the external surfaces of the package for radioactive contamination caused by leakage of the radioactive contents, except:

(i) Packages containing less than one hundred times the quantity of nuclide(s) specified in WAC 246-232-120, Schedule B;

(ii) Packages containing no more than 10 millicuries of radioactive material consisting solely of tritium, carbon-14, sulfur-35, or iodine-125;

(iii) Packages containing only radioactive material as gases or in special form;

(iv) Packages containing only radioactive material in other than liquid form (including Mo-99/Tc-99m generators) and not exceeding the Type A₁ or A₂ quantity limit specified in WAC 246-220-110; and

(v) Packages containing only radionuclides with half-lives of less than 30 days and a total quantity of no more than 100 millicuries.

The monitoring shall be performed as soon as practicable after receipt, but no later than three hours after the package is received at the licensee's facility if received during the licensee's normal working hours, or no later than three hours from the beginning of the next working day if received after normal working hours.

(b) If removable radioactive contamination in excess of 0.01 microcurie (22,200 transformations per minute) per one hundred square centimeters of package surface is found on the external surfaces of the package, the licensee shall immediately notify by telephone, telegraph, mailgram or facsimile, the final delivering carrier, shipper and the department.

(3)(a) Each licensee or registrant, upon receipt of a package containing quantities of radioactive material in excess of the Type A₁ or A₂ quantities specified in WAC 246-220-110, other than those transported by exclusive use vehicle, shall monitor the radiation levels external to the package. The package shall be monitored as soon as practicable after receipt, but no later than three hours after the package is received at the licensee's facility if received during the licensee's normal working hours, and no later than three hours from the beginning of the next working day if received after normal working hours.

(b) If radiation levels are found on the external surface of the package in excess of two hundred millirem per hour, or at one meter from the external surface of the package in excess of ten millirem per hour, the licensee or registrant shall immediately notify, by telephone, telegraph, mailgram or facsimile, the shipper, the final delivering carrier and the department.

(4) Each licensee or registrant shall establish and maintain procedures for safely opening packages in which radioactive material is received, and shall assure that such procedures are followed and that due consideration is given to instructions for the type of package being opened and the monitoring of potentially contaminated packaging material (including packages containing radioactive material in gaseous form) to assure that only background levels of radiation are present prior to disposal of such material as nonradioactive waste. In addition, this shall include a wipe sample of the outside of any inner package which contains a liquid or dispersible radionuclide (radioactive wastes shall be exempted). Copies of such written procedures shall be retained for inspection by the department.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-160, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-125, filed 12/11/86; 83-19-050 (Order 2026), § 402-24-125, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-125, filed 12/8/80; Order 1095, § 402-24-125, filed 2/6/76.]

WAC 246-221-170 Waste disposal, general requirement. No licensee shall dispose of any radioactive material except:

(1) By transfer to an authorized recipient as provided in WAC 246-232-080, or

(2) As authorized pursuant to WAC 246-221-070, 246-221-180, 246-221-190, or 246-221-200.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-170, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-130, filed 12/8/80; Order 1095, § 402-24-130, filed 2/6/76; Order 1, § 402-24-130, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-180 Method of obtaining approval of proposed disposal procedures. Any person may apply to the department for approval of proposed procedures to dispose of radioactive material in a manner not otherwise authorized in this chapter. Each application shall contain a description of the radioactive material, including the quantities and kinds of radioactive material and levels of radioac-

tivity involved, and the proposed manner and conditions of disposal. The application, where appropriate, shall also include an analysis and evaluation of pertinent information as to the nature of the environment, including topographical, geological, meteorological, and hydrological characteristics; usage of ground and surface waters in the general area; the nature and location of other potentially affected facilities; and procedures to be observed to minimize the risk of unexpected or hazardous exposures.

The department will not approve any application for a license to receive radioactive material from other persons for disposal on land not owned by a state or the federal government.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-135, filed 12/11/86; Order 1095, § 402-24-135, filed 2/6/76.]

WAC 246-221-190 Disposal by release into sanitary sewerage systems. No licensee shall discharge radioactive material into a sanitary sewerage system unless:

(1) It is readily soluble or dispersible in water;

(2) The quantity of any radioactive material released into the system by the licensee in any one day does not exceed the larger of:

(a) The quantity which, if diluted by the average daily quantity of sewage released into the sewer by the licensee, will result in an average concentration not greater than the limits specified in WAC 246-221-290, Appendix A, Table I, Column 2; or

(b) Ten times the quantity of such material specified in WAC 246-221-300, Appendix B of this part;

(3) The quantity of any radioactive material released in any one month, if diluted by the average monthly quantity of water released by the licensee, will not result in an average concentration exceeding the limits specified in WAC 246-221-290, Appendix A, Table I, Column 2; and

(4) The gross quantity of all radioactive material except hydrogen-3 and carbon-14 released into the sewerage system by the licensee does not exceed one curie (1Ci) per year. The amount released into the sewerage system for hydrogen-3 shall not exceed 5 curies per year and for carbon-14 shall not exceed 1 curie per year.

Excreta from individuals undergoing medical diagnosis or therapy with radioactive material shall be exempt from any limitations contained in this section: *Provided*, That the licensee provides for appropriate radiological monitoring whenever any waste line in the licensee's installation which may carry such excreta is opened.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-190, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-24-140, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-140, filed 12/8/80; Order 1095, § 402-24-140, filed 2/6/76; Order 1, § 402-24-140, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-200 Disposal by burial in soil. No licensee shall dispose of radioactive material by burial in soil except as specifically approved by the department pursuant to WAC 246-221-180.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-200, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-150, filed 12/8/80; Order 1095, § 402-24-150, filed 2/6/76; Order 1, § 402-24-150, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-210 Disposal by incineration. No licensee shall incinerate radioactive material for the purpose of disposal or preparation for disposal except as specifically approved by the department pursuant to WAC 246-221-070 and 246-221-180.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-210, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-210, filed 12/27/90, effective 1/31/91; Order 1095, § 402-24-160, filed 2/6/76; Order 1, § 402-24-160, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-220 Disposal of specific wastes. Any licensee may dispose of the following licensed material without regard to its radioactivity:

(1) 0.05 microcuries or less of hydrogen-3 or carbon-14, per gram of medium, used for liquid scintillation counting; and

(2) 0.05 microcuries or less of hydrogen-3 or carbon-14, per gram of animal tissue averaged over the weight of the entire animal: *Provided however*, Tissue may not be disposed under this section in a manner that would permit its use either as food for humans or as animal feed; and

(3) Nothing in this section, however, relieves the licensee of maintaining records showing the receipt, transfer and disposal of such byproduct material as specified in WAC 246-220-020; and

(4) Nothing in this section relieves the licensee from complying with other applicable federal, state and local regulations governing any other toxic or hazardous property of these materials.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-220, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-24-165, filed 9/16/83.]

WAC 246-221-230 Records of surveys, radiation monitoring, and disposal. (1) Each licensee or registrant shall maintain records showing the radiation exposures of all individuals for whom personnel monitoring is required under WAC 246-221-090. Such records shall be kept on state of Washington current occupational external radiation exposure (Form RHF-5), in accordance with the instructions contained in that form, or on clear and legible records containing all the information required by Form RHF-5. The doses entered on the forms or records shall be for periods of time not exceeding one calendar quarter.

(2) Each licensee or registrant shall maintain records in the same units used in this part, showing the results of surveys required by WAC 246-221-110 monitoring required by WAC 246-221-160, and disposals made under WAC 246-221-180, 246-221-190, 246-221-200, 246-221-210, and 246-221-220.

(3)(a) Records of individual exposure to radiation and to radioactive material which must be maintained pursuant

to the provisions of subsection (1) of this section and records of bioassays, including results of whole body counting examinations made pursuant to WAC 246-221-100, shall be preserved indefinitely or until the department authorizes their disposal.

(b) Records of the results of surveys and monitoring which must be maintained pursuant to subsection (2) of this section shall be preserved for two years after completion of the survey except that the following records shall be maintained until the department authorizes their disposition:

(i) Records of the results of surveys to determine compliance with WAC 246-221-040;

(ii) In the absence of personnel monitoring data, records of the results of surveys to determine external radiation dose;

(iii) Records of the results of surveys used to evaluate the release of radioactive effluents to the environment.

(4) Records of disposal of licensed material made pursuant to WAC 246-221-180, 246-221-190, 246-221-200, 246-221-210, or 246-221-220 shall be maintained until the department authorizes their disposition.

(5) Records which must be maintained pursuant to this part may be the original or a reproduced copy or microform if such reproduced copy or microform is duly authenticated by authorized personnel and the microform is capable of producing a clear and legible copy after storage for the period specified by department regulations.

(6) If there is a conflict between the department's regulations in this part, license condition, or other written department approval or authorization pertaining to the retention period for the same type of record, the retention period specified in the regulations in this part for such records shall apply unless the department, pursuant to WAC 246-220-050, has granted a specific exemption from the record retention requirements specified in the regulations in this part.

(7) The discontinuance or curtailment of activities does not relieve the licensee or registrant of responsibility for retaining all records required by this section. A licensee or registrant may, however, request the department to accept such records. The acceptance of the records by the department relieves the licensee or registrant of subsequent responsibility only in respect to their preservation as required in this section.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-230, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-170, filed 12/11/86; 83-19-050 (Order 2026), § 402-24-170, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-170, filed 12/8/80; Order 1095, § 402-24-170, filed 2/6/76; Order 708, § 402-24-170, filed 8/24/72; Order 1, § 402-24-170, filed 7/2/71; Order 1, § 402-24-170, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-240 Reports of theft or loss of radiation sources. Each licensee and/or registrant shall report immediately by telephone (206/682-5327) and confirm promptly by letter to the State Department of Health, Division of Radiation Protection, Mailstop LE-13, Olympia, Washington 98504, the actual or attempted theft or loss as soon as such theft or loss becomes known to the licensee and/or registrant of:

(1) Any radiation-producing machine; or

(2) Any quantity of radioactive material in excess of a quantity exempted under WAC 246-221-300, Appendix B, or any item not exempted in chapter 246-232 WAC.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-240, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-180, filed 12/11/86; 83-19-050 (Order 2026), § 402-24-180, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-180, filed 12/8/80; Order 1095, § 402-24-180, filed 2/6/76; Order 708, § 402-24-180, filed 8/24/72; Order 1, § 402-24-180, filed 7/2/71; Order 1, § 402-24-180, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-250 Notification of incidents. (1) **Immediate notification.** Each licensee and/or registrant shall immediately notify the State Department of Health, Division of Radiation Protection, Mailstop LE-13, Olympia, Washington 98504, by telephone (206/682-5327) and confirming letter of any incident involving any radiation source which may have caused or threatens to cause:

(a) A dose to the whole body of any individual, or any dosimetry device assigned to any individual, of twenty-five rems or more of radiation; a dose to the skin of the whole body of any individual or any dosimetry device assigned to any individual of one hundred fifty rems or more of radiation; or a dose to the feet, ankles, hands, or forearms of any individual, or any dosimetry device assigned to any individual, of three hundred seventy-five rems or more of radiation; or

(b) The release of radioactive material in concentrations which, if averaged over a period of twenty-four hours, would exceed five thousand times the limits specified for such materials in WAC 246-221-290, Appendix A, Table II.

(2) **Twenty-four hour notification.** Each licensee and/or registrant shall within twenty-four hours notify the State Department of Health, Division of Radiation Protection, Mailstop LE-13, Olympia, Washington 98504, by telephone (206/682-5327) and confirming letter of any incident involving any radiation source possessed which may have caused or threatens to cause:

(a) A dose to the whole body of any individual, or any dosimetry device assigned to any individual, of five rems or more of radiation; a dose to the skin of the whole body of any individual or any dosimetry device assigned to any individual of thirty rems or more of radiation; or a dose to the feet, ankles, hands, or forearms or any dosimetry device assigned to any individual, of seventy-five rems or more of radiation; or

(b) The release of radioactive material in concentrations which, if averaged over a period of twenty-four hours, would exceed five hundred times the limits specified for such materials in WAC 246-221-290, Appendix A, Table II.

(3) For each occurrence, requiring notification pursuant to this section, a prompt investigation of the situation shall be initiated by the licensee/registrant. A written report of the findings of the investigation shall be sent to the department within thirty days.

Any report filed with the department pursuant to this section shall be prepared in the manner described in WAC 246-221-260(2). Telephone notifications that do not involve immediate or twenty-four hour notification shall not be made

to the emergency number (Seattle 206/682-5327). Routine calls should be made to the Olympia office (206/753-3468).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-250, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-24-190, filed 12/11/86; 83-19-050 (Order 2026), § 402-24-190, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-190, filed 12/8/80; Order 1095, § 402-24-190, filed 2/6/76; Order 708, § 402-24-190, filed 8/24/72; Order 1, § 402-24-190, filed 7/2/71; Order 1, § 402-24-190, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-260 Reports of overexposures and excessive levels and concentrations. (1) In addition to any notification required by WAC 246-221-250, each licensee or registrant shall make a report in writing within 30 days to the department of each exposure of an individual to radiation level or concentrations of radioactive material in excess of any applicable limit as set forth in this part or as otherwise approved by the department.

(2) Each report required by subsection (1) of this section shall describe:

(a) The extent of exposure of individuals to radiation or to radioactive material, including estimates of each individual's dose as required by subsection (3) of this section;

(b) Levels of radiation and concentrations of radioactive material involved;

(c) The cause of exposure, levels or concentrations; and

(d) Corrective steps taken or planned to assure against a recurrence.

(3) Any report filed with the department pursuant to this section shall include for each individual exposed the name, social security number, and date of birth, and an estimate of the individual's dose. The report shall be prepared so that this information is stated in a separate part of the report.

(4) Individuals shall be notified of reports in accordance with the requirements of WAC 246-222-040.

(5) In addition to any notification required by WAC 246-221-250, each licensee shall make a report in writing within 30 days to the department of levels of radiation or releases of radioactive material in excess of limits specified by 40 CFR Part 190, "Environmental radiation protection standards for nuclear power operations," or in excess of license conditions related to compliance with 40 CFR Part 190. Each report required under this paragraph shall describe the extent of exposure of individuals to radiation or to radioactive material; levels of radiation and concentrations of radioactive material involved; the cause of the exposure, levels of concentrations; and corrective steps taken or planned to assure against a recurrence.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-260, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-200, filed 12/8/80; Order 1095, § 402-24-200, filed 2/6/76; Order 708, § 402-24-200, filed 8/24/72; Order 1, § 402-24-200, filed 7/2/71; Order 1, § 402-24-200, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-270 Vacating premises. Each specific licensee shall, no less than 30 days before vacating or relinquishing possession or control of premises which may

The specific activity for natural uranium is 6.77x10⁻⁷ curies per gram U. The specific activity for other mixtures of U-238, U-235 and U-234, if not known, shall be:

SA = 3.6x10⁻⁷ curies/gram U
 U-depleted
 SA = (0.4 + 0.38 E + 0.0034 E²) 10⁻⁶
 E ≥ 0.72

where E is the percentage by weight of U-235, expressed as percent.

Note: In any case where there is a mixture in air or water of more than one radionuclide, the limiting values for purposes of this Appendix should be determined as follows:

- If the identity and concentration of each radionuclide in the mixture are known, the limiting values should be derived as follows: Determine, for each radionuclide in the mixture, the ratio between the quantity present in the mixture and the limit otherwise established in Appendix "A" for the specific radionuclide when not in a mixture. The sum of such ratios for all the radionuclides in the mixture may not exceed "1" (i.e., "unity")

Example: If radionuclides a, b, and c are present in concentrations C_a, C_b, and C_c, and if the applicable MPC's are MPC_a, MPC_b, and MPC_c respectively, then the concentrations shall be limited so that the following relationship exists:

$$\frac{C_a}{MPC_a} + \frac{C_b}{MPC_b} + \frac{C_c}{MPC_c} \leq 1$$

- If either the identity or the concentration of any radionuclide in the mixture is not known, the limiting values for purposes of Appendix "A" shall be:
 - For purposes of Table I, Col. 1 6x10⁻¹³
 - For purposes of Table I, Col. 2 4x10⁻⁷
 - For purposes of Table II, Col. 1 2x10⁻¹⁴
 - For purposes of Table II, Col. 2 3x10⁻⁸
- If any of the conditions specified below are met, the corresponding values specified below may be used in lieu of those specified in paragraph 2, above.
 - If the identity of each radionuclide in the mixture is known but the concentration of one or more of the radionuclides in the mixture is not known, the concentration limit for the mixture is the limit specified in Appendix "A" for the radionuclide in the mixture having the lowest concentration limit; or
 - If the identity of each radionuclide in the mixture is not known, but it is known that certain radionuclides specified in Appendix "A" are not present in the mixture, the concentration limit for the mixture is the lowest concentration limit specified in Appendix "A" for any radionuclide which is not known to be absent from the mixture; or

c. Radionuclide

Table I Restricted Area		Table II Unrestricted Area	
Column 1 Air (μCi/ml)	Column 2 Water (μCi/ml)	Column 1 Air (μCi/ml)	Column 2 Water (μCi/ml)

If it is known that Sr-90, I-125, I-126, I-129, I-131, (I-133 Table II only), Pb-210, Po-210, At-211, Ra-223, Ra-224, Ra-226, Ac-227, Ra-228, Th-230, Pa-231, Th-232, Th-nat, Cm-248, Cf-254, and Fm-256 are not present

_____ 9x10⁻⁵ _____ 3x10⁻⁶

If it is known that Sr-90, I-125, I-126, I-129, (I-131, I-133, Table II only), Pb-210, Po-210, Ra-223, Ra-226, Ra-228, Pa-231,

Th-nat, Cm-248, Cf-254, and Fm-256 are not present	_____	6x10 ⁻⁵	_____	2x10 ⁻⁶
If it is known that Sr-90, I-129 (I-125, I-126, I-131, Table II only), Pb-210, Ra-226, Ra-228, Cm-248, and Cf-254 are not present	_____	2x10 ⁻⁵	_____	6x10 ⁻⁷
If it is known that (I-129, Table II only), Ra-226, and Ra-228 are not present	_____	3x10 ⁻⁶	_____	1x10 ⁻⁷
If it is known that alpha-emitters and Sr-90, I-129, Pb-210, Ac-227, Ra-228, Pa-230, Pu-241, and Bk-249 are not present	3x10 ⁻⁹	_____	1x10 ⁻¹⁰	_____
If it is known that alpha-emitters and Pb-210, Ac-227, Ra-228, and Pu-241 are not present	3x10 ⁻¹⁰	_____	1x10 ⁻¹¹	_____
If it is known that alpha-emitters and Ac-227 are not present	3x10 ⁻¹¹	_____	1x10 ⁻¹²	_____
If it is known that Ac-227, Th-230, Pa-231, Pu-238, Pu-239, Pu-240, Pu-242, Pu-244, Cm-248, Cf-249 and Cf-251 are not present	3x10 ⁻¹²	_____	1x10 ⁻¹³	_____

- If the mixture of radionuclides consists of uranium and its daughter products in ore dust prior to chemical processing of the uranium ore, the values specified below may be used in lieu of those determined in accordance with paragraph 1 above or those specified in paragraphs 2 and 3 above.
 - For purposes of Table I, Column 1, 1x10⁻¹⁰ μCi/ml gross alpha activity; or 5x10⁻¹¹ μCi/ml natural uranium; or 75 micrograms per cubic meter of air natural uranium.
 - For purposes of Table II, Column 1, 3x10⁻¹² μCi/ml gross alpha activity; 2x10⁻¹² μCi/ml natural uranium; or 3 micrograms per cubic meter of air natural uranium.

- For purposes of this note, a radionuclide may be considered as not present in a mixture if (a) the ratio of the concentration of that radionuclide in the mixture (C_a) to the concentration limit for that radionuclide specified in Table II of Appendix "A" (MPC_a) does not exceed 1/10, (i.e., C_a/MPC_a ≤ 1/10 and (b) the sum of such ratios for all radionuclides considered as not present in the mixture does not exceed 1/4 (i.e., C_a/MPC_a + C_b/MPC_b + ... ≤ 1/4).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-290, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-220, filed 12/8/80; Order 1095, § 402-24-220, filed 2/6/76; Order 1, § 402-24-220, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-221-300 Appendix B—Quantities exempt from labeling.

Material	Microcuries
Americium-241	0.01
Antimony-122	100
Antimony-124	10
Antimony-125	10
Arsenic-73	100
Arsenic-74	10
Arsenic-76	10
Arsenic-77	100
Barium-133	10
Barium-140	10
Bismuth-210	1
Bromine-82	10
Cadmium-109	10
Cadmium-115m	10
Cadmium-115	100

Calcium-45	10	Palladium-103	100
Calcium-47	10	Palladium-109	100
Carbon-14	100	Phosphorus-32	10
Cerium-141	100	Platinum-191	100
Cerium-143	100	Platinum-193m	100
Cerium-144	1	Platinum-193	100
Cesium-131	1,000	Platinum-197m	100
Cesium-134m	100	Platinum-197	100
Cesium-134	1	Plutonium-239	0.01
Cesium-135	10	Polonium-210	0.1
Cesium-136	10	Potassium-42	10
Cesium-137	10	Praseodymium-142	100
Chlorine-36	10	Praseodymium-143	100
Chlorine-38	10	Promethium-147	10
Chromium-51	1,000	Promethium-149	10
Cobalt-58m	10	Radium-226	0.01
Cobalt-58	10	Rhenium-186	100
Cobalt-60	1	Rhenium-188	100
Copper-64	100	Rhodium-103m	100
Dysprosium-165	10	Rhodium-105	100
Dysprosium-166	100	Rubidium-86	10
Erbium-169	100	Rubidium-87	10
Erbium-171	100	Ruthenium-97	100
Europium-152 (9.2 h)	100	Ruthenium-103	10
Europium-152 (13 yr)	1	Ruthenium-105	10
Europium-154	1	Ruthenium-106	1
Europium-155	10	Samarium-151	10
Fluorine-18	1,000	Samarium-153	100
Gadolinium-153	10	Scandium-46	10
Gadolinium-159	100	Scandium-47	100
Gallium-72	10	Scandium-48	10
Germanium-71	100	Selenium-75	10
Gold-198	100	Silicon-31	100
Gold-199	100	Silver-105	10
Hafnium-181	10	Silver-110m	1
Holmium-166	100	Silver-111	100
Hydrogen-3	1,000	Sodium-22	10
Indium-113m	100	Sodium-24	10
Indium-114m	10	Strontium-85	10
Indium-115m	100	Strontium-89	1
Indium-115	10	Strontium-90	0.1
Iodine-125	1	Strontium-91	10
Iodine-126	1	Strontium-92	10
Iodine-129	0.1	Sulphur-35	100
Iodine-131	1	Tantalum-182	10
Iodine-132	10	Technetium-96	10
Iodine-133	1	Technetium-97m	100
Iodine-134	10	Technetium-97	100
Iodine-135	10	Technetium-99m	100
Iridium-192	10	Technetium-99	10
Iridium-194	100	Tellurium-125m	10
Iron-55	100	Tellurium-127m	10
Iron-59	10	Tellurium-127	100
Krypton-85	100	Tellurium-129m	10
Krypton-87	10	Tellurium-129	100
Lanthanum-140	10	Tellurium-131m	10
Lutetium-177	100	Tellurium-132	10
Manganese-52	10	Terbium-160	10
Manganese-54	10	Thallium-200	100
Manganese-56	10	Thallium-201	100
Mercury-197m	100	Thallium-202	100
Mercury-197	100	Thallium-204	10
Mercury-203	10	Thorium (natural) ¹	100
Molybdenum-99	100	Thulium-170	10
Neodymium-147	100	Thulium-171	10
Neodymium-149	100	Tin-113	10
Nickel-59	100	Tin-125	10
Nickel-63	10	Tungsten-181	10
Nickel-65	100	Tungsten-185	10
Niobium-93m	10	Tungsten-187	100
Niobium-95	10	Uranium (natural) ²	100
Niobium-97	10	Uranium-233	0.01
Osmium-185	10	Uranium-234 -	
Osmium-191m	100	Uranium-235	0.01
Osmium-191	100	Vanadium-48	10
Osmium-193	100	Xenon-131m	1,000

Xenon-133	100
Xenon-135	100
Ytterbium-169	10
Ytterbium-175	100
Yttrium-90	10
Yttrium-91	10
Yttrium-92	100
Yttrium-93	100
Zinc-65	10
Zinc-69m	100
Zinc-69	1,000
Zirconium-93	10
Zirconium-95	10
Zirconium-97	10

Notes: ¹Based on alpha disintegration rate of Th-232, Th-230 and their daughter products.

²Based on alpha disintegration rate of U-238, U-234, and U-235.

Material	Microcuries
Any alpha emitting radionuclide not listed above or mixtures of alpha emitters of unknown composition	0.01
Any radionuclide other than alpha emitting radionuclides, not listed above or mixtures of beta emitters of unknown composition	0.1

Note: For purposes of WAC 246-221-120 and 246-221-190, where there is involved a combination of isotopes in known amounts, the limit for the combination should be derived as follows: Determine, for each isotope in the combination, the ratio between the quantity present in the combination and the limit otherwise established for the specific isotope when not in combination. The sum of such ratios for all the isotopes in the combination may not exceed "1" (i.e., "unity"). Example: For purposes of WAC 246-221-120 (1)(g), if a particular batch, room, or area contains 200 μ Ci of Au-198 and 500 μ Ci of C-14, it may also contain not more than 3 μ Ci of I-131 and remain unposted. This limit was determined as follows:

$$200 \mu\text{Ci Au-198}/1,000 \mu\text{Ci} + 500 \mu\text{Ci C-14}/1,000 \mu\text{Ci} + 3 \mu\text{Ci I-131}/10 \mu\text{Ci} = 1$$

The denominator in each of the above ratios was obtained by multiplying the figure in the table by 10 as provided in WAC 246-221-120 (1)(g).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-221-300, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-221-300, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-24-230, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-24-230, filed 12/8/80; Order 1095, § 402-24-230, filed 2/6/76; Order 708, § 402-24-230, filed 8/24/72; Order 1, § 402-24-230, filed 7/2/71; Order 1, § 402-24-230, filed 1/8/69; Rules (part), filed 10/26/66.]

Chapter 246-222 WAC

RADIATION PROTECTION—WORKER RIGHTS

WAC	
246-222-001	Purpose and scope.
246-222-020	Posting of notices to workers.
246-222-030	Instructions to workers.
246-222-040	Notifications and reports to individuals.
246-222-050	Presence of representatives of licensees or registrants and workers during inspection.
246-222-060	Consultation with workers during inspections.
246-222-070	Requests by workers for inspections.
246-222-080	Inspections not warranted—Informal review.

WAC 246-222-001 Purpose and scope. This chapter establishes requirements for notices, instructions and reports by licensees or registrants to individuals engaged in work under a license or registration and options available to such individuals in connection with department inspections of licensees or registrants to ascertain compliance with the provisions of the act and regulations, orders and licenses issued thereunder regarding radiological working conditions. The regulations in this chapter apply to all persons who receive, possess, use, own or transfer a source of radiation licensed by or registered with the department pursuant to the regulations in chapters 246-224, 246-232, and 246-235 WAC. The definitions contained in WAC 246-220-010 also apply to this chapter.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-001, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-48-010, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-48-010, filed 12/8/80; Order 1084, § 402-48-010, filed 1/14/76.]

WAC 246-222-020 Posting of notices to workers.

(1) Each licensee or registrant shall post current copies of the following documents:

(a) The regulations in this chapter and in chapter 246-221 WAC;

(b) The license, certificate of registration, conditions or documents incorporated into the license by reference and amendments thereto;

(c) The operating procedures applicable to work under the license or registration;

(d) Any notice of noncompliance involving radiological working conditions, proposed imposition of civil penalty, order issued pursuant to chapter 246-220 WAC, or any response from the licensee or registrant.

(2) If posting of a document specified in subsection (1)(a), (b), or (c) of this section is not practicable, the licensee or registrant may post a notice which describes the document and states where it may be examined.

(3) Each licensee or registrant shall conspicuously post pertinent emergency procedures when emergency procedures are required by the department.

(4) Properly completed department Form RHF-3 "Notice to employees," shall be posted by each licensee or registrant wherever individuals work in or frequent any portion of a restricted area.

(5) Documents, notices or forms posted pursuant to this section shall appear in a sufficient number of places to permit individuals engaged in work under the license or registration to observe them on the way to or from any particular work location to which the document applies, shall be conspicuous, and shall be replaced if defaced or altered.

(6) Department documents posted pursuant to subsection (1)(d) of this section shall be posted as specified by subsection (5) of this section within five working days after receipt of the documents from the department; the licensee's or registrant's response, if any, shall be posted for a minimum of five working days after dispatch from the licensee or registrant. Such documents shall remain posted for a minimum of five working days or until action correcting the

item(s) of noncompliance has been completed, whichever is later.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-48-020, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-48-020, filed 12/8/80; Order 1084, § 402-48-020, filed 1/14/76.]

WAC 246-222-030 Instructions to workers. (1) All individuals working in or frequenting any portion of a restricted area:

(a) Shall be kept informed of the storage, transfer, or use of sources of radiation in such portions of the restricted area;

(b) Shall be instructed in the health protection considerations associated with exposure to radiation or radioactive material, in precautions or procedures to minimize exposure, and in the purposes and functions of protective devices employed;

(c) Shall be instructed in, and instructed to observe, to the extent within the worker's control, the applicable provisions of these regulations, department form RHF-3 "Notice to employees," and license conditions for the protection of personnel from exposures to radiation or radioactive material occurring in such areas;

(d) Shall be instructed that any worker or representative of workers who believes that a violation of the regulations, license conditions, or unnecessary exposure to radiation exists or occurred, may request an inspection by the department by oral or written notification. The notification shall set forth specific grounds for the complaint. Any such notification to the department is confidential;

(e) Shall be instructed of their right to notify the department if the individual suspects improper actions by a licensee/registrant, or conditions which may lead to a violation of these regulations, the license/registration, or unnecessary exposure to radiation or radioactive materials;

(f) Shall be instructed that employment discrimination by a licensee/registrant against an employee because of actions described in this chapter is prohibited;

(g) Shall be instructed as to their responsibility to report promptly to the licensee or registrant any condition which may lead to or cause a violation of the act, these regulations, and licenses or unnecessary exposure to radiation or radioactive material;

(h) Shall be instructed in the appropriate response to warnings made in the event of any unusual occurrence or malfunction that may involve exposure to radiation or radioactive material; and

(i) Shall be advised as to the radiation exposure reports which workers shall be furnished pursuant to WAC 246-222-040.

(2) By July 1, 1984, records of these instructions described in subsection (1) of this section, for all individuals working in, or frequenting any portion of a restricted area shall be maintained for inspection by the department until further notice. These records shall include a copy of this section, or all the information contained in this section, along with a dated verification signature by the employee stating

that the individual is satisfied with the explanation of the instructions contained in this section.

(3) The extent of these instructions shall be commensurate with potential radiological health protection considerations in the restricted area.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-030, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-48-030, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-48-030, filed 12/8/80; Order 1084, § 402-48-030, filed 1/14/76.]

WAC 246-222-040 Notifications and reports to individuals. (1) Radiation exposure data for an individual and the results of any measurements, analyses, and calculations of radioactive material deposited or retained in the body of an individual shall be reported to the individual as specified in this section. The information reported shall include data and results obtained pursuant to these regulations, orders, and license conditions, as shown in records maintained by the licensee or registrant pursuant to these regulations. Each notification and report shall:

(a) Be in writing;

(b) Include appropriate identifying data such as the name of the licensee or registrant, the name of the individual, and the individual's Social Security number;

(c) Include the individual's exposure information; and

(d) Contain the following statement:

"This report is furnished to you under the provisions of the Washington state department of health, division of radiation protection, rules and regulations for radiation protection. You should preserve this report for further reference."

(2) Upon request of the worker, each licensee or registrant shall advise each worker annually of the worker's current and accumulated exposure to radiation or radioactive material as shown in records maintained by the licensee or registrant pursuant to WAC 246-221-230 (1) and (3).

(3) At the request of a worker formerly engaged in work controlled by the licensee or the registrant, each licensee or registrant shall furnish to each worker or former worker a report of the worker's exposure to radiation or radioactive material upon termination. For the purposes of this section, termination means the end of employment with the licensee or the end of a work assignment in the licensee's restricted area(s) in a given calendar quarter without expectation, or specific scheduling, of reentry into such restricted area(s) during the remainder of that calendar quarter. Such report shall be furnished within thirty days from the time the request is made, or within thirty days after the exposure of the individual has been determined by the licensee or registrant, whichever is later; shall cover, within the period of time specified in the request, each calendar quarter in which the worker's activities involved exposure to radiation from radioactive material licensed by, or radiation machines registered with the department; and shall include the dates and locations of work under the license or registration in which the worker participated during this period.

(4) When a licensee or registrant is required pursuant to WAC 246-221-260 to report to the department any exposure

of an individual to radiation or radioactive material, the licensee or the registrant shall also provide the individual a written report on the individual's exposure data included therein. Such reports shall be transmitted at a time not later than the transmittal to the department.

(5) In addition to the requirements of subsection (3) of this section, at the request of a worker who is terminating employment in a given calendar quarter with the licensee or registrant in work involving radiation exposure, or of a worker who, while employed by another person, is terminating assignment to work involving radiation exposure in the licensee's facility in that calendar quarter, each licensee or registrant shall provide to each such worker, or to the worker's designee, at termination, a written report regarding the radiation dose received by that worker from operations of the licensee or registrant during that specifically identified calendar quarter or fraction thereof, or provide a written statement of that dose if the finally determined personnel monitoring results are not available at that time. Estimated doses shall be clearly indicated as such.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-48-040, filed 12/11/86; 83-19-050 (Order 2026), § 402-48-040, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-48-040, filed 12/8/80; Order 1084, § 402-48-040, filed 1/14/76.]

WAC 246-222-050 Presence of representatives of licensees or registrants and workers during inspection.

(1) Each licensee or registrant shall afford to the department at all reasonable times opportunity to inspect materials, machines, activities, facilities, premises, and records pursuant to these regulations.

(2) During an inspection, department inspectors may consult privately with workers as specified in WAC 246-222-060. The licensee or registrant may accompany department inspectors during other phases of an inspection.

(3) If, at the time of inspection, an individual has been authorized by the workers to represent them during department inspections, the licensee or registrant shall notify the inspectors of such authorization and shall give the workers' representative an opportunity to accompany the inspectors during the inspection of physical working conditions.

(4) Each workers' representative shall be routinely engaged in work under control of the licensee or registrant and shall have received instructions as specified in WAC 246-222-030.

(5) Different representatives of licensees or registrants and workers may accompany the inspectors during different phases of an inspection if there is no resulting interference with the conduct of the inspection. However, only one workers' representative at a time may accompany the inspectors.

(6) With the approval of the licensee or registrant and the workers' representative an individual who is not routinely engaged in work under control of the licensee or registrant, for example, a consultant to the licensee or registrant or to the workers' representative, shall be afforded the opportunity to accompany department inspectors during the inspection of physical working conditions.

(7) Notwithstanding the other provisions of this section, department inspectors are authorized to refuse to permit accompaniment by any individual who deliberately interferes with a fair and orderly inspection. With regard to any area containing proprietary information, the workers' representative for that area shall be an individual previously authorized by the licensee or registrant to enter that area.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-050, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-050, filed 12/27/90, effective 1/31/91; Order 1084, § 402-48-050, filed 1/14/76.]

WAC 246-222-060 Consultation with workers during inspections. (1) Department inspectors may consult privately with workers concerning matters of occupational radiation protection and other matters related to applicable provisions of department regulations and licenses to the extent the inspectors deem necessary for the conduct of an effective and thorough inspection.

(2) During the course of an inspection any worker may bring privately to the attention of the inspectors, either orally or in writing, any past or present condition which the worker has reason to believe may have contributed to or caused any violation of the act, these regulations, or license condition, or any unnecessary exposure of an individual to radiation from licensed radioactive material or a registered radiation machine under the licensee's or registrant's control. Any such notice in writing shall comply with the requirements of WAC 246-222-070(1).

(3) The provisions of subsection (2) of this section shall not be interpreted as authorization to disregard instructions pursuant to WAC 246-222-030.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-060, filed 12/27/90, effective 1/31/91; Order 1084, § 402-48-060, filed 1/14/76.]

WAC 246-222-070 Requests by workers for inspections. (1) Any worker or representative of workers who believes that a violation of the act, of these regulations, or of license conditions exists or has occurred in work under a license or registration with regard to radiological working conditions in which the worker is engaged, may request an inspection by giving notice of the alleged violation to the Washington state department of health, division of radiation protection. Any such notice shall be in writing, shall set forth the specific grounds for the notice, and shall be signed by the worker or representative of the workers. A copy shall be provided to the licensee or registrant by the office of radiation protection no later than at the time of inspection except that, upon the request of the worker giving such notice, his or her name and the name of individuals referred to therein shall not appear in such copy or on any record published, released, or made available by the department, except for good cause shown.

(2) If, upon receipt of such notice, the inspector for the office of radiation protection determines that the complaint meets the requirements set forth in subsection (1) of this section, and that there are reasonable grounds to believe that the alleged violation exists or has occurred, the inspector shall cause an inspection to be made as soon as practicable, to determine if such alleged violation exists or has occurred.

Inspections pursuant to this section need not be limited to matters referred to in the complaint.

(3) No licensee or registrant shall discharge or in any manner discriminate against any worker because such worker has filed any complaint or instituted or caused to be instituted any proceeding under these regulations or has testified or is about to testify in any such proceeding or because of the exercise by such worker on behalf of the worker or other workers of any option afforded by this chapter.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-070, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-48-070, filed 12/11/86; Order 1084, § 402-48-070, filed 1/14/76.]

WAC 246-222-080 Inspections not warranted—Informal review. (1) If the department of health, division of radiation protection determines, with respect to a complaint under WAC 246-222-070 that an inspection is not warranted because there are no reasonable grounds to believe that a violation exists or has occurred, the office of radiation protection shall notify the complainant in writing of such determination.

(a) If the complaint resulted from activities concerning naturally occurring or accelerator produced radioactive materials and/or radiation producing machines: The complainant may obtain review of such determination by submitting a written statement of position to the Assistant Director, Division of Industrial Safety and Health, Mailstop HC-402, Olympia, Washington 98504. Such request for informal review will be processed according to the provisions of WAC 296-350-460 and the provisions of the interagency agreement between the department of labor and industries and the department of health, division of radiation protection, if any.

(b) If the complaint resulted from activities concerning byproduct material, source material, and/or special nuclear material: The complainant may obtain review of such determination by submitting a written statement of position with the Department of Health, Division of Radiation Protection, Mailstop LE-13, Olympia, Washington 98504 (206/753-3468), who will provide the licensee or registrant with a copy of such statement by certified mail, excluding, at the request of the complainant, the name of the complainant. The licensee or registrant may submit an opposing written statement of position with the department of health, division of radiation protection, who will provide the complainant with a copy of such statement by certified mail. Upon the request of the complainant, the department of health may hold an informal conference in which the complainant and the licensee or registrant may orally present their views. An informal conference may also be held at the request of the licensee or registrant, but disclosure of the identity of the complainant will be made only following receipt of written authorization from the complainant. After considering all written or oral views presented, the department of health shall affirm, modify, or reverse the determination of the division of radiation protection and furnish the complainant and the licensee or registrant a written notification of the decision and the reason therefor.

(2) If the division of radiation protection determines that an inspection is not warranted because the requirements of WAC 246-222-070(1) have not been met, it shall notify the complainant in writing of such determination. Such determination shall be without prejudice to the filing of a new complaint meeting the requirements of WAC 246-222-070(1).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-222-080, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-222-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-48-080, filed 12/11/86; Order 1084, § 402-48-080, filed 1/14/76.]

Chapter 246-224 WAC

RADIATION PROTECTION—MACHINE ASSEMBLY AND REGISTRATION

WAC

246-224-001	Purpose and scope.
246-224-010	Exemptions.
246-224-020	Application for registration of radiation machine facilities.
246-224-030	Issuance of certificate of registration.
246-224-040	Expiration of certificate of registration.
246-224-050	Renewal of certificate of registration.
246-224-060	Separate locations.
246-224-070	Report of changes.
246-224-080	Approval not implied.
246-224-090	Repair person, assembler, or installer obligation.
246-224-100	Out-of-state radiation machines.

WAC 246-224-001 Purpose and scope. (1) This chapter provides for the registration of radiation machine facilities.

(2) For purposes of chapter 246-224 WAC of these regulations, "facility" means the location at which one or more radiation machines are installed, manufactured, tested, and/or located within one building, vehicle, or in one physical complex.

(3) In addition to the requirements of this chapter, all registrants are subject to the applicable provisions of other parts of these regulations.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-224-001, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-224-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-16-210, filed 12/8/80; Order 1084, § 402-16-210, filed 1/14/76. Formerly WAC 402-16-010.]

WAC 246-224-010 Exemptions. (1) Electronic equipment that produces radiation incidental to its operation for other purposes is exempt from the registration and notification requirements of this part, providing the dose equivalent rate averaged over an area of 10 square centimeters does not exceed 0.5 mrem per hour at 5 cm from any accessible surface of such equipment.

(2) Radiation machines while in transit or storage incident thereto are exempt from the requirements of this part.

(3) Domestic television receivers are exempt from the requirements of this chapter.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-010, filed 12/27/90, effective 1/31/91; Order 1084, § 402-16-220, filed 1/14/76. Formerly WAC 402-16-100.]

WAC 246-224-020 Application for registration of radiation machine facilities. Each person having a radiation machine facility shall apply for registration of such facility with the department within fifteen calendar days after the initial operations of a radiation machine facility. Application for registration shall be completed on forms furnished by the department or on similar forms and containing all the information required by the department form and accompanying instructions. Each application shall be accompanied by fees in accordance with WAC 246-254-053.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-224-020, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-16-230, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-16-230, filed 12/8/80; Order 1084, § 402-16-230, filed 1/14/76. Formerly WAC 402-16-020 and 402-16-040.]

WAC 246-224-030 Issuance of certificate of registration. Upon a determination that an application meets WAC 246-224-020 of the registration regulations, and requirements of WAC 246-254-053, "Radiation machine facility registration fees," the department shall issue a notice of registration.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-224-030, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-16-232, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-16-232, filed 12/8/80.]

WAC 246-224-040 Expiration of certificate of registration. Except as provided by WAC 246-224-050(2) each certificate of registration shall expire at the end of the day on the date stated therein.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-224-040, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-16-234, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-16-234, filed 12/8/80.]

WAC 246-224-050 Renewal of certificate of registration. (1) Application for renewal of registration shall be filed in accordance with WAC 246-224-020 and 246-254-053 at least thirty days prior to the expiration date.

(2) In any case in which a registrant not less than thirty days prior to the expiration of his existing certificate of registration has filed an application in proper form for renewal, such existing certificate of registration shall not expire until the application status has been determined by the department.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-224-050, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-16-238, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-16-238, filed 12/8/80.]

WAC 246-224-060 Separate locations. Geographically separate facilities must be registered separately and pay full fees as described under WAC 246-254-053, even if these geographically separate facilities are under one administrative control. Where, as a routine part of the normal conduct of business, registrable items are moved between or among such locations, the registrant will so indicate at the time of registration. Each registrant shall name one or more designated persons, preferably one for each location where the registrant is not normally present, who may be contacted by the department with respect to the requirements for registration.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-224-060, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-16-240, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-16-240, filed 12/8/80; Order 1084, § 402-16-240, filed 1/14/76. Formerly WAC 402-16-050.]

WAC 246-224-070 Report of changes. The registrant shall notify the department in writing when making any change which would render the information contained in the application for registration and/or certificate of registration no longer accurate. Notifications shall be sent to X-Ray Control Section, Department of Health, Mailstop LE-13, Olympia, WA 98504. Notification shall be sent no later than thirty days after such change in the registration information.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-224-070, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-16-250, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-16-250, filed 12/8/80; Order 1084, § 402-16-250, filed 1/14/76. Formerly WAC 402-16-060.]

WAC 246-224-080 Approval not implied. A person shall neither refer, in any advertisement, to the fact that a facility is registered with the department pursuant to the provisions of WAC 246-224-020, nor imply that any activity under such registration has been approved by the department.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-224-080, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-224-080, filed 12/27/90, effective 1/31/91; Order 1084, § 402-16-260, filed 1/14/76. Formerly WAC 402-16-070.]

WAC 246-224-090 Repair person, assembler, or installer obligation. (1) Any person who sells, leases, transfers, lends, disposes, assembles, or installs radiation machines in this state shall notify the department within fifteen calendar days of:

- (a) The name and address of persons who have received these machines;
- (b) The manufacturer, model, and serial number of the master control of each radiation machine transferred; and
- (c) The date of transfer of each radiation machine.

(2) No person shall make or install radiation machines, accessories used in connection with such machines or any components of such machines unless:

- (a) Such machines, accessories, or components meet the requirements of these regulations.

(b) The registrant or transferee using such machines, accessories, or components has met the requirements of WAC 246-225-030, when applicable, prior to the date of transfer.

(c) Shielding and/or construction requirements, as determined pursuant to WAC 246-225-030 when applicable, have been completed prior to the date of transfer of such machines, accessories, or components.

(3) When requested by the registrant to make repair on an x-ray system that has malfunctioned in such a manner to have caused, or possibly caused an unintentional radiation exposure to patients, operator or member of the public, the assembler, transferor or installer, is required to notify the department of such work within twenty-four hours, or before repair is effected, whichever comes first. See WAC 246-225-010 for definition of accidental radiation exposure and electronic product defect.

(4) Certified x-ray systems (21 CFR, subchapter J) shall be assembled in such a manner that manufacturer's specifications and intended performance designs are met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-224-090, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-224-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-16-270, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-16-270, filed 12/8/80; Order 1084, § 402-16-270, filed 1/14/76. Formerly WAC 402-16-090.]

WAC 246-224-100 Out-of-state radiation machines.

(1) Whenever any radiation machine is to be brought into the state, for any temporary use, the person proposing to bring such machine into the state shall give written notice to the department at least three working days before such machine is to be used in the state. The notice shall include the type of radiation machine; the nature, duration, and scope of use; and the exact location(s) where the radiation machine is to be used. If for a specific case the three working-day period would impose an undue hardship, the person may, upon application to the department, obtain permission to proceed sooner.

(2) In addition the out-of-state person shall:

(a) Comply with all applicable regulations of the department.

(b) Supply the department such other information as the department may reasonably request.

(3) X-ray machines not intended for patient diagnosis and treatment may operate within the state without registration and fee payment if such operation is less than or equal to sixty days per calendar year. If operation in excess of sixty calendar days is desired, standard registration and fee procedures are required (see WAC 246-224-020 and 246-254-053).

(4) Standard registration and fee payment are required for all medical and dental x-ray machine operation within the state regardless of number of days of such operation.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-224-100, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-224-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-16-280, filed 12/8/80; Order 1084, § 402-16-280, filed 1/14/76. Formerly WAC 402-16-110.]

Chapter 246-225 WAC

RADIATION PROTECTION—X-RAYS IN THE HEALING ARTS

WAC

246-225-001	Purpose and scope.
246-225-010	Definitions.
246-225-020	General requirements—Administrative controls.
246-225-030	General requirements—Plan review.
246-225-040	General requirements for diagnostic x-ray systems.
246-225-050	Fluoroscopic x-ray systems.
246-225-060	Radiographic systems other than fluoroscopic, dental intraoral, or veterinary systems—Beam limitation.
246-225-070	Radiographic systems other than fluoroscopic, dental intraoral, or veterinary systems—Radiation exposure control devices.
246-225-080	Radiographic systems other than fluoroscopic, dental intraoral, or veterinary systems—Source-to-skin or receptor distance.
246-225-090	Radiographic systems other than fluoroscopic and dental intraoral—Exposure reproducibility.
246-225-100	Radiographic systems—Standby radiation from capacitor energy storage equipment.
246-225-110	Intraoral dental radiographic systems.
246-225-120	Therapeutic x-ray installations less than 1 MeV.
246-225-130	X-ray and electron therapy systems with energies of one MeV and above.
246-225-140	Veterinary medicine radiographic installations.
246-225-150	X-ray film developing requirements.
246-225-160	Mammography.
246-225-99910	Appendix I—Good practices.
246-225-99920	Appendix II—Determination of competency.
246-225-99930	Appendix III—Information to be submitted by persons proposing to conduct healing arts screening using ionizing radiation.

WAC 246-225-001 Purpose and scope. This chapter establishes requirements, for which a registrant is responsible, for use of x-ray equipment by or under the supervision of an individual authorized by and licensed in accordance with state statutes to engage in the healing arts. The provisions of this chapter are in addition to, and not in substitution for, other applicable provisions of these regulations.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-010, filed 12/8/80; Order 1084, § 402-28-010, filed 1/14/76; Order 1, § 402-28-101 (codified as WAC 402-28-010), filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-225-010 Definitions. As used in this chapter, the following definitions apply:

(1) "Accessible surface" means the external surface of the enclosure or housing provided by the manufacturer.

(2) "Accidental radiation exposure incident" means an exposure to a patient, an operator, or a member of the public that was unintentional.

(3) "Added filter" means the filter added to the inherent filtration.

(4) "Aluminum equivalent" means the thickness of aluminum (type 1100 alloy) affording the same attenuation, under specified conditions, as the material in question. (The nominal chemical composition of type 1100 aluminum alloy is 99.00 percent minimum aluminum, 0.12 percent copper.)

(5) "Assembler" means any person engaged in the business of assembling, replacing, or installing one or more components into an x-ray system or subsystem. An assem-

bler may be the practitioner, his/her employee, an outside contractor, or an employee of an outside firm.

(6) "Attenuation block" means a block or stack, having dimensions 20 cm by 20 cm by 3.8 cm, of type 1100 aluminum alloy or other aluminum alloys having equivalent attenuation.

(7) "Automatic exposure control" means a device which automatically controls one or more technique factors in order to obtain at a preselected location(s) a required quantity of radiation (see also "phototimer").

(8) "Barrier" (see "protective barrier").

(9) "Beam axis" means a line from the source through the centers of the x-ray fields.

(10) "Beam-limiting device" means a device which provides a means to restrict the dimensions of the x-ray field.

(11) "Beam monitoring system" means a system designed to detect and measure the radiation present in the useful beam.

(12) "C-arm x-ray system" means an x-ray system in which the image receptor and x-ray tube housing assembly are connected by a common mechanical support system in order to maintain a desired spatial relationship. This system is designed to allow a change in the projection of the beam through the patient without a change in the position of the patient.

(13) "Cephalometric device" means a device intended for the radiographic visualization and measurement of the dimensions of the human head.

(14) "Certified components" means components of x-ray systems which have been certified by the manufacturer as meeting the requirements of the federal performance standard for x-ray equipment.

(15) "Certified system" means any x-ray system which has one or more certified component(s).

(16) "Changeable filters" means any filter, exclusive of inherent filtration, which can be removed from the useful beam through any electronic, mechanical or physical process.

(17) "Coefficient of variation (C)" means the ratio of the standard deviation to the mean value of a population of observations. It is estimated using the following equation:

$$C = \frac{s}{\bar{X}} = \frac{1}{\bar{X}} \left[\sum_{i=1}^n \frac{(X_i - \bar{X})^2}{n-1} \right]^{1/2}$$

where

s = Estimated standard deviation of the population.

\bar{X} = Mean value of observations in sample.

$X(i)$ = i^{th} observation sampled.

n = Number of observations in sample.

(18) "Contact therapy system" means an x-ray system wherein the x-ray tube port is put in contact with or within 5 centimeters of, the surface being treated.

(19) "Control panel" means that part of the x-ray control upon which are mounted the switches, knobs, pushbuttons,

and other hardware necessary for manually setting the technique factors.

(20) "Cooling curve" means the graphical relationship between heat units stored and cooling time.

(21) "Date of transfer." See installation date.

(22) "Dead-man switch" means a switch so constructed that a circuit closing contact can be maintained only by continuous pressure on the switch by the operator.

(23) "Department" means the department of health which has been designated as the state radiation control agency.

(24) "Detector" (see "radiation detector").

(25) "Diagnostic source assembly" means the tube housing assembly with a beam-limiting device attached.

(26) "Diagnostic x-ray system" means an x-ray system designed for irradiation of any part of the human or animal body for the purpose of recording or visualization for diagnostic purposes.

(27) "Direct scattered radiation" means that scattered radiation which has been deviated in direction only by materials irradiated by the useful beam (see also "scattered radiation").

(28) "Electronic product defect" means an error in design, manufacture, or performance of an x-ray system such that unintentional radiation exposure to a patient, an operator, or a member of the public has occurred.

(29) "Entrance exposure rate" means the exposure measured free-in-air per unit time where the useful beam enters the patient.

(30) "Equipment" (see "x-ray equipment").

(31) *"Exposure" means the quotient of dQ divided by dm where dQ is the absolute value of the total charge of the ions of one sign produced in air when all the electrons (negatrons and positrons) liberated by photons in a volume element of air having mass dm are completely stopped in air. (The special unit of exposure is the roentgen.)

Note: *When the word, exposure, is used in this part to mean one or more irradiations of a person for a healing arts purpose, or in a more general sense, it will not be underlined.

(32) "Field emission equipment" means equipment which uses an x-ray tube in which electron emission from the cathode is due solely to the action of an electric field.

(33) "Filter" means material placed in the useful beam to absorb preferentially selected radiations.

(34) "Fluoroscopic imaging assembly" means a component which comprises a reception system in which x-ray photons produce a fluoroscopic image. It includes equipment housings, electrical interlocks if any, the primary protective barrier, and structural material providing linkage between the image receptor and the diagnostic source assembly.

(35) "Focal spot" means the area on the anode of the x-ray tube bombarded by the electrons accelerated from the cathode, and from which the useful beam originates.

(36) "Full beam detector" means a radiation detector of such size that the total cross section of the maximum size useful beam is intercepted.

(37) "General purpose radiographic x-ray system" means any radiographic x-ray system which, by design, is not limited to radiographic examination of specific anatomical regions.

(38) "Gonad shield" means a protective barrier for the testes or ovaries.

(39) "Half-value layer (HVL)" means the thickness of specified material which attenuates the beam of radiation to an extent such that the exposure rate is reduced to one-half of its original value. In this definition the contribution of all scattered radiation, other than any which might be present initially in the beam concerned, is deemed to be excluded.

(40) "Healing arts screening" means the testing of an asymptomatic population using x-ray machines for the detection or evaluation of health indications when such tests are not specifically and individually ordered by a licensed practitioner of the healing arts legally authorized to prescribe such x-ray tests for the purpose of diagnosis or treatment.

(41) "Heat unit" means a unit of energy equal to the product of the peak kilovoltage, milliamperes, and seconds, i.e., kVp x mA x second.

(42) "Image intensifier" means a device consisting of an image intensifier tube installed in its housing which instantaneously converts an x-ray pattern into a light image of higher energy density.

(43) "Image receptor" means any device, such as a fluorescent screen or radiographic film, which transforms incident x-ray photons either into a visible image or into another form which can be made into a visible image by further transformations.

(44) "Image receptor support" means that part of a mammographic system designed to support the image receptor in a plane perpendicular to the x-ray beam during mammography.

(45) "Inherent filtration" means the filtration of the useful beam provided by the permanently installed components of the tube housing assembly.

(46) "Installation date" means the earliest date that a machine, accessory, or component is able to be used by a registrant or transferee but no later than the date of the first human exposure made using the machine, accessory, or component that has been installed.

(47) "Interlock" means a device arranged or connected such that the occurrence of an event or condition is required before a second event or condition can occur or continue to occur.

(48) "Irradiation" means the exposure of matter to ionizing radiation.

(49) "Kilovolts peak (kVp)" (see "peak tube potential").

(50) "kV" means kilovolts.

(51) "kWs" means kilowatt second which is equal to the product of peak kilovolts, amperes, and seconds or 10^{-3} kV X mA X sec.

(52) "Lead equivalent" means the thickness of lead affording the same attenuation, under specified conditions, as the material in question.

(53) "Leakage radiation" means radiation emanating from the diagnostic or therapeutic source assembly except for:

(a) The useful beam and

(b) Radiation produced when the exposure switch or timer is not activated.

(54) "Leakage technique factors" means the technique factors associated with the tube housing assembly which are used in measuring leakage radiation. They are defined as follows:

(a) For capacitor energy storage equipment, the maximum rated peak tube potential and the maximum rated number of exposures in an hour for operation at the maximum rated peak tube potential with the quantity of charge per exposure being 10 milliamperere seconds, or the minimum obtainable from the unit, whichever is larger.

(b) For field emission equipment rated for pulsed operation, the maximum rated peak tube potential and the maximum rated number of x-ray pulses in an hour for operation at the maximum rated peak tube potential.

(c) For all other equipment, the maximum rated peak tube potential and the maximum rated continuous tube current for the maximum rated peak tube potential.

(55) "Light field" means that area of the intersection of the light beam from the beam-limiting device and one of the set of planes parallel to and including the plane of the image receptor, whose perimeter is the locus of points at which the illumination is one-fourth of the maximum in the intersection.

(56) "Line-voltage regulation" means the difference between the no-load and the load line potentials expressed as a percent of the load line potential; that is,

$$\text{Percent line-voltage regulation} = 100 (V_n - V_l) / V_l$$

where:

$V_{(n)}$ = No-load line potential

$V_{(l)}$ = Load line potential

(57) "mA" means tube current in milliamperes.

(58) "mAs" means milliamperere second or the product of the tube current in milliamperes and the time of exposure in seconds.

(59) "Maximum line current" means the root mean squared current in the supply line of an x-ray machine operating at its maximum rating.

(60) "Mobile equipment" (see "x-ray equipment").

(61) "Modified installation" means a room, building, office, or facility in which structural parameters which affect radiation safety are being changed; these parameters include such things as reconstruction or moving of walls, replacement of the x-ray machine with one of higher kVp or mA, a change in the direction of the beam, replacement of the control panel so that operator protection is adversely affected, a change in occupancy of adjacent areas, workload changes, etc.

(62) "New installation" means a room, building, office, or facility newly built, or in which previously there has been no radiation machine.

(63) "Peak tube potential" means the maximum value of the potential difference across the x-ray tube during an exposure.

(64) "Phantom" means a volume of material similar to tissue with respect to attenuation and scattering of x-ray photons. This requires that the atomic number (Z) and the density of the material be similar to those of tissue.

(65) "Phototimer" - means a device which controls radiation exposure to the image receptor by detecting the total amount of radiation reaching the device. The radiation monitoring device(s) is part of an electronic circuit which

controls the time the tube is activated (see also "automatic exposure control").

(66) "Portable equipment" (see "x-ray equipment").

(67) "Position indicating device (PID)" means a device, on dental x-ray equipment which indicate the beam position and establishes a definite source-surface (skin) distance. The device may or may not incorporate or serve as a beam-limiting device.

(68) "Positive beam limitation" means the automatic or semi-automatic adjustment of an x-ray beam to the selected image receptor size, whereby exposures cannot be made without such adjustment.

(69) "Primary protective barrier" (see "protective barrier").

(70) "Protected area" means a shielded area in which attenuation of x-radiation is sufficient to meet the exposure limits of WAC 246-221-010 and the principles of WAC 246-220-007 and "ALARA" for individuals in that area.

(71) "Protective apron" means an apron made of radiation absorbing materials, used to reduce radiation exposure.

(72) "Protective barrier" means a barrier of radiation absorbing material(s) used to reduce radiation exposure.

(a) "Primary protective barrier" means the material, excluding filters, placed in the useful beam, to protect anyone other than the patient from radiation exposure.

(b) "Secondary protective barrier" means a barrier sufficient to attenuate the stray radiation to the required degree.

(73) "Protective glove" means a glove made of radiation absorbing materials used to reduce radiation exposure.

(74) "Quality assurance" is a program designed to produce high quality radiographs at minimal cost and minimal patient exposure.

(75) "Quality control" is the routine measurement of the performance of the diagnostic x-ray imaging system, from x-ray beam output to the viewing of radiographs, and the continual adjustment of that performance to an optimal and consistent level.

(76) "Radiation detector" means a device which in the presence of radiation provides by either direct or indirect means, a signal or other information suitable for use in measuring one or more quantities of incident radiation.

(77) "Radiation safety" means efforts directed at occupational exposure reduction, patient exposure reduction, image quality improvement, diagnostic imaging system quality assurance, radiation measurements, dose evaluations, compliance with state and federal regulations, and related issues.

(78) "Radiation therapy simulation system" means a fluoroscopic or radiographic x-ray system intended for localizing the volume to be exposed during radiation therapy and confirming the position and size of the therapeutic irradiation field.

(79) "Radiograph" means an image receptor on which the image is created directly or indirectly by an x-ray pattern and results in a permanent record.

(80) "Radiographic imaging system" means any system whereby a permanent or temporary image is recorded on an image receptor by the action of ionizing radiation.

(81) "Rating" means the operating limits of an x-ray system or subsystem as specified by the component manufacturer.

(82) "Recording" means producing a permanent form of an image resulting from x-ray photons (e.g., film, video tape).

(83) "Response time" means the time required for an instrument system to reach 90 percent of its final reading when the radiation-sensitive volume of the instrument system is exposed to a step change in radiation flux from zero sufficient to provide a steady state midscale reading.

(84) "Scattered radiation" means radiation that, during passage through matter, has been deviated in direction (see also "direct scattered radiation").

(85) "Secondary protective barrier" (see "protective barrier").

(86) "Shutter" means a device attached to the tube housing assembly which can totally intercept the entire cross sectional area of the useful beam and which has a lead equivalency at least that of the tube housing assembly.

(87) "SID" (see "source-image receptor distance").

(88) "Source" means the focal spot of the x-ray tube.

(89) "Source-image receptor distance (SID)" means the distance from the source to the center of the input surface of the image receptor.

(90) "Source-to-skin-distance (SSD)" means the distance between the source and the skin entrance plane of the patient.

(91) "Special purpose x-ray equipment" means that which is designed for radiographic examination of one specific area of the body.

(92) "Spot check" means an abbreviated calibration procedure which is performed to assure that a previous calibration continues to be valid.

(93) "Spot film device" means a device intended to transport and/or position a radiographic image receptor between the x-ray source and fluoroscopic image receptor, including a device intended to hold a cassette over the input end of an image intensifier for the purpose of making a radiograph.

(94) "Spot film" means a radiograph which is made during a fluoroscopic examination to record permanently conditions which exist during that fluoroscopic procedure.

(95) "Stationary equipment" (see "x-ray equipment").

(96) "Stray radiation" means the sum of leakage and scattered radiation.

(97) "Technique factors" means the conditions of operation. They are specified as follows:

(a) For capacitor energy storage equipment, peak tube potential in kV and quantity of charge in mAs.

(b) For field emission equipment rated for pulsed operation, peak tube potential in kV and number of x-ray pulses.

(c) For all other equipment, peak tube potential in kV and:

(i) Either tube current in mA and exposure time in seconds,

(ii) Or the product of tube current and exposure time in mAs.

(98) "Transmission detector" means a radiation detector through which the useful beam or part of the useful beam passes.

(99) "Treatment volume" means the region, in the patient, to which a specified dose is to be delivered.

(100) "Tube" means an x-ray tube, unless otherwise specified.

(101) "Tube housing assembly" means the tube housing with tube installed. It includes high-voltage and/or filament transformers and other appropriate elements when they are contained within the tube housing.

(102) "Tube rating chart" means the set of curves which specify the rated limits of operation of the tube in terms of the technique factors.

(103) "Useful beam" means the radiation which passes through the tube housing port and the aperture of the beam-limiting device when the exposure switch or timer is activated.

(104) "Variable-aperture beam-limiting device" means a beam-limiting device which has capacity for stepless adjustment of the x-ray field size.

(105) "Visible area" means that portion of the input surface of the image receptor over which incident x-ray photons produce a visible image.

(106) "Wedge filter" means an added filter with changing radio-opacities used to achieve more uniform optical densities on the image receptor when a body part of varying absorption characteristics is radiographed.

(107) "X-ray control" means a device which controls input power to the x-ray high-voltage generator and/or the x-ray tube. It includes equipment which controls the technique factors of an x-ray exposure.

(108) "X-ray equipment" means an x-ray system, subsystem, or component thereof. Types of x-ray equipment are as follows:

(a) 'Mobile' means x-ray equipment mounted on a permanent base with wheels and/or casters for moving while completely assembled.

(b) 'Portable' means x-ray equipment designed to be hand-carried.

(c) 'Stationary' means x-ray equipment which is installed in a fixed location.

(109) "X-ray field" means that area of the intersection of the useful beam and any one of the set of planes parallel to and including the plane of the image receptor, whose perimeter is the locus of points at which the exposure rate is one-fourth of the maximum in the intersection.

(110) "X-ray high-voltage generator" means a device which transforms electrical energy from the potential supplied by the x-ray control to the tube operating potential. The device may also include means for transforming alternating current to direct current, filament transformers for the x-ray tube(s), high-voltage switches, electrical protective devices, and other appropriate elements.

(111) "X-ray system" means an assemblage of components for the controlled production of x-rays. It includes minimally an x-ray high-voltage generator, an x-ray control, a tube housing assembly, a beam-limiting device, and the necessary supporting structures. Additional components which function with the system are considered integral parts of the system.

(112) "X-ray subsystem" means any combination of two or more components of an x-ray system for which there are requirements specified in this part.

(113) "X-ray tube" means any electron tube which is designed to be used primarily for the production of x-rays.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-010, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-020, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-020, filed 12/8/80; Order 1084, § 402-28-020, filed 1/14/76; Order 1, § 402-28-020, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-225-020 General requirements—Administrative controls. (1) No person shall make, sell, lease, transfer, lend, or install x-ray equipment or the accessories used in connection with such equipment unless such accessories and equipment, when properly placed in operation and properly used, shall meet the requirements of this chapter.

(2) The registrant in control of the x-ray machines shall be responsible for directing the operation of the x-ray machines. The registrant or registrant's agent shall assure the following provisions are met in the operation of the x-ray machine or machines:

(a) The registrant shall not operate an x-ray machine for diagnostic or therapeutic purposes when the x-ray machine:

(i) Does not meet the provisions of this chapter; or

(ii) Is malfunctioning and threatens the health or safety of the patient, operator, or general public.

(b) Individuals operating the x-ray equipment shall be adequately instructed in safe operating procedures and shall be able to demonstrate competence, upon request from the department, in the correct use of the equipment. Required areas of competence are listed in Appendix II. The department may determine compliance with subsection (2)(b) of this section by observation, interview, or testing;

(c) At each x-ray system's control panel, a chart shall be provided which specifies for the examinations performed by that system the following information:

(i) Patient's anatomical size versus technique factors utilized;

(ii) Source to image receptor distance used;

(iii) Type and placement of patient shielding used, for example, gonad, thyroid, lap apron;

(iv) If applicable, settings for automatic exposure devices; and

(v) Type and size of film or screen-film combination to be used.

(d) When required by the department, a registrant shall create and provide to operators of the x-ray system, radiation safety procedures which address patient and occupationally-exposed personnel safety. These procedures shall define restrictions of the operating technique required for safe operation of the particular x-ray system;

(e) Except for patients who cannot be moved out of the room and the patient being examined, only the staff and ancillary personnel required for the medical procedure or training shall be present in the room during the radiographic exposure. Other than the patient being examined:

(i) All individuals shall be positioned such that no part of the body including the extremities not protected by 0.5 mm lead equivalent will be struck by the useful beam;

(ii) The x-ray operator, other staff and ancillary personnel shall be protected from the direct scatter radiation by

protective aprons or whole body protective barriers of not less than 0.25 mm lead equivalent;

(iii) Patients who cannot be removed from the room shall be:

(A) Protected from the direct scatter radiation by whole body protective barriers of not less than 0.25 mm lead equivalent; or

(B) Positioned so the nearest portion of the body is at least 2 meters from both the tube head and the nearest edge of the image receptor.

(iv) The department may require additional protective devices when a portion of the body of staff or ancillary personnel is potentially subjected to stray radiation which may result in that individual receiving one quarter of the maximum permissible dose defined under WAC 246-221-010.

(f) Gonad shielding of not less than 0.5 mm lead equivalent shall be used for patients of reproductive age during radiographic procedures in which the gonads are in the direct (useful) beam, except for cases when gonad shielding may interfere with the diagnostic procedure;

(g) Persons shall not be exposed to the useful beam except for healing arts purposes. Only a licensed practitioner of the healing arts shall authorize an exposure to the useful beam. This requirement prohibits deliberate exposure for the following purposes:

(i) Exposure of an individual for training, demonstration, or other purposes unless there are also healing arts requirements and proper prescription is provided;

(ii) Except for mammography performed by registered facilities on self-referred patients, the exposure of an individual for the purpose of healing arts screening without prior written approval of the state health officer; and

(iii) Exposure of an individual for the sole purpose of satisfying a third party's prerequisite for reimbursement under any health care plan, except for exposure required under Medicare provisions.

(h) When a patient or film must be provided with auxiliary support during a radiation exposure:

(i) Mechanical holding devices shall be used when the technique permits. The safety rules, when required under subdivision (d) of this subsection, shall list individual projections where holding devices cannot be utilized;

(ii) Written safety procedures, when required under subdivision (d) of this subsection, shall indicate the requirements for selecting a holder and the procedure the holder shall follow;

(iii) The human holder shall be protected as required under subdivision (e)(i) of this subsection. The holder occupationally exposed to radiation shall be provided with a personnel monitoring device, worn at the collar outside the lead apron, and records of exposures shall be maintained;

(iv) No person shall be used routinely to hold film or patients;

(v) When the patient must hold the film, the portion of the body other than the area of clinical interest struck by the useful beam shall be protected by not less than 0.5 mm lead equivalent material;

(vi) Holding the film or the patient shall be permitted only in very unusual and rare situations; and

(vii) When a holder is occupationally exposed to radiation, a record shall be made of the examination and shall include:

(A) Patient identification;

(B) Name of the human holder;

(C) Date of the examination;

(D) Number of exposures; and

(E) Technique factors utilized for the exposures.

(i) Personnel dosimetry. All persons associated with the operation of an x-ray system are subject to both the occupational exposure limits and the requirements for the determination of the doses stated under WAC 246-221-020. In addition, when protective clothing or devices are worn on portions of the body and a dosimeter is required, at least one such dosimeter shall be utilized as follows:

(i) When an apron is worn, the monitoring device shall be worn at the collar outside of the apron; and

(ii) The dose to the whole body based on the maximum dose attributed to the most critical organ shall be recorded on the reports required under WAC 246-221-230. If more than one device is used or a record is made of the data, each dose shall be identified with the area where the device was worn on the body.

(iii) Personnel monitoring of an operator shall be required where:

(A) Exposure switch cords are utilized that allow the operator to stand in an unprotected area during exposures; and

(B) Worst-case measurements by the department show twenty-five percent of the exposure limits as specified under WAC 246-221-010 may be exceeded.

(iv) All persons involved in the operation of a fluoroscope and working within the fluoroscopy room during its operation shall wear a personnel dosimeter required under WAC 246-221-090 and subsection (2)(i)(i) of this section. If extremities are in or near the primary beam, extremity dosimeters are also required;

(j) Healing arts screening utilizing radiation. Any person proposing to conduct a healing arts screening program, with the exception of a mammography program, shall not initiate such a program without prior approval of the state health officer. When requesting such approval, that person shall submit the information outlined under Appendix III of this part. If information submitted becomes invalid or outdated, the state health officer shall be notified immediately;

(k) When using scatter suppressing grids, the grids shall be:

(i) Clearly labelled with the focal distance for which they are designed to be used; and

(ii) Of the proper focal distance for the source-to-image distances used.

(l) Procedures and auxiliary equipment designed to minimize patient and personnel exposure commensurate with the needed diagnostic information shall be utilized.

(i) Film cassettes without intensifying screens shall not be used for any routine diagnostic radiological imaging.

(ii) Portable or mobile x-ray equipment shall be used only for examinations where it is impractical to transfer the patient(s) to a stationary x-ray installation.

(m) Patient log. Each facility shall keep a patient log and indicate the following information as a minimum:

- (i) Identification of the patient, including name, age, and sex;
- (ii) Date of x-ray examination;
- (iii) Examination or treatment given, technique factors used, and number of exposures. Where fluoroscopy is involved, the total fluoroscopic on-time shall also be recorded;
- (iv) Any deviation from the standard procedure or technique (including repeat exposures) as denoted in the technique chart required under subdivision (c) of this subsection;
- (v) When applicable, the x-ray system used; and
- (vi) Name or cross index of individuals who performed the exam.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-020, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-28-031, filed 12/11/86; 83-19-050 (Order 2026), § 402-28-031, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-031, filed 12/8/80; Order 1084, § 402-28-031, filed 1/14/76. Formerly WAC 402-28-030 (part).]

WAC 246-225-030 General requirements—Plan review. (1) Before construction, the floor plans and equipment arrangement of medical installations (new or modifications of existing installations) utilizing x-rays for diagnostic or therapeutic purposes shall be submitted to:

- (a) A qualified expert for determination of shielding requirements using National Council on Radiation Protection and Measurements Report No. 49, or equivalent; and
 - (b) The department for subsequent review.
Review shall not imply approval.
- (2) The review of such plans shall not preclude the requirement of additional modifications should a subsequent analysis of operating conditions indicate the possibility of an individual receiving a dose in excess of the limits required under WAC 246-221-010, 246-221-050, and 246-221-060.
- (3) Diagnostic veterinary, podiatric, and dental facilities shall be exempt from submitting shielding calculations and floor plans.
- (4) In order for the department to provide an evaluation, technical advice, and official review of the shielding requirements for a medical radiation installation, a floor plan drawn to scale and the following data are required:
- (a) The normal location of the x-ray tube, along with an indication of anode-cathode orientation to the cassette holders;
 - (b) The limits of the tube travel;
 - (c) The directions in which the tube is pointed;
 - (d) Window locations;
 - (e) The location of the control booth or operator's position;
 - (f) The exposure switch location;
 - (g) The position of the viewing window, if any;
 - (h) The composition and thickness of the walls;
 - (i) If more than one story, the height floor-to-floor;
 - (j) If more than one story, the composition and thickness of materials in the ceiling or floor;
 - (k) The make and model of the x-ray machine;
 - (l) The maximum kVp and mA;

- (m) The types of examinations or treatments (for example, chest, cephalometric, general x-ray, or therapy);
- (n) The identification and occupancy of areas adjacent to the x-ray room;

(o) The anticipated x-ray workload expressed in number of patients and exposures per week including:

- (i) Technique factors used, or milliamperes-seconds or milliamperes-minutes per week; and
- (ii) Estimates of the percentage of the workload expected to occur for a particular beam direction.

(5) For new and modified installations only, the following are minimum design requirements for medical x-ray machine operator booths. These requirements do not apply to dental, podiatry, and veterinary installations. See subsection (7) of this section for dental panoramic and cephalometric.

(a) The operator shall be allotted 7.5 square feet or more of unobstructed floor space in the x-ray booths.

(i) The 7.5 square feet of minimum space specified under subsection (5)(a) of this section shall be a geometric configuration where no dimension is less than two feet.

(ii) The allotted space shall exclude an encumbrance by the console, such as an overhang, cables, or other similar encroachment.

(iii) An extension of a straight line drawn between any point on the edge of the booth shielding and the nearest vertical edge of a chest cassette holder or corner of the examination table shall not impinge on the unobstructed space.

(iv) The booth walls shall be seven feet high or more and shall be permanently fixed to the floor or other structure as may be necessary.

(v) When a door or moveable panel is used as the integral part of the booth structure, it must have a permissive device which will prevent an exposure when the door or panel is not closed.

(b) Switch placement. The operator's switch for the radiographic machine shall be fixed within the booth. The switch shall:

(i) Be at least 102 centimeters (forty inches) inside the protected area; and

(ii) Allow the operator to use the available viewing windows.

(c) Viewing system requirements.

(i) Each booth shall have at least one viewing device which shall:

(A) Be placed so the operator can view the patient during exposure; and

(B) Be placed so the operator can have full view of the entries into the room.

(ii) When the viewing system is a window, the following requirements also apply:

(A) The window shall have a visible area of one square foot or more; and

(B) The glass shall have the same lead equivalence or more as that required in the booth's wall where the glass is mounted.

(iii) When the viewing system is by mirrors, the mirrors shall be located to accomplish the general requirements under subdivision (i) of this subsection.

(iv) When the viewing system is by electronic means (for example, TV):

(A) The camera shall be located to accomplish the general requirements under subdivision (i) of this subsection; and

(B) There shall be an alternate viewing system as a backup for electronic failure.

(d) New or modified facilities shall maintain a copy of the floor plan and shielding calculations required under subsection (1) of this section.

(6) Dimensions of primary beam shielding (chest, cephalometer) shall exceed the largest possible beam size by 30.5 centimeters (one foot) or more in every direction. Cephalometric primary beam shielding shall be deemed adequate if, for a maximum workload of twenty films a week, two-pound lead is installed (for occupied areas).

(7) A viewing device shall be present in dental panoramic and cephalometric x-ray installations, so the requirements of subsection (5)(c) of this section are met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-030, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-28-032, filed 12/11/86; 83-19-050 (Order 2026), § 402-28-032, filed 9/16/83; Order 1084, § 402-28-032, filed 1/14/76. Formerly WAC 402-28-030 (part).]

WAC 246-225-040 General requirements for diagnostic x-ray systems. In addition to other requirements of this chapter, diagnostic x-ray systems shall meet the following requirements:

(1) *Warning label.* The control panel containing the main power switch shall bear the warning statement, legible and accessible to view: "WARNING: This x-ray unit may be dangerous to patient and operator unless safe exposure factors and operating instructions are observed."

(2) *Battery charge indicator.* On battery-powered generators, visual means shall be provided on the control panel to indicate the battery is in a state of charge adequate for proper operation.

(3) *Leakage radiation from the diagnostic source assembly.* The leakage radiation from the diagnostic source assembly, measured at a distance of 1 meter in any direction from the source, shall not exceed 100 milliroentgens in one hour when the x-ray tube is operated at its leakage technique factors. Compliance shall be determined by measurements averaged over an area of one hundred square centimeters with no linear dimension greater than twenty centimeters.

(4) *Radiation from components other than the diagnostic source assembly.* The radiation emitted by a component other than the diagnostic source assembly shall not exceed 2 milliroentgens in one hour at 5 centimeters from an accessible surface of the component when it is operated in an assembled x-ray system under conditions for which it was designed. Compliance shall be determined by measurements averaged over an area of 100 square centimeters with no linear dimension greater than 20 centimeters.

(5) *Beam quality.*

(a) The half-value layer (HVL) of the useful beam for a given x-ray tube potential shall not be less than the values shown in this section, Table I. If it is necessary to determine such half-value layer at an x-ray tube potential which is not listed in Table I, linear interpolation or extrapolation shall be made.

WAC 246-225-040 TABLE I

Design operating range (kilovolts peak)	Measured potential (kilovolts peak)	Half-value layer (millimeters of aluminum equivalent)	Half-value layer (millimeter of aluminum equivalent for dental units)
Below 51—	30	0.3	N/A
	40	0.4	N/A
	50	0.5	1.5
51 to 70—	51	1.2	1.5
	60	1.3	1.5
	70	1.5	1.5
Above 70—	71	2.1	2.1
	80	2.3	2.3
	90	2.5	2.5
	100	2.7	2.7
	110	3.0	3.0
	120	3.2	3.2
	130	3.5	3.5
	140	3.8	3.8
	150	4.1	4.1

(b) For capacitor energy storage equipment, compliance shall be determined with neither the minimum nor the maximum quantity of charge per exposure.

(c) The required minimal half-value layer shall include the filtration contributed by materials permanently in position between the focal spot of the tube and the patient. (For example, a table top when the tube is mounted "under the table" and inherent filtration of the tube)

(d) *Filtration control.* For x-ray systems with variable kVp and variable filtration for the useful beam, a device shall link the kVp selector with the filters and shall prevent an exposure unless the minimum amount of filtration required by subdivision (a) of this subsection is in the useful beam for the selected kVp.

(6) *Multiple tubes.* Where two or more radiographic tubes are controlled by one exposure switch, the tube or tubes selected shall be clearly indicated prior to initiation of the exposure. Such indication shall be both on the x-ray control panel and near or on the selected tube housing assembly.

(7) *Mechanical support of tube head.* The tube housing assembly supports shall be adjusted such that the tube housing assembly remains stable during an exposure unless the tube housing movement during exposure is a designed function of the x-ray system.

(8) *Technique indicators.*

(a) The technique factors used during an exposure shall be indicated before the exposure begins, except when automatic exposure controls are used, in which case the technique factors set prior to the exposure shall be indicated.

(b) On equipment having fixed technique factors, the requirement, under subdivision (a) of this subsection may be met by permanent markings. Indication of technique factors shall be visible from the operator's position except in the case of spot films made by the fluoroscopist.

(9) *Certified units.* All diagnostic x-ray systems certified to comply with 21 CFR 1020 shall meet the requirements of that certification.

(10) *Linearity.* The difference between the ratio of exposure to mAs at one mA or mAs setting and the ratio at

another mA or mAs setting shall not exceed 0.10 times the sum of the ratios. This is written as:

$$X_1 - X_2 \leq 0.10 (X_1 + X_2)$$

Where X_1 and X_2 are the ratios (mR/mAs) for each mA or mAs station.

The test shall be performed at any selections of mA or mAs without regard to focal spot size, provided neither focal spot size is less than 0.45 millimeter.

(11) kVp accuracy. The difference between the indicated and actual kVp of an x-ray machine shall not be greater than ten percent of the indicated kVp, or, alternatively, if available, the accuracy specifications of the control panel manufacturer must be met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-040, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-28-035, filed 12/11/86; 83-19-050 (Order 2026), § 402-28-035, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-035, filed 12/8/80; Order 1084, § 402-28-035, filed 1/14/76. Formerly WAC 402-28-030 (part).]

WAC 246-225-050 Fluoroscopic x-ray systems.

Fluoroscopic x-ray systems shall meet the following requirements:

(1) Limitation of useful beam.

(a) The fluoroscopic tube shall not produce x-rays unless the primary barrier is in position to intercept the entire useful beam at all times.

(b) The entire cross section of the useful beam shall be intercepted by the primary protective barrier of the fluoroscopic image assembly at any source-to-image-distance (SID).

(c) Nonimage-intensified fluoroscopic equipment shall not be used.

(d) For image-intensified fluoroscopic equipment without a spot film device, neither the length nor the width of the fluoroscopic x-ray field in the plane of the image receptor shall exceed that of the visible area of the image receptor by more than three percent of the SID. The sum of the excess length and the excess width shall be no greater than four percent of the SID. Measurements shall be made at the minimum SID available but at no less than eight inches table top to image receptor distance.

(e) For uncertified image-intensified fluoroscopic equipment with a spot film device, the fluoroscopic x-ray beam with the shutters wide open (during either fluoroscopy itself or spot films) shall be no larger than the dimensions of the largest spot film size for which the device is designed. Measurements shall be made at the minimum SID available, but at no less than eight inches table top to the film plane distance.

(f) For certified (21 CFR 1020) image-intensified fluoroscopic equipment with a spot film device, neither the length nor the width of the fluoroscopic x-ray field in the plane of the image receptor shall exceed that of the visible area of the image receptor by more than three percent of the SID. The sum of the excess width shall be no greater than four percent of the SID. Measurements shall be made at the minimum SID available, but at no less than eight inches table top to film plane distance.

(g) Fluoroscopic equipment beam limitation:

(i) Means shall be provided to reduce the beam size at the plane of the image receptor to 125 square centimeters or less; and

(ii) The minimum field size at the greatest SID shall be equal to or less than 5 centimeters by 5 centimeters.

(2) *Activation of the fluoroscopic tube.* X-ray production in the fluoroscopic mode shall be controlled by a deadman switch.

(3) *Entrance exposure rate allowable limits.*

(a) For equipment with or without automatic brightness control, the exposure rate measured at the point where the center of the useful beam enters the patient shall not exceed ten roentgens per minute, except during film recording of fluoroscopic images or when an optional high level control (HLC) is activated.

(b) For equipment provided with HLC, the equipment shall not be operable at a combination of tube potential and current which will result in an exposure rate in excess of 5 roentgens per minute at the point where the center of the useful beam enters the patient, unless the HLC is activated.

(i) Special means of activation of high level controls, such as additional pressure applied continuously by the operator, shall be required to avoid accidental use.

(ii) A continuous signal audible to the fluoroscopist shall indicate the high level control is employed.

(c) Measuring compliance of entrance exposure rate limits. Compliance with subsection (3) of this section shall be determined as follows:

(i) Movable grids and compression devices shall be removed from the useful beam during the measurement;

(ii) If the source is below the table, exposure rate shall be measured 1 centimeter above the table top or cradle;

(iii) If the source is above the table, the exposure rate shall be measured at 30 centimeters above the table top with the end of the beam-limiting device or spacer positioned as closely as possible to the point of measurement;

(iv) In a C-arm type of fluoroscope, the exposure rate shall be measured 30 centimeters from the input surface of the fluoroscopic imaging assembly, with the source positioned at any available SID, provided the end of the beam-limiting device or spacer is no closer than 30 centimeters from the input surface of fluoroscopic imaging assembly; and

(v) In a lateral-type fluoroscope, the exposure rate shall be measured at a point 15 centimeters from the center line of the x-ray source with the end of the beam-limiting device or spacer positioned as closely as possible to the point of measurement. If the table top is movable, the table top shall be positioned as closely as possible to the lateral x-ray source, with the end of the beam-limiting device or spacer no closer than 15 centimeters to the center line of the x-ray table.

(d) Periodic measurement of entrance exposure rate limits.

(i) Periodic measurements of the exposure rate shall be made. An adequate period for such measurements shall be annually or after maintenance of the system affecting the exposure rate.

(ii) Results of exposure rate measurements shall be available where the fluoroscopist has ready access to the

measurements while using that fluoroscope. Results of the measurements shall include:

(A) The maximum possible R/minute, as well as the physical factors used to determine data;

(B) The name of the person performing the measurements;

(C) The last two dates the measurements were performed; and

(D) The type of device used in making the measurements.

(iii) Conditions of measurement:

(A) The kVp shall be adjusted to that which will produce the maximum entrance exposure rate;

(B) The high level control, if present, shall not be activated;

(C) The x-ray systems that incorporate automatic exposure rate control (automatic brightness control) shall have sufficient material, for example, lead or lead equivalence, placed in the useful beam to produce the maximum output of the x-ray system; and

(D) X-ray systems not incorporating automatic exposure rate control shall utilize the maximum milliamperage of the x-ray system. Materials, for example, an attenuation block, may be placed in the useful beam to protect the imaging system, as long as the material does not affect the measurement of the exposure rate.

(4) *Barrier transmitted radiation rate limits.*

(a) The exposure rate due to transmission through the primary protective barrier with the attenuation block in the useful beam, combined with radiation from the image intensifier, if provided, shall not exceed 2 milliroentgens per hour for each roentgen per minute of entrance exposure rate. The barrier transmission measurement shall be made at 10 centimeters from an accessible surface of the fluoroscopic imaging assembly beyond the plane of the image receptor.

(b) Measuring compliance of barrier transmission.

(i) The exposure rate due to transmission through the primary protective barrier combined with radiation from the image intensifier shall be determined by measurements averaged over an area of 100 square centimeters with no linear dimension greater than 20 centimeters.

(ii) If the source is below the table top, the measurement shall be made with the input surface of the fluoroscopic imaging assembly positioned 30 centimeters above the table top.

(iii) If the source is above the table top and the SID is variable, the measurement shall be made with the end of the beam-limiting device or spacer as close to the table top as it can be placed, provided the beam-limiting device or spacer shall not be closer than 30 centimeters.

(iv) Movable grids and compression devices shall be removed from the useful beam during the measurement.

(5) *Indication of potential and current.* During fluoroscopy and cinefluorography, x-ray tube potential and current shall be continuously indicated.

(6) *Source-skin distance (SSD).* The source to skin distance shall not be less than:

(a) 38 centimeters on stationary fluoroscopes;

(b) 30 centimeters on mobile fluoroscopes; and

(c) 20 centimeters for image intensified fluoroscopes used for specific surgical application. The user must provide

precautionary measures for the use of the fluoroscope due to its short SSD.

(7) *Fluoroscopic timer.*

(a) Means shall be provided to preset the cumulative on-time of the fluoroscopic tube. The maximum cumulative time of the timing device shall not exceed five minutes without resetting.

(b) A signal audible to the fluoroscopist shall indicate the completion of a preset cumulative on-time. Such signal shall continue to sound while x-rays are produced until the timing device is reset. Alternatively, the timing device may terminate exposures at the end of the preset time.

(8) *Control of scattered radiation.*

(a) Fluoroscopic table designs when combined with normal operating procedures shall be such that no unprotected part of staff or ancillary person's body shall be exposed to unattenuated scattered radiation which originates from under the table. The attenuation required shall be not less than 0.25 mm lead equivalent.

(b) Equipment configuration when combined with procedures shall be such that no portion of staff or ancillary person's body, except the extremities, shall be exposed to the unattenuated scattered radiation emanating from above the table top unless:

(i) The radiation has passed through not less than 0.25 mm lead equivalent material, for example, drapes, Bucky-slot cover-sliding or folding panel, or self-supporting curtains, in addition to lead equivalency provided by the protective apron referred to under WAC 246-225-020 (2)(e); and

(ii) Exceptions to subdivision (b) of this subsection may be made in some special procedures where a sterile field will not permit the use of the normal protective barriers. Where the use of prefitted sterilized covers for the barriers is practical, the department shall not permit such exception.

(9) *Radiation therapy simulation systems.* Radiation therapy simulation systems shall be exempt from the requirements of subsections (3), (4), and (7) of this section: *Provided, That:*

(a) Such systems are designed and used in such a manner that no individual other than the patient is in the x-ray room when the system is producing x-rays; and

(b) The systems not meeting the requirements of subsection (7) of this section are provided with a means of indicating the cumulative time during which an individual patient has been exposed to x-rays. The timer shall be reset between examinations in such cases.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-050, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-28-040, filed 12/11/86; 83-19-050 (Order 2026), § 402-28-040, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-040, filed 12/8/80; Order 1084, § 402-28-040, filed 1/14/76; Order 1, § 402-28-040, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-225-060 Radiographic systems other than fluoroscopic, dental intraoral, or veterinary systems—Beam limitation. The useful beam shall be limited to the area of clinical interest and show evidence of collimation. This shall be deemed to have been met if a positive beam limiting device has been properly used or if evidence of

collimation is shown on at least three sides or three corners of the film, (for example, projections from the shutters of the collimator, cone cutting at the corners or a border at the film's edge).

(1) *General purpose stationary and mobile x-ray systems.*

(a) There shall be provided a means for stepless adjustment of the size of the x-ray field such that at least two dimensions of the x-ray field are independently variable. The minimum field size at a SID of 100 centimeters shall be equal to or less than ten by ten centimeters.

(b) Adequate means shall be provided for visually defining the perimeter of the x-ray field. The total misalignment of the edges of the visually defined field with the respective edges of the x-ray field along either the length or width of the visually defined field shall not exceed 2 percent of the distance from the source to the center of the visually defined field when the surface upon which it appears is perpendicular to the central axis of the x-ray beam.

(2) *In addition to the requirements of WAC 246-225-060(1) above all stationary x-ray systems shall meet the following requirements:*

(a) Means shall be provided to indicate when the axis of the x-ray beam is perpendicular to the plane of the image receptor and to align the center of the x-ray field with respect to the center of the image receptor to within 2 percent (5 percent for equipment manufactured prior to August 1974) of the SID. Dental lateral jaw examinations shall be excluded from this requirement;

(b) The beam-limiting device shall numerically indicate the field size in the plane of the image receptor to which it is adjusted;

(c) Indication of field size dimensions and SID's shall be specified in inches and/or centimeters;

(d) Indication of field size dimensions shall be such that aperture adjustments result in x-ray field dimensions in the plane of the image receptor to within 2 percent of the SID when the beam axis is perpendicular to the plane of the image receptor.

(3) *Radiographic equipment designed for only one image receptor size at a fixed SID shall be provided with means to limit the field at the plane of the image receptor to dimensions no greater than those of the image receptor, and to align the center of the x-ray field with the center of the image receptor to within 2 percent of the SID.*

(4) *Special purpose x-ray systems.*

(a) These systems shall be provided with means to limit the x-ray field in the plane of the image receptor so that such field does not exceed each dimension of the image receptor by more than 2 percent of the SID when the axis of the x-ray beam is perpendicular to the plane of the image receptor.

(b) These systems shall be provided with means to align the center of the x-ray field with the center of the image receptor to within 2 percent (5 percent for equipment manufactured prior to August 1974) of the SID.

(c) The above WAC 246-225-060 (4)(a) and 246-225-060 (4)(b) may be met with a system that meets the requirements for a general purpose x-ray system as specified in WAC 246-225-060(1) or, when alignment means are also provided, may be met with either:

(i) An assortment of removable, fixed-aperture, beam-limiting devices sufficient to meet the requirement for each combination of image receptor size and SID for which the unit is designed (each such device shall have clear and permanent markings to indicate the image receptor size and SID for which it is designed); or

(ii) A beam-limiting device having multiple fixed apertures sufficient to meet the requirement for each combination of image receptor size and SID for which the unit is designed. Permanent, clearly legible markings shall indicate the image receptor size and SID for which each aperture is designed and shall indicate which aperture is in position for use.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-060, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-051, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-051, filed 12/8/80; Order 1084, § 402-28-051, filed 1/14/76. Formerly WAC 402-28-050 (part).]

WAC 246-225-070 Radiographic systems other than fluoroscopic, dental intraoral, or veterinary systems—Radiation exposure control devices. (1) *Timers.* Means shall be provided to terminate the exposure at a preset time interval, preset product of current and time, a preset number of pulses, or a preset radiation exposure to the image receptor. In addition, it shall be impossible to make an exposure when the timer is set to a zero or off position if either position is provided.

(2) *X-ray control (exposure switch):*

(a) A control which shall be the equivalent of a dead-man switch, shall be incorporated into each x-ray system such that an exposure can be terminated at any time except for:

(i) Exposure of one-half second or less, or

(ii) During serial radiography when means shall be provided to permit completion of any single exposure of the series in process.

(b) Each x-ray control shall be located in such a way as to meet the following requirements:

(i) Stationary x-ray systems shall be required to have the x-ray exposure switch permanently mounted in a protected area so that the operator has no choice but to remain in that protected area during the entire exposure;

(ii) Mobile and portable x-ray systems shall have:

(A) An exposure cord which can extend for a minimum of 12 feet from the patient; or

(B) A protective barrier of 0.25 millimeter lead equivalent between the patient and the operator.

(c) Each x-ray control shall provide visual evidence to the operator that x-rays are being produced and an audible signal that the exposure has terminated.

(3) *Automatic exposure controls (phototimers).* When an automatic exposure control is provided:

(a) Indication shall be made on the control panel when this mode of operation is selected;

(b) When the x-ray tube potential is equal to or greater than 50 kVp, the minimum exposure time for field emission equipment rated for pulsed operation shall be equal to or less than the interval equivalent to two pulses;

(c) The minimum exposure time for all equipment other than that specified in WAC 246-225-070 (3)(b) shall be equal to or less than 1/60 second or a time interval required to deliver 5 mAs, whichever is greater.

(4) *Timer reproducibility.* With a timer setting of 0.5 seconds or less, the difference between the maximum exposure time (Tmax) and the minimum exposure time (Tmin) shall be less than or equal to 10% of the average exposure time (T), when four timer tests are performed:

$$(T_{\max} - T_{\min}) \leq 0.1T$$

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-070, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-052, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-052, filed 12/8/80; Order 1084, § 402-28-052, filed 1/14/76. Formerly WAC 402-28-050 (part).]

WAC 246-225-080 Radiographic systems other than fluoroscopic, dental intraoral, or veterinary systems—Source-to-skin or receptor distance. (1) *Limitation.* All radiographic systems shall be provided with a durable, securely fastened means to limit the source-to-skin distance to not less than 23 centimeters. The requirement can be met when the collimator or cone provides the required limits.

(2) *Source to receptor distance measuring device.* All radiographic systems shall be provided with a device or reference, other than a collimator light localizer, which will indicate the selected source to image receptor distance (SID) to within 2 percent of the indicated SID.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-053, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-053, filed 12/8/80; Order 1084, § 402-28-053, filed 1/14/76. Formerly WAC 402-28-050 (part).]

WAC 246-225-090 Radiographic systems other than fluoroscopic and dental intraoral—Exposure reproducibility. The exposure produced shall be reproducible to within the following criterion: When all technique factors are held constant, the coefficient of variation shall not exceed 0.05.

(1) For manual exposure control mode, this shall be deemed to have been met if when four exposures at identical technique factors are made, the difference between the maximum exposure value (Emax) and the minimum exposure value (Emin) shall be less than or equal to 10% of the average exposure (E):

$$(E_{\max} - E_{\min}) \leq 0.10E$$

(2) For phototimed exposure control mode, this shall be deemed to have been met if when four exposures at identical technique factors are made, the difference between the maximum exposure value (Emax) and the minimum exposure value (Emin) shall be less than or equal to 10% of the average exposure (E):

$$(E_{\max} - E_{\min}) \leq 0.1E$$

The four exposures are to be made under the following conditions in phototimed mode:

(a) The kV is held constant.

(b) The mA, if selectable, is held constant.

(c) The selected density, if selectable, is held constant.

(d) Selection of phototimer radiation detectors (single or multiple detectors selected), if available, is varied for each of the four exposures.

(e) The same attenuator is placed in the x-ray field between the selected phototimer radiation detectors (photocells) and the radiation detector used to determine the four exposure values.

(f) The selected phototimer radiation detectors (photocells) are within the x-ray field during each exposure measurement and are covered completely by the attenuator.

(3) Systems employing deliberately mismatched phototimed cells are permitted, providing written specifications for the mismatch are available for inspection.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-090, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-054, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-054, filed 12/8/80; Order 1084, § 402-28-054, filed 1/14/76. Formerly WAC 402-28-050 (part).]

WAC 246-225-100 Radiographic systems—Standby radiation from capacitor energy storage equipment. Radiation emitted from the x-ray tube when the exposure switch or timer is not activated shall not exceed a rate of 2 milliroentgens per hour at 5 centimeters from any accessible surface of the diagnostic source assembly, with the beam-limiting device fully open.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-055, filed 12/8/80; Order 1084, § 402-28-055, filed 1/14/76. Formerly WAC 402-28-050 (part).]

WAC 246-225-110 Intraoral dental radiographic systems. In addition to the provisions of WAC 246-225-020, 246-225-030, and 246-225-040 the requirements of this section apply to x-ray equipment and associated facilities used for dental radiography. Criteria for extraoral dental radiographic systems are covered in WAC 246-225-060, 246-225-070, and 246-225-080.

(1) *Source-to-skin distance (SSD).* X-ray systems designed for use with an intraoral image receptor shall be provided with means to limit source-to-skin distance to not less than:

(a) 18 centimeters if operable above 50 kilovolts peak, or

(b) 10 centimeters if operable only at 50 kilovolts peak.

(2) *Field limitation.*

(a) Radiographic systems designed for use with an intraoral image receptor shall be provided with means to limit the x-ray beam such that:

(i) If the minimum source-to-skin distance (SSD) is 18 centimeters or more, the x-ray field, at the minimum SSD, shall be containable in a circle having a diameter of no more than 7 centimeters; and

(ii) If the minimum SSD is less than 18 centimeters, the x-ray field, at the minimum SSD, shall be containable in a circle having a diameter of no more than 6 centimeters.

(b) An open ended position indicating device shall be used. The shielding shall be equivalent to that required for the diagnostic source assembly (WAC 246-225-040(3)).

(3) *Timers.* Means shall be provided to terminate the exposure at a preset time interval, preset product of current and time, a preset number of pulses, or a preset radiation exposure to the image receptor. In addition,

(a) Termination of exposure shall cause automatic resetting of the timer to its initial setting or to zero.

(b) It shall not be possible to make an exposure when the timer is set to a zero or off position if either position is provided.

(4) *X-ray control exposure switch:*

(a) A control, which shall be the equivalent of a dead-man switch, shall be incorporated into each x-ray system.

(b) Each x-ray control shall be located in such a way as to meet the following criterion:

(i) For stationary x-ray systems it shall be required that the control switch be permanently mounted in a protected area (e.g., corridor outside the room) so that the operator has no choice but to remain in that protected area during the entire exposure.

(ii) Permanently mounted in a protected area shall be interpreted as meaning that the exposure switch is fixed in position no less than 36 inches from access to the direct scatter radiation field.

(c) The x-ray control shall provide a visual or audible indication of x-ray production or termination at the operator's protected position.

(5) *Exposure reproducibility.* The co-efficient of variation shall not exceed 0.05 when all technique factors are held constant. This requirement shall be deemed to have been met if, when four exposures are made at identical technique factors, the difference between the maximum exposure (E_{max}) and the minimum exposure (E_{min}) shall be less than or equal to 10% of the average exposure (E):

$$(E_{max} - E_{min}) < 0.1E$$

(6) No diagnostic dental x-ray machine with a fixed, nominal kVp of less than 50 shall be permitted.

(7) *Operating controls.*

(a) Patient and film holding devices shall be used when the techniques permit.

(b) Neither the tube housing nor the position indicating device shall be hand held during an exposure. The tube housing shall remain stable during exposure.

(c) The x-ray system shall be arranged and operated in such a manner that the useful beam at the patient's skin does not exceed the dimensions specified in WAC 246-225-110 (2)(a).

(d) Dental fluoroscopy without image intensification shall be prohibited.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-225-110, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-225-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-28-080, filed 9/16/83. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-28-080, filed 12/8/80; Order 1084, § 402-28-080, filed 1/14/76; Order 1, § 402-28-080, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-225-120 Therapeutic x-ray installations less than 1 MeV. (1) *Equipment requirements.*

(a) *Leakage radiation.* When the tube is operated at its leakage technique factors, the leakage radiation shall not exceed the value specified at the distance specified for the classification of that x-ray system:

(i) Contact therapy systems. Leakage radiation shall not exceed 100 milliroentgens per hour at five centimeters from the surface of the tube housing assembly;

(ii) Zero to one hundred fifty kVp systems. Systems shall have a leakage radiation which does not exceed one roentgen in one hour at one meter from the source;

(iii) One hundred fifty-one to nine hundred ninety-nine kVp systems. The leakage radiation shall not exceed one roentgen in one hour at one meter from the source except systems that operate in excess of 500 kVp may have a leakage radiation at one meter from the source equivalent to the exposure within one hour of the useful beam at one meter from the source multiplied by a factor of 0.001.

(b) *Permanent beam limiting devices.* Permanent fixed diaphragms or cones used for limiting the useful beam shall provide the same or higher degree of protection as that required by the tube housing assembly.

(c) *Removable and adjustable beam limiting devices.*

(i) Removable beam limiting devices shall, for the portion of the useful beam to be blocked by these devices, transmit not more than one percent of the original x-ray beam at the maximum kilovoltage and maximum treatment filter;

(ii) Adjustable beam limiting devices installed after the effective date of this section shall meet the requirements of (c)(i) of this subsection;

(iii) Adjustable beam limiting devices installed before the effective date of this section shall, for the portion of the x-ray beam to be blocked by these devices, transmit not more than five percent of the original x-ray beam at the maximum kilovoltage and maximum treatment filter.

(d) *Filter and wedge systems.* Filter systems shall meet the following requirements:

(i) Filters cannot be accidentally displaced from the useful beam at any possible tube orientation;

(ii) Each filter is marked as to its material of construction and its thickness or wedge angle for wedge filters;

(iii) It shall be possible for the operator to determine the presence or absence of each filter in the useful beam when the operator is at the control panel, either by display at the control panel or by direct observation; and

(iv) The filter insertion slot opening shall be covered with an attenuator equivalent to four-pound lead under operating conditions.

(e) *Tube immobilization.* The tube housing assembly shall be capable of being immobilized during stationary treatments.

(f) *Focal spot marking.* The tube housing assembly shall be so marked that it is possible to determine the location of the focal spot to within five millimeters, and such marking shall be readily accessible for use during calibration procedures.

(g) *Timer.*

(i) A timer shall be provided which has a display at the treatment control panel. The timer shall be graduated in minutes and fractions of minutes. The timer shall have a

preset time selector and a means of determining elapsed time;

(ii) The timer shall be a cumulative timer which activates with radiation and retains its reading after irradiation is interrupted or terminated;

(iii) The timer shall terminate irradiation when a preselected time has elapsed;

(iv) The timer shall permit accurate presetting and determination of exposure times as short as 1 second;

(v) The timer shall terminate irradiation when set to zero;

(vi) The timer shall not activate until the shutter is opened, when patient irradiation is controlled by a shutter mechanism.

(h) *Control panel functions.* The control panel, in addition to the displays required in other provisions of this chapter, shall have:

(i) An indication of whether x-rays are being produced;

(ii) Means for indicating kV and x-ray tube current;

(iii) The means for terminating an exposure at any time;

(iv) A locking device which will prevent unauthorized use of the x-ray system; and

(v) For x-ray equipment manufactured after the effective date of this section, a positive display of specific filter(s) in the beam.

(i) *Source-to-patient distance.* There shall be means of determining the source-to-patient distance to within five millimeters.

(j) *Shutters.* Unless it is possible to bring the x-ray output to the prescribed exposure parameters within five seconds, the entire useful beam shall be automatically attenuated by a shutter having a lead equivalency not less than that of the tube housing assembly. In addition:

(i) After the unit is at operating parameters, the shutter shall be controlled electrically by the operator from the control panel;

(ii) An indication of shutter position shall appear at the control panel.

(k) *Low filtration x-ray tubes.* Each x-ray system equipped with a beryllium or other low-filtration window shall be clearly labeled as such upon the tube housing assembly and at the control panel;

(l) *Alignment.* When the therapy x-ray system is equipped with a light field indicating the x-ray field, the misalignment of one field edge to the other shall not exceed one percent of any source-to-treatment distance.

(2) *Facility design requirements for systems capable of operating above 50 kVp.*

In addition to shielding adequate to meet requirements of chapters 246-235 and 246-221 WAC and the shielding plan review provisions of WAC 246-225-030, the treatment room shall meet the following design requirements:

(a) *Warning lights.* Treatment rooms to which access is possible through more than one entrance shall be provided with warning lights, in a readily observable position near the outside of all access doors, which will indicate when the useful beam is "on." Or, as an alternative, entrances other than the main one shall be equipped with interior locks, activated for the period of exposure, and the main entrance shall be under control of the operator.

(b) *Voice communication.* Provision shall be made for two-way aural communication between the patient and the

operator at the control panel; however, where excessive noise levels make aural communication impractical, other methods of communication shall be used.

(c) *Viewing systems.* Windows, mirrors, closed-circuit television, or an equivalent system shall be provided to permit continuous observation of the patient during irradiation and shall be so located that the operator can observe the patient from the control panel. When the primary viewing system is by electronic means (e.g., television), an alternate viewing system shall be available for use in the event of electronic failure or treatment must be discontinued until repair is made. If treatment is to be discontinued, this policy shall be included in the written safety procedures. A copy of the safety procedures shall be provided to the operator.

(d) *Additional requirements.* Treatment rooms which contain an x-ray system capable of operating above 150 kVp shall meet the following additional requirements:

(i) All necessary shielding, except for any beam interceptor, shall be provided by fixed barriers;

(ii) The control panel shall be outside the treatment room;

(iii) All doors of the treatment room shall be electronically connected to the control panel such that x-ray production cannot occur unless all doors are closed;

(iv) When the doors referred to in (d)(iii) of this subsection are opened while the x-ray tube is activated:

(A) X-ray production shall terminate within one second; or

(B) The radiation at a distance of one meter from the source shall be reduced to less than 100 milliroentgens per hour within one second.

(v) After the radiation output of the x-ray tube has been affected by the opening of any door referred to in (d)(iii) of this subsection, it shall be possible to restore the x-ray system to full operation only upon:

(A) Closing the door; and subsequently

(B) Reinitiating the exposure at the control panel.

(e) *Calibrations.*

(i) The calibration of an x-ray system shall be performed at intervals not to exceed one year and after any change or replacement of components which could cause a change in the radiation output.

(ii) The calibration of the radiation output of the x-ray system shall be performed by a qualified expert who is physically present at the facility during such calibration.

(iii) Calibration of the radiation output of an x-ray system shall be performed with a calibrated instrument. The calibration of such instrument shall be traceable to a national standard. The instrument shall have been calibrated within the preceding two years.

(iv) The calibrations made pursuant to (e)(i) of this subsection shall be such that the dose at a reference point in soft tissue can be calculated to within \pm five percent.

(v) The calibration of the x-ray system shall include, but not be limited to, the following determinations:

(A) The exposure rates for each combination of field size, technique factors, filter, and treatment distance used;

(B) The degree of alignment between the radiation field and the field indicated by the localizing device if such device is present; and

(C) An evaluation of the uniformity of the radiation field symmetry for the field sizes used and any dependence upon tube housing assembly orientation.

(vi) Records of calibration performed pursuant to (e) of this subsection shall be maintained by the registrant for two years after completion of the calibration.

(vii) A copy of the most recent x-ray system calibration shall be available for use by the operator at the control panel.

(f) *Operating procedures.*

(i) When a patient must be held in position for radiation therapy, mechanical supporting or restraining devices shall be used;

(ii) The tube housing assembly shall not be held by an individual during exposures;

(iii) No individual other than the patient shall be in the treatment room unless such individual is protected by a barrier sufficient to meet the requirements of chapter 246-221 WAC. No individual other than the patient shall be in the treatment room during exposures when the kVp exceeds 150;

(iv) The x-ray system shall not be used in the administration of radiation therapy unless the requirements of (e) of this subsection have been met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-120, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-28-091, filed 12/11/86; 83-19-050 (Order 2026), § 402-28-091, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-091, filed 12/8/80.]

WAC 246-225-130 X-ray and electron therapy systems with energies of one MeV and above. Chapter 246-229 WAC except WAC 246-229-100 (3) and (4) shall apply to medical facilities using therapy systems with energies 1 MeV and above.

(1) *Definitions.* In addition to the definitions provided in WAC 246-225-010, the following definitions shall be applicable to this section.

(a) "Applicator" means a structure which indicates the extent of the treatment field at a given distance from the nominal source and which may or may not incorporate an additional beam-limiting device.

(b) "Beam scattering foil" means a device which scatters and flattens a beam of electrons.

(c) "Central axis of the beam" means a line passing through the origin of the source and the center of the plane figure formed by the edge of the secondary collimating jaws when in a symmetric mode.

(d) "Dose monitoring system" means a system of devices for the detection and display of quantities of radiation.

(e) "Dose monitor unit" means a unit from which the absorbed dose can be calculated.

(f) "Existing equipment" means therapy systems subject to this section which were manufactured on or before the effective date of these regulations.

(g) "Field flattening device" means an absorber used to homogenize the dose rate over the area of a useful beam of x-rays.

(h) "Field size" means the dimensions of an area in a plane perpendicular to the specified direction of the beam of incident radiation at a maximum dose depth. Determine dimensions by fifty percent decrement lines.

(i) "Gantry" means that part of the system supporting and allowing possible movements of the radiation head.

(j) "Interruption of irradiation" means the stopping of irradiation with the possibility of continuing irradiation without resetting of the operating conditions at the control panel.

(k) "Isocenter" means a fixed point in space located at the intersection of the rotation axes of the principal movements of the therapy system.

(l) "Moving beam therapy" means radiation therapy with relative displacement of the useful beam and the patient during irradiation.

(m) "New equipment" means systems subject to this section which were manufactured after effective date of these regulations.

(n) "Nominal source" means a point from which radiation originates.

(o) "Normal treatment distance" means the distance between the virtual source and a reference point on the central axis of the beam. The reference is located at a position on the central axis at a specified distance from the nominal source.

(p) "Patient" means an individual subjected to examination and treatment.

(q) "Phantom" means a volume of material behaving in a manner similar to tissue with respect to the attenuation and scattering of radiation.

(r) "Primary dose monitoring system" means a system which will monitor the quantity of radiation produced during irradiation and which will terminate irradiation when a preselected number of dose monitor units have been acquired.

(s) "Radiation treatment prescription" means the absorbed dose which is intended to be delivered to the treatment volume.

(t) "Radiation head" means the structure from which the useful beam emerges.

(u) "Redundant dose monitoring combination" means a combination of two dose monitoring systems in which both systems are arranged to terminate irradiation in accordance with a preselected number of dose monitor units.

(v) "Secondary dose monitoring system" means a system which will terminate irradiation in the event of failure of the primary system.

(w) "Shadow tray" means a device attached to the radiation head to support auxiliary beam limiting material.

(x) "Stationary beam therapy" means radiation therapy without relative displacement of the useful beam and the patient during irradiation.

(y) "Target" means that part of a radiation source which intercepts a beam of accelerated particles with subsequent emission of other radiation.

(z) "Termination of irradiation" means the stopping of irradiation in a fashion which will not permit continuance of irradiation without the resetting of operating conditions at the control panel.

(aa) "Treatment field" means the cross-sectional area of the patient's tissue which is to be irradiated.

(bb) "Treatment volume" means that portion of the patient's body which is to be irradiated.

(2) *Requirements for equipment.*

(a) *Leakage radiation to the patient area.*

(i) New equipment shall meet the following requirements:

(A) For all operating conditions, the dose equivalent in rem due to leakage radiation, including x-ray and electrons, but excluding neutrons, at any point in a circular plane of two meters radius centered on and perpendicular to the central axis of the beam at the normal treatment distance and outside the maximum useful beam, shall not exceed 0.1 percent of the maximum dose equivalent in rem of the unattenuated useful beam measured at the point of intersection of the central axis of the beam and the plane surface. Measurements shall be averaged over an area up to but not exceeding one hundred square centimeters at the positions specified; and

(B) For each system the registrant shall determine, or obtain from the manufacturer, the leakage radiation existing at the positions specified in (a)(i)(A) of this subsection for specified operating conditions. Records for leakage radiation shall be maintained at the installation for inspection by the department.

(ii) Existing equipment (that installed prior to the effective date of the regulations) shall meet the following requirements:

(A) The leakage radiation, excluding neutrons, at any point in the area specified by (a)(i)(A) of this subsection, where such area intercepts the central axis of the beam one meter from the nominal source, shall not exceed 0.1 percent of the maximum dose equivalent in rems of the unattenuated useful beam measured at the point of intersection of the central axis of the beam and the surface of the reference circular plane. Measurements shall be averaged over an area up to but not exceeding one hundred square centimeters at the positions specified.

(B) For each system, the registrant shall determine, or obtain from the manufacturer, the leakage radiation existing at the positions specified in (a)(ii)(A) of this subsection for specified operating conditions. Records for radiation leakage shall be maintained at the installation for inspection by the department.

(b) *Leakage radiation outside the patient area.*

(i) The dose equivalent in rem due to leakage radiation, except in the area specified in (a) of this subsection, when measured at any point one meter from the path of the charged particle, before the charged particle strikes the target or window, shall not exceed 0.1 percent for x-ray leakage of the maximum dose equivalent in rems of the unattenuated useful beam measured at the point of intersection of the central axis of the beam and the circular plane specified in (a) of this subsection.

(ii) The registrant shall determine, or obtain from the manufacturer, the actual leakage radiation existing at the positions specified in (a) of this subsection for specified operating conditions. Measurements shall be averaged over an area up to but not exceeding one hundred square centimeters at the positions specified.

(c) *Beam-limiting devices.* Secondary beam-limiting devices shall be provided and such devices shall transmit no more than two percent of the useful beam for the portion of

the useful beam attenuated by the beam-limiting device. The neutron component of the useful beam shall not be included in this requirement.

(d) *Beam-modifying devices.*

(i) When the absorbed dose rate information required by subsection (2)(q) of this section is dependent on operation with a beam-flattening or beam-scattering device in place, the device shall be removable from the machine only by the use of tools.

(ii) In systems using interchangeable beam-flattening devices or beam-scattering foils:

(A) Irradiation shall not be possible until a selection of beam-modifying device is made and verified at the treatment control panel;

(B) An interlock system shall be provided to prevent irradiation when the beam-modifying device selected is not in the correct position; and

(C) A display at the control panel shall indicate what beam-modifying device is selected.

(e) *Wedges.*

(i) Presence of wedges in the beam shall be indicated at the control panel, by direct observation or by electronic means.

(ii) Each wedge removable from the system shall be clearly identified as to that wedge's material of construction, thickness, and wedge angle.

(iii) An interlock shall be provided to prevent irradiation when a wedge selection carried out in the treatment room does not agree with the wedge selection indicated at the control panel.

(f) *Beam quality.* The registrant shall obtain from the therapy x-ray system manufacturer, and have available, the following information:

(i) At various beam energies, the x-ray absorbed dose expressed as a fraction of maximum absorbed dose;

(ii) At various beam energies, the absorbed dose at the surface of the skin as a fraction of the maximum absorbed dose; and

(iii) The maximum percentage absorbed dose due to stray neutrons in the useful beam at specified operating conditions.

(g) *Beam monitors.* Therapy systems shall be provided with radiation detectors in the radiation head.

(i) New equipment shall be provided with two or more radiation detectors. The detectors shall be incorporated into two monitoring systems arranged either as a primary/primary combination or as a primary/secondary combination.

(ii) Existing equipment shall be provided with one or more radiation detectors. The detector shall be incorporated into a primary system.

(iii) The detectors and system where the detector is incorporated shall meet the following requirements:

(A) Each primary system shall have a detector which is a transmission full-beam detector placed on the patient side of beam-modifying devices;

(B) The detectors shall be removable only with tools and shall be interlocked to prevent incorrect positioning;

(C) Each detector shall be capable of independently monitoring and controlling the useful beam;

(D) Each detector shall form part of a dose-monitoring system from whose readings in dose monitor units the

absorbed dose, at a reference point in the treatment volume can be calculated;

(E) For new equipment, the design of the dose-monitoring systems of subsection (2)(i) of this section shall assure the malfunctioning of one system shall not affect the correct functioning of the second system. In addition, the failure of an element common to both systems shall terminate irradiation.

(F) Each dose monitoring system shall have a legible display at the treatment control panel. Each display shall:

(I) Maintain a reading until intentionally reset to zero;

(II) Have only one scale and no scale multiplying factors in new equipment; and

(III) Utilize a design so increasing dose is displayed by increasing numbers and shall be designed so, in the event of an overdosage of radiation, the absorbed dose may be accurately determined under normal conditions of use or foreseeable failures.

(G) In the event of power failure, the dose-monitoring information required in subsection (2)(i) of this section displayed at the control panel at the time of failure shall be retrievable in one or more systems.

(h) *Beam symmetry.*

(i) A therapy machine installed after the effective date of these regulations shall have the capability of comparing the dose rates in each of the four quadrants of the central eighty percent of the useful beam.

(ii) Beam symmetry information shall be displayed at the treatment control panel making possible the following differential between quadrants:

(A) Five percent for straight-through accelerators; and

(B) Three percent for bending-magnet accelerators.

(iii) Beam asymmetry in excess of a ten percent quadrant differential shall cause treatment to terminate, or shall prevent irradiation.

(i) *Selection and display of dose monitor units.*

(i) Irradiation shall not be possible until a selection of a number of dose monitor units is made at the treatment control panel.

(ii) After useful beam termination, it shall be necessary manually to reset the preselected dose monitor units before treatment is reinitiated.

(iii) The preselected number of dose monitor units shall be displayed at the treatment control panel until reset manually for the next irradiation.

(j) *Termination of irradiation by the dose monitoring system.*

(i) Each of the required monitoring systems shall be capable of independently terminating an irradiation. Provision shall be made to test the correct operation of each system.

(ii) Each primary system shall terminate irradiation when the preselected number of dose monitor units is detected by the system.

(iii) Each secondary system shall terminate irradiation when a maximum of the preselected number of dose monitor units plus forty is detected by the system.

(iv) For new equipment, indicators on the control panel shall show which monitoring system terminated the beam.

(k) *Interruption switches.* It shall be possible to interrupt irradiation and equipment movements at any time from the operator's position at the treatment control panel.

Following any interruption, it shall be possible to restart irradiation by operator action without any reselection of operating conditions. If any change is made of a preselected value during an interruption, the equipment shall go to termination condition.

(l) *Termination switches.* It shall be possible to terminate irradiation and equipment movements, or go from an interruption condition to termination conditions, at any time from the operator's position at the treatment control panel.

(m) *Timer.*

(i) A timer shall be provided which has a display at the treatment control panel. The timer shall be graduated in minutes and decimals of minutes. The timer shall have a preset time selector and an elapsed time indicator.

(ii) The timer shall be a cumulative timer which switches on and off with the radiation and retains its reading after irradiation is interrupted or terminated. It shall be necessary to zero and subsequently reset the elapsed time indicator and the preset time selector after irradiation is terminated before irradiation shall again be possible.

(iii) The timer shall terminate irradiation when a preselected time has elapsed if the dose monitoring systems fail to terminate irradiation.

(n) *Selection of radiation type.* Equipment capable of both x-ray therapy and electron therapy shall meet the following requirements:

(i) Irradiation shall not be possible until a selection of radiation type is made at the treatment control panel;

(ii) An interlock system shall be provided to insure that the equipment can emit only the selected radiation type;

(iii) An interlock system shall be provided to prevent irradiation if selected operations carried out in the treatment room do not agree with the selected operations carried out in the treatment control panel;

(iv) With the exception of a specified number of dose monitor units for the purpose of portal film exposures, an interlock system shall be provided to prevent irradiation with x-rays when electron applicators are in place and to prevent irradiation with electrons when accessories for x-ray therapy are in place; and

(v) The radiation type selected shall be displayed at the treatment control panel before and during irradiation.

(o) *Selection of energy.* Equipment capable of generating radiation beams of different energies shall meet the following requirements:

(i) Irradiation shall not be possible until a selection of energy is made at the treatment control panel;

(ii) An interlock system shall be provided to insure the equipment can emit only the energy of selected radiation;

(iii) An interlock system shall be provided to prevent irradiation if selected operations carried out in the treatment room do not agree with the selected operations carried out at the treatment control panel; and

(iv) The energy selected shall be displayed at the treatment control panel before and during irradiation.

(p) *Selection of stationary beam therapy or moving beam therapy.* Equipment capable of both stationary beam therapy and moving beam therapy shall meet the following requirements:

(i) Irradiation shall not be possible until a selection of stationary beam therapy or moving beam therapy is made at the treatment control panel;

(ii) An interlock system shall be provided to insure the equipment can operate only in the selected mode;

(iii) An interlock system shall be provided to prevent irradiation when any selected operations carried out in the treatment room do not agree with the selected operations carried out at the treatment control panel;

(iv) An interlock system shall be provided to terminate irradiation when the movement stops during moving beam therapy;

(v) Moving beam therapy shall be controlled so the required relationship between the number of dose monitor units and movement is obtained; and

(vi) The mode of operation shall be displayed at the treatment control panel.

(q) *Absorbed dose rate.* For new equipment, a system shall be provided from whose readings the absorbed dose rate at a reference point in the treatment volume can be calculated.³ In addition:

(i) The quotient of the number of dose monitor units by time shall be displayed at the treatment control panel; and

(ii) If the equipment can deliver, under any conditions, an absorbed dose rate at the normal treatment distance more than twice the maximum value specified by the manufacturer's anticipated dose rate for any machine parameters utilized, a device shall be provided which terminates irradiation when the absorbed dose rate exceeds a value twice the specified maximum. The value at which the irradiation is terminated shall be in a registrant-maintained record.

(r) *Location of focal spot and beam orientation.* The registrant shall determine, or obtain from the manufacturer, the location with reference to an accessible point on the radiation head of:

(i) The x-ray target or the virtual source of x-rays;

(ii) The electron window or the scattering foil;

(iii) All possible orientations of the useful beam.

(s) *System interlock checks.* Capabilities shall be provided to check radiation safety interlocks. When preselection of operating conditions requires action in the treatment room and at the treatment control panel, selection at one location shall not give a display at the other location until the requisite selected operations in both locations are completed.

(t) *Facility and shielding requirements.* In addition to chapter 246-221 WAC, the following design requirements shall apply:

(i) Except for entrance doors or beam interceptors, required barriers shall be fixed barriers;

(ii) The treatment control panel shall be located outside the treatment room;

(iii) Windows, mirrors, closed-circuit television, or other equivalent viewing systems shall be provided to permit continuous observation of the patient during irradiation and shall be located so the operator may observe the patient from the treatment control panel. When the viewing system is by electronic means, for example, by television, an alternate viewing system shall be provided for use in the event of the primary system failure, or, alternatively, treatments shall be discontinued until the viewing system is again functional;

(iv) Provision shall be made for two-way aural communication between the patient and the operator at the treatment control panel. However, where excessive noise levels make

aural communications impractical, other methods of communication shall be used;

(v) Treatment rooms to which access is possible through two entrances or more shall be provided with warning lights and shall indicate when the useful beam is "on" in a readily observable position near the outside of all access doors; and

(vi) Interlocks shall be provided so entrance doors shall be closed before treatment is initiated or continued. When the radiation beam is interrupted by any door opening, it shall be possible to restore the machine to operation only by closing the door and reinitiating exposure by manual action at the control panel.

(u) *Surveys, calibrations, spot checks and operating procedures.*

(i) Survey.

(A) New facilities, and existing facilities not previously surveyed, shall have a survey made by, or under the direction of, a qualified expert. Such surveys shall also be done after a change in the facility or equipment causing a significant increase in radiation hazard.

(B) The registrant shall obtain a written report of the survey from the qualified expert and the registrant shall transmit a copy of the report to the department.

(C) The report shall indicate instances where the installation, in the opinion of the qualified expert, is in violation of applicable regulations and shall cite the section violated.

(ii) Calibrations.

(A) The calibration of systems subject to this section shall be performed before the system is first used for irradiation of patient and thereafter at time intervals which do not exceed twelve months and after any change which significantly alters the calibration, spatial distribution, or other characteristics of the therapy beam.

(B) The calibration shall be performed by a qualified expert.

(C) Calibration of the dose equivalent of the therapy beam shall be performed with a measurement instrument of which the calibration is traceable to national standards of exposure or absorbed dose and which shall have been calibrated within the preceding two years.

(D) Calibrations made under subsection (2)(u)(ii) of this section shall require the dose at a reference point in soft tissue be calculated within ± 5 percent.

(E) The calibration of the therapy beam shall include, but not be limited to, the following determinations:

(I) Verification that the equipment is operating in compliance with the design specifications concerning the light localizer, the side light and back-pointer alignment with the isocenter, when applicable, variation in the axis of rotation for the table, gantry and jaw system, and beam flatness and symmetry at specified depths;

(II) The output factors in terms of dose per monitor unit or dose per minute at a specific depth in a phantom for the range of field sizes used, for each effective energy, and for each treatment distance used for radiation therapy;

(III) The congruence between the radiation field and the field indicated by the localizing device; and

(IV) The uniformity of the radiation field and its dependency upon the direction of the useful beam.

(F) Records of the calibration performed under subsection (2)(u)(ii) of this section shall be maintained by the registrant for two years after completion of the calibration.

(G) A copy of the latest calibration performed under subsection (2)(u)(ii) of this section shall be available for operator use.

(iii) Spot checks. Spot checks shall be performed on the system subject to this section. Such spot checks shall meet the following requirements:

(A) A qualified expert shall develop, in writing, spot check procedures;

(B) The measurements taken during spot checks shall demonstrate the degree of consistency of the operating characteristics affecting the radiation output of the system or the radiation delivered to a patient during a therapy procedure;

(C) The spot check procedures shall specify the frequency of tests or measurements performed;

(D) For systems where beam quality can vary significantly, spot checks shall include quality checks;

(E) Where a system has built-in devices which provide a self-check of any parameter during irradiation, the spot check procedures shall require the parameter be independently verified at specific time intervals;

(F) Erratic spot checks or inconsistent spot checks of calibration data shall be promptly investigated and corrected before the system is used for patient irradiation;

(G) When a spot check indicates a significant change in the operating characteristics of a system, as specified in the qualified expert's spot check procedures, the system shall be recalibrated as required under subsection (2)(u)(ii) of this section;

(H) Records of spot check measurements performed under subsection (2)(u)(iii) of this section shall be maintained by the registrant for a period of one year or for twice as long as the spot check cycle, whichever is greater;

(I) Operating procedures.

(I) No individual other than the patient shall be in the treatment room during treatment of a patient.

(II) If a patient must be held in position during treatment, mechanical supporting or restraining devices shall be used.

(III) The system shall not be used in the administration of radiation therapy unless subsection (2)(u)(i), (ii), and (iii) of this section are met.

³The radiation detectors specified under subsection (2)(g) of this section may form part of this system.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-130, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-28-101, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-101, filed 12/8/80.]

WAC 246-225-140 Veterinary medicine radiographic installations. (1) Equipment.

(a) The protective tube housing shall be of diagnostic type.

See WAC 246-225-040(4).

(b) Diaphragms, cones, or a stepless adjustable collimator shall be used for collimating the useful beam to the area of clinical interest and shall provide the same degree of

protection as is required of the housing. Cones or diaphragms, if used, shall be marked with their field size and the distance at which they are to be used.

(c) The half-value layer (HVL) of the useful beam shall not be less than as shown in the following table:

Measured Potential (kilovolts peak)	Half-value Layer (millimeters of aluminum equivalent)
70 and below	1.5
71	2.1
80	2.3
90	2.5
100	2.7
110	3.0
120	3.2

(d) A device shall be provided to terminate the exposure after a preset time or exposure. It must not be possible for the device to allow an exposure when preset at "zero" or "off."

(e) A dead-man type of exposure switch shall be provided, together with an electrical cord of sufficient length, so that the operator can stand out of the useful beam and at least two meters from the animal during all x-ray exposures.

(f) Reproducibility requirements as described under WAC 246-225-090.

(2) *Structural shielding.* All wall, ceiling, and floor areas shall be equivalent to or provided with applicable protective barriers as required in WAC 246-225-030(1).

(3) *Operating procedures.*

(a) In any application in which the operator is not located behind a protective barrier, clothing consisting of a protective apron having a lead-equivalent of not less than 0.25 millimeters shall be worn by the operator and any other individuals in the room during exposures.

(b) No individual other than the operator shall be in the x-ray room while exposures are being made unless such individual's assistance is required.

(c) When an animal or film must be held in position during radiography, mechanical supporting or restraining devices should be used. If the animal must be held by an individual, that individual shall be protected with appropriate shielding devices, such as protective gloves and apron, and that individual shall be so positioned that no part of that individual's body will be struck by the useful beam. The requirements of WAC 246-221-090, Personnel monitoring, and WAC 246-225-020 (2)(h)(iv) apply to such individuals.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-140, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-110, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-110, filed 12/8/80; Order 1084, § 402-28-110, filed 1/14/76; Order 1, § 402-28-110, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-225-150 X-ray film developing requirements. Compliance with this section is required of healing arts registrants and is designed to ensure the patient and

operator exposure is minimized, and to produce optimum image quality and diagnostic information.

(1) Manual processing of films:

(a) The following relationship between temperature of the developer and development time must be used (standard chemistry only):

THERMOMETER READINGS (DEGREES)		MINIMUM DEVELOPING TIMES (MINUTES)
C	F	
27 -	80	2
	79	2
	78	2 1/2
	77	2 1/2
24 -	76	3
	75	3
	74	3 1/2
	73	3 1/2
22 -	72	4
	71	4
	70	4 1/2
	69	4 1/2
20 -	68	5
	67	5 1/2
	66	5 1/2
	65	6
18 -	64	6 1/2
	63	7
	62	8
	61	8 1/2
16 -	60	9 1/2

(b) *Processing of film.* All films shall be processed to achieve adequate sensitometric performance. This criterion shall be adjudged met if:

(i) Film manufacturer's published recommendations for time and temperature are followed; or

(ii) Each film is developed in accordance with the time-temperature chart as required under subdivision (a) of this subsection.

(c) Devices shall be available giving:

(i) The actual temperature of the developer; and

(ii) An audible or visible signal indicating the termination of a preset time (in minutes).

(d) Chemical-film processing control.

(i) Chemicals shall be mixed in accordance with the chemical manufacturer's recommendations.

(ii) Developer replenisher shall be periodically added to the developer tank based on the recommendations of the chemical or film manufacturer. Solution may be removed from the tank to permit the addition of an adequate volume of replenisher.

(iii) All processing chemicals shall be completely replaced at least every two months.

(2) Automatic film processors shall be set up and maintained so radiographic density and contrast are optimal. This criterion shall be adjudged met if:

(a) Film manufacturer's published specifications for time and temperature are followed. In the absence of such specifications, the film shall be developed using the following chart:

MINIMAL REQUIRED DEVELOPER TEMPERATURE		PROCESSOR DEVELOPER IMMERSION TIME*
°C	°F	Seconds
35	95	20
34.5	94	21
34	93	22
33.5	92	23
33	91	24
32	90	25
31.5	89	26
31	88	27
30.5	87	28
30	86	29
29.5	85	30

*Immersion time only, no cross-over time included.

The specified developer temperature and immersion time shall be posted in the dark room or on the automatic processor; and

(b) Replenishment of the developer chemistry is optimal:

(i) The processor shall deliver an adequate rate of developer replenishment; and

(ii) For facilities with a low x-ray workload, standby replenishment, flood replenishment, or periodically sending blank films through the processor may be necessary.

(c) Sensitometric tests of processor performance demonstrate the processor is achieving radiographic density and contrast equal to other processor models operating at equivalent developer immersion time and developer temperatures and using comparable chemistry.

(3) *Darkrooms.* Darkrooms shall be constructed so film being processed, handled, or stored will be exposed only to light passed through a safelight filter. The filter shall be of the type specified by the film manufacturer. Bulb wattage in the safelight shall be no greater than fifteen watts. The safelight shall be mounted at least four feet above work areas.

(4) The department shall make x-ray film development and darkroom tests as necessary to determine compliance with this section.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-150, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-990, filed 9/16/83; Order 1084, Appendix C (codified as WAC 402-28-990), filed 1/14/76.]

WAC 246-225-160 Mammography. (1) The use of a special purpose x-ray machine designed and used solely for mammography is required. Exempted from this requirement shall be general purpose x-ray equipment used for xerography that meets these regulations. This exemption is in effect until January 1, 1994.

(2) All mammographic calibration, service, and quality control actions shall be documented in writing and maintained at the facility for a three-year period. Records must be easily accessible to operators of these x-ray units.

(3) All tests requiring the use of a breast phantom shall employ a phantom similar to or identical to the one required

by the American College of Radiology for its mammography accreditation program.

(4) Machine requirements:

(a) Mammography x-ray machines must be calibrated on a yearly basis. Calibration shall document (but is not limited to) half-value layer (HVL), kVP accuracy, reproducibility, timer accuracy, resolution achieved with film in use at the facility, mA linearity, light versus x-ray field alignment, and patient exposures (glandular tissue dose) following the measurement protocol in NCRP Report No. 85 (using a breast phantom). This requirement shall include initial acceptance testing upon the x-ray system's installation prior to human use.

(b) The half-value layer (HVL) for film/screen mammography shall be at least 0.30 mm of aluminum (and shall not exceed 0.40 mm) as measured at 30 kVP. The half-value layer for xerography shall be at least 1.2 mm of aluminum as measured at 50 kVP. The HVL shall include the contribution to filtration made by the compression device.

(c) Exposure reproducibility: Manual techniques. See WAC 246-225-090.

(d) Exposure reproducibility: Photo-timed techniques. A breast phantom shall be used to obtain a series of four photo-timed radiographs (all selectable machine parameters shall be held constant). Optical density (O.D.) of a selected area on the image in the range of 1.0-2.0 O.D. shall be analyzed and the measurements for these films shall be within 0.10 O.D. of each other.

(e) Radiographic timers. See WAC 246-225-070.

(f) kVP accuracy: The kVP accuracy published by the x-ray machine manufacturer shall be maintained at the specified level. For determination of actual versus indicated kVP, the manufacturer's recommendations for testing shall be followed.

(g) mA linearity. See WAC 246-225-040(10).

(h) All special purpose x-ray machines designed solely for mammography and installed after January 1, 1992, shall be equipped with a milli-ampere-second (mAs) read-out device, registering after each phototimed exposure. Alternatively, a means of determining mAs after each exposure shall be provided.

(i) Beam limitation:

(i) Mammographic systems shall be provided with means to limit the useful beam such that the x-ray field at the plane of the image receptor does not extend beyond any edge of the image receptor at any designed SID except the edge of the image receptor designed to be adjacent to the chest wall where the x-ray field may not extend beyond such edge by more than two percent of the SID.

(ii) Beam limiting devices consisting of an assortment of fixed, removable cones sufficient to meet the requirement for each combination of image receptor size and SID for which the unit is designed shall have clear and permanent markings to indicate the image receptor size and SID for which it is designed.

(iii) When the beam limiting device and image receptor support device are designed to be used to immobilize the breast during a mammographic procedure and the SID may vary, the SID indication specified in WAC 246-225-060 (4)(c)(i) and (ii) shall be the maximum SID for which the beam limiting device or aperture is designed.

(iv) In the absence of a visually defined x-ray field each image receptor support shall have clear and permanent markings to indicate the maximum image receptor size for which it is designed.

(j) The combination of source-to-image distance, magnification, and focal spot size shall result in a radiographic resolution of at least 12 line pairs per millimeter. This standard applies to the routine, single emulsion film being used at the facility.

(k) The x-ray machine shall be equipped with a means of immobilizing and compressing the breast with a force of at least twenty-five pounds but no greater than fifty pounds.

(l) Dedicated mammographic x-ray units are exempted from the requirements of WAC 246-225-030 (5)(b)(i) provided that appropriate operator shielding is employed (as defined by NCRP Report 49).

(m) *Transmission limit for image receptor supporting devices used for mammography.* For x-ray systems manufactured after September 5, 1978, which are designed only for mammography, the transmission of the primary beam through any image receptor support provided with the system shall be limited such that the exposure 5 centimeters from any accessible surface beyond the plane of the image receptor supporting device does not exceed 0.1 milliroentgen (25.8 nC/kg) for each activation of the tube. Exposure shall be measured with the system operated at the minimum SID for which it is designed. Compliance shall be determined at the maximum rated peak tube potential for the system and at the maximum rated product of tube current and exposure time (mAs) for that peak tube potential. Compliance shall be determined by measurements averaged over an area of 100 square centimeters with no linear dimension greater than 20 centimeters.

(n) Maximum glandular doses. Glandular tissue dose for a cranio-caudal view of a 4.5 cm compressed breast using dose calculation methods found in NCRP Report # 85 shall not exceed the following:

Screen-film:

No grid	= 100 millirads/projection
Grid	= 300 millirads/projection
Xerox	= 400 millirads/projection

(5) A quality control program shall be written and implemented for all mammographic facilities. This shall include (but shall not be limited to) tests performed, testing frequency, testing protocol, control limits for each test, corrective actions taken, and equipment maintenance/service. Program requirements include:

(a) Daily tests:

Film processor control charts using a sensitometric/densitometric based measurement system shall be required for each day the mammographic machine is in operation. Single emulsion mammographic film shall be used for this evaluation.

Parameters in daily film processor tests shall include:

(i) Speed index:

Control limits \pm 0.15 optical density

(ii) Contrast index:

Control limits \pm 0.15 optical density

(iii) Base + fog:

Maximum density shall not exceed 0.20 optical density.

(iv) Solution temperatures:

Control limits \pm 1.0 F

(b) Monthly tests:

(i) Chemical replenishment rates.

(ii) Breast phantom imaging shall visualize a minimum of four fibers, three masses, and three speck groups, or the minimum acceptability standard of the American College of Radiology in its accreditation program, whichever is more restrictive.

(c) Quarterly tests:

(i) Film/screen contact for all cassettes.

(ii) Analyses of reject/repeat films.

(d) Yearly tests: See WAC 246-225-160 (4)(a) (Calibration).

(e) Cassette screens must be cleaned at least weekly.

(f) Records shall be maintained for quality control test equipment which requires calibration, and such calibrations shall be performed in accordance with recommendations of the manufacturer of the test equipment.

(g) Film processing. See WAC 246-225-150.

(6) Operator competency:

(a) A mammographic machine operator shall be licensed, certified, or registered by the department as either:

(i) A health care practitioner, licensed under Title 18 RCW, if performing mammography is within the person's authorized scope of practice; or

(ii) A diagnostic radiologic technologist certified in accordance with chapter 18.84 RCW; or

(iii) An x-ray technician registered in accordance with chapter 18.84 RCW, with two or more years' experience in performing mammography and satisfactory completion of two or more classes in mammography approved by the department.

(b) A mammographic machine operator shall complete at least one mammography class per calendar year; the class is subject to approval by the department.

(c) A mammographic machine operator shall meet the requirements of WAC 246-225-020 (2)(b) and 246-225-99920.

(7) Masking devices shall be made available to block extraneous light from the viewer's eye when the illuminated surface of the viewbox is larger than the image area.

(8) Additional requirement for mobile mammography services:

The daily film processor performance testing required in subsection (5)(a) of this section shall apply to all film processors used by the mobile service. No processor shall be used unless it meets the control limits specified by subsection (5)(a)(i) through (iv) of this section.

[Statutory Authority: RCW 70.98.050. 92-05-011 (Order 240), § 246-225-160, filed 2/7/92, effective 3/9/92.]

WAC 246-225-99910 Appendix I—Good practices.

The following are included in this handbook of regulations as suggested good practices and are not intended to be a regulation. The topics presented in these good practices may, however, become incorporated into the Washington Administrative Code at a future date.

(1) Exchange of information. Because patient exposure to diagnostic x-rays is the most predominant source of exposure to artificially produced ionizing radiation, radiographs should be exchanged among the practitioners of the various healing arts. Such exchange can only benefit

patients by reducing the unnecessary repeated exposures of patients who are referred to, or change to, other practitioners.

(2) Patient exposure guidelines. The following patient exposure values should be achievable with high speed image receptor systems, proper filtration, a reasonable radiographic density preference, proper choice of kVp, and proper film development. State radiation safety surveyors can provide registrants with results of measurements of patient exposure values upon request.

Dental Bitewing (D-Speed Film)*

KVP Range Utilized	Upper Limit of Skin Entrance Exposure, mR
50 - 64	350
65 - 70	300
71 - 80	250
81 - 90	200

Medical (400 Speed Imaging System)*

Exam*	Upper Limit of Skin Entrance Exposure, mR
Abdomen (AP)	300
Lumbar spine (AP)	350
Cervical spine (AP)	95
Full spine (AP)	150
Skull (LAT)	70
Chest (PA)	10 (Nongrid), 15 (Grid)

*On average-size adult patients

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-99910, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-99910, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-99001, filed 9/16/83; Order 1084, Appendix D (codified as WAC 402-28-99001), filed 1/14/76.]

WAC 246-225-99920 Appendix II—Determination of competency. The following are areas in which the department considers it important that an individual have expertise for the competent operation of x-ray equipment.

(1) *Familiarization with equipment.*

(a) Identification of controls.

(b) Function of each control.

(c) The use of a technique chart.

(2) *Radiation protection.*

(a) Collimation.

(b) Filtration.

(c) Gonad shielding and other patient protection devices.

(d) Restriction of x-ray tube radiation to the image receptor.

(e) Personnel protection.

(f) Grids.

(3) *Film processing.*

(a) Film speed as relates to patient exposure.

(b) Film processing parameters.

(c) Quality assurance and quality control.

(4) *Emergency procedures.*

Termination of exposure in event of automatic timing device failure.

(5) *Proper use of personnel dosimetry, if required.*

(6) *Understanding units of radiation.*

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-99920, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-99920, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-99003, filed 9/16/83; Order 1084, Appendix F (codified as WAC 402-28-99003), filed 1/14/76.]

WAC 246-225-99930 Appendix III—Information to be submitted by persons proposing to conduct healing arts screening using ionizing radiation. Persons requesting that the department approve a healing arts screening program shall submit the following information and evaluation:

(1) Name and address of the applicant and, where applicable, the names and addresses of agents within this state.

(2) Diseases or conditions and frequency for which the x-ray examinations are to be used.

(3) Description in detail of the x-ray examinations proposed in the screening program.

(4) Description of the population to be examined in the screening program, i.e., age, sex, physical condition, and other appropriate information.

(5) An evaluation of any known alternate methods not involving ionizing radiation which could achieve the goals of the screening program and why these methods are not used in preference to the x-ray examinations.

(6) An evaluation by a qualified expert of the x-ray system(s) to be used in the screening program. The evaluation by the qualified expert shall show that such system(s) satisfy all requirements of these regulations. The evaluation shall include a measurement of patient exposures from the x-ray examinations to be performed.

(7) A description of the diagnostic film quality control program.

(8) A copy of the technique chart for the x-ray examination procedures to be used.

(9) The qualifications of each individual who will be operating the x-ray system(s).

(10) The qualifications of the individual who will be supervising the operators of the x-ray system(s). The extent of supervision and the method of work performance evaluation shall be specified.

(11) The name and address of the individual who will interpret the radiograph(s).

(12) A description of the procedure to be used in advising the individuals screened and their private practitioners of the healing arts of the results of the screening procedure and any further medical needs indicated.

(13) A description of the procedures for the retention or disposition of the radiographs and other records pertaining to the x-ray examinations.

(14) An indication of the frequency of screening and the duration of the entire screening program.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-225-99930, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-225-99930, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-28-99004, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-28-99004, filed 12/8/80.]

Chapter 246-228 WAC

RADIATION PROTECTION—ANALYTICAL X-RAY EQUIPMENT

WAC

246-228-001	Purpose and scope.
246-228-010	Definitions.
246-228-020	Equipment requirements.
246-228-030	Facility requirements.
246-228-040	Operating requirements.
246-228-050	Personnel requirements.

WAC 246-228-001 Purpose and scope. This chapter provides special requirements for analytical x-ray equipment. The requirements of this chapter are in addition to, and not in substitution for, applicable requirements in other chapters of these regulations.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-228-001, filed 12/27/90, effective 1/31/91; Order 1084, § 402-40-010, filed 1/14/76.]

WAC 246-228-010 Definitions. (1) "Analytical x-ray equipment" means equipment used for x-ray diffraction or fluorescence analysis.

(2) "Analytical x-ray system" means a group of components utilizing x-rays to determine the elemental composition or to examine the microstructure of materials.

(3) "Fail-safe characteristics" mean a design feature which causes beam port shutters to close, or otherwise prevents emergence of the primary beam, upon the failure of a safety or warning device.

(4) "Local components" mean parts of an analytical x-ray system and include areas that are struck by x-rays such as radiation source housings, ports and shutter assemblies, collimators, sample holders, cameras, goniometers, detectors, and shielding, but do not include power supplies, transformers, amplifiers, readout devices, and control panels.

(5) "Normal operating procedures" mean step-by-step instructions necessary to accomplish the analysis. These procedures shall include sample insertion and manipulation, equipment alignment, routine maintenance by the registrant, and data recording procedures which are related to radiation safety.

(6) "Open-beam configuration" means a mode of operation of an analytical x-ray system in which an individual could accidentally place some part of their body into the primary beam during normal operation if no further safety devices are incorporated.

(7) "Primary beam" means ionizing radiation which passes through an aperture of the source housing via a direct path from the x-ray tube located in the radiation source housing.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-228-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-40-020, filed 12/8/80; Order 1084, § 402-40-020, filed 1/14/76.]

WAC 246-228-020 Equipment requirements. (1) *Safety device.* A device which prevents the entry of any portion of an individual's body into the primary x-ray beam path, or which causes the beam to be shut off upon entry into its path, shall be provided for all open-beam configura-

tions. A registrant or licensee may apply to the department for an exemption from the requirement of a safety device. Such application shall include:

(a) A description of the various safety devices that have been evaluated;

(b) The reason each of these devices cannot be used; and

(c) A description of the alternative methods that will be employed to minimize the possibility of an accidental exposure, including procedures to assure that operators and others in the area will be informed of the absence of safety devices.

(2) *Warning devices.* Open-beam configurations shall be provided with a readily discernible indication of:

(a) X-ray tube status (ON-OFF) located near the radiation source housing, if the primary beam is controlled in this manner and at or near the port and/or

(b) Shutter status (OPEN-CLOSED) located near each port on the radiation source housing, if the primary beam is controlled in this manner.

(c) Warning devices shall be labeled so that their purpose is easily identified and the devices shall be conspicuous at the beam port. On new equipment installed after January 1, 1976, warning devices shall have fail-safe characteristics.

(3) *Ports.* Unused ports on radiation source housings shall be secured in the closed position in a manner which will prevent casual opening. Such security requirement will be deemed met if the beam port cannot be opened without the use of tools not part of the closure for units installed after January 1, 1981.

(4) *Labeling.* All analytical x-ray equipment shall be labeled with a readily discernible sign or signs bearing the radiation symbol and the words:

(a) "CAUTION - HIGH INTENSITY X-RAY BEAM," or words having a similar intent, on the x-ray source housing; and

(b) "CAUTION RADIATION - THIS EQUIPMENT PRODUCES RADIATION WHEN ENERGIZED," or words having a similar intent, near any switch that energizes an x-ray tube if the radiation source is an x-ray tube; or

(c) "CAUTION - RADIOACTIVE MATERIAL," or words having a similar intent, on the source housing if the radiation source is a radionuclide.

(5) *Shutters.* On new equipment employing open-beam configurations installed after January 1, 1981, each port on the radiation source housing shall be equipped with a shutter that cannot be opened unless a collimator or a coupling has been connected to the port.

(6) *Warning lights.* An easily visible warning light labeled with the words "X-RAY ON," or words having a similar intent, shall be located:

(a) Near any switch that energizes an x-ray tube and near any x-ray port and shall be illuminated only when the tube is energized; or

(b) In the case of a radioactive source, near any switch that opens a housing shutter, and shall be illuminated only when the shutter is open.

(c) On equipment installed after January 1, 1981, warning lights shall have fail-safe characteristics.

(7) *Radiation source housing.* Each x-ray tube housing shall be so constructed that with all shutters closed the leakage radiation measured at a distance of 5 cm from its

surface is not capable of producing a dose equivalent in excess of 2.5 mrem in one hour at any specified tube rating. If radioactive sources are used, corresponding dose limits shall not exceed 2.5 mrem per hour.

(8) *Generator cabinet.* Each x-ray generator shall be supplied with a protective cabinet which limits leakage radiation measured at a distance of 5 cm from its surface such that it is not capable of producing a dose equivalent in excess of 0.25 mrem in one hour.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-228-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-40-030, filed 12/8/80; Order 1084, § 402-40-030, filed 1/14/76.]

WAC 246-228-030 Facility requirements. (1)

Radiation levels. The local components of an analytical x-ray system shall be located and arranged and shall include sufficient shielding or access control such that no radiation levels exist in any area surrounding the local component group which could result in a dose to an individual present therein in excess of the dose equivalent limits given in WAC 246-221-060 of these regulations. For systems utilizing x-ray tubes, these levels shall be met at any specified tube rating.

(2) *Surveys.* Radiation surveys, as required by WAC 246-221-110 of all analytical x-ray systems, sufficient to show compliance with WAC 246-228-030(1), shall be performed:

(a) Upon installation of the equipment, and at least once every twelve months thereafter;

(b) Following any change in the initial arrangement, number, or type of local components in the system;

(c) Following any maintenance requiring the disassembly or removal of a local component in the system;

(d) During the performance of maintenance and alignment procedures if the procedures require the presence of a primary x-ray beam when any local component in the system is disassembled or removed;

(e) Any time a visual inspection of the local components in the system reveals an abnormal condition; and

(f) Whenever personnel monitoring devices required in WAC 246-228-050(2) show a significant increase over the previous monitoring period or the readings are approaching 1/10 of the hands and forearm limit specified in WAC 246-221-010.

(g) Radiation survey measurements shall not be required if a registrant or licensee can demonstrate compliance to the satisfaction of the department with WAC 246-228-030(1) in some other manner.

(3) *Posting.* Each area or room containing analytical x-ray equipment shall be conspicuously posted with a sign or signs bearing the radiation symbol and the words "CAUTION - X-RAY EQUIPMENT," or words having a similar intent.

(4) *Documentation of instruction.* Each facility shall maintain written documentation showing that compliance with WAC 246-228-050 has been met, and shall make such documentation available to the department upon request.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-083 (Order 183), § 246-228-030, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-228-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050, 81-01-

011 (Order 1570), § 402-40-040, filed 12/8/80; Order 1084, § 402-40-040, filed 1/14/76.]

WAC 246-228-040 Operating requirements. (1)

Procedures. Routine operating procedures shall be written and available to all analytical x-ray equipment workers. No person shall be permitted to operate analytical x-ray equipment in any manner other than that specified in the procedures unless such person has obtained written approval of the radiation safety officer.

(2) *Bypassing.* No person shall bypass a safety device unless such person has obtained the written approval of the radiation safety officer. Such approval shall be for a specified period of time. When a safety device has been bypassed, a readily discernible sign bearing the words "SAFETY DEVICE NOT WORKING," or words having a similar intent, shall be placed on the radiation source housing. The requirements set forth in WAC 246-228-020(1) shall also be met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-228-040, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-228-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-40-050, filed 12/8/80; Order 1084, § 402-40-050, filed 1/14/76.]

WAC 246-228-050 Personnel requirements. (1)

Instruction. No person shall be permitted to operate or maintain analytical x-ray equipment unless such person has received instruction in and demonstrated competence as to:

- (a) Identification of radiation hazards associated with the use of the equipment;
- (b) Significance of the various radiation warning and safety devices incorporated into the equipment, or the reasons they have not been installed on certain pieces of equipment and the extra precautions required in such cases;
- (c) Proper operating procedures for the equipment;
- (d) Symptoms of an acute localized exposure; and
- (e) Proper procedures for reporting an actual or suspected exposure.

(2) *Personnel monitoring.* Finger or wrist dosimetric devices shall be provided to and shall be used by:

- (a) Analytical x-ray equipment workers using systems having an open-beam configuration and not equipped with a safety device; and
- (b) Personnel maintaining analytical x-ray equipment if the maintenance procedures require the presence of a primary x-ray beam when any local component in the analytical x-ray system is disassembled or removed.

(c) Reported dose values shall not be used for the purpose of determining compliance with WAC 246-221-010 of these regulations unless evaluated by a qualified expert.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-228-050, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-228-050, filed 12/27/90, effective 1/31/91; Order 1084, § 402-40-060, filed 1/14/76.]

Chapter 246-229 WAC

RADIATION PROTECTION—PARTICLE ACCELERATORS

WAC

246-229-001	Purpose and scope.
246-229-010	Registration requirements.
246-229-020	General requirements for the issuance of a registration for particle accelerators.
246-229-030	Human use of particle accelerators.
246-229-040	General provisions.
246-229-050	Limitations.
246-229-060	Shielding and safety design requirements.
246-229-070	Particle accelerator controls and interlock systems.
246-229-080	Warning devices.
246-229-090	Operating procedures.
246-229-100	Radiation monitoring requirements.
246-229-110	Ventilation systems.

WAC 246-229-001 Purpose and scope. (1) This chapter establishes procedures for the registration and the use of particle accelerators.

(2) In addition to the requirements of this chapter, all registrants are subject to the requirements of chapters 246-220, 246-224, 246-221, and 246-222 WAC. Registrants engaged in industrial radiographic operations are also subject to the requirements of chapter 246-243 WAC and registrants engaged in the healing arts are also subject to the requirements of chapter 246-225 WAC and/or chapter 246-240 WAC of these regulations. Registrants engaged in the production of radioactive material are also subject to the requirements of chapters 246-232 and 246-235 WAC.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-001, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-010, filed 12/8/80; Order 1084, § 402-44-010, filed 1/14/76.]

WAC 246-229-010 Registration requirements. No person shall receive, possess, use, transfer, own, or acquire a particle accelerator except as authorized in a registration issued pursuant to these regulations or as otherwise provided for in these regulations. The general procedures for registration of particle accelerator facilities are included in chapter 246-224 WAC of these regulations.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-010, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-010, filed 12/27/90, effective 1/31/91; Order 1084, § 402-44-020, filed 1/14/76.]

WAC 246-229-020 General requirements for the issuance of a registration for particle accelerators. (Refer to chapter 246-224 WAC.) In addition to the requirement of chapter 246-224 WAC a registration application for use of a particle accelerator will be approved only if the department determines that:

(1) The applicant is qualified by reason of training and experience to use the accelerator in question for the purpose requested in accordance with this chapter in such a manner as to minimize danger to public health and safety or property;

(2) The applicant's proposed equipment, facilities, operating and emergency procedures are adequate to protect

health and minimize danger to public health and safety or property;

(3) The issuance of the registration will not be inimical to the health and safety of the public, and the applicant satisfies any applicable special requirement in WAC 246-229-030;

(4) The applicant has appointed a qualified radiation safety officer;

(5) The applicant and/or the staff has substantial experience in the use of particle accelerators and training sufficient for the intended uses;

(6) The applicant has established a radiation safety committee to approve, in advance, proposals for uses of particle accelerators, whenever deemed necessary by the department; and

(7) The applicant has an adequate training program for particle accelerator operators.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-020, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-030, filed 12/8/80; Order 1084, § 402-44-030, filed 1/14/76.]

WAC 246-229-030 Human use of particle accelerators. In addition to the requirements set forth in chapter 246-224 WAC a certificate of registration for use of a particle accelerator in the healing arts will be issued only if:

(1) Whenever deemed necessary by the department, the applicant has appointed a medical committee of at least three members to evaluate all proposals for research, diagnostic, and therapeutic use of a particle accelerator. Membership of the committee should include physicians expert in internal medicine, hematology, therapeutic radiology, and a person experienced in depth dose calculations and protection against radiation;

(2) The individuals designated on the application as the users have substantial training and experience in deep therapy techniques or in the use of particle accelerators to treat humans; and

(3) The individual designated on the application as the user must be a physician.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-030, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-040, filed 12/8/80; Order 1084, § 402-44-040, filed 1/14/76.]

WAC 246-229-040 General provisions. (1) This section establishes radiation safety requirements for the use of particle accelerators. The provisions of this section are in addition to, and not in substitution for, other applicable provisions of the regulations.

(2) The registrant shall be responsible for assuring that all requirements of this chapter are met.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-050, filed 12/8/80; Order 1084, § 402-44-050, filed 1/14/76.]

WAC 246-229-050 Limitations. (1) No registrant shall permit any person to act as a particle accelerator operator until such person:

(a) Has been instructed in radiation safety and shall have demonstrated an understanding thereof;

(b) Has received copies of and instruction in this chapter and the applicable requirements of chapters 246-221 and 246-222 WAC, pertinent registration conditions and the registrant's operating and emergency procedures, and shall have demonstrated understanding thereof;

(c) Has demonstrated competence to use the particle accelerator, related equipment, and survey instruments which will be employed in the individual's assignment; and

(2) The registrant shall maintain records which demonstrate compliance with the requirements of WAC 246-229-050(1).

(3) Either the radiation safety committee or the radiation safety officer shall have the authority to terminate the operations at a particle accelerator facility if such action is deemed necessary to protect health and minimize danger to public health and safety or property.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-050, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-060, filed 12/8/80; Order 1084, § 402-44-060, filed 1/14/76.]

WAC 246-229-060 Shielding and safety design requirements. (1) A qualified expert, specifically accepted by the department, shall be consulted in the design of a particle accelerator installation and called upon to perform a radiation survey when the accelerator is first capable of producing radiation.

(2) Each particle accelerator installation shall be provided with such primary and/or secondary barriers as are necessary to assure compliance with WAC 246-221-010 and 246-221-060.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-060, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-070, filed 12/8/80; Order 1084, § 402-44-070, filed 1/14/76.]

WAC 246-229-070 Particle accelerator controls and interlock systems. (1) Instrumentation, readouts and controls on the particle accelerator control console shall be clearly identified and easily discernible.

(2) All entrances into a target room or other high radiation area shall be provided with interlocks that shut down the machine under conditions of barrier penetration.

(3) When a radiation safety interlock system has been tripped, it shall only be possible to resume operation of the accelerator by manually resetting controls at the position where the interlock has been tripped, and lastly at the main control console.

(4) Each safety interlock shall be on a circuit which shall allow its operation independently of all other safety interlocks.

(5) All safety interlocks shall be fail safe, i.e., designed so that any defect or component failure in the interlock system prevents operation of the accelerator.

(6) A "scram" button or other emergency power cutoff switch shall be located and easily identifiable in all high radiation areas. Such a cutoff switch shall include a manual reset so that the accelerator cannot be restarted from the accelerator control console without resetting the cutoff switch.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-080, filed 12/8/80; Order 1084, § 402-44-080, filed 1/14/76.]

WAC 246-229-080 Warning devices. (1) All locations designated as high radiation areas (except inside treatment rooms designed for human exposure) and entrances to all locations designated as high radiation areas shall be equipped with easily observable flashing or rotating warning lights that operate when, and only when, radiation is being produced.

(2) Except in facilities designed for human exposure, each high radiation area shall have an audible warning device which shall be activated for 15 seconds prior to the possible creation of such high radiation area. Such warning device shall be clearly discernible in all high radiation areas. The registrant shall instruct all personnel in the vicinity of the particle accelerator as to the meaning of this audible warning signal.

(3) Barriers, temporary or otherwise, and pathways leading to high radiation areas shall be identified in accordance with WAC 246-221-120.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-080, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-090, filed 12/8/80; Order 1084, § 402-44-090, filed 1/14/76.]

WAC 246-229-090 Operating procedures. (1) Particle accelerators, when not in operation, shall be secured to prevent unauthorized use.

(2) Only a switch on the accelerator control console shall be routinely used to turn the accelerator beam off and on. The safety interlock system shall not be used to turn off the accelerator beam except in an emergency, or as required in WAC 246-229-090(3).

(3) All safety and warning devices, including interlocks, shall be checked for proper operation at intervals not to exceed three months and after maintenance on such safety and warning devices. Results of such tests shall be maintained for inspection at the accelerator facility.

(4) Electrical circuit diagrams of the accelerator, and the associated interlock systems, shall be kept current and maintained for inspection by the department and available to the operator at each accelerator facility.

(5) If, for any reason, it is necessary to bypass a safety interlock or interlocks intentionally, such action shall be:

(a) Authorized by the radiation safety committee and/or radiation safety officer;

(b) Recorded in a permanent log and a notice posted at the accelerator control console; and

(c) Terminated as soon as possible.

(6) A copy of the current operating and the emergency procedures shall be maintained at the accelerator control panel.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-090, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-100, filed 12/8/80; Order 1084, § 402-44-100, filed 1/14/76.]

WAC 246-229-100 Radiation monitoring requirements. (1) There shall be available at each particle accelerator facility, appropriate portable monitoring equipment which is operable and has been calibrated for the appropriate radiations being produced at the facility. Such equipment shall be tested for proper operation daily and calibrated at intervals not to exceed six months, and after each servicing and repair.

(2) A radiation protection survey shall be performed and documented by a qualified expert specifically approved by the department when changes have been made in shielding, operation, equipment, or occupancy of adjacent areas.

(3) Except for facilities designed for human exposure, radiation levels in all high radiation areas shall be continuously monitored. The monitoring devices shall be electrically independent of the accelerator control and interlock systems and capable of providing a remote and local readout with visual and/or audible alarms at both the control panel and at entrance to high radiation areas, and other appropriate locations, so that people entering or present become aware of the existence of the hazard.

(4) All area monitors shall be calibrated at intervals not to exceed six months, and after each servicing and repair. Records of calibration shall be maintained by the facility for a minimum of two years.

(5) Whenever applicable, periodic surveys shall be made to determine the amount of airborne particulate radioactivity present in areas of airborne hazards.

(6) Whenever applicable, periodic smear surveys shall be made to determine the degree of contamination in target and other pertinent areas.

(7) All area surveys shall be made in accordance with the written procedures established by a qualified expert, or the radiation safety officer of the particle accelerator facility.

(8) Records of all radiation protection surveys, calibration results, instrumentation tests, and smear results shall be kept current and on file at each accelerator facility.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-110, filed 12/8/80; Order 1084, § 402-44-110, filed 1/14/76.]

WAC 246-229-110 Ventilation systems. (1) Means shall be provided to ensure that personnel are not exposed to airborne radioactive materials in excess of those limits specified in WAC 246-221-040, for restricted areas and WAC 246-221-070, for unrestricted areas.

(2) A registrant as required by WAC 246-221-070 shall not vent, release or otherwise discharge airborne radioactive material to an uncontrolled area which exceeds the limits specified in WAC 246-247-040 or 246-221-290 Appendix A

- Table II, except as authorized pursuant to WAC 246-221-180 or 246-221-070(2). For purposes of this paragraph, concentrations may be averaged over a period not greater than one year. Every reasonable effort should be made to maintain releases of radioactive material to uncontrolled areas, as far below these limits as practicable.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-083 (Order 183), § 246-229-110, filed 7/23/91, effective 8/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-229-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-44-120, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-44-120, filed 12/8/80; Order 1084, § 402-44-120, filed 1/14/76.]

Chapter 246-232 WAC

RADIOACTIVE MATERIAL—LICENSING APPLICABILITY

WAC

246-232-001	Purpose and scope.
246-232-010	Exemptions.
246-232-020	Types of licenses.
246-232-030	Prelicensing inspection.
246-232-040	Reciprocal recognition of licenses.
246-232-050	Terms and conditions of licenses.
246-232-060	Termination of licenses.
246-232-070	Modification and revocation of licenses.
246-232-080	Transfer of material.
246-232-090	Transportation.
246-232-120	Schedule B, exempt quantities of radioactive materials.
246-232-130	Schedule C, exempt concentrations.
246-232-140	Schedule D.
246-232-990	Fees.

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

246-232-100	Requirements for users of the Washington commercial low-level waste disposal site. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080 and chapter 70.121 RCW. 86-17-027 (Order 2406), § 402-19-530, filed 8/13/86. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-530, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-19-530, filed 12/8/80. Statutory Authority: RCW 70.98.080. 80-02-080 (Order 1481), § 402-19-530, filed 1/21/80.] Repealed by 91-15-112 (Order 184), filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 70.98.050 and 70.98.080.
246-232-110	Large volumes of naturally occurring material. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080 and chapter 70.121 RCW. 86-17-027 (Order 2406), § 402-19-540, filed 8/13/86.] Repealed by 91-15-112 (Order 184), filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 70.98.050 and 70.98.080.

WAC 246-232-001 Purpose and scope. (1) This chapter prescribes rules governing licensing of radioactive material. No person shall receive, possess, use, transfer, own or acquire radioactive material except as authorized in a specific or general license issued pursuant to chapters 246-233 or 246-235 WAC or as otherwise provided in this chapter.

(2) In addition to the requirements of this chapter, or chapters 246-233 or 246-235 WAC, all licensees are subject

to the requirements of chapters 246-220, 246-221, 246-222, 246-247, and 246-254 WAC. Licensees engaged in the practice of nuclear medicine are subject to the requirements of chapter 246-239 WAC, licensees engaged in industrial radiographic operations are subject to the requirements of chapter 246-243 WAC, licensees using sealed sources in the healing arts are subject to the requirements of chapter 246-240 WAC, licensees using radioactive material in well logging and subsurface tracer studies are subject to the requirements of chapter 246-244 WAC, licensees engaged in land disposal of radioactive waste are subject to the requirements of chapter 246-250 WAC, and licensees owning or operating uranium or thorium mills and associated mill tailings are subject to the requirements of chapter 246-252 WAC.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-001, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-010, filed 9/16/83; 79-12-073 (Order 1459), § 402-19-010, filed 11/30/79, effective 1/1/80. Formerly chapter 402-20 WAC.]

WAC 246-232-010 Exemptions. (1) *Source material.*

(a) Any person is exempt from this chapter and chapters 246-233 and 246-235 WAC to the extent that such person receives, possesses, uses, owns, or transfers source material in any chemical mixture, compound, solution or alloy in which the source material is by weight less than 1/20 of one percent (0.05 percent) of the mixture, compound, solution, or alloy.

(b) Any person is exempt from this chapter and chapters 246-233 and 246-235 WAC to the extent that such person receives, possesses, uses or transfers unrefined and unprocessed ore containing source material: *Provided*, That, except as authorized in a specific license, such person shall not refine or process such ore.

(c) Any person is exempt from this chapter and chapters 246-233 and 246-235 WAC to the extent that such person receives, possesses, uses or transfers:

(i) Any quantities of thorium contained in:

(A) Incandescent gas mantles;

(B) Vacuum tubes;

(C) Welding rods;

(D) Electric lamps for illuminating purposes provided that each lamp does not contain more than fifty milligrams of thorium;

(E) Germicidal lamps, sunlamps and lamps for outdoor or industrial lighting provided that each lamp does not contain more than two grams of thorium;

(F) Rare earth metals and compounds, mixtures, and products containing not more than 0.25 percent by weight thorium, uranium, or any combination of these; or

(G) Personnel neutron dosimeters, provided each dosimeter does not contain more than 50 milligrams of thorium;

(ii) Source material contained in the following products:

(A) Glazed ceramic tableware: *Provided*, That the glaze contains not more than twenty percent by weight source material; and

(B) Piezoelectric ceramic containing not more than two percent by weight source material;

(iii) Photographic film, negatives and prints containing uranium or thorium;

(iv) Any finished product or part fabricated of, or containing, tungsten-thorium or magnesium-thorium alloys: *Provided*, That the thorium content of the alloy does not exceed four percent by weight and that the exemption contained in this subparagraph shall not be deemed to authorize the chemical, physical or metallurgical treatment or processing of any such product or part;

(v) Depleted uranium contained in counterweights installed in aircraft, rockets, projectiles and missiles, or stored or handled in connection with installation or removal of such counterweights, provided that:

(A) The counterweights are manufactured in accordance with a specific license issued by the United States Nuclear Regulatory Commission authorizing distribution by the licensee pursuant to 10 CFR Part 40;

(B) Each counterweight has been impressed with the following legend clearly legible through any plating or other covering: "DEPLETED URANIUM"*;

(C) Each counterweight is durably and legibly labeled or marked with the identification of the manufacturer and the statement: "UNAUTHORIZED ALTERATIONS PROHIBITED"*; and

(D) The exemption contained in this subparagraph shall not be deemed to authorize the chemical, physical or metallurgical treatment or processing of any such counterweight other than repair or restoration of any plating or other covering;

*Note: The requirements specified in (c)(v)(B) and (C) of this subsection need not be met by counterweights manufactured prior to December 31, 1969: *Provided*, That such counterweights are impressed with the legend, "CAUTION - RADIOACTIVE MATERIAL - URANIUM," as previously required by the regulations.

(vi) Depleted uranium used as shielding constituting part of any shipping container which is conspicuously and legibly impressed with the legend "CAUTION - RADIOACTIVE SHIELDING - URANIUM" and the uranium metal is encased in mild steel or in an equally fire resistant metal of a minimum wall thickness of 3.2 millimeters.

(vii) Thorium contained in finished optical lenses: *Provided*, That each lens does not contain more than thirty percent by weight of thorium, and that the exemption contained in this subparagraph shall not be deemed to authorize either:

(A) The shaping, grinding or polishing of such lens or manufacturing processes other than the assembly of such lens into optical systems and devices without alteration of the lens; or

(B) The receipt, possession, use or transfer of thorium contained in contact lenses, or in spectacles, or in eyepieces in binoculars or other optical instruments;

(viii) Uranium contained in detector heads for use in fire detection units: *Provided*, That each detector head contains not more than 0.005 microcuries of uranium; or

(ix) Thorium contained in any finished aircraft engine part containing nickel-thoria alloy, provided that:

(A) The thorium is dispersed in the nickel-thoria alloy in the form of finely divided thoria (thorium dioxide); and

(B) The thorium content in the nickel-thoria alloy does not exceed four percent by weight.

(d) The exemptions in (c) of this subsection do not authorize the manufacture of any of the products described.

(2) *Radioactive material other than source material.*

(a) Exempt concentrations.

(i) Except as provided in (a)(ii) of this subsection any person is exempt from this chapter and chapters 246-233 and 246-235 WAC to the extent that such person receives, possesses, uses, transfers, owns or acquires products or materials containing radioactive material in concentrations not in excess of those listed in WAC 246-232-130, Schedule C.

(ii) No person may introduce radioactive material into a product or material, knowing or having reason to believe, that it will be transferred to persons exempt under (a)(i) of this subsection or equivalent regulations of the United States Nuclear Regulatory Commission, any agreement state or licensing state, except in accordance with a specific license issued pursuant to WAC 246-235-100(1) or the general license provided in WAC 246-232-040.

(b) Exempt quantities.

(i) Except as provided in (b)(ii) and (iii) of this subsection any person is exempt from these regulations to the extent that such person receives, possesses, uses, transfers, owns or acquires radioactive material in individual quantities each of which does not exceed the applicable quantity set forth in WAC 246-232-120, Schedule B.

(ii) This paragraph, WAC 246-232-010 (2)(b), does not authorize the production, packaging or repackaging of radioactive material for purposes of commercial distribution, or the incorporation of radioactive material into products intended for commercial distribution.

(iii) No person may, for purposes of commercial distribution, transfer radioactive material in the individual quantities set forth in WAC 246-232-120, Schedule B, knowing or having reason to believe that such quantities of radioactive material will be transferred to persons exempt under (b) of this subsection or equivalent regulations of the United States Nuclear Regulatory Commission or any agreement state or licensing state, except in accordance with a specific license issued by the United States Nuclear Regulatory Commission, pursuant to Section 32.18 of 10 CFR Part 32 or by the department pursuant to WAC 246-235-100(2) which license states that the radioactive material may be transferred by the licensee to persons exempt under (b) of this subsection or the equivalent regulations of the United States Nuclear Regulatory Commission or any agreement state or licensing state.

(c) Exempt items.

(i) Certain items containing radioactive material. Except for persons who apply radioactive material to, or persons who incorporate radioactive material into the following products, any person is exempt from these regulations to the extent that person receives, possesses, uses, transfers, owns or acquires the following products:*

*Note: Authority to transfer possession or control by the manufacturer, processor, or producer of any equipment, device, commodity, or other product containing source material or byproduct material whose subsequent possession, use, transfer and disposal by all other persons who are exempted from regulatory requirements may be obtained only from the United States Nuclear Regulatory Commission, Washington, D.C. 20555.

(A) Timepieces or hands or dials containing not more than the following specified quantities of radioactive material and not exceeding the following specified levels of radiation:

- 25 millicuries of tritium per timepiece;
- 5 millicuries of tritium per hand;
- 15 millicuries of tritium per dial (bezels when used shall be considered as part of the dial);
- 100 microcuries of promethium - 147 per watch or 200 microcuries of promethium - 147 per any other timepiece;
- 20 microcuries of promethium - 147 per watch hand or 40 microcuries of promethium - 147 per other timepiece hand;
- 60 microcuries of promethium - 147 per watch dial or 120 microcuries of promethium - 147 per other timepiece dial (bezels when used shall be considered as part of the dial);

The levels of radiation from hands and dials containing promethium - 147 will not exceed, when measured through 50 milligrams per square centimeter of absorber:

- For wrist watches, 0.1 millirad per hour at 1 centimeter from any surface;
- For pocket watches, 0.1 millirad per hour at 1 centimeter from any surface;
- For any other timepiece, 0.2 millirad per hour at 10 centimeters from any surface.
- One microcurie of radium-226 per timepiece in timepieces manufactured prior to the effective date of these regulations.

(B) Lock illuminators containing not more than 15 millicuries of tritium or not more than 2 millicuries of promethium - 147 installed in automobile locks. The levels of radiation from each lock illuminator containing promethium - 147 will not exceed 1 millirad per hour at 1 centimeter from any surface when measured through 50 milligrams per square centimeter of absorber.

(C) Precision balances containing not more than 1 millicurie of tritium per balance or not more than 0.5 millicurie of tritium per balance part.

(D) Automobile shift quadrants containing not more than 25 millicuries of tritium.

(E) Marine compasses containing not more than 750 millicuries of tritium gas and other marine navigational instruments containing not more than 250 millicuries of tritium gas.

(F) Thermostat dials and pointers containing not more than 25 millicuries of tritium per thermostat.

(G) Electron tubes: *Provided*, That each tube does not contain more than one of the following specified quantities of radioactive material:

- (aa) 150 millicuries of tritium per microwave receiver protector tube or 10 millicuries of tritium per any other electron tube;
- (bb) 1 microcurie of cobalt-60;
- (cc) 5 microcuries of nickel-63;
- (dd) 30 microcuries of krypton-85;
- (ee) 5 microcuries of cesium-137;
- (ff) 30 microcuries of promethium-147;
- (gg) 1 microcurie of radium-226;

And provided further, That the levels of radiation from each electron tube containing radioactive material does not exceed 1 millirad per hour at 1 centimeter from any surface when measured through 7 milligrams per square centimeter of absorber.*

*Note: For purposes of this subdivision, "electron tubes" include spark gap tubes, power tubes, gas tubes including glow lamps, receiving tubes, microwave tubes, indicator tubes, pick-up tubes, radiation detection tubes, and any other completely sealed tube that is designed to conduct or control electrical currents.

(H) Ionizing radiation measuring instruments containing, for purposes of internal calibration or standardization, a source of radioactive material not exceeding 0.05 microcuries of americium-241 or the applicable quantity set forth in WAC 246-232-120, Schedule B.

(I) Spark gap irradiators containing not more than 1 microcurie of cobalt-60 per spark gap irradiator for use in electrically ignited fuel oil burners having a firing rate of at least three gallons (11.4 liters) per hour.

(ii) Self-luminous products containing radioactive material(s).

(A) Tritium, krypton-85 or promethium-147. Except for persons who manufacture, process or produce self-luminous products containing tritium, krypton-85 or promethium-147, any person is exempt from these regulations to the extent that such person receives, possesses, uses, transfers, owns or acquires tritium, krypton-85 or promethium-147 in self-luminous products manufactured, processed, produced, imported or transferred in accordance with a specific license issued by the United States Nuclear Regulatory Commission pursuant to Section 32.22 of 10 CFR Part 32, which license authorizes the transfer of the product to persons who are exempt from regulatory requirements. The exemption in (c)(ii) of this subsection does not apply to tritium, krypton-85 or promethium-147 used in products for frivolous purposes or in toys or adornments.

(B) Radium-226. Any person is exempt from these regulations to the extent that such person receives, possesses, uses, transfers or owns articles containing less than 0.1 microcurie of radium-226 which were manufactured prior to October 1983.

(iii) Gas and aerosol detectors containing radioactive material.

(A) Except for persons who manufacture, process or produce gas and aerosol detectors containing radioactive material, any person is exempt from these regulations to the extent that such person receives, possesses, uses, transfers, owns or acquires radioactive material in gas and aerosol detectors designed to protect life or property from fires and airborne hazards; *Provided*, That detectors containing radioactive material shall have been manufactured, imported, or transferred in accordance with a specific license issued by the United States Nuclear Regulatory Commission* or an agreement state, pursuant to Section 32.26 of 10 CFR Part 32, or licensing state pursuant to WAC 246-235-100(3), which authorizes the transfer of the detectors to persons who are exempt from regulatory requirements.

*Note: Authority to transfer possession or control by the manufacturer, processor, or producer of any equipment, device, commodity, or other product containing source material or byproduct material whose subsequent possession, use, transfer and disposal by all other persons are exempted from regulatory requirements may

be obtained only from the United States Nuclear Regulatory Commission, Washington, D.C. 20555.

(B) Gas and aerosol detectors previously manufactured and distributed to general licensees in accordance with a specific license issued by an agreement state shall be considered exempt under (c)(iii)(A) of this subsection: *Provided*, That the device is labeled in accordance with the specific license authorizing distribution of the generally licensed device: *And provided further*, That they meet the requirements of WAC 246-235-100(3).

(C) Gas and aerosol detectors containing naturally occurring and accelerator-produced radioactive material (NARM) previously manufactured and distributed in accordance with a specific license issued by a licensing state shall be considered exempt under (c)(iii)(A) of this subsection: *Provided*, That the device is labeled in accordance with the specific license authorizing distribution of the generally licensed device, and provided further that they meet the requirements of WAC 246-235-100(3).

(iv) Resins containing scandium-46 and designed for sand consolidation in oil wells. Any person is exempt from these regulations to the extent that such person receives, possesses, uses, transfers, owns or acquires synthetic plastic resins containing scandium-46 which are designed for sand consolidation in oil wells. Such resins shall have been manufactured or imported in accordance with a specific license issued by the United States Nuclear Regulatory Commission or shall have been manufactured in accordance with the specifications contained in a specific license issued by the department or any agreement state to the manufacturer of such resins pursuant to licensing requirements equivalent to those in Sections 32.16 and 32.17 of 10 CFR Part 32 of the regulations of the United States Nuclear Regulatory Commission. This exemption does not authorize the manufacture of any resins containing scandium-46.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-010, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-19-190, filed 12/11/86; 83-19-050 (Order 2026), § 402-19-190, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-19-190, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-190, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-190.]

WAC 246-232-020 Types of licenses. Licenses for radioactive materials are of two types: General and specific.

(1) General licenses provided in chapter 246-233 WAC are effective without the filing of applications with the department or the issuance of licensing documents to the particular persons, although the filing of a certificate with the department may be required by the particular general license. The general licensee is subject to all other applicable portions of these regulations and any limitations of the general license.

(2) Specific licenses require the submission of an application to the department and the issuance of a licensing document by the department. The licensee is subject to all applicable portions of these regulations as well as any limitations specified in the licensing document. (See chapter 246-235 WAC.)

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-220, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-020.]

WAC 246-232-030 Prelicensing inspection. The department may verify information contained in applications and secure additional information deemed necessary to make a reasonable determination as to whether to issue a license and whether any special conditions should be attached thereto by visiting the facility or location where radioactive materials would be possessed or used, and by discussing details of the proposed possession or use of the radioactive materials with the applicant or representatives designated by the applicant. Such visits may be made by the department or its duly authorized representatives.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-240, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-200.]

WAC 246-232-040 Reciprocal recognition of licenses. (1) Subject to these regulations, any person who holds a specific license from the United States Nuclear Regulatory Commission or any agreement state or licensing state, and issued by the agency having jurisdiction where the licensee maintains an office for directing the licensed activity and at which radiation safety records are normally maintained, is hereby granted a general license to conduct the activities authorized in such licensing document within this state for a period not in excess of one hundred eighty days in that twelve month period which commences the date approval is granted, and the appropriate fee received, by the department provided that:

(a) The licensing document does not limit the activity authorized by such document to specified installations or locations;

(b) The out-of-state licensee notifies the department in writing and pays or has paid the appropriate fee (refer to chapter 246-254 WAC), at least three days prior to each entry to the state to engage in such activity. The written notification must be sent to the Radioactive Materials Section, Department of Health, Mailstop LE-13, Olympia, Washington 98504 and the fee should be sent to Washington State Department of Health, Revenue Accounting, P.O. Box 1099, Olympia, Washington 98504. Such notification shall indicate the location, period, and type of proposed possession and use within the state, and shall be accompanied by copies of the pertinent licensing documents. If, for a specific case, the three-day period would impose an undue hardship on the out-of-state licensee, the licensee may, upon telephone application to the department (206-753-4481), obtain permission to proceed sooner. The department may waive the requirement for filing additional written notifications during the remainder of the twelve months following the receipt of the initial notification from a person engaging in activities under the general license provided in this subsection;

(c) The out-of-state licensee complies with all applicable regulations of the department and with all the terms and conditions of the licensing document, except any such terms

and conditions which may be inconsistent with applicable regulations of the department;

(d) The out-of-state licensee supplies such other information as the department may request; and

(e) The out-of-state licensee shall not transfer or dispose of radioactive material possessed or used under the general license provided in this subsection except by transfer to a person:

(i) Specifically licensed by the department or by the United States Nuclear Regulatory Commission, an agreement state or a licensing state to receive such material; or

(ii) Exempt from the requirements for a license for such material under WAC 246-232-010 (2)(a).

(2) Notwithstanding the provisions of subsection (1) of this section, any person who holds a specific license issued by the United States Nuclear Regulatory Commission, an agreement state or a licensing state authorizing the holder to manufacture, transfer, install, or service a device described in WAC 246-233-020(4) within the areas subject to the jurisdiction of the licensing body is hereby granted a general license to install, transfer, demonstrate or service a device in this state provided that:

(a) Such person shall file a report with the department within thirty days after the end of each calendar quarter in which any device is transferred to or installed in this state. Each such report shall identify each general licensee to whom such device is transferred by name and address, the type of device transferred, and the quantity and type of radioactive material contained in the device;

(b) The device has been manufactured, labeled, installed, and serviced in accordance with applicable provisions of the specific license issued to such person by the United States Nuclear Regulatory Commission, an agreement state or a licensing state;

(c) Such person shall assure that any labels required to be affixed to the device under regulations of the authority which licensed manufacture of the device bear a statement that "Removal of this label is prohibited"; and

(d) The holder of the specific license shall furnish to each general licensee to whom such device is transferred or on whose premises such device is installed a copy of the general license contained in WAC 246-233-020(4).

(3) The department may withdraw, limit, or qualify its acceptance of any specific license or equivalent licensing document issued by another agency, or any product distributed pursuant to such licensing document, upon determining that such action is necessary in order to prevent undue hazard to public health and safety or property.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-19-250, filed 12/11/86; 83-19-050 (Order 2026), § 402-19-250, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-19-250, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-250, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-210.]

WAC 246-232-050 Terms and conditions of licenses.

(1) Each license issued pursuant to this part shall be subject to all the provisions of the act, as now or hereafter in effect, and to all rules, regulations, and orders of the department.

(2) No license issued or granted under chapters 246-233 and 246-235 WAC and no right to possess or utilize radioactive material granted by any license issued pursuant to chapters 246-233 and 246-235 WAC shall be transferred, assigned, or in any manner disposed, either voluntarily or involuntarily, directly or indirectly, through transfer of control of any license to any person unless the department shall, after securing full information find that the transfer is in accordance with the provisions of the act, and shall give its consent in writing.

(3) Each person licensed by the department pursuant to chapters 246-233 and 246-235 WAC shall confine use and possession of the material licensed to the locations and purposes authorized by the license.

(4) Approval of licensee's procedures by the department does not release the licensee from responsibility if adherence to these procedures results in undue exposure to individuals or loss of control of radioactive material.

(5) Each licensee shall notify the department of health, division of radiation protection, in writing, within five working days following the filing of a voluntary or involuntary petition for bankruptcy by or against:

(a) The licensee;

(b) A person controlling the licensee or listing the license or licensee as property of the estate; or

(c) An affiliate of the licensee.

(6) This notification must include:

(a) The bankruptcy court in which the petition for bankruptcy was filed;

(b) The date of the filing of the petition;

(c) A complete and detailed inventory of all radioactive material possessed under the license including nuclide, form, activity and planned disposition;

(d) An estimation of the type and quantities of radioactive material the licensee plans to continue to receive and/or use on a routine basis;

(e) A description of security and storage for the radioactive material currently possessed;

(f) A plan for radioactive waste disposal, the estimated completion date(s), and the cost;

(g) An evaluation of facility and equipment contamination, estimate of clean up costs, and a decontamination plan which includes a thorough description of how the clean up will be funded and how it will be accomplished;

(h) An organizational chart specifying sole owners, partnerships, or officers in the corporation who have legal and fiscal responsibilities for the licensee;

(i) A description of any other changes affecting the terms and conditions of the radioactive materials license.

(7) Each licensee shall notify the department within five working days if any items in subsection (6) of this section change during bankruptcy proceedings.

(8) The department will consider clean up costs as part of the licensee's administrative costs if decontamination is necessary to comply with these regulations;

(9) For the purposes of this section, "affiliate" means:

(a) A person as defined in WAC 246-220-010 that directly or indirectly owns, controls, or holds with power to vote, twenty percent or more of the outstanding voting securities of the licensee (unless that person holds such securities (i) in a fiduciary or agency capacity without sole discretionary power to vote such securities, or (ii) solely to

secure a debt, if such person has not in fact exercised such power to vote);

(b) A corporation, twenty percent or more of whose outstanding voting securities are directly or indirectly owned, controlled, or held with power to vote, by the licensee;

(c) A person whose business is operated under a lease or operating agreement by a licensee, or person substantially all of whose property is operated under an operating agreement with the licensee; or

(d) A person that operates the business or substantially all of the property of the licensee under a lease or operating agreement.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-232-050, filed 2/21/92, effective 3/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-19-300, filed 12/11/86; 83-19-050 (Order 2026), § 402-19-300, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-19-300, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-300, filed 11/30/79, effective 1/1/80.]

WAC 246-232-060 Termination of licenses. (1)

Each specific licensee shall immediately notify the department in writing when the licensee decides to permanently discontinue all activities involving materials authorized under the license and request termination of the license. This notification and request for termination of the license must include the reports and information specified in subsection (3) (c) and (d) of this section. The licensee is subject to the provisions of subsections (3) and (4) of this section, as applicable.

(2) No less than thirty days before the expiration date specified in a specific license, the licensee shall either:

(a) Submit an application for license renewal under WAC 246-235-050; or

(b) Notify the department in writing if the licensee decides not to renew the license.

(3) If a licensee does not submit an application for license renewal under WAC 246-235-050, the licensee shall on or before the expiration date specified in the license:

(a) Terminate use of byproduct material;

(b) Properly dispose of byproduct material;

(c) Submit a completed departmental form "Certificate of disposition of radioactive material"; and

(d) Submit a radiation survey report to confirm the absence of radioactive materials or establish the levels of radioactive contamination, unless the department determines a radiation survey report is not necessary.

(i) If no radioactive contamination attributable to activities conducted under the license is detected, the licensee shall submit a certification that no detectable radioactive contamination was found. If the information submitted under this paragraph and subsection (3) (c) and (d) of this section is adequate, the department will notify the licensee in writing that the license is terminated.

(ii) If detectable levels of radioactive contamination attributable to activities conducted under the license are found, the license continues in effect beyond the expiration date, if necessary, with respect to possession of residual radioactive material present as contamination until the department notifies the licensee in writing that the license is terminated. During this time, the licensee is subject to the

provisions of subsection (4) of this section. In addition to the information submitted under subsection (3)(c) and (d) of this section, the licensee shall submit a plan for decontamination, if necessary.

(4) Each licensee who possesses residual byproduct material under subsection (3)(d)(ii) of this section, following the expiration of the facility and/or equipment date specified in the license, shall:

(a) Be limited to actions, involving radioactive material related to decontamination and preparation for release for unrestricted use; and

(b) Continue to control entry to restricted areas until they are suitable for release for unrestricted use and the department notifies the licensee in writing that the license is terminated. The guidance contained in WAC 246-232-140, Schedule D, shall be used in making this determination.

(5) Each general licensee licensed under the provisions of WAC 246-233-020(8), shall immediately notify the department in writing when the licensee decides to discontinue all activities involving radioactive materials authorized under the general license. Such notification shall include a description of how the generally licensed material was disposed and the results of facility surveys, if applicable, to confirm the absence of radioactive materials.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-330, filed 9/16/83.]

WAC 246-232-070 Modification and revocation of licenses. (1)

The terms and conditions of all licenses shall be subject to amendment, revision, or modification, or the license may be suspended or revoked by reason of amendments to the act, or by reason of rules, regulations, and orders issued by the department.

(2) Any license may be revoked, suspended, or modified, in whole or in part, for any material false statement in the application or any statement of fact required under provisions of the act, or because of conditions revealed by such application or statement of fact or any report, record, or inspection or other means which would warrant the department to refuse to grant a license on an original application, or for violation of, or failure to observe any of the terms and conditions of the act, or of the license, or of any rule, regulation, or order of the department.

(3) Except in cases of willful disregard for the regulations or applicable license conditions or those in which the public health, interest, or safety requires otherwise, no license shall be modified, suspended, or revoked unless, prior to the institution of proceedings therefore, facts or conduct which may warrant such action shall have been called to the attention of the licensee in writing and the licensee shall have been accorded an opportunity to demonstrate or achieve compliance with all lawful requirements.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-19-350, filed 12/11/86; 83-19-050 (Order 2026), § 402-19-350, filed 9/16/83; 79-12-073 (Order 1459), § 402-19-350, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-180.]

WAC 246-232-080 Transfer of material. (1) No licensee shall transfer radioactive material except as authorized pursuant to this section.

(2) Except as otherwise provided in the license and subject to the provisions of this section, any licensee may transfer radioactive material:

(a) To the department. A licensee may transfer material to the department only after receiving prior approval from the department;

(b) To the United States Department of Energy;

(c) To any person exempt from the regulations in this part to the extent permitted under such exemption;

(d) To any person authorized to receive such material under terms of a general license or its equivalent, or a specific license or equivalent licensing document, issued by the department, the United States Nuclear Regulatory Commission, any agreement state or any licensing state, or to any person otherwise authorized to receive such material by the federal government or any agency thereof, the department, any agreement state or any licensing state; or

(e) As otherwise authorized by the department in writing.

(3) Before transferring radioactive material to a specific licensee of the department, the United States Nuclear Regulatory Commission, an agreement state or a licensing state, or to a general licensee who is required to register with the department, the United States Nuclear Regulatory Commission, an agreement state or a licensing state prior to receipt of the radioactive material, the licensee transferring the material shall verify that the transferee's license authorizes the receipt of the type, form, and quantity of radioactive material to be transferred.

(4) The following methods for the verification required by subsection (3) of this section are acceptable:

(a) The transferor may obtain for possession, and read, a current copy of the transferee's specific license or registration certificate;

(b) The transferor may obtain for possession a written certification from the transferee that the transferee is authorized by license or registration certificate to receive the type, form, and quantity of radioactive material to be transferred, specifying the license or registration certificate number, issuing agency, and expiration date;

(c) For emergency shipments the transferor may accept oral certification by the transferee that the transferee is authorized by license or registration certificate to receive the type, form, and quantity of radioactive material to be transferred, specifying the license or registration certificate number, issuing agency, and expiration date: *Provided*, That the oral certification is confirmed in writing within ten days;

(d) The transferor may obtain other sources of information compiled by a reporting service from official records of the department, the United States Nuclear Regulatory Commission, the licensing agency of an agreement state or a licensing state as to the identity of licensees and the scope and expiration dates of licenses and registration; or

(e) When none of the methods of verification described in subsection (4) of this section are readily available or when a transferor desires to verify that information received by one of such methods is correct or up-to-date, the transferor may obtain and record confirmation from the department, the United States Nuclear Regulatory Commission, or the

licensing agency of an agreement state or a licensing state that the transferee is licensed to receive the radioactive material.

(5) Preparation for shipment and transport of radioactive material shall be in accordance with the provisions of WAC 246-232-090.

(6) The requirements of subsection (4) of this section notwithstanding, no verification is required when returning used, unused or decayed sources of radiation to the original manufacturer, (e.g., industrial radiography sources, teletherapy sources, portablemoisture/density gauge sources, fixed gauge sources, and Mo-99/Tc-99m generators).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-080, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-19-400, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-19-400, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-400, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-170.]

WAC 246-232-090 Transportation. (1) *Transportation of radioactive material.* No person shall deliver radioactive material to a carrier for transport or transport radioactive material except as authorized in a general or specific license issued by the department or as exempted in subsection (2) of this section.

(2) *Exemptions.*

(a) Common and contract carriers, freight forwarders, and warehousemen who are subject to the rules and regulations of the United States Department of Transportation (49 CFR Parts 170 through 189) or the United States Postal Service (Domestic Mail Manual, Section 124.3 incorporated by reference, 39 CFR 111.11 (1974)) are exempt from this section to the extent that they transport or store radioactive material in the regular course of their carriage for another or storage incident thereto. Common and contract carriers who are not subject to the rules and regulations of the United States Department of Transportation or United States Postal Service are subject to subsection (1) of this section and other applicable sections of these regulations.

(b) Physicians, as defined in WAC 246-220-010, are exempt from the requirements of this section only to the extent that they transport radioactive material for emergency use in the practice of medicine.

(c) Specific licensees are exempt from this section to the extent that they deliver to a carrier for transport packages each of which contains no radioactive material having a specific activity in excess of 0.002 microcurie per gram.

(d) Any licensee who delivers radioactive material to a carrier for transport, where such transport is subject to the regulations of the United States Postal Service, is exempt from the provisions of subsection (1) of this section.

(3) *General licenses for carriers.*

(a) A general license is hereby issued to any common or contract carrier not exempted under subsection (2) of this section to receive, possess, transport and store radioactive material in the regular course of their carriage for another or storage incident thereto, provided the transportation and storage is in accordance with the applicable requirements of the regulations, appropriate to the mode of transport, of the United States Department of Transportation.

(b) A general license is hereby issued to any private carrier to transport radioactive material, provided the transportation is in accordance with the applicable requirements of the regulations, appropriate to the mode of transport, of the United States Department of Transportation insofar as such regulations relate to the loading and storage of packages, placarding of the transporting vehicle, shipping papers, and incident reporting.¹

(c) Persons who transport radioactive material pursuant to the general licenses in (a) or (b) of this subsection are exempt from the requirements of chapters 246-221 and 246-222 WAC of these regulations to the extent that they transport radioactive material.

(4) *Preparation of radioactive material for transport.* A general license is hereby issued to deliver radioactive material to a carrier² for transport provided that:

(a) The licensee complies with the applicable requirements of the regulations, appropriate to the mode of transport, of the United States Department of Transportation insofar as such regulations relate to the packaging of radioactive material, to shipping papers, and to the monitoring, marking and labeling of those packages.

(b) The licensee has established procedures for opening and closing packages in which radioactive material is transported to provide safety and to assure that, prior to the delivery to a carrier for transport, each package is properly closed for transport.

(c) Prior to delivery of a package to a carrier for transport, the licensee shall assure that any special instructions needed to safely open the package are sent to or have been made [made] available to the consignee.

(d) In addition to the requirements of the United States Department of Transportation, each package of Type A or Type B quantity radioactive material prepared for shipment must have the innermost container labeled as to the isotope, chemical form, number of curies or subunits thereof, and date of determination of activity and each innermost container shall be tested to assure that the container is properly sealed and that contamination which would cause undue hazard to public health and safety or property is not present prior to transportation. This requirement does not apply to properly packaged shipments of radioactive waste consigned to a commercial low level waste burial facility.

(5) *Transport of nuclear waste—Advance notification requirement.* Prior to the transport of any nuclear waste outside of the confines of the licensee's plant or other place of use or storage, or prior to the delivery of any nuclear waste to a carrier for transport, each licensee shall comply with the procedures in this subsection for advance notification to the governor of a state or the governor's designee for the transport of nuclear waste to, through, or across the boundary of the state.

(a) Where, when, and how advance notification must be sent. The notification required by subsection (5) of this section must be made in writing to the office of each appropriate governor or governor's designee and to the director of the appropriate Nuclear Regulatory Commission Regional Office. A notification delivered by mail must be postmarked at least seven days before the beginning of the seven-day period during which departure of the shipment is estimated to occur. A notification delivered by messenger must reach the office of the governor or of the governor's

designee at least four days before the beginning of the seven-day period during which departure of the shipment is estimated to occur. A list of the mailing addresses of the governors and governors' designees is available upon request from the Director, Office of State Programs, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555. A copy of the notification shall be retained by the licensee as a record for one year.

(b) Information to be furnished in advance notification of shipment. Each advance notification of shipments of nuclear waste must contain the following information:

(i) The name, address, and telephone number of the shipper, carrier, and receiver of the nuclear waste shipment;

(ii) A description of the nuclear waste contained in the shipment as required by the regulations of the U.S. Department of Transportation in 49 CFR §§ 172.202 and 172.203(d);

(iii) The point of origin of the shipment, and the seven-day period during which departure of the shipment is estimated to occur;

(iv) The seven-day period during which arrival of the shipment at state boundaries is estimated to occur;

(v) The destination of the shipment, and the seven-day period during which arrival of the shipment is estimated to occur; and

(vi) A point of contact with a telephone number for current shipment information.

(c) Revision notice. A licensee who finds that schedule information previously furnished to a governor or governor's designee in accordance with (a) and (b) of this subsection will not be met, shall telephone a responsible individual in the office of the governor of the state or of the governor's designee and inform that individual of the extent of the delay relative to the schedule originally reported in writing under the provisions of (a) and (b) of this subsection. The licensee shall maintain a record of the name of the individual contacted for one year.

(d) Cancellation notice. Each licensee who cancels a nuclear waste shipment for which advance notification has been sent as required by this subsection shall send a cancellation notice to the governor of each state or the governor's designee previously notified and to the director of the appropriate Nuclear Regulatory Commission Inspection and Enforcement Regional Office. The notice shall state that it is a cancellation and shall identify the advance notification which is being cancelled. A copy of the notice shall be retained by the licensee as a record for one year.

¹Any notification of incidents referred to in those requirements shall be filed with, or made to, the department.

²For the purpose of this regulation, licensees who transport their own licensed material as private carriers are considered to have delivered such material to a carrier for transport.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-090, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-500, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-19-500, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-19-500, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-220.]

WAC 246-232-120 Schedule B, exempt quantities of radioactive materials. (See also WAC 246-232-010 (2)(b).)

Radioactive Material	Microcuries		
Antimony-122 (Sb-122)	100	Iodine-123 (I-123)	100
Antimony-124 (Sb-124)	10	Iodine-125 (I-125)	1
Antimony-125 (Sb-125)	10	Iodine-126 (I-126)	1
Arsenic-73 (As-73)	100	Iodine-129 (I-129)	0.1
Arsenic-74 (As-74)	10	Iodine-131 (I-131)	1
Arsenic-76 (As-76)	10	Iodine-132 (I-132)	10
Arsenic-77 (As-77)	100	Iodine-133 (I-133)	1
Barium-131 (Ba-131)	10	Iodine-134 (I-134)	10
Barium-133 (Ba-133)	10	Iodine-135 (I-135)	10
Barium-140 (Ba-140)	10	Iridium-192 (Ir-192)	10
Bismuth-210 (Bi-210)	1	Iridium-194 (Ir-194)	100
Bromine-82 (Br-82)	10	Iron-52 (Fe-52)	10
Cadmium-109 (Cd-109)	10	Iron-55 (Fe-55)	100
Cadmium-115m (Cd-115m)	10	Iron-59 (Fe-59)	10
Cadmium-115 (Cd-115)	100	Krypton-85 (Kr-85)	100
Calcium-45 (Ca-45)	10	Krypton-87 (Kr-87)	10
Calcium-47 (Ca-47)	10	Lanthanum-140 (La-140)	10
Carbon-14 (C-14)	100	Lutetium-177 (Lu-177)	100
Cerium-141 (Ce-141)	100	Manganese-52 (Mn-52)	10
Cerium-143 (Ce-143)	100	Manganese-54 (Mn-54)	10
Cerium-144 (Ce-144)	1	Manganese-56 (Mn-56)	10
Cesium-129 (Cs-129)	100	Mercury-197m (Hg-197m)	100
Cesium-131 (Cs-131)	1,000	Mercury-197 (Hg-197)	100
Cesium-134m (Cs-134m)	100	Mercury-203 (Hg-203)	10
Cesium-134 (Cs-134)	1	Molybdenum-99 (Mo-99)	100
Cesium-135 (Cs-135)	10	Neodymium-147 (Nd-147)	100
Cesium-136 (Cs-136)	10	Neodymium-149 (Nd-149)	100
Cesium-137 (Cs-137)	10	Nickel-59 (Ni-59)	100
Chlorine-36 (Cl-36)	10	Nickel-63 (Ni-63)	10
Chlorine-38 (Cl-38)	10	Nickel-65 (Ni-65)	100
Chromium-51 (Cr-51)	1,000	Niobium-93m (Nb-93m)	10
Cobalt-57 (Co-57)	100	Niobium-95 (Nb-95)	10
Cobalt-58m (Co-58m)	10	Niobium-97 (Nb-97)	10
Cobalt-58 (Co-58)	10	Osmium-185 (Os-185)	10
Cobalt-60 (Co-60)	1	Osmium-191m (Os-191m)	100
Copper-64 (Cu-64)	100	Osmium-191 (Os-191)	100
Dysprosium-165 (Dy-165)	10	Osmium-193 (Os-193)	100
Dysprosium-166 (Dy-166)	100	Palladium-103 (Pd-103)	100
Erbium-169 (Er-169)	100	Palladium-109 (Pd-109)	100
Erbium-171 (Er-171)	100	Phosphorus-32 (P-32)	10
Europium-152 (Eu-152) 9.2h	100	Platinum-191 (Pt-191)	100
Europium-152 (Eu-152) 13 yr	1	Platinum-193m (Pt-193m)	100
Europium-154 (Eu-154)	1	Platinum-193 (Pt-193)	100
Europium-155 (Eu-155)	10	Platinum-197m (Pt-197m)	100
Fluorine-18 (F-18)	1,000	Platinum-197 (Pt-197)	100
Gadolinium-153 (Gd-153)	10	Polonium-210 (Po-210)	0.1
Gadolinium-159 (Gd-159)	100	Potassium-42 (K-42)	10
Gallium-67 (Ga-67)	100	Potassium-43 (K-43)	10
Gallium-72 (Ga-72)	10	Praseodymium-142 (Pr-142)	100
Germanium-71 (Ge-71)	100	Praseodymium-143 (Pr-143)	100
Gold-198 (Au-198)	100	Promethium-147 (Pm-147)	10
Gold-199 (Au-199)	100	Promethium-149 (Pm-149)	10
Hafnium-181 (Hf-181)	10	Radium-226 (Ra-226)	0.1
Holmium-166 (Ho-166)	100	Rhenium-186 (Re-186)	100
Hydrogen-3 (H-3)	1,000	Rhenium-188 (Re-188)	100
Indium-111 (In-111)	100	Rhodium-103m (Rh-103m)	100
Indium-113m (In-113m)	100	Rhodium-105 (Rh-105)	100
Indium-114m (In-114m)	10	Rubidium-81 (Rb-81)	10
Indium-115m (In-115m)	100	Rubidium-86 (Rb-86)	10
Indium-115 (In-115)	10	Rubidium-87 (Rb-87)	10
		Ruthenium-97 (Ru-97)	100
		Ruthenium-103 (Ru-103)	10

Ruthenium-105 (Ru-105)	10
Ruthenium-106 (Ru-106)	1
Samarium-151 (Sm-151)	10
Samarium-153 (Sm-153)	100
Scandium-46 (Sc-46)	10
Scandium-47 (Sc-47)	100
Scandium-48 (Sc-48)	10
Selenium-75 (Se-75)	10
Silicon-31 (Si-31)	100
Silver-105 (Ag-105)	10
Silver-110m (Ag-110m)	1
Silver-111 (Ag-111)	100
Sodium-22 (Na-22)	10
Sodium-24 (Na-24)	10
Strontium-85 (Sr-85)	10
Strontium-89 (Sr-89)	1
Strontium-90 (Sr-90)	0.1
Strontium-91 (Sr-91)	10
Strontium-92 (Sr-92)	10
Sulphur-35 (S-35)	100
Tantalum-182 (Ta-182)	10
Technetium-96 (Tc-96)	10
Technetium-97m (Tc-97m)	100
Technetium-97 (Tc-97)	100
Technetium-99m (Tc-99m)	100
Technetium-99 (Tc-99)	10
Tellurium-125m (Te-125m)	10
Tellurium-127m (Te-127m)	10
Tellurium-127 (Te-127)	100
Tellurium-129m (Te-129m)	10
Tellurium-129 (Te-129)	100
Tellurium-131m (Te-131m)	10
Tellurium-132 (Te-132)	10
Terbium-160 (Tb-160)	10
Thallium-200 (Tl-200)	100
Thallium-201 (Tl-201)	100
Thallium-202 (Tl-202)	100
Thallium-204 (Tl-204)	10
Thulium-170 (Tm-170)	10
Thulium-171 (Tm-171)	10
Tin-113 (Sn-113)	10
Tin-125 (Sn-125)	10
Tungsten-181 (W-181)	10
Tungsten-185 (W-185)	10
Tungsten-187 (W-187)	100
Vanadium-48 (V-48)	10
Xenon-131m (Xe-131m)	1,000
Xenon-133 (Xe-133)	100
Xenon-135 (Xe-135)	100
Ytterbium-169 (Yb-169)	10
Ytterbium-175 (Yb-175)	100
Yttrium-87 (Y-87)	10
Yttrium-90 (Y-90)	10
Yttrium-91 (Y-91)	10
Yttrium-92 (Y-92)	100
Yttrium-93 (Y-93)	100
Zinc-65 (Zn-65)	10
Zinc-69m (Zn-69m)	100
Zinc-69 (Zn-69)	1,000

Zirconium-93 (Zr-93)	10
Zirconium-95 (Zr-95)	10
Zirconium-97 (Zr-97)	10

Any radioactive material not listed above other than alpha emitting radioactive material 0.1

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-232-120, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-19-550, filed 9/16/83; 79-12-073 (Order 1459), § 402-19-550, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-240.]

WAC 246-232-130 Schedule C, exempt concentrations. (See WAC 246-232-010 (2)(a).)

Element (atomic number)	Isotope	Column I Gas concentration $\mu\text{Ci}/\text{ml}^1$	Column II Liquid and solid concentration $\mu\text{Ci}/\text{ml}^2$
Antimony (51)	Sb-122		3×10^{-4}
	Sb-124		2×10^{-4}
	Sb-125		1×10^{-3}
Argon (18)	Ar-37	1×10^{-3}	
	Ar-41	4×10^{-7}	
Arsenic (33)	As-73		5×10^{-3}
	As-74		5×10^{-4}
	As-76		2×10^{-4}
	As-77		8×10^{-4}
Barium (56)	Ba-131		2×10^{-3}
	Ba-140		3×10^{-4}
	Be-7		2×10^{-2}
Beryllium (4)	Be-7		2×10^{-2}
Bismuth (83)	Bi-206		4×10^{-4}
Bromine (35)	Br-82	4×10^{-7}	3×10^{-3}
	Cd-109		2×10^{-3}
Cadmium (48)	Cd-115m		3×10^{-4}
	Cd-115		3×10^{-4}
	Ca-45		9×10^{-5}
	Ca-47		5×10^{-4}
Calcium (20)	Ca-45		9×10^{-5}
	Ca-47		5×10^{-4}
Carbon (6)	C-14	1×10^{-6}	8×10^{-3}
	Ce-141		9×10^{-4}
Cerium (58)	Ce-143		4×10^{-4}
	Ce-144		1×10^{-4}
	Cs-131		2×10^{-2}
Cesium (55)	Cs-131		2×10^{-2}
	Cs-134m		6×10^{-2}
	Cs-134		9×10^{-5}
Chlorine (17)	Cl-38	9×10^{-7}	4×10^{-3}
	Cr-51		2×10^{-2}
Chromium (24)	Cr-51		2×10^{-2}
	Co-57		5×10^{-3}
Cobalt (27)	Co-57		5×10^{-3}
	Co-58		1×10^{-3}
	Co-60		5×10^{-4}
	Cu-64		3×10^{-3}
Copper (29)	Cu-64		3×10^{-3}
	Dy-165		4×10^{-3}
Dysprosium (66)	Dy-165		4×10^{-3}
	Dy-166		4×10^{-4}
Erbium (68)	Er-169		9×10^{-4}
	Er-171		1×10^{-3}
Europium (63)	Eu-152		6×10^{-4}
	Eu-155 (9.2 h)		2×10^{-3}
	Eu-155		2×10^{-3}
Fluorine (9)	F-18	2×10^{-6}	8×10^{-3}
	Gd-153		2×10^{-3}
Gadolinium (64)	Gd-153		2×10^{-3}
	Gd-159		8×10^{-4}
Gallium (31)	Ga-72		4×10^{-4}
	Ge-71		2×10^{-2}
Germanium (32)	Ge-71		2×10^{-2}
	Gold (79)	Au-196	2×10^{-3}
Gold (79)	Au-196		2×10^{-3}
	Au-198		5×10^{-4}
	Au-199		2×10^{-3}
	Hf-181		7×10^{-4}
Hafnium (72)	Hf-181		7×10^{-4}
	Hydrogen (1)	H-3	3×10^{-2}
Indium (49)	In-113m		1×10^{-2}
	In-114m		2×10^{-4}
Iodine (53)	I-125	3×10^{-9}	2×10^{-5}
	I-126	3×10^{-9}	2×10^{-5}
	I-131	3×10^{-9}	2×10^{-5}
	I-132	8×10^{-8}	6×10^{-4}
	I-133	1×10^{-8}	7×10^{-5}
	I-134	2×10^{-7}	1×10^{-3}

Iridium (77)	Ir-190		2x10 ⁻³	Tungsten		
	Ir-192		4x10 ⁻⁴	(Wolfram) (74)	W-181	4x10 ⁻³
	Ir-194		3x10 ⁻⁴		W-187	7x10 ⁻⁴
Iron (26)	Fe-55		8x10 ⁻³	Vanadium (23)	V-48	3x10 ⁻⁴
	Fe-59		6x10 ⁻⁴	Xenon (54)	Xe-131m	4x10 ⁻⁶
Krypton (36)	Kr-85m	1x10 ⁻⁶			Xe-133	3x10 ⁻⁶
	Kr-85		3x10 ⁻⁶		Xe-135	1x10 ⁻⁶
Lanthanum (57)	La-140		2x10 ⁻⁴	Ytterbium (70)	Yb-175	1x10 ⁻³
Lead (82)	Pb-203		4x10 ⁻³	Yttrium (39)	Y-90	2x10 ⁻⁴
Lutetium (71)	Lu-177		1x10 ⁻³		Y-91m	3x10 ⁻²
Manganese (25)	Mn-52		3x10 ⁻⁴		Y-91	3x10 ⁻⁴
	Mn-54		1x10 ⁻³		Y-92	6x10 ⁻⁴
	Mn-56		1x10 ⁻³		Y-93	3x10 ⁻⁴
Mercury (80)	Hg-197m		2x10 ⁻³	Zinc (30)	Zn-65	1x10 ⁻³
	Hg-197		3x10 ⁻³		Zn-69m	7x10 ⁻⁴
	Hg-203		2x10 ⁻⁴		Zn-69	2x10 ⁻²
Molybdenum (42)	Mo-99		2x10 ⁻³	Zirconium (40)	Zr-95	6x10 ⁻⁴
Neodymium (60)	Nd-147		6x10 ⁻⁴		Zr-97	2x10 ⁻⁴
	Nd-149		3x10 ⁻³			
Nickel (28)	Ni-65		1x10 ⁻³	Beta and/or gamma emitting		
Niobium				radioactive material not		
(Columbium)(41)	Nb-95		1x10 ⁻³	listed above with half-life		
	Nb-97		9x10 ⁻³	less than 3 years	1x10 ⁻¹⁰	1x10 ⁻⁶
Osmium (76)	Os-185		7x10 ⁻⁴			
	Os-191m		3x10 ⁻²			
	Os-191		2x10 ⁻³			
	Os-193		6x10 ⁻⁴			
Palladium (46)	Pd-103		3x10 ⁻³	Notes:		
	Pd-109		9x10 ⁻⁴	1 Values are given in Column I only for those materials normally used		
Phosphorus (15)	P-32		2x10 ⁻⁴	as gases		
Platinum (78)	Pt-191		1x10 ⁻³	2 μCi/gm for solids		
	Pt-193m		1x10 ⁻²	Note 1: Many radioisotopes disintegrate into isotopes which are also		
	Pt-197m		1x10 ⁻²	radioactive. In expressing the concentrations in Schedule C the		
	Pt-197		1x10 ⁻³	activity stated is that of the parent isotope and takes into		
Potassium (19)	K-42		3x10 ⁻³	account the daughters.		
Praseodymium (59)	Pr-142		3x10 ⁻⁴	Note 2: For purposes of WAC 246-232-010(2) where there is involved		
	Pr-143		5x10 ⁻⁴	a combination of isotopes, the limit for the combination should		
Promethium (61)	Pm-147		2x10 ⁻³	be derived as follows: Determine for each isotope in the		
	Pm-149		4x10 ⁻⁴	product the ratio between the concentration present in the		
Radium (88)	Ra-226		1x10 ⁻⁷	product and the exempt concentration established in Schedule C		
	Ra-228		3x10 ⁻⁷	for the specific isotope when not in combination. The sum of		
Rhenium (75)	Re-183		6x10 ⁻³	such ratios may not exceed "1" (i.e., unity).		
	Re-186		9x10 ⁻⁴	Example:		
	Re-188		6x10 ⁻⁴			
Rhodium (45)	Rh-103m		1x10 ⁻¹	Concentration of Isotope A in Product		
	Rh-105		1x10 ⁻³	-----		
Rubidium	Rb-86		7x10 ⁻⁴	Exempt concentration of Isotope A		
Ruthenium (44)	Ru-97		4x10 ⁻³	-----		
	Ru-103		8x10 ⁻⁴	+		
	Ru-105		1x10 ⁻³	Concentration of Isotope B in Product		
	Ru-106		1x10 ⁻⁴	-----		
Samarium (62)	Sm-153		8x10 ⁻⁴	Exempt concentration of Isotope B		
Scandium (21)	Sc-46		4x10 ⁻⁴	-----		
	Sc-47		9x10 ⁻⁴	≤ 1		
	Sc-48		3x10 ⁻⁴	Note 3: For the purpose of determining concentration in a product or		
Selenium (34)	Se-75		3x10 ⁻³	device, the total quantity of radioactive material present is		
Silicon (14)	Si-31		9x10 ⁻³	divided by only that weight or volume of the discrete part or		
Silver (47)	Ag-105		1x10 ⁻³	component throughout which the radioactive material is relative-		
	Ag-110m		3x10 ⁻⁴	ly uniformly distributed. If the weight or volume of this part or		
	Ag-111		4x10 ⁻⁴	component cannot be determined then the product or device		
Sodium (11)	Na-24		2x10 ⁻³	should be evaluated on the basis of the total quantity of		
Strontium (38)	Sr-85		1x10 ⁻³	radioactive material present.		
	Sr-89		1x10 ⁻⁴	[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order		
	Sr-91		7x10 ⁻⁴	184), § 246-232-130, filed 7/24/91, effective 8/24/91. Statutory Authority:		
	Sr-92		7x10 ⁻⁴	RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-232-130, filed		
Sulfur (16)	S-35	9x10 ⁻⁸	6x10 ⁻⁴	12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-		
Tantalum (73)	Ta-182		4x10 ⁻⁴	031 (Order 2450), § 402-19-580, filed 12/11/86; 83-19-050 (Order 2026),		
Technetium (43)	Tc-96m		1x10 ⁻¹	§ 402-19-580, filed 9/16/83; 79-12-073 (Order 1459), § 402-19-580, filed		
	Tc-96		1x10 ⁻³	11/30/79, effective 1/1/80. Formerly WAC 402-20-250.]		
Tellurium (52)	Te-125m		2x10 ⁻³			
	Te-127m		6x10 ⁻⁴			
	Te-127		3x10 ⁻³			
	Te-129m		3x10 ⁻⁴			
	Te-131m		6x10 ⁻⁴			
	Te-132		3x10 ⁻⁴			
Terbium (65)	Tb-160		4x10 ⁻⁴			
Thallium (81)	Tl-200		4x10 ⁻³			
	Tl-201		3x10 ⁻³			
	Tl-202		1x10 ⁻³			
	Tl-204		1x10 ⁻³			
Thulium (69)	Tm-170		5x10 ⁻⁴			
	Tm-171		5x10 ⁻³			
Tin (50)	Sn-113		9x10 ⁻⁴			
	Sn-125		2x10 ⁻⁴			

WAC 246-232-140 Schedule D.

ACCEPTABLE SURFACE CONTAMINATION LEVELS

NUCLIDES A	AVERAGE B C F	MAXIMUM B D F	REMOVABLE B E F WIPE LIMITS
U-nat, U-235, U-238, and associated decay products	5,000 dpm α/100 cm ²	15,000 dpm α/100 cm ²	1,000 dpm α/100 cm ²
Transuranics, Ra-226, Ra-228, Th-230, Th-228, Pa-231, Ac-227, I-125, I-129	100 dpm/100 cm ²	300 dpm/100 cm ²	20 dpm/100 cm ²
Th-nat, Th-232, Sr-90, Ra-223, Ra-224, U-232, I-126, I-131, I-133	1000 dpm/100 cm ²	3000 dpm/100 cm ²	200 dpm/100 cm ²
Beta-gamma emitters (nuclides with decay modes other than alpha emission or spontaneous fission) except SR-90 and others noted above	5000 dpm βγ/100 cm ²	15,000 dpm βγ/100 cm ²	1000 dpm βγ/100 cm ²

A Where surface contamination by both alpha- and beta-gamma-emitting nuclides exists, the limits established for alpha- and beta-gamma-emitting nuclides should apply independently.

B As used in this table, dpm (disintegrations per minute) means the rate of emission by radioactive material as determined by correcting the counts per minute observed by an appropriate detector for background, efficiency, and geometric factors associated with the instrumentation.

C Measurements of average contaminant should not be averaged over more than 1 square meter. For objects of less surface area, the average should be derived for each such object.

D The maximum contamination level applies to an area of not more than 100 cm².

E The amount of removable radioactive material per 100 cm² of surface area should be determined by wiping that area with dry filter or soft absorbent paper, applying moderate pressure, and assessing the amount of radioactive material on the wipe with an appropriate instrument of known efficiency. When removable contamination on objects of less surface area is determined, the pertinent levels should be reduced proportionally and the entire surface should be wiped.

F The average and maximum radiation levels associated with surface contamination resulting from beta-gamma emitters should not exceed 0.2 mrad/hr at 1 cm and 1.0 mrad/hr at 1 cm, respectively, measured through not more than 7 milligrams per square centimeter of total absorber.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-232-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-19-590, filed 12/11/86; 83-19-050 (Order 2026), § 402-19-590, filed 9/16/83.]

WAC 246-232-990 Fees. Fees are required from all applicants, licensees, or registrants. Chapter 246-254 WAC specifies fees for users of radiation subject to regulation under chapters 246-220 through 246-255 WAC.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-232-990, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-232-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 83-19-050 (Order 2026), § 402-19-370, filed 9/16/83; 79-12-073 (Order 1459), § 402-19-370, filed 11/30/79, effective 1/1/80.]

**Chapter 246-233 WAC
RADIOACTIVE MATERIALS—GENERAL
LICENSES**

WAC

246-233-001	Purpose and scope.
246-233-010	General licenses—Source material.
246-233-020	General licenses—Radioactive material other than source material.

WAC 246-233-001 Purpose and scope. This chapter establishes general licenses for the possession and use of radioactive material contained in certain items and a general license for ownership of radioactive material. Chapter 246-232 WAC also contains provisions applicable to the subject matter of this part.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-233-001, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-233-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 79-12-073 (Order 1459), § 402-21-010, filed 11/30/79, effective 1/1/80. Formerly chapter 402-20 WAC.]

WAC 246-233-010 General licenses—Source material. (1) A general license is hereby issued authorizing use, possession, and transfer of not more than fifteen pounds of source material at any one time by persons in the following categories:

- (a) Pharmacists using the source material solely for the preparation of medicinal compounds;
- (b) Physicians using the source material for medicinal purposes;
- (c) Persons receiving possession of source material from pharmacists and physicians in the form of medicinals or drugs;
- (d) Commercial and industrial firms, and research, educational, and medical institutions, and state and local government agencies for research, development, educational, operational, or commercial purposes: *And provided*, That no such person shall, pursuant to this general license, receive

more than a total of one hundred fifty pounds of source material in any one calendar year.

(2) Persons who receive, possess, use, or transfer source material pursuant to the general license issued in subsection (1) of this section are exempt from the provisions of chapters 246-221 and 246-222 WAC to the extent that such receipt, possession, use, or transfer is within the terms of such general license: *Provided, however*, That this exemption shall not be deemed to apply to any such person who is also in possession of source material under a specific license issued pursuant to chapter 246-235 WAC.

(3) A general license is hereby issued authorizing the receipt of title to source material without regard to quantity. This general license does not authorize any person to receive, possess, use, or transfer source material.

(4) Depleted uranium in industrial products and devices.

(a) A general license is hereby issued to receive, acquire, possess, use, or transfer, in accordance with the provisions of paragraphs (4)(b), (c), (d), and (e) of this section, depleted uranium contained in industrial products or devices for the purpose of providing a concentrated mass in a small volume of the product or device.

(b) The general license in paragraph (4)(a) of this section applies only to industrial products or devices which have been manufactured either in accordance with a specific license issued to the manufacturer of the products or devices pursuant to WAC 246-235-100(13) or in accordance with a specific license issued to the manufacturer by the United States Nuclear Regulatory Commission or an agreement state which authorizes manufacture of the products or devices for distribution to persons generally licensed by the United States Nuclear Regulatory Commission or an agreement state.

(c)(i) Persons who receive, acquire, possess, or use depleted uranium pursuant to the general license established by paragraph (4)(a) of this section shall file department form RHF-20 "Registration certificate - Use of depleted uranium under general license," with the department. The form shall be submitted within thirty days after the first receipt or acquisition of such depleted uranium. The registrant shall furnish on department form RHF-20 the following information and such other information as may be required by that form:

(A) Name and address of the registrant;

(B) A statement that the registrant has developed and will maintain procedures designed to establish physical control over the depleted uranium described in paragraph (4)(a) of this section and designed to prevent transfer of such depleted uranium in any form, including metal scrap, to persons not authorized to receive the depleted uranium; and

(C) Name and/or title, address, and telephone number of the individual duly authorized to act for and on behalf of the registrant in supervising the procedures identified in item (4)(c)(i)(B) of this section.

(ii) The registrant possessing or using depleted uranium under the general license established by paragraph (4)(a) of this section shall report in writing to the department any changes in information previously furnished on the "Registration certificate - Use of depleted uranium under general license." The report shall be submitted within thirty days after the effective date of such change.

(d) A person who receives, acquires, possesses, or uses depleted uranium pursuant to the general license established by paragraph (4)(a) of this section:

(i) Shall not introduce such depleted uranium, in any form, into a chemical, physical, or metallurgical treatment or process, except a treatment or process for repair or restoration of any plating or other covering of the depleted uranium.

(ii) Shall not abandon such depleted uranium.

(iii) Shall transfer or dispose of such depleted uranium only by transfer in accordance with the provision of chapter 246-232 WAC. In the case where the transferee receives the depleted uranium pursuant to the general license established by paragraph (4)(a) of this section the transferor shall furnish the transferee a copy of this regulation and a copy of department form RHF-20.

In the case where the transferee receives the depleted uranium pursuant to a general license contained in the United States Nuclear Regulatory Commission's or agreement state's regulation equivalent to paragraph (4)(a) of this section the transferor shall furnish the transferee a copy of this regulation and a copy of department form RHF-20 accompanied by a note explaining that use of the product or device is regulated by the United States Nuclear Regulatory Commission or agreement state under requirements substantially the same as those in this regulation.

(iv) Shall maintain and make available to the department upon request the name and address of the person receiving the depleted uranium pursuant to such transfer.

(v) Shall not export such depleted uranium except in accordance with a license issued by the United States Nuclear Regulatory Commission pursuant to 10 CFR Part 110.

(e) Any person receiving, acquiring, possessing, using, or transferring depleted uranium pursuant to the general license established by paragraph (4)(a) of this section is exempt from the requirements of chapters 246-221 and 246-222 WAC of these regulations with respect to the depleted uranium covered by that general license.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-233-010, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-233-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050, 81-01-011 (Order 1570), § 402-21-030, filed 12/8/80. Statutory Authority: RCW 70.98.080, 79-12-073 (Order 1459), § 402-21-030, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-030.]

WAC 246-233-020 General licenses*—Radioactive material other than source material.

*Note: Different general licenses are issued in this section, each of which has its own specific conditions and requirements.

(1) *Certain devices and equipment.* A general license is hereby issued to transfer, receive, acquire, own, possess, and use radioactive material incorporated in the following devices or equipment which have been manufactured, tested and labeled by the manufacturer in accordance with a specific license issued to the manufacturer by the United States Nuclear Regulatory Commission for use pursuant to Section 31.3 of 10 CFR Part 31. This general license is subject to the provisions of WAC 246-220-020, 246-220-030, 246-220-040, 246-220-050, 246-220-060, 246-220-070, chapters 246-232, 246-221** and 246-222 WAC.

(a) Static elimination device. Devices designed for use as static eliminators which contain, as a sealed source or sources, radioactive material consisting of a total of not more than 500 microcuries of Polonium-210 per device.

(b) *Ion generating tube.* Devices designed for ionization of air which contain, as a sealed source or sources, radioactive material consisting of a total of not more than 500 microcuries of Polonium-210 per device or a total of not more than 50 millicuries of Hydrogen-3 (tritium) per device.

** Attention is directed particularly to the provisions of chapter 246-221 WAC of these regulations which relate to the labeling of containers.

(2) Reserved.

(3) Reserved.

(4) *Certain measuring, gauging or controlling devices.*

(a) A general license is hereby issued to commercial and industrial firms and research, educational and medical institutions, individuals in the conduct of their business, and state or local government agencies to own, acquire, receive, possess, use or transfer, in accordance with the provisions of (b), (c), and (d) of this subsection, radioactive material excluding special nuclear material contained in devices designed and manufactured for the purpose of detecting, measuring, gauging or controlling thickness, density, level, interface location, radiation, leakage, or qualitative or quantitative chemical composition, or for producing light or an ionized atmosphere.

(b) The general license in (a) of this subsection applies only to radioactive material contained in devices which have been manufactured and labeled in accordance with the specifications contained in a specific license issued by the department pursuant to WAC 246-235-100(4) or in accordance with the Nuclear Regulatory Commission, an agreement state or a licensing state, which authorizes distribution of devices to persons generally licensed by the United States Nuclear Regulatory Commission, an agreement state or licensing state**.

*Note: Regulations under the Federal Food, Drug, and Cosmetic Act authorizing the use of radioactive control devices in food production require certain additional labeling thereon which is found in Section 179.21 of 21 CFR Part 179.

(c) Any person who owns, acquires, receives, possesses, uses or transfers radioactive material in a device pursuant to the general license in (a) of this subsection:

(i) Shall assure that all labels affixed to the device at the time of receipt and bearing a statement that removal of the label is prohibited are maintained thereon and shall comply with all instructions and precautions provided by such labels;

(ii) Shall assure that the device is tested for leakage of radioactive material and proper operation of the on-off mechanism and indicator, if any, at no longer than six-month intervals or at such other intervals as are specified in the label, however:

(A) Devices containing only krypton need not be tested for leakage of radioactive material; and

(B) Devices containing only tritium or not more than 100 microcuries of other beta and/or gamma emitting material or 10 microcuries of alpha emitting material need not be tested for any purpose. Devices held in storage in the original shipping container prior to initial installation need not be tested until immediately prior to use;

(iii) Shall assure that the tests required by (c)(ii) of this subsection and other testing, installing, servicing, and removing from installation involving the radioactive materials, its shielding or containment, are performed:

(A) In accordance with the instructions provided by the labels; or

(B) By a person holding a specific license from the department or from the United States Nuclear Regulatory Commission or from any agreement state or from a licensing state to perform such activities;

(iv) Shall maintain records showing compliance with the requirements of (c)(ii) and (iii) of this subsection. The records shall show the results of tests. The records also shall show the dates of performance and the names of persons performing, testing, installing, servicing, and removing from installation concerning the radioactive material, its shielding or containment. Records of tests for leakage of radioactive material required by (c)(ii) of this subsection shall be maintained for one year after the next required leak test is performed or the sealed source is transferred or disposed. Records of tests of the on/off mechanism and indicator required by (c)(ii) of this subsection shall be maintained for one year after the next required test of the on/off mechanism and indicator is performed or the sealed source is transferred or disposed. Records of other testing, installation, servicing, and removal from installation required by (c)(iii) of this subsection shall be maintained for a period of two years from the date of the recorded event or until the device is transferred or disposed;

(v) Upon the occurrence of a failure of or damage to, or any indication of a possible failure of or damage to, the shielding of the radioactive material or the on/off mechanism or indicator, or upon the detection of 0.005 microcuries or more removable radioactive material, shall immediately suspend operation of the device until it has been repaired by the manufacturer or other person holding a specific license from the department, the United States Nuclear Regulatory Commission, or from an agreement state or a licensing state to repair such devices, or disposed by transfer to a person authorized by a specific license to receive the radioactive material contained in the device and, within thirty days, furnish to the department a written report containing a brief description of the event and the remedial action taken;

(vi) Shall not abandon the device containing radioactive material;

(vii) Except as provided in (c)(viii) of this subsection, shall transfer or dispose the device containing radioactive material only by transfer to a person holding a specific license of the department, the United States Nuclear Regulatory Commission, or an agreement state, or a licensing state whose specific license authorizes the person to receive the device and within thirty days after transfer of a device to a specific licensee shall furnish to the department a report containing identification of the device by manufacturer's name, model number and the name and address of the person receiving the device. No report is required if the device is transferred to the specific licensee in order to obtain a replacement device;

(viii) Shall transfer the device to another general licensee only;

(A) Where the device remains in use at a particular location. In such case, the transferor shall give the transfer-

ee a copy of this subsection and any safety documents identified in the label of the device and within thirty days of the transfer, report to the department the manufacturer's name, model number of device transferred, the name and address of the transferee, and the name and/or position of an individual who may constitute a point of contact between the department and the transferee; or

(B) Where the device is held in storage in the original shipping container at its intended location of use prior to initial use by a general licensee:

(ix) Shall comply with the provisions of WAC 246-221-240 and 246-221-250 for reporting radiation incidents, theft or loss of licensed material, but shall be exempt from the other requirements of chapters 246-221 and 246-222 WAC.

(d) The general license in (a) of this subsection does not authorize the manufacture, import or export of devices containing radioactive material.

(e) The general license provided in this subsection is subject to the provisions of WAC 246-220-020, 246-220-030, 246-220-040, 246-220-060, 246-220-070, 246-220-100, 246-232-050, 246-232-070, 246-232-080, and 246-232-090.

(5) Luminous safety devices for aircraft.

(a) A general license is hereby issued to own, receive, acquire, possess and use tritium or Promethium-147 contained in luminous safety devices for use in aircraft, provided:

(i) Each device contains not more than 10 curies of tritium or 300 millicuries of Promethium-147; and

(ii) Each device has been manufactured, assembled or imported in accordance with a specific license issued by the United States Nuclear Regulatory Commission, or each device has been manufactured or assembled in accordance with the specifications contained in a specific license issued by the department or any agreement state to the manufacturer or assembler of such device pursuant to licensing requirements equivalent to those in Section 32.53 of 10 CFR Part 32 of the regulations of the United States Nuclear Regulatory Commission.

(b) Persons who own, receive, acquire, possess or use luminous safety devices pursuant to the general license in this subsection are exempt from the requirements of chapters 246-221 and 246-222 WAC except that they shall comply with the provisions of WAC 246-221-240 and 246-221-250.

(c) This general license does not authorize the manufacture, assembly, or repair of luminous safety devices containing tritium or Promethium-147.

(d) This general license does not authorize the ownership, receipt, acquisition, possession or use of Promethium-147 contained in instrument dials.

(e) This general license is subject to the provisions of WAC 246-220-020, 246-220-030, 246-220-040, 246-220-050, 246-220-060, 246-220-070, 246-220-100, 246-232-050, 246-232-070, 246-232-080, and 246-232-090.

(6) Ownership of radioactive material. A general license is hereby issued to own radioactive material without regard to quantity. Notwithstanding any other provisions of this chapter, this general license does not authorize the manufacture, production, transfer, receipt, possession or use of radioactive material.

(7) Calibration and reference sources.

(a) A general license is hereby issued to those persons listed below to own, receive, acquire, possess, use and

transfer, in accordance with the provisions of (d) and (e) of this subsection, Americium-241 in the form of calibration or reference sources:

(i) Any person who holds a specific license issued by the department which authorizes that person to receive, possess, use and transfer radioactive material; or

(ii) Any person who holds a specific license issued by the United States Nuclear Regulatory Commission which authorizes that person to receive, possess, use and transfer special nuclear material.

(b) A general license is hereby issued to own, receive, possess, use and transfer plutonium in the form of calibration or reference sources in accordance with the provisions of (d) and (e) of this subsection to any person who holds a specific license issued by the department which authorizes that person to receive, possess, use and transfer radioactive material.

(c) A general license is hereby issued to own, receive, possess, use and transfer Radium-226 in the form of calibration or reference sources in accordance with the provisions of (d) and (e) of this subsection to any person who holds a specific license issued by the department which authorizes that person to receive, possess, use and transfer radioactive material.

(d) The general licenses in (a), (b) and (c) of this subsection apply only to calibration or reference sources which have been manufactured in accordance with the specifications contained in a specific license issued to the manufacturer or importer of the sources by the United States Nuclear Regulatory Commission pursuant to Section 32.57 of 10 CFR Part 32 or Section 70.39 of 10 CFR Part 70 or which have been manufactured in accordance with the specifications contained in a specific license issued to the manufacturer by the department or any agreement state or licensing state pursuant to licensing requirements equivalent to those contained in Section 32.57 of 10 CFR Part 32 or Section 70.39 of 10 CFR Part 70 of the regulations of the United States Nuclear Regulatory Commission.

(e) The general licenses provided in (a), (b) and (c) of this subsection are subject to the provisions of WAC 246-220-020, 246-220-030, 246-220-040, 246-220-060, 246-220-070, 246-220-100, 246-232-050, 246-232-070, 246-232-080, 246-232-090, chapters 246-221 and 246-222 WAC.

In addition, persons who own, receive, acquire, possess, use or transfer one or more calibration or reference sources pursuant to these general licenses:

(i) Shall not possess at any one time, at any one location of storage or use, more than 5 microcuries of Americium-241 and 5 microcuries of plutonium and 5 microcuries of Radium-226 in such sources;

(ii) Shall not receive, possess, use or transfer such source unless the source, or the storage container, bears a label which includes one of the following statements or a substantially similar statement which contains the information called for in the following statement:

(A) The receipt, possession, use and transfer of this source, Model, Serial No., are subject to a general license and the regulations of the United States Nuclear Regulatory Commission

or of a state with which the commission has entered into an agreement for the exercise of regulatory authority. Do not remove this label.

CAUTION - RADIOACTIVE MATERIAL - THIS SOURCE CONTAINS (AMERICIUM-241). (PLUTONIUM)*. DO NOT TOUCH RADIOACTIVE PORTION OF THIS SOURCE

.....
Name of manufacturer or importer

*Note: Showing only the name of the appropriate material.

(B) The receipt, possession, use and transfer of this source, Model, Serial No., are subject to a general license and the regulations of any licensing state. Do not remove this label.

CAUTION - RADIOACTIVE MATERIAL - THIS SOURCE CONTAINS RADIUM-226. DO NOT TOUCH RADIOACTIVE PORTION OF THIS SOURCE.

.....
Name of manufacturer or importer

(iii) Shall not transfer, abandon, or dispose of such source except by transfer to a person authorized by a license from the department, the United States Nuclear Regulatory Commission, or an agreement state or licensing state to receive the source;

(iv) Shall store such source, except when the source is being used, in a closed container adequately designed and constructed to contain Americium-241, Plutonium, or Radium-226/Radon-222 which might otherwise escape during storage; and

(v) Shall not use such source for any purpose other than the calibration of radiation detectors or the standardization of other sources.

(f) These general licenses do not authorize the manufacture of calibration or reference sources containing Americium-241, Plutonium, or Radium-226.

(8) General license for use of radioactive material for certain in vitro clinical or laboratory testing.*

(a) A general license is hereby issued to any physician, veterinarian, clinical laboratory or hospital to receive, acquire, possess, transfer or use, for any of the following stated tests, in accordance with the provisions of or use, for any of the following stated tests, in accordance with the provisions of (b), (c), (d), (e), and (f) of this subsection the following radioactive materials in prepackaged units:

(i) Iodine-125, in units not exceeding 10 microcuries each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

(ii) Iodine-131, in units not exceeding 10 microcuries each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

(iii) Carbon-14, in units not exceeding 10 microcuries each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

(iv) Hydrogen-3 (tritium), in units not exceeding 50 microcuries each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

(v) Iron-59, in units not exceeding 20 microcuries each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

(vi) Cobalt-57, in units not exceeding 10 microcuries each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

(vii) Selenium-75, in units not to exceed 10 microcuries each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

(viii) Mock Iodine-125 reference or calibration sources, in units not exceeding 0.05 microcurie of Iodine-129 and 0.005 microcurie of Americium-241 each for use in *in vitro* clinical or laboratory tests not involving internal or external administration of radioactive material, or the radiation therefrom, to human beings or animals.

*Note: The new drug provisions of the Federal Food, Drug and Cosmetic Act also govern the availability and use of any specific diagnostic drugs in interstate commerce.

(b) No person shall receive, acquire, possess, use or transfer radioactive material pursuant to the general license established by (a) of this subsection until that person has received a validated copy of department Form RHF-15 "Certificate-in vitro testing with radioactive material under general license." Annual validation requires resubmittal of revised department Form RHF-15 and submittal of the annual fee to the department. The physician, veterinarian, clinical laboratory or hospital shall furnish on department Form RHF-15 the following information and such other information as may be required by that form:

(i) Name and address of the physician, veterinarian, clinical laboratory or hospital;

(ii) The location of use; and

(iii) A statement that the physician, veterinarian, clinical laboratory or hospital has appropriate radiation measuring instruments to carry out *in vitro* clinical or laboratory tests with radioactive material as authorized under the general license in (a) of this subsection and that such tests will be performed only by personnel competent in the use of such instruments and in the handling of the radioactive material.

(c) A person who receives, acquires, possesses or uses radioactive material pursuant to the general license established by (a) of this subsection shall comply with the following:

(i) The general licensee shall not possess at any one time, pursuant to the general license in (a) of this subsection at any one location of storage or use, a total amount of Iodine-125, Iodine-131, Selenium-75, Iron-59, and/or Cobalt-57 in excess of 200 microcuries.

(ii) The general licensee shall store the radioactive material, until used, in the original shipping container or in a container providing equivalent radiation protection.

(iii) The general licensee shall use the radioactive material only for the uses authorized by (a) of this subsection.

(iv) The general licensee shall not transfer the radioactive material to a person who is not authorized to receive it pursuant to a license issued by the department, the United States Nuclear Regulatory Commission, any agreement state or licensing state, nor transfer the radioactive material in any manner other than in the unopened, labeled shipping container as received from the supplier.

(v) The general licensee shall dispose of the Mock Iodine-125 reference or calibration sources described in (a)(viii) of this subsection as required by WAC 246-221-170.

(d) The general licensee shall not receive, acquire, possess, or use radioactive material pursuant to (a) of this subsection:

(i) Except as prepackaged units which are labeled in accordance with the provision of an applicable specific license issued pursuant to WAC 246-235-100(8) or in accordance with the provisions of a specific license issued by the United States Nuclear Regulatory Commission, or any agreement state or licensing state which authorizes the manufacture and distribution of Iodine-125, Iodine-131, Carbon-14, Hydrogen-3 (tritium), Iron-59, Selenium-75, Cobalt-57, or Mock Iodine-125 to persons generally licensed under this subsection or its equivalent; and

(ii) Unless one of the following statements, as appropriate, or a substantially similar statement which contains the information called for in one of the following statements, appears on a label affixed to each prepackaged unit or appears in a leaflet or brochure which accompanies the package:

This radioactive material shall be received, acquired, possessed and used only by physicians, veterinarians, clinical laboratories or hospitals and only for *in vitro* clinical or laboratory tests not involving internal or external administration of the material, or the radiation therefrom, to human beings or animals. Its receipt, acquisition, possession, use and transfer are subject to the regulations and a general license of the United States Nuclear Regulatory Commission or of a state with which the commission has entered into an agreement for the exercise of regulatory authority.

.....
Name of manufacturer

This radioactive material shall be received, acquired, possessed and used only by physicians, veterinarians, clinical laboratories or hospitals and only for *in vitro* clinical or laboratory tests not involving internal or external administration of the material, or the radiation therefrom, to human beings or animals. Its receipt, acquisition, possession, use and transfer are subject to the regulations and a general license of a licensing state.

.....
Name of manufacturer

(e) The physician, veterinarian, clinical laboratory or hospital possessing or using radioactive material under the

general license of (a) of this subsection shall report in writing to the department, any changes in the information previously furnished in the "Certificate - *in vitro* testing with radioactive material under general license," department Form RHF-15. The report shall be furnished within thirty days after the effective date of such change.

(f) This general license is subject to the provisions of WAC 246-220-020, 246-220-030, 246-220-040, 246-220-060, 246-220-070, 246-220-090 and 246-220-100. In addition, any person using radioactive material pursuant to the general license of (a) of this subsection is exempt from the requirements of chapters 246-221 and 246-222 WAC with respect to radioactive material covered by that general license, except that such persons using the Mock Iodine-125 described in (a)(viii) of this subsection shall comply with the provisions of WAC 246-221-170, 246-221-240, and 246-221-250 and of these regulations.

(9) *Ice detection devices.*

(a) A general license is hereby issued to own, receive, acquire, possess, use and transfer Strontium-90 contained in ice detection devices, provided each device contains not more than 50 microcuries of Strontium-90 and each device has been manufactured or imported in accordance with a specific license issued by the United States Nuclear Regulatory Commission or each device has been manufactured in accordance with the specifications contained in a specific license issued by the department or any agreement state to the manufacturer of such device pursuant to licensing requirements equivalent to those in Section 32.61 of 10 CFR Part 32 of the regulations of the United States Nuclear Regulatory Commission.

(b) Persons who own, receive, acquire, possess, use or transfer Strontium-90 contained in ice detection devices pursuant to the general license in (a) of this subsection:

(i) Shall, upon occurrence of visually observable damage, such as a bend or crack or discoloration from overheating to the device, discontinue use of the device until it has been inspected, tested for leakage and repaired by a person holding a specific license from the United States Nuclear Regulatory Commission or an agreement state to manufacture or service such devices; or shall dispose of the device pursuant to the provisions of these regulations;

(ii) Shall assure that all labels affixed to the device at the time of receipt, and which bear a statement which prohibits removal of the labels, are maintained thereon; and

(iii) Are exempt from the requirements of chapters 246-221 and 246-222 WAC except that such persons shall comply with the provisions of WAC 246-221-170, 246-221-240, and 246-221-250.

(c) This general license does not authorize the manufacture, assembly, disassembly or repair of Strontium-90 sources in ice detection devices.

(d) This general license is subject to the provisions of WAC 246-220-020, 246-220-030, 246-220-040, 246-220-060, 246-220-070, 246-220-100, 246-232-050, 246-232-070, 246-232-080, and 246-232-090.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-233-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-233-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-21-050, filed 12/11/86; 83-19-050 (Order 2026), § 402-21-050, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-

011 (Order 1570), § 402-21-050, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-21-050, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-040.]

Chapter 246-235 WAC
RADIOACTIVE MATERIALS—SPECIFIC
LICENSES

WAC

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246-235-140	Schedule B, limits for broad licenses.

WAC 246-235-001 Purpose and scope. (1) This chapter prescribes requirements for the issuance of specific licenses.

(2) The provisions and requirements of this chapter are in addition to, and not in substitution for, other requirements of these regulations. In particular the provisions of chapter 246-232 WAC apply to applications and licenses subject to this chapter.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-001, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-010, filed 11/30/79, effective 1/1/80. Formerly chapter 402-20 WAC.]

WAC 246-235-010 Filing application for specific licenses. (1) Applications for specific licenses shall be filed on department form RHF-1.

(2) The department may at any time after the filing of the original application, and before the expiration of the license, require further statements in order to enable the department to determine whether the application should be granted or denied or whether a license should be modified or revoked.

(3) Each application shall be signed by the applicant or licensee or a person duly authorized to act for and on the applicant's behalf.

(4) An application for a license may include a request for a license authorizing one or more activities.

(5) In the application, the applicant may incorporate by reference information contained in previous applications, statements, or reports filed with the department provided such references are clear and specific.

(6) Applications and documents submitted to the department may be made available for public inspection except that the department may withhold any document or part thereof from public inspection if disclosure of its content is not required in the public interest and would adversely affect the interest of a person concerned.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-020, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-050.]

WAC 246-235-020 General requirements for the issuance of specific licenses. A license application will be approved if the department determines that:

(1) The applicant is qualified by reason of training and experience to use the material in question for the purpose requested in accordance with these regulations in such a manner as to minimize danger to public health and safety or property;

(2) The applicant's proposed equipment, facilities, and procedures are adequate to minimize danger to public health and safety or property;

(3) The issuance of the license will not be inimical to the health and safety of the public; and

(4) The applicant satisfies any applicable special requirements in WAC 246-235-080, 246-235-090, 246-235-095, 246-235-100, and 246-247-050.

(5) In the case of an application for a license to receive and possess radioactive material for commercial waste disposal by land burial, source material milling, or for the conduct of any other activity which the agency determines will significantly affect the quality of the environment, the department, before commencement of construction of the plant or facility in which the activity will be conducted, has concluded, after independently weighing the environmental, economic, technical and other benefits against environmental costs and considering available alternatives, that the action called for is the issuance of the proposed license, with any appropriate conditions to protect environmental values. Commencement of construction prior to such conclusion shall be grounds for denial of a license to receive and possess radioactive material in such plant or facility. As used in this paragraph the term "commencement of construction" means any clearing of land, excavation, or other substantial action that would adversely affect the environment of a site. The term does not mean site exploration, necessary borings to determine foundation conditions, or other preconstruction monitoring or testing to establish background information related to the suitability of the site or the protection of environmental values.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-22-040, filed 12/11/86. Statutory Authority: Chapter 70.121 RCW. 81-16-031 (Order 1683), § 402-22-040, filed 7/28/81. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-040, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-060.]

WAC 246-235-030 Issuance of specific licenses. (1)

Upon a determination that an application meets the requirements of the act and the regulations of the department the department will issue a specific license authorizing the proposed activity in such form and containing such conditions and limitations as it deems appropriate or necessary.

(2) The department may incorporate in any license at the time of issuance, or thereafter by appropriate rule, regulation, or order, such additional requirements and conditions with respect to the licensee's receipt, possession, use, storage, and transfer of radioactive material subject to this part as it deems appropriate or necessary in order to:

(a) Minimize danger to public health and safety or property;

(b) Require such reports and the keeping of such records, and to provide for such inspections of activities under the license as may be appropriate or necessary; and

(c) Prevent loss or theft of material subject to this part.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-22-045, filed 12/11/86; 79-12-073 (Order 1459), § 402-22-045, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-080.]

WAC 246-235-040 Expiration of licenses. Except as provided in WAC 246-235-050(2), each specific license shall expire at the end of the day, in the month and year stated therein.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-050, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-100.]

WAC 246-235-050 Renewal of license. (1) Applications for renewal of specific licenses shall be filed in accordance with WAC 246-235-010.

(2) In any case in which a licensee, not less than thirty days prior to expiration of the existing license, has filed an application in proper form for renewal or for a new license authorizing the same activities, such existing license shall not expire until the application has been finally determined by the department.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-050, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-055, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-110.]

WAC 246-235-060 Amendment of licenses at request of licensee. Applications for amendment of a license shall be filed in accordance with WAC 246-235-010 and shall specify the respects in which the licensee desires the license to be amended and the grounds for such amendment.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-22-060, filed 9/16/83; 79-12-073 (Order 1459), § 402-22-060, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-120.]

WAC 246-235-070 Agency action on applications to renew or amend. In considering an application by a licensee to renew or amend the license, the department will apply the criteria set forth in this chapter, as applicable.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-22-065, filed 12/11/86; 79-12-073 (Order 1459), § 402-22-065, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-130.]

WAC 246-235-075 Financial assurance and recordkeeping for decommissioning. (1) Each applicant for one of the following licenses shall submit a decommissioning funding plan as described in this section:

(a) A specific license authorizing receipt of radioactive waste for the purpose of volume reduction, repackaging or interim storage.

(b) Receipt of contaminated articles, scrap material, equipment, or clothing to be decontaminated at the licensee's facility.

(c) A specific license authorizing the possession and use of radioactive material of half-life greater than one hundred twenty days and in quantities for unsealed material exceeding 10^3 times and for sealed forms exceeding 10^{10} times the applicable quantities set forth in WAC 246-221-300 Appendix B (for a combination of isotopes the unity rule applies. A decommissioning funding plan will be required if R is greater than 1, where R is defined as the sum of the ratios of the quantity for sealed and unsealed forms of each isotope compared to the applicable value derived from WAC 246-221-300).

(d) A specific license authorizing possession and use of source material in readily dispersible form and in quantities greater than 10 millicuries.

(2) Each decommissioning funding plan shall contain:

(a) A cost estimate for decommissioning facilities impacted by the activities authorized in the specific license.

(b) A description of the method of assuring funds for decommissioning.

(c) A schedule for adjusting cost estimates and associated funding levels periodically over the life of the facility or facilities.

(d) A description of methods and general procedures for performing facility decontamination, maintaining security, and performing a final radiation survey.

(e) A commitment to clean up accidental spills promptly and to begin decommissioning of the facility or facilities within twelve months of ceasing operation involving radioactive material.

(3) Each cost estimate for decommissioning shall include:

(a) A description of the facility and areas within the facility likely to require decommissioning as a result of routine operation.

(b) Anticipated labor, equipment and material costs.

(c) Anticipated waste volume.

(d) Anticipated packaging, transportation and waste disposal costs.

(e) An assessment of costs associated with an accident involving licensed material.

(4) Financial assurance for decommissioning shall be provided by one or more of the following methods:

(a) Prepayment. Prepayment is the deposit of sufficient funds to pay decommissioning costs. Funds shall be deposited prior to the start of operation into an account segregated from licensee assets and outside the licensee's administrative control. Prepayment may be in the form of a trust, escrow account, government fund, certificate of deposit, or deposit of government securities.

(b) A surety method, insurance, or other guarantee method. These methods guarantee that decommissioning costs will be paid should the licensee default. A surety method may be in the form of a surety bond, letter of credit, or line of credit. Any surety method or insurance used to provide financial assurance for decommissioning must contain the following conditions:

(i) The surety method or insurance shall be open-ended or, if written for a specified term, such as five years, shall be renewed automatically unless ninety days or more prior to the renewal date, the issuer notifies the department, the beneficiary, and the licensee of its intention not to renew. The surety method or insurance shall also provide that the full face amount be paid to the beneficiary automatically prior to the expiration without proof of forfeiture if the licensee fails to provide a replacement acceptable to the department within thirty days after receipt of notification of cancellation.

(ii) The surety method or insurance shall be payable to a trust established for decommissioning costs. The trustee and trust shall be acceptable to the department. Acceptable trustees include an appropriate state or federal government agency or an entity which has the authority to act as a trustee and whose trust operations are regulated and examined by a federal or state agency.

(iii) The surety method or insurance must remain in effect until the department has terminated the license.

(c) An external sinking fund in which deposits are made at least annually, coupled with a surety method or insurance, the value of which may decrease by the amount being accumulated in the sinking fund. An external sinking fund is a fund established and maintained by setting aside funds periodically in an account segregated from licensee assets and outside the licensee's administrative control. The total amount of funds in the external sinking fund shall be sufficient to pay decommissioning costs at the time termination of operation is expected. An external sinking fund may be in the form of a trust, escrow account, government fund, certificate of deposit, or deposit of government securities. The surety or insurance provisions shall be as stated in subsection (4)(b) of this section.

(d) In the case of state or local government licensees, a statement of intent containing a cost estimate for decommissioning and indicating that funds for decommissioning will be obtained when necessary.

(e) Other methods of financial assurance as approved by the department. The department may approve other financial mechanisms submitted by the applicant or licensee provided the alternate method meets, at a minimum, the requirements of 10 C.F.R. 30.35 and associated U.S. Nuclear Regulatory Commission guidance.

(5)(a) The department shall review each decommissioning funding plan prior to license issuance and prior to license renewal.

(b) The applicant or licensee shall incorporate department comments into its cost estimate and shall revise its financial surety accordingly.

(c) Applicants shall obtain the appropriate financial assurance as approved by the department prior to receipt of licensed material. The department may issue a new license if the applicant agrees to comply with the decommissioning funding plan as approved.

(d) Holders of licenses issued on or before the effective date of this rule shall submit a decommissioning funding plan to the department by April 1, 1993. Licensees shall implement the financial assurance requirements within thirty days of receiving department approval of the decommissioning funding plan. Licensees shall submit copies of the financial surety within thirty days of securing the surety and annually thereafter.

(6) Each person licensed under this chapter shall keep records of information important to the safe and effective decommissioning of the facility in an identified location until the license is terminated by the department. If records of relevant information are kept for other purposes, reference to these records and their locations may be used. Information the department considers important to decommissioning consists of:

(a) Records of spills or other unusual occurrences involving the spread of contamination in and around the facility, equipment, or site. These records may be limited to instances when contamination remains after any cleanup procedures or when there is reasonable likelihood that contaminants may have spread to inaccessible areas as in the case of possible seepage into porous materials such as concrete. These records shall include any known information on identification of involved nuclides, quantities, forms, and concentrations.

(b) As-built drawings and modifications of structures and equipment in restricted areas where radioactive materials are used and/or stored, and of locations of possible inaccessible contamination such as buried pipes which may be subject to contamination. If required drawings are referenced, each relevant document need not be indexed individually. If drawings are not available, the licensee shall substitute appropriate records of available information concerning these areas and locations.

(c) Records of the cost estimate performed for the decommissioning funding plan or of the amount certified for decommissioning, and records of the funding method used for assuring funds if either a funding plan or certification is used.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-235-075, filed 2/21/92, effective 3/23/92.]

WAC 246-235-080 Special requirements for issuance of certain specific licenses for radioactive material.

(1) *Human use of radioactive material in institutions.* In addition to the requirements set forth in WAC 246-235-020 a specific license for human use of radioactive material in institutions will be issued if:

(a) The applicant has appointed a radiation safety committee to coordinate the use of radioactive material throughout that institution and to maintain surveillance over the institution's radiation safety program. Membership of the committee should include a specialist (where applicable a physician) from each department where radioactive material is used, a representative of the institution's management, a representative of the nursing staff, and a person trained in radiation safety. The radiation safety committee shall meet at intervals not to exceed six months. Minutes shall be taken and maintained for two years for inspection by the department;

(b) The applicant possesses adequate facilities for the clinical care of patients. The applicant is advised that construction of new radioisotope facilities and modification of existing facilities must also comply with the requirements of WAC 246-318-660 of the construction review section of the department;

(c) The physician(s) designated on the application as the individual user(s) has (or have) substantial experience in the handling and administration of radioactive material and, where applicable, the clinical management of radioactive patients; and

(d) If the application is for a license to use unspecified quantities or multiple types of radioactive material, the applicant's staff has substantial experience in the use of a variety of radioactive materials for a variety of human uses.

(2) *Licensing of individual physicians for human use of radioactive material.* In addition to the requirements set forth in WAC 246-235-020 a specific license for the human use of radioactive material will be issued to an individual physician if:

(a) The applicant has access to a hospital possessing adequate facilities to hospitalize and monitor the applicant's radioactive patients whenever it is advisable;

(b) The applicant has extensive experience in the handling and administration of radioactive material and, where applicable, the clinical management of radioactive patients;

(c) The application is for use in the applicant's practice in an office outside a medical institution; and

(d) The department will approve an application by an individual physician or group of physicians for a specific license to receive, possess or use radioactive material on the premises of a medical institution only if:

(i) The use of radioactive material is limited to the:

(A) Administration of radiopharmaceuticals for diagnostic or therapeutic purposes;

(B) Performance of diagnostic studies on patients to whom a radiopharmaceutical has been administered;

(C) Performance of in vitro diagnostic studies; or

(D) Calibration and quality control checks of radioactive assay instrumentation, radiation safety instrumentation and diagnostic instrumentation;

(ii) The physician brings the radioactive material with him or her and removes the radioactive material when he or she departs. (The institution cannot receive, possess or store radioactive material other than the amount of material remaining in the patient); and

(iii) The medical institution does not hold a radioactive material license issued pursuant to the provisions of subsection (1) of this section.

(3) *Specific licenses for certain groups of medical uses of radioactive material.*

(a) Subject to the provisions of (b), (c) and (d) of this subsection an application for a specific license pursuant to subsection (1), (2) or (4) of this section, or for any medical use or uses of radioactive material specified in one or more of Groups I to VI, inclusive, of WAC 246-235-120, Schedule A, will be approved for all of the uses within the group or groups which include the use or uses specified in the application if:

(i) The applicant satisfies the requirements of subsection (1), (2) or (4) of this section;

(ii) The applicant, or the physician designated in the application as the individual user, has adequate clinical experience in the types of uses included in the group or groups;

(iii) The applicant, or the physicians and all other personnel who will be involved in the preparation and use of the radioactive material, have adequate training and experience in the handling of radioactive material appropriate to their participation in the uses included in the group or groups;

(iv) The applicant's radiation detection and measuring instrumentation is adequate for conducting the procedures involved in the uses included in the group or groups, specifically:

(A) For Groups I through V, applicant must possess and use a calibrated and operable low-range survey instrument with a thin window (less than 7 mg/cm²) capable of detecting radiation levels of 0.05 milliroentgen per hour up to at least 20 milliroentgens per hour;

(B) For Groups III, V, and VI, applicant must possess a calibrated and operable high-range survey instrument capable of detecting radiation levels up to at least one Roentgen per hour;

(v) The applicant's radiation safety operating procedures are adequate for handling and disposal of the radioactive material involved in the uses included in the group or groups.

(b) Any licensee or registrant who is authorized to use radioactive material pursuant to one or more groups in (a) of this subsection and WAC 246-235-120, Schedule A, is subject to the following conditions:

(i) For Groups I, II, IV, and V, no licensee or registrant shall receive, possess or use radioactive material except as a radiopharmaceutical manufactured in the form to be administered to the patient, labeled, packaged and distributed in accordance with a specific license issued by the department pursuant to WAC 246-235-100(10), a specific license issued by the United States Nuclear Regulatory Commission pursuant to Section 32.72 of 10 CFR Part 32, or a specific license issued by an agreement state or a licensing state pursuant to equivalent regulations.

(ii) For Group III, no licensee or registrant shall receive, possess or use generators or reagent kits containing radioactive material or shall use reagent kits that do not contain radioactive material to prepare radiopharmaceuticals containing radioactive material, except:

(A) Reagent kits not containing radioactive material that are approved by the department, the United States Nuclear Regulatory Commission, an agreement state or a licensing state for use by persons licensed pursuant to this subsection

and WAC 246-235-120, Schedule A, or equivalent regulations; or

(B) Generators or reagent kits containing radioactive material that are manufactured, labeled, packaged and distributed in accordance with a specific license issued by the department pursuant to WAC 246-235-100(11), a specific license issued by the United States Nuclear Regulatory Commission pursuant to Section 32.73 of 10 CFR Part 32, or a specific license issued by an agreement state or a licensing state pursuant to equivalent regulations.

(iii) For Group VI, no licensee or registrant shall receive, possess or use radioactive material except as contained in a source or device that has been manufactured, labeled, packaged and distributed in accordance with a specific license issued by the department pursuant to WAC 246-235-100(12), a specific license issued by the United States Nuclear Regulatory Commission pursuant to Section 32.74 of 10 CFR Part 32, or a specific license issued to the manufacturer by an agreement state or a licensing state pursuant to equivalent regulations.

(iv) For Group III, any licensee or registrant who uses generators or reagent kits shall elute the generator or process radioactive material with the reagent kit in accordance with instructions which are approved by the department, the United States Nuclear Regulatory Commission, an agreement state or a licensing state and are furnished by the manufacturer on the label attached to or in the leaflet or brochure which accompanies the generator or reagent kit.

(v) For Groups I, II and III any licensee using byproduct material for clinical procedures other than those specified in the product labeling (package insert) shall comply with the product labeling regarding:

- (A) Chemical and physical form;
- (B) Route of administration; and
- (C) Dosage range.

(c) Any licensee who is licensed pursuant to (a) of this subsection for one or more of the medical use groups in WAC 246-235-120, Schedule A, also is authorized, subject to the provisions of (c) and (d) of this subsection to receive, possess and use for calibration and reference standards:

(i) Any radioactive material authorized for use in IND/NDA products under Group I, Group II, or Group III of WAC 246-235-120, Schedule A, with a half-life not longer than one hundred days, in amounts not to exceed 15 millicuries total;

(ii) Any radioactive material authorized for use in IND/NDA products under Group I, Group II, or Group III of WAC 246-235-120, Schedule A, with half-life greater than one hundred days in amounts not to exceed 200 microcuries total;

(iii) Technetium-99m in amounts not to exceed 30 millicuries;

(iv) Any radioactive material excluding Radium-226, in amounts not to exceed three millicuries per source (except Cobalt-57, which may be possessed in amounts not to exceed 5.5 millicuries), contained in calibration or reference sources that have been manufactured, labeled, packaged, and distributed in accordance with a specific license issued by the department pursuant to WAC 246-235-100(11), a specific license issued by the United States Nuclear Regulatory Commission pursuant to Section 32.74 of 10 CFR Part 32, or a specific license issued to the manufacturer by an

agreement state or a licensing state pursuant to equivalent regulations.

(d) Leak tests.

(i) Any licensee or registrant who possesses sealed sources as calibration or reference sources pursuant to (c) of this subsection shall cause each sealed source containing radioactive material, other than Hydrogen-3, with a half-life greater than thirty days in any form other than gas to be tested for leakage and/or contamination at intervals not to exceed six months. In the absence of a certificate from a transferor indicating that a test has been made within six months prior to the transfer, the sealed sources shall not be used until tested: *Provided, however,* That no leak tests are required when:

(A) The source contains 100 microcuries or less of beta and/or gamma emitting material or 10 microcuries or less of alpha emitting material;

(B) The sealed source is stored and is not being used: *Provided,* That a physical inventory of the source and wipe surveys of the storage area or storage container are conducted.

(ii) The leak test shall be capable of detecting the presence of 0.005 microcurie of radioactive material on the test sample. The test sample shall be taken from the sealed source or from the surfaces of the device in which the sealed source is mounted or stored on which contamination might be expected to accumulate. Records of leak test results shall be kept in units of microcuries and maintained for inspection by the department.

(iii) If the leak test reveals the presence of 0.005 microcurie or more of removable contamination, the licensee or registrant shall immediately withdraw the sealed source from use and shall cause it to be decontaminated and repaired or to be disposed of in accordance with chapters 246-235 and 246-221 WAC. A report shall be filed within five days of the test with the department describing the equipment involved, the test results, and the corrective action taken.

(e) Any licensee or registrant who possesses and uses calibration and reference sources pursuant to (c)(iv) of this subsection shall:

(i) Follow the radiation safety and handling instructions approved by the department, the United States Nuclear Regulatory Commission, an agreement state or a licensing state and furnished by the manufacturer on the label attached to the source, or permanent container thereof, or in the leaflet or brochure that accompanies the source, and maintain such instruction in a legible and conveniently available form; and

(ii) Conduct a quarterly physical inventory to account for all sources received and possessed. Records of the inventories shall be maintained for inspection by the department and shall include at a minimum the quantities and kinds of radioactive material, location of sources, name of person performing the inventory, and the date of the inventory.

(4) *Human use of sealed sources.* In addition to the requirements set forth in WAC 246-235-020, a specific license for human use of sealed sources will be issued only if the applicant or, if the application is made by an institution, the individual user:

(a) Has specialized training in the diagnostic or therapeutic use of the sealed source considered, or has experience equivalent to such training; and

(b) Is a physician.

(5) *Use of sealed sources in industrial radiography.* In addition to the requirements set forth in WAC 246-235-020, a specific license for use of sealed sources in industrial radiography will be issued if:

(a) The applicant will have an adequate program for training radiographers and radiographer's assistants and submits to the department a schedule or description of such program which specifies the:

(i) Initial training;

(ii) Periodic training;

(iii) On-the-job training;

(iv) Means to be used by the licensee to determine the radiographer's knowledge and understanding of and ability to comply with department regulations and licensing requirements, and the operating and emergency procedures of the applicant; and

(v) Means to be used by the licensee to determine the radiographer's assistant's knowledge and understanding of and ability to comply with the operating and emergency procedures of the applicant;

(b) The applicant submits to the department and complies with satisfactory written operating and emergency procedures (described in WAC 246-243-140);

(c) The applicant will have a quarterly internal inspection system, to assure that license provisions, regulations, and the applicant's operating and emergency procedures are followed by radiographers and radiographer's assistants. Records of this management control program shall be maintained for two years;

(d) The applicant submits to the department a description of the applicant's overall organizational structure pertaining to the industrial radiography program, including specified delegations of authority and responsibility for operation of the program;

(e) The applicant who desires to conduct leak tests has established adequate procedures to be followed in leak testing sealed sources for possible leakage and contamination and submits to the department a description of such procedures including:

(i) Instrumentation to be used;

(ii) Method of performing tests, e.g., points on equipment to be smeared and method of taking smear; and

(iii) Pertinent experience of the person who will perform the tests;

(f) The licensee shall conduct a program for inspection and maintenance of radiographic exposure devices and storage containers to assure proper functioning of components important to safety.

(6) *Environmentally significant licensing actions.* In addition to the requirements set forth in WAC 246-235-020, a specific license for any activity within the licensing authority of the department which the department determines will significantly affect the radiological quality of the human environment, including those specified in WAC 197-11-845(1) and 246-03-030 (1)(a)(ii) (i.e., licenses to operate low level waste burial facilities or licenses to operate or expand beyond the design capacity, mineral processing facilities or their tailings areas, whose products, or byproducts, have

concentrations of naturally occurring radioactive material in excess of exempt concentrations as specified in WAC 246-232-130, Schedule C), will be issued if the following conditions are met:

(a) Environmental impact statement.

(i) The application for a license or license amendment (other than administrative amendments) is accompanied or preceded by a final environmental impact statement or final declaration of nonsignificance completed in accordance with the State Environmental Policy Act (SEPA) procedures and guidelines specified in chapters 197-11 and 246-03 WAC. For any uranium or thorium mill in operation on or before the effective date of this regulation for which an environmental impact statement has not been prepared previously, an application for license renewal must be accompanied or preceded by a final environmental impact statement or final declaration of nonsignificance completed in accordance with SEPA guidelines.

Note: No construction shall be commenced until the license has been issued or unless an emergency exemption from SEPA requirements is granted in accordance with WAC 197-11-880. For the purposes of this subsection, the term "commencement of construction" means any clearing of land, excavation or other substantial action related to a proposed activity for specific licensing that would adversely affect the natural environment of a site; this term does not include changes desirable for the temporary use of the land for public recreational use, limited borings to determine site characteristics as necessary for environmental assessment, or other preconstruction monitoring to establish background information related to suitability of a site or to the protection of environmental values. In the case where an exemption is granted, the applicant shall assume all financial risk for construction activity; waive any claim of entitlement to the issuance of a license based solely upon the grant of the exemption or the commencement of construction pursuant thereto; and furnish, if the circumstances warrant and the department so requires, a financial surety arrangement to insure the protection of the public health, safety and the environment in the event of abandonment, default, or inability of the license applicant to meet the requirements of the act or these regulations.

(ii) In addition to the information required in chapter 197-11 WAC, the following additional areas shall be addressed in the final environmental impact statement:

(A) Alternative sites to those chosen by the applicant shall include all alternative sites, whether or not those sites are under the control or ownership of the applicant.

(B) Long term impacts shall include, but not be limited to, decommissioning, decontamination, reclamation impacts and material management associated with the proposed activities.

(C) Environmental reviews, dose assessments, ecology, construction effects on biota, impact on the environment from the use of chemicals, and socioeconomic effects shall be addressed.

(D) Alternative disposal sites and techniques for disposal shall be evaluated to determine if a site or technique is clearly superior.

(b) For uranium or thorium milling operations, a bond made payable to the department of health or other acceptable government agency, and in an amount specified by the department, shall be posted to ensure the protection of the public health and safety in the event of abandonment, default or other inability of the licensee to meet the requirements for reclamation and disposal of tailings and for decommissioning

the site. The bond, or a copy thereof when the bond is made payable to another government agency, shall be received by the department prior to issuance of the license, or prior to license renewal for mills in operation on or before the effective date of this regulation. Other acceptable surety arrangements in addition to surety bonding include cash deposits, certificates of deposit, deposits of government securities, letters or lines of credit or combinations of the foregoing. The amount and mechanism of the surety arrangement may be reviewed by the department preceding each license renewal and adjustments may be required of the licensee prior to such renewal.

(c) The owner of the proposed uranium or thorium mill and tailings site(s) agrees to transfer or revert to the appropriate state or federal agency upon termination of the license, all lands, buildings and grounds, and any interest therein, necessary to fulfill the purposes of this subsection, except where the lands are held in trust for, or are owned by any Indian tribe. For any uranium or thorium mill in operation on or before the effective date of this regulation, such an agreement will be required prior to license renewal.

(d) For all uranium and thorium milling operations, the owner or operator shall arrange to pay to the department or its designee a fee in accordance with WAC 246-254-150 for a special security fund for the further maintenance, surveillance or care which may be required after a licensee has ceased to operate.

A minimum fund of two hundred fifty thousand dollars shall be provided by the licensee payable to the state. If a shortfall exists between the amount of money in the special security fund and the two hundred fifty thousand dollars minimum amount, a surety bond, or other acceptable surety instrument as defined above shall be arranged.

(e) The application for a license includes a description of an appropriate program for effluent monitoring, environmental monitoring and data reporting. Such description shall encompass locations, frequency, and types of sampling, analytical plans and procedures, minimum detection levels, sampling equipment and quality assurance programs.

(f) All licensees or registrants required to meet the additional requirements set forth in this subsection shall establish environmental monitoring programs adequate to determine the impact of their activity on the natural environment around the site of their environmentally significant activity. The established environmental and effluent monitoring program shall address all environmentally significant radionuclide releases and external radiation sources caused or threatened to be caused by the licensee's activities.

(i) Effluent and environmental monitoring results shall include the following minimum information as pertinent:

(A) Information as to flow rates, total volume of effluent, peak concentration, concentration of each radionuclide in the effluent averaged over a period of one year at the point where the effluent leaves a stack, tube, pipe, or similar conduit;

(B) A description of the properties of the effluents, including:

(I) Chemical composition;

(II) Physical characteristics, including suspended solids content in liquid effluents, and nature of gas aerosol for air effluents;

(III) The hydrogen ion concentrations (pH) of liquid effluents; and

(IV) The size range of particulates in effluent released into air;

(C) A description of the anticipated human occupancy in the unrestricted area where the highest concentration of radioactive material from the effluent is expected, and, in the case of a river stream a description of water uses downstream from the point of release of the effluent.

(D) Information as to the highest concentration of each radionuclide in an unrestricted area, including anticipated concentrations averaged over a period of one year:

(I) In air at any point of human occupancy; or

(II) In water at points of use downstream from the point of release of the effluent;

(E) The background concentration of radionuclides in the receiving river or stream prior to the release of liquid effluent;

(F) A description of the waste treatment facilities and procedures used to reduce the concentration of radionuclides in effluents prior to their release;

(G) A written description of sampling techniques and sample analysis methods;

(H) A written description of how all calculated results were obtained from sample analysis data. This explanation shall include example calculations and estimates of the precision and sensitivity of monitoring results;

(I) A written description of the licensee's quality control program including specification of control samples and standard samples used.

(ii) The licensee shall submit in writing to the department within sixty days after January 1 and July 1 of each year, reports specifying the quantities of each of the principle radionuclides released to unrestricted areas in liquid and in gaseous effluent during the previous six months of operations. This data shall be reported in a manner that will permit the department to confirm the potential annual radiation doses to the public. All data from the radiological and nonradiological environmental monitoring program will also be submitted for the same time period and frequency as specified above. The data shall be reported in a manner which will allow the department to confirm the potential annual radiation doses to the public.

(g) For land disposal of radioactive material, the provisions of chapter 246-250 WAC must also be met.

(h) For operation of mineral processing facilities, the provisions of chapter 246-252 WAC must also be met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-080, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-22-070, filed 12/11/86; 83-19-050 (Order 2026), § 402-22-070, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-22-070, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-070, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-070.]

WAC 246-235-090 Special requirements for specific licenses of broad scope. This section prescribes requirements for the issuance of specific licenses of broad scope for radioactive material ("broad licenses") and certain regulations governing holders of such licenses.*

*Note: Authority to transfer possession or control by the manufacturer, processor, or producer of any equipment, device, commodity or other product containing source material or byproduct material whose subsequent possession, use, transfer and disposal by all other persons who are exempted from regulatory requirements may be obtained only from the United States Nuclear Regulatory Commission, Washington, D.C. 20555.

(1) *The different types of broad licenses are set forth below:*

(a) A "Type A specific license of broad scope" is a specific license authorizing receipt, acquisition, ownership, possession, use and transfer of any chemical or physical form of the radioactive material specified in the license, but not exceeding quantities specified in the license, for any authorized purpose. The quantities specified are usually in the multicurie range.

(b) A "Type B specific license of broad scope" is a specific license authorizing receipt, acquisition, ownership, possession, use and transfer of any chemical or physical form of radioactive material specified in WAC 246-235-140 Schedule B, for any authorized purpose. The possession limit for a Type B broad license, if only one radionuclide is possessed thereunder, is the quantity specified for that radionuclide in WAC 246-235-140 Schedule B, Column I. If two or more radionuclides are possessed thereunder, the possession limit for each is determined as follows: For each radionuclide, determine the ratio of the quantity possessed to the applicable quantity specified in WAC 246-235-140 Schedule B, Column I, for that radionuclide. The sum of the ratios for all radionuclides possessed under the license shall not exceed unity.

(c) A "Type C specific license of broad scope" is a specific license authorizing receipt, acquisition, ownership, possession, use and transfer of any chemical or physical form of radioactive material specified in WAC 246-235-140 Schedule B, for any authorized purpose. The possession limit for a Type C broad license, if only one radionuclide is possessed thereunder, is the quantity specified for that radionuclide in WAC 246-235-140 Schedule B, Column II. If two or more radionuclides are possessed thereunder, the possession limit is determined for each as follows: For each radionuclide determine the ratio of the quantity possessed to the applicable quantity specified in WAC 246-235-140 Schedule B, Column II, for that radionuclide. The sum of the ratios for all radionuclides possessed under the license shall not exceed unity.

(2) *An application for a Type A specific license of broad scope will be approved if:*

(a) The applicant satisfies the general requirements specified in WAC 246-235-020.

(b) The applicant has engaged in a reasonable number of activities involving the use of radioactive material; and

(c) The applicant has established administrative controls and provisions relating to organization and management, procedures, recordkeeping, material control and accounting, and management review that are necessary to assure safe operations, including:

(i) The establishment of a radiation safety committee composed of such persons as a radiation safety officer, a representative of management, and persons trained and experienced in the safe use of radioactive material;

(ii) The appointment of a radiation safety officer who is qualified by training and experience in radiation protection, and who is available for advice and assistance on radiation safety matters; and

(iii) The establishment of appropriate administrative procedures to assure:

(A) Control of procurement and use of radioactive material;

(B) Completion of safety evaluation of proposed uses of radioactive material which take into consideration such matters as the adequacy of facilities and equipment, training and experience of the user, and the operating or handling procedures; and

(C) Review, approval, and recording by the radiation safety committee of safety evaluation of proposed uses prepared in accordance with item (2)(c)(iii)(B) of this section prior to use of the radioactive material.

(3) *An application for a Type B specific license of broad scope will be approved if:*

(a) The applicant satisfies the general requirements specified in WAC 246-235-020; and

(b) The applicant has established administrative controls and provisions relating to organization and management, procedures, recordkeeping, material control and accounting, and management review that are necessary to assure safe operations, including:

(i) The appointment of a radiation safety officer who is qualified by training and experience in radiation protection, and who is available for advice and assistance on radiation safety matters; and

(ii) The establishment of appropriate administrative procedures to assure:

(A) Control of procurement and use of radioactive material;

(B) Completion of safety evaluations of proposed uses of radioactive material which take into consideration such matters as the adequacy of facilities and equipment, training and experience of the user, and the operating or handling procedures; and

(C) Review, approval, and recording by the radiation safety officer of safety evaluations of proposed uses prepared in accordance with item (3)(b)(ii)(B) of this section prior to use of the radioactive material.

(4) *An application for a Type C specific license of broad scope will be approved if:*

(a) The applicant satisfies the general requirements specified in WAC 246-235-020.

(b) The applicant submits a statement that radioactive material will be used only by, or under the direct supervision of individuals, who have received:

(i) A college degree at the bachelor level, or equivalent training and experience, in the physical or biological sciences or in engineering; and

(ii) At least forty hours of training and experience in the safe handling of radioactive material, and in the characteristics of ionizing radiation, units of radiation dose and quantities, radiation detection instrumentation, and biological hazards of exposure to radiation appropriate to the type and forms of radioactive material to be used; and

(c) The applicant has established administrative controls and provisions relating to procurement of radioactive material, procedures, recordkeeping, material control and

accounting, and management review necessary to assure safe operations.

(5) *Specific licenses of broad scope are subject to the following conditions:*

(a) Unless specifically authorized by the department, persons pursuant to this section shall not:

(i) Conduct tracer studies in the environment involving direct release of radioactive material;

(ii) Receive, acquire, own, possess, use or transfer devices containing 100,000 curies or more of radioactive material in sealed sources used for irradiation of materials;

(iii) Conduct activities for which a specific license issued by the department under WAC 246-235-080 or 246-235-100 is required; or

(iv) Add or cause the addition of radioactive material to any food, beverage, cosmetic, drug or other product designed for ingestion or inhalation by, or application to, a human being.

(b) Each Type A specific license of broad scope issued under this part shall be subject to the condition that radioactive material possessed under the license may only be used by, or under the direct supervision of, individuals approved by the licensee's radiation safety committee.

(c) Each Type B specific license of broad scope issued under this part shall be subject to the condition that radioactive material possessed under the license may only be used by, or under the direct supervision of, individuals approved by the licensee's radiation safety officer.

(d) Each Type C specific license of broad scope issued under this part shall be subject to the condition that radioactive material possessed under the license may only be used by, or under the direct supervision of, individuals who satisfy the requirements of subsection (4) of this section.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-090, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-090, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-073.]

WAC 246-235-100 Special requirements for a specific license to manufacture, assemble, repair, or distribute commodities, products, or devices which contain radioactive material. (1) *Licensing the introduction of radioactive material into products in exempt concentrations.* In addition to the requirements set forth in WAC 246-235-020, a specific license authorizing the introduction of radioactive material into a product or material owned by or in the possession of the licensee or another to be transferred to persons exempt under WAC 246-232-010 (2)(a) will be issued if:

(a) The applicant submits a description of the product or material into which the radioactive material will be introduced, intended use of the radioactive material and the product or material into which it is introduced, method of introduction, initial concentration of the radioactive material in the product or material, control methods to assure that no more than the specified concentration is introduced into the product or material, estimated time interval between introduction and transfer of the product or material, and estimated concentration of the radioactive material in the product or material at the time of transfer; and

(b) The applicant provides reasonable assurance that the concentrations of radioactive material at the time of transfer will not exceed the concentrations in WAC 246-232-130, Schedule C, that reconstruction of the radioactive material in concentrations exceeding those in WAC 246-232-130, Schedule C, is not likely, that use of lower concentrations is not feasible, and that the product or material is not likely to be incorporated in any food, beverage, cosmetic, drug or other commodity or product designed for ingestion or inhalation by, or application to a human being.

(c) Each person licensed under subsection (1) of this section shall file an annual report with the department which shall identify the type and quantity of each product or material into which radioactive material has been introduced during the reporting period; name and address of the person who owned or possessed the product and material, into which radioactive material has been introduced, at the time of introduction; the type and quantity of radionuclide introduced into each such product or material; and the initial concentrations of the radionuclide in the product or material at time of transfer of the radioactive material by the licensee. If no transfers of radioactive material have been made pursuant to subsection (1) of this section during the reporting period, the report shall so indicate. The report shall cover the year ending June 30, and shall be filed within thirty days thereafter.

(2) *Licensing the distribution of radioactive material in exempt quantities.**

*Note: Authority to transfer possession or control by the manufacturer, processor or producer of any equipment, device, commodity or other product containing source material or byproduct material whose subsequent possession, use, transfer and disposal by all other persons who are exempted from regulatory requirements may be obtained only from the United States Nuclear Regulatory Commission, Washington, D.C. 20555.

(a) An application for a specific license to distribute naturally occurring and accelerator-produced radioactive material (NARM) to persons exempt from these regulations pursuant to WAC 246-232-010 (2)(b) will be approved if:

(i) The radioactive material is not contained in any food, beverage, cosmetic, drug or other commodity designed for ingestion or inhalation by, or application to, a human being;

(ii) The radioactive material is in the form of processed chemical elements, compounds, or mixtures, tissue samples, bioassay samples, counting standards, plated or encapsulated sources, or similar substances, identified as radioactive and to be used for its radioactive properties, but is not incorporated into any manufactured or assembled commodity, product, or device intended for commercial distribution; and

(iii) The applicant submits copies of prototype labels and brochures and the department approves such labels and brochures.

(b) The license issued under paragraph (2)(a) of this section is subject to the following conditions:

(i) No more than ten exempt quantities shall be sold or transferred in any single transaction. However, an exempt quantity may be composed of fractional parts of one or more of the exempt quantity provided the sum of the fractions shall not exceed unity.

(ii) Each exempt quantity shall be separately and individually packaged. No more than ten such packaged

exempt quantities shall be contained in any outer package for transfer to persons exempt pursuant to WAC 246-232-010 (2)(b). The outer package shall be such that the dose rate at the external surface of the package does not exceed 0.5 millirem per hour.

(iii) The immediate container of each quantity or separately packaged fractional quantity of radioactive material shall bear a durable, legible label which:

(A) Identifies the radionuclide and the quantity of radioactivity; and

(B) Bears the words "radioactive material."

(iv) In addition to the labeling information required by item (2)(b)(iii) of this section, the label affixed to the immediate container, or an accompanying brochure, shall:

(A) State that the contents are exempt from licensing state requirements;

(B) Bear the words "Radioactive material—Not for human use—Introduction into foods, beverages, cosmetics, drugs, or medicinals, or into products manufactured for commercial distribution is prohibited—Exempt quantities should not be combined"; and

(C) Set forth appropriate additional radiation safety precautions and instructions relating to the handling, use, storage and disposal of the radioactive material.

(c) Each person licensed under paragraph (2)(a) of this section shall maintain records identifying, by name and address, each person to whom radioactive material is transferred for use under WAC 246-232-010 (2)(b) or the equivalent regulations of a licensing state, and stating the kinds and quantities of radioactive material transferred. An annual summary report stating the total quantity of each radionuclide transferred under the specific license shall be filed with the department. Each report shall cover the year ending June 30, and shall be filed within thirty days thereafter. If no transfers of radioactive material have been made pursuant to subsection (2) of this section during the reporting period, the report shall so indicate.

(3) *Licensing the incorporation of naturally occurring and accelerator-produced radioactive material into gas and aerosol detectors.* An application for a specific license authorizing the incorporation of NARM into gas and aerosol detectors to be distributed to persons exempt under WAC 246-232-010 (2)(c)(iii) will be approved if the application satisfies requirements equivalent to those contained in Section 32.26 of 10 CFR Part 32.

(4) *Licensing the manufacture and distribution of devices to person generally licensed under WAC 246-233-020(4).*

(a) An application for a specific license to manufacture or distribute devices containing radioactive material, excluding special nuclear material, to persons generally licensed under WAC 246-233-020(4) or equivalent regulations of the United States Nuclear Regulatory Commission, an agreement state or a licensing state will be approved if:

(i) The applicant satisfies the general requirements of WAC 246-235-020;

(ii) The applicant submits sufficient information relating to the design, manufacture, prototype testing, quality control, labels, proposed uses, installation, servicing, leak testing, operating and safety instructions, and potential hazards of the device to provide reasonable assurance that:

(A) The device can be safely operated by persons not having training in radiological protection;

(B) Under ordinary conditions of handling, storage and use of the device, the radioactive material contained in the device will not be released or inadvertently removed from the device, and it is unlikely that any person will receive in any period of one calendar quarter a dose in excess of ten percent of the limits specified in the table in WAC 246-221-010(1); and

(C) Under accident conditions (such as fire and explosion) associated with handling, storage and use of the device, it is unlikely that any person would receive an external radiation dose or dose commitment in excess of the following organ doses:

Whole body; head and trunk; active blood-forming organs; gonads; or lens of eye	15 rems
Hands and forearms; feet and ankles; localized areas of skin averaged over areas no larger than one square centimeter	200 rems
Other organs	50 rems

(iii) Each device bears a durable, legible, clearly visible label or labels approved by the department, which contain in a clearly identified and separate statement:

(A) Instructions and precautions necessary to assure safe installation, operation and servicing of the device (documents such as operating and service manuals may be identified in the label and used to provide this information);

(B) The requirement, or lack of requirement, for leak testing, or for testing any on-off mechanism and indicator, including the maximum time interval for such testing, and the identification of radioactive material by isotope, quantity of radioactivity, and date of determination of the quantity; and

(C) The information called for in one of the following statements, as appropriate, in the same or substantially similar form:

(aa) The receipt, possession, use and transfer of this device, Model, Serial No. Note*, are subject to a general license or the equivalent, and the regulations of the United States Nuclear Regulatory Commission or a state with which the United States Nuclear Regulatory Commission has entered into an agreement for the exercise of regulatory authority. This label shall be maintained on the device in a legible condition. Removal of this label is prohibited.

CAUTION - RADIOACTIVE MATERIAL

.....
(Name of manufacturer or distributor)*

(bb) The receipt, possession, use and transfer of this device, Model, Serial No. Note*, are subject to a general license or the equivalent, and the regulations of a licensing state. This label shall be maintained on the device in a legible condition. Removal of this label is prohibited.

CAUTION - RADIOACTIVE MATERIAL

.....
 (Name of manufacturer or distributor)*

*Note: The model, serial number, and name of the manufacturer or distributor may be omitted from this label provided the information is elsewhere specified in labeling affixed to the device.

(b) In the event the applicant desires that the device be required to be tested at intervals longer than six months, either for proper operation of the on-off mechanism and indicator, if any, or for leakage of radioactive material or for both, the applicant shall include in the application sufficient information to demonstrate that such longer interval is justified by performance characteristics of the device or similar devices and by design features which have a significant bearing on the probability or consequences of leakage of radioactive material from the device or failure of the on-off mechanism and indicator. In determining the acceptable interval for the test for leakage of radioactive material, the department will consider information which includes, but is not limited to:

- (i) Primary containment (source capsule);
- (ii) Protection of primary containment;
- (iii) Method of sealing containment;
- (iv) Containment construction materials;
- (v) Form of contained radioactive material;
- (vi) Maximum temperature withstood during prototype tests;
- (vii) Maximum pressure withstood during prototype tests;
- (viii) Maximum quantity of contained radioactive material;
- (ix) Radiotoxicity of contained radioactive material; and
- (x) Operating experience with identical devices or similarly designed and constructed devices.

(c) In the event the applicant desires that the general licensee under WAC 246-233-020(4), or under equivalent regulations of the United States Nuclear Regulatory Commission, an agreement state or a licensing state be authorized to install the device, collect the sample to be analyzed by a specific licensee for leakage of radioactive material, service the device, test the on-off mechanism and indicator, or remove the device from installation, the applicant shall include in the application written instructions to be followed by the general licensee, estimated calendar quarter doses associated with such activity or activities, and bases for such estimates. The submitted information shall demonstrate that performance of such activity or activities by an individual untrained in radiological protection, in addition to other handling, storage, and use of devices under the general license, is unlikely to cause that individual to receive a calendar quarter dose in excess of ten percent of the limits specified in the table in WAC 246-221-010(1).

(d) Each person licensed under paragraph (4)(a) of this section to distribute devices to generally licensed persons shall:

- (i) Furnish a copy of the general license contained in WAC 246-233-020(4) to each person to whom the person directly or through an intermediate person transfers radioactive material in a device for use pursuant to the general license contained in WAC 246-233-020(4);

(ii) Furnish a copy of the general license contained in the United States Nuclear Regulatory Commission's, agreement state's, or licensing state's regulation equivalent to WAC 246-233-020(4), or alternatively, furnish a copy of the general license contained in WAC 246-233-020(4) to each person to whom, directly or through an intermediate person, is transferred radioactive material in a device for use pursuant to the general license of the United States Nuclear Regulatory Commission, the agreement state or the licensing state. If a copy of the general license in WAC 246-233-020(4) is furnished to such a person, it shall be accompanied by a note explaining that the use of the device is regulated by the United States Nuclear Regulatory Commission, agreement state or licensing state under requirements substantially the same as those in WAC 246-233-020(4);

(iii) Report to the department all transfers of such devices to persons for use under the general license in WAC 246-233-020(4). Such report shall identify each general licensee by name and address, an individual by name and/or position who may constitute a point of contact between the department and the general licensee, the type and model number of device transferred, and the quantity and type of radioactive material contained in the device. If one or more intermediate persons will temporarily possess the device at the intended place of use prior to its possession by the user, the report shall include identification of each intermediate person by name, address, contact, and relationship to the intended user. If no transfers have been made to persons generally licensed under WAC 246-233-020(4) during the reporting period, the report shall so indicate. The report shall cover each calendar quarter and shall be filed within thirty days thereafter.

(iv) Reports to other departments.

(A) Report to the United States Nuclear Regulatory Commission all transfers of such devices to persons for use under the United States Nuclear Regulatory Commission general license in Section 31.5 of 10 CFR Part 31.

(B) Report to the responsible department all transfers of devices manufactured and distributed pursuant to subsection (4) of this section for use under a general license in that state's regulations equivalent to WAC 246-233-020(4).

(C) Such reports shall identify each general licensee by name and address, an individual by name and/or position who may constitute a point of contact between the department and the general licensee, the type and model of the device transferred, and the quantity and type of radioactive material contained in the device. If one or more intermediate persons will temporarily possess the device at the intended place of use prior to its possession by the user, the report shall include identification of each intermediate person by name, address, contact, and relationship to the intended user. The report shall be submitted within thirty days after the end of each calendar quarter in which such a device is transferred to the generally licensed person.

(D) If no transfers have been made to United States Nuclear Regulatory Commission licensees during the reporting period, this information shall be reported to the United States Nuclear Regulatory Commission.

(E) If no transfers have been made to general licensees within a particular state during the reporting period, this information shall be reported to the responsible department upon request of the department.

(v) Keep records showing the name, address and the point of contact for each general licensee to whom the person directly or through an intermediate person transfers radioactive material in devices for use pursuant to the general license provided in WAC 246-233-020(4), or equivalent regulations of the United States Nuclear Regulatory Commission, an agreement state or a licensing state. The records shall show the date of each transfer, the radionuclide and the quantity of radioactivity in each device transferred, the identity of any intermediate person, and compliance with the report requirements of paragraph (4)(d) of this section.

(5) *Special requirements for the manufacture, assembly or repair of luminous safety devices for use in aircraft.* An application for a specific license to manufacture, assemble or repair luminous safety devices containing tritium or promethium-147 for use in aircraft for distribution to persons generally licensed under WAC 246-233-020(5) will be approved subject to the following conditions:

(a) The applicant satisfies the general requirements specified in WAC 246-235-020; and

(b) The applicant satisfies the requirements of Sections 32.53, 32.54, 32.55, 32.56, 32.101 of 10 CFR Part 32 or their equivalent.

(6) *Special requirements for license to manufacture calibration sources containing americium-241, plutonium or radium-226 for distribution to persons generally licensed under WAC 246-233-020(7).* An application for a specific license to manufacture calibration and reference sources containing americium-241, plutonium or radium-226 to persons generally licensed under WAC 246-233-020(7) will be approved subject to the following conditions:

(a) The applicant satisfies the general requirement of WAC 246-235-020; and

(b) The applicant satisfies the requirements of Sections 32.57, 32.58, 32.59, 32.102 of 10 CFR Part 32 and Section 70.39 of 10 CFR Part 70 or their equivalent.

(7) *Manufacture and distribution of radioactive material for certain in vitro clinical or laboratory testing under general license.* An application for a specific license to manufacture or distribute radioactive material for use under the general license of WAC 246-233-020(8) will be approved if:

(a) The applicant satisfies the general requirements specified in WAC 246-235-020;

(b) The radioactive material is to be prepared for distribution in prepackaged units of:

(i) Iodine-125 in units not exceeding 10 microcuries each;

(ii) Iodine-131 in units not exceeding 10 microcuries each;

(iii) Carbon-14 in units not exceeding 10 microcuries each;

(iv) Hydrogen-3 (tritium) in units not exceeding 50 microcuries each;

(v) Iron-59 in units not exceeding 20 microcuries each;

(vi) Cobalt-57 in units not exceeding 10 microcuries each;

(vii) Selenium-75 in units not exceeding 10 microcuries each;

(viii) Mock Iodine-125 in units not exceeding 0.05 microcurie of iodine-129 and 0.005 microcurie of americium-241 each.

(c) Each prepackaged unit bears a durable, clearly visible label:

(i) Identifying the radioactive contents as to chemical form and radionuclide, and indicating that the amount of radioactivity does not exceed 10 microcuries of iodine-125, iodine-131, carbon-14, cobalt-57, or selenium-75; 50 microcuries of hydrogen-3 (tritium); 20 microcuries of iron-59; or Mock Iodine-125 in units not exceeding 0.05 microcurie of iodine-129 and 0.005 microcurie of americium-241 each; and

(ii) Displaying the radiation caution symbol described in WAC 246-221-120 (1)(a) and the words, "CAUTION, RADIOACTIVE MATERIAL," and "Not for internal or external use in humans or animals."

(d) One of the following statements, as appropriate, or a substantially similar statement which contains the information called for in one of the following statements, appears on a label affixed to each prepackaged unit or appears in a leaflet or brochure which accompanies the package:

(i) This radioactive material may be received, acquired, possessed and used only by physicians, veterinarians, clinical laboratories or hospitals and only for *in vitro* clinical or laboratory tests not involving internal or external administration of the material, or the radiation therefrom, to human beings or animals. Its receipt, acquisition, possession, use and transfer are subject to the regulations and a general license of the United States Nuclear Regulatory Commission or of a state with which the commission has entered into an agreement for the exercise of regulatory authority.

.....
Name of manufacturer

(ii) This radioactive material may be received, acquired, possessed and used only by physicians, veterinarians, clinical laboratories or hospitals and only for *in vitro* clinical or laboratory tests not involving internal or external administration of the material, or the radiation therefrom, to human beings or animals. Its receipt, acquisition, possession, use and transfer are subject to the regulations and a general license of a licensing state.

.....
Name of manufacturer

(e) The label affixed to the unit, or the leaflet or brochure which accompanies the package, contains adequate information as to the precautions to be observed in handling and storing such radioactive material. In the case of the Mock Iodine-125 reference or calibration source, the information accompanying the source must also contain directions to the licensee regarding the waste disposal requirements set out in WAC 246-221-170 of these regulations.

(8) *Licensing the manufacture and distribution of ice detection devices.* An application for a specific license to manufacture and distribute ice detection devices to persons generally licensed under WAC 246-233-020(9) will be approved subject to the following conditions:

(a) The applicant satisfies the general requirements of WAC 246-235-020; and

(b) The criteria of Sections 32.61, 32.62, 32.103 of 10 CFR Part 32 are met.

(9) *Manufacture and distribution of radiopharmaceuticals containing radioactive material for medical use under group licenses.* An application for a specific license to manufacture and distribute radiopharmaceuticals containing radioactive material for use by persons licensed pursuant to WAC 246-235-080(3) for the uses listed in Group I, Group II, Group IV, or Group V of WAC 246-235-120, Schedule A, will be approved if:

(a) The applicant satisfies the general requirements specified in WAC 246-235-020 of this part;

(b) The applicant submits evidence that:

(i) The radiopharmaceutical containing radioactive material will be manufactured, labeled and packaged in accordance with the Federal Food, Drug and Cosmetic Act or the Public Health Service Act, such as a new drug application (NDA) approved by the United States Food and Drug Administration (FDA), a biologic product license issued by FDA or a "notice of claimed investigational exemption for a new drug" (IND) that has been accepted by the FDA; or

(ii) The manufacture, compounding and distribution of the radiopharmaceutical containing radioactive material is not subject to the Federal Food, Drug and Cosmetic Act and the Public Health Service Act;

(c) The applicant submits information on the radionuclide, chemical and physical form, packaging including maximum activity per package, and shielding provided by the packaging of the radioactive material which is appropriate for safe handling and storage of radiopharmaceuticals by group licensees; and

(d) The label affixed to each package of the radiopharmaceutical contains information on the radionuclide, quantity and date of assay, and the label affixed to each package, or the leaflet or brochure which accompanies each package, contains a statement that the radiopharmaceutical is licensed by the department for distribution to persons licensed pursuant to WAC 246-235-080(3) and 246-235-120 Schedule A, Group I, Group II, Group IV, and Group V, as appropriate, or under equivalent regulations of the United States Nuclear Regulatory Commission, an agreement state or a licensing state. The labels, leaflets or brochures required by subsection (9) of this section are in addition to the labeling required by the Food and Drug Administration (FDA) and they may be separate from or, with the approval of FDA, may be combined with the labeling required by FDA.

(10) *Manufacture and distribution of generators or reagent kits for preparation of radiopharmaceuticals containing radioactive material.* An application for a specific license to manufacture and distribute generators or reagent kits containing radioactive material for preparation of radiopharmaceuticals by persons licensed pursuant to WAC 246-235-080(3) for the uses listed in Group III of WAC 246-235-120, Schedule A will be approved if:

(a) The applicant satisfies the general requirements specified in WAC 246-235-020;

(b) The applicant submits evidence that:

(i) The generator or reagent kit is to be manufactured, labeled and packaged in accordance with the Federal Food, Drug and Cosmetic Act or the Public Health Service Act, such as a new drug application (NDA) approved by the Food

and Drug Administration (FDA), a biologic product license issued by FDA, or a "Notice of claimed investigational exemption for a new drug" (IND) that has been accepted by the FDA; or

(ii) The manufacture and distribution of the generator or reagent kit are not subject to the Federal Food, Drug and Cosmetic Act and the Public Health Service Act;

(c) The applicant submits information on the radionuclide, chemical and physical form, packaging including maximum activity per package, and shielding provided by the packaging of the radioactive material contained in the generator or reagent kit;

(d) The label affixed to the generator or reagent kit contains information on the radionuclide, quantity, and date of assay; and

(e) The label affixed to the generator or reagent kit, or the leaflet or brochure which accompanies the generator or reagent kit; contains:

(i) Adequate information, from a radiation safety standpoint, on the procedures to be followed and the equipment and shielding to be used in eluting the generator or processing radioactive material with the reagent kit; and

(ii) A statement that this generator or reagent kit (as appropriate) is approved for use by persons licensed by the department pursuant to WAC 246-235-080(3) and Group III of WAC 246-235-120, Schedule A, or under equivalent regulations of the United States Nuclear Regulatory Commission, an agreement state or a licensing state. The labels, leaflets or brochures required by subsection (10) of this section are in addition to the labeling required by FDA and they may be separate from or, with the approval of FDA, may be combined with the labeling required by FDA.

Note: Although the department does not regulate the manufacture and distribution of reagent kits that do not contain radioactive material, it does regulate the use of such reagent kits for the preparation of radiopharmaceuticals containing radioactive material as part of its licensing and regulation of the users of radioactive material. Any manufacturer of reagent kits that do not contain radioactive material who desires to have reagent kits approved by the department for use by persons licensed pursuant to WAC 246-235-080(3) and Group III of WAC 246-235-120 Schedule A may submit the pertinent information specified in subsection (10) of this section.

(11) *Manufacture and distribution of sources or devices containing radioactive material for medical use.* An application for a specific license to manufacture and distribute sources and devices containing radioactive material to persons licensed pursuant to WAC 246-235-080(3) for use as a calibration or reference source or for the uses listed in Group VI of WAC 246-235-120 Schedule A of this part will be approved if:

(a) The applicant satisfies the general requirements in WAC 246-235-020 of this part;

(b) The applicant submits sufficient information regarding each type of source or device pertinent to an evaluation of its radiation safety, including:

(i) The radioactive material contained, its chemical and physical form and amount;

(ii) Details of design and construction of the source or device;

(iii) Procedures for, and results of, prototype tests to demonstrate that the source or device will maintain its

integrity under stresses likely to be encountered in normal use and accidents;

(iv) For devices containing radioactive material, the radiation profile of a prototype device;

(v) Details of quality control procedures to assure that production sources and devices meet the standards of the design and prototype tests;

(vi) Procedures and standards for calibrating sources and devices;

(vii) Legend and methods for labeling sources and devices as to their radioactive content; and

(viii) Instructions for handling and storing the source or device from the radiation safety standpoint, these instructions are to be included on a durable label attached to the source or device or attached to a permanent storage container for the source or device: *Provided*, That instructions which are too lengthy for such label may be summarized on the label and printed in detail on a brochure which is referenced on the label.

(c) The label affixed to the source or device, or to the permanent storage container for the source or device, contains information on the radionuclide, quantity and date of assay, and a statement that the named source or device is licensed by the department for distribution to persons licensed pursuant to WAC 246-235-080(3) and Group VI of WAC 246-235-120 Schedule A or under equivalent regulations of the United States Nuclear Regulatory Commission, an agreement state or a licensing state: *Provided*, That such labeling for sources which do not require long term storage (e.g., gold-198 seeds) may be on a leaflet or brochure which accompanies the source.

(d) In the event the applicant desires that the source or device be required to be tested for leakage of radioactive material at intervals longer than six months, the applicant shall include in the application sufficient information to demonstrate that such longer interval is justified by performance characteristics of the source or device or similar sources or devices and by design features that have a significant bearing on the probability or consequences of leakage of radioactive material from the source.

(e) In determining the acceptable interval for test of leakage of radioactive material, the department will consider information that includes, but is not limited to:

- (i) Primary containment (source capsule);
- (ii) Protection of primary containment;
- (iii) Method of sealing containment;
- (iv) Containment construction materials;
- (v) Form of contained radioactive material;
- (vi) Maximum temperature withstood during prototype tests;

(vii) Maximum pressure withstood during prototype tests;

(viii) Maximum quantity of contained radioactive material;

(ix) Radiotoxicity of contained radioactive material; and

(x) Operating experience with identical sources or devices or similarly designed and constructed sources or devices.

(12) *Requirements for license to manufacture and distribute industrial products containing depleted uranium for mass-volume applications.*

(a) An application for a specific license to manufacture industrial products and devices containing depleted uranium for use pursuant to WAC 246-233-010(4) or equivalent regulations of the United States Nuclear Regulatory Commission or an agreement state will be approved if:

(i) The applicant satisfies the general requirements specified in WAC 246-235-020;

(ii) The applicant submits sufficient information relating to the design, manufacture, prototype testing, quality control procedures, labeling or marking, proposed uses and potential hazards of the industrial product or device to provide reasonable assurance that possession, use or transfer of the depleted uranium in the product or device is not likely to cause any individual to receive in any period of one calendar quarter a radiation dose in excess of ten percent of the limits specified in WAC 246-221-010(1); and

(iii) The applicant submits sufficient information regarding the industrial product or device and the presence of depleted uranium for a mass-volume application in the product or device to provide reasonable assurance that unique benefits will accrue to the public because of the usefulness of the product or device.

(b) In the case of an industrial product or device whose unique benefits are questionable, the department will approve an application for a specific license under subsection (12) of this section only if the product or device is found to combine a high degree of utility and low probability of uncontrolled disposal and dispersal of significant quantities of depleted uranium into the environment.

(c) The department may deny any application for a specific license under subsection (12) of this section if the end use(s) of the industrial product or device cannot be reasonably foreseen.

(d) Each person licensed pursuant to paragraph (12)(a) of this section shall:

(i) Maintain the level of quality control required by the license in the manufacture of the industrial product or device, and in the installation of the depleted uranium into the product or device;

(ii) Label or mark each unit to:

(A) Identify the manufacturer of the product or device and the number of the license under which the product or device was manufactured, the fact that the product or device contains depleted uranium, and the quantity of depleted uranium in each product or device; and

(B) State that the receipt, possession, use and transfer of the product or device are subject to a general license or the equivalent and the regulations of the United States Nuclear Regulatory Commission or of an agreement state;

(iii) Assure that the depleted uranium before being installed in each product or device has been impressed with the following legend clearly legible through any plating or other covering: "Depleted uranium";

(iv) Furnish to each person to whom depleted uranium in a product or device is transferred for use pursuant to the general license contained in WAC 246-233-010(4) or its equivalent:

(A) A copy of the general license contained in WAC 246-233-010(4) and a copy of department Form RHF-20; or

(B) A copy of the general license contained in the United States Nuclear Regulatory Commission's or agreement state's regulation equivalent to WAC 246-233-010(4)

and a copy of the United States Nuclear Regulatory Commission's or agreement state's certificate, or alternatively, furnish a copy of the general license contained in WAC 246-233-010(4) and a copy of department Form RHF-20 with a note explaining that use of the product or device is regulated by the United States Nuclear Regulatory Commission or an agreement state under requirements substantially the same as those in WAC 246-233-010(4).

(v) Report to the department all transfers of industrial products or devices to persons for use under the general license in WAC 246-233-010(4). Such report shall identify each general licensee by name and address, an individual by name and/or position who may constitute a point of contact between the department and the general licensee, the type and model number of device transferred, and the quantity of depleted uranium contained in the product or device. The report shall be submitted within thirty days after the end of each calendar quarter in which such a product or device is transferred to the generally licensed person. If no transfers have been made to persons generally licensed under chapter 246-233 WAC during the reporting period, the report shall so indicate;

(vi) Provide certain other reports as follows:

(A) Report to the United States Nuclear Regulatory Commission all transfers of industrial products or devices to persons for use under the United States Nuclear Regulatory Commission general license in Section 40.25 of 10 CFR Part 40;

(B) Report to the responsible department all transfers of devices manufactured and distributed pursuant to subsection (12) of this section for use under a general license in that state's regulations equivalent to WAC 246-233-010(4);

(C) Such report shall identify each general licensee by name and address, an individual by name and/or position who may constitute a point of contact between the department and the general licensee, the type and model number of the device transferred, and the quantity of depleted uranium contained in the product or device. The report shall be submitted within thirty days after the end of each calendar quarter in which such product or device is transferred to the generally licensed person;

(D) If no transfers have been made to United States Nuclear Regulatory Commission licensees during the reporting period, this information shall be reported to the United States Nuclear Regulatory Commission;

(E) If no transfers have been made to general licensees within a particular agreement state during the reporting period, this information shall be reported to the responsible department; and

(vii) Keep records showing the name, address and point of contact for each general licensee to whom the person transfers depleted uranium in industrial products or devices for use pursuant to the general license provided in WAC 246-233-010(4) or equivalent regulations of the United States Nuclear Regulatory Commission or of an agreement state. The records shall be maintained for a period of two years and shall show the date of each transfer, the quantity of depleted uranium in each product or device transferred, and compliance with the report requirements of this section.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-100, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-100, filed

12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-22-110, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-110, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-076.]

WAC 246-235-110 Special requirements for issuance of specific licenses for source material milling. In addition to the requirements set forth in WAC 246-235-020, a specific license for source material milling will be issued if the applicant submits to the department a satisfactory application as described herein and meets the other conditions specified below:

(1) An application for a license to receive title to, receive, possess, and use source material for milling or byproduct material as defined in WAC 246-220-010 shall address the following:

- (a) Description of the proposed project or action.
- (b) Area/site characteristics including geology, demography, topography, hydrology and meteorology.
- (c) Radiological and nonradiological impacts of the proposed project or action, including waterway and ground-water impacts.
- (d) Environmental effects of accidents.
- (e) Tailings disposal and decommissioning.
- (f) Site and project alternatives.
- (g) Description of how the provisions of chapter 246-252 WAC shall be met.

(2) Pursuant to WAC 246-235-080(6)(a)(i) the applicant shall not commence construction of the project until the department has weighed the environmental, economic, technical, and other benefits against the environmental costs and has concluded that the issuance of the license is appropriate.

(3) Prior to issuance of a license, a public hearing shall be held. The scope shall extend to the question of license issuance and the adequacy of the reclamation, disposal, decommissioning, and decontamination plans.

(4) At least one full year prior to any major site construction, a preoperational monitoring program shall be conducted to provide complete baseline data on a milling site and its environs. Throughout the construction and operating phases of the mill, an operational monitoring program shall be conducted to measure or evaluate compliance with applicable standards and regulations; to evaluate performance of control systems and procedures; to evaluate environmental impacts of operation; and to detect potential long-term effects.

(5) Prior to issuance of the license, the mill operator shall establish financial surety arrangements consistent with the requirements of WAC 246-252-030.

(6) The applicant shall provide procedures describing the means employed to meet the following requirements during the operational phase of any project.

(a) Milling operations shall be conducted so that all effluent releases are reduced to as low as is reasonably achievable below the limits of chapter 246-221 WAC.

(b) The mill operator shall conduct at least daily inspection of any tailings or waste retention systems. Records of such inspections shall be maintained for review by the department.

(c) The mill operator shall immediately notify the department of the following:

(i) Any failure in a tailings or waste retention system which results in a release of tailings or waste into unrestricted areas; and

(ii) Any unusual conditions (conditions not contemplated in the design of the retention system) which if not corrected could lead to failure of the system and result in a release of tailings or waste into unrestricted areas.

(7) An application for a license to own, receive, possess and use byproduct material as defined in WAC 246-220-010 shall contain proposed specifications relating to the emissions control and disposition of the byproduct material to achieve the requirements and objectives set forth in the criteria listed in WAC 246-252-030.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-110, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-22-150, filed 12/11/86. Statutory Authority: Chapter 70.121 RCW. 81-16-031 (Order 1683), § 402-22-150, filed 7/28/81.]

WAC 246-235-120 Schedule A groups of medical uses of radioactive material (ref. WAC 246-235-080(3) and 246-235-100(9)). (1) *Group I.* Use of prepared radiopharmaceuticals for certain diagnostic studies involving measurements of uptake, dilution and excretion. This group does not include imaging or localization studies.

(a) Any radioactive material in a radiopharmaceutical and for a diagnostic use involving measurements of uptake, dilution or excretion for which a "Notice of claimed investigational exemption for a new drug" (IND) has been accepted by the Food and Drug Administration (FDA) or for which a "New drug application" (NDA) is in effect.

(b) The provisions of (a) of this subsection notwithstanding, no radioactive material in gaseous form or for use as an aerosol is permitted by this subsection except as specifically authorized in a license.

(2) *Group II.* Use of prepared radiopharmaceuticals for diagnostic imaging and localization studies.

(a) Any radioactive material in a radiopharmaceutical and for a diagnostic use involving imaging or localizing for which a "Notice of claimed investigational exemption for a new drug" (IND) has been accepted by the Food and Drug Administration (FDA) or for which a "New drug application" (NDA) is in effect;

(b) The provisions of (a) of this subsection notwithstanding, no radioactive material in gaseous form or for use as an aerosol is permitted by this subsection except as specifically authorized by a license or subsection (3)(b) of this section.

(3) *Group III.* Use of generators and reagent kits for the preparation and use of radiopharmaceuticals containing radioactive material for diagnostic imaging and localization studies.

(a) Any generator or reagent kit for preparation and diagnostic use of a radiopharmaceutical containing radioactive material for which generator or reagent kit a "Notice of claimed investigational exemption of a new drug" (IND) has been accepted by the Food and Drug Administration (FDA) or for which a "New drug application" (NDA) is in effect.

(b) The provisions of (a) of this subsection notwithstanding, no generator or reagent kit is authorized for

preparation of any gaseous form or aerosol of a radioactive material, except Technetium-99m as sodium pentetate as an aerosol for pulmonary function studies when used only with an approved and shielded delivery system, and disposed in accordance with applicable requirements, or as specifically authorized in a license.

(4) *Group IV.* Use of prepared radiopharmaceuticals for certain therapeutic uses that do not normally require hospitalization for purposes of radiation safety.

(a) Iodine-131 as iodide for treatment of hyperthyroidism and cardiac dysfunction;

(b) Phosphorus-32 as soluble phosphate for treatment of polycythemia vera, leukemia and bone metastases;

(c) Phosphorus-32 as colloidal chromic phosphate for intracavitary treatment of malignant effusions;

(d) Any radioactive material in a radiopharmaceutical and for a therapeutic use not normally requiring hospitalization for purposes of radiation safety for which a "Notice of claimed investigational exemption for a new drug" (IND) has been accepted by the Food and Drug Administration (FDA) or for which a "New drug application" (NDA) is in effect.

(5) *Group V.* Use of prepared radiopharmaceuticals for certain therapeutic uses that normally require hospitalization for purposes of radiation safety.

(a) Gold-198 as colloid for intracavitary treatment of malignant effusions;

(b) Iodine-131 as iodide for treatment of thyroid carcinoma;

(c) Any radioactive material in a radiopharmaceutical and for a therapeutic use normally requiring hospitalization for radiation safety reasons for which a "Notice of claimed investigational exemption for a new drug" (IND) has been accepted by the Food and Drug Administration (FDA) or for which a "New drug application" (NDA) is in effect.

(6) *Group VI.* Use of sources and devices containing radioactive material for certain medical uses.

(a) Americium-241 as a sealed source in a device for bone mineral analysis;

(b) Cesium-137 encased in needles and applicator cells for topical, interstitial, and intracavitary treatment of cancer;

(c) Cobalt-60 encased in needles and applicator cells for topical, interstitial, and intracavitary treatment of cancer;

(d) Gold-198 as seeds for interstitial treatment of cancer;

(e) Iodine-125 as a sealed source in a device for bone mineral analysis;

(f) Gadolinium-153 as a sealed source in a device for bone mineral analysis;

(g) Iridium-192 as seeds encased in nylon ribbon for interstitial treatment of cancer;

(h) Strontium-90 sealed in an applicator for treatment of superficial eye conditions; and

(i) Iodine-125 as seeds for interstitial treatment of cancer.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-120, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-22-200, filed 12/11/86. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-22-200, filed 12/8/80. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-200, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-260.]

WAC 246-235-130 Appendix—General laboratory rules for safe use of unsealed sources. (1) In addition to the requirements set forth in WAC 246-235-020, a specific licensee who uses unsealed, unplated and/or liquid sources should possess adequate facilities including ventilation systems which are compatible with the proposed uses: and,

(2) Possess, use, and store, radioactive materials in accordance with, but not limited to, the following:

(a) Receive, handle, and store radioactive materials only at specifically designated locations within the applicant's facility. Vessels containing radioactive material must be labeled as required by chapter 246-221 WAC.

(b) Wear disposable gloves at all times when handling dispersible radioactive material or potentially contaminated items.

(c) Wear personnel monitoring devices (film badge and/or TLD), when required, at all times when working with, or in the vicinity of, radioactive materials. Extremity doses shall be considered in evaluating the need for separate extremity dosimeters. Calculations based on whole body badge results for photon emitters may be used in lieu of separate extremity dosimeters. Extremity dosimetry should be worn when working with millicurie or greater quantities of material (excluding low energy beta emitters and pure alpha emitters). Monitoring devices, when not in use, shall be stored only in a designated low-background area.

(d) Use remote tools, lead shields, lead-glass shields, and/or plexiglass shields as appropriate.

(e) Prohibit eating, chewing, drinking, smoking, and application of cosmetics in any area where radioactive material is used or stored.

(f) Do not store food, drink or personal effects in any area, container, or refrigerator designated for radioactive materials use or storage.

(g) Do not pipette radioactive materials or perform any similar operation by employing mouth suction.

(h) Use disposable absorbent material with impervious backing to cover work surfaces where spillage is possible.

(i) Properly dress and protect open wounds on exposed body surfaces before working with radioactive materials.

(j) Wear laboratory coats when working with radioactive material. Potentially contaminated laboratory coats shall not be worn outside the immediate work area.

(k) Nuclides in volatile form, or with a high potential for volatilization should be used only in areas with ventilation systems which conform to the requirements of WAC 246-221-040 and 246-221-070.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-130, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-22-240, filed 12/11/86; 83-19-050 (Order 2026), § 402-22-240, filed 9/16/83.]

WAC 246-235-140 Schedule B, limits for broad licenses. (See also WAC 246-235-090)

Radioactive Material	Col. I curies	Col. II curies
Antimony-122	1	0.01
Antimony-124	1	0.01
Antimony-125	1	0.01
Arsenic-73	10	0.1

Arsenic-74	1	0.01
Arsenic-76	1	0.01
Arsenic-77	10	0.1
Barium-131	10	0.1
Barium-140	1	0.01
Beryllium-7	10	0.1
Bismuth-210	0.1	0.001
Bromine-82	10	0.1
Cadmium-109	1	0.01
Cadmium-115m	1	0.01
Cadmium-115	10	0.1
Calcium-45	1	0.01
Calcium-47	10	0.1
Carbon-14	100	1.
Cerium-141	10	0.1
Cerium-143	10	0.1
Cerium-144	0.1	0.001
Cesium-131	100	1.
Cesium-134m	100	1.
Cesium-134	0.1	0.001
Cesium-135	1	0.01
Cesium-136	10	0.1
Cesium-137	0.1	0.001
Chlorine-36	1	0.01
Chlorine-38	100	1.
Chromium-51	100	1.
Cobalt-57	10	0.1
Cobalt-58m	100	1.
Cobalt-58	1	0.01
Cobalt-60	0.1	0.001
Copper-64	10	0.1
Dysprosium-165	100	1.
Dysprosium-166	10	0.1
Erbium-169	10	0.1
Erbium-171	10	0.1
Europium-152 (9.2h)	10	0.1
Europium-152 (13 y)	0.1	0.001
Europium-154	0.1	0.001
Europium-155	1	0.01
Fluorine-18	100	1.
Gadolinium-153	1	0.01
Gadolinium-159	10	0.1
Gallium-72	10	0.1
Germanium-71	100	1.
Gold-198	10	0.1
Gold-199	10	0.1
Hafnium-181	1	0.01
Holmium-166	10	0.1
Hydrogen-3	100	1.
Indium-113m	100	1.
Indium-114m	1	0.01
Indium-115m	100	1.
Indium-115	1	0.01
Iodine-125	0.1	0.001
Iodine-126	0.1	0.001
Iodine-129	0.1	0.001
Iodine-131	0.1	0.001
Iodine-132	10	0.1
Iodine-133	1	0.01
Iodine-134	10	0.1
Iodine-135	1	0.01
Iridium-192	1	0.01
Iridium-194	10	0.1
Iron-55	10	0.1
Iron-59	1	0.01
Krypton-85	100	1.
Krypton-87	10	0.1
Lanthanum-140	1	0.01
Lutetium-177	10	0.1
Manganese-52	1	0.01
Manganese-54	1	0.01
Manganese-56	10	0.1
Mercury-197m	10	0.1
Mercury-197	10	0.1
Mercury-203	1	0.01
Molybdenum-99	10	0.1

Neodymium-147	10	0.1
Neodymium-149	10	0.1
Nickel-59	10	0.1
Nickel-63	1	0.01
Nickel-65	10	0.1
Niobium-93m	1	0.01
Niobium-95	1	0.01
Niobium-97	100	1.
Osmium-185	1	0.01
Osmium-191m	100	1.
Osmium-191	10	0.1
Osmium-193	10	0.1
Palladium-103	10	0.1
Palladium-109	10	0.1
Phosphorus-32	1	0.01
Platinum-191	10	0.1
Platinum-193m	100	1.
Platinum-193	10	0.1
Platinum-197m	100	1.
Platinum-197	10	0.1
Polonium-210	0.01	0.0001
Potassium-42	1	0.01
Praseodymium-142	10	0.1
Praseodymium-143	10	0.1
Promethium-147	1	0.01
Promethium-149	10	0.1
Radium-226	0.01	0.0001
Rhenium-186	10	0.1
Rhenium-188	10	0.1
Rhodium-103m	1,000	10.
Rhodium-105	10	0.1
Rubidium-86	1	0.01
Rubidium-87	1	0.01
Ruthenium-97	100	1.
Ruthenium-103	1	0.01
Ruthenium-105	10	0.1
Ruthenium-106	0.1	0.001
Samarium-151	1	0.01
Samarium-153	10	0.1
Scandium-46	1	0.01
Scandium-47	10	0.1
Scandium-48	1	0.01
Selenium-75	1	0.01
Silicon-31	10	0.1
Silver-105	1	0.01
Silver-110m	0.1	0.001
Silver-111	10	0.1
Sodium-22	0.1	0.001
Sodium-24	1	0.01
Strontium-85m	1,000	10.
Strontium-85	1	0.01
Strontium-89	1	0.01
Strontium-90	0.01	0.0001
Strontium-91	10	0.1
Strontium-92	10	0.1
Sulphur-35	10	0.1
Tantalum-182	1	0.01
Technetium-96	10	0.1
Technetium-97m	10	0.1
Technetium-97	10	0.1
Technetium-99m	100	1.
Technetium-99	1	0.01
Tellurium-125m	1	0.01
Tellurium-127m	1	0.01
Tellurium-127	10	0.1
Tellurium-129m	1	0.01
Tellurium-129	100	1.
Tellurium-131m	10	0.1
Tellurium-132	1	0.01
Terbium-160	1	0.01
Thallium-200	10	0.1
Thallium-201	10	0.1
Thallium-202	10	0.1
Thallium-204	1	0.01
Thulium-170	1	0.01
Thulium-171	1	0.01

Tin-113	1	0.01
Tin-125	1	0.01
Tungsten-181	1	0.01
Tungsten-185	1	0.01
Tungsten-187	10	0.1
Vanadium-48	1	0.01
Xenon-131m	1,000	10.
Xenon-133	100	1.
Xenon-135	100	1.
Ytterbium-175	10	0.1
Yttrium-90	1	0.01
Yttrium-91	1	0.01
Yttrium-92	10	0.1
Yttrium-93	1	0.01
Zinc-65	1	0.01
Zinc-69m	10	0.1
Zinc-69	100	1.
Zirconium-93	1	0.01
Zirconium-95	1	0.01
Zirconium-97	1	0.01
Any radioactive material other than source material, special nuclear material, or alpha emitting radioactive material not listed above.	0.1	0.001

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-235-140, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-235-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-22-250, filed 11/30/79, effective 1/1/80. Formerly WAC 402-20-270.]

**Chapter 246-239 WAC
RADIATION PROTECTION—NUCLEAR
MEDICINE**

WAC

246-239-001	Purpose and scope.
246-239-010	Definitions.
246-239-020	Radiation safety committee.
246-239-025	Notifications, records, and reports of radiopharmaceutical misadministrations.
246-239-030	Personnel monitoring.
246-239-040	Radiopharmaceuticals.
246-239-050	Radionuclide generators.
246-239-060	Laboratory safety.
246-239-070	Surveys.
246-239-080	Calibration and reference sources.
246-239-090	Instrumentation.
246-239-100	Radioactive gases.

WAC 246-239-001 Purpose and scope. The provisions of this chapter apply to all licensees utilizing radioactive materials in the practice of nuclear medicine and establish radiation safety requirements for those licensees. These provisions are in addition to, and not in substitution for, other applicable provisions of these regulations.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-010, filed 9/16/83.]

WAC 246-239-010 Definitions. (1) "Diagnostic clinical procedures manual" means a collection of written procedures that describes each method (and other instructions and precautions) by which the licensee performs diagnostic clinical procedures; where each diagnostic clinical procedure

has been approved by the authorized user and includes the radiopharmaceutical, dosage, and route of administration.

(2) "Nuclear medicine" means the intentional internal or external administration of unsealed radioactive material to human beings.

(3) "Nuclear medicine technologist" means any individual who performs nuclear medical procedures under the supervision of a physician licensed pursuant to chapter 246-235 WAC.

(4) "Prescribed dosage" means the quantity of radiopharmaceutical activity as documented:

(a) In a written directive; or

(b) Either in the diagnostic clinical procedures manual or in any appropriate record in accordance with the directions of the authorized user for diagnostic procedures.

(5) "Radiopharmaceutical misadministration" means the administration of:

(a) A radiopharmaceutical dosage greater than 30 microcuries of sodium iodide I-125 or I-131:

(i) Involving the wrong patient or wrong radiopharmaceutical; or

(ii) When both the administered dosage differs from the prescribed dosage by more than twenty percent of the prescribed dosage, and the difference between the administered dosage and prescribed dosage exceeds 30 microcuries;

(b) A therapeutic radiopharmaceutical dosage, other than sodium iodide I-125 or I-131:

(i) Involving the wrong patient, wrong radiopharmaceutical, or wrong route of administration; or

(ii) When the administered dosage differs from the prescribed dosage by more than twenty percent of the prescribed dosage;

(c) A diagnostic radiopharmaceutical dosage, other than quantities greater than 30 microcuries of sodium iodide I-125 or I-131, both:

(i) Involving the wrong patient, wrong radiopharmaceutical, wrong route of administration, or when the administered dosage differs from the prescribed dosage; and

(ii) When the dose to the patient exceeds 5 rems effective dose equivalent or 50 rems dose equivalent to any individual organ.

(6) "Training" means instruction or experience acquired under the direct supervision of a physician, a certified/registered nuclear medicine technologist, and/or a qualified expert who has the necessary knowledge and training to advise personnel on radiation protection.

(7) "Written directive" means an order in writing for a specific patient, dated and signed by an authorized user prior to the administration of a radiopharmaceutical, containing the following information:

(a) For any administration of quantities greater than 30 microcuries of sodium iodide I-125 or I-131: The dosage;

(b) For a therapeutic administration of a radiopharmaceutical other than sodium iodide I-125 or I-131: The radiopharmaceutical, dosage, and route of administration.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-239-010, filed 2/21/92, effective 3/23/92; 91-15-112 (Order 184), § 246-239-010, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-030, filed 9/16/83.]

WAC 246-239-020 Radiation safety committee. (1)

Where required by license condition or pursuant to WAC 246-235-080(1), the radiation safety committee, shall meet at least once every six months. Where required by license condition, the committee shall meet at the frequency stated in the license or application. Such meetings shall be documented by written minutes and those minutes shall be maintained for inspection by the department for at least two years.

(2) Evaluation of the adequacy of the licensee's radiation safety program shall be conducted at least once each calendar year. Such evaluations may be performed by the radiation safety officer, a competent outside agent, or by qualified personnel at the licensee's own facility. These evaluations shall be documented, maintained for inspection by the department, and presented to the radiation safety committee for review and approval.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-239-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-050, filed 9/16/83.]

WAC 246-239-025 Notifications, records, and reports of radiopharmaceutical misadministrations. (1)

The licensee shall notify the department by telephone at (206) 682-5327 no later than the next calendar day after the discovery of a radiopharmaceutical misadministration.

(2) The licensee also shall notify the referring physician and the patient or the patient's responsible relative or guardian (hereinafter referred to as "the patient") of the radiopharmaceutical misadministration not later than twenty-four hours after its discovery, unless the referring physician personally informs the licensee either that the physician will inform the patient or that, based on medical judgment, telling the patient would be harmful. The licensee is not required to notify the patient without first consulting the referring physician. If the referring physician or patient cannot be reached within twenty-four hours, the licensee shall notify the patient as soon as possible thereafter. The licensee may not delay any appropriate medical care for the patient, including any necessary remedial care as a result of the radiopharmaceutical misadministration, because of any delay in notification.

(3) The licensee shall submit a written report to the department within fifteen days after discovery of the radiopharmaceutical misadministration. The written report must include the licensee's name; the prescribing physician's name; a brief description of the event; why the event occurred; the effect on the patient; what improvements are needed to prevent recurrence; actions taken to prevent recurrence; whether the licensee notified the patient, and if not, why not, and if the patient was notified, what information was provided to the patient. The report shall not include the patient's name or other identifying information.

(4) If the patient was notified, the licensee shall also furnish, within fifteen days after discovery of the radiopharmaceutical misadministration, a written report to the patient by sending either:

(a) A copy of the report that was submitted to the department; or

(b) A brief description of both the radiopharmaceutical misadministration and the consequences, as they may affect the patient, and a statement informing the patient that the report submitted to the department can be obtained from the licensee.

(5) Each licensee shall retain a record of each radiopharmaceutical misadministration for five years. The record shall contain the names of all individuals involved (including the physician, allied health personnel, the patient, and the patient's referring physician), the patient's Social Security number or identification number if one has been assigned, a brief description of the radiopharmaceutical misadministration, why it occurred, the effect on the patient, what improvements are needed to prevent recurrence, and the actions taken to prevent recurrence.

(6) Aside from the notification requirement, nothing in this section affects any rights or duties of licensees and physicians in relation to each other, patients, or the patient's responsible relatives or guardians.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-239-025, filed 2/21/92, effective 3/23/92.]

WAC 246-239-030 Personnel monitoring. In addition to the requirements of WAC 246-221-090 and the conditions of the license, extremity monitoring (such as TLD ring badges) shall be provided and used on a monthly exchange basis for those personnel who elute Tc 99^m/Mo 99 generators.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-239-030, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-090, filed 9/16/83.]

WAC 246-239-040 Radiopharmaceuticals. (1) Radioactive material to be administered to humans shall be the subject of an FDA-approved "new drug application" (NDA) or an FDA-accepted "notice of claimed investigational exemption for a new drug" (IND), unless otherwise stated in the license.

(2) Any licensee using radioactive material for clinical procedures other than those specified in the product labeling (package insert) shall comply with the product labeling regarding:

- (a) Chemical and physical form;
- (b) Route of administration; and
- (c) Dosage range.

(3) No licensee shall receive, possess, or use radioactive material as a radiopharmaceutical except when it has been:

(a) Manufactured in the form to be administered to the patient, and labeled, packaged, and distributed, in accordance with a specific license; or

(b) Prepared from reagent kits and/or radionuclide generators approved in accordance with WAC 246-235-080 (3)(b) and 246-235-100(10).

(4) The provisions of this part notwithstanding:

(a) No radioactive material in gaseous form or for use as an aerosol is permitted except Technetium-99m pentetate used as an aerosol for lung function studies, or as specifically authorized by license condition. Radioactive aerosols must be administered with a closed, shielded system that either is vented to the outside atmosphere through an air

exhaust or provides for collection and disposal of the aerosol; and

(b) No generator or reagent kit is authorized for preparation of any gaseous form or aerosol of the radioactive material, except as specifically authorized by license condition.

(5) Radioactive material to be administered to humans shall be assayed for activity to determine the dose within ten percent accuracy of the prescribed dose prior to being administered to patients.

(a) In the absence of a certificate from a supplier which specifies the activity of each dose, the license shall establish written procedures for the personnel to perform assays to an accuracy of ten percent of the prescribed dose prior to being administered to patients.

(b) The licensee shall maintain for inspection by the department, records of the results of each assay performed to determine the activity of each dose administered to a patient. Records shall be maintained for two years following performance of each assay.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-239-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-100, filed 9/16/83.]

WAC 246-239-050 Radionuclide generators. (1) Any licensee who uses generators and reagent kits shall elute the generator or process radioactive material with the reagent kit in accordance with instructions which are approved by the department, the United States Nuclear Regulatory Commission, an agreement state, or a licensing state, and are furnished by the manufacturer on the label attached to, or in the leaflet or brochure, which accompanies the generator or reagent kit.

(2) Tc-99m separated from Molybdenum 99 either by elution of a Molybdenum 99/Tc-99m generator or by an extraction process shall be tested to detect, and quantify Molybdenum 99 activity prior to administration to patients. The licensee shall not administer to patients Tc-99m containing more than 1.0 uCi of Molybdenum 99 per mCi of Tc-99m or more than 5.0 uCi of Molybdenum 99 per dose of Tc-99m at time of the administration. The limits for Molybdenum 99 contamination represent maximum values and Molybdenum 99 contamination should be kept as low as reasonably achievable below these limits.

(a) In the absence of a certificate from the supplier of Tc-99m which specifies the quantity of Molybdenum 99, the licensee shall establish written procedures for personnel performing tests to detect and quantify Molybdenum 99 contamination. These procedures shall include all necessary calculations and steps to be taken if activities of Molybdenum 99 in excess of the limits specified in this part are detected.

(b) Personnel performing tests to detect and quantify Molybdenum 99 contamination shall be given specific training in performing these tests prior to conducting such tests.

(c) The licensee shall maintain for inspection by the department, records of the results of each test performed to detect and quantify Molybdenum 99 contamination and records of training given to personnel performing these tests.

Records shall be maintained for two years following the performance of each test and the training of personnel.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-120, filed 9/16/83.]

WAC 246-239-060 Laboratory safety. In addition to those requirements found in WAC 246-235-130, the licensee shall utilize syringe shields or other shielding devices for all manipulations. Syringe shields should be used for injections whenever practicable.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-239-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-34-140, filed 12/11/86; 83-19-050 (Order 2026), § 402-34-140, filed 9/16/83.]

WAC 246-239-070 Surveys. In addition to applicable requirements found elsewhere in these regulations, and the license, each licensee shall:

(1) Monitor hands and clothing for contamination after each procedure, or before leaving the restricted area;

(2) Survey the laboratory work area for contamination after each procedure, or at the end of the day using instrumentation capable of measuring nanocurie amounts of activity. Survey documentation should include an area diagram or a description of the area or article and the instrumentation used. Such documentation shall be maintained for inspection by the department for two years.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-150, filed 9/16/83.]

WAC 246-239-080 Calibration and reference sources. (1) Any licensee who owns, receives, acquires, possesses, uses, or transfers calibration reference sources pursuant to the general license authorized in WAC 246-233-020(7) shall:

(a) Maintain a file or log identifying such sources, including isotope, amount, model and serial numbers, manufacturer, date of receipt, date of transfer, and to whom transferred (where applicable);

(b) Possess at any one time, and at any one location of storage or use, no more than five uCi of Am-241 and five uCi of Pu and five uCi of Ra-226 in such sources;

(c) Store such source(s), except when the source(s) is being used, in a closed container adequately designed and constructed to contain Americium-241, Plutonium, or Radium 226 which might otherwise escape during storage; and

(d) Not use such source(s) for any purpose other than the calibration of radiation detectors or the standardization of other sources.

(2) Any licensee who receives, possesses, or uses calibration and reference standards pursuant to the group licensing provisions of WAC 246-235-080 (3)(c):

(a) Shall conduct leak tests in accordance with WAC 246-235-080 (3)(d);

(b) Shall follow the radiation safety and handling instructions approved by the department, the United States Nuclear Regulatory Commission, and agreement state or a

licensing state and furnished by the manufacturer on the label attached to the source, or permanent container thereof, or in the leaflet or brochure that accompanies the source, and maintain such instruction in a legible and conveniently available form; and

(c) Shall conduct a quarterly physical inventory to account for all sources received and possessed. Records of the inventory shall be maintained for inspection by the department, and shall include, but not be limited to, the quantities and kinds of radioactive material, location of sources, and the date of inventory.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-239-080, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-170, filed 9/16/83.]

WAC 246-239-090 Instrumentation. (1) Instrumentation used to conduct surveys shall be appropriate for the nuclide(s) and radiation levels present.

(2) Portable and stationary survey instruments shall be calibrated at least once each calendar year, and after any repair using either approved procedures or by a facility specifically licensed to perform calibrations. Records shall be maintained for inspection by the department.

(3) An operational check utilizing an appropriate check source shall be conducted.

(4) Imaging systems shall have a flood performed daily when the system is used. In addition, mobile nuclear medicine services employing imaging systems which are moved from one facility to another shall perform a flood prior to use at each location. Bar phantoms shall be performed weekly. Records of such quality assurance for imaging systems, shall be maintained for inspection by the departments.

(5) Appropriate source(s) for calibration and reference of dose calibrators shall be used. Dose calibrators shall receive:

(a) Daily constancy checks;

(b) Quarterly linearity tests;

(c) Annual tests for accuracy; and

(d) Geometry tests upon installation and following major repair.

(6) Quality assurance procedures for dose calibrators found in subsection (5) of this section, excluding daily constancy checks shall be conducted by individuals qualified to perform these tests, and shall be documented for future inspection by the department.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-239-090, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-34-190, filed 9/16/83.]

WAC 246-239-100 Radioactive gases. (1) Licensees utilizing radioactive gases, such as Xenon-133 or Krypton-81m, shall have and use by January 1, 1984 a ventilation system adequate for such use, including an approved trap. Radioactive gas shall be disposed only as specifically authorized by the license.

(2) Licensees utilizing radioactive gases shall maintain emissions in accordance with limits specified in chapters

246-221 and 246-247 WAC. Verification shall be documented. Such verification may be made by calculation, air samples, or the use of constant monitoring instrumentation.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-239-100, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-239-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-34-210, filed 12/11/86; 83-19-050 (Order 2026), § 402-34-210, filed 9/16/83.]

Chapter 246-240 WAC

RADIATION PROTECTION—MEDICAL THERAPY

WAC

246-240-001	Scope.
246-240-010	Definitions.
246-240-020	Interstitial, intracavitary and superficial applications.
246-240-030	Teletherapy.
246-240-040	Special requirements for teletherapy licensees.
246-240-050	Notifications, records, and reports of therapy misadministrations.

WAC 246-240-001 Scope. The provisions of this chapter apply to all licensees who use sealed sources in the healing arts and are in addition to, and not in substitution for, other applicable provisions of these regulations.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-240-001, filed 12/27/90, effective 1/31/91; Order 1084, § 402-32-010, filed 1/14/76; Order 1, § 402-32-010, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-240-010 Definitions. As used in this chapter, the following definitions apply:

(1) "Brachytherapy" means a method of radiation therapy in which sealed sources are utilized to deliver a radiation dose at a distance of up to a few centimeters, by surface, intracavitary, or interstitial application.

(2) "Prescribed dose" means:

(a) For gamma stereotactic radiosurgery, the total dose as documented in the written directive;

(b) For teletherapy, the total dose and dose per fraction as documented in the written directive; or

(c) For brachytherapy, either the total source strength and exposure time, or the total dose, as documented in the written directive.

(3) "Teletherapy" means therapeutic irradiation in which the source of radiation is at a distance from the body.

(4) "Therapy misadministration" means the administration of:

(a) A gamma stereotactic radiosurgery radiation dose:

(i) Involving the wrong patient or wrong treatment site; or

(ii) When the calculated total administered dose differs from the total prescribed dose by more than ten percent of the total prescribed dose;

(b) A teletherapy radiation dose:

(i) Involving the wrong patient, wrong mode of treatment, or wrong treatment site;

(ii) When the treatment consists of three or fewer fractions and the calculated total administered dose differs from the total prescribed dose by more than ten percent of the total prescribed dose;

(iii) When the calculated weekly administered dose is thirty percent greater than the weekly prescribed dose; or

(iv) When the calculated total administered dose differs from the total prescribed dose by more than twenty percent of the total prescribed dose;

(c) A brachytherapy radiation dose:

(i) Involving the wrong patient, wrong radioisotope, or wrong treatment site (excluding, for permanent implants, seeds that were implanted in the correct site but migrated outside the treatment site);

(ii) Involving a sealed source that is leaking;

(iii) When, for a temporary implant, one or more sealed sources are not removed upon completion of the procedure; or

(iv) When the calculated administered dose to the treatment site differs from the prescribed dose by more than twenty percent of the prescribed dose.

(5) "Written directive" means an order in writing for a specific patient, dated and signed by an authorized user prior to the administration of radiation, except as specified in (d) of this subsection, containing the following information:

(a) For gamma stereotactic radiosurgery: Target coordinates, collimator size, plug pattern, and total dose;

(b) For teletherapy: The total dose, dose per fraction, treatment site, and overall treatment period;

(c) For high-dose-rate remote after loading brachytherapy: The radioisotope, treatment site, and total dose; or

(d) For all other brachytherapy, (i) prior to implantation: The radioisotope, number of sources, and source strengths; and (ii) after implantation but prior to completion of the procedure: The radioisotope, treatment site, and total source strength and exposure time (or, equivalently, the total dose).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-240-010, filed 2/21/92, effective 3/23/92.]

WAC 246-240-020 Interstitial, intracavitary and superficial applications. (1) **Accountability, storage, and handling.**

(a) Except as otherwise specifically authorized by the department, each licensee shall provide accountability of sealed sources and shall keep a record of the issue and return of all sealed sources to their place of storage.

(b) Each licensee shall conduct a quarterly physical inventory to account for all sources and devices received and possessed. Records of the inventories shall be maintained for inspection by the department and shall include the quantities and kinds of radioactive material, location of sources and devices, and the date of the inventory.

(c) Each licensee shall follow the radiation safety and handling instructions approved by the department, the United States Nuclear Regulatory Commission, an agreement state or a licensing state and furnished by the manufacturer on the label attached to the source, device or permanent container thereof, or in the leaflet or brochure which accompanies the source or device, and maintain such instruction in a legible and conveniently available form.

(d) Each licensee shall assure that needles or standard medical applicator cells containing Radium-226, or Cobalt-60 as wire are not opened while in the licensee's possession unless specifically authorized by license condition.

(2) Testing sealed sources for leakage and contamination.

(a) All sealed sources containing more than 100 microcuries of radioactive material with a half-life greater than thirty days, except Iridium-192 seeds encased in nylon ribbon, shall be tested for contamination and/or leakage at intervals not to exceed six months or at such other intervals as are approved by the department, the United States Nuclear Regulatory Commission, an agreement state or a licensing state and described by the manufacturer on the label attached to the source, device, or permanent container thereof, or in the leaflet or brochure which accompanies the source or device. Each source or device shall be so tested prior to its first use unless the supplier furnishes a certificate that the source or device has been so tested within six months prior to the transfer.

(b) Leak tests shall be capable of detecting the presence of 0.005 microcurie of radioactive material on the test sample or in the case of radium, the escape of radon at the rate of 0.001 microcurie per twenty-four hours. The test sample shall be taken from the source or from the surfaces of the device in which the source is permanently or semipermanently mounted or stored on which one might expect contamination to accumulate. Records of leak test results shall be kept in units of microcuries and maintained for inspection by the department.

(c) Any leak test conducted pursuant to (a) of this subsection which reveals the presence of 0.005 microcurie or more of removable contamination or in the case of radium, the escape of radon at the rate of 0.001 microcurie per twenty-four hours, shall be considered evidence that the sealed source is leaking. The licensee shall immediately withdraw the source from use and cause it to be decontaminated and repaired or to be disposed of in accordance with department regulations. A report shall be filed within five days of the test with the department, describing the equipment involved, the test results, and the corrective action taken.

(3) Radiation surveys.

(a) The maximum radiation level at a distance of one meter from the patient in whom brachytherapy sources have been inserted shall be determined by measurement or calculation. This radiation level shall be entered on the patient's chart and other signs as required under subsection (4) of this section.

(b) The radiation levels in the patient's room and the surrounding area shall be determined, recorded, and maintained for inspection by the department.

(c) The licensee shall assure that patients treated with Cobalt-60, Cesium-137, Iridium-192, or Radium-226 or any other nonpermanent implants remain hospitalized until a source count and a radiation survey of the patient and the patient's room confirm that all implants have been removed and are accounted for.

(4) Signs and records.

(a) In addition to the requirements of WAC 246-221-120, the bed, cubicle, or room of the hospital brachytherapy patient shall be marked with a sign indicating the presence of brachytherapy sources. This sign shall incorporate the radiation symbol and specify the radionuclide, the activity, date, and the individual(s) to contact for radiation safety

instructions. The sign is not required provided the exception in WAC 246-221-130(2) is met.

(b) The following information shall be included for the duration of the patient's treatment in the patient's official hospital medical record/chart:

(i) The radionuclide administered, number of sources, activity in millicuries and time and date of administration;

(ii) The exposure rate at one meter, the time the determination was made, and by whom;

(iii) The radiation symbol; and

(iv) The precautionary instructions necessary to assure that the exposure of individuals does not exceed that permitted under WAC 246-221-010.

(5) Information required by subsection (4)(b)(i) and (ii) of this section shall be retained for review by the department.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-240-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-240-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-32-020, filed 12/11/86; 83-19-050 (Order 2026), § 402-32-020, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-32-020, filed 12/8/80; Order 1084, § 402-32-020, filed 1/14/76; Order 1, § 402-32-020, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-240-030 Teletherapy. (1) Equipment.

(a) The housing shall be so constructed that, at one meter from the source, the maximum exposure rate does not exceed ten milliroentgens per hour when the beam control mechanism is in the "off" position. The average exposure rate measured at a representative number of points about the housing, each one meter from the source, shall not exceed two milliroentgens per hour.

(b) For teletherapy equipment installed after the effective date of these regulations, the leakage radiation measured at one meter from the source when the beam control mechanism is in the "on" position shall not exceed 0.1 percent of the useful beam exposure rate.

(c) Adjustable or removable beam-defining diaphragms shall allow transmission of not more than five percent of the useful beam exposure rate.

(d) The beam control mechanism shall be of a positive design capable of acting in any orientation of the housing for which it is designed to be used. In addition to an automatic closing device, the mechanism shall be designed so that it can be manually returned to the "off" position with a minimum risk of exposure.

(e) The closing device shall be so designed as to return automatically to the "off" position in the event of any breakdown or interruption of the activating force and shall stay in the "off" position until activated from the control panel.

(f) Beam control mechanisms.

(i) When any door to the treatment room is opened, the beam control mechanism shall automatically and rapidly restore the unit to the "off" position and cause it to remain there until the unit is reactivated from the control panel.

(ii) Beam control mechanisms shall be tested at intervals not to exceed three months for proper function. Records of these tests shall be maintained for inspection by the department.

(g) There shall be at the housing and at the control panel a warning device that plainly indicates whether the beam is on or off.

(h) The equipment shall be provided with a locking device to prevent unauthorized use.

(i) The control panel shall be provided with a timer that automatically terminates the exposure after a pre-set time.

(j) Provision shall be made to permit continuous observation of patients during irradiation.

(k) The treatment room shall be equipped with a permanent radiation monitor which shall:

(i) Continuously monitor the condition of the teletherapy beam;

(ii) Provide a continuous visible signal to the teletherapy unit operator and any person entering the treatment room, of a unit malfunction;

(iii) Each radiation monitor must be equipped with an emergency power supply separate from the power supply to the teletherapy unit. This emergency power supply may be a battery system;

(iv) Each radiation monitor must be tested for proper operation each day before the teletherapy unit is used for treatment of patients; and

(v) If a radiation monitor is inoperable for any reason, any person entering the teletherapy room shall use a properly operating portable survey instrument or audible alarm personal dosimeter to monitor for any malfunction of the source exposure mechanism that may have resulted in an exposed or partially exposed source. Survey instruments or dosimeters must be tested daily before use.

(2) **Operation.** Except in the emergency condition when a source fails to retract, no individual shall be in the treatment room during irradiation unless that individual is the patient. Mechanical restraining or supporting devices shall be used for positioning the patient, if necessary.

(3) **Testing for leakage and contamination.** Teletherapy sources shall be tested for leakage and contamination in accordance with the procedures described in WAC 246-240-020(2). Tests of leakage may be made by wiping accessible surfaces of the housing port or collimator while the source is in the "off" position and measuring these wipes for transferred contamination.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-240-030, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-240-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-32-030, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-32-030, filed 12/8/80; Order 1084, § 402-32-030, filed 1/14/76; Order 1, § 402-32-030, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-240-040 Special requirements for teletherapy licensees. (1) Requirement to perform full calibration requirements of teletherapy units.

(a) Any licensee authorized under WAC 246-235-080 to use teletherapy units for treating humans shall cause full calibration measurements to be performed on each teletherapy unit:

(i) Prior to the first use of the unit for treating humans:

(A) Whenever spot-check measurements indicate that the output value differs by more than five percent from the

value obtained at the last full calibration corrected mathematically for physical decay;

(B) Following replacement of the radiation source or following reinstallation of the teletherapy unit in a new location;

(C) Following any repair of the teletherapy unit that includes removal of the source or major repair of the components associated with the source exposure assembly; and

(D) At intervals not exceeding one year.

(b) Full calibration measurements required by (a) of this subsection shall include determination of:

(i) The exposure rate or dose rate to an accuracy within ± 3 percent for the range of field sizes and for the range of distances (or for the axis distance) used in radiation therapy;

(ii) The congruence between the radiation field and the field indicated by the light beam localizing device;

(iii) The uniformity of the radiation field and its dependence upon the orientation of the useful beam;

(iv) Timer accuracy; and

(v) The accuracy of all distance measuring devices used for treating humans.

(c) Full calibration measurements shall be made in accordance with the procedures recommended by the Scientific Committee on Radiation Dosimetry of the American Association of Physicists in Medicine (Physics in Medicine and Biology, Vol. 16, No. 3, 1971, pp. 379-386).¹

(d) The exposure rate or dose rate values determined in (b)(i) of this subsection shall be corrected mathematically for physical decay for intervals not exceeding one month for units employing a Cobalt-60 source and six months for units employing a Cesium-137 source.

(e) Full calibration measurements required by (a) of this subsection and physical decay corrections required by (d) of this subsection shall be performed by an expert qualified by training and experience in accordance with subsection (4) of this section.

(2) Requirement to perform periodic spot-check measurements of teletherapy units.

(a) Any licensee authorized under WAC 246-235-080(4) to use teletherapy units for treating humans shall cause spot-check measurements to be performed on each teletherapy unit at intervals not exceeding one month.

(b) Spot-check measurements required by (a) of this subsection shall include determination of:

(i) Timer accuracy;

(ii) The congruence between the radiation field and the field indicated by the light beam localizing device;

(iii) The accuracy of all distance measuring devices used for treating humans;

(iv) The exposure rate, dose rate, or a quantity related in a known manner to these rates for one typical set of operating conditions; and

(v) The difference between the measurement made in (b) of this subsection and the anticipated output, expressed as a percentage of the anticipated output (i.e., the value obtained at last full calibration corrected mathematically for physical decay).

(c) Spot-check measurements required by (a) of this subsection shall be performed in accordance with procedures established by an expert qualified by training and experience in accordance with subsection (4) of this section. (A

qualified expert need not actually perform the spot-check measurements.) If a qualified expert does not perform the spot-check measurements, the results of the spot-check measurements shall be reviewed by a qualified expert within fifteen days.

(3) Requirement to calibrate instruments used for full calibration and spot-check measurements.

(a) Full calibration measurements required by subsection (1) of this section shall be performed using a dosimetry system that has been calibrated by the National Bureau of Standards or by a Regional Calibration Laboratory accredited by the American Association of Physicists in Medicine. The dosimetry system shall have been calibrated within the previous two years and after any servicing that may have affected system calibration.

(b) Spot-check measurements required by subsection (2) of this section shall be performed using a dosimetry system that has been calibrated in accordance with (a) of this subsection. Alternatively, a dosimetry system used solely for spot-check measurements may be calibrated by direct intercomparison with a system that has been calibrated in accordance with (a) of this subsection. This alternative calibration method shall have been performed within the previous one year and after each servicing that may have affected system calibration. Dosimetry systems calibrated by this alternative method shall not be used for full calibration measurements. The use of thermoluminescent dosimeter does not satisfy the requirements of this section.

(4) Qualified expert. The licensee shall determine if a person is an expert qualified by training and experience to calibrate a teletherapy unit and establish procedures for (and review the results of) spot-check measurements. The licensee shall determine that the qualified expert:

(a) Is certified by the American Board of Radiology in Therapeutic Radiological Physics, Radiological Physics, Roentgen-Ray and Osmina-Ray Physics, or X-ray and Radium Physics; or

(b) Has the following minimum training and experience:

(i) A master's or doctor's degree in physics, biophysics, radiological physics or health physics;

(ii) One year of full-time training in therapeutic radiological physics; and

(iii) One year of full-time experience in a radiotherapy facility including personal calibration and spot-check of at least one teletherapy unit.

Note: The requirements of subsection (4) of this section are in addition to those set forth under "Qualified expert" in WAC 246-220-010.

(5) Records.

The licensee shall maintain, for inspection by the department, records of the measurements, tests, corrective actions, and instrument calibrations made under subsections (1) and (2) of this section and records of the licensee's evaluation of the qualified expert's training and experience made under subsection (4) of this section.

(a) Records of (i) full calibration measurements and (ii) calibration of instruments used to make these measurements shall be preserved for five years after completion of the full calibration.

(b) Records of (i) spot-check measurements and corrective actions and (ii) calibration of instruments used to make

spot-check measurements shall be preserved for two years after completion of the spot-check measurements and corrective actions.

(c) Records of the licensee's evaluation of the qualified expert's training and experience shall be preserved for five years after the qualified expert's last performance of a full calibration of the licensee's teletherapy unit.

(6) Inspection and servicing of the source exposure mechanism.

(a) Each teletherapy machine shall be fully inspected and serviced during source replacement or at intervals not to exceed five years, whichever comes first, to assure proper function of the source exposure mechanism. This inspection and servicing must be performed by persons specifically authorized to do so by the department, the United States Nuclear Regulatory Commission, or an agreement state, and a complete written report of the inspection and servicing must be kept on file for review by the department.

(b) The following shall be performed only by persons specifically authorized by the department, the United States Nuclear Regulatory Commission, or an agreement state to perform such services:

(i) Installation, inspection, servicing, relocation, or removal of teletherapy units containing sources.

(ii) Source exchange.

(iii) Any maintenance or repair operations on a teletherapy unit involving work on the source drawer, the shutter, or other mechanism that could expose the source, reduce the shielding around the source or compromise the safety of the unit and result in increased radiation levels.

¹ Licensees that have their teletherapy units calibrated by persons who do not meet these criteria for minimum training and experience may require a license amendment excepting them from the requirements of subsection (4) of this section. The request should include the name of the proposed qualified expert, a description of his or her training and experience including information similar to that specified by subsection (4) of this section and a report of at least one calibration and spot-check program based on measurements personally made by the proposed expert within the last ten years and written endorsement of the technical qualifications of the proposed expert from personal knowledge by a physicist certified by the American Board of Radiology in one of the specialties listed therein.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-240-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-240-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-32-100, filed 12/11/86; 83-19-050 (Order 2026), § 402-32-100, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-32-100, filed 12/8/80.]

WAC 246-240-050 Notifications, records, and reports of therapy misadministrations.

(1) The licensee shall notify by telephone the division of radiation protection at (206) 682-5327 no later than the next calendar day after the discovery of a therapy misadministration.

(2) The licensee also shall notify the referring physician and the patient or the patient's responsible relative or guardian (hereinafter referred to as "the patient") of the therapy misadministration not later than twenty-four hours after its discovery, unless the referring physician personally informs the licensee either that the physician will inform the patient or that, based on medical judgment, telling the patient would be harmful. The licensee is not required to notify the patient without first consulting the referring physician. If the

referring physician or patient cannot be reached within twenty-four hours, the licensee shall notify the patient as soon as possible thereafter. The licensee may not delay any appropriate medical care for the patient, including any necessary remedial care as a result of the therapy misadministration, because of any delay in notification.

(3) The licensee shall submit a written report to the department within fifteen days after discovery of the therapy misadministration. The written report must include the licensee's name; the prescribing physician's name; a brief description of the therapy misadministration; why it occurred; the effect on the patient; what improvements are needed to prevent recurrence; actions taken to prevent recurrence; whether the licensee notified the patient, and if not, why not, and if the patient was notified, what information was provided to the patient. The report shall not include the patient's name or other identifying information.

(4) If the patient was notified, the licensee shall also furnish, within fifteen days after discovery of the therapy misadministration, a written report to the patient by sending either:

(a) A copy of the report that was submitted to the department; or

(b) A brief description of both the therapy misadministration and the consequences, as they may affect the patient, and a statement informing the patient that the report submitted to the department can be obtained from the licensee.

(5) Each licensee shall retain a record of each therapy misadministration for five years. The record must contain the names of all individuals involved (including the physician, allied health personnel, the patient, and the patient's referring physician), the patient's Social Security number or identification number if one has been assigned, a brief description of the therapy misadministration, why it occurred, the effect on the patient, what improvements are needed to prevent recurrence, and the actions taken to prevent recurrence.

(6) Aside from the notification requirement, nothing in this section affects any rights or duties of licensees and physicians in relation to each other, patients, or the patient's responsible relatives or guardians.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-240-050, filed 2/21/92, effective 3/23/92.]

Chapter 246-243 WAC

RADIATION PROTECTION—INDUSTRIAL RADIOGRAPHY

WAC

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246-243-210	Special requirements for enclosed radiography.
246-243-220	Special requirements for permanent radiographic installation.
246-243-230	Appendix A—Minimum subjects to be covered in training radiographers.
246-243-240	Appendix B—General guidelines for inspection of radiography equipment.

WAC 246-243-001 Purpose. The regulations in this chapter establish radiation safety requirements for persons utilizing sources of radiation for industrial radiography. The requirements of this part are in addition to and not in substitution for the other requirements of these regulations.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-001, filed 12/27/90, effective 1/31/91; Order 1084, § 402-36-010, filed 1/14/76; Order 1, § 402-36-010, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-010 Scope. The regulations in this chapter apply to all licensees or registrants who use sources of radiation for industrial radiography: *Provided, however*, That nothing in this part shall apply to the use of sources of radiation in the healing arts.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-010, filed 12/27/90, effective 1/31/91; Order 1084, § 402-36-020, filed 1/14/76; Order 1, § 402-36-020, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-020 Definitions. As used in this part:

(1) "Enclosed radiography" means industrial radiography employing radiation machines conducted in an enclosed cabinet or room and includes cabinet radiography and shielded room radiography.

(a) "Cabinet radiography" means industrial radiography employing radiation machines conducted in an enclosure or cabinet so shielded that every location at the exterior meets the conditions specified in WAC 246-221-060 of these regulations.

(i) "Cabinet x-ray system" means an x-ray system with the x-ray tube installed in an enclosure (hereinafter termed "cabinet") which, independently of existing architectural structure except the floor on which it may be placed, is intended to contain at least that portion of a material being irradiated, provide radiation attenuation, and exclude personnel from its interior during generation of x radiation. Included are all x-ray systems designed primarily for the inspection of carry-on baggage at airline, railroad, and bus terminals, and in similar facilities. An x-ray tube used within a shielded part of a building, or x-ray equipment which may temporarily or occasionally incorporate portable shielding is not considered a cabinet x-ray system.

(b) "Shielded-room radiography" means industrial radiography conducted in a room so shielded that every location on the exterior meets the conditions specified in WAC 246-221-060 of these regulations.

(2) "Industrial radiography" means the examination of the macroscopic structure of materials by nondestructive methods utilizing sources of radiation. Industrial radiography as used in this chapter does not include well logging operations.

(3) "Permanent radiographic installation" means a shielded installation or structure designed or intended for radiography employing a radiographic exposure device and in which radiography is regularly performed, regardless of ownership.

(4) "Personal supervision" means supervision by a radiographer such that the radiographer is physically present at the radiography site and in such proximity that communication can be maintained and immediate assistance given as required. When a radiographer's assistant is using or handling sources of radiation, the radiographer must maintain direct surveillance.

(5) "Radiographer" means any individual who performs or who, in attendance at the site where sources of radiation are being used, personally supervises industrial radiographic operations and who is responsible to the licensee or registrant for assuring compliance with the requirements of these regulations and all license conditions.

(6) "Radiographer's assistant" means any individual who, under the personal supervision of a radiographer, uses sources of radiation, related handling tools, or radiation survey instruments in industrial radiography.

(7) "Radiographic exposure device" means any instrument containing a sealed source fastened or contained therein, in which the sealed source or shielding thereof may be moved, or otherwise changed, from a shielded to unshielded position for purposes of making a radiographic exposure.

(8) "Shielded position" means the location within the radiographic exposure device or storage container which, by manufacturer's design, is in one proper location for storage of the sealed source.

(9) "Source changer" means a device designed and used for replacement of sealed sources in radiographic exposure devices, including those also used for transporting and storage of sealed sources.

(10) "Storage container" means a device in which sealed sources are transported or stored.

(11) Temporary job site refers to any location which is not specifically authorized and described in a license or registration.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-020, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-025, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-025, filed 12/8/80; Order 1084, § 402-36-025, filed 1/14/76.]

WAC 246-243-030 Offshore operations. Offshore and/or underwater radiography shall be performed only by licensees whose license specifically authorizes such activity. Such operations fall under the jurisdiction of the United

States Nuclear Regulatory Commission when conducted outside of the territorial waters of the state of Washington.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-027, filed 9/16/83.]

WAC 246-243-040 Equipment control. Limits on levels of radiation for radiographic exposure devices and storage containers:

(1) Radiographic exposure devices measuring less than four inches from the sealed source storage position to any exterior surface of the device shall have no radiation level in excess of fifty milliroentgens per hour (50mR/hr) at six inches from any exterior surface of the device.

(2) Radiographic exposure devices measuring a minimum of four inches from the sealed source storage position to any exterior surface of the device, and all storage containers for sealed sources or outer containers for radiographic exposure devices, shall have no radiation level in excess of two hundred milliroentgens per hour (200mR/hr) at any exterior surface, and ten milliroentgens per hour (10mR/hr) at one meter from any exterior surface.

(3) The radiation levels specified are with the sealed source in the shielded (i.e., "off") position.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-030, filed 12/8/80; Order 1084, § 402-36-030, filed 1/14/76; Order 1, § 402-36-030, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-050 Internal audit and training. (1) Each licensee shall conduct the internal audit required by WAC 246-235-080 (5)(c) at intervals not to exceed three months. The audit should be done by management or the radiation safety officer and shall cover a review or spot checks of the records required by WAC 246-220-020, 246-221-110, 246-221-160, 246-221-230, 246-243-080, 246-243-090, 246-243-100, 246-243-110, 246-243-120, 246-243-130, 246-243-150, 246-243-190, 246-243-200, and 246-243-220, and conditions of the license.

(2) Each individual performing radiography shall be audited at intervals not to exceed three months during the performance of radiography, to assure that the license provisions, regulations, and the licensees operating and emergency procedures are followed by radiographers and radiographer's assistants. If a radiographer or a radiographer's assistant has not participated in a radiographic operation for more than three months since the last audit, that individual's performance must be observed and recorded the next time the individual participates in a radiographic operation. This audit shall be performed by the radiation safety officer, management, or the most experienced radiographers available. Results of this audit shall be recorded.

(3) Records of the internal audits required by subsections (1) and (2) of this section shall be maintained for three years.

(4) Training required by WAC 246-235-080 (5)(a) shall be conducted in accordance with the conditions of the license and subject to the following criteria:

(a) Initial training must be completed before a person can act as a radiographer or radiographer's assistant;

(b) Periodic retraining must be conducted at least annually;

(c) Records showing compliance with these training requirements must be maintained for at least one year following termination of employment.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-243-050, filed 2/21/92, effective 3/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-035, filed 9/16/83.]

WAC 246-243-060 Locking of radiographic exposure devices. (1) Each radiographic exposure device shall be provided with a lock or outerlocked container designed to prevent unauthorized or accidental production of radiation or removal or exposure of a sealed source and shall be locked when returned to the shielded position at all times. In addition, during radiographic operations the sealed source assembly shall be locked in the shielded position each time the source is returned to that position.

(2) Each sealed source storage container and source changer shall have a lock or outer locked container designed to prevent unauthorized or accidental removal of the sealed source from its shielded position. Storage containers and source changers shall be kept locked when containing sealed sources except when under the direct surveillance of a radiographer or a radiographer's assistant.

(3) Radiographic exposure devices, source changers, and storage containers, prior to being moved from one location to another and also prior to being secured at a given location, shall be locked and surveyed to assure that the sealed source is in the shielded position.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-040, filed 12/8/80; Order 1084, § 402-36-040, filed 1/14/76; Order 1, § 402-36-040, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-070 Storage precautions. Locked radiographic exposure devices and storage containers shall be physically secured to prevent tampering or removal by unauthorized personnel.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-050, filed 12/8/80; Order 1084, § 402-36-050, filed 1/14/76; Order 1, § 402-36-050, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-080 Radiation survey instruments. (1) The licensee or registrant shall maintain sufficient calibrated and operable radiation survey instruments to make physical radiation surveys as required by this part and chapter 246-221 WAC. Instrumentation required by this section shall have a range such that two milliroentgens per hour through one roentgen per hour can be measured.

(2) Each radiation survey instrument shall be calibrated:

(a) At energies appropriate for use and at intervals not to exceed three months and after each instrument servicing;

(b) Such that accuracy within ± 20 percent traceable to a national standard can be demonstrated; and

(c) At two or more widely separated points, other than zero, on each scale.

(3) Records shall be maintained of these calibrations for two years after the calibration date for inspection by the department.

(4) The requirements of this section do not apply to registrants using only radiation machines in enclosed radiographic systems.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-080, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-060, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-060, filed 12/8/80; Order 1084, § 402-36-060, filed 1/14/76; Order 1, § 402-36-060, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-090 Leak testing, repair, tagging, opening, modification, and replacement of sealed sources.

(1) The replacement of any sealed source fastened to or contained in a radiographic exposure device and leak testing, repair, tagging, opening, or any other modification of any sealed source shall be performed only by persons specifically authorized to do so by the department, the United States Nuclear Regulatory Commission, or any agreement state.

(2) Each sealed source shall be tested for leakage at intervals not to exceed six months. In the absence of a certificate from a transferor that a test has been made within the six-month period prior to the transfer, the sealed source shall not be put into use until tested and results obtained.

(3) The leak test shall be capable of detecting the presence of 0.005 microcurie of removable contamination on the sealed source. An acceptable leak test for sealed sources in the possession of a radiography licensee would be to test at the nearest accessible point to the sealed source storage position, or other appropriate measuring point, by a procedure to be approved pursuant to WAC 246-235-080 (5)(e). Records of leak test results shall be kept in units of microcuries and maintained for inspection by the department for two years after the leak test is performed.

(4) Any test conducted pursuant to subsections (2) and (3) of this section which reveals the presence of 0.005 microcurie or more of removable radioactive material shall be considered evidence that the sealed source is leaking. The licensee shall immediately withdraw the equipment involved from use and shall cause it to be decontaminated and repaired or to be disposed in accordance with regulations of the department. Within five days after obtaining results of the test, the licensee shall file a report with the department describing the involved equipment, the test results, and the corrective action taken.

(5) A sealed source which is not fastened to or contained in a radiographic exposure device shall have permanently attached to it a durable tag at least one inch square bearing the prescribed radiation caution symbol in conventional colors magenta or purple on a yellow background, and at least the instructions: "Danger - Radioactive material - Do not handle - Notify civil authorities if found."

(6) Each radiographic exposure device shall have permanently and conspicuously attached to it a durable label at least two inches square bearing the prescribed radiation caution symbol in conventional colors (magenta or purple on

a yellow background), and at a minimum the instructions, "Danger - Radioactive material - Do not handle - Notify civil authorities if found."

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-090, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-36-070, filed 12/11/86; 83-19-050 (Order 2026), § 402-36-070, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-070, filed 12/8/80; Order 1084, § 402-36-070, filed 1/14/76; Order 1, § 402-36-070, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-100 Quarterly inventory. Each licensee shall conduct a quarterly physical inventory to account for all sealed sources received or possessed. The records of the inventories shall be maintained for two years from the date of inventory for inspection by the department and shall include:

- (1) Exposure device or source changer make, model, and serial number;
- (2) Sealed source serial number and manufacturer;
- (3) Isotope and current activity;
- (4) Location of device/changer;
- (5) Date of inventory;
- (6) Name of person who performed inventory.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-080, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-080, filed 12/8/80; Order 1084, § 402-36-080, filed 1/14/76; Order 1, § 402-36-080, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-110 Utilization logs. (1) Each licensee and/or registrant shall maintain current logs, which shall be kept available for inspection by the department for two years from the date of the recorded event, at the address specified in the license showing for each radiation exposure device the following information:

(a) A description (or make and model number) of each radiation exposure device or storage container in which the sealed source is located;

(b) The identity of the radiographer to whom assigned; and

(c) Locations where used and dates of use.

(2) The requirements of subsection (1) of this section shall not apply in industrial radiography utilizing radiation machines in enclosed interlocked cabinets or rooms which are not occupied during radiographic operations, which are equipped with interlocks such that the radiation machine will not operate unless all openings are securely closed and which is so shielded that every location on the exterior meets conditions for an unrestricted area, as specified in WAC 246-221-060.

(3) A separately identified utilization log is not required if the equivalent information is available in records of the licensee or registrant and available at the address specified in the license.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-110, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-090, filed 12/8/80; Order 1084, § 402-36-090,

filed 1/14/76; Order 1, § 402-36-090, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-120 Inspection and maintenance of radiographic exposure devices, control cables, storage containers and source changers. (1) The licensee shall conduct a program for inspection and maintenance of radiographic exposure devices, storage containers, control units (to include cables), and source changers at intervals, not to exceed three months or prior to first use thereafter to assure proper functioning of components important to safety. Records of these inspections and maintenance shall be kept for two years.

(2) The licensee shall check for obvious defects in radiographic exposure devices, storage containers, control assemblies, and source changers prior to use each day the equipment is used.

(3) The licensee's program shall include a thorough visual inspection for corrosion, and specific maintenance procedures that address corrosion removal and prevention.

(4) If any inspection conducted pursuant to subsections (1) or (2) of this section reveals damage to components critical to radiation safety, the device shall be removed from service until proper repairs have been made.

(5) Any maintenance performed on radiographic exposure devices and accessories shall be in accordance with the manufacturer's specifications.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-120, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-095, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-095, filed 12/8/80; Order 1084, § 402-36-095, filed 1/14/76.]

WAC 246-243-130 Limitations—Personal radiation safety requirements for radiographers and radiographers' assistants. (1) No licensee or registrant shall permit any individual to act as a radiographer as defined in this chapter until such individual:

(a) Has been instructed in the subjects outlined in WAC 246-243-230;

(b) Has received copies of and instruction in the regulations contained in chapters 246-220, 246-222, 246-221, and 246-243 WAC and the applicable sections of appropriate license(s), and the licensee's or registrant's operating and emergency procedures, and shall have demonstrated understanding thereof;

(c) Has demonstrated competence to use the source of radiation, related handling tools, and radiation survey instruments which will be employed in the individual's assignment; and

(d) Has demonstrated understanding of the instructions in this paragraph by successful completion of written test and a field examination on the subjects covered.

(2) No licensee or registrant shall permit any individual to act as a radiographer's assistant as defined in this part until such individual:

(a) Has received copies of and instruction in the licensee's or registrant's operating and emergency procedures;

(b) Has demonstrated competence to use under the personal supervision of the radiographer the sources of radiation, related handling tools, and radiation survey instruments which will be employed in the individual's assignment;

(c) Has demonstrated understanding of the instructions in this paragraph by successfully completing a written or oral test and a field examination on the subjects covered; and

(d) Records of the above training including copies of written tests and dates of oral tests and field examinations shall be maintained for three years.

(3) Each licensee or registrant shall maintain, for inspection by the department, records of training and testing which demonstrate that the requirements of subsections (1) and (2) of this section and WAC 246-235-080 (5)(a) are met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-130, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-100, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-100, filed 12/8/80; Order 1084, § 402-36-100, filed 1/14/76; Order 1, § 402-36-100, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-140 Operating and emergency procedures. The licensee's or registrant's operating and emergency procedures shall include instructions in at least the following:

(1) The handling and use of sources of radiation to be employed such that no individual is likely to be exposed to radiation doses in excess of the limits established in chapter 246-221 WAC Standards for protection against radiation;

(2) Methods and occasions for conducting radiation surveys;

(3) Methods for controlling access to radiographic areas;

(4) Methods and occasions for locking and securing sources of radiation;

(5) Personnel monitoring and the use of personnel monitoring equipment including steps that must be taken immediately by radiography personnel in the event a pocket dosimeter is found to be off-scale;

(6) Transportation to field locations, including packing of sources of radiation in the vehicles, posting of vehicles, and control of sources of radiation during transportation;

(7) Minimizing exposure of individuals in the event of an accident;

(8) The procedure for notifying proper personnel in the event of a theft, loss, overexposure or accident involving sources of radiation;

(9) Maintenance of records; and

(10) The inspection and maintenance of radiographic exposure devices and storage containers.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-140, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-110, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-110, filed 12/8/80; Order 1084, § 402-36-110, filed 1/14/76; Order 708, § 402-36-110, filed 8/24/72; Order 1, § 402-36-110, filed 7/2/71; Order 1, § 402-36-110, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-150 Personnel monitoring control.

(1) No licensee or registrant shall permit any individual to act as a radiographer or as a radiographer's assistant unless, at all times during radiographic operations, each such individual shall wear a film or TLD badge and a direct reading pocket dosimeter. Pocket dosimeters shall be capable of measuring doses from zero to at least 200 milliroentgens. A film or TLD badge shall be assigned to and worn by only one individual.

(2) Pocket dosimeters shall be read and doses recorded daily. Pocket dosimeters shall be charged at the beginning of each working day. Pocket dosimeters shall be checked at periods not to exceed one year for correct response to radiation. Acceptable dosimeters shall read within plus or minus 30 percent of the true radiation exposure. A film or TLD badge shall be immediately processed if a pocket dosimeter is discharged beyond its range during normal use. The film or TLD badge reports received from the film or TLD badge processor and records of pocket dosimeter readings shall be maintained for inspection by the department until it authorizes their disposal.

(3) The requirements for use of pocket dosimeter or pocket chamber shall not apply in industrial radiography utilizing radiation machines in enclosed interlocked cabinets or rooms which are not occupied during radiographic operations, which are equipped with interlocks such that the radiation machine will not operate unless all openings are securely closed and which are so shielded that every location on the exterior meets conditions for an unrestricted area, as specified in WAC 246-221-060.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-150, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-120, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-120, filed 12/8/80; Order 1084, § 402-36-120, filed 1/14/76; Order 1, § 402-36-120, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-160 Supervision of radiographers' assistants. Whenever a radiographer's assistant uses radiographic exposure devices, uses sealed sources or related source handling tools, or conducts radiation surveys required by WAC 246-243-190 (2), (3), or (4) to determine that the sealed source has returned to the shielded position after an exposure, he or she shall be under the personal supervision of a radiographer, as defined in WAC 246-243-020. Personal supervision shall include (1) the radiographer's personal presence at the site where the sealed sources are being used, (2) the ability of the radiographer to communicate and give immediate assistance if required, and (3) the radiographer's ability to observe the performance of his/her assistant during the operations referred to in this section.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-160, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-125, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-125, filed 12/8/80.]

WAC 246-243-170 Security—Precautionary procedures in radiographic operations. (1) During each radiographic operation, the radiographer or radiographer's

assistant shall maintain a direct surveillance of the operation to protect against unauthorized entry into a high radiation area, as defined in chapter 246-220 WAC except:

(a) Where the high radiation area is equipped with a control device or alarm system as described in WAC 246-221-120 (1)(e)(ii) or

(b) Where the high radiation area is locked to protect against unauthorized or accidental entry.

(2) When not in operation or when not under direct surveillance, portable radiation exposure devices and mobile or portable radiation machines shall be physically secured to prevent removal by unauthorized personnel.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-170, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-130, filed 12/8/80; Order 1084, § 402-36-130, filed 1/14/76; Order 1, § 402-36-130, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-180 Posting. Notwithstanding any provisions in paragraph WAC 246-221-130 areas in which radiography is being performed or in which a radiographic exposure device is being stored shall be conspicuously posted and access to the area shall be controlled as required by WAC 246-221-120.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-180, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-140, filed 12/8/80; Order 1084, § 402-36-140, filed 1/14/76; Order 1, § 402-36-140, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-190 Radiation surveys and survey records. (1) No radiographic operation shall be conducted unless calibrated and operable radiation survey instrumentation as described in WAC 246-243-080 is available and used at each site where radiographic exposures are made and at the storage area whenever a radiographic exposure device, a storage container, or source is being placed in storage.

(2) A physical radiation survey shall be made after each radiographic exposure utilizing radiographic exposure devices or sealed sources of radioactive material to determine that the sealed source has been returned to its shielded position. The entire circumference of the radiographic exposure device shall be surveyed. If the radiographic exposure device has a source guide tube, the survey shall include the guide tube.

(3) A physical radiation survey shall be made to determine that each sealed source is in its shielded condition prior to securing the radiographic exposure device or storage container as specified in WAC 246-243-060. The entire circumference of the radiographic exposure device shall be surveyed. If the radiographic exposure device has a source guide tube, the survey shall include the guide tube.

(4) A physical radiation survey shall be made of the boundary of the restricted area during radiographic operations not employing shielded room radiography. The maximum survey reading at the boundary shall be recorded. The records shall indicate approximate distance from source to boundaries, whether or not the exposed source is collimat-

ed and any occupied areas with exposure levels greater than 2 mR in any hour during radiographic operations.

(5) Records required by subsections (3) and (4) of this section shall include the model and serial number of the survey meter used and shall be maintained for inspection by the department for three years after completion of the survey. If the survey was used to determine an individual's exposure, however, the records of the survey shall be maintained until the department authorizes their disposition.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 92-06-008 (Order 245), § 246-243-190, filed 2/21/92, effective 3/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-150, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-150, filed 12/8/80; Order 1084, § 402-36-150, filed 1/14/76; Order 1, § 402-36-150, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-200 Records required at temporary job sites. Each licensee or registrant conducting industrial radiography at a temporary site shall have the following records available at that site for inspection by the department:

- (1) Appropriate license;
- (2) Operating and emergency procedures;
- (3) Applicable regulations;
- (4) Survey records required pursuant to WAC 246-243-190 for the period of operation at the site;
- (5) Daily pocket dosimeter records for the period of operation at the site;
- (6) The latest instrument calibration and leak test record for specific devices in use at the site.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-200, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-153, filed 12/8/80.]

WAC 246-243-210 Special requirements for enclosed radiography. (1) Systems for enclosed radiography designed to allow admittance of individuals during x-radiation generation shall:

(a) Comply with all applicable requirements of chapter 246-243 WAC and WAC 246-221-060 of these regulations.

(b) Be evaluated at intervals not to exceed one year to assure compliance with the applicable requirements as specified in (a) of this subsection. Records of these evaluations shall be maintained for inspection by the department for a period of two years after the evaluation.

(c) Interlocks are required on all enclosed radiographic systems, such that the exposure will terminate if a door or port accessible to individuals is opened during the exposure, except for those systems employing conveyor belts or sample ports.

(2) Cabinet x-ray systems designed to exclude individuals during x-radiation are exempt from the requirements of chapter 246-243 WAC except that:

(a) Operating personnel must be provided with either a film badge or a thermoluminescent dosimeter and reports of the results must be maintained for inspection by the department.

(b) No registrant shall permit any individual to operate a cabinet x-ray system until such individual has received a

copy of and instruction in the operating procedures for the unit and has demonstrated competence in its use. Records which demonstrate compliance with this subparagraph shall be maintained for inspection by the department until disposition is authorized by the department.

(c) Tests for proper operation of high radiation area control devices or alarm systems, where applicable, must be conducted at the beginning of each day of use and recorded.

(d) The registrant shall perform an evaluation, at intervals not to exceed one year, to determine conformance with WAC 246-221-060 of these regulations.

Records of these evaluations shall be maintained for inspection by the department for a period of two years after the evaluation.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-210, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-155, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-155, filed 12/8/80; Order 1084, § 402-36-155, filed 1/14/76.]

WAC 246-243-220 Special requirements for permanent radiographic installation. Permanent radiographic installations having high radiation area entrance controls of the types described in WAC 246-221-120 (1)(e)(ii) or where the high radiation area is locked to protect against unauthorized or accidental entry, shall also meet the following special requirements.

(1) Each entrance that is used for personnel access to the high radiation area in a permanent radiographic installation to which this section applies shall have both visible and audible warning signals to warn of the presence of radiation. The visible signal shall be actuated by radiation whenever the source is exposed. The audible signal shall be actuated when an attempt is made to enter the installation while the source is exposed.

(2) Both visible and audible alarm systems are required and shall be tested prior to the first use of a source in the installation and thereafter at intervals not to exceed three months. Records of the tests shall be kept for two years.

(3) The department shall review and approve, in advance of construction, plans for permanent radiographic installations whose construction had not commenced by the effective date of these regulations. Construction of the permanent facility shall be in accordance with the plans approved by the department.

(4) A physical radiation survey shall be conducted and results recorded following construction or major modification of the facility to be used in the installation. Radiography shall not be conducted if exposure levels in unrestricted areas are greater than 2 mR in any hour. Any increase in source strength will require resurvey of the installation prior to the conduct of industrial radiography.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-243-220, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-157, filed 9/16/83. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-157, filed 12/8/80.]

WAC 246-243-230 Appendix A—Minimum subjects to be covered in training radiographers. (1) *Fundamentals of radiation safety*

(a) Characteristics of ionizing radiation

(b) Units of radiation dose (mrem) and quantity of radioactivity (curie)

(c) Hazards of exposure to radiation

(i) Radiation protection standards

(ii) Biological effects of radiation dose

(d) Levels of radiation from sources of radiation

(e) Methods of controlling radiation dose

(i) Working time

(ii) Working distances

(iii) Shielding

(2) *Radiation detection instrumentation to be used*

(a) Use of radiation survey instruments

(i) Operation

(ii) Calibration

(iii) Limitations

(b) Survey techniques

(c) Use of personnel monitoring equipment

(i) Film badges

(ii) Pocket dosimeters

(iii) Thermoluminescent dosimeters

(3) *Radiographic equipment to be used*

(a) Remote handling equipment

(b) Radiographic exposure devices and sealed sources

(c) Storage containers

(d) Operation and control of x-ray equipment

(4) *The requirements of pertinent federal and state regulations*

(5) *The licensee's or registrant's written operating and emergency procedures*

(6) *Case histories of radiography accidents.*

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.050. 81-01-011 (Order 1570), § 402-36-160, filed 12/8/80; Order 1084, § 402-36-160, filed 1/14/76; Order 1, § 402-36-160, filed 1/8/69; Rules (part), filed 10/26/66.]

WAC 246-243-240 Appendix B—General guidelines for inspection of radiography equipment. (1) Panoramic devices (devices in which the source is physically removed from shielded container during exposure) should be inspected for:

(a) Radiographic exposure unit;

(i) Abnormal surface radiation levels anywhere on camera;

(ii) Condition of safety plugs;

(iii) Proper operation of locking mechanism;

(iv) Condition of pigtail connector;

(v) Alignment of "S" tube with exit port;

(vi) Condition of carrying device (straps, handle, etc.);

(vii) Proper labeling;

(b) Source tube;

(i) Rust, dirt, or sludge buildup inside the source tube;

(ii) Condition of source tube connector;

(iii) Condition of source stop;

(iv) Kinks or damage that could prevent proper operation;

(c) Control cables and drive mechanism;

- (i) Proper drive mechanism for this camera, if appropriate;
 - (ii) Changes in general operating characteristics;
 - (iii) Condition of connector on drive cable;
 - (iv) Drive cable flexibility, wear, and rust;
 - (v) Excessive wear or damage to crank assembly parts;
 - (vi) Damage to drive cable conduit that could prevent the cable from moving freely;
 - (vii) Connection of the control cable connector with the pigtail connector for proper mating;
 - (viii) Proper operation of source position indicator, if applicable.
- (2) Directional beam devices should be inspected for:
- (a) Abnormal surface radiation;
 - (b) Changes in the general operating characteristics of the unit;
 - (c) Proper operation of shutter mechanism;
 - (d) Chafing or binding of shutter mechanism;
 - (e) Damage to the device which might impair its operation;
 - (f) Proper operation of locking mechanism;
 - (g) Proper drive mechanism with this camera, if appropriate;
 - (h) Condition of carrying device (strap, handle, etc.);
 - (i) Proper labeling.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-243-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 83-19-050 (Order 2026), § 402-36-165, filed 9/16/83.]

**Chapter 246-244 WAC
RADIATION PROTECTION—WIRELINE
SERVICES**

WAC

246-244-001	Purpose.
246-244-010	Scope.
246-244-020	Definitions.
246-244-030	Prohibitions.
246-244-040	Limits on levels of radiation.
246-244-050	Storage precautions.
246-244-060	Transport precautions.
246-244-070	Radiation survey instruments.
246-244-080	Leak testing of sealed sources.
246-244-090	Inventories.
246-244-100	Utilization logs/records.
246-244-110	Design, performance, and certification criteria for sealed sources used in downhole operations.
246-244-120	Labeling.
246-244-130	Inspection and maintenance.
246-244-140	Training requirements.
246-244-150	Operating and emergency procedures.
246-244-160	Personnel monitoring.
246-244-170	Radioactive contamination control.
246-244-180	Security.
246-244-190	Handling tools.
246-244-200	Subsurface tracer studies.
246-244-210	Radiation surveys.
246-244-220	Documents and records required at field stations.
246-244-230	Documents and records required at temporary job sites.
246-244-240	Notification of incidents, abandonment, and lost sources.

WAC 246-244-001 Purpose. This chapter establishes radiation safety requirements for persons using sources of radiation for wireline service operations including mineral logging, radioactive markers, and/or subsurface tracers

studies. The requirements of this chapter are in addition to, and not in substitution for, requirements of chapters 246-220, 246-221, 246-222, 246-232, and 246-235 WAC.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-001, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-010, filed 12/11/86.]

WAC 246-244-010 Scope. The regulations in this chapter apply to all licensees who use sources of radiation for wireline service operations, including mineral logging, radioactive markers, uranium sinker bars, or subsurface tracer studies.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-025, filed 12/11/86.]

WAC 246-244-020 Definitions. As used in this chapter, the following definitions apply:

- (1) "Casing" means a metal pipe or tube used as a lining for oil or gas wells to prevent collapse of the well-bore.
- (2) "Field station" means a facility where radioactive sources may be stored or used and from which equipment is dispatched to temporary job sites.
- (3) "Fresh water aquifer" means a geological formation that is capable of yielding a significant amount of fresh water to a well or spring.
- (4) "Injection tool" means a device used for controlled subsurface injection of radioactive tracer material.
- (5) "Irretrievable well-logging source" means any sealed source containing licensed material that is pulled off or not connected to the wireline that suspends the source in the well and for which all reasonable effort at recovery has been expended.
- (6) "Logging assistant" means an individual who assists the logging supervisor in performing the well-logging operations.
- (7) "Logging supervisor" means an individual who provides personal supervision of the use of licensed material at the temporary job site and who is responsible to the licensee for assuring compliance with requirements of the department's regulations and the conditions of the license.
- (8) "Logging tool" means a device used subsurface to perform well-logging.
- (9) "Mineral logging" means any logging performed for the purpose of mineral (including water) exploration other than oil or gas.
- (10) "Personal supervision" means guidance and instruction by the supervisor who is physically present at the job site and watching the performance of the operation in such proximity that contact is maintained and immediate assistance given as required.

(11) "Radioactive marker" means licensed material used for the purpose of depth determination or direction orientation. This term includes radioactive collar markers and radioactive iron nails.

(12) "Sealed source" means any licensed material that is encased in a capsule designed to prevent leakage or escape of the radioactive material.

(13) "Source holder" means the housing or assembly into which a radioactive source is placed for the purpose of

facilitating the handling and use of such source in well-logging operations.

(14) "Subsurface tracer study" means, for the purpose of this chapter, the release of unsealed licensed material or a substance labeled with licensed material in a single well or multiple wells for the purpose of tracing the movement or position of the material or substance in the well-bore or adjacent formation(s) (this term does not include the use of licensed material in field flooding studies).

(15) "Surface casing" means a pipe or tube used as a lining in a well to isolate the fresh water zone from the well.

(16) "Temporary job site" means any location to which radioactive materials have been dispatched or taken to perform wireline service operations or subsurface tracer studies.

(17) "Uranium sinker bar" means a weight containing depleted uranium used for the purpose of providing additional force to pull a logging tool down toward the bottom of a well.

(18) "Well-bore" means any drilled hole in which wireline service operations and/or subsurface tracer studies are performed.

(19) "Well-logging" means the lowering and raising of measuring devices or tools which contain sources of radiation into well-bores or cavities (salt domes, etc.) for the purpose of obtaining information about the well and/or adjacent formations which may be used in oil, gas, mineral or geological explorations.

(20) "Well-logging operation" means any activity involving licensed material performed in a well, including well-logging, mineral logging, subsurface tracer studies, use of radioactive markers, radioactive iron nails, uranium sinker bars, and radioactive sands, and transportation or storage of same.

(21) "Wireline" means a cable containing one or more electrical conductors which is used to lower and raise logging tools in the well-bore.

(22) "Wireline service operation" means any evaluation or mechanical service which is performed in the well-bore using devices containing radioactive material on a wireline.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-244-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-38-030, filed 12/11/86.]

WAC 246-244-030 Prohibitions. No licensee shall perform wireline service operations with a sealed source(s) or conduct subsurface tracer studies with sources of radiation unless, prior to commencement of the operation, the licensee has a written agreement with the well operator, well owner, drilling contractor, or land owner that:

(1) In the event a sealed source is lodged downhole every reasonable effort at recovery will be made;

(2) Potentially contaminated equipment or areas will not be released until an acceptable and documented survey is performed;

(3) Specific types of recovery operations which could endanger the integrity of the sealed source encapsulation will not be permitted or conducted; and

(4) In the event a decision is made to abandon the sealed source downhole, requirements of WAC 246-244-240 shall be met.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-244-030, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-244-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-38-040, filed 12/11/86.]

WAC 246-244-040 Limits on levels of radiation. Sources of radiation shall be used, stored, and transported in such a manner that the transportation requirements of WAC 246-232-090 and the dose limitation requirements of chapter 246-221 WAC are met.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-244-040, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-244-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-38-060, filed 12/11/86.]

WAC 246-244-050 Storage precautions. (1) Each source of radiation, except accelerators, shall be provided with a storage and/or transport container. Such containers shall be utilized. The container shall be provided with a lock (or tamper seal, for calibration sources) to prevent unauthorized removal of, or exposure to, the source(s) of radiation. Such locks shall be used each time the source of radiation is placed in the storage/transport container.

(2) Sources of radiation shall be stored in a manner which will minimize danger from explosion and/or fire.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-244-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-38-080, filed 12/11/86.]

WAC 246-244-060 Transport precautions. (1) Transport containers shall be physically secured to the transporting vehicle to prevent accidental loss, tampering, or unauthorized removal.

(2) Transport of radioactive material shall be in accordance with applicable provisions of the United States Department of Transportation, as required by WAC 246-232-090.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-15-112 (Order 184), § 246-244-060, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-244-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-38-100, filed 12/11/86.]

WAC 246-244-070 Radiation survey instruments. (1) The licensee or registrant shall maintain and use sufficient calibrated and operable radiation survey instruments at each field station and temporary job site to make physical radiation surveys as required. Instrumentation shall be capable of measuring 0.1 milliroentgen per hour through at least 100 milliroentgens per hour.

(2) Each radiation survey instrument shall be calibrated:

(a) At intervals not to exceed six months and after each instrument servicing;

(b) At energies and radiation levels appropriate for use;

(c) At two points located approximately one-third and two-thirds at full scale on each scale (for logarithmic scale, at midrange of each decade, and at two points of at least one decade); and

(d) Such that accuracy within ± 20 percent of the true radiation levels can be demonstrated on each scale.

(3) Each licensee shall have available additional calibrated and operable radiation detection instruments capable of detecting radiation and contamination levels that could be encountered during well-logging operations or during the event of an accident, e.g., an alpha meter in case of Am-241 source rupture, a contamination meter and probe, and a high level meter capable of detecting radiation levels up to at least one roentgen per hour. The licensee may own such instruments or may make prior arrangements to obtain them expeditiously from a second party as necessary.

(4) Calibration records shall be maintained for a period of at least three years for inspection by the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-120, filed 12/11/86.]

WAC 246-244-080 Leak testing of sealed sources.

Each licensee utilizing sealed sources of radioactive material shall have the sources tested for leakage and/or contamination in accordance with WAC 246-221-080.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-080, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-140, filed 12/11/86.]

WAC 246-244-090 Inventories. (1) Each licensee shall conduct a physical inventory at intervals not to exceed three months to account for all sources of radiation received and possessed. Records of such inventories shall be maintained for at least two years from the date of the inventory for inspection by the department and shall include the quantities, kinds, and serial numbers of sources of radiation, the location where such sources of radiation are assigned and/or stored, the date of the inventory, and the name of the individual conducting the inventory.

(2) Spotmarkers containing radioactive material shall be inventoried prior to arrival at a field site and prior to departure. Records of such inventories shall include the quantity and kinds of radioactive material, serial numbers where appropriate, the date and name of the person performing the inventory, and shall be maintained for inspection by the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-160, filed 12/11/86.]

WAC 246-244-100 Utilization logs/records. Each licensee shall maintain current records, which shall be kept available for inspection by the department for two years from the date of recorded event, showing the following information for each source of radiation:

(1) Make, model, and serial number of each source of radiation used;

(2) The identity of the well-logging supervisor and logging assistants to whom assigned;

(3) The locations where used and dates of use; and

(4) In the case of tracer materials and/or radioactive markers, the utilization records shall also indicate the radionuclide and quantity of activity used in a particular well.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-180, filed 12/11/86.]

WAC 246-244-110 Design, performance, and certification criteria for sealed sources used in downhole operations. (1) Each sealed source, except those containing radioactive material in gaseous form, used in downhole operations shall be certified by the manufacturer, or other testing organization acceptable to the department, to meet the following minimum criteria:

(a) Be of doubly encapsulated construction;

(b) Contain radioactive material whose chemical and physical forms are as insoluble and nondispersible, respectively, as practical; and

(c) Has been individually pressure tested to at least 24,656 pounds per square inch absolute (170 MN/m²) without leakage or failure.

(2) Except those containing radioactive material in gaseous form, in the absence of a certificate from a transferor certifying that an individual sealed source meets the requirements of subsections (1) and (3) of this section, the sealed source shall not be put into use until such determinations and testings have been performed and acceptable documented results obtained.

(3) Each sealed source, except those containing a radioactive material in gaseous form, used in downhole operations shall be certified by the manufacturer, or other testing organization acceptable to the department, to meet the sealed source performance requirements for oil well-logging as contained in the January 1986 or most current American National Standard N542, *Sealed Radioactive Sources, Classification*.

(4) Certification documents shall be maintained for inspection by the department for a period of three years after source disposal. If a source is abandoned downhole, the certification documents shall be maintained until the department authorizes disposition.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-200, filed 12/11/86.]

WAC 246-244-120 Labeling. (1) Each source, source holder, and logging tool containing radioactive material shall bear a durable, legible, and clearly visible marking or label which has, at a minimum, the standard radiation caution symbol, with or without the conventional color requirement, and the following wording: "DANGER (OR CAUTION) RADIOACTIVE MATERIAL." This labeling shall be on the smallest component transported as a separate piece of equipment.

(2) Each transport container shall have permanently attached to it a durable, legible, and clearly visible label which has, at a minimum, the standard radiation caution symbol and colors and the following wording: "DANGER (OR CAUTION) RADIOACTIVE MATERIAL, NOTIFY CIVIL AUTHORITIES IF FOUND."

(3) The licensee may not use a uranium sinker bar in well-logging operations after December 31, 1987, unless it is clearly and legibly impressed with the words "CAUTION-RADIOACTIVE DEPLETED URANIUM" and "NOTIFY CIVIL AUTHORITIES IF FOUND."

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-244-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-38-220, filed 12/11/86.]

WAC 246-244-130 Inspection and maintenance. (1)

Each licensee shall conduct a program of visual inspection and maintenance of source holders, logging tools, source handling tools, storage containers, transport containers, injection tools, and sinker bars to ensure that the required labeling is legible and that visual physical damage is absent. The licensee shall perform the visual inspection and maintenance at least every three months. Such inspection and maintenance shall follow the manufacturers recommendations for the equipment involved. Licensees shall maintain records of inspections and maintenance for three years for inspection by the department.

(2) Each licensee shall maintain appropriate copies of manufacturer's operating and maintenance instructions at those locations where such inspection and maintenance is performed.

(3) Each licensee shall inspect the source holders, logging tools, and source handling tools for obvious defects before the equipment is used each day to ensure that the equipment is in good working condition.

(4) If any inspection conducted pursuant to this section reveals damage to the labeling or to components critical for radiation safety, the licensee shall remove the item from service until authorized repairs are made.

(5) Removal of a sealed source from a source holder, and maintenance on sealed sources, holders, or pressure housings in which sealed sources are placed, or on other equipment containing a sealed source may not be performed unless a written instruction for the particular operation in question has been approved by the department as part of the license application.

(6) If a sealed source is stuck in a source holder or logging tool, the licensee may not perform any operations such as drilling, cutting, or chiseling on the source holder or logging tool, unless it is specifically licensed by the department to perform this operation.

(7) The repair, opening, or modification of any sealed source must be performed only by persons specifically licensed to do so by the department, the United States Nuclear Regulatory Commission, an agreement state, or a licensing state.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-244-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-38-240, filed 12/11/86.]

WAC 246-244-140 Training requirements. (1) The

licensee may not permit an individual to act as a logging supervisor until that person:

(a) Has completed at least forty hours of formal training in a course recognized by the department, the United States Nuclear Regulatory Commission, an agreement state, or a licensing state covering the subjects outlined in subsection (5) of this section;

(b) Has received copies of and instruction in:

(i) Washington state regulations contained in this chapter and in the applicable chapters 246-220, 246-221, and 246-222 WAC or their equivalent;

(ii) The license under which the logging supervisor will perform well-logging operations; and

(iii) The licensee's operating, recordkeeping, and emergency procedures.

(c) Has completed three months of on-the-job training and demonstrated competence in the use of licensed materials, remote handling tools, and radiation survey instruments by a field evaluation; and

(d) Has demonstrated understanding of the requirements in (a) and (b) of this subsection by successfully completing a closed book written test.

(2) The licensee may not permit an individual to act as a logging assistant until that person:

(a) Has received copies of and instruction in the licensee's operating and emergency procedures;

(b) Has demonstrated understanding of the materials listed in subsection (1)(a) and (b) of this section by successfully completing a closed book written test; and

(c) Has received instructions in the use, under the personal supervision of the logging supervisor, of tracer material, sealed sources, remote handling tools, and radiation survey instruments, as appropriate.

(3) Each licensee shall provide for documented refresher training of logging supervisors and logging assistants at intervals not to exceed twelve months.

(4) Each licensee shall maintain a record of each logging supervisor's and logging assistant's training, including copies and dates of written tests for a minimum of three years following the termination of employment.

(5) Each licensee shall include the following subjects in the formal training required by this chapter:

(a) **Fundamentals of radiation safety:**

(i) Characteristics of radiation;

(ii) Units of radiation dose and quantity of radioactivity;

(iii) Hazards of exposure to radiation;

(iv) Levels of radiation from licensed material;

(v) Methods of controlling radiation dose:

(A) Working time;

(B) Working distances;

(C) Shielding;

(D) Radiation safety practices, including prevention and contamination and methods of decontamination;

(b) **Radiation detection instrumentation to be used:**

(i) Use of radiation survey instruments:

(A) Operation;

(B) Calibration;

(C) Limitations;

(ii) Survey techniques;

(iii) Use of personnel monitoring equipment;

(c) **Equipment to be used:**

(i) Handling equipment and remote handling tools;

(ii) Licensed materials;

(iii) Storage, control, and disposal of equipment and licensed material;

(iv) Operation and control of equipment and licensed materials;

(v) Maintenance of equipment;

(d) Requirements of pertinent state and federal regulations;

(e) Case histories and potential consequences of accidents in well-logging operations.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-140, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-260, filed 12/11/86.]

WAC 246-244-150 Operating and emergency procedures. The licensee's operating and emergency procedures shall include instruction in at least the following:

(1) Handling and use of sources of radiation to be employed such that no individual is likely to be exposed to radiation doses in excess of the standards established in chapter 246-221 WAC;

(2) Methods and occasions for conducting radiation surveys;

(3) Methods and occasions for locking and securing sources of radiation;

(4) Personnel monitoring and the use and care of personnel monitoring equipment;

(5) Transportation of sources of radiation to temporary job sites and field stations, including the marking, labeling, packaging, and placing of sources of radiation in vehicles, shipping papers, placarding of vehicles, and physical securing of sources of radiation to transport vehicles during transportation to prevent accidental loss, tampering, or unauthorized removal;

(6) Minimizing personnel exposure, including that from inhalation and ingestion of licensed material, during well-logging operations and in the event of an accident;

(7) Procedure for notifying proper personnel in the event of an accident;

(8) Maintenance of records;

(9) Inspection and maintenance of source holders, logging tools, source handling tools, storage containers, transport containers, and injection tools;

(10) Procedures to be followed in the event a sealed source is lodged downhole or ruptured;

(11) Procedures to be used for picking up, receiving, and opening packages containing radioactive material;

(12) The procedure and the use of tools for remote handling of sealed sources and radioactive tracer material, except low activity calibration sources;

(13) The procedure to use for detecting contamination and for preventing the spread of contamination; and

(14) The procedure to be used to decontaminate the environment, equipment, and/or personnel if any or all are contaminated.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-150, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-280, filed 12/11/86.]

WAC 246-244-160 Personnel monitoring. (1) The licensee may not permit an individual to act as a logging supervisor or logging assistant unless that person wears, at all times during well-logging operations, either a film badge or thermoluminescent dosimeter (TLD). Each film badge or TLD must be assigned to and worn by only one individual. The film badge must be exchanged and analyzed at least monthly and TLD badges exchanged and analyzed at least every three months. The licensee shall have each badge or TLD processed in a timely fashion.

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(2) The licensee shall provide appropriate bioassay services to individuals using licensed materials for subsurface tracer studies.

(3) The licensee shall keep reports received from the badge or TLD processor and from the bioassay service laboratory for inspection until the department authorizes disposition or terminates the license.

(4) Personnel monitoring devices and equipment shall monitor for beta, gamma, and neutron radiation as appropriate.

(5) Each licensee shall adhere to the requirements of the department's Regulatory Guide 8.20 *Bioassay Program Criteria for I-125 and I-131*.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-160, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-300, filed 12/11/86.]

WAC 246-244-170 Radioactive contamination control. (1) During efforts to recover a sealed source lodged in the well, the licensee shall continuously monitor, with an appropriate radiation detection instrument, the circulating fluids from the well to check for contamination resulting from damage to the sealed source.

(2) If the licensee detects evidence that the sealed source has ruptured or licensed materials have caused contamination, it shall initiate required emergency procedures.

(3) If contamination results from the use of licensed material in well-logging operations, the licensee shall decontaminate all work areas, equipment, and unrestricted areas to levels deemed appropriate by the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-320, filed 12/11/86.]

WAC 246-244-180 Security. During each logging or tracer application, the logging supervisor or other designated employee shall maintain direct surveillance of the operation to protect against unauthorized and/or unnecessary entry into the restricted area (as defined in WAC 246-220-010).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-180, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-340, filed 12/11/86.]

WAC 246-244-190 Handling tools. The licensee shall provide and require the use of tools that will assure remote handling of sealed sources other than low activity calibration sources.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-360, filed 12/11/86.]

WAC 246-244-200 Subsurface tracer studies. (1) Protective gloves and other appropriate protective clothing and equipment shall be used by all personnel handling radioactive tracer material. Adequate precautions shall be taken to avoid ingestion or inhalation of radioactive material,

and to avoid contamination of field site stations and temporary job sites.

(2) No licensee shall cause the injection or administration of radioactive material into fresh water aquifers without prior written authorization from the department and any other appropriate state agency.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-380, filed 12/11/86.]

WAC 246-244-210 Radiation surveys. (1) Radiation surveys shall be made and recorded for each area where radioactive materials are stored at intervals not to exceed six months. In those cases where neutron sources are involved, calculations for dose rate may be substituted for direct measurement.

(2) Radiation surveys shall be made and recorded for the radiation levels in occupied positions and on the exterior of each vehicle used to transport radioactive material. Such surveys shall include each and every source of radiation or combination of sources to be transported in the vehicle. In those cases where neutron sources are involved, calculations for dose rate may be substituted for direct measurement.

(3) After removal of the sealed source from the logging tool and before departing the job site, the logging tool detector shall be energized and/or a survey meter used to assure that the logging tool and all related equipment are free of contamination.

(4) Radiation surveys shall be made and recorded at the job site or well head for each tracer operation, except those using Hydrogen-3, Carbon-14, or Sulfur-35. Such surveys shall include measurements of radiation levels immediately before and after each operation.

(5) If the licensee suspects that, as a result of operations involving a sealed source, the encapsulation of the sealed source could have been damaged by the operation, it shall conduct a radiation survey, including a contamination survey, during and after the operation.

(6) The licensee shall make a radiation survey at the temporary job site for each subsurface tracer study. The survey must include measurement of radiation levels before and after the operation, and measurement of contamination levels after the subsurface tracer study.

(7) Records of surveys required pursuant to this section shall include the dates, the identification of individuals making the survey, the identification of survey instruments used including make, model, serial number and calibration date, and an exact description of the location of the survey with diagram. Records of these surveys shall be maintained for inspection by the department for at least two years after completion of the survey.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-400, filed 12/11/86.]

WAC 246-244-220 Documents and records required at field stations. Each licensee shall maintain for inspection by the department the following documents and records for the specific devices and sources at the field station:

- (1) Appropriate license or equivalent documents;
- (2) Operating and emergency procedures;

- (3) Applicable regulations;
- (4) Records of the latest survey instrument calibrations required pursuant to WAC 246-244-070;
- (5) Records of the latest leak test results required pursuant to WAC 246-244-080;
- (6) Records of inventories required pursuant to WAC 246-244-090;
- (7) Utilization records required pursuant to WAC 246-244-100;
- (8) Records of inspection and maintenance required pursuant to WAC 246-244-130;
- (9) Survey records required pursuant to WAC 246-244-210; and
- (10) Training records required pursuant to WAC 246-244-140.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-220, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-420, filed 12/11/86.]

WAC 246-244-230 Documents and records required at temporary job sites. Each licensee conducting operations at a temporary job site shall have the following documents and records available at all times at that site for inspection by the department:

- (1) Current operating and emergency procedure(s);
- (2) Survey records required pursuant to WAC 246-244-210 for the period of operation at the site;
- (3) Actual current calibration certificates (or photocopies) for the radiation survey instruments used at the site;
- (4) When operating in the state of Washington under reciprocity, a copy of the appropriate license, and the Washington state rules and regulations for radiation protection;
- (5) Records of current leak tests for all sealed sources which require such tests at the job site;
- (6) Use logs required pursuant to WAC 246-244-100;
- (7) Current United States Department of Transportation shipping papers and transport container certifications for the material transported; and
- (8) Records of spotmarker inventories made prior to arrival required pursuant to WAC 246-244-090.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-230, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-440, filed 12/11/86.]

WAC 246-244-240 Notification of incidents, abandonment, and lost sources. (1) Notification of incidents and sources lost in other than downhole logging operations shall be made in accordance with appropriate provisions of chapter 246-221 WAC.

(2) The licensee shall immediately notify the state of Washington division of radiation protection by telephone (206/753-3468) and subsequently within five days by confirmatory letter if:

- (a) Licensed material has been lost in or near a fresh water aquifer; or
- (b) A sealed source has been ruptured. This notice must designate the well or other location and describe the magni-

tude and extent of licensed materials, assess the consequences of the loss or rupture, and explain efforts planned or being taken to mitigate these consequences.

(3) Whenever a sealed source or device containing radioactive material is lodged downhole, the licensee shall:

(a) Monitor the surface for the presence of radioactive contamination with an appropriate radiation survey instrument (not the logging tool itself) during logging tool recovery operations; and

(b) Notify the department immediately by telephone if radioactive contamination is detected at the surface or if the source appears to be damaged.

(4) When it becomes apparent that efforts to recover the radioactive source will not be successful, the licensee shall:

(a) Advise the well operator or owner, as appropriate, of the regulations of the state of Washington regarding abandonment, and an appropriate method of abandonment. The licensee shall ensure that such abandonment procedures are implemented within thirty days after the sealed source has been classified as irretrievable. Such abandonment procedures shall include:

(i) Immobilization and sealing in place of the radioactive source with a cement plug;

(ii) The setting of a whipstock or deflection device; and

(iii) The mounting of a permanent identification plaque at the surface of the well, containing the appropriate information required by subsection (5) of this section;

(b) Immediately notify the department by telephone (206/753-3468), giving the circumstances of the loss, and request and receive approval of the proposed abandonment procedures; and

(c) File a written report with the department within thirty days of the abandonment, setting forth the following information:

(i) Date and time of occurrence and a brief description of attempts to recover the source;

(ii) A description of the radioactive source(s) involved, including radionuclide, quantity, make, model and serial number, and chemical and physical form;

(iii) Surface location and identification of well;

(iv) Results of efforts to immobilize and seal the source in place;

(v) Depth of the radioactive source in meters or feet;

(vi) Depth to the top of cement plug in meters or feet;

(vii) Depth of the well in meters or feet; and

(viii) Information contained on the permanent identification plaque.

(5) Whenever a sealed source containing radioactive material is not recovered and is abandoned downhole, the licensee shall provide a permanent plaque at least eighteen centimeters square for posting the well or well bore (see Appendix A). This plaque shall:

(a) Be constructed of long lasting material, such as stainless steel or monel; and

(b) Contain the following information permanently and conspicuously engraved on its face:

(i) The word "CAUTION (or DANGER)";

(ii) The radiation symbol(s) with or without the conventional color requirement;

(iii) The date of abandonment (month/day/year);

(iv) The name of the well operator or well owner;

(v) The well name and well identification number(s) or other designation;

(vi) The sealed source(s) by radionuclide and quantity of activity (if more than one source is involved, information for each source shall be included);

(vii) The source depth and the depth to the top of the plug in meters or feet; and

(viii) An appropriate warning, depending on the specific circumstances of each abandonment.¹

(6) The department may, at its own discretion, impose such other requirements as it may deem necessary.

¹ An example of a suggested plaque is shown in Appendix A of this section. Appropriate warnings may include:

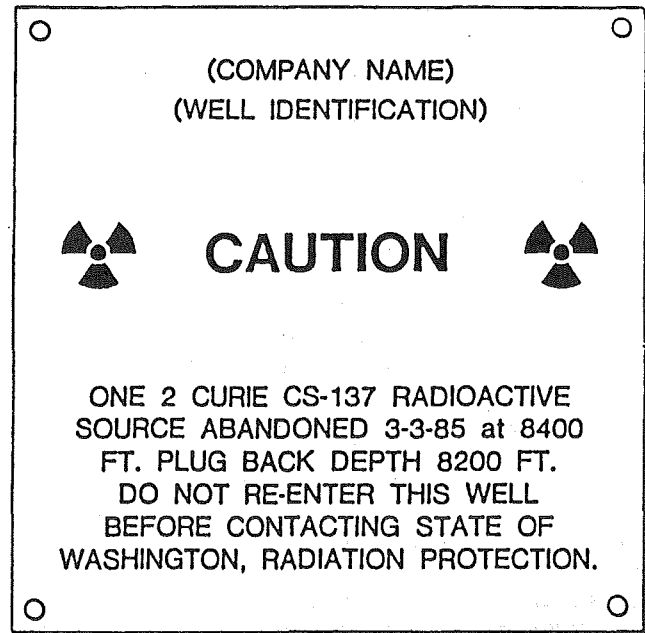
(a) "Do not drill below plug back depth";

(b) "Do not enlarge casing"; and/or

(c) "Do not reenter the hole before contacting the state of Washington division of radiation protection."

APPENDIX A

Example of Plaque for Identifying Wells Containing Sealed Sources Containing Radioactive Material Abandoned Downhole



The size of the plaque should be convenient for use on active or inactive wells, and shall be at least eighteen centimeters square. Letter size of the word "CAUTION" or "DANGER" shall be approximately twice the letter size of the rest of the information, e.g., one-half inch and one-fourth inch letter size, respectively.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-15-112 (Order 184), § 246-244-240, filed 7/24/91, effective 8/24/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-244-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-38-500, filed 12/11/86.]

Chapter 246-247 WAC

RADIATION PROTECTION—AIR EMISSIONS

WAC

246-247-001	Purpose.
246-247-010	Applicability.
246-247-020	Exemptions.
246-247-030	Definitions.
246-247-040	Standards.
246-247-050	Registration.
246-247-060	Airborne emission permits.
246-247-070	New and modified sources.
246-247-080	Monitoring and reporting.
246-247-090	Special reports.
246-247-100	Regulatory actions.

WAC 246-247-001 Purpose. The purpose of this chapter is to establish procedures for the monitoring, control, and reporting of airborne radionuclide emissions from specific sources to assure compliance with applicable standards.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-247-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-80-010, filed 12/11/86.]

WAC 246-247-010 Applicability. This chapter shall apply state-wide. These provisions apply to:

- (1) Facilities licensed by the department or by the United States Nuclear Regulatory Commission;
 - (2) United States Department of Energy (DOE) facilities;
 - (3) Non-DOE federal facilities that emit radionuclides to the air; and
 - (4) Any other facilities having emissions of radionuclides to the air in amounts that can potentially cause a dose equivalent in excess of five mrem/year to the whole body or 15 mrem/year to the critical organ of any member of the public.
- (5) These provisions do not apply to facilities regulated under other state authorities, specifically:
- (a) Uranium mill sites (chapter 402-52 WAC);
 - (b) Nuclear power reactors (chapter 463-54 WAC).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-247-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-80-020, filed 12/11/86.]

WAC 246-247-020 Exemptions. Types of facilities listed in Table I are exempt from this chapter because they either release no airborne radioactivity or because it has been determined that they would prima facie be in compliance with the standard.

TABLE I

- (1) Users of only sealed sources.
- (2) Low-energy accelerators (<200 MeV).
- (3) Reserved.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-247-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-80-030, filed 12/11/86.]

WAC 246-247-030 Definitions. As used in this chapter, these terms have the definitions set forth below.

(1) "Best available radionuclide control technology (BARCT)" means technology which will result in a radionuclide emission limitation based on the maximum degree of reduction for radionuclides which would be emitted from any proposed stationary source or modification of a source which the permitting authority on a case-by-case basis, taking into account energy, environmental, and economic impacts and other costs, determines is achievable for such source or modification through application of production processes or available methods, systems, and techniques. In no event shall application of best available radionuclide technology result in emissions of radionuclides which would exceed the ambient annual standard limitation specified in this chapter.

(2) "Critical organ" means the most exposed human organ or tissue exclusive of the integumentary system (skin) and the cornea.

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

(4) "Dose equivalent" means the product of absorbed dose and appropriate factors to account for differences in biological effectiveness due to the quality of radiation and its distribution in the body. Units of dose equivalent are mrem.

(5) "Emission source" means the point-of-release of airborne emissions of radioactive materials.

(6) "Radionuclide" means any nuclide that emits radiation.

(7) "Whole body" means all human organs or tissue exclusive of the integumentary system (skin) and the cornea.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-247-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.98 RCW. 88-17-060 (Order 2671), § 402-80-040, filed 8/17/88. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-80-040, filed 12/11/86.]

WAC 246-247-040 Standards. The ambient air quality standards and emission limits for radionuclides shall be those promulgated by the department of ecology in chapter 173-480 WAC. The WDOE ambient standard requires that emissions of radionuclides to the air shall not cause a dose equivalent of more than 25 mrem/year to the whole body or 75 mrem/year to a critical organ of any member of the public. Doses due to Radon-220, Radon-222, and their respective decay products are excluded from this chapter. These standards are consistent with Environmental Protection Agency Final Rules for National Emission Standards for Hazardous Air Pollutants (Standards for Radionuclides published in 40 CFR Part 61 on February 6, 1985).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-247-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-80-050, filed 12/11/86.]

WAC 246-247-050 Registration. (1) The owner or operator of each source of airborne radionuclide emissions within the following source categories (unless specifically exempted in WAC 402-80-030) shall register the source with the department:

- (a) NRC-licensed facilities;
- (b) United States Department of Energy Facilities;
- (c) Non-DOE federally owned or operated facilities;

(d) Any other facility having emissions of radionuclides to air in amounts that cause a dose equivalent in excess of 5 mrem/year to the whole body or 15 mrem/year to the critical organ of any member of the public.

(2) State licensees under the authority of other chapters of Title 402 WAC will be deemed registered.

(3) Registration shall be on forms to be supplied by the department. Upon a determination that registration of a particular source meets department of ecology and department of social and health services regulations, the department of social and health services will issue a permit authorizing the emission source with such conditions and limitations as it deems appropriate or necessary.

(4) Fees for permit issuance and inspection services rendered by the department are covered in WAC 440-44-062. A report of closure shall be filed with the department whenever operations producing emissions are permanently ceased at any source within the above categories.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-247-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.98 RCW, 88-17-060 (Order 2671), § 402-80-060, filed 8/17/88. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-80-060, filed 12/11/86.]

WAC 246-247-060 Airborne emission permits.

Each operator of radioactive airborne emission sources shall obtain a permit issued by the department to operate those sources. The department shall grant these permits only after receipt of the appropriate fees and registration materials and a full review of those materials by the department.

(1) For emission sources at facilities licensed by the department, air emission permits shall be part of the source operator's radioactive materials license.

(2) For emission sources at the United States Department of Energy (DOE) Hanford Site, the department shall issue one permit for each major production, processing, or research area, e.g., 200 East Area.

(3) For emission sources at non-DOE federal facilities, the department shall issue one permit for each base or installation, e.g., Puget Sound Naval Shipyard.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-247-060, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.98 RCW, 88-17-060 (Order 2671), § 402-80-065, filed 8/17/88.]

WAC 246-247-070 New and modified sources.

(1) Construction shall not commence, on any new source that is required to register per WAC 402-80-060, until a notice of construction has been approved per WAC 402-80-050.

(2) The owner or operator of any source that is required to register per WAC 402-80-060 shall notify the department prior to replacement of radioactive emission control equipment or process equipment other than replacement for routine maintenance and repair. The department may determine that a notice of construction is required.

(3) The construction, installation or establishment of a new source subject to this chapter shall utilize best available radionuclide control technology (BARCT).

(4) Addition to, or enlargement, modification, replacement, alteration of any process or source, or replacement of radioactive emission control equipment which will significantly change potential radionuclide emissions or significantly change the dose equivalent to any member of the public

will require the proposed project to utilize BARCT for emission control.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-247-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-80-070, filed 12/11/86.]

WAC 246-247-080 Monitoring and reporting.

(1) The department may conduct an environmental surveillance program to assure that radiation exposures to the public from airborne radionuclide emission sources are in compliance with applicable standards.

(2) As a part of the surveillance program, the department may require the operator of any facility under the jurisdiction of the department to conduct stack sampling, ambient air monitoring, or other testing as necessary and to report the results to the department. Such testing may include computer dose modeling and verification.

(3) The use of continuous monitoring equipment by the facility operator is encouraged but may not be feasible for some radionuclides. If the department determines that continuous monitoring is not a feasible or reasonable requirement, alternative monitoring and reporting procedures will be established on an individual basis. These may take the form of stack tests conducted at a frequency sufficient to establish emission levels over time and to monitor deviations in these levels.

(4) The facility operator or owner shall submit a semiannual inventory of emissions from the source upon a form, and according to instructions, issued by the department.

(5) The semiannual inventory shall specify the quantities of each of the principal radionuclides released to unrestricted areas in airborne emissions during the previous six months. This data shall be reported in a manner that will permit the department to confirm the potential annual radiation doses to the public. Reports shall be due in writing by May 1 and November 1 of each year.

(6) To determine compliance with applicable standards, radionuclide emissions shall be determined and dose equivalent to members of the public shall be calculated using EPA-approved sampling procedures, EPA codes AIRDOS-EPA and RADRISK, or other procedures, including those based on environmental measurements, that the department has determined to be suitable. In most cases, compliance will be determined by calculating the dose to members of the public at the point of maximum annual air concentration in an unrestricted area.

(7) The following is a list of approved procedures:
(to be provided later)

(8) In order to demonstrate compliance with this chapter, the department may require that a test be made of the emission source. The operator of the source may be required to provide a sampling platform and sampling ports for the department to perform an emission test. The department shall be allowed to obtain a sample from any emissions unit. The operator may observe the sampling and may obtain a sample at the same time.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-247-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-80-080, filed 12/11/86.]

WAC 246-247-090 Special reports. The facility operator shall advise the department immediately of any shutdown, abnormal operation, or other change in facility operation which could result in an airborne radionuclide emissions violation of applicable standards. If requested by the department, the owner/operator shall submit a written report including known causes, corrective actions taken, and any preventative measures to be taken to minimize or eliminate the chance of recurrence. (See WAC 402-24-190.)

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-247-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-80-090, filed 12/11/86.]

WAC 246-247-100 Regulatory actions. The department may take any of the following regulatory actions to enforce this chapter.

(1) Notice of violation. Whenever the department has reason to believe that any provision of this chapter has been violated, it may cause written notice to be served on the alleged violator or violators. The notice shall specify the provision of this chapter alleged to be violated and the facts alleged to constitute a violation thereof, and may include an order that necessary corrective action be taken within a reasonable time.

(2) Compliance orders. The department may issue a compliance order in conjunction with a notice of violation. The order shall require the recipient of the notice of violation either to take necessary corrective action or to submit a plan for corrective action and a date when such action will be initiated.

(3) Assurance of discontinuance. The department may accept an assurance of discontinuance of any act or practice deemed in violation of this chapter. Any such assurance shall specify a time limit during which discontinuance is to be accomplished. Failure to perform the terms of any such assurance shall constitute prima facie proof of a violation of this chapter which make the alleged act or practice unlawful for the purpose of securing an injunction or other relief from the superior court.

(4) Violations. An injunction or other court order may be obtained prohibiting any violation of any provision of the act or any regulation or order issued thereunder. Any person who violates any provision of the act or any regulation or order issued thereunder may be guilty of a gross misdemeanor and upon conviction, may be punished by fine or imprisonment or both, as provided by law.

(5) Impoundment. Sources of radiation shall be subject to impoundment pursuant to WAC 402-12-140.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-247-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-80-100, filed 12/11/86.]

Chapter 246-249 WAC RADIOACTIVE WASTE—USE OF THE COMMERCIAL DISPOSAL SITE

WAC

246-249-001	Purpose and scope.
246-249-010	Definitions.
246-249-020	Site use permit.
246-249-030	Waste shipment certification.

246-249-040	Classification of radioactive waste for near-surface disposal.
246-249-050	Acceptable radioactive waste forms and packaging.
246-249-060	Labeling.
246-249-070	Variances.
246-249-080	Large volumes of naturally occurring material.
246-249-090	Transfer for disposal and manifests.

WAC 246-249-001 Purpose and scope. This chapter provides rules governing generators and brokers of low-level radioactive waste seeking to dispose of such waste at any commercial disposal facility in the state of Washington. These rules are in addition to applicable requirements of the United States Nuclear Regulatory Commission (NRC), the United States Department of Transportation (DOT), and other requirements of Title 246 WAC, the requirements of the department of ecology, Title 173 WAC, and conditions of the license issued to the disposal site operator(s).

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-16-109 (Order 187), § 246-249-001, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-249-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-62-010, filed 12/11/86.]

WAC 246-249-010 Definitions. As used in this chapter, the following definitions apply:

(1) "Low-level radioactive waste" has the same meaning as in the Low-Level Radioactive Waste Policy Amendments Act of 1985, Public Law 99-240, that is, radioactive waste not classified as high-level radioactive waste, spent nuclear fuel, or by-product material as defined in section 11e.(2) of the Atomic Energy Act.

(2) "Broker" means a person who performs one or more of the following functions for a low-level radioactive waste generator:

(a) Arranges for transportation of the low-level radioactive waste;

(b) Collects and/or consolidates shipments of such low-level radioactive waste;

(c) Processes such low-level radioactive waste in some manner; provided it shall not mean a carrier whose sole function is to transport such low-level radioactive waste.

(3) "Shipper" or "consignor" means the last licensee to possess the low-level radioactive waste prior to transportation to the low-level radioactive waste disposal site, normally the generator when no broker is involved; otherwise, the broker.

(4) "Generator" means the last person who puts radioactive material to practical use, and who then declares it to be no longer of use or value.

(5) "Motor vehicle" means any vehicle, truck, tractor, semi-trailer, or trailer (or any permitted combination of these), driven by mechanical power and used upon the highways to carry property.

(6) "Motor common carrier" means a person holding itself out to the general public to provide motor vehicle transportation for compensation over regular or irregular routes, or both.

(7) "Motor contract carrier" means a person other than a common carrier providing motor vehicle transportation of property for compensation under continuing agreements with one or more persons.

(8) "Motor private carrier" means a person, other than a motor carrier, transporting property by motor vehicle when the person is the owner, lessee, or bailee of the property being transported; and the property is being transported for sale, lease, rent, or bailment, or to further a commercial enterprise.

(9) "Motor carrier" means a motor common carrier and a motor contract carrier.

(10) "Shipment" means the total low-level radioactive waste material transported in one motor vehicle.

(11) "Transuranic waste" means material contaminated with elements that have an atomic number greater than 92.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-010, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-020, filed 12/11/86.]

WAC 246-249-020 Site use permit. (1) Each generator and each broker of low-level radioactive waste shall possess a valid and unencumbered site use permit prior to the shipment of such waste to, or the disposal of such waste at any commercial disposal facility in the state of Washington and shall have complied with the permit requirements of the department of ecology.

(2) Suspension or revocation of permit.

(a) The failure of one or more packages in a shipment of waste to be in compliance with one or more of the requirements of the license issued to the commercial low-level radioactive waste disposal site operator, Title 246 WAC, the United States Nuclear Regulatory Commission, the United States Department of Transportation, or conditions of the disposal site operator's radioactive materials license may cause the suspension of the site use permit of the responsible generator and/or broker.

(b) The site use permit of a generator and/or broker may be suspended or revoked if any other licensed commercial low-level radioactive waste disposal site in the United States has refused to accept waste from that generator or broker.

(c) A suspended site use permit may be reinstated provided the generator and/or broker submits a quality assurance procedure designed to correct previous problems and to achieve compliance with all applicable requirements.

(3) Brokered shipments.

(a) It is the broker's responsibility to assure that a generator of waste has a valid unencumbered site use permit prior to shipment of waste for disposal.

(b) A broker, as consignee, assumes coresponsibility with a generator for all aspects of that generator's waste until it can be documented to the department's satisfaction that the broker's sphere of responsibility was limited.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-020, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-030, filed 12/11/86.]

WAC 246-249-030 Waste shipment certification.

(1) A low-level radioactive waste shipment certification, Form RHF-31, must accompany each shipment of radioactive waste to a licensed low-level radioactive waste burial site. All three sections of the form must be completed. The

certification shall be submitted at the disposal site to the department of health or its designee, and must be judged to be properly executed prior to the acceptance of the waste by the site operator. If a broker is involved, the broker's and carrier's sections must bear original signatures. The generator's signature need not be an original signature. If a broker is acting as the processor and/or packager of the waste, the broker may act as the agent of the generator and may sign the certification statement for the generator, provided the name and site use permit number of the original generator are identified. If no broker is involved, the generator shall so signify by entry in the broker's section of the form that no broker was involved, e.g., "no broker," and the generator and carrier's section must bear original signatures.

(2) In the case of brokered shipments from more than a single generator, information on each generator's certification shall include data clearly identifying, without reference to other documentation, each package transferred from that generator to the broker. The data shall be compatible with package identifications on the shipment manifest (RSR) from the broker, and with identification markings on the packages.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-030, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-040, filed 12/11/86.]

WAC 246-249-040 Classification of radioactive waste for near-surface disposal. (1) **Considerations.**

Determination of the classification of waste involves two considerations. First, consideration must be given to the concentration of long-lived radionuclides (and their shorter-lived precursors) whose potential hazard will persist long after such precautions as institutional controls, improved waste form, and deeper disposal have ceased to be effective. These precautions delay the time when long-lived radionuclides could cause exposures. In addition, the magnitude of the potential dose is limited by the concentration and availability of the radionuclide at the time of exposure. Second, consideration must be given to the concentration of shorter-lived radionuclides for which requirements on institutional controls, waste form, and disposal methods are effective.

(2) **Classes of waste.**

(a) Class A waste is waste that is usually segregated from other waste classes at the disposal site. The physical form and characteristics of Class A waste must meet the minimum requirements set forth in WAC 246-249-050(1). If Class A waste also meets the stability requirements set forth in WAC 246-249-050(2), it is not necessary to segregate the waste for disposal.

(b) Class B waste is waste that must meet more rigorous requirements on waste form to ensure stability after disposal. The physical form and characteristics of Class B waste must meet both the minimum and stability requirements set forth in WAC 246-249-050.

(c) Class C waste is waste that not only must meet more rigorous requirements on waste form to ensure stability but also requires additional measures at the disposal facility to protect against inadvertent intrusion. The physical form and characteristics of Class C waste must meet both the mini-

imum and stability requirements set forth in WAC 246-249-050.

(3) **Classification determined by long-lived radionuclides.** If the waste contains only radionuclides listed in Table 1, classification shall be determined as follows:

(a) If the concentration does not exceed 0.1 times the value in Table 1, the waste is Class A.

(b) If the concentration exceeds 0.1 times the value in Table 1, but does not exceed the value in Table 1, the waste is Class C.

(c) If the concentration exceeds the value in Table 1, the waste is not generally acceptable for near-surface disposal.

(d) For waste containing mixtures of radionuclides listed in Table 1, the total concentration shall be determined by the sum of fractions rule described in subsection (7) of this section.

Table 1

Radionuclide	Concentration Curies/Cubic Meter
C-14	8
C-14 in activated metal	80
Ni-59 in activated metal	220
Nb-94 in activated metal	0.2
Tc-99	3
I-129	0.08
Alpha emitting transuranic radionuclides with half-life greater than five years	100 ¹
Pu-241	3,500 ¹
Cm-242	20,000 ¹
Ra-226	100 ¹

¹ Units are nanocuries per gram, to convert to becquerels (Bq) per gram multiply by 37, to convert from curies to gigabecquerels (GBq) multiply by 37. Specific approval of the department is required for disposal of these radionuclides if their concentration is greater than ten percent of the Table 1 value.

(4) **Classification determined by short-lived radionuclides.** If the waste does not contain any of the radionuclides listed in Table 1, classification shall be determined based on the concentrations shown in Table 2. If the radioactive waste does not contain any radionuclides listed in either Table 1 or 2, it is Class A.

(a) If the concentration does not exceed the value of Column 1, the waste is Class A.

(b) If the concentration exceeds the value in Column 1, but does not exceed the value in Column 2, the waste is Class B.

(c) If the concentration exceeds the value in Column 2, but does not exceed the value in Column 3, the waste is Class C.

(d) If the concentration exceeds the value in Column 3, the waste is not generally acceptable for near-surface disposal.

(e) For wastes containing mixtures of the radionuclides listed in Table 2, the total concentration shall be determined by the sum of fractions rule described in subsection (7) of this section.

Table 2

Radionuclide	Concentration, Curies/ Cubic Meter		
	Column 1	Column 2	Column 3
Total of all radionuclides with less than 5-year half-life	700	(*)	(*)
H-3	40	(*)	(*)
Co-60	700	(*)	(*)
Ni-63	3.5	70	700
Ni-63 in activated metal	35	700	7,000
Sr-90	0.04	150	7,000
Cs-137	1	44	4,600

(*) There are no limits established for these radionuclides in Class B or C wastes. Practical consideration such as the effects of external radiation and internal heat generation on transportation, handling, and disposal will limit the concentrations for these wastes. These wastes shall be Class B unless the concentrations of other radionuclides in Table 2 determine the waste to be Class C independent of these radionuclides. Specific approval of the department is required prior to packaging of Class B tritium waste.

(5) **Classification determined by both long-lived and short-lived radionuclides.** If the waste contains a mixture of radionuclides, some of which are listed in Table 1, and some of which are listed in Table 2, classification shall be determined as follows:

(a) If the concentration of a radionuclide listed in Table 1 is less than 0.1 times the value listed in Table 1, the class shall be that determined by the concentration of radionuclides listed in Table 2.

(b) If the concentration of a radionuclide listed in Table 1 exceeds 0.1 times the value listed in Table 1, the waste shall be Class C, provided the concentration of radionuclides listed in Table 2 does not exceed the value shown in Column 3 of Table 2.

(6) **Classification of waste with radionuclides other than those listed in Tables 1 and 2.** If the waste does not contain any radionuclides listed in either Table 1 or 2, it is Class A.

(7) **The sum of fractions rule for mixtures of radionuclides.** For determining classification for waste that contains a mixture of radionuclides, it is necessary to determine the sum of fractions by dividing each radionuclide's concentration by the appropriate limit and adding the resulting values. The appropriate limits must all be taken from the same column of the same table. The sum of the fractions for the column must be less than or equal to 1.0 if the waste class is to be determined by that column. Example: A waste contains Sr-90 in a concentration of 50 Ci/m³ and Cs-137 in a concentration of 22 Ci/m³. Since the concentrations both exceed the values in Column 1, Table 2, they must be compared to Column 2 values. For Sr-90 fraction, 50/150 = 0.33; for Cs-137 fraction, 22/44 = 0.5; the sum of the fractions = 0.83. Since the sum is less than 1.0, the waste is Class B.

(8) **Determination of concentration in wastes.** The concentration of a radionuclide may be determined by indirect methods such as use of scaling factors which relate to the inferred concentration of one radionuclide to another that is measured, or radionuclide material accountability, if there is reasonable assurance that the indirect methods can

be correlated with actual measurement. The concentration of a radionuclide may be averaged over the volume of the waste, or weight of the waste if the units are expressed as nanocuries per gram.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-040, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-050, filed 12/11/86.]

WAC 246-249-050 Acceptable radioactive waste forms and packaging. (1) Packaging.

(a) Wastes shall be packaged in conformance with the conditions of the license issued to the site operator to which the waste will be shipped. Where the conditions of the site license are more restrictive than the provisions of these regulations, the site license condition shall govern. As a minimum, radioactive waste must be packaged in such a manner that waste containers received at the facility do not show:

- (i) Significant deformation;
- (ii) Loss or dispersal of contents;
- (iii) An increase in the external radiation levels recorded on the manifest, within instrument tolerances; or
- (iv) Significant containment degradation due to rust or other chemical actions.

(b) Wastes shall not be packaged for disposal in cardboard or fiberboard. Wood boxes are prohibited after February 28, 1987.

(c) A process control program shall be used which validates the following:

(i) Liquid waste shall be packaged in sufficient approved absorbent material to absorb twice the volume of the liquid, solidified using an approved solidification agent, or stabilized using an approved stabilization agent.

(ii) Solid wastes containing liquid shall contain as little free-standing and noncorrosive liquid as is reasonably achievable, but in no case shall the liquid exceed one percent of the volume.

(d) Waste shall not be readily capable of detonation or of explosive decomposition or reaction at normal pressures and temperatures, or of explosive reaction with water.

(e) Waste shall not contain, or be capable of generating quantities of toxic gases, vapors, or fumes harmful to persons transporting, handling, or disposing of the waste. This does not apply to radioactive gaseous waste packaged in accordance with (g) of this subsection.

(f) Pyrophoric materials contained in wastes shall be treated, prepared, and packaged to be nonflammable.

(g) Waste in gaseous form must be packaged at a pressure that does not exceed 1.5 atmospheres at 20°C. Total activity shall not exceed 100 curies (3.7×10^{12} Bqs) per container. Class A gaseous waste shall be contained within United States Department of Transportation specification cylinders. Specific approval of the department is required if the gaseous waste is Class B or C.

(h) Wastes containing hazardous, biological, pathogenic, or infectious material shall be treated to reduce the maximum extent practicable the potential hazard from the nonradiological materials. Wastes subject to regulation under Resource Conservation and Recovery Act (RCRA) are not allowed at the disposal site.

(i) Radioactive consumer products, the use and disposal of which is exempt from licensing control, may be received without regard to concentration limits of WAC 246-249-040 Table 2 provided the entire unit is received and is packaged with sufficient sorbent material so as to preclude breakage and rupture of its contents. This subsection allows the disposal of such consumer products as intact household or industrial smoke detector units containing Americium-241 foils and radium or radioactive materials incorporated into self-luminous devices and electron tubes.

(2) The following requirements are intended to provide stability of the waste. Stability is intended to ensure that the waste does not degrade and affect overall stability of the site through slumping, collapse, or other failure of the disposal unit and thereby lead to water infiltration. Stability is also a factor in limiting exposure to an inadvertent intruder, since it provides a recognizable and nondispersible waste form.

(a) Classes B, C, and A stable waste shall have structural stability. A structurally stable waste form will generally maintain its physical dimensions and its form, under the expected disposal conditions such as weight of overburden and compaction equipment, the presence of moisture, and microbial activity, and internal factors such as radiation effects and chemical changes. Structural stability can be provided by the waste form itself, processing the waste to a stable form, or placing the waste in a disposal container or structure that provides stability after disposal.

(b) Notwithstanding the provisions in subsection (1)(c) and (d) of this section, liquid waste, or waste containing liquid, shall be converted into a form that contains as little free-standing and noncorrosive liquid as is reasonably achievable, but in no case shall the liquid exceed one percent of the volume of the waste when the waste is in a disposal container designed to ensure stability, or 0.5 percent of the volume of the waste for waste processed to a stable form.

(c) Void spaces within the radioactive waste and between the waste and its package shall be reduced to the extent practicable. Unless specifically approved by the department, void spaces in Class A stable, Class B, and Class C waste packages shall be less than 15 percent of the total volume of the disposal package, provided the disposal package is not a high integrity container nor contains activated metals that are too large to put into high integrity containers. For Class B and Class C waste packages containing activated metals, voids shall be reduced to the extent practicable, and shall be demonstrated to be structurally stable by any of the methods discussed in (a) of this subsection.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-050, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-060, filed 12/11/86.]

WAC 246-249-060 Labeling. Each package of waste must be clearly labeled to identify whether it is Class A waste, Class B waste, or Class C waste in accordance with WAC 246-249-040. This marking is in addition to any transportation markings or labeling required by the United States Nuclear Regulatory Commission or the United States Department of Transportation and shall consist of lettering one-half inch high or greater in a durable contrasting color

with the background surrounding the lettering. The classification marking shall be visible on the same side as the radioactive marking or label and in close proximity (within six inches). Waste packages marked "Radioactive," "Limited Quantity" or "Radioactive LSA" need only one classification marking whereas waste packages labeled White I, Yellow II, or Yellow III shall have classification markings in close proximity (within six inches) to each label.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-060, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-070, filed 12/11/86.]

WAC 246-249-070 Variances. It is inevitable that a small portion of wastes cannot be treated to fully comply with the waste form requirements of this chapter consistent with the ALARA philosophy of chapter 246-220 WAC. A waste disposal site operator may apply to the department for a variance provided:

- (1) The variance requested is not for a continuing process or waste stream;
- (2) An equivalent or greater degree of protection is provided by the proposed alternative; and
- (3) All reasonable methods of complying with the existing requirement have been considered.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-070, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-080, filed 12/11/86.]

WAC 246-249-080 Large volumes of naturally occurring material. (1) In addition to requirements for a disposal site use permit contained in WAC 246-249-020, permittees and single generators of radioactive wastes shall obtain the specific approval of the department prior to offering wastes for disposal which: (a) Contain naturally occurring radioactive material, excluding source material, (b) contain an average total concentration less than, or equal to, 0.002 microcuries per gram, and (c) total in excess of 1,000 cubic feet per year.

(2) Applications for specific departmental approval shall describe: (a) The chemical processes which produce or have produced the waste, (b) the volume of waste to be disposed per year, (c) an estimate of how long the permittee's disposal needs will continue, (d) actions which have been taken or are planned which could decrease the volume of the waste, and (e) alternative methods of disposal which have been considered by the permittee.

(3) A request for specific approval may be approved if the department finds the material to be: (a) Consistent with disposal site volume utilization, (b) in conformance with conditions of all licenses and permits issued to the disposal site operator, (c) more appropriately disposed at Hanford than by alternative means consistent with the concepts contained in P.L. 99-240 Low Level Radioactive Waste Policy Amendments Act of 1985, and (d) consistent with protection of the public health, safety and environment.

(4) Denial by the department of a request for specific approval shall not be interpreted as an approval to dispose of

naturally occurring radioactive material without regard to its radioactivity.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-080, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-249-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-62-090, filed 12/11/86.]

WAC 246-249-090 Transfer for disposal and manifests. (1) Each shipment of waste to a licensed land disposal facility shall be accompanied by a shipment manifest that contains the name, address, and telephone number of the person generating the waste. The manifest shall also include the name, address, and telephone number of the person transporting the waste to the land disposal facility. The manifest shall also indicate as completely as practicable: A physical description of the waste; the waste volume; radionuclide identity and quantity; the total radioactivity; and the principal chemical form. The solidification, stabilization, or sorption agent shall be specified. Wastes containing more than 0.1 percent chelating agents by weight shall be identified and the weight percentage of the chelating agent estimated. Wastes classified as Class A, Class B, or Class C in WAC 246-249-040 shall be clearly identified as such in the manifest unless transferred to a waste processor who treats or repackages wastes. The total quantity of the radionuclides H-3, C-14, Tc-99 and I-129 must be shown.

(2) The manifest required in subsection (1) of this section may be shipping papers used to meet United States Department of Transportation or United States Environmental Protection Agency regulations or requirements of the receiver, provided all of the required information is included.

(3) Each manifest shall include a certification by the waste generator that the transported materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the United States Department of Transportation and the agency. An authorized representative of the waste generator shall sign and date the manifest.

(4) Any generator licensee who transfers waste to a land disposal facility or a licensed waste collector shall comply with the following requirements. Any licensee who transfers waste to a licensed waste processor who treats or repackages waste shall comply with the requirements of (d) through (h) of this subsection. A licensee shall:

(a) Prepare all wastes so the waste is classified according to WAC 246-249-040 and meets the waste characteristics requirements in WAC 246-249-050.

(b) Label each package of waste to identify whether it is a Class A waste, Class B waste or Class C waste, in accordance with WAC 246-249-040;

(c) Conduct a quality control program to assure compliance with WAC 246-249-040 and 246-249-050; the program must include management evaluation of audits;

(d) Prepare shipping manifests to meet the requirements of subsections (1) and (3) of this section;

(e) Forward a copy of the manifest to the intended recipient, at the time of shipment; or, deliver to a broker at the time the waste is collected, obtaining acknowledgement of receipt in the form of a signed copy of the manifest from the broker;

(f) Include one copy of the manifest with the shipment;

(g) Retain a copy of the manifest with documentation of acknowledgement of receipt as the record of transfer of licensed material as required by these regulations;

(h) For any shipments or any part of a shipment for which acknowledgement of receipt has not been received within the times set forth in this section, conduct an investigation in accordance with subsection (8) of this section.

(5) Any waste broker licensee who handles prepackaged waste shall:

(a) Acknowledge receipt of the waste from the generator within one week of receipt by returning a signed copy of the manifest.

(b) Prepare a new manifest to reflect consolidated shipments; the new manifest shall serve as a listing or index for the detailed generator manifests. Copies of the generator manifests shall be a part of the new manifest.

The waste broker may prepare a new manifest without attaching the generator manifests, provided the new manifest contains for each package the information specified in subsection (1) of this section. The broker licensee shall certify that nothing has been done to the waste which would invalidate the generator's certification.

(c) Forward a copy of the new manifest to the land disposal facility operator at the time of shipment;

(d) Include the new manifest with the shipment to the disposal site.

(e) Retain a copy of the manifest with documentation of acknowledgement of receipt as the record of transfer of licensed material as required by these regulations, and retain information from generator manifests as required by these regulations, and retain information from generator manifests until disposition is authorized by the agency; and

(f) For any shipments or any part of a shipment for which acknowledgement of receipt is not received within the times set forth in this section, conduct an investigation in accordance with subsection (8) of this section.

(6) Any licensed waste processor who treats or repackages wastes shall:

(a) Acknowledge receipt of the waste from the generator within one week of receipt by returning a signed copy of the manifest.

(b) Prepare a new manifest that meets the requirements of subsections (1), (2), and (3) of this section. Preparation of the new manifest reflects that the processor is responsible for the waste;

(c) Prepare all wastes so that the waste is classified according to WAC 246-249-040 and meets the waste characteristics requirement in WAC 246-249-050.

(d) Label each package of waste to identify whether it is Class A waste, Class B waste, or Class C waste, in accordance with WAC 246-249-040 and 246-249-060.

(e) A quality control program shall be conducted to assure compliance with WAC 246-249-040 and 246-249-050. The program shall include management evaluation of audits;

(f) Forward a copy of the new manifest to the disposal site operator or waste broker at the time of shipment, or deliver to a broker at the time the waste is collected, obtaining acknowledgement of receipt in the form of a signed copy of the manifest by the broker.

(g) Include the new manifest with the shipment;

(h) Retain copies of the original manifests and new manifests with documentation of acknowledgement of receipt

as the record of transfer of licensed material required by these regulations.

(i) For any shipment or part of a shipment for which acknowledgement is not received within the times set forth in this section, conduct an investigation in accordance with subsection (8) of this section.

(7) The land disposal facility operator shall:

(a) Acknowledge receipt of the waste within one week of receipt by returning a signed copy of the manifest to the shipper. The shipper to be notified is the licensee who last possessed the waste and transferred the waste to the operator. The returned copy of the manifest shall indicate any discrepancies between materials listed on the manifest and materials received;

(b) Maintain copies of all completed manifests until the agency authorizes their disposition; and

(c) Notify the shipper (i.e., the generator or the broker) and the agency when any shipment or part of a shipment has not arrived within sixty days after the advanced manifest was received.

(8) Any shipment or part of a shipment for which acknowledgement is not received within the time set forth in this section must:

(a) Be investigated by the shipper if the shipper has not received notification of receipt within twenty days after transfer; and

(b) Be traced and reported. The investigation shall include tracing the shipment and filing a report with the agency. Each licensee who conducts a trace investigation shall file a written report with the agency within two weeks of completion of the investigation.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-249-090, filed 8/7/91, effective 9/7/91.]

Chapter 246-250 WAC

RADIOACTIVE WASTE—LICENSING LAND DISPOSAL

WAC

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LAND DISPOSAL OF RADIOACTIVE WASTE

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GENERAL PROVISIONS

WAC 246-250-001 Purpose and scope. (1) The regulations in this chapter establish procedures, criteria, and terms and conditions upon which the department issues licenses for land disposal of low-level radioactive wastes received from other persons. (Applicability of the requirements in this chapter to department licenses for waste disposal facilities in effect on the effective date of this regulation will be determined on a case-by-case basis and implemented through terms and conditions of the license or by orders issued by the department.) The requirements of this chapter are in addition to, and not in substitution for, other applicable requirements of these regulations or other state regulations.

(2) The regulations in this chapter do not apply to disposal of by-product material as defined in WAC 246-220-010 (7)(b) in quantities greater than 10,000 kilograms and containing more than five millicuries of radium 226, or disposal of waste provided in WAC 246-221-070, 246-221-190, or 246-221-200.

(3) This chapter establishes procedural requirements and performance objectives applicable to any method of land disposal. It establishes specific technical requirements for near-surface disposal of radioactive waste which involves disposal in the uppermost portion of the earth.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-001, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-010, filed 12/11/86.]

WAC 246-250-010 Definitions. As used in this chapter, the following definitions apply:

(1) "Active maintenance" means any significant activity needed during the period of institutional control to maintain a reasonable assurance that the performance objectives of WAC 246-250-170 and 246-250-180 are met. Such active maintenance includes ongoing activities such as the pumping and treatment of water from a disposal unit or one-time measures such as replacement of a disposal unit cover. Active maintenance does not include custodial activities such as repair of fencing, repair or replacement of monitoring

equipment, revegetation, minor additions to soil cover, minor repair of disposal unit covers, and general disposal site upkeep such as mowing grass.

(2) "Buffer zone" means a portion of the disposal site that is controlled by the licensee or by the United States Department of Energy and that lies under the disposal units and between the disposal units and the boundary of the site.

(3) "Chelating agent" means amine polycarboxylic acids, hydroxy-carboxylic acids, gluconic acid, and polycarboxylic acids.

(4) "Commencement of construction" means any clearing of land, excavation, or other substantial action that would adversely affect the environment of a land disposal facility. The term does not mean disposal site exploration, necessary roads for disposal site exploration, borings to determine foundation conditions, or other preconstruction monitoring or testing to establish background information related to the suitability of the disposal site or the protection of environmental values.

(5) "Custodial agency" means an agency of the government designated to act on behalf of the government owner of the disposal site.

(6) "Disposal" means the isolation of wastes from the biosphere inhabited by man and his food chains by emplacement in a land disposal facility.

(7) "Disposal site" means that portion of a land disposal facility which is used for disposal of waste. It consists of disposal units and a buffer zone.

(8) "Disposal unit" means a discrete portion of the disposal site into which waste is placed for disposal. For near-surface disposal, the unit is usually a trench.

(9) "Engineered barrier" means a man-made structure or device that is intended to improve the land disposal facility's ability to meet the performance objectives in this chapter.

(10) "Explosive material" means any chemical compound, mixture, or device which produces a substantial instantaneous release of gas and heat spontaneously or by contact with sparks or flame.

(11) "Hazardous waste" means those wastes designated as hazardous by United States Environmental Protection Agency regulations in 40 CFR Part 261.

(12) "Hydrogeologic unit" means any soil or rock unit or zone which by virtue of its porosity or permeability, or lack thereof, has a distinct influence on the storage or movement of groundwater.

(13) "Inadvertent intruder" means a person who might occupy the disposal site after closure and engage in normal activities, such as agriculture, dwelling construction, or other pursuits in which an individual might be unknowingly exposed to radiation from the waste.

(14) "Intruder barrier" means a sufficient depth of cover over the waste that inhibits contact with waste and helps to ensure that radiation exposures to an inadvertent intruder will meet the performance objectives set forth in this chapter, or engineered structures that provide equivalent protection to the inadvertent intruder.

(15) "Land disposal facility" means the land, buildings, and equipment which are intended to be used for the disposal of wastes into the subsurface of the land.

(16) "Monitoring" means observing and making measurements to provide data to evaluate the performance and characteristics of the disposal site.

(17) "Near-surface disposal facility" means a land disposal facility in which waste is disposed within approximately the upper thirty meters of the earth's surface.

(18) "Pyrophoric liquid" means any liquid that ignites spontaneously in dry or moist air at or below 130°F (54.4°C).

(19) "Pyrophoric solid" means any solid material, other than one classed as an explosive, which under normal conditions, is liable to cause fires through friction, retained heat from manufacturing or processing, or which can be ignited readily and, when ignited, burns so vigorously and persistently as to create a serious transportation, handling, or disposal hazard. Included are spontaneously combustible and water-reactive materials.

(20) "Site closure and stabilization" means those actions that are taken upon completion of operations that prepare the disposal site for custodial care and that assure that the disposal site will remain stable and will not need ongoing active maintenance.

(21) "Stability" means structural stability.

(22) "Surveillance" means monitoring and observation of the disposal site for purposes of visual detection of need for maintenance, custodial care, evidence of intrusion, and compliance with other license and regulatory requirements.

(23) "Waste" means those low-level radioactive wastes that are acceptable for disposal in a land disposal facility. For the purposes of this definition, low-level waste has the same meaning as in the Low-Level Radioactive Waste Policy Amendments Act of 1985, Public Law 99-240, that is, radioactive waste not classified as high-level radioactive waste, spent nuclear fuel, or by-product material as defined in section 11 e.(2) of the Atomic Energy Act (uranium or thorium tailings and waste).

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-010, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-020, filed 12/11/86.]

WAC 246-250-020 License required. (1) No person may receive, possess, or dispose of waste received from other persons at a land disposal facility unless authorized by a license issued by the department pursuant to this chapter, and chapter 246-235 WAC.

(2) Each person shall file an application with the department pursuant to chapter 246-235 WAC and obtain a license as provided in this chapter before commencement of construction of a land disposal facility. Failure to comply with this requirement may be grounds for denial of a license.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-020, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-030, filed 12/11/86.]

WAC 246-250-030 Content of application. In addition to the requirements set forth in chapter 246-235 WAC, an application to receive from others, possess, and dispose of wastes shall consist of general information, specific technical information, institutional information, and financial information as set forth in WAC 246-250-040 through 246-250-080.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-030, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-040, filed 12/11/86.]

WAC 246-250-040 General information. The general information shall include each of the following:

(1) Identity of the applicant including:

(a) The full name, address, telephone number, and description of the business or occupation of the applicant;

(b) If the applicant is a partnership, the name and address of each partner and the principal location where the partnership does business;

(c) If the applicant is a corporation or an unincorporated association, (i) the state where it is incorporated or organized and the principal location where it does business, and (ii) the names and addresses of its directors and principal officers; and

(d) If the applicant is acting as an agent or representative of another person in filing the application, all information required under this subsection must be supplied with respect to the other person.

(2) Qualifications of the applicant:

(a) The organizational structure of the applicant, both offsite and onsite, including a description of lines of authority and assignments of responsibilities, whether in the form of administrative directives, contract provisions, or otherwise;

(b) The technical qualifications, including training and experience, of the applicant and members of the applicant's staff to engage in the proposed activities. Minimum training and experience requirements for personnel filling key positions described in (a) of this subsection must be provided.

(c) A description of the applicant's personnel training program; and

(d) The plan to maintain an adequate complement of trained personnel to carry out waste receipt, handling, and disposal operations in a safe manner.

(3) A description of:

(a) The location of the proposed disposal site;

(b) The general character of the proposed activities;

(c) The types and quantities of waste to be received, possessed, and disposed of;

(d) Plans for use of the land disposal facility for purposes other than disposal of wastes; and

(e) The proposed facilities and equipment.

(4) Proposed schedules for construction, receipt of waste, and first emplacement of waste at the proposed land disposal facility.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-050, filed 12/11/86.]

WAC 246-250-050 Specific technical information. The specific technical information shall include the following information needed for demonstration that the performance objectives and the applicable technical requirements of this chapter will be met. The specific technical information shall be in the form of an environmental report which the depart-

ment can use to independently evaluate the project under the provisions of the State Environmental Policy Act (SEPA):

(1) A description of the natural and demographic disposal site characteristics as determined by disposal site selection and characterization activities. The description shall include geologic, geochemical, geotechnical, hydrologic, ecologic, archaeologic, meteorologic, climatologic, and biotic features of the disposal site and vicinity.

(2) A description of the design features of the land disposal facility and the disposal units. For near-surface disposal, the description shall include those design features related to infiltration of water; integrity of covers for disposal units; structural stability of backfill, wastes, and covers; contact of wastes with standing water; disposal site drainage; disposal site closure and stabilization; elimination to the extent practicable of long-term disposal site maintenance; inadvertent intrusion; occupational exposures; disposal site monitoring; and adequacy of the size of the buffer zone for monitoring and potential mitigative measures.

(3) A description of the principal design criteria and their relationship to the performance objectives.

(4) A description of the design basis natural events or phenomena and their relationship to the principal design criteria.

(5) A description of codes and standards which the applicant has applied to the design and which will apply to construction of the land disposal facilities.

(6) A description of the construction and operation of the land disposal facility. The description shall include as a minimum the methods of construction of disposal units; waste emplacement; the procedures for and areas of waste segregation; types of intruder barriers; onsite traffic and drainage systems; survey control program; methods and areas of waste storage; and methods to control surface water and groundwater access to the wastes. The description shall also include a description of the methods to be employed in the handling and disposal of wastes containing chelating agents or other nonradiological substances that might affect meeting the performance objectives of this chapter.

(7) A description of the disposal site closure plan, including those design features which are intended to facilitate disposal site closure and to eliminate the need for ongoing active maintenance.

(8) An identification of the known natural resources at the disposal site, whose exploitation could result in inadvertent intrusion into the wastes after removal of active institutional control.

(9) A description of the kind, amount, classification, and specifications of the radioactive material proposed to be received, possessed, and disposed of at the land disposal facility.

(10) A description of the quality control program for the determination of natural disposal site characteristics and for quality control during the design, construction, operation, and closure of the land disposal facility and the receipt, handling, and emplacement of waste. Audits and managerial controls must be included.

(11) A description of the radiation safety program for control and monitoring of radioactive effluents to ensure compliance with the performance objective in WAC 246-250-170 and occupational radiation exposure to ensure compliance with the requirements of chapter 246-221 WAC

and to control contamination of personnel, vehicles, equipment, buildings, and the disposal site. Both routine operations and accidents shall be addressed. The program description must include procedures, instrumentation, facilities, and equipment.

(12) A description of the environmental monitoring program to provide data to evaluate potential health and environmental impacts and the plan for taking corrective measures if migration is indicated.

(13) A description of the administrative procedures that the applicant will apply to control activities at the land disposal facility.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-050, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-060, filed 12/11/86.]

WAC 246-250-060 Technical analyses. The specific technical information shall also include the following analyses needed to demonstrate that the performance objectives of this chapter will be met:

(1) Pathways analyzed in demonstrating protection of the general population from releases of radioactivity shall include air, soil, groundwater, surface water, plant uptake, and exhumation by burrowing animals. The analyses shall clearly identify and differentiate between the roles performed by the natural disposal site characteristics and design features in isolating and segregating the wastes. The analyses shall clearly demonstrate that there is reasonable assurance that the exposures to humans from the release of radioactivity will not exceed the limits set forth in WAC 246-250-170.

(2) Analyses of the protection of individuals from inadvertent intrusion shall include demonstration that there is reasonable assurance the waste classification and segregation requirements will be met and that adequate barriers to inadvertent intrusion will be provided.

(3) Analyses of the protection of individuals during operations shall include assessments of expected exposures due to routine operations and likely accidents during handling, storage, and disposal of waste. The analyses shall provide reasonable assurance that exposures will be controlled to meet the requirements of chapter 246-221 WAC.

(4) Analyses of the long-term stability of the disposal site and the need for ongoing active maintenance after closure shall be based upon analyses of active natural processes such as erosion, mass wasting, slope failure, settlement of wastes and backfill, infiltration through covers over disposal areas and adjacent soils, and surface drainage of the disposal site. The analyses shall provide reasonable assurance that there will not be a need for ongoing active maintenance of the disposal site following closure.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-060, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-070, filed 12/11/86.]

WAC 246-250-070 Institutional information. The institutional information submitted by the applicant shall include:

(1) A certification by the federal or state agency which owns the disposal site that the federal or state agency is prepared to accept transfer of the license when the provisions of WAC 246-250-140 are met and will assume responsibility for institutional control after site closure and postclosure observation and maintenance.

(2) Where the proposed disposal site is on land not owned by the federal or state government, the applicant shall submit evidence that arrangements have been made for assumption of ownership in fee by the federal or state agency before the department issues a license.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-070, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-080, filed 12/11/86.]

WAC 246-250-080 Financial information. The financial information shall be sufficient to demonstrate that the financial qualifications of the applicant are adequate to carry out the activities for which the license is sought and meet other financial assurance requirements of this chapter.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-090, filed 12/11/86.]

WAC 246-250-090 Requirements for issuance of a license. A license for the receipt, possession, and disposal of waste containing or contaminated with radioactive material will be issued by the department upon finding that:

(1) The issuance of the license will not constitute an unreasonable risk to the health and safety of the public;

(2) The applicant is qualified by reason of training and experience to carry out the disposal operations requested in a manner that protects health and minimizes danger to life or property;

(3) The applicant's proposed disposal site, disposal design, land disposal facility operations, including equipment, facilities, and procedures, disposal site closure, and postclosure institutional control are adequate to protect the public health and safety in that they provide reasonable assurance that the general population will be protected from releases of radioactivity as specified in the performance objective in WAC 246-250-170.

(4) The applicant's proposed disposal site, disposal site design, land disposal facility operations (including equipment, facilities, and procedures), disposal site closure, and postclosure institutional control are adequate to protect the public health and safety in that they will provide reasonable assurance that individual inadvertent intruders are protected in accordance with the performance objective in WAC 246-250-180.

(5) The applicant's proposed land disposal facility operations (including equipment, facilities, and procedures), are adequate to protect the public health and safety in that they will provide reasonable assurance that the standards for radiation protection set out in chapter 246-221 WAC will be met;

(6) The applicant's proposed disposal site, disposal site design, land disposal facility operations, disposal site closure, and postclosure institutional control are adequate to protect the public health and safety in that they will provide reason-

able assurance that long-term stability of the disposed waste and the disposal site will be achieved and will eliminate to the extent practicable the need for ongoing active maintenance of the disposal site following closure;

(7) The applicant's demonstration provides reasonable assurance that the applicable technical requirements of this chapter will be met;

(8) The applicant's proposal for institutional control provides reasonable assurance that such control will be provided for the length of time found necessary to ensure the findings in subsections (3) through (6) of this section and that the institutional control meets the requirements of WAC 246-250-360.

(9) The financial or surety arrangements meet the requirements of this chapter.

(10) The provisions of the State Environmental Policy Act have been met.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-090, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-100, filed 12/11/86.]

WAC 246-250-100 Conditions of licenses. (1) A license issued under this chapter, or any right thereunder, may be transferred, assigned, or in any manner disposed of, either voluntarily or involuntarily, directly or indirectly, through transfer of control of the license to any person, only if the department finds, after securing full information, that the transfer is in accordance with the provisions of the act and gives its consent in writing in the form of a license amendment.

(2) The licensee shall submit written statements under oath upon request of the department, at any time before termination of the license, to enable the department to determine whether the license should be modified, suspended, or revoked.

(3) The license will be terminated only on the full implementation of the final closure plan as approved by the department, including postclosure observation and maintenance.

(4) The licensee shall be subject to the provisions of the act, now or hereafter in effect, and to all rules, regulations, and orders of the department. The terms and conditions of the license are subject to amendment, revision, or modification, by reason of amendments to, or by reason of rules, regulations, and orders issued in accordance with the terms of the act.

(5) Each person licensed by the department pursuant to the regulations in this chapter shall confine possession and use of materials to the locations and purposes authorized in the license.

(6) The licensee shall not dispose of waste until the department has inspected the land disposal facility and has found it to be in conformance with the description, design, and construction described in the application for a license.

(7) The department may incorporate in any license at the time of issuance, or thereafter, by appropriate rule, regulation, or order, additional requirements and conditions with respect to the licensee's receipt, possession, and disposal of waste as it deems appropriate or necessary in order to:

(a) Protect health or to minimize danger to life or property;

(b) Require reports and the keeping of records, and to provide for inspections of activities under the license that may be necessary or appropriate to effectuate the purposes of the act and regulations thereunder.

(8) The authority to dispose of wastes expires on the date stated in the license. Any expiration date on a license applies only to the above ground activities and to the authority to dispose of waste. Failure to renew the license shall not relieve the licensee of responsibility for implementing site closure, postclosure observation, and transfer of the license to the site owner.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-110, filed 12/11/86.]

WAC 246-250-110 Application for renewal or closure. (1) An application for renewal must be filed at least ninety days prior to license expiration.

(2) An application for closure under WAC 246-250-120 must be filed at least one year prior to proposed closure.

(3) Applications for renewal of a license must be filed in accordance with WAC 246-250-030 through 246-250-080. Applications for closure must be filed in accordance with WAC 246-250-120. Information contained in previous applications, statements, or reports filed with the department under the license may be incorporated by reference if the references are clear, specific, and remain pertinent.

(4) In any case in which a licensee has filed an application in proper form for renewal of a license, the license shall not expire until the department has taken final action on the application for renewal.

(5) In determining whether a license will be renewed, the department will apply the criteria set forth in WAC 246-250-090.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-16-109 (Order 187), § 246-250-110, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-120, filed 12/11/86.]

WAC 246-250-120 Contents of application for site closure and stabilization. (1) Prior to final closure of the disposal site, or as otherwise directed by the department, the applicant shall submit an application to amend the license for closure. This closure application shall include a final revision and specific details of the disposal site closure plan included as part of the license application submitted under WAC 246-250-050(7) that includes each of the following:

(a) Any additional geologic, hydrologic, or other data pertinent to the long-term containment of emplaced wastes obtained during the operational period.

(b) The results of tests, experiments, or any other analyses relating to backfill of excavated areas, closure and sealing, waste migration and interaction with emplacement media, or any other tests, experiments, or analysis pertinent to the long-term containment of emplaced waste within the disposal site.

(c) Any proposed revision of plans for:

(i) Decontamination and/or dismantlement of surface facilities;

(ii) Backfilling of excavated areas; or
(iii) Stabilization of the disposal site for postclosure care.

(d) Any significant new information regarding the environmental impact of closure activities and long-term performance of the disposal site.

(2) Upon review and consideration of an application to amend the license for closure submitted in accordance with subsection (1) of this section, the department shall issue an amendment authorizing closure if there is reasonable assurance that the long-term performance objectives of this chapter will be met.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-16-109 (Order 187), § 246-250-120, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-130, filed 12/11/86.]

WAC 246-250-130 Postclosure observation and maintenance. The licensee shall observe, monitor, and carry out necessary maintenance and repairs at the disposal site until the site closure is complete and the license is transferred by the department in accordance with WAC 246-250-140. Responsibility for the disposal site must be maintained by the licensee for five years. A shorter or longer time period for postclosure observation and maintenance may be established and approved as part of the site closure plan, based on site-specific conditions.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-16-109 (Order 187), § 246-250-130, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-140, filed 12/11/86.]

WAC 246-250-140 Transfer of license. Following closure and the period of postclosure observation and maintenance, the licensee may apply for an amendment to transfer the license to the disposal site owner. The license shall be transferred when the department finds:

(1) That the closure of the disposal site has been made in conformance with the licensee's disposal site closure plan, as amended and approved as part of the license;

(2) That reasonable assurance has been provided by the licensee that the performance objectives of this chapter are met;

(3) That any funds and necessary records for care will be transferred to the disposal site owner;

(4) That the postclosure monitoring program is operational for implementation by the disposal site owner; and

(5) That the federal or state agency which will assume responsibility for institutional control of the disposal site is prepared to assume responsibility and ensure that the institutional requirements found necessary under WAC 246-250-090(8) will be met.

[Statutory Authority: RCW 70.98.050 and 70.98.080, 91-16-109 (Order 187), § 246-250-140, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-150, filed 12/11/86.]

WAC 246-250-150 Termination of license. (1) Following any period of institutional control needed to meet

the requirements found necessary under WAC 246-250-090, the licensee may apply for an amendment to terminate the license.

(2) This application will be reviewed in accordance with the provisions of chapter 246-235 WAC.

(3) A license shall be terminated only when the department finds:

(a) That the institutional control requirements found necessary under WAC 246-250-090(8) have been met;

(b) That any additional requirements resulting from new information developed during the institutional control period have been met; and

(c) That permanent monuments or markers warning against intrusion have been installed.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-150, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-160, filed 12/11/86.]

WAC 246-250-160 General requirement. Land disposal facilities shall be sited, designed, operated, closed, and controlled after closure so that reasonable assurance exists that exposures to individuals are within the requirements established in the performance objectives in WAC 246-250-170 through 246-250-200.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-160, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-170, filed 12/11/86.]

WAC 246-250-170 Protection of the general population from releases of radioactivity. Concentrations of radioactive material which may be released to the general environment in groundwater, surface water, air, soil, plants, or animals shall not result in an annual dose exceeding an equivalent of twenty-five millirems (0.25 mSv) to the whole body, seventy-five millirems (0.75 mSv) to the thyroid, and twenty-five millirems (0.25 mSv) to any other organ of any member of the public. Reasonable effort should be made to maintain releases of radioactivity in effluents to the general environment as low as is reasonably achievable.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-180, filed 12/11/86.]

WAC 246-250-180 Protection of individuals from inadvertent intrusion. Design, operation, and closure of the land disposal facility shall ensure protection of any individual inadvertently intruding into the disposal site and occupying the site or contacting the waste at any time after active institutional controls over the disposal site are removed.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-190, filed 12/11/86.]

WAC 246-250-190 Protection of individuals during operations. After the effective date of these regulations, operations at the land disposal facility shall be conducted in compliance with the standards for radiation protection set out in chapter 246-221 WAC, except for releases of radioactivity

in effluents from the land disposal facility, which shall be governed by WAC 246-250-170. Every reasonable effort should be made to maintain radiation exposures as low as is reasonably achievable.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-190, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-200, filed 12/11/86.]

WAC 246-250-200 Stability of the disposal site after closure. The disposal facility shall be sited, designed, used, operated, and closed to achieve long-term stability of the disposal site and to eliminate, to the extent practicable, the need for ongoing active maintenance of the disposal site following closure so that only surveillance, monitoring, or minor custodial care is required.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-210, filed 12/11/86.]

TECHNICAL REQUIREMENTS FOR LAND DISPOSAL FACILITIES

WAC 246-250-300 Disposal site suitability requirements for land disposal. (1) Disposal site suitability for near-surface disposal. The primary emphasis in disposal site suitability is given to isolation of wastes, and to disposal site features that ensure that the long-term performance objectives are met.

(a) The disposal site shall be capable of being characterized, modeled, analyzed, and monitored.

(b) Within the region where the facility is to be located, a disposal site should be selected so that projected population growth and future developments are not likely to affect the ability of the disposal facility to meet the performance objectives of this chapter.

(c) Areas shall be avoided having known natural resources which, if exploited, would result in failure to meet the performance objectives of this chapter.

(d) The disposal site shall be generally well drained and free of areas of flooding or frequent ponding. Waste disposal shall not take place in a one hundred-year flood plain, coastal high-hazard area or wetland, as defined in Executive Order 11988, "Flood Plain Management Guidelines."

(e) Upstream drainage areas shall be minimized to decrease the amount of runoff which could erode or inundate waste disposal units.

(f) The disposal site shall provide sufficient depth to the water table that groundwater intrusion, perennial or otherwise, into the waste will not occur. The department will consider an exception to this requirement to allow disposal below the water table if it can be conclusively shown that disposal site characteristics will result in molecular diffusion being the predominant means of radionuclide movement and the rate of movement will result in the performance objectives being met. In no case will waste disposal be permitted in the zone of fluctuation of the water table.

(g) The hydrogeologic unit used for disposal shall not discharge groundwater to the surface, except for groundwater monitoring operations.

(h) Areas shall be avoided where tectonic processes such as faulting, folding, seismic activity, or vulcanism may occur with such frequency and extent to significantly affect the ability of the disposal site to meet the performance objectives of this chapter or may preclude defensible modeling and prediction of long-term impacts.

(i) Areas shall be avoided where surface geologic processes such as mass wasting, erosion, slumping, landsliding, or weathering occur with such frequency and extent to significantly affect the ability of the disposal site to meet the performance objectives of this chapter, or may preclude defensible modeling and prediction of long-term impacts.

(j) An existing disposal site may be located where nearby facilities or activities could adversely impact the ability of the site to meet the performance objectives of this chapter or significantly mask the environmental monitoring program, provided an extensive environmental monitoring program exists which is designed to differentiate, to the maximum extent practicable, between contributions from the disposal site and other nearby facilities.

(2) (Reserved.)

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-300, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-220, filed 12/11/86.]

WAC 246-250-320 Disposal site design for land disposal. (1) Disposal site design for near-surface disposal.

(a) Site design features shall be directed toward long-term isolation and avoidance of the need for continuing active maintenance after site closure.

(b) The disposal site design and operation shall be compatible with the disposal site closure and stabilization plan and lead to disposal site closure that provides reasonable assurance that the performance objectives will be met.

(c) The disposal site shall be designed to complement and improve, where appropriate, the ability of the disposal site's natural characteristics to assure that the performance objectives will be met.

(d) Covers shall be designed to minimize to the extent practicable water infiltration, to direct percolating or surface water away from the disposed waste, and to resist degradation by surface geologic processes and biotic activity.

(e) Surface features shall direct surface water drainage away from disposal units at velocities and gradients which will not result in erosion that will require ongoing active maintenance in the future.

(f) The disposal site shall be designed to minimize to the extent practicable the contact of water with waste during storage, the contact of standing water with waste during disposal, and the contact of percolating or standing water with wastes after disposal.

(2) (Reserved.)

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-320, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-230, filed 12/11/86.]

WAC 246-250-330 Land disposal facility operation and disposal site closure. (1) Near-surface disposal facility operation and disposal site closure.

(a) Wastes designated as Class A pursuant to chapter 246-249 WAC shall be segregated from other wastes by placing in disposal units which are sufficiently separated from disposal units for the other waste classes so that any interaction between Class A wastes and other wastes will not result in the failure to meet the performance objectives of this chapter. This segregation is not necessary for Class A wastes if they meet the stability requirements in chapter 246-249 WAC.

(b) Wastes designated as Class C pursuant to chapter 246-249 WAC shall be disposed of so that the top of the waste is a minimum of five meters below the top surface of the cover or must be disposed of with intruder barriers that are designed to protect against an inadvertent intrusion for at least five hundred years.

(c) Except as provided in (l) of this subsection, only waste classified as Class A, B, or C shall be acceptable for near-surface disposal. All waste shall be disposed of in accordance with the requirements of (d) through (k) of this subsection.

(d) Wastes shall be emplaced in a manner that maintains the package integrity during emplacement, minimizes the void spaces between packages, and permits the void spaces to be filled.

(e) Void spaces between waste packages shall be filled with earth or other material to reduce future subsidence within the fill.

(f) Waste shall be placed and covered in a manner that limits the radiation dose rate at the surface of the cover to levels that at a minimum will permit the licensee to comply with all provisions of chapter 246-221 WAC at the time the license is transferred pursuant to WAC 246-250-140.

(g) The boundaries and locations of each disposal unit shall be accurately located and mapped by means of a land survey. Near-surface disposal units shall be marked in such a way that the boundaries of each unit can be easily defined. Three permanent survey marker control points, referenced to United States Geological Survey (USGS) or National Geodetic Survey (NGS) survey control stations, shall be established on the site to facilitate surveys. The USGS or NGS control stations shall provide horizontal and vertical controls as checked against USGS or NGS record files.

(h) A buffer zone of land shall be maintained between any buried waste and the disposal site boundary and beneath the disposed waste. The buffer zone shall be of adequate dimensions to carry out environmental monitoring activities specified in WAC 246-250-340(4) and take mitigative measures if needed.

(i) Closure and stabilization measures as set forth in the approved site closure plan shall be carried out as each disposal unit is filled and covered.

(j) Active waste disposal operations shall not have an adverse effect on completed closure and stabilization measures.

(k) Only wastes containing or contaminated with radioactive material shall be disposed of at the disposal site.

(l) Proposals for disposal of waste that is not generally acceptable for near-surface disposal because the waste form and disposal methods must be different and, in general, more stringent than those specified for Class C waste, may be submitted to the department for approval.

(2) (Reserved.)

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-330, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-330, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-240, filed 12/11/86.]

WAC 246-250-340 Environmental monitoring. (1)

At the time a new license application is submitted, the applicant shall have conducted a preoperational monitoring program to provide basic environmental data on the disposal site characteristics. The applicant shall obtain information about the ecology, meteorology, climate, hydrology, geology, geochemistry, and seismology of the disposal site. For those characteristics that are subject to seasonal variation, data must cover at least a twelve-month period.

(2) During the land disposal facility site construction and operation, the licensee shall maintain an environmental monitoring program. Measurements and observations must be made and recorded to provide data to evaluate the potential health and environmental impacts during both the construction and the operation of the facility and to enable the evaluation of long-term effects and the need for mitigative measures. The monitoring system must be capable of providing early warning of releases of waste from the disposal site before they leave the site boundary.

(3) After the disposal site is closed, the licensee responsible for postoperational surveillance of the disposal site shall maintain a monitoring system based on the operating history and the closure and stabilization of the disposal site. The monitoring system must be capable of providing early warning of releases of waste from the disposal site before they leave the site boundary.

(4) The licensee shall have plans for taking corrective measures if the environmental monitoring program detects migration of waste which would indicate that the performance objectives may not be met.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-340, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-250, filed 12/11/86.]

WAC 246-250-350 Alternative requirements for design and operations. The department may, upon request or on its own initiative, authorize provisions other than those set forth in WAC 246-250-300 through 246-250-340 for the segregation and disposal of waste and for the design and operation of a land disposal facility on a specific basis, if it finds reasonable assurance of compliance with the performance objectives of this chapter.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-350, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-350, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-260, filed 12/11/86.]

WAC 246-250-360 Institutional requirements. (1)

Land ownership. Disposal of waste received from other persons may be permitted only on land owned in fee by the federal or state government.

(2) Institutional control. The land owner or custodial agency shall conduct an institutional control program to physically control access to the disposal site following transfer of control of the disposal site from the disposal site

operator. The institutional control program shall also include, but not be limited to, conducting an environmental monitoring program at the disposal site, periodic surveillance, minor custodial care, and other requirements as determined by the department; and administration of funds to cover the costs for these activities. The period of institutional controls will be determined by the department, but controls may not be relied upon for more than one hundred years following transfer of institutional control of the disposal site to the owner.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-360, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-270, filed 12/11/86.]

WAC 246-250-370 Alternative requirements for waste classification and characteristics. The department may, upon request or on its own initiative, authorize other provisions for the classification and characteristics of waste on a specific basis, if, after evaluation of the specific characteristics of the waste, disposal site, and method of disposal, it finds reasonable assurance of compliance with the performance objectives specified in this chapter.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-370, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-280, filed 12/11/86.]

FINANCIAL ASSURANCES

WAC 246-250-500 Applicant qualifications and assurances. Each applicant shall show that it either possesses the necessary funds or has reasonable assurance of obtaining the necessary funds, or by a combination of the two, to cover the estimated costs of conducting all licensed activities over the planned operating life of the project, including costs of construction and disposal.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-500, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-290, filed 12/11/86.]

WAC 246-250-520 Funding for disposal site closure and stabilization. (1) The applicant shall provide assurances prior to the commencement of operations that sufficient funds will be available to carry out disposal site closure and stabilization, including: (a) Decontamination or dismantlement of land disposal facility structures; and (b) closure and stabilization of the disposal site so that following transfer of the disposal site to the site owner, the need for ongoing active maintenance is eliminated to the extent practicable and only minor custodial care, surveillance and monitoring are required. These assurances shall be based on department-approved cost estimates reflecting the department-approved plan for disposal site closure and stabilization. The applicant's cost estimates must take into account total costs that would be incurred if an independent contractor were hired to perform the closure and stabilization work.

(2) In order to avoid unnecessary duplication and expense, the department will accept financial sureties that have been consolidated with earmarked financial or surety arrangements established to meet requirements of federal or other state agencies for such decontamination, closure, and stabilization. The department will accept these arrangements

only if they are considered adequate to satisfy the requirements of this section and that the portion of the surety which covers the closure of the disposal site is clearly identified and committed for use in accomplishing these activities.

(3) The licensee's financial or surety arrangement shall be submitted annually for review by the department to assure that sufficient funds will be available for completion of the closure plan.

(4) The amount of the licensee's financial or surety arrangement shall change in accordance with changes in the predicted costs of closure and stabilization. Factors affecting closure and stabilization cost estimates include inflation, increases in the amount of disturbed land, changes in engineering plans, closure and stabilization that has already been accomplished, and any other conditions affecting costs. The financial or surety arrangement shall be sufficient at all times to cover the costs of closure and stabilization of the disposal units that are expected to be used before the next license renewal.

(5) The financial or surety arrangement shall be written for a specified period of time and shall be automatically renewed unless the person who issues the surety notifies the department, the beneficiary (the site owner), and the principal (the licensee) not less than ninety days prior to the renewal date of its intention not to renew. In such a situation, the licensee must submit a replacement surety within thirty days after notification of cancellation. If the licensee fails to provide a replacement surety acceptable to the department, the beneficiary may collect on the original surety.

(6) Proof of forfeiture shall not be necessary to collect the surety so that, in the event that the licensee could not provide an acceptable replacement surety within the required time, the surety shall be automatically collected prior to its expiration. The conditions described above shall be clearly stated on any surety instrument.

(7) Financial or surety arrangements generally acceptable to the department include surety bonds, cash deposits, certificates of deposit, deposits of government securities, escrow accounts, irrevocable letters or lines of credit, trust funds, and combinations of the above or such other types of arrangements as may be approved by the department. Self-insurance, or any arrangement which essentially constitutes self-insurance, will not satisfy the surety requirement for private sector applicants.

(8) The licensee's financial or surety arrangement shall remain in effect until the closure and stabilization program has been completed and approved by the department, and the license has been transferred to the site owner.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-520, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-300, filed 12/11/86.]

WAC 246-250-530 Financial assurances for institutional controls. (1) Prior to the issuance of the license, the applicant shall provide for departmental approval, a binding arrangement, between the applicant and the disposal site owner that ensures that sufficient funds will be available to cover the costs of monitoring and any required maintenance during the institutional control period. The binding arrangement shall be reviewed annually by the department to ensure

that changes in inflation, technology, and disposal facility operations are reflected in the arrangements.

(2) Subsequent changes to the binding arrangement specified in subsection (1) of this section relevant to institutional control shall be submitted to the department for prior approval.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-250-530, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-61-310, filed 12/11/86.]

RECORDS, REPORTS, TESTS, AND INSPECTIONS

WAC 246-250-600 Maintenance of records, reports, and transfers. (1) Each licensee shall maintain any records and make any reports in connection with the licensed activities as may be required by the conditions of the license or by the rules, regulations, and orders of the department.

(2) Records which are required by these regulations or by license conditions shall be maintained for a period specified by the appropriate regulations or by license condition. If a retention period is not otherwise specified, these records must be maintained and transferred to the officials specified in subsection (4) of this section as a condition of license termination unless the department otherwise authorizes their disposition.

(3) Records which shall be maintained pursuant to this chapter may be the original or a reproduced copy or microfilm if this reproduced copy or microfilm is capable of producing copy that is clear and legible at the end of the required retention period.

(4) Notwithstanding subsections (1) through (3) of this section, copies of records of the location and the quantity of wastes contained in the disposal site must be transferred upon license termination to the chief executive of the nearest municipality, the chief executive of the county in which the facility is located, the county zoning board or land development and planning agency, the state governor, the United States Department of Energy, and other state, local, and federal governmental agencies as designated by the department at the time of license termination.

(5) Following receipt and acceptance of a shipment of waste, the licensee shall record the date of disposal of the waste, the specific location of waste in the disposal site, the condition of the waste packages as received, any discrepancies between materials listed on the manifest and those received, and any evidence of leaking or damaged packages or radiation or contamination levels in excess of limits specified in United States Department of Transportation and state of Washington regulations. The licensee shall briefly describe any repackaging operations of any of the waste packages included in the shipment, plus any other information required by the department as a license condition.

(6) Each licensee authorized to dispose of waste received from other persons shall file a copy of its financial report or a certified financial statement annually with the department in order to update the information base for determining financial qualifications.

(7)(a) Each licensee authorized to dispose of waste received from other persons, pursuant to this chapter, shall submit annual reports to the department. Reports shall be

submitted by the end of the first calendar quarter of each year for the preceding year.

(b) The reports shall include:

(i) Specification of the quantity of each of the principal contaminants released to unrestricted areas in liquid and in airborne effluents during the preceding year;

(ii) The results of the environmental monitoring program;

(iii) A summary of licensee disposal unit survey and maintenance activities;

(iv) A summary, by waste class, of activities and quantities of radionuclides disposed of;

(v) Any instances in which observed site characteristics were significantly different from those described in the application for a license; and

(vi) Any other information the department may require.

(c) If the quantities of waste released during the reporting period, monitoring results, or maintenance performed are significantly different from those expected, the report must cover this specifically.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-250-600, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-600, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-320, filed 12/11/86.]

WAC 246-250-620 Tests on land disposal facilities.

Each licensee shall perform, or permit the department to perform, any tests the department deems appropriate or necessary for the administration of the regulations in this chapter, including but not limited to, tests of:

(1) Wastes;

(2) Facilities used for the receipt, storage, treatment, handling, or disposal of wastes;

(3) Radiation detection and monitoring instruments; or

(4) Other equipment and devices used in connection with the receipt, possession, handling, treatment, storage, or disposal of waste.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-620, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-330, filed 12/11/86.]

LAND DISPOSAL OF RADIOACTIVE WASTE

WAC 246-250-700 Agency inspections of land disposal facilities. (1) Each licensee shall afford to the department at all reasonable times opportunity to inspect waste not yet disposed of, and the premises, equipment, operations, and facilities in which wastes are received, possessed, handled, treated, stored, or disposed.

(2) Each licensee shall make available to the department for inspection, upon reasonable notice, records kept by it pursuant to these regulations. Authorized representatives of the department may copy and take away copies of, for the department's use, any record required to be kept pursuant to these regulations.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-250-700, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-61-340, filed 12/11/86.]

Chapter 246-252 WAC

RADIATION PROTECTION—URANIUM AND/OR THORIUM MILLING

WAC

246-252-001	Reclamation and decommissioning.
246-252-010	Definitions.
246-252-020	Purpose of uranium mill tailings areas.
246-252-030	Criteria related to disposition of uranium mill tailings or wastes.
246-252-040	Continuing dose assessment.
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WAC 246-252-001 Reclamation and decommissioning. A specific plan for reclamation and disposal of tailings and for decommissioning the site of uranium or thorium milling operations shall be included as part of the proposed action assessed under SEPA regulations and guidelines as required by WAC 246-235-080.(6)(a) for licensing of environmentally significant operations. For any uranium or thorium mill in operation on or before the effective date of this regulation for which a plan for reclamation and disposal of tailings and decommissioning of the site has not been submitted and assessed, such a plan must be submitted to the department and a final environmental impact statement or final declaration of nonsignificance must accompany or precede the license renewal.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-252-001, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-252-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 79-12-073 (Order 1459), § 402-52-005, filed 11/30/79, effective 1/1/80.]

WAC 246-252-010 Definitions. The following definitions apply to the specified terms as used in this chapter.

(1) "Aquifer" means a geologic formation, group of formations, or part of a formation capable of yielding a significant amount of groundwater to wells or springs. Any saturated zone created by uranium or thorium recovery operations would not be considered an aquifer unless the zone is, or potentially is (a) hydraulically interconnected to a natural aquifer, (b) capable of discharge to surface water, or (c) reasonably accessible because of migration beyond the vertical projection of the boundary of the land transferred to long-term government ownership and care in accordance with WAC 246-252-030(11).

(2) "Closure" means the activities following operations to decontaminate and decommission the buildings and site used to produce by-product materials and reclaim the tailings and/or waste disposal area.

(3) "Closure plan" means the department approved plan to accomplish closure.

(4) "Compliance period" begins when the department sets secondary groundwater protection standards and ends when the owner or operator's license is terminated and the site is transferred to the state or federal agency for long-term care.

(5) "Dike" means an embankment or ridge of either natural or man-made materials used to prevent the movement of liquids, sludges, solids, or other materials.

(6) "Disposal area" means the area containing by-product materials to which the requirements of Criterion 6 apply.

(7) "Existing portion" means that land surface area of an existing surface impoundment on which significant quantities of uranium or thorium by-product materials had been placed prior to September 30, 1983.

(8) "Groundwater" means water below the land surface in a zone of saturation. For the purposes of this chapter, groundwater is the water contained within an aquifer as defined above.

(9) "Leachate" means any liquid, including any suspended or dissolved components in the liquid, that has percolated through or drained from the by-product material.

(10) "Licensed site" means the area contained within the boundary of a location under the control of persons generating or storing by-product materials under a department license.

(11) "Liner" means a continuous layer of natural or man-made materials, beneath or on the sides of a surface impoundment which restricts the downward or lateral escape of by-product material, hazardous constituents, or leachate.

(12) "Point of compliance" is the site specific location in the uppermost aquifer where the groundwater protection standard must be met.

(13) "Surface impoundment" means a natural topographic depression, man-made excavation, or diked area, which is designed to hold an accumulation of liquid wastes or wastes containing free liquids, and which is not an injection well.

(14) "Uppermost aquifer" means the geologic formation nearest the natural ground surface that is an aquifer, as well as lower aquifers that are hydraulically interconnected with this aquifer within the facility's property boundary.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-252-010, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-252-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-52-050, filed 12/11/86.]

WAC 246-252-020 Purpose of uranium mill tailings areas. Uranium mill tailing areas shall be used only for disposal of radioactive wastes originating from the exploration, mining, and milling of uranium.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-252-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080 and chapter 70.121 RCW. 86-17-027 (Order 2406), § 402-52-090, filed 8/13/86.]

WAC 246-252-030 Criteria related to disposition of uranium mill tailings or wastes. As used in this section, the term "as low as reasonably achievable" has the same meaning as in WAC 246-220-007. The term by-product material has the same meaning as WAC 246-220-010 (6)(b).

As required by WAC 246-235-110(6), each applicant for a license to possess and use source material in conjunction with uranium or thorium milling, or by-product material at sites formerly associated with such milling, is required to include in a license application proposed specifications relating to the milling operation and the disposition of tailings or waste resulting from such milling activities. This section establishes criteria relating to the siting, operation, decontamination, decommissioning, and reclamation of mills

and tailings or waste systems and sites at which such mills and systems are located and site and by-product material ownership. Applications must clearly demonstrate how these criteria have been addressed. The specifications shall be developed considering the expected full capacity of tailings or waste systems and the lifetime of mill operations. Where later expansions of systems or operations may be likely, the amenability of the disposal system to accommodate increased capacities without degradation in long-term stability and other performance factors shall be evaluated.

Licensees or applicants may propose alternatives to the specific requirements in these criteria. The alternative proposals may take into account local or regional conditions, including geology, topography, hydrology, and meteorology. The department may find that the proposed alternatives meet the department's requirements if the alternatives will achieve a level of stabilization and containment of the sites concerned, and a level of protection for public health, safety, and the environment from radiological and nonradiological hazards associated with the sites, which is equivalent to, to the extent practicable, or more stringent than the level which would be achieved by the requirements of the standards promulgated by the United States Environmental Protection Agency in 40 CFR 192, Subparts D and E.

(1) Criterion 1 - In selecting among alternative tailings disposal sites or judging the adequacy of existing tailings sites, the following site features which would contribute to meeting the broad objective of permanent isolation of the tailings and associated contaminants from man and the environment for one thousand years to the extent reasonably achievable, and in any case, for at least two hundred years without ongoing active maintenance shall be considered:

(a) Remoteness from populated areas;

(b) Hydrogeologic and other environmental conditions conducive to continued immobilization and isolation of contaminants from groundwater sources; and

(c) Potential for minimizing erosion, disturbance, and dispersion by natural forces over the long term.

The site selection process must be an optimization to the maximum extent reasonably achievable in terms of these features.

In the selection of disposal sites, primary emphasis shall be given to isolation of tailings or wastes, a matter having long-term impacts, as opposed to consideration only of short-term convenience or benefits, such as minimization of transportation or land acquisition costs. While isolation of tailings will be a function of both site characteristics and engineering design, overriding consideration shall be given to siting features given the long-term nature of the tailings hazards.

Tailings shall be disposed in a manner such that no active maintenance is required to preserve the condition of the site.

(2) Criterion 2 - To avoid proliferation of small waste disposal sites, by-product material from in-situ extraction operations, such as residues from solution evaporation or contaminated control processes, and wastes from small remote above ground extraction operations shall be disposed at existing large mill tailings disposal sites; unless, considering the nature of the wastes, such as their volume and specific activity and the costs and environmental impacts of transporting the wastes to a large disposal site, such offsite

disposal is demonstrated to be impracticable or the advantage of onsite burial clearly outweighs the benefits of reducing the perpetual surveillance obligations.

(3) Criterion 3 - The "prime option" for disposal of tailings is placement below grade, either in mines or specially excavated pits (that is, where the need for any specially constructed retention structure is eliminated).

The evaluation of alternative sites and disposal methods performed by mill operators in support of their proposed tailings disposal program (provided in applicants' environmental reports) shall reflect serious consideration of this disposal mode. In some instances, below grade disposal may not be the most environmentally sound approach, such as might be the case if a groundwater formation is relatively close to the surface or not very well isolated by overlying soils and rock. Also, geologic and topographic conditions might make full, below grade burial impracticable; for example, near-surface bedrock could create prominent excavation costs while more suitable alternate sites may be available. Where full below grade burial is not practicable, the size of the retention structures, and the size and steepness of slopes of associated exposed embankments, shall be minimized by excavation to the maximum extent reasonably achievable or appropriate, given the geologic and hydrogeologic conditions at a site. In these cases, it must be demonstrated that an above-grade disposal program will provide reasonably equivalent isolation of the tailings from natural erosional forces.

(4) Criterion 4 - The following site and design criteria shall be adhered to whether tailings or wastes are disposed of above or below grade:

(a) Upstream rainfall catchment areas must be minimized to decrease erosion potential and the size of the probable maximum flood which could erode or wash out sections of the tailings disposal area.

(b) Topographic features shall provide good wind protection.

(c) Embankment and cover slopes shall be relatively flat after final stabilization to minimize erosion potential and to provide conservative factors of safety assuring long-term stability. The broad objective should be to contour final slopes to grades which are as close as possible to those which would be provided if tailings were disposed of below grade; this could, for example, lead to slopes of about ten horizontal to one vertical (10h:1v) or less steep. In general, slopes should not be steeper than about 5h:1v. Where steeper slopes are proposed, reasons why a slope less steep than 5h:1v would be impracticable should be provided, and compensating factors and conditions which make such slopes acceptable should be identified.

(d) A fully self-sustaining vegetative cover shall be established or rock cover employed to reduce wind and water erosion to negligible levels.

Where a full vegetative cover is not likely to be self-sustaining due to climatic conditions, such as in semi-arid and arid regions, rock cover shall be employed on slopes of the impoundment system. The NRC will consider relaxing this requirement for extremely gentle slopes such as those which may exist on the top of the pile.

The following factors shall be considered in establishing the final rock cover design to avoid displacement of rock

particles by human and animal traffic or by natural processes, and to preclude undercutting and piping:

(i) Shape, size, composition, gradation of rock particles (excepting bedding material, average particle size shall be at least cobble size or greater);

(ii) Rock cover thickness and zoning of particles by size; and

(iii) Steepness of underlying slopes.

(e) Individual rock fragments shall be dense, sound, and resistant to abrasion, and free from defects that would tend to unduly increase their destruction by water and frost actions. Weak, friable, or laminated aggregate shall not be used. Shale, rock laminated with shale, and cherts shall not be used.

Rock covering of slopes may not be required where top covers are on the order of ten meters or greater; impoundment slopes are on the order of 10h:1v or less; bulk cover materials have inherently favorable erosion resistance characteristics; and there is negligible drainage catchment area upstream of the pile, and there is good wind protection as described in (a) and (b) of this subsection.

(f) Impoundment surfaces shall be contoured to avoid areas of concentrated surface runoff or abrupt or sharp changes in slope gradient. In addition to rock cover on slopes, areas toward which surface runoff might be directed shall be well protected with substantial rock cover (riprap). In addition to providing for stability of the impoundment systems itself, the overall stability, erosion potential, and geomorphology of surrounding terrain shall be evaluated to assure that there are no processes, such as gully erosion, which would lead to impoundment instability.

(g) The impoundment shall not be located near a capable fault that could cause a maximum credible earthquake larger than that which the impoundment could reasonably be expected to withstand. As used in this criterion, the term "capable fault" has the same meaning as defined in Section III (g) of Appendix A of 10 CFR Part 100. The term "maximum credible earthquake" means that earthquake which would cause the maximum vibratory ground motion based upon an evaluation of earthquake potential considering the regional and local geology and seismology and specific characteristics of local subsurface material.

(h) The impoundment, where feasible, should be designed to incorporate features which will promote deposition of suspended particles. For example, design features which promote deposition of sediment suspended in any runoff which flows into the impoundment area might be utilized; the object of such a design feature would be to enhance the thickness of cover over time.

(5) Criterion 5 - Criteria 5(a) through 5(g) and new Criterion 13 incorporate the basic groundwater protection standards imposed by the United States Environmental Protection Agency in 40 CFR Part 192, Subparts D and E (48 FR 45926; October 7, 1983) which apply during operations and prior to the end of closure. Groundwater monitoring to comply with these standards is required by Criterion 7.

(a) The primary groundwater protection standard is a design standard for surface impoundments used to manage uranium and thorium by-product material. Surface impoundments (except for an existing portion) must have a liner that

is designed, constructed, and installed to prevent any migration of wastes out of the impoundment to the adjacent subsurface soil, groundwater, or surface water at any time during the active life (including the closure period) of the impoundment. The liner may be constructed of materials that may allow wastes to migrate into the liner (but not into the adjacent subsurface soil, groundwater, or surface water) during the active life of the facility, provided that impoundment closure includes removal or decontamination of all waste residues, contaminated containment system components (liners, etc.), contaminated subsoils, and structures and equipment contaminated with waste and leachate. For impoundments that will be closed with the liner material left in place, the liner must be constructed of materials that can prevent wastes from migrating into the liner during the active life of the facility.

(b) The liner required by (a) of this subsection must be:

(i) Constructed of materials that have appropriate chemical properties and sufficient strength and thickness to prevent failure due to pressure gradients (including static head and external hydrogeologic forces), physical contact with the waste or leachate to which they are exposed, climatic conditions, the stress of installation, and the stress of daily operation;

(ii) Placed upon a foundation or base capable of providing support to the liner and resistance to pressure gradients above and below the liner to prevent failure of the liner due to settlement, compression, or uplift; and

(iii) Installed to cover all surrounding earth likely to be in contact with the wastes or leachate.

(c) The applicant or licensee will be exempted from the requirements of (a) of this subsection if the department finds, based on a demonstration by the applicant or licensee, that alternate design and operating practices, including the closure plan, together with site characteristics will prevent the migration of any hazardous constituents into groundwater or surface water at any future time. In deciding whether to grant an exemption, the department will consider:

(i) The nature and quantity of the wastes;

(ii) The proposed alternate design and operation;

(iii) The hydrogeologic setting of the facility, including the attenuative capacity and thickness of the liners and soils present between the impoundment and groundwater or surface water; and

(iv) All other factors which would influence the quality and mobility of the leachate produced and the potential for it to migrate to groundwater or surface water.

(d) A surface impoundment must be designed, constructed, maintained, and operated to prevent overtopping resulting from normal or abnormal operations; overfilling; wind and wave actions; rainfall; run-on; from malfunctions of level controllers, alarms, and other equipment; and human error.

(e) When dikes are used to form the surface impoundment, the dikes must be designed, constructed, and maintained with sufficient structural integrity to prevent massive failure of the dikes. In ensuring structural integrity, it must not be presumed that the liner system will function without leakage during the active life of the impoundment.

(f) Uranium and thorium by-product materials must be managed to conform to the following secondary groundwater protection standard: Hazardous constituents entering the groundwater from a licensed site must not exceed the

specified concentration limits in the uppermost aquifer beyond the point of compliance during the compliance period. Hazardous constituents are those constituents identified by the department pursuant to (g) of this subsection. Specified concentration limits are those limits established by the department as indicated in (j) of this subsection. The department will also establish the point of compliance and compliance period on a site specific basis through license conditions and orders. The objective in selecting the point of compliance is to provide the earliest practicable warning that the impoundment is releasing hazardous constituents to the groundwater. The point of compliance must be selected to provide prompt indication of groundwater contamination on the hydraulically downgradient edge of the disposal area. The department must identify hazardous constituents, establish concentration limits, set the compliance period, and adjust the point of compliance, if needed, when the detection monitoring established under criterion 7 indicates leakage of hazardous constituents from the disposal area.

(g) A constituent becomes a hazardous constituent subject to (j) of this subsection when the constituent:

(i) Is reasonably expected to be in or derived from the by-product material in the disposal area;

(ii) Has been detected in the groundwater in the uppermost aquifer; and

(iii) Is listed in WAC 246-252-050 Appendix A.

(h) The department may exclude a detected constituent from the set of hazardous constituents on a site specific basis if it finds that the constituent is not capable of posing a substantial present or potential hazard to human health or the environment. In deciding whether to exclude constituents, the department will consider the following:

(i) Potential adverse effect on groundwater quality, considering —

(A) The physical and chemical characteristics of the waste in the licensed site, including its potential for migration;

(B) The hydrogeological characteristics of the facility and surrounding land;

(C) The quantity of groundwater and the direction of groundwater flow;

(D) The proximity and withdrawal rates of groundwater users;

(E) The current and future uses of groundwater in the area;

(F) The existing quality of groundwater, including other sources of contamination and their cumulative impact on the groundwater quality;

(G) The potential for health risks caused by human exposure to waste constituents;

(H) The potential damage to wildlife, crops, vegetation, and physical structures caused by exposure to waste constituents;

(I) The persistence and permanence of the potential adverse effects.

(ii) Potential adverse effects on hydraulically-connected surface water quality, considering —

(A) The volume and physical and chemical characteristics of the waste in the licensed site;

(B) The hydrogeological characteristics of the facility and surrounding land;

(C) The quantity and quality of groundwater, and the direction of groundwater flow;

(D) The patterns of rainfall in the region;

(E) The proximity of the licensed site to surface waters;

(F) The current and future uses of surface waters in the area and any water quality standards established for those surface waters;

(G) The existing quality of surface water, including other sources of contamination and the cumulative impact on surface water quality;

(H) The potential for health risks caused by human exposure to waste constituents;

(I) The potential damage to wildlife, crops, vegetation, and physical structures caused by exposure to waste constituents; and

(J) The persistence and permanence of the potential adverse effects.

(i) In making any determinations under (h) and (k) of this subsection about the use of groundwater in the area around the facility, the department will consider any identification of underground sources of drinking water and exempted aquifers made by the United States Environmental Protection Agency.

(j) At the point of compliance, the concentration of a hazardous constituent must not exceed —

(i) The department approved background concentration of that constituent in the groundwater;

(ii) The respective value given in the table in subsection (5)(l) of this section if the constituent is listed in the table and if the background level of the constituent is below the value listed; or

(iii) An alternate concentration limit established by the department.

(k) Conceptually, background concentrations pose no incremental hazards and the drinking water limits in (j)(i) of this subsection state acceptable hazards but these two options may not be practically achievable at a specific site. Alternate concentration limits that present no significant hazard may be proposed by licensees for department consideration. Licensees must provide the basis for any proposed limits including consideration of practicable corrective actions, that limits are as low as reasonably achievable, and information on the factors the department must consider.

The department will establish a site specific alternate concentration limit for a hazardous constituent as provided in (j) of this subsection if it finds that the constituent will not pose a substantial present or potential hazard to human health or the environment as long as the alternate concentration limit is not exceeded. In establishing alternate concentration limits, the department will apply its as low as reasonably achievable criterion in this chapter. The department will also consider the following factors:

(i) Potential adverse effects on groundwater quality, considering —

(A) The physical and chemical characteristics of the waste in the licensed site including its potential for migration;

(B) The hydrogeological characteristics of the facility and surrounding land;

(C) The quantity of groundwater and the direction of groundwater flow;

(D) The proximity and withdrawal rates of groundwater users;

(E) The current and future uses of groundwater in the area;

(F) The existing quality of groundwater, including other sources of contamination and their cumulative impact on the groundwater quality;

(G) The potential for health risks caused by human exposure to waste constituents;

(H) The potential damage to wildlife, crops, vegetation, and physical structures caused by exposure to waste constituents;

(I) The persistence and permanence of the potential adverse effects.

(ii) Potential adverse effects on hydraulically-connected surface water quality, considering —

(A) The volume and physical and chemical characteristics of the waste in the licensed site;

(B) The hydrogeological characteristics of the facility and surrounding land;

(C) The quantity and quality of groundwater, and the direction of groundwater flow;

(D) The patterns of rainfall in the region;

(E) The proximity of the licensed site to surface waters;

(F) The current and future uses of surface waters in the area and any water quality standards established for those surface waters;

(G) The existing quality of surface water including other sources of contamination and the cumulative impact on surface water quality;

(H) The potential for health risks caused by human exposure to waste constituents;

(I) The potential damage to wildlife, crops, vegetation, and physical structures caused by exposure to waste constituents; and

(J) The persistence and permanence of the potential adverse effects.

(l) MAXIMUM VALUES FOR GROUNDWATER PROTECTION:

Constituent or Property	Maximum Concentration
	Milligrams per liter
Arsenic	0.05
Barium	1.0
Cadmium	0.01
Chromium	0.05
Lead	0.05
Mercury	0.002
Selenium	0.01
Silver	0.05
Endrin (1,2,3,4,10,10-hexachloro-1,7 -epoxy-1,4,4a,5,6,7,8,9a-octahydro-1, 4-endo, endo-5,8-dimethano naphthalene)	0.0002
Lindane (1,2,3,4,5,6-hexachlorocyclohexane, gamma isomer)	0.004
Methoxychlor (1,1,1-Trichloro-2,2-bis (p-methoxyphenylethane)	0.1
Toxaphene (C ₁₀ H ₁₀ Cl ₆ , Technical chlorinated camphene, 67-69 percent chlorine)	0.005
2,4-D (2,4-Dichlorophenoxyacetic acid)	0.1
2,4,5-TP Silvex (2,4,5-Trichlorophenoxypropionic acid)	0.01

	Picocuries per liter
Combined radium - 226 and radium - 228	5
Gross alpha - particle activity (excluding radon and uranium when producing uranium by-product material or thorium when producing thorium by-product material)	15

(m) If the groundwater protection standards established under (f) of this subsection are exceeded at a licensed site, a corrective action program must be put into operation as soon as is practicable, and in no event later than eighteen months after the department finds that the standards have been exceeded. The licensee shall submit the proposed corrective action program and supporting rationale for department approval prior to putting the program into operation, unless otherwise directed by the department. The objective of the program is to return hazardous constituent concentration levels in groundwater to the concentration limits set as standards. The licensee's proposed program must address removing the hazardous constituents that have entered the groundwater at the point of compliance or treating them in place. The program must also address removing or treating in place any hazardous constituents that exceed concentration limits in groundwater between the point of compliance and the downgradient facility property boundary. The licensee shall continue corrective action measures to the extent necessary to achieve and maintain compliance with the groundwater protection standard. The department will determine when the licensee may terminate corrective action measures based on data from the groundwater monitoring program and other information that provide reasonable assurance that the groundwater protection standard will not be exceeded.

(n) In developing and conducting groundwater protection programs, applicants and licensees shall also consider the following:

(i) Installation of bottom liners (where synthetic liners are used, a leakage detection system must be installed immediately below the liner to ensure major failures are detected if they occur. This is in addition to the groundwater monitoring program conducted as provided in Criterion 7. Where clay liners are proposed or relatively thin, in-situ clay soils are to be relied upon for seepage control, tests must be conducted with representative tailings solutions and clay materials to confirm that no significant deterioration of permeability or stability properties will occur with continuous exposure of clay to tailings solutions. Tests must be run for a sufficient period of time to reveal any effects if they are going to occur (in some cases deterioration has been observed to occur rather rapidly after about nine months of exposure)).

(ii) Mill process designs which provide the maximum practicable recycle of solutions and conservation of water to reduce the net input of liquid to the tailings impoundment.

(iii) Dewatering of tailings by process devices and/or in-situ drainage systems (at new sites, tailings must be dewatered by a drainage system installed at the bottom of the impoundment to lower the phreatic surface and reduce the driving head of seepage, unless tests show tailings are not amenable to such a system. Where in-situ dewatering is to be conducted, the impoundment bottom must be graded to assure that the drains are at a low point. The drains must be protected by suitable filter materials to assure that drains

remain free running. The drainage system must also be adequately sized to assure good drainage).

(iv) Neutralization to promote immobilization of hazardous constituents.

(o) Where groundwater impacts are occurring at an existing site due to seepage, action must be taken to alleviate conditions that lead to excessive seepage impacts and restore groundwater quality. The specific seepage control and groundwater protection method, or combination of methods, to be used must be worked out on a site-specific basis. Technical specifications must be prepared to control installation of seepage control systems. A quality assurance, testing, and inspection program, which includes supervision by a qualified engineer or scientist, must be established to assure the specifications are met.

(p) In support of a tailings disposal system proposal, the applicant/operator shall supply information concerning the following:

(i) The chemical and radioactive characteristics of the waste solutions.

(ii) The characteristics of the underlying soil and geologic formations particularly as they will control transport of contaminants and solutions. This includes detailed information concerning extent, thickness, uniformity, shape, and orientation of underlying strata. Hydraulic gradients and conductivities of the various formations must be determined. This information must be gathered from borings and field survey methods taken within the proposed impoundment area and in surrounding areas where contaminants might migrate to groundwater. The information gathered on boreholes must include both geologic and geophysical logs in sufficient number and degree of sophistication to allow determining significant discontinuities, fractures, and channeled deposits of high hydraulic conductivity. If field survey methods are used, they should be in addition to and calibrated with borehole logging. Hydrologic parameters such as permeability may not be determined on the basis of laboratory analysis of samples alone; a sufficient amount of field testing (e.g., pump tests) must be conducted to assure actual field properties are adequately understood. Testing must be conducted to allow estimating chemi-sorption attenuation properties of underlying soil and rock.

(iii) Location, extent, quality, capacity and current uses of any groundwater at and near the site.

(q) Steps must be taken during stockpiling of ore to minimize penetration of radionuclides into underlying soils; suitable methods include lining and/or compaction of ore storage areas.

(6) Criterion 6 - (a) In cases where waste by-product material is to be permanently disposed, an earthen cover shall be placed over tailings or wastes at the end of the milling operations and the waste disposal area shall be closed in accordance with a design¹ which shall provide reasonable assurance of control of radiological hazard to:

(i) Be effective for one thousand years, to the extent reasonably achievable, and, in any case, for at least two hundred years; and

(ii) Limit releases of Radon-222 from uranium by-product materials, and Radon-220 from thorium by-product materials, to the atmosphere so as to not exceed an average² release rate of twenty picocuries per square meter per second (pCi/m²s) to the extent practicable throughout the effective

design life determined pursuant to (a)(i) of this subsection. In computing required tailings cover thicknesses, moisture in soils in excess of amounts found normally in similar soils in similar circumstances shall not be considered. Direct gamma exposure from the tailings or wastes should be reduced to background levels. The effects of any thin synthetic layer shall not be taken into account in determining the calculated radon exhalation level. If nonsoil materials are proposed as cover materials, it must be demonstrated that such materials will not crack or degrade by differential settlement, weathering, or other mechanism over long term time intervals.

(b) Near surface materials (i.e., within the top three meters) shall not include mine waste or rock that contains elevated levels of radium; soils used for near surface cover must be essentially the same, as far as radioactivity is concerned, as that of surrounding soils. This is to insure that surface radon exhalation is not significantly above background because of the cover material itself.

(c) The design requirements in this criterion for longevity and control of radon releases shall apply to any portion of a licensed and/or disposal site unless such portion contains a concentration of radium in land, averaged over areas of one hundred square meters, which, as a result of by-product material does not exceed the background level by more than:

(i) Five picocuries per gram (pCi/g) of Radium-226, or, in the case of thorium by-product material, Radium-228, averaged over the first fifteen centimeters below the surface; and

(ii) Fifteen pCi/g of Radium-226, or, in the case of thorium by-product material, Radium-228, averaged over fifteen centimeters thick layers more than fifteen centimeters below the surface.

(d) The licensee must also address the nonradiological hazards associated with the wastes in planning and implementing closure. The licensee shall ensure that disposal areas are closed in a manner that minimizes the need for further maintenance. To the extent necessary to prevent threats to human health and the environment, the licensee shall control, minimize, or eliminate post-closure escape of nonradiological hazardous constituents, leachate, contaminated rainwater, or waste decomposition products to the ground or surface waters or to the atmosphere.

Footnotes:

¹ The standard applies to design. Monitoring for radon after installation of an appropriately designed cover is not required.

² This average shall apply to the entire surface of each disposal area over periods of at least one year, but short compared to one hundred years. Radon will come from both uranium by-product materials and from covering material. Radon emissions from covering materials should be estimated as part of developing a closure plan for each site. The standard, however, applies only to emissions from by-product materials to the atmosphere.

(7) Criterion 7 - At least one full year prior to any major site construction, a preoperational monitoring program must be conducted to provide complete baseline data on a milling site and its environs. Throughout the construction and operating phases of the mill, an operational monitoring program must be conducted to complete the following:

(a) To measure or evaluate compliance with applicable standards and regulations;

(b) To evaluate performance of control systems and procedures;

(c) To evaluate environmental impacts of operation; and
(d) To detect potential long-term effects.

The licensee shall establish a detection monitoring program needed for the department to set the site-specific groundwater protection standards in Criterion 5 of this section. For all monitoring under this paragraph, the licensee or applicant will propose for department approval as license conditions, which constituents are to be monitored on a site-specific basis. A detection monitoring program has two purposes. The initial purpose of the program is to detect leakage of hazardous constituents from the disposal area so that the need to set groundwater protection standards is monitored. If leakage is detected, the second purpose of the program is to generate data and information needed for the department to establish the standards under Criterion 5. The data and information must provide a sufficient basis to identify those hazardous constituents which require concentration limit standards and to enable the department to set the limits for those constituents and the compliance period. They may also need to provide the basis for adjustments to the point of compliance. For licenses in effect September 30, 1983, the detection monitoring programs must have been in place by October 1, 1984. For licenses issued after September 30, 1983, the detection monitoring programs must be in place when specified by the department in orders or license conditions. Once groundwater protection standards have been established pursuant to Criterion 5, the licensee shall establish and implement a compliance monitoring program. The purpose of the compliance monitoring program is to determine that the hazardous constituent concentrations in ground water continue to comply with the standards set by the department. In conjunction with a corrective action program, the licensee shall establish and implement a corrective action monitoring program. The purpose of the corrective action monitoring program is to demonstrate the effectiveness of the corrective actions. Any monitoring program required by this paragraph may be based on existing monitoring programs to the extent the existing programs can meet the stated objective for the program.

(8) Criterion 8 - Milling operations shall be conducted so that all airborne effluent releases are reduced to as low as is reasonably achievable. The primary means of accomplishing this shall be by means of emission controls. Institutional controls, such as extending the site boundary and exclusion area, may be employed to ensure that offsite exposure limits are met, but only after all practicable measures have been taken to control emissions at the source. Notwithstanding the existence of individual dose standards, strict control of emissions is necessary to assure that population exposures are reduced to the maximum extent reasonably achievable and to avoid site contamination. The greatest potential sources of offsite radiation exposure (aside from radon exposure) are dusting from dry surfaces of the tailings disposal area not covered by tailings solution and emissions from yellowcake drying and packaging operations. During operations and prior to closure, radiation doses from radon emissions from surface impoundments shall be kept as low as is reasonably achievable. Checks shall be made and logged hourly of all parameters (e.g., differential pressure and scrubber water flow rate) which determine the efficiency of yellowcake stack emission control equipment operation. It shall be determined whether or not conditions are within

a range prescribed to ensure that the equipment is operating consistently near peak efficiency; corrective action shall be taken when performance is outside of prescribed ranges. Effluent control devices shall be operative at all times during drying and packaging operations and whenever air is exhausting from the yellowcake stack.

Drying and packaging operations shall terminate when controls are inoperative. When checks indicate the equipment is not operating within the range prescribed for peak efficiency, actions shall be taken to restore parameters to the prescribed range. When this cannot be done without shutdown and repairs, drying and packaging operations shall cease as soon as practicable.

Operations may not be restarted after cessation due to off-normal performance until needed corrective actions have been identified and implemented. All such cessations, corrective actions, and restarts shall be reported to the department in writing, within ten days of the subsequent restart.

To control dusting from tailings, that portion not covered by standing liquids shall be wetted or chemically stabilized to prevent or minimize blowing and dusting to the maximum extent reasonably achievable. This requirement may be relaxed if tailings are effectively sheltered from wind, such as may be the case where they are disposed of below grade and the tailings surface is not exposed to wind. Consideration shall be given in planning tailings disposal programs to methods which would allow phased covering and reclamation of tailings impoundments since this will help in controlling particulate and radon emissions during operation. To control dustings from diffuse sources, such as tailings and ore pads where automatic controls do not apply, operators shall develop written operating procedures specifying the methods of control which will be utilized.

Milling operations producing or involving thorium by-product material shall be conducted in such a manner as to provide reasonable assurance that the annual dose equivalent does not exceed twenty-five millirems to the whole body, seventy-five millirems to the thyroid, and twenty-five millirems to any other organ of any member of the public as a result of exposures to the planned discharge of radioactive materials, Radon-220 and its daughters excepted, to the general environment.

Uranium and thorium by-product materials shall be managed so as to conform to the applicable provisions of Title 40 of the Code of Federal Regulations, Part 440, Ore Mining and Dressing Point Source Category: Effluent Limitations Guidelines and New Source Performance Standards, Subpart C, Uranium, Radium, and Vanadium Ores Subcategory, as codified on January 1, 1983.

The licensee shall establish a detection monitoring program needed to establish the groundwater protection standards in subsection (5)(f) of this section. A detection monitoring program has two purposes. The initial purpose of the program is to detect leakage of hazardous constituents from the disposal area so that the need to set groundwater protection standards is monitored. If leakage is detected, the second purpose of the program is to generate data and information needed for the department to establish the standards under subsection (5)(f) of this section. The data and information must provide a sufficient basis to identify those hazardous constituents which require concentration

limit standards and to enable the department to set the limits for those constituents and the compliance period. They may also need to provide the basis for adjustments to the point of compliance. For licenses in effect September 30, 1983, the detection monitoring programs must have been in place by October 1, 1984. For licenses issued after September 30, 1983, the detection monitoring programs must be in place when specified by the department in orders or license conditions. Once groundwater protection standards have been established pursuant to subsection (5)(f) of this section, the licensee shall establish and implement a compliance monitoring program. The purpose of the compliance monitoring program is to determine that the hazardous constituent concentrations in groundwater continue to comply with the standards set by the department. In conjunction with a corrective action program, the licensee shall establish and implement a corrective action monitoring program. The purpose of the corrective action monitoring program is to demonstrate the effectiveness of the corrective actions. Any monitoring program required by this paragraph may be based on existing monitoring programs to the extent the existing programs can meet the stated objective for the program.

Daily inspections of tailings or waste retention systems must be conducted by a qualified engineer or scientist and documented. The department must be immediately notified of any failure in a tailings or waste retention system which results in a release of tailings or waste into unrestricted areas, and/or of any unusual conditions (conditions not contemplated in the design of the retention system) which if not corrected could indicate the potential or lead to failure of the system and result in a release of tailings or waste into unrestricted areas.

(9) Criterion 9 - (a) Pursuant to chapter 70.121 RCW, and except as otherwise provided, financial surety arrangements for site reclamation and long-term surveillance and control which may consist of surety bonds, cash deposits, certificates of deposit, deposits of government securities, irrevocable letters or lines of credit, or any combination of the above, or other arrangements approved by the department, milling operations shall be established for source material to ensure the protection of the public health and safety in the event of abandonment, default, or other inability of the licensee to meet the requirements of the act and these regulations.

(i) The amount of funds to be ensured by such surety arrangements shall be based on department-approved cost estimates.

(ii) Self-insurance, or any arrangement which essentially constitutes self-insurance (e.g., a contract with a state or federal agency), will not satisfy the surety requirement, since this provides no additional assurance other than that which already exists through license requirements.

(b) The arrangements required in (a) of this subsection shall be established prior to commencement of operations to assure that sufficient funds will be available to carry out decontamination and decommissioning of the facility.

(c) Amendments to licenses in effect on the effective date of this regulation may be issued, providing that the required surety arrangements are established within ninety days after the effective date of this subsection.

(d) For source material milling operations, the amount of funds to be ensured by such surety arrangements shall be

based on department-approved cost estimates in an approved plan for (i) decontamination and decommissioning of mill buildings and the milling site to levels which would allow unrestricted use of these areas upon decommissioning, and (ii) the reclamation of tailings and/or waste disposal areas in accordance with the technical criteria delineated in this section. The licensee shall submit this plan in conjunction with an environmental report that addresses the expected environmental impacts of the milling operation, decommissioning and tailings reclamation, and evaluates alternatives for mitigating these impacts. In addition, the surety shall cover the payment of the charge for long-term surveillance and control required by the department. In establishing specific surety arrangements, the licensee's cost estimates shall take into account total costs that would be incurred if an independent contractor were hired to perform the decommissioning and reclamation work. In order to avoid unnecessary duplication and expense, the department may accept financial sureties that have been consolidated with financial or surety arrangements established to meet requirements of other federal or state agencies and/or local governing bodies for such decommissioning, decontamination, reclamation, and long-term site surveillance, provided such arrangements are considered adequate to satisfy these requirements and that portion of the surety which covers the decommissioning and reclamation of the mill, mill tailings site and associated areas, and the long-term funding charge is clearly identified and committed for use in accomplishing these activities. The licensee's surety mechanism will be reviewed annually by the department to assure that sufficient funds will be available for completion of the reclamation plan if the work had to be performed by an independent contractor. The amount of surety liability should be adjusted to recognize any increases or decreases resulting from inflation, changes in engineering plans, activities performed, and any other conditions affecting costs. Regardless of whether reclamation is phased through the life of the operation or takes place at the end of operations, an appropriate portion of surety liability shall be retained until final compliance with the reclamation plan is determined. This will yield a surety that is at least sufficient at all times to cover the costs of decommissioning and reclamation of the areas that are expected to be disturbed before the next license renewal. The term of the surety mechanism must be open ended, unless it can be demonstrated that another arrangement would provide an equivalent level of assurance. This assurance could be provided with a surety instrument which is written for a specific period of time (e.g., five years), yet which must be automatically renewed unless the surety notifies the beneficiary (the state regulatory agency) and the principal (the licensee) some reasonable time (e.g., ninety days) prior to the renewal date of their intention not to renew. In such a situation, the surety requirement still exists and the licensee would be required to submit an acceptable replacement surety within a brief period of time to allow at least sixty days for the department to collect.

Proof of forfeiture must not be necessary to collect the surety so that in the event that the licensee could not provide an acceptable replacement surety within the required time, the surety shall be automatically collected prior to its expiration. The conditions described above would have to

be clearly stated on any surety instrument which is not open-ended and must be agreed to by all parties.

Long-term care requirements. Pursuant to chapter 70.121 RCW, and as otherwise provided in WAC 246-235-080 (6)(d), a long-term care trust fund shall be established by source material milling licensees prior to the issuance of the license.

(10) Criterion 10 - (a) A minimum charge of two hundred fifty thousand dollars (1978 United States dollars) accrued as specified in WAC 246-235-080 (6)(d) to cover the costs of long-term surveillance shall be paid by each mill operator to the agency prior to the termination of a uranium or thorium mill license. If site surveillance or control requirements at a particular site are determined, on the basis of a site-specific evaluation, to be significantly greater than those specified in (a) of this subsection (e.g., if fencing is determined to be necessary), variance in funding requirements may be specified by the department. The total charge to cover the costs of long-term surveillance shall be such that, with an assumed one percent annual real interest rate, the collected funds will yield interest in an amount sufficient to cover the annual costs of site surveillance. The charge will be adjusted annually prior to actual payments to recognize inflation. The inflation rate to be used is that indicated by the change in the consumer price index published by the United States Department of Labor, Bureau of Labor Statistics. Contributions by a licensee to the long-term care trust fund pursuant to chapter 70.121 RCW shall be transferred to cover the costs assessed under this criterion.

(11) Criterion 11 - These criteria relating to ownership of tailings and their disposal sites become effective on November 8, 1981, and apply to all licenses terminated, issued, or renewed after that date.

Any uranium or thorium milling license or tailings license shall contain such terms and conditions as the United States Nuclear Regulatory Commission determines necessary to assure that prior to termination of the license, the licensee will comply with ownership requirements of this criterion for sites used for tailings disposal.

Title to the by-product material licensed pursuant to WAC 246-252-030 and land, including any interests therein (other than land owned by the United States or by the state of Washington) which is used for the disposal of any such by-product material, or is essential to ensure the long-term stability of such disposal site, shall be transferred to the United States or the state of Washington. In view of the fact that physical isolation must be the primary means of long term control, and government land ownership is a desirable supplementary measure, ownership of certain severable subsurface interests (for example, mineral rights) may be determined to be unnecessary to protect the public health and safety and the environment. In any case, the applicant/operator must demonstrate a serious effort to obtain such subsurface rights, and must, in the event that certain rights cannot be obtained, provide notification in local public land records of the fact that the land is being used for the disposal of radioactive material and is subject to either a United States Nuclear Regulatory Commission general or specific license prohibiting the disruption and disturbance of the tailings. In some rare cases, such as may occur with deep burial where no ongoing site surveillance will be required, surface land ownership transfer requirements may

be waived. For licenses issued before November 8, 1981, the United States Nuclear Regulatory Commission may take into account the status of the ownership of such land, and interests therein, and the ability of a licensee to transfer title and custody thereof to the United States or the state. If the United States Nuclear Regulatory Commission, subsequent to title transfer, determines that use of the surface or subsurface estates, or both, of the land transferred to the United States or to a state will not endanger the public health, safety, welfare or environment, the United States Nuclear Regulatory Commission may permit the use of the surface or subsurface estates, or both, of such land in a manner consistent with the provisions provided in these criteria. If the United States Nuclear Regulatory Commission permits such use of such land, it will provide the person who transferred such land with the right of first refusal with respect to such use of such land.

Material and land transferred to the United States or a state in accordance with this criterion must be transferred without cost to the United States or a state other than administrative and legal costs incurred in carrying out such transfer.

The provisions of this part, respecting transfer of title and custody to land and tailings and wastes, do not apply in the case of lands held in trust by the United States for any Indian tribe, or lands owned by such Indian tribe subject to a restriction against alienation imposed by the United States. In the case of such lands which are used for the disposal of byproduct material, as defined in this section, the licensee shall enter into arrangements with the United States Nuclear Regulatory Commission as may be appropriate to assure the long-term surveillance of such lands by the United States.

(12) Criterion 12 - The final disposition of tailings or wastes at milling sites should be such that ongoing active maintenance is not necessary to preserve isolation. As a minimum, annual site inspections must be conducted by the government agency retaining ultimate custody of the site where tailings or wastes are stored, to confirm the integrity of the stabilized tailings or waste systems, and to determine the need, if any, for maintenance and/or monitoring. Results of the inspection must be reported to the United States Nuclear Regulatory Commission within sixty days following each inspection. The United States Nuclear Regulatory Commission may require more frequent site inspections if, on the basis of a site-specific evaluation, such a need appears necessary, due to the features of a particular tailings or waste disposal system.

(13) Criterion 13 - Secondary groundwater protection standards required by Criterion 5 of this section are concentration limits for individual hazardous constituents. The list of constituents found in Appendix A of this chapter, chapter 246-252 WAC, identifies the constituents for which standards must be set and complied with if the specific constituent is reasonably expected to be in or derived from the byproduct material and has been detected in groundwater. For purposes of this criterion, the property of gross alpha activity will be treated as if it is a hazardous constituent. Thus, when setting standards under subsection (5)(j) of this section, the department will also set a limit for gross alpha activity.

[Statutory Authority: RCW 70.98.050 and 70.98.080. 91-16-109 (Order 187), § 246-252-030, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-252-030, filed

12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-52-100, filed 12/11/86. Statutory Authority: Chapter 70.121 RCW. 81-16-031 (Order 1683), § 402-52-100, filed 7/28/81.]

WAC 246-252-040 Continuing dose assessment.

Each uranium or thorium milling operation shall submit in writing to the department by May 1 and November 1 of each year, reports specifying the quantities of each of the principle radionuclides released to unrestricted areas in liquid and in gaseous effluent during the previous six months of operations. This data shall be reported in a manner that will permit the department to confirm the potential annual radiation doses to the public. All data from the radiological and nonradiological environmental monitoring program will also be submitted for the same time period and frequency as specified above. The data shall be reported in a manner which will allow the department to confirm the potential annual radiation doses to the public. In addition, the report due each May 1 shall include a dose assessment to assure compliance with 40 CFR 190 Environmental Radiation Protection Standards for Nuclear Power Operation and an annual land use survey to include but not be limited to water supply information, location and number of occupants, time spent at each location by occupants, amount and type of locally grown stored feed and amount of pasture consumed by local livestock.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-252-040, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.121 RCW. 81-16-031 (Order 1683), § 402-52-200, filed 7/28/81.]

WAC 246-252-050 Appendix A.

Hazardous Constituents

Acetonitrile (Ethanenitrile)
 Acetophenone (Ethanone, 1-phenyl)
 3-(alpha-Acetylbenzyl)-4-hydroxycoumarin and salts (Warfarin)
 2-Acetylaminofluorene (Acetamide, N-(9H-fluoren-2-yl)-)
 Acetyl chloride (Ethanoyl chloride)
 1-Acetyl-2-thiourea (Acetamide, N-(aminothioxomethyl)-)
 Acrolein (2-Propenal)
 Acrylamide (2-Propenamide)
 Acrylonitrile (2-Propenenitrile)
 Aflatoxins
 Aldrin (1,2,3,4,10,10-Hexachloro-1,4,4a,5,8,8a,8b-hexahydro-endo, exo-1,4:5,8-Dimethanonaphthalene)
 Allyl alcohol (2-Propen-1-ol)
 Aluminum phosphide
 4-Aminobiphenyl ([1,1'-Biphenyl]-4-amine)
 6-Amino-1,1a,2,8,8a,8b-hexahydro-8-(hydroxymethyl)-8a-methoxy-5-methyl-carbamate azirino[2',3':3,4] pyrrolo [1,2-a] indole-4,7-dione, (ester) (Mitomycin C) (Azirino[2'3':3,4] pyrrolo (1,2-a) indole-4,7-dione, 6-amino-8-(((amino-carbonyl)oxy)methyl)-1,1a,2,8,8a,8b-hexahydro-8a methoxy-5-methy-)
 5-(Aminomethyl)-3-isoxazolol (3(2H)-Isioxazolone, 5-(aminomethyl)-) 4-Aminopyridine (4-Pyridinamine)
 Amitrole (1H-1,2,4-Triazol-3-amine)
 Aniline (Benzenamine)
 Antimony and compounds, N.O.S.*
 Aramite (Sulfurous acid, 2-chloroethyl-, 2-[4-(1,1-dimethylethyl)phenoxy]-1-methylethyl ester)
 Arsenic and compounds, N.O.S.*
 Arsenic acid (Orthoarsenic acid)
 Arsenic pentoxide (Arsenic (V) oxide)
 Arsenic trioxide (Arsenic (III) oxide)
 Auramine (Benzenamine, 4,4'-carbonimidoylbis [N,N-Dimethyl-, monohydrochloride)
 Azaserine (L-Serine, diazoacetate (ester))

- Barium and compounds, N.O.S.*
 Barium cyanide
 Benz[c]acridine (3,4-Benzacridine)
 Benz[a]anthracene (1,2-Benzanthracene)
 Benzene (Cyclohexatriene)
 Benzenearsonic acid (Arsonic acid, phenyl-)
 Benzene, dichloromethyl- (Benzal chloride)
 Benzenethiol (Thiophenol)
 Benzidine ([1,1'-Biphenyl]-4,4' diamine)
 Benzo[b]fluoranthene (2,3-Benzofluoranthene)
 Benzo[j]fluoranthene (7,8-Benzofluoranthene)
 Benzo[a]pyrene (3,4-Benzopyrene)
 p-Benzoquinone (1,4-Cyclohexadienedione)
 Benzotrichloride (Benzene, trichloromethyl)
 Benzyl chloride (Benzene, chloromethyl-)
 Beryllium and compounds, N.O.S.*
 Bis(2-chloroethoxy)methane (Ethane, 1,1'-[methylenebis(oxy)]bis[2-chloro-])
 Bis(2-chloroethyl) ether (Ethane, 1,1'-oxybis[2-chloro-])
 N,N-Bis(2-chloroethyl)-2-naphthylamine (Chlornaphazine)
 Bis(2-chloroisopropyl) ether (Propane, 2,2'-oxybis[2-chloro-])
 Bis(chloromethyl) ether (Methane, oxybis[chloro-])
 Bis(2-ethylhexyl) phthalate (1,2-Benzenedicarboxylic acid, bis(2-ethylhexyl) ester)
 Bromoacetone (2-Propanone, 1-bromo-)
 Bromomethane (Methyl bromide)
 4-Bromophenyl phenyl ether (Benzene, 1-bromo-4-phenoxy-)
 Brucine (Strychnidin-10-one, 2,3-dimethoxy-)
 2-Butanone peroxide (Methyl ethyl ketone, peroxide)
 Butyl benzyl phthalate (1,2-Benzenedicarboxylic acid, butyl phenylmethyl ester)
 2-sec-Butyl-4,6-dinitrophenol (DNBP) (Phenol, 2,4-dinitro-6-(1-methylpropyl)-)
 Cadmium and compounds, N.O.S.*
 Calcium chromate (Chromic acid, calcium salt)
 Calcium cyanide
 Carbon disulfide (Carbon bisulfide)
 Carbon oxyfluoride (Carbonyl fluoride)
 Chloral (Acetaldehyde, trichloro-)
 Chlorambucil (Butanoic acid, 4-[bis(2-chloroethyl)amino]benzene-)
 Chlordane (alpha and gamma isomers) (4,7-Methanoindan, 1,2,4,5,6,7,8,8-octachloro-3,4,7,7a-tetrahydro-) (alpha and gamma isomers)
 Chlorinated benzenes, N.O.S.*
 Chlorinated ethane, N.O.S.*
 Chlorinated fluorocarbons, N.O.S.*
 Chlorinated naphthalene, N.O.S.*
 Chlorinated phenol, N.O.S.*
 Chloroacetaldehyde (Acetaldehyde, chloro-)
 Chloroalkyl ethers, N.O.S.*
 p-Chloroaniline (Benzenamine, 4-chloro-)
 Chlorobenzene (Benzene, chloro-)
 Chlorobenzilate (Benzenoacetic acid, 4-chloro-alpha-(4-chlorophenyl)-alpha-hydroxy-, ethyl ester)
 p-Chloro-m-cresol (Phenol, 4-chloro-3-methyl)
 1-Chloro-2,3-epoxypropane (Oxirane, 2-(chloromethyl)-)
 2-Chloroethyl vinyl ether (Ethene, (2-chloroethoxy)-)
 Chloroform (Methane, trichloro-)
 Chloromethane (Methyl chloride)
 Chloromethyl methyl ether (Methane, chloromethoxy-)
 2-Chloronaphthalene (Naphthalene, betachloro-)
 2-Chlorophenol (Phenol, o-chloro-)
 1-(o-Chlorophenyl)thiourea (Thiourea, (2-chlorophenyl)-)
 3-Chloropropionitrile (Propanenitrile, 3-chloro-)
 Chromium and compounds, N.O.S.*
 Chrysene (1,2-Benzphenanthrene)
 Citrus red No. 2 (2-Naphthol, 1-[(2,5-dimethoxyphenyl)azo]-)
 Coal tars
 Copper cyanide
 Creosote (Creosote, wood)
 Cresols (Cresylic acid) (Phenol, methyl-)
 Crotonaldehyde (2-Butenal)
 Cyanides (soluble salts and complexes), N.O.S.*
 Cyanogen (Ethanedinitrile)
 Cyanogen bromide (Bromide cyanide)
 Cyanogen chloride (Chlorine cyanide)
 Cycasin(beta-D-Glucopyranoside, (methyl-ONN-azoxy)methyl-)
 2-Cyclohexyl-4,6-dinitrophenol (Phenol, 2-cyclohexyl-4,6-dinitro-)
 Cyclophosphamide (2H-1,3,2-, -Oxazaphosphorine, [bis(2-chloroethyl)amino]-tetrahydro-,2-oxide)
 Daunomycin (5,12-Naphthacenedione, (8S-cis)-8-acetyl-10-[(3-amino-2,3,6-trideoxy)-alpha-L-lyxo-hexopyranosyl]oxy]-7,8,9,10-tetrahydro-6,8,11-trihydroxy-1-methoxy-)
 DDD (Dichlorodiphenyldichloroethane) (Ethane, 1,1-dichloro-2,2-bis(p-chlorophenyl)-)
 DDE (Ethylene, 1,1-dichloro-2,2-bis(4-chlorophenyl)-)
 DDT (Dichlorodiphenyltrichloroethane) (Ethane, 1,1,1-trichloro-2,2-bis(p-chlorophenyl)-)
 Diallate (S-(2,3-dichloroallyl) diisopropylthiocarbamate)
 Dibenz[a,h]acridine (1,2,5,6-Dibenzacridine)
 Dibenz[a,j]acridine (1,2,7,8-Dibenzacridine)
 Dibenz[a,h]anthracene (1,2,5,6-Dibenzanthracene)
 7H-Dibenzo[c,g]carbazole (3,4,5,6-Dibenzcarbazole)
 Dibenzo[a,e]pyrene (1,2,4,5-Dibenzpyrene)
 Dibenzo[a,h]pyrene (1,2,5,6-Dibenzpyrene)
 Dibenzo[a,i]pyrene (1,2,7,8-Dibenzpyrene)
 1,2-Dibromo-3-chloropropane (Propane, 1,2-dibromo-3-chloro-)
 1,2-Dibromoethane (Ethylene dibromide)
 Dibromomethane (Methylene bromide)
 Di-n-butyl phthalate (1,2-Benzenedicarboxylic acid, dibutyl ester)
 o-Dichlorobenzene (Benzene, 1,2-dichloro-)
 m-Dichlorobenzene (Benzene, 1,3-dichloro-)
 p-Dichlorobenzene (Benzene, 1,4-dichloro-)
 Dichlorobenzene, N.O.S.* (Benzene, dichloro-, N.O.S.*)
 3,3'-Dichlorobenzidine ([1,1'-Biphenyl]-4,4'-diamine, 3,3'-dichloro-)
 1,4-Dichloro-2-butene (2-Butene, 1,4-dichloro-)
 Dichlorodifluoromethane (Methane, dichlorodifluoro-)
 1,1-Dichloroethane (Ethylidene dichloride)
 1,2-Dichloroethane (Ethylene dichloride)
 trans-1,2-Dichloroethene (1,2-Dichloroethylene)
 Dichloroethylene, N.O.S.* (Ethene, dichloro-, N.O.S.*)
 1,1-Dichloroethylene (Ethene, 1,1-dichloro-)
 Dichloromethane (Methylene chloride)
 2,4-Dichlorophenol (Phenol, 2,4-dichloro-)
 2,6-Dichlorophenol (Phenol, 2,6-dichloro-)
 2,4-Dichlorophenoxyacetic acid (2,4-D), salts and esters (Acetic acid, 2,4-dichlorophenoxy-, salts and esters)
 Dichlorophenylarsine (Phenyl dichloroarsine)
 Dichloropropane, N.O.S.* (Propane, dichloro-, N.O.S.*)
 1,2-Dichloropropane (Propylene dichloride)
 Dichloropropanol, N.O.S.* (Propanol, dichloro-, N.O.S.*)
 Dichloropropene, N.O.S.* (Propene, dichloro-, N.O.S.*)
 1,3-Dichloropropene (1-Propene, 1,3-dichloro-)
 Dieldin (1,2,3,4,10,10-hexachloro-6,7-epoxy-1,4,4a,5,6,7,8,8a-octa-hydroendo-, exo-1,4:5,8-Dimethanonaphthalene)
 1,2:3,4-diepoxybutane (2,2'-Bioxirane)
 Diethylarsine (Arsine, diethyl-)
 N,N-Diethylhydrazine (Hydrazine, 1,2-diethyl)
 O,O-Diethyl S-methyl ester of phosphorodithioic acid (Phosphorodithioic acid, O,O-diethyl S-methyl ester)
 O,O-Diethylphosphoric acid, O-p-nitrophenyl ester (Phosphoric acid, diethyl p-nitrophenyl ester)
 Diethyl phthalate (1,2-Benzenedicarboxylic acid, diethyl ester)
 O,O-Diethyl O-2-pyrazinyl phosphorothioate (Phosphorothioic acid, O,O-diethyl O-pyrazinyl ester)
 Diethylstilbestrol (4,4'-Stilbenediol, alpha, alpha-diethyl, bis(dihydrogen phosphate, (E)-)
 Dihydrosafrole (Benzene, 1,2-methylenedioxy-4-propyl-)
 3,4-Dihydroxy-alpha-(methylamino)methyl benzyl alcohol (1,2-Benzenediol, 4-[1-hydroxy-2-(methylamino)ethyl]-)
 Diisopropylfluorophosphate (DFP) (Phosphorofluoric acid, bis(1-methylethyl) ester)
 Dimethoate (Phosphorodithioic acid, O,O-dimethyl S-[2-(methylamino)-2-oxoethyl] ester)
 3,3'-Dimethoxybenzidine ([1,1'-Biphenyl]-4,4'-diamine, 3,3'-dimethoxy-)
 p-Dimethylaminoazobenzene (Benzenamine, N,N-dimethyl-4-(phenylazo-))
 7,12-Dimethylbenz[a]anthracene (1,2-Benzanthracene, 7,12-dimethyl-)
 3,3'-Dimethylbenzidine ([1,1'-Biphenyl]-4,4'-diamine, 3,3'-dimethyl-)
 Dimethylcarbamoyl chloride (Carbamoyl chloride, dimethyl-)
 1,1-Dimethylhydrazine (Hydrazine, 1,1-dimethyl-)

- 1,2-Dimethylhydrazine (Hydrazine, 1,2-dimethyl-)
 3,3-Dimethyl-1-(methylthio)-2-butanone, O-[(methylamino) carbonyl] oxime (Thiofanox)
 alpha, alpha-Dimethylphenethylamine (Ethanamine, 1,1-dimethyl-2-phenyl-)
 2,4-Dimethylphenol (Phenol, 2,4-dimethyl-)
 Dimethyl phthalate (1,2-Benzenedicarboxylic acid, dimethyl ester)
 Dimethyl sulfate (Sulfuric acid, dimethyl ester)
 Dinitrobenzene, N.O.S.* (Benzene, dinitro-, N.O.S.*)
 4,6-Dinitro-o-cresol and salts (Phenol, 2,4-dinitro-6-methyl-, and salts)
 2,4-Dinitrophenol (Phenol, 2,4-dinitro-)
 2,4-Dinitrotoluene (Benzene, 1-methyl-2,4-dinitro-)
 2,6-Dinitrotoluene (Benzene, 1-methyl-2,6-dinitro-)
 Di-n-octyl phthalate (1,2-Benzenedicarboxylic acid, dioctyl ester)
 1,4-Dioxane (1,4-Diethylene oxide)
 Diphenylamine (Benzenamine, N-phenyl-)
 1,2-Diphenylhydrazine (Hydrazine, 1,2-diphenyl-)
 Di-n-propylnitrosamine (N-Nitroso-di-n-propylamine)
 Disulfoton (O,O-diethyl S-[2-(ethylthio)ethyl] phosphorodithioate)
 2,4-Dithiobiuret (Thioimidodicarbonic diamide)
 Endosulfan (5-Norbornene, 2,3-dimethanol, 1,4,5,6,7,7-hexachloro-, cyclic sulfite)
 Endrin and metabolites (1,2,3,4,10,10-hexachloro-6,7-époxy-1,4,4a,5,6,7,8,8a-octahydro-endo,endo-1,4:5,8-dimethanonaphthalene, and metabolites)
 Ethyl carbamate (Urethan) (Carbamic acid, ethyl ester)
 Ethyl cyanide (propanenitrile)
 Ethylenebisdithiocarbamic acid, salts and esters
 (1,2-Ethanediybiscarbamodithioic acid, salts and esters)
 Ethyleneimine (Aziridine)
 Ethylene oxide (Oxirane)
 Ethylenethiourea (2-Imidazolidinethione)
 Ethyl methacrylate (2-Propenoic acid, 2-methyl-, ethyl ester)
 Ethyl methanesulfonate (Methanesulfonic acid, ethyl ester)
 Fluoranthene (Benzo[j,k]fluorene)
 Fluorine
 2-Fluoroacetamide (Acetamide, 2-fluoro-)
 Fluoroacetic acid, sodium salt (Acetic acid, fluoro-, sodium salt)
 Formaldehyde (Methylene oxide)
 Formic acid (Methanoic acid)
 Glycidylaldehyde (1-Propanol-2,3-époxy)
 Halomethane, N.O.S.*
 Heptachlor (4,7-Methano-1H-indene, 1,4,5,6,7,8,8-heptachloro-3a,4,7,7a-tetrahydro-)
 Heptachlor epoxide (alpha, beta, and gamma isomers) (4,7-Methano-1H-indene, 1,4,5,6,7,8,8-heptachloro-2,3-époxy-3a,4,7,7-tetrahydro-, alpha, beta, and gamma isomers)
 Hexachlorobenzene (Benzene, hexachloro-)
 Hexachlorobutadiene (1,3-Butadiene, 1,1,2,3,4,4-hexachloro-)
 Hexachlorocyclohexane (all isomers) (Lindane and isomers)
 Hexachlorocyclopentadiene (1,3-Cyclopentadiene, 1,2,3,4,5,5-hexachloro-)
 Hexachloroethane (Ethane, 1,1,1,2,2,2-hexachloro-)
 1,2,3,4,10,10-Hexachloro-1,4,4a,5,8,8a-hexahydro-1,4:5,8-endo, endo-dimethanonaphthalene (Hexachloro-hexa-hydro-endo, endo-dimethanonaphthalene)
 Hexachlorophene (2,2'-Methylenebis(3,4,6-trichlorophenol))
 Hexachloropropene (1-Propene, 1,1,2,3,3,3-hexachloro-)
 Hexaethyl tetraphosphate (Tetraphosphoric acid, hexaethyl ester)
 Hydrazine (Diamine)
 Hydrocyanic acid (Hydrogen cyanide)
 Hydrofluoric acid (Hydrogen fluoride)
 Hydrogen sulfide (Sulfur hydride)
 Hydroxydimethylarsine oxide (Cacodylic acid)
 Indeno (1,2,3-cd)pyrene (1,10-(1,2-phenylene)pyrene)
 Iodomethane (Methyl iodide)
 Iron dextran (Ferric dextran)
 Isocyanic acid, methyl ester (Methyl isocyanate)
 Isobutyl alcohol (1-Propanol, 2-methyl-)
 Isosafrole (Benzene, 1,2-methylenedioxy-4-allyl-)
 Kepone (Decachlorooctahydro-1,3,4-Methano-2H-cyclobuta[cd]pentalen-2-one)
 Lasiocarpine (2-Butenoic acid, 2-methyl-,7-[(2,3-dihydroxy-2-(1-methoxyethyl)-3-methyl-1-oxobutoxy)methyl]-2,3,5,7a-tetrahydro-1H-pyrrolizin-1-yl ester)
 Lead and compounds, N.O.S.*
 Lead acetate (Acetic acid, lead salt)
 Lead phosphate (Phosphoric acid, lead salt)
 Lead subacetate (Lead, bis(acetato-0)tetrahydroxytri-)
 Maleic anhydride (2,5-Furandione)
 Maleic hydrazide (1,2-Dihydro-3,6-pyridazinedione)
 Malononitrile (Propanedinitrile)
 Melphalan (Alanine, 3-[p-bis(2-chloroethyl)amino]phenyl-L-)
 Mercury fulminate (Fulminic acid, mercury salt)
 Mercury and compounds, N.O.S.*
 Methacrylonitrile (2-Propenenitrile, 2-methyl-)
 Methanethiol (Thiomethanol)
 Methapyrilene (Pyridine, 2-[(2-dimethylamino)ethyl]-2-thenylamino-)
 Metholmyl (Acetimidic acid, N-[(methylcarbamoil)oxy]thio-, methyl ester)
 Methoxychlor (Ethane, 1,1,1-trichloro-2,2'-bis(p-methoxyphenyl)-)
 2-Methylaziridine (1,2-Propylenimine)
 3-Methylcholanthrene (Benz[*a*]aceanthrylene, 1,2-dihydro-3-methyl-)
 Methyl chlorocarbonate (Carbonochloridic acid, methyl ester)
 4,4'-Methylenebis(2-chloroaniline) (Benzenamine, 4,4'-methylenebis-(2-chloro-)
 Methyl ethyl ketone (MEK) (2-Butanone)
 Methyl hydrazine (Hydrazine, methyl-)
 2-Methylacetonitrile (Propanenitrile, 2-hydroxy-2-methyl-)
 Methyl methacrylate (2-Propenoic acid, 2-methyl-, methyl ester)
 Methyl methanesulfonate (Methanesulfonic acid, methyl ester)
 2-Methyl-2-(methylthio)propionaldehyde-o-(methylcarbonyl) oxime (Propanal, 2-methyl-2-(methylthio)-, 0-[(methylamino)carbonyl]oxime)
 N-Methyl-N'-nitro-N-nitrosoguanidine (Guanidine, N-nitroso-N-methyl-N'-nitro-)
 Methyl parathion (0,0-dimethyl 0-(4-nitrophenyl) phosphorothioate)
 Methylthiouracil (4-1H-Pyrimidinone, 2,3-dihydro-6-methyl-2-thioxo-)
 Molybdenum and compounds, N.O.S.*
 Mustard gas (Sulfide, bis(2-chloroethyl)-)
 Naphthalene
 1,4-Naphthoquinone (1, 4-Naphthalenedione)
 1-Naphthylamine (alpha-Naphthylamine)
 2-Naphthylamine (beta-Naphthylamine)
 1-Naphthyl-2-thiourea (Thiourea, 1-naphthalenyl-)
 Nickel and compounds, N.O.S.*
 Nickel carbonyl (Nickel tetracarbonyl)
 Nickel cyanide (Nickel (II) cyanide)
 Nicotine and salts (Pyridine, (S)-3-(1-methyl-2-pyrrolidinyl)-, and salts)
 Nitric oxide (Nitrogen (II) oxide)
 p-Nitroaniline (Benzenamine, 4-nitro-)
 Nitrobenzine (Benzene, nitro-)
 Nitrogen dioxide (Nitrogen (IV) oxide)
 Nitrogen mustard and hydrochloride salt (Ethanamine, 2-chloro-, N-(2-chloroethyl) - N-methyl-, and hydrochloride salt)
 Nitrogen mustard N-Oxide and hydrochloride salt (Ethanamine, 2-chloro-N-(2-chloroethyl)-N-methyl-, and hydrochloride salt)
 Nitroglycerine (1,2,3-Propanetriol, trinitrate)
 4-Nitrophenol (Phenol, 4-nitro-)
 4-Nitroquinoline-1-oxide (Quinoline, 4-nitro-1-oxide-)
 Nitrosamine, N.O.S.*
 N-Nitrosodi-n-butylamine (1-Butanamine, N-butyl-N-nitroso-)
 N-Nitrosodiethanolamine (Ethanol, 2,2'-(nitrosoimino)bis-)
 N-Nitrosodiethylamine (Ethanamine, N-ethyl-N-nitroso-)
 N-Nitrosodimethylamine (Dimethylnitrosamine)
 N-Nitroso-N-ethylurea (Carbamide, N-ethyl-N-nitroso-)
 N-Nitrosomethylethylamine (Ethanamine, N-methyl-N-nitroso-)
 N-Nitroso-N-methylurea (Carbamide, N-methyl-N-nitroso-)
 N-Nitroso-N-methylurethane (Carbamic acid, methylnitroso-, ethyl ester)
 N-Nitrosomethylvinylamine (Ethanamine, N-methyl-N-nitroso-)
 N-Nitrosomorpholine (Morpholine, N-nitroso-)
 N-Nitrosornicotine (Nornicotine, N-nitroso-)
 N-Nitrosopiperidine (Pyridine, hexahydro-, N-nitroso-)
 Nitrosopyrrolidine (Pyrrole, tetrahydro-, N-nitroso-)
 N-Nitrososarcosine (Sarcosine, N-nitroso-)
 5-Nitro-o-toluidine (Benzenamine, 2-methyl-5-nitro-)
 Octamethylpyrophosphoramide (Diphosphoramide, octamethyl-)
 Osmium tetroxide (Osmium (VIII) oxide)
 7-Oxabicyclo[2.2.1]heptane-2,3-dicarboxylic acid (Endothal)
 Paraldehyde (1,3,5-Trioxane, 2,4,6-trimethyl-)
 Parathion (Phosphorothioic acid, 0,0-diethyl 0-(p-nitrophenyl)ester)
 Pentachlorobenzene (Benzene, pentachloro-)

Pentachloroethane (Ethane, pentachloro-)
 Pentachloronitrobenzene (PCNB) (Benzene, pentachloronitro-)
 Pentachlorophenol (Phenol, pentachloro-)
 Phenacetin (Acetamide, N-(4-ethoxyphenyl)-)
 Phenol (Benzene, hydroxy-)
 Phenylenediamine (Benzenediamine)
 Phenylmercury acetate (Mercury, acetatophenyl-)
 N-Phenylthiourea (Thiourea, phenyl-)
 Phosgene (Carbonyl chloride)
 Phosphine (Hydrogen phosphide)
 Phosphorodithioic acid, 0,0-diethyl S-[(ethylthio)methyl] ester (Phorate)
 Phosphorothioic acid, 0,0-dimethyl 0-[p-((dimethylamino)sulfonyl)phenyl] ester (Famphur)
 Phthalic acid esters, N.O.S.* (Benzene, 1, 2-dicarboxylic acid, esters, N.O.S.*)
 Phthalic anhydride (1,2-Benzenedicarboxylic acid anhydride)
 2-Picoline (Pyridine, 2-methyl-)
 Polychlorinated biphenyl, N.O.S.*
 Potassium cyanide
 Potassium silver cyanide (Argentate(1-), dicyano-, potassium)
 Pronamide (3,5-Dichloro-N-(1,1-dimethyl-2-propynyl)benzamide)
 1,3-Propane sultone (1,2-Oxathiolane, 2,2-dioxide)
 n-Propylamine (1-Propanamine)
 Propylthiouracil (Undecamethylenediamine, N,N'-bis(2-chlorobenzyl-), dihydrochloride)
 2-Propyn-1-ol (Propargyl alcohol)
 Pyridine
 Radium -226 and -228
 Reserpine (Yohimban-16-carboxylic acid, 11,17-dimethoxy-18-[3,4,5-trimethoxybenzoyl]oxy]-, methyl ester)
 Resorcinol (1,3-Benzenediol)
 Saccharin and salts (1,2-Benzoisothiazolin-3-one, 1,1-dioxide, and salts)
 Safrole (Benzene, 1,2-methylenedioxy-4-allyl-)
 Selenious acid (Selenium dioxide)
 Selenium and compounds, N.O.S.*
 Selenium sulfide (Sulfur selenium)
 Selenourea (Carbamimidoseleonic acid)
 Silver and compounds, N.O.S.*
 Silver cyanide
 Sodium cyanide
 Streptozotocin (D-Glucopyranose, 2-deoxy-2-(3-methyl-3-nitrosoureido)-)
 Strontium sulfide
 Strychnine and salts (Strychnidin-10-one, and salts)
 1,2,4,5-Tetrachlorobenzene (Benzene, 1,2,4,5-tetrachloro-)
 2,3,7,8-Tetrachlorodibenzo-p-dioxin (TCDD) (Dibenzo-p-dioxin, 2,3,7,8-tetrachloro-)
 Tetrachloroethane, N.O.S.* (Ethane, tetrachloro-, N.O.S.*)
 1,1,1,2-Tetrachlorethane (Ethane, 1,1,1,2-tetrachloro-)
 1,1,2,2-Tetrachlorethane (Ethane, 1,1,2,2-tetrachloro-)
 Tetrachloroethane (Ethane, 1,1,2,2-tetrachloro-)
 Tetrachloromethane (Carbon tetrachloride)
 2,3,4,6-Tetrachlorophenol (Phenol, 2,3,4,6-tetrachloro-)
 Tetraethyldithiopyrophosphate (Dithiopyrophosphoric acid, tetraethyl-ester)
 Tetraethyl lead (Plumbane, tetraethyl-)
 Tetraethylpyrophosphate (Pyrophosphoric acid, tetraethyl ester)
 Tetranitromethane (Methane, tetranitro-)
 Thallium and compounds, N.O.S.*
 Thallic oxide (Thallium (III) oxide)
 Thallium (I) acetate (Acetic acid, thallium (I) salt)
 Thallium (I) carbonate (Carbonic acid, dithallium (I) salt)
 Thallium (I) chloride
 Thallium (I) nitrate (Nitric acid, thallium (I) salt)
 Thallium selenite
 Thallium (I) sulfate (Sulfuric acid, thallium (I) salt)
 Thioacetamide (Ethanethioamide)
 Thiosemicarbazide (Hydrazinecarbothioamide)
 Thiourea (Carbamide thio-)
 Thiuram (Bis(dimethylthiocarbamoyl) disulfide)
 Thorium and compounds, N.O.S.*, when producing thorium by-product material
 Toluene (Benzene, methyl-)
 Toluenediamine (Diaminotoluene)
 o-Toluidine hydrochloride (Benzenamine, 2-methyl-, hydrochloride)
 Toluene diisocyanate (Benzene, 1,3-diisocyanatomethyl-)

Toxaphene (Camphene, octachloro-)
 Tribromomethane (Bromoform)
 1,2,4-Trichlorobenzene (Benzene, 1,2,4-trichloro-)
 1,1,1-Trichloroethane (Methyl chloroform)
 1,1,2-Trichloroethane (Ethane, 1,1,2-trichloro-)
 Trichloroethene (Trichloroethylene)
 Trichloromethanethiol (Methanethiol, trichloro-)
 Trichloromonofluoromethane (Methane, trichlorofluoro-)
 2,4,5-Trichlorophenol (Phenol, 2,4,5-trichloro-)
 2,4,6-Trichlorophenol (Phenol, 2,4,6-trichloro-)
 2,4,5-Trichlorophenoxyacetic acid (2,4,5-T) (Acetic acid, 2,4,5-trichlorophenoxy-)
 2,4,5-Trichlorophenoxypropionic acid (2,4,5-TP) (Silvex) (Propionic acid, 2-(2,4,5-trichlorophenoxy)-)
 Trichloropropane, N.O.S.* (Propane, trichloro-, N.O.S.*)
 1,2,3-Trichloropropane (Propane, 1,2,3-trichloro-)
 0,0,0-Triethyl phosphorothioate (Phosphorothioic acid, 0,0,0-triethyl ester)
 sym-Trinitrobenzene (Benzene, 1,3,5-trinitro-)
 Tris(1-aziridinyl) phosphine sulfide (Phosphine sulfide, tris(1-aziridinyl-))
 Tris(2,3-dibromopropyl) phosphate (1-Propanol, 2,3-dibromo-, phosphate)
 Trypan blue (2,7-Naphthalenedisulfonic acid, 3,3'-[(3,3'-dimethyl (1,1'-biphenyl)- 4,4'-diyl)bis(azo)]bis(5-amino-4-hydroxy-, tetrasodium salt)
 Uracil mustard (Uracil 5-[bis(2-chloroethyl)amino]-)
 Uranium and compounds, N.O.S.*
 Vanadic acid, ammonium salt (ammonium vanadate)
 Vanadium pentoxide (Vanadium (V) oxide)
 Vinyl chloride (Ethene, chloro-)
 Zinc cyanide
 Zinc phosphide

* The abbreviation N.O.S. (not otherwise specified) signifies those members of the general class not specifically listed by name in this list.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-252-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-52-300, filed 12/11/86.]

Reviser's note: The brackets and enclosed material in the text of the above section occurred in the copy filed by the agency.

Chapter 246-254 WAC

RADIATION PROTECTION—FEES

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246-254-170	Failure by applicant or licensee to pay prescribed fees.

**DISPOSITION OF SECTIONS FORMERLY
CODIFIED IN THIS CHAPTER**

- 246-254-057 License fees for radioactive materials. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-057, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 87-21-016 (Order 2545), § 440-44-057, filed 10/9/87; 86-08-054 (Order 2359), § 440-44-057, filed 3/28/86; 85-13-007 (Order 2238), § 440-44-057, filed 6/7/85; 85-06-024 (Order 2209), § 440-44-057, filed 2/27/85. Statutory Authority: RCW 70.98.080. 83-24-014 (Order 2050), § 440-44-057, filed 11/30/83. Statutory Authority: RCW 43.20A.055. 83-12-058 (Order 1965), § 440-44-057, filed 6/1/83. Statutory Authority: 1982 c 201. 82-17-021 (Order 1860), § 440-44-057, filed 8/9/82.] Repealed by 91-22-027 (Order 208), filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.110.
- 246-254-058 Fees for additional service. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-058, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 85-13-007 (Order 2238), § 440-44-058, filed 6/7/85.] Repealed by 91-22-027 (Order 208), filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.110.
- 246-254-999 Site use permit fee. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-999, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.98 RCW and 1985 c 383. 85-20-021 (Order 2283), § 440-44-060, filed 9/23/85. Statutory Authority: RCW 43.20A.055. 83-12-058 (Order 1965), § 440-44-060, filed 6/1/83.] Repealed by 91-22-027 (Order 208), filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.110.

WAC 246-254-001 Purpose and scope. This chapter establishes fees charged for licensing, permitting, registration, and inspection services rendered by the division of radiation protection as authorized under chapters 43.70, 70.98, and 70.121 RCW. These fees apply to owners and operators of radiation generating machines, users of radioactive material, operators of low-level radioactive waste disposal facilities, owners and operators of facilities emitting airborne radioactivity, and owners and operators of certain mineral processing and uranium or thorium milling operations and their associated tailings or waste.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-001, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-70-010, filed 12/11/86; 79-12-073 (Order 1459), § 402-70-010, filed 11/30/79, effective 1/1/80.]

WAC 246-254-010 Definitions. As used in this chapter, the following definitions apply:

(1) "Application" means a completed RHF-1 or equivalent with supporting documentation requesting the department to grant authority to receive, possess, use, transfer, own or acquire radioactive material.

(2) "Compliance inspection" means a routinely scheduled visit to the licensee's facility and/or temporary job site(s) for the purpose of determining compliance with the radioactive material license and applicable regulations. This service is covered by the annual fee for the radioactive material license.

(3) "Department" means the department of health which has been designated as the state radiation control agency.

(4) "Direct staff time" means all work time directly applicable to or associated with a specific radioactive

material licensee and includes license file review, inspection preparation, on-site visits, report writing, review and acknowledgement of correspondence, review of license applications, renewals and amendment requests, telephone contacts, and staff or management conferences specifically related to the license. Travel time is not considered direct staff time.

(5) "Emission unit" means the point of release of airborne emissions of radioactive material.

(6) "Environmental cleanup monitoring" means an on-site visit by the department to a licensee's facility or site of operation to determine the status of corrective actions to remove environmental radiation contamination resulting from the licensee's operation. Such a monitoring visit may include, but is not limited to, the review of the licensee's records pertaining to the environmental cleanup, observation of the licensee's cleanup work, sampling by the department for analysis, associated laboratory work, and the analysis of the information collected by the department.

(7) "Facility" means all buildings, structures and operations on one contiguous site.

(8) "Follow-up inspection" means an on-site visit to a licensee's facility to verify that prompt action was taken to correct significant items of noncompliance found by the department in a previous inspection. The first follow-up inspection is covered by the annual fee for the radioactive material license.

(9) "Inspection" means an official examination or observation by the department including but not limited to tests, surveys and monitoring to determine compliance with rules, regulations, orders, requirements and conditions of the department.

(10) "Investigation" means an on-site visit to a licensee's facility or site of operation when, in the department's judgment, it is required for the purpose of reviewing specific conditions, allegations, or other information regarding unusual conditions, operations, or practices. This service is covered by the annual fee for the radioactive material license.

(11) "License" means a license issued by the department in accordance with the regulations adopted by the department.

(12) "New license application" means a request to use radioactive material from a person not currently a licensee or from a current licensee requesting authorization to use radioactive material in a new way such that a change of fee category is required.

(13) "Perpetual care and maintenance" means further maintenance, surveillance or other care of milling or tailings impoundment sites after termination of the site operator's decommissioning responsibilities and license.

(14) "Registration" means registration with the department by any person possessing a source of ionizing radiation in accordance with regulations adopted by the department.

(15) "Sealed source and device evaluation" means a radiological safety evaluation performed by the department on the design, manufacture, and test data of any single sealed source and/or device model for the purpose of registering the sealed source or device with the United States Nuclear Regulatory Commission.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-010, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW

43.70.040. 91-02-049 (Order 121), recodified as § 246-254-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-70-020, filed 12/11/86; 79-12-073 (Order 1459), § 402-70-020, filed 11/30/79, effective 1/1/80.]

WAC 246-254-020 Payment of fees. (1) Applicants, licensees, permittees, and registrants requesting or receiving licenses, permits, registrations, and actions or services by the department shall pay the applicable fee or fees for the license, permit, registration, and action or service provided by the department.

(2) The department shall charge a fee for each:

- (a) Radiation machine facility registration;
- (b) Radioactive material license;
- (c) Service or action with respect to a radioactive material licensee not otherwise covered by fees;
- (d) Cubic foot of low-level radioactive waste volume received at a commercial disposal site;
- (e) Kilogram of uranium or thorium milled from ore;

and

(f) Air emission permit.

(3) The department shall charge a fee for each radioactive material license based on the single highest fee category describing activities subject to the conditions of the license.

(4) The department shall charge the applicable license fee for each category when multiple licenses are required.

(5) The department may require multiple radioactive material licenses based upon:

- (a) Physical separation of operations;
- (b) Organizational separations within a licensee's operation;
- (c) Complexity of uses of radioactive material such that two or more fee categories would apply to the operation.

(6) Each licensee, permittee, or registrant shall:

(a) Remit the full fee (i) at the fee rate established by rule at the time such fee is paid, and (ii) at least thirty days prior to the annual anniversary date for licensees or the biennial expiration date for registrants or (iii) on a payment schedule as provided in WAC 246-254-030.

(b) Consider the annual anniversary to be the month and day of the expiration date of the existing radioactive material license.

(7) The department shall refund one-half of the fee if an application is withdrawn prior to issuance of a radioactive material license.

(8) If there is a change by the applicant, licensee, permittee or registrant resulting in a higher fee category, the applicant, licensee, permittee, or registrant shall pay an additional fee prorated for the remainder of the fee interval.

(9) Each licensee, permittee, or registrant shall remit the full amount of any quarterly billing or individual billing for licensing or compliance actions within thirty days of receipt of the bill.

(10) Fees due on or after the effective date of these regulations shall be at the rate prescribed in this chapter.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-020, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-70-030, filed 12/11/86; 79-12-073 (Order 1459), § 402-70-030, filed 11/30/79, effective 1/1/80.]

WAC 246-254-030 Small business discount provision and optional fee payment schedule applicable to radioactive materials licensees. (1) Small business may receive a twenty-five percent discount on radioactive materials license fees specified in WAC 246-254-070, 246-254-080, 246-254-090, and 246-254-100.

(2) To qualify for the discount, the business shall:

- (a) Be a corporation, partnership, sole proprietorship, or other legal entity formed for the purpose of making a profit;
- (b) Be independently owned and operated from all other businesses (i.e., not a subsidiary of a parent company); and
- (c) Have fifty or fewer employees.

(3) To receive the discount, the license applicant at the time of initial license request, or the licensee at the time of annual billing shall:

(a) Certify, on the business' letterhead or appropriate departmental form, the business meets the conditions in subsection (2) of this section;

(b) Sign the certification as the chief executive officer of the business or as an official designee;

(c) Have the certification notarized;

(d) Enclose the payment with the certification; and

(e) Submit the certification and payment in accordance with instructions provided by the department.

(4) The department may verify certifications and will suspend any radioactive materials license if the applicant/licensee:

- (a) Failed to pay the required fee; or
- (b) Made an invalid or false certification.

(5) Upon request of any radioactive materials licensee or license applicant, the department may accept semiannual or quarterly payments in lieu of the required annual license fee, provided:

(a) A written payment schedule setting specific due dates and payment amounts is submitted; and

(b) The total payments per the schedule equal the fee in effect at the time such fee payment schedule is accepted by the department.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-030, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 86-12-039 (Order 2382), § 440-44-059, filed 5/30/86.]

WAC 246-254-040 Denial, revocation, suspension, and reinstatement. The department shall:

(1) Deny an application if the appropriate fee is not received;

(2) Suspend or revoke a license, permit, or registration if a required fee is not received;

(3) Refund no fees if a license, permit or registration is denied, revoked, or suspended;

(4) Require reapplication for a license, permit, or registration after denial or revocation including fees as required under this chapter.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-040, filed 10/29/91, effective 11/29/91.]

WAC 246-254-050 Method of payment. Licensees, permittees and registrants shall:

(1) Submit fee payments by check, draft or money order made payable to the department of health; and

(2) Include fee payment with the application for license or submit the fee by mail, in person, or by courier to the address provided in the bill or bill correspondence.

[Statutory Authority: RCW 43.70.110, 91-22-027 (Order 208), § 246-254-050, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-254-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-70-050, filed 12/11/86; 79-12-073 (Order 1459), § 402-70-050, filed 11/30/79, effective 1/1/80.]

WAC 246-254-053 Radiation machine facility registration fees. (1) Persons owning and/or leasing and using radiation-producing machines shall submit a sixty dollar registration fee to the department at the time of application and every two years thereafter. In addition:

- (a) For dentists, veterinarians, and podiatrists, add:
 - (i) Seventy dollars for the first tube; and
 - (ii) Twenty-five dollars for each additional tube.
- (b) For hospitals and medical or chiropractic facilities,

add:

- (i) Two hundred dollars for the first tube; and
- (ii) Seventy dollars for each additional tube.
- (c) For industrial, research, and other uses, add:
 - (i) One hundred dollars for the first tube; and
 - (ii) Thirty dollars for each additional tube.

(2) The department shall charge a maximum total fee of four thousand dollars for any facility or group of facilities where an in-house, full-time staff of at least two or more is devoted entirely to in-house radiation safety.

(3) For any facility with a mammographic x-ray machine, add a biennial surcharge of two hundred dollars.

(4) A penalty fee of sixty dollars shall be charged for late registration or re-registration.

[Statutory Authority: RCW 43.70.110, 91-22-027 (Order 208), § 246-254-053, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-254-053, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20B.110, 89-16-064 (Order 2839), § 440-44-050, filed 7/31/89, effective 8/31/89. Statutory Authority: RCW 43.20A.055, 86-08-054 (Order 2359), § 440-44-050, filed 3/28/86. Statutory Authority: Chapter 70.98 RCW and 1985 c 383, 85-20-021 (Order 2283), § 440-44-050, filed 9/23/85. Statutory Authority: RCW 43.20A.055, 85-13-007 (Order 2238), § 440-44-050, filed 6/7/85; 83-12-058 (Order 1965), § 440-44-050, filed 6/1/83. Statutory Authority: 1982 c 201, 82-13-011 (Order 1825), § 440-44-050, filed 6/4/82.]

WAC 246-254-070 Fees for specialized radioactive material licenses. (1) Persons licensed or authorized to possess or use radioactive material in the following special categories shall forward annual fees to the department as follows:

(a) Eight thousand seven hundred dollars for operation of a single radioactive waste facility allowing processing, volume reduction, or waste treatment, but not permitting commercial on-site disposal.

(b) Three thousand five hundred dollars for operation of a single nuclear pharmacy.

(c) Six thousand dollars for operation of a single nuclear laundry.

(d) Six thousand dollars for a license authorizing a single facility to use more than one curie of unsealed radioactive material in the manufacture and distribution of radioactive products or devices containing radioactive material.

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(e) Two thousand one hundred dollars for a license authorizing a single facility to use less than or equal to one curie of unsealed radioactive material or any quantity of previously sealed sources in the manufacture and distribution of products or devices containing radioactive material.

(f) Four thousand dollars for a license authorizing decontamination services operating from a single facility.

(g) One thousand nine hundred dollars for a license authorizing waste brokerage including the possession, temporary storage at a single facility, and over-packing only of radioactive waste.

(h) Eight hundred fifty dollars for a license authorizing equipment servicing involving:

- (i) Incidental use of calibration sources;
- (ii) Maintenance of equipment containing radioactive material; or
- (iii) Possession of sealed sources for purpose of sales demonstration only.

(i) One thousand six hundred dollars for a license authorizing health physics services, leak testing, or calibration services.

(j) One thousand dollars for a civil defense license.

(k) Three hundred dollars for a license authorizing possession of special nuclear material as pacemakers or depleted uranium as shielding.

(2) Persons licensed or authorized to possess and use radioactive material in the following broad scope categories shall forward annual fees to the department as follows:

(a) Twelve thousand dollars for a license authorizing possession of atomic numbers three through eighty-three with maximum authorized possession of any single isotope greater than one curie.

(b) Five thousand five hundred dollars for a license authorizing possession of atomic numbers three through eighty-three with maximum authorized possession of any single isotope greater than 0.1 curie but less than or equal to one curie.

(c) Four thousand five hundred dollars for a license authorizing possession of atomic numbers three through eighty-three with maximum authorized possession less than or equal to 0.1 curie.

[Statutory Authority: RCW 43.70.110, 91-22-027 (Order 208), § 246-254-070, filed 10/29/91, effective 11/29/91.]

WAC 246-254-080 Fees for medical and veterinary radioactive material licenses. (1) Persons licensed or authorized to possess or use radioactive material in the following medical or veterinary categories shall forward annual fees to the department as follows:

(a) Three thousand two hundred dollars for operation of a mobile nuclear medicine program from a single base of operation.

(b) Two thousand two hundred dollars for a license authorizing groups II and III of WAC 246-235-120 for diagnostic nuclear medicine at a single facility.

(c) One thousand nine hundred dollars for a license authorizing groups IV and V of WAC 246-235-120 for medical therapy at a single facility.

(d) Three thousand dollars for a license authorizing groups II or III and groups IV or V of WAC 246-235-120 for full diagnostic and therapy services at a single facility.

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(e) One thousand six hundred dollars for a license authorizing groups VI of WAC 246-235-120 for brachytherapy at a single facility.

(f) One thousand dollars for a license authorizing brachytherapy or teletherapy at a single facility.

(g) One thousand five hundred dollars for a license authorizing medical or veterinary possession of greater than two hundred millicuries total possession of radioactive material at a single facility.

(h) One thousand two hundred dollars for a license authorizing medical or veterinary possession of greater than thirty millicuries but less than or equal to two hundred millicuries total possession of radioactive material at a single facility.

(i) Nine hundred dollars for a license authorizing medical or veterinary possession of less than or equal to thirty millicuries total possession of radioactive material at a single facility.

(j) Eight hundred dollars for a license authorizing group I as defined in WAC 246-235-120 or in vitro uses of radioactive material at a single facility.

(k) Five hundred dollars for a license authorizing medical or veterinary possession of a sealed source for diagnostic use at a single facility.

(2) Persons with licenses authorizing multiple locations of use shall increase the annual fee by fifty percent for each additional location or base of operation.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-080, filed 10/29/91, effective 11/29/91.]

WAC 246-254-090 Fees for industrial radioactive material licenses. (1) Persons licensed or authorized to possess or use radioactive material in the following industrial categories shall forward annual fees to the department as follows:

(a) Three thousand seven hundred dollars for a license authorizing the use of radiographic exposure devices in one or more permanent radiographic vaults in a single facility.

(b) Four thousand seven hundred dollars for a license authorizing the use of radiographic exposure devices at temporary job sites but operating from a single storage facility.

(c) Two thousand three hundred dollars for a license authorizing well-logging activities including the use of radioactive tracers operating from a single storage facility.

(d) Five hundred dollars for a license authorizing possession of portable sealed sources including moisture/density gauges and excluding radiographic exposure devices operating from a single storage facility.

(e) Five hundred fifty dollars for a license authorizing possession of any nonportable sealed source, including special nuclear material and excluding radioactive material used in gas chromatograph at a single facility.

(f) Three hundred fifty dollars for a license authorizing possession of gas chromatograph units containing radioactive material at a single facility.

(g) Nine hundred fifty dollars for a license authorizing possession of any self-shielded or pool type irradiator with sealed source total quantity greater than one hundred curies at a single facility.

(h) Five thousand dollars for a license authorizing possession of sealed sources for a walk-in type irradiator at a single facility.

(i) Four thousand four hundred dollars for a license authorizing possession of greater than one gram of unsealed special nuclear material or greater than five hundred kilograms of source material at a single facility.

(j) One thousand four hundred dollars for a license authorizing possession of less than or equal to one gram of unsealed special nuclear material or five hundred kilograms of source material at a single facility.

(2) Persons with licenses authorizing multiple locations of permanent storage shall increase the annual fee by fifty percent for each additional location.

(3) Depleted uranium registrants required to file Form RHF-20 shall forward an annual fee of fifty dollars to the department.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-090, filed 10/29/91, effective 11/29/91.]

WAC 246-254-100 Fees for laboratory radioactive material licenses. (1) Persons licensed or authorized to possess or use unsealed radioactive material in the following laboratory categories shall forward annual fees to the department as follows:

(a) Two thousand four hundred dollars for a license authorizing possession at a single facility of unsealed sources in amounts greater than:

(i) One millicurie of I-125 or I-131; or

(ii) One hundred millicuries of H-3 or C-14; or

(iii) Ten millicuries of any single isotope.

(b) One thousand two hundred dollars for a license authorizing possession at a single facility of unsealed sources in amounts:

(i) Greater than 0.1 millicurie and less than or equal to one millicurie of I-125 or I-131; or

(ii) Greater than ten millicuries and less than or equal to one hundred millicuries of H-3 or C-14; or

(iii) Greater than one millicurie and less than or equal to ten millicuries of any single isotope.

(c) One thousand dollars for a license authorizing possession at a single facility of unsealed sources in amounts less than or equal to:

(i) 0.1 millicurie of I-125 or I-131; or

(ii) Ten millicuries of H-3 or C-14; or

(iii) One millicurie of any other single isotope.

(2) Persons with licenses authorizing multiple locations of use shall increase the annual fee by fifty percent for each additional location.

(3) Persons registered to perform in vitro testing pursuant to Form RHF-15 shall forward an annual fee of fifty dollars to the department.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-100, filed 10/29/91, effective 11/29/91.]

WAC 246-254-110 Fees for reciprocity. (1) The department shall charge fees for reciprocal recognition of other agreement state, licensing state or United States Nuclear Regulatory Commission licenses based upon the actual amount of radioactive material or type of devices

being transported into Washington state or the type of service to be performed involving radioactive material.

(2) The department shall charge a fee equal to one hundred percent of the fee specified under WAC 246-254-070, 246-254-080, 246-254-090, and 246-254-100.

(3) The department shall permit the reciprocally recognized licensee to possess and use radioactive material in the state of Washington up to one hundred eighty days during the twelve-month period following payment of each fee.

[Statutory Authority: RCW 43.70.110, 91-22-027 (Order 208), § 246-254-110, filed 10/29/91, effective 11/29/91.]

WAC 246-254-120 Fees for licensing and compliance actions. (1) In addition to the fee for each radioactive material license as described under WAC 246-254-070, 246-254-080, 246-254-090, and 246-254-100, a licensee shall pay a service fee for each additional licensing and compliance action as follows:

(a) For a second follow-up inspection, and each follow-up inspection thereafter, a fee of eighty dollars per hour of direct staff time associated with the follow-up inspection, not to exceed eight hundred dollars per follow-up inspection. Hours are calculated in half-hour increments.

(b) For each environmental cleanup monitoring visit, a fee of eighty dollars per hour of direct staff time associated with the environmental cleanup monitoring visit, not to exceed two thousand dollars per visit. Hours are calculated in half-hour increments.

(c) For each new license application, the fee of one hundred fifty dollars in addition to the required annual fee.

(d) For each sealed source and device evaluation, a fee of eighty dollars per hour of direct staff time associated with each sealed source and device evaluation, not to exceed two thousand four hundred dollars per evaluation.

(2) The licensee or applicant shall pay any additional service fees at the time of application for a new license or within thirty days of the date of the billing for all other licensing and compliance actions.

(3) The department shall process an application only upon receipt of the new application fee and the annual fee.

(4) The department may take action to modify, suspend, or terminate the license or sealed source and device registration if the licensee fails to pay the fee for additional licensing and compliance actions billed by the department.

[Statutory Authority: RCW 43.70.110, 91-22-027 (Order 208), § 246-254-120, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-254-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080, 87-01-031 (Order 2450), § 402-70-070, filed 12/11/86; 79-12-073 (Order 1459), § 402-70-070, filed 11/30/79, effective 1/1/80.]

WAC 246-254-130 Radioactive waste disposal site surveillance fee. (1) The department shall charge a fee for radioactive waste site surveillance.

(2) The fee shall be an added charge on each cubic foot of low-level waste disposed at the disposal site.

(3) The department shall authorize by contract the operator of a low-level radioactive waste disposal site to collect the fee from waste generators and brokers.

(4) The department shall provide for reimbursement to the site operator for collection costs.

(5) The department shall calculate the fee collected from waste generators and brokers as required under RCW 70.98.085 and the fee shall not exceed the statutory limit specified in that section.

(6) The site operator shall remit the fee to the department as follows:

(a) Quarterly for the first seven quarters of each biennium.

(b) By July 15 for the final quarter of the biennium.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-254-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.085, 90-11-126 (Order 050), § 402-70-073, filed 5/23/90, effective 6/23/90.]

WAC 246-254-140 Fees for uranium, thorium and other mineral processors. (1) Persons licensed or authorized to receive, possess, or use natural uranium and its decay daughters for the extraction of uranium or thorium compounds or for the reclamation and disposal of the associated tailings or waste shall pay:

(a) Initial application fee of thirty-five thousand dollars; and

(b) Quarterly billings for actual costs to the department.

(2) The department shall bill the uranium or thorium milling licensee quarterly for the department's actual cost of:

(a) Reviewing and issuing a license in excess of the initial application fee;

(b) Determining the licensee's compliance with terms and conditions of the license;

(c) Reviewing license amendment requests;

(d) Maintaining a uranium mill program which is compatible with the requirements of the United States Nuclear Regulatory Commission;

(e) Determining and assuring compliance with chapter 173-11 WAC; and

(f) Reviewing and processing an application for renewal.

(3) The department shall delineate in the quarterly billing the staff, laboratory, and support service costs.

(4) The department:

(a) Shall process any initial application only upon receipt of the full fee specified; and

(b) May return an application to an applicant if no payment is received.

(5) The department shall credit the initial application fee to the applicants' quarterly billing.

(6) Mineral processors requiring licenses for naturally occurring radioactive material in excess of exempt concentrations shall pay:

(a) Initial application fee of twenty-seven thousand dollars; and

(b) Quarterly billings not to exceed forty thousand dollars.

(7) The department shall bill mineral processor licensees quarterly for the department's actual cost of:

(a) Processing and issuing a license in excess of the initial application fee;

(b) Determining the licensee's compliance with terms and conditions of the license;

(c) Reviewing and processing amendment and renewal requests; and

(d) Determining and assuring compliance with chapter 173-11 WAC.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-140, filed 10/29/91, effective 11/29/91.]

WAC 246-254-150 Fees for perpetual care and maintenance. (1) Persons with licenses specifically authorizing the receipt, possession, or use of natural uranium and its decay daughters for the extraction of uranium or thorium compounds or for the reclamation and disposal of the associated tailings or waste shall:

(a) Make quarterly payments of twenty cents per kilogram of uranium or thorium compound milled out of the raw ore;

(b) Remit this payment within thirty days after the end of each calendar quarter; and

(c) Pay to the department a minimum of two hundred fifty thousand dollars (1978 dollars) to cover the costs of long-term surveillance prior to the termination of a uranium or thorium mill license.

(2) Licensees under this section may make additional payments to meet the minimum, prior to the release of any surety arranged by the licensee in accordance with WAC 246-235-080 (6)(d).

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-150, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-70-080, filed 12/11/86.]

WAC 246-254-160 Fees for airborne emissions of radioactive materials. (1) The department shall include fees for emission units at facilities licensed by the department, as part of the license fees specified in WAC 246-254-070, 246-254-080, 246-254-090, and 246-254-100.

(2) For emission units at all other facilities:

(a) Application. The applicant shall submit a fee of one thousand dollars for each air emission permit to the department with each application.

(i) The department shall process only those applications accompanied by the fee prescribed in (a) of this subsection. The department shall return any application submitted without the prescribed fee to the applicant.

(ii) The applicant shall pay any additional actual costs involved with processing the application upon receipt of a bill from the department on a calendar quarter basis.

(iii) The department shall credit the initial application fee to the applicant's quarterly billings.

(b) Operations. The department shall charge each emission unit operator the actual expenses incurred by the department in determining compliance with the provisions of established regulations and conditions of the air emission permit; and:

(i) Bill the operator each calendar quarter until the permit is terminated by the department.

(ii) Specify in the quarterly bill the staff, laboratory, and support service costs associated with the regulatory activities conducted by the department.

(c) Amendment. The department shall add and include the actual costs incurred by the department in reviewing and processing an amendment to an air emission permit in the department's calendar quarter charge for regulatory activities.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-160, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW

43.70.040. 91-02-049 (Order 121), recodified as § 246-254-160, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.98 RCW. 88-17-061 (Order 2670), § 440-44-062, filed 8/17/88.]

WAC 246-254-170 Failure by applicant or licensee to pay prescribed fees. In any case where the department finds that an applicant, a permittee, a registrant, or a licensee failed to pay a prescribed fee or actual costs incurred during a calendar quarter, the department: (1) Shall not process any application and (2) may suspend or revoke any license, permit, registration, or approval involved; or (3) may issue an order with respect to licensed, permitted, or registered activities as the department determines appropriate or necessary in order to carry out the provisions of this chapter.

[Statutory Authority: RCW 43.70.110. 91-22-027 (Order 208), § 246-254-170, filed 10/29/91, effective 11/29/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-254-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.98.080. 87-01-031 (Order 2450), § 402-70-090, filed 12/11/86; 79-12-073 (Order 1459), § 402-70-090, filed 11/30/79, effective 1/1/80.]

Chapter 246-255 WAC

RADIATION PROTECTION—FORMS

Reviser's note: Forms set forth within chapter 402-990 WAC were filed January 8, 1969, entitled "Instructions for preparation of application for radioactive material license," (Forms RHF-1, RHF-2, RHF-3, RHF-4, RHF-5, RHF-14-1, RHF-14-2). Chapter 402-990 WAC was recodified as chapter 246-255 by WSR 91-02-049 (Order 121), filed December 27, 1990, effective January 31, 1991. Statutory Authority: RCW 43.70.040.

STATE OF WASHINGTON



**INSTRUCTIONS FOR PREPARATION OF
APPLICATION FOR RADIOACTIVE MATERIAL LICENSE
Forms RHF-1 and RHF-2**

GENERAL INFORMATION

An applicant for a "Radioactive Material License" should complete Form RHF-1 in detail. The applicant should endeavor to cover his entire radioisotope program with one application, if possible. However, separate applications should be submitted for medical teletherapy and gamma irradiators. Supplemental sheets may be appended when necessary to provide complete information. *Item 16 must be completed on all applications. Submission of an incomplete application will often result in delay in issuance of the license because of the correspondence necessary to obtain information requested on the application.*

The Form RHF-2 should also be completed each time a medical request is made for a human use of radioisotopes. *Two copies* of the completed Form RHF 1 (and RHF-2 if a medical application) should be sent to the Washington State Department of Health, Radiation Control Agency, Smith Tower, Seattle, Washington 98104. One copy should be retained for the applicant's file.

COMPLETE EVERY ITEM—LEAVE NO BLANKS

EXPLANATION OF FORM RHF-1

Item No.

- 1 (a) The "applicant" is the organization or person legally responsible for possession and use of the radioactive material specified in the application.
(b) Indicate other address(es) at which radioactive material will be used if different from that listed in 1 (a). A post office box number is not acceptable.
- 2 The "department" is the department or similar subdivision where the radioactive material will be used.
- 3 Self-explanatory.
- 4 The "individual user" is the person experienced in use and safe handling of radioisotopes. *If the application is for "human use," the individual user must be a physician licensed by the State of Washington to dispense drugs in the practice of medicine and have extensive experience for each proposed clinical use.*
- 5 Self-explanatory.
- 6 (a) List by name each radioisotope desired, such as "Carbon 14," "Cobalt 60," etc.
(b) List chemical and/or physical form for each radioisotope and the quantity of each which the applicant desires to possess at any one time. If more than one

chemical or physical form of a particular radioisotope is desired, a *separate* possession limit should be stated for each form. For example, an applicant desiring to use two chemical forms of Iodine 131 must specify both forms and a possession limit for *each* form. Example:

Iodine 131	Iodide	10 millicuries
Iodine 131	Iodinated Human Serum Albumin	1 millicurie
Krypton 85	Gas	1000 millicuries

If the radioactive material is to be obtained as a sealed source(s), specify the manufacturer, model number, and amount of activity in *each* sealed source. Example:

Cobalt 60	3 Sealed Sources, 100 mci each (Iso Corp. Model Z-54)	300 millicuries
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7- State the use of each radioactive material and chemical form specified in Item 6 (a) and (b). If the radioisotope is for "human use," *do not complete this item; complete Form RHF-2-Supplement A—Human Use.*

8- 9 These items must be completed for *each* individual named in Item 4. If more than one individual is listed in Item 4, clearly key the name of each individual to his experience.

10-16 Self-explanatory.

(over)

EXPLANATION OF FORM RHF-2-SUPPLEMENT A—HUMAN USE

Item No.

- 1 Self-explanatory.
- 2 Self-explanatory.
- 3 State Regulations provide that the using physician have substantial experience in the proposed use, the handling and administration of radioisotopes and, where applicable, the clinical management of radioactive patients. The physician must furnish suitable evidence of such experience with his application. Supplement A—Human Use—Page 3 is provided for conveniently presenting these details.
- 4 Name or describe each clinical use for each radioisotope and chemical form administered. List radiological protection procedures to be followed in sufficient detail to permit a realistic evaluation of the potential radiological hazards.
- 5 (a) Dosage for treatment of patients will depend upon the clinical judgment of the responsible physician; the State is only interested in the *proposed dosage range*.
(b) For experimental programs or new and unusual uses, the maximum single dose of radiomaterial to be administered should be included and the approximate number and frequency of such doses. Rationale for unusually high dosages should be presented. The proposed use should be outlined in detail demonstrating that radiological health safety to the patient will not be jeopardized. If the use duplicates, or is based on, a use reported in the technical literature, an abstract of such a report or article and a brief statement as to how such use will be followed or modified will suffice.
- 6 Radioisotopes furnished by AEC facilities are pharmaceutically UNREFINED. An applicant should include information regarding processing or standardization procedure if radioactive material will not be obtained in precalibrated form for oral administration or precalibrated and sterilized form for parenteral administration.

7 Self-explanatory.

8 (a) Give the name and address(es) of the hospital(s) which will admit your patients that have been administered radioisotopes.

(b) Submit a copy of the radiological protection instructions furnished to the hospital personnel regarding the care of patients to whom radioisotopes have been administered. Attach also a list of radiation instruments you will make available to the hospital.

9 (a), (b) To be completed by using physician.

10, 11, It is recommended that these items be completed by the applicant physician's preceptor in the medical use of radioisotopes. The precepting physician is usually the chairman of the medical isotopes committee of the institution where clinical experience was acquired. However, the preceptor may be a staff physician experienced in the clinical use of radioisotopes under whom the using physician's radioisotope training and experience was acquired. If possible, the using physician's entire clinical radioisotope experience should be included. Additional comments may be presented in the space provided on page 4.

NOTE.—For Medical-Institutional Type Program

- 1 List the names, medical specialties, and radioisotope experience, if any, of each member of the local isotope committee.
- 2 State the procedures the local isotope committee will use to control the procurement and to approve uses of radioisotopes at the institution.
- 3 Submit a copy of instructions given to nurses who will care for patients containing radioactive material.
- 4 Submit a copy of radiological protection rules and procedures given to individuals using radioisotopes at the institution.

1-67—1M

**Washington State Department of Health
APPLICATION FOR RADIOACTIVE MATERIAL LICENSE**

INSTRUCTIONS—Complete Items 1 through 16 if this is an initial application. If application is for renewal of a license, complete only Items 1 through 7 and indicate new information or changes in the program as requested in Items 8 through 15. Use supplemental sheets where necessary. Item 16 must be completed on all applications. Mail two copies to: Washington State Department of Health, Radiation Control Section, Smith Tower, Seattle, Washington 98104. Upon approval of this application, the applicant will receive a State of Washington Radioactive Material License, issued in accordance with the general requirements contained in Washington State Department of Health, Radiation Control Regulations and the Washington Nuclear Energy and Radiation Control Act, Chapter 70.98 RCW.

NEW APPLICATION AMENDMENT TO LICENSE RENEWAL

1. (a) NAME AND STREET ADDRESS OF APPLICANT. (Institution, firm, hospital, person, etc.)	(b) STREET ADDRESS(ES) AT WHICH RADIOACTIVE MATERIAL WILL BE USED. (If different from 1 (a).)
2. DEPARTMENT TO USE RADIOACTIVE MATERIAL.	3. PREVIOUS LICENSE NUMBER(S). (If this is an application for renewal of a license, please indicate and give number.)
4. INDIVIDUAL USER(S). (Name and title of individual(s) who will use or directly supervise use of radioactive materials. Give training and experience in Items 8 and 9.)	5. RADIATION PROTECTION OFFICER (Name of person designated as radiation protection officer if other than individual user. Attach resume of his training and experience as in Items 8 and 9).
6. (a) RADIOACTIVE MATERIAL. (Elements and mass number of each.)	(b) CHEMICAL AND/OR PHYSICAL FORM AND MAXIMUM QUANTITY OF EACH CHEMICAL AND/OR PHYSICAL FORM THAT YOU WILL POSSESS AT ANY ONE TIME. (If sealed source(s), also state name of manufacturer, model number, number of sources and maximum activity per source.)
7. DESCRIBE PURPOSE FOR WHICH RADIOACTIVE MATERIAL WILL BE USED. (If radioactive material is for "human use," Supplement A (Form RHF-2) must be completed in lieu of this item. If radioactive material is in the form of sealed sources, include the make and model number of the storage container and/or device in which the source will be stored and/or used.) Attach extra sheets if necessary.	

(over)

TRAINING AND EXPERIENCE OF EACH INDIVIDUAL NAMED IN ITEM 4 (Use supplemental sheets if necessary).

8. TYPE OF TRAINING	WHERE TRAINED	DURATION OF TRAINING	ON THE JOB (Circle answer)	FORMAL COURSE (Circle answer)
a. Principles and practices of radiation protection			Yes No	Yes No
b. Radioactivity measurement standardization and monitoring techniques and instruments			Yes No	Yes No
c. Mathematics and calculations basic to the use and measurement of radioactivity			Yes No	Yes No
d. Biological effects of radiation			Yes No	Yes No

9. EXPERIENCE WITH RADIATION (Actual use of radioisotopes or equivalent experience).

ISOTOPE	MAXIMUM AMOUNT	WHERE EXPERIENCE WAS GAINED	DURATION OF EXPERIENCE	TYPE OF USE

10. RADIATION DETECTION INSTRUMENTS (Use supplemental sheets if necessary).

TYPE OF INSTRUMENTS (Include make and model number of each)	NUMBER AVAILABLE	RADIATION DETECTED	SENSITIVITY RANGE (mr/hr)	WINDOW THICKNESS (mg/cm ²)	USE (Monitoring, Surveying, Measuring)

11. METHOD, FREQUENCY, AND STANDARDS USED IN CALIBRATING INSTRUMENTS LISTED ABOVE.

12. FILM BADGES, DOSIMETERS, AND BIO-ASSAY PROCEDURES USED (For film badges, specify method of calibrating and processing, or name of supplier).

INFORMATION TO BE SUBMITTED ON ADDITIONAL SHEETS

13. FACILITIES AND EQUIPMENT. Describe laboratory facilities and remote handling equipment, storage containers, shielding, fume hoods, etc. Explanatory sketch of facility is attached (Circle answer). Yes No

14. RADIATION PROTECTION PROGRAM. Describe the radiation protection program including control measures. If application covers sealed sources, submit leak testing procedures where applicable, name, training, and experience of person to perform leak tests and arrangements for performing initial radiation survey, servicing, maintenance and repair of the source.

15. WASTE DISPOSAL. If a commercial waste disposal service is employed, specify name of company. Otherwise, submit detailed description of methods which will be used for disposing of radioactive wastes and estimates of the type and amount of activity involved.

CERTIFICATE

(This item must be completed by applicant)

16. THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATE ON BEHALF OF THE APPLICANT NAMED IN ITEM 1, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH WASHINGTON STATE DEPARTMENT OF HEALTH RADIATION CONTROL REGULATIONS AND THAT ALL INFORMATION CONTAINED HEREIN, INCLUDING ANY SUPPLEMENTS ATTACHED HERETO, IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF.

.....
Applicant named in Item 1

Date.....

By:.....

.....
Title of certifying official authorized to act on behalf of the applicant

Washington State Department of Health

APPLICATION FOR RADIOACTIVE MATERIAL LICENSE

Supplement A—Human Use

If radioactive material is for "human use" (internal administration of radioactive material or the radiation therefrom to human beings), complete this supplement and attach to the application for radioactive material license.

1. (a) USING PHYSICIAN'S NAME	(b) NAME AND ADDRESS OF APPLICANT (If different from 1 (a))
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2. THE USING PHYSICIAN INDICATED ABOVE IS LICENSED TO DISPENSE DRUGS IN THE PRACTICE OF MEDICINE BY THE STATE OF WASHINGTON. Circle Answer	YES	NO
3. A STATEMENT OF USING PHYSICIAN'S CLINICAL RADIOISOTOPE EXPERIENCE (PAGE 3 OF THIS SUPPLEMENT) IS SUBMITTED IN SUPPORT OF THIS APPLICATION. IF ANSWER IS NO, USE PAGE 2 OF THIS SUPPLEMENT TO EXPLAIN OR REFER TO OTHER APPLICATION OR RELATED DOCUMENTS ON WHICH THIS INFORMATION APPEARS. Circle Answer	YES	NO

PROPOSED DIAGNOSIS OR TREATMENT

4. (a) DESCRIBE PURPOSE FOR WHICH RADIOACTIVE MATERIAL WILL BE USED INCLUDING SPECIFIC CONDITIONS OR DISEASES TO BE DIAGNOSED OR TREATED (Use page 2 if necessary):

(b) CHEMICAL FORM ADMINISTERED:

(c) DESCRIBE PROCEDURES WHICH WILL BE OBSERVED TO MINIMIZE HAZARD FROM HANDLING, STORAGE, AND DISPOSAL OF THE RADIOACTIVE MATERIAL:

(d) DESCRIPTION AND SKETCHES OF SPECIAL DEVICES TO BE USED FOR ADMINISTERING RADIOACTIVE MATERIAL TO HUMAN BEINGS ARE:

(1) ATTACHED (Literature References Will Suffice).	Circle Answer	YES	NO
(2) ON FILE WITH WASHINGTON STATE DEPARTMENT OF HEALTH. REFER TO SPECIFIC DOCUMENT NO.	Circle Answer	YES	NO

5. PROPOSED DOSAGE SCHEDULE

(a) In millicuries for internally administered radioactive material other than discrete fixed sources; and in roentgens or rads, as appropriate, for internal or external irradiation from discrete fixed sources (gold seeds, cobalt needles, etc.) state separately for each condition or disease (use page 2 if necessary):

(b) INVESTIGATIVE PROPOSAL FOR EXPERIMENTAL, NEW OR UNUSUAL HUMAN USES IS ATTACHED. (Attachment should include outline of conditions to be evaluated, including data from animal studies and/or abstract of literature reference if any, number and type of patients (i.e., age group, moribund, etc.)). Circle Answer

YES	NO
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6. IF RADIOACTIVE MATERIAL WILL NOT BE OBTAINED IN PRECALIBRATED FORM FOR ORAL ADMINISTRATION OR IN PRECALIBRATED AND STERILIZED FORM FOR PARENTERAL ADMINISTRATION, DESCRIBE IDENTIFICATION, PROCESSING, AND STANDARDIZATION PROCEDURES:

7. THE PROPOSED USE OF RADIOACTIVE MATERIAL HAS BEEN, OR WILL BE, APPROVED BY THE MEDICAL ISOTOPE COMMITTEE. Circle Answer	YES	NO
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HOSPITAL FACILITIES FOR INDIVIDUAL PRACTICE USE ONLY

8. (a). THE APPLICANT HAS COMPLETED ARRANGEMENTS FOR A HOSPITAL TO ADMIT RADIOACTIVE PATIENTS WHENEVER ADVISABLE. Circle Answer	YES	NO
(b) A COPY OF INSTRUCTIONS TO BE FURNISHED TO THE HOSPITAL AS TO RADIOLOGICAL SAFETY PRECAUTIONS TO BE TAKEN AND AVAILABLE RADIATION INSTRUMENTATION IS ATTACHED. Circle Answer	YES	NO

(over)

Washington State Department of Health
APPLICATION FOR RADIOACTIVE MATERIAL LICENSE
Supplement A—Human Use (cont.)

This page may be completed by the physician's preceptor (if any) in the medical use of radioisotopes. When the information is not furnished by the preceptor, the name and present address of the preceptor (if any) should be shown in Item 12 below.

9. (a) USING PHYSICIAN'S NAME	(b) NAME AND ADDRESS OF APPLICANT (if different from 9 (a))
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10. CLINICAL TRAINING AND EXPERIENCE OF PHYSICIAN WHO WILL USE RADIOACTIVE MATERIAL

(A) ISOTOPE	(B) CONDITION(S) DIAGNOSED OR TREATED	(C) NUMBER OF CASES	(D) TYPE OF PARTICIPATION FOR ALL CASES IN COLUMN D (Circle applicable numbers of items in accordance with key set forth below)			
I-131	Diagnosis of thyroid function		1	2	3	4
	Treatment of hyperthyroidism		1	2	3	4
	Treatment of thyroid cancer		1	2	3	4
	Treatment of cardiac conditions		1	2	3	4
	Brain tumor localization		1	2	3	4
	Blood determinations		1	2	3	4
	Others:		1	2	3	4
P-32 Soluble	Treatment of polycythemia and leukemia		1	2	3	4
	Brain tumor localization		1	2	3	4
	Treatment of bone metastases		1	2	3	4
	Others:		1	2	3	4
			1	2	3	4
P-32 CrPO ₄	Treatment of prostatic cancer		1	2	3	4
	Treatment of cervical cancer		1	2	3	4
	Treatment of pleural effusions and/or ascites		1	2	3	4
	Others:		1	2	3	4
Au-198 Colloid	Treatment of prostatic cancer		1	2	3	4
	Treatment of cervical cancer		1	2	3	4
	Treatment of pleural effusions and/or ascites		1	2	3	4
	Others:		1	2	3	4
Cr-51	Blood determinations		1	2	3	4
	Others:		1	2	3	4
			1	2	3	4
Other Isotopes	Radium 226		1	2	3	4
			1	2	3	4
			1	2	3	4
			1	2	3	4

Key to above numbers (column D) Active Participation and Discussion

1. Examination of patients to determine suitability for radioisotope diagnosis and/or treatment and recommendations on dosage to be prescribed.
2. Collaboration in calibration and administration of dosages including related measurements and plotting of data.
3. Active period of training and experience of sufficient duration to permit followup of patients through treatment and posttreatment period including reevaluation as to effectiveness and complications.
4. Study and discussion of case histories to establish most efficacious diagnostic and/or therapeutic techniques for this radioisotope use.

11. TOTAL NUMBER OF HOURS OF PARTICIPATION IN CLINICAL TRAINING.....hours.

12. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OR GUIDANCE OF

....., AT.....
 (Name of physician [preceptor]) (Institution) (Signature of preceptor)

Washington State Department of Health
APPLICATION FOR RADIOACTIVE MATERIAL LICENSE
Supplement A—Human Use (cont.)

This page may be used for providing additional information. Please cross reference specific items.

Form RHF-3

STATE OF WASHINGTON

NOTICE TO EMPLOYEES

STANDARDS FOR PROTECTION AGAINST RADIATION



In the Radiation Control Regulations, the Department of Health Has Established Standards for Your Protection Against Radiation Hazards.

YOUR EMPLOYER'S RESPONSIBILITY

Your employer is required to:

1. Apply these regulations to work involving sources of radiation.
2. Post or otherwise make available to you a copy of the Department of Health regulations, licenses, and operating procedures which apply to work you are engaged in, and explain their provisions to you.

YOUR RESPONSIBILITY AS A WORKER

You should familiarize yourself with those provisions of the Department of Health regulations, and the operating procedures which apply to the work you are engaged in. You should observe their provisions for your own protection and protection of your co-workers.

WHAT IS COVERED BY THESE REGULATIONS

1. Limits on exposure to radiation and radioactive material in controlled and uncontrolled areas;
2. Measures to be taken after accidental exposure;
3. Personnel monitoring, surveys and equipment;
4. Caution signs, labels, and safety interlock equipment;
5. Exposure records and reports; and
6. Related matters.

REPORTS ON YOUR RADIATION EXPOSURE HISTORY

1. The Department of Health regulations require that your employer give you a written report if you receive an exposure in excess of any applicable limit as set forth in the regulations or in the license. The basic limits for exposure to employees are set forth in RH 4.2* and RH 4.3* of the regulations. These sections specify limits on exposure to radiation and exposure to concentrations of radioactive material in air or water. *Now codified As WAC 402-24-020 and WAC 402-24-030.
2. If you work where personnel monitoring is required, and if you request information on your radiation exposures,
 - (a) Your employer must give you a written report, upon termination of your employment, of your radiation exposures, and
 - (b) Your employer must advise you annually of your exposure to radiation.

INSPECTIONS

All licensed or registered activities are subject to inspection by the Department of Health or its duly authorized representatives.

INQUIRIES

Inquiries dealing with the matters outlined above can be sent to the Department of Health, Radiation Control Agency, 1510 Smith Tower, Seattle, Washington 98104.

POSTING REQUIREMENT

Copies of this notice must be posted in a sufficient number of places where employees are employed in activities licensed or registered pursuant to parts II and III, by the Department of Health, to permit employees working in or frequenting any portion of a controlled area to observe a copy on the way to or from such area.

1-87-6M

Form RHF-4

STATE OF WASHINGTON
OCCUPATIONAL EXTERNAL RADIATION EXPOSURE HISTORY
IDENTIFICATION

1. NAME (Print—Last, first and middle)	2. SOCIAL SECURITY No.
3. DATE OF BIRTH (Month, day, year)	4. AGE IN FULL YEARS (N)

OCCUPATIONAL DOSE—PREVIOUS HISTORY

5. PREVIOUS EMPLOYMENT INVOLVING RADIATION EXPOSURE— List Name and Address of Employer	6. EMPLOYMENT PERIOD (From—to)	7. EXPOSURE PERIOD	PREVIOUS DOSE HISTORY	
			8. WHOLE BODY (REM)	9. INSERT ONE: Record or Calculated
10. REMARKS	11. ACCUMULATED OCCUPATIONAL DOSE TOTAL			

12. CALCULATIONS—Permissible Accumulated Occupational Dose Whole Body:

(A) Permissible Accumulated Occupational Dose 5(N-18) _____ REM

(B) Total Accumulated Occupational Dose (From Item 11) _____ REM

(C) Permissible Occupational Dose on Reserve _____ REM

13. CERTIFICATION: I certify that the exposure history listed in Columns 5, 6, and 7 is correct and complete to the best of my knowledge and belief.

Employee's Signature Date

14. Name and Address of Licensee or Registrant, _____

FOR INSTRUCTIONS—SEE OVER

INSTRUCTIONS FOR PREPARATION OF FORM RHF-4

This form or a clear and legible record containing all the information required on this form must be completed by each licensee or registrant for each individual whom he proposes to expose to radiation dose in excess of 1.25 rem/calendar quarter.

Identification

- Item 1. Self-explanatory.
- Item 2. Self-explanatory except that, if individual has no social security number, the word "none" shall be inserted.
- Item 3. Self-explanatory.
- Item 4. Enter the age in full years. This is called "N" when used in calculating the permissible accumulated occupational dose. "N" is the age in years of the individual at his last birthday.

Occupational Dose

- Item 5. List the name and address of each previous employer where occupational exposure to radiation was received. For periods of self-employment, insert the word "self-employed." Start with the most recent employer and work back.
- Item 6. Give the dates of employment.
- Item 7. List periods during which occupational exposure to radiation occurred.
- Item 8. List the dose recorded for each period of exposure from records of previous occupational exposure of the individual as calculated.
Dose to the whole body shall be deemed to include any dose to the whole body, gonads, active blood-forming organs, head and trunk, or lens of eye.
In any case where a licensee or registrant is unable to obtain a report of the individual's occupational exposure for periods when such individual was exposed to radiation it shall be assumed that such individual has received an exposure to the following occupational dose:

- 1. If prior to January 1, 1961
3.75 rem/calendar quarter; or ¹
- 2. If after January 1, 1961
1.25 rem/calendar quarter.

Calculated Dose

- Item 9. After each entry in Item 8 indicate in Item 9 whether dose is obtained from records or calculated.
- Item 10. Self-explanatory.

Total Accumulated Occupational Dose

- Item 11. The total for the whole body is obtained by summation of all values in Item 8.

Calculations ¹

- Item 12. The lifetime accumulated occupational dose for each individual and the permissible occupational dose in reserve are obtained by carrying out the following steps: The value for "N" should be taken from Item 4. Subtract 18 from "N" and multiply the difference by 5 rem (For example, John Smith, is age 32; $N = 32$, $5(32 - 18) = 70$ rem.) and enter under (A). Enter total exposure to date from Item 11 opposite (B). Subtract (B) from (A) and enter the difference opposite (C). The value in (C) represents the dose to the whole body to which that individual can be exposed as long as the dose in any calendar quarter does not exceed 3 rems. This value for permissible occupational dose on reserve is to be carried forward to Form RHF-5, Item 6.

Certification

- Item 13. Upon completion of the report, the employee must certify that the information in Columns 5, 6, and 7 is accurate and complete to the best of his knowledge. The date is the date of his signature.
- Item 14. Self-explanatory.

¹ If calculation of the individual's total accumulated occupational dose for all periods prior to January 1, 1961, under Item 8 yields a result higher than $5(N-18)$ for the individual as of that date; the excess may be disregarded. For this calculation, N should be the individual's age in years at his last birthday prior to January 1, 1961.

Form RHF-5

STATE OF WASHINGTON
CURRENT OCCUPATIONAL EXTERNAL RADIATION EXPOSURE
IDENTIFICATION

1. NAME (Print—Last, first and middle)	2. SOCIAL SECURITY No.
3. DATE OF BIRTH (Month, day, year)	4. AGE IN FULL YEARS (N)

OCCUPATIONAL DOSE

5. DOSE RECORDED FOR: Specify whole body; skin of whole body; or hands and forearms, feet and ankles.	6. Permissible occupational dose on reserve at beginning of period covered by this sheet.	7. METHOD OF MONITORING (e.g., Film Badge—FB; Pocket Chamber—PC; Calculations—Calc.) GAMMA _____ BETA _____ NEUTRONS _____ X-RAY _____			
8. PERIOD OF EXPOSURE (From—to)	DOSE FOR THE PERIOD (rem)				13. Running total for calendar quarter (rem)
	9. X or GAMMA	10. BETA	11. NEUTRON	12. TOTAL	

LIFETIME ACCUMULATED DOSE (REM)

14. Previous Total	15. Total Dose This Sheet	16. Total Accum. Occup. Dose	17. Perm. Acc. Occup. Dose 5(N-18) Rem	18. Perm. Occup. Dose on Res.
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19. Name and Address of Licensee or Registrant.

FOR INSTRUCTIONS—SEE BACK

INSTRUCTIONS FOR PREPARATION OF FORM RHF-5

The preparation and safekeeping of this form or a clear and legible record containing all the information required on this form is required, as a current record of occupational external radiation exposures for each individual for whom personnel monitoring is required. Note that a separate copy of this form is to be used when recording external exposure to the whole body; skin of the whole body; or hands and forearms and feet and ankles.

Listed below by item are instructions and additional information directly pertinent to completing this form.

Identification

- Item 1. Self-explanatory.
- Item 2. Self-explanatory except that, if individual has no social security number, the word "none" shall be inserted.
- Item 3. Self-explanatory.
- Item 4. Enter the age in full years. This is called "N" when used in calculating the permissible accumulated occupational dose. "N" is the age in years of the individual at his last birthday.

Occupational Dose

- Item 5. Separate form must be used when recording exposure to whole body; skin of whole body; hands and forearms, feet and ankles—Specify which exposure is being recorded in Item 5.

If an individual receives an occupational dose to the skin of the whole body from radiation of half-value layer less than 5 cm. of soft tissue, the dose to the skin of the whole body should be recorded on a separate form, unless the dose to the skin of the whole body as indicated by personnel monitoring devices has been included as dose to the whole body on a form maintained for recording whole body exposures.

If an individual receives a radiation dose to the hands and forearms, or feet and ankles, the dose to those portions of the body should be recorded on separate forms unless the dose to those parts of the body as indicated by personnel monitoring devices have been included as doses to the whole body on a form maintained for recording whole body exposure.

Dose to the whole body shall be deemed to include any dose to the whole body, gonads, active blood-forming organs, head and trunk, or lens of eye.

- Item 6. The permissible occupational dose on reserve is taken from previous records of exposure recorded by the licensee or registrant (*i. e.*, Item 18 of a previous Form RHF-5; or Item 12 of Form RHF-4 if the individual's exposure during the employment with the licensee or registrant begins with this record).
- Item 7. Indicate the method used for monitoring the individual's exposure to each type of radiation to which he is ex-

posed in the course of his duties. Abbreviations may be used.

- Item 8. The period of exposure should specify the day the measurement of that exposure was initiated and the day on which it was terminated. For example, a film badge issued Monday morning, August 4, 1958, and picked up Friday, August 15, 1958, would be indicated 8/4/58—8/15/58.

- Items 9, 10 and 11. Self-explanatory. The values are to be given in rem. All measurements are to be interpreted in the best method known and in accordance with 1.6.3.*Where calculations are made to determine dose, a copy of such calculations is to be maintained in conjunction with this record. In any case where the dose for a calendar quarter is less than 10% of the value specified in 4.2.1, the phrase "less than 10%" may be entered in lieu of a numerical value. **

- Item 12. Add the values under Items 9, 10 and 11 for each period of exposure and record the total. In calculating the "Total" any entry "less than 10%" may be disregarded.

- Item 13. The running total is to be maintained on the basis of calendar quarters.

Lifetime Accumulated Dose (Whole Body)

NOTE: If the licensee chooses to keep the individual's exposure below that permitted in 4.2.1, Items 14 through 18 need not be completed. However, in that case the total whole body dose for each calendar quarter recorded in Item 13 should not exceed 1.25 rem.

If an individual is exposed under the provisions of 4.2.2, complete Items 14 through 18 at the end of each calendar quarter and when the sheet is filled. Values in Item 13, when in the middle of a calendar quarter, and values in Item 18, must be brought forward to next sheet for each individual.

- Item 14. Enter the previous total accumulated dose from previous dose records for the individual (*e. g.*, Item 16 if Form RHF-5 or Item 11 if Form RHF-4).
- Item 15. Enter the sum of all totals under Item 12.
- Item 16. Add Item 14 and Item 15 and enter that sum.
- Item 17. Obtain the permissible accumulated occupational dose in rem for the whole body. Use the value for "N" from Item 4. Subtract 18 from "N" and multiply the difference by 5 rem (*e. g.*, John Smith, age 32; $5(32 - 18) = 70$ rem).
- Item 18. Determine the permissible occupational dose on reserve by subtracting Item 16 from Item 17. The permissible occupational dose on reserve is that portion of the permissible lifetime accumulated dose for the individual remaining at the end of the period covered by this sheet.
- Item 19. Self-explanatory.

* Now codified as WAC 402-16-060(3)

**Now codified as WAC 402-24-020(1)

RHF-14-1



STATE OF WASHINGTON

Page 1 ofPages

RADIOACTIVE MATERIALS LICENSE

Pursuant to the Nuclear Energy and Radiation Control Act, RCW 70.98, and the Radiation Control Regulations, Part III,* and in reliance on statements and representations heretofore made by the licensee designated below, a license is hereby issued authorizing such licensee to transfer, receive, possess and use the radioactive material(s) designated below; and to use such radioactive materials for the purpose(s) and at the place(s) designated below. This license is subject to all applicable rules, regulations, and orders now or hereafter in effect of the State Department of Health and to any conditions specified below.

* Now codified as Chapter 402-20 WAC.

Licensee		3. License number
1. Name		4. Expiration date
2. Address		5. Reference number
6. Radioactive materials (element and mass number)	7. Chemical and/or physical form	8. Maximum quantity licensee may possess at any one time

CONDITIONS

9. Authorized use. (Unless otherwise specified, the authorized place of use is the licensee's address stated in Item 2 above.)

Date.....

FOR THE STATE DEPARTMENT OF HEALTH

By.....



RHF-14-2



STATE OF WASHINGTON
RADIOACTIVE MATERIALS LICENSE

Page.....of.....Pages

License Number.....

FOR THE STATE DEPARTMENT OF HEALTH

Date.....

By.....

Chapter 246-260 WAC
WATER RECREATION FACILITIES

WAC

246-260-001	Purpose and authority.
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246-260-040	Operating permit.
246-260-050	Compliance.
246-260-060	Surveillance.
246-260-070	Water quality standards, analysis, and sample collection.
246-260-080	Monitoring, reporting, and record keeping.
246-260-090	Swimming pool design, construction, and equipment.
246-260-100	Operation of swimming pool facilities.
246-260-110	Spa pool design, construction, and equipment.
246-260-120	Operation of spa pool facilities.
246-260-130	Wading pool design, construction, and equipment.
246-260-140	Operation of wading pool facilities.
246-260-150	Spray pool design, construction, and equipment.
246-260-160	Operation of spray pool facilities.
246-260-170	Water recreation facility pools not in operation.
246-260-180	Bathing beaches.
246-260-200	Water recreation industry requirements.
246-260-210	Technical advisory committee.
246-260-220	Restrictions on animals.
246-260-230	Variance.
246-260-240	Substitution.
246-260-250	Enforcement.
246-260-260	Hearings.
246-260-990	Fees.
246-260-998	Severability.

WAC 246-260-001 Purpose and authority. The purpose of this chapter is to protect the health, safety, and welfare of users of water recreation facilities (WRF). This chapter is established per RCW 70.90.120.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-003, filed 3/12/90, effective 4/12/90.]

WAC 246-260-010 Definitions. (1) "Abbreviations" (technical):

- (a) "DE" means diatomaceous earth;
- (b) "fps" means feet per second;
- (c) "gpm" means gallons per minute;
- (d) "mg/l" means milligrams per liter. When requirements in this regulation specify limits for liquid volume measurements using mg/l or ppm, either may be used depending on the type of testing equipment available;
- (e) "ppm" means parts per million. See notation under mg/l for use;
- (f) "TU" means turbidity unit as measured by the nephelometric method.

(2) "ANSI" means American National Standards Institute.

(3) "APHA" means American Public Health Association.

(4) "Approved" means the department or local health officer has stated in writing that the design plans and specifications are in accordance with chapter 246-260 WAC.

(5) "ARC" means American Red Cross.

(6) "Architect" means a registered architect currently licensed under chapter 18.08 RCW in Washington state.

(7) "ASHRAE" means American Society of Heating, Refrigeration and Air Conditioning Engineers.

(8) "Assistant lifeguard" means a person appointed by the owner or manager meeting the training requirements of this chapter actively assisting lifeguards (under direct lifeguard supervision) for the purpose of ensuring bather safety.

(9) "Attendant" means a person appointed by the owner or manager meeting the training requirements of this chapter, monitoring activities and conditions for the purpose of ensuring bather safety.

(10) "Bathing beach" means a bathing place, together with buildings and appurtenances used in connection therewith, on a natural pond, lake, stream, or other body of fresh or salt water, which is open to the public for bathing by express permission of the owner, or which is operated for a fee, or openly advertised as a place for bathing by the public.

(11) "Board" means the state board of health.

(12) "CNCA" means Council for National Cooperation in Aquatics.

(13) "CPSC" means Consumer Product Safety Commission (U.S.).

(14) "Communication system" means any combination of devices permitting the passage of or exchange of messages between personnel and/or personnel and bathers. Systems can include but are not limited to two-way radios, hard wired intercoms, horns, whistles, hand signals, direct voice, signs, or equivalent.

(15) "Contaminant" means any physical, chemical, or biological substance present in the WRF water which may adversely affect the health or safety of the bather and/or the quality of the water.

(16) "Cross-connection" means any physical arrangement connecting a:

(a) Potable water system directly or indirectly, with anything other than another potable water system; or

(b) WRF pool to any potable or nonpotable water source capable of contaminating either the WRF pool, its components, or potable water source as a result of backflow.

(17) "Department" means the department of health.

(18) "Diving envelope" means the minimum dimensions of an area within the pool necessary to provide entry from a diving board, platform, or pool decking intended for users to dive.

(19) "Engineer" means a registered professional engineer currently licensed under chapter 18.43 RCW in Washington state.

(20) "FINA" means Federation Internationale de Natation Amateur.

(21) "General use pool" means any swimming, spa, wading, or spray pool regulated by this chapter not meeting the definition of a "limited use pool." If limited-use pools provide organized programs (as noted in limited use definition), the limited use pools shall conform with the general-use pool requirements during periods of such activity.

(22) "Handhold" means a structure not over twelve inches above the water line around the perimeter of the pool wall, affording physical means for the bather to grasp the pool sides.

(23) "Illness or injury report" means the written record of all facts regarding an injury or illness associated with the WRF.

(24) "Lifeguard" means a person appointed by the owner or manager to maintain surveillance over the bathers on the deck or in the pool and to supervise bather safety. The lifeguard shall meet the training requirements of this chapter.

(25) "Lifeguard station" means designated work station of a lifeguard.

(26) "Lifesaving equipment" means emergency equipment and barrier protection.

(27) "Limited use pool" means any swimming, spa, wading, or spray pool regulated by this chapter at an apartment, boarding home, condominium, home owners association, hotel, mobile home park, motel, recreational vehicle park, or rental housing unit and is for the use of the persons living or residing at these facilities and the resident's invited guests. If such pool provides organized programs at the facility (that is, formal instructional lessons for swimming or diving, swim meets, exercise classes, or other activities planned for users besides those specified under the limited use pool category), the pool facility shall conform with the general use pool requirements during periods of such activity.

(28) "Local health officer" means the health officer of the city, county, or city-county department or district or a representative authorized by the local health officer.

(29) "NSF" means National Sanitation Foundation.

(30) "NSPI" means National Spa and Pool Institute.

(31) "Operations" means all aspects of a WRF which must be controlled to make the facility safe, healthy, and usable for the purpose intended.

(32) "Owner" means a person owning and responsible for a WRF or authorized agent.

(33) "Person" means an individual, firm, partnership, copartnership, corporation, company, association, club, government entity, or organization of any kind.

(34) "Pool" means swimming pool, wading pool, spray pool, or spa pool or the like.

(35) "Plummet" means a line perpendicular to water surface and extending vertically to a point located at the front end of the diving board and at the center line directly in front of the diving board.

(36) "Primary zone of visual coverage" means the area assigned to a lifeguard or attendant for primary visual surveillance of user activity.

(37) "Radius of curvature" means the radius arc denoting the curved surface from the point of departure from the springline (vertical sidewall) of the pool to the pool bottom.

(38) "Response time" means time between bather distress and initiation of rescue assistance contact by a lifeguard in facilities providing lifeguards.

(39) "Recreational water contact facility" means an artificial water associated facility with design and operational features that provide patron recreational activity which is different from that associated with a conventional swimming pool and purposefully involves immersion of the body partially or totally in the water, and that includes but is not limited to water slides, wave pools, and water lagoons. These facilities are regulated by chapter 246-262 WAC.

(40) "RLSSC" means the Royal Life Saving Society of Canada.

(41) "Secretary" means the secretary of the department of health.

(42) "Serious injury" means any injury:

(a) Requiring emergency service response where a person requires medical treatment as determined by the emergency medical response personnel; and/or

(b) Resulting in a person seeking medical attention at a hospital emergency room or admittance to a hospital.

(43) "Spa pool" means a pool designed for relaxation or recreational use where the user is sitting, reclining, or at rest and the pool is not drained, cleaned, or refilled for each user. The spa pool may include, but not be limited to, hydrojet circulation, hot water, cold water, mineral baths, air induction bubbles in any combination.

(44) "Spray pool" means a pool or artificially constructed depression for use by bathers in which water is sprayed, but is not allowed to pond, in the bottom of the pool.

(45) "Springline" means the point where the pool wall breaks from vertical and begins its arc in the radius of curvature (for cove construction) to the bottom of the pool.

(46) "Swimming pool" means any structure, basin, chamber, or tank containing an artificial body of water for swimming, diving, relaxation, or recreational bathing and having a depth of two feet or more at any point and including all associated facilities.

(47) "Turnover time" means the minimum time necessary to circulate the entire volume of the pool facility through the treatment system.

(48) "Wading pool" means any artificial pool of water equal to or less than two feet deep and intended for wading purposes.

(49) "Walking surface" means any surface used as a direct access surface for a pool area and the walking surface's change room facilities where the user is barefoot.

(50) "Water treatment operator" means the appointed person operating the physical and mechanical equipment and performing related water quality monitoring and associated record keeping for proper operation of the physical facility.

(51) "Water recreation facility (WRF)" means any artificial basin or other structure containing water used or intended to be used for recreation, bathing, relaxation or swimming, where body contact with the water occurs or is intended to occur and includes auxiliary buildings and appurtenances. The term includes, but is not limited to:

(a) Conventional swimming pools, wading pools, and spray pools;

(b) Recreational water contact facilities as defined under RCW 70.90.110 and regulated under chapter 246-262 WAC;

(c) Spa pools and tubs using hot water, cold water, mineral water, air induction, or hydrojets; and

(d) Any area designated for swimming in natural waters with artificial boundaries within the waters.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-001, filed 3/12/90, effective 4/12/90; Regulation .98.001, effective 3/11/60.]

WAC 246-260-020 General administration. (1) The department and local health officer for each local health jurisdiction shall develop an interagency agreement listing the responsibilities of each agency for administering these

rules. The agreement shall designate the person responsible for:

- (a) Issuance of construction permits with plan review and review of completed facilities;
- (b) Issuance of operation permits and routine surveillance of facilities; and
- (c) Enforcement actions.

(2) Fees may be charged as authorized in RCW 70.90.150.

(3) The interagency agreement shall be reviewed periodically to ensure effective use of local and state resources.

(4) The department shall conduct a local health jurisdiction program review a minimum of once every five years to ensure conformance with state board of health standards.

(5) The department shall review this chapter for changes at least once every five years.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-005, filed 3/12/90, effective 4/12/90.]

WAC 246-260-030 Construction permit. (1) Persons planning to construct, alter, or modify a WRF pool, except for routine maintenance, shall submit plans to the department or local health officer as required for review and approval:

(a) A completed construction permit application form obtained from the department or local health officer;

(b) Three sets of plans and specifications prepared and signed by an engineer or architect.

(2) The architect or engineer shall provide the following information for plan review approval and project completion:

(a) Plans drawn to scale and in sufficient detail to completely illustrate construction including, but not limited to:

- (i) One plan view;
- (ii) One or more cross sections through the main drain;
- (iii) Overall plan showing the pool in relation to other facilities in the area;
- (iv) Detailed view of the equipment layout and the associated room or location;
- (v) A piping schematic showing piping configuration, pipe size, valves, inlets, main drains, overflow outlets, make-up water, and backwash from filter;
- (vi) Dimensional drawings of pool bottom and side-walls;
- (vii) Specifications of all required components;
- (viii) Such other department-required information.

(b) Engineers or architects may submit standard plans for prefabricated structures or structures virtually identical from one installation to the next. When the engineer or architect submits such standard drawings, future submittals, involving the standard equipment shall:

- (i) Include copies of the approved standard drawings;
- (ii) Include an engineer or architect cover letter noting the location and address of the new facility;
- (iii) Be substantially in conformance with the original standard plan;
- (iv) Provide information on changes and note any specification differences; and
- (v) Be valid only during the period regulations or department policies concerning plan review and design

standards are not changed. If errors are determined at a later period, it will be necessary to resubmit.

(c) The facility construction report noted under subsection (5)(a) of this section. On pools:

(i) Less than fifteen hundred square feet, the construction report shall confirm the:

(A) Mechanical equipment and circulation system is installed and functioning substantially in accordance with the approved plans; and

(B) Facility with provisions for diving substantially conforms with the diving envelope requirements established in the regulation.

(ii) Fifteen hundred square feet or more, shall confirm:

(A) Subitems under subsection (2)(c)(i) of this section; and

(B) Walking surfaces, barriers, pool components including piping, inlets, outlets, dimensional design, pool appurtenances, equipment rooms, ventilation, and lighting and plumbing fixtures are substantially in conformance with the approved plans.

(3) Following review of the completed permit application and plans and specifications, the department or local health officer shall forward:

(a) Written approval or rejection or note modifications, additional information needed or conditions, and issue or deny a construction permit within thirty days of a complete submittal;

(b) A copy of approved plans to the designer; and

(c) A copy of the approval letter to the department or local health officer and local building department.

(4) The owner shall ensure any construction, modification, or alteration is completed according to approved plans and specifications.

(5) Upon completion of WRF pool facility construction, modification, or alteration and before use, owners shall:

(a) Submit to the department or local health officer a construction report signed by an engineer or architect certifying construction is substantially in compliance with approved plans and specifications and related to conditions under subsection (2)(c) of this section;

(b) Notify the department or local health officer at least five working days before intended use of the facility; and

(c) Before use of a new or modified pool facility, obtain a valid operating permit from the state or local health jurisdiction having authority for surveillance of the pool.

(6) The construction permit issued by the department or local health officer shall be valid for a period of eighteen months. Renewals of construction permits may be granted by the department or local health officer for a period of one year. The owner is responsible to resubmit for a reapplication for a construction permit.

(7) WRF pool owners shall comply and obtain approval with all other applicable agency codes and standards. The agency codes and standards include, but are not limited to:

(a) The National Electrical Code, chapter 19.28 RCW and chapter 296-46 WAC determined under the electrical section of the Washington state department of labor and industries or local electrical authority;

(b) Local gas piping and appliance codes, American Gas Association standards, and certification meeting the latest ANSI Z21.56 or other applicable and equivalent standards;

- (c) Local building authority standards, including structural design of components;
- (d) State and local plumbing authority standards;
- (e) Washington state department of labor and industries requirements for pressure vessels under chapter 70.79 RCW and chapter 296-104 WAC; and
- (f) Codes designated under chapter 70.92 RCW for handicapped accessibility.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-010, filed 3/12/90, effective 4/12/90; Regulation .98.010, effective 3/11/60.]

WAC 246-260-040 Operating permit. (1) No person shall operate a water recreation pool facility without a current department or local health officer-issued operating permit.

(2) To obtain an operating permit, owners of a water recreation pool facility shall provide department or local health officer information showing the WRF is in compliance with this chapter.

(3) Operating permits shall be:

- (a) Valid for one year;
- (b) Subject to annual renewal; and

(c) Nontransferable without written department or local health officer consent. For purposes of this section, a change in management of a corporation, partnership, association, or other nonindividual business entity shall create a new person requiring either consent to a permit transfer or issuance of a new permit upon proper application.

(4) The department or local health officer issuing the operating permit may revoke or suspend the permit if the WRF is not operated in accordance with chapter 70.90 RCW or chapter 246-260 WAC.

[Statutory Authority: RCW 70.90.120, 92-02-020 (Order 226B), § 246-260-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-015, filed 3/12/90, effective 4/12/90.]

WAC 246-260-050 Compliance. (1) Existing water recreation facilities which do not fully comply with the design, construction, and equipment requirements in WAC 246-260-090, 246-260-110, 246-260-130, and 246-260-150 may be continued in use except as noted in subsections (2) and (3) of this section.

(2) Existing water recreation facilities shall be operated in continuous compliance with the provisions of this chapter as outlined in the life saving equipment requirements as defined in WAC 246-260-010(26), 246-260-070, 246-260-080, 246-260-100, 246-260-120, 246-260-140, 246-260-160, and 246-260-170, and provisions for lifesaving equipment in this chapter.

(3) Existing water recreation facilities built before the effective date of this chapter revision:

- (a) Having barriers not conforming with this chapter, may maintain the barrier as it presently exists provided:
 - (i) Barrier is forty-eight inches or more in height;
 - (ii) Barrier has a maximum width opening of vertical members not exceeding six inches in width;
 - (iii) Each entry to the pool area has a self-closing, self-latching gate or door.

(b) Having barriers not conforming with this chapter, must upgrade the barrier to conform with this chapter if the existing barrier height is less than forty-eight inches in height.

(4) Facilities exempted from the regulations are noted under RCW 70.90.250 and the term medical therapy include facilities whose sole use is therapy provided for medical:

(a) Treatment under the supervision of licensed medical practitioners; or

(b) Rehabilitation for institutionalized patients under supervision of licensed medical practitioners.

[Statutory Authority: RCW 70.90.120, 92-02-020 (Order 226B), § 246-260-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-020, filed 3/12/90, effective 4/12/90; Regulation .98.020, effective 3/11/60.]

WAC 246-260-060 Surveillance. (1) Owners and operators shall permit the department or local health officer to perform on-site WRF inspections or other surveillance activity as necessary in the discretion of the enforcing agency to ensure compliance with standards under chapter 70.90 RCW and chapter 246-260 WAC.

(2) Employees of the enforcing agency shall provide appropriate identification when entering a WRF for the purpose of routine inspections.

[Statutory Authority: RCW 70.90.120, 92-02-020 (Order 226B), § 246-260-060, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-025, filed 3/12/90, effective 4/12/90.]

WAC 246-260-070 Water quality standards, analysis, and sample collection. (1) **Contaminants.** Owners shall maintain waters free from harmful levels of disease-producing organisms, toxic chemicals, or adverse physical conditions.

(2) **Bacteriological standards.** Owners shall maintain WRF pool waters to meet the following standards of bacteriological quality:

(a) Heterotrophic plate counts not to exceed two hundred bacteria per milliliter in two consecutive tests;

(b) Total coliform not to exceed an average of one coliform per sample of one hundred milliliters in two consecutive tests when using the membrane filter test; and

(c) Total coliform not to exceed one tube positive in two consecutive tests when using the MPN method.

(3) **Disinfection.** Owners shall maintain continuous and effective methods of disinfection of WRF pool waters at all times with use of:

(a) Chlorine or bromine described under Table 070.1 of this section; and/or

(b) Alternate forms of disinfection meeting the following criteria:

(i) Registered with the Environmental Protection Agency, if required;

(ii) Registered with the Washington state department of agriculture, if required;

(iii) Conformance with NSF standard 50 or equal when applicable; and

(iv) Adherence to department-established guidelines.

(c) Alternate forms of disinfection for which the department has developed board-approved standards or guidelines including:

(i) "Interim guidelines governing the use of ozone and ozonators for water recreation facilities;"

(ii) "Interim guidelines governing the use of copper/silver disinfection processes for water recreation facilities."

(4) **Chemical and physical quality.** Owners shall maintain:

(a) Physical and chemical conditions within the ranges specified under Table 070.2 of this section;

(b) Cleanliness by:

(i) Closing an affected WRF area or affected portion of a WRF area when contaminated with feces, vomit, sewage, or other hazardous or unknown material until the area is clean, disinfected, and free of the hazardous material;

(ii) Daily removal of scum or floating material on the pool water surface;

(iii) Continuous removal of scum or floating material by overflow action of pool water with flotsam screened and filtered; and

(iv) Maintaining sanitary walking surfaces.

(c) WRF spa pools which are routinely drained, cleaned, and refilled at a minimum using the formula as follows:

$$\text{Spa volume} \div 3 \div \text{average number of users/day} = \text{Number of days, between draining, cleaning, and refilling.}$$

(5) **Laboratory sampling and testing.** Persons collecting laboratory analysis water samples shall:

(a) Collect and transport chemical and micro-organism samples based on the most recent published edition of standard methods for the examination of water and waste/water analysis, published jointly by the American Public Health Association/Water Pollution Control Federation and American Waterworks Association, referred to as "standard methods" in this chapter;

(b) Have laboratory tests performed per "standard methods" at department-approved laboratories to provide such analyses;

(c) Provide adequate data for completing analyses; and

(d) Use department-approved water sample bottles for collection of samples.

(6) **Field testing.** Owners shall have field testing equipment:

(a) To provide means for measuring disinfectant residuals, pH, alkalinity, and any other chemicals routinely used in the pool water;

(b) In pools where compressed chlorine gas is used, to detect leaks using commercial strength (twenty-six degrees Baume') ammonia vapor; and

(c) With a suitable range of readings for the routinely measured parameters as noted under Table 070.3 of this section.

(7) **Chemicals in pool.** Owners shall ensure addition of chemicals or materials to WRF pool waters only when the use is approved or recognized as acceptable by the department. The department has available to WRF pool owners the current approved or acceptable material lists.

(8) **Additional tests.** Owners shall perform additional department or local health officer-directed tests.

TABLE 070.1
MINIMUM AND
MAXIMUM LEVELS OF DISINFECTANTS *

Currently Recognized Disinfectants	Type of Residual Measured	pH Ranges		7.8-8.0 Levels	Maximum Residual ppm **
		7.2-7.49 Minimum	7.5-7.79 Residual		
1. Chlorine	Free available chlorine	1.0	1.4	1.8	6
2. Chlorinated cyanurate	Free available chlorine	1.5	2.0	2.8	6
3. Bromine	Total available bromine	2.0	2.5	3.5	6

NOTE:

*When using spa facilities, increase minimum residuals in all categories by 1.5 ppm.

**Maximum residual as noted or manufacturer's recommendations (whichever is less). In spa facilities, maximum residual may be raised to 10 ppm or manufacturer's recommendations (whichever is less).

TABLE 070.2
ACCEPTABLE RANGES OF SELECTED CHEMICAL AND
PHYSICAL WATER QUALITY CONSTITUENTS

Chemical or Physical Constituent	Minimum	Maximum
1. pH (Hydrogen ion)	7.2	8.0
2. Water clarity (safety)	Main drain and pool bottom visible at all times	—
3. Turbidity (shielding micro-organisms from disinfection)	—	0.5 TU*
4. Cyanuric acid or its derivatives (if used)	0	90 ppm
5. Temperature	—	104 F.**
6. Combined chlorine	—	<50% of free chlorine
7. ORP***	700 mv.	—

NOTE:

*In peak periods, turbidity may increase to 1.0 TU provided turbidity returns to 0.5 TU within a six-hour period following peak use. Turbidity is not a required routine analysis. Turbidity monitoring may be required by the department or local health officer if special conditions warrant turbidity monitoring.

**A pool facility thermometer shall be provided when the water temperature exceeds 95 degrees Fahrenheit.

***Oxidation-reduction potential (ORP) readings used in conjunction with chlorine and bromine may be allowed as long as values are maintained no less than 700 millivolts. ORP readings do not preclude the need for field testing of the actual mg/l residual for the specific disinfectant on at least a daily basis.

TABLE 070.3
RANGE OF ACCEPTABLE TESTING LEVELS FOR FIELD TEST
KITS*

Chemical Test	Minimum Range	Minimum Accuracy
1. Free available chlorine	0.3 to 3.0 ppm	0.2 ppm to 1.0 ppm 0.5 ppm above 1.0 ppm
2. Total chlorine	0.3 to 3.0 ppm	0.2 ppm to 1.0 ppm 0.5 ppm above 1.0 ppm
3. Total bromine	0.3 to 4.0 ppm	0.2 ppm to 1.0 ppm 0.5 ppm above 1.0 ppm
4. pH (hydrogen ion)	7.0 to 8.2	0.2
5. Cyanuric Acid	0 to 100 ppm	10 ppm
6. Alkalinity	0 to 300 ppm	15 ppm
7. Temperature (spas)	60 to 110 degrees F.	1 degree F.

NOTE:

*Do not make a chemical condition determination based on readings at the extreme measurable limits of the scale.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-070, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-030, filed 3/12/90, effective 4/12/90; Regulation .98.030, effective 3/11/60.]

WAC 246-260-080 Monitoring, reporting, and record keeping. (1) Reporting death, injury, and illness. Owners shall:

(a) Provide department or local health officer-requested information for statewide injury and illness surveillance reports; and

(b) Within forty-eight hours, notify the department or local health officer of a drowning, near drowning, death, or serious injury or illness occurring at the water recreation facility.

(2) Incidents. Owners shall provide department or local health officer-requested information after an incident creating a potential problem of health or safety significance, for example, chlorine gas leak.

(3) Monitoring and record keeping. Owners shall monitor and maintain records for at least three years on the following:

(a) Water quality conditions on WRF pools including:

(i) Residual disinfectant testing often enough to determine the residual is satisfactory, and in no condition shall residual disinfectant testing be done less than once every twenty-four hours;

(ii) Hydrogen ion (pH) concentration testing often enough to determine the concentration is satisfactory, and in no condition shall testing be done less than once every twenty-four hours;

(iii) Checking alkalinity monitored at least weekly;

(iv) Recording quantities of all chemicals added to pool water, including alum, algicides, cyanuric acid, acids, alkalinity compounds, etc.

(v) Checking gauges sufficiently to assure conformance with code requirements for turnover during the filter cycle;

(vi) Any gross water contamination, for example, vomiting, feces, etc.;

(vii) When pool temperature is over ninety-five degrees, temperature testing sufficiently often to determine temperature is in a satisfactory range at or below one hundred and four degrees Fahrenheit and in no condition shall temperature testing be done less than once every twenty-four hours; and

(viii) When cyanuric acid or its derivatives are used in a pool, cyanurate level testing to determine the cyanurate level is maintained below the maximum level of ninety mg/l, and in no condition shall cyanurate level testing be done less than once every week the pool is in use.

(b) Routine preventive maintenance provided on all hazardous equipment, for example, gas chlorination equipment;

(c) Daily estimation of number of users;

(d) Personnel credentials, training, and/or certifications required under WAC 246-260-100(5), 246-260-120(5), and 246-260-140(5).

(4) Availability. Owners shall make records required by this section available for department or local health officer review upon request.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-035, filed 3/12/90, effective 4/12/90.]

WAC 246-260-090 Swimming pool design, construction, and equipment. (1) Location. Owners shall locate pools to:

(a) Minimize pollution by dust, smoke, soot, and other undesirable substances;

(b) Eliminate pollution from surrounding surface drainage; and

(c) Ensure pump house, trees, and other structures are located fifteen feet or more from the pool or provide barriers or other means to prevent ready access from the structure. Structures shall not be construed to include:

(i) Building walkways above the second story or roofs of any building structure; or

(ii) Any barriers provided to prevent unauthorized pool access, for example fencing.

(2) **Materials.** Owners shall use only structure and equipment materials which are nontoxic, durable, inert, impervious to water, and easily cleanable.

(3) **Walking surfaces.** Owners shall design and maintain walking surfaces:

(a) Uniformly sloping away from the pool or pools a minimum of one-fourth inch per foot and a maximum of one-half inch per foot;

(b) Of a nonslip finish not presenting a tripping hazard;

(c) Equipped with sufficient drains to prevent standing water;

(d) Of easily cleanable, impervious finishes;

(e) At least six feet wide on the shallow end of pool, except for:

(i) Pools with all depths uniform at ends, at least one end six feet wide or more; or

(ii) Circular or irregular pools at least twenty-five percent of the deck six feet wide or more.

(f) Four feet or more in width on pools with an area fifteen hundred square feet or less;

(g) Six feet or more in width:

(i) On outdoor pools fifteen hundred square feet or more;

(ii) On fifty percent of the perimeter of indoor pools fifteen hundred square feet or more. Perimeter on remainder of the deck shall be four feet or more in width.

(h) A minimum of sixteen square feet per bather on pools fifteen hundred square feet or more. Determine maximum bather load as described under subsection (12) of this section. If owner provides maximum facility occupancy loading less than that of subsection (12) of this section, and such occupancy limit is posted and enforced, that loading may be used in lieu of the maximum bather load figure as described under subsection (12) of this section;

(i) In swimming pools designed for competitive use with likelihood of spectators, a minimum of six feet between spectator viewing area and the pool. Balconies shall be

fifteen feet or more from the pool unless properly safeguarded from intruding into the pool area;

(j) In conformance with department-established guidelines for any resilient artificial surfaces; and

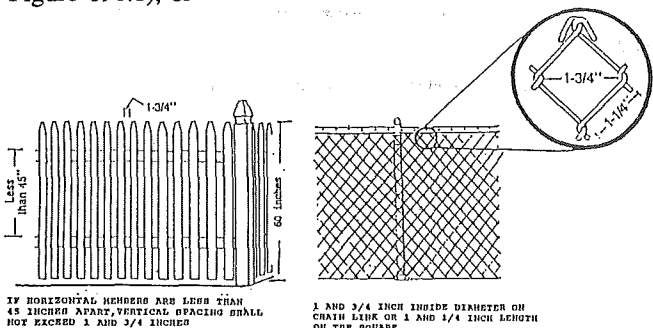
(k) General use pools shall not have sand and grass areas within the pool enclosure unless separated to prevent direct access from the pool area and means are provided for cleansing the bather's feet before re-entering the pool and deck area.

(4) **Barriers.** Owners shall provide barrier protection to prevent unauthorized access.

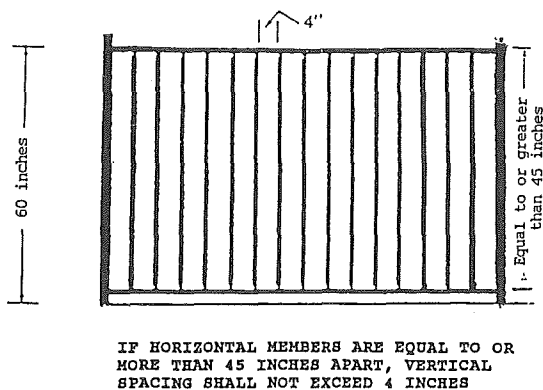
(a) A barrier shall be sixty inches or more in height and:

(i) Shall not allow passage of a four-inch diameter sphere;

(ii) If it has horizontal members that are spaced less than forty-five inches between the tops of the horizontal members, shall have spaces between the vertical members not greater than a width of one and three-quarter inches (see Figure 090.1); or



(iii) If it has horizontal members that are spaced at, or more than, forty-five inches between the tops of the horizontal members, shall have spaces between the vertical members not greater than a four-inch width (see Figure 090.2); and



(iv) Shall have lockable gates and entrances provided with a self-closing, self-latching mechanism fifty-four inches or more from the ground with a clear space fifty inches deep on the latch side of the door to position a wheelchair. When a latching mechanism is provided at any lower height, the latching mechanism shall be of a type remaining continuously locked, and only opening with the use of a key or other access control system.

(b) At outdoor facilities not a part of living facilities, such as in a municipal park, a barrier six feet or more shall be provided to prevent unauthorized access;

(c) Restricted area service entrances shall be exempt from door or gate requirements providing no public access is available;

(d) Lifeguarded pools are not required to have a self-closing, self-latching gate during the period a pool is in use. Facility gates shall be closed and locked during nonuse periods; and

(e) An entrance to the pool area which shall not serve as a required exit from another part of the building when there is a conflict with other codes or regulations.

(5) **Pool surfaces.** Owners shall ensure pool surfaces with:

(a) Materials complying with subsection (2) of this section;

(b) Water tight and nonabrasive construction; and

(c) White or light color finish not obscuring the view of objects or surfaces;

(d) Surfaces not causing cutting, pinching, puncturing, entanglement, or abrasion hazard under casual contact; and

(e) Construction tolerances conforming with current NSPI public pool standards.

(6) **Pool general floor and wall dimensional design.** Owners shall ensure pool dimensional designs for floors and walls provide for safety, circulation, and quality of the water including, but not limited to:

(a) Uniform pool floor slopes as follows:

(i) Pools fifteen hundred square feet or more providing a maximum slope of one foot drop in twelve feet of run at pool depths to five and one-half feet;

(ii) Where diving provisions are included, floor slopes not intruding into the area designated as the diving envelope; and

(iii) A slope change transition zone (breakpoint from shallow to deep areas of pool) providing warning of the break in slope into diving or deep pool areas consisting of a two-foot wide ramp sloped at twice the slope of the shallow bottom.

(b) Pool vertical walls may be curved, not to exceed allowable radius, to join the floor for minimum distance as noted under Table 050.1 [090.3] of this section. Vertical means walls not greater than eleven degrees from plumb:

(i) Coving or portion of the side wall of a pool diving area shall conform as required and as described under subsection (7) of this section; and

(ii) In new construction or alterations to existing construction, ledges are prohibited.

(c) A maximum intrusion for pool walls beyond the vertical, as defined under subsection (6)(b) of this section, with any configuration not to exceed a transitional radius from wall to floor where floor slopes join walls and which has:

(i) Center of radius not less than the minimum vertical depth specified under Table 090.3 of this section below the water level;

(ii) Arc of radius tangent to the wall; and

(iii) Maximum radius of coving, or any intrusion into the pool wall/floor interface, determined by subtracting the vertical wall depth from the total pool depth.

TABLE 090.3

MAXIMUM RADIUS COVING OR POOL INTRUSION DIMENSIONS BETWEEN POOL FLOOR AND WALL*

Pool Depth	2'0"	3'0"	3'6"	5'0"	>5'0"
Minimum Sidewall Vertical Depth (Springline)	1'6"	2'2"	2'6"	3'6"	@>3'6"
Maximum Radius of Curvature	6"	10"	12"	1'6"	**Maximum radius equals pool depth minus the vertical wall depth

NOTE:

- *For pool depths falling between the depths listed, values can be interpolated.
- **Radius of coving cannot intrude into pool within diving envelope.

(7) **Specific design requirements for pools furnishing areas for diving.** Owners shall ensure provision of diving envelopes in pools or areas of pools designated for diving activities to include a diving envelope not less than the:

(a) APHA standard configuration noted under figure 090.4 of this section in areas where user would enter from the deck level twelve inches or less from water level. This requirement is based on a standard described under APHA public pool regulations, 1981, for pool type described under D-8.01 Table 1, the section noting the requirements from deck level;

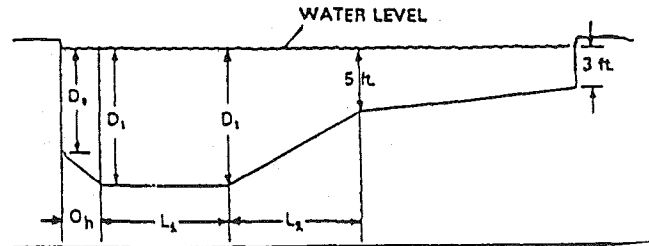
(b) CNCA standard configuration noted under figure 090.5 of this section in areas where the user would enter from the deck level over twelve inches from water level, or has a platform or diving board provided at a height of less than one-half meter (twenty inches). This requirement is based on a standard described under CNCA publication **Swimming Pools: A Guide to their Planning, Design, and Operation** 1987, Fourth Edition. Human Kinetics Publisher, Inc., Champaign, Illinois, figure 8.1; and

(c) FINA standard configuration noted under figure 090.6 of this section in areas where the user would enter from the diving board or platform at a height of one-half meter (twenty inches) or greater. This requirement is based on a standard described in FINA publication **FINA Handbook, 1986-88**, constitution and rules governing swimming, diving, water polo, and synchronized swimming, 1986-88. Edited by E. Allen Harvey, Vancouver, Canada VGN 3R6, Section D, pp. 114-115.

FIGURE 090.4

MINIMUM DIMENSIONS FOR POOLS WITH DIVING FROM DECK LEVEL WHICH IS LESS THAN TWELVE INCHES FROM THE WATER LINE

Heights	Lengths			
	Height of Deck Above Water Level	Water		Length of Depths Diving Well Run-Out
H	D(0)	D(1)	L(1)	L(2)
12" or less		6 ft	8.5 ft	12 ft 10.5 ft
Over 12 inches	See standards for over twelve inches as applicable (either CNCA or FINA in inches following subsections).			



NOTE:

- *The department underlined areas for clarification.

APHA STANDARDS*

D-8 DIVING AREA REQUIREMENTS

D-8.01

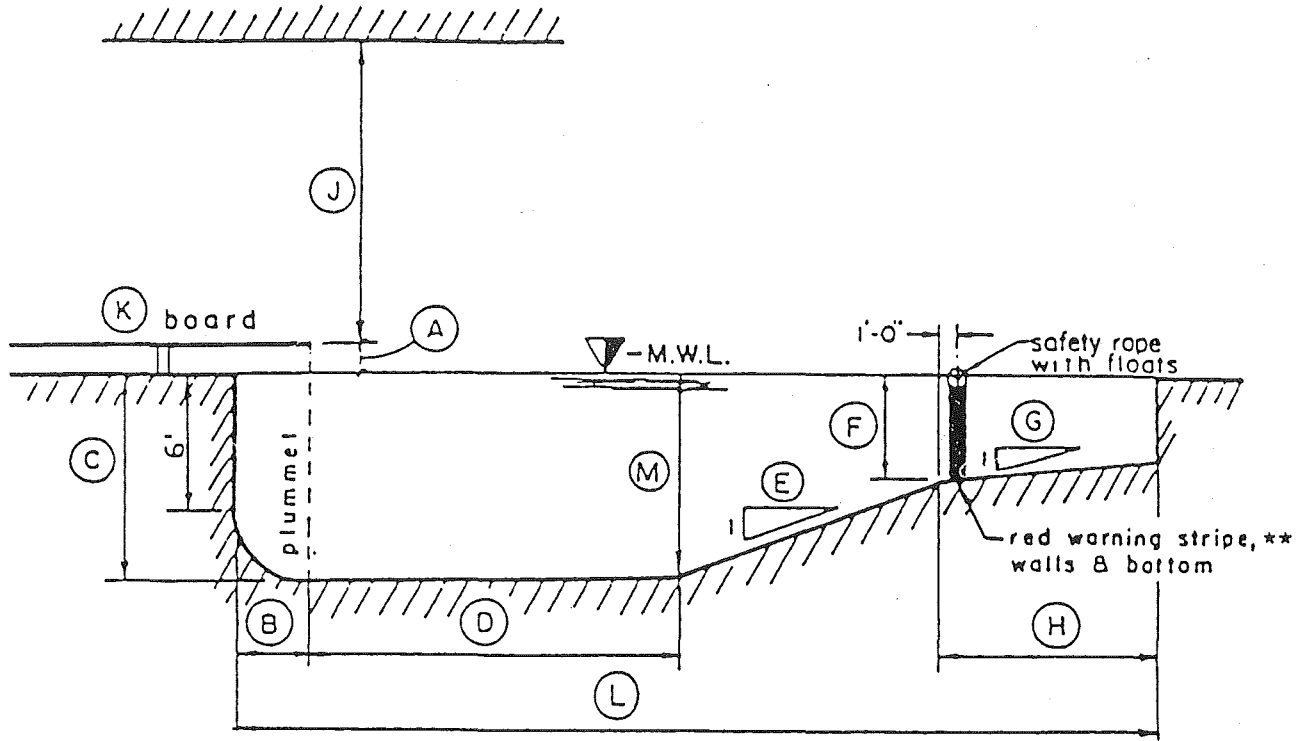
The dimensions of the diving area on all swimming pools providing diving from deck level shall conform to the following dimensions:

Table 1. The diving area dimensions on all swimming pools providing diving from deck level.

Figure 090.5

Minimum dimensions for pools with boards or platforms at a height of less than 1/2 meter (20 inches)

CNCA STANDARDS



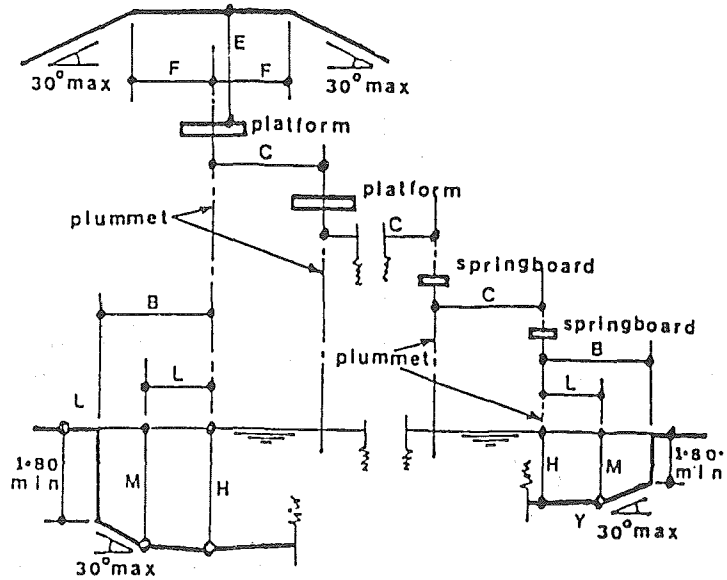
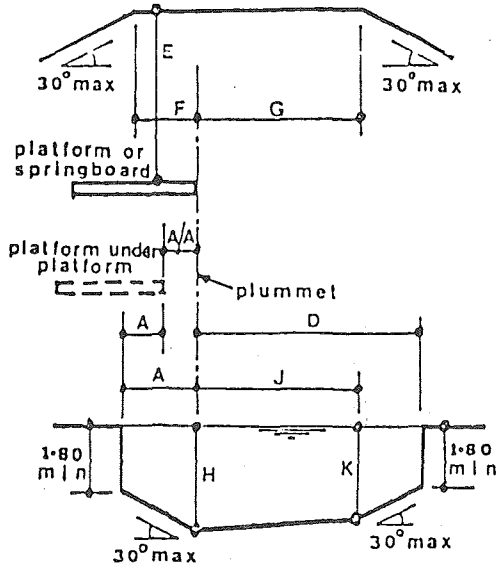
Dimension	Minimum	Preferred or Maximum
A Height of board above water		20 in.
B Board overhang	2 ft 6 in.	3 ft
C Depth of water at plummet	9 ft	10 ft *
D Distance from plummet to start of upslope	16 ft	18 ft *
E Inclination of upslope of bottom		1:3
F Depth of water at breakpoint	4 ft 6 in.	
G Slope of bottom in shallow portion of pool	1:12	1:15 *
H Length of shallow section of pool	8 ft	14 ft *
J Distance to any overhead structure	13 ft	15 ft *
K Board length		12 ft
L Length of pool	40 ft	50 ft *
M Dimension not less than C minus 6 in.	6 in.	

NOTE (FROM FIGURE 090.5):

- *Values with asterisks are not to be considered as maximums.
- **Warning stripe at break point may be of any contrasting color.

FIGURE 090.6
MINIMUM DIMENSIONS FOR POOLS WITH BOARDS OR PLATFORMS
AT A HEIGHT OF 1/2 METER OR MORE

FINA STANDARDS



LONGITUDINAL SECTION
DIAGRAMMATIC ONLY

CROSS SECTION
DIAGRAMMATIC ONLY

FINA Dimensions for Diving Facilities		Dimensions are in Metres	Springboard		Platform											
			1 Metre	3 Metres	1 Metre	3 Metres	5 Metres	7.5 Metres	10 Metres							
		LENGTH	4.80	4.80	4.50	5.00	6.00	6.00	6.00							
		WIDTH	0.50	0.50	0.60	1.20	1.50	1.50	1.50							
		HEIGHT	1.00	3.00	0.60-1.00	2.60-3.00	5.00	7.50	10.00							
Revised to 1st Jan 1987			HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	HORIZ	VERT		
A	From plummet BACK TO POOL WALL	DESIGNATION	A-1	A-3	A-1pl	A-3pl	A-5	A-7.5	A-10							
		MINIMUM	1.80	1.80	0.75	1.25	1.25	1.50	1.50							
A/A	From plummet BACK TO PLATFORM plummet directly below	DESIGNATION					A-5/1	A-7.5/3/1	A-10/5/3/1							
		MINIMUM					1.50	1.50	1.50							
B	From plummet to POOL WALL AT SIDE	DESIGNATION	B-1	B-3	B-1pl	B-3pl	B-5	B-7.5	B-10							
		MINIMUM	2.50	3.50	2.30	2.90	4.25	4.50	5.25							
C	From plummet to ADJACENT PLUMMET	DESIGNATION	C-1/1	C-3/3/1	C-1/1pl	C-3/1/1/3pl	C-5/3/1	C-7.5/3/1	C-10/7.5/3/1							
		MINIMUM	2.40	2.60	1.65	2.10	2.50	2.50	2.75							
D	From plummet to POOL WALL AHEAD	DESIGNATION	D-1	D-3	D-1pl	D-3pl	D-5	D-7.5	D-10							
		MINIMUM	9.00	10.25	8.00	9.50	10.25	11.00	13.50							
E	On plummet, from BOARD TO CEILING	DESIGNATION	E-1	E-3	E-1pl	E-3pl	E-5	E-7.5	E-10							
		MINIMUM	5.00	5.00	3.50	3.50	3.50	3.50	5.00							
F	CLEAR OVERHEAD behind and each side of plummet	DESIGNATION	F-1	E-1	F-3	E-3	F-1pl	E-1pl	F-3pl	E-3pl	F-5	E-5	F-7.5	E-7.5	F-10	E-10
		MINIMUM	2.50	5.00	2.50	5.00	2.75	3.50	2.75	3.50	2.75	3.50	2.75	3.50	5.00	
G	CLEAR OVERHEAD ahead of plummet	DESIGNATION	G-1	E-1	G-3	E-3	G-1pl	E-1pl	G-3pl	E-3pl	G-5	E-5	G-7.5	E-7.5	G-10	E-10
		MINIMUM	5.00	5.00	5.00	5.00	5.00	3.50	5.00	3.50	5.00	3.50	5.00	3.50	6.00	5.00
H	DEPTH OF WATER at plummet	DESIGNATION	H-1	H-3	H-1pl	H-3pl	H-5	H-7.5	H-10							
		MINIMUM	3.50	3.80	3.30	3.60	3.80	4.50	5.00							
J	DISTANCE AND DEPTH ahead of plummet	DESIGNATION	J-1	K-1	J-3	K-3	J-1pl	K-1pl	J-3pl	K-3pl	J-5	K-5	J-7.5	K-7.5	J-10	K-10
		MINIMUM	5.00	3.40	6.00	3.70	5.00	3.20	6.00	3.50	6.00	3.70	8.00	4.40	11.00	4.75
L	DISTANCE AND DEPTH each side of plummet	DESIGNATION	L-1	H-1	L-3	H-3	L-1pl	H-1pl	L-3pl	H-3pl	L-5	H-5	L-7.5	H-7.5	L-10	H-10
		MINIMUM	1.50	3.40	2.00	3.70	1.40	3.20	1.80	3.50	4.25	3.70	4.50	4.40	5.25	6.75
N	MAXIMUM SLOPE TO REDUCE DIMENSIONS beyond full requirements	POOL DEPTH	30 degrees		NOTE	Dimensions C (plummet to adjacent plummet) apply for Platform with widths as detailed. For wider Platforms increase C by half the additional width(s)										
		CEILING HT	30 degrees													

(8) **Pool appurtenances.** Owners shall ensure swimming pools:

(a) Have handholds around the perimeter in pools two feet or more in depth. Handholds shall be four feet or less apart and consist of any one or a combination of the following:

(i) Coping, ledges, radius flanges, or decks along the immediate top edge of the pool or suitable slip-resisting handholds located twelve inches or less above the waterline;

(ii) Ladders or steps; or

(iii) Secured rope or railing twelve inches or less above the water line.

(b) Have stairs, ladders, or stepholes with:

(i) Stairs, when provided, meeting the following construction requirements:

(A) Nonslip tread finish;

(B) Contrasting color stair tread edges clearly visible to users;

(C) Recessed in pool areas used for lap or competitive swimming to prevent intrusion into the activity areas;

(D) Handrails with the leading edge for stairs at pool entry/exit being neither eighteen inches or more beyond nor eight inches or more inside (horizontally) the vertical plane of the bottom riser;

(E) Riser treads with a minimum unobstructed, horizontal, ten-inch tread depth and a minimum two-hundred-forty-inch surface area;

(F) Riser heights, on general use pools fifteen hundred square feet or more, uniform and seven and one-half inches or less, except the bottom riser may be less than the uniform height; and

(G) Riser heights, on general use pools less than fifteen hundred square feet, and limited use pools, uniform and have a preferred seven-and-one-half-inch height, but not greater than ten inches, except the bottom riser may be plus or minus two-inches of the uniform height.

(ii) Ladders or stepholes:

(A) Spaced at a minimum of one for every seventy-five feet of pool perimeter deeper than four feet;

(B) Provided at both sides of the deep end of pools over thirty feet in width; and

(C) Equipped with a handrail at the top of both sides extending over the coping or deck edge.

(iii) Means of access at the shallow end of the pool; and

(iv) Designs permitting entry and exit for impaired or handicapped persons are encouraged.

(c) Diving boards and diving platforms, when provided, shall:

(i) Be installed according to manufacturer's instructions;

(ii) Have slip-resistant tread surfaces;

(iii) Have steps and ladders leading to diving boards which provide handrails.

(iv) Be protected with forty-two inch high guardrails extending at least to the water edge when one meter or more above the water.

(d) Starting blocks, when provided, shall:

(i) If on the shallow end of pool, be removed when not in use by the competitive swimmers trained in starting blocks proper use; and

(ii) Be firmly secured when in use.

(e) Water slides, when provided, shall:

(i) Be installed according to manufacturer's instructions and be approved by the manufacturer for general use and limited use pools; and

(ii) Conform to Part 1207 of the Consumer Product Safety Act (Sec. 7(f), P.L. 92-573, 86 Statute 1215, 15 U.S.C. 1056(f)); or

(iii) If not manufactured for general use and limited use pools, conform to requirements under chapter 246-262 WAC, Recreational Water Contact Facilities.

(9) **Turnover.** Owners shall ensure pools turn over entire pool water volume in six hours or less. Exceptions to recirculation requirements may be made for flow-through pools in the following conditions where:

(a) Water supply is sufficient to provide the same turnover period specified for recirculation pools;

(b) The source water supply meets acceptable quality requirements and is subject to a disinfection method as described under WAC 246-260-070(3);

(c) The introduction of fresh treated pool water is accomplished by the same type of inlet and outlet design required for recirculation pools; and

(d) The pool water quality complies with WAC 246-260-070.

(10) **Pool depth markings.** Owners shall provide depth markings:

(a) Plainly marking the water depth in feet on the vertical wall at or above the water level and on the horizontal surface of the coping or deck edge;

(b) Positioned on the vertical pool wall to be read from the water side. Where markings cannot be placed above the water level, markings shall be placed in other areas and plainly visible to users in the pool;

(c) Located on the coping or deck within eighteen inches of the water edge and positioned to be read while standing on the deck facing the water;

(d) Which are slip resistant;

(e) Placed at the maximum and minimum water depths and at all points of slope change;

(f) Installed at intermediate increments of water depth not to exceed two feet, nor spaced at distances greater than twenty-five foot intervals;

(g) Uniformly arranged on both sides and ends of the pool;

(h) On irregularly shaped pools, meeting the requirements in subdivision (a) through (g) of this subsection and also designate the depths at all major deviations in shape;

(i) With a four-inch minimum height on the deck and a two-inch minimum height on the vertical pool wall; and

(j) Applied in a contrasting deck color which does not fade.

(11) **Safety line or marking line.** Owners shall provide safety (float) lines or marking lines (lines on pool sides and bottom) separating areas where the pool slope breaks from a uniform slope leading from shallow to deeper water.

(a) Safety lines when used shall:

(i) Be kept in place at all times, except when the pool is used for a specific purpose such as lap swimming or competitive use;

(ii) Be placed one foot toward the shallow end away from the break point line. See subsection (6)(a)(iii) of this section;

- (iii) Be strung tightly allowing the bather to hold onto the line for support;
- (iv) Have a receptacle for receiving the safety line:
 - (A) Recessed in the wall; or
 - (B) Not constituting a safety hazard when the safety line is removed.
- (v) Provide floats on the line at a minimum distance of every four feet.
 - (b) Markings lines when used shall:
 - (i) Provide a minimum three-inch wide marking line at the break point where the pool slope breaks from a uniform slope leading from shallow to deeper water; and
 - (ii) Be of a contrasting color to the background color of the pool sidewalls and floor.
 - (c) In pool facilities with uniform slopes not exceeding one foot in twelve feet to deep portions of the pool, a safety line or marking line shall not be required.
- (12) **Bather load.** Owners shall ensure maximum number of bathers in the pool facility at any one time do not exceed a number determined by the formula noted under Table 090.7 of this section.

TABLE 090.7
SWIMMING POOL MAXIMUM BATHING LOAD*
(SPMBL)

$$\text{SPMBL} = \frac{A - S}{(30)} + \frac{S}{(15)} \quad \text{For outdoor pools}$$

$$\text{SPMBL} = \frac{A - S}{(30)} + \frac{S}{(25)} \quad \text{For indoor pools}$$

Where
 A = Total area of water surface in square feet
 S = Area of pool less than 5 feet deep in square feet

NOTE:
 *This formula will be used in determining certain features of pools as noted elsewhere in these rules and regulations.

- (13) **Inlets.** Owners shall provide pool inlets:
 - (a) Submerged and located to produce uniform water and chemical circulation throughout the pool; and
 - (b) Located on the bottom of pools twenty-five hundred square feet or more, unless otherwise justified by the design engineer to the department's or local health officer's satisfaction.
- (14) **Outlets.** Owners shall provide pool outlets with:
 - (a) Overflow and main drain grating systems each designed to carry one hundred percent of the total recirculation filter flow and main drain piping designed to carry fifty percent or more of total recirculation filter flow;
 - (b) Overflow outlets that maintain:
 - (i) A minimum of sixty percent of filter recirculation flow at all times; and
 - (ii) An overflow channel which may be used on any pool and required on pools twenty-five hundred square feet or more on the pool perimeter to promote uniform circulation and skimming action of the upper water layer with:
 - (A) A design preventing all matter entering the channel from returning to the pool;
 - (B) Dimensions minimizing the hazard for bathers, such as catching arms or feet;

- (C) One one-hundredth of a foot slope per foot or more;
- (D) Drains sufficiently spaced and sized to collect and remove overflow water to return line and filter, where applicable; and
- (E) Size sufficient to carry one hundred percent of the recirculation flow plus the surge flow equivalent to one-fifth of the balancing tank expressed in gallons per minute.
- (iii) Skimmers in lieu of pool overflow channels up to twenty-five hundred square feet if:
 - (A) Weir provided in skimmer has a maximum flow rate through skimmer not exceeding four gpm per inch of weir;
 - (B) Devices are recessed in the pool wall so no part protrudes beyond the plane of the wall into the pool;
 - (C) The skimmer is equipped with a device to prevent air lock in the recirculation suction line, such as, an equalizer line;
 - (D) The skimmer is equipped with a removable and cleanable screen designed to trap large solids;
 - (E) Automatically adjustable and operates freely with continuous skimming action to continue through all designed loading rates. Displacement shall be computed at fifteen gallons per bather.
- (c) Main drains in all pools with:
 - (i) Location at the pool's low points;
 - (ii) A minimum of two main drains spaced:
 - (A) Twenty feet or less apart nor closer than six feet; or
 - (B) As far as possible from each other in pools seven feet or less linear floor distance.
 - (iii) Total open area of grates sized to prevent a suction or entrapment hazard dangerous to user;
 - (iv) Grates on drains with:
 - (A) Maximum flow of one and one-half feet per second;
 - or
 - (B) Net outlet area four times or more the area of the discharge pipe.
 - (v) Openings not allowing a sphere over one-half inch in diameter to pass;
 - (vi) Grates designed to withstand forces of users;
 - (vii) Grates removable only with specific tool; and
 - (viii) Means to control flow from recirculation pump or balancing tank.
- (15) **Flow.** Owners shall maintain pool recirculation flow not to exceed:
 - (a) Six feet per second in valved suction or discharge side of the pump; and
 - (b) Ten feet per second in open discharge pipes on the pressure side of the pump or filter discharge. The recirculation flow limit does not apply to the return inlet and the last two feet of pipe leading to the inlet.
- (16) **Balancing tanks.** Owners with overflow channels requiring balancing tanks shall:
 - (a) Maintain volume equivalent to fifteen times maximum bathing load expressed in gallons; and
 - (b) Increase capacity as necessary to provide volume for make-up water and to prevent air lock in the pump suction line.
- (17) **Pumps.** Owners shall have and maintain recirculation pumps with adequate capacity to:
 - (a) Provide design flows and pressure for water recirculation over the entire operating filter pressure;
 - (b) Allow proper back washing of filters when specified; and

(c) Have self-priming capability when installed above pool water level.

(18) **Strainers.** Where pumps precede the filter, owners shall equip pool recirculation facilities with hair and lint strainers which shall:

- (a) Be located upstream of recirculation pumps;
- (b) Provide strainer screen sufficiently strong to prevent collapse when clogged;
- (c) Have an openable cover; and
- (d) Provide valving to isolate the strainer when located below pool water level.

(19) **Valves.** Owners shall provide valves at appropriate locations to allow isolation and maintenance of equipment.

(20) **Equipment rooms.** Owners shall provide equipment rooms:

- (a) Enclosing pumps, disinfection equipment, filters and other electrical and mechanical feed equipment and associated chemicals. Chemical storage shall conform to manufacturer requirements;
- (b) Providing work space and access to perform routine operations;
- (c) With a forty-six-square-foot minimum floor area and provide a three-foot minimum access area to service equipment;
- (d) With one floor drain or more and a floor slope to the drain at a one-fourth-inch-per-foot minimum;
- (e) Ready access if below grade;
- (f) Ventilation;
- (g) Twenty foot-candles or more of light measured thirty inches from the floor; and
- (h) Kept locked.

(21) **Make-up water.** Owners shall ensure a source of make-up water and associated piping at the pool:

- (a) Providing sufficient quantity to replace daily pool losses;
- (b) Coming from a supply conforming with chapter 246-290 WAC;
- (c) Preventing cross connections using a minimum air gap of two pipe diameters or approved backflow prevention devices between the make-up water source and the pool water or waste water; and
- (d) If using a pool fill spout, not projecting greater than one inch into the space above the water surface area and shielded to not create a deck hazard.

(22) **Filters.** Owners shall equip pools with filtration equipment:

- (a) Meeting the applicable standards of NSF or equivalent;
- (b) Using acceptable type and filter rates described under Table 050.6 of this section;
- (c) Having pressure or vacuum gauges for measuring loss of head through the filter with minimum of one gauge preceding and one gauge following the filter;
- (d) Having a rate of flow indicator to measure flow which has accuracy, repeatability, and durability equivalent to flow meters meeting NSF standards; and
- (e) Having a means of discharging filter backwash to waste with:
 - (i) Discharge in a manner not creating a public nuisance;
 - (ii) Disposal in accordance with applicable local laws or regulations;

(iii) Minimum air gap of two pipe diameters to prevent cross-connection from waste discharge and recirculation system piping;

(iv) Discharge receptor and piping of sufficient size to accept backwash water and prevent flooding; and

(v) Ability to monitor filter effluent during backwash, that is, use of a sight glass.

(f) Providing means to release air entering the filter tank on pressure filters;

(g) When cartridge filters are used:

(i) Provide with an extra set of cartridges; and

(ii) Have any bypass valves in a permanently closed position.

(h) When using pressure DE filters with separation tanks:

(i) Provide a means of air release or a lid providing a slow and safe release of pressure; and

(ii) Show a readily visible user warning that the air release must be opened before starting the circulation pump.

TABLE 090.8

TYPE AND RANGES OF FILTERS FOR SWIMMING POOLS

Range of Acceptable Filter Rate Type of Filter Media	Expressed in gpm/Square Feet	
	Minimum	Maximum
Sand		
Rapid Sand or Pressure Sand	—	3
High Rate Sand Pressure or Vacuum	10	18*
	Continuous Feed	Manual Feed
D.E.		
Pressure	0.8	1.0
Vacuum	1.0	1.35
Cartridge**		.375

NOTE:

*Filters which are sized at maximum application rate shall be equipped with flow control valves to maintain flow equilibrium to account for varying filter pressures and consequent flow production.

**Cartridge filters shall have a nominal micron rating of twenty microns or less.

(23) **Disinfection equipment.** Owners shall provide disinfection equipment:

(a) Providing a continuous and effective disinfectant residual in the water;

(b) Using a disinfectant with an easily monitored residual;

(c) Having a design feed rate providing effective disinfection levels when the pool is in peak demand conditions;

(d) Having easily cleanable equipment and piping used to apply chemicals and with provisions to prevent undue clogging. All materials shall be resistant to action of chemicals used;

(e) Conforming to NSF standards if disinfection equipment has:

(i) Adjustable output rate chemical feed equipment for liquid solutions. The equipment shall:

(A) Feed under positive pressure in the recirculation system;

(B) Provide means for dosage adjustment;

(C) Have provisions to prevent hypochlorite solution siphoning when equipment is turned off. This applies when the disinfection equipment is above pool water level.

(ii) Flow through chemical feed for solid feed material. Solid tablets or granules shall not be placed in skimmer baskets accessible to the public.

(f) Allowing hand feeding on an emergency basis only;

(g) Meeting the following conditions when using chlorine gas:

(i) Chlorine rooms shall:

(A) Be above ground level;

(B) Be constructed so all openings or partitions with adjoining rooms are sealed;

(C) Be located with consideration of prevailing winds to dissipate leaked chlorine away from the pool facility;

(D) Have door opening outward only and to the out-of-doors;

(E) Provide a sign on the door exterior reading DANGER CHLORINE. The sign shall be large enough to be read twenty-five feet away.

(ii) Chlorine rooms shall have mechanical exhausting ventilation including:

(A) Air inlet located as far as possible from fan intake to promote good air circulation patterns;

(B) Minimum of one air change per minute in the chlorine room when fan is operating;

(C) A remote switch outside the room or a door-activated switch to turn on fan before entering;

(D) Suction for fan near the floor;

(E) Exhaust for fan and chlorinator vent located to prevent contaminating air intake and prevent undue hazard for the pool facility users; and

(F) Screened chlorinator vent.

(iii) Gas chlorine systems shall:

(A) Be vacuum injection type, with vacuum-actuated cylinder regulators;

(B) Provide integral backflow and anti-siphon protection at the injector; and

(C) Provide taring (net weight of cylinder gas) scales for determining chlorine weight.

(iv) Breathing protection available in an accessible area for the operator outside of the chlorine room including:

(A) Self-contained breathing apparatus designed for use in a chlorine atmosphere for working with chlorine leaks and maintained in accordance with department of labor and industries standards; or

(B) Provisions to substitute breathing protection at the site, if procedures can be established and documented with emergency service fire districts or other approved organization within the area for promptly responding to chlorine leaks.

(v) Means for automatic shutoff when pool flow is interrupted; and

(vi) Chlorine gas cylinders shall:

(A) Be stored only in chlorine rooms;

(B) Have approved valve-stem cylinder wrench on the valve stem to shut the system down in an emergency event;

(C) Be properly secured to prevent tipping;

(D) Be tagged to indicate cylinders are empty or full; and

(E) Not exceed one hundred fifty pounds tare weight per cylinder. If one-ton cylinder use is desired, an engineer

specializing in chlorine design shall prepare a design proposal for department consideration.

(24) **Chemical feeding equipment for pH control.** Owners applying chemicals for controlling pH through chemical feed equipment shall provide equipment with:

(a) Adequate size and design to allow routine cleaning and maintenance;

(b) Materials resistant to chemical action;

(c) Means for automatic shut off when pool flow is interrupted;

(d) Chemical feed equipment for pH control on pools fifty thousand gallons volume or greater;

(e) Any pool feeding with:

(i) Caustic soda (NAOH);

(ii) Carbon dioxide (CO₂); or

(iii) Other chemicals the department determines necessary to require metered and controlled feeding.

(25) **Heaters.** Where pool heating equipment is provided, owners shall:

(a) Locate equipment so any standing pilot is readily accessible; and

(b) Install equipment per NEC and UMC.

(26) **Ventilation.** Owners shall provide indoor pool facility ventilation conforming with ASHRAE pool facility standards.

(27) **Testing equipment.** Owners shall use testing equipment as noted in the water quality section under WAC 246-260-070(6).

(28) **Chemical storage.** Owners shall ensure chemical storage design and placement minimizes safety risks.

(29) **Restroom, locker room, and plumbing fixtures.** Owners shall provide restroom, locker room, and plumbing facilities at pools as follows:

(a) General use swimming pool facilities with:

(i) Minimum components including:

(A) Dressing rooms;

(B) Showers;

(C) Toilets and urinals;

(D) Lavatories; and

(E) Hose bibs.

(ii) A design providing easy accessibility to toilet and shower facilities by users with minimum cross traffic of nonusers;

(iii) Locker rooms including:

(A) Separate facilities for both sexes with provisions to block line of sight into locker rooms;

(B) Nonslip floors with suitable drains;

(C) Junctions between walls and floors coved for ease of cleaning; and

(D) Adequate ventilation to prevent moisture build-up in the facility.

(iv) Plumbing fixtures as described under Table 050.7 of this section;

(v) Shower facilities that:

(A) Deliver water at a temperature range of ninety to one hundred ten degrees Fahrenheit; and

(B) Provide single service soap in nonglass dispensers.

(vi) Flush toilets and toilet tissue in dispensers;

(vii) Sinks provided with:

(A) Tempered or hot and cold running water;

(B) Single service soap in nonglass dispensers; and

(C) Single service towels or electric hand dryers.

- (viii) Hose bibs with vacuum breakers provided:
 - (A) At a maximum spacing of one hundred fifty feet around pool deck; and
 - (B) Within the equipment room at facilities having pools fifteen hundred square feet or more.
- (ix) Janitor sink with a vacuum breaker at pools greater than fifteen hundred square feet; and
- (x) Sewage disposed of in a manner approved by the department or local health officer.
- (b) Limited-use swimming pool facility plumbing as described under Table 050.8 [090.10] of this section.

TABLE 090.9

PLUMBING FIXTURE MINIMUM REQUIREMENTS FOR GENERAL USE SWIMMING POOLS AMOUNT OF FIXTURES REQUIRED FOR OCCUPANCY LOAD BY SEX

Type of Fixture		Male	Female
1. Toilets	up to 120	1/60	1/40
	from 121-360 add	1/80	1/60
	over 360 add	1/150	1/100
2. Urinals	up to 120	1/60	NA
	from 121-360 add	1/80	
	over 360 add	1/150	
3. Showers	up to 120	1/40	1/40
	from 121-360 add	1/60	1/60
	over 360 add	1/100	1/100
4. Sinks	up to 200	1/100	1/100
	from 201-400 add	1/200	1/200
	over 400 add	1/400	1/400
5. Hose bibs	One hose bib accessible to each locker room and provided with a vacuum breaker.		
6. Janitor sink	One*		

NOTE:

*Required for pools 1500 square feet or greater.

TABLE 090.10

PLUMBING FIXTURE MINIMUM REQUIREMENT FOR LIMITED USE SWIMMING POOLS

Pools with:	Toilets	Showers	Sinks	Dress.Rm.
1. Living units within 100 feet and less than 3 stories.	-	-	-	-
2. Living units >100 feet but <500 feet and less than 3 stories.	1	-	1	-
3. Living units within 1/4 mile and/or with 3 or more stories.*	1(M)	-	1(M)	-
	1(F)	-	1(F)	-
4. Living units greater than 1/4 mile.**	1(M)	1(M)	1(M)	1(M)
	1(F)	1(F)	1(F)	1(F)

NOTE:

*Consideration for elevators adjacent to pool may allow variance from this requirement.

**When pool bathing load for the proposed facility exceeds a capacity of 150 people, the fixture units provided at limited use facilities shall conform with the general use requirements in Table 090.9.

(c) If owners limit the number of people within their facility to a certain number and post maximum occupancy loading, the number of plumbing fixture units may be based on that maximum occupancy.

(30) **Lighting.** Owners shall design and maintain pool facility lighting to:

- (a) Illuminate indoor facilities, outdoor facilities used after dusk, and locker room facilities with a minimum lighting intensity maintained thirty inches above any walking surface, pool deck, or pool area of:
 - (i) Thirty foot-candles at indoor facilities;
 - (ii) Fifteen foot-candles at outdoor facilities;
 - (iii) Twenty foot-candles in locker rooms.
- (b) Allow lifeguards or attendants to clearly see pool areas and walking surfaces;
- (c) Meet any additional lighting requirements deemed necessary by the department or local health officer;
- (d) Provide protective shielding for all lighting fixtures above walking surfaces and pool areas; and
- (e) Provide all indoor facilities with one or more pool area emergency lights designed to turn on in the event of a power failure. The emergency lighting shall conform to requirements of UL standard 924.

(31) **Emergency equipment.** Owners shall provide first aid and emergency equipment readily available during operating hours as follows:

- (a) General use swimming pool facilities:
 - (i) A telephone within the facility with a prominently displayed list of emergency medical service response numbers;
 - (ii) Sufficient and suitable area provided to accommodate persons within the facility requiring first aid treatment and necessary first aid equipment;
 - (iii) A supplied first aid kit as follows:
 - (A) For general use pools fifteen hundred square feet or more, a standard twenty-four unit kit;
 - (B) For general use pools less than fifteen hundred square feet and limited use pools, a standard sixteen unit kit;
 - (iv) Two or more blankets reserved for emergency use;
 - (v) A backboard with means to secure victim to board and provide immobilization of head, neck, and back at pools requiring lifeguards;
 - (vi) Devices to aid victims in distress as follows:
 - (A) For pools with width less than twenty-four feet, rescue poles one-half the pool width or more;
 - (B) For pools with width twenty-four feet or more, rescue poles twelve feet or more in length;
 - (C) One or more of the poles with a double crook life hook in pools without lifeguards;
 - (D) One or more reaching poles for every fifteen hundred square feet of pool surface area;
 - (E) Throwing ring buoy, heaving jug, heaving line, throw-rope bag, or other similar devices with rope the width of the pool or fifty feet, whichever is less for reaching and retrieving victim;
 - (F) Rescue tube or rescue buoy at each lifeguard station.
- (b) Limited use swimming pool facilities:
 - (i) During period facility is open for use, one of the following:
 - (A) A telephone within one minute access;
 - (B) Alternate means of reaching emergency medical service response numbers;
 - (C) Provision of an audible emergency alarm to alert others at area of need to respond.
 - (ii) Comply with requirements under subsection (31)(a)(iii), (iv), and (vi) of this section.

(32) **Lifeguard chairs.** Owners shall provide lifeguard chairs as follows:

(a) Where lifeguards are required and pools have depths greater than five feet, at least one lifeguard chair shall be provided adjacent to the deep area of the pool;

(b) Installed to manufacturer standards.

(33) **Signs.** Owners shall provide signs at pools which must convey the following conditions, but may be conveyed by any combination of words, pictures, or symbols:

(a) Prohibition of running or horseplay;

(b) Prohibition of use by persons with communicable diseases;

(c) Prohibition of use by persons under the influence of alcohol or drugs;

(d) Requirement for a cleansing shower before entering the pool;

(e) Warning that persons refusing to obey the regulations are subject to removal from the premises;

(f) Prohibition of food or drink in the pool water;

(g) In pools where lifeguards are not present, post requirements for facility use as described under WAC 246-260-100 (3)(b)(iii) and (c);

(h) Location of nearest telephone for emergency use or emergency notification procedure.

(34) **Food service.** When food service is provided, owners shall:

(a) At general use pool facilities, ensure food and beverage sale and consumption areas are separated from pool and deck enclosure areas. Special provisions may be made for allowing food and beverage service on the walkway provided a minimum six feet clear area is maintained between the pool edge and any tables or chairs provided for special facility functions;

(b) At limited use pool facilities, prohibit food and beverage in the pool water and maintain a minimum four foot clear area between pool edge and any tables and chairs provided for food service;

(c) At general use pool facilities, prohibit alcohol;

(d) At limited use pool facilities, when alcohol is sold within the pool facility, provide an attendant at the pool area;

(e) Provide trash containers;

(f) Prohibit glass containers in the pool facility.

(35) **Drinking fountain.** Owners shall provide an operable drinking fountain at general use swimming pools fifteen hundred square feet or more. Drinking fountains shall conform with American Standards Association requirements.

(36) **Foot baths.** Owners shall prohibit the use of foot baths at water recreation facilities. This does not preclude use of foot showers, provided the area is well drained.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-050, filed 3/12/90, effective 4/12/90; § 248-98-050, filed 10/3/67; Regulation .98.050, effective 3/11/60.]

WAC 246-260-100 Operation of swimming pool facilities. (1) **Operation plan.** Owners shall ensure proper operation to protect the public health, safety, and water quality by establishing practices and developing an operations manual addressing each of the following:

(a) Physical pool facility components;

(b) Personnel;

(c) Users and spectators;

(d) Environmental conditions.

(2) **Physical components.** Owners shall provide routine checks of the physical components:

(a) Ensuring all structural facilities which the users come in contact are intact and free from undue wear or fatigue and replaced as needed;

(b) Eliminating adverse affects of water ponding on walking surfaces;

(c) Ensuring preventive maintenance on equipment essential for protection of the public health, safety, and water quality;

(d) Ensuring any necessary emergency equipment is available and in good repair;

(e) Maintaining barrier protection;

(f) Ensuring common articles such as towels, bathing suits, bathing caps, etc., for patron use are sanitized before reuse if provided for patrons; and

(g) Ensuring treatment and turnover times are continuous twenty-four hours a day during seasons or periods of use and do not exceed six hours provided:

(i) Allowances shall be made for minor equipment maintenance;

(ii) Pools previously approved with turnover rates varying from subsection (2)(g)(i) of this section may continue to operate if water quality conditions conform with WAC 246-260-070.

(3) **Required personnel.** Owners shall ensure appropriate personnel at pool facilities as follows:

(a) General use pool facilities having one or more pools fifteen hundred square feet or more in surface area shall have lifeguards present at all times pools are in use, except:

(i) Pools having surface area less than twenty-five hundred square feet, four and one-half feet or less in depth, limiting use from two to ten adults in the pool are not required to have a lifeguard;

(ii) When swim teams are facility users, the owner may allow substitution of qualified coaches. See subsection (5) of this section to substitute for a lifeguard for guarding of a swim team.

(b) General use pool facilities less than fifteen hundred square feet shall provide lifeguards or attendants as follows:

(i) Lifeguards shall be present:

(A) If pool facility provides training for water safety and basic swimming instruction for children twelve years of age or under; or

(B) If pool facility provides training for safety and basic swimming instruction for adults and the pool is over four feet deep; or

(C) When pool facility provides training, practice, and/or meets for swim teams, substitution may occur as described under subsection (3)(a)(ii) of this section.

(ii) Attendants or lifeguards shall be present when organized programs are provided at the pool facility, for example, teaching of adult swimming lessons in water four feet or less, formal exercise classes, and the like;

(iii) When no lifeguard or attendant is present, the facility use shall be limited by the following conditions:

(A) When pool is used by children twelve years of age or under, a responsible adult eighteen years of age or older

shall accompany the children and be at the pool or pool deck at all times the children use the facility;

(B) When used by persons seventeen years of age or under, a minimum of two people at the pool facility at all times the pool is in use;

(C) Subdivision (b)(iii)(A) and (B) of this subsection posted.

(c) When lifeguards are not provided at limited use pool facilities, within the conditions noted in the definition for a limited use pool, use of the facility shall be limited by the following conditions:

(i) When the pool is used by children twelve years of age or under, a responsible adult eighteen years of age or older shall accompany the children and be at the pool or pool deck at all times the children use the facility;

(ii) When used by persons seventeen years of age or under, a minimum of two people at the pool facility at all times the pool is in use;

(iii) Subdivision (c)(i) and (ii) of this subsection posted and ongoing provisions to notify the responsible person of conditions for use of the facility.

(d) A water treatment operator.

(4) **Personnel duties and equipment.** Owners shall ensure the specific duties and equipment of designated personnel include:

(a) Lifeguards during periods of lifeguarding, guard users of the pool facility in areas assigned;

(b) Assistant lifeguards when provided at the pool used under the following conditions:

(i) Fifty percent or more of the persons assigned to guard on the deck are lifeguards;

(ii) Assistant lifeguards limited to guarding responsibility of areas four feet or less in depth; and

(iii) One or more lifeguards on duty trained at the equivalent of "lifeguard training" as recognized by the ARC or equivalent as recognized by the department.

(c) Attendants, when provided at pools not requiring lifeguards, oversee pool use by the bathers and provide supervision and elementary rescues such as reaching assists to bathers in need. This does not mean the person is qualified or trained to make swimming rescues;

(d) Qualified swimming coaches when substituting for lifeguards, guard swimming team at the pool facility in areas assigned;

(e) Water treatment operator oversees that the water treatment components are functioning adequately to protect public health, safety, and water quality;

(f) Notification of responsible persons on the conditions for facility use at pool facilities not requiring lifeguards, and for which no lifeguards or attendants are present. A responsible person means a person having responsibility for overseeing users seventeen years of age or under including, but not limited to a person:

(i) Renting an apartment, hotel, motel, RV camp site; or

(ii) Who is an owner or member of a condominium, homeowner's association, mobile home park, or private club with a pool facility.

(g) Lifeguards, assistant lifeguards, or attendants:

(i) Wearing a distinguishing suit, uniform, or emblem; and

(ii) Equipped with a whistle or a signaling device.

(5) **Personnel training.** Owners shall require training for each type of personnel including:

(a) Lifeguards shall maintain current certificates in the following:

(i) Standard first aid and adult, single rescue CPR through ARC or the American Heart Association; and

(ii) Advanced lifesaving, advanced lifesaving review, or lifeguard training through ARC; or

(iii) YMCA lifeguarding or crossover course through the YMCA; or

(iv) Lifeguard through the National Lifeguard Service, Canadian; or

(v) Lifeguard through the National Pool and Waterpark Lifeguard Training Course; or

(vi) Basic lifeguard through advanced lifeguard training international; or

(vii) Other training the department determines equivalent; and

(viii) Thirty-six months after enactment of the personnel training provisions of this chapter, the department will no longer recognize training for lifeguards in advanced lifesaving or advanced lifesaving review through the ARC.

(b) Assistant lifeguards shall maintain current certificates and meet the requirements in the following:

(i) Adult, single rescue CPR through ARC or the American Heart Association; and

(ii) Emergency water safety with ARC; or

(iii) Bronze medallion award through the Royal Lifesaving Society of Canada;

(iv) Shallow water lifeguard through the National Pool and Waterpark Lifeguard Training; or

(v) Other training the department determines equivalent; and

(vi) Be fourteen years of age or older.

(c) Swim coaches substituting for lifeguards with swim teams shall maintain current certificates through the following:

(i) Standard first aid and adult, single rescue CPR through ARC or the American Heart Association; and

(ii) Safety training for swim coaches through ARC; or

(iii) Other training the department determines equivalent.

(d) Attendant shall maintain current certificates and meet the requirements in the following:

(i) Adult, single rescue CPR through ARC or the American Heart Association; and

(ii) Basic water safety with ARC; or

(iii) Other training the department determines equivalent; and

(iv) Be sixteen years of age or older.

(e) Water treatment operator shall have specific knowledge in provision of pool water chemistry, filtration, pumping equipment, and rules and regulations pertaining to pool facilities;

(f) When pool facility is using chlorine gas, an operator shall have specific training as follows:

(i) Proper operation of the chlorination equipment and routine maintenance procedures;

(ii) Basic understanding of physical and chemical properties of chlorine gas under pressure;

(iii) Basic understanding on use of leak detection and emergency safety equipment;

(iv) Basic knowledge of proper first-aid procedures and response for accidental inhalation of chlorine gas;

(v) Six hours or more of formal instruction once every three years or three hours or more every eighteen months with certificate of training provided.

(g) Persons shall be exempt from having current CPR or standard first-aid certificates if the persons hold current certificates in any of the following:

(i) Community CPR in the place of adult, single rescue CPR;

(ii) In the place of standard first aid:

(A) Advanced first aid;

(B) First responder;

(C) Emergency medical technician; or

(D) Paramedic.

(iii) Other training the department recognizes as equivalent or exceeding current requirements.

(6) **Emergency response plan.** Owners shall ensure emergency response provisions as follows:

(a) In pool facilities where lifeguards, assistant lifeguards, or swim coaches are required:

(i) Sufficient qualified personnel, for example, lifeguards, assistant lifeguards, or swim coaches where appropriate, located to provide a response time not to exceed thirty seconds to all pool users;

(ii) Based on, but not limited to, the following:

(A) Pool depth;

(B) Line of sight;

(C) Bather load;

(D) Training procedures;

(E) Emergency procedures, and

(F) Lifeguard rotation.

(iii) Emergency response drills to meet the response time including:

(A) Drills two or more times each year;

(B) Testing documentation.

(iv) Where SCUBA or kayaking lessons are performed at the pool, personnel guarding these activities shall be provided special in-service training.

(b) In pool facilities where no lifeguards are provided:

(i) Posting and ongoing notification and enforcement of conditions for pool use. See subsection (3)(b) and (c) of this section;

(ii) Enforcement of conditions by owner and authorized personnel;

(iii) Emergency equipment specified under WAC 246-260-090(31), readily available during operating hours.

(c) Ongoing training and evaluation of the lifeguarding skills and/or assistant, coach, or attendant skills;

(d) In facilities where chlorine gas is used:

(i) Annual emergency drills;

(ii) Identification of the location of accessible chlorine cylinder repair kits.

(7) **Bather use.** Owners shall establish rules of conduct for facility users to ensure health and safety as follows:

(a) Signage noted under WAC 246-260-090(33);

(b) Facilities used for swimming instruction courses may allow diving into water depths recognized as adequate by the organization providing the certificates, for example ARC or YMCA, provided the divers are supervised by instructors.

(8) **Environmental conditions.** Owners shall monitor various environmental conditions affecting the facility or the

user and take appropriate action in response to these factors, including electrical storms, fog, wind, visibility problems, etc.

(9) **Closure.** Owners shall close the facility when the facility or portion thereof presents an unhealthful, unsafe, or unsanitary condition. These conditions include lack of compliance with the water quality or operation requirements as detailed under WAC 246-260-070 and 246-260-100.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-060, filed 3/12/90, effective 4/12/90; Regulation .98.060, effective 3/11/60.]

WAC 246-260-110 Spa pool design, construction, and equipment. (1) **Location.** Owners shall locate pools to:

(a) Minimize pollution by dust, smoke, soot, and other undesirable substances;

(b) Eliminate pollution from surrounding surface drainage; and

(c) Ensure pump house, trees, and other structure locations are fifteen feet or more away from the pool or provide barriers or other means to prevent ready access from any such structure. Structures shall not be construed to include:

(i) Building walkways above the second story or roofs of any building structure; or

(ii) Any barriers provided to prevent unauthorized pool access, for example, fencing.

(2) **Materials.** Owners shall use only structure and equipment materials which are nontoxic, durable, inert, impervious to water, and easily cleanable.

(3) **Walking surfaces.** Owners shall design and maintain walking surfaces:

(a) Uniformly sloping away from the pool or pools with a minimum of one-fourth inch per foot and a maximum of one-half inch per foot;

(b) Of a nonslip finish not presenting a tripping hazard;

(c) Equipped with sufficient drains to prevent standing water;

(d) Of easily cleanable impervious finishes;

(e) Providing a minimum unobstructed six feet by seven feet area adjacent to the pool;

(f) Continuous and four feet wide or more extending around the entire pool if perimeter is equal to or greater than forty feet;

(g) Forty inches or less below horizontal ledge of elevated pool. Elevated pools over twelve inches above deck level shall have a maximum ledge thickness of twelve inches, except in the area of stairs;

(h) Continuously extending, and four feet wide or more, around fifty percent or more of the pool, if the pool is over forty inches above the primary walkway; and

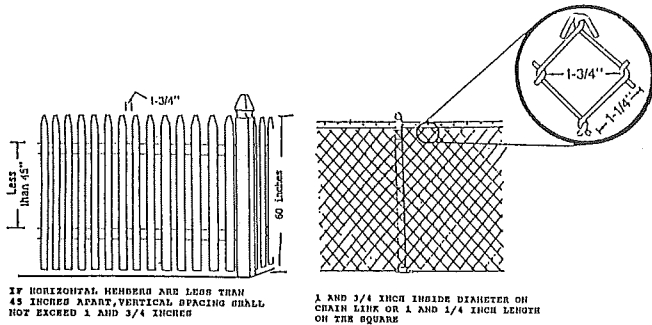
(i) In conformance with department-established guidelines for any resilient artificial surfaces.

(4) **Barriers.** Owners shall provide barrier protection to prevent unauthorized access.

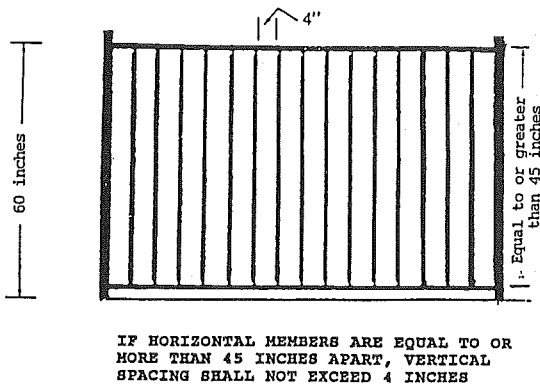
(a) A barrier shall be sixty inches or more in height and:

(i) Shall not allow passage of a four-inch diameter sphere;

(ii) If it has horizontal members that are spaced less than forty-five inches between the tops of the horizontal members, shall have spaces between the vertical members no greater than a width of one and three-quarter inches (see Figure 110.1); or



(iii) If it has horizontal members that are spaced at, or more than, forty-five inches between the tops of the horizontal members, shall have spaces between the vertical members no greater than a four-inch width (see Figure 110.2); and



(iv) Shall have lockable gates and entrances provided with a self-closing, self-latching mechanism fifty-four inches or more from the ground with a clear space fifty inches deep on the latch side of the door to position a wheelchair. When a latching mechanism is provided at any lower height, the latching mechanism shall be of a type remaining continuously locked, and only opening with the use of a key or other access control system.

(b) Restricted area service entrances shall be exempt from door or gate requirements providing no public access is available;

(c) Lifeguarded pools are not required to have a self-closing, self-latching gate during the period a pool is in use. Facility gates shall be closed and locked during nonuse periods; and

(d) An entrance to the pool area which shall not serve as a required exit from another part of a building when there is a conflict with other codes or regulations.

(5) **Spa pool structure.** Owners shall ensure general pool requirements include:

(a) Pool surfaces which are nontoxic, impervious, smooth, easily cleanable, and enduring. Pools one hundred square feet or more shall be a white or light color;

(b) A dimensional design providing for safety, circulation, and quality of the water including, but not be limited to:

(i) Surfaces not causing cutting, pinching, puncturing, entanglement, or an abrasion hazard under casual contact;

(ii) Construction tolerances conforming with current NSPI public spa standards;

(iii) Uniform floor slopes not exceeding one foot of drop in twelve feet of run sloped to drain;

(iv) A minimum height between the top of the pool rim and the ceiling shall be seven feet; and

(v) Maximum operational depth of four feet measured from the water line. Exceptions may be made for special purpose designed pools.

(c) Adequate means to routinely drain or otherwise remove water from the pool.

(6) **Spa pool appurtenances.** Owners shall ensure pools contain:

(a) Handholds around the pool perimeter two feet or more in depth. Handholds shall be four feet apart or less and consist of any one or a combination of the following:

(i) Coping, ledges, radius flanges, or decks along the immediate top edge of the pool or suitable slip-resisting handholds located twelve inches or less above the water line;

(ii) Ladders or steps; or

(iii) Secured rope or railing twelve inches or less above the water line.

(b) Stairs:

(i) Meeting the following construction requirements:

(A) Nonslip tread finishes;

(B) Contrasting color stair tread edges clearly visible to users;

(C) Handrails with the leading edge for stairs at pool entry/exit being neither eighteen inches or more beyond nor eight inches or more inside (horizontally) the vertical plane of the bottom riser;

(D) Less than or equal to twenty feet of any point within the spa measured at the wall at the point of entry;

(E) Riser treads with a minimum unobstructed, horizontal, ten-inch tread depth and a minimum two-hundred-forty-inch surface area;

(F) Riser heights on spa pools over forty feet in perimeter, uniform and seven and one-half inches or less, except the bottom riser may be less than uniform height; and

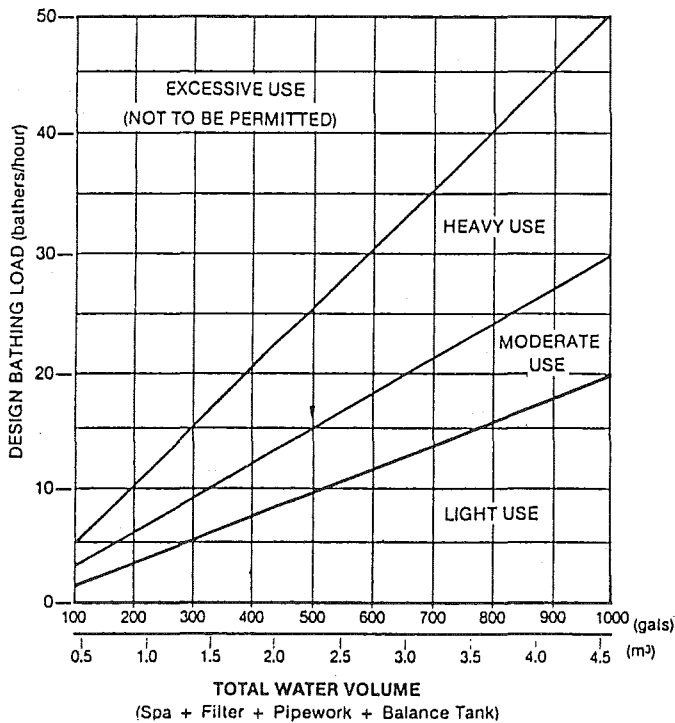
(G) Riser heights on spa pools of forty feet or less in perimeter, uniform and have a preferred seven and one-half inch height, but not greater than ten inches, except the bottom riser may be less than uniform height.

(7) **Spa pool bather design capacity and load.** Owners shall design and control the pool use to not exceed a maximum bather capacity and load as designated below:

(a) The maximum bather capacity is one person per four square feet. Maximum bather capacity is the maximum number of bathers at any one time; and

(b) Bather loads are designated in terms of three different loading conditions: Light, moderate, and heavy use as shown under Graph 040.1. Maximum bather load is the maximum number of bathers in a one-hour period. Interpret a single bather use to mean a bather using the pool for a fifteen minute duration. For pools with volumes greater than noted on the graph, loadings shall be based on the continued slope of the line above each use category.

GRAPH 110.3 SPA DESIGN FOR BATHER LOAD AND TURNOVER



(8) **Turnover.** Owners shall ensure pools turn over entire pool water volume at rates in accordance with designated bather load as determined from Graph 110.3 noted in subsection (7) of this section.

(a) Minimum turnover time for treatment recirculation shall be:

- (i) For light use pool facilities, thirty minutes;
- (ii) For moderate use pool facilities, twenty minutes;
- (iii) For heavy use pool facilities, ten minutes.

(b) Exceptions to recirculation requirements may be made for flow-through pools in the following conditions:

(i) Where water supply is sufficient to provide the same turnover period specified for recirculation pools;

(ii) The source water supply meets the quality requirements and is subject to a disinfection method outlined under WAC 246-260-070(3);

(iii) The introduction of fresh treated pool water is accomplished by the same type of inlet and outlet design required for recirculation pools; and

(iv) The pool water quality complies with WAC 246-260-070.

(9) **Inlets.** Owners shall provide pool inlets:

(a) Submerged and located to produce uniform water and chemical circulation throughout the pool;

(b) Located on the bottom of pools ten thousand gallons or more, unless otherwise justified by the design engineer to either the department's or local health officer's satisfaction.

(10) **Outlets.** Owners shall provide pool outlets with:

(a) Overflow and main drain grating systems each designed to carry one hundred percent of the total recirculation filter flow, and main drain piping designed to carry fifty percent or more of the total recirculation filter flow;

(b) Overflow outlets maintaining:

(i) A minimum of sixty percent of filter recirculation flow at all times; and

(ii) An overflow channel which may be used on any pool and required on pools ten thousand gallons or more on the pool perimeter to promote uniform circulation and skimming action of the upper water layer with:

(A) A design preventing all matter entering the channel from returning to the pool;

(B) Dimensions minimizing bather hazards, such as catching arms or feet;

(C) One one-hundredth of a foot slope per foot or more;

(D) Drains sufficiently spaced and sized to collect and remove overflow water to return line and filter, where applicable; and

(E) Size sufficient to prevent flooded suction conditions on the overflow system and to properly drain water away from the pool. Displacement shall be computed at twenty gallons per bather. Balancing tanks use is optional dependent on the overflow channel volume and design.

(iii) Skimmers in lieu of pool overflow channels up to ten thousand gallons if:

(A) Weir provided in skimmer has a maximum flow rate through skimmer not exceeding four gpm per inch of weir;

(B) Devices are recessed in the pool wall so no part protrudes beyond the plane of the wall into the pool;

(C) The skimmer is equipped with a device to prevent air lock in the recirculation suction line, such as, an equalizer line;

(D) The skimmer is equipped with a removable and cleanable screen designed to trap large solids;

(E) Automatically adjustable and operates freely with continuous skimming action to continue through all loading rates as the skimmer is designed. Displacement shall be computed at twenty gallons per bather.

(c) Main drains in all pools with:

(i) Location of one main drain or more at the lowest point of the pool floor, or means to readily drain the entire pool water readily available;

(ii) A minimum of two main drains with equivalent recirculation capacity and net surface open area; or on spa pools with fifteen hundred gallon volume or less, a large single main drain twelve inches square or more in surface area;

(iii) A design to aid in hair entrapment prevention when main drains are on vertical walls;

(iv) Total open area of grates sized to prevent a suction or entrapment hazard dangerous to user;

(v) Grates on drains with a:

(A) Maximum flow of one and one-half feet per second; or

(B) Net outlet area four times or more the area of the discharge pipe;

(vi) Openings not allowing a sphere over one-half inch in diameter to pass;

(vii) Grates designed to withstand forces of users;

(viii) Grates removable only with specific tools; and

(ix) Means to control flow from recirculation pump or balancing tank.

(11) **Flow.** Owners shall maintain pool recirculation flow not to exceed:

(a) Six feet per second in the valved suction or discharge side of the pump; and

(b) Ten feet per second in open discharge pipes on the pressure side of the pump or filter discharge. The recirculation flow limit does not apply to the return inlet and the last two feet of pipe leading to the inlet.

(c) The recirculation piping of the spa pool shall not inter-mix back with any companion swimming pool water.

(12) **Pumps.** Owners shall have and maintain recirculation pumps with adequate capacity to:

(a) Provide design flows and pressure for water recirculation over the entire operating filter pressure;

(b) Allow proper backwashing of filters when specified;

(c) Have self-priming capability when installed above the pool water level; and

(d) Ensure the recirculation pump system shall have a separate water treatment pump than that used for hydrotherapy spa action, unless automatic flow control valving is provided to limit filter flow to required design.

(13) **Strainers.** Where pumps precede the filter, owners shall equip pool recirculation facilities with hair and lint strainers which shall:

(a) Be located upstream of recirculation pumps;

(b) Provide strainer screen sufficiently strong to prevent collapse when clogged;

(c) Have an operable cover; and

(d) Provide valving to isolate the strainer when located below pool water level.

(14) **Valves.** Owners shall provide valves at appropriate locations to allow equipment isolation and maintenance.

(15) **Equipment rooms.** Owners shall provide equipment rooms for a spa pool with:

(a) Ten thousand gallons or more in water volume or for spa pools provided adjacent to a swimming pool at the same facility with:

(i) Enclosed pumps, disinfection equipment, filters, and other electrical and mechanical feed equipment and associated chemicals. Storage of chemicals shall conform to manufacturer requirements;

(ii) Working space and access to perform routine operation;

(iii) A forty-six-square-foot minimum floor area and provides a three-foot minimum access area to service equipment;

(iv) One floor drain or more and a floor slope to the drain at a one-fourth-inch-per-foot minimum;

(v) If below grade, ready access;

(vi) Ventilation;

(vii) Twenty foot candles or more of light measured thirty inches from the floor; and

(viii) Kept locked.

(b) Less than ten thousand gallons in water volume or for spa pools not provided at the same facility as a swimming pool complying with subsection (15)(a)(i), (ii), (v), and (viii) of this section.

(16) **Make-up water.** Owners shall ensure a source of make-up water and associated piping at the pool:

(a) Providing sufficient quantity to replace daily pool water losses;

(b) Coming from a supply conforming with chapter 246-290 WAC;

(c) Preventing cross connections using a minimum air gap of two pipe diameters or approved backflow prevention

devices between the make-up water source and the pool water or waste water; and

(d) If using a pool fill spout, not projecting greater than one inch into the space above the water surface area and shielded to not create a deck hazard.

(17) **Filters.** Owners shall equip pools with filtration equipment:

(a) Meeting the applicable NSF standards or equivalent;

(b) Using acceptable type and filter rates described under Table 040.2 of this section;

(c) Having pressure or vacuum gauges for measuring loss of head through the filter with a minimum of one gauge preceding and one gauge following the filter;

(d) Having a rate of flow indicator to measure a flow with accuracy, repeatability, and durability equivalent to flow meters meeting NSF standards; and

(e) Having means of discharging filter backwash to waste with:

(i) Discharge in a manner not creating a public nuisance;

(ii) Disposal in accordance with applicable local laws or regulations;

(iii) Minimum air gap of two pipe diameters to prevent cross-connection from waste discharge and recirculation system piping;

(iv) Discharge receptor and sufficient size piping to accept backwash water and to prevent flooding; and

(v) Ability to monitor filter effluent during backwash, that is, use of sight glass.

(f) Providing means to release air entering the filter tank on pressure filters;

(g) When cartridge filters are used:

(i) Provide with an extra set of cartridges; and

(ii) Have any bypass valves in a permanently closed position.

(h) When using pressure DE filters with separation tanks:

(i) Providing a means of air release or a lid providing a slow and safe release of pressure; and

(ii) Showing a readily visible user warning that the air release must be opened before starting the circulation pump.

TABLE 110.4

SPA POOL FILTER RATE APPLICATION RATES

Type of Filter Media	Rates in gpm/Square Feet		
	Minimum	Maximum	
Sand	Minimum	Maximum	
	Rapid Sand or Pressure Sand	—	3
High Rate Sand Pressure or Vacuum	10	15	
	Continuous Feed	Manual Feed	
DE	Pressure	0.8	1.0
	Vacuum	1.0	1.35
Cartridge*			.375

NOTE:

*Cartridge filters shall have a nominal micron rating of twenty microns or less.

(18) **Disinfection equipment.** Owners shall provide disinfection equipment:

- (a) Providing a continuous and effective disinfectant residual in the water;
- (b) Using a disinfectant with an easily monitored residual;
- (c) Having a design feed rate providing effective disinfection levels when the pool is in peak demand conditions;
- (d) Having easily cleanable equipment and piping used to apply chemicals and with provisions to prevent undue clogging. All materials shall be resistant to action of chemicals used;
- (e) Conforming to NSF standards if the disinfection equipment contains:
 - (i) Adjustable output rate chemical feed equipment for liquid solutions. The equipment shall:
 - (A) Feed under positive pressure in the recirculation system;
 - (B) Provide means for dosage adjustment;
 - (C) Have provisions to prevent hypochlorite solution siphoning when equipment is turned off. This applies when the disinfection equipment is above pool water level.
 - (ii) Flow through chemical feed for solid feed materials. Solid tablets or granules shall not be placed in skimmer baskets accessible to the public.
 - (f) Allowing hand feeding on an emergency basis only;
 - (g) Meeting the following conditions when using chlorine gas:
 - (i) Chlorine rooms shall:
 - (A) Be above ground level;
 - (B) Be constructed so all openings or partitions with adjoining rooms are sealed;
 - (C) Be located with consideration of prevailing winds to dissipate leaked chlorine away from the pool facility;
 - (D) Have door opening outward only and to the out-of-doors; and
 - (E) Provide a sign on the door exterior reading DANGER CHLORINE. The sign shall be large enough to be read twenty-five feet away.
 - (ii) Chlorine rooms shall have mechanical exhausting ventilation including:
 - (A) Air inlet located as far as possible from fan intake to promote good air circulation patterns;
 - (B) Minimum of one air change per minute in the chlorine room when fan is operating;
 - (C) A remote switch outside the room or a door-activated switch to turn on fan before entering;
 - (D) Suction for fan near the floor;
 - (E) Exhaust for fan and chlorinator vent located to prevent contaminating air intake and prevent undue hazard for pool facility users; and
 - (F) Screened chlorinator vent.
 - (iii) Gas chlorine systems shall:
 - (A) Be vacuum injection type, with vacuum actuated cylinder regulators;
 - (B) Provide integral backflow and anti-siphon protection at the injector;
 - (C) Provide taring (net weight of cylinder gas) scales to determine chlorine weight.
 - (iv) Breathing protection available in an accessible area for the operator outside of the chlorine room including:
 - (A) Self-contained breathing apparatus designed for use in a chlorine atmosphere for working with chlorine leaks and

maintained in accordance with department of labor and industries standards; or

(B) Provisions to substitute breathing protection at the site, if procedures can be established and documented with emergency service fire districts or other approved organization within the area for promptly responding to chlorine leaks.

(v) Means for automatic shutoff when pool flow is interrupted;

(vi) Chlorine gas cylinders shall:

(A) Be stored only in chlorine rooms;

(B) Have approved valve-stem cylinder wrench on the valve stem to shut the system down in an emergency event;

(C) Be properly secured to prevent tipping;

(D) Be tagged to indicate cylinders are empty or full; and

(E) Not exceed one hundred fifty pounds tare weight per cylinder. If one-ton cylinder use is desired, an engineer specializing in chlorine design shall prepare a design proposal for department consideration.

(19) **Chemical feeding equipment for pH control.** Owners applying chemicals for controlling pH through chemical feed equipment shall provide equipment with:

(a) Adequate size and design to allow routine cleaning and maintenance;

(b) Materials resistant to chemical action;

(c) Means for automatic shut off when pool flow is interrupted;

(d) Chemical feed equipment for pH control on pools ten thousand gallons or greater;

(e) Any pool feeding with:

(i) Caustic soda (NaOH);

(ii) Carbon dioxide (CO₂); or

(iii) Other chemicals the department determines necessary to require metered and controlled feeding.

(20) **Heaters.** Where pool heating equipment is provided, owners shall:

(a) Locate equipment so any standing pilot is readily accessible;

(b) Install equipment per NEC and UMC.

(21) **Ventilation.** Owners shall provide indoor pool facility ventilation conforming with ASHRAE pool facility standards.

(22) **Testing equipment.** Owners shall use testing equipment as noted in the water quality section under WAC 246-260-070(6).

(23) **Chemical storage.** Owners shall ensure chemical storage design and placement minimizes safety risks.

(24) **Restroom and plumbing fixtures.** Owners shall provide restrooms and plumbing facilities at pools as follows:

(a) In the spa pool facilities provided in conjunction with general use and limited use swimming pools, wading pools, or other water recreation facilities, the spa pool bathing load shall be added to the total load for consideration of plumbing fixture units;

(b) If a spa pool is the sole water recreation facility at a site, plumbing fixtures, as noted under Table 110.5, including:

(i) Flush toilets and toilet tissue in dispensers;

(ii) Shower facilities that:

- (A) Deliver water at a temperature range of ninety to one hundred ten degrees Fahrenheit; and
- (B) Provide single service soap in nonglass dispensers.
- (iii) Sinks provided with:
 - (A) Tempered or hot and cold running water;
 - (B) Single service soap in nonglass dispensers; and
 - (C) Single service towels or electric hand dryer.
- (iv) Hose bibs with vacuum breakers conveniently accessible to pool and within one hundred feet; and
- (v) Sewage disposed in a manner approved by the department or local health officer.
- (c) If owners limit the number of people within their facility to a certain number and post maximum occupancy loading, the number of plumbing fixtures may be based on the maximum occupancy.

TABLE 110.5

PLUMBING FIXTURE MINIMUM REQUIREMENTS FOR SOLE FACILITY SPA POOLS

Spa Pools With:	Minimum Number of Fixture Units				
	Toilet	Shower	Sink	Dress- ing Room	Hose Bib
1. Limited spa use with living units* within 100 feet and less than 3 stories	-	-	-	-	1
2. Limited spa use with living units > 100 ft. and < 500 ft. and < three stories**	1	-	1	-	1
3. Limited spa use with living units > 500 ft. and < 1/4 mi. and/or > three stories**	1(M) 1(F)	1(M) 1(F)	1(M) 1(F)	-	1
4. Limited spa use with living units > 1/4 mile or general use spa pool***	1(M) 1(F)	1(M) 1(F)	1(M) 1(F)	1(M) 1(F)	1

NOTE:

*"Living unit" means all the units the facility serves.

**Consideration for elevators adjacent to pool may allow variance from this requirement.

***When bathing load exceeds 40 of either sex, the fixture units provided shall conform to general use requirements for swimming pools.

(25) **Lighting.** Owners shall design and maintain pool facility lighting to:

- (a) Illuminate indoor facilities, outdoor facilities used after dusk, and locker room facilities with a minimum lighting intensity maintained thirty inches above any walking surface, pool deck, or pool area of:
 - (i) Thirty foot candles at indoor facilities;
 - (ii) Fifteen foot candles at outdoor facilities; and
 - (iii) Twenty foot candles in locker rooms.
- (b) Allow lifeguards or attendants to clearly see pool areas and walking surfaces;
- (c) Meet any additional lighting requirements deemed necessary by the department or local health officer;
- (d) Provide protective shielding for all lighting fixtures above walking surfaces and pool areas; and

(e) Provide all indoor facilities with one or more pool-area emergency lights designed to turn on in the event of a power failure. The emergency lighting shall conform to requirements of UL standard 924.

(26) **Emergency equipment.** Owners shall provide first aid and emergency equipment readily available during operating hours as follows:

- (a) Spa pool facilities ten thousand gallons or more or used in conjunction with a general use swimming pool:
 - (i) A telephone within the facility with a prominently displayed list of emergency medical service response numbers;
 - (ii) Sufficient and suitable area provided to accommodate persons within the facility requiring first aid treatment and necessary first aid equipment;
 - (iii) A standard sixteen unit first aid kit;
 - (iv) Two or more blankets reserved for emergency use;
 - (v) A clearly marked emergency shut off switch for shutting off all pumps, accessible to the public within twenty feet of the pool. Spa pool facilities shall also provide an audible alarm with the emergency shut off switch; and
 - (vi) Heater thermostat switches shall be inaccessible to bathers.
- (b) Spa facilities containing less than ten thousand gallons:
 - (i) During the period the facility is open for use, one of the following is required:
 - (A) Telephone within one minute access;
 - (B) Alternate means of reaching emergency medical service response numbers; or
 - (C) Provision of an audible emergency alarm to alert others at the area of need to respond.
 - (ii) Comply with subsections (26)(a)(iii), (iv), (v), and (vi) of this section.
- (27) **Signs.** Owners shall provide signs at pools which must convey the following conditions, but may be conveyed by any combination of words, pictures, or symbols:
 - (a) Prohibition of running or horseplay;
 - (b) Prohibition of use by persons with communicable diseases;
 - (c) Prohibition of use by persons under the influence of alcohol or drugs;
 - (d) Requirement for a cleansing shower before pool entry;
 - (e) Caution that persons suffering from heart disease, diabetes, or high blood pressure should consult a physician before spa pool use;
 - (f) Caution for women who are or may be pregnant to seek the advice of a physician regarding spa use and to limit the women's time in the pool;
 - (g) Persons should limit the stay in the pool to fifteen minutes at any one session;
 - (h) All children twelve years of age or under shall be accompanied by a responsible adult observer. No child six years of age or under should use the pool;
 - (i) No person seventeen years of age or under shall use the pool alone;
 - (j) Maximum bathing capacity of pool shall be posted;
 - (k) Prohibition of food or drink in the pool water;
 - (l) In pools where lifeguards or attendants are not present, post requirements for facility use as described under WAC 246-260-120(3); and

(m) Location of the nearest telephone or emergency notification procedure.

(28) **Food service.** When owners allow or make provisions for food service:

(a) At general use pool facilities, ensure food and beverage sale and consumption areas are separated from pool and deck. Special provisions may allow food and beverage service on the walkway provided a minimum six feet clear area is maintained between the pool and any tables or chairs provided for food service for special facility functions;

(b) At limited use spa pool facilities, prohibit food and beverage in the pool water and maintain a minimum four foot clear area between pool edge and any tables and chairs provided for food service;

(c) At general use pool facilities, prohibit alcoholic beverages;

(d) At limited use pool facilities, when alcohol is sold within the pool facility, provide an attendant at the pool area;

(e) Provide trash containers; and

(f) Prohibit glass containers in the pool facilities.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-110, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-040, filed 3/12/90, effective 4/12/90; Regulation .98.040, effective 3/11/60.]

WAC 246-260-120 Operation of spa pool facilities.

(1) **Operation plan.** Owners shall ensure proper operation to protect the public health, safety, and water quality by establishing practices and developing an operations manual addressing each of the following:

(a) Physical pool facility components;

(b) Personnel;

(c) Users and spectators; and

(d) Environmental conditions.

(2) **Physical components.** Owners shall provide routine checks of the physical components:

(a) Ensuring all structural facilities which the users come in contact are intact and free from undue wear or fatigue and replaced as needed;

(b) Eliminating adverse affects of water ponding on walking surfaces;

(c) Ensuring preventive maintenance on equipment essential for protection of the public health, safety, and water quality;

(d) Ensuring any necessary emergency equipment is available and in good repair;

(e) Having means for routine oxidation of spa pool water provided after heavy use, for example, super chlorination;

(f) Maintaining barrier protection;

(g) Ensuring common articles such as towels, bathing suits, bathing caps, etc., for patron use shall be sanitized before re-use if provided for patrons; and

(h) Ensuring a continuous twenty-four-hour-a-day treatment and turnover during periods of use not exceeding:

(i) Thirty minutes in lightly loaded spas; or

(ii) Twenty minutes in moderately loaded spas; or

(iii) Ten minutes in heavily loaded spas.

(iv) Turnover rates designated in subsection (2) of this section, except allowance shall be made for minor equipment

maintenance and existing pools with turnover rates varying from this section may continue to operate if water quality conditions conform with WAC 246-260-070.

(3) **Required personnel.** Owners shall ensure appropriate personnel at pool facilities as follows:

(a) A lifeguard or attendant. If no lifeguard or attendant is present, pool facility use shall be subject to the following conditions:

(i) When pool is used by children twelve years of age or under, a responsible adult eighteen years of age or older shall accompany the children and be at the pool or the pool deck at all times the children use the facility;

(ii) When used by persons seventeen years of age or under, a minimum of two people at the pool facility at all times the pool is in use;

(iii) At general use pools, subdivision (a)(i) and (ii) of this subsection be posted; and

(iv) At limited use pools, subdivision (a)(i) and (ii) of this subsection be posted and ongoing provisions notifying the responsible person of the conditions.

(b) A water treatment operator.

(4) **Personnel duties and equipment.** Owners shall ensure the specific duties and equipment of designated personnel include:

(a) Lifeguards, during periods of lifeguarding, guard users of the pool facility in areas assigned;

(b) Assistant lifeguards when provided at the pool used under the following conditions:

(i) Assistant lifeguard limited to guarding responsibility of areas four feet or less in depth; and

(ii) A lifeguard overseeing the activities of the assistant lifeguard;

(c) Attendants, when provided, at pools not requiring lifeguards oversee use of the pool by bathers and provide supervision and elementary rescues such as reaching assists to bathers in need;

(d) Water treatment operator oversees that the water treatment components are adequately functioning to protect public health, safety, and water quality;

(e) Notification of responsible persons on the conditions for facility use at pool facilities not requiring lifeguards, and where no lifeguards or attendants are present. A responsible person means a person having responsibility for overseeing users seventeen years of age or under, including but not limited to a person:

(i) Renting an apartment, hotel, motel, RV camp site; or

(ii) Who is an owner or member of a condominium, home owner's association, mobile home park, or private club with a pool facility.

(f) Lifeguards, assistant lifeguards, or attendants:

(i) Wear distinguishing suit, uniform, or emblem; and

(ii) Equipped with a whistle or a signaling device.

(5) **Personnel training.** Owners shall require training for each type of personnel including:

(a) Lifeguards shall maintain current certificates in the following:

(i) Standard first aid and adult, single rescue CPR through ARC or American Heart Association; and

(ii) Advanced lifesaving, advanced lifesaving review, or lifeguard training through ARC; or

(iii) YMCA lifeguarding or crossover course through the YMCA; or

(iv) Lifeguard through the National Lifeguard Service, Canada; or

(v) Lifeguard through the National Pool and Waterpark Lifeguard Training; or

(vi) Basic lifeguard through advanced lifeguard training international; or

(vii) Other training the department determines equivalent; and

(viii) Thirty-six months after enactment of personnel training provisions of this chapter, the department shall no longer recognize training for lifeguards in advanced lifesaving or advanced lifesaving review through the ARC.

(b) Assistant lifeguards shall maintain current certificates and meet the requirements in the following:

(i) Adult, single rescue CPR through ARC or American Heart Association; and

(ii) Emergency water safety with ARC; or

(iii) Bronze medallion award through the Royal Lifesaving Society of Canada; or

(iv) Shallow water lifeguard through the National Pool and Waterpark Lifeguard Training; or

(v) Other training the department determines equivalent; and

(vi) Be fourteen years of age or older.

(c) Attendant shall maintain current certificates and meet the requirements in the following:

(i) Adult, single rescue CPR through ARC or American Heart Association; and

(ii) Basic water safety with ARC; or

(iii) Lifesaver with YMCA; or

(iv) Bronze medallion award through the Royal Lifesaving Society of Canada; or

(v) Other training the department determines equivalent; and

(vi) Be sixteen years of age or older.

(d) Water treatment operator shall have specific knowledge in the provision of pool water chemistry, filtration, pumping equipment, and rules and regulations pertaining to pool facilities;

(e) When the pool facility is using chlorine gas, an operator shall have specific training as follows:

(i) Proper operation of the chlorination equipment and routine maintenance procedures;

(ii) Basic understanding of physical and chemical properties of chlorine gas under pressure;

(iii) Basic understanding on use of leak detection and emergency safety equipment;

(iv) Basic knowledge of proper first aid procedures and response for accidental chlorine gas inhalation; and

(v) Six hours or more of formal instruction once every three years or three hours or more every eighteen months with certificate of training provided.

(f) Persons shall be exempt from having a current CPR or standard first aid certificate if the person holds a current certificate in any of the following:

(i) Community CPR, in place of adult, single rescue CPR;

(ii) In place of standard first aid:

(A) Advanced first aid;

(B) First responder;

(C) Emergency medical technician; or

(D) Paramedic.

(iii) Other training the department recognizes as equivalent or exceeding current requirements.

(6) **Emergency response plan.** Owners shall ensure emergency response provisions as follows:

(a) In pool facilities where lifeguards or assistant lifeguards are provided:

(i) Lifeguard, or assistant lifeguard where provided, is located to provide a response time not to exceed thirty seconds to all pool users;

(ii) Based on, but not limited to, the following:

(A) Pool depth;

(B) Line of sight;

(C) Bather load;

(D) Training procedures;

(E) Emergency procedures; and

(F) Lifeguard rotation.

(iii) Emergency response drills to meet the response time including:

(A) Drills two or more times each year;

(B) Testing documentation.

(b) In pool facilities where no lifeguard or assistant is provided:

(i) Posting and ongoing notification and enforcement of conditions of pool use described under subsection (3) of this section;

(ii) Enforcement of conditions by owner and authorized personnel;

(iii) Emergency equipment specified under WAC 246-260-110(26) readily available during operating hours.

(c) In pool facilities where chlorine gas is used:

(i) Annual emergency drills; and

(ii) Identification of the location of accessible chlorine cylinder repair kits.

(7) **Bather use.** Owners shall establish rules of conduct for facility users to ensure health and safety. The rules shall include signage noted under WAC 246-260-110(27) of this chapter.

(8) **Environmental conditions.** Owners shall monitor various environmental conditions affecting the facility or the user and take appropriate action in response to these factors, including electrical storms, fog, wind, visibility problems, etc.

(9) **Closure.** Owners shall close the facility when the facility or portion thereof presents an unhealthful, unsafe, or unsanitary condition. These conditions would include lack of compliance with the water quality or operation requirements as detailed under WAC 246-260-070 and 246-260-120.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-120, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-045, filed 3/12/90, effective 4/12/90.]

WAC 246-260-130 Wading pool design, construction, and equipment. (1) **Location.** Owners shall locate pools to:

(a) Minimize pollution by dust, smoke, soot, and other undesirable substances;

(b) Eliminate pollution from surrounding surface drainage; and

(c) Ensure pump house, trees, and other structures are located fifteen feet or more from the pool or provide barriers or other means to prevent ready access from the structures. Structure shall not be construed to include:

(i) Building walkways above the second story or roofs of any building structure; or

(ii) Any barriers provided to prevent unauthorized pool access, for example, fencing.

(2) **Materials.** Owners shall use only structure and equipment materials which are nontoxic, durable, inert, impervious to water, and easily cleanable.

(3) **Walking surfaces.** Owners shall design and maintain pool walking surfaces:

(a) Uniformly sloping away from the pool or pools a minimum of one-fourth inch per foot and a maximum of one-half inch per foot;

(b) Of a nonslip finish not presenting a tripping hazard;

(c) Equipped with sufficient drains to prevent standing water;

(d) Of easily cleanable, impervious finishes;

(e) Four feet or more in width;

(f) At facilities with swimming pools fifteen hundred square feet or more associated with the wading pool, provide a minimum of sixteen square feet per bather; and

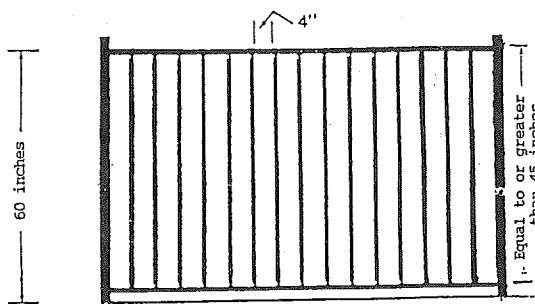
(g) In conformance with department-established guidelines for any resilient artificial surface.

(4) **Barriers.** Owners shall provide barrier protection to prevent unauthorized access.

(a) A barrier shall be sixty inches or more in height and:

(i) Shall not allow passage of a four-inch diameter sphere;

(ii) If it has horizontal members that are spaced less than forty-five inches between the tops of the horizontal members, shall have spaces between the vertical members no greater than a width of one and three-quarter inches (see Figure 130.1); or



IF HORIZONTAL MEMBERS ARE EQUAL TO OR MORE THAN 45 INCHES APART, VERTICAL SPACING SHALL NOT EXCEED 4 INCHES

(iv) Shall have lockable gates and entrances provided with a self-closing, self-latching mechanism fifty-four inches or more from the ground with a clear space fifty inches deep on the latch side of the door to position a wheelchair. When a latching mechanism is provided at any lower height, the latching mechanism shall be of a type remaining continuously locked, and only opening with the use of a key or other access control system.

(b) Restricted area service entrances shall be exempt from door or gate requirements providing no public access is available;

(c) Lifeguarded pools are not required to have a self-closing, self-latching gate during the period a pool is in use. Facility gates shall be closed and locked during nonuse periods; and

(d) An entrance to the pool area which shall not serve as a required exit from another part of a building when there is a conflict with other codes or regulations.

(5) **Pool surfaces.** Owners shall ensure pool surfaces with:

(a) Materials complying with subsection (2) of this section;

(b) Watertight and nonabrasive construction;

(c) White or light color finish not obscuring the view of objects or surfaces;

(d) Surfaces not causing cutting, pinching, puncturing, entanglement, or abrasion hazard under casual contact; and

(e) Construction tolerances conforming with current NSPI public pool standards.

(6) **Wading pool floor and wall dimensional design.** Owners shall ensure pool dimensional designs for floors and walls provide for safety, circulation, and water quality including, but not limited to:

(a) All corners formed by intersection of walls with floor shall be coved;

(b) Uniform pool floor slopes not exceeding one foot of drop in twelve feet of run.

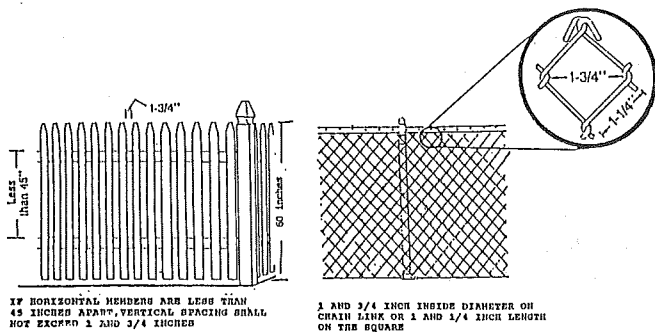
(7) **Wading pool entry and exit.** Owners shall provide means of entry and exit on all pools including one of the following:

(a) Stairs when provided meeting the following construction requirements:

(i) Nonslip tread finish;

(ii) Contrasting color stair tread edges clearly visible to users;

(iii) Handrails with the leading edge for stairs at entry/exit being neither eighteen inches or more beyond nor eight



(iii) If it has horizontal members that are spaced at, or more than, forty-five inches between the tops of the horizontal members, shall have spaces between the vertical members no greater than a four-inch width (see Figure 130.2); and

inches or more inside (horizontally) the vertical plane of the bottom riser;

(iv) Riser treads with a minimum unobstructed, horizontal, ten-inch tread depth and minimum two-hundred-forty-inch surface area;

(v) Riser height uniform and seven and one-half inches or less, except last step leading into pool may be less than uniform height.

(b) Shallow pool entry seven and one-half inches or less in depth;

(c) Ramp entry into the pool meeting the following construction requirements:

(i) Handrail extending over the deck edge and extending to the bottom of the ramp for entering and leaving the wading pool;

(ii) Ramp edges protruding into the pool of contrasting color;

(iii) Ramp slope not to exceed one foot in seven feet.

(d) Designs permitting entry and exit for impaired or handicapped persons are encouraged.

(8) **Turnover.** Owners shall ensure pools turn over entire pool water volume in three hours or less and:

(a) Where wading pools are recirculated jointly with swimming pools, means to ensure efficient turnover and treatment are maintained;

(b) Exceptions to recirculation requirements may be made for flow-through pools in the following conditions:

(i) Where water supply is sufficient to provide the same turnover period specified for recirculation pools;

(ii) The water supply source meets the quality requirements and is subject to a disinfection method as outlined under WAC 246-260-070(3);

(iii) The introduction of fresh treated pool water is accomplished by the same type of inlet and outlet design required for recirculation pools; and

(iv) The pool water quality complies with WAC 246-260-070.

(9) **Pool depth markings.** Owners shall provide depth markings:

(a) Plainly marking the water depth in feet on the horizontal surface of the coping or deck edge;

(b) Located on the coping or deck within eighteen inches of the water edge and positioned to be read while standing on the deck facing the water;

(c) Which are slip resistant;

(d) Placed at the maximum and minimum water depths;

(e) Spaced at intervals not exceeding twenty-five feet;

(f) Uniformly arranged on both sides and ends of the pool; and

(g) With a four-inch minimum height.

(10) **Bather load.** Owners shall ensure maximum number of bathers permitted in the wading pool facility at any one time not exceed one bather per seven square feet.

(11) **Inlets.** Owners shall provide pool inlets:

(a) Submerged and located to produce uniform water and chemical circulation throughout the pool; and

(b) Located on the bottom of pools twenty-five hundred square feet or more, unless otherwise justified by the design engineer to the department's or local health officer's satisfaction.

(12) **Outlets.** Owners shall provide pool outlets with:

(a) Overflow and main drain grating systems each designed to carry one hundred percent of the total recirculation filter flow and main drain piping designed to carry fifty percent or more of total recirculation filter flow;

(b) Overflow outlets that maintain:

(i) A minimum of sixty percent of filter recirculation flow at all times; and

(ii) An overflow channel which may be used on any pool and required on pools twenty-five hundred square feet or more on the pool perimeter to promote uniform circulation and skimming action of the upper water layer with:

(A) A design preventing all matter entering the channel from returning to the pool;

(B) Dimensions minimizing the hazard for bathers, such as catching arms or feet;

(C) One one-hundredth of a foot slope per foot or more;

(D) Drains sufficiently spaced and sized to collect and remove overflow water to return line and filter, where applicable; and

(E) Size sufficient to carry one hundred percent of the recirculation flow plus the surge flow equivalent to one-fifth of the balancing tank expressed in gallons per minute.

(iii) Skimmers in lieu of pool overflow channels up to twenty-five hundred square feet if:

(A) Weir provided in skimmer has a maximum flow rate through skimmer not exceeding four gpm per inch of weir;

(B) Devices are recessed in the pool wall so no part protrudes beyond the plane of the wall into the pool;

(C) The skimmer is equipped with a device to prevent air lock in the recirculation suction line, such as, an equalizer line;

(D) The skimmer is equipped with a removable and cleanable screen designed to trap large solids;

(E) Automatically adjustable and operates freely through all designed loading rates. Displacement shall be computed at ten gallons per bather.

(c) Main drains in all pools with:

(i) Location at the pool's low points;

(ii) A minimum of two main drains spaced:

(A) Twenty feet or less apart nor closer than six feet; or
(B) As far as possible from each other in pools seven feet or less linear floor distance.

(iii) Total open area of grates sized to prevent a suction or entrapment hazard dangerous to user;

(iv) Grates on drains with:

(A) Maximum flow of one and one-half feet per second; or

(B) Net outlet area four times or more the area of the discharge pipe.

(v) Openings not allowing a sphere over one-half inch in diameter to pass;

(vi) Grates designed to withstand forces of users;

(vii) Grates removable only with specific tool; and

(viii) Means to control flow from recirculation pump or balancing tank.

(13) **Flow.** Owners shall maintain pool recirculation flow not to exceed:

(a) Six feet per second in valved suction or discharge side of the pump; and

(b) Ten feet per second in open discharge pipes on the pressure side of the pump or filter discharge. The recircula-

tion flow limit does not apply to the return inlet and the last two feet of pipe leading to the inlet.

(14) **Balancing tanks.** Owners with overflow channels requiring balancing tanks shall:

(a) Maintain volume equivalent to seven times maximum bathing load expressed in gallons; and

(b) Increase capacity as necessary to provide volume for make-up water and to prevent air lock in the pump suction line.

(15) **Pumps.** Owners shall have and maintain wading pool recirculation pumps with adequate capacity to:

(a) Provide design flows and pressure for water recirculation over the entire operating filter pressure;

(b) Allow proper back washing of filters when specified; and

(c) Have self-priming capability when installed above pool water level.

(16) **Strainers.** Where pumps precede the filter, owners shall equip pool recirculation facilities with hair and lint strainers which shall:

(a) Be located upstream of recirculation pumps;

(b) Provide strainer screen sufficiently strong to prevent collapse when clogged;

(c) Have an openable cover; and

(d) Provide valving to isolate the strainer when located below pool water level.

(17) **Valves.** Owners shall provide valves at appropriate locations to allow isolation and maintenance of equipment.

(18) **Equipment rooms.** Owners shall provide equipment rooms:

(a) Enclosing pumps, disinfection equipment, filters and other electrical and mechanical feed equipment and associated chemicals. Chemical storage shall conform to manufacturer requirements;

(b) Providing work space and access to perform routine operations;

(c) With a forty-six-square-foot minimum floor area and provide a three-foot minimum of access area to service equipment;

(d) With one floor drain or more and a floor slope to the drain at a one-fourth-inch-per-foot minimum;

(e) Ready access if below grade;

(f) Ventilation;

(g) Twenty foot-candles or more of light measured thirty inches from the floor; and

(h) Kept locked.

(19) **Make-up water.** Owners shall ensure a source of make-up water and associated piping at the pool:

(a) Providing sufficient quantity to replace daily pool losses;

(b) Coming from a supply conforming with chapter 246-290 WAC;

(c) Preventing cross connections using a minimum air gap of two pipe diameters or approved backflow prevention devices between the make-up water source and the pool water or waste water; and

(d) If using a pool fill spout, not projecting greater than one inch into the space above the water surface area and shielded to not create a deck hazard.

(20) **Filters.** Owners shall equip pools with filtration equipment:

(a) Meeting the applicable standards of NSF or equivalent;

(b) Using acceptable type and filter rates described under Table 080.1 of this section;

(c) Having pressure or vacuum gauges for measuring loss of head through the filter with a minimum of one gauge preceding and one gauge following the filter;

(d) Having a rate of flow indicator to measure flow which has accuracy, repeatability, and durability equivalent to flow meters meeting NSF standards; and

(e) Having a means of discharging filter backwash to waste with:

(i) Discharge in a manner not creating a public nuisance;

(ii) Disposal in accordance with applicable local laws or regulations;

(iii) Minimum air gap of two pipe diameters to prevent cross-connection from waste discharge and recirculation system piping;

(iv) Discharge receptor and piping of sufficient size to accept backwash water and prevent flooding; and

(v) Ability to monitor filter effluent during backwash, that is, use of a sight glass.

(f) Providing means to release air entering the filter tank on pressure filters;

(g) When cartridge filters are used:

(i) Provide with an extra set of cartridges; and

(ii) Have any bypass valves in a permanently closed position.

(h) When using pressure DE filters with separation tanks:

(i) Provide means of air release or a lid providing a slow and safe release of pressure; and

(ii) Show a readily visible user warning that the air release must be opened before starting the circulation pump.

TABLE 130.3

TYPE AND RANGES OF FILTERS FOR WADING POOLS

Range of Acceptable Filter Rate Type of Filter Media	Expressed in gpm/Square Feet	
	Minimum	Maximum
Sand		
Rapid Sand and Pressure Sand Wading Pools less than 10,000 gallons	—	3
High Rate Sand Pressure or Vacuum Wading Pools greater than 10,000 gallons	10	15
High Rate Sand Pressure* or Vacuum*	10	18
	Continuous Feed	Manual Feed
D.E.		
Pressure	1.0	1.35
Vacuum	0.8	1.0
Cartridge**		0.375

NOTE:

*Filters sized at maximum application rate shall be equipped with flow control valves to maintain flow equilibrium to account for varying filter pressures and consequent flow production.

**Cartridge filters shall have a nominal micron rating of twenty microns or less.

(21) **Disinfection equipment.** Owners shall provide disinfection equipment:

(a) Providing a continuous and effective disinfectant residual in the water;

(b) Using a disinfectant with an easily monitored residual;

(c) Having a design feed rate providing effective disinfection levels when the pool is in peak demand conditions;

(d) Having easily cleanable equipment and piping used to apply chemicals and with provisions to prevent undue clogging. All materials shall be resistant to action of chemicals used;

(e) Conforming to NSF standards if the disinfection equipment has:

(i) Adjustable output rate chemical feed equipment for liquid solutions. When using this equipment, it shall:

(A) Feed under positive pressure in the recirculation system;

(B) Provide means for dosage adjustment;

(C) Have provisions to prevent hypochlorite solution siphoning when equipment is turned off, this applies when the disinfection equipment is above pool water level.

(ii) Flow through chemical feed for solid feed material. Solid tablets or granules shall not be placed in skimmer baskets accessible to the public.

(f) Allowing hand feeding on an emergency basis only;

(g) Meeting the following conditions when using chlorine gas:

(i) Chlorine rooms shall:

(A) Be above ground level;

(B) Be constructed so all openings or partitions with adjoining rooms are sealed;

(C) Be located with consideration of prevailing winds to dissipate leaked chlorine away from the pool facility;

(D) Have door opening outward only and to the out-of-doors;

(E) Provide a sign on the door exterior reading danger chlorine. The sign shall be large enough to be read twenty-five feet away.

(ii) Chlorine rooms shall have mechanical exhausting ventilation including:

(A) Air inlet located as far as possible from fan intake to promote good air circulation patterns;

(B) Minimum of one air change per minute in the chlorine room when fan is operating;

(C) A remote switch outside the room or a door-activated switch to turn on fan before entering;

(D) Suction for fan near the floor;

(E) Exhaust for fan and chlorinator vent located to prevent contaminating air intake and prevent undue hazard for the pool facility users; and

(F) Screened chlorinator vent.

(iii) Gas chlorine systems shall:

(A) Be vacuum injection type, with vacuum-actuated cylinder regulators;

(B) Provide integral backflow and anti-siphon protection at the injector; and

(C) Provide taring (net weight of cylinder gas) scales for determining chlorine weight.

(iv) Breathing protection available in an accessible area for the operator outside of the chlorine room including:

(A) Self-contained breathing apparatus designed for use in a chlorine atmosphere for working with chlorine leaks and maintained in accordance with department of labor and industries standards; or

(B) Provisions to substitute breathing protection at the site, if procedures can be established and documented with emergency service fire districts or other approved organization within the area for promptly responding to chlorine leaks.

(v) Means for automatic shutoff when pool flow is interrupted; and

(vi) Chlorine gas cylinders shall:

(A) Be stored only in chlorine rooms;

(B) Have approved valve-stem cylinder wrench on the valve stem to shut the system down in an emergency event;

(C) Be properly secured to prevent tipping;

(D) Be tagged to indicate cylinders are empty or full; and

(E) Not exceed one hundred fifty pounds tare weight per cylinder. If one-ton cylinder use is desired, an engineer specializing in chlorine design shall prepare a design proposal for department consideration.

(22) **Chemical feeding equipment for pH control.** Owners applying chemicals for controlling pH through chemical feed equipment shall provide equipment with:

(a) Adequate size and design to allow routine cleaning and maintenance;

(b) Materials resistant to chemical action;

(c) Means for automatic shut off when pool flow is interrupted;

(d) Chemical feed equipment for pH control on pools fifty thousand gallons volume or greater;

(e) Any pool feeding with:

(i) Caustic soda (NaOH);

(ii) Carbon dioxide (CO₂); or

(iii) Other chemicals the department determines necessary to require metered and controlled feeding.

(23) **Heaters.** Where pool heating equipment is provided, owners shall:

(a) Locate equipment so any standing pilot is readily accessible; and

(b) Install equipment per NEC and UMC.

(24) **Ventilation.** Owners shall provide indoor pool facility ventilation conforming with ASHRAE pool facility standards.

(25) **Testing equipment.** Owners shall use testing equipment as noted in the water quality section under WAC 246-260-070(6).

(26) **Chemical storage.** Owners shall ensure chemical storage design and placement minimizes safety risks.

(27) **Restroom and plumbing fixtures.** Owners shall provide restroom and plumbing facilities at pools as follows:

(a) Where wading pool facilities are provided in conjunction with general use and limited use swimming pools, spas, or other water recreation facilities, the wading

pool bathing load shall be added to the total load for consideration of plumbing fixture units;

(b) If a wading pool is the sole water recreation facility at a site, plumbing fixtures as described under Table 130.4 including:

- (i) Flush toilets and toilet tissue in dispensers;
- (ii) Shower facilities that:

(A) Deliver water at a temperature range of ninety to one hundred ten degrees Fahrenheit;

(B) Provide single service soap in nonglass dispensers.

(iii) Sinks provided with:

(A) Tempered or hot and cold running water;

(B) Single service soap in nonglass dispensers; and

(C) Single service towels or electric hand dryers.

(iv) Hose bibs with vacuum breakers conveniently accessible to pool and within one hundred feet; and

(v) Sewage disposed of in a manner approved by the department or local health officer.

TABLE 130.4

PLUMBING FIXTURE MINIMUM REQUIREMENTS FOR SOLE FACILITY WADING POOLS

Wading Pools with:	Toilets	Sinks	H.B.	Showers
1. Limited use wading pools with living units* within 100 feet and less than 3 stories	-	-	1	-
2. Limited use wading pools with living units >100 feet but <500 feet and less than 3 stories.**	1	1	1	-
3. Limited use wading pools with living units >500 feet but <1/4 mile and/or with 3 or more stories.**	1(M) 1(F)	1(M) 1(F)	1	-
4. Limited use wading pools with living units >1/4 mile or general use wading pools.***	1(M) 1(F)	1(M) 1(F)	1	1(M) 1(F)

NOTE:

*"Living Units" means all units associated with limited use facilities intended to be served.

**Consideration for elevators adjacent to pool may allow variance from this requirement.

***When wading pool bathing load exceeds 40 of either sex, the fixture units provided shall conform with the general use requirements for swimming pools.

(c) If owners limit the number of people within their facility to a certain number and post maximum occupancy loading, the number of plumbing fixture units may be based on that maximum occupancy.

(28) **Lighting.** Owners shall design and maintain pool facility lighting to:

(a) Illuminate indoor facilities, outdoor facilities used after dusk, and locker room facilities with a minimum lighting intensity maintained thirty inches above any walking surface, pool deck, or pool area of:

- (i) Thirty foot-candles at indoor facilities;
- (ii) Fifteen foot-candles at outdoor facilities;
- (iii) Twenty foot-candles in locker rooms.

(b) Allow lifeguards or attendants to clearly see pool areas and walking surfaces;

(c) Meet any additional lighting requirements deemed necessary by the department or local health officer;

(d) Provide protective shielding for all lighting fixtures above walking surfaces and pool areas;

(e) Provide all indoor facilities with one or more pool area emergency lights designed to turn on in the event of a power failure. The emergency lighting shall conform to requirements of UL standard 924.

(29) **Signs.** Owners shall provide signs at pools which must convey the following conditions, but may be conveyed by any combination of words, pictures, or symbols:

(a) Prohibition of running or horseplay;

(b) Prohibition of use by persons with communicable diseases;

(c) Prohibition of use by persons under the influence of alcohol or drugs;

(d) Prohibition of food or drink in the pool water;

(e) In pools where lifeguards or attendants are not present, post requirements for facility use as required under WAC 246-260-140(3).

(30) **Food service.** When food service is provided, owners shall:

(a) At general use pool facilities, ensure food and beverage sale and consumption areas are separated from pool and deck. Special provisions may be made for allowing food and beverage service on the walkway provided a minimum six feet clear area is maintained between the pool edge and any tables or chairs provided for special facility functions;

(b) At limited use pool facilities, prohibit food and beverage in the pool water and maintain a minimum four-foot clear area between pool edge and any tables and chairs provided for food service;

(c) Provide trash containers;

(d) Prohibit glass containers in the pool facility.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-130, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-080, filed 3/12/90, effective 4/12/90; Regulation .98.080, effective 3/11/60.]

WAC 246-260-140 Operation of wading pool facilities. (1) **Operation plan.** Owners shall ensure proper operation to protect the public health, safety, and water quality by establishing practices and developing an operations manual addressing each of the following:

(a) Physical pool facility components;

(b) Personnel;

(c) Users and spectators;

(d) Environmental conditions.

(2) **Physical components.** Owners shall provide routine checks of the physical components:

(a) Ensuring all structural facilities the users come in contact are intact and free from undue wear or fatigue and replaced as needed;

(b) Eliminating adverse effects of water ponding on walking surfaces;

(c) Ensuring preventative maintenance on equipment essential for protection of the public health, safety, and water quality;

(d) Maintaining barrier protection;

(e) Ensuring treatment turnover is continuous twenty-four hours a day during seasons or periods of use and does not exceed three hours provided:

(i) Allowances shall be made for minor equipment maintenance;

(ii) Pools previously approved with turnover rates varying from subsection (2)(e)(i) of this section may continue to operate if water quality conditions conform with WAC 246-260-070.

(3) **Required personnel.** Owners shall ensure appropriate personnel at pool facilities as follows:

(a) A water treatment operator oversees that the water treatment components are adequately functioning to protect public health, safety, and water quality; and

(b) At pool facilities with no lifeguards, assistant lifeguards, or attendants, use shall be subject to the following conditions:

(i) When the pool is used by children twelve years of age or under, a responsible adult eighteen years of age or older shall accompany the children and be at the pool or pool deck at all times the children use the facility;

(ii) When used by persons seventeen years of age or under, a minimum of two people are at the pool facility at all times the pool is in use;

(iii) At general use pools, subdivision (b)(i) and (ii) of this subsection be posted; and

(iv) At limited-use pools, subdivision (b)(i) and (ii) of this subsection be posted and ongoing provisions notifying the responsible person of the conditions.

(4) **Personnel duties and equipment.** Owners shall ensure the specific duties and equipment of designated personnel include:

(a) Lifeguards, during periods of lifeguarding, guard pool facility users in areas assigned;

(b) Assistant lifeguards when provided at the pool used under the following conditions:

(i) Assistant lifeguard limited to guarding responsibility of areas four feet or less in depth; and

(ii) A lifeguard overseeing the activities of the assistant lifeguard.

(c) Attendants when provided oversee use of the pool by the bathers and provide supervision and elementary rescues, such as reaching assists to bathers in need;

(d) Water treatment operators oversee, as needed, the water treatment components are functioning adequately to protect public health, safety, and water quality;

(e) Notification of responsible persons on the conditions for use at pool facilities not requiring lifeguards, and for which no lifeguards or attendants are present. A responsible person means a person having responsibility for overseeing users, including but limited to a person:

(i) Renting an apartment, hotel, motel, RV camp site; or

(ii) Who is an owner or member of a condominium, homeowner's association, mobile home park, or private club with a pool facility.

(f) Lifeguards, assistant lifeguards, or attendants:

(i) Wear distinguishing suit, uniform, or emblem; and

(ii) Equipped with a whistle or a signaling device.

(5) **Personnel training.** Owners shall require training for each type of personnel including:

(a) Lifeguards shall maintain a current certificate in the following:

(i) Standard first aid and adult, single rescue CPR through ARC or American Heart Association; and

(ii) Advanced lifesaving, advanced lifesaving review, or lifeguard training through ARC; or

(iii) YMCA lifeguarding or crossover course through the YMCA; or

(iv) Lifeguard through the National Lifeguard Service, Canadian; or

(v) Lifeguard through National Pool and Waterpark Lifeguard Training; or

(vi) Basic lifeguard through advanced lifeguard training international; or

(vii) Other training the department determines equivalent; and

(viii) Thirty-six months after enactment of the personnel training provisions of this chapter, the department shall no longer recognize training for lifeguards in advanced lifesaving, or advanced lifesaving review through the ARC.

(b) Assistant lifeguards shall maintain current certificates and meet the requirements in the following:

(i) Adult, single rescue CPR through ARC or American Heart Association; and

(ii) Emergency water rescue with ARC; or

(iii) Bronze medallion award through the Royal Lifesaving Society of Canada; or

(iv) Shallow water lifeguard through the National Pool and Waterpark lifeguard training; or

(v) Other training the department determines equivalent; and

(vi) Be fourteen years of age or older.

(c) Attendant shall maintain current certificates and meet the requirements in the following:

(i) Adult, single rescue CPR through ARC or the American Heart Association; and

(ii) Basic water safety with ARC; or

(iii) Other training the department determines equivalent; and

(iv) Be sixteen years of age or older.

(d) Water treatment operator shall have specific knowledge in provision of pool water chemistry, filtration, pumping equipment and rules and regulations pertaining to pool facilities;

(e) When pool facility is using chlorine gas, an operator shall have specific training as follows:

(i) Proper operation of the chlorination equipment and routine maintenance procedures;

(ii) Basic understanding of physical and chemical properties of chlorine gas under pressure;

(iii) Basic understanding on use of leak detection and emergency safety equipment;

(iv) Basic knowledge of proper first aid procedures and response for accidental inhalation of chlorine gas;

(v) Six hours or more of formal instruction once every three years or three hours or more every eighteen months with certificate of training provided.

(f) Persons shall be exempt from having current CPR or standard first aid certificates if the persons hold current certificates in any of the following:

(i) Community CPR in place of adult, single rescue CPR;

(ii) In place of standard first aid:

(A) Advanced first aid;

- (B) First responder;
- (C) Emergency medical technician; or
- (D) Paramedic.
- (iii) Other training the department recognizes as equivalent or exceeding current requirements.

(6) **Bather use.** Owners shall establish conduct rules for users to ensure health and safety. The rules shall include signage noted under WAC 246-260-130(29).

(7) **Environmental conditions.** Owners shall monitor various environmental conditions affecting the facility or the user and take appropriate action in response to these factors, including electrical storms, visibility problems, etc.

(8) **Closure.** Owners shall close the facility when the facility or portion thereof presents an unhealthy, unsafe, or unsanitary condition. These conditions include lack of compliance with the water quality or operation requirements as detailed under WAC 246-260-070 and 246-260-140.

[Statutory Authority: RCW 70.90.120, 92-02-020 (Order 226B), § 246-260-140, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-085, filed 3/12/90, effective 4/12/90.]

WAC 246-260-150 Spray pool design, construction, and equipment. (1) **Location.** Owners shall locate pools to:

(a) Minimize pollution by dust, smoke, soot, and other undesirable substances; and

(b) Eliminate pollution from surrounding surface drainage.

(2) **Materials.** Owners shall only use structure and equipment materials which are nontoxic, durable, inert, impervious to water and easily cleanable.

(3) **Walking surfaces.** Owners shall design and maintain walking surfaces:

(a) Uniformly sloping away from the pool or pools a minimum of one-fourth inch per foot and a maximum of one-half inch per foot;

(b) Of a nonslip finish not presenting a tripping hazard;

(c) Equipped with sufficient drains to prevent standing water;

(d) Of easily cleanable impervious finishes;

(e) Four feet or more in width, extending around fifty percent or more of the spray pool;

(f) In conformance with department-established guidelines for any resilient artificial surfaces.

(4) **Pool structure.** Owners shall ensure general pool requirements include:

(a) Pool surfaces with nonslip finishes and impervious to water;

(b) Uniform pool floor slopes not to exceed one foot in twelve feet;

(c) Provision for using an approved potable water supply. Water shall not be recirculated, but drain to waste after use in the spray pool; or

(d) If a spray pool facility is used in conjunction with a swimming pool over thirty thousand gallons in volume, recirculated swimming pool water may be used in the spray pool if:

(i) Means for treatment of the water draining from the spray pool is provided including filtration, disinfection, and recirculation through a separate spray pool treatment system;

(ii) Such system is sized on the maximum introduction rate of water from the recirculated swimming pool water;

(iii) Treated spray pool water is introduced into the swimming pool recirculation system;

(iv) Proper safeguards are employed to prevent interruption of proper swimming pool facility operation; and

(v) Design and construction of treatment equipment and associated facilities conform with swimming pool design requirements.

(5) **Inlets and outlets.** Owners shall provide pool inlets and outlets with:

(a) Spray nozzles not inflicting damage to users. Maximum flow through nozzles within close proximity to bathers shall not exceed fifteen fps at the nozzle;

(b) The drain located at the low point of the pool and with sufficient capacity and design to prohibit water accumulation in the pool. The outlet drain shall:

(i) Be located at the low point of the pool;

(ii) Have openings not allowing a sphere over one-half inch in diameter to pass;

(iii) Use grate design to withstand forces of users;

(iv) Have grates removable only with specific tools; and

(v) On grates attached to recirculating pumps, have:

(A) Total open area of grates sized to prevent a suction hazard dangerous to the user;

(B) Grates on drains with a maximum flow of one and one-half feet per second, or net area of outlet four times or more the discharge pipe area.

(6) **Valves.** Owners shall provide valves at appropriate locations to allow isolation and maintenance of equipment.

(7) **Make-up water.** Owners shall ensure a source of make-up water and associated pool piping:

(a) Coming from a supply conforming with chapter 246-290 WAC;

(b) Preventing cross connections using a minimum air gap of two pipe diameters or approved backflow prevention devices between the make-up water source and the spray pool water or waste water.

(8) **Waste water discharge.** Water used in a pool shall be disposed of in a manner acceptable to the local health jurisdiction.

(9) **Signs.** Owners shall provide signs at pools about general requirements for facility use. Owners may use any combination of words, pictures, or symbols conveying the prohibition of the following conditions:

(a) Running or horseplay;

(b) Use by persons with communicable diseases;

(c) Use by persons under the alcohol or drug influence;

(d) Food or drink in pool water.

[Statutory Authority: RCW 70.90.120, 92-02-020 (Order 226B), § 246-260-150, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-260-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 90-07-010 (Order 042), § 248-98-090, filed 3/12/90, effective 4/12/90; Regulation .98.090, effective 3/11/60.]

WAC 246-260-160 Operation of spray pool facilities. (1) **Operation plan.** Owners shall ensure proper operation to protect the public health, safety, and water quality. An operations plan shall address each of the following:

(a) Physical pool facility components;

(b) Personnel;

(c) Users and spectators;

(d) Environmental conditions.

(2) **Physical components.** Owners shall provide routine checks of the physical components:

(a) Ensuring all structural facilities which the users come in contact are intact and free from undue wear or fatigue and replace as needed;

(b) Eliminating adverse effects of water ponding on walking surfaces;

(c) Ensuring preventative maintenance on equipment essential for protection of the public health, safety, and water quality.

(3) **Required personnel and duties.** Owners shall provide personnel to oversee the spray pool facility ensuring proper operation and maintenance. When the facility is using recirculated water, a water treatment operator shall oversee water quality and equipment operation.

(4) **Bather use.** Owners shall establish rules of conduct for users to ensure health and safety. The rules shall include conditions noted under WAC 246-260-150(9).

(5) **Environmental conditions.** Owners shall monitor various environmental conditions affecting the facility or the user and take appropriate action in response to these factors, including electrical storms, visibility problems, etc.

(6) **Closure.** Owners shall close the facility when the facility or portion thereof presents an unhealthy, unsafe, or unsanitary condition. The conditions include lack of compliance with the water quality and/or operation requirements as detailed under WAC 246-260-070 and 246-260-160.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-160, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-095, filed 3/12/90, effective 4/12/90.]

WAC 246-260-170 Water recreation facility pools not in operation. Owners of pool facilities not in operation shall maintain one of the following conditions:

(1) Inoperable spa, swimming, and wading pool access shall be locked; and

(2) If pools are abandoned, backfilled with appropriate fill material.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-098, filed 3/12/90, effective 4/12/90.]

WAC 246-260-180 Bathing beaches. No bathing beach shall be maintained or operated when such water is determined by the health officer to be so polluted or subject to pollution as to constitute a menace to health if used for bathing. Where bathhouse and toilet facilities are provided for use of bathers they shall be constructed, maintained and operated in a sanitary manner approved by the health officer.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-180, filed 12/27/90, effective 1/31/91; Regulation .98.070, effective 3/11/60.]

WAC 246-260-200 Water recreation industry requirements. All owners of companies selling swimming

pools, spa pools, wading pools or spray pools, and their associated facilities regulated by chapter 246-260 WAC shall furnish each purchaser a complete set of operating instructions and shall include detailed information on the safe use of the facilities including:

(1) Proper treatment methods to ensure water quality and sanitation;

(2) Proper safety procedures to reduce injury risks;

(3) Specific safety instructions for use at facilities having water temperatures ninety-five degrees Fahrenheit or more on the health effects of hot water and a specific caution and explanation on the health effects of hot water on pregnant women and young children.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-200, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-100, filed 3/12/90, effective 4/12/90; Regulation .98.100, effective 3/11/60.]

WAC 246-260-210 Technical advisory committee.

(1) The department shall appoint a technical advisory committee to assist in the following:

(a) Reviewing and drafting of proposed rules;

(b) Development of guidelines for use of new products, equipment, procedures, and periodic program review.

(2) The technical advisory committee shall have meetings whenever the department determines necessary.

(3) The technical advisory committee water recreation pool facility membership shall include representation from the following:

(a) General use pool facility;

(b) Limited use pool facility;

(c) Local representative from the spa and pool industry (NSPI);

(d) Washington recreation and parks association representative;

(e) Engineer or architect design consultant;

(f) Eastern and western Washington local environmental health authority representatives;

(g) Department representative;

(h) RWCF owner representative, as appropriate, as described under chapter 246-262 WAC.

(4) The technical advisory committee may appoint subcommittees as the committee determines appropriate to address specific issues.

(5) The department shall maintain minutes of meetings.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-210, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-102, filed 3/12/90, effective 4/12/90.]

WAC 246-260-220 Restrictions on animals. Owners shall prevent animal access to the water recreation pool facility except by users or spectators requiring services of guide dogs accompanying them to the deck area.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-104, filed 3/12/90, effective 4/12/90.]

WAC 246-260-230 Variance. (1) The department or local health officer may allow variance from this chapter or portions thereof provided:

(a) The local health officer receives written department concurrence;

(b) The department receives written local health officer concurrence in jurisdictions with active water recreation facilities programs;

(c) Data and/or research provides sufficient evidence to the satisfaction of the department or local health officer the water recreation facility, or considered components, adequately protects public health and safety, as well as water quality;

(d) The variance is consistent with the intent of this chapter.

(2) The department and local health officer shall provide the board an annual summary of variances granted January 31 of the following year or at the board's request at any time. The board may evaluate such variances granted to determine if the provisions of this chapter are met.

(3) The board may, in its discretion, make provisions to submit variance requests to the board for review and decision.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-110, filed 3/12/90, effective 4/12/90; Order 715, § 248-98-110, filed 9/14/72.]

WAC 246-260-240 Substitution. The board authorizes the department to allow substitutions of equipment, facilities, or procedures required by chapter 246-260 WAC when, in the sole determination of the department, data and/or research provide sufficient evidence that such substitution is equivalent to the requirement and will adequately provide for the protection of the public health and safety of persons using the water recreation facility.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-240, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-120, filed 3/12/90, effective 4/12/90; Order 715, § 248-98-120, filed 9/14/72.]

WAC 246-260-250 Enforcement. (1) The department or, if enforcement responsibility is assigned under a joint plan of operation in WAC 246-260-020, the local health officer:

(a) Shall enforce chapter 246-260 WAC rules; or

(b) May refer cases within the department's or local health officer's jurisdiction to the local prosecutor's office or the office of the attorney general, as appropriate.

(2) When a water recreation facility (WRF) is in violation of chapter 70.90 RCW provisions or chapter 246-260 WAC rules, appropriate enforcement action may be initiated by the department, local health officer, local prosecutor's office, or office of the attorney general. Enforcement actions may include any one or a combination of the following:

(a) Informal administrative conferences to explore facts and resolve problems, convened at the request of the department, local health officer, or owner;

(b) Orders directed to the water recreation facility (WRF) owner and/or operator and/or the person causing or responsible for the violation of the chapter 246-260 WAC rules;

(c) Imposition of civil penalties of up to five hundred dollars per violation per day as authorized under RCW 70.90.200;

(d) Denial, suspension, or revocation of operating permits; and

(e) Civil or criminal action initiated by the local prosecutor's office or by the office of the attorney general.

(3) Orders authorized under this section include, but are not limited to the following:

(a) Requiring corrective measures necessary to effect compliance with chapters 246-260 WAC or 70.90 RCW. Such orders may or may not include a compliance schedule; and

(b) Orders to stop work and/or refrain from using any WRF or portion thereof or improvement thereto until all permits, certifications, and approvals required by statute or rule are obtained.

(4) An order issued under this section shall:

(a) Be in writing;

(b) Name the facility and the person or persons to whom the order is directed;

(c) Briefly describe each action or inaction constituting a violation of chapters 70.90 RCW or 246-260 WAC rules;

(d) Specify any required corrective action, if applicable;

(e) Provide notice, as appropriate, that continued or repeated violation may subject the violator to:

(i) Civil penalties of up to five hundred dollars;

(ii) Denial, suspension, or revocation of the facility's operating permit; or

(iii) Referral to the county prosecutor or attorney general's office.

(f) Provide the name, business address, and phone number of an appropriate staff person who may be contacted regarding an order.

(5) Service of an order shall be made:

(a) Personally, unless otherwise provided by law; or

(b) By certified mail return receipt requested.

(6) Under department or local health officer adopted rules or policies, civil penalties of up to five hundred dollars per day may be assessed against any person violating provisions of chapter 70.90 RCW or 246-260 WAC.

(7) The department or local health officer shall have cause to deny the operating permit application or reapplication or to revoke or suspend a required operating permit of any person who has:

(a) Previously had:

(i) An operating permit suspended or revoked; or

(ii) An operating permit application denied for reason.

(b) Failed or refused to comply with provisions of chapters 70.90 RCW and 246-260 WAC or any other statutory provision or rule regulating the WRF construction or operation; or

(c) Obtained or attempted to obtain an operating permit or any other required certificate or approval by fraudulent means or misrepresentation.

(8) For the purposes of subsection (7) of this section, a person shall be defined to include:

(a) Applicant;

- (b) Reapplicant;
- (c) Permit holder; or
- (d) An individual associated with subsection (8)(a), (b), or (c) of this section including, but not limited to:
 - (i) Board members;
 - (ii) Officers;
 - (iii) Managers;
 - (iv) Partners;
 - (v) Association members;
 - (vi) Agents; and
 - (vii) In addition, third persons acting with the knowledge of such persons.

(9) The department or local health officer may summarily suspend an operating permit, other required permit, license, or certification without a prior hearing if the department or local health officer:

- (a) Finds public health, safety, or welfare imperatively requires emergency action; and
- (b) Incorporates a finding to that effect in its notice or order.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-250, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-130, filed 3/12/90, effective 4/12/90.]

WAC 246-260-260 Hearings. (1) A person aggrieved by the department's or local health officer's denial, suspension, or revocation of any permit may request an administrative hearing.

(a) A hearing requested to contest a local health officer's action shall be governed by the local health jurisdiction's rules for hearings.

(b) A hearing requested to contest the department's action shall be governed by section 377, chapter 3, Laws of 1991. The applicant's and permit holder's right to an adjudicative proceeding is in the same law.

(c) The procedure for the adjudicative proceeding is in this chapter and in chapter 246-08 WAC.

(2) Any person aggrieved by the department's or local health officer's application of civil penalties may request an administrative hearing.

(a) A hearing requested to contest a local health officer's action shall be governed by the local health jurisdiction's rules for hearings.

(b) A hearing requested to contest the department's action shall be governed by section 377, chapter 3, Laws of 1991. When the department imposes a civil fine, the right of a person to an adjudicative proceeding is in the same law.

(c) The procedure for the adjudicative proceeding is in this chapter and in chapter 246-08 WAC.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-260-260, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-135, filed 3/12/90, effective 4/12/90.]

WAC 246-260-990 Fees. (1) The fee for a review of plans for a new public swimming pool with a volume equal to or greater than one hundred twenty-five thousand gallons at overflow shall be five hundred dollars.

(2) The fee for review of a new public swimming pool with a volume of less than one hundred twenty-five thousand gallons at overflow shall be three hundred dollars.

(3) The fee for review of plans for a new semipublic swimming pool with a volume equal to or greater than seventy-five thousand gallons at overflow shall be two hundred dollars.

(4) The fee for review of plans for a new semipublic swimming pool with a volume of less than seventy-five thousand gallons at overflow shall be one hundred fifty dollars.

(5) The fee for review of plans for a wading pool shall be one hundred dollars.

(6) The fee for review of plans for a spray pool shall be seventy-five dollars.

(7) The fee for review of plans for alteration or modification of an existing swimming, wading, or spray pool in accordance with subsection (1), (2), (3), (4), (5), or (6) of this section shall be the total of actual direct and indirect costs, not to exceed one-half of the fee for review of a new project.

(8) In water recreational facilities with any combination of more than one swimming pool and/or wading pool and/or spray pool, the review fee shall be the highest applicable fee specified in subsection (1), (2), (3), (4), (5), or (6) of this section plus one-half of each lowest applicable fee or fees specified for each attraction in the facility.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-260-990, filed 12/27/90, effective 1/31/91.]

WAC 246-260-998 Severability. If any provision of this chapter or its application to any person or circumstances is held invalid, the remainder of this chapter or the application of the provision to other persons or circumstances shall not be affected.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-260-998, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 90-07-010 (Order 042), § 248-98-998, filed 3/12/90, effective 4/12/90.]

Chapter 246-262 WAC

RECREATIONAL WATER CONTACT FACILITIES

WAC

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246-262-110	Advisory committee.
246-262-120	Enforcement.
246-262-130	Notice of decision—Adjudicative proceeding.
246-262-140	Insurance.
246-262-150	Compliance.
246-262-160	Variance.
246-262-170	Innovations—Substitutions.
246-262-990	Fees.

WAC 246-262-001 Purpose and authority. The purpose of these rules is to protect the health, safety, and welfare of users of recreational water contact facilities (RWCFs). The rules as set forth are adopted per RCW 70.90.120.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-010, filed 6/22/88.]

WAC 246-262-010 Definitions. (1) "Advanced first aid" means a course of instruction recognized by the American Red Cross, department of labor and industries, the U.S. Bureau of Mines, or fire services training program.

(2) "ANSI" means American National Standards Institute.

(3) "Approved" means the department or local health officer has stated in writing that the design plans and specifications are in accordance with chapter 246-262 WAC.

(4) "ARC" means American Red Cross.

(5) "Architect" means a registered architect currently licensed under chapter 18.08 RCW in Washington state.

(6) "ASTM" means American Society for Testing Material.

(7) "Attendant" means a person trained to operate an attraction and control the users in a safe orderly manner.

(8) "Attraction or ride" means any of the specific types of recreational facilities involving partial or total immersion or intentional contact with the water designated for public recreational use.

(9) "Biomechanics" means the study of the human body as a system operating under the laws of Newtonian mechanics and the biological laws of life.

(10) "Board" means the state board of health.

(11) "Boogie or mini-surf board" means any semirigid device used in a wave pool for flotation or as a riding device.

(12) "Centerline" means the path defined by geometric midpoints of a component or structure, generally used in consideration of the slide path in flume rides.

(13) "Communication system" means any combination of devices permitting the passage of or exchange of messages between park operating personnel and between operating personnel and users. Systems can include, but are not limited to, two-way radios, hardwired intercoms, horns, whistles, hand signals, direct voice, signs, or equivalent.

(14) "Contaminant" means any physical, chemical or biological substance present in the RWCF water which may adversely affect the health or safety of the user and/or the quality of the water.

(15) "CNCA" means Council for National Cooperation in Aquatics.

(16) "Cross-connection" means any physical arrangement connecting:

(a) A potable water system directly or indirectly, with anything other than another potable water system; or

(b) A RWCF to any potable or nonpotable water source capable of contaminating either the RWCF or potable water source as a result of backflow.

(17) "Department" means the department of health.

(18) "Discharge section" means the component or components making up the exit of the water slide, water tube, inner tube ride, speed slide, ramp slide, drop slide or drop tube, or kiddie flume. These components are the elements controlling the final direction and speed of the user.

(19) "Diving envelope" means the minimum dimensions of an area within the pool necessary to provide entry from a diving board, platform, or attraction segment where users enter above pool water level.

(20) "Drop slide or drop tube ride" means a sloped trough, chute, or tube exiting the user above the pool operating water level.

(21) "Engineer" means a registered professional engineer currently licensed under chapter 18.43 RCW in Washington state.

(22) "Entry access points" means the areas where users enter an attraction.

(23) "Entry rate" means the frequency at which users are permitted access to the attraction.

(24) "Ergonomics" means a multidisciplinary activity dealing with the interactions between humans and their environment plus the traditional environmental elements atmosphere, heat, light, and sound, as well as objects with which the user comes in contact.

(25) "FINA" means Federation Internationale de Natation Amateur.

(26) "Flume or tube entry" means the area at which users enter a water slide, water tube, inner tube ride, speed slide, drop slide, drop tube, or kiddie flume.

(27) "fps" means feet per second.

(28) "gpm" means gallons per minute.

(29) "IAAPA" means International Association of Amusement Parks and Attractions.

(30) "Injury or illness report" means the written record of all facts regarding an injury or illness associated with the RWCF.

(31) "Inner tube ride" means an attraction where users ride inner tube-like devices through a series of chutes, channels, flumes, and pools.

(32) "Innovative recreational water contact facility" means any type of RWCF currently unregulated.

(33) "Intermediate pool" means any pool between the entry and exit pools in attractions using a series of pools.

(34) "Kiddie flume or tube attraction" means a flume, chute, or tube designated for and restricted to use by small children.

(35) "Lifeguard" means an individual currently certified by red cross in advanced lifesaving or lifeguard training, or YMCA senior lifesaver, or equivalent certification through the royal Canadian lifeguard services.

(36) "Lifeguard station" means the designated work station of the lifeguard.

(37) "Local health officer" means the health officer of the city, county, or city-county department or district or a representative authorized by the local health officer.

(38) "mg/l" means milligrams per liter.

(39) "Multi-activity pool" means a pool with more than one type of attraction (i.e., an adult activity pool with a series of tubes, chutes, cable rides, etc., intended for use by individuals with specific swimming abilities).

(40) "NSF" means National Sanitation Foundation.

(41) "NSPI" means National Spa and Pool Institute.

(42) "Operating levels" means water levels maintained within attractions during use for proper operation of facility and for controlling safety and sanitation.

(43) "Operations" means all aspects of a RWCF which must be controlled to make the facility safe, healthy, and usable for the purpose intended.

(44) "Owner" means a person owning and responsible for a RWCF or authorized agent.

(45) "Person" means an individual, firm, partnership, co-partnership, corporation, company, association, club, government entity, or organization of any kind.

(46) "Ponding" means a condition where water fails to drain from walking surfaces.

(47) "ppm" means parts per million.

(48) "Primary zone of visual coverage" means the area assigned to a lifeguard or attendant for primary visual surveillance of user activity.

(49) "Radius of curvature" means the radius arc which denotes the curved surface from the point of departure from the vertical sidewall (springline) of the pool to the pool bottom.

(50) "Ramp slide" means a slide allowing one or more users to slide in unison down a straight incline to a runout or a receiving pool.

(51) "Recirculation filter water" means water which is recirculated by the RWCF for treatment purposes, i.e., filtration and disinfection.

(52) "Response time" means elapsed time between bather distress and initiation of rescue assistance by a lifeguard (or attendant where applicable).

(53) "RWCF" means recreational water contact facility which is an artificial water associated facility with design and operational features that provide patron recreational activity which is different from that associated with a conventional swimming pool and purposefully involves immersion of the body partially or totally in the water and includes, but is not limited to, water slides, wave pools, and water lagoons.

(54) "Secretary" means the secretary of the department of health.

(55) "Serious injury" means any injury requiring admission to a hospital.

(56) "Speed slide or speed tube" means a sloped trough, flume, tube, or roller track having long straight and/or steep drops where users sustain speeds of twenty miles per hour or more.

(57) "Springline" means the point from which the pool wall breaks from vertical and begins its arc in the radius of curvature (for coved construction) to the bottom of the pool.

(58) "Surfboard" means a rigid device used in a wave pool for riding.

(59) "Tail coverage" means providing insurance coverage for a given period of time for discovery of claims made after the policy term for "claims made" type of insurance.

(60) "Total turnover" means the time it takes for the pool attraction water volume to be recirculated as a sum of the flows from treatment turnover and attraction recirculation systems turnover.

(61) "Treatment turnover" means the minimum time necessary to circulate the entire attraction water volume through the recirculation filter system.

(62) "T.U." means turbidity unit as measured by the nephelometric method.

(63) "Wading activity pool" means a pool or area less than twenty-four inches in total water depth with activities intended for younger children.

(64) "Walking surface" means any direct access surface to the attractions or change rooms where the user will be in bare feet. Areas set aside for picnicking, sunbathing, and lounging are excluded.

(65) "Water slide or water tube" means a sloped trough-like flume or tube structure of varying slope and direction using water as a lubricant and/or method of regulating the rider speed.

(66) "Water treatment operator" means the person appointed to operate the mechanical equipment and perform related water quality monitoring for proper operation of the physical facility.

(67) "Wave pool" means a recreational pool producing waves which usually begin at the deep end and proceed toward and dissipate at the shallow end.

(68) "WWA" means World Waterpark Association.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-020, filed 6/22/88.]

WAC 246-262-020 General administration. (1) The department and the local health officer for each local health jurisdiction containing a RWCF shall develop a joint plan of operation listing the roles of each agency for administering these rules. The plan shall designate who will be responsible for:

- (a) Plan review;
- (b) Permit issuance;
- (c) Inspection;
- (d) Surveillance; and
- (e) Enforcement.

(2) The department shall have information on which agency to contact for obtaining construction and operation permits.

(3) Fees may be charged as authorized in RCW 70.90.150.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-030, filed 6/22/88.]

WAC 246-262-030 Construction permit. (1) Persons planning to construct, alter, or modify a RWCF, excluding routine maintenance, shall provide the following to the department or local health officer for review and approval:

- (a) A completed construction permit application;
- (b) Three sets of plans and specifications prepared and signed by an engineer or architect; and
- (c) A report prepared by an engineer certifying the design of the RWCF is consistent with accepted safety engineering practices and industrial standards. Such engineer shall have experience in safety design, including ergonomic aspects of biomechanics of RWCFs, amusement rides, or equal.

(2) Owners may schedule a predesign meeting with the designer and the department or local health officer to

determine if the project is consistent with the intent of these rules;

(3) Following review of the completed permit application and plans and specifications, the department or local health officer shall:

(a) Forward written approval, including construction permit, or denial to the owner;

(b) Forward a copy of approved plans to the designer; and

(c) Forward a copy of the approval letter to the department or local health officer and local building department.

(4) The owner shall ensure any construction, modification, or alteration is completed according to approved plans and specifications;

(5) Upon completion of RWCF construction, alteration, or modification and prior to use, owners shall:

(a) Submit to the department or local health officer a construction report signed by an engineer or architect certifying that construction is substantially in compliance with approved plans and specifications; and

(b) Notify the department or local health officer at least five working days prior to intended use of the facility.

(6) Owners of the RWCF must comply with all other applicable agency codes and standards. These include, but are not limited to:

(a) The National Electrical Code, chapter 19.28 RCW and chapter 296-46 WAC as determined by the electrical section of the Washington state department of labor and industries;

(b) Local gas piping and appliance codes, American Gas Association standards, and certification meeting the latest ANSI Z21.56 or other applicable and equivalent standards;

(c) Local building authority standards, including structural design of components;

(d) State and local plumbing authority standards;

(e) Washington state department of labor and industries requirements for pressure vessels under chapter 70.79 RCW and chapter 296-104 WAC; and

(f) Codes designated under chapter 70.92 RCW for handicapped accessibility.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-262-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 88-13-125 (Order 311), § 248-97-040, filed 6/22/88.]

WAC 246-262-040 Operating permit. (1) No person shall operate a RWCF without a current operating permit issued by the department or local health officer.

(2) To obtain an operating permit, owners of an RWCF must provide information to the department or local health officer that shows the RWCF is in compliance with these rules.

(3) Operating permits shall be:

(a) Valid for one year;

(b) Renewed annually; and

(c) Nontransferable without written consent of the department or local health officer. For purposes of this section, a change in management of a corporation, partnership, association, or other nonindividual business entity shall create a new person requiring either consent to a permit transfer or issuance of a new permit upon proper application.

(4) The department or local health officer issuing the operating permit may revoke or suspend the permit if the RWCF is not operated in accordance with chapter 70.90 RCW or chapter 246-262 WAC.

[Statutory Authority: RCW 70.90.120, 92-02-020 (Order 226B), § 246-262-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-262-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120, 88-13-125 (Order 311), § 248-97-050, filed 6/22/88.]

WAC 246-262-050 Water quality standards, analysis, and sample collection. (1) Owners shall maintain waters free from harmful levels of disease-producing organisms, toxic chemicals, or adverse physical conditions.

(2) Owners shall maintain RWCF waters to meet standards of bacteriological quality. Standards include:

(a) Heterotrophic plate counts not to exceed a density of two hundred bacteria per milliliter in any series of tests; and

(b) Total coliform density not to exceed an average of one coliform bacteria per one hundred milliliters in any series of tests.

(3) Owners shall maintain continuous and effective methods of disinfection of RWCF waters at all times with use of:

(a) Chlorine or bromine as described in Table 1 of this section; and/or

(b) Alternate forms of disinfection which meet the following criteria:

(i) Registered with the environmental protection agency, if necessary;

(ii) Registered with the Washington state department of agriculture, if necessary;

(iii) Conformance with NSF standard 50 or equal when applicable; and

(iv) Adherence to guidelines established by the department.

(4) Owners shall maintain:

(a) Physical and chemical conditions within the ranges specified in Table 2 of this section; and

(b) Cleanliness by:

(i) Closing an affected area of the RWCF or affected portion when contaminated with feces, vomit, sewage, or other hazardous or unknown material until the area is clean, disinfected, and free of the hazardous material;

(ii) Daily removal of scum or floating material on the pool water surface; and

(iii) Continuous removal of scum or floating material by action of overflow of pool water with flotsom screened and filtered.

(5) Persons collecting water samples for laboratory analysis shall:

(a) Collect and transport samples for chemicals and micro-organisms based on the most recently published edition of standard methods for the examination of water and waste/water analysis published jointly by the American Public Health Association/Water Pollution Control Federation and American Waterworks Association; hereafter, it is referred to as "standard methods;"

(b) Have laboratory tests performed per "standard methods" at laboratories approved by the department to provide such analyses;

(c) Provide adequate data for completing analyses; and

(d) Use water sample bottles approved by the department for collection of samples.

(6) Persons shall use field test kits with a suitable range of accuracy for the parameters routinely measured as noted in Table 3 of this section.

(7) Owners shall require and ensure addition of chemicals or materials to RWCF water only when the use has been approved or recognized as acceptable by the department. Current lists of approved or acceptable materials are available from the department.

(8) Owners shall perform additional tests as directed by the department or local health officer.

TABLE 1
MINIMUM AND MAXIMUM LEVELS OF DISINFECTANTS

Currently Recognized Disinfectants	Type of Residual Measured	pH Ranges			Maximum Residual Level in mg/l*
		7.2-7.49	7.5-7.79	7.8-8.0	
1. Chlorine	Free available chlorine	1.0	1.4	1.8	8
2. Chlorinated cyanurate	Free available chlorine	1.5	2.0	2.8	8
3. Bromine	Total available bromine	2.0	2.5	3.5	8

Note:

*Maximum residual or manufacturer's recommendation (whichever is less).

TABLE 2
ACCEPTABLE RANGES OF SELECTED
PHYSICAL AND CHEMICAL WATER QUALITY CONSTITUENTS

Chemical or Physical Constituent	Minimum	Maximum
1. pH	7.2	8.0
2. Water Clarity (safety)	main drain visible at all times	—
3. Turbidity (shielding micro-organisms from disinfection)	—	0.5* T.U.
4. Cyanuric acid or its derivatives (if used)	0	90 mg/l
5. Temperature		104°F.

Note:

*In peak use periods, turbidity may increase to 1.0 T.U. provided it returns to 0.5 T.U. within a six-hour period after peak use. Turbidity is not a required routine analysis which must be performed by the RWCF. Turbidity monitoring may be required by the department or local health officer if special conditions warrant it.

TABLE 3
RANGE OF ACCEPTABLE TESTING LEVELS*

Chemical Test	Minimum Range	Minimum Accuracy
1. Free available chlorine	0.3 to 3.0 mg/l	0.2 mg/l
2. Total chlorine	0.3 to 3.0 mg/l	0.2 mg/l
3. Total bromine	0.3 to 3.0 mg/l	0.2 mg/l
4. pH	7.0 to 8.2	0.2
5. Cyanuric acid	0 to 100 mg/l	5 mg/l
6. Alkalinity	0 to 300 mg/l	15 mg/l

Note:

*Do not make determinations of chemical conditions based on readings at the extreme measurable limits of the scale.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-060, filed 6/22/88.]

WAC 246-262-060 General design, construction, and equipment. (1) Owners shall locate RWCFs to:

(a) Minimize pollution by dust, smoke, soot, and other undesirable substances;

(b) Eliminate pollution from surrounding surface drainage; and

(c) Ensure pools within the RWCF are more than fifteen feet from any structure, object, or land formation (i.e., pumphouse, tree, etc.), which would provide a user with the opportunity to jump from such a structure into the pool. This does not include any barriers provided to prevent unauthorized access to pool or segments of attractions which enter pool.

(2) Owners shall use only materials in the structure and equipment which are nontoxic, durable, inert, impervious to water, and easily cleaned.

(3) Owners shall design and maintain walking surfaces which are:

(a) Sloped a minimum one-fourth inch per foot;

(b) Of a nonslip finish;

(c) Equipped with sufficient drains to prevent standing water;

(d) Free of resilient coverings, e.g., carpeting; and

(e) At least four feet in width.

(4) Owners shall provide adequate barrier protection to prevent unauthorized access including:

(a) In outdoor facilities, a barrier six feet or more in height with:

(i) Openings, holes, or gaps not to exceed four inches except openings protected by gates or doors; and

(ii) Lockable gates and entrances either regulated during periods of use or provided with a self-closing, self-latching mechanism a minimum of forty-two inches from the ground.

(b) In indoor facilities, suitable barriers to prevent access by unauthorized individuals or pool access by unattended small children.

(5) Owners shall ensure that pools:

(a) Comply with all provisions of chapter 246-260 WAC where pool facilities are a separate attraction;

(b) Have surfaces with:

(i) Materials complying with subsection (2) of this section;

(ii) Watertight and nonabrasive construction;

(iii) Nonslip finish where users are walking; and

(iv) White or light color finish not obscuring the view of objects or surfaces.

(c) Are dimensionally designed to provide for the safety of the user and circulation of the water including, but not limited to:

(i) Absence of protrusions, extensions, means of entanglement, or other obstruction which can cause entrapment or injury;

(ii) Construction tolerances conforming with current ANSI public pool standards;

(iii) Uniform pool floor slopes as follows:

(A) Not exceeding one foot of drop in seven feet of run for pools serving as landing or exiting pools, where total water depth is less than forty-eight inches; and

(B) Providing a maximum slope of one foot of drop in twelve feet of run up to a depth of five and one-half feet in pools where users enter and participate in extended activities.

(iv) Vertical walls for a minimum distance noted in Table 4 of this section, which may be curved (not to exceed allowable radius) to join the floor.

(A) Vertical means walls not greater than eleven degrees from plumb.

(B) Coving or portion of the side wall of a diving area in the pool shall conform as described in subsection (5)(c)(vi) of this section.

(C) In new construction or alterations to existing construction, ledges are prohibited.

(D) Requirements in subsection (5)(c) of this section do not apply to spas.

(v) A maximum intrusion beyond the vertical (as defined in subsection (5)(c)(iv)(A) of this section) with any configuration not to exceed a transitional radius from wall to floor where floor slopes join walls and which:

(A) Has its center of radius no less than the minimum vertical depth specified in Table 4 of this section below the water level;

(B) Has arc of radius tangent to the wall; and

(C) Has a maximum radius of coving (or any intrusion into the pool wall/floor interface) determined by subtracting the vertical wall depth from the total pool depth.

TABLE 4
MAXIMUM RADIUS COVING OR POOL INTRUSION
DIMENSIONS BETWEEN POOL FLOOR AND WALL*

Pool Depth	2'0"	2'6"	3'0"	3'6"	4'0"	4'6"	5'0"	>5'0"
Minimum Side Wall Vertical Depth	1'6"	1'10"	2'2"	2'6"	2'10"	3'2"	3'6"	>3'6"
Maximum Radius of Curvature	6"	8"	10"	12"	1'2"	1'4"	1'6"	**Maximum radius equals pool depth minus the vertical wall depth

Note:

*For pool depths which fall between the depths listed, values can be interpolated.

**Radius of coving cannot intrude into pool within diving envelope or deep water entry area for attractions entering above pool water level.

(vi) Provision of diving envelopes in pools or areas of pools designated for diving activities to include:

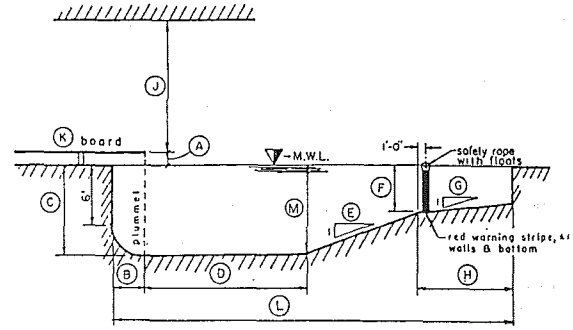
(A) A diving envelope of no less than the CNCA standard configuration* noted in Figure 1 of this section in areas where user would enter from deck level, diving board, or platform at a height of less than one-half meter (twenty inches).

Note:

*This requirement is based on a standard described in CNCA publication "Swimming Pools: a Guide to their Planning, Design, and Operation" 1987. Fourth edition. Human Kinetics Publisher, Inc., Champaign, Illinois. Figure 8.1

FIGURE 1:

Minimum dimensions for pools with provision for diving from deck level or providing boards or platforms at a height less than one-half meter.



Dimension	Minimum	Preferred or Maximum
A Height of board above water		20 in.
B Board overhang	2 ft 6 in.	3 ft
C Depth of water at plumbet	9 ft	10 ft *
D Distance from plumbet to start of upslope	16 ft	18 ft *
E Inclination of upslope of bottom		1:3
F Depth of water at breakpoint	4 ft 6 in.	
G Slope of bottom in shallow portion of pool	1:12	1:15 *
H Length of shallow section of pool	8 ft	14 ft *
I Distance to any overhead structure	13 ft	15 ft *
K Board length		12 ft
L Length of pool	40 ft	50 ft *
M Dimension not less than C minus	6 in.	

Note:

*Values with asterisks are not to be considered as maximums.

**Warning stripe at break point may be of any contrasting color.

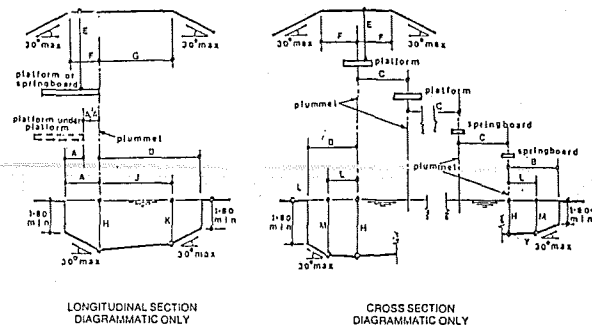
(B) A diving envelope of no less than the FINA standard configuration** noted in Figure 2 of this section in areas where user would enter from diving board or platform at a height of one-half meter (twenty inches) or greater.

Note:

**This requirement is based on a standard described in FINA publication "FINA Handbook - 1986-1988." Constitution and rules governing swimming, diving, water polo, and synchronized swimming, 1986-1988. Edited by E. Allen Harvey, Vancouver, Canada VGN 3R6, Section D, pp. 114-115.

FIGURE 2:

Minimum dimensions for pools with boards or platforms at a height of one-half meter or more.



FINA	Dimensions are in Metres	SPRINGBOARD						PLATFORM								
		1 Metre		3 Metres		1 Metre		3 Metres		5 Metres		7.5 Metres		10 Metres		
DIMENSIONS FOR	LENGTH	4.00		4.00		4.50		5.00		6.00		6.00		6.00		
DIVING FACILITIES	WIDTH	0.50		0.50		0.60		1.50		1.50		1.50		2.00		
Revised to 1st Jan 1987	HEIGHT	1.00		3.00		0.60-1.00		2.60-3.00		5.00		7.50		10.00		
		HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	HORIZ	VERT	
A	From plunnet BACK TO POOL WALL	DESIGNATION	A-1		A-3		A-1P1		A-3P1		A-5		A-7.5		A-10	
		MINIMUM	1.00		1.00		0.75		1.25		1.25		1.50		1.50	
A/A	From plunnet BACK TO PLATFORM Plunnet directly below	DESIGNATION									AA5/1		AA7.5/3/1		AA10/5/3/1	
		MINIMUM									1.50		1.50		1.50	
B	From plunnet to POOL WALL AT SIDE	DESIGNATION	B-1		B-3		B-1p1		B-3p1		B-5		B-7.5		B-10	
		MINIMUM	2.50		3.50		2.30		2.90		4.25		4.50		5.25	
C	From plunnet to ADJACENT PLUNNET	DESIGNATION	C-1/1		C-3/3/1		C-1/1p1		C-3/1P1/3p1		C-5/3/1		C-7.5/5/3/1		C-10/7.5/5/3/1	
		MINIMUM	2.40		2.60		1.65		2.10		2.50		2.50		2.75	
D	From plunnet to POOL WALL AHEAD	DESIGNATION	D-1		D-3		D-1p1		D-3p1		D-5		D-7.5		D-10	
		MINIMUM	9.00		10.25		8.00		9.50		10.25		11.00		13.50	
E	On plunnet, from BOARD TO CEILING	DESIGNATION	E-1		E-3		E-1p1		E-3p1		E-5		E-7.5		E-10	
		MINIMUM	5.00		5.00		3.50		3.50		3.50		3.50		5.00	
F	CLEAR OVERHEAD behind and each side of plunnet	DESIGNATION	F-1	E-1	F-3	E-3	F-1p1	E-1p1	F-3p1	E-3p1	F-5	E-5	F-7.5	E-7.5	F-10	E-10
		MINIMUM	2.50	5.00	2.50	5.00	2.75	3.50	2.75	3.50	2.75	3.50	2.75	3.50	2.75	5.00
G	CLEAR OVERHEAD ahead of plunnet	DESIGNATION	C-1	E-1	C-3	E-3	6-1p1	E-1p1	6-3p1	E-3p1	6-5	E-5	6-7.5	E-7.5	6-10	E-10
		MINIMUM	5.00	5.00	5.00	5.00	5.00	3.50	5.00	3.50	5.00	3.50	5.00	3.50	6.00	5.00
H	DEPTH OF WATER at plunnet	DESIGNATION	H-1		H-3		H-1p1		H-3p1		H-5		H-7.5		H-10	
		MINIMUM	3.50		3.00		3.30		3.60		3.00		4.50		5.00	
J	DISTANCE AND DEPTH ahead of plunnet	DESIGNATION	J-1	K-1	J-3	K-3	J-1p1	K-1p1	J-3p1	K-3p1	J-5	K-5	J-7.5	K-7.5	J-10	K-10
		MINIMUM	5.00	3.40	6.00	3.70	5.00	3.20	6.00	3.50	6.20	3.70	8.00	4.40	11.00	4.75
L	DISTANCE AND DEPTH each side of plunnet	DESIGNATION	L-1	M-1	L-3	M-3	L-1p1	M-1p1	L-3p1	M-3p1	L-5	M-5	L-7.5	M-7.5	L-10	M-10
		MINIMUM	1.50	3.40	2.00	3.70	1.40	3.20	1.00	3.50	4.25	3.70	4.50	4.40	5.25	4.75
K	MAXIMUM SLOPE TO REDUCE DIMENSIONS beyond full requirements	POOL DEPTH	30 degrees		NOTE		Dimensions C (plunnet to adjacent plunnet) apply for Platform									
		CEILING HT	30 degrees				with widths as detailed. For wider Platforms increase C by									
							half the additional width(s)									

(d) Have adequate handholds around the perimeter in pools designed for extended swimming and bathing activity and excluding wave pools; and

(e) Stairs, ladders, or stepholes with:

(i) Stairs, when provided, meeting the following construction requirements:

(A) Treads of a nonslip finish;

(B) Stair tread edges colored to contrast with the color of the pool and clearly visible to the users;

(C) Recessed in pool areas used for lap swimming or provided with wave action; and

(D) Equipped with handrails extending over the edge of the deck.

(ii) Ladders or stepholes which:

(A) Furnish exit from pools greater than four feet in depth except in landing pools bringing the user toward a shallow area after entering the water;

(B) Are spaced a minimum of one for every fifty feet of pool perimeter greater than four feet deep;

(C) Are provided at both sides of the deep end in pools over thirty feet in width; and

(D) Are equipped with a handrail at the top of both sides extending over the coping or edge of the deck.

(iii) User access at the shallow end of pool.

(6) Owners shall ensure treatment turnover at rates no less than designated as follows:

(a) In receiving pools for water slides, water tubes, inner tube rides, speed slides or tubes, drop slides or tubes, and kiddie flume slides, treatment turnover time can be based on any of the following:

(i) Total attraction volume in one-hour period;

(ii) Treatment turnover equals design peak usage (maximum users per hour) expressed in gpm;

(iii) A rate of one hour for 20,000 gallons per two or less attraction segments. Treatment turnover times may increase proportionately for larger pool volumes per two or less attraction segments;

(iv) Alternative methods where provisions to reduce contaminants are justified to the satisfaction of the department or local health officer; and

(v) Treatment turnover times not to exceed six hours.

(b) For wave pools, a minimum treatment turnover time of two hours; and

(c) For activity pools, a minimum treatment turnover time of four hours.

(7) Owners shall provide pool inlets which are:

(a) Submerged and located to produce uniform circulation of water and chemicals throughout the pool; and

(b) Located on the bottoms of pools greater than two thousand five hundred square feet, unless otherwise justified by the engineer to the satisfaction of the department or local health officer.

(8) Owners shall provide pool outlets with:

(a) Overflow and main drain with each designed to carry one hundred percent of total recirculation filter flow;

(b) Overflow outlets that have:

(i) Design to maintain a minimum of sixty percent of filter recirculation flow at all times;

(ii) An overflow channel on the pool perimeter to promote uniform circulation and skimming action of the upper water layer for pools greater than twenty-five hundred square feet, with:

(A) Design preventing matter entering channel from returning to the pool;

(B) Dimensions minimizing the hazard for bathers, such as catching arms or feet in an overflow channel;

(C) 0.01 foot slope per foot or more;

(D) Drains sufficiently spaced and sized to collect and remove overflow water to return line to filter where applicable;

(E) Size sufficient to carry one hundred percent of the recirculation flow plus the surge flow equivalent to one-fifth of the balancing tank expressed in gallons per minute.

(iii) Skimmers, when used on pools up to twenty-five hundred square feet, if:

(A) Demonstrated to operate properly under design conditions;

(B) Turbulence is not expected to interfere with operation;

(C) Maximum flow rate through skimmers does not exceed four gpm per inch of weir;

(D) Devices are recessed in the wall of the pool so that no part protrudes beyond the plane of the wall into the pool;

(E) The skimmer is equipped with a device to prevent air lock in the recirculation suction line (i.e., an equalizer line); and

(F) The skimmer is equipped with a removable and cleanable screen designed to trap large solids.

(iv) Sidewall channels, when used on pools up to twenty-five hundred square feet, which accept the total recirculation volume of the pool through the upper side of the pool if:

(A) Overall flow through the channel exceeds four times the treatment recirculation rate;

(B) Design of channel prevents entrapment of the user;

(C) Openings of any screens have less than one-half inch slots;

(D) Channel openings do not allow access beyond the pool, except with the use of specific tools requiring their opening;

(E) Open area of grates prevent a suction or entrapment hazard which could be dangerous to the user; and

(F) The channel provides an action pulling water from the top of the pool to remove floatable debris and oils.

(c) Main drains in all pools with:

(i) Location at the low points of the pool;

(ii) A minimum of two main drains spaced not further than twenty feet apart nor closer than six feet or spaced as far as possible from each other in pools less than six feet linear floor distance;

(iii) Total open area of grates preventing a suction or entrapment hazard which could be dangerous to user;

(iv) Flat grate drains having:

(A) Maximum flow of 1.5 feet per second; or

(B) Net area of outlet being at least four times the area of the discharge pipe.

(v) Maximum flow of four feet per second in anti-vortex drains;

(vi) Openings not allowing a sphere over one-half inch in diameter to pass;

(vii) Grate design to withstand forces of users;

(viii) Grates removable only with specific tools; and

(ix) Means to control flow from recirculation pump or balancing tank.

(9) Owners shall maintain recirculation flow which:

(a) Does not exceed six feet per second in suction or valved discharge side of pump; and

(b) Does not exceed ten feet per second in open discharge pipes on the pressure side of the pump or filter discharge. This limit does not apply to the return inlet and the last two feet of pipe leading to the inlet.

(10) Owners shall provide a surge chamber or surge area in RWCFs with an entry pool to:

(a) Accommodate at least two minutes of the total turnover; and

(b) Maintain proper water levels for treatment and operation of the attraction.

(11) Owners having RWCFs with overflow channels requiring balancing tanks shall:

(a) Maintain volume equivalent to fifteen times maximum bathing load expressed in gallons; and

(b) Increase capacity as necessary to provide volume for make-up water and to prevent air lock in the pump suction line.

(12) Owners shall have and maintain recirculation pumps with adequate capacity to:

(a) Provide design flows and pressure for recirculation of the RWCF water over the entire operating pressure of the filter;

(b) Allow proper capacity for backwashing of filters when specified; and

(c) Have self-priming capability when installed above the pool water level.

(13) Where pumps precede the filter, owners shall install hair and lint strainers, which shall:

(a) Be located upstream of recirculation pumps;

(b) Be of corrosion-resistant material sufficiently strong to prevent collapse when clogged;

(c) Have an operable cover; and

(d) Provide valving to isolate the strainer when located below pool water level.

(14) Owners shall provide valves at appropriate locations to allow isolation and maintenance of equipment.

(15) Owners shall provide equipment rooms which:

(a) Enclose pumps, disinfection equipment, filters, and other electrical and mechanical equipment and associated chemicals;

(b) Provide adequate working space and access to perform routine operations;

(c) Provide lighting and ventilation of the equipment room; and

(d) Are not accessible to the public.

(16) Owners shall ensure the source of make-up water and associated piping in the RWCF:

(a) Provides sufficient quantity to replace daily losses from the pool;

(b) Comes from a supply conforming with chapter 246-290 WAC; and

(c) Prevents cross-connections using a minimum air gap of two pipe diameters or approved backflow prevention devices between the make-up water source and the RWCF attraction water or waste water.

(17) Owners shall equip RWCFs with filtration equipment which:

(a) Meets the applicable standards of NSF or equivalent;

(b) Uses acceptable types and filter rates described in Table 5 of this section:

TABLE 5
FILTER TYPES AND ACCEPTABLE RATES

Type of Filter	Range of Acceptable Filter Rate Expressed in gpm/sq. ft.		
	Minimum	Maximum*	
Sand			
Rapid & pressure	—	3	
Pressure high rate	10	18	
Vacuum high rate	10	18	
DE	Continuous feed	Manual feed	
Vacuum	0.8	1.0	2.0
Pressure	1.0	1.35	2.0
Cartridge**			
Applied in temperature ranges:			
<95°F.	—		0.375
>95°F.	—		0.188

Note:

*Filters sized at maximum application rate shall use flow control valves.

**Cartridge filters shall have a nominal micron rating of twenty microns or less.

(c) Has pressure or vacuum gauges for measuring loss of head (pressure) through the filter with minimum of one gauge preceding and one gauge following the filter;

(d) Has a flow indicator to measure treatment turnover; and

(e) Has means of discharging filter backwash to waste with:

(i) Discharge in a manner not creating a public nuisance;

(ii) Disposal in accordance with applicable local law or regulation;

(iii) Minimum air gap of two pipe diameters to prevent cross-connection from waste discharge and recirculation system piping;

(iv) Discharge receptor and piping of sufficient size to accept backwash water and prevent flooding; and

(v) Provisions to monitor filter effluent during backwash.

(18) Owners shall provide disinfection equipment which:

(a) Provides a continuous and effective residual of disinfectant in the water;

(b) Uses a disinfectant with a residual that is easily monitored;

(c) Conforms with NSF standards when liquid or solid feed materials are used;

(d) Has a design feed rate which will provide effective disinfection levels when RWCFs are in use;

(e) Meets the following conditions if chlorine gas is used:

(i) Chlorine rooms shall:

(A) Be above ground level;

(B) Be constructed so all openings or partitions with adjoining rooms are sealed;

(C) Be located with consideration of prevailing winds to dissipate leaked chlorine away from the RWCF;

(D) Have door opening outward only and to the out-of-doors.

(ii) Mechanical exhaust ventilation of the chlorine room including:

(A) Air inlet located as far as possible from fan intake to promote good air circulation patterns;

(B) Minimum of one air change per minute in the chlorine room when fan is operating;

(C) A remote switch outside the room or a door-activated switch to turn on fan prior to entering;

(D) Suction for fan near the floor; and

(E) Exhaust for fan and chlorinator vent located to prevent contaminating air intakes or prevent undue hazard for the users of the RWCF.

(iii) Gas chlorine systems which:

(A) Are vacuum injection type, with vacuum actuated cylinder regulators; and

(B) Provide adequate-sized backflow and anti-siphon protection at the ejector.

(iv) Breathing protection available in an accessible area for the operator outside of the chlorine room including:

(A) Instructions about limitations with chlorine concentrations and concentrations of oxygen if chlorine-type canister masks are used; and

(B) Self-contained breathing apparatus designed for use in a chlorine atmosphere as preferred equipment for working with chlorine leaks.

(v) Means for automatic shutoff when the recirculation filter pump is off or flow to the pool is interrupted;

(vi) Chlorine gas cylinders shall:

(A) Be stored only in chlorine rooms; and

(B) Not exceed one hundred fifty pounds tare weight per cylinder; except, wave pools, where one-ton cylinders may be used. Only a single, one-ton cylinder shall be stored on the premise at any time.

(19) Owners applying chemicals other than disinfectant shall provide chemical feed equipment with:

(a) Adequate size and design to allow routine cleaning and maintenance;

(b) Materials resistant to action of the chemicals to be used; and

(c) Means for automatic shut off when the recirculation filter pump is off or flow to the pool is interrupted.

(20) Owners shall have testing equipment to provide means for measuring disinfectant residuals, pH, alkalinity, and any other chemicals used routinely in the RWCF water. In pools where compressed chlorine gas is used, means to detect leaks shall be provided, i.e., use of proper strength ammonia vapor.

(21) Owners shall provide easily accessible change room facilities at all RWCFs with:

(a) Dressing rooms, showers, toilets, urinals, and sinks;

(b) Change room design including:

(i) Separate facilities for both sexes;

(ii) Floors of a nonslip finish with suitable drains;

(iii) Junctions between walls and floors coved for ease of cleaning;

(iv) Adequate ventilation to prevent build-up of moisture in the facility; and

(v) Provisions to minimize cross traffic with nonusers.

(c) Plumbing fixtures as described in Table 6 of this section.

TABLE 6
MINIMUM PLUMBING FIXTURE REQUIREMENTS
BASED ON MAXIMUM PEAK PERIOD OCCUPANCY

Type of Fixture	Occupancy/Sex	Number of Fixtures Required Per Occupancy Load	
		Male	Female
1. Toilets	First 600	1/200	1/100
	Portion exceeding 600	1/450	1/300
2. Urinals	First 600	1/200	-
	Portion exceeding 600	1/450	-
3. Showers	First 300	1/100	1/100
	Portion exceeding 300	1/200	1/200
4. Sinks	First 400	1/200	1/200
	Next 350	1/350	1/350
	Portion exceeding 750	1/500	1/500
5. Hose bibs		1 accessible to change rooms	
6. Janitor sink		1 within the RWCF	

(d) Showers:

(i) Delivering water at a temperature range between ninety and one hundred ten degrees Fahrenheit; and

(ii) Providing liquid or powdered soap in nonglass dispensers.

(e) Flush toilets and toilet tissue in dispensers;

(f) Sinks providing:

(i) Tempered or hot and cold running water,

(ii) Liquid or powdered soap in nonglass dispensers, and

(iii) Disposable towels or electric hand dryers.

(g) Sewage disposed of in a manner approved by the department or local health officer; and

(h) Hose bibs with vacuum breakers provided at convenient locations.

(22) Owners shall design and maintain lighting at RWCF attractions or change rooms to:

(a) Illuminate indoor attractions, outdoor attractions used after dusk, or change rooms with a minimum lighting intensity maintained thirty inches above any walking surface, pool deck, or pool area of:

(i) Thirty foot-candles at indoor facilities;

(ii) Fifteen foot-candles at outdoor facilities; or

(iii) Twenty foot-candles in change rooms.

(b) Allow lifeguards or attendants to clearly see every part of pool waters and walking surfaces; and

(c) Meet any additional lighting requirements deemed necessary by the department or local health officer.

(23) Owners shall provide first aid facilities in every RWCF including:

(a) A twenty-four package first aid kit per WAC 296-24-065;

(b) Two or more blankets reserved for emergency use;

(c) A telephone with a prominently displayed list of emergency medical service response numbers;

(d) A backboard meeting the specifications of the ARC; and

(e) Sufficient and suitable area to accommodate persons requiring treatment and necessary first aid equipment.

(24) Owners shall provide signs at RWCF entrances and change rooms. Any combination of words, pictures, or symbols may be used to convey the following conditions:

(a) Prohibition of use by persons with communicable diseases;

(b) Prohibition of use by persons under the influence of alcohol or drugs;

(c) Requirement for a cleansing shower before entering the attractions;

(d) Warning that persons refusing to obey the attendants are subject to removal from the premises; and

(e) Prohibition of food and drink in pool, change room, or on walking surfaces.

(25) If owners allow or make provision for food service:

(a) Food and beverage sale and consumption areas shall be separate from pool, change room, and walking surfaces;

(b) Trash containers shall be provided; and

(c) No glass containers shall be allowed in the RWCF.

(26) Owners shall prevent users or spectators access to mechanical, electrical, or chemical equipment facilities.

(27) Owners shall provide an operable drinking fountain of the angle jet type design meeting the requirements of the American Standards Association.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-060, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-070, filed 6/22/88.]

WAC 246-262-070 Specific design, construction, and equipment. (1) Owners shall provide specific design, construction, and equipment for the various types of RWCF attractions.

(2) Owners and manufacturers shall ensure adherence to recognized design and construction standards including, but not limited to:

(a) ASTM F-24 Standards on Amusement Rides and Devices;

(b) "Suggested Health and Safety Guidelines for Recreational Water Slide Flumes" U.S. Department of Health and Human Services, Centers for Disease Control, Atlanta, Georgia, 30333;

(c) "World Waterpark Association Considerations for Operating Safety" published by the World Waterpark Association, 7474 Village Drive, Prairie Village, Kansas, 66208; and

(d) Department recognized or approved guidelines, criteria, or standards.

(3) Owners shall ensure design and construction for water slides or tubes, inner-tube rides, kiddie flumes, or ramp slides meet the following minimum standards:

(a) Flume or tube entry access points shall have:

(i) Means to control unauthorized entrance;

(ii) Handrails or slip-resistant surfaces provided to assist users; and

(iii) Attendant stations which provide:

(A) User entry spacing control;

(B) Attendant line of sight to the attraction; and

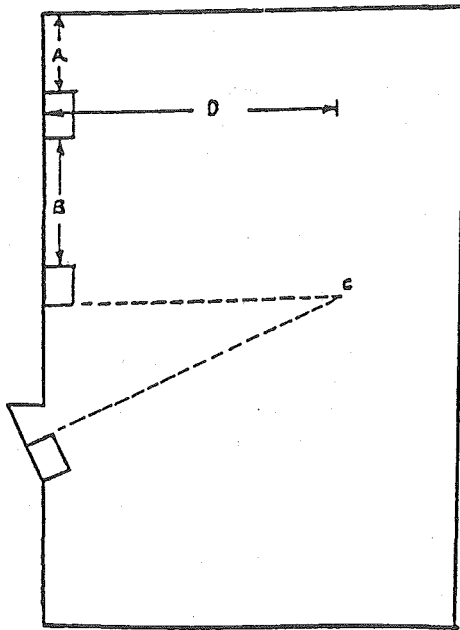
(C) Attendant access to a communication system.

(b) Receiving pools shall have:

(i) Clearances and minimum distances as noted in Figure 3 of this section for tube or flume entrances into pools.

FIGURE 3
MINIMUM CLEARANCES FOR FLUME OR TUBE ENTRY TO RECEIVING POOLS

MINIMUM VALUE	DISTANCE	DESCRIPTION
A	5 feet	Minimum distance from edge of flume to side of pool.
B	6 feet	Minimum distance between sides of parallel flumes.
C	20 feet	Minimum distance between two flumes or tubes that are not parallel shall be so constructed so that the intersecting lines of each closest side does not intersect for a distance of at least twenty feet from the end of each flume.
D	20 feet	Minimum distance where flume terminates to opposite side of pool.



- (ii) Flume or tube sliding surface ending below the pool operating water level when users ride unaided or on mats;
- (iii) Flume or tube perpendicular for a minimum of ten feet to the wall of entry;
- (iv) Handrails, when steps are provided for exiting; and
- (v) Attendant and/or lifeguard stations with:
 - (A) Unobstructed access to users; and
 - (B) Ready access to communication system for contacting control station attendant and first aid personnel.
- (4) Owners shall design and construct barriers to prevent unauthorized entry or exit from any intermediate pool.
- (5) Owners shall ensure design and construction of speed slides meet the following minimum standards:
 - (a) Entry points conforming with subsection (3)(a) of this section;

(b) Roller- or sled-type slides designed to prevent accidental flipping of the sleds or coasters when entering the water;

(c) Provision of sufficient transition zones for deceleration preventing unsafe user impact; and

(d) Maintenance of critical water operation levels providing proper braking action of the user.

(6) Owners shall ensure design and construction of wave pools meet the following minimum standards:

(a) Walls of wave pools shall be vertical with minimum six inch radius of curvature between wall and pool bottom;

(b) Pool bottom sloped:

(i) Not exceeding one foot of drop in twelve feet of run where pool depths range from zero to three and one-half feet; or

(ii) Not exceeding one foot of drop in nine feet of run where depths range from three and one-half feet to six and one-half feet.

(c) Recessed ladders or step holes with vertical grab bars at depths above three and one-half feet:

(i) For emergency exit only;

(ii) Spaced at intervals of fifty feet or less where pool water depths are greater than three and one-half feet. Pool water depths are measured without wave action.

(d) Deck width of at least ten feet along the shallow end;

(e) A fence or restrictive barrier a minimum of forty-two inches in height and at least two feet out from the pool/deck interface at the side walls of wave pools, with emergency exit openings.

(f) Lifeguard station locations appropriate to prevailing conditions;

(g) A push-button system to shut off the wave-making equipment with:

(i) Shut offs installed on sidewall decks and spaced at intervals no greater than one hundred feet, readily accessible to the lifeguards; and

(ii) Shock hazard protection.

(h) A communication system for use by authorized personnel which is clearly audible to all portions of the pool;

(i) A communication system for interaction between authorized personnel; and

(j) Maximum bathing load (users) not to exceed a value equal to $S/12 + D/68$ where:

(i) "S" equals surface area in square feet where depth is less than three and one-half feet;

(ii) "D" equals surface area in square feet where pool depth is three and one-half feet deep or greater; and

(iii) Pool depths are measured without wave action.

(7) If inner tubes, boogie boards, or surf boards are used, the owner shall ensure the design and operation of the wave pool provides for such activity, including:

(a) The establishment of rules for use;

(b) Operating and emergency procedures; and

(c) Crowd control.

(8) Owners shall ensure design and construction of any wading activity pool meets the following minimum standards. Wading activity pool areas are:

(a) Built with maximum water depth of two feet;

(b) Constructed with pool walls so that distance from deck to water level is six inches or less for at least seventy-five percent of the pool perimeter;

(c) Equipped with floors uniformly sloped to drain with a maximum slope of one foot of drop in twelve feet of run;

(d) Separated by at least a four foot high barrier when distance to any water area greater than four feet in depth is less than ten feet; and

(e) Protected from water areas greater than two feet by providing:

(i) A float line separating the two areas;

(ii) A six inch contrasting color line on pool bottom and side walls at float line; and

(iii) A transition zone with a maximum floor slope not exceeding one foot of drop in twelve feet of run.

(9) Owners shall ensure design and construction of drop slides or drop tubes meet the following minimum standards:

(a) Entry in accordance with subsection (3)(a) of this section;

(b) Receiving pool envelope:

(i) Conforming to CNCA standards noted in WAC 246-262-060 (5)(c)(vi)(A) if the point of exit is less than one-half meter (or twenty inches);

(ii) Conforming to FINA standards noted in WAC 246-262-060 (5)(c)(vi)(B) if the point of exit is one-half meter (or twenty inches) or greater.

(iii) Increasing in size to ensure user safety if warranted by angle of entry or speed of the user.

(c) Sufficient distance between slides or tubes to prevent collisions of users. Parallel exits are recommended.

(d) Direct line of sight and direct communication between entry access point and receiving pool.

(10) Owners shall provide signs for specific RWCF attractions. Words, pictures, or symbols may be used to convey the following as appropriate:

(a) Prohibition of running, standing, kneeling, tumbling, horseplay, or stopping in the flumes or tubes;

(b) Failure to follow directions of attendant or failure to obey posted rules may result in removal from the RWCF;

(c) Prohibition of diving from flume;

(d) Prohibition of multiple user chains if applicable to ride;

(e) Requirement to leave the landing area promptly after exiting;

(f) Recommended minimum or maximum age or height for using this attraction; and

(g) Prohibition of head first sliding if applicable to ride.

(h) Additional information on wave pools including:

(i) Warning that wave pools can be very tiring;

(ii) Warning for small children and poor swimmers to use personal flotation devices in designated areas;

(iii) Requirement for adult supervision for children;

(iv) Prohibition of diving, jumping, or entering from sides of pool; and

(v) Prohibition of using surf boards during periods of general public use.

(11) If the proposed attraction design is not addressed by or exceeds limitations of standards and guidelines specified by this section, owners shall submit:

(a) Justification to the department or local health officer prepared by an engineer; and

(b) Information on the construction, maintenance, and operation of the proposed attraction.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-070, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW

[Title 246 WAC—p 298]

43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-080, filed 6/22/88.]

WAC 246-262-080 Operation. (1) Owners shall ensure proper operation to protect the public health and safety of the users and the water quality of the RWCF.

(2) Owners shall prepare and use an operations manual for the RWCF.

(3) Owners shall routinely inspect, maintain, and repair the physical components to:

(a) Ensure all structural facilities are intact and free from corrosion, wear, or stress;

(b) Prevent water ponding on walking surfaces;

(c) Ensure equipment is available and operable including:

(i) Disinfection, filtration, and related equipment;

(ii) Lifesaving equipment; and

(iii) Communication systems.

(4) Owners shall ensure user health and safety by adequately staffing the RWCF during operation. Staffing shall include:

(a) Advanced first aid personnel at all times facility is open to the public;

(b) Lifeguards and/or attendants as appropriate at all times facility is open to the public; and

(c) Water treatment operator as needed.

(5) Owners shall ensure each type of personnel performs the following duties:

(a) Advanced first aid personnel shall provide emergency medical treatment;

(b) Lifeguard shall have sole responsibility for guarding users in area assigned;

(c) Attendants shall have sole responsibility for assuring proper user control in areas assigned; and

(d) Water treatment operator shall oversee water treatment operations and conduct necessary water quality monitoring.

(6) Owners shall ensure each type of personnel meets the designated training requirements:

(a) Advanced first aid personnel with:

(i) A current advanced first aid certification or equivalent or higher levels of training including:

(A) First responder;

(B) Emergency medical technician; or

(C) Paramedic.

(ii) Training on management of spinal injuries in the aquatic environment if lifeguards with lifeguard training are not at the RWCF.

(b) Lifeguards with a current lifeguard certificate through any of the recognized programs in the definition (WAC 246-262-010(23));

(c) Attendants with training determined appropriate by the owner to respond to user safety needs at the attractions, and:

(i) Attendants stationed at shallow pool facilities (less than four feet water depth) with documented training regarding their response in at least the following:

(A) Safety instruction on basic methods of water rescue, reaching, and extension assists;

(B) Cardiopulmonary resuscitation (CPR) and airway management;

- (C) Basic bleeding control;
- (D) Basic fracture management; and
- (E) Specific instruction on management of spinal injuries related to the aquatic environment.

(ii) Attendants stationed at entry access areas with basic training including:

(A) Controlling and supervising users in areas where attendant is responsible;

(B) Controlling timing of user entry rate where appropriate;

(C) Use of communication systems; and

(D) Knowledge of CPR by at least one attendant on duty.

(d) Water treatment operators knowledgeable in pool water chemistry, filters, and pumping equipment; and

(e) When gas chlorine is used, the manager or the operator with specific training in:

(i) Proper operation and maintenance procedures of the chlorination equipment;

(ii) Physical and chemical properties of chlorine gas under pressure;

(iii) Use of emergency safety equipment; and

(iv) Proper first aid procedures and response for accidental inhalation of chlorine gas and leaks.

(7) Owners shall ensure adequate emergency response with:

(a) Lifeguards (and attendants where appropriate) located to provide a response time not to exceed thirty seconds to all users in pools;

(b) Backup lifeguard (or attendant where appropriate) provisions so response time is maintained during multiple rescues;

(c) Lifeguards at all pools. Attendants may substitute for lifeguards at pools less than four feet in depth which:

(i) Are strictly used as receiving pools for attractions where users leave the pool immediately after entering; or

(ii) Are strictly used for wading activity; and

(iii) Attendants meet the training requirements specified in subsection (6)(c)(i) of this section.

(d) Provisions for emergency response drills to meet the response time and actions noted in WAC 246-262-080 including:

(i) Drills at least twice each operating season; and

(ii) Documentation of testing.

(8) Owners shall regulate activities of users and spectators including:

(a) Requirement to obey RWCF rules related to health and safety; and

(b) Warning that failure to comply with rules constitutes grounds for exclusion from the premises or management action as necessary.

(9) Owners shall ensure RWCF user control in specific attractions by requiring:

(a) On speed slides, completion of the ride by one user before allowing another user to enter;

(b) On ramp slides, clearing of the slide by one group prior to second group entering; and

(c) On drop slide or tube, clearing of the pool entry area prior to allowing another user to enter.

(10) Owners shall monitor various environmental conditions which affect facility safety. Weather conditions, including electrical storms, fog, wind, sun glare creating

visibility problems, and other such factors shall be evaluated. Appropriate action shall be taken in response to these factors to ensure user safety.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-090, filed 6/22/88.]

WAC 246-262-090 Monitoring, reporting, and record keeping. (1) Owners shall:

(a) Provide information requested by the department or local health officer for statewide injury and illness surveillance reports; and

(b) Notify the department or local health officer within forty-eight hours of any drowning, near drowning, death, or serious injury or illness occurring at the RWCF.

(2) Owners shall monitor and maintain records on the following for at least three years:

(a) Water quality conditions including:

(i) Testing for residual disinfectant concentration three or more different periods daily, except once a day if electronic monitoring and control equipment is provided;

(ii) Hydrogen ion (pH) concentration tested daily;

(iii) Alkalinity monitored at least weekly;

(iv) Any other chemical added to water including alum, algicides, cyanurate compounds, acid, and alkalinity compounds, etc.;

(v) Pressure or vacuum gauge readings; and

(vi) Any gross contamination to the water (i.e., vomiting, feces, etc.).

(b) Routine preventive maintenance provided on all hazardous equipment, e.g., gas chlorination equipment;

(c) Number of users of the facility; and

(d) Credentials, training, and/or certifications required for personnel per WAC 246-262-080 of this chapter.

(3) Owners shall notify the department in the event an incident occurs with a chemical creating a problem of health or safety significance (e.g., chlorine gas leak).

(4) Owners shall make records available for department review upon request.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-100, filed 6/22/88.]

WAC 246-262-100 Inspection. (1) Owners shall permit the department or local health officer to perform on-site inspections as necessary in the discretion of the enforcing agency to ensure compliance with standards in chapter 70.90 RCW and chapter 246-262 WAC.

(2) Employees of the enforcing agency shall provide appropriate identification when entering for purpose of routine inspections.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-110, filed 6/22/88.]

WAC 246-262-110 Advisory committee. The RWCF advisory committee shall:

- (1) Perform functions as specified in accordance with RCW 70.90.130;
- (2) Meet at least one time each year;
- (3) Be composed of representatives as specified in RCW 70.90.130 appointed to staggered two-year terms, the representative from the department shall not be subject to these conditions;
- (4) Select a chairperson every two years;
- (5) Establish department representative as ongoing secretary of the advisory committee; and
- (6) Present an annual report to the board summarizing committee activities.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-120, filed 6/22/88.]

WAC 246-262-120 Enforcement. (1) The department or, if enforcement responsibility has been assigned under a joint plan of operation, the local health officer:

- (a) Shall enforce the rules of chapter 246-262 WAC; or
- (b) May refer cases within their jurisdiction to the local prosecutor's office or office of the attorney general, as appropriate.

(2) When a RWCF is in violation of provisions of chapter 70.90 RCW or the rules of chapter 246-262 WAC, appropriate enforcement action may be initiated by the department, local health officer, local prosecutor's office, or office of the attorney general. Enforcement actions may include any one or a combination of the following:

(a) Informal administrative conferences, convened at the request of the department, local health officer, or owner, to explore facts and resolve problems;

(b) Orders directed to the owner and/or operator of the RWCF and/or the person causing or responsible for the violation of the rules of chapter 246-262 WAC;

(c) Imposition of civil penalties of up to five hundred dollars per violation per day as authorized under RCW 70.90.200;

(d) Denial, suspension, or revocation of operating permits; and

(e) Civil or criminal action initiated by the local prosecutor's office or by the office of the attorney general.

(3) Orders authorized under this section include, but are not limited to, the following:

(a) Orders requiring corrective measures necessary to effect compliance with chapter 246-262 WAC or chapter 70.90 RCW. Such orders may or may not include a compliance schedule; and

(b) Orders to stop work and/or refrain from using any RWCF or portion thereof or improvement thereto until all permits, certifications, and approvals required by statute or rule are obtained.

(4) An order issued under this section shall:

(a) Be in writing;

(b) Name the facility and the person or persons to whom the order is directed;

(c) Briefly describe each action or inaction constituting a violation of chapter 70.90 RCW or the rules of chapter 246-262 WAC;

(d) Specify any required corrective action or forbearance together with a schedule for completing such corrective action, if applicable;

(e) Provide notice, as appropriate, that continued or repeated violation may subject the violator to:

(i) Civil penalties of up to five hundred dollars;

(ii) Denial, suspension, or revocation of the facilities operating permit; or

(iii) Referral to the office of the county prosecutor or attorney general.

(f) Provide the name, business address, and phone number of an appropriate staff person who may be contacted in regard to an order.

(5) Service of an order shall be made:

(a) Personally, unless otherwise provided by law; or

(b) By certified mail return receipt requested.

(6) Under such rules or policies as the department or local health officer may adopt, civil penalties of up to five hundred dollars per violation per day may be assessed against any person violating the provisions of chapter 70.90 RCW or chapter 246-262 WAC.

(7) The department or local health officer shall have cause to deny the application or reapplication for an operating permit or to revoke or suspend a required operating permit of any person who has:

(a) Previously had:

(i) An operating permit suspended or revoked; or

(ii) An application for an operating permit denied for any reason whether in this state or any other state.

(b) Failed or refused to comply with the provisions of chapter 70.90 RCW, chapter 246-262 WAC, or any other statutory provision or rule regulating the construction or operation of a RWCF; or

(c) Obtained or attempted to obtain an operating permit or any other required certificate or approval by fraudulent means or misrepresentation.

(8) For the purposes of subsection (7) of this section, a person shall be defined to include:

(a) Applicant;

(b) Reapplicant;

(c) Permit holder; or

(d) Any individual associated with subsection (8)(a), (b), or (c) of this section including, but not limited to:

(i) Board members,

(ii) Officers,

(iii) Managers,

(iv) Partners,

(v) Association members,

(vi) Employees,

(vii) Agents, and in addition

(viii) Third persons acting with the knowledge of such persons.

(9) The department or local health officer may summarily suspend an operating permit, other required permit, license, or certification without a prior hearing if the department or local health officer:

(a) Finds that public health, safety, or welfare imperatively requires emergency action; and

(b) Incorporates a finding to that effect in its notice or order.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-120, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW

43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-120, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW and RCW 70.90.120. 90-06-049 (Order 040), § 248-97-130, filed 3/2/90, effective 3/2/90. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-130, filed 6/22/88.]

WAC 246-262-130 Notice of decision—Adjudicative proceeding. (1) A hearing requested to contest a local health officer's action shall be governed by the local health jurisdiction's rules for hearings.

(2)(a) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with section 377, chapter 3, Laws of 1991. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(b) A department notice of imposition of a civil fine shall be consistent with section 378, chapter 3, Laws of 1991. A person the department imposes a civil fine on has the right to an adjudicative proceeding to contest the decision.

(c) A license applicant or holder or a person the department imposes a fine on contesting a department decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street, S.E., Mailstop: EY-17, Olympia, WA 98504; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(d) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-130, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-130, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW and RCW 70.90.120. 90-06-049 (Order 040), § 248-97-135, filed 3/2/90, effective 3/2/90.]

WAC 246-262-140 Insurance. (1) As a condition of obtaining and maintaining a valid operating permit, owners shall provide evidence of having liability insurance.

(2) The minimum amount of liability insurance required shall be one hundred thousand dollars combined single limit. The coverage for this insurance shall include:

(a) Bodily injury or death of one or more persons in any one incident from the use of the RWCF.

(b) Tail coverage shall be required twenty-four months beyond the insured period on a "claims made" form of insurance.

(3) A certificate of insurance shall be provided to the department or local health officer at the time of application for operating permit subject to the approval of the risk manager of the state of Washington.

(4) The liability insurance company shall provide the department or local health officer a thirty-day prior notice of

cancellation, alteration, or nonrenewal. This condition shall be stated in the certificate.

(5) If the owner's insurance is cancelled, the operating permit is void and the owner shall cease operation of the RWCF until required insurance is obtained and a valid operating permit is reinstated by the department or local health officer.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-140, filed 6/22/88.]

WAC 246-262-150 Compliance. Existing RWCFs not complying with the design, construction, and equipment requirements outlined in WAC 246-202-060 and 246-262-070 of these regulations may continue in use, provided the facility is operated in continuous compliance of the safety, sanitation, and water quality provisions of chapter 246-292 WAC as outlined in WAC 246-262-050, 246-262-080, 246-262-090, and 246-262-140.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-150, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-150, filed 6/22/88.]

WAC 246-262-160 Variance. The board may grant a variance from requirements of chapter 246-262 WAC if, in the sole discretion of the board, data and/or research provides sufficient evidence that the RWCF (attraction, device, equipment, procedure, etc.), will adequately protect public health and safety, as well as water quality.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-160, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-160, filed 6/22/88.]

WAC 246-262-170 Innovations—Substitutions. The board authorizes the department:

(1) To review new innovations, and if accepted for use, prepare appropriate amendments to chapter 246-262 WAC.

(2) To allow substitution of equipment, facilities, or procedures required by chapter 246-262 WAC when, in the sole discretion of the department, data and/or research provide sufficient evidence that such substitution is equivalent to the requirement and will adequately provide for the protection of the public health and safety of persons using the RWCF.

[Statutory Authority: RCW 70.90.120. 92-02-020 (Order 226B), § 246-262-170, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-262-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.90.120. 88-13-125 (Order 311), § 248-97-170, filed 6/22/88.]

WAC 246-262-990 Fees. (1) The fee for plan review of a new recreational water contact facility containing a single attraction shall be two hundred dollars plus the safety engineer reviewer's cost as billed.

(2) The fee for plan review of a new recreational water contact facility containing more than one attraction shall be two hundred dollars plus the cost of the safety engineer

reviewer's cost as billed plus seventy-five dollars for each attraction.

(3) The fee for review of plans for alterations or modifications of an existing recreational water contact facility shall be the total of direct and indirect costs, not to exceed one-half of the fee for review of a new project.

(4) The annual fee for an operating permit for a recreational water contact facility containing one attraction shall be one hundred seventy-five dollars.

(5) The annual fee for an operating permit for a recreational water contact facility containing more than one attraction shall be one hundred seventy-five dollars for the first attraction plus fifty dollars for each additional attraction up to a maximum fee of three hundred twenty-five dollars.

(6) The department may charge an additional fee of fifty dollars plus associated laboratory costs for inspections beyond those provided under the annual operating permit when necessary due to violations of such items as:

(a) Noncompliance with water quality standards; and

(b) Failure to comply with operational requirements for health and safety.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-262-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-264 WAC

WATER SAFETY TEACHING STATIONS

WAC

246-264-010	Definitions.
246-264-020	Scope of chapter—Size and depth.
246-264-030	Approval for construction.
246-264-040	Drinking fountain.
246-264-050	Plans and specifications—Approval—Notice to local health officer.
246-264-060	Toilet facilities.
246-264-070	Location.
246-264-080	Enclosure and cover.
246-264-090	Rinsing shower.
246-264-100	Foot rinse.
246-264-110	Number of bathers permitted.
246-264-120	Water quality.
246-264-130	Chlorine content.
246-264-140	Water recirculation.
246-264-150	Operation and sanitary control.
246-264-160	Bath house.
246-264-170	First aid.
246-264-180	Emergency telephone list.
246-264-190	Telephone required.
246-264-200	Health menace prohibited.

WAC 246-264-010 Definitions. The term "water safety teaching station" shall mean an artificial pool of water having a depth of twenty-four to thirty-six inches, owned or operated by a public school, a municipality or one of its political subdivisions, together with the appurtenances in connection therewith, which is used to teach water safety and which may be portable.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-010, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-010, filed 6/26/70.]

WAC 246-264-020 Scope of chapter—Size and depth. Water safety teaching stations not more than thirty-six inches in depth and having a surface area not greater

than eight hundred square feet shall comply with the requirements of this chapter. Water safety teaching stations deeper than thirty-six inches or larger than eight hundred square feet shall comply with the requirements for general use pools.

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-020, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-020, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-020, filed 6/26/70.]

WAC 246-264-030 Approval for construction. The design, construction, and equipment of a water safety teaching station must be approved by the department of health, and shall meet the requirements of WAC 246-260-090 (1); (2); (8)(b), (20)(b), (21), (22), (23), (27), (29)(a)(vi), and (30).

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-030, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-030, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-030, filed 6/26/70.]

WAC 246-264-040 Drinking fountain. A drinking fountain shall be provided in the vicinity of the pool.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-040, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-040, filed 6/26/70.]

WAC 246-264-050 Plans and specifications—Approval—Notice to local health officer. Plans and specifications for sites and appurtenances for water safety teaching stations shall be submitted to and receive the approval of the secretary (or authorized representative), of the department of health. Subsequently, the local health officer shall be notified thirty days prior to moving the pool to a new location so that a site inspection can be made by the local health officer: *Provided*, That one day's notice is sufficient when the pool is moved to a site previously and currently approved by the local health department.

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-050, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-050, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-050, filed 6/26/70.]

WAC 246-264-060 Toilet facilities. Toilet facilities shall be provided and be readily accessible to the bathers. A minimum of one toilet for each sex shall be provided.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-060, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-060, filed 6/26/70.]

WAC 246-264-070 Location. Water safety teaching stations shall be so located that an impervious or washable and nonslip surface is immediately adjacent to and circumscribes the pool.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-070, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-070, filed 6/26/70.]

WAC 246-264-080 Enclosure and cover. Unless housed in a building or other protective structure, the water safety teaching station shall be enclosed by a suitable fence

or barrier in conformance with WAC 246-260-090(4) to restrict entrance of unauthorized persons, and shall be covered when not in use.

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-080, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-080, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-080, filed 6/26/70.]

WAC 246-264-090 Rinsing shower. From September through May, a rinsing shower with hot and cold water shall be provided and required for all bathers.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-090, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-090, filed 6/26/70.]

WAC 246-264-100 Foot rinse. A foot rinse or spray shall be used at the entrance to the pool at outdoor locations.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-100, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-100, filed 6/26/70.]

WAC 246-264-110 Number of bathers permitted. The maximum number of bathers permitted within the pool enclosure of water safety teaching stations at any time shall not exceed one bather for each twenty square feet of water surface area.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-110, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-110, filed 6/26/70.]

WAC 246-264-120 Water quality. The water in water safety teaching stations at all times while in use shall meet the requirements pertaining to water quality as outlined in WAC 246-260-070; except, that the turbidity shall not exceed 0.5 JTU (Jackson Turbidity Unit).

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-120, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-120, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-120, filed 6/26/70.]

WAC 246-264-130 Chlorine content. A free chlorine residual of not less than 1.0 parts per million shall be maintained throughout the pool during periods of use.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-130, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-130, filed 6/26/70.]

WAC 246-264-140 Water recirculation. Water safety teaching stations shall be so operated that the entire volume of the pool shall be recirculated in not more than four hours. Recirculation facilities shall comply with WAC 246-260-090 (14)(b)(iii).

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-140, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-140, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-140, filed 6/26/70.]

WAC 246-264-150 Operation and sanitary control. In the operation of water safety teaching stations, the requirement pertaining to operation and sanitary control of

swimming pools as outlined in WAC 246-260-100 (1), (2), (3), (4), (5), (7), (8), and (9) shall apply.

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-150, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-150, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-150, filed 6/26/70.]

WAC 246-264-160 Bath house. Bath house floors and appurtenances as well as walkways shall be scrubbed and kept visibly clean at all times. They shall be disinfected with chlorine solution or other germicides at least daily.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-160, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-160, filed 6/26/70.]

WAC 246-264-170 First aid. Water safety teaching stations shall be equipped with a standard twenty-four-unit first aid kit, which shall be kept filled and readily accessible for emergency use; and two or more blankets reserved for emergency use.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-170, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-170, filed 6/26/70.]

WAC 246-264-180 Emergency telephone list. A telephone number list to include the nearest available doctor, ambulance service, hospital, and police or fire department rescue unit shall be prominently displayed immediately adjacent to the telephone.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-180, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-180, filed 6/26/70.]

WAC 246-264-190 Telephone required. A noncoin operated telephone shall be readily accessible at all pool locations.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-264-190, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-190, filed 6/26/70.]

WAC 246-264-200 Health menace prohibited. No water safety teaching station shall be maintained or operated when such pool is determined by the local health officer, subject to the review of the secretary (or authorized representative), department of health, to constitute a menace to health.

[Statutory Authority: RCW 43.20.050. 92-02-020 (Order 226B), § 246-264-200, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-264-200, filed 12/27/90, effective 1/31/91; Order 34, § 248-132-200, filed 6/26/70.]

Chapter 246-270 WAC

SEWER SYSTEMS—CERTIFICATION OF NECESSITY FOR WATER DISTRICT INVOLVEMENT

WAC

246-270-001	Purpose.
246-270-010	Definitions.
246-270-020	Application content.
246-270-030	Notification of interested parties.
246-270-040	Criteria for necessity.

246-270-050	Notice of decision—Adjudicative proceeding.
246-270-060	Limitation of an approval and a certification of necessity.
246-270-990	Fees.

WAC 246-270-001 Purpose. This regulation prescribes the procedure whereby a water district organized under the provisions of chapter 57.04 RCW may apply for and receive an approval and a certification of necessity from the department in accordance with the provisions of RCW 57.08.065 in order to exercise powers of a sewer district in accordance with the provisions of Title 56 RCW, as now, or hereafter amended. Additionally, this regulation will define the criteria which the department will consider in determining the eligibility of an applicant water district for an approval and a certification of necessity.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-270-001, filed 12/27/90, effective 1/31/91; Order 6, § 248-91-020, filed 10/16/68; Emergency Order 3, § 248-91-020, filed 8/2/68.]

WAC 246-270-010 Definitions. For purposes of this chapter, the following definitions are applicable:

(1) "Approval and a certification of necessity" shall mean an order of the department which gives approval to a water district to establish, maintain, construct and operate a sewer system in a proposed service area in accordance with RCW 57.08.065.

(2) "Board" shall mean the Washington state board of health.

(3) "Department" shall mean the Washington state department of health.

(4) "Drainage basin" shall mean a geographic area drained by a surface stream or body of impounded water together with all tributary surface streams and bodies of impounded surface water.

(5) "Industrial wastes" shall mean the liquids, solids, or other wastes resulting from any process of industry, or from the development of any natural resource.

(6) "Necessity" shall mean a reasonable need and not mean an indispensable need.

(7) "Proposed service area" shall mean the area proposed to be served with a sewer system by the applicant water district.

(8) "Sewage" shall mean the water-carried waste products or discharge from human beings or other wastes from residences, public or private buildings, or industrial plants, together with such ground, surface or storm waters as may be present.

(9) "Sewer entities" shall mean any municipal or public corporations which by law are entitled to construct and operate a sewer system.

(10) "Sewer system" shall mean a system of sewers and appurtenances for the collection, transportation, treatment and disposal of sewage and industrial wastes.

[Statutory Authority: RCW 43.70.040 and 57.08.065, 92-02-018 (Order 224), § 246-270-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-270-010, filed 12/27/90, effective 1/31/91; Order 6, § 248-91-010, filed 10/16/68; Emergency Order 3, § 248-91-010, filed 8/2/68.]

WAC 246-270-020 Application content. An application for an approval and a certification of necessity must be

presented to the department and shall include, but not be limited to, the following considerations:

(1) A general statement of the present and future sewage problems in the proposed area of service.

(2) A consideration of the relationship of the district to contiguous, nearby or overlapping sewer entities.

(3) Service areas considering reasonable drainage basin oriented planning.

(4) Population forecasts as a basis of sewer system design in the proposed service area.

(5) A layout map showing major trunk lines and interceptor lines including the drainage area to be served within and outside of the boundaries of the water district.

(6) The methods of interception and disposal of sewage.

(7) The projected completion time for the sewer system.

(8) An affidavit signed by an officer of the applicant water district, stating that all persons, parties or entities have been given the notice required by WAC 246-270-030.

(9) A summary setting forth the reasons why the applicant water district is better suited to provide a sewer system within the proposed service area than a contiguous or adjacent sewer entity.

[Statutory Authority: RCW 43.70.040 and 57.08.065, 92-02-018 (Order 224), § 246-270-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-270-020, filed 12/27/90, effective 1/31/91; Order 6, § 248-91-030, filed 10/16/68; Emergency Order 3, § 248-91-030, filed 8/2/68.]

WAC 246-270-030 Notification of interested parties.

Prior to the submission of an application to the department for an approval and a certification of necessity, an applicant water district shall:

(1) Notify all the contiguous and affected sewer entities in the area in which the water district is proposing to construct and operate a sewer system that the applicant water district will submit an application for an approval and a certification of necessity, and that the department will consider all written comments and objections submitted to the department from any contiguous and affected sewer entity if the same written comments and objections are received by the department before a date which will be specified by the department.

(2) Notify the county commissioners, county health officer, county engineer, county planning commission and the county boundary review board, if any, in the county of the proposed service area, that the applicant water district will submit an application for an approval and certification of necessity and the department will consider all written comments and objections submitted to the department by any of the same if the written comments and objections are received by the department before a date which will be specified by the department.

(3) The dates for inclusion in the notification provided for in paragraphs (1) and (2) hereof will be furnished by the department upon the request of any applicant water district to the department.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-270-030, filed 12/27/90, effective 1/31/91; Order 6, § 248-91-040, filed 10/16/68; Emergency Order 3, § 248-91-040, filed 8/2/68.]

WAC 246-270-040 Criteria for necessity. The department will issue an approval and a certification of

necessity to an applicant water district if all of the following conditions are satisfied:

(1) The granting of an approval and a certification of necessity will eliminate or alleviate an existing or imminent health problem as determined by the department.

(2) A sewer system does not exist in a substantial portion of the proposed service area and no regularly constituted and established sewer entity intends to construct and operate a sewer system in a substantial portion of the proposed service area within the reasonably foreseeable future.

(3) The proposed service area conforms to any or all established sewage drainage basins designated pursuant to RCW 90.48.270.

(4) The proposed service area conforms to any or all established comprehensive plans for sewage drainage basins, established pursuant to RCW 90.48.280.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-270-040, filed 12/27/90, effective 1/31/91; Order 6, § 248-91-050, filed 10/16/68; Emergency Order 3, § 248-91-050, filed 8/2/68.]

WAC 246-270-050 Notice of decision—Adjudicative proceeding. (1) The department's notice of a denial, suspension, modification, or revocation of an approval and certificate of necessity shall be consistent with RCW 43.70.115. An applicant or certificate holder has the right to an adjudicative proceeding to contest the decision.

(2) A certificate applicant or holder contesting a department certificate decision shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved;

(ii) The grounds for contesting the department decision; and

(iii) A copy of the contested department decision.

(3) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 43.70.040, 34.05.220 and 57.08.065. 92-02-018 (Order 224), § 246-270-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-270-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 1st ex.s. c 9 § 106. 90-06-019 (Order 039), § 248-91-060, filed 2/28/90, effective 3/1/90; Order 6, § 248-91-060, filed 10/16/68; Emergency Order 3, § 248-91-060, filed 8/2/68.]

WAC 246-270-060 Limitation of an approval and a certification of necessity. The granting of an approval and a certification of necessity by the department shall only constitute approval to establish, maintain, construct, and operate a sewer system within the proposed service area requested in the initial application for an approval and a certification of necessity, and shall in no way constitute approval or authority to establish, maintain, construct and

operate a sewer system in any area which may be annexed at some future time by the applicant water district.

The granting of an approval and a certification of necessity by the department does not constitute approval of the engineering report or plans and specifications of any sewer system, and all plans and specifications and the proposed method of operation and maintenance for any sewer system must be approved by the department pursuant to WAC 246-271-050.

[Statutory Authority: RCW 43.70.040 and 57.08.065. 92-02-018 (Order 224), § 246-270-060, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-270-060, filed 12/27/90, effective 1/31/91; Order 6, § 248-91-070, filed 10/16/68.]

WAC 246-270-990 Fees. The minimum fee for required written approval and certification of necessity shall be two hundred dollars. If review time exceeds four hours, fifty dollars for each additional hour or part of an hour shall be added to the minimum fee.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-270-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-271 WAC PUBLIC SEWAGE

WAC

246-271-010	Definitions.
246-271-020	Prohibited methods of sewage disposal.
246-271-030	Investigative and order powers of secretary.
246-271-040	Plans for sewage systems.
246-271-050	Plans for sewage treatment works.
246-271-060	Plans for sewage treatment works—Requirements for engineers.
246-271-070	Operation of sewage treatment plants—Efficiency.
246-271-080	Operation of sewage treatment plants—Freedom from sand and silt.
246-271-090	Operation of sewage treatment plants—Disinfection.
246-271-100	Irrigation with sewage.
246-271-110	Use of sewage sludge for fertilizer.
246-271-120	Adoption of appendix details as rules.
246-271-130	Appendix—Definitions.
246-271-140	Appendix—Report—Sewage system.
246-271-150	Appendix—General layout map.
246-271-160	Appendix—Plot plan.
246-271-170	Appendix—Engineering report—Sewage treatment works.
246-271-180	Appendix—Preliminary report, industrial waste treatment works.
246-271-990	Fees.

WAC 246-271-010 Definitions. For the purpose of these rules and regulations, the terms shall have the meaning as defined in the appendix.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-271-010, filed 12/27/90, effective 1/31/91; Regulation .92.001, effective 3/11/60.]

WAC 246-271-020 Prohibited methods of sewage disposal. No sewage or industrial waste, or components thereof, shall be placed or permitted to be placed, or permitted to flow onto the surface of the ground, or into any waters of the state in any manner determined by the secretary to be prejudicially affecting a domestic water supply, or otherwise endangering the health and well-being of the people of the state.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-020, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-020, filed 12/27/90, effective 1/31/91; Regulation .92.010, effective 3/11/60.]

WAC 246-271-030 Investigative and order powers of secretary. The secretary shall investigate the methods of sewage and industrial waste disposal and if such may endanger a domestic water supply, or in any other way endanger the health or well-being of the people of the state, the secretary shall issue and enforce such orders as may be necessary to correct the condition.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-030, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-030, filed 12/27/90, effective 1/31/91; Regulation .92.020, effective 3/11/60.]

WAC 246-271-040 Plans for sewage systems. Report, general layout map and specifications - Every owner or authorized representative shall make a comprehensive study of the proposed sewage system and prepare and submit to the department a copy of a report, a general layout map and general construction specifications of the proposed public sewage system. Written approval of this report, general layout map and general construction specifications shall be obtained from the department before any further construction, alterations or additions are made to the system or, in case of a new system, before such system is constructed except as provided in subsection (1) of this section. After such approval has been received the owner shall not be required to submit any further plans and specifications for any part of the sewage system covered by the general layout map except as required by subsections (2), (3), and (4) of this section, but the owner shall notify the department of any portion of the system to be constructed and indicate its position on the approved general layout map. (The specifications may be submitted at the time of notification of construction.) The report and general layout map shall include but not be limited to the items listed under those headings in the appendix.

(1) In lieu of an approved report, general layout map, and specifications, any owner or authorized representative shall submit a copy of a report, a plot plan, and specifications of each new sewage system or alterations or additions to any existing sewage system and receive written approval before construction is started. The report and plot plan shall include but not be limited to those items listed in the appendix.

(2) Whether or not a report and general layout map have been approved, if the system does not include adequate sewage treatment works as determined by the department, written approval for the construction of each addition or alteration of the sewage system must be obtained from the department before construction is started.

(3) In case an addition is to be made to a sewage system and this addition is not a part of an approved general layout map, the owner shall submit a copy of a revised general layout map or a plot plan of the area to the department and receive written approval before construction is started.

(4) Every owner shall submit a set of detailed plans and specifications of all overflow or bypass structures, pipe

outlets and pumping stations with overflow structures, showing the quantities of flow for which they are designed and shall receive written approval from the department before construction is started.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-040, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-040, filed 12/27/90, effective 1/31/91; Regulation .92.030, effective 3/11/60.]

WAC 246-271-050 Plans for sewage treatment works. Engineering report of sewage treatment works - Before detailed plans and specifications for new sewage treatment works or major extensions, alterations or improvements to existing sewage treatment works are prepared, every owner or authorized agent shall submit one copy of a preliminary engineering report to the department and receive written approval. This report shall include the items listed under "scope of the engineering report" in the appendix.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-050, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-050, filed 12/27/90, effective 1/31/91; Order 72, § 248-92-040, filed 4/11/72; Regulation .92.040, effective 3/11/60.]

WAC 246-271-060 Plans for sewage treatment works—Requirements for engineers. All plans for new sewage treatment plants, major changes or additions to existing systems or plants shall be prepared under the supervision of a professional engineer licensed in accordance with chapter 283, Laws of 1947 (chapter 18.43 RCW). All copies of plans submitted to the department for review shall bear the seal of the professional engineer under whose supervision they have been prepared.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-060, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-060, filed 12/27/90, effective 1/31/91; Regulation .92.050, effective 3/11/60.]

WAC 246-271-070 Operation of sewage treatment plants—Efficiency. (1) **Efficient operation -** All sewage treatment plants shall be operated at their highest practical efficiency at all times. If, after investigation by the department, it is determined that any sewage treatment works is, because of defective design, inadequacy, incompetent supervision or inefficient operation, causing unsatisfactory conditions in the waters into which the effluent is discharged or otherwise interfering with the legitimate uses of such waters or causes a menace to public health, the owner shall make such changes in the plant or its operation as are necessary to produce satisfactory results. These changes shall be made within such time limits as are set by the department.

(2) **Records -** The owner shall make such tests and keep such records as are necessary to assure the effective operation of the sewage treatment works, and such records shall be made available to the department.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-070, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-070, filed 12/27/90, effective 1/31/91; Regulation .92.060, effective 3/11/60.]

WAC 246-271-080 Operation of sewage treatment plants—Freedom from sand and silt. All sewage systems

shall be kept free from obstructions and deposits of sand and silt. All pumping stations in the sewage system shall be effectively maintained to insure continuous operation.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-080, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-080, filed 12/27/90, effective 1/31/91; Regulation .92.070, effective 3/11/60.]

WAC 246-271-090 Operation of sewage treatment plants—Disinfection. Effective disinfection of sewage discharges shall be provided in accordance with the determination of the department. If at any time effective disinfection cannot be accomplished due to the breakdown of equipment or the need for bypassing raw or partially treated sewage, or any other reason, the owner shall immediately notify the department by telephone or by facsimile machine.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-090, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-090, filed 12/27/90, effective 1/31/91; Regulation .92.080, effective 3/11/60.]

WAC 246-271-100 Irrigation with sewage. Raw sewage, or treatment plant effluent, shall not be used for irrigation, except under conditions as may be prescribed by the department.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-100, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-100, filed 12/27/90, effective 1/31/91; Regulation .92.090, effective 3/11/60.]

WAC 246-271-110 Use of sewage sludge for fertilizer. The use of sewage sludge for fertilizing material shall be in compliance with the limitations and procedures as may be prescribed by the department; and the owner shall notify the department of any intended use of sludge as a fertilizing material.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-110, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-110, filed 12/27/90, effective 1/31/91; Regulation .92.100, effective 3/11/60.]

WAC 246-271-120 Adoption of appendix details as rules. This appendix contains details referred to in the rules and regulations and is adopted as a part of these rules and regulations.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-271-120, filed 12/27/90, effective 1/31/91; Appendix to Public Sewage Rules, effective 3/11/60.]

WAC 246-271-130 Appendix—Definitions. (1) "Department" - Washington state department of health.

(2) "Detailed plans" of sewage systems - Plans used for the construction of any sewer or sewer system.

(3) "Final plans" of sewage treatment works - Plans used for the construction of any sewage treatment works.

(4) "Industrial wastes" - The liquids, solids, or other wastes resulting from any process of industry, or from the development of any natural resource.

(5) "Industrial waste treatment works" - An arrangement of devices and structures for treating industrial wastes.

(6) "Owner" - The state, county, city, town, village, corporation, firm, company, institution, person or persons

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owning or operating any sewage system, sewage treatment plant, or industrial waste disposal system or treatment plant.

(7) "Pipe outlet" - A pipe line which conveys the effluent from a reservoir, sewage treatment plant, or other structure to its point of discharge.

(8) "Pumping station" - A station housing sewage pumps, and their appurtenances.

(9) "Secretary" - Secretary of the Washington state department of health or the secretary's authorized designee.

(10) "Sewage" - The water-carried waste products or discharge from human beings or other wastes from residences, public or private buildings, together with such ground, surface or storm water as may be present.

(11) "Sewage system" - A system of sewers and appurtenances for the collection, transportation, and pumping of sewage and industrial wastes.

(12) "Sewage treatment works" - An arrangement of devices and structures for treating sewage, industrial wastes, and sludge. Sometimes used as synonymous with sewage treatment plant.

(13) "Sewage works" - A comprehensive term which includes facilities for collecting, pumping, treating, and disposing of sewage; the sewage system and the sewage treatment works.

(14) "Sewer" - A pipe or conduit; generally closed, but normally not flowing full, for carrying sewage and other waste liquids.

(15) "Sewer outlet" - The point of final discharge of sewage or treatment plant effluent.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-130, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-130, filed 12/27/90, effective 1/31/91; Public Sewage Appendix, effective 3/11/60.]

WAC 246-271-140 Appendix—Report—Sewage system. The "report" shall include: -

(1) A description of the nature and extent of the area included in the present system (if any) and the area and extent to which plans provide sewage works for future development.

(2) The population trend and an estimate of future population to be served.

(3) A statement regarding the present and expected future quantity and character of sewage, including any industrial wastes which may be present or expected in the sewage system.

(4) A discussion of limitations placed on infiltration and the infiltration problem.

(5) A statement regarding provisions for treatment.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-140, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-140, filed 12/27/90, effective 1/31/91; Public Sewage Appendix, effective 3/11/60.]

WAC 246-271-150 Appendix—General layout map. The general layout map shall include the following items:

(1) **Boundaries** - The boundary lines of the municipality or sewer district to be sewerred.

(2) **Existing sewers** - The location, size and direction of flow of all existing sanitary or combined trunk sewers and the boundaries of the areas served by each.

(3) **Proposed sewers** - The location, size and direction of flow of all proposed trunk sewers and the boundaries of the areas to be served by each.

(4) **Existing and proposed pump stations** - Location of all existing and proposed pumping stations designated to distinguish between those existing and proposed.

(5) **Topography and elevations** - Topography showing pertinent ground elevations and including existing and proposed streets, if such information is available.

(6) **Streams, lakes and other bodies of water** - The location and direction of flow of major streams and the high and low elevations of all water surfaces at sewer outlets and overflows.

(7) **Public water supplies** - The location of wells or other sources of public water supply, water storage reservoirs, and other structures of public health significance.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-271-150, filed 12/27/90, effective 1/31/91; Public Sewage Appendix, effective 3/11/60.]

WAC 246-271-160 Appendix—Plot plan. The plot plan shall include: -

(1) **Boundaries** - The boundary lines of the area involved.

(2) **Sewer lines** - All sewer lines and their tie-in with the existing system.

(3) **Other data** - Elevations, slopes, pipe sizes, and manhole spacings.

(4) **Public water supplies** - The location of wells or other sources of public water supply, water storage reservoirs, and other structures of public health significance.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-271-160, filed 12/27/90, effective 1/31/91; Public Sewage Appendix, effective 3/11/60.]

WAC 246-271-170 Appendix—Engineering report—Sewage treatment works. The engineering report for the sewage treatment works shall include the following items together with any other relevant data -

(1) The purpose and need for the proposed project.

(2) The nature and extent of the area included in the present system and the area and extent to which plans provide sewage works for future development. If the area to be served by existing and proposed sewers does not include the entire municipality, sewer district, or natural drainage area, give a brief description of that portion not included, together with information as to the probability of future development, and the method by which this area can be served by treatment works.

(3) The population trend as indicated by available records, and give the estimated future population for the design period. Describe briefly the method used to determine future population trends.

(4) Any existing sewage treatment works as they are related to the proposed project.

(5) Discuss the location of water supply and distribution structures as they relate to the various portions of the proposed sewage works.

(6) The considerations given to possibility of garbage disposal in sewage works.

(7) List of all establishments producing appreciable quantities of industrial wastes and the quantity, production periods, and character of industrial wastes in so far as they may affect the sewerage system or sewage treatment works. Consideration shall be given to future industrial expansion.

(8) The degree of treatment proposed based upon the size, usage and character of the receiving body of water and upon the amount and strength of sewage or waste to be treated and other influencing factors.

(9) The type or types of treatment process proposed based upon the character of sewage or waste to be handled and the degree of treatment required.

(10) Data on the volume and strength of sewage and the design data regarding flow and strength.

(11) The ratio of interception in connection with existing combined sewers, and the quantity expected to be bypassed during storms.

(12) The basic design data of each unit of the treatment works.

(13) Provision for future needs.

(14) Discussion of the various sites available and the advantages of the one recommended. The proximity of residences or developed areas to any treatment works. The relationship of maximum high water to the plant site and various plant units.

(15) Expected efficiencies of each unit and the entire plant, and the character of effluent expected.

(16) A flow diagram showing general layout of various units.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-271-170, filed 12/27/90, effective 1/31/91; Public Sewage Appendix, effective 3/11/60.]

WAC 246-271-180 Appendix—Preliminary report, industrial waste treatment works. The preliminary report on industrial waste disposal or treatment facilities shall include the following items where pertinent -

(1) Type of industry.

(2) Kind and quantity of finished products.

(3) The amount of process waste and its sources.

(4) The quantity of unpolluted water, such as cooling water, etc., and the provision for segregation for separate discharge.

(5) Description of the waste, including if possible a chemical analysis.

(6) The amount and kind of chemicals used in the process, if any.

(7) The basic design data of the treatment units.

(8) All necessary maps and layout sketches, including any flow diagrams.

(9) Results to be expected from the treatment process.

(10) All data necessary to indicate the location of the outlet pipe and method of diffusing the waste into the receiving water.

(11) If any domestic sewage is to be disposed of through the system, a brief description in compliance with the provisions of WAC 246-271-030 should be included.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-271-180, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-271-180, filed 12/27/90, effective 1/31/91; Public Sewage Appendix, effective 3/11/60.]

WAC 246-271-990 Fees. (1) The minimum fee for required review of land application of municipal wastewater shall be two hundred dollars. If review time exceeds four hours, fifty dollars for each additional hour or part of an hour shall be added to the minimum fee.

(2) The minimum fee for required review of comprehensive sewer plans shall be two hundred dollars. If review time exceeds four hours, fifty dollars for each additional hour or part of an hour shall be added to the minimum fee.

[Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-271-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-272 WAC ON-SITE SEWAGE SYSTEM

WAC

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246-272-180	Designer program.
246-272-190	Inspection.
246-272-200	Appeals.
246-272-210	Waiver of state regulations.
246-272-220	Disposal of septic tank waste.
246-272-230	Installer requirements.
246-272-240	State advisory committee.
246-272-990	Fees.

WAC 246-272-001 Authority. Pursuant to the authority of RCW 43.20.050 (powers and duties of state board of health), these regulations are hereby established as minimum requirements of the state board of health governing on-site sewage systems.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-272-001, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-010, filed 6/3/83; Order 101, § 248-96-010, filed 6/10/74.]

WAC 246-272-002 Purpose and objectives. (1) The purpose of these regulations is to assure protection of public health by minimizing:

(a) Public health effects of on-site sewage systems on surface and ground waters, and

(b) Potential for public exposure to sewage.

(2) These regulations provide for a uniform framework through which local boards of health may establish a system of local regulations. Such local regulations shall reflect local conditions and be consistent with the intent of these regulations. These regulations are intended to accomplish the following objectives:

(1992 Ed.)

(a) Establish design, installation, and management requirements for on-site sewage systems to accommodate long-term treatment and disposal of sewage.

(b) Establish minimum functional regulations for local boards of health choosing not to adopt local regulations.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-272-002, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-011, filed 6/3/83; Order 101, § 248-96-011, filed 6/10/74.]

WAC 246-272-005 Administration. The health officer and local board of health shall administer these regulations under the authority and requirements of chapters 70.05, 70.46 and 43.20 RCW. As provided in RCW 70.05.060(7), fees may be charged for this administration.

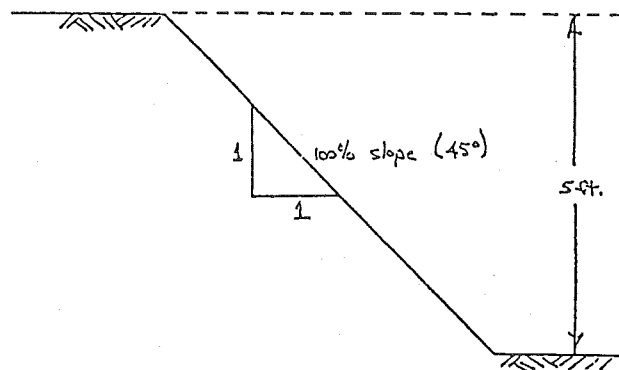
[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-272-005, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-018, filed 6/3/83; Order 101, § 248-96-018, filed 6/10/74.]

WAC 246-272-010 Definitions. (1) "Alternative system" means any on-site sewage system consisting of treatment and/or disposal components other than a septic tank and a subsurface soil absorption system (SSAS).

(2) "Approved" means acceptable by the health officer or department as stated in writing.

(3) "Cover" means soil material that is used to cover a subsurface disposal area.

(4) "Cuts and/or banks" means any naturally occurring or man-formed slope which is greater than one hundred percent (forty-five degrees) and extends vertically at least five feet from the toe of the slope to the top of the slope as follows:



(5) "Department" means the Washington state department of health or health officer if the approval authority for larger on-site sewage systems under WAC 246-272-080 has been delegated by agreement.

(6) "Experimental system" means any alternative on-site system excluding a larger system with no guidelines established by the technical review committee as per WAC 246-272-040.

(7) "Gross land area" means a lot area which is bounded by the centerline of adjoining road or street right-of-ways within the boundaries of the proposed development.

(8) "Ground water" means a subsurface water occupying the zone of saturation, permanently, seasonally, or as the result of the tides, (the top surface of which is commonly referred to as the water table) which may be demonstrated by one or all of the following methods:

(a) Water seeping into or standing in an open excavation from the soil surrounding the excavation.

(b) Spots or blotches of different color or shades of color interspersed with a dominant color in soil, commonly referred to as mottling. This is caused by intermittent periods of saturation and drying, and may be indicative of poor aeration and impeded drainage.

(9) "Health officer" means the health officer of the city, county, or city-county health department or district or a representative authorized by and under the direct supervision of the health officer.

(10) "Larger on-site sewage system" means any on-site sewage system with design flows, at any common point, between 3,500 and 14,500 gallons/day. On-site sewage systems receiving state or federal grants, or systems using mechanical treatment or lagoons with ultimate design flows above 3,500 gallons/day are excluded from this definition. Excluded systems are governed by chapter 173-240 WAC which is administered by the Washington state department of ecology.

(11) "Local board of health" means the city, town, county, city-county, or district board of health as defined in chapters 70.05, 70.08, and 70.46 RCW.

(12) "Marine expansion" means any change to a structure or in the use of a structure that may cause a marine shoreline on-site sewage system to exceed its capacity. Changes that may constitute expansion include, but are not limited to:

(a) An increase in the structure's volume of generated wastewater;

(b) Higher strength of generated sewage; or

(c) Any other change adversely impacting the treatment or disposal of sewage in the existing on-site sewage system or in the replacement area.

(13) "Marine failure" means a marine shoreline on-site sewage system threatening the public health by failing to adequately treat the sewage and/or by creating a potential for the public coming in direct contact with sewage. Examples include, but are not limited to:

(a) Sewage contaminating surface or ground water;

(b) Sewage on the surface of the ground;

(c) Sewage leaking from a wastewater container;

(d) Sewage backing up into a structure or in the on-site sewage system caused by slow absorption of sewage in the SSAS; or

(e) Cesspools or seepage pits in areas of groundwater or surface water quality concerns.

(14) "Marine shoreline" means property adjacent to marine water.

(15) "Nonconforming repair" means the permitted repair or replacement of a marine shoreline on-site sewage system not meeting the definition of a standard marine system.

(16) "On-site sewage system" means any system of piping, treatment devices, or other facilities that convey, store, treat, or dispose of sewage on the property where it originates or on adjacent or nearby property under the control of the user where the system is not connected to a public sewer system.

(17) "Ordinary high-water mark" means the mark on all lakes, streams, and tidal waters, which will be found by examining the beds and banks and ascertaining where the presence and action of waters are so common and usual, and

so long continued in all ordinary years, as to mark upon the soil a character distinct from that of the abutting upland, in respect to vegetation, as that condition exists on the effective date of this chapter, or as it may naturally change thereafter: *Provided*, That in any area where the ordinary high-water mark cannot be found, the ordinary high-water mark adjoining saltwater shall be the line of mean higher high tide and the ordinary high-water mark adjoining freshwater shall be the line of mean high water.

(18) "Percolation test" means a soil test performed at the depth of the bottom of a proposed subsurface soil absorption system estimating the water absorption capability of the soil. The results are normally expressed as the rate in minutes at which one inch of water is absorbed.

(19) "Person" means any individual, corporation, company, association, society, firm, partnership, joint stock company or any branch of state or local government.

(20) "Proprietary device or method" means any device or method classified as an alternative system or a component thereof that is held under a patent, trademark or copyright.

(21) "Public sewer system" means a sewerage system owned or operated by a city, town, municipal corporation, county, political subdivision of the state, or other approved ownership consisting of a collection system and necessary trunks, pumping facilities and a means of final treatment and disposal and approved or under permit from the department of ecology.

(22) "Restrictive layer" means a layer impeding the movement of water, air, and growth of plant roots. Examples of such layers or conditions are groundwater tables, hardpans, claypans, fragipans, compacted soil, bedrock and clayey soil.

(23) "Septic tank" means a watertight pretreatment receptacle receiving the discharge of sewage from a building sewer or sewers, and designed and constructed to permit separation of settleable and floating solids from the liquid, detention and digestion of the organic matter, prior to discharge of the liquid portion.

(24) "Sewage" means the water-carried human or domestic waste from residences, buildings, industrial establishments or other facilities, together with ground water infiltration, that may be present.

(25) "Soil log" means an excavation in soil of sufficient size and depth allowing adequate determinations of the soil's characteristics together with the detailed description of the soil's texture, structure, color, bulk density or compaction, water absorption capabilities or permeability, and/or other characteristics providing information on the soil's capacity to act as an acceptable treatment and disposal medium for sewage.

(26) "Standard marine system" means a marine shoreline on-site sewage system meeting all the WAC 246-272-140 and 246-272-150 requirements, except the following:

(a) The vertical separation shall:

(i) Be three feet when the SSAS is gravity fed;

(ii) Be two feet when the SSAS has pressure distribution per technical review committee guidelines; or

(iii) Meet the technical review committee alternative system guidelines.

(b) A minimum horizontal separation of fifty feet shall exist between the SSAS or other soil absorption component and the ordinary high-water mark.

(27) "Subdivision" means a division of land, as defined in chapter 58.17 RCW, now or as hereafter amended, including both long and short subdivisions.

(28) "Subsurface soil absorption system (SSAS)" means a system consisting of trenches (three feet or less in width) or beds (more than three feet in width), together with the piping and gravel, designed and installed in original undisturbed soil for the purpose of receiving effluent from a septic tank or other pretreatment device and transmitting it into the soil.

(29) "Surface water" means any body of water, whether fresh or marine, flowing or contained in natural or artificial depressions for significant periods of the year. Such bodies include, but are not limited to, natural and artificial lakes, ponds, rivers, streams, swamps, marshes, and tidal waters.

(30) "Treatment standard 1" means a thirty-day average of less than 10 mg/l of BOD5 and 10 mg/l of total suspended solids and a thirty-day geometric mean of less than 200 fecal coliform/100 ml.

(31) "Treatment standard 2" means a thirty-day average of less than 10 mg/l of BOD5 and 10 mg/l of total suspended solids and a thirty-day geometric mean of less than 800 fecal coliform/100 ml.

(32) "Type 1 soil" means soil with a texture as noted in WAC 246-272-110 (Determination of site characteristics) or other soils where conditions are such that the treatment potential is ineffective in retaining and/or removing substances of public health significance to underground sources of drinking water.

(33) "Vertical separation" means the depth of unsaturated, original, undisturbed soil of types 2-6 that exists between the bottom of a SSAS and a restrictive layer or water table.

(34) "Wave barrier" means a bulkhead of adequate height and construction preventing backwash of on-site sewage system components from wave action resulting from inclement weather and/or watercraft during extreme high tides.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-010, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-010, filed 12/27/90, effective 1/31/91. Statutory Authority: 1989 c 349, 89-21-026 (Order 332), § 248-96-020, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 43.20.050, 83-13-014 (Order 259), § 248-96-020, filed 6/3/83; 81-05-028 (Order 208), § 248-96-020, filed 2/18/81; 80-04-038 (Order 196), § 248-96-020, filed 3/20/80; Order 101, § 248-96-020, filed 6/10/74.]

WAC 246-272-020 Local regulation. (1) Local boards of health may adopt local rules and regulations governing on-site sewage systems. Local rules, regulations, and guidelines shall be consistent with, and at least as stringent as, the state board of health regulations. Local rules and regulations and any subsequent revisions shall be approved by the department in accordance with the procedure outlined in subsections (2) through (7) of this section.

Beginning July 1, 1984, the health officer shall begin to enforce these regulations, unless local rules and regulations have been approved by the department and adopted locally. This shall not preclude the adoption of rules and regulations by local boards of health after June, 1984.

(2) Local boards of health shall submit to the department for review and approval a copy of proposed local regulations.

(3) Upon reviewing the local regulations, the department shall consider all factors relevant to the administration of the local health department's program.

(4) The department shall have ninety days from the date of receipt of the local regulations to either approve or disapprove the proposal. Failure of the department to approve or disapprove within the ninety-day period results in the approval of the local regulation.

(5) Locally proposed or adopted regulations or revisions will become effective after the regulations or revisions have received approval from the department or ninety days after receipt by the department, whichever comes first. The local health department shall provide to the department a copy of the adopted local regulations.

(6) If the department determines that the local regulations are not consistent with the purpose and objectives of the state board of health regulations, the department shall provide in writing to the local board of health, the specific reasons for not approving the local regulations. Decisions may be appealed to the state board of health within one hundred twenty days after the disapproval has been received by the local board of health. Resubmission of revised local regulations may occur any time after disapproval has been received.

(7) Local rules and regulations shall include special requirements for areas within their jurisdiction identified as having type 1 soils. The requirements within these regulations shall be commensurate with the degree of protection deemed necessary for the underground source of drinking water by the health officer and the department. The minimum requirement shall be as noted in WAC 246-272-100 (Minimum land area requirement).

(8) Nothing in these regulations shall prohibit the adoption and enforcement of more stringent regulations by local health departments where such regulations are needed to protect the public health.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-020, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-020, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-025, filed 6/3/83.]

WAC 246-272-030 Applicability. These regulations shall apply to all on-site sewage systems except the following:

(1) New construction for which a permit was issued prior to July 1, 1984, or adoption of local regulations and is still valid. The regulations in effect at the time the permit was issued shall apply, except where portions of the new regulations are less stringent;

(2) An extension, alteration, or replacement necessitated by the failure of an existing on-site sewage system and is not on a marine shoreline. These regulations shall be applied to the maximum extent permitted by the site. A permit shall be required as per WAC 246-272-090;

(3) Permit applications for systems located in subdivisions having received preliminary approval or having been filed for record between July 1, 1979, and June 30, 1984 (chapter 58.17 RCW). The regulations in effect at the time preliminary or final approval was given shall apply, unless the local board of health finds a change in conditions creates a serious threat to the public health; and

(4) Facilities constructed or operated in accordance with a permit or approval issued by the Washington state department of ecology. Where these regulations may be in conflict with chapters 90.48 or 70.95B RCW, said RCW shall govern.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-030, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-030, filed 12/27/90, effective 1/31/91. Statutory Authority: 1989 c 349, 89-21-026 (Order 332), § 248-96-040, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 43.20.050, 83-13-014 (Order 259), § 248-96-040, filed 6/3/83; 80-04-038 (Order 196), § 248-96-040, filed 3/20/80; Order 101, § 248-96-040, filed 6/10/74.]

WAC 246-272-040 Alternative systems. (1) The health officer may issue permits for alternative systems only after the requirements of subsections (2) and (3) of this section are completed.

(2) The department shall establish and maintain a technical review committee. The committee shall be composed of a maximum of seven members and consist of qualified representatives. Representatives may be selected from local health departments; consumer organizations; engineering firms; the department of ecology; a public sewer utility; land sales, subdivision and building industries; and other interested organizations. The functions of the committee are to review and evaluate alternative systems and establish guidelines for use. Such guidelines may include national standards including, but not limited to, guidelines of the national sanitation foundation.

(3) Once guidelines for an alternative system have been established by the technical review committee, that system can be permitted for use. However, before a proprietary device or method can be permitted, certification in a manner prescribed by the department must be provided to the department that all criteria in the appropriate guidelines have been satisfied.

(4) The health officer shall require monitoring of the performance of any alternative system installed for which guidelines have been developed. The frequency and duration of monitoring shall be in accordance with guidelines developed by the technical review committee. Costs for monitoring and/or reporting may be included as an addition to the permit fee. Procedures for monitoring and reporting shall be developed by the technical review committee. Copies of any records of such performance evaluation shall be submitted to the department.

(5) The technical review committee shall recommend to the department for approval:

(a) Which alternative systems or combinations of alternative systems meet treatment standard 1 and/or treatment standard 2; and

(b) The operation, maintenance, monitoring, and reporting protocol for each system meeting treatment standard 1 and/or treatment standard 2.

(6) The department shall maintain a list of alternative systems meeting treatment standard 1 and/or treatment standard 2.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-272-040, filed 12/27/90, effective 1/31/91. Statutory Authority: 1989 c 349, 89-21-026 (Order 332), § 248-96-046, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 43.20.050, 83-13-014 (Order 259), § 248-96-046, filed 6/3/83; Order 101, § 248-96-046, filed 6/10/74.]

WAC 246-272-050 Experimental systems. (1) If supportive theory and/or applied research exists, a limited number of specific experimental systems may be permitted. Prior to the installation of such a system, an experimental system permit shall be obtained from the local health officer. Costs for monitoring and reporting may be included as part of the experimental system permit fee.

(2) The use of an experimental system may be considered when:

(a) The experimental system proposed is attempting to correct a failing system and other conventional or alternative systems are not feasible.

(b) The experimental system proposed is for new construction where it has been determined that an on-site sewage system meeting the requirements of these rules and regulations could be installed in the event of failure of the experiment. A recorded agreement shall exist stating that, in the event of unsatisfactory performance or a failure to adequately monitor the system and submit the records to the health officer, the health officer may direct that use of the experimental system be discontinued and a new system meeting the requirements of these regulations be installed.

(3) General guidelines for the use of experimental systems shall be developed by the technical review committee.

(4) The health officer shall require monitoring of the performance of experimental systems in a manner and with a frequency as established by the technical review committee guideline.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-272-050, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-047, filed 6/3/83.]

WAC 246-272-060 No surface discharge. Sewage from any on-site sewage system, excluding septic tank waste as per WAC 246-272-220 (Disposal of septic tank waste), shall not be discharged to surface water or upon the surface of the ground.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-060, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-060, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-050, filed 6/3/83; Order 101, § 248-96-050, filed 6/10/74.]

WAC 246-272-070 Connection to public sewer system. (1) Connection of any existing dwelling unit or other premises with a failing on-site sewage system shall be made to a public sewer system where there is an adequate public sewer within two hundred feet of the dwelling or other facility to be served as measured along the usual or most feasible route of access, and connection is permitted by the sewer utility. This requirement may be waived if the health officer determines that adequate site conditions exist which allow the installation of a replacement on-site sewage system.

(2) Any existing dwelling or other premises served by a nonconforming repair shall be connected to the public sewer system when:

(a) An adequate public sewer becomes available within a distance of two hundred feet of the dwelling or other

facility. The distance shall be measured along the usual or most feasible route of access; and

(b) The sewer connection is permitted by the sewer utility.

(3) Local regulations may provide requirements for connections of new construction to public sewer systems.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-272-070, filed 12/27/90, effective 1/31/91. Statutory Authority: 1989 c 349. 89-21-026 (Order 332), § 248-96-060, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 43.20.050. 83-13-014 (Order 259), § 248-96-060, filed 6/3/83; Order 101, § 248-96-060, filed 6/10/74.]

WAC 246-272-080 Larger on-site sewage systems.

Plans and specifications for new construction or repairs or expansions to existing larger on-site sewage systems, bearing the signature of the owner or an authorized representative, shall be submitted to and approved by the department prior to construction. By a mutual agreement with the department, local health departments may assume plan review and approval authority for larger on-site sewage systems. Where the assistance of the health officer in the review of the site and/or the design is requested by the department, fees for service may be charged to the applicant by the health officer: *Provided*, That the authorization for such fees is set forth in local regulations adopted pursuant to this chapter. Submittals, design, and management requirements shall adhere to the following procedures, requirements, and review documents.

(1) **Preliminary report:** Prior to or concurrent with the preparation of detailed plans and specifications for new construction or improvements to a larger on-site sewage system, the person proposing the larger on-site sewage system shall submit to the department for approval a preliminary report addressing the nature and scope of the proposed construction. This report shall include an analysis of the area where the proposed SSAS is to be located to satisfactorily assimilate and treat the proposed sewage quantities for the anticipated life of the system. In addition to those factors identified in WAC 246-272-100 (1)(b), the preliminary report shall contain, but need not be limited to, consideration of the following factors:

- (a) Soil and site evaluation.
- (b) Schedule for phase development.
- (c) Water balance analysis of the drainfield area.
- (d) Overall effects of the proposed sewage system upon the surrounding area.
- (e) Local zoning, platting, and building requirements as they relate to sewer utilities.

(2) **Submission of plans and specifications:**

(a) Complete plans and specifications fully describing the larger on-site sewage system shall be submitted to and approved in writing by the department prior to:

- (i) Installation of the system, or
- (ii) Entering into contract for installing a larger on-site sewage system.

The plans and specifications shall be adhered to unless deviations are first submitted to and written approval received from the department. Routine field deviations required during construction need not be submitted for approval but shall be shown on the "as-built" drawings.

(b) Plans submitted for approval shall include the proposed provisions for inspection of the work during construction.

(c) A detailed operation and maintenance manual, fully describing the treatment and disposal systems and outlining routine maintenance procedures for proper operation of the system, shall be submitted together with the plans and specifications.

(3) **Approvals—Period of validity—Renewal:**

(a) Approvals of plans and specifications by the department under this section shall be valid for an initial period of two years commencing with the date of the letter of approval.

Lapsed approvals may be renewed for successive one-year periods thereafter at the discretion of the department upon the written request by the applicant.

(b) As a condition of renewal, the department may require the plans and specifications to be revised to conform with the design standards and the requirements of the rules and regulations of this chapter current at the time of request for renewal.

(4) **Requirements for engineers and engineer's construction report:** All preliminary engineering reports and plans and specifications for new larger on-site sewage systems, extensions or alterations, shall be prepared by a professional engineer licensed in the state of Washington in accordance with chapter 18.43 RCW and shall bear the engineer's seal. Within sixty days following the completion of and prior to the use of any project or portion thereof for which plans and specifications have received the approval of the department, an engineer's construction report shall be submitted to the department and signed by a professional engineer stating the project has been constructed in accordance with the plans and specifications approved by the department. If any changes exist from the approved plans and specifications, "as-built" drawings noting such changes shall be submitted to the department. Where larger on-site systems are reviewed and approved by the health officer, the health officer may also accept preliminary reports, plans and specifications, and construction reports submitted by a registered sanitarian or a designer certified within the health officer's jurisdiction. The professional engineer, registered sanitarian, or certified designer should have expertise in the areas of soils and the design of larger on-site sewage systems.

(5) The review and approval agency shall establish a procedure for construction and final inspections.

(6) Design of the system shall comply with Design Guidelines for Larger On-site Sewage Systems, December 1987, D.S.H.S./D.O.E.

(7) Soil interpretations shall be based upon the Design Manual: On-site Wastewater Treatment and Disposal Systems, United States Environmental Protection Agency, EPA-625/1-80-012, October, 1980.

(8) Management of larger on-site systems shall be provided by an entity approved by the department. The type of entity required and the degree of management shall be commensurate with the complexity of the system and the site conditions. The management entity shall submit a plan for approval including, but not be limited to, the following:

(a) Duties of management, including operation and maintenance responsibilities.

- (b) Methods to ensure the continuity and permanency of management's responsibilities.
- (c) Monitoring, recordkeeping, and reporting to the department.
- (d) Rights of purchasers and management.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-080, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-080, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-075, filed 6/3/83; 80-04-038 (Order 196), § 248-96-075, filed 3/20/80; Order 101, § 248-96-075, filed 6/10/74.]

WAC 246-272-090 Permit. (1) No person shall install or cause to be installed a new on-site sewage system, nor perform any alterations, extensions or relocations or connections to an existing system without a valid permit issued by the health officer. Larger on-site sewage systems approved by the department are exempt from permit requirements. Permits for alterations or repairs shall be so identified. Application for such permit shall be made in writing in a manner prescribed by the health officer. Each permit application shall include a reminder of the applicant's right of appeal. The authority to issue permits shall not be delegated by the health officer.

(2) When applying for a permit to install an on-site sewage system, a construction plan of the proposed system is required. The construction plan shall contain information as required by the health officer in sufficient detail and to a scale which will permit a proper evaluation of the application. Such information shall contain the following as a minimum:

- (a) Name of applicant and legal description of site.
- (b) Soil evaluation as required by the health officer.
- (c) Percolation test data where required or if obtained.

- (d) Maximum seasonal ground water table.
- (e) General topography of the site and site drainage characteristics.
- (f) Distances of proposed system to water supply distribution lines and sources, surface water, banks or cuts, boundaries of property and structures or other improvements.
- (g) Distance to public sewer system.
- (h) Source of potable water supply.
- (i) Known encumbrances affecting system placement and/or operation.

(3) For any on-site sewage system proposed to serve a structure requiring a flood control zone permit under the provisions of chapter 86.16 RCW and chapter 508-60 WAC, the installation permit shall not be issued until a flood control zone permit has been issued.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-272-090, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-080, filed 6/3/83; 80-04-038 (Order 196), § 248-96-080, filed 3/20/80; Order 101, § 248-96-080, filed 6/10/74.]

WAC 246-272-100 Minimum land area requirement. (1) For any development approved after June 30, 1984, including but not limited to subdivisions, mobile home parks, multifamily housing, and commercial establishments, where an on-site sewage system is proposed, one of the following methods for determining minimum gross land area requirements shall be used. The minimum gross land area shall exist for each unit volume of sewage (450 gallons per day) or for each single family residence.

(a) **METHOD I. Table I notes the minimum gross land area required per unit volume or single family residence based upon soil type and the type of water supply.**

**TABLE I
MINIMUM GROSS LAND AREA REQUIRED PER UNIT VOLUME OF SEWAGE OR SINGLE FAMILY RESIDENCE**

TYPE OF WATER SUPPLY	SOIL TYPE ¹					
	1	2	3	4	5	6
Public	1 acre	12,500 sq.ft.	15,000 sq.ft.	18,000 sq.ft.	20,000 sq.ft.	22,000 sq.ft.
Individual-Each Lot	2 acres	1 acre	1 acre	1 acre	2 acres	2 acres

¹ Soil types are defined in WAC 246-272-110 (Determination of site characteristics).

(b) **METHOD II.**

(i) On-site sewage systems shall be installed on lots, parcels, or tracts that have a sufficient amount of area with proper soils in which sewage can be retained and treated properly on-site. Justification demonstrating that the development has sufficient area with proper soils to adequately retain and treat sewage on-site shall be provided in a report. The report shall fully support the conclusions reached by the proper analysis of all needed data. All such data shall be contained or referenced. This justification shall be sufficient to enable the health officer to establish minimum gross land area requirements. The minimum gross land area requirement for each unit volume of sewage or for each single family residence shall be twelve thousand five

hundred square feet. Application of this will result in a maximum single family residence density of 3.5 units per acre or for other development a maximum flow density of one thousand five hundred seventy gallons of sewage per acre per day. Factors that must be considered in the report shall include but not be limited to the following:

- (A) Soil type and depth.
- (B) Area drainage, development and/or lot drainage.
- (C) Public health impact on ground and surface water quality.
- (D) Setbacks from property lines, water supplies, etc.
- (E) Source of domestic water.
- (F) Topography, geology, and ground cover.
- (G) Climatic conditions.

- (H) Availability of public sewers.
- (I) Activity or land use, present, and anticipated.
- (J) Growth patterns.
- (K) Reserve areas for additional subsurface disposal.
- (L) Anticipated sewage volume.
- (M) Compliance with zoning and other requirements.
- (N) Possible use of alternative systems or designs.
- (O) Other justification submitted by the developer.

(ii) If the report required in section (1)(b)(i) of this subsection identifies type 1 soils, the health officer may allow a reduction below the requirements noted in Table 1. The health officers and the department shall develop guidelines to be applied when such reductions are considered by July 1, 1984. Until guidelines have been developed, the health officer may permit such reductions only when an alternative system will be used. The alternative system shall provide a degree of treatment to the sewage, before the sewage enters the original, undisturbed soil, equal to or greater than the treatment provided by a mound or sand filter. Mounds and sand filters are defined and the design criteria specified in the appropriate technical review committee guidelines. Until the guidelines have been developed, the resulting gross land area per unit volume of sewage or single family residence shall not be less than one-half acre.

(2) The health officer may reduce land area requirements in this section if the proposed on-site sewage systems are to be located within the boundaries of a recognized sewer utility and where the assessment roll has been finalized.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-100, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-100, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-090, filed 6/3/83; Order 101, § 248-96-090, filed 6/10/74.]

WAC 246-272-110 Determination of site characteristics. (1) Site characteristics shall be determined in accordance with chapter 3 and Appendix A of Design Manual: On-site Wastewater Treatment and Disposal Systems, United States Environmental Protection Agency, Report No. EPA-625/1-80-012, October, 1980, except where modified or in conflict with these regulations.

(2) The textural classification of a soil shall be determined by using normal laboratory and/or field procedures such as particle size analyses and percolation tests. Following are the specific soil textural classifications and soil type designations. The soil textures in Table 7-2 of the design manual referenced in subsection (1) of this section are amended as follows:

Soil Type	Soil Textural Classifications ¹
1 ²	Coarse sands or coarser
2	Medium sand
3	Fine sand, loamy sand
4	Sandy loam, loam
5	Porous, well-developed structure in silt and silt loams
6	Other silt loams, silty clay loams, and clay loams.

¹ According to the United States Department of Agriculture, soil conservation service's soil classification system.

² Includes other soils and/or conditions where the treatment potential is ineffective in retaining and/or removing substances of public health significance to underground sources of drinking water.

(3) All site evaluations shall be performed by or under the direct supervision of the health officer, a registered sanitarian, professional engineer, registered soil scientist (American registry of certified professionals in agronomy, crops and soils), or certified designer having knowledge and experience in the areas of soil and wastewater treatment and disposal.

(4) All soil tests shall be conducted using uniform procedures and terminology as set forth in chapter 3 and Appendix A of the manual referred to in WAC 246-272-110(1).

(5) If sufficient information is not available concerning water table conditions, the health officer or department may require that the soils analysis be performed during the months of suspected high-water table conditions.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-110, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-110, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-094, filed 6/3/83.]

WAC 246-272-120 Subdivision and individual site review. (1) Subdivisions - preliminary tests for subdivisions utilizing individual on-site sewage systems shall include at least one representative soil log per acre or tract or more as required by the health officer. A reduced number of soil logs may be allowed if adequate soils information is available.

(2) Individual sites - at least one soil log shall be performed at the site of each disposal area. This requirement may be waived by the health officer if adequate soils information is available. Additional soil logs may be required where the soil characteristics vary.

(3) Individuals performing subdivision and individual site reviews shall meet the requirements and use the procedures specified in WAC 246-272-110.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-120, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-120, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-095, filed 6/3/83; Order 101, § 248-96-095, filed 6/10/74.]

WAC 246-272-130 Larger tract requirements. (1) For lots, parcels, or tracts with a gross land area of five acres or 1/128th of a section or more, the health officer may take the following actions:

(a) Alter the requirements found in WAC 246-272-110(3), 246-272-140(2), and 246-272-150(2).

(b) Modify the restrictions noted in WAC 246-272-110(2).

(2) Where the health officer takes one of the actions noted in WAC 246-272-110(1), the following requirements shall apply:

(a) All portions of a SSAS shall be at least thirty feet from property lines or lines of easement existing for SSAS installation that are at the same elevation as, or at a lower elevation than, the SSAS.

(b) A restrictive covenant against further subdivision of the property into parcels or lots less than five acres or 1/128th of a section shall be recorded on the building site and remain in effect until connection to public sewer is made or some approved alternative is installed which the health

officer determines will permit development of smaller parcels.

(3) On-site sewage systems installed under the provisions of this section shall meet the purpose and objectives of these regulations to the maximum extent possible.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-130, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-130, filed 12/27/90, effective 1/31/91; 83-13-014

(Order 259), § 248-96-096, filed 6/3/83; Order 101, § 248-96-096, filed 6/10/74.]

WAC 246-272-140 Location. (1) The minimum distances for location of the various component parts of an on-site sewage system are measured horizontally and shall comply with Table II.

**TABLE II
MINIMUM HORIZONTAL SEPARATIONS**

Distance in Feet from System Component

Items Requiring Setback	From edge of SSAS and replacement area	From septic tank and distribution box	From building sewer, collection, and non-perforated distribution line
Well or suction line ¹	100 ²	50	50
Water supply line under pressure	10	10	10
Surface water ^{1,3}	100 ²	50	10
Building foundation	10	5	-
Property lines or lines of easement	5	5	-
Interceptor/curtain drains/drainage ditches			
-upslope from system component	10	-	-
-downslope from system component	30	5	-
Cuts or banks			
-minimum of five feet of original, undisturbed soil above restrictive layer or layer due to a structural or textural change	25	-	-
-less than five feet of original, undisturbed soil above restrictive layer or layer due to a structural or textural change and that layer is intersected	50	-	-

¹With soil type I and on other sites where conditions indicate a greater potential for ground or surface water contamination or pollution, the distance from any water supply or surface water may be increased by the health officer.

²A reduced separation can be allowed by the health officer if it can be demonstrated that the reduction will not have an adverse effect. However, in no case shall the separation be less than seventy-five feet.

³Setbacks from surface waters shall be measured from the ordinary high watermark.

(2) SSAS shall not be permitted in areas where a vertical separation of three feet cannot be maintained. The health officer shall require such greater vertical separation as needed to protect health when the aquifer is used for a potable water supply. The health officer may reduce the vertical separation provided the system is designed by a professional engineer, a registered sanitarian or a certified designer. However, in no case shall the separation be less than one foot.

(3) On-site sewage systems shall not be located on slopes in excess of forty-five percent (twenty-four degrees). Table III notes the required depths of original, undisturbed soil above a restrictive layer for the various ranges of slope.

**TABLE III
REQUIRED SOIL DEPTHS FOR SLOPES**

Range of Slopes in Percent (Degrees)	Required Depth of Original Undisturbed Soil Above Restrictive Layer in Inches
0-15 (0-8)	Sufficient to satisfy minimum vertical separation
>15-22 (>8-12)	30
>22-30 (>12-17)	42
>30-45 (>17-24) ¹	60

¹The SSAS shall be sized using a maximum loading rate of 0.5 gallons/day/square foot of trench or bed-bottom area.

(4) An area where the soil and site conditions are acceptable for the installation of a SSAS shall be maintained for the purpose of system replacement. Except where otherwise authorized by the health officer, it shall consist of one hundred percent of the normally needed area.

(5) The site of the initial and replacement SSAS shall be selected and maintained so that it is free from encroachment by buildings and other structures. The area shall not be covered by any impervious material and not be subject to

vehicular traffic or other activity which would adversely affect the soil.

(6) Provisions shall be made to prevent flow or accumulation of surface water over the area where the on-site sewage system is located.

(7) On-site sewage systems shall not be located on land forms which are unstable.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-272-140, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-100, filed 6/3/83; Order 101, § 248-96-100, filed 6/10/74.]

WAC 246-272-150 Design. (1) The detailed design and construction of all on-site sewage systems shall conform to the "Design Manual: On-site Wastewater Treatment and Disposal Systems," United States Environmental Protection Agency, EPA-625/1-80-012, October, 1980, except where modified by, or in conflict with these regulations.

(2) The design for an on-site sewage system shall be performed by or under the supervision of a professional engineer, registered sanitarian or certified designer. A resident owner, at the discretion of the health officer, may design the resident owner's own system, if a minimum vertical separation of three feet can be maintained.

(3) The system shall be designed to receive all sanitary sewage and domestic waste from the building served unless otherwise approved by the health officer. For individual residences, flows of one hundred twenty gallons/bedroom/day shall be used for design purposes. For other establishments, the typical values noted in the design manual referred to in WAC 246-272-150(1) shall be used. Any deviations shall be supported by appropriate water usage information and/or the use of low water use fixtures. Drainage from footing or roof drains or any other type of drain shall neither enter the sewage system nor be directed over the area where the on-site sewage system is located.

(4) All septic tanks shall be designed in accordance with subsection (1) of this section, with the following exceptions:

(a) All tanks must have a minimum of two compartments with the first compartment consisting of one-half to two-thirds of the required total volume.

(b) Intercompartmental apparatus shall be sanitary tees, slots or baffles assuring that effluent only from the clarified zone passes into the next compartment.

(c) Septic tanks serving single family residences shall have a minimum liquid capacity based on the number of bedrooms in the residence, as follows:

Number of Bedrooms in House	Required Minimum Liquid Volume
2 or less	750
3	900
4	1000

For each additional bedroom add 250 gallons.

A septic tank designed to service a facility other than one single family residence shall have a minimum liquid capacity equal to one and one-half times the projected daily sewage volume, with a minimum of 1000 gallons.

(d) Concrete tanks shall be approved by the health officer. Tanks made of materials other than concrete shall be approved by the health officer and the department.

(e) All septic tanks and pump chambers to be located in high water table areas shall be adequately treated to preclude ground water intrusion.

(5) Effluent shall be disposed of by means of a SSAS except when approval for other disposal systems is granted by the health officer and/or the department.

(a) The size of the SSAS shall be determined from the results of the site review and soil logs per the design manual.

(b) The health officer shall not permit installation and use of cesspools and seepage pits for the disposal of sewage.

(c) The bottom of a SSAS shall not be deeper than three feet below the finished grade, except under special conditions approved by the health officer. The depth of such a system shall not exceed ten feet from finished grade.

(d) Subsurface absorption beds (see definition of SSAS) may be considered for use only when authorized by the health officer and/or the department and when the soils are type 1, 2, or 3.

(e) Piping materials shall be approved by the health officer and the department.

(6) Cover can be used over a SSAS provided no portion of the SSAS sidewall below the invert of the distribution pipe is installed in this material.

(7) When sewage holding tank systems are used, a management program assuring ongoing operation and maintenance, which shall be approved by the health officer, shall be in effect. Sewage holding tanks shall not be permitted for either new construction or expansion of residential dwellings, whether seasonal or year-round. The health officer may approve sewage holding tanks for the following situations:

(a) Permanent use. Controlled, part-time, commercial usage situations, including, but not limited to, recreational vehicle parks, trailer dump stations, and certain limited hour businesses;

(b) Interim use. To handle emergency situations; and

(c) Repairs. As permitted under WAC 246-272-160 (1)(e)(i).

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-272-150, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-150, filed 12/27/90, effective 1/31/91. Statutory Authority: 1989 c 349, 89-21-026 (Order 332), § 248-96-110, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 43.20.050, 83-13-014 (Order 259), § 248-96-110, filed 6/3/83; Order 101, § 248-96-110, filed 6/10/74.]

WAC 246-272-160 Repair of failures along marine shorelines. (1) When an on-site sewage system failure occurs, the health officer shall require one of the following:

(a) Repair of the on-site sewage system using the requirements of this section. The repair system may be located either on the:

(i) Property served; or
 (ii) Nearby or adjacent property if easements are obtained.

(b) Connection to a publicly owned larger on-site sewage system;

(c) Connection to public sewer; or

(d) Connection to a privately owned larger system where it is deemed economically feasible.

(e) If subsections (1)(a), (b), (c), or (d) of this section are not feasible, the health officer shall require one of the following:

(i) Usage of a holding tank;

(ii) Obtainment of a National Pollutant Discharge Elimination System or state discharge permit, issued to a public entity or jointly to a public entity and the system owner, from the Washington state department of ecology. This shall be considered only if an on-site sewage system is not feasible and the only realistic method of final disposal is to discharge to the surface of the land or into surface water; or

(iii) Abandonment of the property.

(2) When the soil absorption component fails, the requirements under WAC 246-272-120 (2) and (3) shall be met before a repair permit is issued.

(3) A detailed design shall be submitted for each repair system. The repair shall be sized to accommodate all the sewage.

(4) When repair of an on-site sewage system is required to correct a failure, the health officer shall permit:

(a) A standard marine system; or

(b) A nonconforming repair. A nonconforming repair shall only be permitted when a:

(i) Standard marine system cannot be installed; and

(ii) Connection to either a public sewer or an approved larger on-site sewage system is not feasible.

(5) Table IV notes the minimum repair requirements based upon vertical separation and horizontal separation. The horizontal separation indicated is the distance between the SSAS or other disposal component and the ordinary high-water mark. Treatment standards shall be met before discharge to unsaturated, subsurface soil:

TABLE IV
REQUIREMENTS FOR NONCONFORMING REPAIRS

Vertical Separation in Feet	Horizontal Separation In Feet		
	< 25	25-50	> 50
<1 ¹	Treatment Standard 1	Treatment Standard 1	Treatment Standard 2 ²
1-2	Treatment Standard 1	Treatment Standard 2	Pressure Distribution
>2	Treatment Standard 2 ²	Pressure Distribution	

¹The health officer may permit ASTM C-33 sand to be used as fill to create unsaturated, subsurface soil, but fill cannot be used to achieve the vertical separation requirements.

²Not including mound systems.

(6) When a nonconforming repair is permitted:

(a) Priority shall be given to protection of drinking water sources. The site of the repair shall be selected to maximize the:

(i) Vertical separation;

(ii) Distance from a well or suction line; and

(iii) Distance to surface water.

(b) The permit shall identify the system as a nonconforming repair. The permit shall state the manner and the extent the system is nonconforming. A copy of the permit and any accompanying easements or restrictive covenants

shall be recorded with the county auditor. The requirement does not apply to a repaired system when a waiver from new construction standards is obtained per WAC 246-272-210;

(c) Operation, maintenance, monitoring, and reporting to the health officer shall comply with the protocol in the technical review committee guidelines. The minimum frequency shall be:

(i) Quarterly when treatment standard 1 is required; and

(ii) Annually when treatment standard 2 is required.

(d) Low-flow plumbing fixtures should be used.

(7) The health officer shall require wave barrier protection as deemed necessary.

(8) Actions taken under this section shall comply with other local and state requirements.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-272-160, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-160, filed 12/27/90, effective 1/31/91. Statutory Authority: 1989 c 349. 89-21-026 (Order 332), § 248-96-120, filed 10/10/89, effective 11/10/89.]

WAC 246-272-170 Marine expansions. The health officer shall require the following for a marine expansion:

(1) A standard marine system shall be installed; and

(2) A system replacement area shall be maintained as required by WAC 246-272-140(4).

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-272-170, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-170, filed 12/27/90, effective 1/31/91. Statutory Authority: 1989 c 349. 89-21-026 (Order 332), § 248-96-125, filed 10/10/89, effective 11/10/89.]

WAC 246-272-180 Designer program. Guidelines defining an approved designer program shall be established by the health officers and the department. The guidelines shall include, but not be limited to, the following:

(1) Education;

(2) Experience;

(3) Testing; and

(4) Certification.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-272-180, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-130, filed 6/3/83; Order 101, § 248-96-130, filed 6/10/74.]

WAC 246-272-190 Inspection. The health officer may make inspections during construction to determine compliance with these regulations. No part of any installation shall be covered until approval has been obtained from the health officer. The health officer may waive this requirement provided the installation has been made by a person certified under WAC 246-272-230 and a designer program has been established according to WAC 246-272-180 provided that the designer performs the final inspection. If deviations from the approved plans and specifications have occurred in construction, a complete set of certified "as-built" drawings shall be provided to the health officer for a permanent record of the installation.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-272-190, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-272-190, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-140, filed 6/3/83; Order 101, § 248-96-140, filed 6/10/74.]

WAC 246-272-200 Appeals. All local boards of health shall have an administrative appeals process to resolve procedural and technical conflicts arising from the administration of local regulations.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-272-200, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-150, filed 6/3/83.]

WAC 246-272-210 Waiver of state regulations. The health officer may, upon concurrence of the department, waive these regulations or portions thereof: *Provided*, That the waiver is consistent with the intent of these regulations and that no public health hazard will result.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-272-210, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-160, filed 6/3/83; Order 101, § 248-96-160, filed 6/10/74.]

WAC 246-272-220 Disposal of septic tank waste. (1) The contents of a septic tank or other treatment device shall be disposed of only in areas and in a manner approved by the health officer.

(2) Local boards of health shall establish requirements for persons engaged in the removal of septic tank contents, which shall include standards for equipment and operating procedures and may provide for the issuance and revocation of permits.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-272-220, filed 12/27/90, effective 1/31/91; Order 101, § 248-96-170, filed 6/10/74.]

WAC 246-272-230 Installer requirements. (1) All systems except as noted in this section shall be installed by a certified installer. Local boards of health shall establish requirements for persons, firms, and corporations engaged in installing or repairing on-site sewage systems. Guidelines stating suggested requirements shall be established by the health officers and the department. The guidelines shall include, but not be limited to:

- (a) Education;
- (b) Experience;
- (c) Testing; and
- (d) Certification.

(2) Nothing contained herein shall prohibit resident owners from installing an individual on-site sewage system or making repairs or alterations on his or her own premises as long as all other requirements of these regulations are satisfied. The resident owner may not contract or hire a person or concern to perform that work, unless that person is a certified installer as set forth in this section.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-272-230, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-175, filed 6/3/83; Order 101, § 248-96-175, filed 6/10/74.]

WAC 246-272-240 State advisory committee. An on-site sewage advisory committee shall be established. The members shall be selected from professions and organizations (1) having knowledge and interest in on-site sewage systems, and (2) being effected by the regulations. Meetings shall be called as necessary by the department. The purpose of the advisory board is to make recommendations concerning departmental policy and regulations, review program

services, and provide input to the department regarding various facets of the on-site sewage program.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-272-240, filed 12/27/90, effective 1/31/91; 83-13-014 (Order 259), § 248-96-180, filed 6/3/83; Order 101, § 248-96-180, filed 6/10/74.]

WAC 246-272-990 Fees. (1) The minimum fee for required review of larger on-site system's engineering reports and plans and specifications shall be four hundred dollars. If review time exceeds eight hours, fifty dollars for each additional hour or part of an hour shall be added to the minimum fee. The fee for pre-site inspections for larger on-site systems shall be one hundred dollars per visit. The fee for final inspection of larger on-site systems shall be one hundred dollars per site visit.

(2) The minimum fee for required review of proprietary devices shall be two hundred dollars. If review time exceeds four hours, fifty dollars for each additional hour or part of an hour shall be added to the minimum fee.

(3) The minimum fee for required review of experimental systems shall be four hundred dollars. If review time exceeds eight hours, fifty dollars for each additional hour or part of an hour shall be added to the minimum fee.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-272-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-280 WAC

RECREATIONAL SHELLFISH BEACHES

WAC

246-280-001	Authority, purpose, and scope.
246-280-010	Definitions.
246-280-015	General administration.
246-280-020	Recreational shellfish beach classification.
246-280-030	Water quality criteria and standards.
246-280-040	Marine water quality testing.
246-280-050	Shellfish meat quality standards and testing.
246-280-060	Recreational shellfish beach sanitary survey.
246-280-070	PSP monitoring of recreational beaches.
246-280-080	Public information and notification.

WAC 246-280-001 Authority, purpose, and scope.

(1) Authority. Under the authority of RCW 43.20.050, powers and duties of state board of health, these regulations are hereby established as minimum requirements for the monitoring and classification of recreational shellfish beaches.

(2) Purpose. It is the purpose of chapter 246-280 WAC to protect public health and establish procedures for evaluating the sanitary quality of recreational shellfish beaches.

(3) Scope.

(a) These regulations shall apply to recreational shellfish beaches under public ownership. Commercial shellfish harvest, even though it may occur on publicly owned beaches, is governed by chapter 246-282 WAC and chapter 69.30 RCW.

(b) These regulations shall apply to recreationally harvested shellfish on privately owned beaches when the general public has unlimited access to beaches for recreational shellfishing. The department may evaluate and monitor these privately owned beaches if the department determines it to be in the public interest.

(4) Other statutes related to this chapter are:

- (a) Chapter 69.30 RCW, sanitary control of shellfish;
and
(b) Chapter 246-282 WAC, sanitary control of shellfish.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-280-001, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-280-001, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW, 89-20-020 (Order 335), § 248-52-001, filed 9/27/89, effective 10/28/89.]

WAC 246-280-010 Definitions. (1) Abbreviations:

- (a) "ml" means milliliter; and
(b) "PSP" means paralytic shellfish poisoning.
(2) "Beach evaluation" means the examination of the sanitary conditions of recreational shellfish beaches through water quality testing, shellfish tissue testing, PSP testing, and sanitary surveys.

(3) "Beach inventory" means the department's list of recreational shellfish beaches governed by chapter 246-280 WAC.

(4) "Closed classification" means a beach exceeds the standards for safe shellfish harvest.

(5) "Conditionally open classification" means a recreational shellfish beach meets the standards for safe shellfish harvest during well-defined time periods, such as dry weather months, and is closed to shellfish harvest when the standards are exceeded.

(6) "Department" means the Washington state department of health (DOH).

(7) "Emergency closure" means temporary closure of a recreational shellfish beach when a contamination event is suspected of impacting an open or conditionally open beach.

(8) "Geometric mean value" means a statistical calculation giving a mean value of data points. Geometric mean value is a term used in state water quality standards. The calculation is:

(a) $a \times b \times c \times d = y$;

(b) $\sqrt[N]{y}$ = geometric mean value. N = number of data points which determines the power of the root.

(9) "Health officer" means the health officer or an authorized representative of the city, county, city-county health department or district.

(10) "Local board of health" means the city, town, county, city-county, or district board of health as defined under chapters 70.05, 70.08, and 70.46 RCW.

(11) "Open classification" means a recreational shellfish beach which complies with WAC 246-280-030 standards for safe shellfish harvest without any restrictions due to health hazards.

(12) "Paralytic shellfish poisoning (PSP)" means a human illness caused by eating shellfish that contain high levels of toxin which results from the shellfish consuming large amounts of toxin-producing microscopic marine organism called *Gonyaulax catenella*.

(13) "Public ownership" means owned by the federal government, state government, a county, a city, or a port district.

(14) "Recreational shellfish beach" means any beach under public ownership available to the public and any privately owned beach where the general public has unlimited access to recreationally harvest shellfish.

(15) "Recreational shellfish harvest" means to harvest shellfish for personal consumption with no intention for sale or barter.

(16) "Sanitary survey" means an evaluation of the sanitary conditions of the shoreline and uplands of a recreational shellfish beach.

(17) "Shellfish" means, for the purposes of chapter 246-280 WAC, all varieties of oysters, clams, mussels, and scallops.

(18) "Unclassified" means a recreational shellfish beach which does not have an initial classification because the department has incomplete sanitary survey data.

(19) "Water quality study" means an evaluation of the sanitary conditions of the marine water of a recreational shellfish beach described under WAC 246-280-030 and 246-280-040.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-280-010, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-280-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW, 89-20-020 (Order 335), § 248-52-005, filed 9/27/89, effective 10/28/89.]

WAC 246-280-015 General administration. (1) The department and the health officer for each local health jurisdiction shall develop a joint plan of operation designating the roles of each agency for administering chapter 246-280 WAC. This plan shall:

(a) Specifically designate those recreational shellfish beaches included in the joint plan;

(b) Establish whether the department or the health officer shall assume primary responsibility for an identified beach;

(c) Provide for a minimum acceptable frequency of beach evaluation;

(d) Specify who has responsibility for water quality studies, sanitary surveys, PSP monitoring, beach classification, and public notification;

(e) Be signed by the secretary and the chairperson of the local board of health;

(f) Be updated as needed to ensure proper operation of the plan; and

(g) Identify a process for implementing remedial actions to correct pollution sources where deemed appropriate by the department for those beaches classified as closed or conditionally open.

(2) If the local board of health adopts rules governing recreational shellfish harvest within its jurisdiction, the adopted rules shall be consistent with chapter 246-280 WAC.

(3) The department shall develop guidelines on water quality monitoring, PSP monitoring, shoreline survey procedures, public information/notification, and other topics.

(4) Throughout this chapter, the term "health officer" may be substituted for the term "department" if the joint plan of operation delegates authority for action to the health officer.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-280-015, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-280-015, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW, 89-20-020 (Order 335), § 248-52-010, filed 9/27/89, effective 10/28/89.]

WAC 246-280-020 Recreational shellfish beach classification. (1) The department or the health officer for each local health jurisdiction as designated in the joint plan of operation, under WAC 246-280-015, shall classify recreational shellfish beaches, based on the risk to public health from consuming shellfish. After completing an initial classification, the department or the health officer for each local health jurisdiction shall make an annual update based on the additional data collected during the year.

(2) The joint plan of operation's criteria used to classify beaches shall include the following:

- (a) Water quality data;
- (b) A sanitary survey of pollution sources; and
- (c) A review of natural and synthetic toxins, including PSP.

(3) The department shall classify recreational shellfish beaches as follows:

- (a) Open;
- (b) Conditionally open;
- (c) Closed;
- (d) Emergency closure; and
- (e) Unclassified.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-280-020, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-280-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW. 89-20-020 (Order 335), § 248-52-020, filed 9/27/89, effective 10/28/89.]

WAC 246-280-030 Water quality criteria and standards. (1) The department shall classify the beach as open when the following three conditions are met:

(a) The marine water covering a recreational shellfish beach shall not exceed a geometric mean value of fourteen fecal coliform bacteria/100 ml of water. In addition, not more than ten percent of the individual water samples may exceed forty-three fecal coliform bacteria/100 ml of water. The geometric mean value shall be calculated on no less than fifteen samples for each water quality station;

(b) Upon completion of a sanitary survey, there are no major sources of pollution of public health significance identified as affecting the beach; and

(c) Natural and synthetic toxin levels shall not exceed established standards.

(2) The department shall classify the beach as conditionally open when standards for open criteria are met during a well-defined and predictable time period, such as dry weather months. Use of the conditionally open classification shall be limited to beaches where sufficient data are available to establish the beach meets the open criteria for well-defined time periods.

(3) The department shall classify a beach as closed for failing to meet the open or conditionally open standards and the beach shall not be used for recreational shellfish harvest.

(4) The department shall list a recreational shellfish beach as unclassified until complete sanitary data are available. The department shall list initially the beach as unclassified on the beach inventory.

(5) In the event an open or conditionally open beach is suspected of being impacted by a source of pollution or other threat to public health, the department shall implement an emergency closure immediately. The closure shall remain

in effect until the department's investigation verifies the beach is safe for recreational shellfish harvesting.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-280-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW. 89-20-020 (Order 335), § 248-52-030, filed 9/27/89, effective 10/28/89.]

WAC 246-280-040 Marine water quality testing. The department shall test marine water in recreational shellfish areas for fecal coliform bacteria according to sampling and analysis protocols under *National Shellfish Sanitation Program Manual of Operations* for commercial shellfish harvest areas.

(1) The department shall establish the location of marine water sampling stations for each recreational shellfish beach to adequately reflect potential pollution sources for the area.

(2) The department shall collect a minimum of fifteen samples at each station prior to an area receiving a classification. The department shall time each sampling to reflect potential adverse pollution events.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-280-040, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW. 89-20-020 (Order 335), § 248-52-040, filed 9/27/89, effective 10/28/89.]

WAC 246-280-050 Shellfish meat quality standards and testing. (1) The department shall:

(a) Periodically test shellfish meat samples for fecal coliform bacteria to provide supportive information for water quality data;

(b) Establish a routine schedule for collection of shellfish samples for each beach; and

(c) Sample all beaches classified as open or conditionally open at a frequency determined by the director.

(2) The department shall conduct tests to identify the chemicals present in the shellfish tissue when a toxic chemical is suspected to impact a recreational beach. In the event of an imminent health hazard, the department shall implement an emergency closure.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-280-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW. 89-20-020 (Order 335), § 248-52-050, filed 9/27/89, effective 10/28/89.]

WAC 246-280-060 Recreational shellfish beach sanitary survey. In addition to the evaluation of the shellfish growing waters, and before establishing a classification for the beach, the department shall conduct a sanitary survey of the shoreline and upland areas located adjacent to recreational shellfish beaches. The sanitary survey shall be updated as necessary to reflect changes in shoreline and upland sanitary conditions. A sanitary survey shall consist of:

(1) Identifying and evaluating point source discharges in the vicinity of the beach;

(2) Evaluating all on-site sewage disposal systems in the survey area; and

(3) Evaluating impacts from other nonpoint sources in the area, such as animal waste and storm water.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-280-060, filed 12/27/90, effective 1/31/91. Statutory Authority:

Chapter 90.70 RCW. 89-20-020 (Order 335), § 248-52-060, filed 9/27/89, effective 10/28/89.]

WAC 246-280-070 PSP monitoring of recreational beaches. (1) The department shall conduct a paralytic shellfish poisoning (PSP) monitoring program for recreational shellfish beaches.

(2) The department shall coordinate the monitoring program with the health officer. The joint plan of operation developed between the department and the health officer shall include the following elements:

(a) A sampling schedule which includes the beaches sampled and the frequency of the sampling;

(b) Designation of responsibility for a sample collection; and

(c) A system of establishing beach closures due to PSP which includes:

(i) Closing the beach when the level of toxin exceeds 80 micrograms of toxin per 100 grams of shellfish meat;

(ii) Maintaining the beach closure until two consecutive samples of the same species test below the standard of 80 micrograms of toxin per 100 grams of shellfish meat; and

(iii) Closing beaches suspected of posing a PSP threat to public health when they are located in a PSP-impacted area that cannot be sampled on a frequent basis. The beaches shall remain closed until samples verify the area is safe to reopen.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-280-070, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW. 89-20-020 (Order 335), § 248-52-070, filed 9/27/89, effective 10/28/89.]

WAC 246-280-080 Public information and notification. The department shall develop guidelines describing an approved public information/public notification system. The guidelines shall include methods for public notification, public meetings, beach posting, public announcements, and other control mechanisms the jurisdictional health agency deems necessary. The department shall provide for a public notification process of beach classifications under the joint plan of operation.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-280-080, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 90.70 RCW. 89-20-020 (Order 335), § 248-52-080, filed 9/27/89, effective 10/28/89.]

Chapter 246-282 WAC

SANITARY CONTROL OF SHELLFISH

WAC

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WAC 246-282-001 Scope and purpose. These requirements, as authorized under chapter 69.30 RCW (chapter 144, Laws of 1955), establish minimum performance standards for the growing, harvesting, processing, packing, storage, transporting, and selling of shellfish for human consumption.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-282-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030. 78-08-059 (Order 163), § 248-58-001, filed 7/24/78; Regulation 58.001, effective 3/11/60.]

WAC 246-282-010 Definitions. The following definitions shall apply in the interpretation and the implementation of these rules and regulations:

(1) "Approved" means acceptable to the secretary based on his or her determination as to conformance with appropriate standards and good public health practice.

(2) "Commercial quantity" means any quantity exceeding:

- (a) Forty pounds of mussels;
- (b) One hundred oysters;
- (c) Fourteen horse clams;
- (d) Six geoducks; or
- (e) Fifty pounds of hard or soft shell clams.

(3) "Department" means the state department of health.

(4) "Easily cleanable" means readily accessible and of such material and finish, and so fabricated that residue may be completely removed by approved cleaning methods.

(5) "Food contact surfaces" means those surfaces of equipment and utensils with which the shellfish meat normally comes in contact, and those surfaces that drain onto surfaces that may come into contact with said food being processed.

(6) "Person" means any individual, firm, corporation, partnership, company, association, or joint stock association, and the legal successor thereof.

(7) "Person in charge" means an individual responsible for the supervision of employees and the management of any shellfish operation as defined in subsection (12) of this section.

(8) "Sanitized" means the treatment of clean surfaces of equipment and utensils by an approved process which is effective in destroying microorganisms, including pathogens.

(9) "Secretary" means the secretary of the department of health or the secretary's authorized representative.

(10) "Shellfish" means all varieties of fresh or frozen oysters, clams, or mussels, either shucked or in the shell, and all fresh or frozen edible products thereof.

(11) "Shellfish growing areas" means the lands and waters in and upon which shellfish are grown for harvesting in commercial quantities or for sale for human consumption.

(12) "Shellfish operation" means any activity in the harvesting, transporting, processing, to include, but not limited to culling, shucking, packing, and repacking or shipping or reshipping of shellfish in commercial quantities or for sale for human consumption.

[Statutory Authority: RCW 69.30.030, 92-02-019 (Order 225B), § 246-282-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030 and 43.20.050, 85-21-048 (Order 296), § 248-58-005, filed 10/14/85. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-005, filed 7/24/78.]

WAC 246-282-020 Growing areas. (1) All shellfish to be sold as defined in RCW 69.30.010(2) in the state of Washington shall be obtained from approved growing areas or from approved growing areas outside the state that have programs of control and standards equivalent to that of the state of Washington.

(2) Approved shellfish growing areas shall be located in areas not adversely affected by human waste, industrial or natural toxins, recreational use, or other sources of pollutants which may have a detrimental influence on the water quality of the shellfish growing beds and subsequent hazards to the human consumers of shellfish.

(3) No commercial quantities of shellfish or shellfish to be sold as defined in RCW 69.30.010(2), for human consumption, shall be harvested from growing areas which are not approved as provided herein: *Provided*, That permission may be granted by the director for the removal of shellfish from nonapproved growing areas for relaying to approved growing areas under the following conditions:

(a) Shellfish shall be relayed to a designated, approved growing area for a minimum of two weeks or for a longer time period as prescribed by the director.

(b) Relaying and subsequent removal from the approved area for sale or shipment shall be under the supervision of the director.

(c) Records shall be kept showing growing areas from which the shellfish were taken, where relayed, dates of relaying, and dates of harvesting.

(4) All boats, oyster harvesters, and floats used for harvesting or transporting shellfish shall be so constructed, operated, and maintained as to prevent contamination or deterioration of the shellfish. Approved facilities shall be provided for the disposal of human waste.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030 and 43.20.050, 85-21-048 (Order 296), § 248-58-010, filed 10/14/85. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-010, filed 7/24/78; Regulation 58.010, effective 3/11/60.]

WAC 246-282-030 Storage, cleansing and washing and shipping of shellstock. (1) Shellstock shall be stored, handled, and shipped under such temperature conditions as will keep them alive, and shall be protected from contamination at all times.

(2) All shellstock prior to opening or shipping shall be reasonably clean so that mud, sand, and extraneous material will not be transferred to the opened product during processing.

(3) Water used for washing, or "wet storage" (natural storing and cleansing), of shellstock shall be obtained from an approved growing area, or from other sources which meet or exceed the water quality standards of an approved growing area.

(4) Wet storage of shellstock may be practiced only upon approval of the director. A detailed description and

map denoting the location of the wet storage area shall accompany the request.

[Statutory Authority: RCW 69.30.030, 92-02-019 (Order 225B), § 246-282-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-020, filed 7/24/78; Regulation 58.020, effective 3/11/60.]

WAC 246-282-040 Shucking of shellfish. (1) Shellfish shall be shucked in a manner that will minimize contamination. Only live shellfish shall be shucked. Shucked shellfish shall be processed within one hour after opening or shall be rapidly cooled to a product temperature of forty-five degrees Fahrenheit or less within two hours after shucking.

(2) Shucking containers shall be rinsed with running tap water before each filling. Shucker's colanders shall be rinsed with running tap water at two and one-half hour intervals or less during use.

(3) Shells from which meats have been shucked shall be removed from the plant at sufficient intervals to prevent the interference with the sanitary operation of the plant.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-030, filed 7/24/78; Regulation 58.030, effective 3/11/60.]

WAC 246-282-050 Packing of shucked shellfish. (1) Shucked shellfish shall be protected from contamination during all phases of processing and shall be packed in approved containers which are clean, and free from contamination.

(2) Shucked shellfish shall be maintained at forty degrees Fahrenheit or less until received by the consumer. A temperature of thirty-four degrees Fahrenheit to forty degrees Fahrenheit shall be maintained in refrigerators where shucked shellfish are stored.

(3) Shellfish which are to be marketed as a frozen product shall be frozen as quickly as practicable and maintained at a product temperature of zero degrees Fahrenheit or less until received by the consumer.

(4) The packing of shucked shellfish shall take place in the same plant in which the shellfish are shucked, unless specific approval for repacking is granted by the director. Repacking plants shall meet all requirements as specified for packing plants. Frozen shucked shellfish shall not be repacked.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-040, filed 7/24/78; Regulation 58.040, effective 3/11/60.]

WAC 246-282-060 Personal health and cleanliness.

(1) Persons ill with or the carrier of a communicable disease which is transmissible through food and is in the infectious stage, or persons having exposed boils, infected lesions or wounds, or similar skin infections, or persons having an acute respiratory infection shall not work in any growing area, shucking, packing or repacking plant in any capacity where they might contaminate the shellfish or food contact surfaces with pathogenic organisms. Both the person in

charge and the employee shall be responsible for compliance with the requirements of this section.

(2) Persons who shuck or handle shucked shellfish shall wear clean, waterproof aprons or coats and clean clothing that can be easily cleaned and shall practice good personal cleanliness during all periods of duty. They shall wash their hands thoroughly with soap and warm water before starting to work and as often thereafter as may be necessary to remove soil and contamination. Gloves or other protective gear worn on the hands shall be made of waterproof, easily cleanable material and shall be clean. When manual handling of shucked shellfish becomes necessary, sanitized rubber gloves shall be worn or the hands shall be thoroughly cleaned immediately before such handling. Effective means shall be taken to keep hair from shellfish (shucked meats) and from food contact surfaces.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-050, filed 7/24/78; Regulation 58.050, effective 3/11/60.]

WAC 246-282-070 Construction and maintenance.

(1) Equipment and utensils: All food contact surfaces of equipment and utensils shall be constructed of nontoxic, corrosion resistant, and nonabsorbent materials, designed to be easily cleanable and shall be clean and in an approved condition of repair. Equipment shall be installed and maintained so that it and adjacent areas can be readily cleaned. Articles intended for single service use shall be used only once and then discarded.

Utensils and food contact surfaces of equipment shall be cleaned, sanitized and stored in an approved manner so as to be protected from recontamination. Cleaning and sanitization shall occur before use and at such intervals as necessary to preclude contamination of the shucked product.

Nonfood contact surfaces of equipment shall be constructed of corrosion resistant and nonabsorbent materials, designed to be easily cleanable and shall be clean and in an approved condition of repair.

(2) Physical facilities: The plant shall be so arranged to facilitate the flow of the product through processing and storage areas in a manner that will preclude contamination. Shucking and packing operations shall be conducted in separate rooms. Only authorized persons shall be allowed in the packing room during periods of operation.

Interior surfaces of rooms or areas where shellfish are stored, processed or utensils or hands are washed, and in walk-in refrigerators and freezers shall be easily cleanable, clean and in an approved condition of repair.

Rooms for utensil and packaging material storage shall be provided, and separate from areas which shall be provided for employee clothing storage. These areas shall be separate and apart from the shucking and packing rooms.

Approved lighting, heating and ventilation shall be provided. Approved measures for control of rodents and flies, roaches, and other insects on the premises shall be utilized. Live animals shall be excluded from all areas of the plant.

(3) Sanitary facilities: Hot and cold water adequate in quality and quantity, and under pressure shall be provided or easily accessible to all rooms in which shellfish are processed or utensils are washed. The water supply, plumbing,

sewage, garbage and rubbish disposal, handwashing, toilet and other facilities shall be installed, operated, and maintained in an approved manner.

Ice shall be from an approved source and shall be stored and handled in a manner as to be protected from contamination.

Handwashing facilities consisting of a lavatory or lavatories and equipped with hot and cold or tempered running water, hand-cleansing soap or detergent, single service towels or approved hand drying devices shall be located and maintained to permit convenient use by all employees in shellfish processing areas, utensil washing areas, and toilet rooms or vestibules. Such facilities shall be kept clean and in an approved condition of repair.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-060, filed 7/24/78; Regulation 58.060, effective 3/11/60.]

WAC 246-282-080 Identification and records. (1)

Shellfish shall be so identified by label, tag or other permanent means at the wholesale or retail level that any given container of shucked meats or lot of shellstock can be traced to the original growing area source(s).

(2) Shipments of shellfish in the shell shall be accompanied by a tag, label or other mark showing that the shipper has been duly certified by the state in which the growing area is located.

(3) Shucked shellfish shall be packed, shipped and sold retail in approved containers that are legibly marked by embossing, lithographing, or other permanent means with the name, address, and certification number of the packer, and the date packed or coded in such a manner that the date packed can be determined. Fresh packs shall be labeled with wording equivalent to "keep refrigerated," and frozen packs shall be labeled with wording equivalent to "keep frozen."

(4) All shippers, reshippers, packers, repackers, and wholesalers shall keep an accurate record of all lots of shellfish received, shipped and sold. Retailers shall keep a record of all lots received. Such records shall be kept on file for a minimum of six months.

(5) Information recorded by the harvester-shipper shall include: (a) Location of harvesting area(s) by name or code, (b) name and quantity of shellfish, (c) date of harvest, (d) date shipped.

(6) Shucker-packers and repackers shall record the following information: (a) Location of harvesting area(s) by name or code, or name of harvester, (b) name and quantity of shellfish, (c) date of harvest or date received, and (d) packing date.

[Statutory Authority: RCW 69.30.030, 92-02-019 (Order 225B), § 246-282-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-070, filed 7/24/78; Regulation 58.070, effective 3/11/60.]

WAC 246-282-090 Certificate of compliance—Certificate of approval—Suspension for revocation of certificate of approval—License—Revocation of license.

(1) Only shellfish bearing, upon the tag, bill of lading, label or container as required in WAC 246-282-080(2), a certifi-

cate of compliance with the sanitary requirements of this state, or a state, territory, province of, or country of origin whose requirements are equal or comparable to these regulations, may be sold or offered for sale for human consumption in the state of Washington.

(2) No person shall possess a commercial quantity of shellfish or sell or offer to sell for human consumption shellfish in the state which have not been grown, harvested, shucked, packed, or shipped in accordance with the provisions of these regulations or chapter 69.30 RCW.

(3) Certificates of approval for shellfish growing areas and/or for shellfish operations, as hereinabove defined, shall be issued and administered as prescribed in chapter 69.30 RCW, and may be denied, suspended, or revoked for any failure or refusal to maintain the sanitary requirements or to comply with the provisions of these regulations or chapter 69.30 RCW.

(4) No person shall operate a "shellfish operation," as defined hereinabove, without having first obtained a valid operating license issued by the director. Each license shall be issued only for the shellfish operation and person named in the application and no license shall be transferable or assignable except with the written approval of the director. An operating license will be issued to any person who shall evidence:

(a) Possession of, or an approved application for, a valid certificate of approval as described hereinabove;

(b) Continued compliance by the licensee, the licensee's employees, or those under the licensee's supervision, with the rules and regulations herein and with chapter 69.30 RCW which compliance, in part, shall include the licensee's processing and/or sale of shellfish which have been harvested only from growing areas certified by the director in the name of the licensee or the person from whom the licensee has obtained said shellfish.

(5) The department shall have cause to deny, revoke, or suspend the license required herein where any licensee has:

(a) Had his or her certificate of approval, as defined above, and as issued by the department, revoked, suspended, or denied, for any reason;

(b) Failed or refused to comply with any of the rules and regulations of the state board of health or chapter 69.30 RCW;

(c) Harvested shellfish from any growing area which does not have a valid certificate of approval issued in the name of said licensee or in the name of the person from whom the licensee has obtained said shellfish;

(d) Obtained or attempted to obtain an operating license, certificate of compliance, or certificate of approval by fraudulent means or misrepresentation.

(6) All licenses and certificates issued under the provisions of these regulations shall be posted in a conspicuous place on the licensed premises. The licensee, or at least one employee thereof, shall have a certificate of approval on his or her person while engaged in the harvesting of shellfish. Such certificates of approval shall be provided by the department. All licenses and certificates of approval shall expire on the thirtieth day of September each year.

(7) Certificates of approval shall be displayed, upon request, to an authorized representative of the department, a fisheries patrol officer, or an ex officio patrol officer. Failure to do so subjects the grower to the penalty provisions

of this chapter, as well as immediate seizure of the shellfish by the representative or officer.

[Statutory Authority: RCW 69.30.030. 92-02-019 (Order 225B), § 246-282-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-282-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030 and 43.20.050. 85-21-048 (Order 296), § 248-58-080, filed 10/14/85. Statutory Authority: RCW 69.30.030. 78-08-059 (Order 163), § 248-58-080, filed 7/24/78; Regulation 58.080, effective 3/11/60.]

WAC 246-282-100 Notice of decision—Adjudicative proceeding. (1) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(2) The department's notice of imposition of a civil fine shall be consistent with RCW 43.70.095. A person upon whom the department imposes a civil fine has the right to an adjudicative proceeding to contest the decision.

(3) A license applicant or holder or a person upon whom the department imposes a civil fine, contesting a department decision, shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved;

(ii) The grounds for contesting the department decision; and

(iii) A copy of the contested department decision.

(4) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 69.30.030. 92-02-019 (Order 225B), § 246-282-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-282-100, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW and RCW 69.30.030. 90-06-049 (Order 040), § 248-58-085, filed 3/2/90, effective 3/2/90.]

WAC 246-282-110 Administrative provisions. (1) The person in charge of shellfish growing areas or processing plant operations shall ensure operations are conducted in a manner complying with the requirements of these regulations. The person in charge shall periodically inspect the shellfish operations to determine compliance with these regulations, and shall take measures to correct any deficiencies thereby revealed.

(2) The director shall have access to and be permitted to inspect any and all areas comprising the shellfish operation for the purpose of determining compliance with these regulations and chapter 69.30 RCW, or for the purpose of determining whether any person, shellfish, or condition in the shellfish operation constitutes a nuisance or a threat to the public health.

(a) In the course of such inspection, the director may, among other things, examine or sample the shellfish in the shellfish operation as often as necessary to determine its safeness for human consumption, and he or she may also examine any and all pertinent records pertaining to shellstock, shellfish, or operational supplies purchased, received, or used, and records pertaining to persons employed.

(b) If, after the inspection of a shellfish operation, the director finds such operation fails to comply with the requirements of the law, rules and regulations, he or she shall issue to the person in charge of the shellfish operation a written order specifying the manner in which the operation fails to comply with the law, rules and regulations and which sets out a specific and reasonable period of time for correction of the violations.

(c) In the event the person in charge of the shellfish operation fails to correct the violations as required by the order of the director, the director may revoke the certificate of compliance and/or license of such person and/or initiate such legal enforcement proceeding as authorized by law.

(d) During or after an investigation or inspection of a shellfish operation, the director may, if he or she suspects the shellfish are unsafe for human consumption, give to the owner or person in charge of the shellfish operation a written hold order prohibiting the disposition or sale of the shellfish pending the director's further investigation of the shellfish's safety. The person in charge shall thereafter cease from offering such shellfish for human consumption and shall store such shellfish in a suitable place as prescribed by the director until the hold order is lifted or modified by the director or by a court of competent jurisdiction. Shellfish placed under a hold order shall not be destroyed for at least two days and shall not be held longer than fifteen days; however, upon a finding that the shellfish are safe for human consumption, the director may release them immediately.

(e) If, during an inspection of a shellfish harvesting operation, the owner or person in charge of the operation fails to immediately display his or her certificate of approval upon request from an authorized representative of the department, a fisheries patrol officer, or an ex officio patrol officer, a written hold order may be issued prohibiting the disposition or sale of the shellfish or the shellfish may immediately be seized. If a hold order is issued, the person in charge shall thereafter cease from offering such shellfish for human consumption and shall store such shellfish in a suitable place as prescribed by the director until the hold order is lifted or modified by the director or by a court of competent jurisdiction. Shellfish placed under a hold order or seizure shall not be destroyed for at least two days and shall not be held longer than fifteen days; however, upon a finding that the shellfish are safe for human consumption, the director shall determine disposition. If the director determines that the operation is certified, the shellfish shall be released to the owner or person in charge of the operation. If the director determines that the operation is not certified, the director may release the shellfish according to his or her discretion.

(f) If after investigation the director determines the shellfish are unsafe for human consumption, he or she shall give the owner or person in charge of the shellfish operation

a written abatement order, which abatement order may require any or all of the following measures:

(i) A permanent prohibition against the sale or disposition of the shellfish for human consumption;

(ii) Immediate destruction of the shellfish in question by measures such as denaturing and placement in a sanitary landfill. Such destruction shall be accomplished by at least two employees of the department or authorized representatives.

(iii) At the discretion of the director, shellfish having been found to be unsafe for human consumption may be relayed to an approved growing area for subsequent reharvest.

(g) When the director, after conducting an appropriate investigation, determines either that:

(i) A shellfish operation or employee is transmitting a disease; or

(ii) There is a substantial risk a shellfish operation or employee may be transmitting a disease, he or she may thereafter give to the owner or person in charge of the shellfish operation an abatement order, which order may require any or all of the following measures:

(A) Immediate closure of the shellfish operation until, in the opinion of the director, no further danger of a disease outbreak exists;

(B) Immediate exclusion of the employee from all shellfish operations or food service establishments;

(C) Restriction of the employee's service to some area of the operation where there would be no danger of transmitting disease.

(h) As an alternative to the abatement order described in subsection (2)(g) of this section, the director may require any or all of the employees to submit to adequate medical and laboratory examinations, including examination of their bodily discharges.

(i) No person shall remove or alter a notice or tag constituting a hold order or abatement order placed on the shellfish by the director, and neither such shellfish nor its container shall be relabeled, repacked, reprocessed, altered, disposed of, destroyed, or released without permission of the director, except on order by a court of competent jurisdiction.

(j) In the event the person in charge of the shellfish operation fails to comply with either the hold order or the abatement order described above, the director may revoke the certificate of compliance and/or license of such person and/or initiate such legal enforcement proceedings as are authorized by law; except that the director may undertake summary abatement of the shellfish, an article, or a condition which is so severely contaminated or contaminating that a delay in abatement until legal enforcement proceedings could be had would pose a grave threat to the public health.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-282-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030 and 43.20.050, 85-21-048 (Order 296), § 248-58-090, filed 10/14/85. Statutory Authority: RCW 69.30.030, 78-08-059 (Order 163), § 248-58-090, filed 7/24/78; Regulation 58.090, effective 3/11/60.]

WAC 246-282-120 Penalty clause. Any person found violating any of the provisions of these regulations or chapter 69.30 RCW shall be guilty of a gross misdemeanor, and upon conviction thereof shall be subject to a fine of not

less than twenty-five dollars nor more than one thousand dollars, or imprisonment in the county jail of the county in which the offense was committed for not less than thirty days nor more than one year, or to both fine and imprisonment.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-282-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030 and 43.20.050. 85-21-048 (Order 296), § 248-58-500, filed 10/14/85. Statutory Authority: RCW 69.30.030. 78-08-059 (Order 163), § 248-58-500, filed 7/24/78.]

WAC 246-282-130 Separability clause. Should any section, paragraph, clause or phrase of these rules and regulations be declared unconstitutional or invalid for any reason, the remainder of said rules and regulations shall not be affected thereby.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-282-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 69.30.030. 78-08-059 (Order 163), § 248-58-900, filed 7/24/78.]

WAC 246-282-990 Shellfish program certification fees. (1) Annual certificate fees shall be:

Type of Operation	Annual Fee
Reshipper	\$110
Repacker	\$290
Shellstock Shipper	
0 - 10 Acres	\$110
11 - 49 Acres	\$150
50 - 99 Acres	\$180
100 + Acres	\$255
Shucker-Packer	
1 - 5 Shuckers	\$180
6 - 10 Shuckers	\$225
11 - 15 Shuckers	\$255
16 - 30 Shuckers	\$290
30 - 50 Shuckers	\$300
50 + Shuckers	\$325

(2) Type of operations are defined as follows:

(a) "Reshipper" shall mean shippers transshipping shucked stock in original containers, or shellstock from certified shellfish shippers to other dealers or to final consumers. (Reshippers are not authorized to shuck or repack shellfish.)

(b) "Repacker" shall mean shippers, other than the original shucker, packing shucked shellfish into containers for delivery to the consumer. A repacker may shuck shellfish or act as a shellstock shipper if the repacker has the necessary facilities.

(c) "Shellstock shipper" shall mean shippers growing, harvesting, buying, or selling shellstock. Shellstock shippers are not authorized to shuck shellfish or to repack shucked shellfish.

(d) "Shucker-packer" shall mean shippers shucking and packing shellfish. A shucker-packer may act as a shellstock dealer.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-282-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055. 85-12-029 (Order 2236), § 440-44-065, filed 5/31/85; 84-13-006 (Order 2109), § 440-44-065, filed 6/7/84; 83-15-021 (Order 1991), § 440-44-065, filed 7/14/83. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-065, filed 6/4/82.]

Chapter 246-290 WAC PUBLIC WATER SUPPLIES

WAC

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GENERAL PROVISIONS

WAC 246-290-001 Purpose and scope. (1) The purpose of these rules is to define basic regulatory requirements and to protect the health of consumers using public drinking water supplies.

(2) The rules of this chapter are specifically designed to ensure:

(a) Adequate design, construction, sampling, management, and operation practices; and

(b) Provision of high quality drinking water in a reliable manner and in a quantity suitable for intended use.

(3) Purveyors shall be responsible for complying with the regulatory requirements of this chapter.

(4) These rules are intended to conform with the intent of P.L. 93-523, the Federal Safe Drinking Water Act of 1974, and the Safe Drinking Water Act Amendments of 1986, P.L. 99-339.

(5) The rules set forth are adopted under chapter 43.20 RCW. Other statutes relating to this chapter are:

(a) Chapter 43.20A RCW, Department of social and health services;

(b) Chapter 43.XXXXXX RCW (chapter 9, Laws of 1989 1st Extraordinary Session), department of health;

(c) Chapter 70.05 RCW, Local health department, boards, officers—Regulations;

(d) Chapter 70.116 RCW, Public Water System Coordination Act of 1977;

(e) Chapter 70.119 RCW, Public water supply systems—Certification and regulation of operators; and

(f) Chapter 70.119A RCW, Public water supply systems—Penalties and compliance.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-001, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339, 89-21-020 (Order 336), § 248-54-005, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-005, filed 2/17/88. Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-005, filed 9/8/83.]

WAC 246-290-010 Definitions. Abbreviations:

GW - ground water under the direct influence of surface water;

kPa - kilo pascal (SI units of pressure);

m - meter;

MCL - maximum contaminant level;

mg/L - milligrams per liter;

MID - maximum instantaneous demand;

mL - milliliter;

mm - millimeter;

NTNC - nontransient **noncommunity**;

NTU - nephelometric turbidity unit;

pCi/L - picocuries per liter;

psi - pounds per square inch;

SAL - state advisory level;

SOC - synthetic organic chemical;

THM - trihalomethane;

TNC - transient **noncommunity**;

TNTC - too numerous to count;

ug/L - micrograms per liter;

umhos/cm - micromhos per centimeter;

VOC - volatile organic chemical; and

WFI - water facilities inventory and report form.

"Acute" means posing an immediate risk to human health.

"Coliform sample" means a sample of water collected from the distribution system at or after the first service and analyzed for coliform presence in compliance with this chapter.

"Composite sample" means a sample created in a certified laboratory by mixing equal parts of water from up to five different sources.

"Comprehensive system evaluation (CSE)" means a review, inspection, and assessment of a public water system, including but not limited to: Source; facilities; equipment; operation and administration; maintenance; records; planning documents and schedules; and monitoring, for the purpose of ensuring that safe and adequate drinking water is provided.

"Confirmation" means to demonstrate the results of a sample to be precise by analyzing a repeat sample. Confir-

mation occurs when analysis results fall within plus or minus thirty percent of the original sample.

"Confluent growth" means a continuous bacterial growth covering a portion or the entire filtration area of a membrane filter in which bacterial colonies are not discrete.

"Contaminant" means a substance present in drinking water which may adversely affect the health of the consumer or the aesthetic qualities of the water.

"Cross-connection" means a physical arrangement connecting a public water system, directly or indirectly, with anything other than another potable water system, and capable of contaminating the public water system.

"Department" means the Washington state department of health or health officer as identified in a joint plan of operation in accordance with WAC 246-290-030(1).

"Disinfection" means the use of chlorine or other agent or process the department approves for killing or inactivating microbiological organisms, including pathogenic and indicator organisms.

"Distribution system" means that portion of a public water supply system which stores, transmits, pumps, and distributes water to consumers.

"Domestic or other nondistribution system plumbing problem," means contamination of a system having more than one service connection with the contamination limited to the specific service connection from which the sample was taken.

"Duplicate (verification) sample" means a second sample collected at the same time and location as the first sample and used for verification.

"Fire flow" means the rate of water flow needed to fight fires under WAC 246-293-640 or adopted city, town, or county standards.

"Ground water under the direct influence of surface water (GW)" means any water beneath the surface of the ground, which the department determines has the following characteristics:

Significant occurrence of insects or other macroorganisms, algae, or large-diameter pathogens such as *Giardia lamblia*; or

Significant and relatively rapid shifts in water characteristics such as turbidity, temperature, conductivity, or pH closely correlating to climatological or surface water conditions.

"Guideline" means a department document assisting the purveyor in meeting a rule requirement.

"Health officer" means the health officer of the city, county, city-county health department or district, or an authorized representative.

"Hydraulic analysis" means the study of the water system network evaluating water flows within the distribution system under worst case conditions such as, maximum hourly flow plus fire flow, when required, or maximum instantaneous demand (MID), when fire flow is not required. Hydraulic analysis includes consideration of all factors affecting system energy losses.

"Maximum contaminant level (MCL)" means the maximum permissible level of a contaminant in water the purveyor delivers to any public water system user, measured at the locations identified under WAC 246-290-300, Table 4.

"Maximum contaminant level violation" means a confirmed measurement above the MCL and for a duration

of time, where applicable, as outlined under WAC 246-290-310.

"Maximum instantaneous demand (MID)" means the maximum rate of water use, excluding fire flow, which has occurred or is expected to occur within a defined service area at an instant in time.

"Nonacute" means posing a possible or less than immediate risk to human health.

"Nonresident" means a person without a permanent home or without a home served by the system, such as travelers, transients, employees, students, etc.

"Population served" means the number of persons, resident and nonresident, having immediate access to drinking water from a public water system, whether or not such persons have actually consumed water from that system. The number of nonresidents shall be the average number of persons having immediate access to drinking water on days access was provided during that month. In the absence of specific population data, the number of residents shall be computed by multiplying the number of active services by two and one-half.

"Potable" means water suitable for drinking by the public.

"Primary standards" means standards based on chronic, nonacute, or acute human health effects.

"Protected ground water source" means a ground water source the purveyor shows to the department's satisfaction as protected from potential sources of contamination on the basis of hydrogeologic data and/or satisfactory water quality history.

"Public water system" is defined and referenced under WAC 246-290-020.

"Purchased source" means water a purveyor purchases from a public water system not under the control of the purveyor for distribution to the purveyor's customers.

"Purveyor" means an agency or subdivision of the state or a municipal corporation, firm, company, mutual or cooperative association, institution, partnership, or person or other entity owning or operating a public water system. Purveyor also means the authorized agent of such entities.

"Regularly" means four hours or more per day for four days or more per week.

"Repeat sample" means a sample collected to confirm the results of a previous analysis.

"Resident" means an individual living in a dwelling unit served by a public water system.

"Seasonal source" means a public water system source used on a regular basis, but not in use more than three consecutive months within a twelve-month period.

"Secondary standards" means standards based on factors other than health effects.

"Service" means a connection to a public water system designed to serve a single family residence, dwelling unit, or equivalent use. When the connection is a group home or barracks-type accommodation, two and one-half persons shall be equivalent to one service.

"Special purpose sample" means a sample collected for reasons other than the monitoring compliance specified in this chapter.

"Standard methods" means the most recently published edition of the book, titled *"Standard Methods for the Examination of Water and Waste Water,"* jointly published

(1992 Ed.)

by the American Public Health Association, American Water Works Association (AWWA), and Water Pollution Control Federation. This book is available through public libraries or may be ordered from AWWA, 6666 West Quincy Avenue, Denver, Colorado 80235.

"State advisory level (SAL)" means a department-established value for a chemical without an existing MCL. The SAL represents a level which when exceeded, indicates the need for further assessment to determine if the chemical is an actual or potential threat to human health.

"Synthetic organic chemical (SOC)" means a manufactured carbon-based chemical.

"Too numerous to count (TNTC)" means the total number of bacterial colonies exceeds 200 on a 47-mm diameter membrane filter used for coliform detection.

"Trihalomethane (THM)" means one of a family of organic compounds, named as derivatives of methane, where three of the four hydrogen atoms in methane are each substituted by a halogen atom in the molecular structure. Trihalomethanes may occur when chlorine, a halogen, is added to water.

"Verification" means to demonstrate the results of a sample to be precise by analyzing a duplicate sample. Verification occurs when analysis results fall within plus or minus thirty percent of the original sample.

"Volatile organic chemical (VOC)" means a manufactured carbon-based chemical that vaporizes quickly at standard pressure and temperature.

"Water facilities inventory form (WFI)" means the department form summarizing each public water system's characteristics.

"Well field" means a group of wells one purveyor owns or controls which:

Draw from the same aquifer or aquifers as determined by comparable inorganic chemical analysis; and

Discharge water through a common pipe and the common pipe shall allow for collection of a single sample before the first distribution system connection.

[Statutory Authority: RCW 43.20.050, 92-04-070 (Order 241B), § 246-290-010, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW, 91-07-031 (Order 150B), § 246-290-010, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-010, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339, 89-21-020 (Order 336), § 248-54-015, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-015, filed 2/17/88. Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-015, filed 9/8/83.]

WAC 246-290-020 Applicability. (1) Public water system shall mean any system, excluding a system serving only one single-family residence, providing piped water for human consumption, including any:

(a) Collection, treatment, storage, or distribution facilities under control of the purveyor and used primarily in connection with such system; and

(b) Collection or pretreatment storage facilities not under control of the purveyor primarily used in connection with such system.

(2) The rules of this chapter shall apply to all public water systems except public water systems meeting the following conditions:

(a) Consists only of distribution and/or storage facilities and does not have any source or treatment facilities;

(b) Obtains all of its water from, but is not owned by, a public water system where the rules of this chapter apply;

(c) Does not sell water directly to any person;

(d) The water distribution facilities are subject to inspection or regulation by a state or local agency other than the department. Bottled water operations fall under Federal Food and Drug Administration regulations, but must obtain water from a source approved by the department or local health jurisdiction; and

(e) Is not a passenger-conveying carrier in interstate commerce.

(3) Public water systems shall be categorized as follows:

(a) A **Group A** water system shall be a system:

(i) With fifteen or more service connections, regardless of the number of people; or

(ii) Serving an average of twenty-five or more people per day for sixty or more days within a calendar year, regardless of the number of service connections.

Group A water systems are further defined as **community** and **noncommunity** water systems.

(b) **Community** (residential) water system means any **Group A** public water system:

(i) With fifteen or more service connections used by residents for one hundred eighty or more days within a calendar year, regardless of the number of people; or

(ii) Regularly serving twenty-five or more residents for one hundred eighty or more days within the calendar year, regardless of the number of service connections.

Examples of a **community** (residential) water system might include a municipality, subdivision, mobile home park, apartment complex, college with dormitories, nursing home, or prison.

(c) **Noncommunity** water system means a **Group A** public water system which is not a **community** (residential) water system. **Noncommunity** water systems are further defined as:

(i) **Nontransient (NTNC)** (school/business/industry) water system means a **noncommunity** water system regularly serving twenty-five or more of the same nonresidents for one hundred eighty or more days within a calendar year.

Examples of a **NTNC** water system might include a school, day care center, or a business, factory, motel, or restaurant with twenty-five or more employees on-site.

(ii) **Transient (TNC)** (food/lodging/recreation) water system means a **noncommunity** water system:

(A) Having fifteen or more service connections used less than one hundred eighty days within a calendar year; or

(B) Serving twenty-five or more different nonresidents for sixty or more days within a calendar year; or

(C) Serving twenty-five or more of the same nonresidents for sixty or more days, but less than one hundred eighty days within a calendar year; or

(D) Serving twenty-five or more residents for sixty or more days, but less than one hundred eighty days within a calendar year.

Examples of a **TNC** water system might include a restaurant, tavern, motel, campground, state or county park, an RV park, vacation cottages, highway rest area, or church.

(d) A **Group B** water system means a public water system which is not a **Group A** water system. This would include a water system with less than fifteen service connections and serving:

(i) An average of less than twenty-five people for sixty or more days within a calendar year; or

(ii) Any number of people for less than sixty days within a calendar year.

(4) A public water system meeting more than one of the categories described in this section shall be classified by the department in the following order:

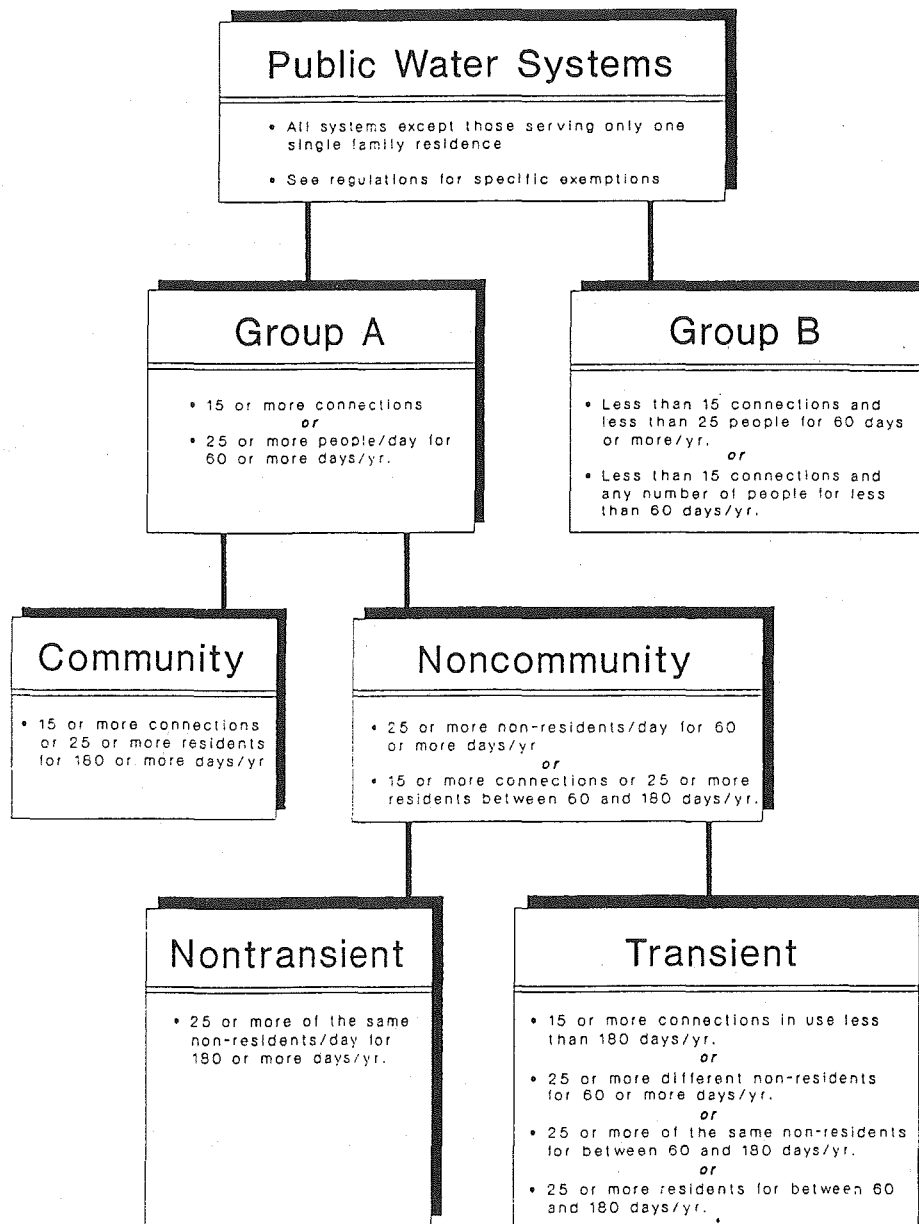
(a) **Community** water system;

(b) **NTNC** water system;

(c) **TNC** water system; and

(d) **Group B** water system.

TABLE 1



[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-020, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339, 89-21-020 (Order 336), § 248-54-006, filed 10/10/89, effective 11/10/89.]

WAC 246-290-030 General administration. (1) The department and the health officer for each local health jurisdiction shall develop a joint plan of operation listing the roles of each agency for administering these rules. This plan shall:

(a) Specifically designate those systems for which the department and local health officer have primary responsibility;

(b) Provide for a minimum acceptable level of water system supervision;

(c) Be signed by the department and the chairperson of the local board of health; and

(d) Be updated as needed.

Wherever in these rules the term "department" is used, the term "health officer" may be substituted based on the terms of this plan of operation.

(2) The department shall, upon request, review and report on the adequacy of water supply supervision to both the state and local boards of health.

(3) The local board of health may adopt rules covering public water systems within its jurisdiction for which the health officer has assumed primary responsibility. Adopted local board of health rules shall be:

(a) No less stringent than chapter 248-54 WAC; and

(b) Revised, if necessary, within twelve months after the effective date of revised state board of health rules. During this time period, existing local rules shall remain in effect, except provisions of the revised state board of health rules which are more stringent than the local board of health rules shall apply.

(4) The health officer may waive any or all requirements of these rules for **Group B** water systems with two connections where the health officer has assumed primary responsibility for these systems.

(5) For those public water systems where the health officer has assumed primary responsibility, the health officer may approve project reports and construction documents in accordance with engineering criteria approved by the department.

(6) An advisory committee shall be established to provide guidance to the department on drinking water issues. The committee shall be appointed by the department and conform to department policies for advisory committees. The committee shall be composed of representatives of public water systems, public groups, agencies, and individuals having an interest in drinking water.

(7) The department may develop guidelines to clarify sections of the rules as needed and make these available for distribution.

(8) Fees may be charged by the department as authorized in chapter 43.20A RCW and by local health agencies as authorized in RCW 70.05.060 to recover all or a portion of the costs incurred in administering these rules.

(9) All state and local agencies involved in review, approval, surveillance, testing, and/or operation of public water systems, or issuance of permits for buildings or sewage systems shall be governed by these rules and any decisions of the department.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-030, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339, 89-21-020 (Order 336), § 248-54-025, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-025, filed 2/17/88. Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-025, filed 9/8/83.]

WAC 246-290-040 Requirements for engineers. (1)

All water system plans, project reports, and construction documents shall be prepared by a professional engineer licensed in the state of Washington under chapter 18.43 RCW and shall bear the engineer's seal and signature. Exceptions to this requirement are:

(a) Minor projects not requiring engineering expertise as determined by the department under WAC 248-54-096(2); and

(b) Public water systems serving less than ten service connections consisting of a simple well and pressure tank with one pressure zone and not providing special treatment or having special hydraulic considerations. These systems

may be designed by a water system designer certified by the local health jurisdiction in those counties having a recognized water system designer program.

(2) 'A Construction Report For Public Water System Projects' shall be submitted to the department on a form provided by the department within sixty days of completion and before use of any project approved by the department. The form shall:

(a) Be signed by:

(i) A professional engineer; or

(ii) In the case of projects not requiring engineering expertise as outlined in this section, the certified designer.

(b) State:

(i) The project is constructed and is substantially completed in accordance with approved construction documents; and

(ii) In the opinion of the engineer, based on information available, the installation, testing, and disinfection of the system was carried out per department rules.

(3) It shall be the responsibility of the purveyor to assure the requirements of this section are fulfilled before the use of any completed project. When necessary, an updated water facilities inventory shall accompany the 'Construction Report For Public Water System Projects' form.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-040, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339, 89-21-020 (Order 336), § 248-54-035, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-035, filed 2/17/88. Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-035, filed 9/8/83.]

WAC 246-290-050 Enforcement. When any public water system is out of compliance with these rules, the department may initiate appropriate enforcement actions, regardless of any prior approvals issued by the department. These actions may include any one or combination of the following:

(1) Issuance of letters instructing or requiring appropriate corrective measures;

(2) Issuance of a compliance schedule for specific actions necessary to achieve compliance status;

(3) Issuance of departmental orders requiring purveyors to submit project reports, construction documents, and construction report forms;

(4) Issuance of departmental orders requiring specific actions or ceasing unacceptable activities within a designated time period;

(5) Issuance of departmental orders to stop work and/or refrain from using any public water system or improvements thereto until all written approvals required by statute or rule are obtained;

(6) Imposition of civil penalties for failure to comply with departmental orders may be issued for up to 5,000 dollars per day per violation under authority of chapter 70.119A RCW; and

(7) Legal action may be taken by the attorney general or local prosecutor. The legal action may be criminal or civil.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-050, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339, 89-21-020 (Order 336), § 248-54-045, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307),

§ 248-54-045, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-045, filed 9/8/83.]

WAC 246-290-060 Variances, exemptions, and waivers. (1) General. The state board of health may grant variances, exemptions, and waivers of the requirements of this chapter according to the procedures outlined in this section. The procedures outlined in this section rather than the procedures outlined in WAC 248-08-596 shall govern the board's consideration of requests for variances, exemptions, and waivers of the requirements of this chapter. Consideration by the board of requests for variances, exemptions, and waivers shall not be considered adjudicative proceedings as that term is defined in chapter 34.05 RCW. Statements and written material regarding the request may be presented to the board at or before the public hearing wherein the application will be considered. Allowing cross-examination of witnesses in such matters shall be within the discretion of the board.

(2) Variances. The state board of health may grant a variance to a public water system if the system has applied the best available technology as identified by the environmental protection agency (EPA) and still cannot meet an MCL as specified in section 1415, P.L. 99-523 as amended by P.L. 99-339. Procedures for obtaining a variance are identified under subsection (5) of this section.

(3) Exemptions. The state board of health may grant an exemption to a public water system if the system cannot meet an MCL or provide the required treatment in a timely manner, or both, as specified under section 1416, P.L. 93-523 as amended by P.L. 99-339. Procedures for obtaining an exemption are identified under subsection (5) of this section.

(4) Waivers. The state board of health may grant a waiver to a public water system if the system cannot meet the requirements of these regulations pertaining to any subject not covered by EPA regulations. Procedures for obtaining a waiver are identified under subsection (5) of this section.

(5) Procedures.

(a) The state board of health may grant a variance or exemption to a public water system after the purveyor completes the following actions:

(i) The purveyor applies to the department. The application may be in the form of a letter. It must state clearly the reason for the request and what actions the purveyor took to meet the requirement;

(ii) The purveyor provides notice to customers of the purveyor's application for a variance or exemption and provides proof of such notice to the department;

(iii) The department prepares a schedule of compliance and recommendations for the state board of health to condition the granting of a variance or exemption. The schedule must address:

(A) Actions the system must undertake within the time frame specified; and

(B) Implementation of such control measures the department may require in the interim until the purveyor completes the actions required in subsection (5)(a)(ii)(A) of this section.

(iv) The state board of health provides notice for and conducts a public hearing on the purveyor's request and the department's recommendation.

(b) The state board of health may grant a waiver to a public water system after completing the following actions:

(i) The purveyor applies to the department. The application may be in the form of a letter. It must clearly state the reason for the request;

(ii) The purveyor provides notice to customers of the purveyor's application for a waiver and provides proof of such notice to the department;

(iii) The department prepares a recommendation to the state board of health for the granting or denial of the waiver request; and

(iv) The state board of health provides notice for and conducts a public hearing on the purveyor's request.

(c) The state board of health shall not grant a variance, exemption, or waiver unless the state board of health finds:

(i) Due to compelling factors, the public water system is unable to comply with the requirement;

(ii) The schedule of compliance for a variance or exemption will result in the public water system completing the required actions within the stated time frame; and

(iii) The granting of the variance, exemption, or waiver will not result in an unreasonable risk to the health of consumers served by the public water system.

(d) The EPA shall review any variance or exemption granted by the state board of health for concurrence, revocation, or revision provided under sections 1415 and 1416 of P.L. 93-523.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-060, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-055, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-055, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-055, filed 9/8/83.]

PART 1. PLANNING AND ENGINEERING DOCUMENTS

WAC 246-290-100 Water system plan. (1) The purpose of this section is to establish a uniform process for public water systems to:

(a) Identify present and future needs;
 (b) Set forth means for meeting those needs; and
 (c) Do so in a manner consistent with other relevant plans and local, state, and federal laws.

(2) The following categories of public water systems shall develop a water system plan for review and approval by the department:

(a) All public water systems having one thousand or more services;

(b) Public water systems located in areas utilizing the Public Water System Coordination Act of 1977, chapter 70.116 RCW and chapter 248-56 WAC;

(c) Any public water system experiencing problems related to planning, operation, and/or management as determined by the department; and

(d) Any new public water system as determined by the department.

(3) The department shall work with the purveyor and other parties to establish the level of detail for a water

system plan. In general, the scope and detail of the plan will be related to size and complexity of the water system. Project reports may be combined with a water system plan.

(4) The water system plan shall address the following elements as a minimum for a period of at least ten years into the future. A department guideline titled *Planning Handbook* is available to assist the utility in adequately addressing these elements:

- (a) Basic water system planning data,
- (b) Existing system analysis,
- (c) Planned improvements,
- (d) Financial program,
- (e) Relationship and compatibility with other plans,
- (f) Supporting maps,
- (g) Operations program,
- (h) State Environmental Policy Act, and
- (i) Watershed control when applicable (see WAC 248-54-225).

(5) Department approval of a water system plan shall be in effect for five years from the date of written approval unless:

- (a) Major system improvements are contemplated which are not addressed in the plan,
 - (b) Changes occur in the basic planning data affecting improvements identified, and
 - (c) The department requests an updated plan.
- (6) The purveyor shall update the plan and submit it for approval every five years. However, if only minor alterations to an existing plan are considered necessary, the purveyor may submit evidence supporting this conclusion in a letter to the department for approval.

(7) Project reports and construction documents submitted for approval per WAC 248-54-086 and 248-54-096 by purveyors required to have a water system plan, will not be considered for approval unless there is a current approved water system plan and the plan adequately addresses the project.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-065, filed 2/17/88. Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-065, filed 9/8/83.]

WAC 246-290-110 Project report. (1) The purpose of this section is to assure the following factors are taken into account for specific projects prior to construction:

- (a) Engineering concepts;
- (b) Design criteria;
- (c) Planning;
- (d) Source protection;
- (e) Water quality;
- (f) Local requirements such as fire flow; and
- (g) Other necessary department-determined considerations.

The project report shall document the reasons for carrying out the project and WAC 248-54-096 shall identify how the project will be constructed.

(2) The purveyor shall submit project reports to the department for written approval prior to installation of any new water system, water system extension, or improvement with the following exceptions:

- (a) Installation of valves, fittings, and meters;

(b) Installation of hydrants under WAC 248-54-135(3);

(c) Repair of a system component or replacement with a similar component;

(d) Maintenance or painting of surfaces not contacting potable water; and

(e) Distribution mains if approved standard construction specifications are documented in the water system plan approved by the department.

(3) Project reports shall be consistent with the standards identified under WAC 248-54-105 and shall include, at a minimum, the following (information contained in a current approved water system plan or current project report need not be duplicated in the new project report. Any planning information in a project report shall be project specific.):

(a) Project description. Identify what the project is intended to achieve, design considerations, approach, etc.;

(b) Planning. If the system has an approved water system plan, show the project's relationship to the plan. If a water system plan is not required, include:

- (i) General project background with population and water demand forecasts;
- (ii) Relationship between the project and other system components;
- (iii) Project schedule;
- (iv) Management program; and
- (v) How the project will impact neighboring water systems.

(c) Alternatives. Describe options, their impacts, and justify the selected alternative;

(d) Legal considerations. Identify legal aspects such as ownership, right-of-way, sanitary control area, and restrictive covenants. Include discussion of the project's relationship with the boundary review board and the utility and transportation commission;

(e) Engineering calculations. Describe how the project complies with the design considerations. Include the hydraulic analysis, sizing justification, and other relevant technical considerations necessary to support the project;

(f) Management. If the system has an approved management program, refer to that document. If not, describe:

- (i) System ownership and management responsibilities;
- (ii) Long-term management considerations;
- (iii) How the project will be operated; and
- (iv) How the project will be maintained over time.

(g) Implementation. Identify the schedule for completion of the project and implementation strategies, if any. Project phasing should also be discussed;

(h) State Environmental Policy Act (SEPA). Include an environmental impact statement, determination of nonsignificance, or justify why SEPA does not apply to the project. Refer to chapter 248-06 WAC and the "DSHS Drinking Water SEPA Guide";

(i) Source development information. If the project involves source, refer to requirements per WAC 248-54-097; and

(j) Type of treatment. If the project involves treatment, refer to WAC 248-54-155.

(k) The information required in this subsection shall be included in a letter addendum to the workbook for **Group B** water systems.

(4) Approval of project documents shall be in effect for two years unless the department determines a need to withdraw the approval. An extension of the approval may be obtained by submitting a status report and a written schedule for completion. Extensions may be subject to additional terms and conditions imposed by the department.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-110, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-086, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-086, filed 2/17/88.]

WAC 246-290-120 Construction documents. (1)

The purpose of this section is to assure detailed plans, specifications, drawings, and other documents are adequately prepared for specific projects. These documents shall identify how specific projects will be constructed while WAC 248-54-086 documents the reasons for carrying out the project.

(2) Construction documents shall be submitted to the department for written approval prior to installation of any new water system, or water system extension or improvement with the following exceptions:

- (a) Installation of valves, fittings, and meters;
- (b) Installation of hydrants per WAC 248-54-135(3);
- (c) Repair of a system component or replacement with a similar component;
- (d) Maintenance or painting of surfaces not contacting potable water;
- (e) Distribution mains if the approved water system plan documents standard construction specifications approved by the department.

(3) Construction documents shall be consistent with the standards identified in WAC 248-54-105 and shall include, at a minimum, the following:

- (a) Drawings. Include detailed drawings of each project component;
- (b) Material specifications. List detailed material specifications for each project component;
- (c) Construction specifications. List detailed construction specifications and assembly techniques for carrying out the project;
- (d) Testing. Identify testing criteria and procedures for each applicable portion of the project;
- (e) Disinfection. Identify specific disinfection procedures which must conform with American water works association standards or other standards acceptable by the department;
- (f) Inspection. Identify provisions for inspection of the installation of each project component. See WAC 248-54-035 for construction reporting requirements; and
- (g) Change orders. All changes except for minor field revisions must be submitted to and approved by the department in writing. Identify who will be responsible for obtaining departmental approval and how change orders will be reported to the department.

(4) Approval of construction documents shall be in effect for two years unless the department determines a need to withdraw the approval. An extension of the approval may be obtained by submitting a status report and a written schedule for completion. Extensions may be subject to additional terms and conditions imposed by the department.

(5) A department guideline titled *Planning Handbook* is available to assist the utility in meeting the requirements of this section.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-096, filed 2/17/88.]

WAC 246-290-130 Source approval. (1) No new, previously unapproved sources, or modification of existing sources shall be used as a public water supply without department approval. A party seeking approval shall provide the department:

(a) A copy of the water right permit, if required, obtained from the department of ecology for the source, quantity, type, and place of use;

(b) A hydrogeologic assessment of the proposed source along with a general description of the watershed, spring, and/or aquifer recharge area affecting the quantity or quality of flow. Seasonal variation shall also be included;

(c) For unfiltered surface water, the watershed control program identified under WAC 246-290-450;

(d) Upstream water uses affecting either water quality or quantity;

(e) A map showing the project location and vicinity;

(f) A map depicting topography, distances to the surface water intake, well or spring from existing property lines, buildings, potential sources of contamination, ditches, drainage patterns, and any other natural or man-made features affecting the quality or quantity of water;

(g) The dimensions and location of the sanitary control area under WAC 246-290-210;

(h) Copies of the recorded legal documents for the sanitary control area under WAC 246-290-210;

(i) A copy of the on-site inspection approval made by the department or local health department representative;

(j) A copy of the water well report;

(k) Required construction documents;

(l) Well source development data establishing the capacity of the source. Data shall include static water level, yield, the amount of drawdown, recovery rate and duration of pumping. Interference between existing sources and the source being tested shall also be shown. The source shall be pump tested at no less than the maximum design rate to determine whether the well and aquifer are capable of supplying water at the rate desired and to provide information necessary to determine the proper pump settings in the well. A department guideline on pump testing is available to assist purveyors;

(m) An initial analysis result of raw water quality, including as a minimum a bacteriological, complete inorganic chemical and physical analysis and a VOC analysis. When source water quality is subject to variation, the department may require additional monitoring defining the range of variation. If the source being approved is for a **community** system, a radionuclide analysis shall also be required;

(n) Detailed information regarding aspects of water quality addressed under WAC 246-290-310. If treatment is planned, refer to WAC 246-290-250(2); and

(o) Other department-required information. Before initiating source development or modification, the purveyor

shall contact the department to identify any such additional information.

(2) The department shall issue a written approval when:

(a) The purveyor submits the necessary information; and

(b) The developed source provides water complying with chapter 246-290 WAC.

[Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-130, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-130, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-097, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-097, filed 2/17/88.]

WAC 246-290-140 Existing system approval. (1)

When applying for approval, purveyors of existing public water systems without approved construction documents shall provide department-determined information.

(2) Information provided shall be consistent with chapter 248-54 WAC.

(3) Purveyors shall contact the department to obtain a list of specific requirements.

(4) After receipt of the required data, the department shall review the information and either:

(a) Approve the as-built construction documents; or

(b) Indicate what additional actions the purveyor needs to complete before approval is granted.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-140, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-098, filed 10/10/89, effective 11/10/89.]

PART 2. DESIGN OF PUBLIC WATER SYSTEMS

WAC 246-290-200 Design standards. (1) Good engineering practices shall be used in the design of all public water systems, such as those set out in:

(a) The most recently published edition of *Recommended Standards for Water Works, A Committee Report of the Great Lakes - Upper Mississippi River Board of State Sanitary Engineers*;

(b) Department guideline titled *Sizing Guidelines for Public Water Supplies*;

(c) Standard specifications of the American Public Works Association;

(d) Standard specifications of the American Water Works Association; and

(e) Design criteria, such as contained in current college texts and professional journal articles, acceptable to the department; and

(f) WAC 173-160 *Minimum Standards for Construction and Maintenance of Water Wells*.

(2) In addition, all new or expanding public water systems shall use the following design factors:

(a) Historical water use,

(b) Community versus recreational uses of water,

(c) Local conditions and/or regulations,

(d) Community expectations,

(e) Public Water System Coordination Act considerations where appropriate,

(f) Risks from potential disasters, and

(g) Other requirements as determined by the department.

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[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-105, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-105, filed 9/8/83.]

WAC 246-290-210 Source protection. Public drinking water shall be obtained from the highest quality source feasible. Existing and proposed sources of supply shall conform to the water quality standards established in WAC 248-54-175.

(1) For wells and springs, the minimum sanitary control area shall have a radius of one hundred feet (thirty meters) and two hundred feet (sixty meters) respectively, unless engineering justification supports a smaller area. The justification must address geological and hydrological data, well construction details, and other relevant factors needed to assure adequate sanitary control. The department may require a larger sanitary control area than is set forth above if geological and hydrological data supports such a decision. It shall be the purveyor's responsibility to obtain the protection needed.

Within the control area, no source of contamination may be constructed, stored, disposed of, or applied without the permission of the department and the purveyor.

(2) The control area for new sources must be owned by the purveyor in fee simple, or the purveyor must have the right to exercise complete sanitary control of the land through other legal provisions.

A purveyor, owning all or part of the sanitary control area in fee simple or having possession and control, shall send to the department copies of legal documentation, such as a duly recorded declaration of covenant, restricting the use of the land. This document shall state no source of contamination may be constructed, stored, disposed of, or applied without the permission of the department and the purveyor, and if any change in ownership of the system or sanitary control area is considered, all affected parties shall be informed of these requirements.

Where portions of the control area are in the possession and control of another, the purveyor must obtain a duly recorded restrictive covenant which shall run with the land, restricting the use of said land in accordance with these rules and provide the department with copies of the appropriate documentation.

(3) Adequate watershed control, consistent with treatment provided, shall be demonstrated and documented for all surface water sources per WAC 248-54-225. A section in the department guideline titled *Planning Handbook* deals with watershed control and is available to assist utilities in this regard.

(4) Where, in the opinion of the department a potential risk exists to the water quality of a source, additional controls or monitoring may be required.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-125, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-125, filed 9/8/83.]

WAC 246-290-220 Lead in materials. (1) Any pipe, pipe fittings, solder, or flux used in the installation or repair of a public water system shall be lead-free. This prohibition

shall not apply to leaded joints necessary for the repair of cast iron pipes.

(2) Within the context of this section, lead-free shall mean:

(a) No more than eight percent lead in pipes and pipe fittings, and

(b) No more than two-tenths of one percent lead in solder and flux.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-131, filed 2/17/88.]

WAC 246-290-230 Distribution systems. (1) All new distribution reservoirs shall have suitable watertight roofs or covers preventing entry by birds, animals, insects, and dust and shall include appropriate provisions to safeguard against trespass, vandalism, and sabotage. Existing uncovered distribution reservoirs shall comply with the provisions of WAC 248-54-245.

(2) The purveyor shall size and evaluate the distribution system using a hydraulic analysis acceptable to the department.

(3) The minimum diameter of all distribution mains shall be six inches (150 mm) unless justified by hydraulic analysis. Systems designed to provide fire flows shall have a minimum distribution main size of six inches (150 mm). Installation of standard fire hydrants shall not be allowed on mains less than six inches (150 mm) in diameter.

(4) New public water systems or additions to existing systems shall provide a design quantity of water at a positive pressure of at least 30 psi (200 kPa) under maximum instantaneous demand flow conditions measured at any customer's water meter or at the property line if no meter exists.

(5) If fire flow is to be provided, the distribution system shall be designed to provide the required fire flow at a pressure of at least 20 psi during MID conditions.

(6) Booster pumps needed for individual services shall be subject to review and approval by the department. Installation shall be made under the supervision of the purveyor to assure cross-connection control requirements are met.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-135, filed 2/17/88. Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-135, filed 9/8/83.]

WAC 246-290-240 Disinfection of facilities. No portion of a public water system containing potable water shall be put into service, nor shall service be resumed, until the facility has been effectively disinfected. The procedure used for disinfection shall conform to the American Water Works Association standards or other standards acceptable to the department. In cases of new construction, drinking water shall not be furnished to the consumer until satisfactory bacteriological samples have been analyzed by a laboratory certified by the state.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-145, filed 2/17/88.]

Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-145, filed 9/8/83.]

WAC 246-290-250 Treatment design. (1) Finished water quality from existing and proposed sources of supply shall conform to the minimum water quality standards established in WAC 248-54-175.

(2) Predesign studies shall be required for proposed surface water supplies and those ground water supplies requiring treatment. The goal of the predesign study shall be to establish the most acceptable method to produce satisfactory finished water quality and shall be done in conjunction with a project report as per WAC 248-54-086.

(3) The minimum level of treatment for all public water supplies shall be continuous and effective disinfection. The requirement for disinfection may be waived for public water systems with:

(a) Well sources:
(i) Having a satisfactory bacteriological history, and
(ii) Drawing from a protected aquifer as determined by the department.

(b) Spring sources:
(i) Having a satisfactory bacteriological history;
(ii) Having evidence to demonstrate, to the satisfaction of the department, the spring originates in a stratum not subject to contamination; and
(iii) Where the water is collected by a method precluding contamination.

(4) Treatment for surface water supplies shall be coagulation, flocculation, filtration, and disinfection. In certain cases, alternative treatment designs followed by disinfection may be acceptable to the department, provided there is adequate engineering justification.

(5) Disinfection as the sole means of treatment for existing surface water supplies may be acceptable to the department provided the purveyor can demonstrate adequate:

(a) Watershed control per WAC 248-54-225,
(b) Raw and finished water quality, and
(c) Water system design and operation.
(6) Disinfection methods, other than chlorination, i.e., ozonation, ultraviolet radiation, iodination may be approved by the department with appropriate engineering justification.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-155, filed 2/17/88. Statutory Authority: RCW 43.20.050, 83-19-002 (Order 266), § 248-54-155, filed 9/8/83.]

PART 3. WATER QUALITY

WAC 246-290-300 Monitoring requirements. (1) General.

(a) The purveyor shall comply with the requirements of this section. The monitoring requirements specified in this section are minimums. The department may require additional monitoring when contamination is present or suspected in the water system.

(b) Special purpose samples collected by the purveyor shall not count toward fulfillment of the monitoring requirements of this chapter.

(c) The purveyor shall ensure samples required by this section are collected, transported, and submitted for analysis

according to department-approved methods. The analyses shall be performed by the state public health laboratory or another laboratory certified by the department. Qualified water utility, certified laboratory, or health department personnel may conduct measurements for pH, temperature, residual disinfectant concentration and turbidity as required by this chapter.

(d) When one public water system receives water from another public water system, the purveyor of the receiving system is only required to collect coliform samples in accordance with subsection (2) of this section and trihalomethane samples in accordance with subsection (5) of this section.

(i) The department may reduce the monitoring requirement of the receiving system provided the receiving system:

(A) Has a satisfactory water quality history as determined by the department;

(B) Operates in a satisfactory manner consistent with this chapter;

(C) Is included in the supplying system's regular monitoring schedule; and

(D) Is included in the service and population totals for the supplying system.

(ii) The department may periodically review both system's sampling records to determine if continued reduced monitoring is appropriate. If the department determines a change in the monitoring requirements of the receiving system is appropriate:

(A) The department shall notify the purveyor of the change in monitoring requirements; and

(B) The purveyor shall conduct monitoring as directed by the department.

(e) Upon failure to comply with a monitoring requirement, the purveyor shall notify:

(i) The department in accordance with WAC 246-290-480; and

(ii) The water system users in accordance with WAC 246-290-330.

(2) Bacteriological.

(a) The purveyor shall be responsible for collection and submittal of coliform samples from representative points throughout the distribution system after the first service and at regular time intervals unless otherwise specified in this subsection, each month the system provides water to consumers.

(b) Coliform monitoring plan.

(i) The purveyor of a **Group A** system shall prepare a written coliform monitoring plan and base routine monitoring upon the plan. A department guideline titled '*Preparation of a Coliform Monitoring Plan*' is available to assist the purveyor in preparing this plan.

(ii) The plan shall include at a minimum:

(A) A system map or diagram showing the locations of:

(I) Water sources;

(II) Storage, treatment, and pressure regulation facilities;

(III) Distribution systems;

(IV) Pressure zones;

(V) Interconnections; and

(VI) Coliform sample collection sites.

(B) A narrative which includes the following information:

(I) Public water system identification number;

(II) Population served and services;

(III) Water sources;

(IV) System facilities and processes for storage, treatment, and pressure regulation;

(V) Coliform sample collection sites; and

(VI) Sampling schedules.

(iii) The purveyor of a **Group A** system shall:

(A) Keep the coliform monitoring plan on file with the system and make it available to the department for inspection upon request;

(B) Revise or expand the plan at any time the plan no longer ensures representative monitoring of the system, or as directed by the department; and

(C) Submit the plan to the department for review and approval when requested.

(c) Monitoring frequency. The number of required routine coliform samples is based on total population served.

(i) **Group A.**

(A) Purveyors of **community** systems shall collect and submit for analysis no less than the number of routine samples listed in Table 2 during each month of operation;

(B) Purveyors of **noncommunity** systems shall collect and submit for analysis no less than the number of samples required in Table 2. Each month's population shall include all residents and nonresidents served during that month. During months when the total population served is less than twenty-five, routine sample collection is not required when:

(I) Using only protected ground water sources;

(II) No coliforms were detected in samples during the previous month; and

(III) One routine sample has been collected and submitted for analysis during one of the previous two months.

(C) Purveyors of systems serving both a resident and a nonresident population shall base their minimum sampling requirement on the total of monthly populations served, both resident and nonresident and on Table 2; and

(D) Purveyors of systems with a nonresident population lasting two weeks or less during a month shall sample as directed by the department.

(ii) **Group B.** Purveyors shall collect and submit a sample for coliform analysis at least once every twelve months.

(d) Surface water or ground water under the direct influence of surface water (GWI) sources. The purveyor of a **Group A** system using unfiltered surface water or unfiltered GWI sources shall:

(i) Collect and submit for analysis, at least one coliform sample at the first service connection during each day in which source water turbidity exceeds 1 NTU; or

(ii) Collect samples as directed by the department when logistical problems beyond the purveyor's control make analysis of the coliform samples impractical because the time between sample collection and analysis exceeds thirty hours. If the department extends the time limits, the purveyor shall collect the required samples as directed by the department.

(e) Comprehensive system evaluations (CSEs).

(i) Purveyors of **Group A** systems with less than four thousand one hundred one population served shall:

(A) Submit to a CSE conducted by the department; or

(B) Collect and submit for analysis five or more routine samples each month.

(ii) **Group A** systems electing to have CSEs conducted shall be evaluated by the department based on the following schedule:

(A) **Community** water systems, every five years. The initial CSE shall be conducted by June 29, 1994; and

(B) **Noncommunity** systems, every five years unless the system uses only disinfected and protected ground water as determined by the department, in which case the evaluation need only be repeated every ten years. The initial CSE shall be conducted by June 29, 1999.

(iii) The department may substitute source of contamination information from the wellhead protection program for CSE information if the information was collected since the last CSE; and

(iv) Purveyors of **Group A** systems collecting less than five routine samples per month shall be responsible for:

(A) Ensuring full cooperation in scheduling CSEs; and

(B) Making all facilities and records available to the department for the CSE.

(f) Invalid samples. When a coliform sample is determined invalid under WAC 246-290-320 (2)(d), the purveyor shall:

(i) Not include the sample in the determination of monitoring compliance; and

(ii) Collect and submit for coliform analysis, an additional drinking water sample from the same location as each invalid sample within twenty-four hours of notification by the laboratory of the invalid sample.

TABLE 2

MINIMUM MONTHLY ROUTINE COLIFORM SAMPLING REQUIREMENTS FOR GROUP A SYSTEMS

Population Served ¹	Minimum Number of Routine Samples/Month	
	When NO samples with a coliform presence were collected during the previous month	When ANY samples with a coliform presence were collected during the previous month
During Month		
1 - 1,000	1 ²	5
1,001 - 2,500	2	5
2,501 - 3,300	3	5
3,301 - 4,100	4	5
4,101 - 4,900	5	5
4,901 - 5,800	6	6
5,801 - 6,700	7	7
6,701 - 7,600	8	8
7,601 - 8,500	9	9
8,501 - 12,900	10	10
12,901 - 17,200	15	15
17,201 - 21,500	20	20
21,501 - 25,000	25	25
25,001 - 33,000	30	30
33,001 - 41,000	40	40
41,001 - 50,000	50	50
50,001 - 59,000	60	60
59,001 - 70,000	70	70
70,001 - 83,000	80	80
83,001 - 96,000	90	90
96,001 - 130,000	100	100
130,001 - 220,000	120	120
220,001 - 320,000	150	150
320,001 - 450,000	180	180
450,001 - 600,000	210	210
600,001 - 780,000	240	240
780,001 - 970,000	270	270
970,001 - 1,230,000 ³	300	300

¹ Does not include population of utilities wholesaled to, except as provided under WAC 246-290-300 (1)(c).

² Noncommunity systems using only protected ground water sources and serving less than 25 individuals, may collect and submit for analysis, one sample every three months.

³ Systems serving populations larger than 1,230,000 shall contact the department for the minimum number of samples required per month.

(3) Inorganic chemical and physical.

(a) A complete inorganic chemical and physical analysis shall consist of the primary and secondary chemical and physical standards.

(i) Primary chemical and physical standards are arsenic, barium, cadmium, chromium, fluoride, lead, mercury, nitrate (as N), selenium, silver, sodium, and turbidity.

(ii) Secondary chemical and physical standards are chloride, color, copper, hardness, iron, manganese, specific conductivity, sulfate*, total dissolved solids*, and zinc.

*Required only when specific conductivity exceeds seven hundred micromhos/centimeter.

(b) Samples taken for inorganic chemical analyses shall be collected at the source before treatment.

(c) Monitoring frequency.

(i) **Purveyors of community** systems shall have one complete analysis from each surface water source every twelve months;

(ii) **Purveyors of community** systems shall have one complete analysis from each ground water source or well field every thirty-six months;

(iii) **Purveyors of NTNC, TNC, and Group B** systems shall have one initial complete analysis from each source or well field. The department may waive or reduce the minimum requirement for the initial complete analysis if available information shows, to the department's satisfaction, that the aquifer provides water of satisfactory inorganic chemical quality; and

(iv) After the initial complete analysis, **NTNC, TNC, and Group B** systems shall have one nitrate sample analyzed from each source or well field every thirty-six months.

(d) When the purveyor provides treatment for one or more inorganic chemical or physical contaminants, samples shall be taken for the specific contaminant or contaminants before and after treatment. The department shall determine the frequency of sampling.

(4) Turbidity.

(a) **Purveyors of Group A** water systems with surface water sources shall monitor turbidity at least once a day.

(b) The purveyor shall monitor turbidity at or before the entry point to the distribution system and where needed for treatment process control.

(c) The department shall determine monitoring requirements for **Group B** water systems.

(d) The purveyor shall ensure that turbidimeters are designed to meet the criteria listed under standard methods, and that turbidimeters are properly operated, maintained, and calibrated at all times, based on the manufacturer's recommendations.

(5) Trihalomethanes.

(a) **Purveyors of community** systems serving a population of ten thousand or more and providing water treated

with chlorine or other halogenated disinfectant shall monitor as follows:

(i) Ground water sources. The purveyor shall collect one sample from each treated spring, well, or well field every twelve months. This sample shall be taken at the source before treatment or at the extreme end of the distribution system. The sample shall be analyzed for maximum total trihalomethane potential (MTTP); or

(ii) Surface water sources. The purveyor shall collect four samples per treated source every three months. The samples shall be taken within a twenty-four-hour period. The purveyor shall take one of the samples from the extreme end of the distribution system and three samples from representative locations in the distribution system. The samples shall be analyzed for total trihalomethanes (TTHM), the sum of trichloromethane, bromodichloromethane, dibromochloromethane, and tribromomethane. After one year of monitoring, the department may reduce the monitoring frequency to one sample every three months per treatment plant if the TTHM levels are less than 0.10 mg/L. The purveyor shall take the sample at the extreme end of the distribution system; or

(iii) Purchased surface water sources. The purveyor shall collect one water sample per each purchased surface source every three months. The sample shall be taken at the extreme end of the distribution system and analyzed for TTHM.

(b) **Purveyors of community** systems shall monitor for TTHM when serving a population less than ten thousand and providing surface water treated with chlorine or other halogenated disinfectant. The purveyor shall collect one water sample per treated source every three months for one year. The sample shall be taken at the extreme end of the distribution system and analyzed for TTHM. After the first year, the purveyor shall monitor surface water sources every thirty-six months.

(c) **Purveyors of community** systems shall monitor for TTHM when serving less than ten thousand people and purchasing surface water treated with chlorine or other halogenated disinfectant or adding a halogenated disinfectant after purchase. The purveyor shall collect one water sample every three months at the extreme end of the distribution system or at a department-acceptable location. The sample shall be analyzed for TTHM. After the first year, the purveyor shall monitor every thirty-six months.

(6) Pesticides.

Purveyors of community systems with surface water sources shall monitor for pesticides for which MCLs are established every thirty-six months. The purveyor shall collect the water sample during the time of year the department designates as the time when pesticide contamination is most likely to occur.

(7) Radionuclides.

(a) The purveyor's monitoring requirements for gross alpha particle activity, radium-226 and radium-228 shall be:

(i) **Community** systems shall monitor once every forty-eight months. Compliance shall be based on the analysis of an annual composite of four consecutive quarterly samples or the average of the analyses of four samples obtained at quarterly intervals;

(ii) The purveyor may omit analysis for radium-226 and radium-228 if the gross alpha particle activity is less than five pCi/L; and

(iii) If the results of the initial analysis are less than half of the established MCL, the department may allow compliance with the monitoring requirements based on analysis of a single sample collected every forty-eight months.

(b) The purveyor's monitoring requirements for man-made radioactivity shall be:

(i) **Purveyors of community** systems using surface water sources and serving more than one hundred thousand persons and other department-designated water systems shall monitor for man-made radioactivity (beta particle and photon) every forty-eight months. Compliance shall be based on the analysis of a composite of four consecutive quarterly samples or the analysis of four quarterly samples; and

(ii) Purveyors of any water system, as directed by the department, downstream from a nuclear facility shall monitor once every three months for gross beta and iodine-131, and monitor once every twelve months for strontium-90 and tritium. The department may allow the substitution of environmental surveillance data taken in conjunction with a nuclear facility for direct monitoring of man-made radioactivity if the department determines that such data is applicable to a particular public water system.

(8) Volatile organic chemicals (VOCs).

(a) Prior to January 1, 1992, purveyors of **COMMUNITY** and **NTNC** systems shall monitor each source for all chemicals listed in Table 3. If a source is treated, VOC samples shall be collected after treatment. The department shall contact the purveyor to schedule sample collection. Purveyors shall submit VOC samples to a certified lab for analysis within ninety days of contact by the department.

TABLE 3

LIST 1: VOLATILE ORGANIC CHEMICALS (VOCs) WITH MCLs

Trichloroethylene
Carbon Tetrachloride
Vinyl Chloride¹
1,2-Dichloroethane
Benzene
para-Dichlorobenzene
1,1-Dichloroethylene
1,1,1-Trichloroethane

¹ Purveyors shall monitor for vinyl chloride if their source sampling has verified one or more of the following:

Trichloroethylene;
1,2-Dichloroethane;
1,1-Dichloroethylene;
1,1,1-Trichloroethane;
Chloroethane;
trans-1,2-Dichloroethylene;
cis-1,2-Dichloroethylene;
1,1-Dichloroethane;
1,1,2-Trichloroethane;
1,1,1,2-Tetrachloroethane;
1,1,2,2-Tetrachloroethane; or
Tetrachloroethylene.

LIST 2: VOCs WITHOUT MCLs

Bromobenzene	p-Xylene
Bromomethane	O-Xylene
Chlorobenzene	m-Xylene
Chloroethane	Bromochloromethane
Chloromethane	n-Butylbenzene
o-Chlorotoluene	Dichlorodifluoromethane
p-Chlorotoluene	Fluorotrichloromethane
Dibromomethane	Hexachlorobutadiene
m-Dichlorobenzene	Isopropylbenzene
o-Dichlorobenzene	p-Isopropyltoluene
trans-1,2-Dichloroethylene	Naphthalene
cis-1,2-Dichloroethylene	n-Propylbenzene
Dichloromethane	Sec-butylbenzene
1,1-Dichloroethane	Tert-butylbenzene
1,1-Dichloropropene	1,2,3-Trichlorobenzene
1,2-Dichloropropane	1,2,4-Trichlorobenzene
1,3-Dichloropropane	1,2,4-Trimethylbenzene
1,3-Dichloropropene	1,3,5-Trimethylbenzene
2,2-Dichloropropane	Trihalomethanes:
Ethylbenzene	Bromodichloromethane
Styrene	Dibromochloromethane
1,1,2-Trichloroethane	Tribromomethane
1,1,1,2-Tetrachloroethane	Trichloromethane
1,1,2,2-Tetrachloroethane	
Tetrachloroethylene	
1,2,3-Trichloropropane	
Toluene	

LIST 3: VOCs WITHOUT MCLs WHICH ARE
REQUIRED FOR SELECTED SOURCES

Ethylene dibromide (EDB)	1,2-Dibromo-3-Chloropropane (DBCP)
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(b) During the first twelve months of VOC monitoring, purveyors shall sample surface water and ground water sources once every three months or as directed by the department. If no VOCs (exclusive of THMs) are detected in the first sample from a ground water source, the purveyor shall sample that source once more during that twelve-month period.

(c) If no VOCs (exclusive of THMs) are verified after the initial twelve months of monitoring, purveyors of **COMMUNITY** and NTNC water systems shall monitor each source at least once every thirty-six months.

(d) Purveyors may ask the certified lab to composite samples representing as many as five individual sources. If VOCs (exclusive of THMs) are detected in a composite sample, the lab shall analyze the duplicate sample for each source in the composite at the purveyor's expense. If duplicate samples are not available, the purveyor shall repeat sample each individual source within fourteen days of contact by the department. Analysis of all VOC samples shall occur within fourteen days of collection. The following restrictions shall apply to compositing of samples:

- (i) Samples shall not be composited in the field;
- (ii) Multiple source samples, such as samples representing well fields, shall not be composited;
- (iii) Ground water sources shall not be composited with surface water sources; and
- (iv) The following shall not be composited:
 - (A) Seasonal sources;

(B) Sources treated for the presence of synthetic organic chemicals; and

(C) Sources with synthetic organic chemicals, exclusive of THMs, detected within the last five years.

(e) Purveyors with emergency and seasonal sources shall monitor the sources when the sources are in use.

(f) If five or fewer separate sources are combined through a common pipe before entering the distribution system, and before a domestic service, the department may consider those sources as one for the purpose of sampling. The purveyor shall collect the distribution samples as directed by the department. If VOCs, exclusive of THMs, are detected, the department shall require repeat samples from each individual source.

(g) The department may require the purveyor to repeat sample for confirmation of results.

(h) The department shall not require purveyors of **COMMUNITY** systems serving less than two hundred fifty people and NTNC systems to monitor for the List 2 VOCs after purveyors complete the first twelve months of VOC monitoring for both List 1 and List 2 VOCs, provided no VOCs, exclusive of THMs, are detected and no changes have occurred indicating a need to take additional samples.

(i) Purveyors of **COMMUNITY** and NTNC systems shall monitor for List 3 VOCs if the department determines their sources are located in an area where the chemicals may have been applied, transported, handled, manufactured, or stored. The department shall notify purveyors of **COMMUNITY** and NTNC systems if this requirement applies.

(j) When water is purchased from another system, the department shall not require the purveyor of the purchasing system to monitor that source for VOCs. However, the department's requirement may still apply for a purveyor to monitor for trihalomethanes under subsection (5) of this section.

(k) Only samples analyzed after January 1, 1988, by a laboratory certified for VOC analysis of drinking water may be used to meet the requirements of this subsection.

(9) Other substances.

On the basis of public health concerns, the department may require the purveyor to monitor for additional substances.

TABLE 4
MONITORING LOCATION

Sample Type	Sample Location
Bacteriological	From representative points throughout distribution system.
Complete Inorganic Chemical and Physical	From a sample point as close to the source as possible.
Nitrate	From a sample point as close to the source as possible.
Turbidity - Surface Water	From a location at or before the entry point to the distribution system.
Trihalomethanes - Surface Water	From representative points in the distribution system.
- Ground Water	From the source before treatment.
Pesticides - Surface Water	From the source.

Radionuclides	From the source.
VOCs	After treatment, if any, at entry points to distribution systems.
Other Substances	As directed by the department.

[Statutory Authority: RCW 43.20.050. 92-04-070 (Order 241B), § 246-290-300, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-300, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-300, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-165, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-165, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-165, filed 9/8/83.]

WAC 246-290-310 Maximum contaminant levels (MCLs). (1) The purveyor shall be responsible for complying with the standards of water quality identified in this section. If a substance exceeds its maximum contaminant level (MCL), the purveyor shall take follow-up action in accordance with WAC 246-290-320.

(2) When enforcing the standards described under this section, the department shall enforce compliance with the primary standards as its first priority.

(3) Bacteriological.

(a) MCLs under subsection (3) of this section shall be considered primary standards.

(b) Notwithstanding subsection (1) of this section, if coliform presence is detected in any sample, the purveyor shall take follow-up action in accordance with WAC 246-290-320(2).

(c) Acute MCL. An acute MCL for coliform bacteria occurs when there is:

- (i) Fecal coliform presence in a repeat sample;
- (ii) E. coli presence in a repeat sample; or
- (iii) Coliform presence in a set of repeat samples collected as a follow-up to a sample with fecal coliform or E. coli presence.

(d) Nonacute MCL. A nonacute MCL for coliform bacteria occurs when:

(i) Systems taking less than forty routine samples during the month have more than one sample with coliform presence; or

(ii) Systems taking forty or more routine samples during the month have more than 5.0 percent with coliform presence.

(e) MCL compliance. The purveyor shall determine compliance with the coliform MCL for each month the system provides drinking water to the public. In determining MCL compliance, the purveyor shall:

- (i) Include:
 - (A) Routine samples;
 - (B) Repeat samples; and
 - (C) Samples collected under WAC 246-290-300 (2)(d).
 - (ii) Not include:
 - (A) Samples invalidated under WAC 246-290-320 (2)(d); and
 - (B) Special purpose samples.
- (4) Inorganic chemical and physical.

The primary and secondary MCLs are listed in Table 5 and 6:

TABLE 5
INORGANIC CHEMICAL CHARACTERISTICS

Substance	Primary MCLs (mg/L)
Arsenic (As)	0.05
Barium (Ba)	1.0
Cadmium (Cd)	0.01
Chromium (Cr)	0.05
Fluoride (F)	4.0
Lead (Pb)	0.05
Mercury (Hg)	0.002
Nitrate (as N)	10.0
Selenium (Se)	0.01
Sodium (Na)	*

Substance	Secondary MCLs (mg/L)
Chloride (Cl)	250.0
Copper (Cu)	1.0
Fluoride (F)	2.0
Iron (Fe)	0.3
Manganese (Mn)	0.05
Silver (Ag)	0.1
Sulfate (SO ₄)	250.0
Zinc (Zn)	5.0

Note: Although the state board of health has not established an MCL for sodium, there is enough public health significance connected with sodium levels to require inclusion in inorganic chemical and physical monitoring.

TABLE 6
PHYSICAL CHARACTERISTICS

Substance	Primary MCL
Turbidity	1 NTU

Substance	Secondary MCLs
Color	15 Color Units
Hardness	None established
Specific Conductivity	700 umhos/cm
Total Dissolved Solids (TDS)	500 mg/L

(5) Turbidity.

(a) The department shall consider standards under subsection (5) of this section primary standards.

(b) The MCLs for turbidity are:

(i) One NTU, based on a monthly average of the maximum daily turbidity, where the maximum daily turbidity is defined as the average of the:

- (A) Highest two hourly readings over a twenty-four hour period when continuous monitoring is used; or
- (B) Daily grab samples taken within one hour when daily monitoring is used.

The department may increase the MCL to five NTUs if the purveyor can show the source is within a controlled watershed and the source meets the requirements under WAC 246-290-210 and 246-290-450.

(ii) Five NTUs based on an average of the maximum daily turbidity for two consecutive days.

(6) Trihalomethanes.

(a) The department shall consider standards under subsection (6) of this section primary standards.

(b) The MCL for total trihalomethanes (TTHM) is 0.10 mg/L. The concentrations of each of the trihalomethane compounds (trichloromethane, dibromochloromethane, bromodichloromethane, and tribromomethane) are added together to determine the TTHM level.

(c) There is no MCL for maximum total trihalomethane potential (MTTP). When the MTTP value exceeds 0.10 mg/L, the purveyor shall follow up as described under WAC 246-290-320(5).

(7) Pesticides.

(a) The department shall consider standards under subsection (7) of this section primary standards.

(b) The MCLs for pesticides are:

(i) Chlorinated hydrocarbons:

Substance	MCL (mg/L)
Endrin	0.0002
Lindane	0.004
Methoxychlor	0.1
Toxaphene	0.005

(ii) Chlorophenoxys:

Substance	MCL (mg/L)
2, 4-D	0.1
2, 4, 5-TP Silvex	0.01

(8) Radionuclides.

(a) The department shall consider standards under subsection (8) of this section primary standards.

(b) The MCLs for radium-226, radium-228, and gross alpha particle radioactivity are:

Substance	MCL (pCi/L)
Radium-226	3
Combined Radium-226 and Radium-228	5
Gross alpha particle activity (excluding uranium)	15

(c) The MCL for beta particle and photon radioactivity from man-made radionuclides is: The average annual concentration shall not produce an annual dose equivalent to the total body or any internal organ greater than four millirem/year.

The department shall assume compliance with the four millirem/year dose limitation if the average annual concentration for gross beta activity, tritium, and strontium-90 are less than 50 pCi/L, 20,000 pCi/L, and 8 pCi/L respectively. When both tritium and strontium-90 are present, the sum of their annual dose equivalents to bone marrow shall not exceed four millirem/year.

(9) Volatile organic chemicals.

(a) The department shall consider standards under this subsection primary standards.

(b) The VOCs with MCLs are:

Substance	MCL (mg/L)
Benzene	.005
Carbon Tetrachloride	.005
1,2-Dichloroethane	.005
Trichloroethylene	.005
para-Dichlorobenzene	.075
1,1-Dichloroethylene	.007
1,1,1-Trichloroethane	.200
Vinyl Chloride	.002

(c) The department shall determine compliance with this subsection based on the running annual average of results for each sample location. The purveyor is in violation of an MCL when:

(i) The running annual average for one location is greater than the MCL (sum of all sample results in one year divided by four > MCL); or

(ii) Any one sample result causes the running annual average to exceed the MCL.

(10) The state board of health shall determine maximum contaminant levels for any additional substances.

[Statutory Authority: RCW 43.20.050. 92-04-070 (Order 241B), § 246-290-310, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-310, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-310, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-175, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-175, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-175, filed 9/8/83.]

WAC 246-290-320 Follow-up action. (1) General.

(a) If water quality exceeds any MCLs listed under WAC 246-290-310, the purveyor shall notify the department and take follow-up action as described in this section.

(b) When a primary standard violation occurs, the purveyor shall:

(i) Notify the department in accordance with WAC 246-290-480;

(ii) Notify the consumers served by the system in accordance with WAC 246-290-330;

(iii) Determine the cause of the contamination; and

(iv) Take action as directed by the department.

(c) When a secondary standard violation occurs, the purveyor shall notify the department and take action as directed by the department.

(2) Bacteriological.

(a) When coliform bacteria are present in any sample and the sample is not invalidated under (d) of this subsection, the purveyor shall ensure the following actions are taken:

(i) The sample is analyzed for fecal coliform or E. coli. When a sample with a coliform presence is not analyzed for E. coli or fecal coliforms, the sample shall be considered as having a fecal coliform presence for MCL compliance purposes;

(ii) Repeat samples are collected in accordance with (b) of this subsection;

(iii) The department is notified in accordance with WAC 246-290-480; and

(iv) The cause of the coliform presence is determined and corrected.

(b) Repeat samples.

(i) The purveyor shall collect and submit for analysis a set of repeat samples for every sample in which the presence of coliforms is detected. A set of repeat coliform samples consists of:

(A) Four repeat samples for **Group A** systems collecting one routine coliform sample each month;

(B) Three repeat samples for all **Group A** systems collecting more than one routine coliform sample each month; and

(C) Two repeat samples for **Group B** systems.

(ii) The purveyor shall collect repeat sample sets according to Table 7;

(iii) The purveyor shall collect one set of repeat samples for each sample with a coliform presence, as follows:

(A) For **Group A** systems, all samples in a set of repeat samples shall be collected on the same day and submitted for analysis within twenty-four hours after notification by the laboratory of a coliform presence. If the purveyor can demonstrate to the satisfaction of the department, that logistical problems beyond the purveyor's control make analysis of the samples in the repeat sample set impractical because the time between sample collection and analysis will exceed thirty hours, then the purveyor shall collect the required set of repeat samples as directed by the department; and

(B) For **Group B** systems, as soon as possible after the notification by the laboratory of a sample with a coliform presence.

(iv) When repeat samples have coliform presence, the purveyor shall:

(A) Contact the department and collect a minimum of one additional set of repeat samples as directed by the department; or

(B) Collect one additional set of repeat samples for each sample where coliform presence was detected.

(v) The purveyor of a system providing water to consumers via a single service shall collect repeat samples from the same location as the sample with a coliform presence. The set of repeat samples shall be collected:

(A) On the same collection date; or

(B) Over consecutive days with one sample collected each day until the required samples in the set of repeat samples are collected.

(vi) If a sample with a coliform presence was collected from the first two or last two active services, the purveyor shall monitor as directed by the department;

(vii) The purveyor may change a previously submitted routine sample to a sample in a set of repeat samples when the purveyor:

(A) Collects the sample within five adjacent service connections of the location from which the initial sample with a coliform presence was collected;

(B) Collects the sample after the initial sample with a coliform presence was submitted for analysis;

(C) Collects the sample on the same day as other samples in the set of repeat samples, except under (b)(iii) of this subsection; and

(D) Notifies the department of the change.

(viii) The department may determine that sets of repeat samples specified under this subsection are not necessary during a month when a nonacute coliform MCL violation is determined for the system.

Table 7
REPEAT SAMPLE REQUIREMENTS

SYSTEM GROUP (# OF ROUTINE SAMPLES COLLECTED EACH MONTH)	# OF SAMPLES IN A SET OF REPEAT SAMPLES	LOCATIONS FOR REPEAT SAMPLES (COLLECT AT LEAST ONE SAMPLE PER SITE)
GROUP A (1 routine sample each month)	4	<ul style="list-style-type: none"> ◆ Site of previous sample with a coliform presence ◆ Within 5 active services <u>upstream</u> of site of sample with a coliform presence ◆ Within 5 active services <u>downstream</u> of site of sample with a coliform presence ◆ At any other active service
GROUP A (more than 1 routine sample each month)	3	<ul style="list-style-type: none"> ◆ Site of previous sample with a coliform presence ◆ Within 5 active services <u>upstream</u> of site of sample with a coliform presence ◆ Within 5 active services <u>downstream</u> of site of sample with a coliform presence
GROUP B	2	<ul style="list-style-type: none"> ◆ Site of the previous sample with a coliform presence ◆ From active service other than the site of the previous sample with a coliform presence

(c) Monitoring frequency following a coliform presence. **Group A** systems having one or more coliform presence samples that were not invalidated during the previous month shall collect and submit for analysis the minimum number of samples shown in the last column of Table 2.

(i) The department may reduce the monitoring frequency requirement when one or more samples with a coliform presence were collected during the previous month, if the purveyor proves to the satisfaction of the department;

(A) The cause of the sample with a coliform presence; and

(B) The problem is corrected before the end of the next month the system provides water to the public.

(ii) If the department reduces this monitoring frequency requirement:

(A) The purveyor shall collect and submit at least the minimum number of samples required when no samples with a coliform presence were collected during the previous month; and

(B) The department shall make available a written description explaining:

(I) The specific cause of the coliform presence; and

(II) Action taken by the purveyor to correct the cause of coliform presence.

(d) Invalid samples.

(i) The department shall consider coliform samples with no coliform presence detected invalid when:

(A) Multiple tube technique cultures are turbid without appropriate gas production;

(B) Presence-absence technique cultures are turbid in the absence of an acid reaction;

(C) There are confluent growth patterns or growth of TNTC (too numerous to count) colonies without a surface sheen using a membrane filter analytic technique; or

(D) There is excess debris in the sample.

(ii) The department may invalidate a coliform sample when:

(A) The analyzing laboratory establishes that improper sample analysis occurred;

(B) The department determines a domestic or nondistribution system problem is indicated by:

(I) All samples in the set of repeat samples collected at the same location as the original coliform presence sample also are coliform presence; and

(II) All other samples in the set of repeat samples are free of coliform.

(C) The department determines a coliform presence result is due to a circumstance or condition which does not reflect water quality in the distribution system. In this case, when the department invalidates a sample:

(I) The purveyor shall collect a set of repeat samples following the sample invalidation in accordance with Table 7; and

(II) The department's rationale for invalidating the sample shall be documented in writing and made available to the public. The documentation shall state the specific cause of the coliform presence, and what action the purveyor has taken, or will take.

(iii) When a coliform sample is determined invalid, the purveyor shall collect and submit for analysis:

(A) An additional coliform sample from the same location as each invalid sample within twenty-four hours of notification of the invalid sample; or

(B) Additional coliform samples as directed by the department.

(iv) When the department or laboratory invalidates a sample, the sample shall not count towards the purveyor's minimum coliform monitoring requirements.

(3) Inorganic chemical and physical. When an initial analysis of a substance exceeds the MCL, the purveyor shall:

(a) For nitrate, immediately take one additional sample from the same sampling point. If the average of the two samples exceeds the MCL, a violation is confirmed; or

(b) For all other inorganic chemical and physical substances, collect three additional samples from the same sample point within thirty days. If the average of all four samples exceeds the MCL, a violation is confirmed.

(4) Turbidity. When the turbidity exceeds the MCL identified under WAC 246-290-310 for longer than one hour monitored continuously, the purveyor shall report to the department within forty-eight hours. When the results of a manual turbidity analysis exceeds the MCL, the purveyor shall collect another sample within one hour. When the repeat sample confirms the MCL is exceeded, the purveyor shall notify the department.

(5) Trihalomethanes. When the average of all samples taken during any twelve-month period exceeds the MCL for total trihalomethanes, the violation is confirmed and the purveyor shall take corrective action as required by the department. When the maximum trihalomethane potential (MTTP) result is equal to or greater than 0.10 mg/L and the result is confirmed by a repeat sample, the purveyor shall monitor according to WAC 246-290-300(5) for one year or more.

(6) Volatile organic chemicals (VOCs). The purveyor shall be responsible for the following follow-up actions:

(a) After the purveyor's receipt of the first VOC analysis results from the laboratory, the purveyor shall provide notice to persons served by the system as described under WAC 246-290-330(5).

(b) When a List 1 VOC is verified at a concentration above the detection limit, the purveyor shall, at a minimum:

(i) Sample the source once every three months for at least three years; and

(ii) Make analysis results available to consumers within three months of receipt from the laboratory as described under WAC 246-290-330(5).

(c) When a List 1 VOC is verified at a concentration greater than a MCL, and the level will not cause the running annual average to exceed the MCL, the purveyor shall repeat sample the source as soon as possible. If a concentration greater than an MCL is confirmed, the purveyor shall:

(i) Notify the department within seven days of receipt of the repeat sample analysis results.

(ii) Provide consumer information in accordance with WAC 246-290-330 (5)(b).

(iii) Submit documentation to the department describing the water system's strategy for gathering and analyzing additional data and identify plans for keeping the public informed.

(iv) Sample the source a minimum of once every three months for at least three years.

(d) When the running annual average of a List 1 VOC is greater than an MCL, or one sample analysis result causes the annual average to exceed an MCL, the purveyor shall:

(i) Notify the department within seven days of receipt of analysis results.

(ii) Notify the public as described under WAC 246-290-330, including mandatory health effects language.

(iii) Submit an action plan to the department for approval addressing follow-up activities, including corrective action. The purveyor shall submit the action plan within four months of receipt of department notice that the annual average exceeds the MCL. The purveyor's action plan shall, at a minimum, contain a:

(A) Tabulation of VOC sample analysis results, including the location where VOCs were detected;

(B) Description of monitoring plans for system sources;

(C) Strategy for informing the public of monitoring results and investigations; and

(D) Description of short and long-term plans to minimize exposure and/or eliminate the source of contamination.

(iv) Implement the action plan within one year of the department's approval. The department may require the purveyor's earlier compliance if necessary to eliminate an immediate health threat or may require a revision of the action plan based upon additional sample results. The department may extend the purveyor's period of compliance when the department determines:

(A) Substantial construction is required; and

(B) The purveyor has taken all appropriate measures to protect the health of consumers served by the public water system.

If the department grants the purveyor an extension, the purveyor shall issue a notice identifying the MCL exceeded and the amount by which the repeat sample analysis results exceeded the MCL. The purveyor shall include the notice in all bills mailed to affected customers until the department determines that the purveyor complies with the MCL.

(v) Sample the source a minimum of once every three months for at least three years.

(e) When a List 2 or List 3 VOC is verified at a concentration above the detection limit, the purveyor shall:

(i) Submit the sample analysis results to the department within seven days of receipt from the laboratory; and

(ii) Sample the source a minimum of once every three months for one year and then annually thereafter during the three-month period when the highest previous measurement occurred.

(f) If the department determines that a List 2 or List 3 VOC is verified at a level greater than a state advisory level (SAL), the department shall notify the purveyor in writing. The purveyor shall repeat sample the source as soon as possible after initial department notice that a SAL has been exceeded. The purveyor shall submit the analysis results to the department within seven days of receipt from the laboratory. If any repeat sample confirms that a SAL has been exceeded, the purveyor shall:

(i) Provide consumer information in accordance with WAC 246-290-330 (5)(b);

(ii) Sample the source a minimum of once every three months for at least three years; and

(iii) Submit documentation to the department listing VOC analysis results, describing the water systems' strategy for gathering and analyzing additional data, and identifying plans for keeping the public informed. The purveyor shall submit this information to the department within six months of the date of the first notice from the department that a SAL has been exceeded.

(g) The department may reduce the purveyor's monitoring requirement for a source detecting a List 1 VOC if, after three years of quarterly monitoring, all analysis results are less than the MCL. The purveyor's reduced monitoring frequency shall be no less than one sample per year.

(h) The department may reduce the purveyor's monitoring requirement for a source detecting a List 2 or List 3 VOC if the source has been monitored annually for at least three years, and all analysis results are less than the SAL.

(i) In establishing SAL's for List 2 and List 3 VOCs, the department shall use the most recent edition of the department document titled "Procedures And References For Determination Of State Advisory Levels For Drinking Water Contaminants" which has been approved by the state board of health. Copies are available from the department upon request.

(j) When List 1, List 2 (exclusive of THMs), or List 3 VOCs are verified in well fields, the purveyor shall repeat sample individual wells within the well field.

(k) When the sum of all trihalomethanes detected exceeds 0.100 mg/L, the purveyor shall sample within three months for total trihalomethanes as required under WAC 246-290-300(5).

(l) The department may collect samples from a water system or may require that specified quality assurance techniques be used to collect samples.

(7) The department shall determine the purveyor's follow-up action when a substance not included in this chapter is detected.

[Statutory Authority: RCW 43.20.050. 92-04-070 (Order 241B), § 246-290-320, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW. 91-07-031 (Order 150B), § 246-290-320, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-320, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-185, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-185, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-185, filed 9/8/83.]

WAC 246-290-330 Public notification. (1) Responsibility.

(a) The purveyor of a **Group A** water system shall notify the water system users when the system:

(i) Violates a primary MCL as described under WAC 246-290-310;

(ii) Fails to comply with a:

(A) Prescribed treatment technique;

(B) Monitoring requirement under WAC 246-290-300;

or

(C) Testing procedure.

(iii) Is operating under a variance or exemption; or

(iv) Fails to meet a variance or exemption schedule.

(b) The purveyor of a **Group B** water system may be required to notify water system users when any of the conditions listed in (a)(i) through (iv) of this subsection occur.

(2) Content. Notices shall provide:

(a) A clear, concise, and simple explanation of the violation;

(b) Discussion of potential adverse health effects and any segments of the population that may be at higher risk;

(c) Mandatory health effects information in accordance with subsection (4) of this section;

(d) A list of steps the purveyor has taken or is planning to take to remedy the situation;

(e) A list of steps the consumer should take, including advice on seeking an alternative water supply if necessary; and

(f) The purveyor's name and phone number.

The purveyor may provide additional information to further explain the situation.

(3) Distribution.

(a) Purveyors of **COMMUNITY** systems in violation of a primary MCL, treatment technique or variance or exemption schedule shall provide:

(i) Newspaper notice to water system users as defined in (e) of this subsection, within fourteen days of violation;

(ii) Direct mail notice or hand delivery to all consumers served by the system within forty-five days of the violation. The department may waive the purveyor's mail or hand delivery if the violation is corrected within forty-five days;

(iii) Notice to radio and television stations serving the area within seventy-two hours of violation of a nitrate MCL or other acute violation as determined by the department; and

(iv) Repeat mail or hand delivery every three months until the violation is corrected.

(b) Purveyors of **COMMUNITY** systems shall provide newspaper notice as defined in (e) of this subsection, to water system users within three months of the following:

(i) Violation of a monitoring requirement or testing procedure; or

(ii) Granting of a variance or exemption.

Purveyors shall also provide repeat notice by mail or hand delivery to all consumers served by the system every three months until the situation is corrected or for as long as the variance or exemption remains in effect.

(c) Purveyors of **NTNC** and **TNC** systems in violation of a primary MCL, treatment technique, variance, or exemption schedule shall post a notice within fourteen days of the violation. If the violation is acute, the department shall require posting within seventy-two hours.

(d) Purveyors of **NTNC** and **TNC** systems shall post a notice within three months of the:

(i) Violation of a monitoring requirement or testing procedure; or

(ii) Granting of a variance or exemption.

(e) Newspaper notice, as used in this section, means publication in a daily newspaper of general circulation or in a weekly newspaper of general circulation if a daily newspaper does not serve the area. The purveyor may substitute a community or homeowner's association newsletter or similar periodical publication if the newsletter reaches all affected consumers within the specified time.

(f) The purveyor shall substitute a posted notice in the absence of a newspaper of general circulation or homeowner's association newsletter or similar periodical publication. The purveyor shall post the notice within the timeframe specified in this subsection.

(g) The purveyor shall place posted notices in conspicuous locations and present the notices in a manner making them easy to read. Notices shall remain posted until the violation is corrected or for as long as the variance or exemption remains in effect. When appropriate, notices shall be multi-lingual.

(h) The purveyor of a **COMMUNITY** water system shall give a copy of the most recent public notice for all outstanding violations to all new billing units or new hookups before or at the time water service begins.

(i) The purveyor shall provide the department with a copy of the public notification at the time the purveyor notifies the public.

(4) Mandatory language.

(a) The purveyor shall provide specific health effects language in the notice when a violation involves:

- (i) A primary VOC MCL;
- (ii) A secondary fluoride MCL;
- (iii) An acute coliform MCL;
- (iv) A nonacute coliform MCL;
- (v) Granting or continuation of exemption or variance;

or

(vi) Failure to comply with a variance or exemption schedule.

(b) Required specific language is contained in the department guideline titled "health effects language for drinking water public notification."

(5) VOC notification procedure.

(a) Availability of results. After receipt of the first analysis results, the purveyor of a **COMMUNITY** or **NTNC** water system shall notify persons served by the system of the availability of the results and shall supply the name and telephone number of a contact person.

(i) The purveyor shall initiate notification within three months of the purveyors receipt of the first VOC analysis results. This notification is only required one time.

(ii) Notification shall occur by:

(A) Inclusion in the first set of water bills issued after receipt of the results;

(B) Newspaper notice which shall run at least one day each month for three consecutive months;

(C) Direct mail;

(D) Posting if **NTNC** system; or

(E) Any other method approved by the department.

(iii) Within three months of receipt of analysis results, purveyors selling water to other public water systems shall

provide copies of the analysis results to the purchasing system.

(iv) Within thirty days of receipt of analysis results, purveyors purchasing water shall make results available to their customers. The purveyor's notification shall occur by the method outlined under (a)(i) of this subsection.

(b) Consumer information.

(i) The purveyor shall provide consumer information within twenty-one days of receipt of confirmation sample results when:

(A) A List 1 VOC is confirmed at a concentration greater than a MCL, and the level will not cause the running annual average to exceed the MCL; or

(B) The department determines that a List 2 or List 3 VOC is confirmed at a level greater than a SAL.

(ii) Consumer information shall include:

(A) Name and level of VOC detected;

(B) Location where the VOC was detected;

(C) Any health effects that the VOC could cause at its present concentration;

(D) Plans for follow-up activities; and

(E) Phone number to call for further information.

(iii) Consumer information shall be distributed by any of the following methods:

(A) Notice placed in the major newspaper in the affected area;

(B) Direct mail to customers;

(C) Posting if **NTNC** system; or

(D) Any other method approved by the department.

(6) Fluoride notification procedure.

When a secondary MCL violation occurs, the purveyor of a **COMMUNITY** water system shall send notice to:

(a) The department annually;

(b) Water system users annually; and

(c) New billing units added while the violation exists.

(7) When circumstances dictate the purveyor give a broader or more immediate notice to protect public health, the department may require the purveyor's notification by whatever means necessary.

(8) When the state board of health grants a public water system a waiver, the purveyor shall notify customers and new billing units or new hookups before water service begins. The purveyor shall provide a notice annually and send a copy to the department.

(9) The department may give notice to the water system users as required by this section on behalf of the water purveyor. However, the purveyor remains responsible for ensuring the department's requirements are met.

[Statutory Authority: RCW 43.20.050, 92-04-070 (Order 241B), § 246-290-330, filed 2/4/92, effective 3/6/92. Statutory Authority: Chapter 43.20 RCW, 91-07-031 (Order 150B), § 246-290-330, filed 3/15/91, effective 4/15/91. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-330, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339, 89-21-020 (Order 336), § 248-54-187, filed 10/10/89, effective 11/10/89.]

PART 4. WATER SYSTEM OPERATIONS

WAC 246-290-400 Operator certification. A certified operator is required per chapter 70.119 RCW and chapter 248-55 WAC for the following public water systems:

(1) Those serving one hundred services or more; and

(2) Those serving twenty-five or more persons year-round which are supplied by a surface water source and are required to filter.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-400, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-194, filed 2/17/88.]

WAC 246-290-410 Small water system management program. (1) The purpose of a small water system management program is to assure the water system:

- (a) Is properly and reliably managed and operated, and
- (b) Continues to exist as a functional and viable entity.

(2) A small water system management program shall be developed and implemented for all systems not required to complete a water system plan as described under WAC 248-54-065.

(3) The department shall have the authority to require submission of this program for review and comment when:

- (a) A new water system is proposed;
- (b) A new project is proposed for an existing system;
- (c) An existing system has problems associated with inadequate or improper management or operations;

(d) Requested by the department for an existing system not having approved engineering documents, such as, or similar to, those described under WAC 248-54-086 and 248-54-096; or

- (e) There is a change in ownership of the system.

(4) A department guideline titled *Planning Handbook* is available to assist the purveyor in establishing the level of detail and content of the management program. Content and detail shall be consistent with the size, complexity, past performance, and use of the public water system. General content topics shall include, but not be limited to, the following elements:

- (a) Ownership and decision-making issues;
- (b) Financial capability; and
- (c) Operations.

(5) The department may require changes be made to a small water system management program if necessary to effectively accomplish the program's purpose.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-410, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-196, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-196, filed 2/17/88.]

WAC 246-290-420 Reliability. (1) Any public water system or expansion or modification of an existing system shall provide an adequate quantity and quality of water in a reliable manner at all times.

(a) In determining whether a proposed public water system or an expansion or modification of an existing system is capable of providing an adequate quantity of water, the department shall consider the immediate as well as the reasonably anticipated future needs of the system's consumers.

(b) In determining whether an existing public water system is providing an adequate quantity of water, the department shall consider the needs of the system's existing consumers exclusively, unless, in the department's discretion, consideration of the needs of potential consumers is in the public interest.

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(2) The purveyor shall ensure the system is constructed, operated, and maintained to protect against failures of the power supply, treatment process, equipment, or structure with appropriate back-up facilities. Security measures shall be employed to assure the water source, water treatment processes, water storage facilities, and the distribution system are under the strict control of the purveyor.

(3) Where fire flow is required, a positive pressure at the water meter or property line shall be maintained throughout the system under fire flow conditions.

(4) Water pressure at the customer's service meter or property line if a meter is not used shall be maintained at the approved design pressure under MID conditions. In no case shall the pressure be less than twenty psi under MID conditions.

(5) Water use restrictions as a designed operation practice shall not be allowed. However, water use restrictions may be allowed in times of drought.

(6) No intake or other connection shall be maintained between a public water system and a source of water not approved by the department.

(7) A purveyor shall maintain twenty-four-hour phone availability and shall respond to customer concerns and service complaints in a timely manner.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-420, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-201, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-201, filed 2/17/88.]

WAC 246-290-430 Continuity of service. (1) No purveyor shall transfer system ownership without providing written notice to the department and all customers. Such notice shall be provided at least one year prior to the transfer, unless the new owner agrees to an earlier date. Notification shall include a time schedule for transferring responsibilities, identification of the new owner, and under what authority the new ownership will operate. If the system is a corporation, identification of the registered agent shall also be provided.

(2) It shall be the responsibility of the utility transferring ownership to ensure all health-related standards pursuant to chapter 248-54 WAC are met during transfer of the utility. It shall also be the responsibility of the utility transferring ownership to inform and train the new owner regarding operation of the utility.

(3) No purveyor shall end utility operations without providing written notice to all customers and the department at least one year prior to termination of service.

(4) Where this section may be in conflict with existing state statutes, the more stringent statute shall prevail.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-430, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-205, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-205, filed 9/8/83.]

WAC 246-290-440 Treatment facility operation. (1) A bypass shall neither be established nor maintained to divert water around any feature of a treatment process, except with the approval of the department.

(2) The water purveyor may allow treatment by other organizations or individuals only in a manner approved by the department.

(3) When chlorine is used on a ground water source for disinfection or as otherwise directed by the department, and the pH does not exceed 8.0, the purveyor shall maintain a minimum free chlorine residual of 0.2 milligrams per liter (mg/L) in all active parts of the distribution system. The minimum contact time provided before the first customer shall be:

(a) Thirty minutes if 0.2 mg/L free chlorine residual is maintained, or

(b) Ten minutes if 0.6 mg/L free chlorine residual is maintained.

(4) The department may require the purveyor to provide longer contact times, higher chlorine residuals, or additional treatment for the following sources:

(a) Surface water,

(b) Shallow wells,

(c) Springs,

(d) Infiltration galleries,

(e) Those with high turbidity,

(f) Those with high pH, and

(g) Other sources particularly susceptible to contamination as identified by the department.

(5) All water purveyors using chlorination shall monitor chlorine residual at representative points in the system on a daily basis or as approved by the department. The analyses shall be conducted per the most recently published edition of *Standard Methods for the Examination of Water and Waste Water*. Reports shall be sent to the department, in a format acceptable to the department, within ten days of the end of the reporting month. In order to assure adequate monitoring of chlorine residual, the department may require the use of continuous chlorine residual analyzers and recorders.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-440, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-215, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-215, filed 9/8/83.]

WAC 246-290-450 Watershed control. (1) All public water systems utilizing surface water shall adequately exercise surveillance over conditions affecting source water quality.

(2) Those public water systems using unfiltered surface waters shall, in addition to subsection (1) of this section, document a watershed control program. All facilities and activities in the watershed affecting public health shall be under the surveillance of the water purveyor and shall be satisfactorily limited and controlled so as to preclude degradation of the physical, chemical, microbiological, viral, and radiological quality of the source of supply.

(3) Those public water systems using unfiltered surface water shall submit to the department for approval a report identifying all conditions, activities, and facilities within the watershed, together with an acceptable program for necessary surveillance, limitation, and control. This report shall be part of the water system plan required in WAC 248-54-065, included in a small water system management program as required in WAC 248-54-196, or prepared independently for those systems not required to have such a plan. A

section in the department guideline titled *Planning Handbook* deals with watershed control and is available to assist utilities in adequately addressing the following basic elements:

(a) Watershed description,

(b) Watershed control,

(c) System operation, and

(d) Water quality trends.

The report shall be updated as needed or required by the department.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-450, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-225, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-225, filed 9/8/83.]

WAC 246-290-460 Fluoridation of drinking water.

(1) Where fluoridation is practiced, the concentration of fluoride shall be maintained in the range 0.8 through 1.3 mg/L. Determination of fluoride concentration shall be made daily, and reports of such analyses shall be submitted to the department, in a format acceptable to the department, within ten days of the end of the reporting month. Such analyses shall be made in accordance with procedures listed in the most recently published edition of *Standard Methods for the Examination of Water and Waste Water*.

(2) Monthly check samples shall be taken downstream, at the first sample tap where adequate mixing has taken place, from each fluoride injection point. These samples should be taken at the same place and time as the routine daily check samples. The samples along with a completed form shall be sent to the state public health laboratory, or a laboratory certified by the state, to test fluoride. A comparison of the results should then be made between samples analyzed in the field and the appropriate monthly check sample to assure the results are equivalent and field equipment is operating properly. An increased sampling schedule may be applied by the department if necessary to assure the adequacy and consistency of fluoridation.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-460, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-235, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-235, filed 9/8/83.]

WAC 246-290-470 Distribution reservoirs. Existing uncovered distribution reservoirs shall be operated based on a plan of operation approved by the department. The plan of operation shall address the following elements as a minimum:

(1) Disinfection.

(2) Control of debris and undesirable growths of algae or other aquatic organisms.

(3) Control of airborne contamination.

(4) Construction.

(5) Security.

(6) Monitoring and reporting.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-470, filed 12/27/90, effective 1/31/91; 83-19-002 (Order 266), § 248-54-245, filed 9/8/83.]

WAC 246-290-480 Analyses and records, reporting.

(1) The purveyor shall keep the following records of operation and water quality analyses:

(a) Records of bacteriological and turbidity analyses shall be kept for five years. Records of chemical analyses shall be kept for as long as the system is in operation. Other records of operation and analyses required by the department shall be kept for three years. All records shall bear the signature of the operator in responsible charge of the water system or his or her representative. **Group A** systems shall keep these records available for inspection by the department and shall send the records to the department if requested. Actual laboratory reports may be kept or data may be transferred to tabular summaries, provided the following information is included:

(i) The date, place, and time of sampling, and the name of the person collecting the sample;

(ii) Identification of the sample as to whether it was a routine distribution system sample, check sample, raw or drinking water sample, or other special purpose sample;

(iii) Date of analysis;

(iv) Laboratory and person responsible for performing analysis;

(v) The analytical technique/method used; and

(vi) The results of the analysis.

(b) Records of action taken by the system to correct violations of primary drinking water regulations and copies of public notifications shall be kept for three years after the last action taken with respect to the particular violation involved.

(c) Copies of any written reports, summaries, or communications, relating to CSEs of the system conducted by system personnel, by a consultant or by any local, state, or federal agency, shall be kept for ten years after completion of the CSE involved.

(d) Where applicable, daily records of operation and analyses shall include the following:

(i) Chlorine residual;

(ii) Fluoride level;

(iii) Water treatment plant performance including, but not limited to:

(A) Type of chemicals used and quantity,

(B) Amount of water treated, and

(C) Results of analyses.

(iv) Turbidity; and

(v) Other information as specified by the department.

(2) Reporting.

(a) Unless otherwise specified in this chapter, the purveyor shall report to the department within forty-eight hours:

(i) The failure to comply with the primary standards under this chapter;

(ii) The failure to comply with the monitoring requirements under this chapter; and

(iii) The violation of a primary MCL.

(b) The purveyor shall submit to the department reports required by this chapter, including tests measurements, and analytic reports. Monthly reports are due before the tenth day of the following month, unless otherwise specified in this chapter.

(c) Water facilities inventory and report form (WFI).

(i) Purveyors of **community** systems shall submit an annual WFI update to the department;

(ii) Purveyors of **NTNC, TNC, and Group B** systems shall submit an updated WFI to the department as requested; and

(iii) The purveyor shall also submit an updated WFI to the department within thirty days of any change in name, category, ownership, or responsibility for management of the water system.

(d) Bacteriological.

(i) The purveyor shall notify the department of the presence of:

(A) Coliform in a sample, within ten days of notification by the laboratory; and

(B) Fecal coliform or E. coli in a sample, by the end of the business day in which the purveyor is notified by the laboratory. If the purveyor is notified of the results after normal close of business, then the purveyor shall notify the department before the end of the next business day.

(ii) When a coliform MCL violation is determined, the purveyor shall:

(A) Notify the department within twenty-four hours of determining acute coliform MCL violations;

(B) Notify the department before the end of the next business day when a nonacute coliform MCL is determined; and

(C) Notify water system users in accordance with WAC 246-290-330.

(iii) When a monitoring violation occurs, including invalid or expired CSEs, the purveyor shall:

(A) Notify the department of the violation within ten days; and

(B) Notify water system users in accordance with WAC 246-290-330.

[Statutory Authority: RCW 43.20.050. 92-04-070 (Order 241B), § 246-290-480, filed 2/4/92, effective 3/6/92; 91-02-051 (Order 124B), recodified as § 246-290-480, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-265, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-265, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-265, filed 9/8/83.]

WAC 246-290-490 Cross-connection control. (1) General.

(a) Purveyors have the responsibility to protect public water systems from contamination due to cross-connections. Cross-connections which can be eliminated shall be eliminated. The purveyor shall work cooperatively with local authorities to eliminate or control potential cross-connections.

(b) The purveyor shall develop and implement a cross-connection control program acceptable to the department. The scope and complexity of the program shall be directly related to the size of the system and the potential public health risk. A department guideline titled *Planning Handbook* is available to assist the utility in developing this program. The most recently published edition of the manual titled *Accepted Procedure and Practice in Cross Connection Control - Pacific Northwest Section - American Waterworks Association* shall be used as a resource to establish:

(i) Minimum cross-connection control operating policies;

(ii) Backflow prevention assembly installation practices;

(iii) Backflow prevention assembly testing procedures; and

(iv) Enforcement authority.

Purveyors and local authorities shall have the option of establishing more stringent requirements.

(c) The purpose of a cross-connection control program is to protect the health of water consumers and the potability of the public water system by assuring:

(i) The inspection and regulation of plumbing in existing and proposed piping networks; and

(ii) The proper installation and surveillance of backflow prevention assemblies when actual or potential cross-connections exist and cannot be eliminated.

(d) The cross-connection control program shall be included in the water system's plan under WAC 248-54-065 or small water system management program as outlined under WAC 248-54-196, whichever is appropriate.

(e) When an existing cross-connection poses a potential health or system hazard, the purveyor shall shut off water service to the premises until the cross-connection has been eliminated or controlled by the installation of a proper backflow prevention assembly. The cross-connection control program manager for the department shall be notified when a service has been shut off.

(2) Backflow prevention assembly installation and testing.

(a) If a cross-connection cannot be eliminated, then:

(i) An air-gap separation, reduced pressure principle backflow prevention assembly (RPBA) or a reduced pressure principle detector backflow prevention assembly (RPDA) shall be installed if the cross-connection creates an actual or potential health or system hazard.

(ii) An air-gap separation, RPBA, RPDA, double-check valve backflow prevention assembly (DCVA), or double-check detector backflow prevention assembly (DCDA) shall be installed if the cross-connection is objectionable, but does not pose an unreasonable risk to health.

(iii) A pressure vacuum breaker assembly (PVBA) or an atmospheric vacuum breaker may be installed where the substance which could backflow is objectionable but does not pose an unreasonable risk to health and where there is no possibility of backpressure in the downstream piping.

(iv) Backflow prevention assemblies, appropriate for the degree of hazard or air gaps and in some cases both, shall be installed at the service connection or within the following facilities, unless in the judgment of the water purveyor and the department, no hazard exists: Hospitals, mortuaries, clinics, laboratories, piers and docks, sewage treatment plants, food and beverage processing plants, chemical plants using water process, metal plating industries, petroleum processing or storage plants, radioactive material processing plants or nuclear reactors, car washes, facilities having a nonpotable auxiliary water supply, and others specified by the department.

(b) All installed RPBA's, RPDA's, DCVA's, DCDA's, and PVBA's shall be models included on the current list of backflow assemblies, approved for installation in Washington state, and maintained and published by the department. Backflow prevention assemblies in service, but not listed, shall remain in service provided the backflow prevention assemblies:

(i) Are listed on the current Washington state-approved cross-connection control assembly list at the time of installation;

(ii) Are properly maintained;

(iii) Are of a type appropriate for the degree of hazard; and

(iv) Are tested and successfully pass the test annually.

When unlisted assemblies are moved or require more than minimum maintenance, the unlisted assemblies shall be replaced by an assembly listed on the current approved model list.

(c) All air gaps and backflow prevention assemblies shall be installed in accordance with the cross-connection control manual referenced under WAC 248-54-285 (1)(b) of this section.

(d) The purveyor may permit the substitution of a properly installed air gap in lieu of an approved backflow prevention assembly. All such air gap substitutions shall be inspected annually by a Washington state certified backflow assembly tester.

(e) A Washington state certified backflow assembly tester shall inspect and test all:

(i) RPBA's,

(ii) RPDA's,

(iii) DCVA's,

(iv) DCDA's,

(v) New PVBA installations, and

(vi) Existing PVBA's discovered through routine inspections.

(f) Tests and/or inspections shall be conducted:

(i) At the time of initial installation;

(ii) Annually after initial installation, or more frequently if tests indicate repeated failures; and

(iii) After the assembly is repaired.

(g) The assemblies shall be repaired, overhauled, or replaced whenever found to be defective. The purveyor shall require that improperly installed or altered air gaps be replumbed or replaced by an approved RPBA at their discretion. Inspections, tests, and repairs shall be made under the purveyor's supervision and records thereof kept as required by the purveyor.

(h) The purveyor shall deny or discontinue water service to any customer failing to cooperate in the installation, maintenance, testing, or inspection of backflow prevention assemblies required by the regulations of this chapter.

(3) Washington state certified backflow assembly testers.

(a) A backflow assembly tester shall become certified and maintain certification per department backflow assembly tester certification program guidelines.

(b) The department shall maintain a list of persons certified to test backflow prevention assemblies.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-290-490, filed 12/27/90, effective 1/31/91. Statutory Authority: P.L. 99-339. 89-21-020 (Order 336), § 248-54-285, filed 10/10/89, effective 11/10/89. Statutory Authority: RCW 34.04.045. 88-05-057 (Order 307), § 248-54-285, filed 2/17/88. Statutory Authority: RCW 43.20.050. 83-19-002 (Order 266), § 248-54-285, filed 9/8/83.]

WAC 246-290-500 Severability. If any provision of this chapter or its application to any person or circumstances is held invalid, the remainder of this chapter, or the applica-

tion of the provision to other persons or circumstances, shall not be affected.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-290-500, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 34.04.045, 88-05-057 (Order 307), § 248-54-291, filed 2/17/88.]

review and approval of water system plans, project reports, construction documents, existing systems, and related evaluations required under chapters 246-290 and 246-293 WAC shall be as follows:

(a) Water system plans required under WAC 246-290-100, 246-293-220, and 246-293-230.

FEES

WAC 246-290-990 Water system evaluation and project review and approval fees. (1) The fees for the

Project Type	Group B	Group A				
		<100 Services	100 to 500 Services	501 to 999 Services	1,000 to 9,999 Services	10,000 or more Services
Water system plan (New and Updated) ¹	100.00	350.00	850.00	1,600.00	2,600.00	3,850.00
Minor water system plan alteration	25.00	85.00	210.00	400.00	650.00	950.00

¹ Requirements for satellite management agencies are addressed within a water system plant.

(b) Project reports required under WAC 246-290-110.

Project Type	Group B	Group A				
		<100 Services	100 to 500 Services	501 to 999 Services	1,000 to 9,999 Services	10,000 or more Services
All types of filtration or other complex treatment processes	250.00	500.00	775.00	1,125.00	1,550.00	2,050.00
Chemical addition only, such as ion exchange, hypochlorination, corrosion control, or fluoridation	75.00	150.00	250.00	375.00	525.00	700.00
Complete water system (an additional fee shall be assessed for review of treatment facility, if any)	150.00	350.00	550.00	800.00	1,100.00	1,450.00
System modifications requiring a detailed evaluation to determine whether the system, as modified, will comply with regulations (an additional fee shall be assessed for review of treatment facility, if any)	100.00	250.00	400.00	600.00	850.00	1,150.00

(c) Construction documents required under WAC 246-290-120.

Project Type	Group B	Group A				
		<100 Services	100 to 500 Services	501 to 999 Services	1,000 to 9,999 Services	10,000 or more Services
All types of filtration or other complex treatment processes	250.00	500.00	775.00	1,125.00	1,550.00	2,050.00
Chemical addition only, such as ion exchange, hypochlorination, corrosion control, or fluoridation	75.00	150.00	250.00	375.00	525.00	700.00

Public Water Supplies

246-290-990

Complete new water system except treatment (an additional fee shall be assessed for review of treatment facility, if any)	200.00	450.00	650.00	900.00	1,200.00	1,550.00
New source only (an additional fee shall be assessed for review of treatment facility, if any)	150.00	275.00	375.00	500.00	650.00	825.00
One or more of the following submitted as a package: Water line installation, booster pump station, modifications to source pumping, piping-valving, controls or storage reservoir (an additional fee shall be assessed for review of treatment facility, if any)	100.00	175.00	275.00	400.00	550.00	725.00

(d) Existing system approval required under WAC 246-290-140. For the purpose of this subsection the department shall determine whether a system is expanding or nonexpanding.

Project Type	Group B	Group A				
		<100 Services	100 to 500 Services	501 to 999 Services	1,000 to 9,999 Services	10,000 or more Services
NONEXPANDING system built before November 10, 1989						
— As-built approval						
Without treatment	350.00	1,020.00	1,460.00	2,020.00	2,700.00	3,500.00
With chemical addition	425.00	1,320.00	1,960.00	2,770.00	3,750.00	4,900.00
With complex treatment	675.00	2,020.00	3,010.00	4,270.00	5,800.00	7,600.00
EXPANDING system built before November 10, 1989						
— As-built approval						
Without treatment	700.00	1,670.00	2,685.00	4,095.00	5,900.00	8,100.00
With chemical addition	850.00	1,970.00	3,185.00	4,845.00	6,950.00	9,500.00
With complex treatment	1,350.00	2,670.00	4,235.00	6,345.00	9,000.00	12,200.00
NONEXPANDING system built after November 9, 1989						
— As-built approval						
Without treatment	700.00	1,670.00	2,685.00	4,095.00	5,900.00	8,100.00
With chemical addition	850.00	1,970.00	3,185.00	4,845.00	6,950.00	9,500.00
With complex treatment	1,350.00	2,670.00	4,235.00	6,345.00	9,000.00	12,200.00
EXPANDING system built after November 9, 1989						
— As-built approval						
Without treatment	800.00	1,845.00	2,960.00	4,495.00	6,450.00	8,825.00
With chemical addition	950.00	2,145.00	3,460.00	5,245.00	7,500.00	10,225.00
With complex treatment	1,450.00	2,845.00	4,510.00	6,745.00	9,550.00	12,925.00

(e) Other evaluations and approvals. As applicable, these fees will be charged in addition to the basic fees assessed under (a) through (d) of this subsection.

Project Type	Group B	Group A				
		<100 Services	100 to 500 Services	501 to 999 Services	1,000 to 9,999 Services	10,000 or more Services
Well-site evaluation and approval including the site inspection and hydrogeologic information review.	150.00	220.00	260.00	320.00	400.00	500.00

Comprehensive system evaluation requested by purveyor for purpose of reducing routine coliform monitoring to less than 5/month

No plan required	300.00	375.00	475.00	600.00	not applicable	
Coliform monitoring plan	No plan required	70.00	95.00	130.00	175.00	230.00
Water system compliance report	50.00	85.00	85.00	85.00	85.00	85.00

(2) To determine the appropriate fee for a noncommunity system, calculate the service equivalent by taking the average population served each day of operation and dividing by twenty-five for a transient noncommunity (TNC) system and two and one-half for nontransient noncommunity (NTNC) system. Use the number of service equivalents to find out what Group A size category to look under and submit the appropriate fee. (All noncommunity systems are Group A systems as described in WAC 246-290-020.)

(3) Additional review and approval fees may be assessed as follows:

(a) The basic fee covers an evaluation, or the review of an initial submittal and one resubmittal if required. If additional resubmittals are required, an additional twenty-five percent of the original fee will be assessed for each additional resubmittal.

(b) Fees for department project approval based on local technical review will be determined on a case-by-case basis as outlined in the applicable memorandum of understanding between the department and the respective local agency.

(c) Fees for services which the department determines are not described under subsection (1) of this section, will be calculated based on a rate of seventy-five dollars per hour.

(d) Additional fees assessed by the department shall be billed to the purveyor using an itemized invoice.

(4) All fees required under this section except as noted in subsection (3) of this section, shall be submitted prior to the department's approval. Payment of fees shall be in the form of a check or money order made payable to: The Department of Health. Payment of a fee shall not guarantee approval of the submitted document or evaluation request.

(5) Purveyors unable to determine the appropriate fee payment to submit should contact the department.

[Statutory Authority: RCW 43.20B.020, 93-01-006 (Order 315), § 246-290-990, filed 12/3/92, effective 1/3/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-290-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055, 87-14-066 (Order 2493), § 440-44-048, filed 7/1/87; 83-14-038 (Order 1980), § 440-44-048, filed 6/30/83.]

Chapter 246-292 WAC

WATER WORKS OPERATOR CERTIFICATION

WAC	Purpose.
246-292-001	Purpose.
246-292-010	Definitions.
246-292-020	Applicability.
246-292-030	Certification board.
246-292-040	Classification schedule for public water systems.
246-292-050	Minimum certification requirements for public water systems.
246-292-060	Minimum education and experience requirements for water works operators.
246-292-070	Examination.
246-292-080	Certification without examination.

246-292-090	Renewal of certificates.
246-292-100	Revocation.
246-292-110	Violations.
246-292-120	Purpose.
246-292-130	Notice of decision—Adjudicative proceeding.
246-292-140	Certificate denial—Adjudicative procedure.
246-292-150	Certificate suspension, modification, or revocation—Adjudicative procedure.
246-292-990	Waterworks operator certification fees.

WAC 246-292-001 Purpose. Pursuant to the provisions of chapter 70.119 RCW, the regulations set forth in this chapter are adopted for the protection of public health through the establishment of minimum requirements and standards by which operators in direct responsible charge of public water systems are examined and certified as to their competency. Certification under this act is available to all operators who can meet the minimum qualifications of a given classification. All operators are encouraged to be certified to their highest degree of competency based on their responsibilities and their particular specialties within the field.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-292-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050, 78-10-053 (Order 1343), § 248-55-010, filed 9/22/78.]

WAC 246-292-010 Definitions. (1) "Board" - The board established pursuant to RCW 70.95B.070 which shall be known as the water and waste water operator certification board of examiners.

(2) "Continuing education unit (CEU)" - A nationally recognized unit of measurement similar to college credits. One CEU is awarded for every ten contact lecture hours of participation in an organized continuing education experience, under responsible sponsorship, capable direction and qualified instruction. One CEU will also be awarded for twenty contact laboratory hours of approved training.

(3) "Department" - The department of social and health services.

(4) "Direct responsible charge (DRC)" - DRC experience is defined as active daily, on-site charge and performance of the operation of a public water system, purification plant, distribution system, or a major segment of a distribution system or purification plant.

(5) "Distribution system" - That portion of a public water system not included within the scope of the purification plant. In most cases this shall include source, storage, and distribution network facilities and associated unit processes which are not part of the purification plant.

(6) "Governing body" - The policy setting body or individual(s) responsible for the supervision and management of a public water system.

(7) "Nationally recognized association of certification authorities" - An organization which serves as an information

center for certification activities, recommends minimum standards and guidelines for classification of potable water treatment plants, water distribution systems and waste water facilities and certification of operators, facilitates reciprocity between state programs and assists authorities in establishing new certification programs and updating existing ones.

(8) "Owner" - The policy setting body or individual(s) responsible for the supervision and management of a public water system.

(9) "Public water system" - Any system or water supply intended or used for human consumption or other domestic uses, including source, treatment, storage, transmission and distribution facilities where water is furnished to any community, collection or number of individuals, or is made available to the public for human consumption or domestic use, but excluding water systems serving one single family residence.

(10) "Purification plant" - That portion of a public water system which treats or improves the physical, chemical or bacteriological quality of the system's water to bring the water into compliance with state board of health standards. Unit processes installed as necessary to perform water filtration, ion exchange, electrodialysis, reverse osmosis, or iron and manganese removal shall be included within the scope of the term purification plant. Unit processes installed as necessary to allow in-line fluoridation, in-line chlorination, or chemical addition to inhibit corrosion shall not be included within the scope of the term purification plant.

(11) "Secretary" - The secretary of the department of social and health services.

(12) "Service" - A connection between the purveyor's distribution system and the customer's system. If the customer's system distributes to more than one single family dwelling, individual dwelling unit, site, or lot, then each single family dwelling, individual dwelling unit, site, or lot shall be considered as one service connection.

(13) "Voluntary certification program" - Operators not required to be certified under the mandatory certification program are encouraged to seek certification under the voluntary certification program which shall be administered by the board and shall be identical to the mandatory certification program.

(14) "Water filtration system" - A series of unit processes installed with the intent of reducing the quantity and quality of suspended and dissolved solids such that the treated water meets the quality standards set forth in the rules and regulations of the state board of health regarding public water systems (chapter 248-54 WAC).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-020, filed 9/22/78.]

WAC 246-292-020 Applicability. (1) After January 1, 1979, all public water systems are required to have a certified operator if the system serves either:

(a) One hundred services at any one time; or

(b) Twenty-five or more persons which are supplied from a stream, lake or other surface water supply source and which are required by law to use a water filtration system.

(2) Certified personnel shall be in direct responsible charge of the active daily technical direction and supervision of the following portions of affected public water systems:

(a) The entire public water system; or

(b) A major segment of a public water system necessary for monitoring or improving the quality of water provided separate individuals are assigned decision-making authority; or

(c) Shift supervisors, if shift work is practiced.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-030, filed 9/22/78.]

WAC 246-292-030 Certification board. (1) The water and wastewater operator certification board of examiners established pursuant to RCW 70.95B.070 shall oversee the administration of the certification program.

(2) The board shall be composed of:

(a) One member from the department of ecology.

(b) One member from the department of social and health services.

(c) One member who holds the position of city manager, city engineer, director of public works, superintendent of utilities, or an equivalent position and employs a certified operator.

(d) Two members who are certified water operators holding a certificate of at least the second highest operator classification.

(e) Two members who are certified wastewater operators holding a certificate of at least the second highest classification.

(3) Duties of the board shall include:

(a) Recommend to the secretary classifications of distribution systems and purification plants and maintain records thereof;

(b) Develop operator qualification standards consistent with the distribution system and purification plant classification system and examine the qualifications of applicants for certification;

(c) Assist in the development of rules and regulations; prepare, administer and evaluate examinations of operator competency as required by law; and recommend the issuance or revocation of certificates;

(4) To assist in the administration of this chapter, the representative from the department on the board shall serve as board secretary.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-040, filed 9/22/78.]

WAC 246-292-040 Classification schedule for public water systems. The secretary shall use classification procedures recommended by a nationally recognized association of certification to classify purification plants and distribution systems.

(1) Purification plants are classified by the secretary in four groups:

(a)	Classification	Total Points Assigned
	Group 1	30 and less
	Group 2	31 to 55

Group 3	56 to 75
Group 4	76 and greater

(b) Points are assigned to every item in Table 1 that applies to the purification plant being evaluated.

**TABLE 1
PURIFICATION PLANT CLASSIFICATION**

ITEM	POINTS ASSIGNED
SIZE	
Maximum Population Served (Peak Day)	1 point per 10,000 or part Maximum of 10 points 1-10
Design Flow (Average Day) Or Peak Month's Production (Average Day), Whichever Is Larger	1 point per MGD or part Maximum of 10 points 1-10
WATER SUPPLY SOURCE	
Groundwater	3
Surface Water	5
Average Raw Water Quality (Good to Poor)	See Table 2 for Variable Point Guide 0-10
COAGULATION, SEDIMENTATION, FILTRATION	
Presettling	4
Addition of Coagulant	4
Mixing, flocculation, settling, or Upflow solids contact	4 8 4 or 8
Filtration	6
CHEMICAL PRECIPITATION SOFTENING	
Presettling	4
Addition of chemicals/coagulants	4
Mixing, flocculation, settling, or Upflow solids contact	4 8 4 or 8
Recarbonation	2
Filtration	6
ION EXCHANGE SOFTENING	
Ion Exchange Softening	10
IRON OR IRON/MN REMOVAL	
Chemical Oxidation by KMnO ₄	4
Chemical Oxidation by Cl ₂	4
Aeration	4
Filtration	6
ADJUSTMENT - Points assigned only for specific chemical treatment in addition to those listed above or where it is the only treatment provided.	
Chemical Addition for Stabilization (polyphosphate, soda, lime, pH adjustment, etc.)	4
Taste and Odor or Color Control (KMnO ₄ , activated carbon, etc.)	8
ADVANCED TREATMENT (demineralization)	15
WASTE HANDLING	
In plant treatment of sludge	6
FLUORIDATION	5
DISINFECTION	
Chlorination or Comparable On-site Generation of Disinfectant	5 5
LABORATORY CONTROL BY PLANT PERSONNEL (See Table 2 for Variable Point Guide)	

Bacteriological (Complexity)	3-10
Chemical/Physical (Complexity)	1-10
Total	

* Each category should be considered a major unit process and points assigned only once for each unit or combined unit, i.e. for iron removal using oxidation and precipitate removal by filtration, only add ten points for iron removal and nothing for filtration.

(c) Table 2 is to be used as a supplement to Table 1.

**TABLE 2
PURIFICATION PLANT VARIABLE POINT GUIDE**

Variation in Raw Water Quality The key concept is the variation or change in the quality of the raw water source. Point values are: Little or no variation; no treatment provided except chlorination.	0 - 10 0
Raw water quality (other than turbidity) varies enough to require treatment changes approximately 10 percent of the time.	2
Raw water quality (turbidity) varies severely enough to require pronounced and/or very frequent treatment changes.	5
Raw water quality subject to periodic serious industrial waste pollution.	10
Laboratory Control by Plant Personnel Bacteriological/biological (complexity) - The key concept is to credit bacti/bio lab work done on-site by plant personnel. Point values are: Lab work done outside the plant.	0 - 10 0
Membrane filter procedures.	3
Use of fermentation tubes or any dilution method; fecal coliform determination.	5
Biological identification.	7
Virus studies or similarly complex work conducted on-site.	10
Chemical/physical (complexity) - The key concept is to credit chemical/physical lab work done on-site by plant personnel. Point values are: Lab work done outside the plant.	0 - 10 0
Push button or colorimetric methods for simple tests such as chlorine residual, pH, -up to	3
Additional procedures such as titration, jar tests, alkalinity, hardness-up to	5
More advanced determinations such as numerous inorganics-up to	7
Highly sophisticated instrumentation such as atomic absorption and gas chromatography.	10

(2) Distribution systems are classified by the secretary in four groups, according to the population served. The classification schedule is as follows:

Classification	Population Served*
Group 1	less than 1,500
Group 2	1,501 - 15,000
Group 3	15,001 - 50,000
Group 4	greater than 50,000

* If the population served is not known; then apply this formula:
Number of Service Connections x 3.1 = Population Served

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-050, filed 9/22/78.]

WAC 246-292-050 Minimum certification requirements for public water systems. (1) Public water systems

shall be classified by the secretary in accordance with the procedures in WAC 248-55-050. Accordingly, an operator certified at the appropriate level shall be in direct responsible charge of the active daily technical direction and supervision of the following portions of the public water system.

(a) Purification plant - A water treatment plant operator (WTPO) shall be in direct responsible charge of that portion of any public water system which is classified as a purification plant and which meets the conditions of WAC 248-55-030 (1)(a) or (b). The WTPO shall be responsible for the administration and operation of the purification plant and shall be certified at a level determined by the complexity of the purification plant as determined by a point rating system. (See WAC 248-55-050(1) for point rating system details.)

(b) Water distribution system - A water distribution manager (WDM) shall be in direct responsible charge of all public water systems which meet the conditions of WAC 248-55-030 (1)(a) or (b). The WDM shall be responsible for the administration and operation of the entire public water system or a major segment of a public water system necessary for monitoring or improving the quality of water and shall be certified at a level determined by the population served. (See WAC 248-55-050(2) for rating details.)

(c) Distribution system specialties - A third classification of operator certification, water distribution specialist (WDS), shall be available to operators on a voluntary basis. Any person who is engaged in a specialized phase of waterworks operation such as main repair, meter repair, pump maintenance and operation, service installation, chlorination process operation, or watershed control but is not working in a direct responsible charge capacity is encouraged to become certified as a water distribution specialist.

(2) If the public water system normally practices shift work; then a certified operator shall be in direct responsible charge for each operating shift.

(3) The same individual may be certified as a WDM, WTPO, or WDS.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-060, filed 9/22/78.]

WAC 246-292-060 Minimum education and experience requirements for water works operators. (1) Minimum education and experience requirements for the following classifications and grades of operators shall be:

Table 3
MINIMUM EDUCATION AND EXPERIENCE REQUIREMENTS

(DRC)		EDUCATION/OPERATING EXPERIENCE				
		OIT *	I	II	III	IV
Water Distribution Manager (WDM)	12/3 months	12/1	12/3	14/4(2)	16/4(2)	
Water Treatment Plant Operator (WTPO)	12/3 months	12/1	12/3	14/4(2)	16/4(2)	

Water Distribution Specialist (WDS)	12/3 months	12/1	12/3	14/4(2)	16/4(2)
Cross-Connection Control Specialist (CC)	NA	**	***	NA	NA

(Education and experience requirements are expressed in years unless otherwise noted.)

*Operator in training experience can be fulfilled by 3 months experience or 30 hours of relevant classroom training (3 CEU)

**Experience required is a special 30-hour backflow prevention device testers class that includes hands-on-training, lectures, and a field trip

***Experience required is training as a cross-connection control instructor and certification as a CCI

(2) Substitution - The board may allow substitutions of experience when short of formal education, or vice versa.

(3) Policy - A listing of minimum requirements and responsibilities for each classification and grade including rules regarding substitutions shall be adopted by the board and published by the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-070, filed 9/22/78.]

WAC 246-292-070 Examination. (1) The board shall prepare examinations to be used in determining the competency of operators.

(2) Periodic review and revision of the examinations shall be undertaken as necessary to ensure validity and applicability.

(3) Certificates of competency shall be issued to applicants who successfully pass the examination for the classification and grade for which they were eligible.

(4) Applicants who fail to pass an examination may repeat the same examination at no additional fee at the next regularly scheduled examination.

(5) Examinations shall be held at least three times annually at convenient places and times as set by the board. Advance announcements of places and times shall be published by the department.

(6) The board shall forward its recommendations for certification to the secretary.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-080, filed 9/22/78.]

WAC 246-292-080 Certification without examination. (1) The secretary shall issue certificates without examination under the following conditions:

(a) Certificates, in appropriate classifications, shall be issued to operators who on January 1, 1978, held certificates of competency attained through the voluntary certification program sponsored jointly by the Pacific Northwest Section of the American Water Works Association and the department.

(b) Certificates shall be issued to persons certified by a governing body or owner of a public water system to have been the operators of a purification plant or distribution system on January 1, 1978, but only to those who are required to be certified in accordance with WAC 248-55-030. A certificate so issued shall be conditioned to be valid only for operating the existing plant or system.

(c) A nonrenewable certificate, temporary in nature, may be issued to an operator for a period not to exceed twelve months to fill a vacated position required to have a certified operator. Only one such certificate may be issued subsequent to each instance of vacation of any such position.

(d) The board may, at its discretion, waive examinations for applicants holding certificates or licenses issued by other states or provinces having equivalent standards as determined by the board, and issue a class of certificate in accordance with the requirements contained herein.

(2) Certificates without examination shall be issued only upon receipt of a completed application form and fees as required in this chapter.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-090, filed 9/22/78.]

WAC 246-292-090 Renewal of certificates. (1) The terms for all certificates shall be for one year from the date of issuance. Every certificate shall be renewed annually upon the payment of a renewal fee and satisfactory evidence presented to the board that the operator has demonstrated continued professional growth in the field. The accumulation of three college credits or continuing education units every three years is considered satisfactory evidence of professional growth.

(2) The secretary shall notify operators failing to renew the operator certificate before the end of the certificate year that the certificates are temporarily valid for two months following the end of the certificate year. Certificates not renewed during the two month period shall become invalid. The secretary shall notify the holders of invalid certificates with a written notice.

(3) An operator failing to renew the certificate pursuant to the provisions of this section may reapply for certification. The board may require the operator to meet the requirements established for new applicants.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-090, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 201, Laws of 1982. 82-13-009 (Order 1823), § 248-55-110, filed 6/4/82. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-110, filed 9/22/78.]

WAC 246-292-100 Revocation. (1) The secretary may, with the recommendation of the board and after hearing before same, revoke a certificate if:

(a) It is found to have been obtained by fraud or deceit;

(b) The operator demonstrates gross negligence in the operation of a water purification plant or a public water system's operation or major segment thereof; or

(c) The operator violates the requirements of this chapter or any lawful rules, order or regulation of the secretary.

(2) No person whose certificate has been revoked under this section shall be eligible for a certificate for one year from the effective date of the final order of revocation. Any such person who reapplies for recertification shall meet all the requirements established for new applications.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-120, filed 9/22/78.]

WAC 246-292-110 Violations. (1) Following thirty days written notice by the secretary violation of WAC 248-55-030 is a misdemeanor. Each day that a public water system operates in violation of WAC 248-55-030 constitutes a separate offense. Upon conviction, violators are subject to fines not exceeding one hundred dollars for each such offense.

(2) In the case of fraud, deceit, or gross negligence under WAC 248-55-120 (1)(a) and (b), no revocation citation or change shall be made until proper written notice of violation and reasonable opportunity for correction has been made.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 78-10-053 (Order 1343), § 248-55-130, filed 9/22/78.]

WAC 246-292-120 Purpose. These rules implement chapter 70.119 RCW and are adopted pursuant to RCW 70.119.050.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.119.050. 82-24-070 (Order 1917), § 248-55-210, filed 12/1/82.]

WAC 246-292-130 Notice of decision—Adjudicative proceeding. (1) The department's notice of a denial, suspension, modification, or revocation of a certificate of competency shall be consistent with RCW 43.20A.XXX and section 95, chapter 175, Laws of 1989. An applicant or certificate holder has the right to an adjudicative proceeding to contest the decision.

(2) A certificate applicant or holder contesting a department certificate decision shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Office of Appeals, P.O. Box 2465, Olympia, WA 98504; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved;

(ii) The grounds for contesting the department decision; and

(iii) A copy of the contested department decision.

(3) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 248-08 WAC. If a provision in this chapter conflicts with chapter 248-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-130, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.119.050. 90-06-019 (Order 039), § 248-55-220, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.119.050. 82-24-070 (Order 1917), § 248-55-220, filed 12/1/82.]

WAC 246-292-140 Certificate denial—Adjudicative procedure. The procedure for an adjudicative proceeding to contest the denial of a certificate is chapter 248-08 WAC. If a provision in this chapter conflicts with chapter 248-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-140, filed 12/27/90, effective 1/31/91. Statutory Authority:

Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.119.050. 90-06-019 (Order 039), § 248-55-235, filed 2/28/90, effective 3/1/90.]

WAC 246-292-150 Certificate suspension, modification, or revocation—Adjudicative procedure. This section contains the procedure for an adjudicative proceeding to contest the suspension, modification, or revocation of a certificate.

(1) The board members shall preside at the adjudicative proceeding. The proceeding shall be conducted in accordance with the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 248-08 WAC. If a provision in this chapter conflicts with chapter 248-08 WAC, the provision in this chapter governs.

(2) The board may have an administrative law judge assigned to assist the board at the hearing. The administrative law judge shall:

(a) Conduct the hearing;

(b) Offer advice and assistance to the board upon request by the board; and

(c) Not be a member of the board.

(3) The department has the burden of proving its case by a preponderance of the credible evidence.

(4) At least four members of the board including the water industry representative must consider the record. A majority of the board members who considered the record shall make a written recommendation to the secretary to, or not to, revoke the certificate. The recommendation shall conform to RCW 34.05.461.

(5) The board's recommendation shall be personally delivered to the certificate holder or mailed by certified mail to the certificate holder's last known residence or business address or served in another manner showing proof of receipt.

(6) If the board's recommendation is not to suspend, modify, or revoke the certificate, the recommendation shall be a final order as defined under chapter 34.05 RCW.

(7) If the board's recommendation is to suspend, modify, or revoke the certificate, the recommendation shall be an initial order as defined under chapter 34.05 RCW. The recommendation shall become the final order if no petition for administrative review is filed. If a petition for review is filed, the secretary or designee shall make the final adjudicative order.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-150, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.119.050. 90-06-019 (Order 039), § 248-55-240, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.119.050. 82-24-070 (Order 1917), § 248-55-240, filed 12/1/82.]

WAC 246-292-990 Waterworks operator certification fees. (1) The initial certification fee is twenty dollars per classification.

(2) The annual renewal fee is ten dollars per classification.

(3) The fee for application for reciprocity shall be forty dollars per classification.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-292-990, filed 12/27/90, effective 1/31/91. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-080, filed 6/4/82.]

Chapter 246-293 WAC

WATER SYSTEM COORDINATION ACT

WAC

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WAC 246-293-001 Purpose. This chapter is promulgated pursuant to the authority granted in the Public Water System Coordination Act of 1977, chapter 70.116 RCW, for the purpose of implementing a program relating to public water system coordination within the state of Washington, for evaluation and determination of critical water supply service areas, and assistance for orderly and efficient public water system planning.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-001, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-100, filed 6/28/78.]

PART I. PROCEDURAL REGULATIONS

WAC 246-293-110 Definitions. (1) "Public water system" - Any system or water supply intended or used for human consumption or other domestic uses including, but not limited to, source, treatment, storage, transmission and distribution facilities where water is furnished to any community, number of individuals or is made available to the public for human consumption or domestic use. This definition shall exclude any water system serving one single family residence, water systems existing prior to September 21, 1977 which are owner operated and serve less than ten single family residences, and water systems serving no more than one industrial plant.

(2) "Purveyor" - Any agency or subdivision of the state or any municipality, firm, company, mutual or cooperative association, institution, partnership, person, or any other entity that owns or operates a public water system for wholesale or retail service (or their authorized agent).

(3) "Municipality" - Any county, city, town, or any other entity having its own incorporated government for local affairs including, but not limited to, metropolitan municipal corporation, public utility district, water district, irrigation district, sewer district, and/or port district.

(4) "Inadequate water quality" - An excess of maximum contaminant levels established by the state board of health (chapter 248-54 WAC).

(5) "Unreliable service" - Low pressure or quantity problems, and/or frequent service interruption inconsistent with state board of health requirements (chapter 248-54 WAC).

(6) "Lack of coordinated planning" - Failure to resolve existing or potential areawide problems related to:

(a) Insufficient control over development of new public water systems.

(b) Adjacent or nearby public water systems constructed according to incompatible design standards.

(c) No future service area agreements, or conflicts in existing or future service areas.

(d) Adjacent public water systems which could benefit from emergency interties or joint-use facilities.

(e) Water system plans which have not been updated in accordance with chapter 248-54 WAC.

(f) Inconsistencies between neighboring water system plans, or failure to consider adopted county or city land use plans or policies.

(7) "Critical water supply service area" - A geographical area designated by the department or county legislative authority characterized by public water system problems related to inadequate water quality, unreliable service, and/or lack of coordinated water system planning. It may be further characterized by a proliferation of small, inadequate public water systems, or by water supply problems which threaten the present or future water quality or reliability of service in such a manner that efficient and orderly development may best be achieved through coordinated planning by public water systems in the area.

(8) "County legislative authority" - The board of county commissioners or that body assigned such duties by a county charter as enacting ordinances, passing resolutions, and appropriating public funds for expenditure.

(9) "Local planning agency" - The division of city or county government responsible for land use planning functions.

(10) "Coordinated water system plan" - A plan for public water systems within a critical water supply service area which identifies the present and future water system concerns and sets forth a means for meeting those concerns in the most efficient manner possible.

(11) "Existing service area" - A specific area within which direct service or retail service connections to customers of a public water system are currently available.

(12) "Future service area" - A specific area for which water service is planned by a public water system, as determined by written agreement between purveyors provided for in WAC 248-56-730.

(13) "Department" - The Washington state department of social and health services.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-110, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW, 78-07-048 (Order 1309), § 248-56-200, filed 6/28/78.]

WAC 246-293-120 Preliminary assessment—Requirement. In areas where public water systems are suspected of having problems related to inadequate water quality, unreliable service, or lack of coordinated planning, a preliminary assessment shall be undertaken to determine if the geographical area should be designated a critical water supply service area. (See WAC 248-56-200 for definitions.)

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-120, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW, 78-07-048 (Order 1309), § 248-56-300, filed 6/28/78.]

WAC 246-293-130 Preliminary assessment—Procedures. (1) The preliminary assessment shall be conducted under the authority of the county legislative authority(ies) and the department with assistance from affected state and local agencies and water purveyors.

(2) Notice that a preliminary assessment is being undertaken shall be made to all affected parties, those who have demonstrated an interest, and the local news media.

(3) The preliminary assessment shall be presented in report form, as short and factual as possible, and shall consider at least the following topics as they relate to public water systems in the potential critical water supply service area:

(a) Existing water systems, including:

(i) History of water quality, reliability and service,

(ii) General fire fighting capability of the utilities, and

(iii) Identification of major facilities which need to be expanded, altered, or replaced.

(b) Availability and adequacy of future water source(s).

(c) Service area boundaries, including a map of established boundaries and identification of systems without established boundaries.

(d) Present growth rate.

(e) Status of water system planning, land use planning, and coordination, including a list of land use plans and policies adopted by local general purpose governments.

(4) Upon completion, the preliminary assessment shall be submitted to the county legislative authority(ies) and the

department for review. A copy shall also be transmitted to all potentially affected water purveyors and appropriate news media.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-130, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-310, filed 6/28/78.]

WAC 246-293-140 Declaration of critical water supply service area. (1) Based upon review of the preliminary assessment, if findings indicate that a geographical area does have problems related to inadequate water quality, unreliable service, or lack of coordinated planning, the county legislative authority(ies) or the department shall declare that area a critical water supply service area.

(2) The declaration shall be in the format of a legislative enactment signed by the county legislative authority(ies), or administrative declaration signed by the secretary of the department or his designee.

(3) The declaring agency shall file its declaration with the other agency(ies) and notify in writing the appropriate local planning agencies, affected water purveyors, and the local news media within ten days.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-140, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-400, filed 6/28/78.]

WAC 246-293-150 Water utility coordinating committee—Establishment. (1) Within thirty days following the declaration of a critical water supply service area, a water utility coordinating committee composed of not less than three voting members shall be appointed by the declaring authority.

(2) The water utility coordinating committee shall consist of one representative from each of the following:

- (a) County legislative authority within the declared area;
- (b) County planning agency having jurisdiction within the declared area;
- (c) Health agency having jurisdiction within the declared area under chapters 70.08, 70.05, 43.20 RCW; and
- (d) Water purveyor with over fifty services within the declared area.

(Other interested persons may be appointed as nonvoting members of the committee by the authority declaring the critical water supply service area if determined appropriate.)

(3) At the first meeting of the water utility coordinating committee, the following shall be determined:

- (a) Chairperson; and
- (b) Rules for conducting business, including voting procedure.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-150, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 89-16-065 (Order 2840), § 248-56-500, filed 7/31/89, effective 8/31/89; 78-07-048 (Order 1309), § 248-56-500, filed 6/28/78.]

WAC 246-293-160 Water utility coordinating committee—Purpose. (1) The initial purpose of the water utility coordinating committee shall be to recommend external critical water supply service area boundaries to the

county legislative authority(ies) within six months of appointment of the committee. (See WAC 248-56-600.)

(2) Following establishment of external critical water supply service area boundaries, the water utility coordinating committee shall be responsible for development of the coordinated water system plan. (See WAC 248-56-740.)

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-160, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-510, filed 6/28/78.]

WAC 246-293-170 Establishment of external critical water supply service area boundaries—Procedures. (1) Proposed boundaries shall be documented by a written report which includes:

(a) A map and narrative description of the recommended boundary.

(b) A narrative statement outlining the reasons for the recommended boundary location, the criteria used and relative importance of each.

(2) Prior to submittal of recommended external boundaries to the county legislative authority(ies), the water utility coordinating committee shall conduct at least one informational meeting for the purpose of soliciting public input.

(3) The water utility coordinating committee shall make a formal report of its recommended external critical water supply service area boundaries to the county legislative authority(ies).

(4) The county legislative authority(ies) shall conduct at least two public hearings on the proposed boundaries within six months from the date the boundaries were submitted by the water utility coordinating committee, for the purpose of soliciting responses to the proposed boundaries.

(5) Within six months from the date proposed boundaries are submitted to the county legislative authority(ies), one of the following actions may be taken by the county legislative authority(ies):

(a) Ratify the proposed boundaries based on findings at the public hearings, or

(b) Modify the proposed boundaries in accordance with findings of the public hearings, and then ratify the revised boundaries.

If neither of the above actions are taken by the county legislative authority(ies) within six months, the boundaries as stated in the proposal submitted by the water utility coordinating committee to said county legislative authority(ies) shall be automatically ratified.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-170, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-600, filed 6/28/78.]

WAC 246-293-180 Establishment of external critical water supply service area boundaries—Criteria. (1) The water utility coordinating committee, in recommending, and county legislative authority(ies), in determining the location of external critical water supply service area boundaries shall consider factors including, but not limited to:

- (a) Existing land use,
- (b) Projected land use and permitted densities as documented in adopted county or city plans, ordinances and/or growth policies for at least 10 years into the future,

- (c) Other planning activities or boundaries which may affect land use or water system planning,
- (d) Physical factors limiting provision of water service,
- (e) Existing political boundaries, including boundary agreements in effect and attitudes towards expanding those boundaries,
- (f) Future service areas of existing utilities,
- (g) Hydraulic factors, including potential pressure zones or elevations,
- (h) Economic ability of the public water systems to meet minimum service requirements.

(2) External critical water supply service area boundaries shall not divide any purveyor's existing, contiguous service area. Areas served by a wholesale purveyor may be divided into as many existing service areas as may be justified by geography, engineering or other factors discussed in the preliminary assessment.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-180, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-610, filed 6/28/78.]

WAC 246-293-190 Establishment of critical water supply service area boundaries—Effect. (1) No new public water system shall be approved within a critical water supply service area subsequent to establishment of external boundaries unless specifically authorized by the department. Authorization shall be based upon compliance with the following:

(a) If unanticipated demand for water supply occurs within a purveyor's future service area, the following shall apply in the listed sequence:

(i) The existing purveyor shall provide service in a timely and reasonable manner consistent with state board of health regulations; or

(ii) A new public water system may be developed on a temporary basis. Before authorization, a legal agreement will be required which includes a schedule for the existing purveyor to assume management and/or connect the new public water system to the existing system; or

(iii) A new public water system may be developed. Before authorization, a revised service area agreement establishing the new purveyor's future service area will be required.

(b) If a demand for water supply occurs outside any purveyor's future service area, the following shall apply in the listed sequence:

(i) Those persons anticipating the need for water service shall contact existing nearby purveyors within the critical water supply service area to determine whether any will be interested in expanding their system to provide water service in a timely and reasonable manner consistent with state board of health regulations.

(ii) A new public water system may be developed on a temporary basis. Before authorization, a legal agreement will be required which includes a schedule for an existing system to assume management and/or connect the new public water system to an existing system; or

(iii) A new public water system may be developed.

Any of the options listed in subdivisions (b)(i), (b)(ii), or (b)(iii) will require establishment of new or revised service area agreements.

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(2) If a new public water system is developed, it shall have an approved water system plan pursuant to WAC 248-54-580 and the provisions of this chapter. The plan shall include a section addressing the outcome of subsections (1)(a), or (1)(b) along with documented confirmation by the appropriate existing purveyors(s).

(3) Any proposed new public water system shall not be inconsistent with local adopted land use plans, shoreline management programs, and/or development policies as determined by the appropriate county or city legislative authority(ies).

(4) If a coordinated water system plan has been approved for the affected area, all proposed new public water systems shall be consistent with the provisions of that plan.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-190, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-620, filed 6/28/78.]

WAC 246-293-200 Alteration of external critical water supply service area boundaries. (1) After establishment of external critical water supply service area boundaries, those boundaries may not be altered until the coordinated water system plan is completed.

(2) Alteration of external critical water supply service area boundaries may be initiated by the department or county legislative authority(ies) in accordance with the procedures and criteria identified in WAC 248-56-600 and 248-56-610. In addition:

(a) The department or county legislative authority(ies), whichever initiates alteration of external boundaries, shall prepare a brief report documenting the need for such alteration, and

(b) The department or county legislative authority(ies), whichever initiates preparation of the report, shall reconvene the water utility coordinating committee and present the report to the committee, together with instructions for committee action.

(3) The coordinated water system plan shall be revised as necessary, due to alteration of external critical water supply service area boundaries, within six months of the date of such action taken by the county legislative authority(ies), unless an extended schedule is approved by the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-200, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-630, filed 6/28/78.]

WAC 246-293-210 Update of external critical water supply service area boundaries. External critical water supply service area boundaries shall be reviewed by the water utility coordinating committee and the county legislative authority(ies) at least once every five years, as part of the update of the coordinated water system plan. (See WAC 248-56-760.)

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-210, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-640, filed 6/28/78.]

WAC 246-293-220 Coordinated water system plan—Requirement. (1) A coordinated water system plan

shall be required for the entire area within the external critical water supply service area boundaries.

(2) In critical water supply service areas where more than one water system exists, a coordinated water system plan shall consist of either:

(a) A compilation of water system plans approved pursuant to WAC 248-54-580, together with supplementary provisions addressing water purveyor concerns relating to the entire critical water supply service area (fulfilling requirements of WAC 248-56-710 and 248-56-720 respectively), or

(b) A single plan covering all affected public water systems and areawide concerns within the external critical water supply service area boundaries (fulfilling requirements of both WAC 248-56-710 and 248-56-720).

(3) The coordinated water system plan shall provide for maximum integration and coordination of public water system facilities consistent with the protection and enhancement of the public health and well-being.

(4) The coordinated water system plan shall not be inconsistent with adopted county and city land use plans, ordinances, and/or growth policies addressing development within the critical water supply service area for at least five years beyond the date of establishment of external boundaries.

(5) If no land use plans, ordinances, or growth policies are in effect for all or a portion of the area within the critical water supply service area at the time the coordinated water system plan is being prepared, the coordinated water system plan shall be based upon the best planning data available from the appropriate local planning agency(ies).

(6) In critical water supply service areas where only one public water system exists, the coordinated water system plan shall consist of the water system plan for the water system. (See WAC 248-54-580 and 248-56-710.)

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-220, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-700, filed 6/28/78.]

WAC 246-293-230 Coordinated water system plan—Water system plan. (1) Each purveyor within the external critical water supply service area boundaries shall be responsible for completion of a water system plan for the purveyor's future service area, including provisions of WAC 248-56-730, if such a plan has not already been approved, with the following exception:

(a) Nonmunicipally owned public water systems shall be exempt from the planning requirements (except for the establishment of service area boundaries pursuant to WAC 248-56-730) if they:

(i) Were in existence as of September 21, 1977; and

(ii) have no plans for water service beyond their existing service area; and

(iii) meet minimum state board of health requirements (chapter 248-54 WAC).

Note: If the county legislative authority permits a change in development that will increase the demand for water service of such a system beyond the existing system's ability to provide minimum water service, the purveyor shall develop a water system plan in accordance with this section.

(2) Each purveyors' water system plan shall be updated at the time the coordinated water system plan is prepared,

which will eliminate the necessity of updating the water system plan prior to the mandatory five year update of the coordinated water system plan.

(3) The content of a water system plan shall be consistent with WAC 248-54-580 and shall comply with guidelines* which may be obtained from the department. These guidelines have been compiled to further assist in meeting the purpose of this chapter, and address three levels of planning requirements varying in detail, based upon the size of the public water system.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-230, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-710, filed 6/28/78.]

WAC 246-293-240 Coordinated water system plan—Supplementary provisions. (1) All water purveyors within the external critical water supply service area boundaries (with the exception of the systems specifically exempted in WAC 248-56-710(1)) shall be notified and asked to participate in the development of the supplementary provisions.

(2) The supplementary provisions shall address areawide water system concerns relating to the entire critical water supply service area. The content of the supplementary provisions shall comply with guidelines* which may be obtained from the department.

The supplementary provisions shall include, but not be limited to:

(a) Assessment of related, adopted plans,

(b) Identification of future service areas and service area agreements (WAC 248-56-730),

(c) Minimum areawide water system design standards, including fireflow performance standards,

(d) Procedures for authorizing new water systems in the critical water supply service area,

(e) Assessment of potential joint-use or shared water system facilities and/or management programs.

*Copies of DSHS guidelines entitled, "Plan contents guidelines" may be obtained without charge from the Department of Social and Health Services, Water Supply and Waste Section, Mail Stop LD-11, Olympia, Washington 98504.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-240, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-720, filed 6/28/78.]

WAC 246-293-250 Service area agreements—Requirement. (1) The service area boundaries of public water systems within the critical water supply service area shall be determined by written agreement among the respective existing purveyors and approved by the appropriate legislative authority(ies).

(2) Future service area agreements shall be incorporated into the coordinated water system plan as provided for in the guidelines identified in WAC 248-56-720.

(3) Future service area boundaries of public water systems shall be determined by existing purveyors. Criteria used in the establishment of future service areas should include, but not be limited to: Topography, readiness and ability to provide water, local franchise areas, legal water

system boundaries, city limits, future population, land use projections, and sewer service areas.

(4) All future service areas shall not be inconsistent with adopted land use plans, ordinances, and growth policies of cities, towns, and counties, located within the future service area boundaries.

(5) Failure of the legislative authority(ies) to file with the department objections to service area agreements within 60 days of receipt of the agreement shall indicate automatic approval.

(6) If no service area boundary agreement has been established after a conscientious effort by the purveyors within one year of establishment of the external critical water supply service area boundaries, or if the legislative authority(ies) has filed with the department objections in writing, the department shall hold a public hearing.

(7) If a public hearing is required for the establishment of service areas the following procedures shall apply:

(a) The department shall provide notice of the hearing by certified mail to:

(i) Each purveyor providing service in the critical water supply service area,

(ii) Each county legislative authority having jurisdiction in the area, and

(iii) The public pursuant to chapter 65.16 RCW.

(b) The hearing may be continued from time to time.

(c) At the termination of the public hearing, the department may restrict the expansion of service of any purveyor within the external critical water supply service area boundaries if the department finds such restriction necessary to provide the greatest protection of the public health and well-being. (Individual retail or direct service connections shall not be considered an expansion.)

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-250, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-730, filed 6/28/78.]

WAC 246-293-260 Coordinated water system plan—Procedures (water utility coordinating committee).

(1) Following establishment of external critical water supply service area boundaries, the water utility coordinating committee shall be responsible for the development of a coordinated water system plan.

(2) No later than two months after establishment of the external critical water supply service area boundary the water utility coordinating committee shall meet for the purpose of formulating arrangements for:

(a) Preparation of the coordinated water system plan, and

(b) Public involvement.

(3) The water utility coordinating committee shall meet as necessary in order to:

(a) Collect and assemble water system plans,

(b) Provide input and direction for the preparation of the supplementary provisions,

(c) Serve as a forum for developing and/or negotiating future service area agreements (WAC 248-56-730),

(d) Accomplish other related business as determined by the committee.

(4) Prior to submittal of the coordinated water system plan to the county legislative authority(ies) for review, the water utility coordinating committee shall:

(a) Prepare written comments on the plan for the benefit of the reviewing authority(ies),

(b) Conduct at least one public informational meeting for the purpose of soliciting public input,

(c) Evaluate and respond to comments received at the hearing(s).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-260, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-740, filed 6/28/78.]

WAC 246-293-270 Coordinated water system plan—Effect. (1) All purveyors constructing or proposing to construct public water system facilities within the area covered by the coordinated water system plan shall comply with the plan.

(2) At any time after two years of establishment of the external critical water supply service area boundaries, the department may deny proposals to establish or to expand any public water system within a critical water supply service area for which there is not an approved coordinated water system plan. (Individual retail or direct service connections shall not be considered an expansion.) (See WAC 248-56-620 for provisions pertaining to new public water systems in the interim two years.)

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-270, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-750, filed 6/28/78.]

WAC 246-293-280 Coordinated water system plan—Update. (1) The coordinated water system plan shall be reviewed and updated by the water utility coordinating committee at a minimum of every five years or sooner, if the water utility coordinating committee feels it is necessary, in accordance with both the provisions of WAC 248-54-580 and this section.

(2) Changes in the coordinated water system plan shall be accomplished in accordance with procedures for developing a coordinated water system plan (WAC 248-56-740). If no changes are necessary, the water utility coordinating committee shall submit to the department a statement verifying that the coordinated water system plan is still current.

(3) If the external critical water supply service area boundaries are altered by the county legislative authority(ies) pursuant to WAC 248-54-630, the coordinated water system plan shall be updated as provided for in WAC 248-56-630.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-280, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-760, filed 6/28/78.]

WAC 246-293-290 Coordinated water system plan—Local review. (1) Prior to submission of a coordinated water system plan to the department for approval, the plan shall be reviewed by the county legislative authority(ies) in the county(ies) in which the critical water supply

service area is located. County review of the coordinated water system plan shall include at least one public hearing.

(2) If no comments have been received from the county legislative authority(ies) within 60 days of receipt of the coordinated water system plan, the department may consider the plan for approval.

(3) If within 60 days of receipt of the coordinated water system plan, the county legislative authority(ies) find any segment of the plan to be inconsistent with adopted land use plans, shorelines master programs, the following shall occur:

(a) The county legislative authority(ies) shall submit written description of their determination and justification supporting their determination prior to the end of the 60 day period to the department and all affected parties.

(b) The county legislative authority(ies) shall make every effort to resolve any inconsistencies within 60 days of submittal of written justification.

(c) The department may approve those portions of the coordinated water system plan found not to be inconsistent with adopted plans and policies at any time after the initial determination by the county legislative authority(ies).

(d) If after the 60 day period established for resolution of inconsistencies an inconsistency still exists, the affected parties shall each present their final recommended alternative solution to the department. The department shall then review all alternative solutions and discuss its recommendations with the county(ies) and the water utility coordinating committee. If after two years of the declaration of the critical water supply service area the inconsistencies persist, the department may deny proposals to establish or to expand any public water system facilities which affect that portion of the critical water supply service area being contested.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-290, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-800, filed 6/28/78.]

WAC 246-293-300 Coordinated water system plan—Department approval. (1) A coordinated water system plan shall be submitted to the department for design approval within two years of the establishment of external critical water supply service area boundaries.

(a) In its review of the coordinated water system plan, the department shall ensure that every topic in the guidelines identified in WAC 248-56-720 has been covered to the extent necessary based on the size and nature of the water system(s) and characteristics of the critical water supply service area.

(b) The department shall not approve those portions of a coordinated water system plan which fail to meet the requirements for future service area boundaries pursuant to WAC 248-56-730.

(2) The department shall either approve the coordinated water system plan, or respond within 60 days from the date the plan is received.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-300, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-810, filed 6/28/78.]

WAC 246-293-310 Severability. If any provision of this chapter or its application to any person or circumstance

is held invalid, the remainder of this chapter, or the application of the provision to other persons or circumstances, shall not be affected.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-310, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 78-07-048 (Order 1309), § 248-56-900, filed 6/28/78.]

PART II. RESOLUTION OF SERVICE AREA CONFLICTS

WAC 246-293-401 Purpose. The purpose of this chapter is to provide a process for resolving service area conflicts which arise from implementation of the Public Water System Coordination Act, chapter 70.116 RCW, and its procedural regulations, chapter 248-56 WAC.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-401, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 74.116.070 [70.116.070]. 83-01-015 (Order 1919), § 248-59-005, filed 12/6/82.]

WAC 246-293-420 Public hearing. (1) If no service area boundary agreement has been established after a conscientious effort by existing water purveyors within one year of establishment of external critical water supply service area boundaries, or if the legislative authority or authorities have filed written objections with the department, the water supply and waste section of the department of social and health services (DSHS) shall work with the affected parties in an informal manner in order to reach an agreement.

(2) If, in the judgment of the water supply and waste section of DSHS, informal negotiations with the affected parties fail to make progress toward reaching an agreement, the water supply and waste section of DSHS shall hold a public hearing to determine its course of action.

(3) The water supply and waste section of DSHS shall provide at least thirty days' notice of the public hearing; thus, giving the affected parties a final opportunity to agree upon service area boundaries prior to the public hearing.

(4) Notice of the public hearing shall be mailed by certified mail to:

(a) Each purveyor providing service in the area of conflict;

(b) Each legislative authority having jurisdiction in the area; and

(c) The public pursuant to chapter 65.16 RCW.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-420, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 74.116.070 [70.116.070]. 83-01-015 (Order 1919), § 248-59-010, filed 12/6/82.]

WAC 246-293-430 Initial decision. (1) The public hearing may be continued from time to time if good cause can be shown for such a continuance.

(2) After conclusion of the hearing, the water supply and waste section of DSHS may decide to take no action or restrict any or all purveyors from carrying out improvements within the conflicting area. Affected parties shall be notified of the decision by certified mail. The decision shall be issued as a written report and include justification based upon:

(a) Compliance with DSHS regulations;

- (b) A record of the hearing; and
- (c) Criteria established in WAC 248-56-730.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-430, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 74.116.070 [70.116.070], 83-01-015 (Order 1919), § 248-59-020, filed 12/6/82.]

WAC 246-293-440 Adjudicative proceeding. (1)

Any party affected by the decision of the water supply and waste section of the department has the right to contest the decision in an adjudicative proceeding. If no appeal is filed, the decision of the water supply and waste section shall be final.

(2) A person contesting a water supply and waste section decision shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Office of Appeals, P.O. Box 2465, Olympia, WA 98504; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved;

(ii) The grounds for contesting the decision; and

(iii) A copy of the contested decision.

(3) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 248-08 WAC. If a provision in this chapter conflicts with chapter 248-08 WAC, the provision in this chapter governs.

(4) Evidence not considered by the water supply and waste section in making their decision shall not be admitted in the adjudicative proceeding unless agreed to by all parties.

(5) The administrative law and review judge shall not modify the initial water supply and waste section decision unless the preponderance of evidence shows that decision is substantially or legally in error.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-440, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.116.050, 90-06-019 (Order 039), § 248-59-030, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 74.116.070 [70.116.070], 83-01-015 (Order 1919), § 248-59-030, filed 12/6/82.]

PART III. FIRE FLOW

WAC 246-293-601 Purpose. This chapter is promulgated pursuant to the authority granted in the Public Water System Coordination Act of 1977, chapter 70.116 RCW, for the purpose of establishing minimum performance standards related to fire protection, including provisions for their application and enforcement, and incorporating them into the design and construction of new and expanding public water systems.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-601, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080, 79-04-007 (Order 1378), § 248-57-010, filed 3/12/79.]

WAC 246-293-602 Scope. These standards and regulations shall apply to the following new and expanding public water systems:

(1) Those having more than 1,000 services. (See WAC 248-54-580.)

(2) Those with less than 1,000 services located within the boundaries of a critical water supply service area and subject to the requirement for a coordinated water system plan. (See WAC 248-54-580 and 248-56-700.)

Note: Public water systems in existence prior to September 21, 1977, which are owner operated and serve less than ten single family residences; serving no more than one industrial plant; or are nonmunicipally owned with no plans for water service beyond their existing service area are exempt from the planning requirement.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-602, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080, 79-04-007 (Order 1378), § 248-57-200, filed 3/12/79.]

WAC 246-293-610 Definitions. (1) "Public water system" - Any system or water supply intended or used for human consumption or other domestic uses including, but not limited to, source, treatment, storage, transmission and distribution facilities where water is furnished to any community, number of individuals, or is made available to the public for human consumption or domestic use. This definition shall exclude any water system serving one single family residence, water systems existing prior to September 21, 1977, which are owner operated and serve less than ten single family residences, and water systems serving no more than one industrial plant.

(2) "Expanding public water systems" - Those public water systems installing additions, extensions, changes, or alterations to their existing source, transmission, storage, or distribution facilities which will enable the system to increase in size its existing service area. New individual retail or direct service connections onto an existing distribution system shall not be considered an expansion of the public water system.

(3) "Department" - The Washington state department of social and health services.

(4) "Critical water supply service area" - A geographical area designated by the department or county legislative authority characterized by public water system problems related to inadequate water quality, unreliable service, and/or lack of coordinated water system planning. It may be further characterized by a proliferation of small, inadequate water systems, or by water supply problems which threaten the present or future water quality or reliability of service in such a manner that efficient and orderly development may best be achieved through coordinated planning by public water systems in the area in accordance with chapter 248-56 WAC.

(5) "Fire flow" - The rate of water delivery needed for the purpose of fighting fires in addition to requirements for normal domestic maximum instantaneous demand as referenced in guidelines published by the department entitled "Design standards for public water supplies."

(6) "Local fire protection authority" - The fire district, city, town, or county directly responsible for the fire protection within a specified geographical area.

(7) "Water system plan" - A document identifying present and future water system needs and establishing a program for meeting those needs in the most efficient manner possible, and consistent with other relevant plans and policies affecting the area in which the system is located. (See WAC 248-54-580, 248-56-710 and 248-56-720, and the

plan content guidelines for a detailed description of water system plans.)

(8) "Existing service area" - A specific area within which direct service or retail service connections to customers of a public water system are currently available.

(9) "Future service area" - A specific area for which water service is planned by a public water system as determined by written agreement between purveyors. (See WAC 248-56-730.)

(10) "Planning jurisdiction" - The city, town, county or other entity acting as the responsible agency for preparation and adoption of land use plans, policies or standards affecting development.

(11) "Development classifications" - Specific geographical areas within the existing and future service area of a public water system, identified for the purpose of determining the appropriate level of fire protection.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-610, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080. 79-04-007 (Order 1378), § 248-57-100, filed 3/12/79.]

WAC 246-293-620 Administration. (1) The department shall administer these regulations through its ongoing review and approval of water system plans and engineering reports as provided for in WAC 248-54-580, 248-54-590, and 248-56-810.

(2) In the event that plans and specifications for water system improvements are submitted to the department for approval under WAC 248-54-600 and the design of the proposed improvements is inconsistent with development classifications identified in the water system plan, (see WAC 248-57-400) the department shall not approve the plans and specifications.

(3) Plans and specifications for water system improvements (see WAC 248-54-600) proposed within those cities, towns, or counties which operate under local fire flow standards shall include written confirmation that they meet the requirements of adopted local standards from the authority administering those standards. (See WAC 248-57-900.)

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-620, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080. 79-04-007 (Order 1378), § 248-57-300, filed 3/12/79.]

WAC 246-293-630 Application. (1) Water system plans prepared by those public water systems identified in WAC 248-57-200 shall include a section in their plans addressing fire flow, hydrant and system reliability standards in accordance with WAC 248-57-500, 248-57-600, and 248-57-700 respectively. The section shall include a map entitled development classifications consistent with the following:

(a) The map shall delineate the existing and future service area of the water system into the following categories:

(i) Rural - lot sizes greater than one acre (including parks, open space, agricultural lands, etc.)

(ii) Residential - lot sizes one acre or less, (including all single and multi-family structures less than 4000 square feet, and mobile home and recreational vehicle parks)

(iii) Commercial and multi-family residential structures with a floor area 4000 square feet or greater.

(iv) Industrial

(b) Assignment of the above categories shall be based upon:

(i) Existing development, and

(ii) Future development for a minimum of ten years as identified in proposed or adopted land use plans and policies applicable within the existing and future service area.

(c) The development classifications outlined in (a) above shall be determined by any method acceptable to the planning jurisdiction(s), provided that the criteria used is consistent within a given critical water supply service area.

(2) The water system plan shall identify and schedule improvements needed in order for the water system to be capable of supplying required fire flow for new and expanding public water systems consistent with these regulations.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-630, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080. 79-04-007 (Order 1378), § 248-57-400, filed 3/12/79.]

WAC 246-293-640 Minimum standards for fire flow. (1) City, town, or county legislative authority shall set minimum fire flows where local standards are adopted under WAC 248-57-900.

(2) Where local standards are not adopted under WAC 248-57-900, Table 1 shall identify minimum fire flows. Contact with the county and local fire protection authority shall be made before applying these standards in a water system plan or to design of individual development.

TABLE 1
MINIMUM FIRE FLOWS*

Development Classification (as described under WAC 248-57-400)	Minimum Fire Flow Requirement
Rural	None
Residential	500 gallons per minute for 30 minutes
Commercial and multifamily structures greater than 4000 sq. ft.	750 gallons per minute for 60 minutes**
Industrial	1000 gallons per minute for 60 minutes**

* Minimum flows are in addition to requirements for normal domestic maximum use.

** Commercial and industrial buildings may be subject to higher flow requirements when evaluated on an individual basis by the local fire protection authority.

Note: Minimum standards in most cases require less flow than categories in the guidelines published by the Insurance Services Office (Municipal Survey Service, 160 Water Street, New York, New York 10038) and therefore may not result in lower insurance rates.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-293-640, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.116 RCW. 89-16-065 (Order 2840), § 248-57-500, filed 7/31/89, effective 8/31/89. Statutory Authority: RCW 70.116.080. 79-04-007 (Order 1378), § 248-57-500, filed 3/12/79.]

WAC 246-293-650 Minimum standards for fire hydrants. (1) In those areas where minimum fire flow requirements must be met, fire hydrants shall be provided in accordance with WAC 248-57-600. If phased installation of water facilities are approved by the department, fire hydrants

do not need to be installed until source, storage, and transmission capacity needed to meet the minimum flow requirements are operational: *Provided*, That in such instances a "T" shall be installed every 900 feet where fire hydrants will be located.

(2) Fire hydrants shall be located at roadway intersections wherever possible and the distance between them shall be no further than 900 feet.

(3) All fire hydrants shall conform to American Water Works Association specifications for dry barrel fire hydrants. Each hydrant shall have at least two hose connections of 2 1/2" diameter each and one pumper connection. All connections must have national standard threads or other connection devices consistent with local fire protection authority requirements.

(4) Fire hydrants shall be installed plumb and be set to the finished grade. The bottom of the lowest outlet of the hydrant shall be no less than eighteen inches above the grade. There shall be thirty-six inches of clear area about the hydrant for operation of a hydrant wrench on the outlets and on the control valve. The pumper port shall face the most likely route of approach of the fire truck as determined by the local fire protection authority.

(5) Fire hydrants shall be located so as to be accessible by fire engines and not be obstructed by any structure or vegetation or have the visibility impaired for a distance of fifty feet in the direction of vehicular approach to the hydrant. Fire hydrants subject to vehicle damage (e.g., such as those located in parking lots) shall be adequately protected.

(6) Provisions shall be made to drain fire hydrant barrels to below the depth of maximum frost penetration.

(7) Out of service fire hydrants shall be repaired as soon as possible.

(8) Public water systems are encouraged to enter into contracts with local fire protection authorities to insure proper maintenance of fire hydrants.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-650, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080, 79-04-007 (Order 1378), § 248-57-600, filed 3/12/79.]

WAC 246-293-660 Minimum standards for system reliability. (1) The public water system shall be capable of supplying minimum fire flows either by gravity, or under the following conditions where fire flows are supplied by pumping:

(a) The largest pump out of service at any pumping level,

(b) The highest capacity treatment unit out of service, while maintaining minimum acceptable standards of water quality.

(c) A power outage in effect, unless the appropriate power utility(ies) records indicate a low incidence of electrical outage, defined as follows:

(i) Outages shall average three or less per year based on data for the three previous years with no more than six outages in a single year. Power must be lost for a minimum of 30 minutes in order to qualify as an "outage."

(ii) Outage duration shall average less than four hours based on data for the three previous years. Not more than

one outage during the three previous year period shall have exceeded eight hours.

(2) In assessing system reliability, the department shall also give consideration to potential reliability hazards such as reservoir repair or cleaning and/or lack of parallel water transmission lines.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-660, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080, 79-04-007 (Order 1378), § 248-57-700, filed 3/12/79.]

WAC 246-293-670 Alternate methods. Fire protection may be provided by means other than those discussed in these regulations, provided that such alternate methods are fully documented in the water system plan and approved by both the local fire protection authority and the department.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-670, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080, 79-04-007 (Order 1378), § 248-57-800, filed 3/12/79.]

WAC 246-293-680 Local standards. (1) Where standards in these regulations do not fully meet the fire protection needs of a city, town or county, the appropriate city, town or county legislative authority may promulgate fire flow and system reliability performance standards applicable within their respective jurisdiction. Such standards shall be fully documented and provide at least equal performance and protection as the minimum requirements contained in these regulations.

(2) Standards established by local jurisdictions shall be submitted to the department for review, and approval if they at least meet the minimum level of protection required by these regulations.

(3) The city, town, or county which adopts local fire flow or system reliability standards shall be responsible for administering those standards.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-680, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080, 79-04-007 (Order 1378), § 248-57-900, filed 3/12/79.]

WAC 246-293-690 Severability. If any provision of the chapter or its application to any person or circumstance is held invalid, the remainder of this chapter or the application of the provision to other persons or circumstances, shall not be affected.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-293-690, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.116.080, 79-04-007 (Order 1378), § 248-57-990, filed 3/12/79.]

Chapter 246-310 WAC CERTIFICATE OF NEED

WAC

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- 246-310-990 Certificate of need review fees.

**DISPOSITION OF SECTIONS FORMERLY
CODIFIED IN THIS CHAPTER**

- 246-310-002 Purpose of chapter 248-156 WAC. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-002, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.025. 81-09-060 (Order 1641), § 248-156-010, filed 4/20/81.] Repealed by 92-02-018 (Order 224), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 70.38.135 and 70.38.919.
- 246-310-030 Index and procedures for adjustment. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.025. 81-09-060 (Order 1641), § 248-156-030, filed 4/20/81.] Repealed by 92-02-018 (Order 224), filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 70.38.135 and 70.38.919.
- 246-310-030A Tertiary services identification. [Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-030A, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.38 RCW. 90-21-028 (Order 082), § 248-19-235, filed 10/9/90, effective 10/9/90.] Repealed by 92-02-018 (Order 224), filed 12/23/91, effective

- 1/23/92. Statutory Authority: RCW 70.38.135 and 70.38.919.
- 246-310-250 Open heart surgery. [Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-250, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-250, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.38 RCW. 90-13-116 (Order 67), § 248-19-600, filed 6/21/90, effective 7/1/90.] Repealed by 92-12-015 (Order 274), filed 5/26/92, effective 6/26/92. Statutory Authority: RCW 70.38.135(3).

WAC 246-310-001 Purpose of certificate of need program. The purpose of the certificate of need program has been established by the legislature in RCW 70.38.015.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-210, filed 2/28/86; 81-09-012 (Order 210), § 248-19-210, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-210, filed 11/30/79.]

WAC 246-310-010 Definitions. For the purposes of chapter 246-310 WAC, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise.

- (1) "Acute care facilities" means hospitals and ambulatory surgical facilities.
- (2) "Affected persons" means:
 - (a) The applicant;
 - (b) Health care facilities and health maintenance organizations providing services similar to the services under review and located in the health service area;
 - (c) Third-party payers reimbursing health care facilities in the health service area;
 - (d) Any agency establishing rates for health care facilities and health maintenance organizations in the health service area where the proposed project is to be located;
 - (e) Health care facilities and health maintenance organizations which, in the twelve months prior to receipt of the application, have submitted a letter of intent to provide similar services;
 - (f) Any person residing within the geographic area to be served by the applicant; and
 - (g) Any person regularly using health care facilities within the geographic area to be served by the applicant.
- (3) "Alterations," see "construction, renovation, or alteration."
- (4) "Ambulatory care facility" means any place, building, institution, or distinct part thereof not a health care facility as defined in this section and operated for the purpose of providing health services to individuals without providing such services with board and room on a continuous twenty-four-hour basis. The term "ambulatory care facility" includes the offices of private physicians, whether for individual or group practice.
- (5) "Ambulatory surgical facility" means a facility, not a part of a hospital, providing surgical treatment to patients not requiring inpatient care in a hospital. This term does not include a facility in the offices of private physicians or dentists, whether for individual or group practice, if the privilege of using such facility is not extended to physicians or dentists outside the individual or group practice.

(6) "Applicant," except as used in WAC 246-310-230, means any person proposing to engage in any undertaking subject to review under the provisions of chapter 70.38 RCW.

"Applicant," as used in WAC 246-310-230, means any person or individual with a ten percent or greater financial interest in a partnership or corporation or other comparable legal entity engaging in any undertaking subject to review under the provisions of chapter 70.38 RCW.

(7) "Capital expenditure" means an expenditure, including a force account expenditure (i.e., an expenditure for a construction project undertaken by a nursing home facility as its own contractor), which, under generally accepted accounting principles, is not properly chargeable as an expense of operation or maintenance. The costs of any studies, surveys, designs, plans, working drawings, specifications, and other activities (including staff effort, consulting and other services which, under generally accepted accounting principles, are not properly chargeable as an expense of operation and maintenance) shall be considered capital expenditures. Where a person makes an acquisition under lease or comparable arrangement, or through donation, which would have required certificate of need review if the acquisition had been made by purchase, such acquisition shall be deemed a capital expenditure. Capital expenditures include donations of equipment or facilities to a nursing home facility, which if acquired directly by such facility, would be subject to review under the provisions of this chapter and transfer of equipment or facilities for less than fair market value if a transfer of the equipment or facilities at fair market value would be subject to such review.

(8) "Certificate of need" means a written authorization by the secretary's designee for a person to implement a proposal for one or more undertakings.

(9) "Certificate of need program" means that organizational program of the department responsible for the management of the certificate of need program.

(10) "Commencement of the project" means whichever of the following occurs first: In the case of a construction project, giving notice to proceed with construction to a contractor for a construction project; beginning site preparation or development; excavating or starting the foundation for a construction project; or beginning alterations, modification, improvement, extension, or expansion of an existing building. In the case of major medical equipment, installation. In the case of other projects, initiating a health service.

(11) "Construction, renovation, or alteration" means the erection, building, remodeling, modernization, improvement, extension, or expansion of a physical plant of a health care facility, or the conversion of a building or portion thereof to a health care facility.

(12) "Continuing care contract" means a contract providing a person, for the duration of that person's life or for a term in excess of one year, shelter along with nursing, medical, health-related, or personal care services. The contract is conditioned on the transfer of property, the payment of an entrance fee to the provider of such services, or the payment of periodic charges for the care and services involved. A continuing care contract is not excluded from this definition because the contract is mutually terminable or because shelter and services are not provided at the same location.

(13) "Continuing care retirement community" means an entity providing shelter and services under a continuing care contract with the entity's members and sponsoring or including a health care facility or a health service.

(14) "Days" means calendar days. Days are counted starting the day after the date of the event from which the designated period of time begins to run. If the last day of the period falls on a Saturday, Sunday, or legal holiday observed by the state of Washington, a designated period runs until the end of the first working day following the Saturday, Sunday, or legal holiday.

"Working days" exclude Saturdays, Sundays, and legal holidays observed by the state of Washington. Working days are counted in the same way as calendar days.

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

(16) "Ex parte contact" means any oral or written communication between any person in the certificate of need program or any other person involved in the decision regarding an application for, or the withdrawal of, a certificate of need and the applicant for, or holder of, a certificate of need, any person acting on behalf of the applicant or holder, or any person with an interest regarding issuance or withdrawal of a certificate of need.

(17) "Expenditure minimum" means one million dollars for the twelve-month period beginning with July 24, 1983, adjusted annually by the department according to the provisions of WAC 246-310-900.

(18) "Health care facility" means hospitals, psychiatric hospitals, nursing homes, kidney disease treatment centers including freestanding dialysis units, ambulatory surgical facilities, continuing care retirement communities, hospices and home health agencies, and includes such facilities when owned and operated by a political subdivision or instrumentality of the state and such other facilities as required by federal law and implementing regulations, but does not include Christian Science sanatoriums operated or listed and certified by the First Church of Christ Scientist, Boston, Massachusetts. In addition, the term "health care facility" does not include any nonprofit hospital:

(a) Operated exclusively to provide health care services for children;

(b) Which does not charge fees for such services; and

(c) If not contrary to federal law as necessary to the receipt of federal funds by the state.

(d) In addition, the term "health care facility" does not include a continuing care retirement community which:

(i) Offers services only to contractual members;

(ii) Provides its members a contractually guaranteed range of services from independent living through skilled nursing, including some form of assistance with activities of daily living;

(iii) Contractually assumes responsibility for costs of services exceeding the member's financial responsibility as stated in contract, so that, with the exception of insurance purchased by the retirement community or its members, no third party, including the Medicaid program, is liable for costs of care even if the member depletes personal resources;

(iv) Offers continuing care contracts and operates a nursing home continuously since January 1, 1988, or obtained a certificate of need to establish a nursing home;

(v) Maintains a binding agreement with the department of social and health services assuring financial liability for services to members, including nursing home services, shall not fall upon the department of social and health services;

(vi) Does not operate, and has not undertaken, a project resulting in a number of nursing home beds in excess of one for every four living units operated by the continuing care retirement community, exclusive of nursing home beds; and

(vii) Has undertaken no increase in the total number of nursing home beds after January 1, 1988, unless a professional review of pricing and long-term solvency was obtained by the retirement community within the prior five years and fully disclosed to members.

(19) "Health maintenance organization" means a public or private organization, organized under the laws of the state, which:

(a) Is a qualified health maintenance organization under Title XIII, Section 1310(d) of the Public Health Service Act; or

(b)(i) Provides or otherwise makes available to enrolled participants health care services, including at least the following basic health care services: Usual physician services, hospitalization, laboratory, x-ray, emergency and preventive services, and out-of-area coverage;

(ii) Is compensated (except for copayments) for the provision of the basic health care services listed in (b)(i) of this subsection to enrolled participants by a payment made on a periodic basis without regard to the date the health care services are provided and fixed without regard to the frequency, extent, or kind of health service actually provided; and

(iii) Provides physicians' services primarily:

(A) Directly through physicians who are either employees or partners of such organization, or

(B) Through arrangements with individual physicians or one or more groups of physicians (organized on a group practice or individual practice basis).

(20) "Health service area" means a geographic region appropriate for effective health planning including a broad range of health services.

(21) "Health services" means clinically related (i.e., preventive, diagnostic, curative, rehabilitative, or palliative) services and includes alcoholism, drug abuse, and mental health services.

(22) "Home health agency" means an entity which is, or is to be, certified as a provider of home health services in the Medicaid or Medicare program. The department shall not require a home health agency previously issued a certificate of need as a new health care facility to obtain additional certificate of need approval if the agency has not received Medicare or Medicaid certification by the effective date of these rules.

(23) "Hospice" means an entity which is, or is to be, certified as a provider of hospice services in the Medicaid or Medicare program. The department shall not require a hospice previously issued a certificate of need as a new health care facility to obtain additional certificate of need approval if the hospice has not received Medicare or Medicaid certification by the effective date of these rules.

(24) "Hospital" means any institution, place, building or agency or distinct part thereof which qualifies or is required

to qualify for a license under chapter 70.41 RCW, or as a psychiatric hospital licensed under chapter 71.12 RCW.

(25) "Inpatient" means a person receiving health care services with board and room in a health care facility on a continuous twenty-four-hour-a-day basis.

(26) "Intermediate care facility" means any institution or distinct part thereof certified as an intermediate care facility for participation in the Medicaid (Title XIX of the Social Security Act) program.

(27) "Kidney disease treatment center" means any place, institution, building or agency or a distinct part thereof equipped and operated to provide services, including dialysis and/or kidney transplantation, to persons who have end-stage renal disease.

(28) "May" means an act is permitted, but not required.

(29) "Nursing home" means any home, place, institution, building or agency or distinct part thereof including a nursing unit or a long-term care area of a hospital operating or maintaining facilities providing convalescent or chronic care, or both, for a period in excess of twenty-four consecutive hours for three or more patients not related by blood or marriage to the operator, who, by reason of illness or infirmity, are unable properly to care for themselves. Convalescent and chronic care may include, but not be limited to, any or all procedures commonly employed in waiting on the sick, such as administration of medicines, preparation of special diets, giving of bedside nursing care, application of dressings and bandages, and carrying out of treatment prescribed by a duly licensed practitioner of the healing arts. Nursing home includes any such entity licensed or required to be licensed under the provisions of chapter 18.51 RCW and any other intermediate care facility or skilled nursing facility as these terms are defined in this section.

(30) "Obligation," when used in relation to a capital expenditure, means the following has been incurred by or on behalf of a health care facility:

(a) An enforceable contract has been entered into by a health care facility or by a person on behalf of the health care facility for the construction, acquisition, lease, or financing of a capital asset; or

(b) A formal internal commitment of funds by a health care facility for a force account expenditure constituting a capital expenditure; or

(c) In the case of donated property, the date on which the gift is completed in accordance with state law.

(31) "Offer," when used in connection with health services, means the health facility provides one or more specific health services.

(32) "Person" means an individual, a trust or estate, a partnership, a corporation (including associations, joint stock companies, and insurance companies), the state, or a political subdivision or instrumentality of the state, including a municipal corporation or a hospital district.

(33) "Predevelopment expenditures" means capital expenditures, the total of which exceeds the expenditure minimum, made for architectural designs, plans, drawings, or specifications in preparation for the acquisition or construction of physical plant facilities. "Predevelopment expenditures" exclude any obligation of a capital expenditure for the acquisition or construction of physical plant facilities and any activity which the department may consider the "com-

mencement of the project" as this term is defined in this section.

(34) "Professional review of continuing care retirement community pricing and long-term solvency" means prospective financial statements, supported by professional analysis and documentation, which:

(a) Conform to Principles and Practices Board Statement Number 9 of the Healthcare Financial Management Association, "Accounting and Reporting Issues Related to Continuing Care Retirement Communities"; and

(b) Project the financial operations of the continuing care retirement community over a period of ten years or more into the future; and

(c) Are prepared and signed by a qualified actuary as defined under WAC 284-05-060 or an independent certified public accountant, or are prepared by management of the continuing care retirement community and reviewed by a qualified actuary or independent certified public accountant who issues a signed examination or compilation report on the prospective financial statements; and

(d) Include a finding by management that the intended expansion project of the continuing care retirement project is financially feasible.

(35) "Project" means all undertakings proposed in a single certificate of need application or for which a single certificate of need is issued.

(36) "Secretary" means the secretary of the Washington state department of health or the secretary's designee.

(37) "Shall" means compliance is mandatory.

(38) "Skilled nursing facility" means any institution or distinct part thereof certified as a skilled nursing facility for participation in the Medicare (Title XVIII) or Medicaid (Title XIX) program.

(39) "State health plan" means a document developed in accordance with RCW 70.38.065 and in effect until June 30, 1990, unless superseded by department-adopted rules.

(40) "State Health Planning and Resources Development Act" means chapter 70.38 RCW.

(41) "Tertiary health service" means a specialized service meeting complicated medical needs of people and requires sufficient patient volume to optimize provider effectiveness, quality of service, and improved outcomes of care.

(42) "Undertaking" means any action subject to the provisions of chapter 246-310 WAC.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.38 RCW. 90-17-086 (Order 081), § 248-19-220, filed 8/17/90, effective 9/17/90; 90-02-093 (Order 023), § 248-19-220, filed 1/3/90, effective 2/3/90. Statutory Authority: RCW 70.38.135. 88-15-021 (Order 2639), § 248-19-220, filed 7/11/88; 86-06-030 (Order 2344), § 248-19-220, filed 2/28/86; 84-07-014 (Order 2082), § 248-19-220, filed 3/14/84; 81-09-012 (Order 210), § 248-19-220, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-220, filed 11/30/79.]

WAC 246-310-020 Applicability of chapter 246-310 WAC. (1) The following undertakings shall be subject to the provisions of chapter 246-310 WAC, with the exceptions provided for in this section.

(a) The construction, development, or other establishment of a new health care facility:

(i) No new health care facility may be initiated as a health service of an existing health care facility without certificate of need approval as a new health care facility;

(ii) The extension, on a regular and ongoing basis, of the services of a home health agency or a hospice in a county not previously regularly included in the service area of that home health agency or hospice during the preceding twelve months shall be considered the development of a new home health agency or hospice.

(b) The sale, purchase, or lease of part or all of any existing hospital licensed under chapter 70.41 RCW or a psychiatric hospital licensed under chapter 71.12 RCW;

(c) A change in bed capacity of a health care facility increasing the total number of licensed beds or redistributing beds among acute care, skilled nursing, intermediate care, and boarding home care, as defined under RCW 18.20.020, if the bed redistribution is effective for a period in excess of six months;

(d) Any new tertiary health services offered in or through a health care facility, and not offered on a regular basis by, in, or through such health care facility within the twelve-month period prior to the time the facility will offer such services:

(i) Tertiary services include the following:

(A) Specialty burn services. This is a service designed, staffed, and equipped to care for any burn patient regardless of the severity or extent of the burn. All staff and equipment necessary for any level of burn care are available;

(B) Intermediate care nursery and/or obstetric services level II. Intermediate care nursery is defined in chapter 246-318 WAC. A level II obstetric service is in an area designed, organized, equipped, and staffed to provide a full range of maternal and neonatal services for uncomplicated patients and for the majority of complicated obstetrical problems;

(C) Neonatal intensive care nursery and/or obstetric services level III. Neonatal intensive care nursery is defined in chapter 246-318 WAC. A level III obstetric service is in an area designed, organized, equipped, and staffed to provide services to the few women and infants requiring full intensive care services for the most serious type of maternal-fetal and neonatal illnesses and abnormalities. Such a service provides the coordination of care, communications, transfer, and transportation for a given region. Level III services provide leadership in preparatory and continuing education in prenatal and perinatal care and may be involved in clinical and basic research;

(D) Transplantation of specific solid organs, including, but not limited to, heart, liver, pancreas, lung, and kidney and including bone marrow. A transplantation service for each solid organ is considered a separate tertiary service;

(E) Open heart surgery and/or elective therapeutic cardiac catheterization including elective percutaneous transluminal coronary angioplasty (PTCA). Open heart surgery includes the care of patients who have surgery requiring the use of a heart lung bypass machine. Therapeutic cardiac catheterization means passage of a tube or other device into the coronary arteries or the heart chambers to improve blood flow. PTCA means the treatment of a narrowing of a coronary artery by means of inflating a balloon catheter at the site of the narrowing to dilate the artery;

(F) Inpatient physical rehabilitation services level III. Level III rehabilitation services are services for persons with usually nonreversible, multiple function impairments of a moderate-to-severe complexity resulting in major changes in the patient's lifestyle and requiring intervention by several rehabilitation disciplines. Services are multidisciplinary, including such specialists as a rehabilitation nurse; and physical, occupational, and speech therapists; and vocational counseling; and a psychiatrist. The service is provided in a dedicated unit with a separate nurses station staffed by nurses with specialized training and/or experience in rehabilitation nursing. While the service may specialize (i.e., spinal cord injury, severe head trauma, etc.), the service is able to treat all persons within the designated diagnostic specialization regardless of the level of severity or complexity of the impairments;

(G) Specialized inpatient pediatric services. The service is designed, staffed, and equipped to treat complex pediatric cases for more than twenty-four hours. The service has a staff of pediatric specialists and subspecialists.

(ii) The department shall review, periodically revise, and update the list of tertiary services. The department shall change the tertiary services list following the procedures identified in WAC 246-310-035;

(iii) The offering of an inpatient tertiary health service by a health maintenance organization or combination of health maintenance organizations is subject to the provisions under chapter 246-310 WAC unless the offering is exempt under the provisions of RCW 70.38.111.

(e) Any increase in the number of dialysis stations in a kidney disease center;

(f) Any capital expenditure in excess of the expenditure minimum for the construction, renovation, or alteration of a nursing home. However, a capital expenditure, solely for any one or more of the following, which does not substantially affect patient charges, is not subject to certificate of need review:

(i) Communications and parking facilities;

(ii) Mechanical, electrical, ventilation, heating, and air conditioning systems;

(iii) Energy conservation systems;

(iv) Repairs to, or the correction of, deficiencies in existing physical plant facilities necessary to maintain state licensure;

(v) Acquisition of equipment, including data processing equipment, not for use in the direct provision of health services;

(vi) Construction, involving physical plant facilities, including administrative and support facilities, not for use in the provision of health services;

(vii) Acquisition of land; and

(viii) Refinancing of existing debt.

(g) Any expenditure for the construction, renovation, or alteration of a nursing home or change in nursing home services in excess of the expenditure minimum made in preparation for any undertaking subject to the provisions under chapter 246-310 WAC and any arrangement or commitment made for financing such undertaking;

(h) No person may divide a project in order to avoid review requirements under any of the thresholds specified under this section; and

(i) The department may issue certificates of need authorizing only predevelopment expenditures, without authorizing any subsequent undertaking for which the predevelopment expenditures are made.

(2) No person shall engage in any undertaking subject to certificate of need review unless:

(a) A certificate of need authorizing such undertaking is issued and remains valid; or

(b) An exemption is granted in accordance with the provisions of this chapter.

(3) If a nursing home or portion of a nursing home constructed or established under the authority of a certificate of need granted from the pool of nursing home beds for ethnic minorities according to the provisions of WAC 246-310-135 is sold or leased within ten years to a party not eligible for an award of such beds under the provisions of WAC 246-310-136(2):

(a) The purchaser or lessee may not operate those beds as nursing home beds without first obtaining a certificate of need for new beds; and

(b) The beds that were awarded from the special pool shall be returned to that pool.

[Statutory Authority: RCW 70.38.135 (3)(c), 92-05-057 (Order 244), § 246-310-020, filed 2/14/92, effective 3/16/92. Statutory Authority: RCW 70.38.135 and 70.38.919, 92-02-018 (Order 224), § 246-310-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-310-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.38 RCW, 90-21-028 (Order 082), § 248-19-231, filed 10/9/90, effective 10/9/90; 89-23-098 (Order 019), § 248-19-231, filed 11/21/89, effective 12/22/89.]

WAC 246-310-035 Tertiary services identification.

(1) The criteria in this section shall be used as guidelines when examining services to determine whether the service is considered a tertiary service.

(2) In determining whether a service is a tertiary service the department shall consider the degree to which the service meets the following criteria:

(a) Whether the service is dependent on the skills and coordination of specialties and subspecialties. Including, but not limited to, physicians, nurses, therapists, social workers;

(b) Whether the service requires immediate access to an acute care hospital;

(c) Whether the service is characterized by relatively few providers;

(d) Whether the service is broader than a procedure;

(e) Whether the service has a low use rate;

(f) Whether consensus supports or published research shows that sufficient volume is required to impact structure, process, and outcomes of care; and

(g) Whether the service carries a significant risk or consequence.

(3) Annually the department shall request review of proposed changes to the list of tertiary services identified in WAC 246-310-020. The annual review shall be conducted as follows:

(a) The department shall send notice to all persons who have sent the certificate of need program a written request to be notified of the annual review of tertiary services.

(b) The notice shall contain the following:

(i) Identification of the thirty-day period during which written comments may be received. This thirty-day period shall be called the comment period;

(ii) The criteria listed in this section; and

(iii) The name and address of the person in the department to whom written comments are to be addressed.

(c) The written comments must address whether a service meets or partially meets the criteria in this section.

(d) Within sixty days after the close of the comment period the department shall determine whether to propose any changes to the list of tertiary services in chapter 246-310 WAC. This sixty-day period shall be called the consideration period.

(e) During the consideration period information may be exchanged between the department and persons proposing changes to the list of tertiary services in chapter 246-310 WAC.

(4) The department shall convene a technical work group at least every three years to do the following:

(a) Review the criteria listed in this section to determine whether the criteria appropriately define a tertiary service; and

(b) Propose any necessary changes to the list of tertiary services in WAC 246-310-020.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-035, filed 12/23/91, effective 1/23/92.]

WAC 246-310-040 Exemptions from requirements for a certificate of need for health maintenance organizations. (1) Provisions for exemptions.

The secretary's designee shall grant an exemption from the requirements for a certificate of need for the offering of an inpatient institutional health service, the acquisition of major medical equipment for the provision of an institutional health service, or the obligation of a capital expenditure in excess of the expenditure minimum for the provision of an inpatient institutional health service to any entity meeting the eligibility requirements set forth in subsection (1)(a) of this section for such an exemption and submitting an application for an exemption meeting the requirements of subsection (1)(b) of this section.

(a) Eligibility requirements.

To be eligible for an exemption from the requirements for a certificate of need for the offering of an inpatient institutional health service, the acquisition of major medical equipment for the provision of an inpatient institutional health service, or the obligation of a capital expenditure in excess of the expenditure minimum for the provision of an institutional health service, an applicant entity shall be one of the following:

(i) A health maintenance organization or a combination of health maintenance organizations if:

(A) The organization or combination of organizations has, in the service area of the organization or the service areas of the organizations in the combination, an enrollment of at least fifty thousand individuals;

(B) The facility in which the service will be provided is or will be geographically located so the service will be reasonably accessible to such enrolled individuals; and

(C) At least seventy-five percent of the patients reasonably expected to receive the institutional health service will

be individuals enrolled in such organization or organizations in the combination;

(ii) A health care facility if:

(A) The facility primarily provides or will provide inpatient health services;

(B) The facility is or will be controlled, directly or indirectly, by a health maintenance organization or a combination of health maintenance organizations which has, in the service area of the organization or service areas of the organizations in the combination, an enrollment of at least fifty thousand individuals;

(C) The facility is or will be geographically located so the service will be reasonably accessible to such enrolled individuals; and

(D) At least seventy-five percent of the patients reasonably expected to receive the institutional health service will be individuals enrolled with such organization or organizations in the combination; or

(iii) A health care facility (or portion thereof) if:

(A) The facility is or will be leased by a health maintenance organization or combination of health maintenance organizations which has, in the service area of the organization or the service areas of the organizations in the combination, an enrollment of at least fifty thousand individuals and, on the date the application for an exemption is submitted, at least fifteen years remain in the term of the lease;

(B) The facility is or will be geographically located so the service will be reasonably accessible to such enrolled individuals; and

(C) At least seventy-five percent of the patients reasonably expected to receive the institutional health service will be individuals enrolled with such organization;

(b) Requirements for an application for exemption.

An application for an exemption from a certificate of need shall meet the following requirements:

(i) The application for an exemption shall have been submitted at least thirty days prior to the offering of the institutional health service, acquisition of major medical equipment, or obligation of the capital expenditure to which the application pertains. A copy of the application for the exemption shall be sent simultaneously to the appropriate advisory review agencies.

(ii) A complete application shall be submitted in such form and manner as has been prescribed by the department. The information which the department prescribes shall include:

(A) All of the information required to make a determination that the applicant entity qualifies in accordance with subsection (1)(a) of this section; and

(B) A complete description of the offering, acquisition, or obligation to which the application pertains.

(2) Action on an application for exemption.

(a) Within thirty days after receipt of a complete application for exemption from certificate of need requirements, the department shall send the applicant a written notice the exemption has been granted or denied. A copy of such written notice shall be sent simultaneously to the appropriate advisory review agencies.

(b) The secretary's designee shall deny an exemption if he or she finds the applicant has not met the requirements of subsections (1)(a) and (b) of this section. Written notice of the denial shall include the specific reasons for the denial.

(c) In the case of an application for a proposed health care facility (or portion thereof) which has not begun to provide institutional health services on the date the application for an exemption is submitted, the secretary's designee shall grant the exemption if he or she determines the facility (or portion thereof) will meet the applicable requirements of subsection (1)(a) of this section when the facility first provides health services.

(d) If the secretary's designee fails to grant or deny an exemption in accordance with the provisions of this section within thirty days after receipt of a complete application for such exemption, the applicant for the exemption may seek a writ of mandamus from superior court pursuant to chapter 7.16 RCW.

(3) Subsequent sale, lease, or acquisition of exempt facilities or equipment.

Subsequent sale, lease, or acquisition of exempt health care facilities (or portions thereof) or medical equipment for which an exemption was granted under the provisions of subsection (2) of this section, any acquisition of a controlling interest in such facility or equipment, and any use of such facility or equipment by a person other than the one to whom the exemption was granted, shall meet one of the following conditions:

(a) A certificate of need for the purchase, lease, acquisition of controlling interest in, or use of such facility or equipment, shall have been applied for and issued by the department; or

(b) The department shall have determined, after receipt of an application for an exemption, submitted in accordance with subsection (1) of this section, that the requirements of either subsection (1)(a)(i) or subsection (1)(a)(ii)(A) and (B) are met.

(4) The method of payment for services (i.e., prepaid or fee for service) shall not be considered relevant in determining whether an undertaking of a health maintenance organization qualifies for an exemption under this section.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-405, filed 2/28/86; 81-09-012 (Order 210), § 248-19-405, filed 4/9/81, effective 5/20/81.]

WAC 246-310-050 Applicability determination. (1)

Any person wanting to know whether an action the person is considering is subject to certificate of need requirements (chapter 246-310 WAC) should submit a written request to the certificate of need unit requesting a formal determination of applicability of the certificate of need requirements to the action.

(a) A copy of a written request for determination of applicability shall be sent simultaneously to the appropriate advisory review agencies.

(b) The written request shall be in a form prescribed by the department and contain an explicit description of the action. The description shall include the nature and extent of any construction, changes in services, and the estimated total costs of the action.

(2) The department may request such additional written information as is reasonably necessary to make an applicability determination on the action.

(3) The department shall respond in writing to a request for an applicability determination within thirty days of

receipt of all the information needed for such determination. In the written response, the department shall state the reasons for its determination that the action is or is not subject to certificate of need requirements.

(4) Information or advice given by the department as to whether an action is subject to certificate of need requirements shall not be considered an applicability determination unless it is in written form in response to a written request submitted in accordance with provisions of this section.

(5) A written applicability determination on an action in response to a written request and based on written information shall be binding upon the department: *Provided*, The nature, extent, or cost of the action does not significantly change.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-240, filed 2/28/86; 81-09-012 (Order 210), § 248-19-240, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-240, filed 11/30/79.]

WAC 246-310-060 Sanctions for violations. The department may take or cause to be taken any action against a person who has failed to comply with certificate of need regulations which is provided for in RCW 70.38.125.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 81-09-012 (Order 210), § 248-19-250, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-250, filed 11/30/79.]

WAC 246-310-070 Periodic reports on development of proposals. During January of each year, each health care facility and any other person developing proposals subject to certificate of need review shall submit to the department and the advisory review agencies a report describing each such undertaking. Such report shall be submitted in a form prescribed by the department.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-260, filed 2/28/86; 81-09-012 (Order 210), § 248-19-260, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-260, filed 11/30/79.]

WAC 246-310-080 Letter of intent. Any person planning to propose an undertaking subject to certificate of need review shall submit a letter of as follows:

(1) A copy of the letter of intent shall include the following information:

- (a) A description of the extent of the services proposed;
- (b) The estimated cost of the proposed project;
- (c) A description of the service area.

(d) Any person proposing an undertaking subject to certificate of need review shall send simultaneously a copy of the letter of intent to the regional health council or councils, if any, for the health service area or areas in which the project is to be located and, in the case of a hospital project, to the hospital commission.

(e) The letter of intent shall not constitute "notice of intent" with respect to the acquisition of major medical equipment.

(2) Expedited or regular review. Any person proposing an undertaking subject to an expedited or regular review shall submit a letter of intent at least thirty days prior to the submission of the application.

(3) Concurrent review.

(a) Any person proposing undertakings subject to concurrent review shall submit a letter of intent according to the applicable schedule.

(b) Within thirty days following the last day of the letter of intent submittal period, the department, after consultation with the advisory review agencies, shall determine which of the proposed undertakings compete with other proposed undertakings. Two or more undertakings within the same concurrent review cycle may be competing when the proposed nursing home beds would be located in the same county or nursing home planning area and/or the undertakings propose nursing home beds to be allocated from the same statewide continuing care retirement community (CCRC) bed pool as defined in WAC 246-310-380.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-080, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.115. 87-10-023 (Order 2487), § 248-19-270, filed 5/1/87. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-270, filed 2/28/86; 81-09-012 (Order 210), § 248-19-270, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-270, filed 11/30/79.]

WAC 246-310-090 Submission and withdrawal of applications. (1) General.

(a) A person proposing an undertaking subject to review shall submit a certificate of need application in such form and manner and containing such information as the department, after consultation with the advisory review agencies, has prescribed and published as necessary to such a certificate of need application.

(i) The information, which the department prescribes and publishes as required for a certificate of need application, shall be limited to the information necessary for the department to perform a certificate of need review and shall vary in accordance with and be appropriate to the category of review or the type of proposed project: *Provided however*, That the required information shall include that which is necessary to determine whether the proposed project meets applicable criteria and plan standards.

(ii) Information regarding a certificate of need application submitted by an applicant after the department has given "notification of the beginning of review" in the manner prescribed by WAC 246-310-170 shall be submitted in writing to the department, the regional health council, and for hospital projects, to the hospital commission.

(iii) Except as provided in WAC 246-310-326, no information regarding a certificate of need application submitted by an applicant after the conclusion of a public hearing conducted under the provisions of WAC 246-310-180 or the date of the final action of the appropriate regional health council or the date of the final action of the hospital commission on the application, whichever occurs last, shall be considered by the department in reviewing and taking action on a certificate of need application. An exception to this rule shall be made when, during its final review period, the department finds an unresolved pivotal issue requires

submission of further information by an applicant and the applicant agrees to an extension of the review period in order to resolve this issue as provided for in WAC 246-310-160 (2)(b), 246-310-150 (2)(c), and 246-310-140(4). The department shall furnish copies of its request to the applicant for such additional information to the appropriate advisory review agencies. The department shall give public notice of such request for additional information through the same newspaper in which the "notification of beginning of review" for the project was published. The notice shall identify the project, the nature of the unresolved issue and the information requested of the applicant, and shall state the period of time allowed for receipt of written comments from interested persons.

(b) A person submitting a certificate of need application shall simultaneously submit copies of such application to the certificate of need unit of the department and the appropriate advisory review agencies.

(i) The original and two copies of the application shall be submitted to the certificate of need unit of the department.

(ii) At least three and such additional copies of the application as may be required by the regional health council shall be submitted to the appropriate regional health council.

(iii) For a hospital project, one copy shall be submitted to the hospital commission.

(c) On or before the last day of the applicable screening period for a certificate of need application, as prescribed in subsections (2) and (3) of this section, the department shall send a written notice to the person submitting the application stating whether or not the application has been declared complete. If an application has been found to be incomplete, the notice from the department shall specifically identify the portions of the application in which the information provided has been found to be insufficient or indefinite and request the supplemental information needed to complete the application. The notice from the department shall incorporate the findings as to insufficient or indefinite application information transmitted to the department by the regional health council and the hospital commission.

(d) The department shall not request any supplemental information of a type not prescribed and published as being necessary to a certificate of need application for the type of project being proposed. The department may request clarification of information provided in the application.

(e) A response to the department's request for information to supplement an incomplete application shall be written and submitted to the same agencies and in the same numbers as required for an application under the provisions of subsection (1)(b) of this section.

(2) Screening and prereview activities.

(a) The department and the appropriate advisory review agencies shall, within a fifteen-day period for emergency, expedited, and regular reviews, screen the application to determine whether the information provided in the application is complete and as explicit as is necessary for a certificate of need review. This screening period shall begin on the first day after which the department and the advisory review agencies have each received copies of the application.

(b) The department shall return an incomplete certificate of need application to the person submitting the application if the department has not received a response to a request for

the supplemental information sent in accordance with subsection (1)(c) of this section within forty-five days for emergency, expedited, and regular reviews and within one month for concurrent review after such request was sent.

(c) For emergency, expedited, and regular reviews, a person submitting a response to the department's request for supplemental information to complete a certificate of need application within forty-five days after the request was sent by the department, in accordance with subsection (1)(c) of this section, shall have the right to exercise one of the following options:

(i) Submission of written supplemental information and a written request that such information be screened and the applicant be given opportunity to submit further supplemental information if the application is still incomplete;

(ii) Submission of written supplemental information with a written request that review of the certificate of need application begin without the department notifying the applicant as to whether the supplemental information is adequate to complete the application; or

(iii) Submission of a written request that the incomplete application be reviewed without supplemental information.

(d) For concurrent review a person submitting a response to the department's request for supplemental information to complete a certificate of need application within one month after the request was sent by the department, in accordance with subsection (1)(c) of this section, shall submit written supplemental information or a written request that the incomplete application be reviewed. The review shall begin in accordance with the published schedule.

(e) After receipt of a request for review of a certificate of need application, submitted in accordance with subsection (2)(c)(ii) or (iii) of this section, the department shall give notification of the beginning of review in the manner prescribed for a complete application in WAC 246-310-170.

(f) If a person requests the screening of supplemental information in accordance with subsection (2)(c)(i) of this section, such screening shall be carried out in the same number of days and in the same manner as required for an application in accordance with the provisions of subsection (1)(c) and (2)(a) of this section. The process of submitting and screening supplemental information may be repeated until the department declares the certificate of need application complete, the applicant requests that review of the incomplete application begin, or the one hundred twentieth day after the beginning of the first screening period for the application, whichever occurs first. The department shall return an application to the applicant if it is still incomplete on the one hundred twentieth day after the beginning of the first screening period and the applicant has not requested review of such incomplete application.

(3) Withdrawal of applications.

A certificate of need application shall be withdrawn from the certificate of need process if the department receives a written request for withdrawal of the application from the person submitting the application at any time before final action on such application has been taken by the secretary's designee.

(4) Resubmission of applications withdrawn or returned as incomplete.

A submission of a new certificate of need application shall be required for a certificate of need review of any

undertaking for which the department has returned an incomplete application in accordance with subsection (2)(b) of this section, or for which a certificate of need application has been withdrawn in accordance with subsection (3) of this section. The content of the application should be updated as necessary before resubmission.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-280, filed 2/28/86; 81-09-012 (Order 210), § 248-19-280, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-280, filed 11/30/79.]

WAC 246-310-100 Amendment of certificate of need applications. (1) The following changes to an application may be considered an amendment of an application:

(a) The addition of a new service or elimination of a service included in the original application.

(b) The expansion or reduction of a service included in the original application.

(c) An increase in the bed capacity.

(d) A change in the capital cost of the project or the method of financing the project.

(e) A substantial change in the rationale used to justify the project.

(2) Direct responses to screening questions will not be considered amendments.

(3) Amendments to certificate of need applications shall include information and documentation consistent with the requirements of WAC 246-310-090 (1)(a)(i) and (b).

(4) Application for emergency review. If an applicant amends an application during the screening period, the department, after consultation with the advisory review agencies, shall determine whether the amended application constitutes a new application. An application amended during the review period shall be considered a new application.

(5) An application for expedited or regular review may be amended during the screening period or the advisory review period.

(a) The advisory review agency recommends to the department that a change to an application constitutes an amendment. When the advisory agency recommends an application has been amended, a written justification shall be submitted to the applicant and the department within five working days after the recommendation is made. The applicant may submit written information to the department within five working days indicating why the change should not be considered an amendment. The applicant shall also submit the written information to the advisory agency.

(b) The department shall determine within five working days of receipt of the advisory agency recommendation concerning an amendment whether the change constitutes an amendment to an application.

(c) When an application has been amended, the review period may be extended at the written request of the advisory review agency for a period not to exceed forty-five days.

(6) An application for concurrent review may be amended according to the following provisions:

(a) The department, in consultation with the advisory review agency, shall determine when an application has been amended.

(b) An amendment may be made through the first forty-five days of the concurrent review process. When an applicant amends an application, the review period for all applications reviewed concurrently shall be extended by a single thirty-day period. The forty-five days for amendments shall be divided as follows:

(i) During the first thirty days an applicant or applicants may amend an application one or more times.

(ii) When an amendment has been made to an application in the first thirty days, all applicants may make one final amendment during the remaining fifteen days of the forty-five day period.

(iii) The department shall send written notice to all applicants when an amendment to an application is submitted.

(iv) If no amendment has been made to any application through the thirty-day period, no amendments may be made during the subsequent fifteen-day period.

(c) Any information submitted after the amendment period which has not been requested in writing by the department shall be returned to the person submitting the information and shall not be considered in the review of the application.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-295, filed 2/28/86.]

WAC 246-310-110 Categories of review. (1) In the review of any certificate of need application, one of the following review processes shall be used: Regular review, concurrent review, emergency review, expedited review, or administrative review.

(2) Determination of review process.

The department, after any necessary consultation with the appropriate advisory review agencies, shall determine which review process will be used in the review of a given certificate of need application.

(a) Administrative review.

(i) The secretary's designee shall have the authority to review an abbreviated application proposing the obligation of any capital expenditure by or on behalf of a health care facility decreasing the total number of licensed beds or relocating licensed beds from one facility to another, by ten beds or ten percent, whichever is less, in any two-year period. Prior to making a determination of administrative review, the secretary's designee shall consult with the advisory review agencies.

(ii) An abbreviated application shall be submitted in a form acceptable to the secretary's designee in accordance with the provisions of WAC 246-310-090 (1)(b).

(iii) Such review shall be completed within ten working days after receipt of an application.

(b) Emergency review.

(i) Beginning January 1, 1981, an emergency review may, with the written consent of the appropriate advisory review agencies, be conducted when an immediate capital

expenditure is required in order for a health care facility to maintain or restore basic and essential patient services.

(ii) The department may, after consulting with the appropriate advisory review agencies, determine an application submitted for emergency review does not qualify for such review. Such a determination and notification to the applicant shall be made within five days after receipt of the application. When the department makes a determination an application is not subject to emergency review procedures, the application will be reviewed under another review process appropriate for the type of undertaking proposed. The department will notify the applicant of the other process under which the application will be reviewed.

(c) Expedited review.

Beginning July 24, 1983, an expedited review shall be conducted on a certificate of need application for the following:

(i) Projects proposed for the correction of deficiencies as described in WAC 246-310-480, except projects for the repair to or correction of deficiencies in the physical plant necessary to maintain state licensure, which are exempt from review by the provisions of WAC 246-310-020, if they do not substantially affect patient charges.

(ii) The replacement of equipment having similar functional capability and not resulting in the offering or development of any new health services.

(iii) Demonstration or research projects: *Provided*, That such projects do not involve a change in bed capacity or the provision of a new institutional health service.

(iv) Acquisition of an existing health care facility.

(v) Projects limited to predevelopment expenditures.

(d) Regular review process.

The regular review process shall be used for any application unless the department has determined the emergency, expedited, or concurrent review process will be used in the review of such application. The regular review process will also be used to review applications for projects solely for the purposes listed in WAC 246-310-020 determined by the department to substantially affect patient charges, unless the project qualifies for an expedited review under subsection (2)(b)(i) of this section.

(e) Concurrent review process.

The concurrent review process shall be used for all applications determined to be competing in accordance with WAC 246-310-120.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-110, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-300, filed 2/28/86; 81-09-012 (Order 210), § 248-19-300, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-300, filed 11/30/79.]

WAC 246-310-120 Concurrent review process. (1) Projects for which the department may establish concurrent review schedules are identified in RCW 70.38.115(7). An annual concurrent review has been scheduled for competing projects proposing:

(a) New nursing homes,

(b) Nursing home bed additions,

(c) The redistribution of beds from the following facility and service categories to skilled nursing facility beds:

- (i) Acute care,
- (ii) Boarding home, or
- (iii) Intermediate care for the mentally retarded, or
- (d) The redistribution of beds from the following facility and service categories to intermediate care facility beds:
 - (i) Acute care, or
 - (ii) Boarding home, and
 - (e) The relocation of nursing home beds from one county or nursing home planning area to another county or nursing home planning area.

(2) Procedures for the concurrent review process shall be as follows:

(a) Submittal of initial applications.

(i) Each applicant shall submit simultaneously copies of the application to each reviewing agency.

(ii) Each applicant if requested in writing shall provide a copy of his or her application to the applicant of each other competing application.

(b) Screening of the initial applications.

(i) The department and the appropriate advisory agencies shall screen each initial application during the screening period of the applicable concurrent review cycle schedule.

(ii) The screening period shall begin on the first work day following the last day of the initial application submittal period for the applicable concurrent review cycle schedule.

(iii) The department by the end of the screening period of the applicable concurrent review cycle schedule shall send a written request for supplemental information to each applicant.

(iv) Each applicant by the end of the final application submittal period shall respond to the department's written request for supplemental information in one of the following ways:

(A) Submitting the requested written supplemental information, or

(B) Submitting a written request that the incomplete application be reviewed without supplemental information.

(c) Reviewing of final applications.

(i) The department shall commence the review of competing applications on the date prescribed for the applicable concurrent review cycle schedule.

(ii) The total number of days in the advisory and final review periods shall not exceed one hundred and thirty-five, unless extended in accordance with subsection (2)(d) of this section.

(iii) The appropriate advisory review agencies shall submit written findings and recommendations on each competing application to the department within ninety days from the beginning of the advisory review period, unless the advisory review period is extended in accordance with subsection (2)(d) of this section.

(iv) The department shall conclude its final review and the secretary's designee shall take action on a certificate of need application within forty-five days after the end of the advisory review agencies' review period, unless extended in accordance with subsection (2)(d) of this section.

(d) Extending review of final applications.

(i) The advisory review period shall be extended in accordance with the provisions of WAC 246-310-100(6).

(ii) The final review period may be extended by the department under the following provisions:

(A) The department informs each applicant of the competing applications of the existence of an unresolved pivotal issue.

(B) The department may make a written request for additional information from one or more of the applicants of the competing applications.

(C) The department shall specify in the written request a deadline for receipt of written responses.

(D) Each applicant receiving such written request may provide a written response within the specified deadline.

(E) The department may extend the final review period for all competing applications up to thirty days after the receipt of the last response to the department's request for additional information or after the specified deadline, whichever occurs first.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-120, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.115. 87-10-023 (Order 2487), § 248-19-327, filed 5/1/87. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-327, filed 2/28/86.]

WAC 246-310-130 Nursing home concurrent review cycles. (1) The department shall review concurrently during review cycles established under subsection (6) of this section the following:

(a) New nursing homes,

(b) Nursing home bed additions, or

(c) Redistribution of beds from the following facility or service categories to skilled nursing care beds:

(i) Acute care,

(ii) Boarding home care, or

(iii) Intermediate care for the mentally retarded; or

(d) Redistribution of beds from the following facility or service categories to intermediate care facility beds:

(i) Acute care, or

(ii) Boarding home care.

(2) Undertakings of type A continuing care retirement communities (CCRCs), as defined in subsection (3)(b)(i) of this section which do not propose or are not operating within a transition period as defined in subsection (3)(d) of this section during development, and which meet the following conditions, shall be reviewed under the regular review process per WAC 246-310-160:

(a) The number of nursing home beds requested in a single undertaking shall not exceed sixty; and

(b) After project completion, the number of nursing home beds, including those with which the CCRC contracts, shall not exceed one bed for each four independent living units within the CCRC. In computing this ratio, only independent living units of the CCRC already existing, and/or scheduled for completion at the same time as the proposed nursing home beds under the same financial feasibility plan, shall be counted.

(3) For purposes of this section, the following definitions shall be used:

(a) "Continuing care contract" means a contract to provide a person, for the duration of the person's life or for a term in excess of one year, shelter along with nursing, medical, health-related, or personal care services, in exchange for payment of an entrance fee, periodic charges, or both. Continuing care contracts include, but are not limited

to, life care agreements and mutually terminable contracts. The living space and services under a continuing care contract may or may not be provided at the same location.

(b) "Continuing care retirement community (CCRC)" means any of a variety of entities providing shelter and services based on continuing care contracts with its enrollees. CCRCs are categorized as follows:

(i) "Type A CCRC" means a CCRC meeting the following requirements:

(A) Maintains for a period in excess of one year a CCRC contract with its enrollees or residents for a contractually guaranteed range of services from independent living through nursing home care, including some form of assistance with activities of daily living;

(B) Continues a contract if an enrollee or resident is no longer able to pay for services;

(C) Offers services only to contractual enrollees with limited exception related to use of transition periods; and

(D) Prohibits Medicaid program liability for costs of care even if the member depletes his or her personal resources.

(ii) "Type B CCRC" means a CCRC meeting the following requirements:

(A) Maintains for a period in excess of one year a CCRC contract with its enrollees or residents,

(B) May provide a range of services beyond nursing home care,

(C) May terminate a contract if an enrollee or resident is unable to pay for services,

(D) May admit patients to the nursing home who are not CCRC enrollees or residents, and

(E) May maintain Medicaid contracts and/or other requirements for third-party payment.

(c) "Enrollee" of a CCRC means an individual who has signed a continuing care contract with a CCRC.

(d) "Transition period" means a period of time, not exceeding five years, between the date an enrollee becomes the first resident of a type A CCRC and the date it fully meets the requirements of a type A CCRC as contained in the current state health plan.

(4) The annual nursing home concurrent review consists of the following cycles:

(a) One of the annual cycles is reserved for the review of competing applications submitted by or on behalf of:

(i) Type A CCRCs applying for nursing home beds available from the statewide CCRC allotment as described in WAC 246-310-380(5);

(ii) Type A CCRCs which propose or are operating within a transition period during development and are not applying for nursing home beds available from any nursing home planning area; and

(iii) Type B CCRCs applying for nursing home beds available from the statewide CCRC allotment.

(b) Two other cycles are for review of competing applications for nursing home beds needed in half of the nursing home planning areas; and

(c) Until whichever occurs first, December 31, 1990, or issuance of a certificate of need for all or part of those available beds, one cycle is reserved for the review of competing applications submitted for nursing home beds available from the King County AIDS nursing home bed allotment established under WAC 246-310-400.

(5) The department shall use the following nursing home concurrent review application filing procedures:

(a) Each applicant shall:

(i) File the required number of copies of each application as specified in the application information requirements, and

(ii) Mail or deliver the application so that the department receives it no later than the last day for initial application receipt as prescribed in the schedule for that concurrent review cycle.

(b) The department shall:

(i) Only review applications for which a letter of intent, as described in WAC 246-310-080, was mailed or delivered to the department before the last day for receipt of letters of intent as indicated below;

(ii) Begin screening all applications received during the initial application period on the first working day following the close of that period; and

(iii) Return to the applicant any application received after the last day of the initial application receipt period.

(6) The schedules for the annual nursing home bed concurrent review cycles shall be as follows:

(a) For those applications described in subsection (4)(a) of this section, the concurrent review cycle schedule shall be as follows:

(i) Period for receipt of letters of intent shall begin on the first working day of June and end on the first working day of July,

(ii) Period for receipt of initial applications shall begin on the first working day of July and end on the first working day of August,

(iii) End of initial application completeness screening period is the first working day of September,

(iv) End of final application receipt period is the first working day of October, and

(v) Beginning of concurrent review period is October 16 or first working day after that date.

(b) For competing applications submitted for nursing home beds available for the Chelan/Douglas, Clallam, Clark/Skamania, Cowlitz, Grant, Grays Harbor, Island excluding Camano, Jefferson, King, Kittitas, Klickitat, Okanogan, Pacific, San Juan, Skagit, Spokane, and Yakima nursing home planning areas, the concurrent review cycle schedule shall be as follows:

(i) Period for receipt of letters of intent shall begin on the first working day of July and end on the first working day of August,

(ii) Period for receipt of initial applications shall begin on the first working day of August and end on the first working day of September,

(iii) End of initial application completeness screening period is the first working day of October,

(iv) End of final application receipt period is the first working day of November, and

(v) Beginning of concurrent review period is November 16 or first working day after that date.

(c) For competing applications submitted for nursing home beds available for the Adams, Asotin, Benton, Columbia, Ferry, Franklin, Garfield, Kitsap, Lewis, Lincoln, Mason, Pend Oreille, Pierce, Snohomish including Camano, Stevens, Thurston, Wahkiakum, Walla Walla, Whatcom, and

Whitman nursing home planning areas, the concurrent review cycle schedule shall be as follows:

(i) Period for receipt of letters of intent shall begin on the first working day of August and end on the first working day of September,

(ii) Period for receipt of initial applications shall begin on the first working day of September and end on the first working day of October,

(iii) End of initial application completeness screening period is the first working day of November,

(iv) End of final application receipt period is the first working day of December, and

(v) Beginning of concurrent review period is December 16 or first working day after that date.

(d) For those applications described in subsection (4)(c) of this section, the concurrent review cycle shall be as follows:

(i) Period for receipt of letters of intent shall begin on February 17, 1989, and end on March 3, 1989;

(ii) Period for receipt of initial applications shall begin on March 6, 1989, and end on March 20, 1989;

(iii) End of initial application completeness screening period is April 3, 1989;

(iv) End of final application receipt period is April 17, 1989;

(v) Beginning of concurrent review period is April 17, 1989;

(vi) End of the advisory review period is June 16, 1989; and

(vii) End of the final review period is July 14, 1989.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-130, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.115. 88-24-026 (Order 2736), § 248-19-328, filed 12/2/88. Statutory Authority: RCW 70.38.115 and 70.38.135. 88-04-047 (Order 2591), § 248-19-328, filed 1/29/88. Statutory Authority: RCW 70.38.115. 87-10-023 (Order 2487), § 248-19-328, filed 5/1/87.]

WAC 246-310-132 Open heart surgery concurrent review cycle. (1) The department shall review new open heart surgery services using the concurrent review cycle in this section.

(2) Certificate of need applications shall be submitted and reviewed according to the following schedule and procedures.

(a) Letters of intent shall be submitted between the first working day and last working day of July of each year, beginning in 1992.

(b) Initial applications shall be submitted between the first working day and last working day of August of each year, beginning in 1992.

(c) The department shall screen initial applications for completeness by the last working day of September of each year, beginning in 1992.

(d) Responses to screening questions shall be submitted by the last working day of October of each year, beginning in 1992.

(e) The public review and comment period for applications shall begin on November 16 of each year, beginning in 1992. In the event that November 16 is not a working day

in any year, then the public review and comment period shall begin on the first working day after November 16.

(f) The public review and comment period shall be limited to ninety days, unless extended according to the provisions of WAC 246-310-120 (2)(d).

(g) The final review period shall be limited to sixty days, unless extended according to the provisions of WAC 246-310-120 (2)(d).

(3) Any letter of intent or certificate of need application submitted for review in advance of this schedule, or certificate of need application under review as of the effective date of this section, shall be held by the department for review according to the schedule in this section.

[Statutory Authority: RCW 70.38.135. 92-16-081 (Order 293) § 246-310-132, filed 8/4/92 effective 9/4/92; 91-17-011 (Order 188), § 246-310-132, filed 8/12/91, effective 8/28/91.]

WAC 246-310-135 Ethnic minority nursing home bed pool—Procedures. (1) The department is establishing a pool of two hundred fifty nursing home beds to serve the special needs of ethnic minorities. This pool shall be made up of nursing home beds that have become available on or after March 15, 1991, due to:

(a) Loss of license or reduction in licensed bed capacity of existing nursing homes, if the beds are not otherwise obligated for replacement as evidenced by a certificate of need authorizing such replacement; or

(b) Expiration or surrender of a certificate of need.

(2) Applications for construction or establishment of ethnic minority nursing home beds shall be reviewed in concurrent review cycles published by the department in rules.

(3) The department may award up to one hundred nursing home beds to a qualified applicant or applicants in the first concurrent review, and before those beds are in the ethnic minority bed pool. The schedule for the first concurrent review is set out in subsection (6) of this section.

(4) A second concurrent review cycle shall not be conducted until at least two hundred beds are in the ethnic minority bed pool, including the number of beds awarded in the first concurrent review. In this review cycle the department shall award at least one hundred beds and may award as many as one hundred fifty beds to a qualified applicant or applicants. In addition, the department may award any beds not awarded in the first concurrent review, provided any decision not to award those beds is not under appeal. The schedule for the second concurrent review shall be published in rule after at least two hundred beds are in the ethnic minority bed pool.

(5) The department shall conduct additional concurrent review cycles to award beds to qualified applicants when fewer than two hundred fifty beds are awarded in the first and second concurrent reviews, or when beds are returned to the ethnic minority bed pool under the provisions of WAC 246-310-020(3). Such additional concurrent reviews shall be conducted according to schedules published in rules. The department shall schedule additional concurrent reviews when the department determines an adequate number of nursing home beds are in the pool to justify such reviews.

(6) The first ethnic minority concurrent review cycle shall be conducted according to the following schedule.

(a) Letters of intent shall be submitted to the department between the first and last working day of March 1992.

(b) Initial applications shall be submitted to the department between the first and last working day of April 1992.

(c) The department shall screen initial applications for completeness by the last working day of May 1992.

(d) Responses to screening questions shall be submitted to the department by the last working day of June 1992.

(e) The public review and comment period for applications shall begin on July 14, 1992, and shall be limited to ninety days, unless extended according to the provisions of WAC 246-310-120 (2)(d).

(f) The final review period shall be limited to sixty days, unless extended according to the provisions of WAC 246-310-120 (2)(d).

(g) Any letters of intent or certificate of need applications submitted for review in advance of this schedule, or any certificate of need applications under review as of the effective date of this section, shall be held for review according to the schedule in this subsection.

[Statutory Authority: RCW 70.38.135 (3)(c), 92-05-057 (Order 244), § 246-310-135, filed 2/14/92, effective 3/16/92.]

WAC 246-310-136 Ethnic minority nursing home bed pool—Considerations for review of applications. (1) The department shall consider the following factors in the course of reviewing and making decisions on applications for construction or establishment of nursing home beds for ethnic minorities.

(a) Conformance with applicable review criteria in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240;

(b) Which of any competing applications best meet identified needs, consistent with the purpose of concurrent review as stated in RCW 70.38.115(7).

(c) The relative degree to which the long-term care needs of an ethnic minority among Washington residents are not otherwise being met. This includes consideration of the legislature's finding that certain ethnic minorities have special cultural, language, dietary, and other needs not generally met by existing nursing homes which are intended to serve the general population;

(d) The percentage of low-income persons who would be served by the proposed project; and

(e) The impact of the proposal on the area's total need for nursing home beds.

(2) To be eligible to apply for and receive an award of beds from the ethnic nursing home bed pool, an application must be to construct, develop, or establish a new nursing home or add beds to an existing nursing home that:

(a) Shall be owned and operated by a nonprofit corporation. At least fifty percent of the board of directors of the corporation are members of the ethnic minority the nursing home is intended to serve;

(b) Shall be designed, managed, and administered to serve the special cultural, language, dietary, and other needs of the ethnic minority; and

(c) Shall not discriminate in admissions against persons who are not members of the ethnic minority whose special needs the nursing home is designed to serve.

(3) An applicant not awarded beds in a concurrent review shall not be given preference over other applicants in any subsequent concurrent review on the basis of the prior review and decision when that applicant submits a new application for another review.

[Statutory Authority: RCW 70.38.135 (3)(c), 92-05-057 (Order 244), § 246-310-136, filed 2/14/92, effective 3/16/92.]

WAC 246-310-140 Emergency review process. (1) The emergency review process shall not exceed fifteen working days from the beginning of the review period.

(2) Written findings and written recommendations of the advisory review agencies shall be submitted to the department within ten working days after the beginning of the emergency review period.

(3) The department shall complete its final review and the secretary's designee shall make his or her decision on an emergency certificate of need application within fifteen working days after the beginning of the review period unless the department extends its final review period in accordance with the provisions of subsection (4) of this section.

(4) If an issue, which is pivotal to the decision of the secretary's designee remains unresolved, the department may make one request for additional information from the person submitting the application. The department may extend its final emergency review period up to but not exceeding ten days after receipt of the applicant's written response to the department's request for information.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-310-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135, 86-06-030 (Order 2344), § 248-19-350, filed 2/28/86; 82-19-055 (Order 244), § 248-19-350, filed 9/15/82; 81-09-012 (Order 210), § 248-19-350, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW, 79-12-079 (Order 188), § 248-19-350, filed 11/30/79.]

WAC 246-310-150 Expedited review process. (1) The expedited review process shall not exceed fifty days from the beginning of the review period unless extended in accordance with the provisions of subsection (2) of this section: *Provided however*, That the appropriate regional health council consents in writing to a thirty-day review period. If the regional health council does not consent to a thirty-day review period, the expedited review process shall not exceed eighty days from the beginning of the review period.

(a) If the advisory agencies' review period is thirty days, advisory review agencies shall submit written findings and recommendations to the department within thirty days of the beginning of the review period. If the advisory agencies' review period is sixty days, the advisory review agencies shall submit written findings and recommendations to the department within sixty days of the beginning of the review period.

(b) The department shall complete its final review and the secretary's designee shall make his or her decision on a certificate of need application under an expedited review within twenty days of the end of the review period or extended review period of the advisory review agencies.

(2) The review period for an expedited review may be extended according to the following provisions:

(a) If the regional health council has consented to a thirty-day review period, the review period may be extended

for up to an additional thirty days upon the written request of the advisory review agency when additional time is needed by the advisory review agency, to complete the review and submit written findings and recommendations to the department and/or up to an additional forty-five days in accordance with WAC 246-310-100. The department may grant further extensions to this review period: *Provided*, The person submitting the certificate of need application gives written consent to further extension.

(b) If an issue, which is pivotal to the decision of the secretary's designee remains unresolved, the department may make one request for additional information from the person submitting the application. The department may extend its final expedited review period up to but not exceeding thirty days after receipt of the applicant's written response to the department's request for information.

(c) The department may extend either the expedited review period for the advisory review agencies or the department's final review period upon receipt of a written request of the person submitting the application: *Provided however*, That such an extension shall not exceed sixty days.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-150, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-340, filed 2/28/86; 82-19-055 (Order 244), § 248-19-340, filed 9/15/82; 81-09-012 (Order 210), § 248-19-340, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-340, filed 11/30/79.]

WAC 246-310-160 Regular review process. (1) The regular review process shall not exceed ninety days from the beginning of the review period and shall be conducted in accordance with this section unless the review period is extended in accordance with the provisions of subsection (2) of this section.

(a) Within sixty days from the first day of the review period, the advisory review agencies shall submit written findings and recommendations on a certificate of need application to the department unless either of the advisory review agencies has requested and received an extension of this review period from the department.

(b) The department shall complete its final review and the secretary's designee shall make a decision on a certificate of need application within thirty days of the end of the review period or extended review period of the advisory review agencies.

(2) The review period for a regular review may be extended according to the following provisions:

(a) The advisory agencies' review period may be extended for up to an additional thirty days upon the written request of either of the advisory review agencies when such additional time is needed to complete the review and submit written findings and recommendations to the department and/or up to an additional forty-five days in accordance with WAC 246-310-100. The department may grant further extensions to this review period: *Provided*, The person submitting the certificate of need application gives written consent to such further extensions.

(b) If an issue, which is pivotal to the decision of the secretary's designee remains unresolved, the department may make one request for additional information from the person

submitting the application. The department may extend its final review period up to but not exceeding thirty days after receipt of the applicant's written response to the department's request for information.

(c) The department may extend either the review period for the advisory review agencies or the department's final review period upon receipt of a written request of the person submitting the application: *Provided however*, That such an extension shall not exceed ninety days.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-160, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-330, filed 2/28/86; 82-19-055 (Order 244), § 248-19-330, filed 9/15/82; 81-09-012 (Order 210), § 248-19-330, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-330, filed 11/30/79.]

WAC 246-310-170 Notification of beginning of review. (1) Notice required.

The department shall provide written notification of the beginning of the review of a certificate of need application and notification of the beginning of the review of a proposed withdrawal of a certificate of need to affected persons (other than persons residing within the geographic area served or to be served by the applicant, any persons regularly using health care facilities within that geographic area, and third-party payers reimbursing health care facilities for services in the health service area in which the project is proposed to be located), and any other person submitting a written request that the person's name be on the mailing list for such notice. Notification of the beginning of the review of a certificate of need application shall be provided to persons residing within the geographic area served or to be served by the applicant, to any person regularly using health care facilities within that geographic area, and third-party payers reimbursing health care facilities for services in the health service area in which the project is proposed to be located, through a newspaper of general circulation in the health service area of the project.

(2) Specific notice requirements.

(a) The department shall give "notification of the beginning of review" of an application after the department and the appropriate advisory review agencies have each received a complete application or the applicant's request, submitted in accordance with WAC 246-310-090 (2)(c), that review of the application begin. Such notice shall be given according to the following requirements:

(i) Emergency review.

When an application is being reviewed under the emergency review process, required notices shall be given within five working days following the receipt of a complete application or the applicant's written request that review of the application begin.

(ii) Expedited and regular review.

When an application is being reviewed under the expedited or regular review process, required notices shall be given within five working days of a declaration that the application is complete or the applicant's request that review of the application begin.

(b) The department shall give notification of the beginning of the review of a proposed withdrawal of a

certificate of need when the department determines there may be good cause to withdraw a certificate of need.

(c) The notices shall include:

(i) A general description of the project;

(ii) In the case of a proposed withdrawal of a certificate of need, the reasons for the proposed withdrawal;

(iii) The proposed review schedule;

(iv) The period within which one or more affected persons may request the conduct of a public hearing during the review;

(v) The name and address of the agency to which a request for a public hearing should be sent;

(vi) The manner in which notification will be provided of the time and place of any hearing so requested;

(vii) Notice that any affected person wishing to receive notification of a meeting on the application called by the department after the end of the advisory agencies review period shall submit a written request to the department to receive notification of such meetings; and

(viii) The period within which any affected person may request notification of the meetings referenced in subsection (2)(c)(vii) of this section.

(d) The notices to other affected persons shall be mailed on the same date the notice to the public is mailed to the newspaper for publication.

(3) Beginning of review.

(a) Review of a certificate of need application under the expedited or regular review process shall begin on the day the department sends notification of the beginning of review to the general public and other affected persons unless the department has received a written request from the applicant pursuant to WAC 246-310-090 (2)(c)(iii), in which case review shall begin upon receipt of such request.

(b) Review of certificate of need applications under the concurrent review process shall begin fifteen days after the conclusion of the published time period for the submission of final applications subject to concurrent review.

(c) Review of a certificate of need application under emergency review shall begin on the first day after the date on which the department and the appropriate advisory review agencies have determined the application is complete, or have each received a written request to begin review submitted by the applicant in accordance with WAC 246-310-090 (2)(c).

(d) Review of a proposed withdrawal of a certificate of need shall begin on the day the department sends notification of the beginning of review to the general public and to other affected persons.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-170, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-310, filed 2/28/86; 81-09-012 (Order 210), § 248-19-310, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-310, filed 11/30/79.]

WAC 246-310-180 Public hearings. (1) "Opportunity for a public hearing," as used in this section, shall mean a public hearing will be conducted if a valid request for such a hearing has been submitted by one or more affected persons.

(2) The department shall provide opportunity to affected persons for a public hearing on:

(a) A certificate of need application which is under review, unless the application is being reviewed according to the emergency or expedited review processes; and

(b) The proposed withdrawal of a certificate of need.

This requirement for a public hearing shall be satisfied if the appropriate regional health council has provided opportunity for such a public hearing to "affected persons" as this term is defined in WAC 246-310-010: *Provided however*, That the department has delegated the responsibility for such hearing to the appropriate regional health council, and such regional health council has followed public hearing procedures required under the provisions of this section.

(3) To be valid, a request for a public hearing on a certificate of need application or on the proposed withdrawal of a certificate of need shall:

(a) Be submitted in writing;

(b) Be received by the agency identified in the "notification of beginning of review" within fifteen days after the date on which the department's "notification of beginning of review" for the particular certificate of need application or proposed withdrawal of a certificate of need was published in a newspaper of general circulation; and

(c) Include identification of the particular certificate of need application or proposed certificate of need withdrawal for which the public hearing is requested and the full name, complete address, and signature of the person making the request.

(4) The department or the regional health council to which the department delegated responsibility for public hearings shall give written notice of a public hearing conducted pursuant to this section.

(a) Written notice shall be given to affected persons and the public at least fifteen days prior to the beginning of the public hearing.

(b) The notices shall include: Identification of the certificate of need application or certificate of need on which the public hearing is to be conducted and the date, time, and place of the public hearing.

(c) Notice to the general public to be served by the proposed project to which the certificate of need application or certificate of need pertains shall be through a newspaper of general circulation in the health service area of the proposed project. The notices to other affected persons shall be mailed on the same date the notice to the public is mailed to the newspaper for publication.

(5) In a public hearing on a certificate of need application or on a proposed withdrawal of a certificate of need, any person shall have the right to be represented by counsel and to present oral or written arguments and evidence relevant to the matter which is the subject of the hearing. Any person affected by the matter may conduct reasonable questioning of persons who make relevant factual allegations.

(6) The department or regional health council, whoever conducts the hearing, shall maintain a verbatim record of a public hearing and shall not impose fees for the hearing.

(7) The department shall not be required to conduct a public hearing on a certificate of need application being reviewed according to the emergency or expedited review procedures.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-180, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-320, filed 2/28/86; 81-09-012 (Order 210), § 248-19-320, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-320, filed 11/30/79.]

WAC 246-310-190 Ex parte contacts. (1) There shall be no ex parte contacts as defined in WAC 246-310-010(17) after whichever of the following occurs last:

(a) The conclusion of a public hearing held in accordance with WAC 246-310-180, or

(b) The final action of the appropriate regional health council, or

(c) The final action of the hospital commission.

(2) Any of the following communications shall not be considered ex parte contacts:

(a) A communication regarding the procedure or process of the review.

(b) A communication made in a meeting open to the public requested by the department and reasonable notice of the meeting has been given to the applicant, the advisory review agencies, all applicants in a concurrent review, and all persons having previously requested in writing to be notified of all such meetings or written requests for information concerning a specific application for certificate of need or a specific proposed withdrawal of a certificate of need.

(c) A written request for information made by the department and provided to all persons specified in subsection (2)(b) of this section.

(d) A response to a request made by the department in a meeting held in accordance with subsection (2)(b) of this section or in response to subsection (2)(c) of this section, and submitted to the department and to all persons specified in subsection (2)(b) of this section.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-190, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-326, filed 2/28/86.]

WAC 246-310-200 Bases for findings and action on applications. (1) The findings of the department's review of certificate of need applications and the action of the secretary's designee on such applications shall, with the exceptions provided for in WAC 246-310-470 and 246-310-480 be based on determinations as to:

(a) Whether the proposed project is needed;

(b) Whether the proposed project will foster containment of the costs of health care;

(c) Whether the proposed project is financially feasible; and

(d) Whether the proposed project will meet the criteria for structure and process of care identified in WAC 246-310-230.

(2) The decision on a certificate of need application shall be consistent with the state health plan in effect at the time the secretary's designee made the original or reconsidered or remanded decision. A finding of inconsistency shall not be based solely on the fact a proposed project is not specifically referenced in the state health plan.

(3) Criteria contained in this section and in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240 shall be used by the department in making the required determinations.

(a) In the use of criteria for making the required determinations, the department shall consider:

(i) The consistency of the proposed project with the applicable regional health plan (RHP) and annual implementation plan (AIP), and the state health plan (SHP);

(ii) The standards in the state health plan identified to be used for certificate of need review purposes and applicable to the type of project under review;

(iii) In the event standards in the state health plan or regional health plan do not address in sufficient detail for a required determination the services or facilities for health services proposed, the department may consider standards not in conflict with the state health plan or regional health plan in accordance with subsection (3)(b) of this section;

(iv) The findings and recommendations of the regional health council and the hospital commission (in relation to the immediate and long-range financial feasibility of a hospital project as well as the probable impact of such project on the cost of and charges for providing health services by the hospital, including recommendations to approve, conditionally approve, partially approve, or deny an application); and

(v) The relationship of the proposed project to the long-range plan (if any) of the person proposing the project.

(b) The department may consider any of the following in its use of criteria for making the required determinations:

(i) Nationally recognized standards from professional organizations;

(ii) Standards developed by professional organizations in Washington state;

(iii) Federal Medicare and Medicaid certification requirements;

(iv) State licensing regulations;

(v) The hospital commission's policies, guidelines and regulations;

(vi) Applicable standards developed by other individuals, groups, or organizations with recognized expertise related to a proposed undertaking; and

(vii) The written findings and recommendations of individuals, groups, or organizations with recognized expertise related to a proposed undertaking, with whom the department consults during the review of an application.

(c) At the request of an applicant, the department shall identify the criteria and standards it will use prior to the submission and screening of a certificate of need application: *Provided however,* That when a person requests identification of criteria and standards prior to the submission of an application, the person shall submit such descriptive information on a project as is determined by the department to be reasonably necessary in order to identify the applicable criteria and standards. The department shall respond to such request within fifteen working days of its receipt. In the absence of an applicant's request under this subsection, the department shall identify the criteria and standards it will use during the screening of a certificate of need application. The department shall inform the applicant about any consultation services it will use in the review of a certificate of need application prior to the use of such consultation services.

(d) Representatives of the department or consultants whose services are engaged by the department may make an on-site visit to a health care facility, or other place for which a certificate of need application is under review, or for which a proposal to withdraw a certificate of need is under review when the department deems such an on-site visit is necessary and appropriate to the department's review of a proposed project.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-200, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 85-05-032 (Order 2208), § 248-19-360, filed 2/15/85; 81-09-012 (Order 210), § 248-19-360, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-360, filed 11/30/79.]

WAC 246-310-210 Determination of need. The determination of need for any project shall be based on the following criteria, except these criteria will not justify exceeding the limitation on increases of nursing home beds provided in WAC 246-310-810.

(1) The population served or to be served has need for the project and other services and facilities of the type proposed are not or will not be sufficiently available or accessible to meet that need. The assessment of the conformance of a project with this criterion shall include, but need not be limited to, consideration of the following:

(a) In the case of a reduction, relocation, or elimination of a service, the need the population presently served has for the service, the extent to which the need will be met adequately by the proposed relocation or by alternative arrangements, and the effect of the reduction, elimination, or relocation of the service on the ability of low-income persons, racial and ethnic minorities, women, handicapped persons, and other underserved groups and the elderly to obtain needed health care;

(b) In the case of health services or facilities proposed to be provided, the efficiency and appropriateness of the use of existing services and facilities similar to those proposed;

(c) In the case of an application by an osteopathic or allopathic facility for a certificate of need to construct, expand, or modernize a health care facility, acquire major medical equipment, or add services, the need for that construction, expansion, modernization, acquisition of equipment, or addition of services on the basis of the need for and the availability in the community of services and facilities for osteopathic and allopathic physicians and their patients, and the impact on existing and proposed institutional training programs for doctors of osteopathy and medicine at the student, internship, and residency training levels; and

(d) In the case of a project not involving health services, the contribution of the project toward overall management and support of such services.

(2) All residents of the service area, including low-income persons, racial and ethnic minorities, women, handicapped persons, and other underserved groups and the elderly are likely to have adequate access to the proposed health service or services. The assessment of the conformance of a project with this criterion shall include, but not be limited to, consideration as to whether the proposed services makes a contribution toward meeting the health-related needs of members of medically underserved groups

which have traditionally experienced difficulties in obtaining equal access to health services, particularly those needs identified in the applicable regional health plan, annual implementation plan, and state health plan as deserving of priority. Such consideration shall include an assessment of the following:

(a) The extent to which medically underserved populations currently use the applicant's services in comparison to the percentage of the population in the applicant's service area which is medically underserved, and the extent to which medically underserved populations are expected to use the proposed services if approved;

(b) The past performance of the applicant in meeting obligations, if any, under any applicable federal regulations requiring provision of uncompensated care, community service, or access by minorities and handicapped persons to programs receiving federal financial assistance (including the existence of any unresolved civil rights access complaints against the applicant);

(c) The extent to which Medicare, Medicaid, and medically indigent patients are served by the applicant; and

(d) The extent to which the applicant offers a range of means by which a person will have access to its services (e.g., outpatient services, admission by house staff, admission by personal physician).

(3) The resources for the proposed project are not needed for higher priority alternative uses identified in applicable health plans.

(4) The applicant has substantiated any of the following special needs and circumstances the proposed project is to serve.

(a) The special needs and circumstances of entities such as medical and other health professions schools, multidisciplinary clinics and specialty centers providing a substantial portion of their services or resources, or both, to individuals not residing in the health service areas in which the entities are located or in adjacent health service areas.

(b) The special needs and circumstances of biomedical and behavioral research projects designed to meet a national need and for which local conditions offer special advantages.

(c) The special needs and circumstances of osteopathic hospitals and nonallopathic services.

(5) The project will not have an adverse effect on health professional schools and training programs. The assessment of the conformance of a project with this criterion shall include consideration of:

(a) The effect of the means proposed for the delivery of health services on the clinical needs of health professional training programs in the area in which the services are to be provided; and

(b) If proposed health services are to be available in a limited number of facilities, the extent to which the health professions schools serving the area will have access to the services for training purposes.

(6) The project is needed to meet the special needs and circumstances of enrolled members or reasonably anticipated new members of a health maintenance organization or proposed health maintenance organization and the services proposed are not available from nonhealth maintenance organization providers or other health maintenance organizations in a reasonable and cost-effective manner consistent with the basic method of operation of the health maintenance

organization or proposed health maintenance organization. In assessing the availability of health services from these providers, the department shall consider only whether the services from these providers:

(a) Would be available under a contract of at least five years' duration;

(b) Would be available and conveniently accessible through physicians and other health professionals associated with the health maintenance organization or proposed health maintenance organization (for example - whether physicians associated with the health maintenance organization have or will have full staff privileges at a nonhealth maintenance organization hospital);

(c) Would cost no more than if the services were provided by the health maintenance organization or proposed health maintenance organization; and

(d) Would be available in a manner administratively feasible to the health maintenance organization or proposed health maintenance organization.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-210, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 85-05-032 (Order 2208), § 248-19-370, filed 2/15/85; 81-09-012 (Order 210), § 248-19-370, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-370, filed 11/30/79.]

WAC 246-310-220 Determination of financial feasibility. The determination of financial feasibility of a project shall be based on the following criteria.

(1) The immediate and long-range capital and operating costs of the project can be met.

(2) The costs of the project, including any construction costs, will probably not result in an unreasonable impact on the costs and charges for health services.

(3) The project can be appropriately financed.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-220, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-380, filed 11/30/79.]

WAC 246-310-230 Criteria for structure and process of care. A determination that a project fosters an acceptable or improved quality of health care shall be based on the following criteria.

(1) A sufficient supply of qualified staff for the project, including both health manpower and management personnel, are available or can be recruited.

(2) The proposed service(s) will have an appropriate relationship, including organizational relationship, to ancillary and support services, and ancillary and support services will be sufficient to support any health services included in the proposed project.

(3) There is reasonable assurance that the project will be in conformance with applicable state licensing requirements and, if the applicant is or plans to be certified under the Medicaid or Medicare program, with the applicable conditions of participation related to those programs.

(4) The proposed project will promote continuity in the provision of health care, not result in an unwarranted fragmentation of services, and have an appropriate relationship to the service area's existing health care system.

(5) There is reasonable assurance that the services to be provided through the proposed project will be provided in a manner that ensures safe and adequate care to the public to be served and in accord with applicable federal and state laws, rules, and regulations. The assessment of the conformance of a project to this criterion shall include but not be limited to consideration as to whether:

(a) The applicant has no history, in this state or elsewhere, of a criminal conviction which is reasonably related to the applicant's competency to exercise responsibility for the ownership or operation of a health care facility, a denial or revocation of a license to operate a health care facility, a revocation of a license to practice a health profession, or a decertification as a provider of services in the Medicare or Medicaid program because of failure to comply with applicable federal conditions of participation; or

(b) If the applicant has such a history, whether the applicant has affirmatively established to the department's satisfaction by clear, cogent and convincing evidence that the applicant can and will operate the proposed project for which the certificate of need is sought in a manner that ensures safe and adequate care to the public to be served and conforms to applicable federal and state requirements.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 81-09-012 (Order 210), § 248-19-390, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-390, filed 11/30/79.]

WAC 246-310-240 Determination of cost containment. A determination that a proposed project will foster cost containment shall be based on the following criteria:

(1) Superior alternatives, in terms of cost, efficiency, or effectiveness, are not available or practicable.

(2) In the case of a project involving construction:

(a) The costs, scope, and methods of construction and energy conservation are reasonable; and

(b) The project will not have an unreasonable impact on the costs and charges to the public of providing health services by other persons.

(3) The project will involve appropriate improvements or innovations in the financing and delivery of health services which foster cost containment and which promote quality assurance and cost effectiveness.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-400, filed 2/28/86; 81-09-012 (Order 210), § 248-19-400, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-400, filed 11/30/79.]

WAC 246-310-260 Kidney transplantation. (1) Kidney transplantation is a tertiary service as listed in WAC 246-310-020.

(2) To receive approval a kidney transplant center must meet the following standards in addition to applicable review criteria in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240.

(a) A center shall perform at least fifteen transplants annually by the fourth year of operation.

(b) A center shall document that it will meet the requirements of membership to the United Network for Organ Sharing (UNOS) or its successor organization.

[Statutory Authority: RCW 70.38.135 and 70.38.919, 92-02-018 (Order 224), § 246-310-260, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-310-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919, 90-16-058 (Order 073), § 248-19-601, filed 7/27/90, effective 8/27/90.]

WAC 246-310-261 Open heart surgery standards and need forecasting method. (1) Open heart surgery means a specialized surgical procedure (excluding organ transplantation) which utilizes a heart-lung bypass machine and is intended to correct congenital and acquired cardiac and coronary artery disease.

(2) Open heart surgery is a tertiary service as listed in WAC 246-310-020. To be granted a certificate of need, an open heart surgery program shall meet the standards in this section in addition to applicable review criteria in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240.

(3) Standards.

(a) A minimum of two hundred fifty open heart surgery procedures per year shall be performed at institutions with an open heart surgery program.

(b) Hospitals applying for a certificate of need shall demonstrate that they can meet one hundred ten percent of the minimum volume standard. To do so, the applicant hospital must provide written documentation, which is verifiable, of open heart surgeries performed on patients referred by active medical staff of the hospital. The volume of surgeries counted must be appropriate for the proposed program (i.e., pediatric and recognized complicated cases would be excluded).

(c) No new program shall be established which will reduce an existing program below the minimum volume standard.

(d) Open heart surgery programs shall have at least two board certified cardiac surgeons, one of whom shall be available for emergency surgery twenty-four hours a day. The practice of these surgeons shall be concentrated in a single institution and arranged so that each surgeon performs a minimum of one hundred twenty-five open heart surgery procedures per year at that institution.

(e) Institutions with open heart surgery programs shall have plans for facilitating emergency access to open heart surgery services at all times for the population they serve. These plans should, at minimum, include arrangements for addressing peak volume periods (such as joint agreements with other programs, the capacity to temporarily increase staffing, etc.), and the maintenance of or affiliation with emergency transportation services (including contingency plans for poor weather and known traffic congestion problems).

(f) In the event two or more hospitals are competing to meet the same forecasted net need, the department shall consider the following factors when determining which proposal best meets forecasted need:

(i) The most appropriate improvement in geographic access;

(ii) The most cost efficient service;

(iii) Minimizing impact on existing programs;

(iv) Providing the greatest breadth and depth of cardiovascular and support services; and

(v) Facilitating emergency access to care.

(g) Hospitals granted a certificate of need have three years from the date the program is initiated to establish the program and meet these standards.

(h) These standards should be reevaluated in at least three years.

(4) Steps in the need forecasting method. The department will develop a forecast of need for open heart surgery every year using the following procedures.

(a) Step 1. Based upon the most recent three years volumes reported for the hospitals within each planning area, compute the planning area's current capacity and the percent of out-of-state use of the area's hospitals. In those planning areas where a new program is being established, the assumed volume of that institution will be the greater of either the minimum volume standard or the estimated volume described in the approved application and adjusted by the department in the course of review and approval.

(b) Step 2. Patient origin adjust the three years of open heart surgery data, and compute each planning area's age-specific use rates and market shares.

(c) Step 3. Multiply the planning area's age-specific use rates by the area's corresponding forecast year population. The sum of these figures equals the forecasted number of surgeries expected to be performed on the residents of each planning area.

(d) Step 4. Apportion the forecasted surgeries among the planning areas in accordance with each area's average market share for the last three years of the four planning areas. This figure equals the forecasted number of state residents' surgeries expected to occur within the hospitals in each planning area. In those areas where a newly approved program is being established, an adjustment will be made to reflect anticipated market share shifts consistent with the approved application.

(e) Step 5. Increase the number of surgeries expected to occur within the hospitals in each planning area in accordance with the percent of surgeries calculated as occurring in those hospitals on out-of-state residents, based on the average of the last three years. This figure equals the total forecasted number of surgeries expected to occur within the hospitals in each planning area.

(f) Step 6. Calculate the net need for additional open heart surgery services by subtracting the current capacity from the total forecasted surgeries.

(g) Step 7. If the net need is less than the minimum volume standard, no new programs shall be assumed to be needed in the planning area. However, hospitals may be granted certificate of need approval even if the forecasted need is less than the minimum volume standard, provided:

(i) The applying hospital can meet all the other certificate of need criteria for an open heart surgery program (including documented evidence of capability of achieving the minimum volume standard); and

(ii) There is documented evidence that at least eighty percent of the patients referred for open heart surgery by the medical staff of the applying hospital are referred to institutions more than seventy-five miles away.

(5) For the purposes of the forecasting method in this section, the following terms have the following specific meanings:

(a) Age-specific categories. The categories used in computing age-specific values will be fifteen to forty-four year olds, forty-five to sixty-four year olds, sixty-five to seventy-four year olds, and seventy-five and older.

(b) Current capacity. A planning area's current capacity for open heart surgeries equals the sum of the highest reported annual volume for each hospital within the planning area during the most recent available three years data.

(c) Forecast year. Open heart surgery service needs shall be based on forecasts for the fourth year after the certificate of need open heart surgery concurrent review process. The 1992 reviews will be based on forecasts for 1996.

(d) Market share. The market share of a planning area represents the percent of a planning area's total patient origin adjusted surgeries that were performed in hospitals located in that planning area. The most recent available three years data will be used to compute the age-specific market shares for each planning area.

(e) Open heart surgeries. Open heart surgeries are defined as DRGs 104 through 108, inclusive. All pediatric surgeries (ages fourteen and under) are excluded.

(f) Out-of-state use of planning area hospitals. The percent of out-of-state use of hospitals within a planning area will equal the percent of total surgeries occurring within the planning area's hospitals that were performed on patients from out-of-state (or on patients whose reported zip codes are invalid). The most recent available three years data will be used to compute out-of-state use of planning area hospitals.

(g) Patient origin adjustment. A patient origin adjustment of open heart surgeries provides a count of surgeries performed on the residents of a planning area regardless of which planning area the surgeries were performed in. (Surgeries can be patient origin adjusted by using the patient's zip code reported in the CHARS data base.)

(h) Planning areas. Four regional health service areas will be used as planning areas for forecasting open heart surgery service needs.

(i) Health service area "one" includes the following counties: Clallam, Island, Jefferson, King, Kitsap, Pierce, San Juan, Snohomish, Skagit, and Whatcom.

(ii) Health service area "two" includes the following counties: Cowlitz, Clark, Grays Harbor, Klickitat, Lewis, Mason, Pacific, Skamania, Thurston, and Wahkiakum.

(iii) Health service area "three" includes the following counties: Benton, Chelan, Douglas, Franklin, Grant, Kittitas, Okanogan, and Yakima.

(iv) Health service area "four" includes Adams, Asotin, Columbia, Ferry, Garfield, Lincoln, Pend Oreille, Stevens, Spokane, Walla Walla, and Whitman.

(v) Use rate. The open heart surgery use rate equals the number of surgeries performed on the residents of a planning area divided by the population of that planning area. The most recent available three years data is used to compute an averaged annual age-specific use rate for the residents of each of the four planning areas.

(6) The data source for open heart surgeries is the comprehensive hospital abstract reporting system (CHARS), office of hospital and patient data, department of health.

(7) The data source for population estimates and forecasts is the office of financial management population trends reports.

[Statutory Authority: RCW 70.38.135(3). 92-12-015 (Order 274), § 246-310-261, filed 5/26/92, effective 6/26/92.]

WAC 246-310-262 Nonemergent interventional cardiology standard. All nonemergent percutaneous transluminal coronary angioplasty (PTCA) procedures and all other nonemergent interventional cardiology procedures are tertiary services as defined in WAC 246-310-021 and shall be performed in institutions which have an established on-site open heart surgery program capable of performing emergency open heart surgery.

[Statutory Authority: RCW 70.38.135(3). 92-12-015 (Order 274), § 246-310-262, filed 5/26/92, effective 6/26/92.]

WAC 246-310-270 Ambulatory surgery. (1) To receive approval, an ambulatory surgical facility must meet the following standards in addition to applicable review criteria in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240.

(2) The area to be used to plan for operating rooms and ambulatory surgical facilities is the secondary health services planning area.

(3) Secondary health services planning areas are: San Juan, Whatcom, East Skagit, Whidbey-Fidalgo, Western North Olympic, East Clallam, East Jefferson, North Snohomish, Central Snohomish, East Snohomish, Southwest Snohomish, Kitsap, North King, East King, Central King, Southwest King, Southeast King, Central Pierce, West Pierce, East Pierce, Mason, West Grays Harbor, Southeast Grays Harbor, Thurston, North Pacific, South Pacific, West Lewis, East Lewis, Cowlitz-Wahkiakum-Skamania, Clark, West Klickitat, East Klickitat, Okanogan, Chelan-Douglas, Grant, Kittitas, Yakima, Benton-Franklin, Ferry, North Stevens, North Pend Oreille, South Stevens, South Pend Oreille, Southwest Lincoln, Central Lincoln, Spokane, Southwest Adams, Central Adams, Central Whitman, East Whitman, Walla Walla, Columbia, Garfield, and Asotin.

(4) Outpatient operating rooms should ordinarily not be approved in planning areas where the total number of operating rooms available for both inpatient and outpatient surgery exceeds the area need.

(5) When a need exists in planning areas for additional outpatient operating room capacity, preference shall be given to dedicated outpatient operating rooms.

(6) An ambulatory surgical facility shall have a minimum of two operating rooms.

(7) Ambulatory surgical facilities shall document and provide assurances of implementation of policies to provide access to individuals unable to pay consistent with charity care levels provided by hospitals affected by the proposed ambulatory surgical facility. The amount of an ambulatory surgical facility's annual revenue utilized to finance charity care shall be at least equal to or greater than the average percentage of total patient revenue, other than medicare or

medicaid, that affected hospitals in the planning area utilized to provide charity care in the last available reporting year.

(8) The need for operating rooms will be determined using the method identified in subsection (9) of this section.

(9) Operating room need in a planning area shall be determined using the following method:

(a) Existing capacity.

(i) Assume the annual capacity of one operating room located in a hospital and not dedicated to outpatient surgery is ninety-four thousand two hundred fifty minutes. This is derived from scheduling forty-four hours per week, fifty-one weeks per year (allowing for five weekday holidays), a fifteen percent loss for preparation and clean-up time, and fifteen percent time loss to allow schedule flexibility. The resulting seventy percent productive time is comparable to the previously operating hospital commission's last definition of "billing minutes" which is the time lapse from administration of anesthesia until surgery is completed.

(ii) Assume the annual capacity of one operating room dedicated to ambulatory surgery is sixty-eight thousand eight hundred fifty minutes. The derivation is the same as (a)(i) of this subsection except for twenty-five percent loss for prep/clean-up time and scheduling is for a thirty-seven and one-half hour week. Divide the capacity minutes by the average minutes per outpatient surgery (see (a)(vii) of this subsection). Where survey data are unavailable, assume fifty minutes per outpatient surgery, resulting in a capacity for one thousand three hundred seventy-seven outpatient surgeries per room per year.

(iii) Calculate the total annual capacity (in number of surgeries) of all dedicated outpatient operating rooms in the area.

(iv) Calculate the total annual capacity (in number of minutes) of the remaining inpatient and outpatient operating rooms in the area, including dedicated specialized rooms except for twenty-four hour dedicated emergency rooms. When dedicated emergency operating rooms are excluded, emergency or minutes should also be excluded when calculating the need in an area. Exclude cystoscopic and other special purpose rooms (e.g., open heart surgery) and delivery rooms.

(b) Future need.

(i) Project number of inpatient and outpatient surgeries performed within the hospital planning area for the third year of operation. This shall be based on the current number of surgeries adjusted for forecasted growth in the population served and may be adjusted for trends in surgeries per capita.

(ii) Subtract the capacity of dedicated outpatient operating rooms from the forecasted number of outpatient surgeries. The difference continues into the calculation of (b)(iv) of this subsection.

(iii) Determine the average time per inpatient and outpatient surgery in the planning area. Where data are unavailable, assume one hundred minutes per inpatient and fifty minutes per outpatient surgery. This excludes preparation and cleanup time and is comparable to "billing minutes."

(iv) Calculate the sum of inpatient and remaining outpatient (from (b)(ii) of this subsection) operating room time needed in the third year of operation.

(c) Net need.

(i) If (b)(iv) of this subsection is less than (a)(iv) of this subsection, divide their difference by ninety-four thousand two hundred fifty minutes to obtain the area's surplus of operating rooms used for both inpatient and outpatient surgery.

(ii) If (b)(iv) of this subsection is greater than (a)(iv) of this subsection, subtract (a)(iv) of this subsection from the inpatient component of (b)(iv) of this subsection and divide by ninety-four thousand two hundred fifty minutes to obtain the area's shortage of inpatient operating rooms. Divide the outpatient component of (b)(iv) of this subsection by sixty-eight thousand eight hundred fifty to obtain the area's shortage of dedicated outpatient operating rooms.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-270, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-270, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-16-058 (Order 073), § 248-19-700, filed 7/27/90, effective 8/27/90.]

WAC 246-310-280 Kidney disease treatment centers. (1) To receive approval, a kidney disease treatment center must meet the following standards in addition to applicable review criteria in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240.

(2) End stage renal disease planning areas shall be health service areas. The health service areas are as follows:

(a) Health service Area I includes Clallam, Jefferson, San Juan Island, Kitsap, Pierce, King, Snohomish, Skagit, and Whatcom counties.

(b) Health service Area II includes Thurston, Mason, Grays Harbor, Pacific, Wahkiakum, Lewis, Cowlitz, Clark, Skamania, and Klickitat counties.

(c) Health service Area III includes Okanogan, Chelan, Douglas, Grant, Kittitas, Yakima, Benton, and Franklin counties.

(d) Health service Area IV includes Ferry, Stevens, Pend Oreille, Lincoln, Spokane, Adams, Whitman, Walla Walla, Columbia, Garfield, and Asotin counties.

(3) The maximum number of dialysis stations needed in an end stage renal disease planning area shall be determined using the following data:

(a) Utilization of a dialysis station or a center.

(i) One hundred percent utilization equals twelve dialyses per week.

(ii) Eighty percent utilization equals 9.6 dialyses per week.

(iii) When determining the utilization of an existing center each station on which at least six patients have been self/home trained annually shall be deducted from the approved stations.

(iv) When determining the utilization of an existing center, the utilization rate may be reduced to seventy-five percent and seventy percent in facilities with ten percent and twenty percent peritoneal dialysis patients respectively.

(b) At the time of the application, the most recent Washington state office of financial management population data.

(c) Historical data of the Northwest renal network.

(d) The health service area's most recent three-year average shall be used for incidence, death, transplant, and home training rates.

(4) The maximum number of dialysis stations projected as needed in an ESRD planning area shall be determined using the following methodology:

(a) Identify the number of incenter patients expected in the planning area in the year in which the application is submitted.

(i) Add expected new ESRD and re-entry cases per year.

(ii) Subtract expected ESRD patient deaths per year.

(iii) Subtract expected ESRD home training patients per year.

(iv) Subtract the number of expected functional transplants per year.

(b) Calculate the number of expected dialyses by multiplying the number of incenter patients by three treatments per week.

(c) Calculate the number of dialysis stations needed in the applicant's projected third full year of operation using eighty percent utilization.

(5) All kidney disease treatment centers within a reasonable driving time must be operating at an eighty percent utilization rate before additional stations are approved.

(6) New kidney disease treatment centers must reasonably project an eighty percent utilization rate by the third year of operation.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-280, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-280, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-16-058 (Order 073), § 248-19-701, filed 7/27/90, effective 8/27/90.]

WAC 246-310-350 Nursing home and continuing care retirement community definitions. The department shall use the definitions in this section in sections WAC 246-310-360 Nursing home bed need projection method through WAC 246-310-390 Nursing home bed need adjustment.

(1) "Baseline bed need" means the number of additional nursing home beds needed in the state or a planning area by the resident population by the projection year.

(2) "Baseline projection" means the number of nursing home beds calculated by the department as necessary state-wide or within a planning area, by the end of the projection period, for reasonable and appropriate use by the resident population.

(3) "Bedded" is a term which describes the adequacy of the bed supply within a planning area relative to the baseline projection.

(a) A planning area is "under-bedded" if the area's bed-to-population ratio is less than the target ratio.

(b) A planning area is "adequately bedded" if the area's bed-to-population ratio is between the target ratio and the state-wide current ratio.

(c) A planning area is "over-bedded" if its bed-to-population ratio is greater than the state-wide current ratio.

(4) "Bed supply" means within a geographic area the total number of:

(a) Nursing home beds which are licensed or certificate of need approved but not yet licensed, excluding:

(i) Those nursing home beds certified as intermediate care facility for the mentally retarded (ICF-MR) the operators of which have not signed an agreement on or before

July 1, 1990, with the department of social and health services to give appropriate notice prior to termination of the ICF-MR service;

(ii) New or existing nursing home beds within a Type A CCRC which are approved under the provisions of WAC 246-310-380(5); or

(iii) Nursing home beds within a CCRC which is excluded from the definition of a health care facility per RCW 70.38.025(6); and

(iv) In computing the bed supply of a planning area, but not in computing state-wide bed supply, new nursing home beds within a Type B CCRC as defined in subsection (8)(b) of this section.

(b) Licensed hospital beds used for long-term care or certificate of need approved hospital beds to be used for long-term care not yet in use, excluding swing-beds.

(5) "Bed-to-population ratio" means the bed supply per one thousand persons of the estimated or forecast resident population age sixty-five and older, and includes the following:

(a) "State-wide current ratio" means a bed-to-population ratio computed from the most recent state-wide bed supply and the most recent estimate of the state-wide resident population.

(b) "Target ratio" means a bed-to-population ratio of forty-five established for planning and policy-making purposes.

(6) "Concurrent reviews" have been scheduled in WAC 246-310-120 for competing projects proposing nursing home beds. The redistribution of nursing home beds certified as intermediate care for the mentally retarded (ICF-MR) to skilled nursing facility beds will not be subject to concurrent review when the ICF-MR beds have been counted in the "bed supply" as referenced in subsection (4)(a)(i) of this section.

(7) "Continuing care contract" means a contract providing a person, for the duration of that person's life or for a term in excess of one year, shelter along with nursing, medical, health-related, or personal care services. The contract is conditioned on the transfer of property, the payment of an entrance fee to the provider of such services, or the payment of periodic charges for the care and services involved. A continuing care contract is not excluded from this definition because the contract is mutually terminable or because shelter and services are not provided at the same location.

(8) A "continuing care retirement community (CCRC)" means any of a variety of entities, unless excluded from the definition of health care facility under RCW 70.38.025(6), which provides shelter and services based on continuing care contracts with its members. CCRCs are categorized as follows:

(a) "Type A CCRC" means a CCRC which:

(i) Maintains for a period in excess of one year a CCRC contract with a member which provides or arranges for at least the following specific services:

(A) Independent living units;

(B) Nursing home care with no limit on the number of medically needed days;

(C) Assistance with activities of daily living; and

(D) Services equivalent in scope to either state chore services or Medicaid home health services;

(ii) Continues a contract, if a member is no longer able to pay for services;

(iii) Offers services only to contractual members with limited exception during a transition period; and

(iv) Holds the Medicaid program harmless from liability for costs of care, even if the member depletes his or her personal resources.

(b) "Type B CCRC" means a CCRC which:

(i) Maintains for a period in excess of one year a CCRC contract with its members;

(ii) Provides shelter along with nursing, medical, health-related, or personal care services;

(iii) May terminate a contract, if a member is unable to pay for services;

(iv) May admit patients to the nursing home who are not CCRC members; and

(v) May maintain Medicaid contracts and/or other requirements for third party payment.

(9) A "member" of a CCRC means an individual who has signed a continuing care contract with a CCRC.

(10) "Net bed need" means baseline bed need of a planning area changed by any redistributions as follows:

(a) Adding nursing home beds being redistributed from another nursing home planning area or areas; or

(b) Subtracting nursing home beds being redistributed to another nursing home planning area or areas.

(11) "Planning and service area" (PSA) means the geographic area of one or more counties designated by the department of social and health services' aging and adult services administration to be represented by a single area agency on aging.

(12) "Planning area" means each individual county designated by the department as the smallest geographic area for which nursing home bed need projections are developed, except as follows:

(a) Clark and Skamania counties shall be one planning area.

(b) Chelan and Douglas counties shall be one planning area.

(c) Camano Island shall be included in Snohomish County and excluded from Island County.

(13) "Projection period" means the interval of time between July 1, 1990, and June 30, 1993.

(14) "Projection year" means the time interval between July 1, 1992, and June 30, 1993.

(15) "Redistribution" means a shift of net bed need among planning areas in accordance with a redistribution plan as described in WAC 246-310-380(4).

(16) "Resident population" means the number of residents sixty-five years of age and older living within the same geographic area which:

(a) Excludes contract holders living within a Type A CCRC:

(i) With approval for new nursing home beds under the provisions of WAC 246-310-380(5); or

(ii) Excluded from the definition of a health care facility per RCW 70.38.025(6);

(b) Is calculated using demographic data obtained from:

(i) The office of financial management; and

(ii) Certificate of need applications and exemption requests previously submitted by Type A CCRC.

(17) "Swing beds" means up to the first five hospital beds designated by an eligible rural hospital which are available to provide either acute care or long-term nursing services as required.

(18) "Transition period" means the period of time, not exceeding five years, between the date the facility is inhabited by a member and the date it fully meets the requirements of a Type A CCRC as contained in subsection (8)(a) of this section.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-350, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-350, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-12-071 (Order 062), § 248-19-800, filed 6/1/90, effective 7/1/90.]

WAC 246-310-360 Nursing home bed need method.

(1) The department has developed the following projection method for determining the number of new nursing home beds necessary for reasonable and appropriate use.

(2) The department shall use the following projection method during the projection period.

(a) The department shall calculate the state-wide baseline bed need for the projection year which is:

(i) The greater of:

(A) The product of the estimated state-wide resident population for the projection year multiplied by the target ratio; or

(B) Thirty thousand two hundred;

(ii) Minus thirty-five nursing home beds for a state-wide AIDS nursing home demonstration project to be located in PSA # 4.

(b) The department shall calculate the baseline projection for each planning area by multiplying the projection year estimated resident population for each planning area by either:

(i) The target ratio; or

(ii) If thirty thousand two hundred minus thirty-five is used as the state-wide baseline bed need, the bed-to-population ratio computed using a state-wide bed supply of thirty thousand one hundred sixty-five and state-wide projection year resident population.

(c) The department shall calculate the projected current supply ratio for each planning area, which is a bed-to-population ratio computed from the most recent bed supply and the projection year estimate of resident population.

(d) The department shall rank order each planning area from lowest to highest according to the planning area's projected current supply ratio.

(e) The department shall determine the areas of the state that will be under-bedded, adequately-bedded, and over-bedded in the projection year by comparing each planning area's projected current supply ratio to the target ratio and state-wide current ratio.

(f) The department shall compare the most recent state-wide bed supply with the state-wide baseline bed need.

(i) If the current state-wide bed supply is greater than or equal to the state-wide baseline bed need, then:

(A) Calculation of planning area need for new beds ends; and

(B) Need for new beds in every planning area is determined to be zero.

(ii) If the current state-wide bed supply is less than the state-wide baseline bed need, the department shall determine the difference between the state-wide baseline bed need and the state-wide current bed supply, which shall be called state-wide available beds.

(A) If the number of state-wide available beds is large enough, the department shall assign to each under-bedded planning area the number of beds necessary to bring it up to the target ratio in the projection year.

(B) If the number of state-wide available beds is insufficient to assign each under-bedded planning area the number of new beds necessary to bring it up to the target ratio, the department shall assign to each under-bedded planning area a proportion of state-wide available beds equal to the ratio of that planning area's bed need to reach the target ratio to the total beds required for all under-bedded planning areas to reach the target ratio in the projection year.

(C) If after assigning new beds to under-bedded planning areas per (f)(ii)(A) of this subsection state-wide available beds remain, the department shall assign this remainder to under-bedded or adequately-bedded planning areas as follows:

(I) Since currently under-bedded planning areas have been assigned sufficient beds to reach the target ratio under provisions of (f)(ii)(A) of this subsection, for purposes of this step of the calculation the department shall consider each currently under-bedded planning area to be adequately-bedded and to have a bed supply exactly sufficient to achieve the target ratio in the projection year.

(II) The department shall determine the number of beds needed to bring all adequately-bedded planning areas up to the state-wide current ratio.

(III) If the remainder of state-wide available beds is large enough, the departments shall assign adequately-bedded planning areas the number of beds each needs to reach the state-wide current ratio in the projection year.

(IV) If the remainder of state-wide available beds is insufficient to bring adequately-bedded planning areas up to the state-wide current ratio, the department shall assign to each adequately-bedded planning area a proportion of state-wide available beds equal to the ratio of that planning area's bed need to reach the target ratio to the total beds required for all adequately-bedded planning areas to reach the target ratio in the projection year.

(D) The department shall not assign more new beds to a planning area than the number which, when added to the planning area's bed supply, will raise the planning area's bed-to-population ratio to the greater of the target ratio and the state-wide current ratio.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-360, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-12-071 (Order 062), § 248-19-805, filed 6/1/90, effective 7/1/90.]

WAC 246-310-370 Nursing home bed need method revision. (1) The department shall review the projection method and may make changes in accordance to the following schedule:

(a) By June 30, 1992, the department, in consultation with the department of social and health services and appropriate advisory bodies representing both consumers and providers, shall review the projection method.

(b) During the first half of the projection year, the department shall amend these rules to change the projection method as necessary.

(c) During January 1993 the department shall calculate the baseline projections for the projection period beginning July 1, 1993.

(2) When reviewing the projection method the department shall consider the following:

(a) The national bed-to-population ratio and the bed-to-population ratios of other states judged by the aging and adult services administration of the department of social and health services to have reasonable and progressive long-term care policies;

(b) State governmental policy goals for distributing scarce resources between nursing homes and other institutional or community based services;

(c) The effects of developments in the delivery or financing of long-term care services on nursing home bed need; and

(d) Progress in developing other long-term care services for the state-wide resident population.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-370, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-12-071 (Order 062), § 248-19-806, filed 6/1/90, effective 7/1/90.]

WAC 246-310-380 Nursing home bed need standards. (1) The department shall use the following rules to interpret the certificate of need review criteria contained in WAC 246-310-210(1) for applications proposing the following:

(a) Construction, development, or other establishment of a new nursing home;

(b) Increase in the licensed bed capacity of a nursing home or a hospital long-term care unit;

(c) Change in license category of beds from the following to nursing home or hospital long-term care unit beds:

(i) Acute care, or

(ii) Boarding home care;

(2) The department shall comply with the following time schedule for developing bed need projections:

(a) By the last working day in January of each year, the department shall recalculate the baseline projection for each planning-area.

(b) By the last working day in January of each year, the department shall provide the aging and adult services administration of the department of social and health services with the baseline bed need for each planning-area, pending the department's decisions on applications submitted during the previous year's nursing home concurrent review cycles.

(c) By the last working day in January of each year, the department shall rank order planning-areas from lowest to highest by the projected current supply ratio.

(d) By the first working day of June of each year, the department shall calculate the net bed need for each planning-area.

(3) The following are the baseline projections for the projection period, listed by planning and service area and planning-area. When a planning-area baseline projection is less than the planning-area's bed supply as defined by WAC 246-310-350(4), no beds can be added until the state-wide

target ratio is reached, except as allowed in subsections (4) and (6) of this section.

Planning-area	Baseline projection
(a) PSA # 1	
Clallam	471
Grays Harbor	472
Jefferson	188
Pacific	179
(b) PSA # 2	
Island excluding Camano	394
San Juan	105
Skagit	610
Whatcom	866
(c) PSA # 3	
Snohomish including Camano	2,464
(d) PSA # 4	
King	9,229
AIDS project	35
(e) PSA # 5	
Pierce	3,334
(f) PSA # 6	
Lewis	471
Mason	302
Thurston	993
(g) PSA # 7	
Clark/Skamania	1,286
Cowlitz	526
Klickitat	121
Wahkiakum	27
(h) PSA # 8	
Adams	71
Chelan/Douglas	618
Grant	305
Lincoln	86
Okanogan	235
(i) PSA # 9	
Asotin	151
Benton	403
Columbia	42
Franklin	155
Garfield	22
Kittitas	183
Walla Walla	399
Yakima	1,392
(j) PSA # 11	
Ferry	31
Pend Oreille	63
Spokane	2,463
Stevens	185
Whitman	202

(k) PSA # 13

Kitsap 1,119

(4) The aging and adult services administration of the department of social and health services may submit any redistribution plans to the department which:

- (a) Redistribute baseline bed need among planning-areas;
- (b) Document the following:
 - (i) That all involved area agencies on aging support each proposed redistribution, and
 - (ii) That the redistribution plan was approved by the assistant secretary for aging and adult services of the department of social and health services.

(c) Are received by the department no later than April tenth or the first working day thereafter.

(5) The department shall limit to three hundred the total number of nursing home beds approved for all Type A CCRC which propose or are operating within a transition period.

(a) These three hundred beds available for Type A CCRC during transition periods shall be in addition to the net nursing home beds needed in all of the planning-areas.

(b) All nursing home beds approved for Type A CCRC which propose or are operating within a transition period shall be counted as beds within this three hundred bed limitation unless and until the CCRC fully complies with all provisions of the Type A CCRC performance standards.

(6) The department shall not issue certificates of need approving more than the net bed need indicated for a given planning-area, unless:

- (a) The department finds such additional beds are needed to be located reasonably close to the people they serve; and
- (b) The department explains such approval in writing.

[Statutory Authority: RCW 70.38.135. 91-15-018 (Order 179), § 246-310-380, filed 7/10/91, effective 8/10/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-380, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-12-072 (Order 063), § 248-19-810, filed 6/1/90, effective 7/1/90.]

WAC 246-310-390 Nursing home bed need adjustments. (1) The department shall use the procedures described in this section to make adjustments to planning area net bed need.

(2) For planning areas for which a nursing home review is scheduled or is ongoing, the department shall use the following procedures to adjust a planning area's net bed need between April tenth or the first working day thereafter and the last working day in January of the following year.

(a) Where an increase in the bed supply of a planning area results in a reduction in net bed need, the department shall use the following procedures:

(i) When a reduction in net bed need occurs prior to the date of beginning of review for the applicable concurrent review cycle, the department shall:

(A) Inform, in writing, all persons from whom the department has received an application and/or a valid letter of intent of the reduction; and

(B) Explain the procedures for withdrawing or amending a certificate of need application.

(ii) When a reduction in net bed need occurs after the date of beginning of review for the applicable concurrent review cycle, the department shall use the need projected at the time the review began in reaching a decision on each affected application.

(b) Where a decrease in the bed supply of a planning area results in the increase in net bed need, the department shall:

(i) Use the following policies:

(A) If such a decrease in the bed supply would make a planning area under-bedded, the department shall:

(I) Assign to the planning area only enough beds for the planning area to reach the target ratio in the projection year, but not to exceed the number of beds which closed; and

(II) Redistribute any remaining beds to planning areas state-wide through the next scheduled recalculation of baseline projections for all planning areas.

(B) If such decrease in the bed supply would not make a planning area under-bedded, the department shall redistribute any remaining beds to planning areas state-wide through the next scheduled recalculation of baseline projections for all planning areas.

(ii) Subject to the provisions of (b)(i) of this subsection, use the following procedures:

(A) When an increase in net bed need can be made prior to the last day on which the department can accept amendments to applications under review, the department shall:

(I) Notify all affected applicants in writing; and

(II) Explain to each affected applicant the procedures for amending a certificate of need application.

(B) When an increase cannot be made prior to the last day on which the department can accept amendments to applications under review, the department shall include the increased net bed need in any subsequent decisions on each affected application or the next applicable concurrent review cycle, whichever occurs first.

(3) For planning areas for which a nursing home review is not scheduled or ongoing, the department shall use the following procedures to adjust a planning area's net bed need between April tenth or the first working day thereafter and the last working day in January of the following year:

(a) If a decrease in the bed supply would make a planning area under-bedded, the department shall:

(i) Assign to the planning area only enough beds for the planning area to reach the target ratio in the projection year; and

(ii) Redistribute any remaining beds to planning areas state-wide through the next scheduled recalculation of baseline projections for all planning areas.

(b) If such decrease in the bed supply would not make a planning area under-bedded, the department shall redistribute any remaining beds to planning areas state-wide through the next scheduled recalculation of baseline projections for all planning areas.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-390, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-12-072 (Order 063), § 248-19-811, filed 6/1/90, effective 7/1/90.]

WAC 246-310-400 AIDS long-term care pilot facility review standards. (1) Until an AIDS long-term

care pilot facility has received a license to operate as a nursing home in this state, the department shall apply the standards in this section and those in WAC 246-310-380 in the review of applications for an AIDS long-term care pilot facility.

(2) The department shall use the standards in this subsection to interpret the certificate of need review criteria contained in WAC 246-310-210.

(a) Applicants for a certificate of need shall propose a facility to be:

(i) Licensed for not more than thirty-five nursing home beds;

(ii) Located in the King County nursing home planning area;

(iii) Located in reasonable proximity to:

(A) A hospital;

(B) An outpatient radiology service; and

(C) An outpatient laboratory service; and

(iv) Operated with admissions policies which select patients with the following characteristics:

(A) Rapidly fluctuating care needs including at least some period of needing skilled nursing care;

(B) Do not need acute hospitalization; and

(C) Need some level of twenty-four hour care, but cannot live at home.

(v) Designated to provide a residential environment supporting people in living at the maximum level of independence possible.

(b) Applicants for a certificate of need shall:

(i) Make a commitment of at least five years to maintaining the facility as described in the application; and

(ii) Admit patients with fluctuating care needs similar to those with AIDS.

(3) The department, in interpreting the certificate of need review criteria contained in WAC 246-310-220, shall give preference to those applicants that demonstrate substantial financial support from a combination of community, federal, and/or private foundation sources.

(4) The department shall use the standards in this subsection to interpret the certificate of need review criteria contained in WAC 246-310-230.

(a) Applicants for a certificate of need shall:

(i) Show how planning the facility includes input from community AIDS service organizations;

(ii) Show how they will integrate the facility's services with the services provided by other public and private AIDS services organizations; and

(iii) Document their experience in health care services delivery to patients with AIDS.

(b) Applicants for a certificate of need shall express their intent to develop a policy advisory board after the facility is in operation, to include representatives from the groups served by the facility.

(5) The department, in interpreting the certificate of need review criteria contained in WAC 246-310-240, shall require that applicants demonstrate their capability to evaluate the project and state their willingness to share the information with the assistant secretary for HIV/AIDS infectious diseases.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-400, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-400, filed

12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-12-072 (Order 063), § 248-19-840, filed 6/1/90, effective 7/1/90.]

WAC 246-310-410 Swing bed review standards. (1)

The department shall use the following rules, in addition to those under WAC 246-310-380 to interpret the certificate of need review criteria contained in WAC 246-310-210, 246-310-220, 246-310-230, and 246-310-240 for applications by hospitals proposing an increase in the number of designated swing beds.

(2) Swing beds are defined as up to the first five hospital beds, so designated by an eligible rural hospital, which are available to provide either acute care or long-term care nursing services as required.

(3) Hospitals proposing swing bed projects shall:

(a) Be located in geographic areas of the state defined by the United States Bureau of the Census as a nonstandardized metropolitan statistical area; and

(b) Have total licensed bed capacity not exceeding fifty.

(4) Hospitals shall demonstrate ability to meet minimum Medicare standards of care for rural hospital swing beds.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-410, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-410, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.919. 90-12-072 (Order 063), § 248-19-860, filed 6/1/90, effective 7/1/90.]

WAC 246-310-470 Review and action on health maintenance organization projects. (1) Undertakings requiring a certificate of need.

A certificate of need shall be required for any undertaking which, in accordance with WAC 246-310-020, is subject to the provisions of chapter 246-310 WAC, unless an exemption has been granted for such undertaking under the provisions of WAC 246-310-040.

(2) Required approval.

The secretary's designee shall issue a certificate of need for a proposed project if the certificate of need applicant for the proposed project is a health maintenance organization or a health care facility controlled (directly or indirectly) by a health maintenance organization and the department finds the proposed project meets the criteria set forth in WAC 246-310-210(6).

(3) Limitation on denials.

The secretary's designee shall not deny a certificate of need to a health maintenance organization or a health care facility controlled (directly or indirectly) by a health maintenance organization solely because a proposed project is not discussed in the applicable regional health plan, annual implementation plan, or state health plan.

(4) Sale, acquisition, or lease of facilities or equipment for which a certificate of need has been issued.

A health care facility (or portion thereof) or medical equipment for which a certificate of need has been issued under the provisions of this section shall not be sold or leased and a controlling interest in such facility or equipment or in a lease of the facility or equipment shall not be acquired unless an exemption or a certificate of need for such sale, lease, or acquisition has been granted by the secretary's designee.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-470, filed 12/23/91, effective 1/23/92. Statutory Authority:

RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-470, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-410, filed 2/28/86; 81-09-012 (Order 210), § 248-19-410, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-410, filed 11/30/79.]

WAC 246-310-480 Projects proposed for the correction of deficiencies. (1) For the purposes of this section, "correction of deficiencies" shall mean one or more of the following:

(a) Eliminating or preventing imminent safety hazards as defined by federal, state, or local fire, building, or life safety codes or regulations; or

(b) Complying with state licensing standards; or

(c) Complying with accreditation or certification standards which must be met to receive reimbursement under Titles XVIII or XIX of the Social Security Act.

(2) An application submitted for a project limited to the correction of deficiencies, as defined in subsection (1) of this section, shall be approved unless the department finds, after consultation with the appropriate regional health council, that:

(a) The facility or service with respect to which such capital expenditure is proposed is not needed; or

(b) The obligation of such capital expenditure is not consistent with the state health plan in effect.

(3) A determination a facility or service is not needed shall be made only if the department finds the facility or service has been identified in the state health plan as not being needed.

(4) An application submitted for the correction of deficiencies shall be reviewed under the expedited review process, in accordance with WAC 246-310-150, unless it qualifies for emergency review in accordance with WAC 246-310-140.

(5) An application reviewed under the provisions of this section shall be approved only to the extent the capital expenditure is needed for the correction of the deficiency.

(6) If the department finds any portion of the project or the project as a whole is not needed for the correction of deficiencies, such portion or entire project shall be reviewed in accordance with WAC 246-310-200, 246-310-210, 246-310-220, 246-310-230, and 246-310-240.

(7) If the department finds a proposed capital expenditure is needed to correct deficiencies, as defined in subsection (1) of this section, the criteria in WAC 246-310-210 shall not be applied to the consideration of the project.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-480, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-480, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-415, filed 2/28/86; 81-09-012 (Order 210), § 248-19-415, filed 4/9/81, effective 5/20/81.]

WAC 246-310-490 Written findings and actions on certificate of need applications. (1) Written findings.

(a) The findings of the department's review of a certificate of need application shall be stated in writing and include the basis for the decision of the secretary's designee as to whether a certificate of need is to be issued or denied for the proposed project.

(b) In making its findings and taking action on a certificate of need application, the department shall use all

criteria contained in chapter 246-310 WAC applicable to the proposed project.

(i) The written findings shall identify any criterion the department has decided is not applicable to the particular project and give the reason for such decision.

(ii) The secretary's designee may deny a certificate of need if the applicant has not provided the information which is necessary to a determination that the project meets all applicable criteria and which the department has prescribed and published as necessary to a certificate of need review of the type proposed: *Provided however*, That the department has requested such information in a screening letter sent in accordance with WAC 246-310-090 (1)(c).

(c) The department shall make written findings on the extent to which the project meets the criteria set forth in WAC 246-310-210 (1) and (2) when the secretary's designee issues a certificate of need directly related to the provision of health services, beds, or major medical equipment: *Provided however*, That no such written finding shall be necessary for projects for the correction of deficiencies of the types described in WAC 246-310-480 and for projects proposed by or on behalf of a health maintenance organization or a health care facility controlled, directly or indirectly, by a health maintenance organization.

(d) When, as a part of concurrent review proceedings, the secretary's designee makes a decision to approve an application or applications and to disapprove other competing applications, he or she shall provide a specific written statement of reasons for determining the approved application or applications to be superior.

(2) Separability of application and action.

When a certificate of need application is for multiple services or multiple components or the proposed project is to be multiphased, the secretary's designee may take individual and different action on separable portions of the proposed project.

(3) Conditional certificate of need.

(a) The secretary's designee in making his or her decision on a certificate of need application may decide to issue a conditional certificate of need if the department finds the project is justified only under specific circumstances: *Provided however*, That conditions shall relate directly to the project being reviewed and to review criteria.

(b) When the department finds a project for which a certificate of need is to be issued does not satisfy the review criteria set forth in WAC 246-310-210 (1) and (2), the secretary's designee may impose a condition or conditions that the applicant take affirmative steps so as to satisfy those review criteria. In evaluating the accessibility of the project, the current accessibility of the facility as a whole shall be taken into consideration.

(c) The conditions attached to a certificate of need may be released by the secretary's designee upon the request of the health care facility or health maintenance organization for which the certificate of need was issued.

(i) The request must include information needed by the department demonstrating the conditions are no longer valid and the release of such conditions would be consistent with the purpose of chapter 70.38 RCW.

(ii) A request for the removal of a condition must be submitted in accordance with WAC 246-310-090 and will be

reviewed in accordance with the regular or expedited review procedures described in WAC 246-310-160 or 246-310-150.

(4) Distribution of written findings and statement of decision.

(a) A copy of the department's written findings and statement of the decision of the secretary's designee on a certificate of need application shall be sent to:

(i) The person submitting the certificate of need application;

(ii) The regional health council for the health service area in which the proposed project is to be located;

(iii) The hospital commission, if the proposed project is for a hospital;

(iv) In the case of a project proposed by a health maintenance organization, the appropriate regional office of the United States Department of Health and Human Services; and

(v) When the secretary's designee issues a certificate of need for a project which does not satisfy the review criteria set forth in WAC 246-310-210 (1) and (2), the appropriate regional office of the Department of Health and Human Services.

(b) The written findings and statement of the decision of the secretary's designee on a certificate of need application shall be available to others requesting the certificate of need unit to provide access to a copy of such findings and statement.

(5) Explanation of inconsistency with the regional health council recommendation or plan.

The department shall send to the applicant and to the appropriate regional health council a detailed, written statement as to the reasons why a decision the secretary has made on a certificate of need application is inconsistent with any of the following:

(a) The regional health council's recommendation as to the action to be taken on the certificate of need application;

(b) The goals and policies of the applicable regional health plan; or

(c) The priorities of the applicable annual implementation plan.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-490, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-490, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-420, filed 2/28/86; 81-09-012 (Order 210), § 248-19-420, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-420, filed 11/30/79.]

WAC 246-310-500 Issuance, suspension, denial, revocation, and transfer of a certificate of need. (1) The secretary's designee shall issue a certificate of need to the applicant.

(a) The secretary's designee shall issue a certificate of need for:

(i) The proposed project, or

(ii) A separable portion of the proposed project.

(b) When the certificate of need is issued for a separable portion of the proposed project, the secretary's designee shall provide written notice to the applicant stating the reasons for the department's action.

(c) The secretary's designee shall issue a certificate of need only when the department finds that the project or the

separable portion of the proposed project is consistent with the applicable criteria contained in chapter 246-310 WAC.

(d) In issuing a certificate of need, the secretary's designee shall:

(i) Specify the maximum capital expenditure which may be obligated under the certificate, and

(ii) Prescribe the cost components to be included in determining the capital expenditure which may be obligated under such certificate.

(2) The secretary's designee may issue a conditional certificate of need for a proposed project or a separable portion of the proposed project.

(a) The conditions attached to a certificate of need must directly relate to the project being reviewed.

(b) The conditions must directly relate to criteria contained in chapter 246-310 WAC.

(3) The department shall apply the following provisions when suspending a certificate of need.

(a) The secretary's designee may suspend a certificate of need for cause which shall include, but not be limited to:

(i) Suspicion of fraud,

(ii) Misrepresentation,

(iii) False statements,

(iv) Misleading statements,

(v) Evasion or suppression of material fact in the application for a certificate of need or any of its supporting materials.

(b) The secretary's designee shall issue an order which states the reason for any suspension of a certificate of need to the person to whom the certificate of need had been issued.

(c) A suspension of a certificate of need shall not exceed one hundred twenty calendar days.

(i) Prior to the expiration of the suspension the department shall:

(A) Review the facts and circumstances relevant to the suspension;

(B) Reinstate, amend, or revoke the certificate of need; and,

(ii) Send written notice of its decision on a suspended certificate of need to the person to whom the certificate of need had been issued.

(4) The secretary's designee shall send written notification of denial of a certificate of need to the applicant submitting the certificate of need application stating the reasons for the denial.

(5) When a proposed project or separable portion of the proposed project is denied a certificate of need, the department shall not accept another certificate of need application for the same project or separable portion unless the department determines:

(a) There is a substantial change in existing or proposed health facilities or services in the area to be served by the project; or

(b) There is a substantial change in the need for the facilities or services of the type proposed in the area to be served by the project; or

(c) One year has lapsed since the submission of the application for the certificate of need subject to regular review which was denied or the next scheduled concurrent review cycle permits the submission of applications.

(6) The department shall apply the following provisions in the revocation of a certificate of need.

(a) The secretary's designee may revoke a certificate of need for cause which shall include the following:

(i) Fraud,

(ii) Misrepresentation,

(iii) False statements,

(iv) Misleading statements, and

(v) Evasion or suppression of material facts in the application of a certificate of need, or in any of its supporting materials.

(b) When the secretary's designee revokes a certificate of need, the secretary's designee shall provide written notice of revocation to the person to whom the certificate of need was issued, including a statement of the reasons for such revocation.

(7) The department shall apply the following procedures in transferring or assigning a certificate of need.

(a) The department shall consider a request to transfer or assign a certificate of need valid only when:

(i) The person to whom the certificate of need was originally issued, or personal representative, where the holder is deceased, submits to the department a written request that the certificate of need be transferred to another person and gives the full name and complete address of the other person; and

(ii) The person to whom the current holder of the certificate of need wishes to transfer the certificate sends an application for such transfer on a form and in such a manner as prescribed and published by the department.

(b) The department shall review applications for transfer or assignment of a certificate of need according to the:

(i) Expedited review procedures in WAC 246-310-150; or

(ii) Regular review procedures in WAC 246-310-160.

(c) The secretary's designee shall base his or her decision to approve or deny an application to transfer or assign a certificate of need on:

(i) The demonstrated ability of the person wishing to acquire the certificate of need to undertake, complete, and operate the project in accordance with the following review criteria:

(A) WAC 246-310-220 (1) and (3), and

(B) WAC 246-310-230 (1), (3), and (5).

(ii) The continuing conformance of the project with all other applicable review criteria.

(d) When the person submitting an application to transfer or assign a certificate of need proposes to modify the project description or the maximum capital expenditure, the department shall inform in writing such person that a new or amended certificate of need is required.

(e) When the department denies an application for transfer or assignment of a certificate of need, the department shall inform in writing the person who submitted the application of the reasons for such denial.

(f) The department shall not transfer or assign any certificate of need issued after February 1, 1988, except when:

(i) Prior to completion of the project, death or divorce of one or more persons holding a certificate renders it impossible or impractical to complete the project in the absence of a transfer or assignment; or

(ii) After commencement, a substantial portion of the project has been completed by the original holder of the certificate.

(g) The department shall not transfer or assign a certificate of need under subsections (7)(f)(i) and (ii) of this section when the authorized project is to be relocated.

(h) When the department transfers a certificate of need for a project which has not been commenced, the transferred certificate of need shall have a validity period of two years from the date of issue with the provision for one six-month extension if the holder can demonstrate to the satisfaction of the secretary's designee that substantial and continuing progress towards commencement has been made.

(8) When the secretary's designee fails to issue or deny a certificate of need, the applicant may seek a writ of mandamus from superior court pursuant to chapter 7.16 RCW.

[Statutory Authority: RCW 70.38.135. 91-05-093 (Order 143), § 246-310-500, filed 2/20/91, effective 3/23/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-500, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.115. 89-02-040 (Order 2745), § 248-19-440, filed 12/30/88. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-440, filed 2/28/86; 81-09-012 (Order 210), § 248-19-440, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-440, filed 11/30/79.]

WAC 246-310-560 Provision for reconsideration decision. (1) Any person or affected person may, for good cause shown, request a public hearing for the purpose of reconsideration of the decision of the secretary's designee on a certificate of need application or withdrawal of a certificate of need.¹

(2) The department shall conduct a reconsideration hearing if it finds the request is in accord with the following requirements:

(a) The request for a reconsideration hearing shall be written, be received by the department within thirty days of the department's decision on the certificate of need application or withdrawal of the certificate of need, state in detail the grounds which the person requesting the hearing believes to show good cause, and be signed by the person making the request.

(b) Grounds which the department may deem to show good cause for a reconsideration hearing shall include but not be limited to the following:

(i) Significant relevant information not previously considered by the department which, with reasonable diligence, could not have been presented before the department made its decision;

(ii) Information on significant changes in factors or circumstances relied upon by the department in making its findings and decision; or

(iii) Evidence the department materially failed to follow adopted procedures in reaching a decision.

(3) A reconsideration hearing shall commence within thirty days after receipt of the request for the hearing.

(4) Notification of a public reconsideration hearing on a certificate of need application or withdrawal of a certificate of need shall be sent prior to the date of such hearing by the department to the following:

(a) The person requesting the reconsideration hearing;

(b) The person submitting the certificate of need application which is under reconsideration or the holder of the certificate of need;

(c) The regional health council for the health service area in which the proposed project is to be offered or developed;

(d) The hospital commission, if the proposed project is a hospital project;

(e) Health care facilities and health maintenance organizations located in the health service area where the project is proposed to be located providing services similar to the services under review;

(f) In the case of a concurrent review, other applicants competing as described in WAC 246-310-080; and to

(g) Other persons requesting the department to send them such notification.

(5) The department shall, within forty-five days after the conclusion of a reconsideration hearing, make written findings stating the basis of the decision made after such hearing.

(6) The secretary's designee may, upon the basis of the department's findings on a reconsideration hearing, issue or reissue, amend, revoke, or withdraw a certificate of need or impose or modify conditions on a certificate of need for the project about which the reconsideration hearing was conducted.

Note: ¹No fee will be charged for a reconsideration hearing.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-560, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-560, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-430, filed 2/28/86; 81-09-012 (Order 210), § 248-19-430, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-430, filed 11/30/79.]

WAC 246-310-570 Circumstances for which an amended certificate of need is required. (1) An amended certificate of need shall be required for any of the following modifications of a project for which a certificate of need was issued:

(a) An addition of a new service;

(b) An expansion of a service beyond that which was included in the certificate of need application on which the issuance of the certificate of need was based;

(c) An increase in the inpatient bed capacity; or

(d) A significant reduction in the scope of a project for which a certificate of need has been issued without a commensurate reduction in the cost of the project, or the project cost increases (as represented in bids on a construction project or final cost estimate or estimates acceptable to the person to whom the certificate of need was issued) when the total of such increases exceeds twelve percent or fifty thousand dollars, whichever is greater, over the maximum capital expenditure specified by the secretary's designee in issuing the certificate of need: *Provided however*, That the review of such reductions or cost increases shall be restricted to the continued conformance of the project with the criteria contained in WAC 246-310-220 and 246-310-240.

(2) An application for an amended certificate of need shall be submitted in accordance with the provisions of WAC 246-310-090.

(3) An application for an amended certificate of need may be reviewed under the expedited review process set forth in WAC 246-310-150.

(4) The department shall, after consultation with the appropriate advisory review agencies, provide a written determination as to the requirement for an amended certificate of need within twenty-one days after receipt of a request for such determination.

[Statutory Authority: RCW 70.38.135 and 70.38.919, 92-02-018 (Order 224), § 246-310-570, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-310-570, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135, 86-06-030 (Order 2344), § 248-19-450, filed 2/28/86; 81-09-012 (Order 210), § 248-19-450, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW, 79-12-079 (Order 188), § 248-19-450, filed 11/30/79.]

WAC 246-310-580 Validity and extensions. (1) A certificate of need shall be valid for two years: *Provided*, That one six-month extension may be made if it can be substantiated that substantial and continuing progress toward commencement of the project has been made.

(2) In the case of a project involving construction, substantial and continuing progress shall include one of the following:

(a) When review and approval by the department of the final plans for construction is required, the submission of working drawings;

(b) When plan approval is not required by the department, receipt of copies of the working drawings for construction.

(3) A project for which a certificate of need has been issued shall be commenced during the validity period for the certificate of need.

(4) Applications for extensions of the validity period of certificates of need shall be submitted simultaneously to the department and the appropriate advisory review agencies, at least one hundred twenty calendar days before the expiration of the certificate of need, and shall contain such information as may be required by the department to determine the extent of progress toward commencement of construction or other action necessary to a project.

(5) An application for an extension of a certificate of need submitted less than one hundred twenty calendar days before the expiration of the certificate of need shall not be reviewed, unless the applicant can demonstrate to the satisfaction of the department unforeseen occurrences during the last one hundred twenty days of the validity period of the certificate of need prevented commencement of construction as previously anticipated by the applicant.

(6) Commencement of the project shall not be undertaken after the expiration of the certificate of need unless a new certificate of need application has been reviewed and a new certificate of need has been issued by the secretary's designee.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-310-580, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135, 86-06-030 (Order 2344), § 248-19-460, filed 2/28/86. Statutory Authority: Chapter 70.38 RCW, 79-12-079 (Order 188), § 248-19-460, filed 11/30/79.]

WAC 246-310-590 Monitoring of approved projects. (1) The department, in cooperation with the advisory

review agencies, shall monitor the costs and components of approved projects so as to assure conformance with certificates of need that have been issued.

(2) The department shall require periodic progress reports from those applicants to whom certificates of need have been issued.

(a) Progress reports shall be required at least annually and at no greater frequency than quarterly.

(b) Progress reports shall be submitted in the form and manner prescribed and published by the department.

(3) Information required on approved projects may include:

(a) Actual project costs;

(b) Changes in the project;

(c) Financing arrangements, different than approved under the certificate of need;

(d) Project commencement date;

(e) Progress toward completion of construction; and

(f) Project completion date.

(4) The information required on approved projects may vary according to the nature of the projects.

(5) Progress reports on a project for which a particular certificate of need has been issued shall terminate when the project has been completed and the department finds it has received all the information necessary to determine the project has been completed in accordance with the certificate of need which had been issued and the provisions of chapter 246-310 WAC.

[Statutory Authority: RCW 70.38.135 and 70.38.919, 92-02-018 (Order 224), § 246-310-590, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-310-590, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135, 86-06-030 (Order 2344), § 248-19-470, filed 2/28/86. Statutory Authority: Chapter 70.38 RCW, 79-12-079 (Order 188), § 248-19-470, filed 11/30/79.]

WAC 246-310-600 Withdrawal of a certificate of need. (1) The secretary's designee may withdraw a certificate of need if the department determines, after consultation with the appropriate advisory review agencies, that the holder of a certificate is not meeting the timetable specified in the certificate of need application for making services or equipment available or completing the project and is not making a good-faith effort to meet such timetable.

(2) In reviewing a proposed withdrawal of a certificate of need, the department shall adhere to the provisions of WAC 246-310-170, 246-310-180, 246-310-190, and 246-310-560.

(3) The review period for a proposed withdrawal of a certificate of need shall not exceed ninety days unless extended by the department to allow sufficient time for the conduct of a public hearing pursuant to the provisions of WAC 246-310-180. The review period of the appropriate advisory review agencies shall not exceed sixty days unless extended by the department at the written request of the regional health council to allow sufficient time for the conduct of a public hearing pursuant to the provisions of WAC 246-310-180. Such extension shall not exceed thirty days.

(4) The findings of the department's review of a proposed withdrawal of a certificate of need shall be stated in writing and include the basis for the decision of the secretary's designee as to whether the certificate of need is

to be withdrawn for a proposed project. A copy of the department's written findings and statement of the decision of the secretary's designee on the proposed withdrawal of a certificate of need shall be sent to:

- (a) The holder of the certificate of need;
 - (b) The regional health council for the health service area in which the proposed project is to be located;
 - (c) The hospital commission, if the proposed project is for a hospital; and
 - (d) In the case of a project proposed by a health maintenance organization, the appropriate regional office of the United States Department of Health and Human Services.
- (5) The written findings and statement of the decision of the secretary's designee on the proposed withdrawal of a certificate of need shall be available to others requesting the certificate of need unit to provide access to a copy of such findings and statement.

(6) The department shall send to the appropriate regional health council a detailed, written statement as to the reasons why a decision which the secretary's designee has made is inconsistent with any of the following:

- (a) The regional health council's recommendation as to the action to be taken;
- (b) The goals of the applicable regional health plan; or
- (c) The priorities of the applicable annual implementation plan.

(7) When a certificate of need is for multiple services or multiple components or the proposed project is to be multiphased, the secretary's designee may take individual and different action regarding withdrawal of the certificate of need on separable portions of the certificate of need.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-600, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-600, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-475, filed 2/28/86; 81-09-012 (Order 210), § 248-19-475, filed 4/9/81, effective 5/20/81.]

WAC 246-310-610 Adjudicative proceeding. (1) An applicant denied a certificate of need or a certificate holder whose certificate was suspended or revoked has the right to an adjudicative proceeding.

(2) A certificate applicant or holder contesting a department certificate decision shall within twenty-eight days of receipt of the decision:

- (a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and
- (b) Include in or with the application:
 - (i) A specific statement of the issue or issues and law involved;
 - (ii) The grounds for contesting the department decision; and
 - (iii) A copy of the contested department decision.

(3) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-610, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-610, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a), 70.38.135 and 1989 1st ex.s. c 9 § 607. 90-06-019 (Order 039), § 248-19-480, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.38.135. 86-06-030 (Order 2344), § 248-19-480, filed 2/28/86; 82-19-055 (Order 244), § 248-19-480, filed 9/15/82; 81-09-012 (Order 210), § 248-19-480, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-480, filed 11/30/79.]

WAC 246-310-620 Certificate of need program reports. (1) The department shall prepare and publish annual reports containing information on certificate of need reviews in progress, reviews completed in the preceding twelve month period, and a general statement of the findings and decisions made in the course of those reviews.

(2) Upon request, the department shall provide notification to health care facilities and to other persons of the status of the department's review of projects subject to review and the findings made in the course of such review.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-620, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 81-09-012 (Order 210), § 248-19-490, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-490, filed 11/30/79.]

WAC 246-310-630 Public access to records. The general public shall have access in accordance with the provisions of chapter 42.17 RCW to all applications reviewed by the department and to all other written materials essential to any review by the department pursuant to the provisions of chapter 246-310 WAC.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-630, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-630, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.38.135. 81-09-012 (Order 210), § 248-19-500, filed 4/9/81, effective 5/20/81. Statutory Authority: Chapter 70.38 RCW. 79-12-079 (Order 188), § 248-19-500, filed 11/30/79.]

WAC 246-310-900 Capital expenditure minimum adjustment procedures. These rules and regulations are adopted pursuant to RCW 70.38.025 (6) and (12) for the purpose of establishing the index to be used and procedures for making adjustments to the "expenditure minimum" for capital expenditures and to the annual operating costs for new "institutional health services" which are subject to the requirements of the certificate of need program established under the provisions of chapter 70.38 RCW.

(1) Index to be used. For the purposes of the certificate of need program, the United States Department of Commerce Composite Construction Cost Index shall be used in the annual adjustments of the following:

(a) The "expenditure minimum" as this term is defined in RCW 70.38.025 and WAC 246-310-010; and

(b) The minimum annual operating costs entailed in the provision of new "institutional health services," as this term is defined in RCW 70.38.025 and WAC 246-310-010, which will cause a new institutional health service to be subject to the provisions of chapter 246-310 WAC, the certificate of need rules and regulations.

(2) Procedure for adjustment.

(a) On or before the first day of each January, the department shall adjust and publish the adjusted expenditure minimum for capital expenditures and the adjusted minimum annual operating costs for institutional health services. Such adjusted minimums shall be in effect during the entire calendar year for which they are established.

(b) The adjustments in the minimums shall be based on the changes which occurred in the Department of Commerce Composite Construction Cost Index during the twelve month period ending the preceding October.

(c) The adjusted minimums shall be published by the department by public notice in one or more newspapers of general circulation within the state and through a written notice sent to each health systems agency, the hospital commission, each health care facility subject to the requirements of the certificate of need program, each statewide organization of such health care facilities, and the state health coordinating council.

[Statutory Authority: RCW 70.38.135 and 70.38.919. 92-02-018 (Order 224), § 246-310-900, filed 12/23/91, effective 1/23/92.]

WAC 246-310-990 Certificate of need review fees.

(1) An application for a certificate of need under chapter 246-310 WAC shall include payment of a fee consisting of the following:

(a) An application processing fee in the amount of seven hundred fifty dollars which shall not be refundable;

(b) A review fee based on the project description and the total capital expenditure.

Project Description	Capital Expenditure Range	Review Fee
Additional kidney disease treatment center stations	\$ 0 - \$100,000 100,001 - 250,000 250,001 or more	\$ 4,300 5,700 7,600
Administrative or emergency review	0 - 250,000 250,001 or more	5,400 8,100
Amendment to a certificate of need		5,000
Bed addition of less than 10 beds	0 - 100,000 100,001 - 5,000,000 5,000,001 or more	4,300 5,700 7,600
Bed addition of 10 beds or more	0 - 500,000 500,001 - 5,000,000 5,000,001 or more	8,100 11,900 15,700
Bed redistribution or bed relocation	0 - 100,000 100,001 - 2,000,000 2,000,001 or more	7,000 10,600 13,200
Capital expenditure over the minimum expenditure	Exp. min. - 5,000,000 5,000,001 - 10,000,000 10,000,001 or more	7,600 9,600 13,600
Establishment of a new hospital, nursing home, or continuing care retirement community	0 - 2,000,000 2,000,001 or more	10,600 15,700
Establishment of a new home health agency, hospice, ambulatory surgery facility, or kidney disease treatment center	0 1 - 100,000 100,001 or more	3,700 5,700 7,600

Extension of the certificate of need validity period (projects involving plans review by construction review unit)		150
Extension of the certificate of need validity period (other projects)		900
Replacement of an existing health care facility	1 - 2,000,000 2,000,001 - 5,000,000 5,000,001 or more	5,400 8,100 9,600
Sale, purchase, or lease of part or all of an existing hospital	1 - 5,000,000 5,000,001 or more	7,600 11,500
Substantial change in services, or offering a new tertiary health service	0 - 100,000 100,001 - 2,000,000 2,000,001 or more	8,100 10,600 15,700
Transfer of a certificate of need		2,700

(c) A nonrefundable two thousand dollar actuarial review fee surcharge for an application sponsored by an existing or proposed continuing care retirement community (CCRC) as defined in WAC 246-310-130 (3)(b).

(2) For purposes of subsection (1)(b) of this section, "total capital expenditure" means the total project costs to be capitalized according to generally accepted accounting principles consistently applied, and includes, but is not limited to, the following:

- (a) Legal fees;
- (b) Feasibility studies;
- (c) Site development;
- (d) Soil survey and investigation;
- (e) Consulting fees;
- (f) Interest expenses during construction;
- (g) Temporary relocation;
- (h) Architect and engineering fees;
- (i) Construction, renovation, or alteration;
- (j) Total costs of leases of capital assets;
- (k) Labor;
- (l) Materials;
- (m) Equipment;
- (n) Sales taxes;
- (o) Equipment delivery; and
- (p) Equipment installation.

(3) Where more than one project description under subsection (1)(b) of this section applies to an application, the applicant shall use the project description and capital expenditure range with the highest review fee in calculating the payment to accompany the application submittal.

(4) The applicant shall accompany the submittal of an amendment to a certificate of need application with a fee consisting of the following:

- (a) A nonrefundable processing fee of five hundred dollars;
- (b) When the amendment increases the capital expenditure, or results in a project description with a larger review fee, an additional review fee based on the difference between the review fee previously paid when the application was

submitted and the review fee applicable to the greater capital expenditure or new project description; and

(c) When the amendment decreases the capital expenditure, or results in a project description with a smaller review fee, the department shall refund to the applicant the difference between the review fee previously paid when the application was submitted and the review fee applicable to the smaller capital expenditure or new project description.

(5) When an application for a certificate of need is returned by the department in accordance with the provisions of WAC 246-310-090 (2)(b) or (e), the department shall refund all review fees paid.

(6) When an applicant submits a written request to withdraw an application before the beginning of review, the department shall refund any review fees paid by the applicant.

(7) When an applicant submits a written request to withdraw an application after the beginning of review, but before the beginning of the ex parte period as determined by the department consistent with WAC 246-310-190, the department shall refund one-half of all review fees paid.

(8) When an applicant submits a written request to withdraw an application after the beginning of the ex parte period as determined by the department consistent with WAC 246-310-190, the department shall not refund any of the review fees paid.

(9) Other certificate of need program fees are:

(a) A nonrefundable two hundred fifty dollar processing fee for each request for an exemption from certificate of need review submitted under the provisions of WAC 246-310-040; and

(b) A nonrefundable two hundred fifty dollar processing fee for each request for an exemption from certificate of need review submitted under the provisions of RCW 70.38.105 (4)(d).

[Statutory Authority: RCW 70.38.135, 43.70.250 and 70.38.919. 92-02-018 (Order 224), § 246-310-990, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-310-990, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.38 RCW. 90-15-001 (Order 070), § 440-44-030, filed 7/6/90, effective 8/6/90. Statutory Authority: RCW 43.20A.055. 89-21-042 (Order 2), § 440-44-030, filed 10/13/89, effective 11/13/89; 87-16-084 (Order 2519), § 440-44-030, filed 8/5/87; 87-12-049 (Order 2494), § 440-44-030, filed 6/1/87; 84-13-006 (Order 2109), § 440-44-030, filed 6/7/84; 83-21-015 (Order 2037), § 440-44-030, filed 10/6/83. Statutory Authority: 1982 c 201. 82-13-011 (Order 1825), § 440-44-030, filed 6/4/82.]

**Chapter 246-314 WAC
FACILITY CONSTRUCTION REVIEW**

WAC

246-314-001	Purpose.
246-314-010	Definitions.
246-314-990	Construction review fees.

WAC 246-314-001 Purpose. The purpose of this chapter is to establish fees for reviewing and approving health and residential care facility construction projects.

[Statutory Authority: RCW 43.70.110. 91-16-107 (Order 185), § 246-314-001, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-314-001, filed 12/27/90, effective 1/31/91.]

WAC 246-314-010 Definitions. (1) "Department" means the Washington state department of health.

(2) "Project" means a construction endeavor including new construction, replacement, alterations, additions, expansions, conversions, improvements, remodeling, renovating, and upgrading of the following types of facilities:

(a) "Adult residential rehabilitation center" as defined under chapters 71.12 RCW and 246-325 WAC;

(b) "Boarding homes" as defined under chapters 18.20 RCW and 246-316 WAC;

(c) "Maternity homes" and "childbirth centers" as defined under chapters 18.46 RCW and 246-329 WAC;

(d) "Nursing homes" as defined under chapters 18.51 RCW and 248-14 WAC;

(e) "Private psychiatric hospitals" as defined under chapters 71.12 RCW and 246-322 WAC;

(f) "Private alcoholism hospitals" as defined under chapters 71.12 RCW and 246-324 WAC;

(g) "Private alcoholism treatment facilities" as defined under chapters 71.12 RCW and 246-326 WAC;

(h) "Residential treatment facilities for psychiatrically impaired children and youth" as defined under chapters 71.12 RCW and 246-323 WAC;

(i) "Hospitals" as defined under chapters 70.41 RCW and 246-318 WAC; and

(j) "Hospice care center" as defined under chapters 70.126 RCW and 246-321 WAC.

(3) "Project sponsor" means the person, persons or organization, planning and contracting for the design and construction of facilities, generally the owner or the owner's representative.

(4) "Project cost" means all costs, except taxes, directly associated with the project, initially estimated and corrected by certification to the date of completion of the project and including:

(a) All architectural-engineering designs, plans, drawings, and specifications;

(b) All fixed and installed equipment in the project; and

(c) Contractor supervision, inspection, and overhead.

[Statutory Authority: RCW 43.70.110. 91-16-107 (Order 185), § 246-314-010, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-314-010, filed 12/27/90, effective 1/31/91.]

WAC 246-314-990 Construction review fees. (1)

The project sponsor shall submit to the department:

(a) A completed project review application form along with project documents for review; and

(b) The appropriate fee based upon the initial project construction cost as determined from the following construction fee table:

CONSTRUCTION FEE TABLE

Project Cost		Project Review Fee
\$	0 to \$	999 \$ 120
	1,000 to	1,999 250
	2,000 to	2,999 320
	3,000 to	4,999 400
	5,000 to	9,999 520
	10,000 to	19,999 650
	20,000 to	29,999 800
	30,000 to	39,999 950
	40,000 to	49,999 1,100
	50,000 to	64,999 1,300
	65,000 to	79,999 1,500

80,000	to	99,999	1,800
100,000	to	124,999	2,150
125,000	to	149,999	2,500
150,000	to	199,999	2,900
200,000	to	249,999	3,250
250,000	to	324,999	3,575
325,000	to	449,999	4,000
450,000	to	574,999	4,500
575,000	to	699,999	5,100
700,000	to	849,999	5,700
850,000	to	999,999	6,400
1,000,000	to	1,249,999	7,000
1,250,000	to	2,499,999	7,700
2,500,000	to	2,999,999	8,400
3,000,000	to	3,499,999	9,100
3,500,000	to	4,999,999	10,500
5,000,000	to	6,999,999	11,900
7,000,000	to	9,999,999	13,500
10,000,000	to	14,999,999	15,500
15,000,000	to	19,999,999	17,500
20,000,000	to	29,999,999	19,500
30,000,000	to	39,999,999	22,500
40,000,000	to	59,999,999	25,000
60,000,000	and over		28,000

(2) The department shall charge a flat fee of eighty dollars for a project involving installation of carpet only.

(3) The project sponsor may request a reduction in the project review fee for fixed or installed technologically advanced diagnostic or treatment equipment projects including lithotripters, CT scans, linear accelerators, or MRI's.

(4) The department may adjust the project review fee if:

(a) The final project cost changes as evidenced on the certificate of project completion card; or

(b) The project sponsor requests a reduction in the fee according to subsection (3) of this section.

[Statutory Authority: RCW 43.70.110. 91-16-107 (Order 185), § 246-314-990, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-314-990, filed 12/27/90, effective 1/31/91.]

**Chapter 246-316 WAC
BOARDING HOMES**

WAC

246-316-001	Legal authority of the department.
246-316-010	Definitions.
246-316-020	Boarding home license application—Department denial, suspension, revocation of license.
246-316-030	Change of licensee.
246-316-040	Requirement for and qualifications of boarding home administrator.
246-316-050	Staff and employees—Other persons living in boarding home.
246-316-060	HIV/AIDS education and training.
246-316-070	New construction—Modification of existing structure.
246-316-080	Communication system.
246-316-090	Water supply.
246-316-100	Sewage and liquid waste disposal.
246-316-110	Garbage and refuse disposal.
246-316-120	Lighting.
246-316-130	Heating—Temperature.
246-316-140	Ventilation.
246-316-150	Resident room—Room furnishings—Storage.
246-316-160	Toilet and bathing facilities.
246-316-170	Food and nutrition services.
246-316-180	Day rooms.
246-316-190	Laundry.
246-316-200	Storage space.
246-316-210	Stairs—Ramps.
246-316-220	Guardrails, handrails.
246-316-230	Maintenance and housekeeping.

246-316-240	Admission, placement and retention of residents.
246-316-250	Boarding home resident rights.
246-316-260	Boarding home resident services.
246-316-270	First aid services.
246-316-280	Notification regarding serious or significant change in resident's condition.
246-316-290	Safety measures.
246-316-300	Medication services.
246-316-310	Resident register.
246-316-320	Resident health record.
246-316-330	Adult day care.
246-316-340	Exemptions.
246-316-990	Fees.

WAC 246-316-001 Legal authority of the department. See RCW 18.20.090.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-001, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-16-999, filed 3/20/86; Regulation .16.999, effective 3/11/60.]

WAC 246-316-010 Definitions. For the purposes of these regulations, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise.

(1) "Abuse" means the injury, sexual use or sexual mistreatment of an individual resident by any person under circumstances which indicate the health, welfare, and safety of the resident is harmed thereby. Abuse includes emotional, as well as physical, abuse.

(a) "Physical abuse" means damaging or potentially damaging nonaccidental acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal or nonverbal actions which constitute harassment.

(2) "Ambulatory" means physically and mentally capable of walking or traversing a normal path to safety, including the ascent and descent of stairs, without the physical assistance of another person.

(a) "Semi-ambulatory" means physically and mentally capable of traversing a normal path to safety with the use of mobility aids, but unable to ascend or descend stairs without the physical assistance of another person.

(b) "Nonambulatory" means physically or mentally unable to walk or traverse a normal path to safety without the physical assistance of another person.

(c) "Physical assistance" as used in subsection (2)(a) and (b) of this section means carrying, pushing, pulling, holding, or dragging a resident along a normal path to safety.

(3) "Area," except when used in reference to a major section of a boarding home, means a portion of a room which contains the equipment essential to carry out a particular function and is separated from other facilities of the room by a physical barrier or adequate space.

(4) "Bathing facility" means a bathtub, shower or sit-down shower.

(5) "Bathroom" means a room containing at least one bathing facility.

(6) "Board" as used in RCW 18.20.020(2) means the provision of daily meal service and lodging.

(7) "Boarding home" means:

(a) A facility as defined in RCW 18.20.020(2) and in this chapter;

80,000	to	99,999	1,800
100,000	to	124,999	2,150
125,000	to	149,999	2,500
150,000	to	199,999	2,900
200,000	to	249,999	3,250
250,000	to	324,999	3,575
325,000	to	449,999	4,000
450,000	to	574,999	4,500
575,000	to	699,999	5,100
700,000	to	849,999	5,700
850,000	to	999,999	6,400
1,000,000	to	1,249,999	7,000
1,250,000	to	2,499,999	7,700
2,500,000	to	2,999,999	8,400
3,000,000	to	3,499,999	9,100
3,500,000	to	4,999,999	10,500
5,000,000	to	6,999,999	11,900
7,000,000	to	9,999,999	13,500
10,000,000	to	14,999,999	15,500
15,000,000	to	19,999,999	17,500
20,000,000	to	29,999,999	19,500
30,000,000	to	39,999,999	22,500
40,000,000	to	59,999,999	25,000
60,000,000	and over		28,000

(2) The department shall charge a flat fee of eighty dollars for a project involving installation of carpet only.

(3) The project sponsor may request a reduction in the project review fee for fixed or installed technologically advanced diagnostic or treatment equipment projects including lithotripters, CT scans, linear accelerators, or MRI's.

(4) The department may adjust the project review fee if:

(a) The final project cost changes as evidenced on the certificate of project completion card; or

(b) The project sponsor requests a reduction in the fee according to subsection (3) of this section.

[Statutory Authority: RCW 43.70.110. 91-16-107 (Order 185), § 246-314-990, filed 8/7/91, effective 9/7/91. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-314-990, filed 12/27/90, effective 1/31/91.]

**Chapter 246-316 WAC
BOARDING HOMES**

WAC

246-316-001	Legal authority of the department.
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246-316-070	New construction—Modification of existing structure.
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246-316-100	Sewage and liquid waste disposal.
246-316-110	Garbage and refuse disposal.
246-316-120	Lighting.
246-316-130	Heating—Temperature.
246-316-140	Ventilation.
246-316-150	Resident room—Room furnishings—Storage.
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246-316-170	Food and nutrition services.
246-316-180	Day rooms.
246-316-190	Laundry.
246-316-200	Storage space.
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246-316-310	Resident register.
246-316-320	Resident health record.
246-316-330	Adult day care.
246-316-340	Exemptions.
246-316-990	Fees.

WAC 246-316-001 Legal authority of the department. See RCW 18.20.090.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-001, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-16-999, filed 3/20/86; Regulation .16.999, effective 3/11/60.]

WAC 246-316-010 Definitions. For the purposes of these regulations, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise.

(1) "Abuse" means the injury, sexual use or sexual mistreatment of an individual resident by any person under circumstances which indicate the health, welfare, and safety of the resident is harmed thereby. Abuse includes emotional, as well as physical, abuse.

(a) "Physical abuse" means damaging or potentially damaging nonaccidental acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal or nonverbal actions which constitute harassment.

(2) "Ambulatory" means physically and mentally capable of walking or traversing a normal path to safety, including the ascent and descent of stairs, without the physical assistance of another person.

(a) "Semi-ambulatory" means physically and mentally capable of traversing a normal path to safety with the use of mobility aids, but unable to ascend or descend stairs without the physical assistance of another person.

(b) "Nonambulatory" means physically or mentally unable to walk or traverse a normal path to safety without the physical assistance of another person.

(c) "Physical assistance" as used in subsection (2)(a) and (b) of this section means carrying, pushing, pulling, holding, or dragging a resident along a normal path to safety.

(3) "Area," except when used in reference to a major section of a boarding home, means a portion of a room which contains the equipment essential to carry out a particular function and is separated from other facilities of the room by a physical barrier or adequate space.

(4) "Bathing facility" means a bathtub, shower or sit-down shower.

(5) "Bathroom" means a room containing at least one bathing facility.

(6) "Board" as used in RCW 18.20.020(2) means the provision of daily meal service and lodging.

(7) "Boarding home" means:

(a) A facility as defined in RCW 18.20.020(2) and in this chapter;

(b) The licensee or person granted a license by the department to operate a boarding home.

(8) "Department" means the Washington state department of health (DOH).

(9) "Dietitian" means an individual meeting the eligibility requirements for active membership in the American dietetic association described in *Directory of Dietetic Programs Accredited and Approved*, American Dietetic Association, edition 100, 1980.

(10) "Domiciliary care," as used in RCW 18.20.020 and this chapter, means the care offered an individual in his or her living accommodation which includes the assumption of a general responsibility for the safety and well-being of the individual and provision of assistance in the activities of daily living, as needed.

(11) "Facilities" means a room or area and/or equipment to serve a specific function.

(12) "Foot candle" means a measurement of light approximately equal to the light produced by a lighted candle at the distance one foot away from the candle.

(13) "Functional abilities" means the physical, mental, emotional and social abilities to cope with the affairs and activities of daily living.

(14) "Grade" means the level of the ground adjacent to the building measured at required windows with ground level or sloping downward for a distance of at least ten feet from the wall of the building.

(15) "Health care practitioner" means any individual, group or organization providing health care as authorized by Washington state law, including, but not limited to, physician, chiropractor, naturopath, certified registered nurse, physician's assistant.

(16) "Home health care agency" means any nursing or other service provided by licensed nurses, other practitioners or aides on a periodic or short-term basis excluding continuous nursing care.

(17) "Infirmity," as used in RCW 18.20.020 and this chapter, means a disability which materially limits normal activity without causing an individual to need inpatient medical or nursing care of a type provided by institutions licensed under the provisions of chapters 18.46, 18.51, 70.41 or 71.12 RCW. An infirmity may be based on conditions including, but not limited to, physical handicap, mental illness, developmental disability, chemical addiction or habituation or mental confusion, disability or disturbance.

(18) "Lavatory" means a plumbing fixture designed and equipped to serve for handwashing purposes.

(19) "May" means to permit, at the discretion of the department.

(20) "Medication" means all pharmaceuticals, vitamins, and nutrient supplements, both over-the-counter and prescribed.

(21) "Medication administration" means an act in which a single dose of a medication is given to a resident by an authorized person, other than the resident, under laws and regulations governing such acts and entailing:

(a) Removing an individual dose from a previously dispensed, properly labeled container;

(b) Reviewing the label on the container with prescriber's order or with a direct copy of a verified transcription of the order;

(c) Giving an individual dose to the proper resident; and

(d) Properly recording the time and dose given.

(22) "Minor alteration" means:

(a) Physical or functional modification in a boarding home without changing department-approved use of the modified room or area; and

(b) Prior department review of the plan specified in WAC 246-316-070 is not required.

(23) "Neglect" means negligent treatment or maltreatment; an act or omission which evinces a disregard of consequences of such a magnitude as to constitute a clear and present danger to a resident's health, welfare, and/or safety.

(24) "New construction" means:

(a) Constructing or building a new physical plant or facility to be used as a boarding home;

(b) Additions to an existing facility or physical plant constructed for intended use as part of a boarding home;

(c) A physical alteration, modification, or renovation changing department-approved use of a room or area excluding "minor alteration."

(25) "Nurse" means either a licensed practical nurse under provisions of chapter 18.78 RCW or a registered nurse.

(26) "Nursing care" means services:

(a) Designed to maintain or promote achievement of optimal, independent function, and health status; and

(b) Planned, supervised, and evaluated by a registered nurse in the context of an overall individual plan of care as in WAC 248-14-001.

(27) "Physician" or "doctor," as used in RCW 18.20.160 and in this chapter, means an individual licensed as a physician under chapters 18.57 or 18.71 RCW.

(28) "Prescriber" means a physician, dentist under chapter 18.32 RCW, or registered nurse with prescriptive authority or others legally authorized in Washington state to prescribe drugs.

(29) "Registered nurse" means an individual licensed under chapter 18.88 RCW.

(30) "Resident" means an individual who, by reason of age or infirmity, requires domiciliary care and who is not related by blood or marriage to the operator of the boarding home.

(31) "Room" means a space set apart by floor to ceiling partitions on all sides with all openings provided with doors or windows.

(32) "Self-administration of medication" means medication administration by a resident taking his or her own medication from a properly labeled container.

(33) "Sit-down shower" means a shower which has a molded seat, fold-down type of seat, or an equivalent means for sitting and is designed for bathing while in a sitting position.

(34) "Suitable chair" means a piece of furniture intended to accommodate the act of sitting which is sturdy, comfortable, and appropriate for the age and physical condition of a resident.

(35) "Supervised medication service Category A" means:

(a) A level of self-medication or self-administration; or

(b) Self-directed medication service for a resident requiring limited assistance or no assistance, and monitoring

by boarding home staff to assure medication is taken and stored properly.

(36) "Supervised medication service Category B" means a level of service for residents requiring assistance and monitoring by boarding home staff to assure:

(a) Medications taken in accordance with a health care practitioner's instructions; and

(b) Inaccessibility of medications to other residents.

(37) "Supervised medication service Category C" means a full medication administration service.

(38) "Toilet" means a disposal apparatus consisting of a hopper, fitted with a seat and flushing device, used for urination and defecation.

(39) "Usable floor space" means floor area available for:

(a) Use in a resident bedroom excluding areas with ceiling height under seven feet six inches and walk-in closets if initially and continuously licensed prior to December 31, 1988; or

(b) Living and sleeping, excluding bathrooms, toilets, toilet compartments, closets, halls, storage, or utility spaces if initially licensed after December 31, 1988.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-001, filed 4/14/89; 83-13-068 (Order 264), § 248-16-001, filed 6/16/83; Order 147, § 248-16-001, filed 6/29/77; Order 97, § 248-16-001, filed 4/5/74; § 248-16-001, filed 10/3/67; Emergency Regulation filed 8/4/67; Regulation .16.001, effective 3/11/60; Subsec. 6, Rule 1 and Subsec. 7, Rule 2, filed 5/31/61.]

WAC 246-316-020 Boarding home license application—Department denial, suspension, revocation of license. (1) Boarding home license applicants shall:

(a) Submit appropriate, signed, completed department application forms to the department;

(b) Apply at least thirty days prior to expiration of license for renewal;

(c) Promptly report changes in information related to the application including identity of:

(i) Officers and directors if operated by a legally incorporated entity; and

(ii) Partners if a legal partnership.

(2) The department shall:

(a) Evaluate qualifications of persons named in boarding home license application prior to granting initial and subsequent licenses;

(b) Deny, suspend, or revoke a boarding home license if the department finds persons named unqualified or unable to operate or direct operation of the facility as described in chapter 18.20 RCW and this chapter;

(c) Determine if reasonable relationship exists between any previous conviction of the applicant and ability to competently, safely oversee, or operate a boarding home;

(d) Deny, suspend, or revoke a boarding home license if any person named:

(i) Was previously denied a license to operate an agency for care of children, aged, ill, or infirm in Washington or elsewhere;

(ii) Had a license to operate an agency for treatment or care of people revoked or suspended;

(iii) Has a record of a criminal or civil conviction for:

(A) Operating an agency for care of aged, children, ill, or infirm without an appropriate, applicable license; or

(B) Any crime involving physical harm to another person.

(iv) Is identified on department abuse registry as perpetrator of substantiated abuse described in chapter 26.44 RCW;

(v) Committed, permitted, aided, or abetted an illegal act on boarding home premises;

(vi) Demonstrated cruelty, abuse, negligence, assault, or indifference to welfare and well-being of a resident;

(vii) Failed to exercise fiscal accountability and responsibility involving:

(A) A resident;

(B) The department;

(C) Public agencies; or

(D) The business community.

(3) The department may grant a license to operate a boarding home to previously disqualified licensees as specified in subsection (2) of this section if such person provides evidence including demonstrated ability to operate a boarding home according to applicable laws and rules.

(4)(a) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest a license decision.

(b) A license applicant or holder contesting a department decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 18.20.090 and 34.05.220. 92-02-018 (Order 224), § 246-316-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 18.20.909 [18.20.090]. 90-06-019 (Order 039), § 248-16-031, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-031, filed 4/14/89.]

WAC 246-316-030 Change of licensee. (1) Boarding homes shall:

(a) Notify the department in writing at least thirty days prior to planned change of boarding home license including:

(i) Full names of the present licensee and prospective licensee;

(ii) Name and address of the boarding home concerned;

(iii) The date of the proposed change; and

(iv) The kind of change to be made, such as sale, lease, or rental.

(b) If a corporation or partnership:

(i) Notify the department, in writing, with the name and address of the responsible officers in corporation or controlling partners; and

(ii) Submit a signed statement testifying the new controlling officer or officers is in compliance with WAC 246-316-020.

(2) Applicants for an initial boarding home license shall submit a new application thirty days or more before proposed effective date of license as specified in WAC 246-316-020.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-033, filed 4/14/89.]

WAC 246-316-040 Requirement for and qualifications of boarding home administrator. (1) Boarding homes shall have continuous availability of an administrator or designated alternate who:

(a) Is available in person or by phone or page at all times;

(b) Is at least twenty-one years of age;

(c) Is not a resident as defined in WAC 246-316-010(30);

(d) Possesses a high school diploma or equivalent unless administering a boarding home in Washington state prior to January 1, 1958;

(e) Has demonstrated competence and experience in management of a boarding home or completed high school or post-high school courses including:

(i) Basic accounting, except when a designated alternate administrator is in charge for two weeks or less;

(ii) Management including personnel management; and

(iii) Care of persons characteristic of those admitted or accepted as residents in a specific boarding home, such as frail elderly, developmentally disabled, or mentally ill persons.

(f) Meets requirements as specified in WAC 246-316-050 (2)(b).

(2) Boarding homes shall notify the department when changes in the administrator occur including:

(a) Provide written notice to the department of new administrator's name upon appointment; and

(b) Provide a statement of administrator's compliance with this section and WAC 246-316-050.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-036, filed 4/14/89.]

WAC 246-316-050 Staff and employees—Other persons living in boarding home. (1) Boarding homes shall provide:

(a) Sufficient, trained staff in each boarding home to provide:

(i) Services and care needed by residents;

(ii) Maintenance of the facility for resident health and safety;

(iii) Implementation of fire and disaster plans.

(b) One or more staff aged eighteen years of age or older:

(i) On boarding home premises at all times when residents are present;

(ii) Capable of assisting all residents present in boarding home; and

(c) Staff present and responsible for "on-premises" supervision when any resident is working as staff or employed by the boarding home unless approved in advance by the department;

(d) Orientation and appropriate training of employees and staff pertinent to expected duties including:

(i) Organization of boarding home;

(ii) Physical facility layout;

(iii) Specific duties and responsibilities;

(iv) Policies, procedures, equipment necessary to perform duties as expected, minimally including:

(A) Actions during emergencies;

(B) Actions related to suspected, or alleged abuse, neglect, or accidents involving residents; and

(C) Methods of preventing transmission of infection.

(2) Boarding homes shall require and have:

(a) Staff with resident care duties possessing:

(i) Current first aid cards, unless licensed nurses, from instructors certified by:

(A) American Red Cross; or

(B) American Heart Association; or

(C) United States Bureau of Mines; or

(D) Washington state department of labor and industries.

(ii) Current cardiopulmonary resuscitation cards from instructors certified as in subsection (2)(a)(i)(A), (B), (C), and (D) of this section.

(b) A written statement from all staff and persons other than residents living or working in a boarding home regarding:

(i) Convictions for felony;

(ii) Convictions for crimes involving physical harm to another; and

(iii) Previous perpetrator of substantiated abuse as described in chapter 26.44 RCW.

(c) Exclusion of persons other than residents from living or working on the premises when evidence indicates previous conviction or abuse, as in subsection (2)(b) of this section, unless the boarding home licensee:

(i) Determines such person is rehabilitated enough to warrant public trust; and

(ii) Records the facts and basis for decision.

(3) Boarding homes shall reassign and/or restrict staff contact with residents when:

(a) Staff have a known communicable disease in the infectious stage; and

(b) The disease is likely to be spread in the boarding home setting or by casual contact.

(4) Boarding homes shall maintain documentation of:

(a) Staff orientation and training pertinent to duties, including cardiopulmonary resuscitation and first aid if required in subsection (2)(a) of this section; and

(b) Individual staff statements related to conviction or abuse and related boarding home actions as required in subsection (2)(b) and (c) of this section.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-046, filed 4/14/89.]

WAC 246-316-060 HIV/AIDS education and training. Boarding homes shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care Facility Employees*, May 31, 1989, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310. 89-21-038 (Order 3), § 248-16-048, filed 10/12/89, effective 11/12/89.]

WAC 246-316-070 New construction—Modification of existing structure. (1) Boarding homes shall forward plans for new construction, if applicable, to the department including:

(a) Preliminary documents with:

(i) Description of program, services, and operational methods affecting boarding home building, premises, or residents;

(ii) Scaled drawings for any physical or functional construction or modification;

(iii) Two sets of plans drawn to scale including:

(A) Plot plan showing streets and driveways;

(B) Water supply;

(C) Sewage disposal system;

(D) Grade and location of each building;

(E) Designated function of each room; and

(F) Fixed equipment.

(iv) General description of construction and materials.

(b) Final construction documents requiring department approval which are two sets of final plans and specifications including:

(i) Plot plans;

(ii) Plans for each floor of each affected building designating function for each room and fixed equipment;

(iii) Interior and exterior elevations, building sections, and construction details;

(iv) A schedule of floor, wall, and ceiling finishes and the type and size of doors and windows;

(v) Plumbing, heating, ventilating, and electrical systems;

(vi) Specifications which fully describe workmanship and finishes; and

(vii) A sample of each different carpet, if provided, including tests for flame spread and smoke density conducted by an independent testing laboratory approved by the department.

(2) Boarding homes involved in new construction projects shall:

(a) Obtain department approval of final construction documents prior to starting construction;

(b) Consult with the department prior to changing approved plans and specifications;

(c) Submit modified plans or addenda if required by the department;

(d) Construct only changes approved by the department;

(e) Provide a written notice of construction project completion to the department indicating date to be completed and compliance with requirements of chapter 18.20 RCW and this chapter; and

(f) Occupy and use buildings or rooms only after authorization by the department.

(3) When modifications or alterations to existing boarding home structure are planned, boarding homes shall forward plans to the department including:

(a) Preliminary documents with:

(i) Descriptive drawings of each floor of proposed modifications indicating area to be modified;

(ii) Description of impacts on physical plant, operations, and services;

(iii) A plan showing existing and proposed function of each room and fixed equipment; and

(iv) A sample of carpets, if provided, including tests for flame spread and smoke density conducted by an independent testing laboratory approved by the department.

(b) Final plans submitted after department review of preliminary documents.

(4) Boarding homes involved in alteration or modification projects shall:

(a) Begin modifications only after department approval of final plans; and

(b) Make adequate provisions for the health, safety, and comfort of residents during construction.

(5) Boarding homes shall obtain approval of the Washington state division of fire protection prior to new construction, modifications, alterations, and minor alterations under RCW 18.20.130.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-070, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-057, filed 4/14/89.]

WAC 246-316-080 Communication system. Boarding homes shall provide:

(1) One or more nonpay telephones in each building located for ready access by staff;

(2) Intercoms, phone extensions, or other means of communications as required for maintaining resident safety;

(3) Resident access to one or more pay or nonpay telephones on the premises.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-060, filed 4/14/89; 83-13-068 (Order 264), § 248-16-060, filed 6/16/83; Order 147, § 248-16-060, filed 6/29/77; Regulation .16.060, effective 3/11/60.]

WAC 246-316-090 Water supply. Boarding homes shall:

(1) Provide a water supply system and water meeting requirements described in chapter 246-290 WAC public water supplies;

(2) Maintain water supply systems free of cross-connections;

(3) Provide hot and cold water under adequate pressure readily available throughout the facility;

(4) Provide hot water not to exceed 120° Fahrenheit at lavatories and bathing facilities used by residents;

(5) Label or color code unsafe or nonpotable water supplies used for irrigation, fire protection, and purposes other than domestic use;

(6) Meet laundry requirements of WAC 246-316-190; and

(7) Meet dishwashing machine requirements in WAC 246-316-170.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-070, filed 4/14/89; 83-13-068 (Order 264), § 248-16-070, filed 6/16/83; Order 147, § 248-16-070, filed 6/29/77; Regulation .16.070, effective 3/11/60.]

WAC 246-316-100 Sewage and liquid waste disposal. Boarding homes shall:

(1) Have all sewage and waste water drain into a sewerage system approved by the governmental agency having jurisdiction;

(2) Prevent discharge of sewage or liquid wastes directly on the surface of the ground or directly into ground water; and

(3) For new construction, if on-site sewage disposal systems are used, discharge sewage and liquid wastes per chapter 246-272 WAC on-site sewage disposal or chapter 173-240 WAC.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-080, filed 4/14/89; Order 147, § 248-16-080, filed 6/29/77; Regulation .16.080, effective 3/11/60.]

WAC 246-316-110 Garbage and refuse disposal. Boarding homes shall:

(1) Provide garbage containers which are:

(a) In a suitable location or storage area;

(b) Sufficient in number;

(c) Constructed to be nonabsorbent and water-tight;

(d) Appropriately maintained; and

(e) Cleaned frequently to prevent presence of vectors, odors, and other nuisances.

(2) Dispose of garbage and wastes at sufficient frequent intervals to prevent hazards and nuisances; and

(3) Assure final disposal of garbage and refuse by use of authorized garbage collection services or other department-approved methods.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-090, filed 4/14/89; 83-13-068 (Order 264), § 248-16-090, filed 6/16/83; Order 147, § 248-16-090, filed 6/29/77; Regulation .16.090, effective 3/11/60.]

WAC 246-316-120 Lighting. Boarding homes shall maintain light fixtures and lighting to provide for comfort and safety of residents minimally to include an intensity of:

(1) Five foot-candles of light measured thirty inches from the floor in all areas;

(2) Thirty foot-candles of light measured at reading, work, and recreation surfaces in any room or area used by residents for reading, work, and recreation; and

(3) Ten foot-candles of light measured thirty inches from the floor in toilet rooms and bathrooms.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-120, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-105, filed 4/14/89; 83-13-068 (Order 264), § 248-16-105, filed 6/16/83.]

WAC 246-316-130 Heating—Temperature. Boarding homes shall:

(1) Equip each resident-occupied building with an approved heating system capable of maintaining a healthful temperature for residents;

(2) Prohibit use of portable space heaters unless approved, in writing, by the Washington state director of fire protection; and

(3) Maintain a temperature during sleeping hours no less than 60° Fahrenheit and no less than 68° Fahrenheit during waking hours except when:

(a) A room is designated for activities requiring physical exertion; or

(b) Individual residents can control temperature in their own unit, independent from other areas.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-130, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-110, filed 4/14/89; 83-13-068 (Order 264), § 248-16-110, filed 6/16/83; Order 147, § 248-16-110, filed 6/29/77; Regulation .16.110, effective 3/11/60.]

WAC 246-316-140 Ventilation. Boarding homes shall:

(1) Ventilate rooms to prevent excessive odors or moisture;

(2) Designate and maintain appropriately ventilated smoking areas to prevent air contamination throughout the facility if smoking is permitted in a boarding home;

(3) Provide insect screens for operable windows or openings serving for ventilation; and

(4) Avoid using a type of screen which might restrict or hinder escape or rescue in emergencies if a screen is used in a fire or emergency exit opening.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-140, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-115, filed 4/14/89; 83-13-068 (Order 264), § 248-16-115, filed 6/16/83.]

WAC 246-316-150 Resident room—Room furnishings—Storage. (1) Boarding homes shall have resident sleeping rooms with:

(a) Eighty square feet usable floor space in a one-person room;

(b) At least seventy square feet of usable floor space per person in rooms occupied by two or more;

(c) Ceiling heights of at least seven feet six inches over all portions of rooms considered usable floor space;

(d) Accommodations for a maximum of four persons per room if initially and continuously licensed before July 1, 1989;

(e) Maximum occupancy of two persons per room for boarding homes applying for initial license or increasing number of resident sleeping rooms after June 30, 1989;

(f) Appropriate room identification and resident capacity consistent with department-approved list;

(g) Unrestricted direct access to a hallway, living room, outside, or other acceptable common-use area;

(h) An exclusion for use as corridors or passageways;

(i) Window sill or sills of a window or windows used for required window area, under subsection (1)(j) of this section:

(i) No more than three feet eight inches from the floor;

(ii) At or above grade extending ten or more feet outside horizontally from the window sill.

(j) Windows, excluding openings into window wells, enclosed porches, light or ventilation shafts, or similarly enclosed areas, providing:

(i) Clear glass area at least one-tenth of required room area;

(ii) Minimum area of ten square feet.

(k) Windows designed to operate freely if necessary for fire exit or ventilation;

(l) Adjustable window curtains, shades, blinds, or equivalent for visual privacy;

(m) One or more duplex electrical outlets per bed if initially licensed after July 1, 1983;

(n) Switch at entry of bedroom to control one or more light fixtures in room;

(o) Artificial lighting at bedside if requested by a resident under WAC 246-316-120; and

(p) Noncombustible wastebaskets.

(2) Boarding homes shall provide or ensure each resident has:

(a) Sufficient storage facilities either in or immediately adjacent to his or her sleeping room to adequately store a reasonable quantity of clothing and personal possessions;

(b) Individual towel and washcloth rack or equivalent;

(c) A secure space for valuables at least one-half cubic foot and a minimum dimension of four inches if requested by the resident;

(d) A comfortable bed appropriate for size of resident and at least thirty-six inches wide with:

(i) A mattress which:

(A) Fits the bed frame;

(B) Is in good condition; and

(C) Is at least four inches thick unless otherwise requested or necessary for resident health and/or safety.

(ii) Spacing at least three feet from the other beds unless otherwise requested by all affected residents; and

(iii) Acceptable types including:

(A) Standard household bed;

(B) Studio couch;

(C) Hide-a-bed;

(D) Day bed; and

(E) Water bed if it is structurally and electrically safe.

(e) One or more comfortable pillows;

(f) Clean, and in good repair, bedding at least one time per week, or as necessary to maintain cleanliness;

(g) Clean towels and washcloths at least once each week or more often if necessary to maintain cleanliness; and

(h) At least one suitable chair excluding those used to permanently furnish the day room, dining room, or other common-use rooms.

(3) Boarding homes may permit a resident to use his or her own furniture and furnishings when consistent with health and safety of all residents including:

(a) Cooking equipment, coffee makers, and other equipment and appliances in sleeping rooms when approved by the Washington state director of fire protection; and

(b) Food and beverage storage and preparation area in sleeping room if maintained in a sanitary condition.

(4) Boarding homes shall regularly:

(a) Ascertain functional ability of residents to use cooking facilities safely; and

(b) Take appropriate actions to prohibit resident access to cooking facilities when a resident is judged unable to cook safely, including:

(i) Rewire, disconnect, or remove stove or appliance;

(ii) Transfer of resident to another accommodation; or

(iii) Ensure constant attendance by a responsible person when resident has access to or use of cooking facilities.

(5) Boarding homes may use and allow use of carpets or other floor coverings if:

(a) Securely fastened to the floor or provided with nonskid backing;

(b) Free of hazards such as curling edges or tattered sections; and

(c) Clean.

(6) If a boarding home plans to install carpeting, the boarding home shall submit samples to the department for approval prior to purchase and installation as required in WAC 246-316-070 (3)(a)(iv).

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-150, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-121, filed 4/14/89.]

WAC 246-316-160 Toilet and bathing facilities. (1)

Unless a private toilet and bathing facility is provided for exclusive use in each resident living unit, boarding homes shall provide common-use facilities for residents, staff, and others as follows including:

(a) At least one toilet and one lavatory available in a ratio of one toilet and lavatory for each eight or fewer persons;

(b) Toilet rooms containing more than one toilet reserved for use by one sex;

(c) No more than one toilet in a room containing a bathing facility to be counted as a required toilet;

(d) A lavatory located in:

(i) Each toilet room; or

(ii) A directly adjacent adjoining lounge, dressing room, locker room, or other suitable common-use area; or

(iii) A resident's room if the toilet room opens into resident's room.

(e) Lavatories equipped with:

(i) Suitable mirrors;

(ii) Soap; and

(iii) Single-use or disposable towels, blower, or equivalent hand-drying device.

(f) Bathing facilities and toilets for resident use located where:

(i) Reasonable access is possible from a common hall or area for all residents living on the same level or floor;

(ii) Residents served live on same floor or level as toilet;

(iii) Residents served live on same floor or level as bathing facility or no more than one floor or level up or down;

(iv) Resident access is possible without passage through facility kitchen, pantry, food preparation, food storage, or dishwashing area; and

(v) Access occurs without passage from one bedroom through another bedroom.

(g) At least one bathing facility for every twelve or fewer persons; and

(h) Bathrooms containing more than one bathing facility reserved for use by one sex only.

(2) General requirements for all resident toilets, bathing facilities, and lavatories:

(a) Bathing facilities designed to meet the needs of residents living in the facility;

(b) Toilets and bathroom facilities equipped with:

(i) Water resistant, smooth, low gloss, nonslip, and easily cleanable materials;

(ii) Walls washable to height of splash or spray;

(iii) Suitable numbers of grab bars installed and located to minimize accidental falls including:

(A) At least one grab bar installed at each bathing facility; and

(B) Grab bars at toilets if needed by residents.

(iv) Sanitarily designed plumbing fixtures in good repair with clean, nonabsorbent toilet seats free of cracks;

(v) Adequate lighting;

(vi) A suitable mirror at each lavatory; and

(vii) Adequate ventilation to outside.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-131, filed 4/14/89.]

WAC 246-316-170 Food and nutrition services. (1) Boarding homes shall maintain food service facilities and practices required in chapter 246-215 WAC food service sanitation. Boarding homes may use home-canned high-acid foods with a pH of less than 4.6, such as fruit, jelly, and jam.

(2) Boarding homes using dishwashing machines shall ensure:

(a) Machine operation per manufacturer directions; and

(b) "Home-type" machines, without high temperature sanitizing cycles, maintain water temperature at 155° Fahrenheit or above.

(3) Boarding homes shall:

(a) Provide a minimum of three meals in each twenty-four-hour period;

(b) Deviate from minimum of three meals in a twenty-four-hour period only following written approval by the department;

(c) Allow no more than fourteen hours between the evening meal and breakfast unless a snack contributing to the daily nutrient total is served or made available to all residents between the evening meal and breakfast;

(d) Provide sufficient time for residents to consume meals;

(e) Have written menus which:

(i) Are available at least one week in advance;

(ii) Include date, day of week, month, and year;

(iii) Are retained at least six months; and

(iv) Provide a variety of foods with cycle duration of at least three weeks before repeating.

(f) Prepare palatable, attractively served foods, meals, and nourishments sufficient in quality, quantity, and variety to meet the recommended dietary allowances of the food and nutrition board, National Research Council, 1980;

(g) When substituting for food contributing to daily nutrient total requirement, use food of comparable nutrient value and record food actually served;

(h) Keep a record of all food and snacks served and contributing to nutritional requirements; and

(i) Maintain an adequate dining area approved by the department with seating capacity for fifty percent or more residents per meal setting.

(4) Boarding homes shall prepare and serve:

(a) Resident specific modified or therapeutic diets when and as prescribed by a health care practitioner using a dietitian-approved menu or diet manual; and

(b) Only nutrient concentrates and supplements prescribed in writing by a health care practitioner.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-170, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-141, filed 4/14/89.]

WAC 246-316-180 Day rooms. Boarding homes shall provide day room area or areas for residents to participate in social, recreational, and diversional activities. Boarding homes shall provide in the day room area or areas:

(1) Comfortable furniture and furnishings to meet resident needs;

(2) Heat and light appropriate for the comfort of residents;

(3) Floor space of no less than one hundred fifty square feet or ten square feet per resident, whichever is larger. Such total area may include:

(a) Solariums,

(b) Enclosed sun porches,

(c) Recreation rooms,

(d) Dining rooms, and

(e) Living rooms.

(4) Floor space of no less than one hundred fifty square feet or twenty square feet per resident, whichever is larger, for boarding homes newly licensed after December 31, 1988.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-150, filed 4/14/89; 83-13-068 (Order 264), § 248-16-150, filed 6/16/83; Order 147, § 248-16-150, filed 6/29/77; § 248-16-150, filed 10/3/67; Emergency Regulation, filed 8/4/67; Regulation .16.150, effective 3/11/60.]

WAC 246-316-190 Laundry. (1) Boarding homes shall provide or make provision for appropriate handling, cleaning, and storage of linen and washable goods.

(2) When facility and/or commingled personal resident laundry is washed on the premises, boarding homes shall provide, maintain, and appropriately equip a laundry room including:

- (a) Washing machines with hot water intake temperature of 140° Fahrenheit for each load;
- (b) Means of separating clean and soiled items; and
- (c) Soiled laundry and linen storage and sorting areas in rooms other than those used for open food storage, food preparation, or food service.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-160, filed 4/14/89; 83-13-068 (Order 264), § 248-16-160, filed 6/16/83; Regulation .16.160, effective 3/11/60.]

WAC 246-316-200 Storage space. (1) Boarding homes shall provide adequate storage space for:

- (a) Supplies;
 - (b) Equipment;
 - (c) Linens; and
 - (d) Personal possessions of residents including spaces described in WAC 246-316-150(2).
- (2) Boarding homes shall maintain storage space to:
- (a) Prevent fire or accident hazards; and
 - (b) Provide separate, lockable storage for disinfectants and poisonous compounds in drawers, rooms, or equivalent.

[Statutory Authority: RCW 18.20.090, 92-02-018 (Order 224), § 246-316-200, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-170, filed 4/14/89; 83-13-068 (Order 264), § 248-16-170, filed 6/16/83; Regulation .16.170, effective 3/11/60.]

WAC 246-316-210 Stairs—Ramps. Boarding homes providing stairways or ramps for resident use shall maintain:

- (a) Nonskid surfaces;
- (2) Step treads at least nine inches deep (run) and a maximum of eight inches high (rise); and
- (3) Ramps with a maximum slope of one to twelve (vertical to horizontal), as needed for resident safety.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-180, filed 4/14/89; 83-13-068 (Order 264), § 248-16-180, filed 6/16/83; Regulation .16.180, effective 3/11/60.]

WAC 246-316-220 Guardrails, handrails. (1) Boarding homes shall install and maintain sturdy handrails located:

- (a) In halls and corridors if conditions indicate a need;
 - (b) On each side of interior and exterior stairways unless rail installation on one side:
 - (i) Maintains safety of residents; and
 - (ii) Is approved in writing by the department.
 - (c) In stairways with more than one step riser; and
 - (d) On each side of interior and exterior ramps.
- (2) The department may require a boarding home to install guardrails if safety of residents is jeopardized.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-220, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-190, filed 4/14/89; 83-13-068 (Order 264), § 248-16-190, filed 6/16/83; Regulation .16.190, effective 3/11/60.]

WAC 246-316-230 Maintenance and housekeeping. Boarding homes shall provide maintenance and housekeeping including:

- (1) Safe and sanitary exterior grounds, boarding home structure, and component parts;
- (2) Clean facilities, equipment, and furnishings in good repair;
- (3) Safe and sanitary conditions in resident bedrooms;
- (4) Provision for maintaining each resident bedroom if a resident does not keep his or her room clean and safe;
- (5) Absence of safety hazards;
- (6) A utility sink or equivalent means of obtaining and disposing of mop water away from areas used in food preparation and food service; and
- (7) Storage for wet mops in areas:
 - (a) mechanically ventilated; or
 - (b) Ventilated to outside air.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-202, filed 4/14/89; 83-13-068 (Order 264), § 248-16-202, filed 6/16/83; Order 147, § 248-16-202, filed 6/29/77.]

WAC 246-316-240 Admission, placement and retention of residents. (1) Prior to admission or acceptance as a resident, boarding homes shall obtain sufficient information to evaluate whether or not a resident/applicant can be safely housed and provided domiciliary care in the particular facility, including information in reference to:

- (a) Resident/applicant's ability to function with respect to the physical premises, equipment, and staff of the boarding home;
- (b) Space, equipment, and furniture requirements;
- (c) Ambulatory status;
- (d) Currently demonstrated overt behavior dangerous to self or others;
- (e) Need for care in a hospital, nursing home, or other licensed facility under chapters 18.51, 70.41, and 71.12 RCW;
- (f) Requirements for assistance in obtaining or administering medications; and
- (g) Need or desire for nursing care exceeding periodic visits by staff of a home health care agency or a licensed nurse employed by an individual resident.

(2) Boarding homes shall accept, admit, and retain persons as residents only when:

- (a) Ambulatory unless the boarding home is approved by the Washington state director of fire protection to:
 - (i) Care for semi-ambulatory residents; or
 - (ii) Care for nonambulatory residents not needing medical or nursing care as specified in subsection (2)(f)(ii) and (iii) of this section.
- (b) Nonsmoking residents can be accommodated with smoke-free rooms and smoke-free common-use areas to prevent contact with smoke;
- (c) Smoking residents can be accommodated by areas meeting the requirements in WAC 246-316-140(2);

(d) The individual resident can be accommodated by:

- (i) Physical plant, facilities, and spaces;
- (ii) Furniture and equipment; and
- (iii) Staff who are available and sufficient to provide nature of domiciliary care required and desired by the resident.

(e) The amount and nature of needed assistance with medication or medication service is available in the boarding home under RCW 18.20.160 and WAC 246-316-300; and

(f) Individuals do not:

(i) Exhibit continuing overt behavior which is a danger to others or self;

(ii) Need inpatient care in a hospital, nursing home, or other facility licensed under chapters 18.51, 70.12, or 70.41 RCW; or

(iii) Need continuous nursing care exceeding periodic or short-term services from:

(A) Staff of a home health care agency; or

(B) A licensed nurse retained by an individual resident.

(3) Upon admission or acceptance of an individual as a resident, boarding homes shall determine a resident's choice regarding:

(a) Definite arrangements with a health care practitioner; and

(b) Who to call in case of resident illness or death.

[Statutory Authority: RCW 18.20.090, 92-02-018 (Order 224), § 246-316-240, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-213, filed 4/14/89; 83-13-068 (Order 264), § 248-16-213, filed 6/16/83; Order 147, § 248-16-213, filed 6/29/77.]

WAC 246-316-250 Boarding home resident rights.

Boarding homes shall assure each resident maintains the following rights in addition to any rights not specifically withheld by law insofar as a general or specific nuisance or a danger to the individual or others is not created:

(1) Rights to:

(a) Be informed or to have a resident-designated agent informed of resident rights and the policies of the facility at the time of admission;

(b) Have a written copy of resident rights and policies with verification of date of receipt in the resident's file or available elsewhere in the facility;

(c) Be treated in a manner respecting individual identity, human dignity, and fostering constructive self-esteem;

(d) Be notified thirty days in advance if transfer is necessary for medical or nursing care, resident well-being, or welfare of other residents, unless:

(A) An emergency condition requires immediate transfer; or

(B) Resident does not abide by written boarding home policy affecting health and safety of self or others; or

(C) Orderly transfer or discharge is enhanced for the resident by earlier transfer.

(2) Rights to:

(a) Have any notice of transfer and discharge documented in resident's record;

(b) Associate, visit, and communicate privately with persons of his or her choice;

(c) Send and receive uncensored correspondence through the mail;

(d) Have reasonable access to a telephone for making and receiving personal calls;

(e) Manage personal financial affairs unless adjudicated incompetent in a court proceeding directed to that particular issue;

(f) Retain and use personal clothing and possessions unless to do so would infringe upon the rights of other residents;

(g) Refuse to perform services for the facility unless these services are included in a plan of care;

(h) Voice grievances and recommend changes in policies and services to the facility staff and to outside representatives of his or her choice free from restraint, interference, coercion, discrimination or reprisal;

(i) Be informed of telephone numbers and address of the licensing agent or appropriate advocacy group;

(j) Meet with and participate in activities of social, religious, and community groups at his or her discretion;

(k) Freedom from physical, chemical, and psychological restraints unless authorized by law;

(l) Freedom from exploitation, assault, abuse, and neglect;

(m) Access information in own record or provide written authorization for a designated agent to access record;

(n) Confidential treatment of information contained in resident health records with access only by authorized persons and those persons authorized by the department;

(o) Receive timely notice of changes in policy and procedures affecting residents; and

(p) Be informed of facility rules, including smoking rules and location of smoking and nonsmoking areas.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-215, filed 4/14/89; 83-13-068 (Order 264), § 248-16-215, filed 6/16/83; Order 147, § 248-16-215, filed 6/29/77; Order 116, § 248-16-215, filed 5/23/75; § 248-16-215, filed 10/3/67; Emergency Regulation, filed 8/4/67.]

WAC 246-316-260 Boarding home resident services.

(1) Boarding homes shall:

(a) Observe and note changes in physical, mental, and emotional functioning; and

(b) Assist with arrangements for appropriate transfer as needed.

(2) Boarding homes shall provide basic domiciliary care including, but not limited to:

(a) Assisting each resident to maintain his or her highest functional ability possible and compatible with individual safety and welfare;

(b) Providing general health supervision if required by resident including:

(i) Encouraging resident to self-administer medically prescribed drugs and treatment;

(ii) Encouraging resident to follow any medically prescribed modified diet, rest or activity regimen;

(iii) Encouraging and assisting a resident with arrangements to keep appointments for health care services, e.g., physicians, dentists, home health care services, or clinics;

(iv) Encouraging and assisting resident with arrangements to see his or her health care practitioner when the resident shows signs or describes symptoms of an illness or

abnormality for which medical diagnosis and treatment may be indicated; and

(v) Encouraging, supervising, or assisting resident with:

(A) Personal hygienic care, dressing, grooming, and other activities;

(B) Functional aids or equipment, such as glasses, hearing aids, canes, crutches, walker, or wheelchair;

(C) Clothing and other personal effects;

(D) Personal living quarters in a manner conducive to safety and comfort.

(c) Encouraging, guiding, or assisting residents with arrangements to participate in social, recreational, diversional, vocational, church, or other activities within the boarding home and the community in accordance with his or her interests, tolerance, and abilities.

(3) Boarding homes shall post a calendar of daily social or recreational activities and events for residents.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-216, filed 4/14/89.]

WAC 246-316-270 First aid services. Boarding homes shall have:

(1) Written medical emergency policies and procedures available in appropriate locations in the facility; and

(2) Adequate first aid supplies and a first aid manual kept in a specific location and readily available to all staff.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-270, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-222, filed 4/14/89; 83-13-068 (Order 264), § 248-16-222, filed 6/16/83; Order 147, § 248-16-222, filed 6/29/77.]

WAC 246-316-280 Notification regarding serious or significant change in resident's condition. Boarding homes shall:

(1) Notify the resident's next of kin, guardian, or other individual or agency responsible for, or designated by, the resident as soon as possible regarding:

(a) A serious or significant change in the resident's condition;

(b) Transfer of the resident to a hospital; and

(c) Death of a resident.

(2) In case of death, notify the coroner if required under RCW 68.50.010.

(3) Document notification in the resident's record.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-280, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-223, filed 4/14/89; 83-13-068 (Order 264), § 248-16-223, filed 6/16/83; Order 147, § 248-16-223, filed 6/29/77.]

WAC 246-316-290 Safety measures. Boarding homes shall:

(1) Eliminate hazards;

(2) Investigate and document accidents or incidents jeopardizing the health or life of a resident to:

(a) Ascertain the circumstances of the accident or incident; and

(b) Institute appropriate measures to prevent similar future occurrences when possible;

(3) Provide a type of hardware on doors of storage rooms and closets preventing accidental lock-in of a resident;

(4) Provide emergency means of rapid staff access to resident-occupied bedrooms, toilets, showers, bathrooms, and other rooms;

(5) Keep resident care staff informed of emergency means of rapid access to resident-occupied rooms;

(6) Prevent transmission of infection by sanitizing and appropriate handling and storage of supplies and equipment used for resident services; and

(7) Ensure availability of flashlights or other emergency lighting in all areas.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-290, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-226, filed 4/14/89; 83-13-068 (Order 264), § 248-16-226, filed 6/16/83; Order 147, § 248-16-226, filed 6/29/77.]

WAC 246-316-300 Medication services. (1) Boarding homes shall:

(a) Provide at least one category of medication service as described in subsections (3), (5), and (6) of this section;

(b) Determine an appropriate category of medication service for each resident involving the resident or resident-designated agent when possible;

(c) Document the designated category or categories of each resident in the individual resident's health record;

(d) Take actions appropriate to safety of a resident when the boarding home suspects the resident is having trouble with his or her medication management or is inappropriately categorized, including:

(i) Assigning a resident to a new medication service category; or

(ii) Transferring or discharging resident from the boarding home when the appropriate medication service category is unavailable in the boarding home.

(2) Boarding homes shall follow established written policies and procedures for each medication service category provided in the boarding home including:

(a) Limitations of staff assistance;

(b) Requirements for staff providing assistance with medications;

(c) Storing of resident medications:

(i) In the original medication containers with pharmacist-prepared or manufacturer's label;

(ii) Together for each resident and physically separated from other residents' medications;

(iii) Separate from food or toxic chemicals;

(iv) Accessible only to designated, responsible staff or appropriate resident; and

(v) In an environment recommended on label, if centrally stored.

(d) Arrangements or means for assuring the resident obtains medication as prescribed;

(e) Methods for disposition of medications following recommendations of a pharmacist or pharmacy consultant for:

(i) Outdated or discontinued medications;

(ii) Medications left behind when a resident leaves or dies;

(iii) Sending resident medication with a resident upon transfer or discharge or temporary leave.

(f) Procedures and system for documenting and recording of:

(i) Recommendations of a pharmacist about appropriate disposition action by the boarding home for outdated prescription medications in a centralized storage;

(ii) Medication disposition actions taken by boarding home staff;

(iii) Identity by signature of two persons observing any staff medication disposition, except when a resident is totally accountable and responsible for his or her own medication management;

(iv) Current prescriber's order for any medications managed and controlled by the boarding home; and

(v) When a resident takes or does not take medication, unless the resident is totally accountable and responsible for his or her own medication management.

(g) Maintenance and retention of completed medication records for five years from date of discharge.

(3) Boarding homes shall designate a resident as eligible for supervised medication service Category A when:

(a) A resident is capable of self-administration of medication without assistance or guidance from another person; and

(b) A resident is capable of storing his or her own medications in a manner prohibiting access and availability to other residents; or

(c) A resident has a physical condition or disability prohibiting or interfering with his or her ability to take prescribed medication properly, but:

(i) The resident understands the appropriate use of his or her medication; and

(ii) The resident is capable of communicating and directing others to give physical assistance with his or her medication as prescribed.

(4) Boarding homes shall only assist a resident in service category A to self-administer medication according to:

(a) A health care practitioner's written order or the pharmacist or manufacturer's prepared label;

(b) Limits specified in subsection (3) of this section;

(c) Procedures for designated staff responsible for physically assisting residents with medications limiting staff assistance to:

(i) Reading the label;

(ii) Opening the container; and

(iii) Application or instillation of oral, skin, nose, eye, and ear preparations.

(5) Boarding homes shall designate a resident as needing supervised medication service Category B when:

(a) A resident requires reminding, guiding, or coaching to take medication properly, but requires no physical assistance except opening of a container; and

(b) Access and availability of medications only to authorized persons cannot be assured unless controlled in locked storage by the boarding home.

(6) Boarding homes shall only assist a resident in service Category B to self-administer medication according to:

(a) A health care practitioner's written order or the pharmacist's or manufacturer's prepared label;

(b) Limits specified in subsection (5) of this section; and

(c) Procedures for designated staff responsible for reminding, guiding, or coaching residents with medication, limiting staff assistance to:

(i) Reading the label or more current prescriber order;

(ii) Opening the container; and

(iii) Communicating the prescriber's order to the resident in such a manner that the resident self-administers his or her medication properly.

(7) Boarding homes shall designate a resident as needing supervised medication service Category C when:

(a) A resident cannot take or handle his or her own medication appropriately; and

(b) The resident's physician provided a written order specifying the resident requires certain specified medications administered by a person licensed to administer medications.

(8) Boarding homes accepting or retaining any resident requiring supervised medication service Category C shall:

(a) Have a physician or registered nurse available for supervised medication service Category C who:

(i) Plans, directs, and supervises the service; and

(ii) Reviews each resident's condition and medication regimen as needed and at least quarterly, documenting reviews in the resident health record.

(b) Provide registered nurses, licensed practical nurses, or other licensed person under Washington state laws to administer medications; and

(c) Maintain and include in the resident health record a current, written prescriber's order specifying medications requiring nurse administration.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-300, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-229, filed 4/14/89.]

WAC 246-316-310 Resident register. Boarding homes shall maintain a permanent, current book or a register of all individuals who become residents including:

(1) Date of admission;

(2) Full name; and

(3) Date of discharge.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-316-310, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090, 89-09-034 (Order 2786), § 248-16-230, filed 4/14/89; 83-13-068 (Order 264), § 248-16-230, filed 6/16/83; Order 147, § 248-16-230, filed 6/29/77; Order 116, § 248-16-230, filed 5/23/75; § 248-16-230, filed 10/3/67; Emergency Regulation, filed 8/4/67; Regulation .16.230, effective 3/11/60; Subsection 1, filed 5/31/61.]

WAC 246-316-320 Resident health record. (1) Boarding homes shall maintain a health record in ink, typewritten or equivalent, for each resident including:

(a) Full name, date of birth, and former address of resident;

(b) Date admitted as resident and date discharged;

(c) Name, address, and telephone number of next-of-kin or other responsible person;

(d) Name, address, and telephone number of resident's personal physician or health care practitioner;

(e) Signed staff entries about:

(i) Dates and descriptions of resident illnesses, accidents, or incidents;

(ii) Changes in resident functional abilities or physical and mental coordination; and

(iii) Actions of staff related to subdivision (e)(i) and (ii) of this subsection.

(f) Orders signed by a resident's physician or health care practitioner for any modified diet, concentrate or supplement provided by the boarding home; and

(g) Medication orders and records as specified in WAC 246-316-300.

(2) Boarding homes shall:

(a) Maintain a systematic, secure method of identifying and filing resident health records for ease in locating; and

(b) Retain each resident health record at least five years following resident discharge.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-320, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-320, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-235, filed 4/14/89; 83-13-068 (Order 264), § 248-16-235, filed 6/16/83.]

WAC 246-316-330 Adult day care. (1) Boarding homes choosing to provide adult day care services and to accept or admit adults for domiciliary care in a boarding home for less than a contiguous twenty-four hours shall:

(a) Accept and retain for day care only those adults meeting resident criteria described in WAC 246-316-240;

(b) Provide day room and dining room facilities complying with WAC 246-316-170 and 246-316-180;

(c) Provide toilets and lavatories complying with WAC 246-316-160;

(d) Provide comfortable, suitable chairs and furniture;

(e) Provide sufficient furniture for comfort of residents and day care adults including, but not limited to:

(i) Napping furniture for day care adults such as lounge chairs, recliners, couches; and

(ii) Ability to space napping furniture at least three feet apart if needed or requested.

(f) Provide staff to supervise and assist day care adults in activities of daily living and medication management as described in WAC 246-316-260 and 246-316-300;

(g) Provide a meal meeting at least one-third of the recommended dietary allowance during every five-hour period of stay (the exception to the recommended dietary allowance is during normal sleeping hours when fasting periods greater than fourteen hours are prohibited);

(h) Ensure and provide rights, services, notification, and safety as described in WAC 246-316-250, 246-316-260, 246-316-280, and 246-316-290;

(i) Maintain a separate register of all day care adults using format described in WAC 246-316-310;

(j) Maintain a health record for each day care adult as described for residents in WAC 246-316-320.

(2) Boarding homes choosing to accept adults for day care shall:

(a) Notify the department of the plan to accept or admit adults to day care;

(b) Provide information as required for the department to establish compliance with this section; and

(c) Obtain written department approval for maximum day care adult capacity prior to accepting or admitting adults for day care.

(3) When notified of boarding home licensee's plan to accept day care adults, the department shall:

(a) Determine whether or not a boarding home complies with this section;

(b) Issue written approval for occupancy based on compliance with this section; and

(c) Indicate approved capacity for day care adults on the boarding home license.

[Statutory Authority: RCW 18.20.090. 92-02-018 (Order 224), § 246-316-330, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-330, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-300, filed 4/14/89.]

WAC 246-316-340 Exemptions. (1) The secretary of the department or the designated licensing program administrator may approve an exemption to a specific rule under certain terms or conditions for a specified boarding home premise:

(a) Following an investigation regarding safety; and

(b) Provided an evaluation of the results reveals safety and health of residents will remain unjeopardized in that facility.

(2) Boarding homes shall maintain a copy of each department-approved exemption.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-316-340, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.20.090. 89-09-034 (Order 2786), § 248-16-900, filed 4/14/89. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-16-900, filed 3/20/86; Order 147, § 248-16-900, filed 6/29/77.]

WAC 246-316-990 Fees. Boarding homes licensed under chapter 18.20 RCW shall:

Submit an annual fee of thirty-four dollars per bed of the licensed resident bed capacity of the boarding home.

The "licensed resident bed capacity" is the resident occupancy level determined by the boarding home and approved by the department, consistent with physical plant and movable equipment requirements for resident sleeping rooms.

The occupancy level shall be maintained at or below the licensed resident bed capacity of the boarding home.

[Statutory Authority: RCW 43.70.250. 92-12-086 (Order 276), § 246-316-990, filed 6/2/92, effective 7/1/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-316-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-318 WAC HOSPITALS

WAC

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WAC 246-318-010 Definitions. For the purposes of this chapter and chapter 70.41 RCW, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise. All adjectives and adverbs such as adequate, approved, suitable, properly, or sufficient used in these regulations to qualify a requirement shall be determined by the department.

(1) "Abuse" means the injury or sexual abuse of a patient under circumstances indicating the health, welfare, and safety of the patient is harmed. Person "legally responsible" shall include a parent, guardian, or an individual to whom parental or guardian responsibility is delegated (e.g., teachers, providers of residential care and treatment, and providers of day care):

(a) "Physical abuse" means damaging or potentially damaging nonaccidental acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal behavior, harassment, or other actions which may result in emotional or behavioral problems, physical manifestations, disordered or delayed development.

(2) "Accredited" means approved by the joint commission on accreditation of hospitals or the bureau of hospitals of the American Osteopathic Association.

(3) "Adolescent" means an individual during that period of life beginning with the appearance of secondary sex characteristics and ending with the cessation of somatic growth.

(4) "Agent," when used in a reference to a medical order or a procedure for a treatment, means any power, principle, or substance, whether physical, chemical, or biological, capable of producing an effect upon the human body.

(5) "Alterations":

(a) "Alterations" means changes requiring construction in existing hospitals.

(b) "Minor alterations" means any physical or functional modification within existing hospitals not changing the approved use of the room or area. (Minor alterations performed under this definition do not require prior review of the department as specified in WAC 246-318-510 (3)(a); however, this does not constitute a release from other applicable requirements.)

(6) "Area" means a portion of a room containing the equipment essential to carrying out a particular function and separated from other facilities of the room by a physical barrier or adequate space, except when used in reference to a major section of the hospital.

(7) "Authenticate" means to authorize or validate an entry in a record by:

(a) A signature including first initial, last name, and discipline; or

(b) A unique identifier allowing identification of the responsible individual.

(8) "Bathing facility" means a bathtub or shower and does not include sitz baths or other fixtures designated primarily for therapy.

(9) "Birthing room" or "labor, delivery, recovery (LDR) room" or "labor-delivery-recovery-postpartum (LDRP) room" means a room designed and equipped to provide care of a woman, fetus, and newborn and to accommodate her support persons during the complete process of vaginal childbirth.

(10) "Children" means young persons of either sex between infancy and adolescence.

(11) "Clean" means space or spaces and/or equipment for storage and handling of supplies and/or equipment which are in a sanitary or sterile condition, when the word is used in reference to a room, area, or facility.

(12) "Critical care" means a special physical and functional nursing unit for the segregation, concentration, and close or continuous observation and care of patients critically, acutely, or seriously ill and in need of intensive, highly skilled services.

(13) "Department" means the Washington state department of health.

(14) "Dentist" means an individual licensed under chapter 18.32 RCW.

(15) "Diagnostic radiologic technician" means an individual:

(a) Certified or eligible for certification as a diagnostic radiologic technologist under chapter 18.84 RCW; or

(b) Trained by a radiologist and approved by a radiologist member of medical staff to perform specified diagnostic radiologic procedures.

(16) "Dialysis facility" means a separate physical and functional nursing unit of the hospital serving patients receiving renal dialysis.

(17) "Dialysis station" means an area designed, equipped, and staffed to provide dialysis services for one patient.

(18) "Dietitian" means an individual meeting the eligibility requirements for active membership in the American Dietetic Association described in *Directory of Dietetic Programs Accredited and Approved*, American Dietetic Association, edition 100, 1980.

(19) "Double-checking" means verification of patient identity, agent to be administered, route, quantity, rate, time, and interval of administration by two persons legally qualified to administer prior to administration of the agent.

(20) "Drug administration" means an act in which a single dose of a prescribed drug or biological is given to a patient by an authorized person in accordance with all laws and regulations governing such acts. The complete act of administration entails:

(a) Removing an individual dose from a previously dispensed, properly labeled container (including a unit dose container);

(b) Reviewing the label on the container with a verified transcription, a direct copy or the original medical practitioner's orders;

(c) Giving the individual dose to the proper patient; and

(d) Properly recording the time and dose given.

(21) "Drug dispensing" means an act entailing the interpretation of an order for a drug or biological and, pursuant to that order, proper selection, measuring, labeling, packaging, and issuance of the drug for a patient or for a service unit of the facility.

(22) "Easily cleanable" means of material or finish and so fabricated to allow complete removal of residue by normal cleaning methods.

(23) "Electrical receptacle outlet" means an outlet where one or more electrical receptacles are installed.

(24) "Facilities" means a room or area and equipment serving a specific function.

(25) "Faucet controls" means wrist, knee, or foot control of the water supply:

(a) "Wrist control" means water supply controls not exceeding four and one-half inches overall horizontal length designed and installed to be operated by the wrists;

(b) "Knee control" means the water supply is controlled through a mixing valve designed and installed to be operated by the knee;

(c) "Foot control" means the water supply control is through a mixing valve designed and installed to be operated by the foot.

(26) "Governing body" means the person or persons responsible for establishing the purposes and policies of the hospital.

(27) "Grade" means the level of the ground adjacent to the building measured at required windows. The ground must be level or slope downward for a distance of at least ten feet from the wall of the building. From there the ground may slope upward not greater than an average of one foot vertical to two feet horizontal within a distance of eighteen feet from the building.

(28) "Handwashing facility" means a lavatory or a sink properly designed and equipped to serve for handwashing purposes.

(29) "He, him, his, or himself" means a person of either sex, male, or female, and does not mean preference for nor exclude reference to either sex.

(30) "High-risk infant" means an infant, regardless of gestational age or birth weight, whose extrauterine existence is compromised by a number of factors, prenatal, natal, or postnatal needing special medical or nursing care.

(31) "Hospital" means any institution, place, building, or agency providing accommodations, facilities and services over a continuous period of twenty-four hours or more, for observation, diagnosis, or care of two or more individuals not related to the operator who are suffering from illness, injury, deformity, or abnormality, or from any other condition for which obstetrical, medical, or surgical services would be appropriate for care or diagnosis. "Hospital" as used in this chapter does not include:

(a) Hotels, or similar places furnishing only food and lodging, or simply domiciliary care;

(b) Clinics, or physicians' offices where patients are not regularly kept as bed patients for twenty-four hours or more;

(c) Nursing homes, as defined and which come within the scope of chapter 18.51 RCW;

(d) Maternity homes, which come within the scope of chapter 18.46 RCW;

(e) Psychiatric or alcoholism hospitals, which come within the scope of chapter 71.12 RCW; nor

(f) Any other hospital or institution specifically intended for use in the diagnosis and care of those suffering from mental illness, mental retardation, convulsive disorders, or other abnormal mental conditions.

(g) Furthermore, nothing in this chapter shall be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any hospital conducted for those who rely primarily upon treatment by prayer or spiritual means in accordance with the creed or tenets of any well-recognized church or religious denominations.

(32) "Infant" means a baby or very young child up to one year of age.

(33) "Infant station" means a space for a bassinet, incubator, or equivalent, including support equipment used for the care of an individual infant.

(34) "Intermediate care nursery" means an area designed, organized, staffed, and equipped to provide constant care and treatment for mild to moderately ill infants not requiring neonatal intensive care, but requiring or may require physical support and treatment beyond support required for a normal neonate and may include the following:

(a) Electronic cardiorespiratory monitoring;

(b) Gavage feedings;

(c) Parenteral therapy for administration of drugs; and

(d) Respiratory therapy with intermittent mechanical ventilation not to exceed a continuous period of twenty-four hours for stabilization when trained staff are available.

(35) "Investigational drug" means any article not approved for use in the United States, but for which an investigational drug application (IND) is approved by the Food and Drug Administration.

(36) "Island tub" means a bathtub placed in a room to permit free movement of a stretcher, patient lift, or wheelchair to at least one side of the tub, and movement of people on both sides and at the end of the tub.

(37) "Lavatory" means a plumbing fixture of adequate design and size for washing hands.

(38) "Legend drugs" means any drugs required by state law or regulation of the state board of pharmacy to be dispensed on prescription only or are restricted to use by practitioners only.

(39) "Licensed practical nurse," abbreviated L.P.N., means an individual licensed under provisions of chapter 18.78 RCW.

(40) "May" means permissive or discretionary on the part of the board or the department.

(41) "Medical staff" means physicians and may include other practitioners appointed by the governing body to practice within the parameters of governing body and medical staff bylaws.

(42) "Movable equipment" means equipment not built-in, fixed, or attached to the building.

(43) "Neglect" means mistreatment or maltreatment; an act or omission evincing; a serious disregard of consequences of a magnitude constituting a clear and present danger to an individual patient's health, welfare, and safety.

(a) "Physical neglect" means physical or material deprivation (e.g., lack of medical care, lack of supervision necessary for patient level of development, inadequate food, clothing, or cleanliness).

(b) "Emotional neglect" means acts such as rejection, lack of stimulation, or other acts of commission or omission which may result in emotional or behavioral problems, physical manifestations, and disordered development.

(44) "Nuclear medicine technologist" means an individual certified or eligible for certification as a nuclear medicine technologist under chapter 18.84 RCW.

(45) "Neonate" or "newborn" means a newly born infant through the twenty-seventh day of life or under twenty-eight days of age.

(46) "Neonatal intensive care nursery" means an area designed, organized, equipped, and staffed to provide constant nursing and medical care and treatment for high-risk infants who may require:

(a) Continuous ventilatory support, twenty-four hours per day;

(b) Intravenous fluids or parenteral nutrition;

(c) Preoperative and postoperative monitoring when anesthetic other than local is administered; or

(d) Cardiopulmonary or other life support on a continuing basis.

(47) "Neonatologist" means a pediatrician who is board certified in neonatal-perinatal medicine or board eligible in neonatal-perinatal medicine, provided the period of eligibility does not exceed three years, as defined and described in *Directory of Residency Training Programs by the Accreditation Council for Graduate Medical Education*, American Medical Association, 1981-1982 or the *American Osteopathic Association Yearbook and Directory*, 1981-1982.

(48) "Newborn care" means provision of nursing and medical services described by the hospital and appropriate for well and convalescing infants including supportive care, ongoing physical assessment, and resuscitation.

(49) "New construction" means any of the following:

(a) New buildings to be used as hospitals;

(b) Additions to existing buildings to be used as hospitals;

(c) Conversion of existing buildings or portions thereof for use as hospitals;

(d) Alterations.

(50) "Nursing home unit" or "long-term care unit" means a group of beds for the accommodation of patients who, because of chronic illness or physical infirmities, require skilled nursing care and related medical services but are not acutely ill and not in need of the highly technical or specialized services ordinarily a part of hospital care.

(51) "Nursing unit, general" means a separate physical and functional unit of the hospital including a group of patient rooms, ancillary and administrative, and service facilities necessary to provide nursing service to the occupants of these patient rooms. Facilities serving other areas of the hospital and creating traffic unnecessary to the functions of the nursing unit are excluded.

(52) "Observation room" means a room for close nursing observation and care of one or more outpatients for a period of less than twenty-four consecutive hours.

(53) "Obstetrical area" means the portions or units of the hospital designated or designed for care and treatment of women during the antepartum, intrapartum, and postpartum periods, and/or areas designed as nurseries for care of newborns.

(54) "Occupational therapist" means an individual licensed under the provisions of chapter 18.59 RCW.

(55) "Patient" means an individual receiving (or has received) preventive, diagnostic, therapeutic, rehabilitative, maintenance, or palliative health services at the hospital. "Outpatient" means a patient receiving services that generally do not require admission to a hospital bed for twenty-four hours or more.

(56) "Patient care areas" means all nursing service areas of the hospital where direct patient care is rendered and all other areas of the hospital where diagnostic or treatment procedures are performed directly upon a patient.

(57) "Pediatrician" means a physician:

(a) Having successfully completed a residency program approved by the American Board of Pediatrics as described in the *Directory of Residence Training Programs Accredited by the Accreditation Council for Graduate Medical Education*, American Medical Association, 1981-1982; or

(b) Approved by the American Osteopathic Board of Pediatrics as described in the *American Osteopathic Association Yearbook and Directory*, 1981-1982; and

(c) Board certified or board eligible for period not to exceed three years.

(58) "Pediatric service" means any diagnostic, treatment, or care service provided for infants, children, or adolescents.

(59) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association, and the legal successor thereof.

(60) "Pharmacist" means an individual licensed by the state board of pharmacy to engage in the practice of pharmacy under the provisions of chapter 18.64 RCW as now or hereafter amended.

(61) "Pharmacy" means the central area in a hospital where drugs are stored and are issued to hospital departments or where prescriptions are filled.

(62) "Physical barrier" means a partition or similar space divider designed to prevent splash or spray between room areas.

(63) "Physical therapist" means an individual licensed under provisions of chapter 18.74 RCW.

(64) "Physician" means an individual licensed under provisions of chapter 18.71 RCW, Physicians, or chapter 18.57 RCW, Osteopathy—Osteopathic medicine and surgery.

(65) "Physician's assistant" means an individual who is not a physician but practices medicine under provisions, rules, and regulations of chapter 18.71A RCW, or provisions, rules, and regulations under chapter 18.57A RCW.

(66) "Physician member of medical staff qualified in nuclear medicine" means a physician with staff privileges who is:

(a) Certified or eligible for certification by the American Board of Radiology (ABR) or the American Board of Nuclear Medicine (ABNM) in radiologic physics including diagnostic, therapeutic, and medical nuclear physics; and

(b) Included in the 1987-1989 list of board-certified physicians maintained by ACR Professional Bureau, 1899 Preston White Drive, Reston, VA 22091.

(67) "Prescription" means an order for drugs for a specific patient given by a licensed physician, dentist, or other individual legally authorized to write prescriptions, transmitted to a pharmacist for dispensing to the specific patient.

(68) "Protocols" and "standing order" mean written descriptions of actions and interventions for implementation by designated hospital personnel under defined circumstances and authenticated by a legally authorized person under hospital policy and procedure.

(69) "Psychiatric unit" means a separate portion of the hospital specifically reserved for the care of psychiatric patients (a part of which may be unlocked and a part locked), as distinguished from "seclusion rooms" or "security rooms" as defined in this section.

(70) "Psychiatrist" means a physician having successfully completed a three-year residency program in psychiatry and is eligible for certification by the American Board of Psychiatry and Neurology as described in the *Directory of Residency Training Programs Accredited by the Accreditation Council for Graduate Medical Education*, American Medical Association, 1981-1982, or eligible for certification by the American Osteopathic Board of Neurology and Psychiatry as described in the *American Osteopathic Association Yearbook and Directory*, 1981-1982.

(71) "Psychologist" means an individual licensed as a psychologist in the state of Washington under provisions of chapter 18.83 RCW.

(72) "Radiation oncologist" means a physician who successfully completed an approved residency program in therapeutic radiology and is either board certified or eligible for board certification in radiation oncology by:

(a) The American Board of Radiology described under *Directory of Residency Programs Accredited by the Accreditation Council for Graduate Medical Education*, American Medical Association, 1981-82, with:

(i) Certification in use of both external and brachytherapy techniques; and

(ii) Continuing education requirements of the board met; or

(b) The American Osteopathic Board of Radiology described in the *American Osteopathic Association Yearbook and Directory*, 1981-82 with:

(i) Certification in use of both external and brachytherapy techniques; and

(ii) Continuing education requirements of the board met.

(73) "Radiologist" means a physician who is board certified or eligible for certification in radiology and meeting continuing education requirements of:

(a) The American Board of Radiology described under *Directory of Residency Programs Accredited by the Accreditation Council for Graduate Medical Education*, American Medical Association, 1981-82; or

(b) The American Osteopathic Board of Radiology described under *American Osteopathic Association Yearbook and Directory*, 1981-82.

(74) "Recreational therapist" means an individual with a bachelors degree including a major or option in therapeutic recreation or recreation for the ill and handicapped.

(75) "Recovery unit" means a special physical and functional unit for the segregation, concentration, and close or continuous nursing observation and care of patients for a period of less than twenty-four hours immediately following anesthesia, obstetrical delivery, surgery, or other diagnostic or treatment procedures which may produce shock, respiratory obstruction or depression, or other serious states.

(76) "Referred outpatient diagnostic service" means a service provided to an individual receiving medical diagnosis, treatment, and other health care services from one or more sources outside the hospital limited to diagnostic tests and examinations:

(a) Not involving administration of a parenteral injection, the use of a local or general anesthesia or the performance of a surgical procedure; and

(b) Ordered by a health care practitioner, legally permitted to order such tests and examinations, to whom the hospital reports the findings and results of the tests and examinations.

(77) "Registered nurse" means an individual licensed under the provisions of chapter 18.88 RCW and practicing in accordance with the rules and regulations promulgated thereunder.

(78) "Restraint" means any apparatus used for the purpose of preventing or limiting free body movement. This shall not be interpreted to include a safety device as defined herein.

(79) "Room" means a space set apart by floor-to-ceiling partitions on all sides with proper access to a corridor and with all openings provided with doors or windows.

(80) "Rooming-in" means an arrangement for mother and infant to room together with provision for family interaction within the hospital setting.

(81) "Safety device" means a device used to safeguard a patient who, because of developmental level or condition, is particularly subject to accidental self-injury.

(82) "Seclusion room" means a small, secure room specifically designed and organized to provide for temporary placement, care, and observation of one patient and further providing an environment with minimal sensory stimuli, maximum security and protection, and visualization of the patient by authorized personnel and staff. Doors of seclusion rooms shall be provided with staff-controlled locks. There shall be security relites in the door or equivalent means affording visibility of the occupant at all times. Inside or outside rooms may be acceptable.

(83) "Security room" means a patient sleeping room designed, furnished, and equipped to provide maximum safety and security, including window protection or security windows and a lockable door with provision for observation of room occupant.

(84) "Self-administration of drugs" means a patient administering or taking his or her own drugs from properly labeled containers: *Provided*, That the facility maintains the responsibility for seeing the drugs are used correctly and the patient is responding appropriately.

(85) "Sensitive area" means a room used for surgery, obstetrical delivery, nursery, post-anesthesia recovery, special procedures where invasive techniques are used, or critical care including, but not limited to, intensive and cardiac care.

(86) "Shall" means compliance is mandatory.

(87) "Should" means a suggestion or recommendation, but not a requirement.

(88) "Sinks":

(a) "Clinic service sink (siphon jet)" means a plumbing fixture of adequate size and proper design for waste disposal with siphon jet or similar action sufficient to flush solid matter of at least two and one-eighth inch diameter.

(b) "Scrub sink" means a plumbing fixture of adequate size and proper design for thorough washing of hands and arms, equipped with knee, foot, electronic, or equivalent control, and gooseneck spout.

(c) "Service sink" means a plumbing fixture of adequate size and proper design for filling and emptying mop buckets.

(89) "Social worker" means an individual holding a masters degree in social work from a graduate school of social work approved by the council on social work education.

(90) "Soiled" (when used in reference to a room, area, or facility) means space and equipment for collection or cleaning of used or contaminated supplies and equipment or collection or disposal of wastes.

(91) "Stretcher" means a four-wheeled cart designed to serve as a litter for the transport of an ill or injured individual in a horizontal or recumbent position.

(92) "Surgical procedure" means any manual or operative procedure performed upon the body of a living human being for the purpose of preserving health, diagnosing or curing disease, repairing injury, correcting deformity or defect, prolonging life or relieving suffering, and involving any of the following:

(a) Incision, excision, or curettage of tissue or an organ;

(b) Suture or other repair of tissue or an organ including a closed as well as an open reduction of a fracture;

(c) Extraction of tissue including the premature extraction of the products of conception from the uterus; or

(d) An endoscopic examination with use of a local or general anesthesia.

(93) "Therapeutic radiologic technologist" means an individual certified or eligible for certification as a therapeutic radiologic technologist under chapter 18.84 RCW.

(94) "Through traffic" means traffic for which the origin and destination are outside the room or area serving as a passageway.

(95) "Toilet" means a room containing at least one water closet.

(96) "Tuberculous patient" means an individual receiving diagnostic or treatment services because of suspected or known tuberculosis.

(97) "Water closet" means a plumbing fixture for defecation fitted with a seat and device for flushing the bowl of the fixture with water.

(98) "Window" means a glazed opening in an exterior wall.

(a) "Maximum security window" means a window that can only be opened by keys or tools under the control of personnel. The operation shall be restricted to prohibit escape or suicide. Where glass fragments may create a hazard, safety glazing and other appropriate security features shall be incorporated. Approved transparent materials other than glass may be used.

(b) "Relite" means a glazed opening in an interior partition between a corridor and a room or between two rooms to permit viewing.

(c) "Security window" means a window designed to inhibit exit, entry, and injury to a patient, incorporating approved, safe transparent material.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-18-001, filed 11/30/90, effective 12/31/90; 89-22-106 (Order 010), § 248-18-001, filed 11/1/89, effective 12/2/89; 88-18-021 (Order 2680), § 248-18-001, filed 8/30/88. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-18-001, filed 3/20/86. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-17-077 (Order 275), § 248-18-001, filed 8/16/84; 83-19-058 (Order 269), § 248-18-001, filed 9/20/83; 83-01-003 (Order 245), § 248-18-001, filed 12/2/82. Statutory Authority: RCW 70.41.030. 81-05-029 (Order 209), § 248-18-001, filed 2/18/81; Order 135, § 248-18-001, filed 12/6/76; Order 119, § 248-18-001, filed 5/23/75; Order 106, § 248-18-001, filed 1/13/75; Order 91, § 248-18-001, filed 10/3/73; Order 83, § 248-18-001, filed 4/9/73; Order 50, § 248-18-001, filed 12/17/70; Regulation 18.001, effective 3/11/60.]

WAC 246-318-013 License expiration dates—Notice of decision—Adjudicative proceeding. (1) The department shall issue hospital licenses initially and reissue hospital licenses as often thereafter as necessary to stagger license expiration dates throughout the calendar year so as to cause approximately one-twelfth of the total number of hospital licenses to expire on the last day of each month, but no license issued pursuant to this chapter shall exceed thirty-six months in duration. If there is failure to comply with the provisions of chapter 70.41 RCW or this chapter, the department may, in its discretion, issue a provisional license to permit the operation of the hospital for a period of time to be determined by the department.

(2) The department may deny, suspend, modify, or revoke a license for cause.

(3)(a) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest a license decision.

(b) A license applicant or holder contesting a department license decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and
(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-013, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-013, filed

12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.41.030. 90-06-019 (Order 039), § 248-18-015, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 82-24-002 (Order 249), § 248-18-015, filed 11/18/82; Order 119, § 248-18-015, filed 5/23/75; Order 69, § 248-18-015, filed 1/13/72.]

WAC 246-318-015 Exemptions and interpretations.

(1) If a hospital that is required to be licensed under this act does not normally provide a particular service or department, the section or sections of these regulations relating to such service or department will not be applicable.

(2) The department may, in its discretion, exempt certain hospitals from complying 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 placing the safety or health of the patients in the hospitals involved in jeopardy.

(3) The secretary of the department or his or her designee may, upon written application of a hospital, allow the substitution of procedures, materials, or equipment for those specified in these regulations when such procedures, materials, or equipment have been demonstrated to his or her satisfaction to be at least equivalent to those prescribed. The secretary or his or her designee shall send a written response to a hospital which has applied for approval of a substitution. The response shall approve or disapprove the substitution and shall be issued within thirty working days after the department has received all the information necessary to the review of the application.

(4) A hospital may, upon submission of a written request to the secretary of the department or his or her designee, obtain an interpretation of a rule or regulation contained in this chapter. The secretary or his or her designee shall, in response to such a request, send a written interpretation of the rule or regulation within thirty working days after the department has received complete information relevant to the requested interpretation.

(5) A copy of each exemption or substitution granted or interpretation issued pursuant to the provisions of this section shall be reduced to writing and filed with the department and the hospital.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-015, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-015, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-010, filed 5/30/90, effective 6/30/90. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-18-010, filed 3/20/86. Statutory Authority: RCW 70.41.30 [70.41.030]. 81-05-029 (Order 209), § 248-18-010, filed 2/18/81; Order 142, § 248-18-010, filed 2/8/77; Order 119, § 248-18-010, filed 5/23/75; Order 50, § 248-18-010, filed 12/17/70; Order 22, § 248-18-010, filed 6/27/69; Order 10, § 248-18-010, filed 1/2/69; Regulation 18.010, effective 3/11/60; Subsection (3), filed 2/17/61.]

WAC 246-318-017 Single license to cover two or more buildings—When permissible. When an applicant and the hospital facility for which such application is submitted meet the licensure requirements of chapter 70.41 RCW and this chapter, the department may issue a single hospital license to include two or more buildings, provided:

(1) The licensee shall operate the multiple buildings as a single integrated system.

(a) All buildings or portions of buildings under a single license shall be governed by a single governing body and under administrative control of a single administrator, and

(b) All hospital facilities operating under a single license shall have a single medical staff.

(2) Buildings connected by a heated, enclosed passageway are considered a single building and the passageway shall be constructed and maintained to permit the safe transfer of patients, equipment, and supplies.

(3) Safe, appropriate, and adequate transport of patients between buildings shall be provided.

(4) Hospital buildings included under one license shall not be located more than ten surface miles apart.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-017, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-017, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 85-23-020 (Order 2305), § 248-18-017, filed 11/13/85; Order 119, § 248-18-017, filed 5/23/75.]

WAC 246-318-018 Hospital license to cover attached nursing home building—When permissible. A building meeting the requirements of this chapter and which has been approved by the department of social and health services as a nursing home may be licensed as a part of a hospital by means of a hospital license rider provided:

(1) The hospital makes application for license of the nursing home facility as a part of the hospital;

(2) The hospital and nursing home facility organization, administration and operation are integrated;

(3) The nursing home facility is connected to the hospital by an enclosed, heated passageway which has been approved by the department for the transport of patients, equipment and supplies; and

(4) The hospital establishes and maintains a mechanism whereby placement and retention of patients in the nursing home facility are reviewed by a professional group representative of the hospital's administrative, medical and nursing staffs to assure that use of the nursing home facility is limited to patients who require nonacute, convalescent or chronic care only.

And further provided that where requirements of this chapter affecting only the maintenance and operation of the nursing home facility are in conflict with this chapter, then such conflicts may be resolved by each hospital individually: *Provided*, That maintenance and operation of the facility meet either chapter 248-14 WAC or or this chapter.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-018, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-018, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-018, filed 5/30/90, effective 6/30/90; Order 119, § 248-18-018, filed 5/23/75.]

WAC 246-318-020 Approval of plans. (1) Plans and specifications for new construction other than minor alterations, shall be prepared by or under the direction of an architect duly registered in the state of Washington. It is strongly recommended that a narrative description of any proposed construction or alterations be submitted to the department prior to the preparation of any preliminary drawings.

(2) All new construction, other than minor alterations, shall be done in accordance with at least the specific minimum requirements of the department covering new construction in hospitals, including submission of preliminary plans and the submission and approval of final working drawings and specifications.

(3) Compliance with these standards and regulations does not relieve the hospital of the need to comply with applicable state and local building and zoning codes.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-020, filed 5/30/90, effective 6/30/90; Order 119, § 248-18-020, filed 5/23/75; Regulation 18.020, effective 3/11/60.]

WAC 246-318-025 Required approval for occupancy after completion of new construction. (1) Prior to occupancy and use of a building or any room or other portion of a building constituting the whole or part of a new construction project, a hospital shall have obtained written authorization for such occupancy from the department.

(2) The hospital shall notify the department when either of the following has been substantially completed: An entire new construction project, or any room or other portion of a new construction project the hospital plans to occupy before the entire new construction project is finished.

(3) The department shall authorize occupancy if the new construction has been completed in accordance with this chapter and the department has received written approval of such occupancy from the state fire marshal.

(4) The department may authorize occupancy of a building or any room or other portion of a building when the new construction is deficient in relation to this chapter: *Provided*, That the department has determined, after thorough investigation and consideration, the deficiencies will not impair services to patients or otherwise jeopardize the safety or health of patients, the hospital has provided written assurance of completion or correction of deficient items within a period of time acceptable to the department, and the department has received written approval of such occupancy from the state fire marshal.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-025, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-025, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050, 82-13-084 (Order 230), § 248-18-025, filed 6/22/82; Order 123, § 248-18-025, filed 3/18/76.]

WAC 246-318-030 Governing body and administration. (1) The hospital shall have a governing body responsible for adoption of policies concerning the purposes, operation and maintenance of the hospital, including safety, care, and treatment of patients.

(2) The hospital governing body shall:

(i) Provide personnel, facilities, equipment, supplies, and services to meet the needs of patients within the purposes of the hospital.

(ii) Appoint an administrator responsible for implementing the policies adopted by the governing body.

(iii) Have authority and responsibility for the appointment and periodic reappointment of the medical staff.

(iv) Require medical staff accountability to the governing body through approval under the medical staff organization bylaws and rules as applied by the governing body.

(v) Require evidence that each individual granted clinical privileges pursuant to medical staff bylaws has appropriate and current qualifications.

(vi) Require that each person admitted to the hospital is under the care of a member of the medical staff possessing clinical privileges.

(3) The hospital shall establish and maintain a coordinated program for identification and prevention of malpractice according to RCW 70.41.200 to include:

(a) Quality assurance committee including at least one member of the governing body with functions described in RCW 70.41.200;

(b) Policies, procedures, systems, and practices to comply with RCW 70.41.200 related to:

(i) Medical staff privileges sanction and individual physician review.

(ii) Review of qualifications of persons delivering care in the hospital.

(iii) Resolution of grievances by patients.

(iv) Continuous collection of information related to negative health care outcomes and injuries to patients.

(v) Education programs and compliance with reporting requirements of RCW 70.41.200.

(vi) Access by medical and osteopathic licensing and disciplinary boards to appropriate records of hospital decisions on restriction or termination of physician privileges.

(4) Each hospital shall develop procedures for identifying potential organ and tissue donors as required in RCW 68.08.650.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-020 (Order 2463), § 248-18-031, filed 1/13/87. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-17-077 (Order 275), § 248-18-031, filed 8/16/84.]

WAC 246-318-033 Medical staff. (1) There shall be a medical staff appointed by the governing body.

(2) Medical staff bylaws, rules, and regulations shall be subject to approval by the governing body. These bylaws and rules shall include qualifications for medical staff membership, procedures for delineation of hospital specific clinical privileges, and organization of the medical staff.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-033, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-17-077 (Order 275), § 248-18-033, filed 8/16/84.]

WAC 246-318-035 Infection control program. Each hospital shall maintain an effective hospital wide program for the surveillance, prevention, and control of infection including:

(1) Designation of an infection control committee to oversee the program with:

(a) Multidisciplinary membership on the committee including representatives from medical staff, nursing, administration, and persons directly responsible for management of the infection control program;

(b) Description of the program approved by the committee and including surveillance, prevention, and control activities;

(c) Delegation of authority, approved in writing by administrative and medical staff, to institute surveillance, prevention, and control measures when there is reason to believe any patient or personnel may be at risk of infection;

(d) Regularly scheduled meetings at least quarterly;

(e) Maintenance of written minutes and reports of findings presented during committee meetings; and

(f) A method for forwarding recommendations to the medical staff, nursing, administration, quality assurance, and other committees and departments as appropriate.

(2) Management of the infection control program by one or more persons with documented evidence of qualifications related to infection surveillance, prevention, and control including:

(a) Education;

(b) Training;

(c) Certification; or

(d) Supervised experience.

(3) Establishing the following components of the infection control program:

(a) Review of patient and personnel infections, as appropriate, to determine whether an infection is nosocomial using definitions and criteria established by the committee;

(b) Written policies and procedures describing the types of surveillance carried out to monitor:

(i) Rates of nosocomial infections;

(ii) Systems used to collect and analyze data; and

(iii) Activities to prevent and control infections;

(c) A system for reporting communicable diseases and following requirements under chapter 246-100 WAC, Communicable and certain other diseases;

(d) A procedure for reviewing and approving infection control aspects of policies and procedures used in each area of the hospital;

(e) Provision of consultation regarding patient care practices, equipment, and supplies influencing risk of infection;

(f) Provision of consultation regarding appropriate procedures and products used for cleaning, disinfection, and sterilization;

(g) Provision of information on infection control for orientation and in-service education of employees, and nonemployees performing direct patient care;

(h) Development of recommendations, consistent with federal, state, and local laws and rules, on methods for the proper disposal to prevent unsafe or unsanitary conditions related to:

(i) Sewage;

(ii) Solid and liquid wastes; and

(iii) Infectious wastes including safe management of sharps;

(i) Defining indications for specific precautions to prevent transmission of infections;

(j) Coordinating of or cooperating with the employee health activities relating to control of hospital exposure and transmission of infections to or from employees and others performing patient services;

(k) Designing and monitoring of the physical environment of the hospital for infectious disease control.

(4) Provision of the following in any hospital providing inpatient services for tuberculous patients:

(a) Designated patient rooms for patients with suspected or known infectious tuberculosis including:

(i) Ventilation to maintain a negative pressure condition in each patient room relative to adjacent spaces, except bath and toilet areas with:

(A) Air movement or exhaust from the patient room to the out-of-doors;

(B) Ventilation at the rate of six air changes per hour, exhaust; and

(C) Make-up or supply air from adjacent ventilated spaces permitted only when a minimum of two air changes is tempered with outside air;

(ii) Ultraviolet generator irradiation as follows:

(A) Use of ultraviolet fluorescent fixtures with lamps emitting wave length of 253.7 nanometers to irradiate ceiling and upper space of patient room;

(B) The average reflected irradiance approximately 0.2 microwatts per square centimeter in the room at the five foot level;

(C) Fixture installation conforming to the recommendations of the Illuminating Engineering Society Handbook, 5th edition, section 25, "Ultraviolet Energy";

(D) Lamps changed as recommended by the manufacturer;

(b) Transfer of discharge information to the health department of the patient's county of residence;

(c) Mantoux tuberculin skin testing of employees in contact with infectious tuberculosis cases within one year of contact if regularly working in areas described under subsection (4)(a)(i) and (ii) of this section.

(d) Tuberculin skin testing employees as required by the local health officer or the department for contact investigations. Positive skin tests for contact investigations are 5 mm induration read at forty-eight to seventy-two hours.

(5) Implementation of a human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) education plan including:

(a) Verifying or arranging for appropriate education and training of personnel on the prevention, transmission, and treatment of HIV and AIDS consistent with RCW 70.24.310; and

(b) Use of infection control standards and educational material consistent with the department-approved curriculum manual KNOW - HIV/AIDS, Prevention Education for Health Care Facility Employees, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-035, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-035, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 90-24-044 (Order 115), § 248-18-035, filed 11/30/90, effective 12/31/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 89-21-039 (Order 4), § 248-18-035, filed 10/12/89, effective 11/12/89; Order 119, § 248-18-035, filed 5/23/75; Order 107, § 248-18-035, filed 1/13/75.]

WAC 246-318-040 Personnel. (1) Hospitals shall employ sufficient qualified personnel to operate each department of the hospital with verification of required license, certification, or registration.

(2) Hospitals shall ensure that nonemployees providing direct patient care comply with hospital policies and procedures.

(3) Hospitals shall establish written job descriptions for each job classification, minimally including:

(a) Job title, reporting relationships, summary of duties and responsibilities, and qualifications; and

(b) Provisions for review every two years with revision when necessary.

(4) Hospitals shall:

(a) Ensure a periodic performance appraisal of employees and volunteers related to:

(i) Satisfactory performance of assigned tasks; and

(ii) Competence in delivering health care services;

(b) Document background checks required under RCW 43.43.830 through 43.43.842 for all prospective employees and volunteers who may have regularly scheduled unsupervised access to:

(i) Children under sixteen years of age;

(ii) Groups of children under certain circumstances;

(iii) The elderly;

(iv) The developmentally disabled;

(v) Individuals declared mentally incompetent or unable to participate in consent to care given; and

(vi) Others as required under chapter 43.43 RCW;

(c) Designate an employee responsible for volunteer services and activities;

(d) Plan and implement orientation and education programs minimally to include:

(i) New employee and volunteer orientation for:

(A) Organizational structure;

(B) Building layout;

(C) Infection control;

(D) Safety, including the fire and disaster plan;

(E) Policies and procedures; and

(F) Equipment pertinent to the job;

(ii) Employee continuing education for maintaining and improving skills;

(iii) Documentation of orientation, in-service, and continuing education for employees; and

(iv) HIV/AIDS training for employees as specified under WAC 246-318-035;

(e) Establish a nursing service under the direction of a registered nurse to:

(i) Provide for adequate numbers of registered nurses on duty at all times; and

(ii) Require registered nurse supervision of employees and others performing nursing service functions;

(f) Ensure adequate supervision of employees and nonemployees;

(g) Maintain a current employee call back list for disasters;

(h) Require each employee to have on employment a tuberculin skin test by the Mantoux method within thirty days of employment and as follows:

(i) For new employees, a negative skin test is defined as less than ten millimeters of induration read at forty-eight to seventy-two hours. Employees with negative reactions to the first test and thirty-five years of age or older shall have a second test one to three weeks after the first test;

(ii) New employees with positive reactions to either test shall have a chest x-ray within thirty days. Hospitals shall:

(A) Retain records of test results, reports of x-ray findings, exceptions, or exemptions in the facility; and

(B) Provide a copy of test results to the employee;

(iii) Exclude from skin testing:

(A) New employees documenting a positive Mantoux test in the past;

(B) New employees providing documentation of meeting requirements under subsection (4)(h)(i) and (ii) of this section within the six months preceding the date of employment; and

(C) An employee with a written waiver from the department after stating the tuberculin skin test by the Mantoux method presents a hazard to his or her health and presenting supportive medical data to the department tuberculosis control program;

(i) Document the following when individuals request tuberculosis skin test waivers from the department:

(i) Department notification of the individual requesting a waiver from tuberculosis skin testing and department decision; and

(ii) Department advice to the individual employee and the hospital regarding department screening requirements if a waiver is granted.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 90-24-044 (Order 115), § 248-18-040, filed 11/30/90, effective 12/31/90; 86-08-086 (Order 2362), § 248-18-040, filed 4/2/86. Statutory Authority: RCW 70.41.030 and 43.20.050, 82-24-003 (Order 250), § 248-18-040, filed 11/18/82. Statutory Authority: RCW 43.20.050, 80-02-003 (Order 191), § 248-18-040, filed 1/4/80; Order 121, § 241-18-040, filed 9/18/75; Order 119, § 248-18-040, filed 5/23/75; Order 91, § 248-18-040, filed 10/3/73; Order 76, § 248-18-040, filed 1/9/73; Regulation 18.040, effective 3/11/60.]

WAC 246-318-050 Water supply. (1) There shall be an adequate supply of hot and cold water under pressure which conforms to the quality standards of the department.

(2) Hot water supplied for bathing and handwashing purposes shall be at a safe temperature.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-050, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-055, filed 5/23/75.]

WAC 246-318-060 Plumbing. The water supply plumbing, the fixtures, and the waste and drainage system of the hospital shall be maintained so as to avoid insanitary conditions.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 79-04-004 (Order 175), § 248-18-060, filed 3/9/79; Order 119, § 248-18-060, filed 5/23/75; Regulation 18.060, effective 3/11/60.]

WAC 246-318-070 Staff facilities. (1) Adequate and conveniently located toilet and lavatory facilities shall be provided for employees separate from patient facilities.

(2) Paper towels in a satisfactory dispenser or some other acceptable type of single use towels and a satisfactory receptacle for used towels shall be provided at all plumbing fixtures used for handwashing.

(3) Dressing rooms for surgical, delivery, and nursery department personnel should be provided within these areas to facilitate changing to scrub uniforms.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-070, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-070, filed 5/23/75; Regulation 18.070, effective 3/11/60.]

WAC 246-318-080 Storage. There shall be a sufficient amount of suitable storage space throughout the hospital for all supplies and equipment.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-080, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-080, filed 5/23/75; Regulation 18.080, effective 3/11/60.]

WAC 246-318-090 Heating. All heating systems shall be maintained and operated in a manner to provide a comfortable temperature for patients and personnel.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 79-04-004 (Order 175), § 248-18-090, filed 3/9/79; Order 119, § 248-18-090, filed 5/23/75; Regulation 18.090, effective 3/11/60.]

WAC 246-318-100 Lighting and wiring. All usable rooms and areas of the hospital shall be lighted adequately by natural and/or artificial light. Appropriate electrical service shall be provided in all areas of the hospital adequate to meet the electrical demand of the equipment or fixtures used in these areas.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-100, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-100, filed 5/23/75; Regulation 18.100, effective 1/11/61.]

WAC 246-318-110 Emergency light and power. (1) Flashlights or battery-operated lamps shall be available to employees and kept in operating condition.

(2) Adequate emergency lighting and power shall be available.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 79-04-081 (Order 176), § 248-18-110, filed 4/2/79; Order 119, § 248-18-110, filed 5/23/75; Regulation 18.110, effective 3/11/60.]

WAC 246-318-120 Ventilation. All patient rooms, all rooms in which personnel routinely work and the rooms which, because of use, might have objectionable odors and/or excessive condensation shall be adequately ventilated by windows, ducts or mechanical means.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-120, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-120, filed 5/23/75; Regulation 18.120, effective 1/11/61.]

WAC 246-318-130 Corridors and doors. (1) Corridor and door widths shall be adequate to permit the free movement of patients on standard size wheeled stretchers.

(2) Doors shall not swing into the corridors so as to constitute a hazard.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-130, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-130, filed 5/23/75; Regulation 18.130, effective 3/11/60.]

WAC 246-318-135 Carpets. (1) Carpets may be used in the following nonpatient occupied areas: Administrative areas; lobbies, lounges; waiting area; chapels, nurses' station; dining rooms; corridors; equipment alcoves opening onto

carpeted corridors. Carpets may be used in other areas only upon written approval of such use by the department.

(2) Carpets may be used in the following patient occupied areas: Patient rooms (excluding toilets and bathrooms); coronary care units; recovery rooms (not within surgical suites); labor rooms (not within delivery suites); corridors within patient occupied areas; dayrooms; equipment alcoves opening onto carpeted corridors. Carpets may be used in other areas only upon written approval of such use by the department. Carpets should not be used in dialysis units or wet patient care areas.

(3) Specifications for carpeting in the above patient occupied areas and nonpatient occupied areas:

(a) Fiber and pads which meet the standards of state and local fire codes are acceptable provided the fiber is easily cleanable.

(b) Carpets shall be constructed or treated to prevent or reduce static electricity build up.

(4) The installation of carpets shall be such as to assure the safety of patients, staff and visitors.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-135, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-004 (Order 175), § 248-18-135, filed 3/9/79; Order 119, § 248-18-135, filed 5/23/75; Order 9, § 248-18-135, filed 1/2/69; Regulation 18.135, filed 8/4/67.]

WAC 246-318-140 Stairways, ramps, and elevators.

(1) When vertical transportation of patients is necessary, adequate elevators or ramps shall be provided.

(2) All stairways and ramps shall have nonskid surfaces.

(3) Stairways and ramps shall have handrails on both sides.

(4) Open stairs and ramps shall have adequate protection.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-140, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-140, filed 5/23/75; Regulation 18.140, effective 3/11/60.]

WAC 246-318-150 Maintenance. (1) The hospital, its component parts, facilities, and equipment shall be kept clean and in good repair and be maintained with consideration for the safety and well-being of the patients, staff, and visitors. The maintenance department shall function in accordance with written hospital policies and procedures.

(2) Responsibility for maintenance shall be delegated to qualified personnel familiar with the hospital's equipment and/or systems. Personnel policies, job descriptions, records of orientation and in-service training shall be documented.

(3) A scheduled preventive maintenance program with a system of equipment identification shall be established for patient care and physical plant equipment.

(a) Equipment shall be kept clean, calibrated, adjusted, and in good repair.

(b) A written plan shall define the inspection and inspection interval for items and/or categories of equipment. Records shall be maintained to reflect the dates of inspection and maintenance of equipment and the name of the person who did the inspection.

(4) Written procedures shall specify the action to be taken in the event of failure of essential equipment and major utility services. The written procedures shall include

a system for summoning essential personnel and outside assistance when required.

(5) Manufacturer's specifications, maintenance and operation procedures appropriate for the hospital's maintenance policies should be retained and filed for access and reference.

(6) Written procedures shall specify areas and equipment requiring specific infection control measures.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-150, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-004 (Order 175), § 248-18-150, filed 3/9/79; Order 119, § 248-18-150, filed 5/23/75; Order 9, § 248-18-150, filed 1/2/69; Regulation 18.150, filed 8/4/67; Regulation 18.150, effective 3/11/60.]

WAC 246-318-155 Housekeeping. (1) A safe and sanitary environment shall be maintained for all areas of the hospital through the use of sufficient personnel, equipment and procedures.

(2) Adequate, clean housekeeping equipment shall be provided and maintained to meet the needs of the hospital. Carpet vacuum equipment used in patient occupied areas must be equipped with a fine particle retention filter.

(3) Written policies and procedures shall specify daily and periodic cleaning schedules and routines and cleaning between occupancies. There shall be written policies and procedures for cleaning of isolation rooms and other specialized areas.

(4) There shall be effective, safe cleaning and disinfecting agents used with written procedures available.

(5) An effective insect and rodent control program shall be maintained.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-155, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-004 (Order 175), § 248-18-155, filed 3/9/79.]

WAC 246-318-160 Laundry. (1) The laundry and linen service shall have adequate space and equipment for storage, sorting and processing of clean and soiled linen/laundry.

(a) Separation between clean and soiled linen/laundry shall be maintained during sorting, processing, transporting, and storage of linen/laundry.

(b) Soiled and clean linen/laundry shall be handled in a way which minimizes contamination risks.

(i) Soiled linen/laundry from isolation and septic surgical cases shall be bagged and marked for special handling.

(ii) There shall be an adequate supply of hot water at a minimum temperature of 160 degrees F.; 71.1 degrees C., with use of appropriate disinfecting agents.

(c) Procedures shall be established to provide for clean linen/laundry free of toxic residues.

(2) The hospital shall maintain an adequate supply of linen/laundry through a linen/laundry control system.

(3) A clean and safe environment with adequate ventilation and lighting shall be maintained.

(a) Positive clean air flow shall be maintained in clean linen/laundry areas which are within the laundry.

(b) Negative soiled air flow shall be maintained in soiled linen/laundry areas which are within the laundry.

(c) Chemical or soap product containers shall be clearly labeled.

(d) The use and precautionary procedures shall be defined and posted for chemical agents and soap products.

(4) The laundry and linen service shall be adequately staffed.

(a) Orientation and in-service, including infection control and safe laundry practices, shall be provided for laundry and linen service personnel.

(b) Written policies and procedures shall specify scheduled activities and routines of personnel working in the laundry and/or linen areas.

(5) If contracted services are used, the hospital shall insure that all requirements, except requirements in subsection (4) of this section, are met through:

(a) An annual on-site visit (inspection), of the complete physical plant(s) of any contract laundry which provides any service to or for the hospital shall be conducted by (a) member(s) of the hospital infection control committee (or the equivalent designated committee). This annual visit (inspection), as a minimum requirement, shall be done by that member of the hospital infection control committee (or equivalent designated committee), who has the most expertise in the field of infection control and shall be documented by that committee in a record which the hospital shall retain.

(b) A written agreement between the hospital and any facility which provides laundry services to and for the hospital requiring that applicable provisions of this section (see subsection (5) of this section), be met by the laundry provider, and allowing for immediate termination of the contract for failure to comply with any of the applicable provisions hereof, provided this subsection shall not be effective relative to any contract which was in existence prior to the effective date of this subsection, provided, however, that no such contract may be extended, renewed or otherwise held in effect beyond its termination date, as stated on the effective date hereof.

(c) The hospital which uses contract laundry services shall meet the requirements specified in subsection (4) of this section, as applicable, for any hospital employees who are involved with distribution, handling or storage of the linen/laundry, whether cleaned or soiled.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-160, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-081 (Order 176), § 248-18-160, filed 4/2/79; Order 119, § 248-18-160, filed 5/23/75; Regulation 18.160, effective 3/11/60.]

WAC 246-318-170 Sewage, garbage, and waste. (1)

All sewage, garbage, refuse, and liquid wastes shall be collected and disposed of in a manner to prevent the creation of an unsafe or insanitary condition or nuisance.

(2) Contaminated dressings, used dressings, surgical and obstetrical wastes, and other similar materials shall be handled in a satisfactory manner and finally disposed of in an incinerator or by another approved method.

(3) Procedures shall be developed which specify the safe disposal of needles, knife blades, chemicals, and other potentially dangerous wastes.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-170, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-004 (Order 175), § 248-18-170, filed 3/9/79; Order 119, § 248-18-170, filed 5/23/75; Regulation 18.170, effective 3/11/60.]

WAC 246-318-180 Dietary and/or food service. Each hospital shall have an organized dietary and/or food service.

(1) There shall be a designated individual responsible for management of dietary and/or food service. Personnel from dietary and/or food service shall be present in the hospital during all patient meal times.

(2) The dietary and/or food service shall incorporate the ongoing and regularly scheduled input of a dietitian. A dietitian shall be responsible for developing policies and procedures for adequate nutritional and dietary consultation services for patients and food service. Patient consultation shall be documented in the medical record.

(3) At least three scheduled meals a day shall be served at regular intervals with not more than fifteen hours between the evening meal and breakfast. Snacks of nourishing quality shall be available at all times.

(4) Meals and nourishments shall provide a variety of food of sufficient quantity and quality to meet the nutritional needs of each patient. Unless contraindicated, *Recommended Dietary Allowances*, Ninth edition, 1980, the Food and Nutrition Board of the National Research Council, adjusted for activity, shall be used.

(5) Written menus shall be planned in advance and approved by a dietitian. Substitutes shall be of similar nutritional value, as approved by a dietitian. A record of the planned menus, with substitutions as served, shall be retained for one month.

(6) There shall be written orders (by an authorized individual) for all patient diets. Diets shall be prepared and served as prescribed. A current diet manual, approved in writing by the dietitian and medical staff, shall be used for planning and preparing diets.

(7) Food service sanitation shall be in compliance with chapter 246-215 WAC Food service sanitation, except for WAC 246-215-149.

(8) There shall be current written policies and procedures to include safety, infection control, food acquisition, food storage, food preparation, management of food not provided or purchased by dietary/food service, serving of food, and scheduled cleaning of all food service equipment and work areas.

(9) There shall be current written policies and procedures, with documentation of orientation and inservice, of dietary and food service employees.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-180, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-180, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-07-048 (Order 257), § 248-18-180, filed 3/18/83; Order 119, § 248-18-180, filed 5/23/75; § 248-18-180, filed 12/6/67; Regulation 18.180, effective 3/11/60.]

WAC 246-318-190 Patient care services, general.

(1) Policies, procedures, and techniques.

(a) Hospitals shall establish written policies and procedures which specify the criteria for admission of patients to general and specialized patient care service areas and conditions requiring transfer. These policies and procedures shall be based upon the availability of sufficient and appropriate personnel, space, equipment, and supplies to provide care and treatment of patients.

(b) There shall be written patient care policies and procedures designed to guide personnel. The policies and procedures should be reviewed at least one time every two years, revised as necessary, and approved in writing by appropriate representatives of the administrative, medical, and nursing service.

(c) There shall be procedures and provision for personnel to gain immediate access to patient rooms, toilets, showers, and bathrooms should any emergency occur to a patient in any one of these areas.

(d) The hospital shall establish safety policies and procedures for the care of all patients with special consideration for patients who because of age or condition are not responsible for his or her acts.

(e) There shall be policies and procedures addressing protection of patients from assault, abuse, and neglect. All patient care personnel and staff should be oriented and educated regarding preventing and reporting abuse of patients.

(f) Written policies and procedures shall address immediate actions or behaviors of personnel and staff when patient behavior indicates that he or she is assaultive, out of control, or destructive.

(g) Adequate nursing care shall be provided to all patients:

(i) A patient care plan and/or nursing care plan shall be developed by or in conjunction with a registered nurse. There shall be documentation in the medical record of discharge planning.

(ii) Discharge assessment shall be completed on all patients with discharge planning as indicated.

(h) There shall be a reliable method for personal identification of each patient.

(i) A recognized standard procedure for the handling and administration of blood and blood products shall be established. This procedure shall be written and readily available to all personnel responsible for the administration of blood and/or blood products.

(j) A standard isolation technique shall be established and practiced.

(k) There shall be written policies governing smoking by personnel, patients, visitors, and others within the hospital. Policies shall be designed to prohibit smoking where or when smoking may cause discomfort to a patient or constitute a safety hazard.

(l) A physical examination and medical history shall be documented within forty-eight hours of admission unless completed within one week prior to admission and incorporated into the medical record.

(m) Each patient care service area shall have available current references which are appropriate to the general and specific care provided in that area or unit.

(n) Written policies and procedures shall be established, available to, and followed by personnel and medical staff in patient care areas who handle, manage, control, prescribe, dispense, or administer medications or drugs. Drugs are those substances and articles defined in chapter 69.41 RCW.

(i) All policies and procedures related to drugs shall be approved by the appropriate medical staff committee in collaboration with the pharmacist who directs the hospital pharmacy with evidence of discussion of and attention to concerns of an advisory interdisciplinary group minimally to

include representatives from medical staff, hospital administration, and nursing service. Policies and procedures need not be identical in all patient care areas.

(ii) Written order or prescription by members of medical staff authorized by state rule or law to prescribe drugs pursuant to chapter 69.41 RCW shall be required for all medications administered to patients or self-administered by patients within the hospital.

(iii) Medication administration policies and procedures shall be established and followed in patient care areas minimally to address:

(A) Composition of a medication or drug order, i.e., date, type and amount of drug, route, frequency of administration, and authentication by medical staff authorized to prescribe drugs pursuant to chapter 69.41 RCW.

(B) Requirements for authorized personnel administering drugs or medications in accordance with state laws and regulations governing such acts.

(C) Requirements for personnel authorized to receive and record or transcribe verbal or telephone drug orders, in accordance with laws and regulations governing such acts, e.g., pharmacists, physicians, and licensed nurses.

(D) Timely authentication of verbal and telephone orders by medical staff authorized to prescribe drugs, not to exceed forty-eight hours for inpatient orders.

(E) Requirements for specific written orders, identification of drug, administration, handling, proper storage, control, or disposition of medications (drugs) owned by the patient, other than those dispensed by the hospital pharmacy.

(F) Requirements for self-administration of medications.

(iv) Medications located in patient care areas shall:

(A) Be the responsibility of the pharmacist directing the hospital pharmacy;

(B) Bear a legible label including generic and/or trade name and strength according to federal and state law;

(C) Be stored under appropriate conditions and in accordance with general or specific directions of a hospital pharmacist; and

(D) Be accessible only to those personnel authorized access by hospital policy.

(v) Outdated or deteriorated drugs, as indicated by label, shall be prohibited in patient care areas.

(vi) A hospital pharmacist shall be responsible for assuring appropriate disposition, destruction, and disposal of drugs intended for patient use in patient care areas.

(vii) Storage, distribution, record keeping, appropriate dissemination of information, and control of approved investigational drugs or medications used in the hospital shall be the responsibility of the pharmacist who directs hospital pharmacy.

(2) Patient care.

(a) Space or spaces of adequate size shall be designated on each nursing unit which has provisions for medical records, access to telephones, a place for recording and reviewing medical records, and provision for confidential communication among personnel and staff.

(b) Utility or materials room or rooms or space. On or adjacent to each nursing unit an adequate, properly equipped, utility or materials room shall be provided for the preparation, cleaning, and storage of nursing supplies and equipment used on the nursing unit. This utility or materials room shall

be so arranged as to provide for separation of clean and soiled supplies and equipment.

(c) Toilet and bathing facilities.

(i) There shall be at least one water closet, lavatory, and bathing facility reserved for patient use on each patient floor, and such additional toilets, lavatories, and bathing facilities to adequately meet the needs of the patients.

(ii) Grab bars properly located and securely mounted shall be provided at patient bathing facilities and water closets.

(iii) Some means of signalling by the patient while in the toilet, tub, or shower room shall be provided in a proper location and shall provide an audio and/or visual signal in the nurses' station or an equivalent area.

(iv) A lavatory shall be provided in or convenient to every toilet room.

(v) Paper towels or some other acceptable type of single use towel and a satisfactory receptacle for used towels shall be provided at all lavatories.

(vi) Soap or equivalent shall be immediately available at sink or lavatory.

(d) Isolation room or unit. Rooms or units which are used for isolation of patients with known or suspected infectious diseases shall contain a lavatory.

(e) Seclusion and/or security room. When special accommodations are provided for seriously disturbed patients, the layout, design of details, equipment, and furnishings shall be such that patients are under close observation and are not afforded opportunities for hiding, escape, injury to self or others.

(f) Storage and handling of drugs in patient care areas.

(i) Medicines, poisons, and other drugs shall be stored in a specifically designated, well-illuminated, secure space. Drugs shall be accessible only to hospital authorized individuals. A means for separation of internal and external stock drugs shall be provided.

(ii) A separate locked drawer, compartment, cabinet, or safe shall be provided for the storage of Schedule II drugs.

(iii) Suitable facilities including ample light, ventilation, sink or lavatory, and sufficient work areas shall be provided for the preparation and storage of drugs for patients.

(g) Patient room facilities.

(i) All patient rooms shall be outside rooms with adequate windows of clear glass or other approved transparent material.

(ii) Single rooms shall contain at least eighty square feet and multi-bed rooms shall contain at least seventy square feet per adult bed and youth bed or crib, and forty square feet per pediatric bassinet.

(iii) Rooms shall have at least seven and one-half foot ceiling height over the required square feet area.

(iv) The floor of any room used for accommodation of a patient shall be less than three feet six inches below grade.

(v) There shall be at least three feet between beds.

(vi) Rooms shall be arranged to allow for movement of necessary equipment to the side of each bed.

(vii) There shall be sufficient and satisfactory storage space for clothing, toilet articles, and other personal belongings of patients.

(viii) Sufficient electrical outlets shall be provided to permit the use of electrical equipment as required.

(h) Patient room furnishings.

(i) An appropriate bed with mattress, pillow, and necessary coverings shall be provided for each patient. Mattresses, blankets, and pillows shall be clean and in good repair.

(ii) There shall be a bedside stand or cabinet and chair for use in each patient room, when appropriate.

(iii) Means for signalling nurses shall be provided within easy reach of each bed, when appropriate.

(iv) A sufficient number of cubicle curtains or screens shall be available to assure privacy for patients, when indicated.

(v) A properly designed bed lamp shall be provided at each bed, when appropriate.

(3) Supplies and equipment for patient care.

(a) There shall be sufficient, safe, and appropriately maintained equipment and supplies for patient care.

(b) Bedside utensils supplied to patients shall be for individual use only.

(c) All supplies and equipment used in patient care shall be properly cleaned and/or sterilized between use for different patients.

(d) Methods for cleaning, handling, and storing all supplies and equipment shall be such as to prevent the transmission of infection through use.

(e) Equipment and furnishings, including medical and nonmedical devices, shall be safe, located, and arranged in a manner which does not endanger patients.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-190, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050 and 70.41.030, 84-02-036 (Order 271), § 248-18-190, filed 12/30/83. Statutory Authority: RCW 43.20.050 and chapter 70.41 RCW, 81-22-014 (Order 216), § 248-18-190, filed 10/23/81; Order 119, § 248-18-190, filed 5/23/75; Regulation 18.190, effective 3/11/60.]

WAC 246-318-200 Abuse reports—Children and developmentally disabled adults. A suspected incident of nonaccidental injury, neglect, sexual abuse, or cruelty to a child or developmentally disabled person by a person who appears to be legally responsible for that individual's welfare shall be reported to a law enforcement agency or the department.

(1) Practitioners obligated to report suspected abuse include licensed practical and registered nurses, physicians and their assistants, podiatrists, optometrists, chiropractors, dentists, social workers, psychologists, and pharmacists.

(2) The hospital shall make orientation materials, which inform practitioners of their reporting responsibilities, available to practitioners who are employees or who practice within the hospital. The department shall prepare and distribute these materials.

(3) The hospital shall post in each primary patient care unit notices provided by the department which include appropriate local police and department phone numbers and which state the reporting requirements.

(4) The medical record of the person who may have been abused by a responsible individual shall reflect the fact that an oral or written report has been made to the department or a law enforcement agency. This note shall contain the date and time that the report was made, the agency to which it was made, and be signed by the person making the report. The contents of the report need not be included in the medical record.

(5) Conduct conforming with reporting requirements of this section or chapter 26.44 RCW shall not be deemed a violation of the confidential communication privilege of RCW 5.60.060(3) and (4) and 18.83.110.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-200, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 78-08-060 (Order 162), § 248-18-202, filed 7/24/78.]

WAC 246-318-210 Pediatric services. (1) Hospitals admitting, treating, or diagnosing infants, children, and adolescents shall have readily available equipment and supplies of appropriate sizes including:

- (a) Intubation equipment;
- (b) Oxygen masks and ventilatory bags;
- (c) Blood pressure cuffs;
- (d) Stethoscope;
- (e) Defibrillator and paddles;
- (f) Emergency medications;
- (g) Intravenous equipment and supplies; and
- (h) Measuring devices for length, height, weight, and circumferences.

(2) Hospitals providing services for infants, children, and adolescents shall establish written policies and procedures specific to pediatric services, consistent with WAC 246-318-190 (2)(g), 246-318-200, and 246-318-435 and minimally including:

- (a) Admission criteria;
- (b) Conditions requiring transfer or transport;
- (c) Room assignment of infants and children considering requirements for observation and developmental age level needs;
- (d) Safety measures in terms of equipment, including but not limited to:
 - (i) Cribs, bassinets, and beds;
 - (ii) Restraint use;
 - (iii) Side rails;
 - (iv) Electrical outlet protection; and
 - (v) Toys.
- (e) Placement of infants, children, and adolescents with infection, suspected infection, or exposure to infection;
- (f) Nutritional guidelines for infants, children, and adolescents to include normal diets and diets for special nutritional needs;
- (g) Safe administration of pediatric doses of blood, blood products, medications, intravenous fluids, and admixtures including:
 - (i) Intake and output;
 - (ii) Precalculated dosages of emergency drugs immediately available or posted;
 - (iii) An established list of pediatric dosages approved by the hospital pharmacist and the physician responsible for medical policies in pediatric services;
 - (iv) List of agents requiring double checking prior to administration; and
 - (v) Hospital-approved method of double checking by appropriately licensed personnel or medical staff which include nurses, physicians, or pharmacists.

(3) Hospitals providing organized, distinct pediatric units or service areas shall provide and establish:

- (a) An accessible examination or treatment area;
- (b) A sufficient area for diversional play activities;

(c) Criteria and procedures for use of established areas for isolation;

(d) Medical services directed by a physician member of medical staff having experience in treatment of infants, children, and adolescents whose functions and scope of responsibility are delineated by medical staff;

(e) Review of policies, procedures, protocols, and standing orders as necessary and at least every two years with revision as necessary;

(f) A registered nurse responsible for implementation of nursing policies and procedures;

(g) Adequate nursing staff for the pediatric unit or service area available to perform all the specialized nursing skills required.

(4) Hospitals providing nurseries in pediatric services or elsewhere in the hospital shall meet requirements for intermediate care nursery or neonatal intensive care nursery under WAC 246-318-230.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-210, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-210, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 89-22-106 (Order 010), § 248-18-216, filed 11/1/89, effective 12/2/89.]

WAC 246-318-220 Obstetrical services. (1) Hospitals providing obstetrical services shall provide:

(a) Medical services directed by a physician member or members of the medical staff having experience in obstetrics and newborn care, whose functions and scope of responsibility are delineated by the medical staff;

(b) Adequate staff supervised by a registered nurse, prepared by education and experience in obstetrical and newborn care nursing;

(c) Capability for performing caesarean sections twenty-four hours per day.

(2) Hospitals providing obstetrical services shall establish written policies and procedures to include:

(a) Infection control principles under WAC 246-318-035 including:

(i) Room assignment and placement of obstetrical patients and newborns;

(ii) Visitors;

(iii) Special clothing requirements for staff and visitors;

(iv) Handwashing, posted as appropriate;

(v) Isolation;

(vi) Employee health; and

(vii) Handling and storage of breast milk and formula.

(b) Screening criteria to ascertain patients appropriate for each option of labor, delivery, postpartum, and newborn care;

(c) Provisions for transfer and transport of a woman or a newborn to obtain a more intensive level of medical and nursing care;

(d) Deliveries occurring outside the obstetrical service area or areas;

(e) Requirement for authentication of all orders, standing orders, and protocols with:

(i) Delineation of the circumstances when a particular protocol is used;

(ii) Provisions for notification of appropriate medical staff;

(iii) Description of minimum qualifications or training of persons required to execute a particular order or protocol;

(iv) Written approval of policies, standing orders, and protocols by appropriate representatives of the medical, nursing, and administrative staffs;

(v) Orders for drug or treatment administration including:

(A) A description of the treatment with the name of each drug or agent;

(B) The dosage and concentration of the drug or agent;

(C) The route or method of administration; and

(D) Where pertinent, the time interval, frequency, or duration of administration.

(f) Requirements for documenting orders and protocols in the patient's medical record;

(g) Provision for maintaining body heat of each newborn;

(h) Provision for intrapartum evaluation of fetal heart rate;

(i) Procedures and protocols for the management of obstetrical and newborn emergencies, including resuscitation;

(j) Review of policies, procedures, protocols, and standing orders as necessary and at least every two years with revisions if necessary; and

(k) Recordkeeping including, but not limited to:

(i) Specific notes describing the status of mother, fetus, and newborn during labor, birth, and postpartum;

(ii) Completion of birth and death certificates as necessary;

(iii) Hospital staff's verification of initial and discharge identification of the newborn;

(iv) Documentation that the newborn screening test was obtained and forwarded, as required under RCW 70.83.020 and chapter 246-650 WAC, now or as hereafter amended;

(v) Documentation of newborn eye treatment, required under WAC 246-100-206, now or as hereafter amended; and

(vi) Medical records register or registers and index or indexes described under WAC 246-318-440.

(3) A hospital providing obstetrical services shall:

(a) Designate and maintain facilities and equipment for care of woman, fetus, and newborn either in:

(i) Labor rooms with birth occurring in a delivery room;

or

(ii) Birthing rooms including labor, delivery, recovery and labor, delivery, recovery, post partum services; or

(iii) A combination of labor, delivery, and birthing rooms; or

(iv) Rooming-in, if provided.

(b) Locate any hospital room designated by the hospital as a labor room within the obstetrical service area;

(c) Utilize rooms designated by the hospital as labor rooms:

(i) For short-term patient occupancy of twenty-four hours or less; or

(ii) For patients in labor only unless the room meets the requirements for a patient room described under WAC 246-318-190.

(d) Maintain accommodations and environment in obstetrical delivery rooms, if present, including:

(i) Lighting and equipment for care of woman, fetus, and newborn during delivery including requirements described under WAC 246-318-290(2);

(ii) A minimum area of two hundred and seventy square feet with a minimum linear dimension of fifteen feet; and

(iii) A minimum room temperature of at least sixty-eight degrees Fahrenheit with a reliable method for monitoring temperature.

(e) Maintain systems for scrub up, clean up, sterilization, storage, housekeeping, and staff change room facilities; and

(f) Meet requirements described under WAC 246-318-300 and 246-318-310 for anesthesia and post-anesthesia recovery.

(4) Hospitals providing birthing or delivery services shall provide sufficient and appropriate area in rooms to accommodate not only patients, staff, and designated attendants, but also furnishings and equipment for the care of the woman, fetus, and newborn including:

(a) Adequate and appropriate equipment and supplies as follows:

(i) A bed or equivalent suitable for labor, birth, and post partum;

(ii) Oxygen with individual flow meters and mechanical suction for woman and newborn;

(iii) Newborn resuscitation bag, masks, endotracheal tubes, laryngoscopes, oral airways, and mechanical suction in the room for each birth;

(iv) Emergency equipment, medications, and supplies for care of newborn and woman required under WAC 246-318-290 (2)(b)(ii);

(v) Newborn beds available;

(vi) Radiant heat source available for the newborn;

(vii) General lighting source and provision for examination lights;

(viii) A clock with a sweep hand or equivalent second indicator visible from each patient's bedside;

(ix) Provision for receiving, covering, and transporting soiled linens and waste materials;

(x) Appropriate storage for necessary linens, instruments, supplies, medications, and equipment;

(xi) Work surfaces;

(xii) A signal device for use by staff and accessible to summon emergency back-up personnel when needed;

(xiii) Emergency power for lighting and operation of equipment;

(xiv) Easily cleanable floors, walls, cabinets, ceilings, and furnishings; and

(xv) Fetal monitoring equipment.

(b) Additional requirements if birthing rooms are provided including:

(i) A lavatory located within each birthing room;

(ii) A designated lavatory and water closet conveniently located for use of patient and support person or persons;

(iii) A bathing facility convenient for patient use;

(iv) Wardrobe unit or closets in the vicinity for the belongings of the patient and her support person or persons;

(v) A signaling device accessible for each woman; and

(vi) Room temperature of at least sixty-eight degrees Fahrenheit maintained with a reliable method for monitoring.

(5) Hospitals may use an operating room as a delivery room if the hospital has established policy and procedures about use of operating rooms including establishing priority over routine obstetrical procedures and nonemergent surgical procedures for:

- (a) Patients with parturition imminent;
- (b) Patients with obstetrical emergencies requiring immediate medical intervention to preserve life and health of woman and infant.

(6) Any hospital providing obstetrical services shall provide appropriate newborn care including, but not limited to:

- (a) Devices for measuring weight, length, and circumference;
- (b) Access to and availability of portable x-ray;
- (c) Provisions for stabilization, transfer, and transport of high-risk newborns and infants;
- (d) An established system to identify newborns prior to separation from mother;
- (e) Established policies and procedures minimally including:
 - (i) Ongoing clinical assessment of newborn or infant;
 - (ii) Provisions for direct supervision of each newborn by nursing staff and family in a nonpublic area, considering:
 - (A) Physical well being;
 - (B) Safety; and
 - (C) Security, including prevention from abduction.
 - (f) Access to oxygen, oxygen analyzers, warmed and humidified oxygen, resuscitation equipment, emergency equipment, measuring devices, mechanical suction, medical air and supplies specifically for infants and newborns.

(7) Hospitals with a newborn and infant nursery shall provide services, facilities, and equipment including:

- (a) Requirements in subsection (6) of this section;
- (b) Wall clock with sweep second hand or equivalent second indicator visible from each nursery room;
- (c) Oxygen source with provision for warming, humidifying, analyzing, and blending oxygen;
- (d) A nursery room or rooms with at least twenty square feet per bassinet and with sufficient room to move between bassinets;
- (e) Handwashing facilities located at the entrance to the nursery and in each nursery room;
- (f) Emergency call systems from the nursery to another nearby appropriately staffed area;
- (g) A system to maintain an environmental temperature of at least sixty-eight degrees Fahrenheit; and
- (h) Appropriate emergency equipment, medications, and supplies for infant care and as required under WAC 246-318-290 (2)(b).

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-220, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-220, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-221, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-221, filed 11/1/89, effective 12/2/89.]

WAC 246-318-230 Intermediate care nursery service—Neonatal intensive care nursery service. (1) Hospitals providing intermediate care nursery services or neonatal intensive care nursery services or both shall meet requirements described under WAC 246-318-220 (6) and (7).

(2) Additional requirements for hospitals providing intermediate care nursery service include:

(a) Infant stations having adequate space within each station to accommodate equipment, supplies, and staff required for treatment of intermediate care infants;

(b) Provision for emergency power to support equipment requirements for each infant station;

(c) Oxygen, air, and suction capabilities including:

(i) One oxygen outlet in each infant station with other sources of oxygen available;

(ii) One medical air source available for each infant station;

(iii) Provision for blending, warming, humidifying, and monitoring oxygen mixtures; and

(iv) One electrical-mechanical or pneumatic suction in each infant station with other mechanical suctions available in the hospital.

(d) All equipment and supplies for infant resuscitation immediately available and present within the intermediate care nursery service area;

(e) One cardiorespiratory monitor in the intermediate care nursery area and others available;

(f) Sufficient micro-volumetric infusion pumps available;

(g) A waiting and instruction area available;

(h) A registered nurse responsible for neonatal nursing and implementation of policies;

(i) Provision of adequate nursing staff for the intermediate care nursery available to perform all the specialized nursing skills required;

(j) Laboratory, pharmacy, radiological, and respiratory care services appropriate for infants available at all times and in the hospital during assisted ventilation;

(k) Medical staff with experience in neonatal medicine available at all times during assisted ventilation;

(l) A physician with experience in neonatal medicine who is continuously available to come to the hospital as required;

(m) Medical services directed by a physician member or members of the medical staff having experience in neonatal intensive care whose functions and scope of responsibility are delineated by the medical staff;

(n) Requirements for authentication of all orders, standing orders, and protocols when used with:

(i) Delineation of the circumstances when a particular protocol is used;

(ii) Provision of notification of appropriate medical staff;

(iii) Description of minimum qualifications or training of persons required to execute a particular order or protocol;

(iv) Written approval of policies, standing orders, and protocols by appropriate members of the medical, nursing, and administrative staffs;

(v) Orders for drug or treatment administration including:

(A) A description of the treatment with the name of each drug or agent;

(B) The dosage and concentration of the drug or agent;

(C) The route or method of administration; and

(D) Where pertinent, the time interval, frequency, or duration of administration.

(vi) Review of policies, procedures, protocols, and standing orders at least every two years with revisions as necessary.

(o) A hospital-approved procedure for double checking certain drugs, biologicals, and agents by appropriately licensed personnel or medical staff including nurses, physicians, and pharmacists.

(3) Hospitals providing neonatal intensive care nursery service shall meet requirements described under WAC 246-318-220(6) and subsection (2) of this section, and additionally provide:

(a) At least fifty square feet within each infant station;

(b) Twelve electrical outlets, with at least eight clearly identified as being on emergency power, available in each infant station;

(c) Oxygen, air, and suction capabilities including:

(i) Two separate oxygen outlets in each infant station;

(ii) Two medical air outlets in each infant station;

(iii) One mechanism for blending oxygen and medical air for each infant station;

(iv) Sufficient numbers of oxygen analyzers available to continuously monitor oxygen;

(v) A means for warming, humidifying, and monitoring temperature of oxygen mixtures on a continuous basis; and

(vi) Two electrical-mechanical or pneumatic suction in each infant station with others available if needed.

(d) All equipment and supplies for infant resuscitation available and present within the neonatal intensive care nursery service area;

(e) Continuous ventilatory support equipment available at all times;

(f) Equipment for continuous monitoring of respirations and heart rate in each infant station;

(g) Equipment for continuous hemodynamic monitoring and status of oxygenation available;

(h) Equipment for continuous monitoring of body temperature available;

(i) Sufficient microvolumetric infant infusion pumps immediately available at all times in the neonatal intensive care nursery service area;

(j) Laboratory, radiology, and respiratory care and pharmacy services appropriate for neonates and infants available in the hospital at all times;

(k) Twenty-four-hour availability of an anesthesia services and a pharmacist to come to the hospital as required or requested available at all times;

(l) Provision of a registered nurse responsible for neonatal intensive care nursery services and implementation of policies;

(m) Provision of sufficient and adequate nursing staff in the neonatal intensive care nursery service to perform all specialized nursing skills required;

(n) Medical responsibility for intensive care nursery services by a neonatologist member of the medical staff;

(o) Twenty-four-hour availability of a neonatologist to come for in-house consultation as required or requested;

(p) A designated physician in the hospital available at all times to the neonatal intensive care nursery service with experience or skills including:

(i) Neonatal and infant resuscitation; and

(ii) Ventilator management including chest tube placement.

(q) Standing orders, protocols, patient discharge/transfer plans and evaluation of neonatal intensive care nursery

services meeting requirements under subsection (2) of this section and WAC 246-318-220 (6)(c);

(r) Provision for referral or arranging for social work services as required; and

(s) Provision for patient access to other services as required.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-230, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-230, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-224, filed 11/1/89, effective 12/2/89.]

WAC 246-318-240 Critical care service. Hospitals providing any critical care service shall provide:

(1) An electrocardiographic monitor with an oscilloscope, a rate meter connected to a recorder, and an audio alarm system for each bed used for critical care;

(2) Equipment and supplies in the critical care area or available in the hospital for use in the area appropriate to meet patient needs consistent with the nature and scope of critical care services defined by the hospital including:

(a) Twelve lead electrocardiographs;

(b) Tracheostomy set;

(c) Infusion pumps dedicated for use in critical care;

(d) Gastric suction equipment;

(e) External and internal pacemaker insertion equipment and supplies;

(3) Emergency medical supplies and equipment available to critical care within sixty seconds including:

(a) Direct current defibrillator with synchronization capabilities;

(b) Intubation supplies and equipment;

(c) Emergency cart with appropriate drugs and supplies;

(d) Chest tube insertion supplies;

(e) Intravenous, intra-arterial, and central venous access supplies consistent with the nature and scope of critical care services offered;

(4) Adequate, accessible, available means of administering oxygen, medical air, and continuous ventilatory support and providing suction;

(5) Electrical capacity and outlets sufficient to accommodate electrical equipment at each bedside, with emergency power for lighting and critical care equipment;

(6) A communication system within the area for:

(a) Patients to summon assistance for routine patient care; and

(b) Summoning appropriate personnel in emergencies;

(7) Movable beds with:

(a) A secure braking and locking device;

(b) Easily adjustable positioning to meet patient needs;

(c) The head of the bed easily accessible for resuscitation and/or other emergency procedures; and

(d) Removable head board or equivalent;

(8) Written policies and procedures established and implemented pertinent to patient care within the critical care service area which are:

(a) Made known to hospital and medical staff; and

(b) Readily available to all persons functioning within the area;

(9) Medical oversight or direction in the critical care service area by a physician member of the medical staff with

functions and responsibilities delineated by the hospital governing body and medical staff bylaws;

(10) Description of all physicians' privileges and responsibilities for patients within the critical care unit;

(11) Written hospital policies and procedures established and implemented including:

(a) Criteria and priorities for admission, discharge, and transfer of patients;

(b) A requirement for a physician's examination of each patient immediately prior to admission to the critical care unit or as soon as possible thereafter as defined by the hospital;

(c) Delivery of patient care minimally including:

(i) The use of specialized medical equipment;

(ii) The performance of specific patient care procedures; and

(iii) The delineation of who may perform which procedures;

(d) Protocols to guide the actions of personnel when a medical emergency is imminent or arises and a physician is not present;

(e) Visitor and traffic control in the critical care area; and

(f) The role of the critical care area in the hospital disaster plans;

(12) At least two nursing personnel skilled and trained in care of critical care patients on duty in the hospital at all times and:

(a) Immediately available to provide care to patients admitted to the critical care area;

(b) Trained and current in cardiopulmonary resuscitation;

(c) Including at least one registered nurse with:

(i) Training in the safe and effective use of the specialized equipment and procedures employed in the particular area; and

(ii) Successful completion of an advanced cardiac life support training program as defined and approved by the hospital or certified by the American Heart Association unless other personnel certified in advanced life support by the American Heart Association are immediately available to critical care.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-240, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-240, filed 11/30/90, effective 12/31/90.]

WAC 246-318-250 Renal dialysis services. Hospitals providing renal dialysis services shall:

(1) Reuse dialyzers only when the cleaning and sterilization procedure meets guidelines under Association for Advancement of Medical Instrumentation (AAMI), July 1986, "Recommended Practices for Re-use of Hemodialyzers";

(2) Provide adequate space for:

(a) Equipment and supplies necessary for the dialyzing patient;

(b) Preparation of materials necessary for dialysis; and

(c) Cleaning and disinfecting equipment;

(3) Provide water treatment, if necessary to ensure water quality, meeting recommendations under AAMI guidelines under subsection (1) of this section;

(4) Test water for bacterial contamination monthly and chemical purity as required under AAMI, July 1986;

(5) Test dialysis machine for bacterial contamination monthly or demonstrate a quality assurance program establishing effectiveness of disinfection methods and intervals;

(6) Take appropriate measures to prevent contamination, including backflow prevention under chapter 246-290 WAC, between:

(a) Dialysis machines;

(b) Dialysis machines and potable water supply; and

(c) Dialysis machine, drain line, and sewer;

(7) Provide for the availability of any special dialyzing solutions required by a patient;

(8) Meet requirements under WAC 246-318-010 through 246-318-450.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-250, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-250, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-250, filed 11/30/90, effective 12/31/90.]

WAC 246-318-260 Long-term care services. (1) Hospitals providing inpatient long-term care services shall:

(a) Meet requirements under WAC 246-318-190;

(b) Require an assessment of each patient by a registered nurse upon admission to determine immediate care needs;

(c) Require documentation of the initial plan of care in the patient's medical record;

(d) Make the plan of care accessible to direct caregivers who have a need to know in order to provide actual health care services to the patient;

(e) Establish a plan of care individualized to the needs of each patient and:

(i) Developed by those disciplines involved in a patient's care;

(ii) Implemented in conjunction with a registered nurse responsible for total care of the patient for the duration of hospitalization in a long-term care service unit or area; and

(iii) Maintained in a confidential manner;

(f) Require a physician's order for use of any physical restraint restricting freedom of movement or position change, including the specific reason, type, and location of restraint, and:

(i) Establish and follow a policy on release of patients from physical restraints for specified intervals and monitoring of patients in restraints;

(ii) Require documentation in a patient's medical record of patient's restraint - release time intervals;

(iii) Document reason for use of any restraint on a patient in the patient care plan.

(2) Hospitals providing long-term care shall establish written policies and procedures specifying:

(a) Rights of patients including:

(i) Informing each patient of individual rights at the time of admission;

(ii) Documenting evidence of informing a legally delegated person about a patient's rights when a patient is unable to receive and understand the information;

(b) A mechanism to:

(i) Identify social and emotional needs of the patients;

(ii) Refer patients in need of social services to appropriate social agencies.

(3) Hospitals with inpatient long-term care services shall provide:

(a) An activities program designed to encourage each long-term care patient to maintain or attain normal activity and achieve an optimal level of independence;

(b) A community dining area;

(c) Handrails on both sides of all patient access corridors;

(d) Patient bathrooms and toilets arranged to accommodate wheelchair patients;

(e) A shower stall accommodating a shower chair on the same level and convenient to patient rooms.

(4) Hospitals providing long-term care services and permitting pets shall:

(a) Require and provide for humane care and maintenance of pets under conditions prohibiting animals, except for fish in an aquarium, in rooms or areas for:

(i) Food storage and preparation;

(ii) Group dining areas during the times food is served and consumed;

(iii) Cleaning and storage of cooking and eating utensils;

(iv) Linen storage or laundry;

(v) Drug or sterile supply storage; and

(vi) Patient bedrooms if the condition of a patient in the room contraindicates the presence of the animal;

(b) Permit seeing eye, hearing, and assistance dogs as needed;

(c) Provide reasonable opportunity for a patient to have regular contact with animals, if the patient desires;

(d) Consider preferences of the long-term care patients through a long-term care resident council, poll, or other means;

(e) Ensure the presence of animals does not compromise the rights, preferences, and medical requirements of individual patients;

(f) Permit animals such as dogs, cats, fish, gerbils, hamsters, guinea pigs, and birds;

(g) Require veterinarian certification of psittacine birds certified free of psittacosis or other diseases and meeting United States Department of Agriculture (USDA) quarantine procedures;

(h) Require regularly scheduled veterinarian examinations and appropriate immunizations for animals living on the premises, with records retained in the hospital;

(i) Keep animals living on the premises clean and free of external parasites such as fleas and ticks.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-260, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-260, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 90-24-044 (Order 115), § 248-318-260, filed 11/30/90, effective 12/31/90.]

WAC 246-318-270 Alcoholism and/or substance abuse unit. (1) Definitions specific to WAC 246-318-270 and 246-318-810:

(a) "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 an individual's health is substantially impaired or endangered,

or his or her social or economic function is substantially disrupted.

(b) "Alcoholism counselor" means an individual with adequate education, experience, and knowledge regarding the nature and treatment of alcoholism, who is knowledgeable about community resources providing services alcoholics may need, and who knows and understands the principles and techniques of alcoholism counseling with minimal requirements to include:

(i) No history of alcohol or other drug misuse for a period of at least two years immediately prior to time of employment as an alcoholism counselor with no misuse of alcohol or other drugs while employed as an alcoholism counselor;

(ii) A high school diploma or equivalent;

(iii) Satisfactory completion of at least twelve quarter or eight semester credits from a college or university, including at least six quarter credits or four semester credits in specialized alcoholism courses exclusive of field experience credits.

(c) "Detoxification" means care or treatment of an intoxicated person during a period in which the individual recovers from the effects of intoxication.

(i) "Intoxication" means acute alcohol poisoning or temporary impairment of an individual's mental or physical functioning caused by alcohol in the body.

(ii) "Acute detoxification" means a method of withdrawing a patient from alcohol where nursing services are available and medications are routinely administered to facilitate the patient's withdrawal from alcohol.

(d) "Family" means individuals important to and designated by a patient who need not be relatives.

(e) "Individualized treatment plan" means a written statement of care to be provided for a patient based upon assessment of his or her strengths and physical and psychosocial problems. When appropriate, the statement shall be developed with participation of the patient.

(f) "Multidisciplinary treatment team" means a group comprised of individuals from the various treatment disciplines and clinical services who assess, plan, implement, and evaluate treatment for patients under care.

(2) Rules and regulations in this chapter shall apply with addition of the following:

(a) There shall be a room adequate for counseling and social activities of patients.

(b) Adequate provision for space and privacy shall be made for interviewing, group and individual counseling, and physical examinations.

(c) Policies and procedures shall include and address, as appropriate:

(i) Development, implementation, and review of the individualized treatment plan, including the participation of the multidisciplinary treatment team, the patient, and the family, as appropriate.

(ii) Patient rights to include:

(A) Treatment and care of patients in a manner promoting dignity and self-respect;

(B) Protection from invasion of privacy: *Provided*, That reasonable means may be used to detect or prevent contraband from being possessed or used on the premises;

(C) Confidential treatment of clinical and personal information in communications with individuals not associated with the plan of treatment;

(D) A means of implementing federal requirements related to confidentiality of records, Title 42, Code of Federal Regulations, Part 2, Federal Register, July 1, 1975;

(E) Provision of reasonable opportunity to practice religion of choice insofar as such religious practice does not infringe upon rights and treatment of others or the treatment program: *Provided*, That the patient also has the right to refuse participation in any religious practice.

(F) Communication with significant others in emergency situations.

(G) Freedom from physical abuse or other forms of abuse against patient's will, including being deprived of food, clothes, or other basic necessities.

(iii) Patient work assignments related to treatment program, if applicable.

(d) Personnel, staff, other services.

(i) Clinical responsibility for alcoholism and substance abuse units shall be assigned to an individual having demonstrated experience in this type of treatment and care. This individual shall be designated and function as specified by the governing body.

(ii) There shall be on staff at least one alcoholism counselor and such additional alcoholism counselors as necessary to provide alcoholism counseling services needed by patients.

(iii) There shall be a licensed nurse on duty on the unit whenever acute detoxification is taking place on the unit.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-270, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-270, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-22-003 (Order 277), § 248-18-235, filed 10/26/84.]

WAC 246-318-280 Psychiatric units and services.

(1) Definitions.

In addition to definitions in WAC 246-318-010, the following words and phrases are defined for the purpose of this section and WAC 246-318-820 unless the context clearly indicates otherwise.

(a) "Acutely mentally ill" means a condition limited to a short-term severe crisis episode of:

(i) A mental disorder, meaning any organic, mental, or emotional condition having substantial adverse effects on an individual's cognitive or volitional functions;

(ii) Suicidal or self-destructive behavior;

(iii) Actual or threatened behavior harmful to others;

(iv) Behavior which caused substantial damage to property; or

(v) Being gravely disabled, meaning a condition in which 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 and safety; or

(B) 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 care essential for his or her health or safety.

(b) "Child" or "children" means children and adolescents seventeen years of age or younger.

(c) "Child psychiatrist" means a physician, board-certified or board-eligible in child psychiatry under:

(i) The directory of residency training programs accredited by the accreditation council for graduate medical education, American Medical Association, 1981-82; or

(ii) The American Osteopathic Association Yearbook and Directory, American Osteopathic Board of Neurology and Psychiatry, 1981-82.

(d) "Child mental health specialist" means a mental health professional with:

(i) A minimum of one hundred actual, rather than semester, hours of specialized training devoted to a study of child development and the treatment of children; and

(ii) The equivalent of one year full-time experience in the treatment of children under supervision of a child mental health specialist.

(e) "Consultation" means review and recommendations regarding patient care and treatment programs.

(f) "Family" means individuals important to and designated by a patient, who need not be relatives.

(g) "Individualized treatment plan" means a written statement of care planned for a patient based upon assessment of the patient's developmental, biological, psychological, and social strengths and problems, and including:

(i) Treatment goals, with time frames stipulated;

(ii) Specific services utilized;

(iii) Designation of individual responsible for specific service provided;

(iv) Discharge criteria with estimated timeframes; and

(v) Participation of the patient and the patient's designee as appropriate.

(h) "Least restrictive alternative" means the setting, environment, or service in which the individual functions at maximum independence.

(i) "Mental health professional" or "MHP" means:

(i) A psychiatrist;

(ii) A psychiatric nurse, social worker, physician, or psychologist; or

(iii) A person with at least a masters degree in behavioral sciences, nursing science, or related field from an accredited college or university and two years experience in direct treatment of mentally ill individuals under the supervision of a mental health professional.

(j) "Multidisciplinary treatment team" means a group comprised of individuals from various disciplines and clinical services who assess, plan, implement, and evaluate treatment for patients.

(k) "Psychiatric nurse" means a registered nurse with:

(i) A bachelors degree from an accredited college or university and at least two years experience in direct treatment of mentally ill or emotionally disturbed persons with such experience gained under supervision of a psychiatrist or psychiatric nurse; or

(ii) Three years experience in the direct treatment of mentally ill or emotionally disturbed persons with such experience gained under the supervision of a psychiatrist or psychiatric nurse.

(l) "Psychiatric service" means admission of patients with primary psychiatric diagnoses for treatment pertinent to the psychiatric diagnosis in any available bed in the hospital whether or not the hospital maintains a psychiatric unit.

(m) "Psychiatric unit" means a nursing unit specifically reserved for the care of individuals with primary psychiatric diagnoses.

(n) "Recreational therapist" means an individual:

(i) With a bachelors degree including a major or option in therapeutic recreation or recreation for the ill and handicapped; and

(ii) Preferably certified or certification-eligible under Certification Standards for Therapeutic Recreation Personnel, June 1, 1988, National Council for Therapeutic Recreation Certification, 49 South Main Street, Suite 005, Spring Valley, New York 10977.

(2) Hospitals with psychiatric units shall provide a therapeutic environment to maintain safe, secure, adequate care of acutely mentally ill persons including:

(a) Access to at least one seclusion room;

(b) Provisions for close observation of patients including provision of security windows or maximum security windows and relites appropriate to the area and program;

(c) Adequate space suitably equipped including:

(i) A day room on the unit;

(ii) Dining and therapeutic program activities either on the unit or elsewhere in the hospital appropriate to meet each patient's needs;

(iii) Space for physical and recreational activities of patients on the hospital premises; and

(iv) One area permitted to accommodate functions in (c)(i), (ii), and (iii) of this subsection if scheduled appropriately.

(d) An examination or treatment room available within the hospital;

(e) Space and privacy for interviewing, group and individual counseling, and patient and family visiting; and

(f) Separate patient sleeping rooms for children and adults.

(3) Hospitals providing a psychiatric unit shall:

(a) Provide adequate staff to implement individualized treatment plans;

(b) Assign and designate responsibility for the psychiatric unit programming to a mental health professional;

(c) Designate a psychiatrist with medical staff privileges, available for ongoing psychiatric unit consultation;

(d) Have a physician and mental health professional available for consultation and communication with each patient and the unit staff on a twenty-four hour per day, seven day a week basis;

(e) Employ a full-time psychiatric nurse responsible for nursing care;

(f) Designate staff or contract with persons or agencies responsible for:

(i) Provision of social work services with consultations by a social worker experienced in working with mentally ill patients;

(ii) Provision of occupational therapy services with the ongoing input of an occupational therapist experienced in working with mentally ill patients;

(iii) Provision of recreational therapy services with the ongoing input of a recreational therapist experienced in working with mentally ill patients; and

(iv) Providing access to psychological evaluation by or under direction of a psychologist.

(g) Provide documented staff training relating to the needs of psychiatric patients for all psychiatric unit personnel including:

(i) The utilization of least restrictive alternatives;

(ii) Methods of patient care;

(iii) Managing assaultive and self-destructive behavior;

(iv) Patient rights under chapters 71.05 and 71.34 RCW;

(v) The special needs of children, minorities, the elderly, and handicapped when appropriate.

(h) For hospitals providing a child or adolescent psychiatric unit:

(i) Assign and designate responsibility for the child and adolescent psychiatric unit programming to a child mental health specialist;

(ii) Designate a child psychiatrist with medical staff privileges available for ongoing input and consultation to the child and adolescent psychiatric unit;

(iii) Have a physician and child mental health specialist available for consultation and communication with each patient and unit staff on a twenty-four hour per day, seven days per week basis;

(iv) Employ a full-time psychiatric nurse meeting requirements of a child mental health specialist under subsection (1)(d) of this section responsible for nursing care;

(v) Designate staff or contract with persons or agencies responsible for:

(A) Provision of social work services with consultation and ongoing input by a social worker experienced in working with mentally ill children and adolescents;

(B) Provision of occupational and recreational therapy services as required under (f)(ii) and (iii) of this subsection;

(C) Provision of access to psychological evaluation as required under (f)(iv) of this subsection;

(D) Provision of documented staff training as required under (g) (i) through (v) of this subsection; and

(E) Provision of educational services.

(4) Hospitals providing psychiatric units shall establish and implement written policies and procedures including:

(a) Provision or arrangement for the care and treatment of acutely mentally ill patients;

(b) Informing patients of their rights as required under chapters 71.05 and 71.34 RCW;

(c) Posting of patient rights in prominent locations;

(d) Development of an initial individualized treatment plan for each patient within twenty-four hours of admission;

(e) Continued development of the individualized treatment plan within seventy-two hours of admission, excluding holidays, by a multidisciplinary treatment team, the patient, family, and other agencies as appropriate;

(f) Provision of or arrangement for appropriate services including:

(i) Psychological evaluation and services;

(ii) Social work services;

(iii) Occupational therapy services;

(iv) Recreational therapy services; and

(v) Other specialized services as appropriate;

(g) Completion of a physical examination and history by a member of the medical staff and an evaluation by a mental health professional within twenty-four hours of admission with consultation of a psychiatrist as indicated;

(h) Admission, retention and transfer criteria, based upon health and safety needs of patients, including a referral

and transfer mechanism for persons in need of care and not meeting the admission criteria;

(i) Continuity of care, coordination and integration of services, including discharge planning consistent with WAC 246-318-450;

(j) Prohibiting use of patients to perform basic maintenance of the hospital and equipment, housekeeping, or food service except when tasks are:

(i) Included in and appropriate to the individualized treatment plan; and

(ii) Performed under direct supervision.

(k) Appropriate response to assaultive, self-destructive, or out-of-control behavior including the use of seclusion and restraints and subject to the following conditions:

(i) Use of seclusion and restraints only to the extent and duration necessary to ensure the safety of patients, staff, and property;

(ii) Infliction of physical pain for punitive purposes is prohibited, regardless of whether or not objective damage occurs;

(iii) All assaultive incidents documented in the medical record;

(iv) Staff observation of any patients in restraint or seclusion at least every fifteen minutes with:

(A) Interventions as indicated and required; and

(B) Observations and interventions recorded in the medical record;

(v) Notification of and authorization by a physician within one hour for emergency use of patient restraint or seclusion and including:

(A) Physician examination of the patient and renewal of physician order for every twenty-four continuous hours of restraint and seclusion; and

(B) Patient evaluation by a mental health professional or registered nurse when secluded or restrained more than two continuous hours with repeat evaluation at least one time every eight hours thereafter.

(l) Notification of the family and other agencies as appropriate as soon as possible, in event of:

(i) Serious injury or physical illness of the patient;

(ii) Death of the patient; or

(iii) Disappearance of the patient.

(m) For hospitals providing child or adolescent psychiatric units:

(i) Requirements under (a) through (l) of this subsection except:

(A) Substitute for (g) of this subsection - completion of a physical examination and history by a member of the medical staff and an evaluation by a child mental health specialist within twenty-four hours of admission with consultation by a child psychiatrist as indicated; and

(B) In (k)(v)(B) of this subsection, require patient evaluation by a child mental health specialist every two hours when a child is secluded or restrained.

(ii) Evaluation by a child mental health specialist within twenty-four hours of admission including consultation with a child psychiatrist as indicated;

(iii) Requirement for designated staff to make and document a determination of the hospital's ability to safely care for each child; and

(iv) Coordination with appropriate educational agencies, as appropriate.

(5) Hospitals with psychiatric units or psychiatric services shall maintain a medical records system required under WAC 246-318-440 and require diagnoses, abbreviations, and terminology consistent with the "American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders," III R edition, 1987, and "International Classification of Diseases," 9th edition, 1989.

(6) Hospitals with psychiatric units or services shall establish and implement policies and procedures to protect patient confidentiality and release of records and information consistent with requirements under chapters 71.05 and 71.34 RCW.

(7) Hospitals providing any inpatient psychiatric service shall establish and implement written policies and procedures including:

(a) Provision of a therapeutic environment to maintain safe, secure, adequate care of acutely mentally ill patients;

(b) Provision of facilities appropriate to the scope of the psychiatric service;

(c) Designation of responsibility for psychiatric services programming to a mental health professional;

(d) Provision for close observation of patients with a security room available;

(e) Designation of a psychiatrist with medical staff privileges available for consultation;

(f) A physician and mental health professional available on staff or by contract for consultation and communication with the patient and the hospital staff on a twenty-four hour per day, seven day a week basis;

(g) Designation of a staff person responsible for developing a plan for arranging needed special services as identified in the individualized treatment plan for each patient;

(h) Employment of a registered nurse with experience and/or specialized education in psychiatric nursing responsible for nursing care twenty-four hours a day;

(i) Designation of a staff person responsible for arranging for social work services;

(j) Provision for transfer to a hospital with a psychiatric unit or appropriate psychiatric services within twenty-four hours when the hospital is unable to establish and implement procedures required under (a) through (i) of this subsection.

(k) Designating staff responsible for documented training relating to the needs of psychiatric patients for all personnel responsible for care of psychiatric patients including:

(i) The availability and utilization of the least restrictive alternatives;

(ii) Methods of patient care;

(iii) Managing assaultive and self-destructive behavior;

(iv) The special needs of children, minorities, the elderly, and handicapped as appropriate;

(v) Patient rights under chapters 71.05 and 71.34 RCW.

(l) Implementation of requirements in subsection (4) of this section except requirement for recreational or occupational therapy services under subsection (4)(f)(iii) and (iv) of this section;

(m) For hospitals providing any child or adolescent psychiatric services, with or without a psychiatric unit:

(i) All requirements under (a) through (l) of this subsection apply;

(ii) Establish and implement policy and procedures for age and behavior specific criteria in determining appropriate room assignment.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-280, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-280, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 90-23-012 (Order 113), § 248-18-240, filed 11/13/90, effective 12/14/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 83-19-058 (Order 269), § 248-18-240, filed 9/20/83. Statutory Authority: RCW 43.20.050 and chapter 70.41 RCW, 81-22-014 (Order 216), § 248-18-240, filed 10/23/81; Order 119, § 248-18-240, filed 5/23/75; Regulation 18.240, effective 3/11/60.]

WAC 246-318-290 Surgery—Operating rooms and areas—Special procedure rooms—Surgical treatment or diagnostic areas. (1) Operating rooms, facilities, personnel, equipment, policies and procedures shall be appropriate to the scope of surgical services offered in each hospital.

(2) Environment - facilities - equipment.

(a) Operating room facilities and services, when provided, shall be located in a segregated area or areas of the hospital with access limited by hospital policy and procedures.

(b) Operating rooms and operating room service areas and facilities shall be properly equipped, easily cleanable, and of adequate size to accommodate the equipment and personnel required for surgical procedures performed.

(i) Each operating room shall have available:

- (A) Operating light and adequate general lighting;
- (B) Operating table, stretcher, or equivalent;
- (C) Oxygen;
- (D) Suction;
- (E) Appropriate electrical outlets;
- (F) X-ray film illuminator;
- (G) Cardiac monitor;
- (H) Anesthesia equipment and supplies;

(I) Emergency signaling device which automatically registers at a location from or through which additional assistance is always available;

- (J) Source of emergency power; and
- (K) Emergency lighting.

(ii) Each hospital shall provide appropriately maintained emergency equipment, supplies, and services available within sixty seconds and appropriate for the care of adults, children, and infants minimally to include:

- (A) Ventilatory equipment, including airways;
- (B) Cardiac defibrillator;
- (C) Cardiac monitor;
- (D) Laryngoscopes and endotracheal tubes;
- (E) Suctions; and

(F) Emergency drugs and fluids including schedules of pediatric dosages.

(c) There shall be adequate operating room scrub sinks with provisions for a cleansing agent located adjacent to operating rooms and providing hot and cold water and equipped with knee, foot, elbow, or automatic faucet controls.

(d) Separate and adequate refrigerated storage facilities with appropriate alarms shall be provided for blood if blood is stored in the operating room area.

(e) There shall be a dressing area with appropriate locker storage available for persons entering operating rooms.

(f) Toilet facilities shall be available.

(g) Adequate types and quantities of surgical instruments, equipment, and supplies for procedures performed shall be provided and maintained in a sanitary and safe condition.

(h) There shall be adequate storage within the operating room service area for clean and sterile supplies and equipment.

(i) A designated area shall be provided for collection and cleaning of soiled instruments and equipment.

(j) There shall be adequate, cleanable facilities for safe and appropriate waste collection and disposal.

(k) Housekeeping facilities shall be located within operating room service areas. These may be included in a soiled utility room equipped with a clinic service sink or service sink.

(l) There shall be filtered clean air in each operating room. A positive pressure ventilation gradient to adjoining corridors shall be maintained in operating rooms.

(m) Operating rooms shall be equipped with a room temperature control device or system capable of maintaining appropriate patient body temperature.

(3) Policies - procedures - responsibility.

(a) The organization plan of the hospital shall identify lines of authority, responsibility, and accountability within all operating room areas and areas where surgical procedures are performed or anesthesia administered.

(i) There shall be a physician designated and responsible for implementation of hospital policy related to medical staff in operating rooms and operating room service areas.

(ii) A designated registered nurse shall supervise personnel as specified in hospital policy in operating rooms and operating room service areas and shall be responsible for:

(A) Development and implementation of operating room and operating room service staffing plans to maintain adequate and safe patient care.

(B) Provision for orientation and ongoing training of personnel providing services within operating rooms and operating room service areas.

(C) Defining nursing responsibility between the time of patient entry into and exit from operating rooms and operating room service areas.

(b) Written policies and procedures shall be approved in writing by appropriate representatives of administration, medical staff, and nursing services.

(i) Information, policies and procedures available to nursing and scheduling staff shall include:

(A) A current roster of medical staff including delineated surgical privileges as granted by the governing body.

(B) Policies and delineated privileges, responsibilities, and accountability of others approved by medical staff and governing body to provide services in operating rooms including, but not limited to, dentists, oral surgeons, and podiatrists.

(C) Requirements for surgical and technical-professional assistants, including current licensure and/or other qualifications and any limitations related to patient care activities within the operating room or operating room service areas including, but not limited to, surgical technicians, other technicians, nurses, or technicians who are not hospital personnel or students.

(ii) There shall be a policy and procedures for obtaining surgical assistants.

(iii) There shall be policies and procedures specifying responsibility to document all aspects of patient care in operating rooms and operating room service areas.

(iv) Written infection control policies approved by the infection control or equivalent interdisciplinary group shall delineate responsibility in training and orientation of operating room and operating room service area personnel and others. Infection control policies and procedures shall specifically address:

(A) Surgical attire;

(B) Appropriate surgical scrub procedures;

(C) Housekeeping functions specific to operating room and operating room service areas before, between, and after cases;

(D) Cleaning, disinfecting, sanitizing, packaging, sterilizing, and storage of equipment and supplies;

(E) Disposal of wastes;

(F) Nonhospital and hospital-owned equipment that may be brought into the operating room or operating room service areas including requirements for cleaning and sterilization including, but not limited to, tools for repairing equipment and physician-owned instruments.

(G) People who may enter operating room areas including those who are not hospital personnel, such as repairmen and vendors.

(v) Written policies and procedures related to patient safety or protection shall address servicing, maintenance, and safety checks of electrical-electronic equipment and other patient care equipment including nonhospital-owned equipment.

(vi) Policies and procedures shall address and define responsibility for continuous patient care and documentation when a patient is transferred from one place to another in the course of performing a surgical or invasive procedure.

(4) Preoperative patient care shall be addressed in written hospital policies which shall define requirements for patient care during the preoperative period to include:

(a) A current patient history and report of physical examination by a practitioner, authorized by medical staff rule, included in the patient medical record prior to surgery. "Current," as used in this subsection, shall be defined by hospital policy.

(b) Documented assessment of patient needs for care including, but not limited to, allergies, fears, anxieties, changes in condition, vital signs.

(c) Written consent for procedure or surgery and anesthesia available in the medical record.

(d) Identification of patients by a secured name band.

(e) Test results available prior to surgery or procedure.

(5) Short stay or short term or ambulatory or one-day surgery services or special procedures, regardless of where performed, shall function according to written policies and procedures approved by representatives of hospital administration, medical staff, and nursing services and include:

(a) Patient identification system, patient consent, and preoperative patient assessment requirements.

(b) Provisions for appropriate monitoring or observation of patients undergoing procedures by at least one qualified person in addition to the medical staff authorized practitioner performing the procedure.

(c) Written approved infection control and equipment safety policies as specified in subsection (3)(b) of this section.

(d) Emergency equipment as required for all operating rooms, available within sixty seconds as specified in subsection (2)(b)(ii) of this section.

(e) Documentation of patient assessment prior to, during, and post procedure.

(f) Teaching protocols for post procedure period including what signs and symptoms the patient should report, who to contact, limitations on activities or diet, medication control, driving, operation of mechanical equipment, and instructions for follow-up.

(g) Patient evaluation prior to discharge.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-290, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-290, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-251, filed 11/13/85.]

WAC 246-318-300 Anesthesia services. (1) Anesthesia facilities, equipment, personnel, staff, policies and procedures shall be appropriate to the scope of surgical, obstetrical, or other care offered in each hospital.

(2) There shall be a designated physician member of medical staff responsible for anesthesia services and for establishing general policies for administration of anesthesia to patients throughout the hospital.

(3) Written policies and procedures shall be established to provide safety for all anesthetized patients to include:

(a) Provision for appropriate monitoring and attendance of all anesthetized patients.

(b) Qualifications and responsibilities of persons performing anesthesia services and care in compliance with applicable federal and state laws and rules.

(c) Evaluation of each patient prior to anesthesia.

(d) Pertinent information recorded in the medical record at the time of the preoperative anesthesia evaluation.

(e) Criteria or protocols for assessment of all patients by qualified persons prior to discharge from any post-anesthesia recovery area or the hospital.

(f) Precautions or procedures for safe administration of anesthetizing agents and other drugs consistent with hospital policy approved by the appropriate medical staff committee in accordance with WAC 246-318-190 (1)(n) and (2)(f).

(g) Preparation, administration, and documentation of intravenous solutions, medications, and admixtures consistent with WAC 246-318-430 and 246-318-435.

(4) All information specific to condition and treatment of the patient occurring during anesthesia induction, anesthesia maintenance, or emergence from anesthesia shall be documented and retained in the medical record of the patient.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-300, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-300, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-253, filed 11/13/85.]

WAC 246-318-310 Post-anesthesia recovery areas.

(1) Post-anesthesia facilities, equipment, personnel, staff, policies and procedures shall be appropriate to the scope of surgical, obstetrical, or other care offered in each hospital.

(2) Environment - facilities.

(a) A handwashing sink, soap dispenser, and towel dispenser shall be available within each post-anesthesia recovery room or area.

(b) There shall be provisions for visual privacy for patients.

(c) Suction and oxygen shall be available for each patient.

(d) Emergency equipment and supplies shall be appropriately maintained and available within sixty seconds, as specified in WAC 246-318-290 (2)(b)(ii).

(e) Adequate, easily cleanable storage facilities shall be provided.

(f) There shall be a soiled utility room available.

(g) An emergency signalling device registering at a location from or through which additional assistance is always available shall be available within recovery rooms or areas.

(3) Policies - procedures - responsibility.

(a) The organization plan of the hospital shall identify lines of authority, responsibility, and accountability within post-anesthesia recovery rooms or areas.

(i) There shall be a physician designated and responsible for implementation of hospital policy related to medical staff in post-anesthesia recovery rooms and areas. Policy shall specify amount and degree of physician availability to post-anesthesia recovery areas at all times when patients are present.

(ii) A designated registered nurse shall supervise personnel as specified in hospital policy in post-anesthesia recovery rooms and areas and shall be responsible for:

(A) Developing and implementing post-anesthesia recovery service staffing plans to maintain adequate and safe patient care, and

(B) Providing for orientation and ongoing training of personnel providing services within post-anesthesia recovery rooms or areas.

(b) There shall be criteria or protocols for assessment of all patients by qualified persons prior to discharge or release from any post-anesthesia recovery room or area.

(c) There shall be policies and procedures regarding management of infected or infectious cases, approved by the infection control committee.

(4) Nursing and other staff providing patient care in post-anesthesia recovery areas shall have documented orientation and demonstrated appropriate skills related to life support activities or functions.

(5) There shall be written orders authenticated by a physician for all drugs, intravenous solutions, blood, and medical treatments. Standing medical orders or protocols, when used, shall be in the patient medical record and authenticated by a physician.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-310, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-310, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 85-23-017 (Order 2302), § 248-18-256, filed 11/13/85.]

WAC 246-318-320 Processing and sterilizing services. (1) Hospitals shall make adequate provisions for proper cleaning, disinfection, and sterilization of supplies, equipment, utensils, and solutions.

(2) Processing and sterilizing services and areas shall have adequate space and equipment for sorting, processing, and storage.

(a) Separation between soiled and clean items shall be maintained during sorting, processing, transporting, and storage.

(b) Positive air pressure shall be maintained in clean areas in relation to adjacent areas.

(c) Negative air flow shall be maintained in soiled areas.

(d) Equipment including sterilizers of the proper type for adequate sterilization shall be provided and maintained in a satisfactory and safe condition.

(e) If ethylene oxide sterilizers are used, mechanical aerators shall be provided and maintained in a safe and satisfactory condition.

(3) Processing and sterilizing services shall be adequately staffed with trained personnel:

(a) Orientation and inservice, including infection control and safe practices, shall be provided.

(b) Written policies and procedures shall specify scheduled activities and routines of personnel.

(4) There shall be written policies and procedures, approved by the infection control committee or an equivalent interdisciplinary group, for the activities performed in all processing and sterilizing areas in the hospital addressing:

(a) Collecting, receiving, decontaminating, packaging, sterilizing, and distributing of items;

(b) Aerating of items exposed to ethylene oxide;

(c) A recognized method of checking sterilizer performance by mechanical monitoring of time, temperature, and pressure as well as biological and chemical testing;

(d) Establishment of shelf life determined by packaging material and storage environment;

(e) Recall, disposal, and reprocessing of outdated, improperly sterilized, and limited-use items;

(f) Maintaining clean areas free of external shipping containers.

(5) There shall be written policies and procedures addressing emergency collection and disposition of supplies when special warnings have been issued by a manufacturer or safety agency.

(6) Processed and sterilized items shall be maintained as specified in WAC 246-318-190 (3)(a), (b), (c), (d), and (e).

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-320, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050, 85-05-034 (Order 281), § 248-18-260, filed 2/15/85; Order 119, § 248-18-260, filed 5/23/75; Regulation 18.260, effective 3/11/60.]

WAC 246-318-330 Use of medical gases, combustible anesthetics. In rooms where combustible anesthetic (cyclopropane, divinyl ether, ethyl chloride, ethyl ether, and ethylene) agents are used, the installation, maintenance, and use of equipment and other precautions observed by personnel shall be in accordance with department approved or recommended standards.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-330, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 79-04-081 (Order 176), § 248-18-270, filed 4/2/79; Order 119, § 248-18-270, filed 5/23/75; Regulation 18.270, effective 3/11/60.]

WAC 246-318-340 Nonflammable medical gases.

(1) Nonflammable medical gases shall include but not be limited to oxygen, nitrous oxide, medical compressed air, carbon dioxide, helium, nitrogen and mixtures of such gases when used for medical purposes.

(2) Medical gas gauges, alarms and manometers shall be tested for accuracy periodically and be conspicuously labeled "(name of gas), use no oil."

(3) "No smoking" signs shall be posted where oxygen is being administered.

(4) Oxygen tent canopies shall be fabricated of slow burning or noncombustible material.

(5) Electric equipment used in an oxygen enriched environment shall be properly designed for use with oxygen and should be labeled for use with oxygen.

(6) Procedures shall specify the safe storage and handling of medical gas containers.

(7) Upon completion of any alteration, modification or repair of medical gas piping systems in which any line in the system is disconnected or disrupted, qualified personnel shall conduct appropriate tests, to include oxygen analysis and to assure that medical gas outlets within the disconnected or disrupted system are delivering the proper gas as shown on the outlet label. There shall be documentation that tests have occurred.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-340, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 79-12-038 (Order 187), § 248-18-280, filed 11/20/79. Statutory Authority: RCW 70.41.030, 79-04-081 (Order 176), § 248-18-280, filed 4/2/79; Order 119, § 248-18-280, filed 5/23/75; Regulation 18.280, effective 3/11/60.]

WAC 246-318-350 Emergency care services. The hospital shall have a well defined system for providing emergency care services. The nature and scope of the hospital's emergency care services should be in accord with the community's needs and the hospital's capabilities.

(1) The hospital shall provide the following basic, outpatient emergency care services.

(a) Assessment of a person's condition to determine the nature, acuity, and severity of the person's immediate medical need.

The condition of each person, who comes or is brought to the hospital for emergency medical care, shall, upon arrival, be assessed by a registered nurse, physician, or physician's assistant for the purpose of determining the nature and urgency of the person's medical need and the timing and place of the person's care and treatment.

(b) Immediate diagnosis and treatment of any life threatening cardiac arrhythmia, respiratory insufficiency or shock.

(c) Appropriate transfer or referral of a patient who needs medical care services not provided by the hospital. Prior to transfer of an emergency patient to another health care facility, the hospital shall:

(i) Perform the emergency procedures needed to minimize aggravation of the patient's condition during transport to the other health care facility; and

(ii) Ascertain that the means by which the patient is to be transported to the other health care facility are suitable for the patient.

(2) A hospital shall not be required to comply with subsections (3)(h), (4)(a) and (d), (5)(a), and (6)(a) of this section if the hospital does not offer outpatient emergency care services regularly and only provides the outpatient emergency services required under subsection (1) of this section to the occasional emergency patient who comes or is brought to the hospital by chance.

(3) The hospital shall have, in effect, written policies and procedures which supplement and are coordinated with the hospital's basic policies and are specific to emergency care services. These policies and procedures shall be: Reviewed and revised as necessary to keep them current and, in any case, at least annually; dated and approved in writing by appropriate representatives of the hospital's administrative, medical, and nursing staffs; and made known and readily available to physicians, nurses, and other persons having a responsibility for emergency care services. Policies and procedures pertaining to emergency care services shall include the following.

(a) Policies on the scope and extent of the emergency care services to be provided.

(i) The hospital shall establish the conditions under which treatment is to be provided in the emergency care area, the types of procedures that are to be performed in another area of the hospital (e.g., surgery) rather than the emergency area, the conditions under which a patient is to be admitted as an inpatient, the conditions under which a patient is to be transferred to another health care facility, the conditions under which a patient is to be referred to a private physician or another health care facility, and the conditions under which arrangements should be made for a patient to return to the hospital for treatment.

(ii) A patient shall not be transferred to another health care facility until the other health care facility has been contacted and has consented to accept the patient.

(iii) A record containing the following data shall be sent with an emergency patient who is transferred to another health care facility: Patient identification data, identification of the patient's illness or injury, treatment given to the patient, and an appraisal of the patient's condition upon transfer.

(b) Policies and procedures which prescribe the course of action to be taken when the number of emergency patients, who have arrived or are expected, constitute an overload for the emergency service facilities and staff on hand.

The hospital shall establish who is to be notified when an overload of emergency patients occurs, the conditions under which arrangements are to be made for care of some emergency patients at other hospitals, the conditions under which additional physicians, nurses, and other persons are to be summoned, the methods by which necessary, additional supplies and equipment are to be obtained, and the conditions under which rooms and areas outside the emergency service area of the hospital are to be used for emergency care and treatment.

(c) Medical policies, standing emergency medical orders, and written medical procedures to guide the action of nurses and other personnel when a person presents a medical emergency and a physician is not present.

(i) Medical policies shall delineate the circumstances under which particular medical policies are to be followed,

provide for a physician to be called as rapidly as possible, and establish the minimum qualifications or training of persons who may execute particular emergency medical orders.

(ii) There shall be written procedures, approved in writing by a representative of the medical staff, for any use of defibrillators, respirators or other special medical equipment and for the performance of the special, emergency medical procedures listed in subsection (4)(c) of this section.

(iii) A standing medical order for administration of a drug or other treatment during a medical emergency shall include: A description of the treatment which includes the name of any drug or other agent; the dosage, concentration or intensity of any drug or other agent; the route or method of administration; where pertinent, the time interval, frequency, or duration of administration; and the signature of a representative of the medical staff.

(d) Policies which delineate medical staff responsibilities for emergency care services as related to assigned clinical privileges, physician coverage of emergency care services, and physician participation in the training of personnel.

(e) Policies regarding the notification of an emergency patient's next of kin or legal guardian.

(f) Policies relevant to obtaining consent for treatment from an emergency patient or other person who may legally give consent for treatment of the patient.

These shall include instructions regarding action to be taken when the condition of an emergency patient and the absence of another person legally able to act on behalf of the patient make it impossible to gain an informed consent for critically needed treatment or consent for critically needed treatment is refused.

(g) Policies and procedures pertaining to the care and handling of persons whose conditions require special medical or medico-legal consideration.

(i) Policies and procedures shall prescribe the course of action to be followed in the care of persons who manifest severe emotional disturbances, are under the influence of alcohol or other drugs, are victims of suspected child abuse, are victims of other suspected criminal acts, have a contagious disease, have been contaminated by radioactive material, are diagnosed dead on arrival, or present other conditions requiring special directions regarding action to be taken.

(ii) Definite provision shall be made for communications, as indicated, with health authorities, police or coroner relative to a person whose condition or its cause are reportable.

(h) Policies governing special diagnostic and therapeutic services (e.g., clinical laboratory, x-ray, pharmacy, surgery) to emergency patients.

These shall be designed to ensure prompt availability of necessary diagnostic and therapeutic services and establish the types, scope, and extent of the special diagnostic and therapeutic services to be provided for the care of emergency patients.

(i) Policies regarding notification of an emergency outpatient's personal physician and procedures for transfer of relevant reports to the personal physician.

(j) Policies regarding disclosure of information about an emergency patient.

(4) Organization and staffing for emergency care services shall be in accord with the anticipated patient load and the services provided by the hospital.

(a) There shall be a physician responsible for the medical direction of the hospital's emergency care services. This physician shall be a representative of the medical staff or a physician whose services the hospital has arranged on a regular basis. The functions and responsibilities of the physician responsible for medical direction of the emergency care services shall be delineated in writing and made known to members of the medical and nursing staffs.

(b) At all times, there shall be a physician on duty or call for emergency care services. A current schedule of the names of on-call physicians and the telephone numbers of these physicians or the call service(s) through which they can be contacted rapidly shall be posted in the emergency care area.

(c) At all times, there shall be on duty within the hospital at least one registered nurse who is immediately available and responsible for emergency care services and who is qualified to perform the following: Administration of intravenous fluids, electrocardiography and defibrillation of life threatening arrhythmias, cardio-pulmonary resuscitation, control of hemorrhage, gastric lavage, and basic neurological evaluation. It is recommended that such a nurse also be qualified to perform endotracheal intubation and arterial puncture.

(d) There shall be additional nursing staff and other personnel for emergency care services as are necessary to provide the types and amount of care required by patients.

(i) Staffing for emergency care services shall be adequate to ensure that each applicant for emergency medical care is seen within a period of time commensurate with the nature, acuity and severity of his or her immediate medical need.

(ii) Each hospital employee engaged in the provision of emergency care shall have had the education and training necessary to perform the emergency medical procedures and other functions and duties for which he or she may be responsible.

(5) The physical plant facilities, equipment, and supplies for emergency care services shall be commensurate with the scope, types and volume of the services provided by the hospital.

(a) A hospital which regularly offers emergency care services shall maintain a distinct emergency service area.

(i) The emergency service area shall be in close proximity to an emergency entrance and separate from the surgery and delivery suites and inpatient nursing units.

(ii) The emergency service area shall provide adequate space for reception and screening of patients and have examination, treatment, and observation rooms in such numbers, sizes, and arrangements as are necessary to assure safe and effective treatment of patients.

(iii) There shall be some means of providing visual privacy to patients in all rooms or areas in which patients are examined or treated.

(iv) At the emergency entrance there shall be an outside night call bell which, when activated, sounds in an area of the hospital in which nursing personnel are always on duty.

(b) A hospital which limits its emergency care services to care of the occasional emergency patient shall not be

required to maintain a distinct emergency service area, but shall designate the area(s) to be used for emergency care and provide the equipment, pharmaceuticals and other supplies essential to providing basic emergency care services required under subsection (1) of this section. Emergency equipment and supplies shall be maintained in such a location and manner (e.g., on a "crash" cart) that they may be brought into use immediately upon arrival of a person who presents a medical emergency.

(c) The equipment, pharmaceuticals and other supplies necessary to provide emergency care services shall be readily available at all times.

(i) There shall be specific, designated locations for storage of drugs, parenteral solutions, other supplies, instruments and special equipment so personnel can obtain them rapidly.

(ii) There shall be a system for regular inventory and replenishment of the stock of emergency supplies and equipment to ensure an adequate supply at all times.

(iii) There should be regular inspection and maintenance servicing of medical equipment to keep it in a safe and operable condition.

(d) Current references on toxicology, antidote information and the telephone number of the regional poison control center shall be readily available in the emergency care area.

(e) Telephone numbers of the pharmacist, the blood bank, the ambulance service, the Washington state patrol, Military Assistance Safety and Traffic (MAST), the fire department, the police department, local health authorities, the coroner and other persons or organizations emergency service personnel may need to contact rapidly shall be posted in the emergency service area.

(f) Hospital to ambulance radio communication compatible with the state-wide emergency communication system is recommended for any hospital which regularly provides emergency care services.

(6) The hospital shall maintain an emergency service register and a medical record for each person who has received emergency care service.

(a) There shall be a permanent, current register for all emergency patients.

(i) The register shall contain at least the following data for each person who comes or is brought to the hospital for immediate medical care services: Full name, age, date and time of arrival, the identifying number, the disposition of the patient and the time of the patient's departure from the emergency service area.

(ii) Data on patients shall be entered in the register in chronological order according to the dates and times of arrivals.

(iii) Identification data on a person who is dead on arrival shall be entered in the register.

(b) The hospital shall maintain a medical record for each person who receives emergency care services. Each medical record shall contain the following data.

(i) Patient identification data.

(ii) The date and time of arrival, the means by which the patient came to the hospital and by whom the patient was transported or accompanied.

(iii) Pertinent history of the patient's injury or illness which may include information on first aid or emergency care given the patient prior to his or her arrival.

(iv) Description of significant clinical findings derived from an assessment or examination of the patient.

(v) Any clinical laboratory or roentgenologic findings.

(vi) Diagnosis (tentative or definitive).

(vii) Treatment given.

(viii) Orders for administration of drugs or other treatments which are received by telephone, radio, or verbally from a physician or other person legally authorized to prescribe and acting within the scope of his or her license.

Such a telephone or verbal order shall be received, entered in the patient's medical record and signed by a registered nurse. The counter-signature of the physician or other legally authorized practitioner who gave the order shall be obtained as soon as possible thereafter. This shall not be interpreted to include verbal orders which are received from a physician or other legally authorized practitioner to whom one is providing direct assistance in care of the patient or to include standing emergency medical orders which have been established in accordance with subsection (3)(c)(iii) of this section.

(ix) Appraisal of the patient upon transfer or departure.

(x) Disposition of the patient, which shall include a resume of any instruction given to the patient or his family regarding necessary follow-up care.

Entries of data listed as (iv), (vi), (vii), (ix), and (x) above shall be authenticated by the signature of the person who rendered the service.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-350, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-350, filed 12/27/90, effective 1/31/91; Order 142, § 248-18-285, filed 2/8/77; Order 119, § 248-18-285, filed 5/23/75; Order 110, § 248-18-285, filed 3/14/75; Order 106, § 248-18-285, filed 1/13/75.]

WAC 246-318-360 Diagnostic and treatment facilities, outpatient services. If the hospital has an organized unit as an outpatient department or clinic, adequate waiting area, examining and treatment rooms, toilets and special rooms necessary for the services to be rendered, shall be provided.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-360, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-290, filed 5/23/75; Order 106, § 248-18-290, filed 1/13/75; Regulation 18.290, effective 3/11/60.]

WAC 246-318-370 Laboratory. (1) Each hospital shall ensure:

(a) Availability of laboratory services sufficient in size and scope to provide adequate care of all patients minimally to include provisions for:

- (i) Obtaining blood and blood products,
- (ii) Performing hemoglobin or hematocrit,
- (iii) Performing white blood count,
- (iv) Performing platelet estimate,
- (v) Performing urinalysis,
- (vi) Performing blood glucose, and
- (vii) Performing serum potassium.

(b) Disposal of contaminated materials in a safe manner (see WAC 246-318-170);

(c) Appropriate maintenance, safety, and cleanliness of hospital laboratory facilities and equipment (see WAC 246-318-035, 246-318-150, 246-318-155, and 246-318-170);

(d) Provision for pathology services appropriate to all services available in the hospital.

(2) Hospitals shall provide laboratory services in accordance with guidelines for laboratory quality assurance program, WAC 246-318-99910.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-370, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-370, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-23-056 (Order 2560), § 248-18-300, filed 11/18/87; Order 119, § 248-18-300, filed 5/23/75; Regulation 18.300, effective 3/11/60.]

WAC 246-318-380 Diagnostic and therapeutic radiology and other imaging services. (1) Hospitals shall:

(a) Ensure availability of radiologic services appropriate to the type and scope of hospital services offered for inpatients and outpatients; and

(b) Provide a written description of the type and scope of nuclear medicine and other diagnostic and therapeutic imaging services when provided in the hospital for inpatients and outpatients.

(2) Hospitals with imaging services shall:

(a) Designate medical responsibility to a physician member of the medical staff and require access to a radiologist, if radiologic services are provided in the hospital;

(b) Designate medical responsibility to one or more physician members of the medical staff qualified in nuclear medicine, if nuclear medicine services are provided;

(c) Designate medical responsibility to one or more physician members of the medical staff qualified in the appropriate specific imaging specialty if other imaging services are provided;

(d) Require performance of radiology, nuclear, and other imaging services only when:

(i) Ordered, in writing, by a member of the medical staff; or

(ii) In accordance with hospital policy and procedures; and

(e) Provide sufficient numbers of personnel and medical staff qualified to safely deliver the type, scope, and volume within each imaging service including:

(i) At least one diagnostic radiologic technician, technologist, or physician available to come to the hospital to perform diagnostic procedures at all times;

(ii) Performance of therapeutic radiologic services by:

(A) A radiologist or radiation oncologist; or

(B) A therapeutic radiologic technologist directed by a radiologist or radiation oncologist;

(iii) Performance of diagnostic radiologic services by:

(A) A physician or radiologist; or

(B) A diagnostic radiologic technician under policies and procedures approved by a radiologist; and

(iv) After December 31, 1990, performance of nuclear medicine services by a nuclear medicine technologist or by a physician member of the medical staff qualified in nuclear medicine.

(f) Establish policies and procedures approved by administration, a radiologist, and other medical staff qualified in the specialties provided including:

(i) Protection of patients and others from radiation hazards including shielding for syringes, vials, and sources of radioactivity;

(ii) Patient preparation, patient examination, and administration of diagnostic agents;

(iii) Medical staff responsibility for preparation and administration of radiopharmaceuticals;

(iv) Designating authorized users of the equipment;

(v) Safe operation of equipment;

(vi) Safe handling, storage, preparation, labeling, transporting, and disposal of radioactive materials;

(vii) Precautions to minimize unnecessary radiation exposure to patients and others;

(viii) Actions required in event of radioactive contamination of patients, personnel, equipment, and environment;

(ix) Prevention of electrical, mechanical, fire, explosion, and other hazards; and

(x) Written reports on any adverse reaction of a patient to diagnostic or therapeutic agents, including notation in the medical record or outpatient report.

(3) Hospitals providing any imaging service shall provide:

(a) Adequate space and facilities for:

(i) Patient privacy;

(ii) Patient access to a toilet;

(iii) Patient examinations;

(iv) Patient reception;

(v) Patient dressing rooms;

(vi) Exposed and unexposed film storage; and

(vii) Safe storage, preparation, labeling, transportation, and disposal of radioactive materials.

(b) Maintenance of safe, clean equipment, facilities, and supplies appropriate for the type and scope of service offered;

(c) Maintenance of all patient care equipment in safe, operating condition;

(d) Emergency equipment, supplies, and medications required under WAC 246-318-290(5); and

(e) A method for summoning extra appropriate staff for emergencies arising in imaging service areas.

(4) Hospitals providing radiologic areas, rooms, and services shall:

(a) Conduct radiologic services in a safe, appropriately equipped area of the hospital, shielded as necessary to prevent radiation hazards to individuals;

(b) Maintain radiology equipment meeting applicable state rules for radiation protection under chapter 246-225 WAC; and

(c) Arrange for services of a qualified expert defined and described under WAC 246-240-040 as needed for:

(i) Consultation, including periodic radiologic safety testing;

(ii) Supervision of radiation safety measures; and

(iii) Participation in education programs.

(5) Hospitals with imaging services shall:

(a) Maintain authenticated and dated reports of diagnostic and therapeutic procedures, consultations, and interpretations in each patient's medical record;

(b) Retain hard copies or electronic access to authenticated interpretative reports for films, consultations, and therapeutic procedures in the imaging service area for a period defined by the hospital;

(c) Require hospital-authorized practitioners to provide a reason for each examination on all requests for services;

(d) Require authentication of interpretative reports by:

- (i) The radiologist for radiology reports; or
- (ii) A designated physician member of the medical staff qualified in the appropriate, specific imaging specialty.
- (e) Retain patient logs for imaging services and records of equipment calibration inspections and quality assurance testing in the imaging service area for a period defined, in writing, by the hospital;
- (f) Maintain records of receipt and disposition of radioactive materials; and
- (g) Maintain documentation of:
 - (i) Maintenance and periodic calibration of all radiation safety equipment;
 - (ii) Maintenance of all patient care equipment in a safe, operating condition; and
 - (iii) Calibration of diagnostic and treatment radiologic equipment by:
 - (A) A qualified expert defined and required under WAC 246-240-040; or
 - (B) An individual qualified according to manufacturer's specifications for a particular piece of equipment.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-380, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-380, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-109 (Order 008), § 248-18-311, filed 11/1/89, effective 12/2/89.]

WAC 246-318-390 Physical and occupational therapy services. (1) Definition "authorized health care practitioner" means physicians and other licensed individuals as defined in RCW 18.74.010(7).

(2) Each hospital shall clearly define physical therapy (PT) and occupational therapy (OT) services in a written statement describing the scope of diagnostic, therapeutic, and rehabilitative services provided for inpatients and outpatients.

(3) Policies and procedures. When a hospital offers PT or OT services, written policies and procedures shall be established and followed including instructions for:

- (a) Patient care protocols.
- (b) Operation and application of equipment.
- (c) Equipment maintenance and monitoring.
- (d) Infection control practices including:
 - (i) Cleaning,
 - (ii) Disinfecting,
 - (iii) Sterilizing, and
 - (iv) Changing of equipment.
- (e) Documentation.
- (f) Periodic review of policies and procedures with:
 - (i) Revision as needed,
 - (ii) Documentation of date and name of reviewers, and
 - (iii) Written approval of revisions by:
 - (A) The appropriate committee or group including medical staff representation, or
 - (B) A member of the medical staff.
- (g) What to do when physician or prescribing practitioner orders are unclear or incomplete. (Complete orders include modality, frequency, date, time, and authentication.)
- (4) Medical direction and personnel.
 - (a) Hospital OT and PT services shall be:
 - (i) Under the direction of a member of the active medical staff, or
 - (ii) Under the direction of a committee chaired by a member of the active medical staff.

- (b) Hospitals shall provide:
 - (i) Adequate numbers of qualified personnel in accordance with the scope and volume of OT and PT services.
 - (ii) Inservice and orientation for PT and OT personnel with appropriate documentation.
- (5) Patient treatment plan. Hospitals shall require a written OT and PT treatment plan for each patient receiving a PT or OT treatment service, to include:
 - (a) Identification of short and long term goals,
 - (b) Identification of patient's problems and limitations,
 - (c) Description of planned procedures and modalities.
 - (6) Authorization and documentation. When OT or PT treatment services are provided, the hospital shall require and ensure:
 - (a) Medical authorization of treatments evidenced by:
 - (i) Written authentication by a member of the medical staff for all inpatient treatment services provided, or
 - (ii) Written authentication by the authorized health care practitioner issuing the order for outpatient treatments, according to hospital policy and procedures.
 - (b) Entry of written, verbal, and telephone orders into the appropriate individual medical record.
 - (c) Use of standing orders only when:
 - (i) Dated and signed by a member of the medical staff,
 - (ii) Reviewed annually and renewed by written approval (dated authentication) of each order, and
 - (iii) A copy of the order is inserted into the appropriate individual medical record.
 - (d) Documentation in the medical record of PT and OT services provided for a patient to include:
 - (i) Date,
 - (ii) Time treatment was initiated,
 - (iii) Type of therapy service performed,
 - (iv) Periodic assessment of the response of the patient, and
 - (v) Authentication by the person performing the service.
 - (7) Space and equipment. Hospitals shall provide:
 - (a) Adequate space designated for:
 - (i) Reception,
 - (ii) Recordkeeping, and
 - (iii) Treatments,
 - (iv) Storage of equipment and supplies.
 - (b) Patient dressing and toilet facilities,
 - (c) Patient privacy,
 - (d) Safe, functional, and appropriate equipment for any PT and OT service provided, and
 - (e) Calibration of equipment with documentations,
 - (f) System for equipment maintenance.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-390, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-030 (Order 2464), § 248-18-312, filed 1/14/87.]

WAC 246-318-400 Respiratory care services. (1) Respiratory care services shall be clearly defined in a written statement that describes the scope of diagnostic, therapeutic and rehabilitative cardio-pulmonary services provided for inpatients and outpatients.

- (2) Policies and procedures.
 - (a) Written policies and procedures for respiratory care services shall be developed and implemented and shall include instructions for the following: Patient care tech-

niques; operation and application of equipment; equipment maintenance and monitoring; infection control practices including cleaning, disinfecting, sterilizing and changing of equipment; use and storage of medications, drugs and chemicals.

(b) Policies and procedures shall be periodically reviewed, revised as needed and approved by the appropriate committee with medical staff representation or by member of the medical staff.

(3) Medical direction and personnel.

(a) The respiratory care services shall be under the medical direction of a member of the active medical staff or a committee chaired by a member of the active medical staff.

(b) Respiratory care services shall have an adequate number of qualified personnel in accordance with the scope and volume of services.

(c) In-service shall be provided and documented for respiratory care service personnel.

(4) Authorization and documentation.

(a) Respiratory care services provided for a patient shall be authorized in writing and signed by a physician. Verbal and telephone orders shall be signed by a physician.

(b) Routine and standing orders, when used, shall be reviewed annually and signed by the appropriate member of the active medical staff.

(c) Respiratory care services provided for a patient shall be reported in the medical record. The record shall include the date, time, type of respiratory service performed, medications, assessment of the response of the patient, and signature of the person performing the service.

(d) There shall be a policy statement describing what to do when physician orders are unclear or incomplete.

(5) Space.

(a) There shall be adequate space designated in the hospital for reception, treatments and/or respiratory services, recordkeeping, storage for equipment, supplies and drugs.

(b) Space for treatments and for processing of equipment and materials shall be organized and maintained to prevent cross-contamination.

(c) Equipment and instruments shall be safe, functional, and appropriate for respiratory care services provided. There shall be documentation of the calibration and maintenance systems.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-400, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 79-04-081 (Order 176), § 248-18-315, filed 4/2/79.]

WAC 246-318-410 Other services. Hospitals offering and providing diagnostic or therapeutic services other than those specified elsewhere in this chapter shall:

(1) Maintain adequate space and equipment for the scope of services offered.

(2) Provide for patient privacy.

(3) Require professional staff licensure when required by state statute.

(4) Require evidence of specific medical staff orders for any diagnostic services or treatments for inpatients.

(5) Establish policy and procedure addressing referral orders issued by persons other than medical staff for outpatient treatments and diagnostic services.

(6) Maintain appropriate pharmacist participation as described in WAC 246-318-190 (1)(n) and (2)(f).

(7) Establish policies and procedures specific to operation of each service offered minimally to include:

(a) Providing orientation and inservice for staff,

(b) Ensuring patient safety and infection control,

(c) Providing maintenance and calibration of equipment, and

(d) Maintaining coordination with other hospital services.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-410, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-410, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-030 (Order 2464), § 248-18-321, filed 1/14/87.]

WAC 246-318-420 Hospital pharmacy. Each hospital shall provide evidence of current approval by the Washington state board of pharmacy pursuant to chapter 18.64 RCW and chapter 246-873 WAC.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-420, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-420, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050 and 70.41.030. 84-02-036 (Order 271), § 248-18-331, filed 12/30/83. Formerly WAC 248-18-330.]

WAC 246-318-430 Intravenous preparation. (1) There shall be written policies and procedures including:

(a) Preparation of intravenous solutions, medications, and admixtures. "Intravenous admixture" means a solution with addition of medication or an altered solution intended for intravenous use.

(b) Infection control policies and procedures approved by the infection control or an equivalent committee, and including:

(i) Aseptic preparation of intravenous admixtures and medications in a clean, low-traffic area, preferably under a clean air center.

(ii) Cleaning and preventive maintenance of clean air centers.

(c) Information required on all orders or prescriptions for intravenous solutions, admixtures, and medications, which shall minimally include identification of solution or medication, rate of flow or frequency, duration, strength of additive, dilution ratio of solution, identification of patient, and identification of prescribing practitioner.

(2) Individuals preparing intravenous solutions and admixtures shall be legally authorized, trained in procedures and equipment, and approved by the hospital.

(3) There shall be drug compatibility reference material readily available to those who prescribe, prepare, and administer intravenous admixtures.

(4) Intravenous solution containers shall be labeled to include patient name, identification of solution, identification and strength of additives, volume, rate of flow, expiration time and date of admixture, any special requirement for handling and storage, and identification of individual preparing admixture. There shall be procedures for appropriate labeling of precision volume chambers during times such are used for administering admixtures.

(5) There shall be policy and procedures for frequency of reordering intravenous solutions and admixtures.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-430, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 83-13-061 (Order 261), § 248-18-335, filed 6/15/83.]

WAC 246-318-435 Intravenous administration. (1) There shall be written policies and procedures including:

(a) Administration of intravenous solutions, medications, admixtures, blood, and blood products.

(b) Infection control policies and procedures approved by the infection control or an equivalent committee, and including:

- (i) Site preparation.
- (ii) Tubing and dressing management.
- (iii) Site assessment and rotation.

(c) Use and control of intravenously administered investigational drugs.

(d) Administration of parenterally administered drugs causing tissue necrosis upon extravasation.

(e) Documentation requirements.

(f) Patient teaching and discharge instruction.

(g) All orders or prescriptions for intravenous solutions, admixtures, and medications shall minimally include identification of solution or medication, rate of flow or frequency, duration, strength of additive, dilution ratio of solution, identification of patient, and identification of prescribing practitioner.

(h) Use of electronic infusion control devices.

(2) Personnel inserting intravenous devices shall be legally authorized and appropriately trained with demonstrated and documented skills in intravenous insertion techniques.

(3) Personnel administering intravenous solutions and admixtures shall be legally authorized to administer medications with appropriate training, demonstrated and documented skill in intravenous administration, procedures, equipment, and approval of the hospital.

(4) There shall be drug compatibility reference material readily available to individuals who administer intravenous medications and admixtures.

(5) Intravenous solutions shall be administered only upon the order of a legally authorized practitioner authorized by hospital policy to prescribe drugs in the hospital.

(6) Intravenous solution containers shall be labeled to include patient name, identification of solution, identification and strength of additives, volume, rate of flow, expiration time and date of admixture, any special requirement for handling and storage, and identification of individual preparing admixture. There shall be procedures for appropriate labeling of precision volume chambers during times such as are used for administering admixtures.

(7) There shall be documentation in the medical record to include:

(a) Solution, medication or medications, time, date, amount administered, and rate;

(b) Site and site assessment;

(c) Date and time of insertion and removal of cannula;

(d) Device used, including gauge, length and type needle, or cannula;

(e) Condition of cannula and site at the time removed from patient;

(f) Use of electronic infusion devices;

(g) Observed complications and treatment of complications;

(h) Management of tubing and dressing; and

(i) Signature. An initial signature identification system is acceptable.

(8) Administration of intravenous preparations to pediatric patients shall comply with regulations in this section and WAC 246-318-210.

[Statutory Authority: RCW 70.41.030, 92-02-018 (Order 224), § 246-318-435, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-435, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 83-13-061 (Order 261), § 248-18-336, filed 6/15/83.]

WAC 246-318-440 Records and reports—Medical record system. Each hospital shall have a well-defined medical record system with facilities, staff, equipment, and supplies necessary to develop, maintain, control, analyze, retrieve, and preserve patient care data and medical records.

(1) Medical record service. Hospitals shall establish an organized medical record service, consistent with recognized principles of medical record management, directed, staffed, and equipped to ensure:

(a) Timely, complete and accurate checking, processing, indexing, filing, and preservation of medical records; and

(b) The compilation, maintenance, and distribution of patient care statistics.

(2) Policies and procedures related to medical record system. Hospitals shall establish and follow current written policies and procedures related to the medical record system, including requirements for:

(a) An established format for patients' individual medical records;

(b) Access to and release of data in patients' individual medical records and other medical data considering the confidential nature of information in these records;

(c) The retention, preservation, and destruction of medical records; and

(d) Maintenance and disposition of medical and other records in Washington state owned or operated hospitals as required in chapter 40.14 RCW and rules promulgated under chapter 40.14 RCW.

(3) Patients' medical records, general. Hospitals shall:

(a) Develop and maintain an individual medical record for each person, including each neonate, receiving care, treatment, or diagnostic service at the hospital except as permitted in subsection (4)(b) of this section;

(b) Establish a systematic method for identifying each patient's medical record or records to allow ready identification, filing, and retrieval of all of the patient's record or records;

(c) Require prompt, pertinent entries in a patient's medical record on:

(i) A significant observation;

(ii) Any diagnostic or treatment procedure; and

(iii) Other significant events in a patient's clinical course or care and treatment.

(d) Require entries to include:

(i) A date;

(ii) Authentication by the individual assuming responsibility for the entry; and

- (iii) A time in accordance with hospital policy.
- (e) File the originals or durable, legible, direct copies of originals of reports in patients' individual medical records;
- (f) Enter all diagnoses and operative procedures in patients' medical records in terminology consistent with a recognized system of disease and operations nomenclature;
- (g) Require legible entries in a patient's medical record which are:
 - (i) Written in ink;
 - (ii) Typewritten; or
 - (iii) Recorded on a computer terminal designed to receive such information.
- (4) Hospitals may:
 - (a) Store entries on magnetic tapes, discs, or other devices suited to the storage of data;
 - (b) Maintain a simple record system instead of the individual medical records required under subsections (3) and (4)(c) of this section for patients receiving only referred outpatient diagnostic services, as defined in WAC 246-318-010, provided the system permits:
 - (i) Identification of patient; and
 - (ii) Filing and retrieval of authenticated reports on all tests or examinations provided to any patient receiving services.
 - (c) Limit content in individual medical records for patients who would be considered referred outpatients, except for use of parenteral injections during diagnostic tests to:
 - (i) Relevant history and physical findings where indicated;
 - (ii) Known allergies or idiosyncratic reactions;
 - (iii) Diagnostic interpretation;
 - (iv) Written consent; and
 - (v) Identifying admission data.
- (5) Patients' medical records, content. Hospitals shall require and ensure entry of the following data into a medical record for each period a patient receives inpatient or outpatient services with exceptions only as specified in subsection (4) of this section and WAC 246-318-350(6):
 - (a) Admission data including:
 - (i) Identifying and sociological data;
 - (ii) The full name, address, and telephone number of the patient's next of kin or, when indicated, another person with legal authority over the person of the patient;
 - (iii) The date of the patient's admission as an inpatient or outpatient;
 - (iv) The name or names of the patient's attending physician or physicians; and
 - (v) The admitting or provisional diagnosis or description of medical problem.
 - (b) A report on any medical history obtained from the patient;
 - (c) Report or reports on the findings of physical examination or examinations performed upon the patient;
 - (d) An entry on any known allergies of the patient or known idiosyncratic reaction to a drug or other agent;
 - (e) Authenticated orders for:
 - (i) Any drug or other therapy administered to a patient;
 - (ii) Any diet served to the patient;
 - (iii) Any standing medical orders used in the care and treatment of the patient except standing medical emergency orders; and
 - (iv) Any restraint of the patient.
 - (f) Reports on all:
 - (i) Roentgenologic examinations;
 - (ii) Clinical laboratory tests or examinations;
 - (iii) Macroscopic and microscopic examinations of tissue;
 - (iv) Other diagnostic procedures or examinations performed upon the patient; and
 - (v) Specimens obtained from the patient.
 - (g) An entry on each administration of therapy, including drug therapy, to the patient;
 - (h) Entries on nursing services to the patient including:
 - (i) A report on all significant nursing observations and assessments of the patient's condition or response to care and treatment;
 - (ii) Nursing interventions and other significant direct nursing care including all administration of drugs or other therapy;
 - (iii) An entry on the time and reason for each notification of a physician or patient's family regarding a significant change in the patient's condition; and
 - (iv) A record of other significant nursing action on behalf of the patient.
 - (i) An entry on any significant health education, training, or instruction provided to the patient or family related to the patient's health care;
 - (j) An entry on any social services provided the patient;
 - (k) An entry regarding:
 - (i) Any adverse drug reaction of the patient; and
 - (ii) Any other untoward incident or accident occurring during hospitalization or outpatient visit and involving the patient.
 - (l) Operative report or reports on all surgery performed upon the patient;
 - (m) An entry or report on each anesthetic administered to the patient;
 - (n) Report or reports on consultation or consultations concerning the patient;
 - (o) Reports on labor, delivery, and postpartum period for any woman giving birth to a child in the hospital;
 - (p) Infant status data for any infant born in or enroute to the hospital including:
 - (i) The date and time of birth;
 - (ii) Condition at birth or upon arrival at the hospital;
 - (iii) Sex; and
 - (iv) Weight, if condition permits weighing.
 - (q) Progress notes describing the results of treatment and changes in the patient's condition and portraying the patient's clinical course in chronological sequence;
 - (r) In the event of an inpatient leaving without medical approval, an entry on:
 - (i) Any known events leading to the patient's decision to leave;
 - (ii) A record of notification of the physician regarding the patient's leaving; and
 - (iii) The time of the patient's departure.
 - (s) Discharge data including:
 - (i) The final diagnosis or diagnoses;
 - (ii) Any associated or secondary diagnoses or complications; and
 - (iii) The titles of all operations performed upon the patient; and

(iv) A discharge summary for any inpatient whose hospitalization exceeded forty-eight hours, except a normal newborn infant or normal obstetrical patient, to:

(A) Recapitulate significant clinical findings and events during the patient's hospitalization;

(B) Describe the patient's condition upon discharge or transfer; and

(C) Summarize any recommendations and arrangements for future care of the patient.

(t) An entry on any transmittal of medical and related data regarding the patient to a health care facility or agency or other community resource when the patient was referred or transferred;

(u) In event of the patient's death in the hospital, entries, reports, and authorizations including:

(i) A pronouncement of death;

(ii) An authorization for the autopsy, if performed;

(iii) A report on the autopsy, if performed, including findings and conclusions; and

(iv) An entry on release of the patient's body to a mortuary or coroner or medical examiner.

(v) Written consents, authorizations, or releases given by the patient or, if the patient was unable to give such consents, authorizations, or releases, by a person or agency with legal authority over the person of the patient;

(w) The relationship, legal or familial, of the signer to the patient clearly stated when a person other than the patient gives written consent, or authorizes treatment, or signs a release.

(6) Hospitals shall regard materials obtained through procedures employed in diagnosing a patient's condition or assessing the patient's clinical course as original clinical evidence excluded from requirements for content of medical records in subsection (5) of this section. Original clinical evidence includes, but is not limited to:

(a) X-ray films;

(b) Laboratory slides;

(c) Tissue specimens; and

(d) Medical photographs.

(7) Registers.

(a) Hospitals shall maintain current registers with data entered in chronological order including:

(i) An inpatient register containing at least the following data for each inpatient admission:

(A) The patient's identifying number;

(B) The patient's full name, and birth date or age; and

(C) The date of the patient's admission.

(ii) One or more outpatient registers other than registers for emergency care services to:

(A) Contain sufficient data on each outpatient to ensure positive identification; and

(B) Permit rapid retrieval of all of the outpatient's medical record or records when indicated.

(iii) An emergency service register as required under WAC 246-318-350 (6)(a);

(iv) An operation register containing at least the following data for each operation performed in a hospital surgery:

(A) The date;

(B) The identifying number and full name of the patient;

(C) The descriptive name of the operation;

(D) The names of the surgeon and the surgeon's assistant or assistants;

(E) The type of anesthesia; and

(F) The name and title of the person who administered the anesthesia.

(b) Hospitals may maintain separate registers or suitable combinations of registers if the combined register contains data for each specific register as required in subsection (7)(a) of this section.

(8) Indexes. Hospitals shall establish and maintain:

(a) A master patient index containing a master reference card or equivalent for each person receiving inpatient or outpatient care or treatment in the hospital.

(i) Master reference cards or equivalent shall contain:

(A) The patient's medical record number or numbers;

(B) The patient's full name; and

(C) The patient's date of birth.

(ii) Master patient indexes may be omitted for:

(A) Referred outpatients; and

(B) Outpatient emergency patients provided the hospital retains and preserves an emergency service register for the same period of time as the medical record.

(b) Current indexes with required entries on index cards or equivalent completed within three months after discharge or transfer of the patient;

(c) A disease index containing index cards or equivalent for all categories of diseases or conditions treated in the hospital on an inpatient basis with entries on index card or cards for a given category of disease including:

(i) The identifying number, sex, and age of each patient treated for that category of disease; and

(ii) The code for the particular disease or condition for which each patient was treated.

(d) An operation index containing index cards or equivalent for all categories of operations performed in a hospital surgery on an inpatient or outpatient basis with entries on the index card or cards for a given category of operation with:

(i) Identifying information including the medical record number, age, and sex of each patient upon whom that category of operation was performed; and

(ii) The code for the particular operative procedure performed upon each patient.

(e) Codes for entries in the disease and operation indexes in accordance with the coding system and the recognized diagnostic classification system of disease and operation nomenclature adopted by the hospital;

(f) A physicians' index, separate or combined with the disease and operation indexes, as follows:

(i) A combined physician's-disease operation index with the name or code number of the physician treating the patient to whom a particular entry pertains; or

(ii) A separate physicians' index containing:

(A) A record for every member of the hospital's medical staff; and

(B) Entries on each physician's index card or equivalent record including the medical record number or name of each patient the particular physician treated in the hospital on an inpatient basis.

(9) Reports on hospital services. Hospitals shall prepare the following separate or combined reports:

(a) Census reports including:

(i) A daily inpatient census report on admissions to inpatient services, births, and discharges including deaths and transfers to another health care facility; and

(ii) Regular monthly or more frequent reports on admissions to outpatient services and the number of emergency care patients.

(b) Analyses of hospital services.

(10) Storage, handling, and control of medical records and other medical data. Hospitals shall:

(a) Control access to patients' individual medical records and other personal or medical data on patients;

(b) Prevent access to records by unauthorized persons;

(c) Protect medical records and other personal and medical data from undue deterioration or destruction; and

(d) Maintain a system permitting easy retrieval of medical records and information for medical or administrative purposes.

(11) Retention, preservation, and final disposal of medical records and other patient care data and reports.

(a) Hospitals shall retain and preserve:

(i) Each patient's medical record or records, excluding reports on referred outpatient diagnostic services for a period of:

(A) No less than ten years following the most recent discharge of the adult patient; or

(B) For patients who are minors at the time of care, treatment, or diagnosis, no less than three years following the date upon which the minor patient attained the age of eighteen years or ten years following the most recent discharge, whichever is longer.

(ii) Reports on referred outpatient diagnostic services for at least two years;

(iii) A master patient index card (or equivalent) for at least the same period of time as the medical record or records for the patient to whom the master patient index card or equivalent pertains;

(iv) Data in the inpatient and outpatient registers for at least three years;

(v) Data in an emergency service register for at least the same period of time as the medical record or records for any patient on whom data were entered in the register;

(vi) Data in the operation register, the disease and operation indexes, the physicians' index, and annual reports on analyses of hospital services for at least three years; and

(vii) Patients' medical records, registers, indexes, and analyses of hospital service in original form or in photographic form in accordance with the provisions of chapter 5.46 RCW.

(b) A hospital may elect to retain and preserve an emergency service register for only three years after last entry if the hospital includes all outpatient emergency care patients in the master patient index.

(c) During final disposal, each hospital shall prevent retrieval and subsequent use of any data permitting identification of individuals in relation to personal or medical information.

(d) In event of transfer of ownership of the hospital, the hospital shall keep patients' medical records, registers, indexes, and analyses of hospital services in the hospital to be retained and preserved by the new owner in accordance with state statutes and regulations.

(e) If the hospital ceases operation, the hospital shall:

(i) Make immediate arrangements for preservation of its medical records and other records of or reports on patient care data in accordance with applicable state statutes and regulations; and

(ii) Obtain approval of the department for the planned arrangements prior to the cessation of operation.

(12) Records kept by approved eye banks pursuant to WAC 246-333-040 are not medical records or registers within the meaning of this section.

(13) Nothing in these regulations shall be construed to prohibit hospitals from collecting additional health and/or medical information or retaining medical records beyond the statutory requirements.

[Statutory Authority: RCW 70.41.030. 92-02-018 (Order 224), § 246-318-440, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-440, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 88-18-021 (Order 2680), § 248-18-440, filed 8/30/88; 85-23-020 (Order 2305), § 248-18-440, filed 11/13/85; Order 142, § 248-18-440, filed 2/8/77; Order 135, § 248-18-440, filed 12/6/76; Order 119, § 248-18-440, filed 5/23/75; Regulation 18.440, effective 3/11/60.]

WAC 246-318-450 Discharge planning. Hospitals shall:

(1) Establish and maintain a system for discharge planning and designate a person responsible for system management and implementation;

(2) Establish written policies and procedures to:

(a) Identify patients needing further nursing, therapy, or supportive care following discharge from the hospital;

(b) Develop a documented discharge plan for each identified patient including:

(i) Coordinate with patient and family or caregiver, as appropriate;

(ii) Coordinate with appropriate members of the health care team; and

(iii) Coordinate with the receiving agency or agencies, when necessary.

(c) Notify referral agencies, minimally to include verbal contact and communication regarding:

(i) Relevant patient history;

(ii) Specific care requirements including equipment, supplies, and medications needed; and

(iii) Date care is to be initiated.

(d) For those patients identified under subsection (2)(a) of this section, assess and document needs and implement discharge plans to the extent possible by the hospital.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-450, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 88-18-020 (Order 2679), § 248-18-445, filed 8/30/88.]

NEW CONSTRUCTION REGULATIONS

WAC 246-318-500 Applicability of these regulations governing hospital construction. (1) These regulations apply to new construction of hospitals covered by RCW 70.41.020 (section 2, chapter 267, Laws of 1955).¹ New construction shall include any of the following started after promulgation of these regulations:

(a) New buildings to be used as hospitals;

- (b) Additions to existing buildings to be used as hospitals;
- (c) Conversions of existing buildings or portions thereof for use as hospitals;
- (d) Alterations other than minor alterations to existing hospitals.

(2) These regulations cover the facilities generally required within a hospital, with the following provisions.

(a) Omission of required facilities for some services may be permitted provided definite arrangement has been made for adequate services from suitably located facilities outside the hospital.

(b) Hospitals restricting services to legally allowable and customarily recognized limitations may be permitted to omit required facilities for the services not to be provided.

(c) Facilities provided, not specifically required by these regulations, must be adequate for the services to be performed and must meet the objectives of these regulations.

Note:

¹See WAC 248-18-001 for definition of "hospital."

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-500, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050, 83-19-058 (Order 269), § 248-18-500, filed 9/20/83. Statutory Authority: RCW 70.41.30 [70.41.030], 81-05-029 (Order 209), § 248-18-500, filed 2/18/81; Order 119, § 248-18-500, filed 5/23/75; Order 50, § 248-18-500, filed 12/17/70; Regulation 18.500, filed 1/25/62.]

WAC 246-318-501 Legal authority of the department. See RCW 70.41.030.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-501, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213, 86-08-002 (Order 2348), § 248-18-999, filed 3/20/86; Order 119, § 248-18-999, filed 5/23/75; Regulation 18.999, effective 3/11/60.]

WAC 246-318-510 Programs, drawings and construction. (1) Professional design services. Drawings and specifications for new construction shall be prepared by, or under the direction of, an architect registered in the state of Washington, and shall include plans and specifications prepared by consulting professional engineers for the various branches of the work where appropriate; except the services of a registered professional engineer may be used in lieu of the services of an architect if work involves engineering only. If the work involved is believed to be not extensive enough to require professional design services, a written description of the proposed construction should be submitted to the department for a determination of the applicability of this regulation.

(2) Submission for review. The program and drawings for new construction shall be submitted in the following stages for review. Each room, area and item of fixed equipment and major movable equipment shall be identified on all drawings to demonstrate that the required facilities for each function have been provided.

(a) A written program containing, at a minimum, information concerning services to be provided and operational methods to be used which will affect the extent of facilities required by these regulations. If the project involves an addition or alteration which materially increases the bed capacity of the hospital, the program shall contain a thorough appraisal of all existing supporting services to

determine their adequacy for the increased number of patients.

(b) Preliminary drawings of the new construction including major equipment. For alterations and additions, a functional layout of the existing building must be included. The hospital should be designed so that it may be expanded to provide for anticipated future needs. The future additions and their proposed functions should be designated on the preliminary plans.

(c) Detailed working drawings and specifications including mechanical and electrical work.

(d) If carpets are to be used, the following information is to be submitted for review:

(i) A floor plan showing areas to be carpeted and adjoining areas. These areas shall be labeled, according to function, and the proposed carpeted areas coded on the plan and keyed to the appropriate carpet sample.

(ii) One 3" x 5" sample of each carpet type, labeled to identify the following:

(A) Manufacturer; and

(B) Specific company designation (trade name and number).

(iii) Information showing that proposed carpeting meets the specifications as listed in WAC 248-18-719(5).

(iv) Carpets may be used in the following nonpatient occupied areas: Administrative areas, lobbies, lounges, chapels, waiting areas, nurses' station, dining rooms, corridors, equipment alcoves opening onto carpeted corridors. Carpets are not permitted in any areas of the surgery or delivery suites. Carpets may be used in other areas only upon written approval of such use by the department.

(v) Carpets may be used in the following patient occupied areas: Patient rooms (excluding toilets, bathrooms, and designated isolation rooms), coronary care units, recovery rooms (not within surgical suites), labor rooms (not within delivery suites), corridors within patient occupied areas, dayrooms, equipment alcoves opening onto carpeted corridors. Carpets may be used in other areas only upon written approval of such use by the department.

(3) Construction.

(a) Construction, of other than minor alterations, shall not be commenced until the final drawings and specifications have been stamped "construction authorized" by the department. Such authorization by the department does not constitute release from the requirements contained in these regulations.

(b) Compliance with these regulations does not constitute release from the requirements of applicable state and local codes and ordinances. These regulations must be followed where they exceed other codes and ordinances.

(c) Notification shall be given the department when construction is commenced. If construction takes place in or near occupied areas, adequate provision shall be made for the safety and comfort of patients.

(d) Construction shall be completed in compliance with the final drawings and specifications. Addenda or modifications which might affect the fire safety or functional operation shall be submitted for review by the department.

(4) Department's reports on reviews or on-site construction inspections. The department shall identify the sections and items of chapter 248-18 WAC under which a requirement is stated or a deficiency noted in any written report on

a review of a functional program, drawings or specifications and in any report on an on-site inspection of a construction project.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-510, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-510, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.30 [70.41.030]. 81-05-029 (Order 209), § 248-18-510, filed 2/18/81. Statutory Authority: RCW 43.20.050. 80-03-062 (Order 193), § 248-18-510, filed 2/26/80; Order 123, § 248-18-510, filed 3/18/76; Order 119, § 248-18-510, filed 5/23/75; Order 9, § 248-18-510, filed 1/2/69; Regulation 18.520(2)(d), filed 8/4/67; Regulation 18.520 (part), filed 1/25/62.]

WAC 246-318-520 Design and construction standards, general. (1) Exemptions, substitutions, and interpretations. A hospital may request an exemption, substitution, or interpretation as described in WAC 248-18-010.

(2) Industry standards, guides, and codes adopted by reference.

(a) At least once every two years, the department shall:

(i) Review industry standards referenced in the construction section of chapter 248-18 WAC and update, as necessary; and

(ii) Adopt the revised list of referenced standards, if required.

(b) Hospitals shall:

(i) Submit preliminary drawings for hospital construction projects conforming to industry standards, guides, and codes appearing in the current chapter 248-18 WAC;

(ii) Follow applicable standards, guides, and codes of chapter 248-18 WAC existing at the time the preliminary document was submitted for the duration of construction project; except as specified in subsection (2)(c) of this section.

(c) The department may respond to a hospital's written request by giving written approval to use a more recent edition of an industry standard, guide, or code under the following conditions:

(i) The standard, guide, or code was adopted after preliminary drawings were developed; and

(ii) The request is received by the department prior to the department's final approval of project design and authorization for construction per WAC 248-18-510 (3)(a).

(3) Hospitals and the department shall interpret construction WAC as follows:

(a) Rules concerning the size, location, function, and major equipment of rooms and areas are generally found under headings for particular departments or facilities;

(b) Some service facilities common to several departments or units are grouped under "GENERAL REQUIREMENTS FOR SERVICE FACILITIES," WAC 248-18-711;

(c) Mechanical and electrical requirements and detailed architectural requirements are included in "GENERAL DESIGN REQUIREMENTS," WAC 248-18-719;

(d) Equipment specified in rule includes only equipment frequently built in or attached to the building;

(e) WAC section titles describe the category of facilities, requirements, or information to which the contents of that section relates; and

(f) Except for sections adopted after July 1, 1989, in "NEW CONSTRUCTION REGULATIONS," WAC 248-18-500 through 248-18-719 and WAC 248-18-99902:

(i) Capital letters designate a requirement or all requirements;

(ii) Lower case letters designate options, suggestions, recommendations, or explanations;

(iii) Hospitals including any equipment, area, room, unit, service, or other facility designated in lower case letters (suggested or optional) shall comply with applicable standards in chapter 248-18 WAC;

(iv) If a WAC title denotes a unit, service, department, or other category of facilities required only under certain circumstances:

(A) The circumstances are stated following the title; and

(B) If included, constructed according to applicable rules and standards in chapter 248-18 WAC.

(v) The words "Optional. SHALL MEET REQUIREMENTS, IF INCLUDED." following a WAC title indicate:

(A) The particular unit, service, department, or other category of facilities is only recommended and not mandatory; and

(B) If included, constructed according to applicable rules and standards in chapter 248-18 WAC.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-520, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-105 (Order 009), § 248-18-515, filed 11/1/89, effective 12/2/89; 88-23-083 (Order 2729), § 248-18-515, filed 11/18/88. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-18-515, filed 3/20/86. Statutory Authority: RCW 70.41.30 [70.41.030]. 81-05-029 (Order 209), § 248-18-515, filed 2/18/81; Order 119, § 248-18-515, filed 5/23/75; Order 50, § 248-18-515, filed 12/17/70; Order 22, § 248-18-515, filed 6/27/69; Regulation 18.530, filed 1/25/62.]

WAC 246-318-530 Site and site development. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) LOCATION.^{2, 3}

(a) SERVED BY AT LEAST ONE STREET, USABLE UNDER ALL WEATHER CONDITIONS.

(b) REMOTE FROM INSECT BREEDING AREAS AND FREE FROM OBJECTIONABLE NOISE, SMOKE, DUST, AND ODORS.

(c) SERVED BY ADEQUATE UTILITIES.²

(d) ON HIGH GROUND PROVIDING NATURAL DRAINAGE OR SERVED BY ADEQUATE STORM SEWERS.

(e) SERVED BY ADEQUATE ORGANIZED FIRE FIGHTING AND POLICE SERVICES.

Sufficiently close to center of community served.

(2) SIZE.

(a) ADEQUATE FOR HOSPITAL PLANNED AND NECESSARY SERVICE ROADS AND PARKING.

(b) SUFFICIENT TO PROVIDE PRIVACY FOR PATIENTS and attractive grounds.

Sufficient for one hundred percent expansion in building area.

Four acres for twenty-five beds, six acres for fifty beds, nine acres for one hundred beds, sixteen acres for two hundred beds are recommended.

(c) SUFFICIENT FOR PRIVATE SEWAGE DISPOSAL IF THERE IS NO PUBLIC SEWER SYSTEM.

(3) PARKING AREA.

(a) LOCATED FOR CONVENIENCE AND TO AVOID UNDUE DISTURBANCE TO PATIENTS.

(b) ADEQUATE NUMBER OF PARKING SPACES.

One parking space per bed plus one space per employee for the day shift recommended.

(c) ADEQUATE DRAINAGE.

(d) SURFACE TREATED TO MINIMIZE DUST.

Illuminated at night.

(4) DRIVES AND WALKS.

(a) ADEQUATE FOR MOVEMENT OF PATIENTS, VISITORS, STAFF AND SERVICE VEHICLES.

(b) CONSTRUCTED FOR USE UNDER ALL WEATHER CONDITIONS.

(c) LOCATED TO PREVENT CONFLICTING TRAFFIC.

(d) LOCATED FOR A MINIMUM OF DISTURBANCE TO PATIENTS.

(e) SURFACE TREATED TO MINIMIZE DUST.

Illuminated at night.

(5) ENTRANCES.

(a) LOCATED FOR A MINIMUM OF DISTURBANCE TO PATIENTS.

(b) ENTRANCES REQUIRED FOR MOVEMENT OF PATIENTS IN WHEELCHAIRS OR ON STRETCHERS TO BE DESIGNED WITHOUT STAIRS. RAMPS PERMISSIBLE WITH SLOPE NOT EXCEEDING ONE IN TEN. A slope not exceeding one in twenty recommended. AT LEAST ONE ENTRANCE TO THE HOSPITAL TO BE SO DESIGNED.

(i) PATIENTS' AND VISITORS' ENTRANCE. ADJACENT TO LOBBY.

(ii) Emergency patients' entrance.

REQUIRED IF HOSPITAL HAS AN EMERGENCY DEPARTMENT.

LOCATED FOR READY ACCESS TO EMERGENCY DEPARTMENT.

AT GRADE LEVEL AND READILY ACCESSIBLE TO PEDESTRIAN, AMBULANCE, AND OTHER VEHICULAR TRAFFIC.

AMBULANCE PORT SIZED TO ACCOMMODATE AT LEAST ONE VEHICLE TWENTY-TWO FEET LONG, ONE HUNDRED THIRTY INCHES HIGH AND EIGHT FEET WIDE. AMBULANCE PORT TO BE DESIGNED TO PROTECT AN EMERGENCY PATIENT AND THE INTERIOR OF THE EMERGENCY DEPARTMENT FROM WEATHER WHEN A PATIENT IS BROUGHT FROM AN AMBULANCE OR OTHER VEHICLE INTO THE EMERGENCY DEPARTMENT.

Designed to permit attendants to stand on same level as entrance when removing a stretcher from ambulance.

RAMPS TO BRIDGE ANY DIFFERENCE IN LEVELS OF APPROACH FOR PEDESTRIAN TRAFFIC.

(iii) OUTPATIENT ENTRANCE.

May be combined with entrances for patients and visitors or emergency patients.

LOCATED NEAR OUTPATIENT FACILITIES AND FOR ACCESSIBILITY BY WHEELCHAIR PATIENTS.

(iv) SERVICE ENTRANCE.

CLOSE TO STORAGE, ELEVATORS, AND KITCHEN.

(v) EXIT FOR REMOVAL OF BODIES.

May be combined with emergency patients' entrance and/or service entrance.

LOCATED WHERE BODIES CAN BE REMOVED IN AN UNOBTRUSIVE MANNER.

(vi) Employees' entrance.

Convenient to locker rooms and for control of ingress and egress.

(vii) Doctors' entrance.

Convenient to locker room, records room, and switchboard.

(6) ORIENTATION OF PATIENT ROOMS.⁴

(a) ON QUIET SIDE OF SITE.

(b) LOCATED FOR PRIVACY FOR PATIENTS.

(c) PROTECTED FROM THE VIEW OF REMOVAL OF BODIES, AND STORAGE OF RUBBISH.

Oriented for sunlight and prevailing breezes.

Notes:

²See GENERAL DESIGN REQUIREMENTS, WAC 248-18-719(3), PLUMBING AND SEWERAGE.

³Not applicable to alterations and additions to existing hospitals.

⁴See requirements for "windows," WAC 248-18-719(1) and see WAC 248-18-001 for definition of "grade."

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-530, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-520, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 83-19-058 (Order 269), § 248-18-520, filed 9/20/83; Order 119, § 248-18-520, filed 5/23/75; Order 106, § 248-18-520, filed 1/13/75; Regulation 18.540, filed 1/25/62.]

WAC 246-318-540 General design requirements.

Hospitals planning new construction shall include the following general design elements for certain rooms or areas required by other sections of this chapter:

(1) Architectural components including:

(a) Aisles between fixed elements wide enough to allow unimpeded movement of equipment and personnel within rooms or suites meeting requirements under WAC 248-18-99902(19);

(b) Ceiling heights meeting requirements in Table 719-1, Minimum Clear Opening for Doors and Nominal Ceiling Heights;

(c) A corridor system established throughout the hospital designed for traffic circulation providing patient privacy and preventing through traffic in examination, observation, treatment, and diagnostic areas, with width:

(i) Eight feet and restrictions of no more than seven inches for nonambulatory patient areas;

(ii) Existing seven feet minimum permitted in alteration projects; and

(iii) Meeting requirements under WAC 248-18-99902 (19) and (20) in all other areas with:

(A) Five feet for corridors permitted when serving ambulatory patient traffic within a single department; and

(B) Four feet minimum permitted for nonpatient areas and departments when there is a five-by-five foot turnaround at least every seventy-five feet.

(d) Handrails on both sides of corridors used by patients on orthopedic units, rehabilitation nursing units, nursing home units, and other long-term nursing units with dimensions as follows:

(i) Top of the handrail thirty-two to thirty-four inches above the floor;

(ii) Projecting a maximum of three and one-half inches from wall; and

(iii) End of handrail returning to wall.

- (e) Doors:
 - (i) With widths meeting requirements under WAC 248-18-99902(20) and Table 719-1, Minimum Clear Opening for Doors and Nominal Ceiling Heights;
 - (ii) Designed to prevent swinging into established corridor widths, except those from small unoccupied spaces, such as small closets;
 - (iii) In patient rooms designed to swing to a full, open position;
 - (iv) With provision for immediate emergency access to patient toilets, showers, and bathrooms; and
 - (v) With vision panels required in all pairs of opposite swinging doors.
 - (f) At least one elevator in multi-story hospital designed for patient transport with minimum dimensions of:
 - (i) Five feet four inches inside width;
 - (ii) Eight feet six inches inside length; and
 - (iii) Four feet wide door openings.
 - (g) Stairways and ramps with:
 - (i) Skid-resistant surfaces;
 - (ii) Handrails, guardrails, and other safety devices on all stair-wells and ramps meeting requirements under WAC 248-18-99902 (19) and (20);
 - (iii) Slope of ramps used for patients not to exceed one unit of vertical rise for every twelve units of horizontal run; and
 - (iv) Slope of all other ramps meeting requirements under WAC 248-18-99902(20).
 - (h) Construction to control entrance and infestation by pests, such as mammals, birds, and insects;
 - (i) Windows in patient rooms, except in labor rooms and nurseries, with:
 - (i) A clear glass area of at least one-tenth of the floor space or meeting requirements under WAC 248-18-99902(20);
 - (ii) Location in the outside walls and:
 - (A) Twenty feet or more from another building or opposite wall or court;
 - (B) Ten feet or more from property line except on street side; and
 - (C) Allowance for a satisfactory amount of unobstructed natural light.
 - (iii) Location in interior common walls rather than in outside walls only when meeting requirements in WAC 248-18-99902(20);
 - (iv) Sills:
 - (A) No higher than three feet from the floor;
 - (B) No higher than four feet from the floor in critical care rooms;
 - (C) With exterior grade a minimum of six inches below window sill; and
 - (D) With exterior grade sloping away from building for at least ten feet.
 - (v) Sixteen mesh screens on all operable windows.
 - (2) Heating, ventilation, and cooling including:
 - (a) A heating system with capacity to maintain a temperature of seventy-five degrees Fahrenheit or more in each room or occupied space;
 - (b) A cooling system with capacity to cool patient areas to a temperature of seventy-five degrees Fahrenheit or below;
 - (c) Heating and cooling controls with:
 - (i) Individual thermostatic control in each patient room; and
 - (ii) All other areas suitably zoned and thermostatically controlled consistent with WAC 248-18-99902(2).
 - (d) Piping and duct systems insulated to control excessive heat transfer and condensation;
 - (e) Air balancing of distribution systems to maintain air changes and pressure relationships meeting requirements in Table 719-3, General Pressure Relationships and Ventilation of Certain Hospital Areas, in this section;
 - (f) Air handling duct system:
 - (i) Meeting requirements under WAC 248-18-99902(5);
 - (ii) With fiberglass ducts, if installed, of nonerosive wearing surfaces specified under WAC 248-18-99902 (9) and (10); and
 - (iii) With fiberglass-lined ducts, if installed, serving sensitive areas with ninety percent efficiency filters installed downstream of the duct lining.
 - (g) The use of space above ceilings for exhaust and return plenums restricted to nonclinical and nonpatient care areas, such as administrative, public waiting, and meeting areas;
 - (h) Air supply and exhaust locations:
 - (i) Meeting requirements under WAC 248-18-99902 (2) and (8);
 - (ii) With outdoor intakes located to the extent practical and possible as follows:
 - (A) Directionally different exposures twenty feet or more from:
 - (I) Combustion equipment stacks;
 - (II) Ventilation exhaust outlets from the hospital or adjoining buildings including fume hoods and ethylene oxide systems;
 - (III) Medical-surgical vacuum systems;
 - (IV) Plumbing vent stacks; and
 - (V) Areas that may collect vehicular exhaust and other noxious fumes.
 - (B) Bottom of intake six feet or more above ground level or three feet or more above roof level specified under WAC 248-18-99902(2).
 - (iii) Exhaust air discharge located to avoid cross circulation to supply air intakes or operable windows.
 - (i) Filters installed in central ventilation or air conditioning systems with:
 - (i) Filter beds and filter efficiencies meeting requirements under Table 719-4, Ventilation and Air Conditioning Systems: Filter Efficiencies in Hospitals;
 - (ii) Filter bed No. 2 downstream of the last component of any central air handling unit except:
 - (A) Steam injection-type humidifier permitted downstream of filter bed No. 2;
 - (B) Terminal reheat coils permitted downstream of filter bed No. 2; and
 - (C) Terminal cooling coils permitted downstream of filter bed No. 2 with additional filtration downstream of coil meeting requirements of filter bed No. 2.
 - (iii) Filter frames tight to the enclosing duct work; and
 - (iv) A manometer or equivalent installed across each filter bed serving sensitive areas of central air systems.
 - (j) Fire shutdown in accordance with WAC 248-18-99902 (5) and (25).

(k) Exhaust hoods or other approved exhaust devices over equipment likely to produce excessive heat, moisture, odors, or contaminants, and properly designed for intended use.

(l) Laboratory hoods for handling infectious materials meeting requirements under WAC 248-18-99902(7) with:

(i) A minimum face velocity of seventy-five feet per minute at maximum operating level of sash;

(ii) Served by independent exhaust system with the exhaust fan located at the discharge end of the system;

(iii) Duct with welded joints or equivalent from the hood to filter enclosure;

(iv) Filters with 99.97 percent efficiency dioctyl-phthalate (DOP) test method in the exhaust stream; and

(v) Designed and equipped to permit the safe removal of contaminated filters.

(m) Laboratory hood for venting radioactive particulate aerosols with:

(i) A minimum face velocity of one hundred feet per minute at a maximum operating level of sash;

(ii) An independent exhaust system with an exhaust fan at the discharge end of the system;

(iii) Ducts with welded joints or equivalent from the hood to the filter enclosure;

(iv) Exhaust stream filters with 99.97 percent efficiency using the dioctyl-phthalate (DOP) test method;

(v) Designed and equipped for the safe removal of contaminated filters; and

(vi) Provisions for washdown.

(n) Laboratory hoods for processing strong oxidizing agents with:

(i) A minimum face velocity of one hundred feet per minute at maximum operating level of sash;

(ii) An independent exhaust system and explosion-proof exhaust fan at the discharge end of the system;

(iii) Ducts of welded stainless steel or equivalent throughout the exhaust system; and

(iv) Hood and exhaust duct system equipped with complete coverage washdown facilities.

(o) Noncentral supply ventilation systems:

(i) Serving sensitive areas meeting the filtering requirements for central systems under Table 719-4, Ventilation and Air Conditioning Systems: Filter Efficiencies in Hospitals; and

(ii) In other areas with outdoor air for individual rooms and units meeting filtering requirements for central systems under Table 719-4, Ventilation and Air Conditioning Systems: Filter Efficiencies in Hospitals.

(p) Equipment to provide relative humidity as follows:

(i) Forty percent minimum to sixty percent maximum at seventy-two degrees Fahrenheit in:

(A) Operating rooms;

(B) Delivery rooms;

(C) Special procedure rooms;

(D) Anesthetizing locations;

(E) Critical care patient rooms, such as intensive and coronary care; and

(F) Recovery rooms.

(ii) Forty percent minimum to sixty percent maximum at seventy-five degrees Fahrenheit in all nursery facilities.

(3) Plumbing components including:

(a) Design and installation meeting requirements under:

(i) WAC 248-18-99902 (3) and (21); and

(ii) WAC 248-18-99902(19) when rooms and areas are designated for use by the handicapped.

(b) Backflow prevention device on water supply and plumbing fixtures meeting requirements under WAC 248-18-99902 (3) and (21);

(c) Trap primers in floor drains and stand pipes subject to infrequent use meeting requirements under WAC 248-18-99902(3);

(d) Lavatories in each toilet room except where provided in connecting patient room, dressing or locker room;

(e) Skid-resistant floor surfaces in tubs and showers;

(f) Wrist, knee, or foot faucet controls or equivalent and gooseneck spouts:

(i) On lavatories in patient rooms;

(ii) In toilet rooms adjoining patient rooms except those for psychiatric patients per program requirements; and

(iii) On all lavatories and sinks for personnel use where required to control cross infection, unless the fixture is used for soiled functions only and another sink equipped with appropriate controls is located in the same area of the room.

(g) Foot, knee, or equivalent faucet controls and gooseneck spouts on lavatories and scrub sinks in:

(i) All nursery rooms;

(ii) Birthing rooms;

(iii) Surgery and delivery; and

(iv) Other sensitive areas.

(h) Drinking fountains or equivalent at suitable locations, with at least one on each floor;

(i) Insulation installed on:

(i) Hot water piping systems as required to control excessive heat transfer and to provide safety;

(ii) Cold water and drainage piping as required to control condensation; and

(iii) Piping exposed to outside temperatures, designed to prevent freezing.

(j) Hot water supply meeting requirements under WAC 248-18-99902 (2) and (21);

(k) Equipment to deliver hot water at temperatures measured at point of use as follows:

(i) One hundred sixty degrees Fahrenheit or more for laundry;

(ii) One hundred twenty degrees Fahrenheit or more for mechanical dishwashers and laundry washers using chemical sanitization;

(iii) One hundred fifty degrees Fahrenheit or more for high temperature sanitization dishwashers; and

(iv) One hundred twenty degrees Fahrenheit or less at patient sinks, lavatories, and bathing facilities.

(l) Sewage disposal systems meeting requirements under WAC 248-18-99902 (22) and (23);

(m) Vacuum and medical gas systems:

(i) Installed and tested to meet requirements under WAC 248-18-99902 (4) and (11); and

(ii) Located to meet requirements under Table 719-2, Medical Gases, Vacuum, and Waste Gas Evacuation.

(n) Waste gas evacuation system:

(i) Installed and tested to meet requirements under WAC 248-18-99902(24); and

(ii) Located to meet requirements under Table 719-2, Medical Gases, Vacuum, and Waste Gas Evacuation.

(4) Electrical requirements including:

(a) General electrical service as follows:

(i) Electrical receptacle outlets meeting requirements under Table 719-5, Single Electrical Receptacle Outlet Requirements;

(ii) Capacity limited to twelve single electrical receptacle outlets or six duplex electrical receptacle outlets, or equivalent, per twenty amp circuit in all inpatient or outpatient care areas; and

(iii) Convenience electrical receptacle outlets to accommodate cleaning equipment and accessories such as floor polishers, vacuums, and televisions.

(b) Electrical service in critical care units and areas as follows:

(i) Dedicated circuits to serve designated electrical receptacle outlets located at the head of each bed;

(ii) Capacity limited to six single electrical receptacle outlets or three duplex electrical receptacle outlets or equivalent per twenty amp circuit; and

(iii) Branch circuit panels located within the area providing ready accessibility to circuit breakers for staff.

(c) Emergency electrical service with:

(i) Critical emergency power electrical receptacle outlets meeting requirements under Table 719-5, Single Electrical Receptacle Outlet Requirements; and

(ii) Additional emergency power and lighting meeting requirements under WAC 248-18-99902(13).

(d) Lighting with:

(i) Fixtures of the number, type, and location to provide adequate illumination for the functions of each area meeting requirements under WAC 248-18-99902(12);

(ii) A reading light and control conveniently located for use by the patient at each bed in the patient rooms;

(iii) Protective lens or diffusers on overhead light fixtures;

(iv) Night light for each bed located below the level of the bed to dimly light pathway in the room;

(v) Night light switches and general illumination switches located adjacent to the opening side of patient room doors, except psychiatric patient security and seclusion rooms, where switches are located outside of the rooms; and

(vi) Lighting fixtures in psychiatric security and seclusion rooms of tamper-resistant design.

(e) Electrical/electronic equipment including:

(i) Call systems meeting requirements under Table 719-6, Call Systems;

(ii) Annunciator at control point of department or unit and additional staff duty stations such as utility, medication, and nourishment rooms and staff lounges; and

(iii) Film illuminators, or equivalent, accommodating at least two x-ray films in all areas where films are viewed, except in private offices.

(5) Interior finishes with:

(a) Floor finishes suitable to the function of each area and:

(i) Easily cleanable;

(ii) Skid-resistant material at entrances and other areas used while wet; and

(iii) Coved base integral with floors or top set base with toe tight to the walls.

(b) Carpets, if installed, of:

(i) Easily cleanable material;

(ii) Construction to prevent or reduce static build-up;

(iii) Finish classification with a:

(A) Radiant panel test class I, a minimum flux of 0.45 watts per centimeter squared; and

(B) Smoke density test class A, 450 or less on the smoke test scale.

(iv) Average pile density of 4,000 ounces per cubic yard calculated by:

$$\frac{\text{Yarn weight (ounces per square yard)} \times 36}{\text{Pile height (inches)}} = \text{Average pile density (ounces per cubic yard);}$$

(v) Maximum pile height of .312 inches;

(vi) Padding, if used, that is water resistant and permanently bonded to the carpet backing;

(vii) Cemented to the floor; and

(viii) Edges covered and top set base with toe at all wall junctures.

(c) Ceiling finishes or construction suitable to the functions of each area with:

(i) Monolithic or bonded construction for ceilings in patient rooms of psychiatric nursing units, security and seclusion rooms;

(ii) Concealed duct work and piping in occupied spaces;

(iii) Easily cleanable;

(iv) Smooth finish without visible joints or crevices in areas where surgical asepsis must be maintained, such as operating rooms, delivery rooms, and emergency treatment rooms;

(v) Finished to minimize glare in patient rooms, labor rooms, birthing rooms, operating rooms, delivery rooms, and emergency treatment rooms; and

(vi) Finished to minimize reflection of ultraviolet radiation when ultraviolet radiation generators are used.

(d) Wall finishes suitable to the functions of each area meeting requirements under WAC 248-18-99902(20) which are:

(i) Protected from impact in high traffic areas;

(ii) Easily cleanable;

(iii) Smooth finish without open joints or crevices in areas where surgical asepsis must be maintained, such as operating rooms, delivery rooms, and emergency treatment rooms;

(iv) Finished to minimize glare in patient rooms and labor rooms;

(v) Water-resistant paint, glaze, or similar water-resistant finish extending above the splash line in all rooms or areas subject to splash or spray; and

(vi) Protected by corner guards on external angles to resist impact in areas of heavy traffic.

(e) Safety of occupants assured during installation or application with room or area:

(i) Well-ventilated;

(ii) Unoccupied; and

(iii) Unavailable for use until the room or area is free of volatile fumes and odors.

(6) Accessories for bathroom and toilet rooms with:

(a) Backing to support the mounting of all accessories;

(b) Special requirements for accessories as follows:

(i) At bathing facilities, water closets, dressing rooms, and examination rooms, except in psychiatric unit:

(A) Toilet paper holder at water closets;

(B) Towel bar, hook, or ring; and

- (C) Robe hook.
- (ii) Suitable shelving or equivalent with a mirror at each lavatory in:
 - (A) Toilet room,
 - (B) Patient room,
 - (C) Birthing room,
 - (D) Dressing room, and
 - (E) Locker room.
- (iii) Provision of dispensers for single-use towels or equivalent at all lavatories and sinks mounted to avoid contamination from splash and spray;
- (iv) Provision for soap at each lavatory, sink, and bathing facility; and
- (v) Grab bars as follows:
 - (A) Meeting the requirements under WAC 248-18-99902(19);
 - (B) Easily cleanable, resistant to corrosion, functionally designed, securely mounted;
 - (C) On two sides of each standard bathtub and shower; and
 - (D) At least one horizontal grab bar extended eighteen inches or more in front of the water closet.
- (c) Accessories in bathing and toilet rooms designated for the handicapped meeting requirements under WAC 248-18-99902(19).
 - (7) Signage for identification of:
 - (a) Rooms and spaces; and
 - (b) Electric panel boards meeting requirements under WAC 248-18-99902(13).

Critical Care:

Intensive care 3'-10" 8'-0"

Nursing:

Birthing 3'-10" (1) 8'-0"
 Nurseries, all 3'-10" (1) 8'-0"
 Patient 3'-10" (1) 8'-0"

Radiology and Imaging:

Computerized tomography scan 3'-10" 8'-0"
 Radiation therapy 3'-10" 9'-0"
 Fluoroscopy 3'-10" 8'-0"
 Nuclear medicine 3'-10" 8'-0"
 X-ray 3'-10" 8'-0"

Diagnostic and treatment:

Physical treatment therapy 3'-10" (1) 8'-0"

General:

Bathrooms and toilets 2'-8" (2) 7'-6"

NOTES:

- (1) Existing 3'-8" clear opening door permitted in alterations.
- (2) Existing 2'-6" clear opening door permitted in alterations except in nursing home rehabilitation units.

TABLE 719-1
 MINIMUM CLEAR OPENING FOR DOORS AND
 NOMINAL CEILING HEIGHTS

AREA/ROOM NAME	MINIMUM CLEAR OPENING FOR DOORS	NOMINAL CEILING HEIGHT
Anesthetizing and Special:		
Delivery	3'-10"	9'-0"
Fracture	3'-10"	8'-0"
Recovery	3'-10"	8'-0"
Surgery	3'-10"	9'-0"
Trauma	3'-10"	9'-0"

TABLE 719-2
 MEDICAL GASES, VACUUM, AND WASTE GAS EVACUATION

AREA/ROOM NAME	MEDICAL GASES				WASTE GAS EVACUATION I
	OXYGEN	MEDICAL AIR	NITROUS OXIDE	VACUUM	
Anesthetizing and Special:					
Cystoscopic	D	E		D	
Delivery	B,G	A,G	A	D,G	E
Operating	B	A	A	D,H	E
Operating patient hold area	B			B	
Recovery	B	A-Infants Only		C	
Recovery (delivery)	A,G	G		B,G	
Special procedures	D	E	A	D	E
Trauma	D	E		D	E

Critical Care:

Coronary care	B	B	C
Intensive care	B	B	C

Nursing:

Birth (Labor, Delivery and Recovery)	A		B
Examination, treatment	A		A
Labor	B		B
Nursery:			
Intermediate care	F	F	G
Neonatal intensive care	F	F	G
Newborn	A		A
Patient:			
Medical, surgical and obstetrical	B		B
Outpatient	B		B
Pediatrics	B	B	B

Radiology and Imaging :

Imaging services	B		B
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Diagnostic and Treatment:

Autopsy			E	
Emergency treatment	A	E	E	E

NOTES:

- A One outlet accessible to each bed, stretcher, bassinet, or equivalent; one outlet may serve two beds or two bassinets.
- B Separate outlet for each bed, stretcher, bassinet, or equivalent.
- C Two outlets for each bed.
- D Two outlets per room intended for one patient at any one time.
- E One outlet per room.
- F Two outlets per station.
- G Separate outlets for infants.
- H If used for delivery, must include G.
- I Required only when general anesthesia is used.

TABLE 719-3
GENERAL PRESSURE RELATIONSHIPS AND VENTILATION OF CERTAIN HOSPITAL AREAS

Area/Room Name	Pressure Relation-Ship To Adjacent Areas	Minimum Air Changes Of Outdoor Air Per Hour Supplied To Room	Minimum Total Air Changes Per Hour Supplied To Room	All Air Exhausted Directly To Outdoors	Recir-culated Within Room Units
ANESTHETIZING AND SPECIAL:					
Operating and obstetrical delivery (recirculating air system)	P	3	15	Optional	No ¹
Operating and obstetrical delivery (all outdoor air system) ⁶	P	15	15	Yes	No
Recovery	P	2	6	Optional	No ¹
Trauma ²	P	3	15	Optional	No ¹
CRITICAL CARE:					
Intensive care	P	2	6	Optional	No
NURSING:					
Birth	P	2	2	Optional	No ¹
Nursery, newborn	P	2	6	Optional	No ¹
Patient	NA	2	2	Optional	Optional
Patient Corridor	NA	2	4	Optional	Optional
Patient isolation ³	P or N	2	6	Yes	No
Patient isolation alcove or anteroom ³	P or N	2	10	Yes	No
Patient toilet	N	Optional	10	Yes	No

RADIOLOGY AND IMAGING:

Darkroom	N	2	10	Optional	No
X-ray	NA	2	6	Optional	Optional

DIAGNOSTIC AND TREATMENT:

Autopsy	N	2	12	Yes	No
Body holding, nonrefrigerated ⁴	N	Optional	10	Yes	No
Examination	NA N or P	2	6	Optional	Optional
Medication	P	2	4	Optional	Optional
Nuclear medicine	N	2	6	Yes	No
Pharmacy	P	2	4	Optional	Optional
Physical therapy and hydrotherapy	N	2	6	Optional	Optional
Treatment	NA	2	6	Optional	Optional

LABORATORY:

Bacteriology	N	2	6	Yes	No
Biochemistry	P	2	6	Optional	No
Cytology	N	2	6	Yes	No
Glass washing	N	2	10	Yes	Optional
Histology	N	2	6	Yes	No
Media transfer	P	2	4	Optional	No ²
Pathology	N	2	6	Yes	No
Serology	P	2	6	Optional	No
Sterilizing	N	Optional	10	Yes	No

CENTRAL SERVICE:

Clean workroom and sterile storage	P	2	4	Optional	Optional
Equipment storage ETO sterilizer ⁷	NA	2 (Optional)	2	Optional	Optional
Sterilizer equipment	N	Optional	10	Yes	No

KITCHEN AND DIETARY:

Dietary day storage	NA	Optional	2	Optional	No
Food preparation centers ⁵	NA	2	10	Yes	No
Ware washing	N	Optional	10	Yes	No

GENERAL:

Bathroom	N	Optional	10	Yes	No
Bedpan	N	Optional	10	Yes	No
Janitors closet	N	Optional	10	Yes	No
Utility, clean	P	2	4	Optional	Optional
Utility, soiled	N	2	10	Yes	No

ABBREVIATIONS:

P = Positive

N = Negative

NA = Not Applicable (Continuous Direction Control Not Required)

NOTES:

- Recirculating room units meeting the filtering requirements for the space may be used.
- The term "trauma room" used in Table 719-3 is the operating room space in the trauma center routinely used for emergency surgery. The first aid room and/or "emergency room" used for general initial treatment of accident victims may be ventilated as noted for the "treatment room."
- The isolation rooms described in the standards might be used in the average community hospital. The assumption is the isolation procedures will be for infectious patients and the room should also be suitable for normal private patient use when not needed for isolation.
- The nonrefrigerated body-holding room would be applicable only for facilities not performing autopsies on site and using the space for a short period while waiting for body transfer to be completed.
- Food preparation centers shall have ventilation systems with an excess of air supply for positive pressure when hoods are not in operation.
- The number of air changes may be reduced when areas are not occupied.
- See WAC 248-18-99902 (15) and (28).

TABLE 719-4
VENTILATION AND AIR CONDITIONING SYSTEMS
FILTER EFFICIENCIES IN HOSPITALS

AREA/ROOM NAME	FILTER BED 1 %	FILTER BED 2 %
Anesthetizing and Special:		
Operating and delivery	25	90
Organ transplant	25	90 (A)
Recovery	25	90
Special procedures	25	90
Critical Care:		
Intensive and CCU	25	90
Nursing:		
Birthing	25	90 (B)
Labor	25	90 (B)
Nursery, newborn	25	90
Patient	25	90 (B)
Patient treatment	25	90 (B)
Postpartum	25	90 (B)

Radiology and Imaging:

X-Ray	25	90 (B)
Fluoroscopy	25	90 (B)

Laundry:

	80	NA
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Kitchen and Dietary:

Food preparation	80	NA
Storage, bulk	25	NA

General:

Administration	25	NA
Utility, soiled	25	NA

NOTES:

- (A) 99.9% recirculating air.
- (B) 80% acceptable with total outside air.
- NA Not applicable.

TABLE 719-5
PATIENT CARE AREA
SINGLE ELECTRICAL RECEPTACLE OUTLET REQUIREMENTS

AREA/ROOM NAME	LOCATION IN ROOM (*ACCORDING TO PROGRAM UNLESS OTHERWISE STATED)	TOTAL	CRITICAL EMER- GENCY POWER	SPECIAL REQUIREMENTS (*HOSPITAL GRADE)
ANESTHETIZING AND SPECIAL:				
Delivery	*	12	12	*
Trauma	*	6	6	*
Patient holding	*	4	4	*
Operating	*	12	12	*
Recovery	Head of each bed	4	4	*
Special procedures	*	12	12	*
CRITICAL CARE:				
Intensive care and other	Head of each bed	12	12	*
NURSING:				
Birthing and LDR	* for woman and infant	6	2	*
Nursery	Between every two bassinets and *	4	4	
Nursery, intermediate care	Each station and *	6	6	*
Nursery, neonatal intensive care	Each station and *	12	12	*
Pediatric	Head of bed	4	2	Tamper- resistant safety receptacles
Pediatric critical care	Head of bed and *	12	12	*
Psychiatric	Head of bed	2	0	Tamper- resistant safety receptacles
DIAGNOSTIC AND TREATMENT:				
Emergency examination	One per wall	4	4	*
Emergency, minor	One per wall	6	6	*
Physical therapy		2(A)	(B)	

Occupational therapy
Radiology and imaging

*
*

(C)

LABORATORY:

General
Critical equipment

*
*

2 2 (D)

GENERAL:

Patient lavatories
Other lavatories
All bathing facilities

2 0 (E)
0 0 (E)
0 0 (E)

NOTES:

- (A) Per treatment area sufficient to support diagnostic and treatment activities.
- (B) Ground fault circuit interrupter when installed within five feet of wet areas.
- (C) Sufficient to support diagnostic and treatment.
- (D) With grounding conductor and dedicated circuits as required per each piece of equipment and sufficient to support work station.
- (E) When installed within five feet of lavatories and bathing facilities, ground fault circuit interrupter required.

DIAGNOSTIC AND TREATMENT:

Emergency exam	PNC	A	B	C
	MES	H	E	E
Minor treatment	PNC	A	B,C	B,C
	MES	H	E	E
Nuclear medicine	MES	H	E	E
Physical therapy	PNC	1	B,C	B,C
	MES	H	E	E
Occupational therapy	MES	H	E	E

GENERAL:

Emergency entrance	Doorbell	Outside hospital door	AS/VL	At a 24-hour monitored duty station
Utilities	AS/VL		AS/VL	Duty station

TABLE 719-6
CALL SYSTEMS

AREA/ROOM NAME	SYSTEM TYPE	INITIATION INDICATOR	
		LOCATION	LOCATION

ANESTHETIZING AND SPECIAL:

Delivery	MES	H	E	E
Trauma	MES	H,A	E	E
Operating	MES	H	E	C
Patient holding area	PNC	A	B	B
Patient induction	PNC	A	B	B
Recovery stations	MES	H	E	E
	PNC	A	G	C

CRITICAL CARE:

Intensive and coronary care	PNC	A	B	B
	MES	H,A	E	E

NURSING:

Birthing	PNC	A	B	B
	MES	A,H	E	E
Labor	PNC	A	B	B
	MES	H	E	E
Nursery, neonatal intensive care	MES	H	E	E
Nursery, intermediate care	MES	H	E	E
Nursery, newborn	MES	H	E	E
Nurses station			Annunciator panel for PNC/MES	
Patient dressing	PNC	F	B,D	B
Patient shower, bathroom and toilet	PNC	A	B	B
Psychiatric activity	PNC	F	B,D	B
Psychiatric patient	MES	H,I,C	C	
Psychiatric seclusion	MES	H	C	

RADIOLOGY AND IMAGING:

X-ray, Fluoroscopy	MES	H	E	E
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ABBREVIATIONS:

- PNC = Patient nurse call
- MES = Medical emergency signal
- AS = Audible signal
- VL = Visual light

NOTES:

- A Head of bed.
- B Register by light at corridor door or treatment area and register by light and audible signal at the nurses' station and duty stations.
- C Call signals initiated by staff within a department by remote or other means to register at a staff control point from which assistance is always available.
- D Signals from toilets and bathing facilities to have distinctive light and distinctive audible signals.
- E Medical emergency system devices to register by distinctive light at the corridor door. Nurses' station annunciator or equivalent shall identify point of origin by a distinctive light and distinctive audible signal. Signal device to be reset only by staff at the point of origin. Distinctive visual and distinctive audible signals at locations from which additional staff assistance is always available.
- F A properly located signal device mounted no higher than six feet above the floor and activated by a nonconductive pull cord within easy grasp by a patient slumped forward on the floors of either the toilet, bathing facility, or dressing room.
- G Register by light and outside each patient station or register by light and audible signal at the nurses' station.
- H Properly located signal device within easy reach by staff.
- I Any area not within direct observation.
- J May be integrated with other systems.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-540, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-719, filed 5/30/90,

effective 6/30/90. Statutory Authority: RCW 70.41.030. 89-22-105 (Order 009), § 248-18-719, filed 11/1/89, effective 12/2/89.]

WAC 246-318-550 General requirements for service facilities. General requirements for service facilities constructed in certain rooms and areas required by other sections of these rules as follows:

(1) General design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage meeting requirements under WAC 248-18-719;

(2) At least one cleaning facility for carts and large equipment with the floor drain connected to a sanitary sewerage system;

(3) Each clean materials room considered part of a system for storage and distribution of clean and sterile supplies and materials, with sufficient space for parking of clean supply carts;

(4) Each clean utility room with:

(a) Work counter;

(b) Sink or lavatory;

(c) Enclosed and open storage; and

(d) Dispensers or equivalent for towels and liquid detergent.

(5) Each clean-up room for the surgery or delivery suite, or equivalent, separate from the clean materials room or clean utility room, with:

(a) A clinic service sink;

(b) Work counter;

(c) Adequate storage space; and

(d) A double-compartment sink integral with the counter and space on either side to accommodate equipment and materials to be cleaned.

(6) Each housekeeping supply room with:

(a) A service sink or equivalent;

(b) Soap and towel dispenser or equivalent;

(c) Mop rack; and

(d) Storage area.

(7) Each medicine distribution facility, if planned, in a room designed to minimize traffic, with:

(a) Lavatory;

(b) Working surface, either on a cart or counter;

(c) Lockable drug storage;

(d) Enclosed cabinet or equivalent for storage;

(e) Storage space for the medicine cart; and

(f) Space and electrical receptacle for a refrigerator.

(8) Each soiled materials room with:

(a) A clinic service sink unless:

(i) A toilet containing bedpan flushing attachment adjoins each patient room; or

(ii) A soiled utility room is on the same nursing unit.

(b) Space for waste container, linen hampers, carts, and other large equipment; and

(c) Handwashing sink or equivalent.

(9) Each soiled utility room with:

(a) A double-compartment sink to accommodate equipment to be cleaned;

(b) A three-foot long work surface which may be moveable;

(c) Storage cabinets sufficient to store cleaning supplies;

(d) Clinic service sink with bedpan flushing attachment; and

(e) Space for waste containers, linen hampers, and other large equipment.

(10) Each storage room with:

(a) Arrangement to separate clean and sterile supplies and equipment from used or soiled items;

(b) Enclosed storage units or carts or shelves, or drawers for clean and sterile supplies, unless provided in a clean utility room under WAC 248-18-711(4);

(c) Storage for large nursing and medical patient care equipment; and

(d) Shared use by one or more adjacent units or areas permitted.

(11) Alcove space in corridor permitted to accommodate equipment such as stretchers, wheelchairs, walkers, and lifts.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-550, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-105 (Order 009), § 248-18-711, filed 11/1/89, effective 12/2/89.]

WAC 246-318-560 Maintenance and mechanical facilities. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) BOILER AND/OR MECHANICAL EQUIPMENT ROOMS.³⁵

INSULATED, SOUND DEADENED, AND MECHANICALLY VENTILATED TO MINIMIZE TRANSFER OF HEAT AND NOISE TO ROOMS OCCUPIED BY PATIENTS AND EMPLOYEES. Not required if location of rooms precludes necessity.

(2) Maintenance shop.

(a) LOCATED FOR A MINIMUM OF NOISE AND DUST TO THE REST OF THE HOSPITAL.

(b) LOCATED AND DESIGNED FOR EASY DELIVERY AND REMOVAL OF EQUIPMENT.

Note:

³⁵See GENERAL DESIGN REQUIREMENTS, WAC 248-18-719.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-560, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-705, filed 5/30/90, effective 6/30/90; Order 119, § 248-18-705, filed 5/23/75; Regulation 18.750, filed 1/25/62.]

WAC 246-318-570 Administrative facilities. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) LOBBY.

(a) WAITING SPACE.

(b) WHEELCHAIR PARKING.

(c) PUBLIC TOILETS FOR EACH SEX.

(d) PUBLIC TELEPHONE.

(e) INFORMATION COUNTER.

Provision for sale of newspapers, soft drinks, gifts, cigarettes, etc.

(2) ADMITTING FACILITIES.

(a) PROVISION FOR AUDITORY PRIVACY DURING INTERVIEW.

(b) Interview rooms.

(c) Vault for patient valuables.

(d) Routine examination facilities.

(3) ADMINISTRATION FACILITIES.

(a) OFFICE FOR ADMINISTRATOR.

(b) OFFICE FOR DIRECTOR OF NURSING - IF OVER TWENTY-FIVE BEDS.

(c) Offices for other administrative personnel.

(d) Secretarial office space.

(e) Board room.

(4) BUSINESS OFFICE. Vault for records, cash, etc.

(5) MEDICAL RECORDS FACILITIES.

(a) ACTIVE RECORDS STORAGE. SPACE FOR FIFTY INPATIENT RECORDS PER BED PER YEAR, NOT LESS THAN THREE SQUARE FEET FLOOR SPACE PER BED.

(b) ADDITIONAL SPACE FOR OUTPATIENT RECORDS.

(c) INACTIVE RECORDS STORAGE.

(i) SPACE FOR FIFTY INPATIENT RECORDS PER BED PER YEAR.

(ii) TOTAL SPACE DEPENDENT UPON DURATION AND TYPE OF STORAGE PLANNED.

(iii) Doctors' dictation facilities.

(iv) Transcribing facilities.

(6) MEDICAL STAFF FACILITIES.

(a) Doctors' in-and-out register.

(b) COAT ROOM.

(c) Toilet.

(d) Medical lounge and library.

(7) HOSPITAL EMPLOYEE FACILITIES.

(a) LOCKER ROOMS, and lounges. ADEQUATE TO ACCOMMODATE ALL EMPLOYEES NOT PROVIDED ADEQUATE FACILITIES IN INDIVIDUAL DEPARTMENTS.

(i) SEPARATE FOR MEN AND WOMEN.

(ii) SPACE FOR INDIVIDUAL LOCKERS.

(b) TOILETS. ADEQUATE TOILETS ADJOINING EACH LOCKER ROOM. ADDITIONAL EMPLOYEES' TOILETS THROUGHOUT THE HOSPITAL TO ADEQUATELY SERVE EMPLOYEES OF ALL DEPARTMENTS.

(c) Showers — Adjoining locker rooms.

(8) Conference and training facilities.

(9) Retiring room.

(10) Social service office.

(11) HOUSEKEEPING FACILITIES⁵

Suitable combination with other housekeeping facilities permitted if convenient to administration facilities.

Note:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-570, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-525, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-525, filed 9/20/83; Order 119, § 248-18-525, filed 5/23/75; Regulation 18.550, filed 1/25/62.]

WAC 246-318-580 Receiving, storage and distribution. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) CENTRAL STORAGE FACILITIES, IN ADDITION TO THE SUPPLY FACILITIES IN INDIVIDUAL DEPARTMENTS, SHALL BE PROVIDED.

(2) AT LEAST TWENTY SQUARE FEET FLOOR AREA STORAGE PER BED OR EQUIVALENT.²⁴

(3) OFFICE.

(4) GENERAL STORAGE SHALL:

(a) BE DESIGNED AND LOCATED FOR MINIMUM DISTURBANCE TO THE OPERATION OF THE HOSPITAL.

(b) BE LOCATED TO PREVENT CONTAMINATION OR DAMAGE DURING MOVEMENT OF GOODS TO AND FROM STORAGE.

(c) BE DESIGNED AND CONSTRUCTED TO PREVENT ENTRANCE AND HARBORAGE OF RODENTS AND INSECTS, AND SPOILAGE, CONTAMINATION, AND CORROSION OF GOODS STORED THEREIN.

(d) PROVIDE FOR PROTECTION AGAINST INCLEMENT WEATHER DURING TRANSFER OF SUPPLIES WHEN GENERAL STORAGE FACILITIES ARE LOCATED IN SEPARATE BUILDING.

(e) If pharmaceuticals are stored, PROVIDE SECURED SPACES WITH APPROPRIATE ENVIRONMENTAL CONDITIONS AS APPROVED BY DIRECTOR OF HOSPITAL PHARMACY²⁴ AND IN ACCORDANCE WITH FEDERAL AND STATE LAWS AND RULES ON DRUG STORAGE.

(5) RECEIVING AREA OR AREAS.

(a) UNLOADING FACILITIES LOCATED TO PROVIDE PROTECTION FOR SUPPLIES AND TO PREVENT AUTOMOTIVE EXHAUST FROM ENTERING AIR INTAKES OF HOSPITAL.²⁴ Offstreet, raised platform at truck bed height with roof cover allowing fourteen feet vertical clearance.

(b) ADMINISTRATIVE WORK SPACE FOR RECEIVING NEAR TO RECEIVING AND BREAK-OUT AREAS. May be combined with distribution and issue area.

(c) Floor scales.

(6) BULK STORAGE ROOM OR ROOMS WITH STORAGE OFF FLOOR.

(7) BREAK-OUT AREA.

(a) INDOOR SPACE WITHIN THE HOSPITAL TO ALLOW FOR REMOVAL AND DISPOSAL OF OUTSIDE SHIPPING CONTAINERS PRIOR TO STORAGE OR TRANSPORT WITHIN CLEAN AREAS.

(b) PHYSICALLY SEPARATED FROM CLEAN STORAGE ROOMS.

(c) SHALL NOT RESTRICT REQUIRED MEANS OF EGRESS.

(8) CLEAN STORAGE ROOMS.

(a) DESIGNED AND EQUIPPED FOR STORAGE OF ITEMS REMOVED FROM ORIGINAL SHIPPING CONTAINERS INCLUDING PROCESSED AND STERILIZED ITEMS THAT ARE PACKAGED.

(b) May be centralized in one storage room or decentralized according to areas or rooms for grouping of different types of items according to use.

(c) SPACE FOR SHELVING AND/OR CART STORAGE.²⁴

(d) LOCATION AND DESIGN OF STORAGE UNITS⁶ TO ALLOW FOR CLEANING OF WALLS, SHELVES, AND FLOORS.²⁴

(e) ALL FIXED SHELVING AT LEAST SIX INCHES ABOVE FLOOR.

(9) DISTRIBUTION OR ISSUE AREA OR AREAS (also see WAC 248-18-680).

(a) LOCATED CONVENIENT TO THE EXIT FROM CLEAN STORAGE ROOMS. May be combined with office for receiving area or with issue area from central processing service.

(b) EQUIPMENT FOR ADMINISTRATIVE FUNCTIONS,²⁴ e.g., desk, communication system, files.

(10) FLAMMABLE AND COMBUSTIBLE LIQUID STORAGE FACILITIES SHALL MEET REQUIREMENTS OF FLAMMABLE AND COMBUSTIBLE LIQUIDS CODE NFPA 30. SEE WAC 248-18-99902(15) (e.g., alcohol, acetone, paint thinners, oils, and chemicals used in laboratory).

(a) SEPARATE STORAGE ROOM OR ROOMS SIZED IN ACCORDANCE WITH QUANTITY TO BE STORED.²⁴

(b) LOCATED TO MINIMIZE HAZARD TO THE HOSPITAL.

(c) APPROVED CONTAINERS, VENTILATED STORAGE CABINETS, AND APPROVED FLAMMABLE STORAGE REFRIGERATORS.

(d) CHEMICALS USED IN LABORATORY STORED IN ACCORDANCE WITH NFPA 99, CHAPTER 7. SEE WAC 248-18-99902(16).

(11) GASEOUS OXIDIZING MATERIALS INCLUDING BUT NOT LIMITED TO OXYGEN, NITROUS OXIDE, NITROGEN TRIOXIDE, FLUORINE, CHLORINE, AND CHLORINE TRIFLUORIDE SEGREGATED IN ACCORDANCE WITH REQUIREMENTS OF STORAGE OF GASEOUS OXIDIZING MATERIALS NFPA 43C. SEE WAC 248-18-99902(17).

(a) SEGREGATED EITHER BY SPACE OR IN A SEPARATE ROOM OR IN A SEPARATE BUILDING.

(b) SPACE SIZED TO ACCOMMODATE QUANTITY TO BE STORED.²⁴

(c) NONFLAMMABLE MEDICAL GAS SYSTEMS INCLUDING OXYGEN, NITROUS OXIDE, AND MEDICAL COMPRESSED AIR SHALL MEET THE STANDARD NFPA 56F. SEE WAC 248-18-99902(4).

(12) FLAMMABLE ANESTHETIC STORAGE, when flammable anesthetics to be used in hospital. SEE WAC 248-18-99902(1).

(a) LOCATED TO MINIMIZE HAZARD AND DISTURBANCE TO THE HOSPITAL.

(b) SIZED TO ACCOMMODATE QUANTITY REQUIRED BY PROGRAM.

(c) FOR USE OF FLAMMABLE ANESTHETICS, NFPA 99, CHAPTER 3, APPLIES. SEE WAC 248-18-99902(1).

(13) BULK FOOD STORAGE ROOM.

(a) May be combined with day storage in room adjacent to kitchen.

(b) ACCESSIBLE FROM AN OUTSIDE DELIVERY ENTRANCE.²⁴

(c) Location convenient to the kitchen.

(d) PROPER CONSTRUCTION, VENTILATION, AND TEMPERATURE TO MINIMIZE SPOILAGE.

(e) PEST-PROOF CONSTRUCTION.

(f) NO OPENINGS OR SPACES WHICH CANNOT BE CLEANED.

(g) BOTTOM SHELF FOR FOOD STORAGE AT LEAST SIX INCHES ABOVE FLOOR.

(h) LOCATION AND DESIGN OF STORAGE UNITS⁶ TO ALLOW FOR EASY AND REGULAR CLEANING OF SHELVES, WALLS, AND FLOORS.²⁴

Note:

⁶May be movable equipment.

²⁴In accordance with program.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-580, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 85-05-034 (Order 281), § 248-18-700, filed 2/15/85; Order 119, § 248-18-700, filed 5/23/75; Regulation 18.740, filed 1/25/62.]

WAC 246-318-590 Central sterilizing and processing service facilities. Optional. SHALL MEET REQUIREMENTS, IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS. SEE WAC 248-18-515.)

(1) GENERAL.

(a) A SEGREGATED UNIT DESIGNED AND LOCATED:

(i) TO PREVENT THROUGH TRAFFIC,

(ii) TO AVOID CONTAMINATION OF CLEAN AND STERILE SUPPLIES AND EQUIPMENT,

(iii) TO PREVENT OBJECTIONABLE HEAT AND NOISE IN PATIENT CARE AREAS,

(iv) TO FACILITATE DELIVERY AND RETURN OF SUPPLIES AND EQUIPMENT TO AND FROM OTHER SERVICES,²⁴

(v) Near or adjacent to central stores and distribution services.

(b) AREAS WITHIN THE UNIT ADEQUATE TO PROVIDE FOR PROPER HANDLING OF SUPPLIES AND EQUIPMENT.²⁴

(c) WORK FLOW:

(i) EQUIPPED AND ARRANGED TO PROVIDE WORK FLOW MAINTAINING PROPER SEPARATION OF CLEAN OR STERILE ITEMS FROM SOILED OR CONTAMINATED ITEMS.

(ii) DESIGNED FOR CONTINUOUS OR SEQUENTIAL WORK FLOW FROM RECEIVING TO ISSUING.

(d) SEPARATE RECEIVING AND DECONTAMINATION ROOM.

(e) SEPARATE CLEAN EQUIPMENT STORAGE ROOM.²⁴

(f) ADEQUATE SPACE FOR CIRCULATION AND PARKING OF CARTS.²⁴

(2) SOILED RECEIVING AND DECONTAMINATION ROOM OR ROOMS.

(a) FACILITIES FOR RECEIVING, DISASSEMBLING, AND CLEANING OF SUPPLIES AND EQUIPMENT PHYSICALLY SEPARATED FROM ALL OTHER AREAS OF CENTRAL PROCESSING SERVICE.

(b) LOCATED TO FACILITATE RETURN OF SOILED OR CONTAMINATED ITEMS WITHOUT TRANSPORTING THE ITEMS THROUGH OTHER AREAS OF CENTRAL PROCESSING SERVICE.

(c) SPACE FOR PARKING OF SOILED COLLECTION CARTS, IF USED.

(d) PROVISIONS FOR CLEANING AND DISINFECTING CARTS AND LARGE EQUIPMENT UNLESS CART WASH FACILITIES PROVIDED ELSEWHERE. Refer to WAC 248-18-711(2).

(e) WORK FLOW FROM DECONTAMINATION ROOM DIRECTLY INTO CLEAN PREPARATION ROOM AND/OR CLEAN CART STORAGE/PARKING AREA OR AREAS.

(f) EQUIPMENT:

(i) AT LEAST ONE DOUBLE-COMPARTMENT SINK MOUNTED IN COUNTER OR INTEGRAL WITH COUNTER.

(ii) ADDITIONAL SINKS OR MECHANICAL WASHERS AS REQUIRED BY TYPES AND VOLUME OF ITEMS TO BE PROCESSED.²⁴

(iii) Washer-sterilizer or sterilizer, pass-through type.

(iv) WORK COUNTER OR EQUIVALENT SPACE FOR COLLECTION EQUIPMENT ADJACENT TO EACH SINK OR MECHANICAL WASHER FOR COLLECTION OF SOILED OR CONTAMINATED ITEMS.

(v) WORK COUNTER OR EQUIVALENT SPACE FOR COLLECTION EQUIPMENT ADJACENT TO EACH SINK OR MECHANICAL WASHER FOR COLLECTION OF ITEMS WHICH HAVE BEEN WASHED.

(vi) STORAGE FOR CLEANING AGENTS AND OTHER CLEANING SUPPLIES AND EQUIPMENT.

(vii) FLUSH OR RECESSED FLOOR DRAIN.

(viii) Pressure systems such as air, water, steam, vacuum.

(ix) Deionized or distilled water system.

(3) CLEAN WORKROOM, PREPARATION, AND REPACKAGING AREAS.

(a) SPACE AND FACILITIES ARRANGED FOR ASSEMBLING AND PACKAGING SUPPLIES AND EQUIPMENT FOR STERILIZATION.

(b) WORK SURFACES OF SUFFICIENT SIZE AND QUANTITY TO FACILITATE ASSEMBLY OF MATERIALS AND EQUIPMENT.²⁴

(c) STORAGE FOR CLEAN ITEMS AND MATERIALS USED IN PACKAGING.

(d) SPACE FOR PARKING OF CARTS AND OTHER MOVABLE EQUIPMENT.

(e) HANDWASHING LAVATORY LOCATED TO PREVENT SPLASH OR SPRAY ON CLEAN ITEMS.²⁴

(f) WHEN PREPARATION OF LINEN IS A FUNCTION IN CENTRAL PROCESSING, A SEPARATE ROOM IS REQUIRED TO AVOID ACCUMULATION AND SPREAD OF LINT.²⁴

(4) FACILITIES FOR STERILIZING.

(a) LOCATED BETWEEN FACILITIES FOR ASSEMBLING AND PACKAGING AND FACILITIES FOR STORAGE OF CLEAN AND STERILE SUPPLIES.

(b) EQUIPMENT:

(i) AT LEAST ONE PRESSURE STERILIZER OF ADEQUATE SIZE.

(ii) ADDITIONAL PRESSURE STERILIZERS AS REQUIRED BY VOLUME OF ITEMS TO BE PROCESSED.

(iii) PRESSURE STERILIZERS TO HAVE RECORDING THERMOMETERS AND AUTOMATIC CONTROLS.

(iv) Ethylene oxide sterilizer with automatic controls. MECHANICAL AERATOR REQUIRED WHEN ETHYLENE OXIDE STERILIZER INSTALLED.⁶

(v) Dry heat sterilizer.

(5) STORAGE OF CLEAN AND STERILE ITEMS FOR ISSUE/DISTRIBUTION FROM CENTRAL PROCESSING SERVICE.^{6, 18}

(a) SEPARATE ROOM OR AREA LOCATED TO FACILITATE ISSUE WITHOUT TRANSPORT OF CLEAN AND STERILE ITEMS THROUGH OTHER AREAS OF CENTRAL PROCESSING AND STERILIZING SERVICE.

(b) IF STORAGE AREA IS PART OF THE PREPARATION AREA, ENCLOSED SHELVING IN CABINETS, CARTS, OR EQUIVALENT SHALL BE PROVIDED.⁶ Open shelving permitted if separate room provided.⁶

(6) CLEAN EQUIPMENT STORAGE ROOM, AREA, OR AREAS.¹⁸ Also refer to WAC 248-18-700.

(a) LOCATED TO FACILITATE ISSUE OF LARGE AND SMALL PATIENT CARE EQUIPMENT. SEPARATED FROM OTHER AREAS OF CENTRAL PROCESSING SERVICE. May be centralized in one room or area or decentralized on each nursing unit or within each department.²⁴

(b) AREA SUFFICIENT TO PROVIDE FOR PROPER HANDLING OF EQUIPMENT IN ACCORDANCE WITH PLANNED SYSTEM.²⁴

(c) PROVISION FOR CLEANING THE EQUIPMENT IN THE DECONTAMINATION ROOM, CART-WASH ROOM OR AREA OR OTHER SUITABLE FACILITIES IN THE HOSPITAL WITH SINK OR EQUIVALENT.

(7) DISTRIBUTION/ISSUE AREA OR AREAS. Also refer to WAC 248-18-700.

(a) LOCATED TO FACILITATE ISSUE OF CLEAN AND STERILE ITEMS WITHOUT BACKTRACKING THROUGH OTHER AREAS OF CENTRAL PROCESSING SERVICE.

(b) SPACE FOR MOVEMENT AND PARKING OF CARTS.²⁴

(c) SPACE FOR EQUIPMENT; e.g., communication system, files, labeling.

(8) PERSONNEL FACILITIES.

(a) TOILET, SHOWER ROOM OR AREA, CHANGE AND LOCKER AREA AS CLOSE AS POSSIBLE TO ENTRANCE OF CENTRAL PROCESSING/STERILIZING UNIT WITH STORAGE FOR CLEAN WORK ATTIRE. May be combined with other facilities if close by and adequate for both.

(b) LOCKER ROOM with storage²⁴ or equivalent for clean attire LOCATED TO ALLOW SEPARATE ACCESS TO AND FROM CLEAN AND SOILED ROOMS.

(9) OFFICE ROOM OR SPACE WITH COMMUNICATION DEVICE.

(a) LOCATED TO PERMIT ACCESS FROM PUBLIC AREAS WITHOUT ENTERING PROCESSING AREAS.

(b) Located to allow observation of activities within central processing service.

(c) May be desk and file space in suitable location within workroom.

(10) HOUSEKEEPING FACILITIES.⁵

Combination with other housekeeping facilities permitted only if suitable and convenient to central sterilizing and processing service facilities.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

¹⁸See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(10), STORAGE FACILITIES.

²⁴In accordance with program.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-590, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-680, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 85-05-034 (Order 281), § 248-18-680, filed 2/15/85; 83-19-058 (Order 269), § 248-18-680, filed 9/20/83; Order 119, § 248-18-680, filed 5/23/75; Regulation 18.700, filed 1/25/62.]

WAC 246-318-600 Housekeeping department.
(REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) Administrative facilities.

(a) Office space.

(b) Telephone.

(2) STORAGE ROOM.

(a) RACKS, BINS, SHELVES, CABINETS.

For: Extra mop trucks and pails.
Vacuum cleaners and polishers.
Wall-working equipment.
Scaffolding and ladders.
Handtrucks and maids' carts.
Extra mop heads and wringers.
Dusters and cleaning cloths.
Soaps and detergents.

(b) LOCKED CUPBOARD.

For: Pesticides, drain cleaners, etc.

(3) FACILITIES FOR CLEANING.

(a) LARGE EQUIPMENT CLEAN-UP AREA.²⁴

(i) May be within storage room for housekeeping equipment if properly separated from storage area.

(ii) EQUIPMENT:

SINK.

FLOOR DRAIN.

(b) HOUSEKEEPING FACILITIES.⁵

WITHIN OR CONVENIENT TO EACH AREA OF THE HOSPITAL AS REQUIRED IN OTHER SECTIONS OF THESE REGULATIONS.

(4) WASTE DISPOSAL FACILITIES.

(a) LOCATED TO PREVENT OBJECTIONABLE TRAFFIC, SMOKE, AND ODORS IN OTHER AREAS OF THE HOSPITAL.

(b) Waste chutes not recommended.

(c) INCINERATION FACILITIES.

(d) STORAGE AREA.

(i) LOCATED IN SEPARATE, WELL-VENTILATED ROOM OR OUTSIDE, ENCLOSED SPACE.

(ii) CONSTRUCTED TO PREVENT RAT HARBORAGE.

(e) CAN WASH AREA.

CAN WASH AREA WITH FLOOR DRAIN, HOT AND COLD WATER. Steam recommended.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

²⁴In accordance with program.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-600, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-690, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 83-19-058 (Order 269), § 248-18-690, filed 9/20/83; Order 119, § 248-18-690, filed 5/23/75; Regulation 18.720, filed 1/25/62.]

WAC 246-318-610 Laundry facilities. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)
FACILITIES LISTED UNDER SUBSECTION (1) OR (2) OF THIS SECTION ARE REQUIRED.

(1) FACILITIES REQUIRED WHEN COMMERCIAL LAUNDRY SERVICE USED EXCLUSIVELY.

(a) ADEQUATE SPACE FOR CIRCULATION AND SEPARATE PARKING AREAS FOR CLEAN AND SOILED CARTS.

(b) SOILED LINEN ROOM.

(i) LOCATED TO PREVENT ODORS AND CONTAMINATION TO PATIENT CARE, SUPPLY, AND FOOD SERVICE AREAS.

(ii) SUITABLY LOCATED FOR DISPATCHING TO COMMERCIAL LAUNDRY.

(iii) SEPARATE ENCLOSED ROOM. ARRANGED TO AVOID THROUGH TRAFFIC.

(iv) SIZED FOR STORAGE OF THREE DAYS' ACCUMULATION OF SOILED LINEN AND NECESSARY SORTING (IF ANY).

(v) MECHANICAL VENTILATION TO PROVIDE AN EXCESS OF EXHAUST OVER SUPPLY.³³

(vi) EQUIPMENT:

HANDWASHING FACILITY IN OR ADJACENT FLOOR DRAIN.

(c) CLEAN LINEN ROOM.

(i) SEPARATE ENCLOSED ROOM.

(ii) ARRANGED TO AVOID THROUGH TRAFFIC.

(iii) LOCATED AND ARRANGED TO AVOID SOURCES OF MOIST OR CONTAMINATED AIR.

(iv) SIZED FOR STORAGE OF RESERVE SUPPLY OF LINEN, BLANKETS, AND PILLOWS.

(d) SEWING ROOM.

May be combined with clean linen room.

(e) HOUSEKEEPING FACILITIES.⁵

Suitable combination with other housekeeping facilities permitted if convenient to laundry facilities.

(2) FACILITIES REQUIRED WHEN LAUNDRY IS PROCESSED IN HOSPITAL.

(a) LOCATED AND ARRANGED TO PREVENT OBJECTIONABLE HEAT, NOISE, ODORS, MOISTURE, AND CONTAMINATION TO PATIENT CARE, SUPPLY, AND FOOD SERVICE AREAS.

(b) ADEQUATE SPACE FOR CIRCULATION AND SEPARATE PARKING AREAS FOR CLEAN AND SOILED CARTS.

(c) SOILED LINEN ROOM.

(i) SEPARATE ENCLOSED ROOM.

(ii) ARRANGED TO AVOID THROUGH TRAFFIC.

(iii) SIZED FOR STORAGE OF THREE DAYS' ACCUMULATION OF SOILED LINEN AND NECESSARY SORTING (IF ANY).

(iv) EQUIPMENT:
HANDWASHING FACILITY IN OR ADJACENT FLOOR DRAIN.

MECHANICAL VENTILATION TO PROVIDE AN EXCESS OF EXHAUST OVER SUPPLY.³³

(d) PROCESSING ROOM OR ROOMS.

(i) SEPARATE FROM OTHER HOSPITAL FACILITIES.

(ii) ROOM SIZE AND CAPACITY OF EQUIPMENT ADEQUATE TO PROCESS FULL SEVEN DAYS' LAUNDRY IN WORK WEEK.

(iii) ARRANGED FOR UNINTERRUPTED FLOW FROM SOILED TO CLEAN (I.E., WASHING, EXTRACTING, IRONING, FOLDING, STORAGE).

(iv) BOTH SOILED AND CLEAN LINENS STORED OUTSIDE PROCESSING AREA.

(v) ADEQUATE VENTILATION PROPERLY ENGINEERED TO AVOID FLOW OF POTENTIALLY CONTAMINATED AIR FROM WASH AREA TO CLEAN AREAS.³³

(vi) EQUIPMENT:

COMMERCIAL WASHER OR WASHERS LOCATED TO AVOID THE SPREAD OF CONTAMINANTS IN THE LOADING OF SOILED LINEN.

COMMERCIAL EXTRACTOR OR EXTRACTORS.
COMMERCIAL TUMBLER OR TUMBLERS.

Commercial ironer or ironers.

Presses.

STORAGE FOR LAUNDRY SUPPLIES.

HANDWASHING FACILITY IN WASH AREA.

FLOOR DRAIN IN WASH AREA.

(e) Drying room.

(i) REQUIRED IF HANG DRYING IS TO BE DONE.

(ii) SEPARATE ENCLOSED ROOM.

(iii) ARRANGED TO AVOID THROUGH TRAFFIC.

(iv) SIZED AND EQUIPPED TO SUIT DRYING NEEDS (e.g., blankets, curtains, etc.).

(iv) ADEQUATE VENTILATION PROPERLY ENGINEERED TO AVOID FLOW OF POTENTIALLY CONTAMINATED AIR INTO ROOM.³³

(f) SEWING ROOM.

May be combined with clean linen room.

(g) CLEAN LINEN ROOM.

(i) SEPARATE ENCLOSED ROOM.

(ii) ARRANGED TO AVOID THROUGH TRAFFIC.

(iii) LOCATED AND ARRANGED TO AVOID SOURCES OF MOIST OR CONTAMINATED AIR.

(iv) SIZED FOR STORAGE OF RESERVE SUPPLY OF LINEN, BLANKETS, AND PILLOWS.

(h) HOUSEKEEPING FACILITIES.⁵

(i) FACILITIES SERVING OTHER AREAS OF THE LAUNDRY MAY NOT BE IN SOILED LINEN ROOM.

(ii) Suitable combination with other housekeeping facilities permitted if convenient to laundry facilities.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

³³See GENERAL DESIGN REQUIREMENTS, WAC 248-18-719(2) and Table 719-3, VENTILATION.

(1992 Ed.)

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-610, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-695, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-695, filed 9/20/83; Order 119, § 248-18-695, filed 5/23/75; Regulation 18.730, filed 1/25/62.]

WAC 246-318-620 Dietary department. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) DIETARY DEPARTMENT, GENERAL.

(a) SUITABLY LOCATED TO FACILITATE DELIVERY OF STORES, DISPOSAL OF KITCHEN WASTE, AND TRANSPORTATION OF FOOD TO NURSING UNITS.

(b) EQUIPMENT CONSTRUCTED AND INSTALLED IN ACCORDANCE WITH NATIONAL SANITATION FOUNDATION STANDARDS.²⁶

(c) ALL EQUIPMENT AND COUNTERS CONSTRUCTED FOR EASY CLEANING AND FREE FROM INACCESSIBLE SPACE PROVIDING HARBORAGE FOR VERMIN.

(d) ADEQUATE SPACE BETWEEN EQUIPMENT (INCLUDING CASEWORK) AND WALL AND/OR FLOOR TO PERMIT CLEANING; OR, EQUIPMENT TIGHT AGAINST WALL AND/OR FLOOR AND JOINT PROPERLY SEALED.

(e) ADEQUATE SPACE FOR CIRCULATION OF CARTS THROUGHOUT DIETARY DEPARTMENT.

(2) ADMINISTRATIVE FACILITIES.

(a) OFFICE SPACE - may be limited to desk and file space.²⁴

(b) Separate room recommended.

(3) RECEIVING AREA.²⁷

(a) LOCATED FOR READY ACCESS TO REFRIGERATION AREA.

(b) Floor scales.

(4) BULK FOOD STORAGE AREA.²⁷

(5) DAY STORAGE ROOM OR AREA.

(a) IN OR ADJACENT TO KITCHEN - may be combined in a room with bulk food storage.

(b) SPACE FOR THREE DAYS SUPPLY.

(c) STORAGE SHELVES AT LEAST TWELVE INCHES OFF FLOOR AND AT LEAST EIGHTEEN INCHES FROM TOP OF SHELVES TO CEILING.

(d) SPACE FOR LARGE CONTAINERS AND DOLLIES.

(6) REFRIGERATION AREA.

(a) IN OR ADJACENT TO KITCHEN.

(b) SPACE ADEQUATE FOR MINIMUM OF THREE DAYS SUPPLY.

(c) REFRIGERATION UNITS, GENERAL.⁶

A MINIMUM OF TWO SEPARATE SECTIONS OR BOXES (ONE FOR MEATS AND DAIRY PRODUCTS AND ONE FOR FRUIT AND VEGETABLES) - three sections or boxes recommended (one for meat, one for dairy products, and one for fruit and vegetables).

(d) Walk-in boxes.

(i) SHELVES AT LEAST TWELVE INCHES OFF FLOOR.

(ii) SPACE FOR LARGE STORAGE CONTAINERS AND DOLLIES.

(e) Frozen food storage.

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Section of walk-in box or separate deep freeze unit.

(7) Ice facilities.

(a) LOCATED TO AVOID CONTAMINATION OF ICE AND TO AVOID TRAFFIC INTO KITCHEN FOR ICE SERVICE FOR OTHER DEPARTMENTS.

(b) EQUIPMENT:

WORK COUNTER.⁶

ICE MACHINE OR ADEQUATE STORAGE UNIT (self-dispensing types recommended).

(8) KITCHEN.

(a) LOCATED AND ARRANGED TO AVOID CONTAMINATION OF FOOD; TO PREVENT OBJECTIONABLE HEAT, NOISE, AND ODORS TO PATIENT CARE AREAS; AND TO ELIMINATE THROUGH TRAFFIC.

(b) ADEQUATE FLOOR DRAINS.

(c) ADEQUATE SPACE FOR GARBAGE CONTAINERS.

(d) MEAT PREPARATION AREA.

(i) May be omitted if only prefabricated meats are to be used.

(ii) EQUIPMENT:

SINK WITH INTEGRAL DRAINBOARD OR COUNTER.

WORK TABLE OR COUNTER.⁶

MEAT BLOCK.⁶

Lavatory.

(e) FRUIT AND VEGETABLE PREPARATION AREA.

(i) LOCATED TO AVOID CONTAMINATION OF PREPARED FOODS AND CLEAN EQUIPMENT BY SOIL FROM VEGETABLES.

(ii) EQUIPMENT:

TWO-COMPARTMENT SINK WITH INTEGRAL DRAINBOARDS OR COUNTERS.

Food waste grinder.

Vegetable peeler.

(f) COOKING AREA.

(i) Located between preparation and serving units.

(ii) EQUIPMENT:

RANGE(S).

WORK TABLE(S) OR COUNTER(S).⁶

UTENSIL STORAGE.

COOK'S SINK - meat or vegetable sink may be used if conveniently located.

OVEN(S).²⁸

Steam kettles.

Mixers.

(g) SALAD AND SANDWICH PREPARATION AREA.²⁹

EQUIPMENT:

WORK TABLE OR COUNTER.⁶

REFRIGERATOR.^{6 30}

(h) DESSERT PREPARATION AREA.²⁹

EQUIPMENT:

WORK TABLE OR COUNTER.⁶

REFRIGERATOR.^{6 30}

(i) SPECIAL DIET PREPARATION AREA.

(i) May be omitted if special diets are to be prepared in same areas as general diets.

(ii) EQUIPMENT:

SINK WITH INTEGRAL DRAINBOARD OR COUNTER.

REFRIGERATOR.^{6 30}

WORK COUNTER.⁶

STORAGE CABINETS.

RANGE.

(j) Bakery area.

EQUIPMENT:

MIXER(S).

OVEN(S).

RANGE.

THREE-COMPARTMENT SINK - may be single compartment if utensils are to be washed in main pot and pan wash area.

WORK TABLE(S).⁶

COOLING RACK.⁶

POT AND PAN CABINET.

STORAGE SHELVES.⁶

PROOF BOX⁶ unless bread is purchased elsewhere.

(k) PATIENT SERVING AREA.

(i) ADEQUATE SPACE FOR MOBILE EQUIPMENT SUCH AS FOOD CARTS AND TRAY CARTS.²⁴

(ii) EQUIPMENT:

ADEQUATE SERVING EQUIPMENT.²⁴

CLOSED STORAGE UNITS FOR FOOD CONTAINERS, DISHES, AND TRAYS - may be on open shelves at least thirty inches above floor if utensils are to be reused within twenty-four hour periods.

ICE CREAM STORAGE.²⁴

BEVERAGE SERVICE EQUIPMENT.²⁴

(9) EMPLOYEE SERVING AREA.²⁴

(a) LOCATED AND ARRANGED TO ELIMINATE TRAFFIC INTO KITCHEN FOR SERVICE. Convenient to kitchen.

(b) PROTECTION OF OPEN FOOD DISPLAY COUNTERS.

(c) REFRIGERATION FOR PERISHABLE FOODS.²⁴

(10) DINING ROOM OR AREA.

(a) ADJACENT TO EMPLOYEE SERVING AREA - adjacent to dishwashing area.

(b) AT LEAST TWELVE SQUARE FEET OF FLOOR AREA PER PERSON FOR THE MAXIMUM NUMBER TO BE SERVED AT ANY ONE TIME.

(11) POT AND PAN WASH AREA.²⁹

EQUIPMENT:

THREE-COMPARTMENT SINK (OR EQUIVALENT) WITH INTEGRAL DRAINBOARDS OR COUNTERS.

Floor drain.

STORAGE CABINETS.

Food waste grinder.

(12) DISHWASHING ROOM OR AREA.

(a) May be located in a separate area of the kitchen.

(b) LOCATED TO AVOID TRAFFIC THROUGH OTHER AREAS OF THE KITCHEN.

(c) LOCATED TO PERMIT UNLOADING OF TRAY CARTS AND RECEIVING OF SOILED DISHES FROM DINING ROOM WITHOUT OBSTRUCTING TRAFFIC IN CORRIDORS.

(d) EQUIPMENT:

DISHWASHING MACHINE OR EQUIVALENT.

FLOOR DRAIN.

COUNTER FOR DIRTY DISHES.

Food waste grinder.

SPACE FOR GARBAGE CAN.

PRE-RINSE SINK UNLESS DISHWASHER EQUIPPED FOR PRE-RINSE CYCLE.

COUNTER FOR CLEAN DISHES.⁶

LAVATORY - may be located in cooking area if convenient to dishwashing area.

(13) GARBAGE FACILITIES.

(a) May be combined with general waste disposal facilities.³¹

(b) ADEQUATE SPACE (twenty-four square feet of floor area plus five square feet of storage space per can).

(c) STORAGE AREA.

(i) LOCATED IN SEPARATE, WELL-VENTILATED ROOM OR OUTSIDE, ENCLOSED SPACE.

(ii) CONVENIENT TO KITCHEN.

(iii) CONSTRUCTED TO PREVENT RAT HARBORAGE.

(iv) Refrigerated storage.

(d) CAN WASH AREA.

GARBAGE CAN WASH AREA WITH FLOOR DRAIN AND HOT AND COLD WATER. Steam recommended.

(14) HOUSEKEEPING FACILITIES.⁵

Suitable combination with other housekeeping facilities permitted if convenient to dietary facilities.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES (JANITORS' AND MAIDS').

⁶May be movable equipment.

²⁴In accordance with program.

²⁶See GENERAL DESIGN REQUIREMENTS, WAC 248-18-719 (5) and (6), EQUIPMENT AND CASEWORK.

²⁷See RECEIVING AND STORES, WAC 248-18-700.

²⁸May be combined with ranges.

²⁹May be combined with cooking areas.

³⁰May be combined with other refrigeration.

³¹See HOUSEKEEPING DEPARTMENT, WAC 248-18-690(4), WASTE DISPOSAL FACILITIES.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-620, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-685, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 83-07-048 (Order 257), § 248-18-685, filed 3/18/83; Order 119, § 248-18-685, filed 5/23/75; Regulation 18.710, filed 1/25/62.]

WAC 246-318-630 Laboratory facilities. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.) NUMBER, SIZE, AND TYPE OF FACILITIES DEPENDENT UPON TYPE AND ANTICIPATED VOLUME OF LABORATORY WORK AS PRESENTED IN FUNCTIONAL PROGRAM.

(1) LABORATORY, GENERAL.

(a) LOCATED TO AVOID OUTPATIENT TRAFFIC THROUGH INPATIENT AREAS.

(b) ELECTRICAL SERVICE. EMERGENCY POWER TO CRITICAL LABORATORY AREAS.

(c) NOISE ATTENUATION.²⁴

(d) PIPED UTILITY VALVES AND WASTE LINE CLEAN-OUTS ACCESSIBLE FOR REPAIR AND MAINTENANCE.

(e) WAITING AREA AVAILABLE.²⁴

(f) WORK AREAS FOR TECHNICAL, CLERICAL, AND ADMINISTRATIVE STAFF, FILES, AND STORAGE AREAS.²⁴

(g) STAFF TOILET CONVENIENT TO LABORATORY.

(2) EQUIPMENT - LABORATORY GENERAL:

(a) WORK COUNTER OR COUNTERS AT LEAST TWENTY-FOUR INCHES DEEP (FREE WORK SPACE) AND TWENTY-EIGHT INCHES HIGH AND OF SUFFICIENT DEPTH, HEIGHT, AND LENGTH TO ACCOMMODATE LABORATORY EQUIPMENT AND WORK PROCEDURES.^{20, 24}

(b) KNEE HOLE SPACES AT WORK STATIONS.²⁴

(c) SINK OR SINKS IN TESTING AREA OR AREAS.^{19, 24}

(d) SPACE FOR FREESTANDING EQUIPMENT.²⁴

(e) SPACE FOR CHAIRS AND/OR STOOLS AT WORK STATIONS.²⁴

(f) EASILY ACCESSIBLE EMERGENCY SHOWERS WITH FLOOR DRAINS AND EYE WASHERS.²⁴

(g) DRAINAGE FOR EQUIPMENT AND WASTE DISPOSAL.²⁴

(3) HOUSEKEEPING FACILITIES WHICH ARE SEPARATE OR SUITABLY COMBINED WITH OTHER HOUSEKEEPING FACILITIES CONVENIENT TO THE LABORATORY FACILITIES.⁵

(4) BLOOD DRAWING FACILITIES.

(a) ROOM OR PRIVATE AREA SEPARATE FROM LABORATORY TESTING AREA.

(b) EQUIPMENT.

(i) WORK COUNTER.⁶

(ii) LAVATORY.

(iii) SPACE TO ACCOMMODATE ADULT WHEELCHAIR AND ACCOMMODATION FOR INFANTS.

(5) WHEELCHAIR ACCESSIBLE PATIENT TOILET.

(a) LOCATED CONVENIENT TO LABORATORY.

(b) OPEN SHELF IN TOILET.

(6) CLEAN-UP, DECONTAMINATION, BIOHAZARDOUS WASTE COLLECTION, OR SOILED UTILITY FACILITIES IN LABORATORY OR ELSEWHERE.²⁴

(7) WHEN PROVIDED IN FUNCTIONAL PROGRAM, SPECIMEN PREPARATION FACILITY SHALL INCLUDE THE FOLLOWING:²⁴

(a) LOCATED IN OR ADJACENT TO LABORATORY.

(b) EQUIPMENT AS REQUIRED IN SUBSECTION (2) OF THIS SECTION.

(8) WHEN PROVIDED IN FUNCTIONAL PROGRAM, A MEDIA PREPARATION FACILITY SHALL INCLUDE A ROOM OR AREA MEETING VENTILATION REQUIREMENTS SPECIFIED IN WAC 248-18-719(2) and Table 719-3.²⁴

(9) WHEN PROVIDED IN FUNCTIONAL PROGRAM, A REAGENT PREPARATION FACILITY SHALL INCLUDE EQUIPMENT AS REQUIRED IN SUBSECTION (2) OF THIS SECTION WITH THE FOLLOWING DIFFERENCES OR EXCEPTIONS:²⁴

(a) SPACE FOR VIBRATION-FREE BALANCE TABLE UNLESS AVAILABLE ELSEWHERE IN LABORATORY.

(b) EQUIPMENT FOR PREPARATION OF REAGENT WATER OR OUTLET FOR PIPED REAGENT WATER PREPARED ELSEWHERE.²⁴

(10) WHEN PROVIDED IN FUNCTIONAL PROGRAM, MICROBIOLOGY FACILITY SHALL INCLUDE:²⁴

(a) SEPARATE ENCLOSED ROOM OR AN AREA LOCATED AWAY FROM TRAFFIC FLOW.

(b) EQUIPMENT AS REQUIRED IN SUBSECTION (2) OF THIS SECTION WITH THE FOLLOWING DIFFERENCES OR EXCEPTIONS:

(i) SPACE FOR SPECIAL GAS CYLINDERS WITH SAFETY FASTENERS UNLESS ALL GAS IS PIPED IN.

(ii) FOR HIGHLY INFECTIOUS MATERIALS (INCLUDING BUT NOT LIMITED TO TUBERCLE BACILLUS, VIRUS, SYSTEMIC MYCOLOGY), PROVIDE ADDITIONAL ENCLOSED AREA WITH COUNTERS, SINK, STORAGE, AND BIOLOGICAL SAFETY CABINET OR LAMINAR FLOW HOOD.²⁴

(11) WHEN PROVIDED IN FUNCTIONAL PROGRAM, BLOOD BANK FACILITY SHALL INCLUDE:

(a) EQUIPMENT AS REQUIRED IN SUBSECTION (2) OF THIS SECTION,

(b) A BLOOD BANK REFRIGERATOR EQUIPPED WITH HIGH AND LOW TEMPERATURE ALARM WHICH SIGNALS IN STAFFED AREA, AND

(c) EMERGENCY POWER.

(12) CHEMISTRY FACILITIES, WHEN PROVIDED IN FUNCTIONAL PROGRAM SHALL INCLUDE EQUIPMENT AS REQUIRED IN SUBSECTION (2) OF THIS SECTION WITH THE FOLLOWING DIFFERENCES OR EXCEPTIONS.

(a) FUME HOOD WHEN ANY PROCEDURE PRODUCES DANGEROUS, TOXIC, OR NOXIOUS FUMES.²⁴

(b) SPECIAL EQUIPMENT PROPERLY VENTED AS PER MANUFACTURER'S INSTRUCTIONS (e.g., atomic absorption).²⁴

(c) SPECIAL GASES PIPED IN OR SPACE FOR SPECIAL GAS CYLINDERS WITH SAFETY FASTENERS (WHEN SPECIAL GASES REQUIRED FOR PROCEDURES).²⁴

(13) WHEN PROVIDED IN FUNCTIONAL PROGRAM, CYTOLOGY FACILITY SHALL INCLUDE EQUIPMENT AS REQUIRED IN SUBSECTION (2) OF THIS SECTION AND FORCED AIR EXHAUST VENTILATION OVER STAINING AREA.

(14) WHEN INCLUDED IN FUNCTIONAL PROGRAM, HEMATOLOGY FACILITIES SHALL BE LOCATED AS REQUIRED IN SUBSECTION (1) OF THIS SECTION AND EQUIPPED AS IN SUBSECTION (2) OF THIS SECTION.

(15) WHEN PROVIDED IN FUNCTIONAL PROGRAM, HISTOLOGY FACILITIES SHALL INCLUDE:

(a) LOCATED IN A SEPARATE ROOM OR AREA.

(b) EQUIPMENT AS REQUIRED IN SUBSECTION (2) OF THIS SECTION WITH THE FOLLOWING DIFFERENCES OR EXCEPTIONS:

(i) FUME HOOD OR FORCED AIR LOCATED TO EXHAUST TISSUE PROCESSING EQUIPMENT AND AREAS AS NECESSARY.

(ii) SPACE FOR FROZEN SECTION EQUIPMENT WHEN FROZEN SECTIONS ARE TO BE PERFORMED IN THIS AREA.²⁴

(16) MORGUE FACILITIES WHEN IN FUNCTIONAL PROGRAMS SHALL INCLUDE:²⁴

(a) LOCATED TO ACCOMMODATE TRANSPORTATION OF BODIES VIA LEAST PUBLIC USE CORRIDOR OR CORRIDORS.

(b) REFRIGERATION FOR BODY STORAGE.

(c) SPACE FOR HOUSEKEEPING EQUIPMENT.²⁴

(17) AUTOPSY ROOM WHEN IN FUNCTIONAL PROGRAM SHALL INCLUDE:

(a) LOCATION CONVENIENT TO MORGUE.

(b) EQUIPMENT.

(i) AUTOPSY TABLE WITH WATER SUPPLY, SUCTION OUTLET, AND APPROPRIATE DRAIN.

(ii) SPACE FOR DISSECTION TABLE OR COUNTER (MAY BE PART OF AUTOPSY TABLE).⁶

(iii) FLOOR DRAIN.

(iv) SCRUB SINK.

(v) STORAGE FOR SUPPLIES AND EQUIPMENT.⁶

(vi) INSTRUMENT STERILIZER UNLESS PROVIDED ELSEWHERE.

(vii) CLINIC SERVICE SINK (SIPHON JET) OR OTHER TISSUE DISPOSAL SYSTEM.

(viii) CHANGING ROOM AND SHOWER.²⁴

(c) SPACE FOR HOUSEKEEPING EQUIPMENT.²⁴

(18) WHEN PROVIDED IN FUNCTIONAL PROGRAM, ANIMAL QUARTERS WHICH SHALL INCLUDE:

(a) LOCKED APART FROM LABORATORY AND TO AVOID ANNOYANCE.

(b) ADEQUATE FACILITIES BASED UPON TYPES AND EXTENT OF USAGE OF ANIMALS IN LABORATORY WORK, INCLUDING PROVISIONS FOR FOOD AND SUPPLY STORAGE, HANDWASHING, DISPOSAL OF WASTES AND DEAD ANIMALS, CLEANING AND SANITIZING OF QUARTERS AND CAGES, AND LOCKED ISOLATION OF INOCULATED ANIMALS.

NOTES:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

¹⁹CORROSION RESISTANT - Stainless steel recommended.

²⁰IMPERMEABLE SURFACE.

²⁴IN ACCORDANCE WITH PROGRAM.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-630, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-660, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 87-23-056 (Order 2560), § 248-18-660, filed 11/18/87. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-660, filed 9/20/83; Order 119, § 248-18-660, filed 5/23/75; § 248-18-660, filed 10/3/67; Regulation 18.660, filed 1/25/62.]

WAC 246-318-640 Pharmacy. (REQUIREMENTS IN CAPITAL LETTERS. SEE WAC 248-18-515.) Not required if hospital is to use outside pharmacy services exclusively.

(1) PHARMACY, GENERAL

(a) LOCATED IN A CLEAN, SECURE ROOM.

(b) ALL ENTRANCES EQUIPPED WITH CLOSERS.

(c) LOCKING MECHANISMS ON ALL ENTRANCE DOORS.

(d) ALL PERIMETER WALLS OF THE PHARMACY AND VAULT SHALL BE CONSTRUCTED FULL HEIGHT FROM FLOOR TO UNDERSIDE OF STRUCTURE ABOVE.

(e) ACCESSIBLE WINDOWS AND RELITES SUPPLIED WITH SECURITY DEVICES OR ALARM SYSTEMS.

(f) EMERGENCY SIGNAL DEVICE TO SECURE EMERGENCY ASSISTANCE.

(2) GENERAL COMPOUNDING AND DISPENSING UNIT OR AREA.

(a) Dispensing window. If provided, equipped with appropriate security device.

(b) Instruction area to allow for patient privacy while receiving instructions regarding drug usage.

(c) EQUIPMENT:

(i) WORK COUNTER.²⁰

(ii) SINK¹⁹ (MOUNTED IN COUNTER OR INTEGRAL WITH COUNTER).

(iii) STORAGE UNIT⁶ - Drawers, cupboards, and shelves to accommodate different size containers.

(iv) REFRIGERATOR.⁶

(v) Freezer.⁶

(vi) SPACE FOR TRANSPORTATION EQUIPMENT.²⁴

(vii) Telephone.

(viii) Bulletin board.

(3) Manufacturing and unit dose packaging area.

(a) Located in a work area separate from other functions.

(b) EQUIPMENT:

(i) WORK COUNTER.²⁰

(ii) SINK¹⁹ (MOUNTED IN COUNTER OR INTEGRAL WITH COUNTER).

(iii) STORAGE UNITS⁶

(4) Parenteral. Admixtures, Radiopharmaceuticals, and Other Sterile Compounding Area.

(a) LOW TRAFFIC, CLEAN AREA. May be located in other suitable, clean area outside pharmacy.

(b) PREPARATION AREA.

EQUIPMENT:

(i) WORK COUNTER.²⁰

(ii) Laminar flow unit.

(iii) SINK¹⁹ (MOUNTED IN COUNTER OR INTEGRAL WITH COUNTER).

(iv) SPACE FOR PARKING OF PORTABLE EQUIPMENT.²⁴

(v) STORAGE UNITS.⁶

(5) LOCKED STORAGE FOR SCHEDULE II CONTROLLED SUBSTANCES.

(6) SPACE FOR FILES AND CLERICAL FUNCTIONS. May be located in another suitable area outside the pharmacy. Office and library.

(7) Waiting room or area. Located outside the physical boundaries of the pharmacy.

(8) Conference room.

(9) BREAKOUT AREA SEPARATE FROM CLEAN AREAS.

(10) HOUSEKEEPING FACILITIES.

Suitable combination with other housekeeping facilities permitted if convenient to pharmacy.

Notes:

⁶May be movable equipment.

¹⁹CORROSION RESISTANT - Stainless steel recommended.

²⁰IMPERMEABLE SURFACE.

²⁴In accordance with program.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-640, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 83-13-067 (Order 262), § 248-18-670, filed 6/16/83; Order 119, § 248-18-670, filed 5/23/75; Regulation 18.680, filed 1/25/62.]

WAC 246-318-650 Radiology and other imaging facilities. Hospitals planning new construction of radiology and imaging facilities shall meet requirements under WAC 248-18-99902(18), WAC 248-28-032, and shall:

(1) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719.

(2) Meet general requirements for certain service facilities under WAC 248-18-711 and provide the following:

(a) Clean-up area;

(b) Housekeeping room; and

(c) Storage room or area.

(3) Provide radiographic room with:

(a) Location to minimize outpatient traffic through inpatient areas and convenient for the transport of patients from emergency department, surgery suite, and nursing units;

(b) Barrier-free access for wheeled stretcher or bed movement;

(c) Control area in accordance with WAC 402-28-032;

(d) Installations for imaging equipment, cobalt-60, or other sources of ionizing radiation, and radiation protection of floors, doors, walls, and ceilings in accordance with WAC 248-18-99902(18) and WAC 402-28-032;

(e) Grounding of table, tube stand and controls, and any associated electrical apparatus in accordance with WAC 248-18-99902(13);

(f) Facilities and equipment to provide infection control as required under WAC 248-18-035 and 248-18-311; and

(g) Lavatory in or immediately available to radiographic room or rooms.

(4) Provide contrast preparation area containing:

(a) A lavatory or sink with barium trap;

(b) Work counter; and

(c) Enclosed storage cabinets or movable enclosed storage cabinets.

(5) Provide processing or dark room or equivalent which is light-tight and has:

(a) A safe light which means an electric light that does not fog films;

(b) Developing tank with a thermostatic mixing valve, or automatic film processor with appropriate backflow protection;

(c) Film storage, shielded from stray radiation;

(d) Work counter;

(e) Sink, if dark room is provided; and

(f) Lighting provided for clean-up and maintenance purposes.

(6) Provide dressing area with rooms or booths providing privacy for dressing and including:

(a) Provision for clean and soiled linen storage in or near dressing rooms; and

(b) Access to at least one barrier-free booth or room to accommodate a wheelchair in or adjacent to the dressing area.

(7) Provide image viewing area with:

(a) Film illuminator or equivalent, for viewing at least two films; and

(b) Location to prevent public view of films.

(8) Provide waiting area with space for wheelchair patients, stretcher patients, and ambulatory patients.

(9) Provide toilet connected to or adjacent to radiographic room or rooms, with ratio of one toilet for every two radiographic rooms.

(10) Provide administrative facilities with:

(a) Office area, with provision for consultation; and

(b) An active film file area.

(11) Provide staff facilities separate or shared with other service areas meeting requirements under WAC 248-18-525(7).

(12) Meet the following requirements if planning new construction of imaging rooms listed below:

(a) Fluoroscopy room meeting requirements under subsection (3) of this section;

(b) Angiography room with scrub sinks designed to meet requirements under WAC 248-18-251(5) and 248-18-645(9);

(c) Cardiac laser, cardiac catheterization with angioplasty or valvuloplasty with scrub sink and designed to meet requirements under WAC 248-18-251(5), 248-18-645(9), and 248-18-711 (2), (4), and (10);

(d) Computerized tomography or computerized axial tomography (CT) room:

(i) With lavatory;

(ii) Meeting manufacturer's specifications for installation and safety; and

(iii) Meeting requirements under WAC 248-18-251(5) and 248-18-645(9).

(e) Lithotripsy room meeting requirements under WAC 248-18-251(5), 248-18-711 (2), (4), and (10), and accessible to cystoscopy, if appropriate, meeting requirements of WAC 248-18-645(9);

(f) Mammography room with provisions for patient privacy;

(g) Magnetic resonance imaging (MRI) room meeting manufacturer's specifications for installation and safety;

(h) Nuclear medicine room with a separate laboratory including a lavatory for preparation, storage, and safe disposal of radioactive materials meeting:

(i) Manufacturer's specifications for installation and safety; and

(ii) Requirements under WAC 248-18-99902(27).

(i) Other specialized rooms intended for invasive procedures meeting requirements under WAC 248-18-251(5) and 248-18-645(9).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-650, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-109 (Order 008), § 248-18-656, filed 11/1/89, effective 12/2/89.]

WAC 246-318-660 Radioisotope facilities. Optional. SHALL MEET REQUIREMENTS, IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) RADIOISOTOPE FACILITIES, GENERAL.²¹

(a) LOCATED SO OUTPATIENT TRAFFIC THROUGH INPATIENT AREAS WILL BE AVOIDED.

(b) LOCATED TO MINIMIZE EXPOSURE HAZARD TO PATIENTS AND PERSONNEL.

(c) Located for ease of access by outpatients.

(d) Located in or near clinical department assuming responsibility.

(e) WORK SURFACES AND FLOORS SUBJECT TO SPILLS OF RADIOACTIVE SOLUTIONS TO BE IMPERMEABLE, READILY DECONTAMINATED SURFACES.

(2) RADIOCHEMISTRY LABORATORY.

(a) ADEQUATE RADIATION SHIELDING AND OTHER PROTECTIVE DEVICES TO FACILITATE SAFE STORAGE AND HANDLING OF ISOTOPES AND WASTE MATERIALS.^{6 21}

(b) EQUIPMENT:

SEPARATE WORK SURFACES FOR PATIENT DOSE AND FOR CLINICAL SPECIMEN PREPARATION. FACILITIES FOR AIR CONTROL²² (glove box or fume hood).

LOCKABLE ISOTOPE STORAGE.⁶

EQUIPMENT AND SUPPLY STORAGE.⁶

LAVATORY OR SINK.

LOCKABLE STORAGE FOR CONTAMINATED EQUIPMENT AND WASTE MATERIALS.⁶

Storage unit⁶ for monitoring equipment located to avoid contamination.

(3) PATIENT UP-TAKE MEASURING ROOM.

(a) LOCATED AWAY FROM X-RAY MACHINES, AND RADIOACTIVE MATERIALS OR BE ADEQUATELY SHIELDED.

(b) DESK AND FILE SPACE.

(c) WAITING AREA - May be shared with other area if adjacent.

(d) SPACE FOR DENTAL CHAIR OR EXAMINATION TABLE.

(e) EQUIPMENT:

Lavatory or sink.

WORK SURFACE FOR SCALER AND DETECTORS. STORAGE CABINETS.⁶

Notes:

⁶May be movable equipment.

²¹Refer to WAC 248-18-99902(27).

²²May be omitted if program indicates is not needed.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-660, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-665, filed 5/30/90, effective 6/30/90; Order 119, § 248-18-665, filed 5/23/75; Regulation 18.670, filed 1/25/62.]

WAC 246-318-670 Electrocardiography facilities. Optional, SHALL MEET REQUIREMENTS, IF INCLUDED.

(1) LOCATED OUTSIDE LABORATORY TESTING AREAS IN DESIGNATED ROOM OR AREA FREE FROM EXCESSIVE NOISE AND PROVIDING PRIVACY FOR PATIENTS.

(2) MINIMUM DIMENSION OF EIGHT FEET AND MINIMUM AREA OF EIGHTY SQUARE FEET.

(3) WHEN STRESS TEST FACILITY, MINIMUM AREA ONE HUNDRED FIFTY SQUARE FEET AND VERTICAL HEIGHT NINE FEET.

(4) EQUIPMENT:

- (a) LAVATORY OR SINK IN OR CONVENIENT TO ROOM.
- (b) SPACE FOR ELECTROCARDIOGRAPHIC MACHINE.
- (c) CLOTHES HOOK OR HOOKS.
- (d) LINEN STORAGE AND DISPOSAL FACILITIES OR SPACE IN OR CONVENIENT TO ROOM.⁶
- (e) MEDICAL EMERGENCY SIGNAL DEVICE.
- (i) REGISTER BY DISTINCTIVE LIGHT AT CORRIDOR DOOR OR EQUIVALENT LOCATOR SYSTEM,
- (ii) REGISTER BY DISTINCTIVE VISUAL AND AUDIBLE SIGNALS AT LOCATIONS FROM WHICH ADDITIONAL ASSISTANCE IS ALWAYS AVAILABLE, AND
- (iii) RESET ONLY AT POINT OF ORIGIN.
- (f) RECORD FILING FACILITY OR SPACE IN OR CONVENIENT TO ROOM OR ROOMS.⁶

FOOTNOTE: ⁶May be movable equipment.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-670, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-030 (Order 2464), § 248-18-662, filed 1/14/87.]

WAC 246-318-680 Electroencephalography facilities. Optional, SHALL MEET REQUIREMENTS, IF INCLUDED.

- (1) LOCATED OUTSIDE OF LABORATORY TESTING AREAS IN DESIGNATED ROOM OR AREA FREE FROM EXCESSIVE NOISE AND PROVIDING PRIVACY FOR PATIENTS.
- (2) NOISE ATTENUATION MATERIALS IN WALLS AND CEILINGS.
- (3) MINIMUM DIMENSION OF EIGHT FEET AND MINIMUM AREA OF ONE HUNDRED SQUARE FEET.
- (4) EQUIPMENT:
 - (a) LAVATORY OR SINK IN ROOM OR NEARBY.
 - (b) ADMINISTRATIVE OR CLERICAL AREA LOCATED IN SEPARATE ROOM FROM TESTING AREA.
 - (c) CLOTHES HOOK OR HOOKS.
 - (d) LINEN STORAGE AND DISPOSAL FACILITIES OR SPACE IN OR CONVENIENT TO ROOM.⁶
 - (e) MEDICAL EMERGENCY SIGNAL DEVICE TO:
 - (i) REGISTER BY DISTINCTIVE LIGHT AT CORRIDOR DOOR OR EQUIVALENT LOCATOR SYSTEM,
 - (ii) REGISTER BY DISTINCTIVE VISUAL AND AUDIBLE SIGNALS AT LOCATIONS FROM WHICH ADDITIONAL ASSISTANCE IS ALWAYS AVAILABLE, AND
 - (iii) RESET ONLY AT POINT OF ORIGIN.

FOOTNOTE: ⁶May be movable equipment.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-680, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 87-03-030 (Order 2464), § 248-18-663, filed 1/14/87.]

WAC 246-318-690 Nursing unit—General. (REQUIREMENTS ARE SHOWN IN CAPITAL LETTERS. SEE WAC 248-18-515.)

- (1) DEFINITION. A SEPARATE, PHYSICAL, AND FUNCTIONAL UNIT OF THE HOSPITAL WHICH INCLUDES A GROUP OF PATIENT ROOMS, AND THE ANCILLARY ADMINISTRATIVE AND SERVICE

FACILITIES NECESSARY TO PROVIDE NURSING SERVICE TO THE OCCUPANTS OF THESE PATIENT ROOMS. EXCLUDES FACILITIES WHICH SERVE OTHER AREAS OF THE HOSPITAL AND WHICH CREATE TRAFFIC UNNECESSARY TO THE FUNCTIONS OF THE NURSING UNIT.

(2) LOCATION.

(a) EACH NURSING UNIT LOCATED TO AVOID THROUGH TRAFFIC TO ANY SERVICE, DIAGNOSTIC, TREATMENT, OR ADMINISTRATIVE AREA. INTENSIVE CARE UNITS, AND PSYCHIATRIC NURSING UNITS IN A LOCATION WITH NO THROUGH TRAFFIC TO ANY OTHER AREA OF THE HOSPITAL. For nursery or neonatal intensive care unit, refer to WAC 248-18-224 and 248-18-637.

(b) ALL ROOMS AND AREAS WITHIN A NURSING UNIT ON THE SAME FLOOR.

(c) Nursing units placed on quiet side of site and separated from service and ambulance courts. Convenient relationships to surgery and obstetrical delivery suites, adjunct diagnostic and treatment facilities and service areas.

(d) Location and relationship of nursing units in hospital to provide for flexible overlap of postpartum rooms with surgical rooms.

(3) CAPACITY.

(a) Bed capacity of a nursing unit, twenty to thirty-five beds, except where necessary to provide separation of units, such as units for special care.²⁴

(b) Additional service facilities may be required in units of more than thirty-five beds.²⁴

(4) SEPARATION OF CLINICAL SERVICES.²⁴ Suitable combinations of ancillary administrative and service facilities between or among units may be permitted.²⁴

(a) BEDS FOR POSTPARTUM PATIENTS GROUPED TOGETHER AND LOCATED TO AVOID INTERMIXING WITH BEDS FOR OTHER TYPES OF PATIENTS.

(b) ROOMS WITH PEDIATRIC BEDS LOCATED TOGETHER OR IN CLOSE PROXIMITY TO EACH OTHER.²⁴ Refer to WAC 248-18-541.

(c) WHEN A SEPARATE PSYCHIATRIC UNIT IS PLANNED, WAC 248-18-534 APPLIES. WHEN TEN OR MORE PSYCHIATRIC BEDS ARE PLANNED, A PSYCHIATRIC UNIT SHALL BE PROVIDED. Refer to WAC 248-18-534.

(d) SEGREGATED INTENSIVE CARE PATIENT BEDS.²⁴ SEPARATE INTENSIVE CARE NURSING UNIT WHERE FIVE OR MORE BEDS ARE PLANNED. Refer to WAC 248-18-555.

(e) SEPARATE NURSING HOME OR LONG-TERM CARE UNIT WHERE TEN OR MORE BEDS ARE PLANNED FOR NURSING HOME OR LONG-TERM CARE PATIENTS.

(5) SPECIAL DESIGN FEATURES OF SPECIALIZED FACILITIES.

(a) Facilities for psychiatric patients. Refer to WAC 248-18-530 (6)(c) and 248-18-534.

(b) Facilities for pediatric patients. Refer to WAC 248-18-530 (6)(d) and 248-18-541.

(c) Facilities for intensive care. Refer to WAC 248-18-555. Relates between corridors and rooms.

(6) PATIENT ROOM.

(a) DIRECTLY ACCESSIBLE FROM CORRIDOR OF NURSING UNIT. LOCATED TO PREVENT TRAFFIC THROUGH ROOMS AND TO MINIMIZE ENTRANCE OF ODORS, NOISE, AND OTHER NUISANCES.

(b) ISOLATION ROOM(S), ONE OR MORE PER HOSPITAL, FOR AIRBORNE COMMUNICABLE DISEASE WITH ADJOINING TOILET, BEDPAN FLUSHING EQUIPMENT, AND BATHING FACILITY. LAVATORY LOCATED IN ROOM AT ENTRY. AIR CHANGES AND AIR PRESSURE GRADIENTS AS DESCRIBED IN WAC 248-18-719 TABLE 719-3. ULTRAVIOLET GENERATOR IRRADIATION IN ROOMS DESIGNATED FOR ISOLATION OF TUBERCULOSIS PATIENTS AS DESCRIBED IN WAC 248-18-245 (1)(a)(iii).^{6, 24} Mirror, shelf, and towel bar or hook not required if provided with lavatory in adjoining toilet room.

(c) Rooms for disturbed medical or psychiatric patients. At least one seclusion or security room with adjoining toilet for the care of seriously disturbed patients on an appropriate nursing unit or near emergency rooms unless a separate psychiatric unit is provided, as described in WAC 248-18-534.

(d) CAPACITY AND AREA.

(i) MAXIMUM CAPACITY OF FOUR BEDS PER PATIENT ROOM. Maximum patient room capacity of two beds recommended. At least twenty-five percent of beds in one-bed rooms.

(ii) AT LEAST EIGHTY SQUARE FEET USABLE FLOOR SPACE PER BED IN MULTIBED ROOMS. One hundred square feet of usable floor space per bed in multibed rooms recommended.

(iii) AT LEAST ONE HUNDRED SQUARE FEET USABLE FLOOR SPACE IN ONE-BED ROOMS. One hundred twenty-five square feet usable floor space in one-bed rooms recommended.

(iv) AT LEAST FORTY SQUARE FEET PER BASSINET IN PATIENT ROOM FOR INFANT PEDIATRIC PATIENTS. ADULT REQUIREMENTS APPLY TO ROOMS FOR YOUTH CRIBS AND BEDS. Refer to WAC 248-18-541.

(e) DIMENSIONS.

(i) MINIMUM WIDTH OF ELEVEN FEET FOR MULTIBED ROOMS. Minimum recommended dimensions of twelve feet by sixteen feet for two-bed rooms.

(ii) MULTIBED ROOMS ARRANGED TO ALLOW SPACING OF BEDS AT LEAST TWO FEET FROM WALL (EXCEPT AT HEAD) AND AT LEAST THREE FEET APART. CLEARANCE AT LEAST THREE FEET EIGHT INCHES AT FOOT OF BED to permit passage of large equipment and beds.

(f) EQUIPMENT.

(i) LAVATORY IN EACH ROOM EXCEPT OPTIONAL IN PSYCHIATRIC PATIENT ROOMS OR SINGLE PATIENT ROOMS HAVING A SEPARATE ADJOINING TOILET ROOM WHICH SERVES SINGLE ROOM ONLY AND CONTAINS A LAVATORY.

(ii) CUBICLE CURTAIN TRACKS OR RAILS TO PROVIDE COMPLETE SCREENING OF EACH BED OR AN EQUIVALENT MEANS FOR PROVIDING PRIVACY FOR EACH PATIENT IN ALL MULTIBED PATIENT ROOMS EXCEPT PSYCHIATRIC. Refer to WAC 248-18-534. TRACKS OR EQUIVALENT SCREENING SHALL

PROVIDE ACCESS TO TOILET, LAVATORY, WARDROBE, AND ENTRY WITHOUT INTERFERENCE WITH PRIVACY OF OTHER PATIENTS.

(iii) WARDROBE, CLOSET OR LOCKER PER BED FOR HANGING FULL LENGTH GARMENTS AND STORAGE OF PERSONAL EFFECTS, extra pillows, and other equipment.⁶

(iv) SEPARATE OXYGEN OUTLET LOCATED AT HEAD OF EACH BED. (See exception for psychiatric unit WAC 248-18-534 (4)(c)). Alcoholism units may be excepted.

(v) SEPARATE SUCTION OR VACUUM OUTLET LOCATED AT HEAD OF EACH BED. (See exception for psychiatric unit WAC 248-18-534 (4)(c)). Alcoholism units may be excepted.

(vi) NURSE CALL SYSTEM. Refer to WAC 248-18-719, Table 719-6.

(g) DOORS AND WINDOWS. Refer to WAC 248-18-719(1), Table 719-1.

(h) ELECTRICAL REQUIREMENTS. Refer to WAC 248-18-719(4), Table 719-5.

(7) PATIENT TOILET.

(a) TOILET EQUIPPED WITH BEDPAN FLUSHING EQUIPMENT ADJOINING EACH PATIENT ROOM. Exceptions: Refer to WAC 248-18-534 PSYCHIATRIC NURSING UNIT, WAC 248-18-541 PEDIATRIC NURSING UNIT, WAC 248-18-555 INTENSIVE CARE.

(b) WATER CLOSETS IN RATIO OF AT LEAST ONE PER FOUR BEDS OR MAJOR FRACTION THEREOF ON EACH NURSING UNIT. For alteration projects, ratio of one per six acceptable.

(c) AT LEAST ONE TOILET, DESIGNED AND ARRANGED FOR USE BY INDIVIDUALS IN WHEELCHAIRS, OPENING DIRECTLY FROM A MAIN CORRIDOR ON EACH FLOOR. For use by patients, public, and staff. May be used by either sex.

(8) PATIENT BATHING FACILITIES.

(a) SHOWERS OR TUBS IN THE RATIO OF AT LEAST ONE BATHING FACILITY PER EIGHT BEDS OR MAJOR FRACTION THEREOF ON EACH NURSING UNIT.²⁴ BEDS HAVING A BATHING FACILITY ADJOINING THE PATIENT ROOM SHALL BE EXCLUDED FROM THE RATIO. For alteration projects, one bathing facility per twelve beds or major fraction thereof may be acceptable.

(b) AT LEAST ONE COMMUNAL BATHING FACILITY ON EACH FLOOR TO BE AN "ISLAND" TUB (ACCESSIBLE ON TWO SIDES AND ONE END), OR ROLL-IN SHOWER OR EQUIVALENT, (shower in which a chair on wheels may be used). SPACE PROVIDED FOR WHEELCHAIR WITH ASSISTING ATTENDANT. Elevation of island tub on pedestal not recommended.

(c) PROPERLY LOCATED GRAB BARS AT EACH BATHTUB, SHOWER, AND WATER CLOSET FOR PATIENT USE. Refer to WAC 248-18-719(6).

(9) MISCELLANEOUS FACILITIES AND EQUIPMENT.

(a) NURSES' STATION OR EQUIVALENT.²⁴

(i) STATION FOR EACH NURSING UNIT OR SHARED WITH ADJACENT UNIT.²⁴

(ii) EQUIPMENT:²⁴
CHARTING SURFACE.⁶

STORAGE FOR PATIENT CHARTS.^{6, 24}
TELEPHONE.

NURSE CALL ANNUNCIATOR.

Storage for charting supplies.

Clock.

(b) UTILITY OR MATERIALS ROOM.⁷ May be shared if adequate size and convenient to units served.²⁴

(i) AT LEAST ONE CLEAN UTILITY ROOM OR A CLEAN MATERIALS ROOM ON EACH NURSING UNIT. Refer to WAC 248-18-711 (3) or (4).

(ii) AT LEAST ONE SOILED UTILITY ROOM OR A SOILED MATERIALS ROOM ON EACH NURSING UNIT. Refer to WAC 248-18-711 (8) or (9).

(c) MEDICINE DISTRIBUTION FACILITIES.⁷ AT LEAST ONE ON EACH NURSING UNIT OR SHARED WITH ADJACENT UNIT(S).²⁴ Convenient to beds served.

(d) LINEN STORAGE.¹⁸ IN CLEAN AREA ON EACH NURSING UNIT (SHELVING, CART, OR EQUIVALENT). OR SHARED WITH OTHER UNIT(S), if adequate size and convenient to units.

(e) ICE FACILITIES.

(i) ON OR ADJACENT TO EACH NURSING UNIT. LOCATED IN AREA SERVING CLEAN FUNCTIONS ONLY, EXCEPT SELF-DISPENSING ICE MACHINES may be in alcove on corridor.

(ii) EQUIPMENT: May be combined with nourishment facilities.

WORK COUNTER.⁶

ICE MACHINE OR ADEQUATE STORAGE UNIT.

(Self-dispensing types recommended.)

(f) DRINKING FACILITIES ACCESSIBLE IN PUBLIC AREA ON EACH FLOOR TO PROVIDE WATER: (Fountain, disposable drinking cups or equivalent dispensing system accessible to individuals using wheelchairs).

(g) NOURISHMENT FACILITIES.

(i) ON OR ADJACENT TO EACH NURSING UNIT. SEPARATE AREA IN ROOM SERVING CLEAN FUNCTIONS ONLY; SEPARATE ROOM IF FACILITIES TO BE USED FOR DISHWASHING OR DECENTRALIZED FOOD SERVICE.

(ii) SPACE FOR WASTE CONTAINER.

(iii) EQUIPMENT:

REFRIGERATOR.⁶

WORK COUNTER.⁶

SINK OR LAVATORY.

STORAGE FOR UTENSILS AND FOODSTUFFS.⁶

Cooking unit.⁶

DISHWASHING MACHINE (OR THREE-COMPARTMENT SINK) IF DISHES, GLASSES OR PITCHERS ARE TO BE WASHED ON THE UNIT.

(iv) ADDITIONAL FACILITIES MAY BE REQUIRED DEPENDING UPON DEGREE OF DECENTRALIZATION OF FOOD SERVICE. Refer to chapter 248-84 WAC.

(h) EQUIPMENT STORAGE.¹⁸ ON OR ADJACENT TO EACH NURSING UNIT. FOR NURSING AND MEDICAL EQUIPMENT. Centralized equipment storage area may be acceptable.²⁴

(i) WHEELCHAIR AND STRETCHER STORAGE ON OR ADJACENT TO EACH NURSING UNIT.¹⁸

(j) HOUSEKEEPING FACILITIES.⁵ ON OR ADJACENT TO EACH NURSING UNIT.

(k) PERSONNEL FACILITIES.

(i) TOILET ON OR ADJACENT TO EACH NURSING UNIT.

(ii) STORAGE FOR PURSES AND PERSONAL EFFECTS APART FROM STORAGE FOR PATIENT CARE SUPPLIES AND EQUIPMENT ON OR ADJACENT TO EACH NURSING UNIT:

(l) Treatment and examination room.²⁴ REQUIRED FOR HOSPITALS WITH PSYCHIATRIC AND PEDIATRIC UNITS. Refer to WAC 248-18-534 (8)(e), 248-18-541.

(i) MINIMUM DIMENSION, EIGHT FEET, AT LEAST EIGHTY SQUARE FEET EXCLUSIVE OF CABINETS, SINK, WORK COUNTER, DESK AND VESTIBULE.

(ii) EQUIPMENT:

EMERGENCY SIGNAL DEVICE.

LAVATORY OR SINK.

Clock.

Oxygen outlet.

Suction outlet.

WORK SURFACE.⁶

STORAGE CABINET.⁶

(m) Patient activity areas.²⁴ Optional except where mandated in this section.

(i) Adequate facilities to accommodate the maximum number of patients to be cared for.

(ii) PLAYROOM OR AREA FOR PEDIATRIC PATIENTS. Refer to WAC 248-18-541.

(iii) DAYROOM WITH WINDOWS OR SOLARIUM ON PSYCHIATRIC NURSING UNITS AND NURSING HOME OR LONG-TERM CARE UNITS. Refer to WAC 248-18-534.

(iv) RECREATION ROOM ON PSYCHIATRIC NURSING UNITS AND NURSING HOME OR LONG-TERM CARE UNITS.²⁴ Refer to WAC 248-18-534.

(v) DINING AREA ON OR AVAILABLE TO PSYCHIATRIC NURSING UNITS AND NURSING HOME OR LONG-TERM CARE UNITS.²⁴ Refer to WAC 248-18-534.

(vi) OCCUPATIONAL THERAPY AREA ON OR AVAILABLE TO PSYCHIATRIC NURSING UNITS AND NURSING HOME OR LONG-TERM CARE UNITS.²⁴ Refer to WAC 248-18-534.

(vii) Above areas may be combined in one room.²⁴

(viii) Suitable outdoor recreational space for patients on nursing home or long-term care units and psychiatric units. Refer to WAC 248-18-534.

(ix) Barber and beauty shop facilities available for psychiatric and nursing home or long-term care units. Refer to WAC 248-18-534.

(n) Patient laundry facilities.²⁴

(i) REQUIRED ON PSYCHIATRIC UNITS. Refer to WAC 248-18-534. Recommended on nursing home or long-term care units.²⁴

(ii) EQUIPMENT:

SINK AND COUNTER.⁶

Drying facilities.^{6, 24}

STORAGE CABINET.⁶

Ironing facilities.^{6, 24}

(o) Interview room. REQUIRED ON OR ACCESSIBLE TO PSYCHIATRIC UNITS. Refer to WAC 248-18-534. Recommended on nursing home or long-term care units. May be combined with private office.

(p) Patient classroom. Recommended availability for obstetric, psychiatric, and pediatric units and other units where group instruction to patients may be given. Refer to WAC 248-18-541.

(q) OFFICE FOR HEAD NURSE OR NURSING SUPERVISOR ON OR CONVENIENT TO UNITS OF TWENTY BEDS OR MORE.²⁴ AT LEAST ONE NURSING OFFICE PER HOSPITAL.

(r) CONFERENCE ROOM FOR CONFIDENTIAL STAFF COMMUNICATION.²⁴ Combined with rooms for other nursing functions as appropriate.

(s) AT LEAST ONE WAITING ROOM OR AREA PER FLOOR.²⁴

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

⁷See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711.

¹⁸See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(10), STORAGE FACILITIES.

²⁴In accordance with program.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-690, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-530, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 43.20.050 and chapter 70.41 RCW. 81-22-014 (Order 216), § 248-18-530, filed 10/23/81; Order 119, § 248-18-530, filed 5/23/75; Regulation 18.560, §§ 1, 2 and 3, filed 1/25/62.]

WAC 246-318-700 Pediatric nursing unit. Hospitals planning new construction of a pediatric unit shall:

(1) Locate the pediatric unit to prevent unnecessary traffic through the service area;

(2) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719;

(3) Meet general requirements for certain service facilities under WAC 248-18-711 as follows:

(a) Locate for convenient use of staff;

(b) May be shared with other service areas when service is limited to sixteen patient beds or less in a combined-use area;

(c) Provide clean utility or materials room;

(d) Provide housekeeping room;

(e) Provide medication distribution facilities;

(f) Provide soiled utility or materials room; and

(g) Provide storage room.

(4) Design the pediatric unit to accommodate WAC 248-18-216 and meet the requirements under WAC 248-18-530 (6), (7), and (8), except as follows:

(a) Patient rooms with fifty square feet usable floor space per bassinets;

(b) Adjoining patient toilets may be omitted from bassinets rooms;

(c) Ratios of bathing facilities to beds may exclude cribs and bassinets; and

(d) At least one isolation room located in the pediatric area.

(5) Meet the requirements under WAC 248-18-530(9) for:

(a) Nurses' station or equivalent;

(b) Ice facilities;

(c) Drinking facilities;

(d) Nourishment facilities;

(e) Personnel facilities; and

(f) Treatment and examination room.

(6) Provide parents' waiting room with education facilities; and

(7) Provide multipurpose room with:

(a) Space for playing and dining;

(b) Separate activity area for adolescents; and

(c) Construction minimizing sound transmission.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-700, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-541, filed 11/1/89, effective 12/2/89.]

WAC 246-318-710 Emergency department. Optional. SHALL MEET REQUIREMENTS, IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.) REQUIRED IF HOSPITAL WILL OFFER EMERGENCY CARE SERVICES REGULARLY.

(1) EMERGENCY DEPARTMENT - GENERAL.⁸

(a) ON SAME FLOOR AS EMERGENCY PATIENTS' ENTRANCE.

(b) LOCATED FOR READY ACCESS FROM EMERGENCY PATIENT ENTRANCE.

(c) SEPARATE FROM SURGERY SUITE AND DELIVERY SUITE.

(d) LOCATED SO EMERGENCY TRAFFIC THROUGH INPATIENT AREAS WILL BE AVOIDED.

(e) Close to radiology department.

(f) NUMBERS, TYPES, AND EQUIPMENT OF ROOMS TO BE PREDICATED UPON THE SCOPE AND TYPES OF SERVICES TO BE OFFERED, AND THE ANTICIPATED PATIENT LOAD.

(g) CUBICLE CURTAINS OR AN EQUIVALENT MEANS FOR PROVIDING COMPLETE PRIVACY SCREENING FOR EACH EXAMINATION OR TREATMENT TABLE (OR CART) AND PATIENT BED IN EXAMINATION, TREATMENT, OR OBSERVATION ROOMS.

(h) AN EMERGENCY AUDIO ALARM SYSTEM WITH AN EMERGENCY ALARM SIGNAL DEVICE IN EACH TREATMENT, EXAMINATION, AND OBSERVATION ROOM. EMERGENCY AUDIO ALARM TO BE DISTINCT AND DIFFERENT FROM OTHER AUDIO SIGNALS AND ALARM SYSTEMS IN HOSPITAL. EMERGENCY AUDIO ALARM SYSTEM TO SOUND ALARM CALL INTO AN AREA OF HOSPITAL WHERE NURSING PERSONNEL ARE ON DUTY AT ALL TIMES. IN MULTIRoom EMERGENCY DEPARTMENT, EMERGENCY ALARM SYSTEM ALSO TO ACTIVATE A DISTINCT VISUAL SIGNAL AT DOOR OF ROOM FROM WHICH ALARM IS SOUNDED SO PERSONS RESPONDING TO AUDIO ALARM CAN IMMEDIATELY IDENTIFY ROOM WHERE ASSISTANCE IS NEEDED.

(2) STRETCHER AND WHEELCHAIR STORAGE. ADJACENT TO EMERGENCY DEPARTMENT ENTRANCE.

(3) RECEIVING AND TRIAGE AREA.

(a) ADJACENT TO EMERGENCY ENTRANCE.

(b) ADJACENT TO TREATMENT ROOMS.

(c) Sufficient space for triage in event of mass casualties.

(4) REGISTRATION AREA.

(a) OFFICE FACILITIES OR DESK SPACE FOR REGISTRATION LOCATED TO CONTROL ACCESS TO AREAS OF THE EMERGENCY DEPARTMENT WHERE EXAMINATION, TREATMENT, AND OBSERVATION ROOMS ARE LOCATED.

(b) CONVENIENT TO WAITING AREA.

(5) WAITING AREA.

(a) OUTSIDE AREA OF MAIN TRAFFIC FLOW IN EMERGENCY DEPARTMENT.

(b) May be combined with other waiting area in close proximity to emergency department.

(6) PUBLIC TOILETS.

Other public toilets may serve if close and easily accessible from the emergency department.

(7) Police, press, and ambulance attendants' room or rooms.

(a) OUTSIDE AREA OF MAIN TRAFFIC FLOW IN EMERGENCY DEPARTMENT.

(b) Equipped with desk and telephone.

(8) MAJOR EMERGENCY TREATMENT ROOM OR ROOMS.

(a) Number of rooms dependent upon anticipated volume of emergency services.

(b) AT LEAST ONE, MAJOR EMERGENCY TREATMENT ROOM.

(c) DIMENSIONS AND ARRANGEMENT OF EACH EMERGENCY TREATMENT ROOM TO PROVIDE A CLEAR SPACE AT LEAST FOUR FEET WIDE BETWEEN BOTH SIDES AND BOTH ENDS OF EACH TREATMENT TABLE (OR CART) AND ANY FIXED EQUIPMENT (CABINETS, SINKS, ETC.) OR MAJOR MOVABLE EQUIPMENT KEPT IN THE ROOM: PROVIDED HOWEVER, THE CLEAR SPACE BETWEEN TREATMENT TABLES (OR CARTS) SHALL BE AT LEAST EIGHT FEET WIDE. THE FLOOR SPACE ALLOWED FOR A TREATMENT TABLE SHALL BE AT LEAST EIGHTY INCHES BY THIRTY INCHES.

(d) Major emergency treatment room designed and equipped to accommodate at least two treatment tables if emergency department has only one major treatment room.

(e) EQUIPMENT:

STORAGE FOR CLEAN AND STERILE SUPPLIES, SMALL EQUIPMENT, AND DRUGS.^{6, 18}

CLEAN WORK COUNTER FOR ASSEMBLY AND PREPARATION OF CLEAN AND STERILE SUPPLIES AND EQUIPMENT FOR USE.⁶

SINK (MOUNTED IN, INTEGRAL WITH, OR ADJACENT TO CLEAN WORK COUNTER).

SCRUB SINK - EIGHT FEET APART OR PHYSICAL BARRIER SEPARATING FROM CLEAN WORK COUNTER AND STORAGE FOR CLEAN AND STERILE SUPPLIES AND EQUIPMENT AND DRUGS. Not required if a scrub sink is located outside but adjacent to emergency treatment room.

DETERGENT DISPENSER.⁶

SOILED WORK COUNTER FOR COLLECTION OF CONTAMINATED SUPPLIES AND EQUIPMENT.⁶

SINK WITH PLASTER TRAP - Not required if separate fracture room provided. Suitable combination with other sink in emergency department permitted.

TREATMENT LIGHT.⁶

SUCTION OUTLET.

OXYGEN OUTLET.

FILM ILLUMINATORS.⁶

OUTLET FOR PORTABLE X-RAY MACHINE.

CLOCK - WITH SWEEP SECOND HAND and interval timer.

SPACE FOR MAJOR MEDICAL EQUIPMENT TO BE KEPT IN ROOM.

SPACE FOR LINEN HAMPERS AND TRASH CONTAINERS.

(9) Minor treatment and examination room or rooms.

(a) At least one minor treatment and examination room.

(b) DIMENSIONS AND ARRANGEMENT OF EXAMINATION ROOM OR ROOMS TO PROVIDE AT LEAST EIGHTY NET SQUARE FEET OF FLOOR SPACE, EXCLUSIVE OF SPACE FOR LAVATORY, CABINETS, WORK COUNTER, WARDROBE, DESK, OR VESTIBULE. CONFIGURATION OF THIS NET FLOOR SPACE TO ALLOW FOR PLACEMENT OF A SIX FEET BY TWO FEET EXAMINATION TABLE WITH AT LEAST THREE FEET WIDE CLEAR SPACE ON EACH SIDE OF THE TABLE AND FOUR FEET WIDE CLEAR SPACE AT THE FOOT END OF THE TABLE.

(c) EQUIPMENT:

LAVATORY.

WORK COUNTER.⁶

STORAGE FOR SUPPLIES AND EQUIPMENT.^{6, 18}

SUCTION OUTLET.

OXYGEN OUTLET.

EXAMINATION LIGHT.⁶

(10) Observation room or rooms.

(a) NEAR TO NURSES' STATION OR OTHER CONTROL STATION TO PERMIT CLOSE OBSERVATION OF PATIENTS.

(b) AT LEAST ONE HUNDRED TWENTY-FIVE SQUARE FEET IN ONE-BED ROOM.

(c) MINIMUM DIMENSION OF TEN FEET FOR ONE-BED ROOM.

(d) EACH MULTIPLE-BED ROOM DESIGNED TO PROVIDE AT LEAST FOUR FEET WIDE SPACE BETWEEN SIDE OF EACH BED (OR CART) AND ANY WALL, OTHER BED, OR FIXED EQUIPMENT (e.g., CABINET, SINK, CLOSET), AND AT LEAST FIVE FEET WIDE SPACE BETWEEN FOOT END OF ANY BED AND ANY WALL OR FIXED EQUIPMENT.

(e) ROOM DETAILS, DOORS, HARDWARE, WINDOWS, AND SCREENS IN ANY ROOM FOR SEVERELY DISTURBED PERSON TO PROVIDE FOR PATIENT SAFETY IN AN UNOBTRUSIVE MANNER.

(f) EQUIPMENT:

LAVATORY IN EACH ROOM.

A NURSE CALL SIGNAL DEVICE AT EVERY PATIENT BED.

OXYGEN OUTLET FOR EACH BED (OR CART).

SUCTION OUTLET FOR EACH BED (OR CART).

CLOSET OR LOCKER PER EACH BED FOR PATIENT CLOTHING. May be in or adjacent to observation room or rooms.

SEPARATE STORAGE PER BED FOR EXTRA PILLOWS AND BLANKETS. May be combined with closet or locker.

(11) PATIENT TOILET OR TOILETS.

(a) CONVENIENT TO EXAMINATION AND TREATMENT ROOMS.

(b) TOILET OR TOILETS LOCATED SO PATIENTS IN EVERY OBSERVATION ROOM HAVE ACCESS TO A TOILET WITHOUT ENTERING A PUBLIC CORRIDOR.

(c) AT LEAST ONE COMMUNAL PATIENT TOILET DESIGNED AND ARRANGED TO ACCOMMODATE A PATIENT IN A WHEELCHAIR.

(d) GRAB BARS AT EACH PATIENT TOILET.

(12) MEDICINE AREA.⁷

(13) UTILITY ROOMS.⁷

(14) DESK SPACE FOR NURSES AND PHYSICIANS.

May be combined with office facilities in reception, triage, and registration area.

(15) EQUIPMENT STORAGE.

(a) STORAGE FOR MOBILE CART WITH EMERGENCY MEDICAL SUPPLIES AND EQUIPMENT (CRASH CART) IN A CLEAN AREA READILY ACCESSIBLE FROM ALL ROOMS USED FOR PATIENT CARE OR TREATMENT.

(b) Storage area for portable x-ray equipment.

REQUIRED IF PORTABLE X-RAY EQUIPMENT TO BE STORED IN EMERGENCY DEPARTMENT.

(c) STORAGE FOR OTHER MAJOR PORTABLE OR MOBILE EQUIPMENT.

(16) HOUSEKEEPING FACILITIES.⁵

Suitable combination with other housekeeping facilities permitted if convenient to emergency department.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

⁷See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711.

⁸Where combustible anesthetic is to be used, see FLOOR FINISHES, WAC 248-18-719(5); VENTILATION, WAC 248-18-719(2); and ELECTRICAL SYSTEMS, WAC 248-18-719(4).

¹⁸See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(10), STORAGE FACILITIES.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-710, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-645, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 83-19-058 (Order 269), § 248-18-645, filed 9/20/83; Order 119, § 248-18-645, filed 5/23/75; Order 106, § 248-18-645, filed 1/13/75; Regulation 18.630, filed 1/25/62.]

WAC 246-318-720 Surgery suite. ⁸ Optional. SHALL MEET REQUIREMENTS IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) SURGERY SUITE, GENERAL.

(a) A SEPARATE SEGREGATED UNIT UNLESS SURGERY AND OBSTETRICAL DELIVERY FACILITIES ARE IN A COMBINED SUITE, IN ACCORD WITH WAC 248-18-601. TO INCLUDE OPERATING ROOMS AND ANCILLARY FACILITIES ESSENTIAL TO THE

PROPER FUNCTIONING OF THE OPERATING ROOMS, ANCILLARY FACILITIES TO BE LOCATED OUTSIDE OPERATING ROOMS AND, IF A COMBINED SUITE, OUTSIDE DELIVERY ROOMS.

(b) LOCATED TO PREVENT TRAFFIC THROUGH SURGERY SUITE TO ANY OTHER AREA OF THE HOSPITAL AND TO FACILITATE TRANSFER OF PATIENTS TO SURGICAL NURSING UNITS AND, IF A COMBINED SUITE, TO OBSTETRICAL NURSING UNIT.

(c) SUITE TO INCLUDE NO FACILITIES (such as central sterilizing and processing service facilities) SERVING OTHER AREAS OF THE HOSPITAL AND THEREBY CREATING TRAFFIC UNNECESSARY TO THE SURGICAL SUITE, EXCEPT AS PROVIDED FOR IN WAC 248-18-601 FOR COMBINED SURGERY/OBSTETRICAL DELIVERY SUITE.

(d) NUMBER AND TYPES OF OPERATING ROOMS TO BE PREDICATED UPON THE TYPES OF SURGERY TO BE PERFORMED AND THE ANTICIPATED SURGERY CASELOAD.

(e) ARRANGED TO PREVENT TRAFFIC THROUGH AN OPERATING ROOM OR OBSTETRICAL DELIVERY ROOM TO OTHER AREAS OF THE SUITE, EXCEPT DIRECTLY CONNECTING SUBSTERILIZING ROOM SERVING ONLY OPERATING ROOMS OR OBSTETRICAL DELIVERY ROOMS TO WHICH IT CONNECTS.

(f) ANY ROOMS IN THE SUITE PLANNED TO SERVE FOR OUTPATIENT SURGERY LOCATED SO PENETRATION OF THE SUITE BY THE PUBLIC IS LIMITED.

(g) CONDUCTIVITY METER WITHIN SUITE REQUIRED ONLY IF OPERATING ROOMS DESIGNED FOR USE OF FLAMMABLE ANESTHETICS.⁶

(h) MEDICAL EMERGENCY SIGNALLING DEVICE - SEE WAC 248-18-719(4) and Table 719-6.

(2) MAJOR OPERATING ROOM.

(a) AT LEAST ONE MAJOR OPERATING ROOM.

(b) MINIMUM DIMENSION AT LEAST EIGHTEEN FEET.²⁴ Twenty feet or more recommended.

MINIMUM CLEAR AREA AT LEAST THREE HUNDRED SIXTY SQUARE FEET EXCLUSIVE OF FIXED AND MOVABLE CABINETS AND SHELVES.²⁴

(c) EQUIPMENT:

(i) OVERHEAD SURGERY LIGHT.

(ii) TWO X-RAY FILM ILLUMINATORS.⁶

(iii) ELECTRIC CLOCK WITH SWEEP SECOND HAND OR EQUIVALENT AND INTERVAL TIMER.

(iv) STORAGE FOR SURGICAL SUPPLIES.^{6, 18}

(v) TWO SUCTION OUTLETS.

(vi) TWO OXYGEN OUTLETS.

(vii) SEPARATE WASTE GAS EVACUATION SYSTEM

(viii) Work surface.⁶

(ix) Medical gases and medical air.²⁴

(3) Minor operating room.

(a) All operating rooms should be designed as major operating rooms to achieve maximum flexibility in use. However, in large or specialty hospitals a large volume of minor surgery may make inclusion of minor operating rooms practical.

(b) MINIMUM DIMENSION AT LEAST FIFTEEN FEET.

MINIMUM CLEAR AREA AT LEAST TWO HUNDRED SEVENTY SQUARE FEET EXCLUSIVE OF FIXED AND MOVABLE CABINETS AND SHELVES.

(c) EQUIPMENT:

(i) OVERHEAD SURGERY LIGHT OR EQUIVALENT.²⁴

(ii) TWO X-RAY ILLUMINATORS.⁶

(iii) ELECTRIC CLOCK WITH SWEEP SECOND HAND OR EQUIVALENT AND INTERVAL TIMER.²⁴

(iv) STORAGE FOR SURGICAL SUPPLIES.^{6, 18}

(v) TWO SUCTION OUTLETS.

(vi) TWO OXYGEN OUTLETS.

(vii) SEPARATE WASTE GAS EVACUATION SYSTEM.

(viii) Work surface.⁶

(ix) Medical gases and medical air.²⁴

(4) Cystoscopy facilities.

(a) Cystoscopy operating room.

(i) May be in suitable location outside surgery suite.

(ii) MINIMUM DIMENSION AT LEAST FIFTEEN FEET.

MINIMUM CLEAR AREA OF TWO HUNDRED SEVENTY SQUARE FEET EXCLUSIVE OF FIXED AND MOVABLE CABINETS AND SHELVES.²⁴

(iii) IF LOCATED OUTSIDE SURGERY SUITE, PROVIDE ONE SCRUB SINK OUTSIDE THE ENTRANCE AND FACILITIES FOR CLEANING AND STERILIZATION IN SOILED AND CLEAN UTILITY ROOMS.

(iv) EQUIPMENT:

(A) SURGERY LIGHT.²⁴

(B) TWO X-RAY FILM ILLUMINATORS.⁶

(C) Work surface.⁶

(D) STORAGE FOR SURGICAL SUPPLIES.^{6, 18}

(E) ELECTRIC CLOCK WITH SWEEP SECOND HAND OR EQUIVALENT AND INTERVAL TIMER.²⁴

(F) X-RAY UNIT⁶ - preferably mounted on urological table.

(G) TWO OXYGEN OUTLETS.

(H) TWO SUCTION OUTLETS.

(I) Flushing rim type floor drain may be permitted; PROVIDED DRAIN SYSTEM IS SPECIFICALLY DESIGNED FOR EASY ACCESS FOR CLEANING DRAIN AND TRAP.

(J) SEPARATE WASTE GAS EVACUATION SYSTEM.

(b) Darkroom or equivalent.

(c) Adjoining toilet, wheelchair accessible, if outside surgery suite.

(5) SEPARATE PATIENT HOLDING AREA.²⁴

(a) May be omitted in hospitals with only one operating room.

(b) ROOM OR ALCOVE OUT OF TRAFFIC.

(c) LOCATED FOR DIRECT VISIBILITY OF EACH PATIENT.²⁴

(d) IF SURGICAL PREPS AND INDUCTIONS DONE, PROVIDE LAVATORY OR SINK, WORK COUNTERS, AND CUBICLE CURTAINS OR EQUIVALENT.

(e) OXYGEN AND SUCTION OUTLETS.

(f) MEDICAL EMERGENCY SIGNALLING DEVICE - SEE WAC 248-18-719(4) and Table 719-6.

(6) SCRUB-UP AREA.

(a) ADJACENT TO EACH OPERATING ROOM.

(b) DIRECT ACCESS TO EACH OPERATING ROOM.

(c) EQUIPMENT:

(i) AT LEAST THREE SCRUB SINKS FOR EACH TWO OPERATING ROOMS, BUT IN NO CASE LESS THAN TWO SCRUB SINKS.

(ii) DETERGENT DISPENSER OR EQUIVALENT.⁶ FOOT CONTROL OR EQUIVALENT IF LIQUID DISPENSER.

(iii) BRUSH DISPENSER OR EQUIVALENT.²⁴

(iv) SHELF.

(v) TOWEL DISPENSER OR EQUIVALENT.²⁴

(vi) CLOCK WITHIN VIEW FROM SCRUB SINKS.

(7) CLEAN-UP FACILITIES WITH A SINK WITH ACCESSIBLE PLASTER TRAP. Sink with plaster trap may be in other appropriate soiled area.¹⁰

(8) CLEAN WORKROOM.

(a) May be omitted if written program defines a supply and equipment system eliminating need for preparation and assembly within the suite.

(b) EQUIPMENT:

(i) Lavatory.

(ii) WORK COUNTERS OR TABLES OR EQUIVALENT.⁶

(iii) STORAGE FOR SUPPLIES AND SMALL EQUIPMENT.^{6, 18}

(9) STERILIZING FACILITIES.

(a) HIGH SPEED STERILIZERS WITH RECORDING THERMOMETERS AND AUTOMATIC CONTROLS OF SUFFICIENT CAPACITY TO ACCOMMODATE SUPPLIES AND EQUIPMENT TO BE STERILIZED IN SUITE.

(b) MINIMUM OF ONE STERILIZER¹¹ IN EACH SURGERY SUITE.

(c) IF PRACTICE OF STERILIZING UNWRAPPED SETS OF INSTRUMENTS IS TO BE FOLLOWED, A SUFFICIENT NUMBER OF STERILIZERS¹², ACCESSIBLE FOR MAINTENANCE, SHALL BE LOCATED TO PROVIDE DIRECT ACCESS TO EACH OPERATING ROOM AND OBSTETRICAL DELIVERY ROOM FROM A STERILIZING FACILITY.

(10) SOLUTION WARMER.^{6, 24}

(11) STORAGE FACILITIES.¹⁸

(a) CLEAN SUPPLY ROOM;

(b) INSTRUMENTS. May be located in clean supply room;

(c) DRUGS - SEE WAC 248-18-711(7). May be located in anesthesia work room or in clean supply room;

(d) LINEN.⁶ May be located in clean supply room;

(e) BLOOD REFRIGERATION unless satisfactory provision elsewhere;

(f) SOLUTIONS;

(g) STERILE SUPPLIES;

(h) LARGE AND SMALL EQUIPMENT;

(i) STRETCHERS. Space for one stretcher per operating room or delivery room;

(j) PORTABLE X-RAY unless suitable provision for storage elsewhere.

(12) ANESTHESIA STORAGE - MACHINES AND CARTS¹³ unless satisfactory provision elsewhere.

(13) Anesthesia workroom.

(a) IF CLEANING OF ANESTHESIA EQUIPMENT TO BE DONE, DESIGNED FOR SEPARATION OF SOILED AND CLEAN FUNCTIONS. Soiled room may be omitted if cleaning function to occur in clean-up or decontamination room in central processing.

(b) CLEAN ROOM.

(i) WORK COUNTERS.⁶

(ii) STORAGE FOR ANESTHESIA SUPPLIES AND SMALL EQUIPMENT.⁶

(iii) SPACE FOR TESTING AND STORAGE OF ANESTHESIA MACHINES AND EQUIPMENT WITH ADEQUATE ELECTRICAL OUTLETS.²⁴

(iv) LAVATORY OR SINK FOR HANDWASHING.

(c) SOILED ROOM. May be omitted if cleaning to be done in clean-up or decontamination room or soiled processing areas elsewhere in the hospital.

(i) WORK COUNTERS.

(ii) DOUBLE COMPARTMENT SINK.

(iii) STORAGE FOR CLEANING SUPPLIES AND EQUIPMENT.

(iv) Space for anesthesia carts.²⁴

(14) ADMINISTRATIVE FACILITIES.

(a) CONTROL STATION.²⁴

(i) LOCATED TO PERMIT COORDINATION OF FUNCTIONS AMONG OPERATING ROOMS and to permit visual surveillance of traffic entering suite.

(ii) TELEPHONE.

(iii) ANNUNCIATOR FOR EMERGENCY SIGNALING DEVICE UNLESS LOCATED IN ALTERNATE LOCATION FROM WHICH ADDITIONAL ASSISTANCE IS ALWAYS AVAILABLE.⁵⁶

(b) SUPERVISOR'S OFFICE PROVIDING PRIVACY. May be combined with control station.²⁴

(c) Surgery schedule board or equivalent.

(d) Dictating facilities.

(e) CONFERENCE ROOM FOR CONFIDENTIAL COMMUNICATION.²⁴ May be combined with other facilities, as appropriate.

(15) STAFF FACILITIES.

(a) LOCATED AND ARRANGED FOR ACCESS FROM OUTSIDE SUITE TO CLOTHING CHANGE AREA PRIOR TO ENTERING SUITE.

(b) LOCKER ROOM OR ROOMS, TOILET OR TOILETS, SHOWER OR SHOWERS, AND LOUNGE OR LOUNGES.

(i) Lockers, secured spaces, or equivalent predicated upon daily average volume or flow of personnel, medical staff, and others to and from surgical suite.²⁴

(ii) STORAGE SPACE FOR SCRUB CLOTHING.^{6, 18}

(iii) SPACE FOR COLLECTION RECEPTACLES FOR SOILED SCRUB CLOTHING.

(16) HOUSEKEEPING FACILITIES.⁵

(17) RECOVERY OR POST ANESTHESIA CARE UNIT.²⁴

(18) Viewing gallery.

ACCESS TO GALLERY NOT THROUGH AN OPERATING ROOM OR OBSTETRICAL DELIVERY ROOM and outside of suite.

GLASS SEPARATION BETWEEN GALLERY AND OPERATING ROOM OR OBSTETRICAL DELIVERY ROOM.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

⁸Where combustible anesthetic is to be used, see FLOOR FINISHES, WAC 248-18-719(5); VENTILATION, WAC 248-18-719(2); and ELECTRICAL SYSTEMS, WAC 248-18-719(4).

¹⁰See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(2), CLEAN-UP FACILITIES.

¹¹May be instrument sterilizer (high speed recommended) if only instruments are to be sterilized within the suite.

¹²May be instrument pressure sterilizer (high speed recommended) or instrument washer-sterilizer.

¹³See RECEIVING, STORES, AND DISTRIBUTION, WAC 248-18-700(10), FLAMMABLE ANESTHETIC STORAGE.

¹⁴See Recovery Unit, WAC 248-18-560.

¹⁸See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(10), STORAGE FACILITIES.

²⁴In accordance with program.

⁵⁶See GENERAL DESIGN REQUIREMENTS, WAC 248-18-719(4) and Table 719-6.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-720, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-565, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-565, filed 11/13/85. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-565, filed 9/20/83; Order 119, § 248-18-565, filed 5/23/75; Order 107, § 248-18-565, filed 1/13/75; Regulation 18.590, § 1, filed 1/25/62.]

WAC 246-318-730 Recovery unit. Optional. SHALL MEET REQUIREMENTS, IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) LOCATION.

(a) LOCATED TO AVOID THROUGH TRAFFIC.

(b) Located in or near clinical department assuming responsibility.

(2) PATIENT CARE AREA.

(a) ROOM OR ROOMS WITH AT LEAST EIGHTY SQUARE FEET PER BED, STRETCHER, OR CART.

(b) CUBICLE CURTAIN TRACKS OR EQUIVALENT.

(c) EQUIPMENT FOR EACH PATIENT STATION:

(i) OXYGEN OUTLET. Two recommended.

(ii) TWO SUCTION OUTLETS.

(iii) MEDICAL EMERGENCY SIGNALING DEVICE.⁵⁶

(iv) SIX SINGLE OR THREE DUPLEX ELECTRICAL RECEPTACLES.

(v) OVERHEAD LIGHTING.

(vi) Medical air.

(d) LAVATORY LOCATED CONVENIENT TO EVERY SIX PATIENT STATIONS:

(e) STORAGE, SHELVES, DRAWERS, OR EQUIVALENT AND CHARTING SURFACE AT EACH PATIENT STATION.⁶

(f) Isolation room.

(i) LAVATORY OR SINK.

(ii) ONE OXYGEN OUTLET.

(iii) TWO SUCTION OUTLETS.

(iv) MEDICAL EMERGENCY SIGNALLING DEVICE.⁵⁶

(v) ONE HUNDRED TWENTY SQUARE FEET. One hundred fifty square feet recommended.

(vi) CLOCK.

(vii) Access from both outside and inside recovery unit.

(viii) Relites from isolation room into recovery unit.

(ix) Capability to change or switch from negative to positive pressure gradient.

(x) Curtain tracks or equivalent.

(xi) Medical air.

(xii) LIGHTING OVER PATIENT STATION.

(xiii) SIX SINGLE OR THREE DUPLEX ELECTRICAL RECEPTACLES.

(xiv) CLINIC SERVICE SINK OR WATER CLOSET WITH BEDPAN RINSING/FLUSHING ATTACHMENT ADJOINING ROOM.

(3) SERVICE FACILITIES.

(a) ADEQUATE SPACE, IN ADDITION TO REQUIRED PATIENT CARE AREA, IF LOCATED IN SAME ROOM AS PATIENT CARE AREA.

(b) CLEAN UTILITY OR MATERIALS. May be located in patient care room or adjoining room or rooms.

(i) WORK SURFACE.

(ii) SINK.

(iii) LOCKED DRUG STORAGE INCLUDING SEPARATELY LOCKED STORAGE FOR CONTROLLED SUBSTANCES - See WAC 248-18-711(7).

(iv) STORAGE UNIT.^{6, 18}

(v) REFRIGERATOR. Ice dispenser.⁶

(vi) LINEN STORAGE.^{6, 18}

(vii) EQUIPMENT STORAGE.^{6, 18}

(viii) Warmer for blankets and solutions.

(c) SOILED UTILITY OR SOILED MATERIALS ROOM⁷, LOCATED WITH DIRECT ENTRY FROM RECOVERY UNIT. May be shared with clean-up facilities of the surgical suite or combined surgical/obstetrical suite provided there is a direct entry from each.

(d) CHARTING SURFACE.⁶ May be shelf, desk, or equivalent.

STAFF TOILET. May be in or convenient to unit.

(f) HOUSEKEEPING FACILITIES.⁵

Suitable combination with other housekeeping facilities permitted if convenient to recovery unit.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

⁷See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711 (8) or (9), SOILED UTILITY OR MATERIALS ROOM.

¹⁸See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(10), STORAGE FACILITIES.

⁵⁶See GENERAL DESIGN REQUIREMENTS, WAC 248-18-719, Table 719-6.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-730, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-560, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-560, filed 11/13/85. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-560, filed 9/20/83; Order 119, § 248-18-560, filed 5/23/75; Regulation 18.580, filed 1/25/62.]

WAC 246-318-740 Critical care facilities. Hospitals planning new construction of critical care facilities shall:

(1) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719.

(2) Meet general requirements for certain service facilities under WAC 248-18-711 (3) or (4), (6), (7), (8) or (9), (10) and (11) including nourishment facilities and ice machine in a clean room with combined use or sharing permitted if:

(a) The critical care facility has fewer than five beds; and

(b) The service facilities:

(i) Are in close proximity to the beds; and

(ii) Provide sufficient space for critical care functions.

(3) Provide a critical care facility with:

(a) Location to avoid traffic and penetration of objectionable heat or noise or odors from other areas of the hospital;

(b) A water closet, clinic sink, hopper, or equivalent with bedpan-flushing device for disposing of patient wastes, in a room directly accessible to each critical care patient room;

(c) A staff toilet; and

(d) Charting areas.

(4) Provide patient rooms with:

(a) Location of patient rooms and placement of beds in rooms to provide for direct visibility of patients from nurses' station or equivalent unless there is provision for indirect viewing of patients by mirror system or television;

(b) Maximum capacity of two beds per room and a ratio of at least one single room for every three planned critical care beds;

(c) Minimum usable floor space per bed of one hundred fifty square feet, exclusive of areas taken up by passage door swings, closets, wardrobes, portable lockers, and toilet rooms;

(d) Spacing of at least:

(i) Four feet or more between side of bed and wall;

(ii) Six feet or more between foot of bed and wall; and

(iii) Eight feet or more between beds in multibed rooms;

(e) Equipment as follows:

(i) Curtains or equivalent means of providing visual privacy;

(ii) Clocks with sweep second hands and lapse timer functions or equivalent;

(iii) One lavatory per room; and

(iv) An electrocardiographic monitor with oscilloscope at least five inches wide with an audio alarm system for each bed;

(f) Uncarpeted floors.

(5) Provide nurses' station or equivalent with:

(a) Location to provide direct visibility of each patient unless a mirror system or television is provided;

(b) Space for patient monitoring equipment including:

(i) Slave oscilloscope with audio alarm for continuous display of each patient's electrocardiogram;

(ii) Rate meter; and

(iii) Recorder;

- (c) Wall-mounted clock with sweep second hand or equivalent;
- (d) Charting surface or equivalent; and
- (e) Combined use or sharing permitted if:
 - (i) The critical care facility has fewer than five beds; and
 - (ii) The nurses' station or equivalent:
 - (A) Is located in close proximity to the beds; and
 - (B) Provides sufficient space for critical care functions.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-740, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-740, filed 11/30/90, effective 12/31/90.]

WAC 246-318-750 Facilities for care of patients in labor. Hospitals planning new construction of labor rooms which are not birthing rooms shall:

- (1) Locate labor rooms to prevent unnecessary traffic through the labor room service area;
 - (2) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage in accordance with WAC 248-18-719.
 - (3) Meet general requirements for certain service facilities under WAC 248-18-711 as follows:
 - (a) Locate for convenient use of staff;
 - (b) May be shared with other service areas;
 - (c) Provide medicine distribution facilities;
 - (d) Provide clean materials room or clean utility room;
 - (e) Provide soiled materials room or soiled utility room;
- and
- (f) Provide housekeeping facilities.

(4) Provide a labor room meeting requirements under WAC 248-18-530(6) with:

- (a) Identification and location accommodating requirements under WAC 248-18-221(3); and
 - (b) A maximum capacity of two beds.
- (5) Provide toilet and bathing facilities meeting requirements under WAC 248-18-530 (7) and (8) with:
- (a) Water closets in ratio of at least one to every four labor beds or fraction thereof; and
 - (b) Showers in the ratio of at least one to every eight obstetrical service beds or fraction thereof.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-750, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-606, filed 11/1/89, effective 12/2/89.]

WAC 246-318-760 Obstetrical delivery facilities. Hospitals planning new construction of obstetrical delivery facilities shall:

- (1) Locate delivery rooms to prevent traffic through delivery room service areas;
- (2) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage meeting requirements under WAC 248-18-719.
- (3) Meet general requirements for certain service facilities under WAC 248-18-711 and provide the following:
 - (a) Clean materials or clean utility room;

- (b) Housekeeping facilities;
 - (c) Medicine distribution facility;
 - (d) Soiled utility room; and
 - (e) Storage room.
- (4) Design delivery room or surgery room for obstetrical services to accommodate the requirements under WAC 248-18-221 and provide:
- (a) Clock with sweep second hand and interval timer or equivalent;
 - (b) Film illuminators for at least two x-ray films or equivalent;
 - (c) Minimum gross area of three hundred and sixty square feet;
 - (d) Minimum dimension of eighteen feet; and
 - (e) Delivery room light.
- (5) Provide scrub area located to provide direct access to the delivery room with:
- (a) One scrub sink or equivalent for every delivery or surgery room;
 - (b) Dispenser at each scrub sink with foot control, or equivalent, if liquid hand cleaner is used;
 - (c) Storage for scrub equipment, masks, caps, nail cleaners, and shoe covers;
 - (d) Clock or timer within view from scrub sinks; and
 - (e) A towel dispenser or equivalent.
- (6) Provide sterilizing facilities within the delivery service area and meeting requirements under WAC 248-18-680(4), or provide central processing meeting requirements under WAC 248-18-680(1).
- (7) Provide anesthesia storage or anesthesia workroom meeting requirements under WAC 248-18-565 (12) or (13).
- (8) Provide staff facilities meeting requirements under WAC 248-18-565(15).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-760, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-601, filed 11/1/89, effective 12/2/89.]

WAC 246-318-770 Birthing rooms. Hospitals planning new construction of birthing rooms shall:

- (1) Locate birthing rooms to prevent unnecessary traffic through the obstetrical service area;
- (2) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719;
- (3) Meet general requirements for certain service facilities under WAC 248-18-711 as follows:
 - (a) Locate for convenient use by staff;
 - (b) May be shared with other service areas;
 - (c) Provide medicine distribution facilities;
 - (d) Provide clean utility room;
 - (e) Provide soiled utility room;
 - (f) Provide housekeeping facilities; and
 - (g) Provide storage room.
- (4) Provide a nourishment facility which:
 - (a) Meets requirements under WAC 248-18-530(9); and
 - (b) May be shared with other service areas.
- (5) Design each birthing room to accommodate the requirements under WAC 248-18-221(4) and provide:

(a) Area and dimensions meeting the requirements under WAC 248-18-530 (6)(d) and with a minimum usable floor space excluding lavatory, wardrobe, or closet, fixed or movable cabinets, storage facilities, and entry vestibules as follows:

- (i) One hundred and sixty square feet total; and
- (ii) Four feet at one side and at foot of bed.

(b) A lavatory in the room meeting requirements under WAC 248-18-719; and

(c) Privacy curtains or equivalent.

(6) Provide toilet and bathing facilities meeting requirements under WAC 248-18-530 (7) and (8) and with:

(a) Patient toilets adjoining birthing room and in a ratio of one toilet for each patient bed;

(b) Support persons' toilets, separate from patient toilet, and conveniently located; and

(c) Showers in a ratio of one shower to every eight patient beds in obstetrical service area.

(7) Provide nurses' station or equivalent meeting requirements under WAC 248-18-530 (9)(a).

(8) Provide staff facilities meeting requirements under WAC 248-18-070.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-770, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-608, filed 11/1/89, effective 12/2/89.]

WAC 246-318-780 Obstetrical recovery unit.¹⁴

Optional. SHALL MEET REQUIREMENTS, IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

Within or close to delivery suite or combined surgery/delivery suite. IF WITHIN DELIVERY SUITE OR COMBINED SURGERY/DELIVERY SUITE, LOCATED NEAR ENTRANCE AND AWAY FROM IMMEDIATE AREA OF DELIVERY ROOMS AND OPERATING ROOMS.

Note:

¹⁴See Recovery Unit, WAC 248-18-560.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-780, filed 12/27/90, effective 1/31/91; Order 119, § 248-18-610, filed 5/23/75; Order 107, § 248-18-610, filed 1/13/75; Regulation 18.600, § 13, filed 1/25/62.]

WAC 246-318-790 Newborn nursery facilities.

Hospitals planning new construction of newborn nursery facilities shall:

(1) Locate the nursery facilities to prevent unnecessary traffic through the service area;

(2) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719;

(3) Provide service facilities:

(a) Convenient to nursery room;

(b) Shared with other nursery areas at hospital's discretion;

(c) Designed to separate clean and soiled areas and meeting the requirements under WAC 248-18-711 with:

(i) A clean utility room with accommodation for a refrigerator for infant feedings;

(ii) A soiled utility room;

(iii) Housekeeping room; and

(iv) Storage.

(4) Meet the requirements under WAC 248-18-221 (6) and (7);

(5) Provide nursery rooms with:

(a) No public access to the nursery except through handwashing and gowning area;

(b) Enough bassinets for newborn infants at least equal to anticipated need;

(c) An area of twenty-four square feet per bassinet;

(d) At least three feet between bassinets;

(e) A lavatory meeting the requirements of WAC 248-18-719 (3)(g) and (6)(b)(iv) and (v) and located at every entrance to each nursery room, and a ratio of one lavatory for every twelve bassinets or major fraction;

(f) Liquid detergent dispenser with foot control;

(g) A clock with sweep second hand or equivalent visible from all nursery rooms and service areas;

(h) Lighting level measured at height of infant station or treatment table:

(i) Minimum seventy foot candles; and

(ii) Maximum one hundred foot candles.

(i) Provision for viewing infants in the nursery rooms by visitors outside the nursery rooms;

(j) A charting area which may be shared with other nurseries, with provisions for:

(i) A writing desk or counter;

(ii) Chart rack; and

(iii) Use of telephone.

(6) Provide a handwashing and gowning area at the public entrance to the nursery room with:

(a) A lavatory with gooseneck spout and knee or foot faucet control or equivalent;

(b) Liquid detergent dispenser with foot control;

(c) Storage for linen and equipment; and

(d) Provision for hanging outer garments.

(7) Staff facilities meeting the requirements under WAC 248-18-070 which may be shared with other service areas.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-790, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-616, filed 11/1/89, effective 12/2/89.]

WAC 246-318-799 Infant formula facilities.

Required only if hospital is to provide obstetrical or pediatric services. SHALL MEET REQUIREMENTS IF INCLUDED. (REQUIREMENTS ARE SHOWN IN CAPITAL LETTERS. SEE WAC 248-18-515.) FACILITIES LISTED UNDER EITHER SUBSECTION (1) OR (2) OF THIS SECTION ARE REQUIRED.

(1) FACILITIES FOR PREPARATION OF FORMULA IN HOSPITAL.

(a) Not required if services of a commercial formula service to be used exclusively.

(b) Located on obstetrical unit, pediatric unit, or in dietary department.

(c) LOCATED TO AVOID CONTAMINATION OF FORMULA.

(d) LOCATED TO PREVENT THROUGH TRAFFIC.

(e) DESIGNED TO PROVIDE SEPARATE CLEAN AND SOILED AREAS.

(i) SOILED AREA TO SERVE FOR RECEIVING AND WASHING OF GLASSWARE, NIPPLES, AND UTENSILS.

(ii) CLEAN AREA TO SERVE FOR PREPARATION, TERMINAL HEATING, AND STORAGE OF FORMULAS AND SPECIAL FLUIDS.

(f) BOTTLE AND UTENSIL WASHING AREA (SOILED AREA).

EQUIPMENT:

WORK COUNTER.

TWO-COMPARTMENT SINK (MOUNTED IN COUNTER OR INTEGRAL WITH COUNTER). Single compartment sink may serve if mechanical bottle washing machine is provided.

Mechanical nipple washer.

STORAGE FOR CLEANING AGENTS.

(g) FORMULA PREPARATION AREA (CLEAN AREA).

EQUIPMENT:

WORK COUNTER.

SINK (MOUNTED IN COUNTER OR INTEGRAL WITH COUNTER) - If formula is to be prepared for less than six infants per day, sink in washing area may serve if in same room and equipped with foot, knee, or elbow faucet control and gooseneck spout.

STORAGE FOR FORMULA INGREDIENTS, CLEAN BOTTLES, ETC. No cabinet should be immediately above formula preparation area.

HOT PLATE.⁶

EQUIPMENT FOR TERMINAL STERILIZATION.⁶

Sterilizing equipment in a suitable location elsewhere in hospital may be used.

REFRIGERATION.⁶ Not required if refrigerator for formula is provided in other suitable location.

(h) HOUSEKEEPING FACILITIES.⁵ Suitable combination with other housekeeping facilities permitted if convenient to infant formula facilities.

(2) FACILITIES REQUIRED WHEN COMMERCIAL FORMULA SERVICE USED.

(a) RECEIVING AND STORAGE AREA (CLEAN AREA). May be combined with dietary facilities or other suitable clean facilities.

EQUIPMENT:

COUNTER.

REFRIGERATOR.

(b) PICK-UP AREA (SOILED AREA). May be combined with other suitable facilities.

EQUIPMENT:

STORAGE FOR USED BOTTLES AND NIPPLES.

Counter.

Sink.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-799, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-640, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-640, filed 9/20/83; Order 119, § 248-18-640, filed 5/23/75; Regulation 18.620, filed 1/25/62.]

WAC 246-318-800 Intermediate care nursery and neonatal intensive care nursery. Hospitals planning new construction of intermediate care nurseries and neonatal intensive care nurseries shall:

(1) Locate the nursery facilities to prevent unnecessary traffic through the service area;

(2) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719;

(3) Provide service facilities:

(a) Convenient to nursery room;

(b) Shared with other nursery areas at hospital's discretion; and

(c) Designed to separate clean and soiled areas and meeting the requirements of WAC 248-18-711 with:

(i) A clean utility room with accommodation for a refrigerator for infant feedings;

(ii) A soiled utility room;

(iii) Housekeeping room;

(iv) Storage; and

(v) Medicine distribution facilities.

(4) Meet the requirements under WAC 248-18-221 (6) and (7);

(5) Meet the requirements under WAC 248-18-224(2) for intermediate care nurseries;

(6) Meet the requirements under WAC 248-18-224(3) for neonatal intensive care nurseries;

(7) Meet all requirements under WAC 248-18-616 with additions as follows:

(a) Provide nursery rooms with film illuminators or equivalent to view a minimum of two x-ray films which may be shared between intermediate and neonatal intensive care nurseries; and

(b) Provide infant stations with:

(i) Minimal usable floor area exclusive of aisles with:

(A) Fifty square feet in intermediate care nursery; and

(B) Eighty square feet in neonatal intensive care nursery.

(ii) Space to accommodate monitors;

(iii) Work counter with provisions for a writing area; and

(iv) Closed storage for individual supplies and equipment.

(8) Provide scrub area including:

(a) A scrub sink for every eight infant stations or a major fraction thereof, with no less than two sinks;

(b) Germicidal dispenser, hand brush, sponge dispenser or equivalent, located at each scrub sink; and

(c) Clean storage for clean gowns, masks, nail cleaners, and shoe covers.

(9) Design any planned isolation room to meet the requirements under subsection (6)(b)(i), (ii), (iii), and (iv) of this section;

(10) Provide parent privacy room with education facilities providing cubicle curtains or equivalent for complete visual privacy;

(11) Provide conference or counseling room convenient to intermediate care and neonatal intensive care nursery rooms;

(12) Provide nurses' station or equivalent meeting the requirements under WAC 248-18-530 (9)(a); and

(13) Staff facilities meeting the requirements under WAC 248-18-070 which may be shared with other service areas.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-800, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 89-22-106 (Order 010), § 248-18-637, filed 11/1/89, effective 12/2/89.]

WAC 246-318-810 Alcoholism and substance abuse nursing unit. Optional. SHALL MEET REQUIREMENTS IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS—See WAC 248-18-515)

(1) WHEN SEPARATE ALCOHOLISM AND/OR SUBSTANCE ABUSE UNIT IS PLANNED, WAC 248-18-532 SHALL APPLY. When ten or more alcoholism treatment beds in the hospital are planned, a separate alcoholism unit is recommended.

(2) DETOXIFICATION AREA.

(a) PATIENT ROOMS, TOILET ROOMS, AND BATHING FACILITIES SHALL MEET REQUIREMENTS UNDER WAC 248-18-530 (6), (7), and (8).

(b) May be located on an acute care nursing unit.

(c) Security or seclusion rooms. Refer to WAC 248-18-534 (6) and (7).

(3) ALCOHOLISM AND SUBSTANCE ABUSE AREA OTHER THAN DETOXIFICATION.

(a) DESIGNED FOR CARE OF AMBULATORY AND HANDICAPPED PATIENTS.

(b) PROVISION FOR FLEXIBILITY IN ARRANGEMENT FOR VARIOUS TYPES OF THERAPIES.

(c) PATIENT ROOMS SHALL MEET REQUIREMENTS UNDER WAC 248-18-530(6) WITH EXCEPTIONS:

(i) SEVENTY SQUARE FEET USABLE FLOOR SPACE PER BED IN MULTI-BED ROOMS PERMITTED IN EXISTING PATIENT ROOMS.

(ii) EIGHTY SQUARE FEET USABLE FLOOR SPACE IN ONE-BED ROOMS PERMITTED IN EXISTING PATIENT ROOMS.

(iii) IN MULTI-BED ROOMS: BEDS SPACED AT LEAST THREE FEET APART WITH THREE-FOOT AISLE MINIMUM WIDTH TO ALLOW TRAFFIC FLOW WITHIN THE ROOM.

(iv) Lavatory in each room optional.

(d) PATIENT TOILET ROOMS SHALL MEET REQUIREMENTS UNDER WAC 248-18-530(7). AT LEAST ONE TOILET OPENING DIRECTLY FROM THE MAIN CORRIDOR OF THE NURSING UNIT IS DESIGNED TO ACCOMMODATE PATIENTS IN WHEELCHAIRS. May be used by either sex.

(i) EXCEPTIONS FOR ALTERATIONS OF EXISTING FACILITIES, REFER TO WAC 248-18-530 (7)(b).

(ii) SEPARATE TOILETS FOR EACH SEX UNLESS A TOILET ADJOINS EACH PATIENT ROOM.

(iii) Bedpan flushing devices, optional.

(e) BATHING FACILITIES SHALL MEET REQUIREMENTS UNDER WAC 248-18-530(8).

(f) SERVICE AND SUPPORT FACILITIES.

(i) NURSES STATION OR EQUIVALENT SPACE FOR CLERICAL FUNCTIONS, TELEPHONE, NURSE CALL ANNUNCIATOR, AND MEDICAL RECORDS.

(ii) STANDARDS FOR NURSING UNIT IN WAC 248-18-530 (9)(b), (c), (d), (e), (f), (g), (h), (i), (j), (k), and (r) APPLY.

(g) SOCIAL FACILITIES.

(i) AT LEAST TWO SEPARATE ROOMS.²⁴

(ii) COMBINED ROOMS AND SOCIAL AREAS NOT LESS THAN FOUR HUNDRED SQUARE FEET FOR UNIT OF TEN BEDS OR LESS. FOR EVERY ADDITIONAL BED, ADD TWENTY SQUARE FEET PER BED.

(h) EXAMINATION AND TREATMENT ROOM SHALL MEET REQUIREMENTS IN WAC 248-18-530 (9)(l). LOCATED ON UNIT OR ELSEWHERE WITHIN HOSPITAL.

(i) Patient laundry facilities.²⁴ See WAC 248-18-534(13).

(j) OFFICES FOR ALCOHOLISM TREATMENT STAFF, INTERVIEWING ROOMS, COUNSELING ROOMS.²⁴

Note:

²⁴In accordance with program.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-810, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030 and 43.20.050. 84-22-003 (Order 277), § 248-18-532, filed 10/26/84.]

WAC 246-318-820 Psychiatric unit construction.

Hospitals planning new construction of a psychiatric unit shall:

(1) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719, with:

(a) All windows and relites located in rooms or areas accessible to patients:

(i) Meeting requirements under WAC 248-18-719 (1)(i); and

(ii) Installation of security or maximum security windows or equivalent;

(b) Tamper-resistant accessories and equipment in patient rooms, toilet rooms, and bathrooms;

(c) Tamper-resistant electrical receptacles in all patient rooms and areas;

(d) Design to prevent opportunity for suicide.

(2) Meet general requirements for certain service facilities under WAC 248-18-711 (3) or (4), (6), (7), (8) or (9), and (10) with locks on all doors for housekeeping, medications, storage, and utility rooms.

(3) Provide psychiatric facilities including:

(a) Location avoiding traffic and penetration of objectionable heat, noise, or odors from other areas of the hospital;

(b) Examination room unless available in an adjacent area or unit with:

(i) Minimum floor space of one hundred square feet;

(ii) Minimum dimension of eight feet; and

(iii) The following equipment:

(A) Medical emergency signal devices;

- (B) Lavatory or sink;
 - (C) Clock with sweep second hand or equivalent;
 - (D) Oxygen outlet;
 - (E) Suction outlet;
 - (F) Work surface; and
 - (G) Storage cabinet.
- (c) Toilet rooms with water closets in ratio of at least one water closet to every four beds.
- (d) At least one wheelchair accessible toilet available on the unit.
- (e) A staff toilet available on the unit.
 - (f) Patient bathing facilities with:
 - (i) Showers or tubs in the ratio of at least one bathing facility per eight beds; and
 - (ii) At least one wheelchair accessible shower on the psychiatric unit.
 - (g) Nourishment station in an area serving clean functions only with:
 - (i) Space for waste containers;
 - (ii) The following equipment:
 - (A) Refrigerator;
 - (B) Ice machine;
 - (C) Work counter;
 - (D) Sink; and
 - (E) Storage for utensils and foodstuffs.
 - (h) Administrative facilities with:
 - (i) Storage for personal effects of staff apart from storage for patient care supplies and equipment;
 - (ii) Office or private area for staff and supervisory activities;
 - (iii) Conference room for confidential staff/patient/family communications on or adjacent to the unit.
 - (i) A waiting area adjacent to the unit;
 - (j) A wheelchair accessible:
 - (i) Water fountain; and
 - (ii) Public telephone.
 - (k) Patient laundry facility with:
 - (i) Sink or lavatory;
 - (ii) Clothes washer;
 - (iii) Clothes dryer;
 - (iv) Lockable storage facilities; and
 - (v) Counter.
- (4) Provide patient rooms including:
- (a) Maximum capacity of two beds per patient room;
 - (b) Minimum usable floor space per bed, exclusive of areas taken up by passage door swings, closets, wardrobes, portable lockers and toilet rooms, of:
 - (i) Eighty square feet in multi-bed rooms; and
 - (ii) One hundred square feet in one-bed rooms.
 - (c) Minimum dimension of eleven feet for multi-bed rooms.
 - (d) The following equipment:
 - (i) Provision for patient privacy in all multi-bed rooms; and
 - (ii) A wardrobe, closet, or locker per bed, designed to prevent suicide, for garments and storage of personal effects.
- (5) Provide a nurses' station or equivalent with:
- (a) Charting surface;
 - (b) Storage for:
 - (i) Patients' charts; and
 - (ii) Charting supplies;
 - (c) Telephone; and

- (d) Clock.
- (6) Provide a seclusion room, unless provided on an adjacent nursing unit, with:
 - (a) Design to minimize potential for stimulation, escape, hiding, injury, or suicide;
 - (b) Maximum capacity of one patient;
 - (c) Doors to open outward;
 - (d) Minimum space of eighty square feet;
 - (e) Minimum dimension of eight feet;
 - (f) Staff-controlled, lockable, adjoining toilet room; and
 - (g) A provision for staff visualization of occupant at all times.
- (7) Provide suitably equipped areas which may be for multipurpose use combining activities below and including areas for:
 - (a) Dining;
 - (b) Occupational and recreational therapies;
 - (c) Day room;
 - (d) Physical activity and patient recreation on the unit or elsewhere on the hospital premises; and
 - (e) Space and privacy for interviewing, group, family, and individual counseling.
- (8) If electroconvulsive therapy (ECT) rooms are planned, provide:
 - (a) Minimum area of one hundred fifty square feet;
 - (b) Minimum dimension of twelve feet; and
 - (c) The following equipment:
 - (i) Emergency call;
 - (ii) Lavatory or sink;
 - (iii) Treatment light;
 - (iv) Storage for supplies and equipment;
 - (v) Robe hook and shelf;
 - (vi) Space and electrical receptacles for ECT machine;
 - (vii) Oxygen and suction outlet;
 - (viii) Stretcher or treatment table or equivalent;
 - (ix) Space for emergency medical supplies and equipment;
 - (x) Space for anesthesia machine or cart and equipment;
 - (xi) Space for (EKG) electrocardiograph monitor; and
 - (xii) Clock with sweep second hand or equivalent.
- (9) If ECT is performed, provide a recovery facility, which may be the patient room, with:
 - (a) Location near ECT treatment room;
 - (b) Oxygen and suction for each bed, stretcher, or cart;
 - (c) Easy access to a clean and soiled utility room; and
 - (d) Provisions for equipment, space, and functions required under WAC 248-18-256.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-820, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-23-012 (Order 113), § 248-18-536, filed 11/13/90, effective 12/14/90.]

WAC 246-318-830 Rehabilitation facilities. Optional. SHALL MEET REQUIREMENTS, IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS. SEE WAC 248-18-515.)

- (1) REHABILITATION FACILITIES, GENERAL.
 - (a) Located for easy access by inpatients and outpatients and to facilitate transport of equipment for bedside treatment when necessary.
 - (b) LOCATED TO AVOID OUTPATIENT TRAFFIC THROUGH INPATIENT AREAS.

(c) TYPE AND EXTENT OF FACILITIES ADEQUATE FOR THE TYPE AND VOLUME OF ANTICIPATED SERVICES.

(2) WAITING AREA.

(a) Suitable combinations with other waiting areas permitted.

(b) Accommodations for inpatients and outpatients.

(c) ADEQUATE SPACE FOR STRETCHERS AND WHEELCHAIRS.

(d) Reception counter or desk.

(3) PHYSICAL THERAPY FACILITIES. May be omitted if program indicates not needed.

(a) ADMINISTRATIVE FACILITIES.

OFFICE SPACE suitable for interviewing patients, and administrative and clerical functions.

(b) Examining room.

(i) Floor to ceiling partitions for privacy. Arranged to permit permanent placement of examining equipment.

(c) TREATMENT AREA.

(i) GENERAL TREATMENT AREA.

(A) CUBICLES LARGE ENOUGH FOR THERAPIST TO WORK ON BOTH SIDES OF TABLE.

(B) Divided by curtains rather than solid partitions.

(C) ARRANGED TO PERMIT EASY ACCESS FOR WHEELCHAIR OR STRETCHER PATIENTS.

(ii) Underwater exercise area.

(A) Concentration of equipment requiring special water supply and plumbing in one section of department.

(B) ACCESSIBLE AND ADJACENT TO OTHER TREATMENT AREAS.

(C) Overhead lifts for tank or exercise pool.

(iii) General exercise area.

(A) Flexible open space.

(B) At least one wall reinforced for installation of stall bars and similar equipment.

(d) PATIENT LOCKER FACILITIES.

LOCKERS OR OTHER SUITABLE PROVISION FOR PATIENT CLOTHING IN OR NEAR TREATMENT AREAS.

(e) STORAGE FOR SUPPLIES AND EQUIPMENT.

(i) ADEQUATE TO MEET NEEDS OF SERVICE.

(ii) Near work areas.

(f) SPECIAL DESIGN FEATURES.

(i) SINK OR SINKS.

(A) HANDWASHING FACILITIES IN GENERAL TREATMENT AREA AND IN OR CONVENIENT TO OTHER TREATMENT AREAS.

(B) AT LEAST ONE SINK OF SUFFICIENT WIDTH AND DEPTH TO ACCOMMODATE WET PACKS.

(ii) Ceiling moorings.

(A) Constructed to support at least five hundred pounds.

(B) Strategically located throughout treatment areas for attachment of overhead equipment.

(4) Occupational therapy.²³ Located close to physical therapy facilities.

(a) ADMINISTRATIVE FACILITIES.

(i) OFFICE AND WORK SPACE FOR STAFF.

(ii) Separate room recommended.

(iii) Designed and located to permit visual supervision of therapy areas.

(b) STORAGE FOR SUPPLIES AND EQUIPMENT.

(i) ADEQUATE TO MEET NEEDS OF THERAPY PROGRAM.

(ii) Near therapy areas.

(c) THERAPY AREA.²⁴

(i) At least thirty-six square feet of floor area per patient for the maximum number to be in therapy at any one time.

(ii) Divided and equipped for diversified work.

(iii) EQUIPMENT:

SINK WITH SLUDGE TRAP.

(d) Facilities for teaching activities of daily living.

(5) Psychological facilities.

Office space for psychological testing, evaluation, and counseling.

(6) Social service facilities.

Office space for private interview and counseling.

(7) Vocational facilities.

Office and work space for counseling, evaluation, prevocational program, and placement.

(8) Special education facilities.

Schoolroom for children if children are to be included in program.

(9) TOILET, LOCKER, AND SHOWER FACILITIES.

(a) LOCKER, TOILET, AND SHOWER FACILITIES FOR PATIENTS.

(b) PATIENT TOILET OR TOILETS DESIGNED FOR ACCOMMODATION OF WHEELCHAIR PATIENTS.

(c) May be omitted if program does not indicate need for locker and shower facilities and other suitable patient toilets are convenient to rehabilitation facilities.

(10) HOUSEKEEPING FACILITIES.⁵

Suitable combination with other housekeeping facilities permitted if convenient to rehabilitation facilities.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

²³For construction and ventilation requirements for areas in which flammable agents are to be handled or stored, refer to standards of the State Fire Marshal.

²⁴In accordance with program.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-830, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-675, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050. 83-19-058 (Order 269), § 248-18-675, filed 9/20/83; Order 119, § 248-18-675, filed 5/23/75; Regulation 18.690, filed 1/25/62.]

WAC 246-318-840 Facilities for one-day patient care. Optional. SHALL MEET REQUIREMENTS, IF INCLUDED.

(1) LOCATED FOR CONVENIENT TRANSFER TO AND FROM A SURGICAL SUITE.²⁴

(2) WAITING ROOM OR AREA FOR FAMILY MEMBERS. May be combined with other waiting areas, if in close proximity.

(3) PATIENT CARE ROOM OR ROOMS.

(a) DIRECTLY ACCESSIBLE FROM CORRIDOR.

(b) ONE-BED ROOM OR ROOMS WITH ONE HUNDRED SQUARE FEET PER ROOM.

(c) MULTI-BED ROOM OR ROOMS WITH AT LEAST EIGHTY SQUARE FEET PER EACH BED, STRETCHER, OR EQUIVALENT. THIS SPACE MAY INCLUDE SUPPORT FACILITIES PERMITTED WITHIN

THE ROOM, THREE FEET CLEAR SPACE BETWEEN EACH BED, STRETCHER, OR EQUIVALENT.

(d) EQUIPMENT.

(i) OXYGEN OUTLET AT HEAD OF EACH BED, STRETCHER, OR EQUIVALENT.

(ii) SUCTION OUTLET AT HEAD OF EACH BED, STRETCHER, OR EQUIVALENT.

(iii) NURSE CALL SIGNAL DEVICE AT EACH BED, STRETCHER, OR EQUIVALENT. SEE WAC 248-18-719(4) and Table 719-6.

(iv) CLOSET, LOCKER, OR EQUIVALENT PER EACH BED, STRETCHER, OR EQUIVALENT FOR PATIENT CLOTHING. May be in or adjacent to the patient care room or rooms.

(v) LAVATORY.

(vi) MEDICAL EMERGENCY SIGNALLING DEVICE.⁵⁶

(vii) CUBICLE CURTAIN TRACKS OR RAILS OR EQUIVALENT TO PROVIDE COMPLETE SCREENING OF EACH BED, STRETCHER, OR EQUIVALENT TO PROVIDE VISUAL PRIVACY FOR EACH PATIENT IN MULTI-BED ROOMS.

(4) SERVICE FACILITIES LOCATED IN PATIENT CARE ROOM OR ROOMS OR ADJOINING ROOM OR ROOMS OR AREAS.

(a) SINK OR LAVATORY if service facility outside patient care room.

(b) WORK COUNTER.⁶

(c) LOCKED DRUG STORAGE INCLUDING SEPARATELY LOCKED STORAGE FOR CONTROLLED SUBSTANCES.^{6,24}

(d) STORAGE UNIT.^{6,18}

(e) REFRIGERATOR.⁶

(f) LINEN STORAGE.⁶

(g) CHARTING SURFACE OR DESK.⁶

(h) TELEPHONE.

(5) SOILED UTILITY OR SOILED MATERIALS ROOM. REFER TO WAC 248-18-711 (8) and (9).

(6) PATIENT TOILET DESIGNED AND ARRANGED TO ACCOMMODATE A PATIENT IN A WHEELCHAIR.

(7) HOUSEKEEPING FACILITIES.⁵ Suitable combination with other housekeeping facilities permitted, if convenient to one-day patient care facilities.

(8) Predischarge area or lounge.

(a) Multipatient accommodation.

(b) Seventy square feet per patient space.

(c) Curtain tracks or equivalent to provide for visual privacy for patients.

(d) Access to toilet.

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

¹⁸See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(10), STORAGE FACILITIES.

²⁴In accordance with program.

⁵⁶See GENERAL DESIGN REQUIREMENTS, WAC 248-18-719(4) and Table 719-6.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-840, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW. 90-12-014 (Order 061), § 248-18-568, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030. 85-23-017 (Order 2302), § 248-18-568, filed 11/13/85.]

WAC 246-318-850 Outpatient department. Optional. SHALL MEET REQUIREMENTS, IF INCLUDED. (REQUIREMENTS IN CAPITAL LETTERS - SEE WAC 248-18-515.)

(1) OUTPATIENT DEPARTMENT, GENERAL.

(a) LOCATED FOR EASY ACCESS BY OUTPATIENTS.

(b) LOCATED SO OUTPATIENT TRAFFIC THROUGH INPATIENT AREAS WILL BE AVOIDED.

(c) Located for convenient access to radiology, pharmacy, laboratory, and physical therapy.

(d) NUMBER, SIZE, AND TYPE OF FACILITIES DEPENDENT UPON TYPE AND ANTICIPATED VOLUME OF OUTPATIENT WORK.

(2) ADMINISTRATIVE FACILITIES.

(a) In small department, may be combined with inpatient or emergency department administrative facilities.

(b) Secondary facilities may be needed adjacent to major clinic areas in large department.

(c) WAITING AREA.

(d) ADMITTING FACILITIES.

(e) Appointment and cashier facilities.

(f) Office.

(g) PUBLIC TOILET.

(h) Staff toilet.

(3) EXAMINATION ROOM.

(a) MINIMUM DIMENSION OF EIGHT FEET AND MINIMUM AREA OF EIGHTY SQUARE FEET.

(b) EQUIPMENT:

LAVATORY OR SINK.

EXAMINATION LIGHT.⁶

STORAGE FOR SUPPLIES AND EQUIPMENT.¹⁸

Dressing cubicles.

Film illuminator.

(4) Doctors' office.

(5) Minor surgery or treatment room.

(a) MINIMUM DIMENSION OF FIFTEEN FEET.

(b) EQUIPMENT:

SCRUB SINK.

LIQUID DETERGENT DISPENSER WITH FOOT CONTROL.⁶

SURGERY OR TREATMENT LIGHT.⁶

STORAGE FOR SUPPLIES AND EQUIPMENT.^{6, 18}

FILM ILLUMINATOR OR ILLUMINATORS.⁶

(6) UTILITY ROOM.⁷

Located close to examination and treatment rooms.

(7) MEDICINE FACILITIES.⁷

(8) HOUSEKEEPING FACILITIES.⁵

Suitable combination with other housekeeping facilities permitted if convenient to outpatient department.

(9) LINEN STORAGE.¹⁸

(10) EQUIPMENT STORAGE.¹⁸

(11) Observation or recovery room.¹⁴

Notes:

⁵See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(6), HOUSEKEEPING FACILITIES.

⁶May be movable equipment.

⁷See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711.

¹⁴See Recovery Unit, WAC 248-18-560.

¹⁸See GENERAL REQUIREMENTS FOR SERVICE FACILITIES, WAC 248-18-711(10), STORAGE FACILITIES.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-850, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-650, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030 and 43.20.050, 83-19-058 (Order 269), § 248-18-650, filed 9/20/83; Order 119, § 248-18-650, filed 5/23/75; Regulation 18.640, filed 1/25/62.]

WAC 246-318-860 Dialysis facilities. Hospitals planning new construction of dialysis facilities shall:

(1) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719 with:

(a) Air changes in patient areas equivalent to a treatment room;

(b) Capture hoods in equipment cleanup or dialyzer reuse preparation rooms:

(i) Capable of maintaining formaldehyde levels less than 0.5 parts per million in the rooms; and

(ii) Exhausting directly to outdoors;

(c) Plumbing for each dialysis station providing:

(i) A water supply system or mechanism capable of meeting the flow and pressure requirements of the manufacturer for each machine;

(ii) A waste line serving dialysis equipment with an unalterable air gap or equivalent to prevent backflow;

(iii) Connections to the dialysis equipment or equivalent to prevent backflow; and

(iv) Piping and fittings used for all dialysis functions conforming to National Sanitation Foundation Standard No. 14 titled "Plastics Piping Components," August 1986;

(d) Electrical services providing:

(i) A minimum of four single electrical receptacles on emergency power at each dialysis station;

(ii) At least two of the electrical receptacles per station on emergency power connected to a dedicated branch circuit;

(iii) Lighting in each dialysis facility on emergency power; and

(iv) Ground fault circuit interrupter protection for all electrical outlet services in dialysis stations and wet areas.

(2) Meet general requirements for certain service facilities under WAC 248-18-711 (3) or (4), (6), (7), (8) or (9), (10), and (11) which may be shared with any immediately adjacent facility and including:

(a) Lockable storage for patient valuables unless provided elsewhere under hospital policy;

(b) Chemical storage in an area within a room; and

(c) Cleanup room for dialysis equipment meeting requirements of WAC 248-18-711 (5)(b), (c), and (d) with eyewash equipment located within the dialysis facility.

(3) Provide a dialysis facility with:

(a) Location to avoid through traffic;

(b) Uncarpeted floors in patient care and wet areas;

(c) Coat hook or equivalent for hanging full length garments;

(d) A medical emergency signal device;

(e) A patient waiting area;

(f) Work station for staff with writing surfaces and storage for supplies;

(g) Patient preparation areas:

(i) Adjacent to dialysis stations;

(ii) With provisions for:

(A) Privacy;

(B) Handwashing; and

(C) Storage;

(h) Privacy areas for interviewing and consultation which may be shared;

(i) Toilet or toilets in or convenient to the dialysis facility including at least one wheelchair accessible toilet; and

(j) Patient training room with a lavatory if home training is planned.

(4) Provide dialysis stations including:

(a) Minimum square feet per dialysis station of:

(i) Seventy square feet excluding aisles when the service uses recliner chairs; and

(ii) Eighty square feet excluding aisles when the service uses beds;

(b) Lavatory adjacent to each dialysis station; and

(c) A patient nurse call.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-860, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 90-24-044 (Order 115), § 248-318-860, filed 11/30/90, effective 12/31/90.]

WAC 246-318-870 Long-term care unit. Hospitals planning new construction of long-term care facilities of ten or more beds shall:

(1) Follow general design requirements for architectural components, electrical service, lighting, call systems, hardware, interior finishes, heating, plumbing, sewerage, ventilation/air conditioning, and signage under WAC 248-18-719;

(2) Provide and meet general requirements for certain service facilities under WAC 248-18-711 (3) or (4), (6), (7), (8) or (9), (10), and (11) including:

(a) Locks on all doors for housekeeping, medications, storage, and utility rooms;

(b) Controlled access locks on medication rooms;

(c) A housekeeping supply room on or adjacent to each facility;

(d) Linen storage in a clean room; and

(e) General storage space of not less than four square feet per bed within the hospital in addition to closets and equipment storage provided in the long-term care service area;

(3) Provide long-term care facilities with:

(a) Location of facilities described under subsection (2)(a) through (c) of this section on the same floor as long-term care beds;

(b) Location to minimize through traffic and penetration of objectionable noise, odors, or heat from other areas of the hospital;

(c) Wheelchair accessible patient toilets including:

(i) Water closets in a ratio of at least one per four beds;

(ii) Bedpan flushing equipment;

(iii) Accessibility from each patient room;

(iv) Lavatory in each toilet; and

(v) Grab bars properly located and securely mounted on each side of the water closet;

(d) At least one wheelchair accessible toilet opening directly from the main corridor;

(e) Handrails along both sides of all patient use corridors:

- (i) Mounted at thirty-two to thirty-four inches above the floor;
- (ii) With ends returned to the walls; and
- (iii) Projecting a maximum of three and one-half inches from the wall;
- (f) Patient bathing facilities including:
 - (i) Showers or tubs in a ratio of one per fifteen beds;
 - (ii) At least one emersion bathing fixture accessible from two sides and one end for wheelchairs and stretchers;
 - (iii) One roll-in shower or equivalent designed:
 - (A) For ease of shower chair entry;
 - (B) With bulk heads a maximum of thirty-four inches high providing for toe space;
 - (C) With properly sloped and drained floor to prevent the flow of water outside the stall while providing for safe use of a shower chair within the stall; and
 - (D) With the water inlet approximately four and one-half feet from floor level and a flexible hose approximately five feet long including a lightweight, shampoo-type, spray attachment;
 - (g) Grab bars including:
 - (i) One horizontal grab bar a minimum of forty-eight inches long at the side of each standard bathtub with an "L" shaped bar at the faucet end;
 - (ii) At least one horizontal grab bar at the faucet end of each peninsular bathtub; and
 - (iii) Horizontal grab bar on two sides of each shower stall with an "L" shaped bar on the shower head side;
 - (h) Nourishment room in each facility including:
 - (i) Space for waste containers;
 - (ii) Equipment:
 - (A) Refrigerator;
 - (B) Ice machine;
 - (C) Sink with work counter; and
 - (D) Storage for utensils and foodstuffs;
 - (i) Waiting room or area;
 - (4) Provide patient rooms with:
 - (a) Maximum capacity of two beds per patient room;
 - (b) Minimum usable floor space per bed exclusive of areas taken up by passage door swings, closets, wardrobes, portable lockers, and toilet rooms of:
 - (i) Eighty-five square feet in multibed rooms; and
 - (ii) One hundred square feet in one-bed rooms;
 - (c) Minimum dimensions of:
 - (i) Eleven feet for multibed rooms; and
 - (ii) Three feet between the sides and the foot of the bed and any wall, fixed obstruction, or other bed;
 - (d) Space for wheelchair storage;
 - (e) Equipment including:
 - (i) The provision for patient privacy in all rooms;
 - (ii) One wardrobe, closet, or locker per bed for hanging of full-length garments and a securable drawer for personal effects; and
 - (iii) A lavatory in each multibed room;
 - (5) Provide a nurses station or equivalent including:
 - (a) A charting surface;
 - (b) Confidential storage for patients' medical records;
 - (c) Storage for charting supplies;
 - (d) Clock; and
 - (e) Telephone;
 - (6) Provide staff facilities including:
 - (a) A toilet;

- (b) Securable storage for purses and personal effects apart from storage for patient care supplies and equipment;
- (c) An office for confidential management and staff communications; and
- (d) A conference room for confidential staff and family communication;
- (7) Provide suitably equipped patient areas in the long-term care facility for:
 - (a) Dining room;
 - (b) Recreational activity; and
 - (c) Dayroom with windows;
 - (8) Provide occupational therapy and physical therapy facilities as described under WAC 248-18-675 either in the long-term care unit or elsewhere in the hospital;
 - (9) Include the following features if planning to provide a protective facility for cognitively impaired patients:
 - (a) Corridors with the following minimum widths:
 - (i) Ten feet;
 - (ii) Eight feet for a circular route allowing the patient to return to the patient's starting point without reversing direction; or
 - (iii) As permitted under chapter 248-14 WAC specifically for construction of facilities for the cognitively impaired;
 - (b) Floors, walls, and ceiling surfaces displaying contrasting colors for identification;
 - (c) Door thresholds of one-half inch or less;
 - (d) Exits secured by alarms or doors requiring cognitive ability to open or other methods provided doors release upon activation of the fire alarm system and upon loss of power;
 - (e) Instruction labels on door release devices requiring direction for use;
 - (f) Secured outdoor space and walkways, when outdoor space is provided, including:
 - (i) Walls or fences at least six feet high and designed to prevent climbing and penetration;
 - (ii) Ambulation area with:
 - (A) Walking surfaces firm, stable, and free from abrupt changes in elevation; and
 - (B) Slip-resistant surfaces on areas subject to wet conditions;
 - (iii) Exits from the secured outdoor spaces and walkways releasing automatically upon activation of fire alarm signal or upon loss of power.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-318-870, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030. 90-24-044 (Order 115), § 248-318-870, filed 11/30/90, effective 12/31/90.]

WAC 246-318-990 Fees. Hospitals licensed under chapter 70.41 RCW shall:

- (1) Submit an annual license fee of forty-five dollars for each bed space within the licensed bed capacity of the hospital to the department;
- (2) Include all bed spaces in rooms complying with physical plant and movable equipment requirements of this chapter for twenty-four-hour assigned patient rooms;
- (3) Include neonatal intensive care bassinet spaces;
- (4) Include bed spaces assigned for less than twenty-four-hour patient use as part of the licensed bed capacity when:
 - (a) Physical plant requirements of this chapter are met without movable equipment; and

- (b) The hospital currently possesses the required movable equipment and certifies this fact to the department;
- (5) Exclude all normal infant bassinets;
- (6) Limit licensed bed spaces as required under chapter 70.38 RCW;
- (7) Submit an application for bed additions to the department for review and approval under chapter 70.38 RCW subsequent to department establishment of the hospital licensed bed capacity; and
- (8) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 43.70.250, 92-12-028 (Order 273), § 246-318-990, filed 5/28/92, effective 6/28/92. Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-318-990, filed 12/27/90, effective 1/31/91.]

WAC 246-318-99902 Appendix B—Dates of documents adopted by reference in chapter 248-18 WAC. (1) National Fire Protection Association (NFPA), 99, Chapter 12, 1987. Required.

(2) American Society of Heating, Refrigerating, and Air Conditioning Engineers (ASHRAE) Handbook - five volumes: 1987 HVAC Systems and Applications; 1983 Equipment; 1985 Fundamentals; 1986 Refrigeration. Recommended.

(3) Uniform Plumbing Code Standards, WAC 51-16-060, as hereafter amended, 1985 edition. Required.

(4) National Fire Protection Association (NFPA), 99, Chapter 4, 1987. Required.

(5) National Fire Protection Association (NFPA), 90A-1985. Required.

(6) Food Service Equipment Standards of the National Sanitation Foundation. Required.

(7) Recommended are:

(a) "Biosafety in Microbiological and Biomedical Laboratories," Appendix A; "Biological Safety Cabinet," United States Department of Health and Human Services, Publication No. (NIH) 88-8395, Second Edition, May 1988.

(b) "National Sanitation Foundation Standard No. 49 (NSF No. 49) for Class II Biohazard Cabinetry," revised June 1987.

(8) Uniform Mechanical Code, WAC 51-16-040, as now and hereafter amended. Required.

(9) Underwriters Laboratories (UL), 181 Factory Made Air Ducts and Connectors, 1984 edition. Required.

(10) Sheet Metal and Air Conditioning Contractors' National Association, Inc., (SMACNA), Duct Liner Application Standard, 1985. Required.

(11) Compressed Gas Association, Inc., Pamphlet Number P-2.1-1983, "Recommendations for Medical-Surgical Vacuum Systems," 1983 edition. Recommended.

(12) Illuminating Engineers Lighting Handbook (IES), 1987 Application Volume. Recommended.

(13) National Fire Protection Association (NFPA) 70-1987. Required.

(14) Method of Testing Air-Cleaning Devices Used In General Ventilation for Removing Particulate Matter, American Society of Heating, Refrigeration, and Air Conditioning Engineers (ASHRAE), Standard 52-76, 1976 edition. Required.

(15) National Fire Protection Association (NFPA) 30-1987. Required.

(16) National Fire Protection Association (NFPA) 99, CHAPTER 7, 1987. Required.

(17) National Fire Protection Association (NFPA) 43C-1986. Required.

(18) National Council on Radiation Protection Handbook No. 49. Required.

(19) Chapter 51-10 WAC Washington State Regulations for Barrier-Free Facilities, second edition. Required.

(20) Uniform Building Code Standards, WAC 51-16-030, as now and hereafter amended. Required.

(21) Chapter 248-54 WAC Public Water Supplies. Required.

(22) Chapter 248-92 WAC Public Sewage. Required.

(23) Chapter 248-96 WAC On-Site Sewage Disposal. Required.

(24) National Institute for Occupational Safety and Health (NIOSH) Standard. Required.

(25) Chapter 212-12 WAC Fire Marshal Standards. Required.

(26) Guidelines for Construction and Equipment of Hospital and Medical Facilities, Department of Health and Human Services, 1987. Required.

(27) Chapter 402-24 WAC Standards for Protection Against Radiation. Required.

(28) WAC 296-62-07353 General Occupational Health Standards for Ethylene Oxide. Required.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-99902, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.41 RCW, 90-12-014 (Order 061), § 248-18-99902, filed 5/30/90, effective 6/30/90. Statutory Authority: RCW 70.41.030, 89-22-105 (Order 009), § 248-18-99902, filed 11/1/89, effective 12/2/89; 88-16-086 (Order 2667), § 248-18-99902, filed 8/2/88; 87-04-061 (Order 2466), § 248-18-99902, filed 2/4/87. Statutory Authority: RCW 70.41.030 and 43.20.050, 85-05-033 (Order 280), § 248-18-99902, filed 2/15/85; 82-24-001 (Order 248), § 248-18-99902, filed 11/18/82.]

WAC 246-318-99910 Appendix J—Guidelines for laboratory quality assurance program in hospitals. (1) Services.

(a) Hospitals shall ensure all in-hospital testing procedures performed on biological specimens, body fluids, or tissues comply with this section in terms of:

- (i) Sufficient equipment, and
- (ii) Appropriately trained staff.

(b) Hospitals allowing performance of tests on biological specimens in areas outside of the designated hospital laboratory but within the hospital shall provide evidence to the department on staff training and quality control as described in subsections (2)(b) and (3)(b)(i) through (iv) of this section.

(c) Hospitals where biological specimens are sent outside of the hospital for testing shall obtain and maintain evidence of laboratory quality control consistent with subsection (3)(a), (b), and (c) of this section.

(2) Personnel. Hospitals shall ensure:

(a) Twenty-four hour per day on-site or phone availability of:

- (i) Pathology services provided by a physician,
- (ii) Appropriate technical consultation services.

(b) Appropriately trained personnel to perform each laboratory procedure.

(3) Quality control.

(a) Laboratories shall perform satisfactorily in a proficiency testing program approved by the department.

(b) Each hospital shall maintain a quality control program related to all tests on biological specimens including:

- (i) Maintenance of current procedure manuals;
- (ii) Functional verification, calibration, and preventive maintenance of instruments and equipment;
- (iii) Demonstration of accuracy and precision of test results; and

(iv) Appropriate documentation.

(c) Hospitals shall establish and maintain:

- (i) A timely, appropriate review of all test results, and
- (ii) Quality control records.

(4) Facilities. Hospitals shall provide:

- (a) Emergency power with sufficient outlets for blood bank refrigerators and other testing procedure equipment,
- (b) Protection from power line voltage disturbance in certain electronic equipment, as necessary.

(c) Adequate space for:

- (i) Patient safety;
- (ii) Storage of materials, equipment, and supplies;
- (iii) Electrical support functions; and
- (iv) Performance and equipment associated with laboratory testing procedures.

(d) A signal to a staffed area from the blood refrigerator alarm.

(5) Reports and records. Hospitals shall:

(a) Make reports of test results available to appropriate authorized persons in a timely fashion, and

(b) Maintain a system for two-year retention and retrieval of laboratory test results and quality control records.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-318-99910, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.030, 87-24-038 (Order 2560), § 248-18-99910, filed 11/25/87.]

Chapter 246-321 WAC HOSPICE CARE CENTER

WAC

246-321-001	Purpose.
246-321-010	Definitions.
246-321-012	Licensure—Notice of decision—Adjudicative proceeding.
246-321-014	Governing body and administration.
246-321-015	Staff—Personnel—Volunteers.
246-321-017	HIV/AIDS education and training.
246-321-020	Policies and procedures.
246-321-025	Patient care services.
246-321-030	Food and dietary services.
246-321-035	Infection control.
246-321-040	Pharmaceutical service.
246-321-045	Clinical records.
246-321-050	Physical environment and equipment.
246-321-055	Nonflammable medical gases—Respiratory care.
246-321-990	Fees.

WAC 246-321-001 Purpose. Regulations for hospice care centers are hereby adopted pursuant to chapter 70.41 RCW. The purpose of these regulations is to provide minimal standards for safety and adequate care of terminally ill individuals who choose to receive palliative rather than curative care and treatment for varying periods of time in a

segregated, organized, specialized hospital or health care center.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 81-23-003 (Order 218), § 248-21-001, filed 11/6/81.]

WAC 246-321-010 Definitions. For the purposes of these regulations, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise.

(1) "Active volunteer" means unpaid worker or workers providing direct care to patients or clients and/or working with clinical records or confidential client information.

(2) "Adjunctive therapies" means those prescribed services provided by medically related disciplines which include but are not limited to physical therapy, occupational therapy, recreational therapy, music therapy, respiratory therapy.

(3) "Administrator" means an individual appointed as chief executive officer by the governing body of the center to act in its behalf in the overall management of the hospice care center.

(4) "Authenticated" or "authentication" means authorization of a written entry in a record or chart by means of a signature which shall include, minimally, first initial, last name, and title.

(5) "Bathing facility" means a bathtub, shower, or equivalent.

(6) "Bereavement care" means consultation, support, counseling, and follow-up of the client before and following the death of a patient.

(7) "Client" means the patient and family which together compose the unit of care in the hospice care center.

(8) "Client education" means provision of information on physical care, disease symptomatology, palliative treatment, psychosocial coping skills, availability, and utilization of community resources.

(9) "Clinical record" means a file containing all pertinent clinical information about a particular patient to include: Identifying information, data bases, assessment, individualized comprehensive care plan, diagnosis, treatment, progress notes, other clinical events, and a discharge summary.

(10) "Department" means the Washington state department of health.

(11) "Dietitian" means a person who is eligible for membership in the American Dietetic Association.

(12) "Drug" means medication, chemical, device, or other material used in the diagnosis and/or treatment of injury, illness, or disease.

(13) "Drug administration" means an act in which a single dose of a prescribed drug or a biological is given to a patient by an authorized person in accordance with all laws and regulations governing such acts. The complete act of administration entails removing an individual dose from a previously dispensed, properly labeled container, verifying it with the order of the physician, giving the individual dose to the proper patient, and properly recording the time and dose given.

(14) "Drug dispensing" means an act entailing the interpretation of an order (prescription) for a drug or biological and, pursuant to that order (prescription), proper

selection, measuring, labeling, packaging, and issuance of the drug for a patient or for a service unit of the facility.

(15) "Family" means individuals, who need not be relatives, who are important to a patient and designated by that patient.

(16) "Governing body" means the individual or group legally responsible for the operation and maintenance of the hospice care center.

(17) "Grade" means the level of the ground adjacent to the building measured at required windows. The ground must be level or slope downward for a distance of at least ten feet from the wall of the building. From there the ground may slope upward not greater than an average of one foot vertical to two feet horizontal within a distance of eighteen feet from the building.

(18) "Hospice care center" means any building, facility, place, or equivalent organized, maintained, and operated specifically to provide beds, accommodations, facilities, and services over a continuous period of twenty-four hours or more for palliative care of two or more individuals, not related to the operator, who are diagnosed as being in the latter stages of an advanced disease which is expected to lead to death. Hospice care centers are specialized types of health care facilities which come within the scope of chapter 70.41 RCW, hospital licensing and regulation. Hospice care centers may be freestanding or separately licensed portions or areas of another type of health care facility: *Provided*, That the hospice care center is under control and administered by a separate and autonomous governing body. Hospice care centers as used in this chapter do not include hotels or similar places furnishing only food and lodging or similar domiciliary care; nor does it include clinics or physicians' offices where patients are not regularly kept as bed patients for twenty-four hours or more; nor does it include hospitals licensed pursuant to chapter 70.41 RCW which provide services in addition to or in combination with hospice care services; nor does it include nursing homes as defined and which come under the scope of chapter 18.51 RCW; nor does it include psychiatric hospitals, which come under the scope of chapter 71.12 RCW; nor any other hospital or institution specifically intended for use in the diagnosis and care of those suffering mental illness, mental retardation, convulsive disorders, or other abnormal mental conditions. Furthermore, nothing in this act or the rules and regulations adopted pursuant thereto shall be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any hospital conducted for those who rely primarily upon treatment by prayer or spiritual means in accordance with the creeds or tenets of any well-recognized church or religious denomination.

(19) "Hospital" means any institution, place, building, or agency which provides accommodations, facilities, and services over a continuous period of twenty-four hours or more for observation, diagnosis, or care of two or more individuals not related to the operator who are suffering from illness, injury, deformity, or abnormality, or from any other condition for which obstetrical, medical, or surgical services would be appropriate for care or diagnosis. "Hospital," as used in this chapter, does not include hotels or similar places furnishing only food and lodging or simply domiciliary care; nor does it include clinics or physicians' offices where

patients are not regularly kept as bed patients for twenty-four hours or more; nor does it include nursing homes, as defined and which come under the scope of chapter 18.51 RCW; nor does it include maternity homes, which come under the scope of chapter 18.46 RCW; nor does it include psychiatric hospitals, which come within the scope of chapter 71.12 RCW; nor any other hospital or institution specifically intended for use in the diagnosis and care of those suffering from mental illness, mental retardation, convulsive disorders, or other abnormal mental conditions. Furthermore, nothing in this chapter or the rules and regulations adopted pursuant thereto shall be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any hospital conducted for those who rely primarily upon treatment by prayer or spiritual means in accordance with the creed or tenets of any well-recognized church or religious denominations.

(20) "Individualized care plan" means a written statement of care to be provided for a client based upon physical, psychosocial, spiritual assessment of the patient, and assessment of family as appropriate. This statement shall include short- and long-term goals, client education, discharge planning, and the name of the individual member of the interdisciplinary care team designated as responsible for implementation. This statement shall be developed with participation of clients as appropriate.

(21) "Interdisciplinary care team" means a group composed of the patient, the family, and professional care providers which may include, but is not limited to, required adjunctive therapists, registered nurses, nutritionists, spiritual advisors, pharmacists, physicians, mental health professionals, or social workers. "Core team" means those individuals required to provide services for clients within the hospice care center program and shall include a registered nurse, physician, medical director, social worker, spiritual consultant or advisor, and volunteer director.

(22) "Lavatory" means a plumbing fixture designed and equipped for handwashing purposes.

(23) "Licensed nurse" means a registered nurse under provisions of chapter 18.88 RCW or a licensed practical nurse under provisions of chapter 18.78 RCW.

(24) "Medical staff" means physicians and other medical practitioners appointed by the governing body to practice within the parameters of the medical staff bylaws of the hospice care center.

(25) "New construction" means any of the following started after promulgation of these rules and regulations:

(a) New building or buildings to be used as part of the hospice care center;

(b) Addition or additions to existing hospice care center to be used as part of the hospice care center;

(c) Alteration or alterations or modification or modifications other than minor alteration or alterations to a hospice care center. "Minor alteration or alterations" means any structural or functional modification within the existing center which does not change the approved use of the room or area. Minor alterations performed under this definition do not require prior approval of the department.

(26) "Palliative care" means activities, interventions, and interactions which are planned and executed to cause a lessening or reduction of physical, psychosocial and spiritual pain, and intended to ease without curing.

(27) "Patient" means the terminally ill individual.

(28) "Patient care coordinator" means a designated, qualified employee who is responsible for the organization, implementation, and evaluation of the individualized care plan of a patient.

(29) "Person" means any individual, firm, partnership, corporation, company, association or joint stock association, and the legal successor thereof.

(30) "Personnel" means individuals employed and receiving monetary payment from the hospice care center.

(31) "Pharmacist" means an individual who is licensed by the state board of pharmacy to engage in the practice of pharmacy under the provisions of chapter 18.64 RCW.

(32) "Physician" means an individual licensed under provisions of chapter 18.71 RCW, Physicians, or 18.57 RCW, Osteopathy—Osteopathic medicine and surgery.

(33) "Prescription" means a written or oral order for drugs issued by a medical practitioner, licensed in the state of Washington, in the course of his or her professional practice, as defined by Washington state statute, for a legitimate medical purpose (RCW 18.64.011 (3)(a)).

(34) "Registered nurse" means an individual licensed under the provisions of the law regulating the practice of registered nursing in the state of Washington, chapter 18.88 RCW.

(35) "Scheduled drug" means those substances or immediate precursors listed in Schedules I through V, Article II, RCW 69.50.201, State Uniform Substance Act, now or as hereafter amended.

(36) "Self-administration" means those instances when a patient or member of the client family administer a medication from a properly labeled container while on the premises of the hospice care center.

(37) "Shall" means compliance with the regulation is mandatory.

(38) "Should" means compliance with the regulation or rule is suggested or recommended but not required.

(39) "Social worker" means an individual with a masters degree in social work from an accredited school of social work or an individual eligible for membership in the academy of certified social workers.

(40) "Staff" means those individuals providing services within the hospice care center. These individuals may be paid or unpaid and shall be designated as medical staff, personnel, or volunteers, respectively.

(41) "Toilet" means a room containing at least one water closet.

(42) "Useable floor area" means floor spaces in patient rooms excluding areas taken up by vestibules, closets, wardrobes, portable lockers, lavatories, and toilet rooms.

(43) "Water closet" means a plumbing fixture fitted with a seat and a device for flushing the bowl of the fixture with water.

[Statutory Authority: RCW 43.70.040, 92-02-018 (Order 224), § 246-321-010, filed 12/23/91, effective 1/23/92; 91-02-049 (Order 121), recodified as § 246-321-010, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213, 86-08-002 (Order 2348), § 248-21-002, filed 3/20/86. Statutory Authority: RCW 43.20.050, 81-23-003 (Order 218), § 248-21-002, filed 11/6/81.]

WAC 246-321-012 Licensure—Notice of decision—Adjudicative proceeding. (1) After January 1, 1982, no

person acting separately or jointly with any other person shall establish, maintain, conduct or operate a hospice care center in this state or use the words "hospice care center" to describe or identify a place or building which does not have a license as a hospice care center as defined and described herein.

(2) An application for a hospice care center license shall be submitted to the department on forms provided by the department. The application shall be signed by the operator of the facility and the legal representative of the governing body.

(3) Other requirements related to licensure, fees, and inspection are as stipulated in RCW 70.41.100, 70.41.110, 70.41.120, 70.41.130, 70.41.150, 70.41.160, 70.41.170, and WAC 246-321-990.

(4) There shall be compliance with other regulations to include:

(a) Applicable rules and regulations for hospice care centers adopted by the Washington state fire marshal pursuant to RCW 70.41.080 and chapter 48.48 RCW;

(b) Applicable national, state, and local electrical, fire, zoning, building, and plumbing codes.

(5)(a) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(b) A license applicant or holder contesting a department license decision shall within twenty-eight days of receipt of the decision:

(i) File a written adjudicative proceeding application by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 43.70.040 and 34.05.220, 92-02-018 (Order 224), § 246-321-012, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-012, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050 and chapter 34.05 RCW, 90-05-038 (Order 034), § 248-21-005, filed 2/14/90, effective 3/17/90. Statutory Authority: 43.20.050, 81-23-003 (Order 218), § 248-21-005, filed 11/6/81.]

WAC 246-321-014 Governing body and administration. (1) The hospice care center shall have a governing body which is responsible for the overall operation and maintenance of the center.

(2) The governing body shall be responsible for the provision of personnel, facilities, equipment, supplies and special services to meet the needs of clients.

(3) The governing body shall assure, through documentation of a biennial review, the establishment and maintenance of a current, written organizational plan which

includes all positions and services and delineates responsibilities, authority and relationship of the positions within the center. The governing body shall approve medical staff bylaws, rules, and regulations to include conditions for medical staff membership, delineation of medical staff privileges, and organization of the medical staff.

(4) The governing body shall establish, review biennially, and revise as needed written policies related to the safety, care, and treatment of clients and policies for staff.

(5) The governing body shall appoint an administrator who shall be responsible for implementing the policies adopted by the governing body.

(6) The governing body shall have the authority and responsibility for appointment, review, and reappointment of the medical staff.

(7) The governing body shall appoint a physician as medical director.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-014, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 81-23-003 (Order 218), § 248-21-010, filed 11/6/81.]

WAC 246-321-015 Staff—Personnel—Volunteers.

(1) There shall be sufficient qualified staff to provide the services needed by clients and to provide for the safe maintenance and operation of the hospice care center. Appropriate "on call" schedules shall be available.

(a) There shall be a written job description for each position classification, including active volunteers;

(b) There shall be a written record for each employee and active volunteer to include application, verification of education and training, verification of a valid, current license for any staff member when licensure is required for tasks performed, record of orientation, ongoing education and an annual, written performance evaluation;

(c) There shall be regular coordination, and supervision of each staff member consistent with the organizational plan;

(d) There shall be written policies, procedures, and screening criteria.

(2) A planned, supervised, and documented orientation shall be provided for each new employee and active volunteer to include but not [be] limited to fire, disaster, infection control procedures, and confidentiality.

(3) There shall be planned ongoing education affording each employee and active volunteer an opportunity to maintain and update the skills needed to perform assigned duties.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-015, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 81-23-003 (Order 218), § 248-21-015, filed 11/6/81.]

WAC 246-321-017 HIV/AIDS education and training. Hospice care centers shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care*

Facility Employees, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040 and 70.24.310, 92-02-018 (Order 224), § 246-321-017, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-017, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310, 89-21-038 (Order 3), § 248-21-017, filed 10/12/89, effective 11/12/89.]

WAC 246-321-020 Policies and procedures. Written policies and procedures shall include but not be limited to:

(1) Admission criteria or definition of the patients who shall be eligible for services offered in the hospice care center.

(2) Coordinated transfer of patients to and from home or other facilities as desired, including transfer of appropriate information.

(3) Needed psychosocial support for all members of the interdisciplinary care team and volunteers.

(4) Smoking by staff, clients, and others within the center.

(5) Fire and disaster with planned, documented rehearsals and appropriate emergency phone numbers available and posted.

(6) Action to be taken in event of failure of essential equipment and major utilities services. The written procedure shall include a system for summoning essential assistance when required.

(7) Actions to be taken following an accident or incident which may be injurious to clients.

(8) Consideration of family sleeping or living spaces within the facility.

(9) Consideration of family participation in patient care.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 81-23-003 (Order 218), § 248-21-020, filed 11/6/81.]

WAC 246-321-025 Patient care services. (1) There shall be evidence of interdisciplinary planning and provision of coordinated palliative care of clients during, between and after presence in the facility with an emphasis on symptom management specific to the desires and needs of the individual patients.

(a) An individualized care plan shall be developed upon initial admission, implemented, monitored and modified as needed.

(b) There shall be a designated patient care coordinator.

(2) Core team services shall include the following:

(a) Physician services.

(i) Each patient admitted to the center shall be under the care of a physician.

(ii) The medical director shall be responsible for general performance of medical staff within the hospice care center.

(b) Nursing services.

(i) A registered nurse who is an employee shall be responsible for supervision of nursing services.

(ii) There shall be a licensed nurse on duty within the center at all times when patients are present. A registered nurse shall be immediately available by phone at all times.

(c) Social work services. There shall be sufficient, qualified social work staff coordinated by a social worker to provide psychosocial services as appropriate.

(d) Spiritual counseling services. Provisions shall be made for the individual spiritual needs of each patient, and family as possible.

(e) Bereavement care services. The center shall be responsible for arranging for the provision of a bereavement care program which shall be integrated into the individualized care plan.

(f) Home care services. There shall be provision for continuity of patient care through a certified home care program and/or liaison with a certified home care service in the community, as indicated in the individualized care plan.

(g) The center shall facilitate obtaining of prescribed diagnostic, treatment or palliative services.

(h) Hospice care centers should employ and/or arrange translation and consultation to facilitate communication where barriers exist, (i.e., language or cultural differences; hearing, speech or sight impairment).

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-321-025, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050. 81-23-003 (Order 218), § 248-21-025, filed 11/6/81.]

WAC 246-321-030 Food and dietary services. (1) The dietary and food service shall be provided and managed by an individual trained in food service.

(2) Food and dietary services shall incorporate the periodic input of a dietitian. Appropriate nutritional and dietary consultation shall be provided patients.

(3) Food shall be prepared and served at intervals appropriate to the needs of patients. Unless contraindicated, current recommendations of the food and nutrition board of the national research counsel adjusted for age, sex, and activity shall be used. Snacks of a nourishing quality shall be available as needed for patients. Cultural and ethnic preferences of patients should be respected in planning and serving meals.

(4) There shall be written physician orders for all therapeutic diets served to patients. A current therapeutic diet manual approved in writing by a dietitian and the medical director shall be used for planning and preparing therapeutic diets.

(5) All menus shall be retained for one year.

(6) When the hospice care center policy provides for allowing for the preparation and/or storage of personal food brought in by clients for consumption by clients, there shall be adequate mechanical refrigeration capable of maintaining a temperature of forty-five degrees fahrenheit or lower and dishwashing facilities which provide hot water at a temperature of not less than one hundred fifty degrees fahrenheit. Suitable dining area(s) should be provided for clients.

(7) Food service sanitation shall be governed by chapter 246-215 WAC, rules and regulations of the state board of health governing food service sanitation.

(8) There shall be current written policies and procedures for food storage, food preparation, food service, scheduled cleaning of all food service equipment and work areas. A copy of the procedures shall be kept within the food service area and shall be available for reference by dietary or food service personnel and other personnel at all times.

[Statutory Authority: RCW 43.70.040. 92-02-018 (Order 224), § 246-321-030, filed 12/23/91, effective 1/23/92; 91-02-049 (Order 121), recodified as § 246-321-030, filed 12/27/90, effective 1/31/91. 91-02-049 (Order 121),

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recodified as § 246-321-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050. 81-23-003 (Order 218), § 248-21-030, filed 11/6/81.]

WAC 246-321-035 Infection control. (1) There shall be written policies and procedures addressing infection control, including: Housekeeping; cleaning, sterilization, disinfection, sanitization, and storage of supplies and equipment; health of personnel; pets; food service sanitation.

(2) Provision shall be made for isolation of patients with infectious conditions in accordance with *Isolation Techniques For Use In Hospitals*, United States Department of Health and Human Services, most recent edition.

(3) There shall be reporting of communicable disease in accordance with chapter 246-100 WAC.

(4) Recognized standards of medical aseptic technique including basic handwashing practices shall be followed in all direct personal care of patients.

(5) Methods for cleaning, disinfecting or sterilizing, handling and storage of all supplies and equipment shall be such as to prevent the transmission of infection.

(6) Written procedures shall specify daily and periodic cleaning schedules and routines for facility and equipment.

(7) Sewage, garbage, refuse, and liquid waste shall be collected and disposed of in a manner to prevent the creation of an unsafe or unsanitary condition or nuisance.

(8) There shall be in effect a current system of discovering, reporting, investigating, and reviewing infections among patients and personnel with maintenance of records on such infections.

(9) Upon employment and annually thereafter each employee and volunteer shall have or provide documented evidence of a tuberculin skin test by the Mantoux method, unless medically contraindicated. A negative skin test shall consist of less than ten millimeters induration read at forty-eight to seventy-two hours. A positive skin test shall consist of ten millimeters of induration, or greater, read at forty-eight to seventy-two hours. Positive reactors shall have a chest x-ray within ninety days of the first day of employment. Exemptions and specific requirements are as follows:

(a) New employees who can document a positive Mantoux test in the past shall have an initial screening in the form of a chest x-ray;

(b) After entry, annual screening in the form of a skin test or chest x-ray shall not be required for reactors;

(c) Those with positive skin tests who have completed the recommended course of preventive or curative treatment, as determined by the local health officer, shall be exempted from testing;

(d) Records of test results, x-rays or exemptions from such, shall be kept by the facility.

(10) Employees with a communicable disease in a known infectious stage shall not be on duty. Policy and procedures shall specify conditions for staff who are working despite presence of communicable disease.

[Statutory Authority: RCW 43.70.040. 92-02-018 (Order 224), § 246-321-035, filed 12/23/91, effective 1/23/92; 91-02-049 (Order 121), recodified as § 246-321-035, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.41.30 [70.41.030] and 43.20.050. 83-07-015 (Order 254), § 248-21-035, filed 3/10/83. Statutory Authority: RCW 43.20.050. 81-23-003 (Order 218), § 248-21-035, filed 11/6/81.]

WAC 246-321-040 Pharmaceutical service. (1) Pharmaceutical services shall be available to provide drugs and supplies and to fill, without delay, orders for drugs to be administered. A pharmacist shall provide sufficient on-site consultation to ensure that medications are secured, labeled, stored and utilized in accordance with the policies of the center and appropriate standards of pharmacy practice.

(2) The hospice care center shall provide for the proper handling and utilization of drugs in accordance with federal and state laws and regulations:

(a) A pharmacist in conjunction with representatives from nursing, medical and administrative staff, shall be responsible for developing written policies and procedures addressing all aspects of pharmaceutical services including: Procuring, prescribing, administering, dispensing and storage of medications, transcription of orders; use of protocols; disposal of drugs; self-administration of medications; control or disposal of drugs brought into the facility by patients; and recording of drug administration in the clinical records;

(b) There shall be written orders signed by a physician for all medications administered to patients or self-administered. There shall be a system which ensures accuracy in receiving, transcribing and implementing orders for the administration of medications;

(c) Drugs shall be dispensed only by a pharmacist. Drugs shall be administered only by practitioners licensed to administer drugs except in those instances when self-administration has been ordered;

(d) Drug containers within the center shall be clearly and legibly labeled and the label shall include at least the drug name (generic and/or trade), drug strength, expiration date if applicable, and in addition the lot number of the drug, if provided as floor stock;

(e) All drugs shall be stored in specifically designated, securely locked, well illuminated cabinets, closets or store rooms and made accessible only to authorized personnel. External medications shall be separated from internal medications;

(f) Poisonous and/or caustic drugs and materials including housekeeping and personal grooming supplies shall show proper warning or poison labels and shall be stored safely and separately from other drugs and food supplies;

(g) All Schedule II drugs in any area of the hospice care center shall be checked by two licensed persons at least one time each shift. There shall be records of receipt, issuance, and disposition of Schedule II drugs stored in the facility.

(3) Drugs brought into the hospice care center by patients for use by patients while in the center shall be specifically ordered by a physician. These drugs shall be checked to ensure proper identification and acceptable quality for use in the center.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 81-23-003 (Order 218), § 248-21-040, filed 11/6/81.]

WAC 246-321-045 Clinical records. (1) The hospice care center shall have one well defined clinical record system, adequate facilities, equipment and supplies necessary for the development, maintenance, security, control, retrieval, analysis, use and preservation of patient care data.

(2) The hospice care center shall have current written policies and procedures related to the clinical record system which shall include the following:

(a) Establishment of a standardized format for clinical records;

(b) Prohibition of the release of client information without specific, written approval of the individual client concerned;

(c) Retention, preservation, and destruction of clinical records.

(3) There shall be an adequate clinical record maintained for every patient and readily accessible to members of the interdisciplinary care team. Each entry shall be legible, dated and authenticated.

(4) The originals or durable, legible direct copies of original reports shall be filed in the patients individual clinical record.

(5) Diagnosis, abbreviations, and terminology shall be consistent with the most recent edition of the International Classification of Diseases.

(6) There shall be a master patient index.

(7) Procedures related to retention, preservation or final disposal of clinical records and other patient care data and reports shall include the following:

(a) The clinical record of each patient over the age of eighteen years shall be retained and preserved for a period of no less than ten years. Clinical records of patients under the age of eighteen shall be retained and preserved for at least ten years or until the patient attains the age of twenty-one whichever is the longer period of time;

(b) Final disposal of any patient clinical record, or other reports which permit identification of the individual shall be accomplished so that retrieval and subsequent use of the data contained therein are impossible;

(c) In event of a transfer of ownership or operation of a hospice care center, clinical records of the patients, indices and reports shall be retained and preserved by the new operator in accordance with subsections (2)(a), (b), and (3) of this section;

(d) If the hospice care center ceases operation, it shall make arrangements for preservation of its clinical records and reports of patient data in accordance with subsection (3) of this section. The plan for such arrangements shall have been approved by the department prior to the cessation of operation.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-321-045, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 81-23-003 (Order 218), § 248-21-045, filed 11/6/81.]

WAC 246-321-050 Physical environment and equipment. (1) The hospice care center shall provide a safe and clean environment for clients, staff, and visitors. Equipment shall be kept clean, calibrated, adjusted, and in good repair.

(2) The hospice care center shall be accessible and equipped to accommodate physically handicapped individuals, to include minimally:

(a) Corridors serving as egress from patient rooms eight feet wide;

(b) Corridors elsewhere in the center minimally four feet wide;

(c) Doorways for use by clients at least thirty-two inches clear width (thirty-four inch door);

(d) Doorways for patient rooms and exterior exit doors from eight foot corridors forty-four inches clear width, (forty-six inch door);

(e) Minimally, one toilet, lavatory, and bathing facility which meet barrier free code, on each floor used for client services;

(f) Stairways and stairwells shall be minimally forty-four inches clear width;

(i) Interior and exterior stairways and stairwells shall have handrails on both sides. Railing ends shall be returned to wall;

(ii) Exterior stairways and stairwells shall have adequate protection from moisture, ice, other hazards, and slipping.

(iii) Exterior steps shall be equipped with nonslip material on treads; open risers are prohibited; nosing shall be flush, slip resistant and rounded to one-half inch maximum radius.

(g) Ramps shall be minimally forty-four inches clear width;

(i) There shall be handrails on both sides;

(ii) Ramps shall not exceed slope ratio of one in twelve;

(iii) Ramps shall be provided with nonslip surfaces.

(3) There shall be provision for adequate personal privacy for personal and private activities such as toileting, bathing, dressing, sleeping, communicating with family and time alone.

(4) Patient rooms:

(a) Each patient room shall be directly accessible from a corridor or common use activity room or an area for patients;

(b) Each sleeping room shall have a clear window or relite area of approximately one-tenth of the usable floor area providing for patient visibility of the out-of-doors. A court or glass covered atrium may be equivalent to out-of-doors. Distance from relites to exterior windows or atrium relites shall not exceed eight feet, six inches.

(i) Windows shall be at least twenty-four feet from other buildings or the opposite wall of a court or at least ten feet from a property line, except on street sides;

(ii) If the depth of a court is less than one-half its width, the width requirement shall not apply.

(iii) Outside window walls shall be at least eight feet from outside public walkways.

(iv) Operable windows or openings that serve for ventilation shall be provided with screening.

(c) No room more than two foot six inches below grade shall be used for the housing of patients. Room size shall be determined by program, provided all patient rooms have at least one hundred square feet of usable floor space in each single patient room. Multipatient rooms shall provide not less than eighty-five square feet of usable floor area per bed. There shall not be less than seven and one-half foot ceiling height over the usable floor area;

(d) Each patient shall be provided an enclosed space suitable for hanging garments and storage of personal belongings within his or her room or nearby. There shall be provision for secure storage of patient valuables;

(e) Each patient shall be provided a bed appropriate to the special needs and size of the patient with a cleanable

mattress which is in good repair and a cleanable or disposable pillow;

(f) Room furnishings shall be provided and maintained in a clean and safe condition;

(g) Patient beds shall be spaced so that they do not interfere with entrance, exit or traffic flow within the room. Patient rooms shall be of a dimension and conformation allowing not less than three feet between beds.

(5) There shall be, minimally, one bathing facility for each six patients within the center, or major fraction thereof, (tub, shower, portable shower, portable tub or equivalent). This ratio includes the bathing facility described in WAC 246-321-050 (2)(e).

(6) Toilets shall be in a ratio of at least one toilet for every four patients, or major fraction thereof. This ratio excludes toilet described in WAC 246-321-050 (2)(e).

(7) Lavatories shall be provided in a ratio of at least one lavatory for each toilet located in toilet room(s). Lavatories shall be provided in a ratio of at least one per four patients. Lavatories shall be located at entry of patient rooms used for isolation.

(8) At least one toilet and lavatory shall be provided on each floor for use by those who are not patients. This may include toilet and lavatory described in WAC 246-321-050 (2)(e).

(9) Carpets may be used in patient and nonpatient occupied areas with the following exceptions; toilet rooms, bathing facilities, isolation rooms, laundry rooms, utility rooms; examination or treatment rooms, housekeeping closets;

(a) Specifications for acceptable carpeting include:

(i) Carpet material which meets the standards of the state fire marshal and is easily cleanable;

(ii) Pile tufts shall be a minimum of sixty-four per square inch or equivalent density;

(iii) Rows shall be a minimum of eight per square inch or equivalent density;

(b) Installation of carpet material.

(i) Pad and carpet shall be installed according to manufacturer recommendations;

(ii) Edges of carpet shall be covered and cove or base shoe used at all wall junctures. Seams shall be sewn or bonded together with manufacturer recommended cement.

(10) There shall be adequate visiting and lounge areas provided, excluding hallways and corridors. Ratio of fifteen square feet per patient bed and not less than one hundred eighty square feet per facility recommended, excluding hallways and corridors.

(11) There shall be adequate meeting rooms and office areas for use by the interdisciplinary care team. Other rooms or areas may serve as meeting rooms provided confidentiality is maintained.

(12) Linen and laundry:

(a) A safe and adequate clean linen storage area shall be provided with a supply of clean linen available for patients use;

(b) Any laundry done in the facility shall be done in a laundry room separate from the kitchen, dining areas, clean and soiled storage and handling areas;

(c) The soiled laundry storage and sorting area shall be in a well ventilated area separate from the clean linen handling area, clean storage areas, and food preparation

areas. If linen or laundry is washed on the premises, an adequate supply of hot water shall be available to provide water at a minimum of one hundred sixty degrees Fahrenheit in the washing machine.

(13) Utility and storage facilities:

(a) Sufficient clean storage and handling room(s) shall provide closed storage for clean and sterile supplies and equipment;

(b) Washing, disinfection, storage and other handling of medical and nursing supplies and equipment shall be accomplished in a manner which ensures segregation of clean and sterile supplies and equipment from those that are contaminated;

(c) Soiled room(s) shall provide:

(i) Clinic service sink, siphon jet or equivalent;

(ii) Space for soiled linen or laundry containers;

(iii) Counter top, double compartment sink, and goose-neck spout or equivalent;

(iv) Storage for cleaning supplies and equipment.

(14) Housekeeping:

(a) Adequate and clean housekeeping equipment shall be maintained;

(b) At least one service sink and housekeeping closet or enclosed cabinet equipped with shelving shall be provided in a suitable setting within the facility. May be combined with a soiled room as described in subsection (13)(c) of this section. Clinic service sink may be considered equivalent to service sink.

(15) Communications:

(a) There shall be a telephone readily available for patients to make and receive confidential calls;

(b) There shall be at least one "nonpay" telephone per floor readily accessible in event of fire and other emergencies.

(c) A nurse call shall be provided at each bed and in each toilet room and bathing facility.

(16) Appropriate first aid supplies and equipment shall be maintained and available in a safe and sanitary location.

(17) Water supply and plumbing. The water supply plumbing, the fixtures and the waste and drainage system of the hospice care center shall be maintained to avoid insanitary conditions:

(a) There shall be an adequate supply of hot and cold running water under pressure which conforms with chapter 246-290 WAC;

(b) Hot water shall be a safe temperature at all fixtures used by patients. Hot water temperatures at bathing fixtures used by patients shall be automatically regulated so as not to exceed one hundred and twenty degrees Fahrenheit;

(c) There shall be devices to prevent backflow into the water supply system from fixtures where extension hoses or other cross connections may occur.

(18) Heating. Heating systems shall be operated and maintained to provide a comfortable, healthful temperature in rooms used by patients during the coldest weather conditions ordinarily encountered in the geographical location of the hospice care center.

(19) Ventilation. There shall be ventilation of all rooms used by patients and personnel sufficient to remove all objectional odors, excess heat, and condensation. Inside rooms including toilets, bathrooms, smoking rooms, and other rooms in which excessive moisture, odors or contami-

nants originate shall be provided with mechanical exhaust ventilation.

(20) Lighting, wiring, and power. Adequate lighting shall be provided in all usable areas of the hospice care center, appropriate to the function:

(a) Appropriate, adequate, and safe electrical service shall be provided;

(b) Adequate emergency lighting for means of egress, (battery operated acceptable);

(c) Adequate emergency power available, (battery operated acceptable).

[Statutory Authority: RCW 43.70.040. 92-02-018 (Order 224), § 246-321-050, filed 12/23/91, effective 1/23/92; 91-02-049 (Order 121), recodified as § 246-321-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050. 81-23-003 (Order 218), § 248-21-050, filed 11/6/81.]

WAC 246-321-055 Nonflammable medical gases—Respiratory care. (1) Nonflammable medical gases shall include but not be limited to oxygen, nitrous oxide, medical compressed air, carbon dioxide, helium, nitrogen, and mixtures of such gases when used for medical purposes.

(2) When nonflammable medical gases are stored or used on the premises, the following shall apply:

(a) Electric equipment used in an oxygen enriched environment shall be properly designed for use with oxygen and should be labeled for use with oxygen;

(b) "No smoking" signs shall be posted where oxygen is being administered;

(c) Procedures shall specify the safe storage and handling of medical gas containers.

(3) When piped-in medical gas systems are provided, the facility shall comply with published standards of National Fire Protection Association 56-F, 1977.

(4) Equipment and instruments used for respiratory care shall be safe, functional, and appropriate for the respiratory care service provided.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-321-055, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050. 81-23-003 (Order 218), § 248-21-055, filed 11/6/81.]

WAC 246-321-990 Fees. Hospice care centers shall include a license fee of three hundred dollars with each application for a license.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-321-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-322 WAC

PRIVATE PSYCHIATRIC AND ALCOHOLISM HOSPITALS

WAC

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WAC 246-322-010 Definitions. For the purposes of these rules and regulations for private psychiatric and alcoholism hospitals, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise:

(1) "Abuse" means the injury or sexual abuse of an individual patient by a person who is legally responsible for the welfare of that patient under circumstances which indicate that the health, welfare and safety of the patient is harmed thereby.

Person "legally responsible" shall include a parent, guardian or an individual to whom parental or guardian responsibility has been delegated, (e.g., teachers, providers of residential care and/or treatment, providers of day care).

(a) "Physical abuse" means damaging or potentially damaging nonaccidental acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal behavior, harassment or other actions which may result in emotional or behavioral problems, physical manifestations, disordered or delayed development.

(2) "Administrator" means the individual appointed as chief executive officer by the governing body of the facility to act in its behalf in the overall management of the hospital.

(3) "Alcoholic patient" means an individual demonstrating signs or symptoms of alcoholism.

(4) "Alcoholism" means a chronic, progressive, potentially fatal disease characterized by tolerance and physical dependency, pathological organic changes, or both, all of which are the consequences of alcohol ingestion.

(a) "Chronic and progressive" means that physical, emotional and social changes that develop are cumulative and progress as drinking continues.

(b) "Tolerance" means physiological adaptation to the presence of high concentration of alcohol.

(c) "Physical dependency" means that withdrawal symptoms occur from decreasing or ceasing ingestion of alcohol.

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

(6) "Authenticated" or authentication means authorization of a written entry in a record or chart by means of a signature which shall include, minimally, first initial, last name and title.

(7) "Bathing facility" means a bathtub or shower.

(8) "Child psychiatrist" means a psychiatrist who is certified in child psychiatry by the board of psychiatry and neurology or board eligible.

(9) "Clinical record" means a file containing all pertinent clinical information about a particular patient to include: Identifying information, data bases, assessment, individualized comprehensive treatment plan, diagnosis and treatment, progress notes, other clinical events and a discharge summary.

(10) "Clinical staff" means qualified individuals, licensed when applicable, appointed by the governing body to practice within the parameters of the clinical staff bylaws as approved by the governing body of the hospital.

(11) "Corporal punishment" means punishment or negative reinforcement accomplished by direct physical contact regardless of whether or not damage is inflicted.

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

(13) "Detoxified" means withdrawn from alcohol and/or associated substance use and recovered from the transitory effects of intoxication and any associated acute physiological withdrawal reaction.

(14) "Detoxification" means the process in which an individual recovers from the transitory effects of intoxication and/or any associated physiological withdrawal reaction.

(15) "Dietitian" means an individual who is eligible for membership in the American Dietetic Association.

(16) "Discipline" means reasonable actions by personnel and staff aimed at regulation of unacceptable behavior.

(17) "Drug administration" means an act in which a single dose of prescribed drug or biological is given to a patient by an authorized person in accordance with all laws and regulations governing such acts. The complete act of administration entails removing an individual dose from a previously dispensed, properly labeled container, verifying it with the physician's order, giving the individual dose to the proper patient, and properly recording the time and dose given.

(18) "Drug dispensing" means an act entailing the interpretation of an order (prescription) for a drug or biological and, pursuant to that order (prescription), proper selection, measuring, labeling, packaging, and issuance of the drug for a patient or for a service unit of the facility.

(19) "Family" means individuals who are important to and designated by a patient, who need not be relatives.

(20) "Governing body" means the individual or group legally responsible for operation and maintenance of the hospital.

(21) "Grade" means the level of the ground adjacent to the building measured at required windows. The ground must be level or slope downward for a distance of at least ten feet from the wall of the building. From there the ground may slope upward not greater than an average of one foot vertical to two feet horizontal within a distance of eighteen feet from the building.

(22) "Individualized treatment plan" means a written statement of care to be provided for a patient based upon assessment of his/her strengths and problems. This statement shall include short-term and long-term goals with an estimated time frame stipulated and shall include discharge planning. When appropriate, the statement shall be developed with participation of the patient.

(23) "Intoxication" means acute poisoning or temporary impairment of an individual's mental and/or physical functioning caused by alcohol and/or associated substance use.

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

(25) "Lavatory" means a plumbing fixture designed and equipped for handwashing purposes.

(26) "Legend drug" means any drug which is required by an applicable state or federal law or regulation to be

dispensed on prescription only or is restricted to use by practitioners only.

(27) "Licensed pharmacy" means a pharmacy licensed by the state board of pharmacy and a place where the practice of pharmacy is conducted.

(28) "Medical staff" means physicians and other medical practitioners appointed by the governing body to practice within the parameters of the medical staff bylaws within the hospital.

(29) "Multidisciplinary treatment team" means a group comprised of individuals from the various clinical services who assess, plan, implement and evaluate treatment for patients under care.

(30) "Neglect" means negligent treatment or maltreatment: An act or omission which evinces a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to an individual patient's health, welfare and safety.

(a) "Physical neglect" means physical or material deprivation (e.g., lack of medical care, lack of supervision necessary for patient level of development, inadequate food, clothing or cleanliness).

(b) "Emotional neglect" means acts such as rejection, lack of stimulation or other acts of commission or omission which may result in emotional or behavioral problems, physical manifestations and disordered development.

(31) "New construction" means any of the following started after promulgation of these rules and regulations:

(a) New building(s) to be used as a part of the hospital.

(b) Addition(s) to existing hospital(s) to be used as part of the hospital(s).

(c) Alteration(s) or modification(s) other than minor alteration(s) to a hospital. "Minor alterations" means any structural or functional modification within the existing hospital which does not change the approved use of the room or area. Minor alterations performed under this definition do not require prior approval of the department, however, this does not constitute a release from the applicable requirements contained in chapter 248-16 WAC.

(32) "Occupational therapist" means a person eligible for certification as a registered occupational therapist by the American occupational therapy association.

(33) "Owner" means an individual, firm or joint stock association or the legal successor thereof who operates the hospital whether owning or leasing the premises.

(34) "Pharmacist" means an individual who is licensed by the state board of pharmacy to engage in the practice of pharmacy under the provisions of chapter 18.64 RCW, as now or hereafter amended.

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

(36) "Prescription" means the written or oral order for drugs issued by a duly licensed medical practitioner in the course of his/her professional practice, as defined by Washington state statute, for legitimate medical purposes (RCW 18.64.011(8)).

(37) "Private alcoholism hospital" means an institution, facility, building or equivalent designed, organized, maintained and operated to provide diagnosis, treatment and care of individuals demonstrating signs or symptoms of alcoholism, including the complications of associated substance use and other medical diseases that can be appropriately treated

and cared for in the facility and providing accommodations, medical services and other necessary services over a continuous period of twenty-four hours or more for two or more individuals unrelated to the operator, provided that this chapter shall not apply to any facility, agency or other entity which shall be both owned and operated by a public or governmental body.

(38) "Private psychiatric hospital" means an institution, facility, building or agency specializing in the diagnosis, care and treatment of individuals demonstrating signs and/or symptoms of mental disorder (as defined in RCW 71.05.020(2)) and providing accommodations and other necessary services over a continuous period of twenty-four hours or more for two or more individuals not related to the operator, provided that this chapter shall not apply to any facility, agency or other entity which shall be both owned and operated by a public or governmental body.

(39) "Psychiatrist" means a physician who has successfully completed a three-year residency program in psychiatry and is eligible for certification by the American board of psychiatry and neurology.

(40) "Psychologist" means an individual who is licensed as a psychologist in the state of Washington under provisions of chapter 18.83 RCW, as now or hereafter amended.

(41) "Recreational therapist" means an individual with a bachelor's degree with a major or option in therapeutic recreation or in recreation for ill and handicapped.

(42) "Registered nurse" means an individual duly licensed under the provisions of the law regulating the practice of registered nursing in the state of Washington, chapter 18.88 RCW, as now or hereafter amended.

(43) "Restraint" means any apparatus or chemical used for the purpose of preventing or limiting volitional body movements.

(44) "Scheduled drugs" means those drugs, substances or immediate precursors controlled under Article II of the Uniform Controlled Substances Act, chapter 69.50 RCW.

(45) "Seclusion room" means a small secure room specifically designed and organized to provide for temporary placement, care and observation of one patient and further, providing an environment with minimal sensory stimuli, maximum security and protection and visualization of the patient by authorized personnel and staff.

(a) Inside or outside rooms are acceptable for seclusion.

(b) Doors of seclusion rooms shall be provided with locks. There shall be relites in the door, or equivalent, affording visibility of the occupant at all times.

(c) Seclusion room shall provide at least eighty square feet of floor space, exclusive of fixed equipment, with a minimum room dimension of eight feet.

(46) "Security room" means a patient sleeping room designed, furnished and equipped to provide maximum safety and security. This room shall be provided with window protection or security windows and a lockable door with provision for observation of the occupant(s).

(47) "Security window" means a window designed to inhibit exit, entry and injury to a patient. A "maximum security window" shall mean a window that can only be opened by keys or tools that are under control of personnel. The operation of the sash of the maximum security window shall be restricted to prohibit escape or suicide. Where glass

fragments may create a hazard, safety glazing and/or other appropriate security features shall be incorporated.

(48) "Self-administration" means those instances when a patient takes his/her own medication from a properly labeled container, while on the premises of the hospital, with the responsibility for appropriate use maintained by the hospital.

(49) "Shall" means compliance with the regulation is mandatory.

(50) "Should" means compliance with the regulation or rule is suggested or recommended but not required.

(51) "Social worker" means an individual with a master's degree in social work from an accredited school of social work.

(52) "Special services" means clinical and rehabilitative activities and/or programs which shall include but not be limited to: Educational and vocational training; speech, language, hearing, vision, dentistry, and physical therapy.

(53) "Toilet" means a room containing at least one water closet.

(54) "Water closet" means a plumbing fixture for defecation fitted with a seat and a device for flushing the bowl of the fixture with water.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-322-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-003 (Order 1898), § 248-22-001, filed 11/4/82. Statutory Authority: RCW 43.20.050. 81-02-004 (Order 205), § 248-22-001, filed 12/30/80; Regulation .22.001, effective 3/11/60.]

WAC 246-322-020 Licensure. Private psychiatric hospitals and private alcoholism hospitals for adults, adolescents, and children shall be licensed under chapter 71.12 RCW, Private establishments. The purpose of this section is to establish minimum standards for safety and adequate care of patients with signs and/or symptoms of acute emotional or psychiatric impairment or acute alcoholism and associated substance use during diagnosis and treatment.

(1) Application for license.

(a) An application for a private hospital license shall be submitted on forms furnished by the department. The application shall be signed by the legal representative of the governing body.

(b) The applicant shall furnish to the department full and complete information and promptly report any changes which would affect current accuracy of such information as to the identity of each officer and director of the corporation, if the hospital is operated by a legally incorporated entity, profit or nonprofit, and of each partner if the hospital is operated through a legal partnership.

(2) Disqualified applicants.

(a) Each and every individual named in an application for a license shall be considered separately and jointly as applicants and if anyone is deemed unqualified by the department in accordance with the law or these rules and regulations, the license may be denied, suspended, or revoked. A license may be denied, suspended, or revoked for failure or refusal to comply with the requirements established by chapter 71.12 RCW or with these rules and regulations promulgated pursuant thereto and, in addition, any of the following:

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

(ii) Aiding or abetting the commission of an illegal act on the premises of the hospital;

(iii) Cruelty, assault, abuse, neglect or indifference to the welfare of any patient;

(iv) Misappropriation of property of the patients; and

(v) Failure or inability to exercise fiscal accountability and responsibility toward the individual patient, the department, or the business community.

(b) Before granting a license to operate as a hospital, the department shall consider the ability of each individual named in the application to operate a hospital in accordance with the law and with these regulations. Individuals who have previously been denied a license to operate a health care facility in the state or elsewhere, or who have been convicted criminally or civilly of operating such a facility without a license, or who have had their license to operate such a facility suspended or revoked shall not be granted a license unless, to the satisfaction of the department, they affirmatively establish clear, cogent, and convincing evidence of their ability to operate the hospital for which the license is sought, and for conformance with all applicable laws and rules and regulations.

(3) Denial, suspension, modification, or revocation of a license; adjudicative proceeding.

(a) When the department determines that a facility has failed or refused to comply with the requirements of chapter 71.12 RCW and/or these rules, the department may, if the interests of the patients so demand, issue to the applicant or licensee a notice to deny a license application, or to suspend, modify, or revoke a license to a license holder. The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.20A.XXX and section 95, chapter 175, Laws of 1989. An applicant or license holder has the right to an adjudicative proceeding to contest a license decision.

(b) A license applicant or holder contesting a department license decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Office of Appeals, P.O. Box 2465, Olympia, WA 98504; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 248-08 WAC. If a provision in this chapter conflicts with chapter 248-08 WAC, the provision in this chapter governs.

(4) Submission of plans. The following shall be submitted with an application for license: *Provided, however*, That when any of the required plans are already on file with the department for previous applications for license or construction approval, only plans for portions or changes which are not on file need to be submitted.

(a) A plan showing streets, driveways, water and sewage disposal systems, the location of buildings on the site, and grade elevations within ten feet of any building in which patients are to be housed.

(b) Floor plans for each building in which patients are to be housed. The floor plans shall provide the following information: Identification of each patient's sleeping room by use of a lettering or numbering system; the useable square feet of floor space in each room; the clear glass window area in each patient's sleeping room, the height of the lowest portion of the ceiling in any patient's sleeping room; the floor elevations referenced to the grade level.

(5) Posting of a license. The license for the hospital shall be posted in a conspicuous place on the premises.

(6) New construction.

(a) When new construction is contemplated, the following shall be submitted to the department for review:

(i) A written program containing, at a minimum, information concerning services to be provided and operational methods to be used which will affect the extent of facilities required by these regulations;

(ii) Duplicate sets of preliminary plans which are drawn to scale and include: A plot plan showing streets, drive-ways, water and sewage disposal systems, grade and location of building(s) on the site; the plans for each floor of the building(s), existing and proposed, which designate the function of each room and show all fixed equipment. The preliminary plans shall be accompanied by a statement as to the source of the water supply and the method of sewage and garbage disposal and a general description of construction and materials, including interior finishes.

(b) Construction shall not be started until duplicate sets of final plans (drawn to scale) and specifications have been submitted to and approved by the department. Final plans and specifications shall show complete details to be furnished to contractors for construction of buildings. These shall include:

(i) Plot plans;

(ii) Plans for each floor of the building(s) which designate the function of each room and show all fixed equipment in the planned locations of beds and other furniture in patient's sleeping rooms;

(iii) Interior and exterior elevations, building sections and construction details;

(iv) A schedule of floors, wall and ceiling finishes, and the types and sizes of doors and windows; plumbing, heating ventilation and electrical systems; and

(v) Specifications which fully describe workmanship and finishes.

(c) Adequate provision shall be made for the safety and comfort of patients if construction work takes place in or near occupied areas.

(d) All construction shall take place in accordance with the approved final plans and specifications. The department shall be consulted prior to making any changes from the approved plans and specifications. As indicated by the nature or extent of proposed changes, the department may require the submission of modified plans or addenda for review prior to considering proposed change(s) for approval. Only those changes which have been approved by the department may be incorporated into the construction project shall be submitted for the department's file on the project, even though it was not required that these be submitted prior to approval.

(7) Compliance with other regulations.

(a) Rules and regulations adopted by the Washington state fire marshal under the provisions of RCW 71.12.485 which are found in Title 212 WAC apply.

(b) If there is no local plumbing code, the uniform plumbing code of the international association of plumbing and mechanical officials shall be followed.

(c) Compliance with these regulations does not exempt private hospitals from compliance with the local and state electrical codes or local zoning, building, and plumbing codes.

(8) Transfer of ownership. The ownership of a hospital shall not be transferred until the transferee has been notified by the department that the transferee's application for license has been approved. Change in administrator shall be reported to the department.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-322-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 1989 1st ex.s. c 9 § 106, 90-06-019 (Order 039), § 248-22-005, filed 2/28/90, effective 3/1/90. Statutory Authority: Chapter 71.12 RCW, 82-23-003 (Order 1898), § 248-22-005, filed 11/4/82. Statutory Authority: RCW 43.20.050, 81-02-004 (Order 205), § 248-22-005, filed 12/30/80.]

WAC 246-322-040 Governing body and administration. (1) The hospital shall have a governing body which is responsible for the overall operation and maintenance of the hospital, including adoption of written personnel policies and written policies for safety, care and treatment of patients.

(2) The governing body shall be responsible for the provision of personnel, facilities, equipment, supplies and special services to meet the needs of the patients.

(3) The governing body shall appoint an administrator who shall be responsible for implementing the policies adopted by the governing body.

(4) The governing body shall establish and maintain a current written organizational plan which includes all positions and delineates responsibilities, authority and relationships of positions within the hospital.

(5) Governing body bylaws, in accordance with legal requirements, shall be adopted by the governing body, reviewed biennially and revised as necessary.

(6) The governing body shall have the authority and responsibility for the appointment and reappointment of the medical and clinical staff. This authority may be delegated.

(a) Each private alcoholism hospital shall have a medical director who is a physician preferably with training and/or experience in alcoholism and associated substance use. Each private psychiatric hospital shall have a medical director who is a psychiatrist. The medical director shall have twenty-four hour accountability and responsibility for directing and supervising medical care and medical treatment of patients.

(b) The governing body shall keep on file evidence that each practitioner appointed to the medical or clinical staff has appropriate, current qualification and, when required by Washington state law, a current license to practice and/or certification as required.

(c) The medical and clinical staff shall develop bylaws, rules and regulations subject to approval by the governing body. These bylaws and rules shall include requirements for medical and clinical staff membership, delineation of clinical privileges and organization of the medical and clinical staff.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-322-040, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW, 82-23-003 (Order 1898), § 248-22-011, filed 11/4/82. Statutory Authority: RCW 43.20.050, 81-02-004 (Order 205), § 248-22-011, filed 12/30/80.]

WAC 246-322-050 Personnel—Volunteers—Research. (1) There shall be sufficient, qualified personnel to provide the services needed by the patients and to maintain the hospital.

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

(b) There shall be a personnel record system and a current personnel record for each employee to include application for employment, verification of education or training when required, a record of verification of a valid, current license for any employee for whom licensure is required and an annual written performance evaluation.

(c) A planned, supervised and documented orientation, including employee responsibility regarding patient rights, patient discipline and patient abuse shall be provided for each new employee. (See WAC 248-22-021(7)).

(d) There shall be an ongoing inservice education program which is documented and affords each employee the opportunity to maintain and update the competencies needed to perform assigned duties and responsibilities. Cardiopulmonary resuscitation training shall be provided. Employees who work with patients should have first aid training.

(2) When volunteer services are provided or permitted within the hospital, the following shall apply:

(a) Volunteer services and activities shall be coordinated by a designated, qualified employee of the hospital.

(b) There shall be appropriate, documented orientation and training provided for each volunteer in accordance with the service or job to be performed which shall include patient rights.

(c) There shall be supervision and periodic written evaluation by qualified hospital personnel of volunteers who work directly with patients.

(3) Research and human subjects review committee. When research is proposed or conducted which involves patients, there shall be a documented multidisciplinary initial and continuing review process.

(a) The purpose of this review shall be to protect the patient's rights with acceptance or rejection and continuing review for the duration of the study.

(b) Policies and procedures of the committee shall reflect Title 42 Code of Federal Regulations, Part 2.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-322-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW, 82-23-003 (Order 1898), § 248-22-016, filed 11/4/82. Statutory Authority: RCW 43.20.050, 81-02-004 (Order 205), § 248-22-016, filed 12/30/80.]

WAC 246-322-060 HIV/AIDS education and training. Private psychiatric and alcoholism hospitals shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual

Know - HIV/AIDS Prevention Education for Health Care Facility Employees, May 31, 1989, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-322-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310, 89-21-038 (Order 3), § 248-22-017, filed 10/12/89, effective 11/12/89.]

WAC 246-322-070 Patient care services. (1) Each hospital shall have written policies regarding admission criteria and treatment methods. Admission and retention of patients shall be in keeping with the stated policies and shall be limited to patients for whom the facility is qualified by staff, services and equipment to give adequate care. When alcoholic patients are admitted and retained in psychiatric hospitals, all rules and regulations specific to alcoholism hospitals shall apply.

(2) Treatment and discharge planning.

(a) Private psychiatric hospital treatment and discharge planning shall include:

(i) An initial treatment plan for each patient upon admission to the hospital.

(ii) A written, comprehensive, individualized, treatment plan developed for each patient within seventy-two hours of admission. This plan shall be implemented, reviewed and modified as indicated by the clinical course of the patient. The individualized treatment plan and revisions shall be interpreted to the personnel, staff and patient and to the family when possible and appropriate.

(iii) There shall be participation of the multidisciplinary treatment team in treatment and discharge planning and participation of patient, family and/or guardian when possible and appropriate.

(b) Private alcoholism hospital treatment and discharge planning shall include:

(i) A written, comprehensive, individualized treatment plan developed for each patient not requiring detoxification within seventy-two hours of admission or seventy-two hours following completion of detoxification of a patient. This plan shall be implemented, regularly reviewed, and modified as indicated by the clinical course of the patient.

(ii) There shall be participation of the multidisciplinary treatment team in treatment and discharge planning. There should be participation of patient, family, and/or guardian when possible and appropriate.

(3) Clinical services. Clinical services shall be prescribed by the attending physician or other appropriate clinical staff.

(a) Private alcoholism hospital clinical services shall include but not be limited to, provision of physiological care, collection of social data, alcohol and associated substance use education, direct therapeutic services and activities, and development of referral procedures to community resources.

(b) Private psychiatric hospital clinical services shall include, but not be limited to, provision of physiological care, emotional care, social services, direct therapeutic services and activities, health education, development of community resources, and referral procedures.

(4) Private psychiatric hospital specific service requirements shall include the following:

(a) Medical services. Each patient in a private psychiatric hospital shall be admitted by a member of the medical staff as defined by the staff bylaws.

(i) A staff psychiatrist shall be available for consultation daily and make visits as necessary to meet the needs of each patient.

(ii) There shall be an initial health assessment by a qualified person upon admission. There shall be a comprehensive health assessment and medical history completed and recorded by a physician within forty-eight hours after admission unless a comprehensive health assessment and medical history has been done within fourteen days prior to admission and the information is recorded in the clinical record.

(iii) A psychiatric evaluation, including provisional diagnosis, shall be completed and documented for each patient within seventy-two hours following admission.

(iv) There shall be orders signed by a physician for drug prescriptions, medical treatments and discharge.

(v) There shall be a physician on call at all times. Provisions shall be made for emergency medical services when needed.

(vi) When hospital policy permits admission of children and/or adolescents, a child psychiatrist shall be available for regular consultation.

(b) Nursing services. There shall be a director of nursing who is a registered nurse employed full time who shall be responsible for nursing services twenty-four hours per day.

(i) The director of nursing shall have, at least, a bachelor's degree and experience in working with psychiatric patients or there shall be documented evidence of regular consultation with a registered nurse who has a masters degree in psychiatric nursing.

(ii) There shall be a registered nurse on duty within the hospital at all times who shall supervise nursing care.

(c) Social work services. There shall be a social worker with experience in working with psychiatric patients responsible for supervision and coordination of social work service staff, review of social work activities and integration of social work services into treatment.

(d) Psychological services. There shall be a psychologist, who should provide documented evidence of skill and experience in working with psychiatric patients, responsible for supervision and coordination of psychological services.

(e) Occupational therapy services. There shall be available an occupational therapist who has experience in working with psychiatric patients and who shall be responsible for the occupational therapy functions and for the integration of these into the individualized treatment plans.

(f) Recreational therapy services. There shall be available a recreational therapist who has experience in working with psychiatric patients and who shall be responsible for the recreational therapy functions and for the integration of these into the individualized treatment plans.

(5) Private alcoholism hospital specific service requirements shall include the following:

(a) Medical services. Each patient in a private alcoholism hospital shall be admitted by a physician and receive continuing care from a member of the medical staff.

(i) There shall be an initial health assessment by a qualified person upon admission. There shall be a compre-

hensive health assessment and medical history completed and recorded by a physician within forty-eight hours after admission or within seventy-two hours after completion of detoxification.

(ii) There shall be a physician on call at all times. Provisions shall be made for emergency medical services when needed.

(b) Nursing services. There shall be a director of nursing who is a registered nurse, preferably with experience and/or training in alcoholism and associated substance use, employed full time who shall be responsible for nursing services twenty-four hours per day.

(i) The director of nursing shall be responsible for appropriate nursing assessment and implementation of nursing elements of the individualized treatment plan.

(ii) There shall be a registered nurse on duty within the hospital at all times who shall supervise nursing care.

(c) Alcoholism counseling services. There shall be on staff at least one full-time alcoholism counselor and such additional alcoholism counselors as necessary to provide the alcoholism counseling services needed by patients.

(6) Private psychiatric and private alcoholism hospitals shall make provisions for special services. These services shall be provided within the facility or contracted outside the facility to meet the needs of patients and shall be prescribed by a staff physician or other appropriate clinical staff. Special services shall be provided by qualified individuals.

(7) General patient safety and care requirements.

(a) Patient rights shall be described in policy and reflected in care as described in chapter 71.05 RCW and in WAC 275-55-170, 275-55-200(1), 275-55-050, 275-55-260, 275-55-270, and 275-55-288.

(b) Disciplinary policies and practices shall be stated in writing.

(i) Discipline shall be related to the behavior of the patient, the responsibility of the multidisciplinary treatment team, and documented in the clinical record.

(ii) Corporal punishment shall not be used.

(iii) Discipline shall not be prescribed or administered by patients.

(c) Seclusion and restraints, when used, shall be used in accordance with WAC 275-55-280 (2)(o), (p)(i), (ii), (iii), (iv). There shall be documentation in the clinical record of observation and assessment of patient needs every fifteen minutes during restraint or seclusion with intervention as indicated.

(d) Patients shall be protected from assault, abuse and neglect.

(i) Suspected or alleged incidents of nonaccidental injury, sexual abuse, assault, cruelty or neglect of a patient shall be reported to the department or to a law enforcement agency, within provisions of applicable state or federal statute (see chapter 71.05 RCW and Title 42 Code of Federal Regulations, Part 2).

(ii) Reporting requirements for suspected incidents of child abuse and/or neglect shall comply with chapter 26.44 RCW.

(e) Each patient's personal property and valuables left on deposit with the facility shall be properly recorded.

(f) Patients shall not be used for basic maintenance of the facility and/or equipment, housekeeping, or food service. Tasks may be performed under direct supervision insofar as

they are included in and appropriate to the individualized treatment plan and documented as part of the treatment program. Work assignments shall be appropriate to the age, physical and mental condition of the patient.

(g) There shall be current written policies and orders signed by a physician to guide the action of personnel when medical emergencies or threat to life arise and a physician is not present.

(i) Emergency medical policies shall be reviewed annually and revised as needed in writing, by representatives of the medical, nursing and administrative staffs.

(ii) There shall be a current transfer agreement with an acute care general hospital. Relevant data shall be transmitted with the patient in the event of a transfer.

(h) Written policies and procedures shall address immediate notification of legal guardian or next-of-kin in the event of a serious change in the patient's condition, transfer of a patient to another facility, elopement, death or when unusual circumstances warrant (see Title 42 Code of Federal Regulations, Part 2).

(i) There shall be written policies and procedures addressing safety precautions to include:

(i) Smoking by personnel, patients, visitors and others within the facility.

(ii) Provision for immediate emergency access to sleeping rooms, toilets, showers, bathrooms or any other rooms occupied by patients.

(iii) Availability and access to emergency supplies and equipment to include airways, bag resuscitators, intravenous fluids, oxygen, appropriate sterile supplies, and other equipment as identified in the emergency medical policies.

(iv) The summoning of internal or external resource agencies and/or persons (e.g., poison center, fire department, police).

(v) Systems for routine preventive maintenance, checking and calibration of electrical, biomedical and therapeutic equipment with documentation of the plan and dates of inspection.

(vi) Fire and disaster plans which include documentation of rehearsals on a regular basis.

(vii) Immediate actions or behaviors of facility staff when patient behavior indicates that he/she is assaultive, out of control or self-destructive. There shall be documentation of rehearsals by staff on a regular basis and an attendance record shall be maintained.

(j) There shall be written policies and procedures governing actions to be taken following any accident or incident which may be harmful or injurious to a patient and which shall include documentation in the clinical record.

(k) There shall be written policies and procedures addressing transportation of patients for hospital connected business or programs.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-322-070, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-003 (Order 1898), § 248-22-021, filed 11/4/82. Statutory Authority: RCW 43.20.050. 81-02-004 (Order 205), § 248-22-021, filed 12/30/80.]

WAC 246-322-080 Food and dietary services. (1) There shall be an individual designated to manage and supervise food and dietary services who shall assume twenty-four hour per day responsibility. Personnel from

dietary or food service shall be present in the hospital during all meal times.

(2) The dietary service shall incorporate the ongoing input of a dietitian. Adequate nutritional and dietary consultation services shall be provided by a dietitian.

(3) At least three meals a day shall be served at regular intervals with not more than fourteen hours between the evening meal and breakfast. Meals shall be prepared and served under the supervision of food service personnel.

(4) Meals and nourishment shall provide a well balanced diet of food of sufficient quantity and quality to meet the nutritional needs of the patients. Unless contraindicated, the dietary allowances of the food and nutrition board of the National Research Council, adjusted for age, sex and activities shall be used. Snacks of nourishing quality shall be available as needed for patients and posted as part of the menu.

(5) There shall be written medical orders for all therapeutic diets served to patients. Therapeutic diets shall be prepared and served as prescribed. A current therapeutic diet manual, approved in writing by the dietitian and medical staff, shall be used for planning and preparing therapeutic diets.

(6) All menus shall be approved in writing by the dietitian, written at least one week in advance, posted in a location easily accessible to all patients, and retained for one year.

(7) Food service sanitation shall be governed by chapter 248-84 WAC.

(8) There shall be current written policies and procedures for food storage, food preparation, food service, scheduled cleaning of all food service equipment and work areas. A copy of the procedures shall be kept within the dietary service area and shall be available for reference by dietary personnel at all times.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-322-080, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-003 (Order 1898), § 248-22-026, filed 11/4/82. Statutory Authority: RCW 43.20.050. 81-02-004 (Order 205), § 248-22-026, filed 12/30/80.]

WAC 246-322-090 Pharmaceutical services. (1) Pharmacy services shall be available to provide drugs, supplies and to fill prescriptions within an appropriate interval. A pharmacist shall be responsible for coordinating and supervising pharmaceutical services.

(2) The hospital shall provide for the proper handling and storage of drugs and shall comply with federal and state laws controlling drugs and pharmacy operation.

(a) A pharmacist, in conjunction with representatives from nursing, medical and administrative staff, shall be responsible for developing written policies and procedures addressing all aspects of pharmaceutical services including: Procuring, prescribing, administering, dispensing and storage of medications; transcription of orders; use of standing orders; disposal of drugs; self-administration of medication; control or disposal of drugs brought into the facility by patients; and recording of drug administration in the clinical record.

(b) There shall be written orders signed by a physician for all medications administered to patients. There shall be an organized system which insures accuracy in receiving,

transcribing and implementing orders for the administration of medications.

(c) Drugs shall be dispensed only by practitioners licensed to dispense and administered only by practitioners licensed to administer drugs.

(d) Whether provided as floor stock, individual prescription supply or unit dose packaging, all drugs within the hospital shall be clearly and legibly labeled. The label shall include, at least, the drug name (trade and/or generic), drug strength and, if available, expiration date. Labeling shall comply with applicable state and federal drug labeling regulations.

(e) All medicines, poisons and chemicals kept in any department of the hospital shall be plainly labeled and stored in specifically designated, securely locked, well illuminated cabinets, closets or storerooms and made accessible only to authorized personnel. External medications shall be separated from internal medications.

(f) All prescription records shall be kept for five years. All records for Schedule II drugs shall be kept for three years.

(g) All Schedule II drugs in any department of the hospital except the pharmacy shall be checked by actual count of two licensed persons at least one time each shift. There shall be records of receipts, issuance and disposition of Schedule II drugs stored in the facility.

(3) Drugs brought into the hospital for patients use while in the hospital shall be specifically ordered by the attending physician. These drugs shall be checked by a pharmacist or physician to insure proper identification and lack of deterioration of the drug prior to administration.

(4) Purchase, storage and control of drugs shall be such as to prevent outdated, deteriorated, impure or improperly standardized drugs in the hospital.

(5) Profiles of drug use for each patient, while in the hospital, shall be maintained and utilized by the pharmacist in accordance with WAC 360-16-260.

(6) If a licensed pharmacy is maintained by the hospital, the pharmacy shall be organized, managed and equipped as described in chapter 360-16 WAC and there shall be:

(a) Provision for supervision of the pharmacy by pharmacists;

(b) Provision for adequate area which is secure, properly lighted and ventilated, and suitably equipped to carry out all pharmacy operations, including proper storage for all pharmaceuticals;

(c) Provision for only legally authorized members of the pharmacy staff to have access to the pharmacy stock of drugs, except that in a pharmacist's absence from the hospital, a registered nurse, designated by the hospital, may obtain from the pharmacy stock of drugs such drugs as are needed in an emergency, not available in floor supplies (excepting Schedule II drugs) and the nurse, not the pharmacist, becomes accountable for her/his actions. Only one registered nurse in a given shift shall have access to the pharmacy stock of drugs.

(i) A nurse shall leave in the pharmacy on a suitable form a record of any drugs removed. Such records shall be kept for three years.

(ii) The container from which the single dose was taken for drug administration purposes shall be left in order that it

may be properly checked by a pharmacist. Such records shall be kept for three years.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-322-090, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-003 (Order 1898), § 248-22-031, filed 11/4/82. Statutory Authority: RCW 43.20.050. 81-02-004 (Order 205), § 248-22-031, filed 12/30/80.]

WAC 246-322-100 Infection control. (1) There shall be written policies and procedures addressing infection control.

(2) Provisions shall be made for isolation of patients in accordance with the most recent edition of *Isolation Techniques for use in Hospitals, United States Department of Health, Education and Welfare*.

(3) There shall be a written policy related to reporting of communicable disease in accordance with chapter 248-100 WAC.

(4) Recognized standards of medical aseptic techniques including basic handwashing practices shall be followed in all direct personal care of patients.

(5) Methods for cleaning, disinfecting or sterilizing, handling and storage of all supplies and equipment shall be such as to prevent the transmission of infection.

(6) There shall be in effect a current system of discovering, reporting, investigating, and reviewing infections among patients and personnel with maintenance of records on such infections.

(7) Upon employment, each person shall have or provide documented evidence of a tuberculin skin test by the Mantoux method, unless medically contraindicated. When this skin test is negative (less than ten millimeters induration read at forty-eight to seventy-two hours), no further tuberculin skin tests shall be required. A positive skin test shall consist of ten millimeters of induration, or greater, read at forty-eight to seventy-two hours. Positive reactors shall have a chest x-ray within ninety days of the first day of employment. Exemptions and specific requirements are as follows:

(a) Those with a positive skin test who have completed a recommended course of preventive or curative treatment, as determined by the local health officer, shall be exempted from testing.

(b) Records of test results, x-rays or exemptions from such shall be kept by the facility.

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

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-322-100, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 83-10-079 (Order 1960), § 248-22-036, filed 5/4/83; 82-23-003 (Order 1898), § 248-22-036, filed 11/4/82. Statutory Authority: RCW 43.20.050. 81-02-004 (Order 205), § 248-22-036, filed 12/30/80.]

WAC 246-322-110 Clinical records. (1) The hospital shall have one well defined clinical record system, staff with demonstrated competence and experience or training in patient record administration, adequate facilities, equipment and supplies necessary to the development, maintenance, security, control, retrieval, analysis, use and preservation of patient care data.

(2) The hospital shall have current written policies and procedures related to the clinical record system which shall

meet requirements of Title 42 Code of Federal Regulations, Part 2, and shall include the following:

(a) Establishment of the format of the clinical record for each patient.

(b) Access to and release of data in clinical records. Policies shall address confidentiality of the information in accordance with Title 42 Code of Federal Regulations, Part 2 and RCW 71.05.390.

(c) Retention, preservation, and destruction of clinical records in accordance with Title 42 Code of Federal Regulations, Part 2 and RCW 71.05.390.

(3) There shall be an adequate clinical record maintained for every patient which is readily accessible for members of the treatment team. Each entry shall be legible, dated, authenticated, and in permanent form.

(4) There shall be one systematic method for identification of each patient's clinical record(s) in a manner which provides for ready identification, filing, and retrieval of all of the patient record(s).

(5) The originals or durable, legible, direct copies of original reports shall be filed in patient's individual clinical records.

(6) Diagnosis, abbreviations and terminology shall be consistent with the most recent edition of *The American Psychiatry Association Diagnostic and Statistical Manual of Mental Disorders and International Classification of Diseases*.

(7) In private psychiatric hospitals, the psychiatric condition of the patient shall be clearly described, including history of findings and treatment rendered for the specific psychiatric condition for which the patient is hospitalized.

In private alcoholism hospitals, the disease of alcoholism and associated substance use shall be clearly described, including history of findings and treatment rendered for the condition for which the patient is hospitalized.

(8) There shall be a master patient index.

(9) Procedures related to retention, preservation and final disposal of clinical records and other patient care data and reports shall include the following:

(a) The clinical record of each patient over the age of eighteen years shall be retained and preserved for a period of no less than ten years. Clinical records of patients under the age of eighteen years shall be obtained and preserved for at least ten years or until the patient attains the age of twenty-one, whichever is the longer period of time.

(b) Final disposal of any patient clinical record(s), indices, or other reports which permit identification of the individual shall be accomplished so that retrieval and subsequent use of data contained therein are impossible.

(c) In event of transfer or ownership of the hospital, patient clinical records, indices and reports shall remain in the facility and shall be retained and preserved by the new owner in accordance with subsections above. Records of patients with diagnosed alcoholism and/or substance use shall be handled as prescribed in Title 42, Code of Federal Regulations, Part 2.

(d) If the hospital ceases operation, it shall make arrangements for preservation of its clinical records, reports and patient data in accordance with subsections above and when appropriate, Title 42, Code of Federal Regulations, Part 2. The plan for such arrangements shall have been approved by the department prior to cessation of operation.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-322-110, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-003 (Order 1898), § 248-22-041, filed 11/4/82. Statutory Authority: RCW 43.20.050, 81-02-004 (Order 205), § 248-22-041, filed 12/30/80.]

WAC 246-322-120 Physical environment. (1) The hospital shall provide a safe and clean environment for patients, staff and visitors.

(a) There shall be current, written policies and procedures for maintenance and housekeeping functions.

(b) Routine and periodic maintenance and cleaning schedules shall be developed and maintained.

(2) The hospital shall be readily accessible to and equipped to accommodate physically handicapped individuals.

(3) A safely maintained outdoor recreation area shall be available for use of patients in private psychiatric hospitals.

(4) There shall be provision for adequate personal privacy for each patient during toileting, bathing, showering, and dressing.

(5) Patient sleeping rooms.

(a) Each sleeping room shall be directly accessible from a corridor or a common use activity room or an area for patients.

(b) Sleeping rooms shall be outside rooms with clear window area on the outside wall or approximately 1/8 of the usable floor area or more.

(i) When security rooms are provided, security or maximum security windows appropriate to the area and program shall be used.

(ii) Shatterproof glass or other clear, shatterproof materials shall be used in sleeping rooms used as security rooms.

(c) No room more than three feet six inches below grade shall be used for the housing of patients. There shall be at least 80 squared feet of usable floor space in a single bedroom and multipatient rooms shall provide not less than 70 square feet of floor area per bed. The maximum capacity shall not exceed four patients. There shall not be less than 7 1/2 feet ceiling height over the required floor area.

(d) Each patient shall be provided an enclosed space suitable for hanging garments and storage of personal belongings within her/his room or nearby. There shall be provision in the room or elsewhere for secure storage of patients' valuables.

(e) Each patient shall have access to his/her room except when contraindicated by the determination of the treatment team staff.

(f) Each patient shall be provided a bed at least 36 inches wide or appropriate to the special needs and size of the patient with a cleanable, firm mattress and cleanable or disposable pillow.

(g) Sufficient room furnishings shall be provided and maintained in a clean and safe condition.

(h) Patient beds shall be spaced so that they do not interfere with entrance, exit or traffic flow within the room. Patient rooms shall be of a dimension and conformation allowing not less than three feet between beds.

(6) Each patient occupied floor of the facility shall provide one toilet and lavatory for every six patients or fraction thereof.

(a) There shall be one bathing facility for each six patients or fraction thereof.

(b) Separate toilet and bathing facilities for each sex are required if the toilet facility contains more than one water closet or bathing facility. Such facilities shall provide doors and partitions for privacy.

(c) Grab bars shall be provided at each water closet and bathing facility.

(7) Adequate lighting shall be provided in all areas of the hospital.

(8) Ventilation.

(a) Ventilation of all rooms used by patients or personnel shall be sufficient to remove all objectionable odors, excessive heat or condensation.

(b) All inside rooms, including toilets, bathrooms, smoking rooms and other rooms in which excessive moisture, odors or contaminants originate shall be provided with mechanical exhaust ventilation.

(9) Heating. The heating system shall be operated and maintained to provide a comfortable, healthful temperature in rooms used by patients during the coldest weather conditions ordinarily encountered in the geographical location of the hospital.

(10) Water supply. There shall be an adequate supply of hot and cold running water under pressure which conforms with the standards of the state board of health, chapter 248-54 WAC. Hot water at all fixtures used by patients shall be at a safe temperature. Hot water temperature at bathing fixtures used by patients shall be automatically regulated so as not to exceed 110°F. There shall be devices to prevent backflow into the water supply system from fixtures where extension hoses or other cross connections may be used.

(11) Linen and laundry.

(a) A safe and adequate storage area with a supply of clean linen shall be provided.

(b) When laundry facilities are provided, they shall be located in an area separate from food preparation and dining area(s).

(c) The soiled laundry storage and sorting area(s) shall be in well ventilated area(s), separate from clean linen handling area(s). If linen/laundry is washed on the premises, an adequate supply of hot water shall be available to provide water at a minimum of 160°F in the washing machine.

(d) When commercial laundry service is used, the hospital shall ensure that all requirements above are met.

(e) Provision for laundering of personal clothing of patients shall meet the above standards.

(12) Visiting area. An adequate number of rooms shall be provided within the hospital to allow privacy for patients and visitors.

(13) Counseling/therapy rooms.

(a) An adequate number of rooms shall be provided for group or individual therapy programs.

(b) Therapy rooms shall be enclosed and reasonably soundproofed, as necessary to maintain confidentiality.

(c) Private psychiatric hospitals shall provide at least one seclusion room, intended for short term occupancy, which provides for direct supervision by the treatment staff. Each seclusion room shall have provisions for ventilation and light.

(14) Physical examination room. There shall be a physical examination room within the facility. An inside room may be used.

(a) The examination room shall be equipped with an examination table, examination light, and storage units for medical supplies and equipment.

(b) There shall be a handwashing facility and soap dispenser in or readily accessible to the examination room.

(15) Utility and storage facilities. There shall be sufficient utility and storage facilities which are designed and equipped for washing, disinfecting, storing and other handling of medical and nursing supplies and equipment in a manner which ensures segregation of clean and sterile supplies and equipment from those that are contaminated.

(16) Housekeeping facilities.

(a) At least one service sink and housekeeping closet equipped with shelving shall be provided in a suitable setting on each floor of the facility.

(b) All sewage, garbage, refuse and liquid waste shall be collected and disposed of in a manner to prevent the creation of an unsafe or unsanitary condition or a nuisance.

(17) There shall be designated charting area(s) which provides space for reading and charting in patient records and provides for maintenance of confidentiality of each record.

(18) Dining area. There shall be a dining area(s) for those patients wishing to eat in the dining area(s). Appropriate furnishings shall be provided for dining.

(19) Communications.

(a) There shall be a telephone readily available for patients to make and receive confidential calls.

(b) There shall be a "nonpay" telephone or equivalent communication device readily accessible on each patient occupied floor in event of fire or other emergencies.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-322-120, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-003 (Order 1898), § 248-22-046, filed 11/4/82. Statutory Authority: RCW 43.20.050. 81-02-004 (Order 205), § 248-22-046, filed 12/30/80.]

WAC 246-322-130 Laboratory services. Laboratory services shall be immediately available to or provided by the hospital. If the hospital maintains and operates a laboratory service within the facility, the following standards shall apply:

(1) Proficiency testing.

(a) The laboratory shall successfully participate in state-operated or state-approved proficiency testing programs covering all the specialties or subspecialties in which the laboratory is approved to perform tests. Records of proficiency testing performance shall be maintained and available for review.

(b) The clinical laboratory shall perform only those laboratory tests and procedures that are within the specialties or subspecialties in which the laboratory director or supervisors are qualified.

(2) Quality controls imposed and practiced by the laboratory must provide for and assure:

(a) Preventive maintenance, periodic inspection, and testing for proper operation of equipment and instruments as may be appropriate; validation of methods; evaluation of reagents and volumetric equipment; surveillance of results;

and remedial action to be taken in response to detected defects.

(b) Adequacy of facilities, equipment, instruments, and methods for performance of the procedures or categories of procedures for which a certification is approved; proper lighting for accuracy and precision; convenient location of essential utilities; monitoring of temperature-controlled spaces and equipment, including water baths, incubators, sterilizers and refrigerators, to assure proper performance; evaluation of analytical measuring devices, such as photometers and radioactivity counting equipment, with respect to all critical operating characteristics.

(c) Labeling of all reagents and solutions to indicate identity, and when significant, titer strength, or concentration, recommended storage requirements, preparation or expiration date, and other pertinent information. Materials of substandard reactivity and deteriorated materials may not be used.

(d) The availability at all times, in the immediate bench area of personnel engaged on examining specimens and performing related procedures within a category (e.g., clinical chemistry, hematology, and pathology), current laboratory manuals or other complete written descriptions and instructions relating to:

(i) The analytical methods used by those personnel, properly designated and dated to reflect the most recent supervisory reviews;

(ii) Reagents;

(iii) Control and calibration procedures; and

(iv) Pertinent literature references.

(v) Textbooks may be used as supplements to such written descriptions but may not be used in lieu thereof.

(e) Written approval by the director or supervisor of all changes in laboratory procedures.

(f) Maintenance of the laboratory, availability of laboratory personnel and availability of records reflecting dates and, where appropriate, the nature of inspection, validation, remedial action, monitoring, evaluation, changes and dates of changes in laboratory procedures.

(g) Solicitation designed to provide for collection, preservation, and transportation of specimens sufficiently stable to provide accurate and precise results suitable for clinical interpretation.

(3) Provision shall be made for an acceptable quality control program covering all types of analysis performed by the laboratory for verification and assessment of accuracy, measurement of precision, and detection of error. The factors explaining the standard are as follows:

(a) Microbiology. Chemical and biological solutions, reagents, and antisera shall be tested and inspected each day of use for reactivity and deterioration.

(i) Bacteriology and mycology. Staining materials shall be tested for intended reactivity by concurrent application to smears of micro-organisms with predictable staining characteristics. Each batch of medium shall be tested before or concurrently with use with selected organisms with predictable staining characteristics. Each batch of medium shall be tested before or concurrently with use with selected organisms to confirm required growth characteristics, selectivity, enrichment, and biochemical response.

(ii) Parasitology. A reference collection of slides, photographs, or gross specimens of identified parasites shall

be available and used in the laboratory for appropriate comparison with diagnostic specimens. A calibrated ocular micrometer shall be used for determining the size of ova and parasites, if size is a critical factor.

(iii) Virology. Systems for the isolation of viruses and reagents for the identification of viruses shall be available to cover the entire range of viruses which are etiologically related to clinical diseases for which services are offered.

Records shall be maintained which reflect the systems used and the reaction observed. In tests for the identification of viruses, controls shall be employed which will identify erroneous results. If serodiagnostic tests for virus diseases are performed, requirements for quality control as specified for serology shall apply.

(b) Serology.

(i) Serologic tests on unknown specimens shall be run concurrently with a positive control serum of known titer or controls of graded reactivity plus a negative control in order to detect variations in reactivity levels. Controls for all test components (antigens, complement, erythrocyte indicator systems, etc.) shall be employed to insure reactivity and uniform dosage. These results shall not be reported unless the predetermined reactivity pattern of the controls is obtained.

(ii) Each new lot of reagent shall be tested concurrently with one of known acceptable reactivity before the new reagent is placed in routine use.

(iii) Equipment, glassware, reagents, controls, and techniques for tests for syphilis shall conform to those recommended in the "Manual of Tests for Syphilis 1969," United States Public Health Service Publication No. 411, January 1969.

(c) Clinical chemistry.

(i) Each instrument or other device shall be recalibrated or rechecked at least once on each day of use. Records which document the routine precision of each method, automated or manual, and its recalibration schedule shall be maintained and be available to laboratory personnel and the secretary. At least one standard and one reference sample (control) shall be included with each run of unknown specimens where such standards and reference samples are available. Control limits for standards and reference samples shall be recorded and displayed and shall include the course of action to be instituted when the results are outside the acceptable limits.

(ii) Screening or qualitative chemical urinalysis shall be checked daily by use of suitable reference samples.

(d) Immuno-hematology.

(i) ABO grouping shall be performed by testing unknown red cells with anti-A and anti-B grouping serums licensed under Part 73, Title 42, Code of Federal Regulations, or possessing equivalent potency, using the technique for which the serum is specifically designed to be effective. For conformation of ABO grouping, the unknown serum shall be tested with known A1 and B red cells.

(ii) The Rh. (D) type shall be determined by testing unknown red cells with anti-RH (anti-D) typing serum licensed under 42 CFR Part 73, or possessing equivalent potency, using the technique for which the serum is specifically designed to be effective. Anti-RH' (CD), anti-RH'' (DE) and anti-RH rh'rh'' (CDE) serums licensed pursuant to 42 CFR Part 73, or possessing an equivalent potency may be

used for typing donor blood. All Rh negative donor and patient cells shall be tested for the Rh variant (D⁺). A control system of patient's cells suspended in his own serum or in albumin shall be employed when the test is performed in a protein medium.

(iii) The potency and reliability of reagents (antisera known test cells, and antiglobulin-Coombs serum) which are used for ABO grouping, RH typing, antibody detection and compatibility determinations must be tested for reactivity on each day of use and when a new lot of reagents is first used.

(e) Hematology. Instruments and other devices used in hematological examination of specimens shall be recalibrated or retested or reinspected, as may be appropriate, each day of use. Each procedure for which standards and controls are available shall be rechecked each day of use with standards or controls covering the entire range of expected values. Tests such as the one-stage prothrombin time test shall be run in duplicate unless the laboratory can demonstrate that low frequency of random error or high precision makes such testing unnecessary. Reference materials, such as hemoglobin pools, and stabilized cells, shall be tested at least once each day of use to insure accuracy of results. Standard deviation, coefficient of variation, or other statistical estimates of precision shall be determined by random replicate testing of specimens. The accuracy and precision of blood cell counts and hematocrit and hemoglobin measurements shall be tested each day of use.

(f) Exfoliative cytology; histopathology; oral pathology—

(i) Exfoliative cytology. The laboratory director or supervisor qualified in cytology or cytotechnologist shall rescreen for proper staining and correct interpretation at least a 10-percent random sample of gynecological smears which have been interpreted to be in one of the benign categories by personnel not possessing director or supervisor qualifications. All gynecological smears interpreted to be in the "suspicious" or positive categories by screeners shall be confirmed by the laboratory director or qualified supervisor and the report shall be signed by a physician qualified in pathology or cytology. All nongynecological cytological preparations, positive and negative, shall be reviewed by a director or supervisor qualified in cytology. Nonmanual methods shall provide quality control similar to that provided in other nonmanual laboratory procedures. All smears shall be retained for not less than two years from date of examination.

(ii) Histopathology and oral pathology. All special stains shall be controlled for intended reactivity by use of positive slides. Stained slides shall be retained for not less than two years from date of examination and blocks shall be retained for not less than one year from such date. Remnants of tissue specimens shall be retained in a fixative solution until those portions submitted for microscopy have been examined and a diagnosis made by a pathologist.

(g) Radioassay. The counting equipment shall be checked for stability at least once on each day of use, with radioactive standards or reference sources. Reference samples with known activity and within expected levels of normal samples shall be processed in replicate quarterly. For each method, records which document shall be maintained and be available to the department.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-322-130, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW, 82-23-003 (Order 1898), § 248-22-051, filed 11/4/82. Statutory Authority: RCW 43.20.050, 81-02-004 (Order 205), § 248-22-051, filed 12/30/80.]

WAC 246-322-990 Private psychiatric hospital fees. Private psychiatric hospitals licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of forty-five dollars for each bed space within the licensed bed capacity of the hospital to the department;

(2) Include all bed spaces and rooms complying with physical plant and movable equipment requirements of this chapter for twenty-four-hour assigned patient rooms;

(3) Include bed spaces assigned for less than twenty-four-hour patient use as part of the licensed bed capacity when:

(a) Physical plant requirements of this chapter are met without movable equipment; and

(b) The private psychiatric hospital currently possesses the required movable equipment and certifies this fact to the department;

(4) Limit licensed bed spaces as required under chapter 70.38 RCW;

(5) Submit applications for bed additions to the department for review and approval under chapter 70.38 RCW subsequent to department establishment of the private psychiatric hospital's licensed bed capacity; and

(6) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 43.70.250, 92-12-028 (Order 273), § 246-322-990, filed 5/28/92, effective 6/28/92. Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-322-990, filed 12/27/90, effective 1/31/91.]

WAC 246-322-991 Alcoholism hospital fees. Alcoholism hospitals licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of forty-five dollars for each bed space within the licensed bed capacity of the alcoholism hospital to the department;

(2) Include all bed spaces in rooms complying with physical plant and movable equipment requirements of this chapter for twenty-four-hour assigned patient rooms;

(3) Include bed spaces assigned for less than twenty-four-hour patient use as part of the licensed bed capacity when:

(a) Physical plant requirements of this chapter are met without movable equipment; and

(b) The alcoholism hospital currently possesses the required movable equipment and certifies this fact to the department;

(4) Limit licensed bed spaces as required under chapter 70.38 RCW;

(5) Submit an application for bed additions to the department for review and approval under chapter 70.38 RCW subsequent to the department establishment of the alcoholism hospital's licensed bed capacity; and

(6) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 43.70.250, 92-12-028 (Order 273), § 246-322-991, filed 5/28/92, effective 6/28/92. Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-322-991, filed 12/27/90, effective 1/31/91.]

Chapter 246-323 WAC

RESIDENTIAL TREATMENT FACILITIES FOR PSYCHIATRICALY IMPAIRED CHILDREN AND YOUTH

WAC

246-323-010	Definitions.
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WAC 246-323-010 Definitions. (1) "Abuse" means injury, sexual abuse or negligent treatment or maltreatment of a child or adolescent by a person who is legally responsible for the child's/adolescent's welfare under circumstances which indicate that the child's/adolescent's health, welfare and safety is harmed thereby. (RCW 26.44.020.)

Person "legally responsible" shall include a parent or guardian or a person to whom parental responsibility has been delegated (e.g., teachers, providers of residential care, providers of day care).

(a) "Physical abuse" means damaging or potentially damaging, nonaccidental acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal behavior, harassment or other actions which may result in emotional or behavioral problems, physical manifestations, disordered or delayed development.

(2) "Administrator" means the individual appointed as chief executive officer by the governing body of the facility, to act in its behalf in the overall management of the residential treatment facility.

(3) "Authenticated" or "authentication" means authorization of a written entry in a record by means of a signature which shall include, minimally, first initial, last name, and title.

(4) "Child psychiatrist" means a psychiatrist who has specialization in the assessment and treatment of children and youth with psychiatric impairments. This individual shall be certified in child psychiatry by the board of psychiatry and neurology or board eligible.

(5) "Client" means an individual child or youth who is living in a residential treatment facility for the purpose of receiving treatment and/or other services for a psychiatric impairment.

(6) "Clinical staff" means mental health professionals who have been appointed by the governing body of a residential treatment facility to practice within the parameters of the clinical staff bylaws as established by the governing body of that residential treatment facility.

(7) "Corporal punishment" means punishment or negative reinforcement accomplished by direct physical

contact of a harmful or potentially harmful nature regardless of whether or not damage is actually inflicted.

(8) "Department" means the Washington state department of health.

(9) "Dietician" means a person who is eligible for membership in the American Dietetic Association.

(10) "Discipline" means actions taken by personnel and staff to encourage the establishment of habits of self-control or to regulate unacceptable client behavior. The individualized treatment plan shall define both of these.

(11) "Drug administration" means an act in which a single dose of a prescribed drug or biological is given to a patient by an authorized person in accordance with all laws and regulations governing such acts. The complete act of administration entails removing an individual dose from a previously dispensed, properly labeled container (including a unit dose container), verifying it with the physician's orders, giving the individual dose to the proper patient, and properly recording the time and dose given.

(12) "Drug dispensing" means an act entailing the interpretation of an order for a drug or biological and, pursuant to that order, proper selection, measuring, labeling, packaging, and issuance of the drug for a patient or for a service unit of the facility.

(13) "Governing body" means the individual or group which is legally responsible for operation and maintenance of the residential treatment facility.

(14) "Individualized treatment plan" means a written statement of care to be provided to a client based upon assessment of his/her strengths, assets, interests, and problems. This statement shall include short and long-term goals with an estimated time frame stipulated, identification of the process for attaining the goals and a discharge plan. When possible, this statement shall be developed with participation of the client.

(15) "Mental health professional" means those individuals described in RCW 71.05.020 and WAC 275-55-020.

(16) "Multidisciplinary treatment team" means a group comprised, when indicated, of individuals from various clinical services, to include medicine, psychiatry, psychology, social work, nursing, occupational and recreational therapies, dietary, pharmacy, education, speech, and hearing. Members of this group shall assess, plan, implement, and evaluate treatment for clients under care.

(17) "Neglect" means negligent treatment or maltreatment or an act of omission which evinces a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to a child's/adolescent's health, welfare, and safety. (RCW 26.44.020.)

(a) "Physical neglect" means physical or material deprivation (e.g., lack of medical care, lack of supervision necessary for client level of development, inadequate food, clothing, or cleanliness).

(b) "Emotional neglect" means acts such as rejection, lack of stimulation, or other acts of commission or omission which may result in emotional or behavioral problems, physical manifestations, and disordered development.

(18) "New construction" means any of the following started after promulgation of these rules and regulations:

(a) New building(s) to be used as part of the residential treatment facility;

(b) Addition(s) to or conversions of existing building(s) to be used as part of the residential treatment facility;

(c) Alteration(s) or modification(s) other than minor alteration(s) to a residential treatment facility or to a facility seeking licensure as a residential treatment facility.

"Minor alteration(s)" means any structural or functional modification(s) within the existing residential treatment facility which does not change the approved use of the room or area. Minor alterations performed under this definition do not require prior approval of the department; however, this does not constitute a release from the applicable requirements contained in chapter 248-16 WAC.

(19) "Occupational therapist" means a person eligible for certification as a registered occupational therapist by the American Occupational Therapy Association.

(20) "Occupational therapy services" means activities directed toward provision of ongoing evaluation and treatment which will increase the client's ability to perform those tasks necessary for independent living, including daily living skills, sensory motor, cognitive and psychosocial components.

(21) "Owner" means an individual, firm, or joint stock association or the legal successor thereof who operates residential treatment facilities for psychiatrically impaired children, whether owning or leasing the premises.

(22) "Pharmacist" means a person who is licensed by the state board of pharmacy to engage in the practice of pharmacy under the provisions of chapter 18.64 RCW.

(23) "Physician" means a doctor of medicine or a doctor of osteopathy licensed to practice in the state of Washington.

(24) "Prescription" means the written or oral order for drugs issued by a duly licensed medical practitioner in the course of his/her professional practice, as defined by Washington state statutes for legitimate medical purposes. (RCW 18.64.011.)

(25) "Psychiatric impairment" means severe emotional disturbance corroborated by clear psychiatric diagnosis provided that one or more of the following symptomatic behaviors is exhibited:

(a) Bizarreness, severe self-destructiveness, schizophrenic ideation, chronic school failure, or other signs or symptoms which are the result of gross, ongoing distortions in thought processes;

(b) School phobias, suicide attempts, or other signs or symptoms associated with marked severe or chronic affective disorders as defined in the most recent edition of *American Psychiatric Association Diagnostic and Statistical Manual*;

(c) Chronic sexual maladjustment, history of aggressive unmanageability including violent, chronic, grossly maladaptive behaviors which are associated with (a) or (b) above.

(26) "Psychiatrist" means a physician who has successfully completed a three-year residency program in psychiatry and is certified by the American board of psychiatry and neurology.

(27) "Psychological services" means activities directed towards the provision of interpretation, review and supervision of psychological evaluations; treatment services; participation in admission and discharge; diagnostic formulation; consultation and research.

(28) "Psychologist" means a person who is licensed as a psychologist in the state of Washington under provisions

of chapter 18.83 RCW with training in child clinical psychology.

(29) "Registered nurse" means an individual licensed under the provisions of chapter 18.88 RCW, regulating the practice of registered nursing in the state of Washington.

(30) "Recreational therapist" means a person with a bachelor's degree with a major or option in therapeutic recreation or in recreation for ill and handicapped or a bachelor's degree in a related field with equivalent professional experience.

(31) "Recreational therapy services" means those activities directed toward providing assessment of a client's current level of functioning in social and leisure skills and implementation of treatment in areas of deficiency.

(32) "Residential treatment facility for psychiatrically impaired children and youth" means a residence, place or facility designed and organized to provide twenty-four hour residential care and long-term individualized, active treatment for clients who have been diagnosed or evaluated as psychiatrically impaired.

(33) "Restraint" means any apparatus or chemical used for the purpose of preventing or limiting volitional body movement.

(34) "Scheduled drugs" means those drugs, substances, or immediate precursors listed in Scheduled I through V, Article II, RCW 69.50.201, State Uniform Controlled Substance Act, as now or hereafter amended.

(35) "Self-administration of medication" means that a client administers or takes his/her own medication from a properly labeled container: *Provided*, That the facility maintains the responsibility for seeing that medications are used correctly and that the client is responding appropriately.

(36) "Shall" means that compliance with regulation is mandatory.

(37) "Should" means that compliance with a regulation or standard is suggested or recommended but not required.

(38) "Social work services" means "professional social work services" which includes activities and/or services which are performed to assist individuals, families, groups or communities in improving their capacity for social functioning or in effecting changes in their behavior, emotional responses or social conditions.

(39) "Social worker" means a person with a master's degree in social work obtained from an accredited school of social work.

(40) "Special services" means clinical and rehabilitative activities and/or programs which shall include but not be limited to: Laboratory, radiology and anesthesiology services; education and vocational training; speech, language, hearing, vision, dentistry, and physical rehabilitation.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-323-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-323-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-004 (Order 1899), § 248-23-001, filed 11/4/82. Statutory Authority: RCW 43.20.050. 80-03-079 (Order 194), § 248-23-001, filed 3/3/80.]

WAC 246-323-020 Licensure. Residential treatment facilities shall be licensed under chapter 71.12 RCW, Private establishments. Chapter 246-323 WAC establishes minimum licensing standards for the safety, adequate care and treat-

ment of clients who are residents in a residential treatment facility.

(1) Application for license.

(a) An application for a residential treatment facility license shall be submitted on forms furnished by the department. Applications shall be signed by the legal representative of the owner.

(b) The applicant shall furnish to the department full and complete information and promptly report any changes which would affect the current accuracy of such information as to the identity of each officer and director of the corporation, if the program is operated by a legally incorporated entity, profit or nonprofit, and of each partner, if the program is a legal partnership.

(2) Disqualified applicants.

(a) Each and every individual named in an application for a residential facility license shall be considered separately and jointly as applicants, and if anyone is deemed disqualified/unqualified by the department in accordance with the law or these rules and regulations, a license may be denied, suspended or revoked. A license may be denied, suspended or revoked for failure or refusal to comply with the requirements established by chapter 71.12 RCW or with rules and regulations promulgated pursuant thereto, and, in addition, for any of the following:

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

(ii) Permitting, aiding or abetting the commission of an illegal act on the premises of the residential treatment facility;

(iii) Cruelty, abuse, neglect or assault, or indifference to the welfare of any client;

(iv) Misappropriation of the property of the client; and

(v) Failure or inability to exercise fiscal accountability and responsibility toward the individual client, the department, or the business community.

(b) Before granting a license to operate a residential treatment facility, the department shall consider the ability of each individual named in the application to operate the residential treatment facility in accordance with the law and with these regulations. Individuals who have previously been denied a license to operate a health care or child care facility in this state or elsewhere, or who have been convicted civilly or criminally of operating such a facility without a license, or who have had their license to operate such a facility suspended or revoked, shall not be granted a license unless, to the satisfaction of the department, they affirmatively establish clear, cogent and convincing evidence of their ability to operate the residential treatment facility, for which the license is sought, in full conformance with all applicable laws, rules and regulations.

(3) Visitation and examination of the residential treatment facility by the department to ascertain compliance with this chapter and chapter 71.12 RCW shall occur as necessary and at least one time each twelve months.

(4) Denial, suspension, modification, or revocation of a license; adjudicative proceeding.

(a) When the department determines that a facility has failed or refused to comply with the requirements of chapter 71.12 RCW and/or these rules, the department may, if the interests of the clients so demand, issue to the applicant or licensee a notice to deny a license application or to suspend,

modify, or revoke a license to a license holder. The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(b) A license applicant or holder contesting a department license decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

(5) Submission of plans. The following shall be submitted with an application for license: *Provided, however*, That when any of the required plans are already on file with the department through previous applications for license or construction approval, only plans for portions or changes which are not on file need to be submitted.

(a) A plot plan showing street, driveways, water and sewage disposal systems, the location of buildings on the site and grade elevations within ten feet of any building in which clients are to be housed.

(b) Floor plans of each building in which clients are to be housed. The floor plans shall provide the following information:

(i) Identification of each client's sleeping room by use of a lettering or numbering system, or some equivalent mechanism of identification;

(ii) The usable square feet of floor space in each room;

(iii) The clear window glass area in each client's sleeping room;

(iv) The height of the lowest portion of the ceiling in any client's sleeping room;

(v) The floor elevations referenced to the grade level.

(6) Posting of license. A license for the residential treatment facility shall be posted in a conspicuous place on the premises.

(7) New construction.

(a) When new construction is contemplated, the following shall be submitted to the department for review:

(i) A written program containing, at a minimum, information concerning services to be provided and operational methods to be used which will affect the extent of facilities required by these regulations.

(ii) Duplicate sets of preliminary plans which are drawn to scale and include: A plot plan showing streets, driveways, the water and sewage disposal systems, grade and location of building(s) on the site; the plans for each floor of the building(s), existing and proposed, which designate the functions of each room and show all fixed equipment. The preliminary plans shall be accompanied by a statement as to

the source of the water supply and the method of sewage and garbage disposal and a general description of construction and materials, including interior finishes.

(b) Construction shall not be started until duplicate sets of final plans (drawn to scale) and specifications have been submitted to and approved by the department. Final plans and specifications shall show complete details to be furnished to contractors for construction of buildings. These shall include:

- (i) Plot plans;
- (ii) Plans for each floor of the building(s) which designate the function of each room and show all fixed equipment and the planned location of beds and other furniture in client's sleeping rooms;
- (iii) Interior and exterior elevations, building sections and construction details;
- (iv) A schedule of floors, wall and ceiling finishes, and the types and sizes of doors and windows;
- (v) Plumbing, heating, ventilation, and electrical systems; and
- (vi) Specifications which fully describe workmanship and finishes.

(c) Adequate provisions shall be made for the safety and comfort of clients as construction work takes place in or near occupied areas.

(d) All construction shall take place in accordance with the approved final plans and specifications. The department shall be consulted prior to making any changes from the approved plans and specifications. When indicated by the nature or extent of proposed changes, the department may require the submission of modified plans or addenda for review prior to considering proposed change(s) for approval. Only those changes which have been approved by the department may be incorporated into a construction project. In all cases, modified plans or addenda on changes which are incorporated into the construction project shall be submitted for the department's file on the project even though it was not required that these be submitted prior to approval.

(8) Exemptions. The department may, in its discretion, exempt a residential treatment facility from complying with parts of these rules pursuant to the procedures set forth in WAC 246-08-210.

(9) Compliance with other regulations.

(a) Rules and regulations adopted by the Washington state fire marshal under provisions of RCW 71.12.485 which are found in Title 212 WAC apply.

(b) If there is no local plumbing code, the uniform plumbing code of the international association of plumbing and mechanical officials shall be followed.

(c) Compliance with these regulations does not exempt a residential treatment facility from compliance with local and state electrical codes or local zoning, building and plumbing codes.

(10) Transfer of ownership. The ownership of a residential treatment facility shall not be transferred until the transferee has been notified by the department that the transferee's application for a license has been approved. Change in administrator shall be reported to the department.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-323-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-

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323-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 1989 1st ex.s. c 9 § 106. 90-06-019 (Order 039), § 248-23-010, filed 2/28/90, effective 3/1/90. Statutory Authority: Chapter 71.12 RCW. 82-23-004 (Order 1899), § 248-23-010, filed 11/4/82. Statutory Authority: RCW 43.20.050. 80-03-079 (Order 194), § 248-23-010, filed 3/3/80.]

WAC 246-323-030 Administration. (1) Governing body.

(a) The residential treatment facility shall have a governing body which shall establish and adopt personnel policies; written policies for the admission, care, safety and treatment of clients; bylaws, rules and regulations for the responsible administrative and clinical staffs.

(b) The governing body shall be responsible for the provision of personnel, facilities, equipment, supplies and special services necessary to meet the needs of clients.

(c) The governing body shall appoint an administrator who shall be responsible for implementing the policies adopted by the governing body.

(d) The governing body shall establish and maintain a current written organizational plan which includes all positions and delineates responsibilities, authority and relation of positions within the facility.

(2) Personnel.

(a) There shall be sufficient qualified personnel to provide the services needed by the clients and to maintain the residential treatment facility.

(b) There shall be a current written job description for each position classification.

(c) There shall be a personnel record system and a current personnel record for each employee to include application for employment, verification of education or training when required, a record of verification of a valid, current license for any employee for whom licensure is required, and an annually documented performance evaluation.

(d) A planned, supervised and documented orientation shall be provided for each new employee.

(e) There shall be ongoing in-service education which affords each employee the opportunity to maintain and update competencies needed to perform assigned duties and responsibilities. Cardiopulmonary resuscitation training and review shall be provided.

(f) Volunteer services and activities, when provided shall be coordinated by a qualified member of the facility staff.

(i) There shall be appropriate documented orientation and training provided for each volunteer in accordance with the job to be performed.

(ii) There shall be supervision and periodic written performance evaluation of volunteers who have contact with clients, by qualified staff.

(3) Research and human subjects review committee. When research is proposed or conducted which directly involves clients, there shall be a documented multidisciplinary initial and continuing review process. The purpose of this review shall be to protect rights of the clients with acceptance or rejection and continuing review for the duration of the study.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-323-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-004 (Order 1899), § 248-23-020, filed 11/4/82.

[Title 246 WAC—p 517]

Statutory Authority: RCW 43.20.050, 80-03-079 (Order 194), § 248-23-020, filed 3/3/80.]

WAC 246-323-040 HIV/AIDS education and training. Residential treatment facilities for psychiatrically impaired children and youth shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care Facility Employees*, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040, 70.24.310 and chapter 71.12 RCW, 92-02-018 (Order 224), § 246-323-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-323-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310, 89-21-038 (Order 3), § 248-23-025, filed 10/12/89, effective 11/12/89.]

WAC 246-323-050 Client care services. (1) The residential treatment facility shall have written policies regarding admission criteria and treatment methods. The admission of clients shall be in keeping with the stated policies and shall be limited to clients for whom the facility is qualified by staff, services, and equipment to give adequate care.

(2) Acceptance of a client for admission and treatment shall be based upon an assessment and intake procedure that determines the following:

(a) A client requires treatment which is appropriate to the intensity and restrictions of care provided by the programs; and/or

(b) The treatment required can be appropriately provided by the program(s) or program component(s); and

(c) Alternatives for less intensive or restrictive treatment are not available.

(3) Treatment and discharge planning.

(a) An initial treatment plan shall be developed for each client upon admission.

(b) The multidisciplinary treatment team shall develop an individualized treatment plan for each client within fourteen days of admission to the facility.

(i) This plan shall be developed following a complete client assessment which shall include, but not be limited to assessment of physical, psychological, chronological age, developmental, family, educational, social, cultural, environmental, recreational, and vocational needs of the clients.

(ii) The individualized treatment plan shall be written and interpreted to the client, guardian, and client care personnel.

(iii) There shall be implementation of the individualized treatment plan by the multidisciplinary treatment team with written review and evaluation at least one time each thirty days. Modifications in the treatment plan shall be made as necessary. Implementation and review shall be evidenced in the clinical record.

(iv) The individualized treatment plan shall include a written discharge plan developed and implemented by the multidisciplinary treatment team.

(v) The individualized treatment plan shall be included in the clinical record.

(4) A written plan shall be developed describing the organization of clinical services. This plan shall address the following:

(a) Medical services.

(i) A comprehensive health assessment and medical history shall be completed and recorded by a physician within five working days after admission unless a comprehensive health assessment and history have been completed within thirty days prior to admission and records are available to the residential treatment facility.

(ii) A complete neurological evaluation shall be completed when indicated.

(iii) A physician member of the clinical staff shall be responsible for the care of any medical condition that may be present during residential treatment.

(iv) Orders for medical treatment shall be signed by a physician.

(v) There shall be a physician on call at all times to advise regarding emergency medical problems. Provisions shall be made for emergency medical services when needed.

(vi) A psychiatric evaluation shall be completed and documented by a psychiatrist within thirty days prior or fourteen days following admission.

(vii) If there is not a child psychiatrist on the staff, there shall be a child psychiatrist available for consultation.

(b) Psychological services. There shall be a psychologist with documented evidence of skill and experience in working with children and youth available either on the clinical staff or by consultation, responsible for planning and reviewing psychological services and for developing a written set of guidelines for psychological services.

(c) Nursing service. There shall be a registered nurse, with training and experience in working with psychiatrically impaired children and youth, on staff as a full-time or part-time employee who shall be responsible for all nursing functions.

(d) Social work services. There shall be a social worker with experience in working with children and youth on staff as a full-time or part-time employee who shall be responsible for social work functions and the integration of these functions into the individualized treatment plan.

(e) Special services.

(i) There shall be an educational/vocational assessment of each client with appropriate educational/vocational programs developed and implemented or assured on the basis of that assessment.

(ii) Special services shall be provided by qualified persons as necessary to meet the needs of the clients.

(f) Occupational therapy services. There shall be an occupational therapist available who has experience in working with psychiatrically impaired children and youth responsible for occupational therapy functions and the integration of these functions into treatment.

(g) Recreational therapy services. There shall be a recreational therapist available who has had experience in working with psychiatrically impaired children and youth

responsible for the recreational therapy functions and the integration of these functions into treatment.

(h) Food and dietary services.

(i) Food and dietary services shall be provided and managed by a person knowledgeable in food service.

(ii) Dietary service shall incorporate the services of a dietician in order to meet the individual nutritional needs of clients.

(iii) All menus shall be written at least one week in advance, approved by a dietician, and retained for one year.

(iv) There shall be client-specific physician orders for therapeutic diets served to clients. Therapeutic diets shall be prepared and served as prescribed. A current therapeutic diet manual approved by the dietician shall be used for planning and preparing therapeutic diets.

(v) Meals and nourishment shall provide a well balanced diet of good quality food in sufficient quantity to meet the nutritional needs of children and youth. Unless contraindicated, the dietary allowances of the food and nutrition board of the national research council adjusted for age, sex, and activity shall be used. Snacks of a nourishing quality shall be available as needed for clients.

(vi) Food service sanitation shall be governed by chapter 246-215 WAC, "food service sanitation."

(5) Other client safety and care requirements.

(a) Disciplinary policies and practices shall be stated in writing.

(i) Discipline shall be fair, reasonable, consistent, and related to the behavior of the client. Discipline, when needed, shall be consistent with the individualized treatment plan.

(ii) Abusive, cruel, hazardous, frightening, or humiliating disciplinary practices shall not be used. Seclusion and restraints shall not be used as punitive measures. Corporal punishment shall not be used.

(iii) Disciplinary measures shall be documented in the clinical record.

(b) Assault, abuse and neglect. Clients shall be protected from assault, abuse and neglect. Suspected or alleged incidents of nonaccidental injury, sexual abuse, assault, cruelty or neglect to a child or adolescent shall be reported to a law enforcement agency or to the department.

Reporting requirements for suspected incidents of child abuse and/or neglect shall comply with chapter 26.44 RCW.

(i) Staff and/or practitioners legally obligated to report suspected abuse or neglect include licensed practical nurses, registered nurses, physicians and their assistants, podiatrists, optometrists, chiropractors, dentists, social workers, psychologists, pharmacists, professional school personnel, and employees of the department.

(ii) Orientation material shall be made available to the facility personnel, clinical staff and/or consultants informing practitioners of their reporting responsibilities and requirements. Appropriate local police and department phone numbers shall be available to personnel and staff.

(iii) When suspected or alleged abuse is reported, the clinical record shall reflect the fact that an oral or written report has been made to the child protective services of the department or to a law enforcement agency. This note shall include the date and time that the report was made, the agency to which it was made and the signature of the person

making the report. Contents of the report need not be included in the clinical record.

(iv) Conduct conforming with reporting requirements of this section or chapter 26.44 RCW shall not be deemed a violation of the confidential communication privileges of RCW 5.60.060 (3) and (4) and 18.83.110.

(c) Allowances, earnings, and expenditures shall be accounted for by the facility. When a client is discharged, he/she may be permitted to take the balance of his/her money or be fully informed about the transfer of his/her money to another facility or other transfer as permitted by state or federal law.

(d) Clients shall not be used to carry the responsibility for basic housekeeping and maintenance of the facility and equipment. Assigned tasks may be performed insofar as they are appropriate and are a part of the individualized treatment plan. Work assignments shall be adequately supervised and there shall be documentation of the work as part of the treatment program. Work assignments shall be appropriate to the age, physical and mental condition of the client.

(e) Written policy statements and procedures shall describe client rights as specified in WAC 275-55-170, 275-55-200(1), 275-55-260, and 275-55-270.

(f) There shall be current written policies and orders signed by a physician to guide the action of facility personnel when medical emergencies or a threat to life arise and a physician is not present.

(i) Medical policies shall be reviewed as needed and at least biennially and approved in writing by representatives of the medical, nursing, and administrative staffs.

(ii) There shall be current transfer agreement with an acute care general hospital. Medical and related data shall be transmitted with the client in the event of a transfer.

(g) Written policies and procedures shall address notification of legal guardian or next of kin in the event of a serious change in the client's condition, transfer of a client to another facility, elopement, death, or when unusual circumstances warrant.

(h) There shall be written policies and procedures addressing safety precautions to include:

(i) Smoking by personnel, clients, visitors, and others within the facility.

(ii) Provision for immediate emergency access to sleeping rooms, toilets, showers, bathrooms, or any other rooms occupied by clients.

(iii) Use and monitoring of seclusion rooms and restraints in accordance with WAC 275-55-263 (2)(c).

(iv) Availability and access to emergency supplies and equipment to include airways, bag resuscitators and other equipment as identified in the emergency medical policies.

(v) Summoning of internal or external resource agencies or persons, e.g., poison center, fire department, police.

(vi) Systems for routine preventative maintenance, checking and calibration of electrical, biomedical, and therapeutic equipment with documentation of the plan and dates of inspection.

(vii) Fire and disaster plans which include a documentation process and evidence of rehearsals on a regular basis.

(viii) Immediate actions or behaviors of facility staff when client behavior indicates that he/she is assaultive, out

of control, or self-destructive. There shall be documentation that rehearsals of staff occur on a regular basis.

(i) There shall be written policies and procedures governing actions to be taken following any accident or incident which may be harmful or injurious to a client which shall include documentation in the clinical record.

(j) There shall be written policies addressing transportation of clients which shall include consideration of the following:

(i) When transportation is provided for clients in a vehicle owned by the facility, the vehicle shall be in safe operating condition as evidenced by preventive maintenance records.

(ii) Authorization of all drivers of vehicles transporting clients by administration of the facility. Drivers shall possess a current driver's license.

(iii) Observation of maximum safe vehicle driving capacity. Seat belts or other safety devices shall be provided for and used by each passenger.

(iv) Conditions under which clients may be transported in nonfacility-owned vehicles.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-323-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-323-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-004 (Order 1899), § 248-23-030, filed 11/4/82. Statutory Authority: RCW 43.20.050, 80-03-079 (Order 194), § 248-23-030, filed 3/3/80.]

WAC 246-323-060 Pharmaceutical services. (1) The facility shall have an agreement with a pharmacist to provide the services called for in the following paragraphs and to advise the facility on matters relating to the practice of pharmacy, drug utilization, control, and accountability.

(2) There shall be written policies and procedures approved by a physician and pharmacist addressing the procuring, prescribing, administering, dispensing, storage, transcription of orders, use of standing orders, disposal of drugs, self-administration of medication, control or disposal of drugs brought into the facility by clients, and recording of drug administration in the clinical record.

(a) There shall be written orders signed by a physician or by another legally authorized practitioner acting within the scope of his/her license for all medications administered to clients. There shall be an organized system which ensures accuracy in receiving, transcribing, and implementing orders for administration of medications.

(b) Drugs shall be dispensed by persons licensed to dispense drugs. Drugs shall be administered by persons licensed to administer drugs.

(c) Drugs brought into the facility for client use while in the facility shall be specifically ordered by a physician.

(i) These drugs shall be checked by a pharmacist prior to administration to determine proper identification of the drug and lack of deterioration of the drug.

(ii) The facility is responsible for the control and appropriate use of all drugs administered or self-administered within the facility.

(d) There shall be provision for procurement, labeling, and storage of medications, drugs and chemicals.

(i) Drugs ordered or prescribed for specific clients shall be procured by individual prescription.

(ii) The services of the pharmacist and the pharmacy shall be such that medications, supplies and individual prescriptions are provided without undue delay.

(iii) Medication containers within the facility shall be clearly and legibly labeled with the medication name (generic and/or trade), strength and expiration date, (if available).

(iv) Medications, poisons and chemicals kept anywhere in the facility shall be plainly labeled and stored in a specifically designated, secure, well-illuminated cabinet, closet or store room and made accessible only to authorized persons. External medications shall be separated from internal medications.

(v) Poisonous external chemicals, caustic materials and drugs shall show appropriate warning or poison labels and shall be stored separately from all other drugs.

(3) The facility shall have a current drug reference readily available for use by clinical staff and treatment team members.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-323-060, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-004 (Order 1899), § 248-23-040, filed 11/4/82. Statutory Authority: RCW 43.20.050, 80-03-079 (Order 194), § 248-23-040, filed 3/3/80.]

WAC 246-323-070 Infection control. (1) There shall be written policies and procedures addressing infection control and isolation of clients (should isolation be necessary and medically appropriate for an infectious condition).

(2) There shall be reporting of communicable disease in accordance with WAC 246-100-075 and 246-100-080 as now or hereafter amended.

(3) There shall be a current system for reporting, investigating and reviewing infections among clients and personnel and for maintenance of records on such infections.

(4) Upon employment, each person shall have or provide documented evidence of a tuberculin skin test by the Mantoux method, unless medically contraindicated. When the skin test is negative (less than ten millimeters induration read at forty-eight to seventy-two hours), no further tuberculin skin test shall be required. A positive skin test shall consist of ten millimeters of induration, or greater, read at forty-eight to seventy-two hours. Positive reactors shall have a chest x-ray within ninety days of the first day of employment. Exemptions and specific requirements are as follows:

(a) Those with positive skin tests who have completed a recommended course of preventive or curative treatment, as determined by the local health officer, shall be exempted from testing.

(b) Records of test results, x-rays or exemptions to such shall be kept by the facility.

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

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-323-070, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-323-070, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 83-10-079 (Order 1960), § 248-23-050, filed 5/4/83; 82-23-004 (Order 1899), § 248-23-050, filed 11/4/82. Statutory Authority: RCW 43.20.050, 80-03-079 (Order 194), § 248-23-050, filed 3/3/80.]

WAC 246-323-080 Clinical records. (1) The residential treatment facility shall have a well defined clinical record system, adequate and experienced staff, adequate facilities, equipment and supplies necessary to the development, maintenance, security, control, retrieval, analysis, use and preservation of client care data. There shall be a person responsible for the clinical record system who has demonstrated competency and experience or training in clinical record administration.

(2) The client records and record system shall be documented and maintained in accordance with recognized principles of clinical record management.

(3) The residential treatment facility shall have current policies and procedures related to the clinical record system which shall include the following:

(a) The establishment of the format and documentation expectations of the clinical records for each client.

(b) Access to and release of data in clinical records. Policies shall address confidentiality of the information contained in records and release of information in accordance with RCW 71.05.390 and WAC 275-55-260.

(4) There shall be an adequate clinical record maintained for each client which is readily accessible to members of the treatment team. Each entry in the clinical record shall be legible, dated and authenticated.

(5) There shall be a systematic method for identifying the clinical record of each client.

(6) Entries in the clinical record shall be made on all diagnostic and treatment procedures and other clinical events. Entries shall be in ink, typewritten, or on a computer terminal.

(7) Diagnosis, abbreviations and terminology shall be consistent with the most recent edition of the "American Psychiatric Association Diagnostic and Statistical Manual of Mental Disorders" and "International Classification of Diseases."

(8) Clinical records shall include identifying information, assessments by the multidisciplinary treatment team, regular progress notes by members of the multidisciplinary treatment team, individualized treatment plans and a discharge summary.

(9) There shall be a master client index.

(10) Procedures related to retention, preservation, and final disposal of clinical records and other client care data shall include the following:

(a) Each client's clinical record shall be retained and preserved for a period of no less than five years, or for a period of no less than three years following the date upon which the client obtained the age of eighteen years, or five years following the client's most recent discharge, whichever is the longer period of time.

(b) A complete discharge summary, by a member of the clinical staff, and reports of tests related to the psychiatric condition of each client shall be retained and preserved for a period of no less than ten years or for a period of no less than three years following the date upon which the patient obtained the age of eighteen years, or ten years following the client's most recent discharge, whichever is the longer period of time.

(c) Final disposal of any client clinical record(s), indices or other reports which permit identification of the individual

shall be accomplished so that retrieval and subsequent use of data contained therein are impossible.

(d) In the event of transfer of ownership of the residential treatment facility, client clinical records, indices and reports shall remain in the facility and shall be retained and preserved by the new operator of the facility in accordance with subsections above.

(e) If the residential treatment facility ceases operation, it shall make arrangements for preservation of its clinical records, reports, indices, and client data in accordance with subsections above. The plans for such arrangements shall have been approved by the department prior to cessation of operation.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-323-080, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-004 (Order 1899), § 248-23-060, filed 11/4/82. Statutory Authority: RCW 43.20.050. 80-03-079 (Order 194), § 248-23-060, filed 3/3/80.]

WAC 246-323-090 Physical environment. (1) The residential treatment facility shall provide a safe, clean environment for clients, staff, and visitors.

(2) The residential treatment facility shall be accessible to physically handicapped persons.

(3) Client sleeping rooms.

(a) Each sleeping room shall be directly accessible from a corridor or a common use activity room or an area for clients.

(b) Sleeping rooms shall be outside rooms with a clear glass window area of approximately one-eighth of the usable floor area. Windows shall be shatter-proof and of the security type. This may be an operating security type window.

(c) No room more than three feet six inches below grade shall be used for the housing of clients. There shall be a minimum of ninety square feet of usable floor space in a single bedroom and multient rooms shall provide not less than eighty square feet of floor area per bed. The maximum capacity of a sleeping room shall be two clients. There shall not be less than seven and one-half foot ceiling height over the required floor area.

(d) There shall be provision for visual privacy from other clients as needed. This may be achieved through program assuring privacy in toileting, bathing, showering and dressing.

(e) Each client shall be provided an enclosed space suitable for hanging garments and storage of personal belongings within or convenient to his/her room. There shall be provision in the room or elsewhere for secure storage of client valuables.

(f) Each client shall have access to his/her room except when contraindicated by the determination of the treatment team staff.

(g) Each client shall be provided a bed at least thirty-six inches wide or appropriate to the special needs and size of the client with a cleanable, firm mattress and cleanable or disposable pillow.

(h) Sufficient room furnishings shall be provided and maintained in a clean and safe condition.

(i) Client beds shall be spaced so that they do not interfere with entrance, exit or traffic flow within the client's

room. Client rooms shall be of a dimension and conformation allowing not less than three feet between beds.

(4) Each client-occupied floor of the facility shall provide one toilet and sink for each five clients or any fraction thereof. There shall be one bathing facility for each five clients or fraction thereof. If there are more than five clients, separate toilet and bathing facility for each sex are required. Privacy shall be assured.

(5) Adequate lighting shall be provided in all areas of the residential treatment facility.

(a) An adequate number of electrical outlets shall be provided to permit use of electrical fixtures appropriate to the needs of the program. These outlets shall be of a tamper-proof type.

(b) General lighting shall be provided for sleeping rooms. There shall be an electrical wall switch located at the door of each sleeping room to control one built-in light fixture within the room.

(c) Emergency lighting equipment, such as flashlights or battery-operated lamps, shall be available and maintained in operating condition.

(6) Ventilation.

(a) Ventilation of all rooms used by clients or personnel shall be sufficient to remove objectionable odors, excessive heat or condensation.

(b) Inside rooms, including toilets, bathrooms, and other rooms in which excessive moisture, odors or contaminants originate shall be provided with mechanical exhaust ventilation.

(7) There shall be an adequate supply of hot and cold running water under pressure which conforms with the standards of the state board of health, chapter 246-290 WAC.

(a) The hot water temperature at bathing fixtures used by clients shall be automatically regulated and shall not exceed one hundred twenty degrees Fahrenheit.

(b) There shall be hot water at a temperature of one hundred forty degrees Fahrenheit available for laundry equipment and dishwashing.

(c) There shall be devices to prevent backflow into the water supply system from fixtures where extension hoses or other cross-connections may be used.

(8) Linen and laundry.

(a) An adequate storage area and supply of clean linen, washcloths and towels shall be available for client use.

(b) At least one laundry room with washer and dryer located in an area separate from the kitchen and dining area shall be available.

(c) Soiled laundry/linen storage area and sorting areas shall be in a well-ventilated area physically separated from the clean linen handling area, the kitchen and the eating areas.

(9) Within the facility, at least one private area shall be provided for the visiting of clients and visitors.

(10) An adequate number of rooms shall be provided for group and individual therapy.

(a) These rooms shall be enclosed and reasonably sound-proofed as necessary to maintain confidentiality.

(b) When seclusion or maximum security rooms are required by program(s), at least one seclusion room intended for short-term occupancy, which provides for direct supervision by the treatment team staff shall be provided.

(i) Seclusion rooms and furnishings shall be designed to provide maximum security for clients.

(ii) Seclusion rooms shall have provisions for natural or artificial light and may be inside or outside rooms.

(iii) There shall be window lights in doors or other provisions for direct visibility of a client at all times during occupancy.

(iv) Seclusion rooms shall provide fifty square feet of floor space, exclusive of fixed equipment, with a minimum dimension of six feet.

(11) When physical examinations of clients are done on a regular basis within the facility, there should be an examination room available which provides privacy and adequate light. A handwashing facility and soap dispenser shall be available.

(12) When medical and nursing supplies and equipment are washed, disinfected, stored or handled within the facility, there shall be utility and storage areas which shall be designed and equipped for these functions providing for segregation of clean and sterile supplies and equipment from those that are contaminated.

(13) Housekeeping facilities.

(a) At least one service sink and housekeeping closet equipped with shelving shall be provided in a suitable setting.

(b) Sewage, garbage, refuse and liquid wastes shall be collected and disposed of in a manner to prevent the creation of an unsafe or unsanitary condition or nuisance.

(14) The heating system shall be operated and maintained to provide a comfortable, healthful temperature in rooms used by clients during the coldest weather conditions ordinarily encountered in the geographical location of the residential treatment facility.

(15) There shall be an area provided for secure storage of client records and for privacy of authorized personnel to read and document in the client records.

(16) There shall be a dining room(s) or area(s) large enough to provide table service for all clients. Appropriate furnishings shall be provided for dining.

(a) If a multipurpose room is used for dining and recreational activities or meetings, there shall be sufficient space to accommodate each of the activities without their interference with one another.

(b) At least forty square feet per bed shall be provided for the total combined area which is utilized for dining, social, educational, recreational activities and group therapies.

(17) There shall be at least one "nonpay" telephone readily accessible in the event of fire or other emergencies. There shall be a telephone which is readily available for use of clients (located so that privacy is possible).

(18) A safely maintained outdoor recreation area shall be available for use of clients.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-323-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-323-090, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-23-004 (Order 1899), § 248-23-070, filed 11/4/82. Statutory Authority: RCW 43.20.050. 80-03-079 (Order 194), § 248-23-070, filed 3/3/80.]

WAC 246-323-990 Fees. Residential treatment facilities for psychiatrically impaired children and youth (RTF-CY) licensed under chapter 71.12 RCW shall:

- (1) Submit an annual fee of forty-five dollars for each bed space within the licensed bed capacity of the RTF-CY;
- (2) Include all bed spaces and rooms complying with physical plant and movable equipment requirements of this chapter; and
- (3) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 43.70.250, 92-15-048 (Order 287), § 246-323-990, filed 7/10/92, effective 8/10/92. Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-323-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-325 WAC

ADULT RESIDENTIAL REHABILITATION CENTERS AND PRIVATE ADULT TREATMENT HOMES

WAC

246-325-001	Purpose.
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246-325-012	Licensure—Adult residential rehabilitation centers and private adult treatment homes.
246-325-015	Licensure—Private adult treatment home.
246-325-020	Administration—Adult residential rehabilitation center.
246-325-025	HIV/AIDS education and training.
246-325-030	Resident care services in adult residential rehabilitation centers or private adult treatment homes.
246-325-035	General resident safety and care—Policies, procedures, practices.
246-325-040	Pharmaceutical services in adult residential rehabilitation centers.
246-325-045	Food storage—Preparation—Service.
246-325-050	Infection control in adult residential rehabilitation centers.
246-325-060	Clinical records.
246-325-070	Physical environment in adult residential rehabilitation centers.
246-325-100	Resident care services in private adult treatment homes.
246-325-120	Physical environment requirements for private adult treatment homes.
246-325-990	Fees.

WAC 246-325-001 Purpose. The purpose of these regulations is to administratively implement chapter 71.12 RCW by providing standards for health and safety for persons admitted to residential rehabilitation centers and private adult treatment homes. Adult residential rehabilitation centers and private adult treatment homes are designed and operated primarily to assist psychiatrically impaired adults to live as independently as possible and to provide essential care, treatment, and training in the skills of individual and community living. This shall be a level of care other than hospital inpatient care.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-325-001, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW, 88-17-022 (Order 2668), § 248-25-001, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-001, filed 8/6/82.]

WAC 246-325-010 Definitions. (1) "Abuse" means injury, sexual use or abuse, negligent or maltreatment of a resident by a person legally responsible for the resident's

welfare under circumstances which indicate harm to the resident's health, welfare, and safety.

Person "legally responsible" shall include a guardian or a person to whom legal responsibility has been delegated (e.g., providers of residential care, day care, etc.).

(a) "Physical abuse" means damaging or potentially damaging, nonaccidental acts or incidents resulting in bodily injury or death.

(b) "Emotional abuse" means verbal behavior, harassment, or other actions resulting in emotional or behavioral problems, physical manifestations, disordered or delayed development.

(2) "Administrator" means the individual appointed as chief executive officer by the governing body of the facility, to act in the facility's behalf in the overall management of the residential rehabilitation center.

(3) "Adult residential rehabilitation center" or "center" means a residence, place, or facility designed and organized primarily to provide twenty-four-hour residential care, crisis and short-term care, and/or long-term individualized active rehabilitation and treatment for residents diagnosed or evaluated as psychiatrically impaired or chronically mentally ill as defined herein or in chapter 71.24 RCW.

(4) "Ambulatory" means physically and mentally able to:

(a) Walk unaided or move about independently with only the help of a cane, crutches, walkerette, walker, wheelchair, or artificial limb;

(b) Traverse a normal path to safety unaided by another individual;

(c) Get into and out of bed without assistance of another individual; and

(d) Transfer to a chair or toilet or move from place to place without assistance of another individual.

(5) "Authenticated" or "authentication" means authorization of a written entry in a record by means of a signature including minimally, first initial, last name, and title.

(6) "Board and domiciliary care" means provision of daily meal service, lodging, and care offered within the living accommodation and includes the general responsibility for safety and well-being of the resident with provision of assistance in activities of daily living as needed.

(7) "Corporal punishment" means punishment or negative reinforcement accomplished by direct physical contact of a harmful or potentially harmful nature regardless of whether or not damage is actually inflicted.

(8) "Department" means the Washington state department of health.

(9) "Dietitian" means an individual meeting the eligibility requirements described in "Directory of Dietetic Programs Accredited and Approved," American Dietetic Association, Edition 100, 1980.

(10) "Discipline" means actions taken by personnel and staff to encourage the establishment of habits of self-control or to regulate unacceptable resident behavior. The individualized treatment plan shall define establishment of habits of self-control and unacceptable resident behavior.

(11) "Drug administration" means an act where a single dose of a prescribed drug or biological is given to a resident by an authorized person in accordance with all laws and regulations governing such acts. The complete act of administration entails removing an individual dose from the

previously dispensed, properly labeled container (including the unit dose container), verifying the individual dose with the physician's orders, giving the individual dose to the proper resident, and properly recording the time and the dose given.

(12) "Drug dispensing" means an act entailing the interpretation of an order for a drug or biological and, pursuant to that order, proper selection, measuring, labeling, packaging, and issuance of the drug for a resident or for a service unit of the facility.

(13) "Dwelling" means any building or any portion thereof which is not an apartment house, lodging house or hotel, containing one or two guest rooms used, rented, leased, let, or hired out to be occupied for living purposes.

(14) "Governing body" means the individual or group responsible for establishing and maintaining the purposes and policies of the residential rehabilitation center.

(15) "Independent living skill training" consists of:

(a) Social skill training: A service designed to aid residents in learning appropriate social behavior in situations of daily living (e.g., the use of appropriate behavior in families, work settings, the residential center and other community settings).

(b) Self-care skills training: A service designed to aid residents in developing appropriate skills of grooming, self-care and other daily living skills such as eating, food preparation, shopping, handling money, the use of leisure time, and the use of other community and human services.

(16) "Individualized treatment plan or ITP" means a written statement of care to be provided to a resident based upon assessment of his or her strengths, assets, interests, and problems. The statement shall include stipulation of an estimated time frame, identification of the process for attaining the goals, and a discharge plan.

(17) "Licensed practical nurse (LPN)" means an individual licensed under provisions of chapter 18.78 RCW.

(18) "Mental health professional" means the individuals described in RCW 71.05.020 and WAC 275-55-020.

(19) "Multidisciplinary treatment team" means the availability of a group comprised, when indicated, of individuals from various clinical disciplines, to include medicine, psychiatry, psychology, social work, nursing, occupational and recreational therapies, dietary, pharmacy, speech, and hearing services. Members of the team shall assess, plan, implement, and evaluate rehabilitation and treatment for residents under care.

(20) "Neglect" means negligent treatment or maltreatment or an act of omission, evincing a serious disregard of consequences of such a magnitude as to constitute a clear and present danger to a resident's health, welfare, and safety.

(a) "Physical neglect" means physical or material deprivation (e.g., lack of medical care, lack of supervision necessary for resident level of functioning, inadequate food, clothing, or cleanliness).

(b) "Emotional neglect" means acts such as rejection, lack of stimulation or other acts of commission or omission, resulting in emotional or behavioral problems, or physical manifestations.

(21) "New construction" means any of the following started after promulgation of these rules and regulations:

(a) New building(s) to be used as a part of the residential rehabilitation center;

(b) Addition or additions to or conversions, either in whole or in part, of the existing building or buildings to be used as part of the residential rehabilitation center;

(c) Alteration or modification other than minor alteration to a residential rehabilitation center or to a facility seeking licensure as a residential rehabilitation center;

(d) "Minor alteration" means any structural or functional modification within the existing residential rehabilitation center, without changing the approved use of the room or area. Minor alterations performed under this definition do not require prior approval of the department; however, this does not constitute a release from the applicable requirements contained in this chapter.

(22) "Occupational therapist" means an individual licensed as an occupational therapist under provisions of chapter 18.59 RCW.

(23) "Owner" means an individual, partnership or corporation, or the legal successor thereof, operating residential rehabilitation centers for psychiatrically impaired adults, whether owning or leasing the premises.

(24) "Paraprofessional" means a person qualified, through experience or training, or a combination thereof, deemed competent while under supervision of a mental health professional, to provide counseling, rehabilitation, training, and treatment services to psychiatrically impaired adults. Such a person shall have, at a minimum:

(a) One year of training in the field of social, behavioral, or health sciences, and one year of experience in an approved treatment program for the mentally ill; or

(b) Two years of training in the field of social, behavioral, or health sciences; or

(c) Three years of work experience in an approved treatment program for the mentally ill.

(25) "Pharmacist" means an individual licensed by the state board of pharmacy to engage in the practice of pharmacy under the provisions of chapter 18.64 RCW.

(26) "Physician" means an individual licensed under the provisions of chapter 18.57 or 18.71 RCW.

(27) "Prescription" means the written or oral order for drugs or devices issued by a duly licensed medical practitioner in the course of his or her professional practice, as defined by Washington state statutes for legitimate medical purposes under the provisions of RCW 18.64.011(8).

(28) "Private adult treatment home" or "treatment home" means a dwelling which is the residence or home of one or more adults providing food, shelter, beds, and care for two or fewer psychiatrically impaired residents, provided these residents are detained under chapter 71.05 RCW and the home is certified as an evaluation and treatment facility under provisions of chapter 71.05 RCW.

(29) "Psychiatric impairment" means serious mental disorders, excluding mental retardation, substance abuse disorders, simple intoxication with alcohol or drugs, personality disorders, and specific developmental disorders as defined in the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, third edition, revised (DSM-III-R), where one or more of the following symptomatic behaviors is exhibited:

(a) Bizarreness, severe self-destructiveness, schizophrenic ideation, or other signs or symptoms resulting from gross, on-going distortions in thought processes;

(b) Suicide attempts or other signs or symptoms associated with marked, severe, or chronic affective disorders;

(c) Chronic sexual maladjustment, or other grossly maladaptive behaviors, in accordance with subsection (29)(a) or (b) of this section.

(30) "Psychiatrist" means a physician having successfully completed a three-year residency program in psychiatry and is eligible for certification by the American Board of Psychiatry and Neurology (ABPN) as described in *Directory of Residency Training Programs Accredited by the Accreditation Council for Graduate Medical Education*, American Medical Association, 1981-1982, or eligible for certification by the American Osteopathic Board of Neurology and Psychiatry as described in *American Osteopathic Association Yearbook and Directory*, 1981-1982.

(31) "Psychologist" means a person licensed as a psychologist in the state of Washington under provisions of chapter 18.83 RCW.

(32) "Recreational therapist" means a person with a bachelors degree with a major or option in therapeutic recreation or in recreation for ill and handicapped or a bachelors degree in a related field with equivalent professional experience.

(33) "Registered nurse" means an individual licensed under the provisions of chapter 18.88 RCW, regulating the practice of registered nursing in the state of Washington.

(34) "Rehabilitation services" means a combination of social, physical, psychological, vocational, and recreational services provided to strengthen and enhance the capability of psychiatrically impaired persons and to enable these persons to function with greater independence. The services include, but are not limited to, training in independent living skills.

(35) "Rehabilitation specialist" means mental health professionals, paraprofessionals, and medical personnel employed to work in a residential rehabilitation center to provide direct resident treatment, training, and rehabilitation services within the residential rehabilitation center, and includes full-time and part-time staff and consultants.

(36) "Resident" means an individual living in an adult residential rehabilitation center or private adult treatment home for the purpose of participating in rehabilitation and treatment for psychiatric impairment or an individual living in the facility for board and domiciliary care.

(37) "Restraint" means any apparatus or chemical used for the purpose of preventing or limiting free body movement.

(38) "Security window" means a window designed to inhibit exit, entry, and injury to a resident, incorporating approved, safe, transparent material.

(39) "Self-administration of medication" means the resident administers or takes his or her own medication from a properly labeled container: *Provided*, That the facility maintains the responsibility to assure medications are used correctly and the resident is responding appropriately.

(40) "Shall" means compliance with regulation is mandatory.

(41) "Should" means compliance with a regulation or standard is suggested or recommended, but not required.

(42) "Social worker" means an individual holding a masters degree in social work from a graduate school of social work.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-002, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-002, filed 8/6/82.]

WAC 246-325-012 Licensure—Adult residential rehabilitation centers and private adult treatment homes.

Centers and treatment homes shall obtain a license under chapter 71.12 RCW. This chapter establishes minimum licensing standards for the safety, adequate care, and treatment of residents living in centers or treatment homes.

(1) Application for license.

(a) Applicants shall apply for a center or treatment home license on forms furnished by the department. The owner or a legal representative of the owner shall sign the application.

(b) The applicant shall furnish to the department full and complete information and promptly report any changes affecting the current accuracy of such information as to:

(i) The identity of each officer and director of the corporation, if the program is operated by legally incorporated entity, profit or nonprofit; and

(ii) The identity of each partner, if the program is a legal partnership.

(2) Disqualified applicants.

(a) The department shall consider each and every individual named in an application for a center or treatment home license, separately and jointly, as applicants. If the department deems anyone disqualified or unqualified in accordance with the law or these rules, a license may be denied, suspended, or revoked.

(b) The department may deny, suspend, or revoke a license for failure or refusal to comply with the requirements and rules established under provisions of chapter 71.12 RCW, and in addition, but not limited to, for any of the following:

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

(ii) Permitting, aiding, or abetting the commission of an illegal act on the premises of a center or treatment home;

(iii) Cruelty, abuse, neglect or assault, or indifference to the welfare of any resident;

(iv) Misappropriation of the property of the resident;

(v) Failure or inability to exercise fiscal accountability and responsibility toward the individual resident, the department, or the business community.

(c) The department shall consider the ability of each individual named in the license application prior to granting a license to determine:

(i) Ability of each individual to operate the center or treatment home in accordance with the law and these rules;

(ii) If there is cause for denial of a license to an individual named in the application for any of the following reasons:

(A) Previous denial of a license to operate a health or personal care facility in Washington state or elsewhere, or

(B) Civil or criminal conviction for operating a health or personal care facility without a license, or

(C) Previous revocation or suspension of a license to operate a health or personal care facility.

(d) The department shall deny a license for reasons listed in subsections (2)(c)(ii) of this section unless an applicant affirmatively establishes clear, cogent, and convincing evidence of ability to operate a center or treatment home in full conformance with all applicable laws, rules and regulations.

(3) Inspection of premises. Centers and treatment homes shall permit the department to visit and examine the premises of centers and treatment homes annually and as necessary to ascertain compliance with chapter 71.12 RCW and this chapter.

(4) Denial, suspension, or revocation of a license; adjudicative proceeding.

(a) The department shall issue a letter to an applicant or licensee stating the department is denying an application, or is suspending, modifying, or revoking a license because:

(i) Findings upon inspection reveal failure or refusal of a center or treatment home to comply with chapter 71.12 RCW and this chapter; and

(ii) The criteria in WAC 246-325-012 (2)(b) are satisfied; and

(iii) The health, safety, or welfare of residents is endangered.

(b) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(c) A license applicant or holder contesting a department license decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(d) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

(5) Submission of plans and programs for centers. Centers shall submit the following with an application for license unless already on file with the department:

(a) A written description of activities and functions containing, at a minimum, information concerning services to be provided and operational methods to be used affecting the physical plant and facilities required by this chapter;

(b) A plot plan showing street, driveways, water and sewage disposal systems, the location of buildings on the site, and grade elevations within ten feet of any building housing residents;

(c) Floor plans of each building housing residents with the following information:

(i) Identification of each resident's sleeping room by use of a lettering or numbering system, or some equivalent mechanism of identification;

(ii) The usable square feet of floor space in each room;

(iii) The clear window glass area in each resident's sleeping room;

(iv) The height of the lowest portion of the ceiling in any resident's sleeping room; and

(v) The floor elevations referenced to the grade level.

(6) New construction for centers.

(a) Centers shall submit the following to the department for review when new construction is contemplated:

(i) A written description of activities and functions containing, at a minimum, information concerning services to be provided and operational methods to be used affecting the physical plant and facilities required by these regulations;

(ii) Duplicate sets of preliminary plans drawn to scale and including:

(A) A plot plan showing streets, driveways, the water and sewage disposal systems, grade and location of building or buildings on the site; and

(B) The plans for each floor of the building or buildings, existing and proposed, designating the functions of each room and showing all fixed equipment.

(iii) A statement about:

(A) Source of the water supply;

(B) The method of sewage and garbage disposal; and

(C) A general description of construction and materials, including interior finishes.

(b) Licensees and applicants shall start construction only after department receipt and approval of:

(i) Specifications and duplicate sets of final plans drawn to scale;

(ii) Specifications showing complete details to contractors for construction of buildings; and

(iii) Plans and specifications including:

(A) Plot plans;

(B) Plans for each floor of each building designating the function of each room and showing all fixed equipment and the planned location of beds and other furniture in residents' sleeping rooms;

(C) Interior and exterior elevations, building sections, and construction details;

(D) A schedule of floor, wall and ceiling finishes, and the types and sizes of doors and windows;

(E) Plumbing, heating, ventilation, electrical systems, fire safety; and

(F) Specifications fully describing workmanship and finishes.

(c) Centers shall make adequate provisions for safety and comfort of residents as construction work takes place in or near occupied areas.

(d) Centers shall:

(i) Ensure all construction takes place in accordance with department approved final plans and specifications;

(ii) Consult with the department prior to making any changes from the approved plans and specifications;

(iii) Incorporate only department-approved changes into a construction project;

(iv) Submit modified plans or addenda on changes incorporated into a construction project to the department file on the project even though submission of the modified plans or addenda was not required by the department prior to approval.

(e) The department may require submission of modified plans or addenda for review prior to considering a proposed change or changes for approval.

(7) Compliance with other regulations.

(a) Centers shall comply with rules and regulations adopted by the Washington state fire marshal under provisions of RCW 71.12.485.

(b) Centers involved in construction shall comply with the state building code as required in chapter 19.27 RCW.

(c) Compliance with this chapter does not exempt centers from compliance with codes under other state authorities or local jurisdictions, such as state electrical codes or local zoning, building, and plumbing codes.

(8) Posting of license. Centers shall post the license in a conspicuous place on the premises.

(9) Transfer of ownership. A center shall transfer ownership or, if a corporation, sell a majority of stock, only after the transferee has received department approval of the license application and reported change of center administrator.

(10) Exemptions.

(a) The secretary or designee may exempt a center or treatment home from compliance with specified subsections of these regulations when the department ascertains such exemptions may be made in an individual case without jeopardizing the safety or health of the residents in a particular center or treatment home.

(b) Centers and treatment homes shall keep all written exemptions granted by the department pursuant to this chapter on file in the center or treatment home.

[Statutory Authority: RCW 43.70.040, 34.05.220 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-012, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-012, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 1989 1st ex.s. c 9 § 106. 90-06-019 (Order 039), § 248-25-010, filed 2/28/90, effective 3/1/90. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-010, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-010, filed 8/6/82.]

WAC 246-325-015 Licensure—Private adult treatment home. Private adult treatment homes shall be licensed under chapter 71.12 RCW, private establishments. This chapter establishes minimum licensing rules and regulations for safety and adequate care of psychiatrically-impaired clients living in a private adult treatment home. WAC 246-325-010 (1), (2), (3), (4), (6), (8), (9), and (10) shall apply. All other rules and regulations for private adult treatment homes are contained in WAC 246-325-010, 246-325-100, and 246-325-120.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-015, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-015, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 82-17-009 (Order 1858), § 248-25-015, filed 8/6/82.]

WAC 246-325-020 Administration—Adult residential rehabilitation center. (1) Governing body.

(a) Each center shall have a governing body.

(b) The governing body of the center shall:

(i) Be responsible for the provision of personnel, facilities, equipment, supplies, and other services necessary to meet the needs of residents;

(ii) Appoint an administrator responsible for implementing the policies adopted by the governing body; and

(iii) Establish and maintain a current, written organizational plan, including all positions and delineating responsibilities, authority, and relation of positions within the center.

(2) Personnel.

(a) Centers shall provide:

(i) Sufficient qualified personnel to provide the services needed by the residents and to maintain the center;

(ii) Written, current job descriptions for each position classification;

(iii) A personnel record system;

(iv) A current personnel record for each employee including:

(A) Application for employment,

(B) Verification of education or training when required,

(C) A record or verification of a valid, current license for any employee requiring licensure, and

(D) An annually documented performance evaluation.

(v) A planned, supervised, and documented orientation for each new employee;

(vi) Ongoing in-service education affording each employee the opportunity to maintain and update competencies needed to perform assigned tasks and responsibilities, to include cardiopulmonary resuscitation when appropriate.

(b) Centers using volunteer services and activities shall:

(i) Ensure coordination by a qualified member of the center staff;

(ii) Conduct appropriate screening;

(iii) Document orientation and training provided for each volunteer in accordance with the job to be performed; and

(iv) Provide supervision of volunteers by qualified staff.

(3) Research. When research is proposed or conducted directly involving residents, the center shall ensure:

(a) Review, monitoring, and approval of the research project by a multidisciplinary committee to protect the rights and safety of residents; and

(b) Inclusion on the multidisciplinary committee of at least:

(i) One licensed mental health professional not employed by the center; and

(ii) A resident or resident advocate not employed by the center.

(c) The right and responsibility of the committee to modify or discontinue research.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-020, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-020, filed 8/6/82.]

WAC 246-325-025 HIV/AIDS education and training. Adult residential rehabilitation centers and private adult treatment homes shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care*

Facility Employees, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040, 70.24.310 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-025, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-325-025, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310, 89-21-038 (Order 3), § 248-25-025, filed 10/12/89, effective 11/12/89.]

WAC 246-325-030 Resident care services in adult residential rehabilitation centers or private adult treatment homes. (1) Policies and procedures. Centers shall establish and follow written policies regarding admission criteria and treatment methods ensuring:

(a) Admission of residents in keeping with stated policies and limited to residents for whom a center is qualified by staff, services, and equipment, to give adequate care;

(b) Acceptance of a psychiatrically impaired resident based upon prior assessment by a mental health professional as defined in chapter 71.05 RCW or by a community mental health program under chapter 71.24 RCW.

(2) Resident assessments. Centers shall require documentation of the assessment of each psychiatrically impaired resident by a mental health professional or program to establish:

(a) Resident requirements are appropriate to the intensity and restrictions of care available and provided;

(b) Resident services required can be appropriately provided by the center or treatment home program or program components; and

(c) The resident is free of a physical condition requiring medical or nursing care available only in a hospital.

(3) Board and domiciliary care. Centers may admit and provide services for residents requiring only board and domiciliary care.

(4) Resident admission limitations. Unless excepted in writing by the Washington state fire marshal and the department, centers and treatment homes shall prohibit admission and retention of individuals who:

(a) Need physical restraints,

(b) Are not ambulatory,

(c) Lack adequate cognitive functioning to enable response to a fire alarm, or

(d) Are unable to evacuate the premises in an emergency without assistance.

(5) Individual treatment and discharge planning.

(a) Centers and treatment homes shall ensure an initial assessment of each resident within seventy-two hours of admission with development of a provisional individualized treatment plan (ITP) for each psychiatrically impaired resident.

(b) A multidisciplinary treatment team shall develop a written ITP for each resident within fourteen days of admission.

(i) The center or treatment home shall provide interpretation of the ITP to resident care staff.

(ii) Each resident and/or an individual selected or chosen by the resident shall be provided an opportunity to participate in development of the ITP.

(iii) The center or treatment home and the multidisciplinary treatment team shall implement the ITP

with written review and evaluation as necessary and at least once each thirty days with:

(A) Modifications in the ITP as necessary; and

(B) Implementation and review evidenced in the clinical record.

(iv) Centers and treatment homes shall include the ITP in the clinical record.

(6) Treatment and rehabilitation delivery services. Centers and treatment homes shall develop a written plan describing the organization of services. Consistent with the plan, policies and procedures shall address the following:

(a) Requirements for physician authentication of a completed comprehensive health assessment and medical history within three working days after admission unless a comprehensive health assessment or review performed within the previous thirty days is available upon admission;

(b) Arrangements for physician care of any resident with a medical condition present;

(c) Signing of orders for medical treatment by a physician or other authorized practitioner acting within the scope of Washington state statutes defining practice;

(d) Provisions for emergency medical services;

(e) Completion of a psychiatric evaluation for each psychiatrically impaired resident with authentication by a psychiatrist within thirty days prior to or three working days following admission;

(f) Requirements for a registered nurse, with training and experience in working with psychiatrically impaired adults as follows:

(i) Employed full or part-time or under contract or written agreement; and

(ii) Responsible for all nursing functions.

(g) Access to and availability of mental health professionals, occupational therapists, recreational therapists, LPN, rehabilitation specialists, and paraprofessionals with experience in working with psychiatrically impaired adults, as necessary to develop, integrate, and implement the ITP.

(h) Rehabilitation services under long-term care to include:

(i) An educational and vocational assessment of each resident with appropriate educational and vocational programs developed and implemented or arranged on the basis of the assessment; and

(ii) Training in independent living skills provided by qualified persons as necessary to meet the needs of the residents.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-325-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-030, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-030, filed 8/6/82.]

WAC 246-325-035 General resident safety and care—Policies, procedures, practices. (1) Centers and treatment homes shall state disciplinary policy and practices in writing ensuring any disciplinary practice used is:

(a) Fair, reasonable, consistent, and related to the mental status and behavior of a resident;

(b) Consistent with the ITP;

(c) Not abusive, cruel, hazardous, frightening, or humiliating; and

- (d) Documented in the clinical record.
- (2) Centers and treatment homes shall prohibit:
 - (a) Use of seclusion and restraint as punitive measures; and
 - (b) Use of corporal punishment.
- (3) Centers and treatment homes shall:
 - (a) Protect residents from assault, abuse, and neglect; and
 - (b) Report suspected or alleged incidents to the department including:
 - (i) Nonaccidental injury,
 - (ii) Sexual abuse,
 - (iii) Assault,
 - (iv) Cruelty, and
 - (v) Neglect.
- (4) Centers and treatment homes shall account for resident allowances, earnings, and expenditures including:
 - (a) Permitting a discharged resident to take the balance of his or her money; or
 - (b) Fully informing a resident when his or her money is transferred to another facility or organization as permitted by state or federal law; and
 - (c) Informing each resident of any responsibility for cost of care and treatment per law or rule.
- (5) Centers and treatment homes shall allow residents to work on the premises only when:
 - (a) Assigned tasks are appropriate to resident age, physical and mental condition;
 - (b) Assignments are described in the ITP;
 - (c) Resident work is supervised and part of a treatment program;
 - (d) Center or treatment home staff retain responsibility for basic housekeeping, maintenance of equipment, and maintenance of the physical environment; and
 - (e) Documentation of resident work occurs.
- (6) Centers and treatment homes shall establish written policy and procedures to:
 - (a) Describe resident rights consistent with chapter 275-56 WAC;
 - (b) Require current written policy and signed physician orders guiding actions of staff when medical emergencies or threats to life occur including:
 - (i) Policy review as needed and at least once each two years;
 - (ii) Written approval of policies by representatives of medical, nursing, and administrative staff;
 - (iii) Maintenance of current transfer agreements with one or more acute care hospitals; and
 - (iv) Provision for transmitting medical and related resident information with a resident in event of transfer for medical or other treatment and care.
 - (c) Describe circumstances for notification of legal guardian or next-of-kin in event of:
 - (i) Serious change in resident condition;
 - (ii) Resident death;
 - (iii) Resident escape or unauthorized departure;
 - (iv) Transfer of resident to another facility; and
 - (v) Other unusual circumstances.
 - (d) Establish requirements consistent with chapter 70.160 RCW Washington Clean Indoor Air Act if residents, staff, or visitors are permitted to smoke in the center or treatment home;

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- (e) Provide for immediate emergency access to sleeping rooms, toilets, showers, bathrooms, or other rooms occupied by residents;
- (f) Maintain resident monitoring and safety consistent with chapter 275-55 WAC if seclusion rooms or restraints are used;
- (g) Provide for availability and access to emergency supplies and equipment identified in emergency medical policies;
- (h) Provide guidance for staff in:
 - (i) Summoning of internal and external assistance, e.g., poison center, police, fire department;
 - (ii) Immediate actions required when resident behavior is violent or assaultive;
 - (iii) Regular documented rehearsals of safe, effective staff action when a resident is violent or assaultive;
 - (iv) Regular documented rehearsal of a fire and disaster plan; and
 - (v) Actions and documentation in clinical record following accidents or incidents considered harmful or injurious to a resident.
- (i) Require the presence of one or more on-duty staff with current training in first aid and cardiopulmonary resuscitation;
- (j) Encourage safe transportation of residents including:
 - (i) Assuring center-owned vehicles used for resident transport are in safe operating condition with records of preventive maintenance;
 - (ii) Providing a center authorization including a requirement for a current driver's license for each driver of a center-owned vehicle transporting residents;
 - (iii) Mandatory use of seat belts or other safety devices;
 - (iv) Observation of maximum vehicle passenger capacity; and
 - (v) Description of circumstances when residents are transported in vehicles not owned or operated by the center.
- (k) Establish systems for routine preventive maintenance, documentation of the plan, and documentation of dates inspected.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-035, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-035, filed 8/9/88.]

WAC 246-325-040 Pharmaceutical services in adult residential rehabilitation centers. (1) Each center shall have an agreement with a pharmacist to advise on matters relating to the practice of pharmacy, drug utilization, control, and accountability.

(2) Centers shall obtain written approval of a physician and pharmacist for written policies and procedures addressing:

- (a) Procuring,
- (b) Prescribing,
- (c) Administering,
- (d) Dispensing,
- (e) Storage,
- (f) Transcription of orders,
- (g) Use of standing orders,
- (h) Disposal of drugs,
- (i) Self-administration of medication, and

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(j) Control or disposal of drugs brought into the center by residents and/or recording of drug administration in the clinical record.

(3) Centers shall require and ensure:

(a) Written orders signed by a physician or other legally authorized practitioner acting within the scope of his or her license, for all medications administered to residents;

(b) An organized system to maintain accuracy in receiving, transcribing, and implementing orders for administration of medications;

(c) Drug dispensing only by persons licensed to dispense drugs;

(d) Drug administering only by persons licensed to administer drugs;

(e) Drugs brought into the center for resident use while in the center are specifically ordered by a physician;

(f) Control and appropriate use of all drugs administered or self-administered within the center;

(g) Provisions for procurement, drug profiles, labeling and storage of medications, drugs, and chemicals;

(h) Procurement of drugs ordered or prescribed for a specific resident by individual prescription only;

(i) The services of a pharmacist and pharmacy so that medications, supplies, and individual prescriptions are provided without undue delay;

(j) Medication containers within the center are clearly and legibly labeled with the medication name (generic and/or trade), strength, and expiration date (if available);

(k) Medications, poisons, and chemicals kept anywhere in the center are:

(i) Plainly labeled and stored in a specifically designated, secure, well-illuminated cabinet, closet, or storeroom;

(ii) Made accessible only to authorized persons; and

(iii) Maintained so that external medications are separated from internal medications.

(l) Maintenance of appropriate warning or poison labels and separate storage for poisonous external chemicals, caustic materials, and drugs.

(4) Centers shall maintain a current drug reference readily available for use by staff and treatment team members.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-325-040, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW, 88-17-022 (Order 2668), § 248-25-040, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-040, filed 8/6/82.]

WAC 246-325-045 Food storage—Preparation—Service. (1) Centers shall maintain food service facilities and practices complying with chapter 246-215 WAC.

(2) Centers and treatment homes shall provide:

(a) A minimum of three meals in each twenty-four hour period;

(b) Evidence of written approval by the department when a specific request for fewer than three meals per twenty-four hour period is granted;

(c) A maximum time interval between the evening meal and breakfast of fourteen hours unless a snack contributing to the daily nutrient total is served or made available to all residents between the evening meal and breakfast;

(d) Dated, written menus which:

(i) Are written at least one week in advance,

(ii) Are retained six months, and

(iii) Provide a variety of foods with cycle duration of at least three weeks before repeating.

(e) Substitutions for food on menus of comparable nutrient value;

(f) Palatable, attractively served diets, meals, and nourishments sufficient in quality, quantity, and variety to meet the recommended dietary allowances of the food and nutrition board, national research council, 1980 edition; and

(g) A record of all food and snacks served and contributing to nutritional requirements.

(3) Centers and treatment homes shall prepare and serve:

(a) Resident specific modified or therapeutic diets when prescribed and as prescribed by a physician with menus approved by a dietitian; and

(b) Only those nutrient concentrates and supplements prescribed in writing by a physician.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW, 92-02-018 (Order 224), § 246-325-045, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-325-045, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW, 88-17-022 (Order 2668), § 248-25-045, filed 8/9/88.]

WAC 246-325-050 Infection control in adult residential rehabilitation centers. (1) Centers shall establish written policies and procedures addressing infection control and isolation of residents (should isolation be necessary and medically appropriate for an infectious condition).

(2) Centers shall report communicable disease in accordance with chapter 246-100 WAC.

(3) Centers shall maintain:

(a) A current system for reporting, investigating, and reviewing infections among residents and personnel; and

(b) A system for keeping records on such infections.

(4) Centers shall require off-duty status or restrict resident contact where an employee is known to have a communicable disease in an infectious stage and is likely to be spread by casual contact.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW, 92-02-018 (Order 224), § 246-325-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-325-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW, 88-17-022 (Order 2668), § 248-25-050, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-050, filed 8/6/82.]

WAC 246-325-060 Clinical records. (1) Centers shall maintain and retain:

(a) A well-defined clinical record system, adequate and experienced staff;

(b) Adequate facilities, equipment, and supplies necessary to the development, maintenance, security, control, retrieval, analysis, use, and preservation of resident care data; and

(c) A person demonstrating competency and experience or training in clinical record administration responsible for the clinical record system.

(2) Centers and treatment homes shall document and maintain individual resident records and a record system in accordance with recognized principles of clinical record management to include:

(a) Ready access for appropriate members of staff;

(b) Systematic methods for identifying the record of each resident; and

(c) Legible, dated, authenticated entries (ink, typewritten, computer terminal, or equivalent) on all diagnostic and treatment procedures and other clinical events].

(3) Centers shall have current policies and procedures related to the clinical record system including:

(a) An established format and documentation expectations for the clinical record of each resident;

(b) Control of access to and release of data in clinical records including confidentiality of information contained in records and release of information in accordance with chapter 71.05 RCW;

(c) Retention, preservation, and final disposal of clinical records and other resident care data to ensure:

(i) Retention and preservation of:

(A) Each resident's clinical record for a period of no less than five years, or for five years following the resident's most recent discharge, whichever is the longer period of time;

(B) A complete discharge summary, authenticated by an appropriate member of the staff, for a period of no less than ten years or no less than ten years following the resident's most recent discharge, whichever is the longer period of time; and

(C) Reports of tests related to the psychiatric condition of each resident for a period of no less than ten years or no less than ten years following the resident's most recent discharge, whichever is the longer period of time.

(ii) Final disposal of any resident clinical record, indices, or other reports permitting identification of the individual shall be accomplished so retrieval and subsequent use of data contained therein are impossible;

(iii) In the event of transfer of ownership of the center or treatment home, resident clinical records, indices, and reports remain in the center or treatment home, retained and preserved by the new operator in accordance with this section;

(iv) Center or treatment home arrangements for preservation of clinical records, reports, indices, and resident data in accordance with this section if the center or treatment home ceases operation; and

(v) Department approval of plans for preservation and retention of records prior to cessation of operation.

(d) Psychiatric diagnoses, abbreviations, and terminology consistent with the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders*, third edition, revised (DSM-III-R), physical diagnoses, abbreviations, and terminology consistent with *International Classification of Diseases*, ninth revision, Clinical Modification (ICD-9-CM);

(e) Clinical records identifying information, assessments by the multidisciplinary treatment team, regular progress notes by members of the multidisciplinary treatment team, individualized treatment plans, final evaluation, and a discharge summary;

(f) A master resident index;

(g) Identifying information;

(h) Assessments and regular progress notes by the multidisciplinary treatment team;

(i) Individualized treatment plans; and

(j) Final evaluation and discharge summary.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-060, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-060, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-060, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-060, filed 8/6/82.]

Reviser's note: The bracket in the text of the above section occurred in the copy filed by the agency.

WAC 246-325-070 Physical environment in adult residential rehabilitation centers. (1) Each center shall provide a safe, clean environment for residents, staff, and visitors.

(2) Centers shall provide:

(a) A ground floor accessible to the physically handicapped; and

(b) Program activity areas and sleeping quarters for any physically handicapped residents on floors meeting applicable standards.

(3) Residents' sleeping rooms.

(a) Centers shall provide sleeping rooms which:

(i) Are directly accessible from a corridor or common-use activity room or an area for residents;

(ii) Are outside rooms with a clear glass window area of approximately one-tenth of the usable floor area;

(iii) Have windows above the ground floor level appropriately screened or have a security window;

(iv) Provide a minimum of eighty square feet of usable floor space in a single-bed room;

(v) Provide no less than seventy square feet of usable floor area per bed in multi-bed rooms;

(vi) Accommodate no more than four residents;

(vii) Provide no less than seven and one-half feet of ceiling height over the required floor area;

(viii) Provide space so beds do not interfere with the entrance, exit, or traffic flow within the room;

(ix) Have dimensions and conformation allowing placement of beds three feet apart; and

(x) Have room furnishings maintained in a clean, safe condition.

(b) Centers shall prohibit use of any room more than three feet, six inches below grade as a resident sleeping room.

(c) Centers shall provide:

(i) Visual privacy for each resident as needed and may achieve this through a program assuring privacy in toileting, bathing, showering, and dressing;

(ii) An enclosed space suitable for hanging garments and storage of personal belongings for each resident within or convenient to his or her room; and

(iii) Secure storage of resident valuables in the room or elsewhere.

(d) Centers shall provide each resident access to his or her room with the following exceptions:

(i) If appropriate, center rules may specify times when rooms are unavailable; and/or

(ii) An ITP may specify restrictions on use of a room.

(e) Centers shall provide a bed for each resident which is:

(i) At least thirty-six inches wide or appropriate to the special needs and size of the resident; and

(ii) Provided with a clean, cleanable, firm mattress and a clean, cleanable, or disposable pillow.

(4) Centers shall ensure that each resident occupied floor or level provides:

(a) One toilet and sink for each eight residents or any fraction thereof;

(b) A bathing facility for each twelve residents or fraction thereof; and

(c) Arrangements for privacy in toilets and bathing facilities.

(5) Centers shall provide:

(a) Adequate lighting in all areas;

(b) An adequate number of electrical outlets to permit use of electrical fixtures appropriate to the needs of residents and consistent with the program;

(c) General lighting for sleeping rooms with an electrical wall switch located at the door of each sleeping room to control one built-in light fixture within the room; and

(d) Emergency lighting equipment such as flashlights or battery-operated lamps available and maintained in operating condition.

(6) Ventilation.

(a) Centers shall provide ventilation of all rooms used by residents or personnel sufficient to remove objectionable odors, excessive heat, or condensation.

(b) Centers shall provide appropriate vents in inside rooms, including toilets, bathrooms, and other rooms where excessive moisture, odors, or contaminants originate.

(7) Centers shall provide:

(a) An adequate supply of hot and cold running water under pressure conforming with standards of the state board of health, chapter 246-290 WAC;

(b) Hot water temperature at bathing fixtures not to exceed one hundred twenty degrees Fahrenheit;

(c) Hot water at a temperature of one hundred forty degrees Fahrenheit available for laundry equipment; and

(d) Devices to prevent back-flow into the water supply system from fixtures where extension hoses or other cross connections may be used.

(8) Linen and laundry. Centers shall provide:

(a) An adequate storage area and supply of clean linen, washcloths, and towels available for resident use;

(b) Availability of at least one laundry room with washer and dryer located in an area separated from the kitchen and dining area; and

(c) Well-ventilated soiled laundry or linen storage and sorting areas physically separated from the clean linen handling area, the kitchen, and the eating areas.

(9) Centers shall provide at least one private area within the center for visitation of residents and guests.

(10) Centers shall provide an adequate number of therapy and examination rooms for:

(a) Group and individual therapy reasonably sound-proofed to maintain confidentiality;

(b) Seclusion or maximum security if required by a program, unless immediately accessible in a hospital, with each room:

(i) Under direct staff supervision;

(ii) Intended for short-term occupancy only;

(iii) Designed and furnished to provide maximum security and safety for occupant;

(iv) An inside or outside room with natural or artificial light;

(v) Provided with window lights in door or other provisions for direct visibility of an occupant at all times; and

(vi) A minimum of fifty square feet of floor space, exclusive of fixed equipment and a minimum dimension of six feet.

(c) Physical examination of residents when performed on a routine basis within the center including:

(i) Provisions for privacy and adequate light;

(ii) A handwashing facility with single-use disposable towels or equivalent; and

(iii) A soap dispenser.

(11) If seclusion or maximum security rooms are not required by program, these shall be immediately available in a hospital or other licensed facility.

(12) When medical and nursing supplies and equipment are washed, disinfected, stored, or handled within the center, centers shall provide utility and storage areas designed and equipped for these functions providing for segregation of clean and sterile supplies and equipment from contaminated supplies and equipment.

(13) Centers shall provide housekeeping facilities including:

(a) At least one service sink and housekeeping closet equipped with shelving; and

(b) Provision for collection and disposal of sewage, garbage, refuse, and liquid wastes in a manner to prevent creation of an unsafe or unsanitary condition or nuisance.

(14) Centers shall provide:

(a) A heating system operated and maintained to provide a comfortable, healthful temperature in rooms used by residents;

(b) An area for secure storage of resident records;

(c) An area providing privacy for authorized personnel to read and document in the resident records;

(d) An appropriately furnished dining room or rooms or area or areas large enough to provide table service for all residents;

(e) Sufficient space to accommodate various activities when a multipurpose room is used for dining as well as recreational activities or meetings; and

(f) At least forty square feet per bed for the total combined area utilized for dining, social, educational, recreational activities, and group therapies.

(15) Centers shall provide:

(a) Ready access to one "nonpay" telephone in the event of fire or other emergencies; and

(b) A readily available telephone for use by residents located so privacy is possible.

(16) Centers shall arrange availability of a safely maintained outdoor recreational area for use of residents.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-070, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-070, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-070, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-070, filed 8/6/82.]

WAC 246-325-100 Resident care services in private adult treatment homes. (1) The treatment home shall have written policies regarding admission criteria and treatment methods. Admission of residents shall be in keeping with

stated policies and limited to psychiatrically impaired residents for whom the home can provide adequate safety, treatment, and care.

(2) Rules and regulations contained in this chapter shall apply except for the following:

- (a) WAC 246-325-012 (5), (6), (8), and (9);
- (b) WAC 246-325-020;
- (c) WAC 246-325-030 (1), (2), (6)(f);
- (d) WAC 246-325-035 (6)(j)(i)-(ii) and (6)(k);
- (e) WAC 246-325-040;
- (f) WAC 246-325-050; and
- (g) WAC 246-325-070.

(3) The treatment home shall:

(a) Require a specific order or prescription by a physician or other legally authorized practitioner for resident medications;

(b) Assume responsibility for security and monitoring of resident medications including:

(i) Locked storage or other means to keep medication unaccessible to unauthorized persons;

(ii) Refrigeration of medication when required;

(iii) External and internal medications stored separately (separate compartments);

(iv) Each medication stored in original labeled container;

(v) Medication container labels including the name of the resident and the date of purchase;

(vi) Limiting disbursement and access to licensee except for self-administered medications;

(vii) Medications dispersed only on written approval of an individual or agency having authority by court order to approve medical care;

(viii) Medications dispersed only as specified on the prescription label or as otherwise authorized by a physician; and

(ix) Ensuring self-administration of medications by a resident in accordance with the following:

(A) The resident shall be physically and mentally capable of properly taking his or her own medicine; and

(B) Prescription drugs, over-the-counter drugs, and other medical materials used by individuals shall be kept so the prescription drugs are not available to other individuals.

(4) Clinical records and record systems shall comply with WAC 246-325-060.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-325-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-100, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-100, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-100, filed 8/6/82.]

WAC 246-325-120 Physical environment requirements for private adult treatment homes. (1) The treatment home shall be located on a well-drained site, free from hazardous conditions, and accessible to other facilities necessary to carry out the program. At least one telephone on the premises shall be accessible for emergency use at all times.

(2) The treatment home shall provide and maintain the physical plant, premises, and equipment:

- (a) In clean and sanitary condition,
- (b) Free of hazards, and

(c) In good repair.

(3) Treatment homes shall provide:

(a) Suitable space for storage of clothing;

(b) Resident bedrooms which are outside rooms permitting entrance of natural light;

(c) Multiple occupancy bedrooms, when used, not less than fifty square feet per resident occupant of floor area exclusive of closets;

(d) A bed for each resident which is at least thirty-six inches wide with clean mattress, pillow, sheets, blankets, and pillowcases;

(e) Adequate facilities for separate storage of soiled and clean linen;

(f) At least one indoor flush-type toilet, one lavatory, and one bathtub or shower with hot and cold or tempered running water with:

(i) Provision for resident privacy; and

(ii) Soap and individual or disposable towels.

(g) Adequate lighting; and

(h) Discharge of sewage and liquid wastes into a public sewer system or into an independent sewage system approved by the local health authority or the department.

(4) Treatment homes shall ensure:

(a) Approval by the local health authority or department when a private water supply is provided;

(b) A heating system operated and maintained to provide not less than sixty-eight degrees Fahrenheit temperature in rooms used by residents during waking hours; and

(c) Premises free from rodents, flies, cockroaches, and other insects.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-325-120, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 88-17-022 (Order 2668), § 248-25-120, filed 8/9/88; 82-17-009 (Order 1858), § 248-25-120, filed 8/6/82.]

WAC 246-325-990 Fees. Adult residential rehabilitation centers (ARRC) licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of forty-five dollars for each bed space within the licensed bed capacity of the ARRC;

(2) Include all bed spaces in rooms complying with physical plant and movable equipment requirements in this chapter for client sleeping rooms; and

(3) Set up twenty-four-hour assigned client beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 43.70.250. 92-15-048 (Order 287), § 246-325-990, filed 7/10/92, effective 8/10/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-325-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-326 WAC

ALCOHOLISM TREATMENT FACILITIES

WAC

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246-326-090	Physical plant and equipment.
246-326-100	Special additional requirements for facilities providing alcoholism detoxification service.
246-326-990	Fees.

WAC 246-326-001 Purpose. Regulations relating to alcoholism treatment facilities are hereby adopted pursuant to chapter 71.12 RCW. The purpose of these regulations is to provide health and safety standards and procedures for the issuance, denial, suspension, and/or revocation of licenses for facilities, other than hospitals regulated pursuant to chapter 246-318 or 246-322 WAC, maintained and operated primarily for receiving or caring for alcoholics.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-001, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-001, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-001, filed 8/3/84. Formerly WAC 248-22-500.]

WAC 246-326-010 Definitions. For the purpose of these regulations, the following words and phrases shall have the following meanings unless the context clearly indicates otherwise. All adjectives and adverbs such as adequate, approved, competent, qualified, necessary, reasonable, reputable, satisfactory, sufficiently, effectively, appropriately, or suitable used in these rules and regulations to qualify an individual, a procedure, equipment, or building shall be as determined by the Washington state department of health.

(1) "Abuse," other than substance or alcohol abuse, means the injury, sexual use, or sexual mistreatment of an individual patient by any person under circumstances which indicate the health, welfare, and safety of the patient is harmed thereby.

(a) "Physical abuse" means damaging or potentially damaging nonaccidental acts or incidents which may result in bodily injury or death.

(b) "Emotional abuse" means verbal or nonverbal actions, outside of accepted therapeutic programs, which are degrading to a patient or constitute harassment.

(2) "Administrator" means an individual appointed as the chief executive officer by the governing body of a facility to act in the facility's behalf in the overall management of the alcoholism treatment facility.

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

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

(5) "Alcoholism counselor" means an individual having adequate education, experience, and knowledge regarding the nature and treatment of alcoholism and knowledgeable about community resources providing services alcoholics may need and who knows and understands the principles and techniques of alcoholism counseling with minimal requirements to include:

(a) A history of no alcohol or other drug misuse for a period of at least two years immediately prior to time of employment as an alcoholism counselor and no misuse of

alcohol or other drugs while employed as an alcoholism counselor;

(b) A high school diploma or equivalent;

(c) Satisfactory completion of at least twelve quarter or eight semester credits from a college or university, including at least six quarter credits or four semester credits in specialized alcoholism courses.

(6) "Alcoholism treatment facility" means a private place or establishment, other than a licensed hospital, operated primarily for the treatment of alcoholism.

(7) "Alteration" means changes requiring construction in an existing alcoholism treatment facility.

"Minor alteration" means any physical or functional modification within existing alcoholism treatment facilities not changing the approved use of a room or area. Minor alterations performed under this definition do not require prior review of the department; however, this does not constitute a release from any applicable requirements herein.

(8) "Area," except when used in reference to a major section of an alcoholism treatment facility, means a portion of a room containing the equipment essential to carry out a particular function and separated from other facilities of the room by a physical barrier or adequate space.

(9) "Authenticated" means written authorization of any entry in a patient treatment record by means of a signature including, minimally, first initial, last name, and title.

(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 as defined in WAC 246-326-010(9), title, and initials that may appear after entries in the treatment record.

(11) "Bathing facility" means a bathtub or shower.

(12) "Counseling, group" means an interaction between two or more patients and alcoholism counselor or counselors for the purpose of helping the patients gain better understanding of themselves and develop abilities to deal more effectively with the realities of their environments.

(13) "Counseling, individual" means an interaction between a counselor and a patient for the purpose of helping the patient gain a better understanding of self and develop the ability to deal more effectively with the realities of his or her environment.

(14) "Detoxification" means care or treatment of an intoxicated person during a period where the individual recovers from the effects of intoxication.

(a) "Acute detoxification" means a method of withdrawing a patient from alcohol where nursing services and medications are routinely administered to facilitate the patient's withdrawal from alcohol.

(b) "Subacute detoxification" means a method of withdrawing a patient from alcohol utilizing primarily social interaction between patients and staff within a supportive environment designed to facilitate safety for patients during recovery from the effects of intoxication with no medications administered by the staff.

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

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

(17) "Facilities" means a room or area and/or equipment to serve a specific function.

(18) "General health supervision" means provision of the following services as indicated:

(a) Reminding a patient to self-administer medically prescribed drugs and treatments;

(b) Encouraging a patient to follow a modified diet and rest or activity regimen when one has been medically prescribed;

(c) Reminding and assisting a patient to keep appointments for health care services, such as appointments with physicians, dentists, home health care services, or clinics;

(d) Encouraging a patient to have a physical examination if he or she manifests signs and symptoms of an illness or abnormality for which medical diagnosis and treatment are indicated.

(19) "Governing body" means an individual or group responsible for approving policies related to operation of an alcoholism treatment facility.

(20) "Grade" means the level of the ground adjacent to the building measured at the required windows. The ground shall be level or sloped downward for a distance of at least ten feet from the wall of the building.

(21) "Inpatient" means a patient to whom the alcoholism treatment facility is providing board and room on a twenty-four-hour-per-day basis.

(22) "Intoxication" means acute or temporary impairment of an individual's mental or physical functioning caused by alcohol in the body.

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

(24) "Lavatory" means a plumbing fixture of adequate size and proper design for washing hands.

(25) "Legend drug" means any drug required by state law or regulation of the state board of pharmacy to be dispensed on prescription only or is restricted to use by practitioners only.

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

(a) "Licensed practical nurse" means an individual licensed pursuant to chapter 18.78 RCW.

(b) "Registered nurse" means an individual licensed pursuant to chapter 18.88 RCW.

(27) "May" means permissive or possible at the discretion of the department.

(28) "Neglect" means negligent treatment or maltreatment; an act or omission evincing a disregard of consequences of such magnitude as to constitute a clear and present danger to a patient's health, welfare, and/or safety.

(29) "New construction" means any of the following:

(a) New building to be used as an alcoholism treatment facility.

(b) Additions to existing buildings to be used as an alcoholism treatment facility.

(c) Conversion of existing buildings or portions thereof for use as an alcoholism treatment facility.

(d) Alterations.

(30) "Owner" means an individual, firm, partnership, corporation, company, association, or joint stock association or the legal successor thereof operating an alcoholism treatment facility whether he or she owns or leases the premises.

(31) "Patient" means any individual receiving services for the treatment of alcoholism.

(32) "Pharmacist" means an individual licensed as a pharmacist in the state of Washington pursuant to provisions of chapter 18.64 RCW.

(33) "Physician" means an individual licensed under the provisions of chapter 18.71 RCW Physicians, or chapter 18.57 RCW Osteopathy—Osteopathic medicine and surgery.

(34) "Room" means a space set apart by floor to ceiling partitions on all sides with proper access to a corridor or a common-use living room or area and with all openings provided with doors or windows.

(35) "Secretary" means the secretary of the Washington state department of health.

(36) "Shall" means compliance is mandatory.

(37) "Should" means a suggestion or recommendation but not a requirement.

(38) "Through traffic" means traffic for which the origin and destination are outside the room or area serving as a passageway.

(39) "Toilet" means a disposal apparatus consisting of a hopper fitted with a seat and flushing device, used for urination and defecation.

(40) "Usable floor space" means, in reference to patient sleeping room, the floor space exclusive of vestibules and closets, wardrobes, or portable lockers.

(41) "Utility sink" means a plumbing fixture of adequate size and proper design for filling and emptying mop buckets.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-010, filed 8/3/84. Formerly WAC 248-22-501.]

WAC 246-326-020 Licensure. (1) Application for license.

(a) An application for an alcoholism treatment facility license shall be submitted on forms furnished by the department. An application shall be signed by the owner of the facility, or his or her legal representative, and the administrator.

(b) The applicant shall furnish to the department full and complete information, and promptly report any changes.

(2) Disqualified applicants.

(a) Each and every individual named in an application for an alcoholism treatment facility license 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 license may be denied, suspended, or revoked.

(b) A license may be denied, suspended, or revoked for failure or refusal to comply with the requirements established by chapter 71.12 RCW or with these rules and regulations and, in addition, any of the following:

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

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

(iii) Cruelty, assault, abuse, neglect, or indifference to the welfare of any patient;

(iv) Misappropriation of the property of the patients; or
 (v) Failure or inability to exercise fiscal accountability and responsibility toward the individual patient, the department, or the business community.

(c) Before granting a license to operate an alcoholism treatment facility, the department shall consider the ability of each individual named in the application to operate the alcoholism treatment facility in accordance with the law and these regulations. Individuals having been previously denied a license to operate a health or personal care facility in this state or elsewhere, or having been convicted civilly or criminally of operating such a facility without a license, or having had their license to operate such a facility suspended or revoked shall not be granted a license unless to the satisfaction of the department they affirmatively establish clear, cogent, and convincing evidence of their ability to operate the alcoholism treatment facility, for which the license is sought, in full conformance with all applicable laws, rules, and regulations.

(d) Individuals convicted of a felony, child abuse, and/or any crime involving physical harm to another person, or individuals identified as perpetrators of substantiated child abuse pursuant to chapter 26.44 RCW, shall be disqualified by reason of such conviction if such conviction is reasonably related to the competency of the person to exercise responsibilities for ownership, operation, and/or administration of an alcoholism treatment facility unless, to the satisfaction of the department, the individual establishes clear, cogent, and convincing evidence of sufficient rehabilitation subsequent to such conviction or abuse registry listing to warrant public trust.

(3) Submission of plans. The following shall be submitted with an application for license: *Provided however*, That whenever any of the required plans are already on file with the department through previous applications for license or construction approval, only plans for portions or changes not on file need to be submitted.

(a) A plot plan showing streets, driveways, water and sewage disposal systems, locations of buildings on the site, and grade elevations within ten feet of any building where patients are to be housed.

(b) Floor plans of each building where patients are to be housed. The floor plans shall provide the following information:

- (i) Identification of each room by use of a system;
 - (ii) Identification of category of service intended for each room;
 - (iii) The usable square feet of floor space in each patient sleeping room;
 - (iv) The clear window glass area in each patient's sleeping room;
 - (v) The height of the lowest portion of the ceiling in any patient's sleeping room; and
 - (vi) Floor elevations referenced to the grade level.
- (c) If new construction or remodeling is planned, requirements in WAC 246-326-020(7) shall apply.

(4) Classification or categories of alcoholism treatment services. For the purpose of licensing, alcoholism treatment services provided by alcoholism treatment facilities shall be classified as follows:

(a) *Alcoholism detoxification services* are either acute or subacute services required for the care and/or treatment of

individuals intoxicated or incapacitated by alcohol during the initial period the body is cleared of alcohol and the individual recovers from the transitory effects of intoxication. Services include screening of intoxicated persons, detoxification of intoxicated persons, counseling of alcoholics regarding their illness to stimulate motivation to obtain further treatment, and referral of detoxified alcoholics to other, appropriate alcoholism treatment programs.

(b) *Alcoholism intensive inpatient treatment services* are those services provided to the detoxified alcoholic in a residential setting including, as a minimum, limited medical evaluation and general health supervision, alcoholism education, organized individual and group counseling, discharge referral to necessary supportive services, and a patient follow-through program after discharge.

(c) *Alcoholism recovery house services* are the provision of an alcohol-free residential setting with supporting services and social and recreational facilities for detoxified alcoholics to aid their adjustment to alcohol-free patterns of living and their engagement in occupational training, gainful employment, or other types of community activities.

(d) *Alcoholism long-term treatment services* are long-term provision of a residential care setting providing a structural living environment, board, and room for alcoholics with impaired self-maintenance capabilities needing personal guidance and assistance to maintain sobriety and optimum health status.

(5) Authorization and designation of categories of alcoholism treatment service.

(a) The license issued to an alcoholism treatment facility shall show the category or categories of alcoholism treatment the facility is licensed to provide.

(b) For each category of alcoholism treatment service, the licensee shall designate and maintain the particular category or categories of service for which the department has shown approval on the license.

(c) If maintenance and operation are not in compliance with chapter 71.12 RCW or chapter 246-326 WAC, the department may deny, suspend, or revoke authorization to provide a particular category of alcoholism treatment service.

(6) Posting of license. The license for an alcoholism treatment facility shall be posted in a conspicuous place on the premises.

(7) New construction.

(a) When new construction is planned, the following shall be submitted to the department for review:

(i) A written program containing, at a minimum, information concerning services to be provided and operational methods to be used affecting the extent of facilities required by these regulations.

(ii) Duplicate sets of preliminary plans for new construction drawn to scale and including:

(A) A plot plan showing streets, driveways, the water and sewage disposal systems, grade and location of building or buildings on the site;

(B) Plans of each floor of the building or buildings, existing and proposed, designating the function of each room and showing all fixed equipment:

(iii) Preliminary plans shall be accompanied by a statement as to:

(A) Source of the water supply;

(B) Method of sewage and garbage disposal; and

(C) A general description of construction and materials including interior finishes.

(b) Construction shall not be started until duplicate sets of final plans for new construction, drawn to scale, and specifications have been submitted to and approved by the department. Final plans and specifications shall show complete details to be furnished to contractors for construction of buildings. These shall include:

(i) Plot plan;

(ii) Plans of each floor of the building or buildings designating the function of each room and showing all fixed equipment;

(iii) Interior and exterior elevations, building sections, and construction details;

(iv) A schedule of floor, wall, and ceiling finishes, and the types and sizes of doors and windows;

(v) Plumbing, heating, ventilating, and electrical systems; and

(vi) Specifications fully describing the workmanship and finishes.

(c) Adequate provisions shall be made for the safety and comfort of patients if construction work takes place in or near occupied areas.

(d) All construction shall take place in accordance with the approved final plans and specifications.

(i) The department shall be consulted prior to making any changes from the approved plans and specifications.

(ii) When indicated by the nature or extent of proposed changes, the department may require the submission of modified plans or addenda for review prior to considering proposed change or changes for approval.

(iii) Only those changes approved by the department shall be incorporated into a construction project.

(iv) In all cases, modified plans or addenda on changes incorporated into the construction project shall be submitted for the department's file on the project even though it was not required these be submitted prior to approval.

(8) Exemptions.

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

(b) The secretary or designee may, upon written application, allow the substitution of procedures, materials, or equipment for those specified in these regulations when such procedures, materials, or equipment have been demonstrated, to the satisfaction of the secretary, to be at least equivalent to those prescribed.

(c) All exemptions or substitutions granted pursuant to the foregoing provisions shall be reduced to writing and filed with the department and the alcoholism treatment facility.

(9) Compliance with other regulations.

(a) Rules and regulations adopted by the Washington state fire marshal under provision of RCW 71.12.485 which are found in chapter 212-40 WAC apply.

(b) If there is no local plumbing code, the *Uniform Plumbing Code of the International Association of Plumbing and Mechanical Officials*, 1979 edition, shall be followed.

(c) Compliance with these regulations does not exempt an alcoholism treatment facility from compliance with local

and state electrical codes or local zoning, building, and plumbing codes.

(10) Transfer of ownership. The possession or ownership of an alcoholism treatment facility shall not be transferred until the transferee has been notified by the department that the transferee's application for license has been approved.

(11) Denial, suspension, modification, or revocation of licenses or a license appeal; notice; adjudicative proceeding.

(a) When the department determines a facility has failed or refused to comply with the requirements of chapter 71.12 RCW and/or these rules, the department may deny, suspend, modify, or revoke a license. The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(b) A license applicant or holder contesting a department license decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 43.70.040, 34.05.220 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-326-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 1989 1st ex.s. c 9 § 106. 90-06-019 (Order 039), § 248-26-020, filed 2/28/90, effective 3/1/90. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-020, filed 8/3/84. Formerly WAC 248-22-510.]

WAC 246-326-030 Administrative management. (1) Governing body.

(a) The alcoholism treatment facility shall have a governing body responsible for adopting policies related to the conduct of the alcoholism treatment facility in accordance with applicable laws and regulations.

(b) The governing body shall provide for the personnel, facilities, equipment, supplies, and special services necessary to meet patient needs for services and to maintain and operate the facility in accordance with applicable laws and regulations.

(2) **Administrator.**

(a) There shall be an administrator at least twenty-one years of age, with no history of drug or alcoholism misuse for a period of two years prior to employment, to manage the alcoholism treatment facility in compliance with chapter 71.12 RCW and chapter 246-326 WAC.

(b) The administrator either shall be on duty or readily available at all times except when an alternate administrator meeting qualifications in this section is designated in writing or in written job description and is on duty or readily available.

(c) The administrator shall establish and maintain a current written plan of organization including all positions and delineating the functions, responsibilities, authority, and relationships of all positions within the alcoholism treatment facility.

(d) The administrator shall ensure the existence and availability of policies and procedures which are:

(i) Written, developed, reviewed, and revised as necessary to keep them current;

(ii) Dated and signed by persons having responsibility for approval of the policies and procedures;

(iii) Readily available to personnel; and

(iv) Followed in the care and treatment of patients.

(3) **Personnel.**

(a) There shall be sufficient numbers of qualified personnel, who are not patients, to provide services needed by patients and to properly maintain the alcoholism treatment facility. At least one staff person shall be on duty or in residence within the alcoholism treatment facility at all times.

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

(c) Upon employment each person shall have or provide documented evidence of a tuberculin skin test by the Mantoux method unless medically contraindicated. When this skin test is negative (less than ten millimeters of induration read at forty-eight to seventy-two hours), no further tuberculin skin test shall be required. A positive test consists of ten millimeters or more of induration read at forty-eight to seventy-two hours. Positive reactors shall have a chest x-ray within ninety days of the first day of employment. Exemptions and specific requirements are as follows:

(i) Those with positive tests who have completed a recommended course of preventive or curative treatment, as determined by the local health officer, shall be exempted from testing.

(ii) Records of test results, x-rays, or exemptions to such shall be kept by the facility.

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

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

(f) A planned, training program shall be provided to any employee not prepared for his or her job responsibilities through previous training.

(g) Records shall be maintained of orientation, on-the-job training, and continuing education provided for employees.

(h) At least one staff person on the premises shall be currently qualified to provide basic first aid and cardiopulmonary resuscitation.

(i) Medical or nursing responsibilities, functions, or tasks shall be consistent with current Washington state law governing physician or nursing practice.

(j) Records or documentation of compliance with employee requirements described in chapter 246-326 WAC shall be available.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-030, filed 8/3/84. Formerly WAC 248-22-520.]

WAC 246-326-035 HIV/AIDS education and training. Alcoholism treatment facilities shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care Facility Employees*, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040, 70.24.310 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-035, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-035, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310. 89-21-038 (Order 3), § 248-26-035, filed 10/12/89, effective 11/12/89.]

WAC 246-326-040 Patient care and services—

General. (1) Individual treatment plan. For each patient, there shall be a plan individualized for treatment to include the treatment prescribed as well as assessment of physical, mental, emotional, social, and spiritual needs.

(a) The patient shall be encouraged to participate in development of the plan.

(b) Work assignments may be permitted when part of the individual treatment plan and under supervision of staff.

(2) **General care and treatment.**

(a) Each patient shall have available the equipment, supplies, and assistance needed to maintain personal cleanliness and grooming.

(b) The patient shall be treated in a manner respecting individual identity and human dignity with policies and procedures, as appropriate, to include:

(i) Protection from invasion of privacy: *Provided*, That reasonable means may be used to detect or prevent contraband from being possessed or used on the premises;

(ii) Confidential treatment of clinical and personal information in communications with individuals not associated with the plan of treatment;

(iii) Means of implementing federal requirements related to confidentiality of records, Title 42, Code of Federal Regulations, Part 2, Federal Register, July 1, 1975;

(iv) Provision of reasonable opportunity to practice religion of choice insofar as such religious practice does not infringe upon rights and treatment of other patients or the treatment program in the alcoholism treatment facility:

Provided, That a patient also has the right to refuse participation in any religious practice;

(v) Communication with significant others in emergency situations;

(vi) Freedom from physical abuse, corporal punishment, or other forms of abuse against the patient's will, including being deprived of food, clothes, or other basic necessities.

(c) Infection control, general.

(i) There shall be policies and procedures designed to prevent transmission of infection minimally to include aseptic techniques, handwashing, methods of cleaning, disinfecting or sterilizing, handling, and storage of all supplies and equipment.

(ii) There shall be reporting of communicable disease of patients in accordance with chapter 246-100 WAC.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-040, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-040, filed 8/3/84. Formerly WAC 248-22-530.]

WAC 246-326-050 Health and medical care services—All facilities. (1) Admission and retention of patients shall be appropriate to services available.

(a) Each alcoholism treatment facility shall have written policies related to admission, retention, leave, and discharge.

(b) Patients manifesting signs and symptoms of a physical or mental condition requiring medical or nursing care not provided or available in the alcoholism treatment facility shall not remain in the facility. Staff shall facilitate movement of such patients to an appropriate setting as soon as possible and feasible.

(2) Each alcoholism treatment facility shall have a current, transfer agreement with a hospital licensed pursuant to chapter 70.41 or 71.12 RCW.

(3) Medical coverage.

(a) A physician shall be responsible for direction of all medical aspects of the alcoholism treatment program or programs with medical responsibility minimally to include approval of policies and procedures related to:

(i) Initial and ongoing medical screening and assessment of patients;

(ii) Care of patients with minor illnesses or other conditions requiring minor treatment or first aid; and

(iii) Medical emergencies.

(b) There shall be specific arrangements for physician services at all times with schedules, names, and phone numbers posted and available in appropriate locations. Physician services may include hospital emergency departments, group clinic practice, or equivalent emergency facilities.

(c) Medical emergency policy and procedures related to emergency situations shall minimally include:

(i) Delineation of circumstances, signs, and symptoms related to specific actions required of personnel;

(ii) Circumstances warranting immediate contact of physician services or other licensed personnel;

(iii) Minimum qualifications for staff executing procedures; and

(iv) Written approval or acceptance of medical emergency policies and procedures by administrator and responsible

physician. When nursing services are provided, approval or acceptance by the responsible registered nurse shall be included.

(4) Nursing services. Nursing services, when provided, shall be planned and supervised by a registered nurse minimally to include:

(a) Responsibility for any nursing functions performed by personnel in the alcoholism treatment facility.

(b) Selection, training, and written evaluation of personnel or volunteers providing nursing observation and/or care.

(c) Written nursing procedures to guide actions of personnel and volunteers providing nursing observation and/or care.

(5) Supplies. Appropriate supplies for first aid, medical, or nursing procedures shall be readily available.

(6) Safety measures.

(a) There shall be written policies and procedures governing actions of staff following any accident or incident jeopardizing a patient's health or life, minimally to include:

(i) Facilitation of patient protection and safety;

(ii) Investigation of accidents or incidents;

(iii) Institution of preventive measures insofar as possible;

(iv) Written documentation in the patient treatment record.

(b) There shall be provision for staff to gain immediate emergency access to any room occupied by a patient.

(7) Individual patient treatment/care records.

(a) There shall be an organized record system providing for:

(i) Maintenance of a current, complete, treatment record for each patient;

(ii) A systematic method of identifying and filing patient records so each record can be located readily;

(iii) Maintenance of the confidentiality of patient treatment records by storing and handling the records under conditions allowing only authorized persons access to the records.

(b) Each entry in the patient's treatment/care record shall be dated and authenticated by the signature and title of the person making the entry. (An authentication record system may be acceptable.)

(c) Each record shall be available to treatment staff and include:

(i) Identifying and sociological data including the patient's full name, birthdate, home address, or last known address if available;

(ii) Date of admission;

(iii) The name, address, and telephone number of the patient's personal physician or medical practitioner if available;

(iv) A record of the findings of any health screenings;

(v) A record of medical findings following examination by a medical practitioner;

(vi) A record of observations of the patient's condition;

(vii) A physician or legally authorized practitioner's written order for any modified diet served to the patient;

(viii) Orders for any drugs or medical treatment shall be dated and signed by a physician or legally authorized practitioner unless self-administered from a container bearing

an appropriate pharmacist-prepared label in accordance with instructions on that label;

(ix) A record of any administration of a medication or treatment to a patient by the person legally authorized to administer medications and/or observation of self-administration including time and date of administration and signature of the individual administering the medication or observing self-administration;

(x) Medical progress notes, when applicable, shall be made in the treatment record.

(8) Notification regarding change in patient's condition. A member of the patient's family or another person with whom the patient is known to have a responsible personal relationship shall be notified as rapidly as possible, upon the discretion of the treating physician, should a serious change in the patient's condition, transfer, or death of the patient occur: *Provided however*, That the patient is incapable of rational communication. Such notification shall not occur without the consent of the patient any time when the patient is capable of rational communication.

(9) Food services - general.

(a) Food service sanitation shall be governed by chapter 246-215 WAC rules and regulations of the state board of health governing food service sanitation.

(b) Areas used for storage and preparation of food shall be used only for performance of assigned food service duties. Through traffic is prohibited.

(c) There shall be current written policies and procedures to include safety, food acquisition, food storage, food preparation, serving of food, and scheduled cleaning of all food service equipment and work areas. These policies shall be readily available to all personnel.

(i) All personnel handling food, including patients assisting in food services, shall follow the procedures.

(ii) Cooking shall not be permitted in sleeping rooms.

(d) Food provided shall be appropriate to meet the needs of patients on a twenty-four hour basis.

(10) Food service - alcoholism intensive inpatient treatment, recovery house, long-term treatment services.

(a) There shall be a designated individual responsible for food service.

(b) Staff trained in food service procedures shall be present during all meal times when meals are served on the premises.

(c) Meals and nourishments shall be palatable, properly prepared, attractively served, and sufficient in quality, quantity, and variety to meet "Recommended Dietary Allowance," *Food and Nutrition Board, National Research Council*, 1980 edition, adjusted for activity unless medically contraindicated.

(i) At least three meals a day shall be served at regular intervals with not more than fourteen hours between the evening meal and breakfast.

(ii) There shall be written medical orders for any therapeutic diet served to a patient. Therapeutic diets shall be prepared and served as prescribed.

(iii) A current diet manual, approved in writing by a dietitian and physician, shall be used for planning and preparing diets.

(d) Menus shall be planned, written, and dated at least one week in advance.

(i) Food substitutions shall be of comparable nutritional value and recorded as served.

(ii) A record of planned menus with substitutions and food as served shall be retained for six months.

(iii) The written order of a legally authorized medical practitioner is required prior to serving any nutrient concentrate or supplement.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-326-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-050, filed 8/3/84.]

WAC 246-326-060 Medication responsibility—Administration of medications and treatments. (1) There shall be provisions for timely delivery of necessary patient medications from a pharmacy so a physician's or legally authorized practitioner's orders for medication therapy can be implemented without undue delay.

(2) There shall be written policies and procedures providing for description of types of stock medications, procurement, storage, control, use, retention, release, and disposal of medications in accordance with applicable federal and state laws and regulations.

(a) There shall be adequate medication facilities providing for locked storage of all medications.

(b) There shall be a sink with hot and cold running water, other than the lavatory or sink in a toilet room, available.

(c) Medications, including stock medications, shall be accessible only to authorized staff.

(d) Stock internal and external medicine and medications shall be stored apart from each other.

(e) Medicine or medications requiring special storage conditions shall be stored according to manufacturer's or pharmacist's directions.

(f) The inside temperature of the refrigerator where drugs are stored shall be maintained within a thirty-five to fifty degree Fahrenheit range. Medication stored in a refrigerator shall be enclosed in a container to separate the medications from food or other products.

(g) All medications shall be obtained and kept in containers labeled securely and legibly by a pharmacist, or in original containers labeled by the manufacturer, and shall not be transferred from the container except for preparation of a single dose for administration. A label on a container of medication shall not be altered or replaced except by a pharmacist.

(i) Medication containers having soiled, damaged, incomplete, illegible, or makeshift labels shall be returned to a pharmacist for relabeling or disposal.

(ii) Medication in containers having no labels shall be destroyed.

(h) Any medication having an expiration date shall be removed from usage and destroyed immediately after the expiration date.

(i) All of an individual patient's medications left in the facility following discharge, transfer, or departure, except those released to the patient upon discharge and Schedule II controlled substances, shall be destroyed by authorized staff after departure of the patient or returned to a pharmacist for appropriate disposition.

(i) Medications or medicines shall be destroyed in the presence of a witness or by a pharmacist in such a manner that the medications cannot be retrieved, salvaged, or used; medications shall not be discarded with garbage or refuse.

(ii) For any medication destroyed, staff shall make an entry in the individual patient treatment record to include:

- (A) Date;
- (B) Name of medication;
- (C) Strength of medication;
- (D) Quantity of medication;
- (E) Signature of staff who destroyed the medication; and
- (F) Signature of staff who witnessed destruction.

(j) When staff who are legally authorized to administer medications are employed or available in an alcoholism treatment facility, a physician or legally authorized prescribing practitioner may provide an emergency drug or medication supply within a facility: *Provided*, That the following requirements are met:

(i) The emergency drug or medication supply shall be considered an extension of the physician's or prescribing practitioner's own drug or medication supply and remain his or her responsibility.

(ii) All drugs or medications for an emergency supply shall be kept in a separate, secure, locked, emergency drug drawer or cabinet or equivalent.

(iii) The emergency drug or medication supply shall be limited to medications needed for genuine medical emergencies, including the need for the medical management of an intoxicated person.

(iv) The quantity of any medication in a particular dosage strength shall be limited to a seventy-two hour supply determined by calculating the number of patients and the potential need for emergency medication.

(v) A list of drugs or medications to be kept in the emergency medication supply shall be available with the emergency medication supply.

(A) This list shall include the names and dosage strength of each medication, and be dated and signed by the physician or legally authorized prescribing practitioner.

(B) The emergency medication supply shall contain only those medications on this list.

(vi) There shall be a record of each medication removed or added to the emergency medication supply. This record shall include:

- (A) Name and amount of medication removed or added;
- (B) Date of removal or addition;
- (C) Identification of the patient receiving a medication removed;
- (D) Signature of staff removing or adding to the emergency medication supply.

(k) Medications listed as controlled substances in Washington shall be prohibited. This does not preclude individual patient prescriptions or medications kept in an emergency medication supply pursuant to WAC 246-326-060 (2)(j).

(l) The alcoholism treatment facility maintaining nonprescription medications in a first-aid supply shall establish policies and procedures for use of the first-aid supply, approved by signature of a legally authorized prescribing practitioner.

(3) Administration of medications and medical treatments. Policies and procedures shall be established for

administration of medications, including self-administration, within each alcoholism treatment facility.

(a) There shall be an organized system designed to ensure accuracy in receiving, transcribing, and implementing orders for administration of medications and treatments.

(i) Orders for medications and treatments, including standing orders, used in the care of a patient shall be entered in the patient's treatment record and shall be signed by a physician or other legally authorized practitioner.

(ii) Orders for drugs and medical treatments shall include:

(A) Date ordered;

(B) Name of the medication or description of the treatment including the name of medication, solution, or other agent to be used in the treatment;

(C) Dosage, concentration, or intensity of a medication, solution, or other agent used;

(D) Route or method of administration;

(E) Frequency, time interval between doses, or duration of administration;

(F) Maximum number of doses or treatments to be administered;

(G) Circumstances for which the medication or treatment is to be administered; and

(H) Signature of the legally authorized prescribing practitioner.

(iii) A verbal or telephone order for the administration of medication or medications or medical treatment or treatments shall be received by a licensed nurse from the physician or other practitioner legally authorized to prescribe. Upon receipt of such an order, the following shall be entered immediately into the patient's treatment record.

(A) Data required under WAC 246-326-060 (3)(a)(ii);

(B) Name of the physician or legally authorized practitioner issuing the order;

(C) Signature of the licensed nurse receiving the order;

(D) Physician's or legally authorized practitioner's signature for such an order shall be obtained as soon as possible and not later than five days after receipt of the verbal or telephone order.

(iv) Persons administering medications and medical treatments to patients shall be qualified by training and legally permitted to assume this responsibility.

(v) Any medication administered to a patient shall be prepared, administered, and recorded in the patient's treatment record by the same person. This shall not be interpreted to preclude a physician's administration of a medication having been prepared for administration by a person assisting the physician in the performance of a diagnostic or treatment procedure or the administration of a single, properly labeled medication having been dispensed or issued from a pharmacy so the medication is ready to administer.

(b) Medications shall be administered or self-administered only as legally authorized through written order, approval, or prescription signed by a physician or other legally authorized practitioner or self-administered from a container in accordance with an appropriately affixed pharmacist-prepared label.

(c) Medications shall be administered by appropriately licensed personnel when they are not self-administered.

(d) Self-administration of drugs by a patient shall be in accordance with the following:

(i) The patient shall be physically and mentally capable of administering his or her own medication properly.

(ii) Any medication a patient has for self-administration in the facility shall have been ordered, approved, or prescribed by a legally authorized practitioner.

(iii) Prescription medications, over-the-counter medications purchased independently by the patient, and other medicinal materials used by a patient shall be kept in individual storage units within locked drawers, medicine cabinets, compartments, or equivalent. Access to all medications shall be controlled by authorized staff. Use of such medications and materials in each individual storage unit shall be restricted to the particular patient for self-administration.

(iv) Staff shall observe use of medications by each patient and record the observation in the patient's individual treatment record.

(e) Any medications used in the subacute detoxification service shall be self-administered only with observation of use of medication recorded in the individual treatment record by the staff of the alcoholism treatment facility.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-060, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-060, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-060, filed 8/3/84.]

WAC 246-326-070 Maintenance and housekeeping—Laundry. (1) The alcoholism treatment facility structure, its component parts, facilities, and equipment shall be kept clean and in good repair and maintained in the interest of patients' safety and well-being.

(2) The storage and disposal of garbage and refuse shall be by methods preventing conditions conducive to the transmission of disease or creation of a nuisance, breeding place for flies, or a feeding place for rodents.

(a) A separate, well-ventilated room or suitable outside area shall be provided for storage of garbage and refuse.

(b) Garbage and refuse storage containers shall be of leakproof, nonabsorbent construction with close fitting covers.

(c) Adequate cleaning facilities shall be provided.

(3) The alcoholism treatment facility shall be kept free from insects and rodents.

(4) The alcoholism treatment facility shall provide a utility sink or an equivalent means of obtaining and disposing of mop water in areas other than those used for food preparation or serving. Wet mops shall be stored in an area with adequate ventilation.

(5) Laundry.

(a) The alcoholism treatment facility shall make provision and be responsible for the proper handling, cleaning, and storage of linen and other washable goods.

(b) Unless all laundry is sent out, every alcoholism treatment facility shall be provided with a laundry room equipped with laundry facilities.

(i) Laundry equipment shall be located in a separate room used for laundry, housekeeping, or storage of cleaning supplies and equipment.

(ii) Laundry equipment wash cycle shall have the capability of reaching a water temperature of one hundred forty degrees Fahrenheit.

(iii) The soiled linen storage and sorting area shall be in a well-ventilated area separate from clean linen handling and storage area.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-070, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-070, filed 8/3/84. Formerly WAC 248-22-540.]

WAC 246-326-080 Site and grounds. The alcoholism treatment facility shall be located in an area properly drained and served by at least one street that is usable under all weather conditions.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-080, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-080, filed 8/3/84. Formerly WAC 248-22-580.]

WAC 246-326-090 Physical plant and equipment.

(1) Patients' sleeping rooms.

(a) There shall be at least eighty square feet of usable floor space in single-bed sleeping rooms and seventy square feet of usable floor space per bed in multiple bed sleeping rooms.

(i) No portion of a sleeping room having less than seven foot six inch ceiling height may be counted as part of the required area.

(ii) The maximum capacity of any patient sleeping room shall not exceed twelve beds.

(b) Each sleeping room shall be located to prevent through traffic and minimize the entrance of excessive noise, odors, and other nuisances.

(c) Only rooms having unrestricted direct access to a hallway, living room, outside, or other common-use area shall be used as sleeping rooms.

(d) Sleeping rooms shall be outside rooms with a clear glass window area in a vertical wall not less than one-tenth of the required floor area.

(i) Rooms shall not be considered to be outside rooms if such required window area is within ten feet of another building or other obstruction to view or opens into a window well, enclosed porch, light shaft, ventilation shaft, or other enclosure of similar confining nature.

(ii) Windows designed to open shall operate freely.

(iii) Curtains, shades, blinds, or equivalent shall be provided at each window for visual privacy.

(e) A basement room may be used as a sleeping room provided the floor of the room is no more than three feet eight inches below the base of the window or windows, and there is adequate natural light. The grade shall extend ten feet out horizontally from the base of the window or windows.

(f) Each patient shall be provided with sufficient storage facilities, either in or convenient to his or her sleeping room, to adequately store a reasonable quantity of clothing and personal possessions.

(g) Sleeping rooms, furniture, and furnishings.

(i) Each patient shall be provided a comfortable bed not less than thirty-six inches wide, with a mattress in good condition.

(ii) To be acceptable, a patient's bed shall be a sturdy, nonfolding type, at least thirty-six inches wide and length appropriate to the height of the patient.

(iii) Room design and size shall be adequate to accommodate patient beds spaced three feet apart.

(iv) Sleeping rooms shall be provided with adequate furnishings including one chair per bed available in the facility.

(2) Toilet and bathing facilities.

(a) On each level there shall be one toilet and one lavatory for each eight persons or fraction thereof.

(b) There shall be one bathing facility for each twelve persons or fraction thereof residing in the facility.

(c) The word "persons" used in subsection (2)(a) and (b) of this section includes all patients and staff members not having private toilet and bathing facilities for their exclusive use.

(d) There shall be a lavatory in each toilet room unless the toilet room adjoins a single patient room containing a lavatory.

(e) Each toilet and each bathing facility shall be enclosed in a separate room or stall, with a door or curtain for privacy. One toilet may be permitted in a room containing a single bathing facility. When a room contains more than one toilet or one bathing facility, it shall be used by one sex only.

(f) Grab bars shall be securely mounted at toilets and bathing facilities in such numbers and in such locations that accidental falls will be minimized minimally to include:

(i) One grab bar at each bathing facility.

(ii) One grab bar appropriately mounted at each toilet.

(3) Patient dining, living, and therapy rooms.

(a) The alcoholism treatment facility shall have two or more rooms suitably furnished to accommodate patients' dining, social, educational and recreational activities, group therapy, and staff meetings. At least one of these rooms shall be an outside room with a window or windows.

(i) An adequate dining area shall be provided with capacity to seat at least fifty percent of the patients at each meal setting.

(ii) If a multipurpose room is used for dining and social and recreational activities or meetings, there shall be sufficient space to accommodate each of the activities without their interference with one another.

(iii) At least twenty-five square feet of floor space per bed shall be provided for dining, social, educational, recreational activities, and group therapy.

(b) There shall be at least one room providing privacy for interviewing and counseling of patients on an individual basis. Additional rooms shall be provided in a ratio of 1:12 patient beds or major fraction thereof.

(4) Medical examination room. If there is regular provision for a medical practitioner to perform physical examinations of patients within the facility, there shall be an examination room in the facility. This examination room shall be equipped with an examination table, examination light, and storage units for medical supplies and equipment. There shall be a handwashing facility readily accessible to the examination room.

(5) Utility and storage for medical and nursing supplies and equipment. If the services provided by the alcoholism treatment facility involve the use of medical supplies and equipment, there shall be facilities designed and equipped for washing, disinfection or sterilization, storage, and other handling of supplies and equipment in a manner ensuring

segregation of clean and sterile supplies and equipment from those that are contaminated, soiled, or used.

(6) Storage facilities. There shall be sufficient, suitable storage facilities to provide for storage of clean linen and other supplies and equipment under sanitary conditions.

(7) Handrails on stairways and ramps.

(a) All stairways and ramps shall be provided with handrails on both sides.

(b) Adequate guardrails and other safety devices shall be provided on all open stairways and ramps.

(8) Surfaces (floors, walls, ceilings).

(a) The surfaces in each room and area of the alcoholism treatment facility shall be easily cleanable and suited to the functions of the room or area.

(b) Toilet rooms, bathrooms, kitchens, and other rooms subject to excessive soiling or moisture shall have washable, impervious floors.

(c) Ramp surfaces and stairway treads shall be of nonslip materials.

(9) Communications. There shall be at least one telephone and such additional telephones as may be needed to operate the alcoholism treatment facility and to provide for a telephone to be readily accessible in the event of fire or other emergency.

(10) Lighting.

(a) Lighting in all areas of the facility shall provide adequate illumination.

(b) An adequate number of electrical outlets shall be provided.

(c) General lighting shall be provided for sleeping rooms.

(d) Emergency lighting equipment, such as flashlights or battery-operated lamps, shall be available and maintained in operating condition.

(11) Heating-temperature.

(a) The alcoholism treatment facility shall be equipped with an approved heating system capable of maintaining a healthful temperature. Use of portable space heaters is prohibited unless approved in writing by the Washington state fire marshal.

(b) Temperature shall be maintained at a healthful level and not less than sixty-five degrees Fahrenheit.

(12) Ventilation.

(a) Ventilation of all rooms used by patients or personnel shall be sufficient to remove all objectionable odors, excessive heat, or condensation.

(b) All inside rooms, including toilets, bathrooms, and other rooms in which excessive moisture, odors, or contaminants originate, shall be provided with mechanical exhaust ventilation.

(13) Water supply. Hot and cold water under pressure shall be readily available at all times.

(a) Water used for domestic purposes shall meet the standards of the department as described in chapter 246-290 WAC.

(b) Cross connections of any kind are prohibited.

(c) In the event an unsafe or nonpotable water supply is used for irrigation, fire protection, or other purposes, the system shall be adequately color-coded or labeled to lessen any chance of water use for domestic purposes.

(d) Hot water at lavatories, bathtubs, and showers used by patients shall not exceed one hundred twenty degrees Fahrenheit.

(14) Sewage disposal system. All sewage shall be discharged into a public sewage system where such system is available and is acceptable to the department. Otherwise, sewage shall be collected, treated, and disposed of in an independent sewage disposal system approved by the appropriate local health department.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-090, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-090, filed 8/3/84. Formerly WAC 248-22-590.]

WAC 246-326-100 Special additional requirements for facilities providing alcoholism detoxification service.

(1) When an alcoholism detoxification service is located in an alcoholism treatment facility, it shall be designated as either an acute detoxification service or a subacute detoxification service.

(2) Acute detoxification services shall provide:

(a) Initial medical screening and ongoing nursing assessments of each patient with transfer to an appropriate hospital when signs and symptoms of a serious illness or severe trauma exist.

(b) Nursing services as described in WAC 246-326-050(4) with the following additional requirements:

(i) When there is not a need for full-time services of a registered nurse, part-time registered nurse supervision is acceptable, provided such a supervisor is on duty within the facility at least four hours each week.

(ii) At least one staff member, qualified to provide nursing observation and care needed by patients during detoxification, shall be on duty in the facility at all times.

(A) "Qualified" shall include training and approval by the responsible registered nurse supervisor to provide physiological and psychological observation and care as required.

(B) When a licensed nurse is not on duty, a registered nurse shall be on call who shall come to the alcoholism treatment facility when indicated.

(iii) Continuing observation of each patient's condition shall be by persons competent to recognize and evaluate significant signs and symptoms and to take appropriate action.

(A) Frequency of observation shall correspond with degrees of acuity, severity, and instability of patient's condition with at least one written note on patient condition every eight hours in each individual patient treatment record.

(B) Observation of significant signs and symptoms indicative of abnormality, adverse change, or favorable progress including vital signs, motor and sensory abilities, behavior, and discomfort.

(C) Observations shall be recorded and signed by the person making the observation.

(D) Significant adverse signs and symptoms shall be appropriately reported to a physician with nature of the report and time noted in the patient's treatment record.

(3) Subacute detoxification services shall provide:

(a) Screening of patients by a person knowledgeable about alcoholism and trained and skilled in recognition of significant signs and symptoms of illness or trauma.

(b) Continuing observation of each patient's condition by persons competent to recognize and evaluate significant signs and symptoms and to take appropriate action.

(i) Frequency of observation shall correspond to degree of acuity, severity, and instability of patient's condition with appropriate documentation in the individual treatment record;

(ii) Observation of significant signs and symptoms indicative of abnormality, adverse change, or favorable progress including vital signs, motor and sensory abilities, behavior, and discomfort.

(iii) Observations shall be recorded and signed by the person making the observation.

(c) Personnel on duty having valid, current first-aid and cardiopulmonary resuscitation certificates.

(d) Medication shall not be provided or administered by personnel in the distinct part of the alcoholism treatment facility where subacute detoxification service is located.

(e) A written plan or policies and procedures for management of patient-owned medications to include:

(i) Method of verification of need for patient to continue a medication while in subacute detoxification;

(ii) Method of verification that medication is correct (as labeled);

(iii) Security of patient-owned medication while in the facility;

(iv) Disposition of patient-owned medications when patient leaves; and

(v) Observation and documentation of patient use of any medication in the individual treatment record.

[Statutory Authority: RCW 43.70.040 and chapter 71.12 RCW. 92-02-018 (Order 224), § 246-326-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-326-100, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 71.12 RCW. 84-17-010 (Order 2130), § 248-26-100, filed 8/3/84. Formerly WAC 248-22-550.]

WAC 246-326-990 Fees. Alcoholism treatment facilities licensed under chapter 71.12 RCW shall:

(1) Submit an annual fee of forty-five dollars for each bed space within the licensed bed capacity of the alcoholism treatment facility to the department;

(2) Include all bed spaces in rooms complying with physical plant and movable equipment requirements for twenty-four-hour assigned patient rooms; and

(3) Set up twenty-four-hour assigned patient beds only within the licensed bed capacity approved by the department.

[Statutory Authority: RCW 43.70.250. 92-12-028 (Order 273), § 246-326-990, filed 5/28/92, effective 6/28/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-326-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-327 WAC

HOME HEALTH AGENCIES

WAC

246-327-001
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246-327-035

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WAC 246-327-001 Purpose. The purpose of these rules is to administratively implement chapter 70.127 RCW by establishing minimum licensing standards for home health agencies related to safe and competent care for patients.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-005, filed 6/7/89.]

WAC 246-327-010 Definitions. For the purpose of chapter 70.127 RCW and chapter 246-327 WAC, the following words and phrases shall have the following meaning unless the context clearly indicates otherwise.

(1) "Acute care" means care provided by an agency for patients who are not medically stable or have not attained a satisfactory level of rehabilitation. These patients require frequent monitoring by a health care professional in order to maintain their health status.

(2) "Administrator" means a person managing and responsible for the day-to-day operation of each licensed agency.

(3) "Advanced registered nurse practitioner" means a registered nurse with a ARNP recognition document under chapter 246-839 WAC.

(4) "Agency" means a home health agency defined under this section and chapter 70.127 RCW.

(5) "AIDS" means acquired immunodeficiency syndrome defined under WAC 246-100-011.

(6) "Authorizing practitioner" means a person authorized to sign a home health plan of treatment including a physician licensed under chapter 18.57 or 18.71 RCW, a podiatrist licensed under chapter 18.22 RCW, or an advanced registered nurse practitioner as authorized by the board of nursing under chapter 18.88 RCW.

(7) "Branch office" means a location or site from which an agency provides services within a portion of the total geographic area served by the parent agency. The branch office is part of the agency, included in the license of the agency, and located sufficiently close to share administration, supervision, and services.

(8) "Bylaws" means a set of rules adopted by an agency for governing the agency operation.

(9) "Clinical note" means a written, signed, dated notation of each contact with a patient which may contain a description of signs and symptoms, treatments, medications given, the patient reaction, any changes in physical or emotional condition, and other pertinent information.

(10) "Department" means the department of health.

(11) "Dietitian" means an individual certified under chapter 18.138 RCW, Dietitians and Nutritionists.

(12) "Family" means an individual or individuals who are important to and designated by the patient, and who may or may not be relatives.

(13) "Governing body" means the person, who may be the owner or a group, with responsibility and authority to establish policies related to operation of the agency.

(14) "HIV" means human immunodeficiency virus defined under RCW 70.24.017(7).

(15) "Home health agency" means a private or public agency or organization administering or providing home health aide services or two or more home health services directly or through a contract arrangement to ill, disabled, or infirm persons in places of temporary or permanent residence.

(16) "Home health aid" means an individual registered or certified as a nursing assistant under chapter 18.88A RCW.

(17) "Home health aid services" means services provided by a home health agency under supervision of a registered nurse, physical therapist, occupational therapist, or speech therapist and as further defined under RCW 70.127.010(7).

(18) "Home health plan of care" or "plan of care" means a written plan of care established by a home health agency by appropriate health care professionals, including comprehensive case assessment and management, and describing maintenance care to be provided. A patient or the patient's representative shall be allowed to participate in the development of the plan of care to the extent practicable.

(19) "Home health plan of treatment" or "plan of treatment" means a written plan of care established by a physician, a podiatrist, or an advanced registered nurse practitioner, in consultation with appropriate health care professionals within the agency, including comprehensive case assessment and management, and describing medically necessary acute care to be provided for treatment of illness or injury.

(20) "Home health services" means health or medical services provided to ill, disabled, or infirm persons. Home health services of an acute or maintenance care nature include, but are not limited to:

- (a) Nursing services;
- (b) Home health aide services;
- (c) Physical therapy services;
- (d) Occupational therapy services;
- (e) Speech therapy services;
- (f) Respiratory therapy services;
- (g) Nutritional services;
- (h) Homemaker services;
- (i) Personal care services;
- (j) Medical social services;
- (k) Medical supplies or equipment services; and
- (l) Pharmacy services.

(21) "Homemaker services" means services assisting ill, disabled, or infirm persons with household tasks essential to achieving adequate household and family management, including transportation, shopping, and maintenance of premises.

(22) "Ill, disabled, or infirm persons" means persons needing home health, hospice, or home care services in order to maintain themselves in their places of temporary or permanent residence.

(23) "Licensed practical nurse" means an individual licensed as a practical nurse under chapter 18.78 RCW, Practical nurses.

(24) "Maintenance care" means care provided by home health agencies that is necessary to support an existing level of health and to preserve a patient from further failure or decline.

(25) "Managed care plan" means a plan controlled by the terms of the reimbursement source.

(26) "May" means permissive or discretionary on the part of the department.

(27) "Medical social worker" means an individual with a bachelor's degree in social work, psychology, or a related field and having completed one year of social work experience and registered as a counselor under RCW 18.19.090.

(28) "Nutritional services" means nutritional assessment and counseling, dietary teaching, and the monitoring and management of special diets and hyperalimentation provided by a dietitian or certified nutritionist under chapter 18.138 RCW.

(29) "Occupational therapist" means an individual licensed as an occupational therapist under chapter 18.59 RCW.

(30) "Owner" means the individual, partnership, or corporate entity legally responsible for the business requiring licensure as a home health agency under chapter 70.127 RCW.

(31) "Personal care services" means services assisting ill, disabled, or infirm persons with dressing, feeding, and personal hygiene to facilitate self-care.

(32) "Personnel" means individuals providing patient care on behalf of an agency including employees and individuals under contract.

(33) "Pharmacist" means an individual licensed as a pharmacist under RCW 18.64.080.

(34) "Physical therapist" means an individual licensed as a physical therapist under chapter 18.74 RCW.

(35) "Physician" means an individual licensed as a medical doctor under chapter 18.71 RCW or an osteopathic physician and surgeon licensed under chapter 18.57 RCW, or a podiatrist licensed under chapter 18.22 RCW.

(36) "Prehire screening" means checking of work references, appropriate registration, certification, licensure, and qualifications.

(37) "Registered nurse" means an individual licensed under chapter 18.88 RCW, Registered nurses.

(38) "Respiratory therapist" means an individual certified under chapter 18.89 RCW, Respiratory care practitioners.

(39) "Shall" means compliance is mandatory.

(40) "Speech therapist" means a person meeting:

(a) The education and experience requirements for a certificate of clinical competence in the appropriate area of speech pathology or audiology, granted by the American Speech, Language, and Hearing Association as described in *The ASLHA Directory*, American Speech, Language, and Hearing Association, 10801 Rockville Pike, Rockville, Maryland 20852, 1983; or

(b) The education requirements for a certificate of clinical competence and in the process of accumulating the supervised experience, as specifically prescribed in *The ASLHA Directory*, 1983.

(41) "Supervision" means authoritative procedural guidance by a qualified person who assumes the responsibility for the accomplishment of a function or activity and who provides direction and ongoing monitoring and evaluation of the actual act of accomplishing the function or activity.

(42) "Therapist" means a physical therapist, occupational therapist, speech therapist, or respiratory therapist defined under this section or other therapist licensed or certified under Title 18 RCW and providing health or medical care or treatment within their defined scope of practice.

(43) "Therapy assistant" means a licensed occupational therapy assistant defined under chapter 18.59 RCW or physical therapist assistant defined under chapter 246-915 WAC.

(44) "Therapy services" means those services delivered by a therapist defined under this section.

(45) "Volunteer" means an individual providing assistance to the home health agency and:

(a) Oriented, trained, and supervised to perform specific assigned tasks; and

(b) Working without compensation.

(46) "Without compensation" means:

(a) A recipient of care is not charged a fee for any service delivered by the volunteer; and

(b) An individual delivering care receives no pay, except reimbursement for personal mileage incurred to deliver home health services.

[Statutory Authority: RCW 70.127.120 and 70.127.250. 92-02-018 (Order 224), § 246-327-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-015, filed 6/7/89.]

WAC 246-327-025 Licensure of the home health agency. (1) After June 30, 1989, persons operating home health agencies defined under chapter 70.127 RCW shall submit applications and fees to the department.

(2) After July 1, 1990, no person shall:

(a) Advertise, operate, manage, conduct, open, or maintain a home health agency without first obtaining an appropriate license from the department; or

(b) Use the words "home health agency," "home health care services," or "visiting nurse services" in its corporate or business name, or advertise using such words unless licensed as a home health agency under chapter 70.127 RCW.

(3) Applicants for a home health agency license shall:

(a) Submit a completed application and fee for initial license or renewal to the department on forms furnished by the department, including signature of the owner or legal representative of the owner;

(b) Furnish to the department full and complete information as required by the department for the proper administration of department requirements including:

(i) Evidence of current insurance including:

(A) Professional liability insurance coverage specified under RCW 70.127.080; and

(B) Public liability and property damage insurance coverage specified under RCW 70.127.080.

(ii) Information on organizational and governing structure and the identity of the applicant, officers, directors, partners, managing employees, or owners of ten percent or more of the applicant's assets;

(iii) A list of counties where the applicant will operate;

(iv) A list of branch offices; and

(v) A list of services provided or offered.

(4) Agencies requesting license renewal shall submit a renewal application and fee to the department.

(5) If the applicant or owner meets the requirements of this chapter and chapter 70.127 RCW, the department shall issue or renew a license for the agency.

(6) The department shall:

(a) Deny a license if in the last five years the owner, applicant, officers, directors, partners, managing employees, or owners of ten percent or more of the applicant's assets are found in a civil or criminal proceeding to have committed any act reasonably relating to the fitness of any of the above persons to:

(i) Establish, maintain, or administer an agency; or

(ii) Provide care in the home of another.

(b) Provide a combination of applications and licenses and the reduction of individual license fees if an applicant applies for more than one category of license under chapter 70.127 RCW;

(c) Establish fees to be paid under RCW 43.70.110 and WAC 246-327-990, including providing for the reduction of individual license fees if an applicant applies for more than one category of license under RCW 70.127.110;

(d) Prohibit transfer or reassignment of a license without thirty-day-prior-notice to the department and department approval;

(e) Issue a license following approval of a new or current owner's application;

(f) Conduct on-site reviews of the agency, which may include in-home visits with consent of the patient, to determine compliance;

(g) Examine and audit records of the agency if the department has reason to believe persons are providing care without an appropriate license;

(h) Provide for combined licensure inspections and audits for owners holding more than one license under RCW 70.127.110;

(i) Give written notice of any violations, including a statement of deficiencies observed;

(j) Inform the owner or applicant of the requirement to:

(i) Present a plan of correction to the department within ten working days; and

(ii) Comply within a specified time not to exceed sixty days.

(k) Allow the owner a reasonable period of time, not to exceed sixty days, to correct a deficiency prior to assessing a civil penalty unless:

(i) The deficiency is an immediate threat to life, health, or safety; or

(ii) The owner fails to comply with any of the provisions under WAC 246-327-045 (3)(a), (b), (c), (d), (e), (f), (g), (h), (i), and (j).

(l) Initiate disciplinary action, under RCW 70.127.170 and this chapter, if the owner or applicant fails to comply.

(7) The department may:

(a) Issue a license effective for one year or less unless the license is suspended or revoked;

(b) Inspect an agency and examine records at any time to determine compliance with chapter 70.127 RCW and this chapter;

(c) Deny, suspend, modify, or revoke an agency license for failure to comply with chapter 70.127 RCW or this chapter.

(8) When a change of ownership is planned, the owner shall notify the department, in writing, at least thirty days prior to the date of transfer, including:

(a) Full name and address of the current owner and prospective new owner;

(b) Name and address of the agency and new name under which the agency will be operating, if known; and

(c) The date of the proposed change of ownership.

(9) The prospective new owner shall submit a new application for an agency license with the fee at least thirty days prior to the change of ownership.

(10) The agency shall inform the department, in writing, at the time of opening or closing the agency or branch offices included in the agency license.

[Statutory Authority: RCW 70.127.120 and 70.127.250. 92-02-018 (Order 224), § 246-327-025, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-025, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040. 90-06-019 (Order 039), § 248-27-025, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-025, filed 6/7/89.]

WAC 246-327-035 License denials—Suspensions—Modifications—Revocations. (1) The department may deny, suspend, modify, or revoke a license or assess civil penalties, or both, against the agency if an applicant, owner, officer, director, or managing employee:

(a) Fails or refuses to comply with the provisions under chapter 70.127 RCW or this chapter;

(b) Continues to operate after the license is revoked or suspended for cause without subsequent reinstatement by the department;

(c) Makes a false statement of a material fact in the application for the license or data attached or in any record required by this chapter or matter under investigation by the department;

(d) Refuses to allow representatives of the department to inspect any part of the agency or books, records, or files required by this chapter;

(e) Willfully prevents or interferes with, or attempts to impede in any way, the work of a representative of the department in the lawful enforcement of chapter 70.127 RCW and this chapter;

(f) Willfully prevents or interferes with a representative of the department in the preservation of evidence of a violation under chapter 70.127 RCW or this chapter;

(g) Fails to pay or make arrangements to pay a civil monetary penalty assessed by the department within ten days after the assessment becomes final, as provided under WAC 246-327-045, Civil fines;

(h) Uses false, fraudulent, or misleading advertising;

(i) Has repeated incidents of personnel performing services beyond services authorized by the agency or law; or

(j) Misrepresents, or is fraudulent in an aspect of, the conduct of the applicant's or owner's business.

(2) If the department finds the public health, safety, or welfare imperatively require emergency action, a license may be summarily suspended pending proceedings for revocation or other action.

[Statutory Authority: RCW 70.127.120, 70.127.250 and 34.05.220, 92-02-018 (Order 224), § 246-327-035, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-035, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040, 90-06-019 (Order 039), § 248-27-035, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-035, filed 6/7/89.]

WAC 246-327-045 Civil fines. (1) Following an on-site review, in-home visit, or audit, the department shall give written notice either in person or by personal service or certified mail, return receipt requested, of any violation under chapter 70.127 RCW or this chapter. The notice shall inform the owner or applicant as appropriate including:

- (a) Describing the conditions of noncompliance;
- (b) Specifying a reasonable time of compliance not to exceed sixty days;
- (c) Explaining the possibility of a violation subjecting the owner or applicant to denial, revocation, modification, or suspension of the license, and/or civil fines; and
- (d) Explaining the right of the owner or applicant to appeal.

(2) The department may assess civil monetary penalties in addition to or in lieu of denial, suspension, modification, or revocation of a license if the owner fails to comply with a notice of violation.

(3) The department may assess civil monetary penalties not to exceed one thousand dollars per violation in any case where the department finds the owner, applicant, officer, director, partner, managing employee, or owner of ten percent or more of the applicant's or owner's assets:

- (a) Failed or refused to comply with requirements under chapter 70.127 RCW or this chapter;
- (b) Continued to operate after the license was revoked or suspended for cause and not subsequently reinstated by the department;
- (c) Has knowingly, or with reason to know, made a false statement of a material fact in the:
 - (i) Application for the license; or
 - (ii) Data attached; or
 - (iii) Record required under chapter 70.127 RCW; or
 - (iv) Matter under investigation by the department.
- (d) Refused to allow representatives of the department to inspect any book, record, file, or part of the agency under this chapter;

(e) Willfully prevented, interfered with, or attempted to impede the work of any representative of the department and the lawful enforcement of a provision under chapter 70.127 RCW and this chapter;

(f) Willfully prevented or interfered with a representative of the department in the preservation of evidence of a violation under chapter 70.127 RCW or this chapter;

(g) Failed to pay or make arrangements to pay any civil monetary penalty assessed by the department under chapter 70.127 RCW within ten days after the assessment became final;

(h) Used false, fraudulent, or misleading advertising;

(i) Has repeated incidents of personnel performing services beyond services authorized by the agency or law; or

(j) Misrepresented or was fraudulent in any aspect of the conduct of the home health business.

(4) Failure to pay or make arrangements to pay civil monetary penalties within ten days from the time the assessment becomes final may result in denial, suspension, modification, or revocation of the license, in addition to either the assessment of the penalties or to the assessment of additional penalties.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-045, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040, 90-06-019 (Order 039), § 248-27-045, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-045, filed 6/7/89.]

WAC 246-327-055 License action and/or civil fine—Notice—Adjudicative proceeding. (1) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or licensee holder has the right to an adjudicative proceeding to contest the decision.

(2) The department's notice of imposition of a civil fine shall be consistent with RCW 43.70.095. A person the department imposes a civil fine on has the right to an adjudicative proceeding to contest the decision.

(3) A license applicant or holder or a person the department imposes a civil fine on contesting a department decision shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

- (b) Include in or with the application:
 - (i) A specific statement of the issue or issues and law involved;
 - (ii) The grounds for contesting the department decision; and
 - (iii) A copy of the contested department decision.

(4) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.127.120, 70.127.250 and 34.05.220, 92-02-018 (Order 224), § 246-327-055, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-055, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040, 90-06-019 (Order 039), § 248-27-055, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-055, filed 6/7/89.]

WAC 246-327-065 General requirements. (1) The agency shall have a written plan of operation including:

- (a) An organizational chart showing ownership and lines for delegation of responsibility to the patient care level;
- (b) The services offered including hours of operation and service availability;
- (c) Admission discharge, referral, and transfer criteria;

(d) Evidence of administrative and supervisory control and responsibility for all services including services provided by branch offices;

(e) An annual budget approved by the governing body; and

(f) Provisions for ongoing care in the event the agency ceases operation.

(2) The agency shall provide services consistent with an authorized plan of treatment or plan of care and:

(a) Admit patients consistent with agency admission criteria, services provided, and capability of agency to provide the appropriate level of care; and

(b) Inform the patient of alternate services, if available, if the agency is unable to meet identified needs of the patient.

(3) Agency personnel shall communicate in a language or form of communication the patient can reasonably be expected to understand. Whenever possible, the agency shall assist in obtaining:

(a) Special devices;

(b) Interpreters; or

(c) Other aids to facilitate communication.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-065, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-065, filed 6/7/89.]

WAC 246-327-077 Patient bill of rights. Home health agencies shall provide each patient and family with a written bill of rights affirming each patient's rights to:

(1) Be informed of aspects of his or her condition necessary to make decisions regarding his or her home health care;

(2) Refuse treatment or services to the extent permitted by law and be informed of the potential consequences of such action;

(3) Be informed of the services offered by the agency, including those services provided in his or her home;

(4) Participate in development of plan of care and/or plan of treatment to the extent practical;

(5) Be informed of any responsibilities he or she may have in the care process, including the requirement for medical supervision when required for the home health plan of treatment;

(6) Be informed of the name of the person supervising the care and how to contact that person;

(7) Be informed of the process for submitting and addressing complaints to both the agency and department;

(8) Receive an explanation of the agency's charges and policy concerning billing and payment for services including, to the extent possible, insurance coverage and other methods for payment, unless services are reimbursed through a managed care plan;

(9) Upon request, receive a fully itemized billing statement at least monthly including the date of each service and the charge, unless service is reimbursed through a managed care plan;

(10) Access the department's directory of licensed agencies;

(11) Upon request, be informed of who owns and controls the agency;

(12) Personnel properly trained to perform assigned tasks;

(13) Coordinated services;

(14) Courteous and respectful treatment, privacy, and freedom from abuse and discrimination;

(15) Confidential management of patient records and information;

(16) Access information in the patient's own record upon request;

(17) Be informed of the nature and purpose of care, as well as name and discipline of the person performing the care;

(18) Be informed of any care provided by the agency which has experimental or research aspects with documentation of voluntary informed consent; and

(19) Be informed of the reason for impending discharge, transfer to another agency and/or level of care, ongoing care requirements, and other available services and options if needed.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-077, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-077, filed 6/7/89.]

WAC 246-327-085 Governing body—Administration. (1) The governing body of the agency shall establish a mechanism to:

(a) Approve a quality assurance plan whereby problems are identified, monitored, and corrected;

(b) Approve written policies and procedures related to safe, adequate patient care, and operation of the agency;

(c) Assure an annual review of the agency by health professionals to evaluate the scope and quality of the services provided;

(d) Appoint an administrator and provide for an alternate in the administrator's absence;

(e) Adopt and periodically review written bylaws;

(f) Oversee the management and fiscal affairs of the agency; and

(g) Obtain regular reports on patient satisfaction.

(2) Each agency shall have an administrator to:

(a) Organize and direct the agency's ongoing functions;

(b) Arrange for professional services;

(c) Maintain ongoing liaison between the governing body and personnel;

(d) Employ qualified personnel and ensure adequate education and supervision of personnel and volunteers;

(e) Ensure the accuracy of public information materials and activities;

(f) Implement a budget and accounting system;

(g) Ensure the presence of an alternate to act in the administrator's absence.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-085, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-085, filed 6/7/89.]

WAC 246-327-095 Personnel and volunteers. (1) The agency shall establish written personnel and volunteer policies including, but not limited to:

(a) Personnel and volunteer qualifications commensurate with anticipated job responsibilities;

(b) Employment criteria without regard to sex, race, age, creed, handicap, national origin, or sexual orientation;

(c) Orientation and in-service training related to safe care, appropriate to each classification of personnel and volunteer and the tasks he or she is expected to perform;

(d) Evidence of prehire screening; and

(e) Annual or more frequent performance evaluations including:

(i) Assessment of safe performance of job responsibilities; and

(ii) Conformance with agency policies and procedures.

(2) The agency shall maintain records including:

(a) Qualifications of personnel and direct patient care volunteers;

(b) Evidence of current licensure, certification, or registration when applicable to job requirements;

(c) Evidence of current cardiopulmonary resuscitation training at least every two years for all personnel providing services in the home, except volunteers and delivery personnel;

(d) Evidence of review of agency policy and procedures related to abuse and neglect of children and adults for all personnel and volunteers providing services in the home consistent with chapters 26.44 and 74.34 RCW;

(e) Performance evaluations and evidence of prehire screening; and

(f) Health records including evidence of at least one tuberculin skin test by the Mantoux method at the time of employment unless medically contraindicated, and meeting specifications under subsection (3) of this section.

(3) The agency shall ensure personnel and volunteers expected to provide direct patient care have a tuberculin skin test by the Mantoux method prior to patient contact and meeting the following requirements:

(a) When a skin test is negative, less than ten millimeters of induration read at forty-eight to seventy-two hours:

(i) Personnel and volunteers under thirty-five years of age require no further testing; and

(ii) Personnel and volunteers thirty-five years of age or over require a second test in one to three weeks.

(b) Positive reactors, reaction of ten millimeters or more of induration, shall have a chest x-ray within ninety days of the first day of employment. Exceptions and specific requirements are as follows:

(i) The home health agency shall maintain results of skin tests, report of x-ray findings, or exemptions to such in the agency; and

(ii) New personnel and volunteers providing documentation of a significant Mantoux skin test reaction in the past are excluded from screening.

(c) New personnel and volunteers currently and consistently employed by or volunteering in another agency or facility with similar required screening, meeting the requirements under this subsection, may use the previous screening as documentation; and

(d) In the event of personnel or volunteer exposure to an infectious case of tuberculosis, the agency shall supply the names and identifying information to the local health department sufficient for screening to occur.

(4) The agency shall assure observance of appropriate precautions when personnel and volunteers show signs or

report symptoms of communicable disease in an infectious stage.

(5) The agency shall assume responsibility for personnel providing agency services included in the plan of care or treatment.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-095, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-095, filed 6/7/89.]

WAC 246-327-105 AIDS education and training.

Home health agencies shall:

(1) Verify or arrange for appropriate education and training of personnel and volunteers on the prevention, transmission, and treatment of HIV and AIDS consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *know - aids education for health care facility employees*, January 1991, published by the department office on HIV/AIDS.

[Statutory Authority: RCW 70.127.120, 70.127.250 and 70.24.310, 92-02-018 (Order 224), § 246-327-105, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-105, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-105, filed 6/7/89.]

WAC 246-327-115 Patient care policies and procedures.

(1) The agency shall:

(a) Establish and implement written policies and procedures appropriate to the services offered by the agency; and

(b) Make policies and procedures available to all personnel and volunteers including:

(i) Treatments and procedures used in providing patient services;

(ii) Any special qualifications of persons performing the services;

(iii) Infection control principles and practices;

(iv) Emergency care, patient safety, and death;

(v) Maintenance of supplies and equipment;

(vi) Admission, transfer, and discharge of patients;

(vii) Abuse and neglect consistent with chapters 26.44 and 74.34 RCW;

(viii) Coordination of services;

(ix) Clinical records; and

(x) Management and handling of patient-owned drugs consistent with applicable state laws.

(2) The agency shall provide patient family teaching:

(a) Consistent with agency policies and procedures; and

(b) Including demonstration, supervision, and evaluation.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-327-115, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-27-115, filed 6/7/89.]

WAC 246-327-125 Supervision and coordination of clinical services.

(1) The agency shall employ a supervisor of clinical services who:

(a) Is a registered nurse if nursing services are provided;

(b) May be a therapist if no nursing services are provided;

(c) Is available, or can be replaced, by a similarly qualified person, during service hours;

(d) Participates in the development and revision of written patient care policies related to each service provided; and

(e) Is responsible for assignment and supervision of all patient care personnel and volunteers.

(2) The agency shall designate a coordinator of clinical services who:

(a) Coordinates interdisciplinary services and interagency services; and

(b) Provides for continuity of care within disciplines.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-125, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-125, filed 6/7/89.]

WAC 246-327-135 Home health plan of treatment.

(1) The agency shall develop an individualized plan of treatment for patients receiving acute care services.

(2) The agency shall ensure:

(a) Patient care personnel and volunteers follow a written plan of treatment approved and reviewed by an authorizing practitioner;

(b) Services other than assessment are provided only with the approval of an authorizing practitioner;

(c) The plan of treatment covers all pertinent diagnoses and current problems pertaining to the health of the patient with specific objectives and plans for implementation;

(d) Personnel consult with the authorizing practitioner to approve additions and modifications to the original plan of treatment in the event the patient was referred under an incomplete plan of treatment;

(e) Inclusion of specific services and modalities, with frequency and duration in the plan of treatment;

(f) Personnel and the authorizing practitioner review the total plan of treatment:

(i) Whenever changes in the patient's condition require a change in the plan; and

(ii) At least once every sixty days.

(g) The authorizing practitioner receives timely reports including:

(i) Any changes suggesting a need to alter the plan of treatment;

(ii) Suspected drug allergies; and

(iii) Adverse reactions to drugs.

(h) An authorizing practitioner orders drugs and treatments and:

(i) Orders are verified by a registered nurse, licensed practical nurse, therapist, or pharmacist;

(ii) The drugs and treatments are administered by legally authorized agency personnel or volunteers;

(iii) Orders are recorded in a patient record as soon as possible; and

(iv) The authorizing practitioner countersigns the orders within a reasonable length of time.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-135, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-135, filed 6/7/89.]

WAC 246-327-145 Home health plan of care. The agency shall develop individualized plans of care:

(1) Current and reflective of a patient's present health status;

(2) Reviewed and revised at least every three months;

(3) Supervised by a registered nurse or appropriate therapist; and

(4) Containing specific objectives and plans for implementation.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-145, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-145, filed 6/7/89.]

WAC 246-327-155 Functions, duties, and responsibilities of direct care personnel. (1) Agencies shall describe functions, duties, and responsibilities of direct patient care personnel and volunteers including:

(a) Initial and ongoing patient assessment, reassessment, and evaluation;

(b) Participation in development and revision of plan of treatment or care;

(c) Provision of appropriate services in accordance with agency policy and procedures;

(d) Participation in case conferences or other processes used to coordinate patient care;

(e) Teaching and counseling patients and family to meet patient needs identified in the plan of treatment or care;

(f) Preparation of clinical notes;

(g) Participation in discharge planning from home health care;

(h) Development of written directions for use by home health aide or appropriate therapy assistant; and

(i) Supervision and orientation of home health aide or appropriate therapy assistant to assure safe, therapeutic patient care.

(2) Agencies utilizing the services of licensed practical nurses shall follow agency policies, provide supervision by a registered nurse, and comply with chapter 18.78 RCW.

(3) The agency shall utilize the services of therapy assistants:

(a) Only as defined under WAC 246-327-010;

(b) Under supervision of an appropriately qualified therapist; and

(c) Following a plan of care compatible with the plan of treatment which is approved and supervised by the qualified therapist.

(4) Home health aide services, when utilized, shall:

(a) Be included in the plan of care or plan of treatment;

(b) Follow a specific written plan of care or treatment; and

(c) Be under the supervision of a registered nurse, therapist, or licensed practical nurse, as appropriate, with:

(i) Orientation of the home health aide to the specific home health care of each patient prior to care given;

(ii) Evidence of an in-home supervisory visit at least once a month if the patient needs acute care and at least once every three months if the patient needs maintenance care; and

(iii) Direct observation of in-home performance of each home health aide at least every six months.

(5) The agency shall define the functions and duties of home health aides including the ability to:

(a) Observe and recognize changes in patient's condition and report changes to the supervisor;

(b) Initiate emergency procedures under the agency policy;

(c) Assist with medications ordinarily self-administered by the patient, with assistance limited to:

(i) Communication of appropriate information to the patient regarding self-administration including:

(A) Reminding a patient of when it is time to take a prescribed medication; and

(B) Reading the label of the medication container.

(ii) Handing a patient-owned medication container to the patient;

(iii) Opening the medication container; or

(iv) Application or installation of skin, nose, eye, and ear preparations only under specific direction of the supervisor.

(d) Record pertinent information in the patient's clinical record.

[Statutory Authority: RCW 70.127.120 and 70.127.250. 92-02-018 (Order 224), § 246-327-155, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-155, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-155, filed 6/7/89.]

WAC 246-327-165 Clinical records. (1) The agency shall maintain clinical records under agency policies and procedures. Records shall be:

(a) Legibly written in ink suitable for photocopying;

(b) On standardized agency forms;

(c) Written in a legally acceptable manner;

(d) In chronological order in entirety or by service;

(e) Fastened together to avoid loss of pages;

(f) Considered as property of the agency;

(g) Available in one integrated document in one place, except:

(i) A copy may be kept in the home or in the agency office; and

(ii) More than one volume may be necessary.

(h) Available and retrievable during operating hours either in the agency or by electronic means; and

(i) Stored following discharge from service:

(i) Preventing loss of information;

(ii) Protecting the record from damage due to water, mildew, or fire; and

(iii) Preventing access by unauthorized persons.

(2) The agency shall include as contents of the clinical record:

(a) Patient-identifying information;

(b) Patient service/treatment consent and agreement;

(c) Pertinent past and current clinical findings including:

(i) Assessment of patient's physical and mental status as well as social and environmental problems affecting care; and

(ii) Clinical notes describing specific observations including, but not limited to, observations of patient condition.

(d) The home health plan of care and plan of treatment.

(3) Agencies shall maintain, retain, and preserve records:

(a) For adults, a period of no less than five years following the date of termination of services; and

(b) For minors, a period of no less than three years following attainment of eighteen years of age, or five years following discharge, whichever is longer.

(4) Agencies shall establish policies and procedures specific to retention and disposition of clinical records including:

(a) A method of disposal of clinical records or patient care data assuring prevention of retrieval and subsequent use of information; and

(b) A means to transmit a copy of the clinical record or an abstract and copy of most recent summary report with the patient in the event of patient transfer to another agency or health care facility. When patients are transferred without notification of the receiving agency, a copy of the abstract shall be forwarded upon notification and as soon as possible.

(5) Agencies shall safeguard clinical record information and patient care data against loss or unauthorized use including:

(a) Adherence to written procedures governing use and removal of records and conditions for release of information; and

(b) Requirement for prior written consent of the patient for release of information unless authorized by law.

(6) Agencies discontinuing operation shall:

(a) Notify the department prior to cessation of operation; and

(b) Obtain department approval of a plan to preserve or destroy clinical records prior to disposition.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-165, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-165, filed 6/7/89.]

WAC 246-327-175 Parenteral product services. (1)

If the agency provides parenteral and/or hyperalimentation services, the agency shall define the scope of the services, in writing, with contracts specifying the responsibilities of the contractor and the contractee for:

(a) Services;

(b) Equipment; and

(c) How reimbursement occurs.

(2) If the agency provides parenteral services, the agency shall have written policies and procedures including:

(a) Preparation of parenteral solutions, medications, and mixing of previously dispensed parenteral drugs including:

(i) Use of aseptic technique when mixing previously dispensed parenteral drugs; and

(ii) If the circumstances require a registered nurse to mix two or more parenteral drugs or reconstitute drugs prior to administration, requirements for the registered nurse to place:

(A) An auxiliary label modifying existing label on the mixture with initials of the registered nurse; or

(B) A label prepared under the supervision of a pharmacist with the initials of the registered nurse on the container.

(b) Consultation available by a dietitian if hyperalimentation services are provided.

(3) Agencies shall establish written policies and procedures for parenteral administration including:

(a) Administration of parenteral solutions, medications, admixtures, blood, and blood products;

(b) Infection control, including:

- (i) Site preparation;
- (ii) Tubing and dressing management;
- (iii) Site assessment and rotation;
- (iv) Use of aseptic technique; and
- (v) Use of sterile equipment as indicated by the label.
- (c) Use and control of parenterally administered investigational drugs;
- (d) Administration of parenterally administered drugs causing tissue necrosis upon extravasation;
- (e) Safe handling and disposal of biohazardous materials including antineoplastic agents and infectious materials;
- (f) Documentation requirements;
- (g) Patient and family teaching;
- (h) Appropriate labeling of precision volume chambers, if used, so labeling accurately reflects each medication or solution administered via the precision volume chamber; and
 - (i) Use of electronic infusion control devices.
- (4) The agency shall ensure:
 - (a) Personnel inserting parenteral devices are:
 - (i) Legally authorized to penetrate skin and insert intravenous devices; and
 - (ii) Appropriately trained with demonstrated and documented skills in intravenous insertion techniques.
 - (b) Personnel administering parenteral medications are:
 - (i) Legally authorized to administer medications;
 - (ii) Appropriately trained;
 - (iii) Able to demonstrate and provide evidence of documented skill in parenteral administration;
 - (iv) Knowledgeable of procedures and equipment; and
 - (v) Approved by the agency.
 - (c) Availability of drug compatibility reference material to individuals who administer parenteral medications;
 - (d) Parenteral solutions are administered only upon the order of a physician;
 - (e) All orders and prescriptions for parenteral solutions, medications, and mixtures of previously dispensed drugs include:
 - (i) Identification and quantity of solution or medication;
 - (ii) Route;
 - (iii) Rate of flow or frequency;
 - (iv) Duration of administration;
 - (v) Amount of additive;
 - (vi) Identification of patient; and
 - (vii) Identification of prescribing physician.
- (5) The agency shall ensure documentation in the clinical record including:
 - (a) Solution, medication or medications, route, modifications, and/or additions made to parenteral products, time, date, amount administered, and rate;
 - (b) Site and site assessment;
 - (c) Date and time of insertion and removal of cannula, catheter, or needle;
 - (d) Device used, including gauge, length and type of needle, cannula, or catheter;
 - (e) Condition of cannula or catheter and site at the time removed from patient;
 - (f) Use of electronic infusion devices;
 - (g) Observed complications and treatment of complications;
 - (h) Management of tubing and dressing; and
 - (i) Signature and discipline of the administering individual.

(6) If parenteral preparations are administered to pediatric patients, the agency shall establish written policies for:

- (a) Amounts of parenteral fluid infants, children, and adolescents should receive determined by age, body surface area, and weight;
 - (b) Required use of rate control devices;
 - (c) Documentation requirements specified for parenteral therapy to include intake, output, weight, and height;
 - (d) The type of parenteral preparations which may be administered at home;
 - (e) Conditions requiring a registered nurse to be in attendance; and
 - (f) A plan for emergency services.
- (7) The agency shall ensure, if blood or blood products are administered in the patient's residence, there is:
- (a) A registered nurse or physician continuously in attendance;
 - (b) A plan for emergency services; and
 - (c) A method of delivery ensuring temperature stability, prevention of contamination, and viability.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-175, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-175, filed 6/7/89.]

WAC 246-327-185 Medical supplies or equipment services. (1) An agency providing medical supplies or equipment services shall provide:

- (a) A written description of the scope of the services including:
 - (i) The types of supplies and/or equipment provided; and
 - (ii) Policies and procedures for cleaning, maintenance, calibration, or replacement of equipment.
- (b) Records of the services provided, date, time, and by whom; and
- (c) Documentation of approval of patient for service, cost, and method of payment unless under a managed care plan.

(2) If provided, the agency shall maintain immediate availability of replacement supplies or equipment essential for the life or safety of the patient.

(3) The agency shall provide knowledgeable, trained personnel to:

- (a) Initiate service;
- (b) Maintain supplies and equipment; and
- (c) Instruct patients or caregivers in the use and maintenance of supplies and equipment. Instructions shall be given:
 - (i) In writing;
 - (ii) Verbally; and
 - (iii) By demonstration and redemonstration as necessary.
- (4) The agency shall document the training and qualifications of personnel.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-327-185, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-27-185, filed 6/7/89.]

WAC 246-327-990 Fees. (1) Home health agencies licensed under chapter 70.127 RCW shall submit an annual license fee

as follows:

(a) Agencies with fifty or more employees, one thousand three hundred dollars;

(b) Agencies with less than fifty but more than fifteen employees, one thousand one hundred dollars; and

(c) Agencies with fifteen or less employees, eight hundred eighty dollars.

(2) An agency applying for additional home health, hospice, or home care licenses shall receive a fee reduction of two hundred fifty dollars for each additional license in accordance with the provisions of RCW 70.127.110.

[Statutory Authority: RCW 43.70.250, 92-15-084 (Order 288), § 246-327-990, filed 7/16/92, effective 8/16/92. Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-327-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-329 WAC CHILDBIRTH CENTERS

WAC

246-329-001	Purpose.
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246-329-090	Pharmaceuticals.
246-329-100	Birth center—Physical environment.
246-329-990	Fees.

WAC 246-329-001 Purpose. Regulations relating to childbirth centers are hereby adopted pursuant to chapter 18.46 RCW. The purpose of these regulations is to provide health and safety standards for the organization, maintenance, and operation of childbirth centers and to set forth procedures for the issuance, denial, suspension, and/or revocation of licenses for facilities maintained and operated to provide birth services: *Provided*, That birth takes place within the birth center.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-329-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060, 86-04-031 (Order 2338), § 248-29-001, filed 1/29/86. Statutory Authority: RCW 43.20.050, 80-05-099 (Order 197), § 248-29-001, filed 5/2/80.]

WAC 246-329-010 Definitions. (1) "Administration of drugs" means an act in which a single dose of a prescribed drug or biological is given to a client by an authorized person in accordance with all laws and regulations governing such acts. The complete act of administration entails removing an individual dose from a previously dispensed, properly labeled container, including a unit dose container, verifying it with the orders of a practitioner who is legally authorized to prescribe, giving the individual dose to the proper client and properly recording the time and dose given.

(2) "Authenticated or authentication" means authorization of a written entry in a record by means of a signature which shall include, minimally, first initial, last name, and title.

(3) "Bathing facility" means a bathtub or shower.

(4) "Birth center or childbirth center" means a type of maternity home which is a house, building, or equivalent organized to provide facilities and staff to support a birth service, provided that the birth service is limited to low-risk maternal clients during the intrapartum period.

(5) "Birthing room" means a room designed, equipped, and arranged to provide for the care of a woman and newborn and to accommodate her support person or persons during the process of vaginal childbirth, (the three stages of labor and recovery of a woman and newborn).

(6) "Birth service" means the prenatal, intrapartum, and postpartum care provided for individuals with uncomplicated pregnancy, labor, and vaginal birth, to include the newborn care during transition and stabilization.

(7) "Client" means a woman, fetus, and newborn receiving care and services provided by a birth center during pregnancy and childbirth and recovery.

(8) "Clinical staff" means physicians and midwives appointed by the governing body to practice within the birth center and governed by rules approved by the governing body.

(9) "Department" means the Washington state department of health.

(10) "Governing body" means the person or persons responsible for establishing and approving the purposes and policies of the childbirth center.

(11) "Hospital" means any institution, place, building, or agency which provides accommodations, facilities, and services over a continuous period of twenty-four hours or more, for observation, diagnosis, or care, of two or more individuals not related to the operator or suffering from any other condition which obstetrical, medical, or surgical services would be appropriate for care or diagnosis. "Hospital" as used in this definition does not include hotels, or similar places furnishing only food and lodging, or simply, domiciliary care; nor does it include clinics, physicians' offices where patients are not regularly kept as bed patients for twenty-four hours or more; nor does it include nursing homes, as defined and which comes under the scope of chapter 18.51 RCW; nor does it include maternity homes, which come within the scope of chapter 18.46 RCW; nor does it include psychiatric hospitals, which come under the scope of chapter 71.12 RCW; nor any other hospital or institution specifically intended for use and the diagnosis and care of those suffering from mental illness, mental retardation, convulsive disorders, or other abnormal mental conditions. Furthermore, nothing in this definition shall be construed as authorizing the supervision, regulation, or control of the remedial care or treatment of residents or patients in any hospital conducted for those who rely primarily upon treatment by prayer or spiritual means in accordance with creed or tenets of any well-recognized church or religious denomination.

(12) "Lavatory" means a plumbing fixture designed and equipped for handwashing purposes.

(13) "Low-risk maternal client" means an individual who:

(a) Is in general good health with uncomplicated prenatal course and participating in ongoing prenatal care;

(b) Is participating in an appropriate childbirth and infant care education program;

- (c) Has no major medical problems;
- (d) Has no previous major uterine wall surgery, cesarean section, or obstetrical complications likely to recur;
- (e) Has parity under six unless a justification for a variation is documented by clinical staff;
- (f) Is not a nullipara of greater than thirty-eight years of age unless a justification for a variation is documented by clinical staff;
- (g) Is not less than sixteen years of age unless a justification for variation for ages fourteen through fifteen only is documented by clinical staff;
- (h) Has no significant signs or symptoms of pregnancy-induced hypertension, polyhydramnios or oligohydramnios, abruptio placenta, chorioamnionitis, multiple gestation, intrauterine growth retardation, meconium stained amniotic fluid, fetal complications, or substance abuse;
- (i) Demonstrates no significant signs or symptoms of anemia, active herpes genitalis, pregnancy-induced hypertension, placenta praevia, malpositioned fetus, or breech while in active labor;
- (j) Is in labor, progressing normally;
- (k) Is without prolonged ruptured membranes;
- (l) Is not in preterm labor nor postterm gestation;
- (m) Is appropriate for a setting where analgesia is limited; and
- (n) Is appropriate for a setting where anesthesia is used in limited amounts and limited to local infiltration of the perineum or pudendal block.

(14) "Maternity home" means any home, place, hospital, or institution in which facilities are maintained for the care of four or more women not related by blood or marriage to the operator during pregnancy or during or within ten days after delivery: *Provided however*, That this chapter shall not apply to any hospital licensed under chapter 70.41 RCW, "Hospital licensing and regulation."

(15) "Midwife" means an individual recognized by the Washington state board of nursing as a certified nurse midwife as provided in chapter 18.88 RCW, chapter 246-839 WAC, or an individual possessing a valid, current license to practice midwifery in the state of Washington as provided in chapter 18.50 RCW, chapter 246-834 WAC.

(16) "New construction" means any of the following:

- (a) New buildings to be used as a birth center;
- (b) Addition or additions to an existing building or buildings to be used as a childbirth center;
- (c) Conversion of existing buildings or portions thereof for use as a childbirth center;
- (d) Alterations or modifications other than minor alterations.

"Minor alterations" means any structural or physical modification within an existing birth center which does not change the approved use of a room or an area. Minor alterations performed under this definition do not require prior review of the department; however, this does not constitute a release from other applicable requirements.

(17) "Personnel" means individuals employed by the birth center.

(18) "Physician" means an individual licensed under provisions of chapter 18.71 RCW, "Physicians," or chapter 18.57 RCW, "Osteopathy—Osteopathic medicine and surgery."

(19) "Registered nurse" means an individual licensed under the provision of chapter 18.88 RCW, "Registered nurses," who is practicing in accordance with the rules and regulations promulgated thereunder.

(20) "Recovery" means that period or duration of time starting at birth and ending with discharge of a client from the birth center or the period of time between the birth and the time a client leaves the premises of the birth center.

(21) "Shall" means compliance is mandatory.

(22) "Should" means a suggestion or recommendation, but not a requirement.

(23) "Support person" means the individual or individuals selected or chosen by a maternal client to provide emotional support and to assist her during the process of labor and childbirth.

(24) "Toilet" means a room containing at least one water closet.

(25) "Volunteer" means an individual who is an unpaid worker in the birth center, other than a support person.

(26) "Water closet" means a plumbing fixture for defecation fitted with a seat and a device for flushing the bowl of the fixture with water.

[Statutory Authority: RCW 18.46.060. 92-02-018 (Order 224), § 246-329-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-329-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060. 86-04-031 (Order 2338), § 248-29-010, filed 1/29/86. Statutory Authority: RCW 43.20.050. 80-05-099 (Order 197), § 248-29-010, filed 5/2/80.]

WAC 246-329-020 Licensure. (1) Application for license.

(a) An application for a childbirth center license shall be submitted on forms furnished by the department. The application shall be signed by the legal representative of the governing body.

(b) The applicant shall furnish to the department full and complete information and promptly report any changes which would affect the current accuracy of such information as to the identity of each officer and director of the corporation, if the birth center is operated by a legally incorporated entity, profit or nonprofit, and of each partner if the birth center is operated through a legal partnership.

(c) Each application for license shall be accompanied by a license fee as established by the department under RCW 43.70.110: *Provided*, That no fee shall be required of charitable or nonprofit or government-operated birth centers. Upon receipt of the license fee, when required, the department shall issue a childbirth center license if the applicant and the birth center facilities meet the requirements of this chapter.

(2) License renewal—Limitations—Display.

(a) A license, unless suspended or revoked, shall be renewed annually.

(i) Applications for renewal shall be on forms provided by the department and shall be filed with the department not less than ten days prior to expiration.

(ii) The department shall inspect and investigate each childbirth center as needed and at least annually to determine compliance with standards herein (chapter 246-329 WAC) and applicable standards of chapter 18.46 RCW.

(b) Each license shall be issued only for the premises and persons named. Licenses shall be transferrable or assignable only with written approval by the department.

(c) Licenses shall be posted in a conspicuous place on the licensed premises.

(3) Denial, suspension, modification, revocation of a license; notice; adjudicative proceeding.

(a) The department may, if the interests of the clients so demand, deny, suspend, or revoke a license when there has been failure or refusal to comply with the requirements of chapter 18.46 RCW and/or these rules. The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(b) A license applicant or holder contesting a department license decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

(4) New construction—Major alterations.

(a) When new construction or major alteration is contemplated, the following shall be submitted to the department for review:

(i) A written program containing, at a minimum, information concerning services to be provided and operational methods to be used which will affect the extent of facilities required by these regulations;

(ii) Duplicate sets of preliminary plans which are drawn to scale and include: A plot plan showing streets, drive-ways, water, and sewage disposal systems, grade and location of the building or buildings on the site; the plans for each floor of each building, existing and proposed, which designate the functions of each room and show all fixed equipment. The preliminary plans shall be accompanied by a statement as to the source of water supply and the method of sewage and garbage disposal and a general description of construction and materials, including interior finishes.

(b) Construction shall not be started until duplicate sets of final plans (drawn to scale) and specifications have been submitted to and approved by the department. Final plans and specifications shall show complete details to be furnished to contractors for construction of buildings or major alterations in existing buildings. These shall include:

(i) Plot plans;

(ii) Plans for each floor of each building which designate the function of each room and show all fixed equipment and the planned location of beds and other furniture;

(iii) Interior and exterior elevations, building sections, and construction details;

(iv) Schedule of floors, wall, and ceiling finishes, and the types and sizes of doors and windows; plumbing, heating, ventilation, and electrical systems; and

(v) Specifications which fully describe workmanship and finishes.

(c) Adequate provisions shall be made for the safety and comfort of clients as construction work takes place in or near an occupied area.

(d) Construction shall take place in accordance with approved final plans and specifications. Only those changes which have been approved by the department may be incorporated into the construction project. Modified plans, additions, or changes incorporated into the construction project shall be submitted to the department for the department file on the project.

(5) Compliance with other regulations.

(a) Applicable rules and regulations adopted by the Washington state fire marshal.

(b) If there is no local plumbing code, the Uniform Plumbing Code of the National Association of Plumbing and Mechanical Officials shall be followed.

(c) Compliance with these regulations does not exempt birth centers from compliance with the local and state electrical codes or local fire, zoning, building, and plumbing codes.

[Statutory Authority: RCW 18.46.060 and 34.05.220. 92-02-018 (Order 224), § 246-329-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-329-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 18.46.060. 90-06-019 (Order 039), § 248-29-020, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 18.46.060. 86-04-031 (Order 2338), § 248-29-020, filed 1/29/86; 83-07-016 (Order 255), § 248-29-020, filed 3/10/83. Statutory Authority: RCW 43.20.050. 80-05-099 (Order 197), § 248-29-020, filed 5/2/80.]

WAC 246-329-030 Governing body and administration. (1) The birth center shall have a governing body.

(2) The governing body shall be responsible for provision of personnel, facilities, equipment, supplies, and special services needed to meet the needs of the clients.

(3) The governing body shall adopt policies for the care of clients within or on the premises of the birth center.

(4) The governing body shall appoint an administrator or director who shall be responsible for implementing the policies adopted by the governing body.

(5) The governing body shall establish and maintain a current written organizational plan which includes all positions and delineates responsibilities, authority, and relationship of positions within the birth center.

(6) The governing body shall have the authority and responsibility for appointments and reappointments of clinical staff and ensure that only members of the clinical staff shall admit clients to the birth center.

(a) Each birth center shall have designated physician participation in clinical services and in the quality assurance program.

(b) Each birth center shall have a written policy and program which shall stipulate the extent of physician participation in the services offered.

(c) Each physician and midwife appointed to the clinical staff shall provide evidence of current licensure in the state of Washington.

(d) The clinical staff shall develop and adopt bylaws, rules, and regulations subject to the approval of the governing body which shall include requirements for clinical staff membership; delineation of clinical privileges and the organization of clinical staff.

(7) The governing body shall be responsible for a quality assurance audit on a regular basis to review cases, minimally to include ongoing compliance with rules in chapter 246-329 WAC.

[Statutory Authority: RCW 18.46.060, 92-02-018 (Order 224), § 246-329-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-329-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060, 86-04-031 (Order 2338), § 248-29-030, filed 1/29/86. Statutory Authority: RCW 43.20.050, 80-05-099 (Order 197), § 248-29-030, filed 5/2/80.]

WAC 246-329-040 Personnel, clinical staff, and volunteers who work directly with clients. (1) There shall be sufficient, qualified personnel and clinical staff to provide the services needed by clients and for safe maintenance and operation of the birth center.

(2) A physician qualified by training and experience in obstetrics and gynecology with admitting privileges to a community hospital shall be immediately available by phone twenty-four hours a day.

(3) Appropriate personnel and clinical staff of the birth center shall be trained in infant and adult resuscitation. Clinical staff or personnel who have demonstrated and documented ability to perform infant and adult resuscitation procedures shall be present during each birth.

(4) A physician or midwife shall be present at each birth. A second person who is an employee or member of the clinical staff with resuscitation skills shall be immediately available during each birth.

(5) Appropriate, qualified personnel and/or clinical staff shall be present in the birth center at all times when clients are present.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-329-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060, 86-04-031 (Order 2338), § 248-29-040, filed 1/29/86. Statutory Authority: RCW 43.20.050, 80-05-099 (Order 197), § 248-29-040, filed 5/2/80.]

WAC 246-329-050 HIV/AIDS education and training. Childbirth centers shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care Facility Employees*, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 18.46.060 and 70.24.310, 92-02-018 (Order 224), § 246-329-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-329-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310, 89-21-038 (Order 3), § 248-29-045, filed 10/12/89, effective 11/12/89.]

WAC 246-329-060 Birth center policies and procedures. Written policies and procedures shall include, but not be limited to:

(1) Definition of a low-risk maternal client who shall be eligible for birth services offered by the birth center.

(2) Definition of a client who shall be ineligible for birth services at the birth center.

(3) Identification and transfer of clients who, during the course of pregnancy, are determined to be ineligible.

(4) Identification and transfer of clients who, during the course of labor or recovery, are determined to be ineligible for continued care in the birth center.

(5) Written plans for consultation, backup services, transfer and transport of a newborn and maternal client to a hospital where appropriate care is available.

(6) Written informed consent which shall be obtained prior to the onset of labor and shall include evidence of an explanation by personnel of the birth services offered and potential risks.

(7) Provision for the education of clients, family, and support persons in childbirth and newborn care.

(8) Plans for immediate and long-term follow-up of clients after discharge from the birth center.

(9) Registration of birth and reporting of complications and anomalies, including sentinel birth defect reporting pursuant to RCW 70.58.320 and chapter 246-420 WAC, as now or as hereafter amended.

(10) Prophylactic treatment of the eyes of the newborn in accordance with WAC 246-100-206 (5)(b) as now, or as hereafter, amended.

(11) Metabolic screening of newborns.

(a) Educational materials shall be provided to each client relative to metabolic screening and informed consent for metabolic screening. These materials shall be obtained from the genetics program of the department.

(b) There shall be a mechanism for weekly reporting of all live births to the genetics program of the department on forms provided by the genetics program.

(c) The birth center shall provide each client with instructions and a metabolic screening collection kit, obtained from the genetics program of the department. There shall be a procedure and/or evidence of a plan for follow-up so that blood samples are collected between the seventh and tenth day of life.

(d) When parents refuse metabolic screening, there shall be provisions for a signed refusal statement which shall be sent to the genetics program of the department in lieu of the blood sample.

(12) Infection control to include consideration of housekeeping; cleaning, sterilization, sanitization, and storage of supplies and equipment, and health of personnel. Health records for personnel shall be kept in the facility and include documented evidence of a tuberculin skin test by the Mantoux method upon employment. A copy of the health record shall be given to each employee upon termination of employment. A nonsignificant skin test is defined as less than 10mm induration read at forty-eight to seventy-two hours. A significant skin test is defined as 10mm of induration, or greater, read at forty-eight to seventy-two hours. Positive reactors shall have a chest x-ray within ninety days of the first day of employment. Exemptions and specific requirements are as follows:

(a) New employees who can document a positive Mantoux test in the past shall be excluded from screening;

(b) Those with positive skin tests and abnormal chest x-ray for tuberculosis shall complete the recommended course of preventive or curative treatment, as determined by the local health officer;

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

[Statutory Authority: RCW 18.46.060. 92-02-018 (Order 224), § 246-329-060, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-329-060, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060. 86-04-031 (Order 2338), § 248-29-050, filed 1/29/86; 83-07-017 (Order 256), § 248-29-050, filed 3/10/83. Statutory Authority: RCW 43.20.050. 82-06-011 (Order 226), § 248-29-050, filed 2/22/82; 80-05-099 (Order 197), § 248-29-050, filed 5/2/80.]

WAC 246-329-070 Birth center equipment and supplies. (1) There shall be adequate and appropriate size and type equipment and supplies maintained for the maternal client and the newborn to include:

(a) A bed suitable for labor, birth, and recovery;

(b) Separate oxygen with flow meters and masks or equivalent;

(c) Mechanical suction and bulb suction (immediately available);

(d) Resuscitation equipment to include resuscitation bags and oral airways. Additionally, newborn equipment shall include appropriate laryngoscopes and endotracheal tubes;

(e) Firm surfaces suitable for resuscitation;

(f) Fetal monitoring equipment, minimally to include a fetuscope or electronic monitor;

(g) Equipment for monitoring and maintaining the optimum body temperature of the newborn. A radiant heat source appropriate for use in warming newborns shall be available. An appropriate newborn incubator should be available;

(i) A clock with a sweep second hand;

(j) Sterile suturing equipment and supplies;

(k) Adjustable examination light;

(l) Containers for soiled linen and waste materials which shall be closed or covered.

(2) There shall be a telephone or equivalent communication device.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-329-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060. 86-04-031 (Order 2338), § 248-29-060, filed 1/29/86. Statutory Authority: RCW 43.20.050. 80-05-099 (Order 197), § 248-29-060, filed 5/2/80.]

WAC 246-329-080 Records. (1) The birth center shall have a defined client record system, policies and procedures which provide for identification, security, confidentiality, control, retrieval, and preservation of client care data and information.

(2) There shall be a health record maintained for each maternal and newborn client to include:

(a) Adequate notes describing the newborn and maternal status during prenatal, labor, birth, and recovery.

(b) Documentation that metabolic screening instructions and specimen collection kits were provided or that the specimen was obtained and forwarded to the genetics program of the department.

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(c) Documentation and authentication by clinical staff and birth center personnel who administer drugs and treatments or make observations and assessments.

(3) Entries in the client record shall be typewritten or written legibly in ink.

(4) Documentation and record keeping shall include:

(a) Completion of a birth certificate and, if applicable, a sentinel birth defect report.

(b) Documentation of orders for medical treatment and/or medication.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-329-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060. 86-04-031 (Order 2338), § 248-29-070, filed 1/29/86. Statutory Authority: RCW 43.20.050. 80-05-099 (Order 197), § 248-29-070, filed 5/2/80.]

WAC 246-329-090 Pharmaceuticals. (1) There shall be written prescriptions or orders signed by a practitioner legally authorized to prescribe for all drugs administered to clients within the birth center.

(2) There shall be policies and procedures addressing the receiving, transcribing, and implementing of orders for administration of drugs.

(3) Written policies shall be established addressing the type and intended use of any drug to be used by patients within the facility.

(4) Anesthetic agents other than local anesthetics and pudendal blocks shall not be used.

(5) Drugs shall be administered by personnel or clinical staff licensed to administer drugs.

(6) Drugs kept anywhere in the center shall be clearly labeled with drug name, strength, and expiration date.

(7) Drugs shall be stored and secured in specifically designated cabinets, closets, drawers, or storerooms and made accessible only to authorized persons.

(8) Poisonous chemicals, caustic materials, or drugs shall show appropriate warning or poison labels and shall be stored separately from other drugs. Drugs for external use shall be separated from drugs for internal use.

(9) If emergency drugs and intravenous fluids are maintained in the facility, these are considered an extension of the drug supply owned by the legally authorized prescribing practitioner; these drugs remain the responsibility of the legally authorized prescribing practitioner.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-329-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060. 86-04-031 (Order 2338), § 248-29-080, filed 1/29/86. Statutory Authority: RCW 43.20.050. 80-05-099 (Order 197), § 248-29-080, filed 5/2/80.]

WAC 246-329-100 Birth center—Physical environment. (1) The birth center shall be maintained to provide a safe and clean environment.

(2) At least one birthing room shall be maintained which is adequate and appropriate to provide for the equipment, staff, supplies, and emergency procedures required for the physical and emotional care of a maternal client, her support person or persons, and the newborn during birth, labor, and the recovery period.

(a) Birthing rooms built, modified, or altered after July 31, 1980, shall have a gross floor space of one hundred fifty-

six square feet or fourteen and one-half square meters and a minimum room dimension of eleven feet.

(b) Birthing rooms shall be located to provide unimpeded, rapid access to an exit of the building which will accommodate emergency transportation vehicles.

(3) Adequate fixed or portable work surface areas shall be maintained for use in the birthing room or rooms.

(4) Toilet and bathing facilities.

(a) A toilet and lavatory shall be maintained in the vicinity of the birthing room or rooms.

(b) A bathing facility should be available for client use.

(c) All floor surfaces, wall surfaces, water closets, lavatories, tubs, and showers shall be kept clean and in good repair.

(5) There shall be provisions and facilities for secure storage of personal belongings and valuables of clients.

(6) There shall be provisions for visual privacy for each maternal client and her support person or persons.

(7) Hallways and doors providing access and entry into the birth center and birthing room or rooms shall be of adequate width and conformation to accommodate maneuvering of ambulance stretchers and wheelchairs.

(8) Water supply. There shall be an adequate supply of hot and cold running water under pressure for human consumption and other purposes which shall comply with chapter 246-290 WAC, rules and regulations of the Washington state board of health regarding public water supplies.

(9) Heating and ventilation.

(a) A safe and adequate source of heat capable of maintaining a room temperature of at least seventy-two degrees Fahrenheit shall be provided and maintained.

(b) Ventilation shall be sufficient to remove objectionable odors, excessive heat, and condensation.

(10) Lighting and power.

(a) There shall be provisions for emergency lighting.

(b) There shall be general lighting and provision for adequate examination lights in the birthing room.

(11) Linen and laundry.

(a) Soiled linen/laundry storage and sorting areas shall be physically separated from clean linen storage and handling areas, kitchen and eating facilities.

(b) Laundry equipment shall provide hot water at a temperature of one hundred sixty degrees Fahrenheit.

(12) Utility, housekeeping, garbage, and waste.

(a) There shall be utility and storage facilities designed and equipped for washing, disinfecting, storing, and other handling of equipment and medical supplies in a manner which ensures segregation of clean and sterile supplies and equipment from those that are soiled and/or contaminated.

(b) All sewage, garbage, refuse, and liquid waste shall be collected and disposed of in a manner to prevent the creation of an unsafe or unsanitary condition.

(13) Food storage and/or preparation.

(a) Food service and catering of food shall not be provided by the facility.

(b) When birth center policy provides for allowing the preparation or storage of personal food brought in by the client or families of clients for consumption by that family, there shall be an adequate electric or gas refrigerator capable of maintaining a temperature of forty-five degrees Fahrenheit or lower and dishwashing facilities which provide hot water

at a temperature of not less than one hundred forty degrees Fahrenheit.

[Statutory Authority: RCW 18.46.060. 92-02-018 (Order 224), § 246-329-100, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-329-100, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 18.46.060. 86-04-031 (Order 2338), § 248-29-090, filed 1/29/86. Statutory Authority: RCW 43.20.050. 80-05-099 (Order 197), § 248-29-090, filed 5/2/80.]

WAC 246-329-990 Fees. Childbirth centers licensed under chapter 18.46 RCW shall submit an annual fee of five hundred dollars to the department unless a center is a charitable, nonprofit, or government-operated institution under RCW 18.46.030.

[Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-329-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-331 WAC HOSPICE AGENCIES

WAC

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WAC 246-331-001 Purpose. The purpose of these rules is to administratively implement chapter 70.127 RCW by establishing minimum licensing standards for hospice care agencies related to safe and competent care of patients and the well being of the patient unit.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-005, filed 6/7/89.]

WAC 246-331-010 Definitions. For the purpose of chapter 70.127 RCW and chapter 246-331 WAC, the following words and phrases shall have the following meaning unless the context clearly indicates otherwise.

(1) "Administrator" means a person managing and responsible for the day-to-day operation of each licensed agency.

(2) "Agency" means a hospice agency defined under this section and chapter 70.127 RCW.

(3) "AIDS" means acquired immunodeficiency syndrome defined under WAC 246-100-011.

(4) "Branch office" means a location or site from which an agency provides services within a portion of the total geographic area served by the parent agency. The branch office is part of the agency, included in the license of agency, and is located sufficiently close to share administration, supervision, and services.

(5) "Bereavement care" means care provided to the family of a patient with the goal of alleviating the emotional and spiritual discomfort associated with the death of the patient.

(6) "Bylaws" means a set of rules adopted by an agency for governing the agency operation.

(7) "Clinical note" means a written, signed, dated notation of each contact with a patient which may contain a description of signs and symptoms, treatments, medications given, the patient reaction, any changes in physical or emotional condition, and other pertinent information.

(8) "Department" means the department of health.

(9) "Dietitian" means an individual certified under chapter 18.138 RCW, Dietitians and nutritionists.

(10) "Family" means an individual or individuals who are important to and designated by the patient, and who may or may not be relatives.

(11) "Governing body" means the person, who may be the owner or a group, with responsibility and authority to establish policies related to operation of the agency.

(12) "HIV" means human immunodeficiency virus defined under RCW 70.24.017(7).

(13) "Home health aide" means an individual registered or certified as a nursing assistant under chapter 18.88A RCW.

(14) "Home health aide services" means services provided by a hospice under supervision of a registered nurse, physical therapist, occupational therapist, or speech therapist and as further defined under RCW 70.127.010(7).

(15) "Homemaker services" means services assisting ill, disabled, or infirm persons with household tasks essential to achieving adequate household and family management, including transportation, shopping, and maintenance of premises.

(16) "Hospice agency" means a private or public agency or organization administering or providing hospice care directly or through a contract arrangement to terminally ill persons in place of temporary or permanent residence by using an interdisciplinary team composed of at least nursing, social work, physician, and pastoral or spiritual counseling.

(17) "Hospice care" means:

(a) Palliative care provided to a terminally ill person in a place of temporary or permanent residence with the goal of alleviating physical symptoms, including pain, the emotional and spiritual discomfort associated with dying; and

(b) Bereavement care; and

(c) May include health and medical services, personal care, respite care, or homemaker services.

(18) "Hospice plan of care" means a written plan of care established by the interdisciplinary team and periodically reviewed by a physician describing hospice care to be provided to a terminally ill patient for palliation or medically necessary treatment of an illness or injury.

(19) "Ill, disabled, or infirm persons" means persons who need home health, hospice, or home care service in

order to maintain themselves in their places of temporary or permanent residence.

(20) "Interdisciplinary team" means all disciplines involved in patient care minimally including a physician, nurse, medical social worker, and spiritual counselor.

(21) "Licensed practical nurse" means an individual licensed as a practical nurse under chapter 18.78 RCW, Practical Nurses.

(22) "Managed care plan" means a plan controlled by the terms of the reimbursement source.

(23) "May" means permissive or discretionary on the part of the department.

(24) "Medical social worker" means an individual with a bachelor's degree in social work, psychology, or a related field having completed one year of social work experience and registered as a counselor under RCW 18.19.090.

(25) "Occupational therapist" means an individual licensed as an occupational therapist under chapter 18.59 RCW.

(26) "Owner" means the individual, partnership, or corporate entity legally responsible for the business requiring licensure as a hospice agency under chapter 70.127 RCW.

(27) "Patient" means the terminally ill individual.

(28) "Patient unit" means the patient and family who together form the unit of care in hospice.

(29) "Personal care services" means services assisting ill, disabled, or infirm persons with dressing, feeding, and personal hygiene to facilitate self-care.

(30) "Personnel" means individuals providing patient care on behalf of an agency including employees and individuals under contract.

(31) "Pharmacist" means an individual licensed as a pharmacist under RCW 18.64.080.

(32) "Physical therapist" means an individual licensed as a physical therapist under chapter 18.74 RCW.

(33) "Physician" means an individual licensed as a medical doctor under chapter 18.71 RCW or an osteopathic physician and surgeon licensed under chapter 18.57 RCW.

(34) "Prehire screening" means checking of work references, appropriate registration, licensure or certification, and qualifications.

(35) "Registered nurse" means an individual licensed under chapter 18.88 RCW, Registered nurses.

(36) "Respite care services" means services assisting or supporting the primary caregiver on a scheduled basis.

(37) "Respiratory therapist" means an individual certified under chapter 18.89 RCW, Respiratory care practitioners.

(38) "Shall" means compliance is mandatory.

(39) "Speech therapist" means a person meeting:

(a) The education and experience requirements for a certificate of clinical competence in the appropriate area of speech pathology or audiology, granted by the American Speech, Language, and Hearing Association, as described in *The ASLHA Directory*, American Speech, Language and Hearing Association, 10801 Rockville Pike, Rockville, Maryland 20852, 1983; or

(b) The education requirements for a certificate of clinical competence and in the process of accumulating the supervised experience, as specifically prescribed in *The ASLHA Directory*, 1983.

(40) "Spiritual counseling services" means services coordinated by an individual with knowledge of theology, pastoral counseling, or an allied field, or an individual authorized by a spiritual organization to provide counseling services.

(41) "Supervision" means authoritative procedural guidance by a qualified person who assumes the responsibility for the accomplishment of a function or activity and who provides direction and ongoing monitoring and evaluation of the actual act of accomplishing the function or activity.

(42) "Therapist" means a physical therapist, occupational therapist, speech therapist, or respiratory therapist as defined in this section or other therapist licensed or certified under Title 18 RCW and providing health or medical care or treatment within their defined scope of practice.

(43) "Therapy assistant" means a licensed occupational therapy assistant defined under chapter 18.59 RCW or physical therapist assistant defined under chapter 246-915 WAC.

(44) "Therapy services" means those services delivered by therapists as defined in this section.

(45) "Volunteer" means an individual providing assistance to the hospice agency and:

(a) Oriented, trained, and supervised to perform specific assigned tasks; and

(b) Working without compensation.

(46) "Without compensation" means:

(a) A recipient of care is not charged a fee for any service delivered by the volunteer; and

(b) An individual delivering care receives no pay, except reimbursement for personal mileage incurred to deliver hospice services.

[Statutory Authority: RCW 70.127.120 and 70.127.260. 92-02-018 (Order 224), § 246-331-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-015, filed 6/7/89.]

WAC 246-331-025 Licensure of the hospice agency.

(1) After June 30, 1989, persons operating hospice agencies defined under chapter 70.127 RCW shall submit applications and fees to the department.

(2) After July 1, 1990, no person shall:

(a) Advertise, operate, manage, conduct, open, or maintain a hospice agency without first obtaining an appropriate license from the department; or

(b) Use the words "hospice agency" or "hospice care" in its corporate or business name, or advertise using such words unless licensed as a hospice agency under chapter 70.127 RCW.

(3) Applicants for a hospice agency license shall:

(a) Submit a completed application and fee for initial license or renewal to the department on forms furnished by the department, including signature of the owner or legal representative of the owner;

(b) Furnish to the department full and complete information as required by the department for the proper administration of department requirements including:

(i) Evidence of current insurance including:

(A) Professional liability insurance coverage specified under RCW 70.127.080; and

(B) Public liability and property damage insurance coverage specified under RCW 70.127.080.

(ii) Information on organizational and governing structure and the identity of the applicant, officers, directors, partners, managing employees, or owners of ten percent or more of the applicant's assets;

(iii) A list of counties where the applicant will operate;

(iv) A list of branch offices; and

(v) A list of services provided or offered.

(4) Agencies requesting license renewal shall submit a renewal application and fee to the department.

(5) If the applicant or owner meets the requirements of this chapter and chapter 70.127 RCW, the department shall issue or renew a license for the agency.

(6) The department shall:

(a) Deny a license if in the last five years the owner, applicant, officers, directors, partners, managing employees, or owners of ten percent or more of the applicant's assets are found in a civil or criminal proceeding to have committed any act reasonably relating to the fitness of any of the above persons to:

(i) Establish, maintain, or administer an agency; or

(ii) Provide care in the home of another.

(b) Provide for a combination of applications and licenses and the reduction of individual license fees if an applicant applies for more than one category of license under chapter 70.127 RCW;

(c) Establish fees to be paid under chapter 43.70 RCW and WAC 246-331-990, including providing for the reduction of individual license fees if an applicant applies for more than one category of license under RCW 70.127.110;

(d) Prohibit transfer or reassignment of a license without thirty days prior notice to the department and department approval;

(e) Issue a license following approval of a new or current owner's application;

(f) Conduct on-site reviews of the agency, which may include in-home visits with the consent of the patient, to determine compliance;

(g) Examine and audit records of the agency if the department believes a person is providing care without an appropriate license;

(h) Provide for combined licensure inspections and audits for owners holding more than one license under RCW 70.127.110;

(i) Give written notice of any violations, including a statement of deficiencies observed;

(j) Inform the owner or applicant of the requirement to:

(i) Present a plan of correction to the department within ten working days; and

(ii) Comply within a specified time not to exceed sixty days.

(k) Allow the owner a reasonable period of time, not to exceed sixty days, to correct a deficiency prior to assessing a civil penalty unless:

(i) The deficiency is an immediate threat to life, health, or safety; or

(ii) The owner fails to comply with any of the provisions of WAC 246-331-045 (3)(a), (b), (c), (d), (e), (f), (g), (h), (i), and (j).

(l) Initiate disciplinary action, under RCW 70.127.170 and this chapter, if the owner or applicant fails to comply.

(7) The department may:

(a) Issue a license effective for one year or less unless the license is suspended or revoked;

(b) Inspect an agency and examine records at any time to determine compliance with chapter 70.127 RCW and this chapter; and

(c) Deny, suspend, modify, or revoke an agency license for failure to comply with chapter 70.127 RCW and this chapter.

(8) When a change of ownership is planned, the owner shall notify the department, in writing, at least thirty days prior to the date of transfer, including:

(a) Full name and address of the current owner and prospective new owner;

(b) Name and address of the agency and new name under which the agency will be operating, if known; and

(c) The date of the proposed change of ownership.

(9) The prospective new owner shall submit a new application for an agency license with the fee at least thirty days prior to the change of ownership.

(10) The agency shall inform the department, in writing, at the time of opening or closing the agency or branch offices included in the agency license.

[Statutory Authority: RCW 70.127.120 and 70.127.260. 92-02-018 (Order 224), § 246-331-025, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-025, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040. 90-06-019 (Order 039), § 248-31-025, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-025, filed 6/7/89.]

WAC 246-331-035 License denials—Suspensions—Modifications—Revocations. (1) The department may deny, suspend, modify, or revoke a license or assess civil penalties, or both, against the agency if an applicant, owner, officer, director, or managing employee:

(a) Fails or refuses to comply with the provisions under chapter 70.127 RCW or this chapter;

(b) Continues to operate after the license is revoked or suspended for cause without subsequent reinstatement by the department;

(c) Makes a false statement of a material fact in the application for the license or data attached or in any record required by this chapter or matter under investigation by the department;

(d) Refuses to allow representatives of the department to inspect any part of the agency or books, records, or files required by this chapter;

(e) Willfully prevents or interferes with, or attempts to impede in any way, the work of a representative of the department in the lawful enforcement of chapter 70.127 RCW and this chapter;

(f) Willfully prevents or interferes with a representative of the department in the preservation of evidence of a violation under chapter 70.127 RCW or this chapter;

(g) Fails to pay or make arrangements to pay a civil monetary penalty assessed by the department within ten days after the assessment becomes final, as provided under WAC 246-331-045, Civil fines;

(h) Uses false, fraudulent, or misleading advertising;

(i) Has repeated incidents of personnel performing services beyond services authorized by the agency or law; or

(j) Misrepresents, or is fraudulent in an aspect of, the conduct of the applicant's or owner's business.

(2) If the department finds the public health, safety, or welfare imperatively require emergency action, a license may be summarily suspended pending proceedings for revocation or other action.

[Statutory Authority: RCW 70.127.120, 70.127.260 and 34.05.220. 92-02-018 (Order 224), § 246-331-035, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-035, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040. 90-06-019 (Order 039), § 248-31-035, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-035, filed 6/7/89.]

WAC 246-331-045 Civil fines. (1) Following an on-site review, in-home visit, or audit, the department shall give written notice either in person or by personal service or certified mail, return receipt requested, of any violation under chapter 70.127 RCW or this chapter. The notice shall inform the owner or applicant as appropriate including:

(a) Describing the conditions of noncompliance;

(b) Specifying a reasonable time of compliance not to exceed sixty days;

(c) Explaining the possibility of a violation subjecting the owner or applicant to denial, revocation, modification, or suspension of the license, and/or civil fines; and

(d) Explaining the right of the owner or applicant to appeal.

(2) The department may assess civil monetary penalties in addition to or in lieu of denial, suspension, modification, or revocation of a license if the owner fails to comply with a notice of violation.

(3) The department may assess civil monetary penalties not to exceed one thousand dollars per violation in any case where the department finds the owner, applicant, officer, director, partner, managing employee, or owner of ten percent or more of the applicant's or owner's assets:

(a) Failed or refused to comply with requirements under chapter 70.127 RCW or this chapter;

(b) Continued to operate after the license was revoked or suspended for cause and not subsequently reinstated by the department;

(c) Has knowingly, or with reason to know, made a false statement of a material fact in the:

(i) Application for the license; or

(ii) Data attached; or

(iii) Record required under chapter 70.127 RCW; or

(iv) Matter under investigation by the department.

(d) Refused to allow representatives of the department to inspect any book, record, file, or part of the agency under this chapter;

(e) Willfully prevented, interfered with, or attempted to impede the work of any representative of the department and the lawful enforcement of a provision under chapter 70.127 RCW and this chapter;

(f) Willfully prevented or interfered with a representative of the department in the preservation of evidence of a violation under chapter 70.127 RCW or this chapter;

(g) Failed to pay or make arrangements to pay any civil monetary penalty assessed by the department under chapter 70.127 RCW within ten days after the assessment became final;

- (h) Used false, fraudulent, or misleading advertising;
- (i) Has repeated incidents of personnel performing services beyond services authorized by the agency or law; or
- (j) Misrepresented or was fraudulent in any aspect of the conduct of the agency business.

(4) Failure to pay or make arrangements to pay civil monetary penalties within ten days from the time the assessment becomes final may result in denial, suspension, modification, or revocation of the license, in addition to either the assessment of the penalties or to the assessment of additional penalties.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-045, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040, 90-06-019 (Order 039), § 248-31-045, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-045, filed 6/7/89.]

WAC 246-331-055 License action and/or civil fine—Notice—Adjudicative proceeding. (1) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(2) The department's notice of imposition of a civil fine shall be consistent with RCW 43.70.095. A person the department imposes a civil fine on has the right to an adjudicative proceeding to contest the decision.

(3) A license applicant or holder or a person the department imposes a civil fine on contesting a department decision shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(b) Include in or with the application:

- (i) A specific statement of the issue or issues and law involved;
- (ii) The grounds for contesting the department decision; and

(iii) A copy of the contested department decision.

(4) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.127.120, 70.127.260 and 34.05.220, 92-02-018 (Order 224), § 246-331-055, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-055, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040, 90-06-019 (Order 039), § 248-31-055, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-055, filed 6/7/89.]

WAC 246-331-065 General requirements. (1) The agency shall have a written plan of operation including:

- (a) An organizational chart showing ownership and lines for delegation of responsibility to the patient care level;
- (b) The services offered including hours of operation and service availability;
- (c) Admission discharge, referral, and transfer criteria;

(1992 Ed.)

(d) Evidence of administrative and supervisory control and responsibility for all services including services provided by branch offices;

(e) An annual budget approved by the governing body; and

(f) Provisions for ongoing care in the event the agency ceases operation.

(2) Hospice agencies shall:

(a) Arrange for one or more physicians to:

(i) Provide medical direction;

(ii) Advise the agency on policies and procedures;

(iii) Serve as liaison with the patient's attending physicians;

(iv) Provide patient care and approve modifications of the hospice plan of care if the attending physician does not provide care or approve modifications in the plan; and

(v) Participate regularly in hospice care planning conferences with staff.

(b) Provide medical social services with at least one medical social worker available;

(c) Provide spiritual counseling services, either directly or in coordination with an individual of the patient's choice, if the patient or family desires;

(d) Provide nursing consultation and in-home visits as needed twenty-four hours per day, seven days per week, either directly or by arrangement with another agency;

(e) Provide or make available volunteer services to assist in provision of hospice care;

(f) Provide a bereavement care program, either directly or by arrangement for the family of patients, including:

(i) Referral of family members to other resources as needed;

(ii) Group and/or individual support opportunities as appropriate for bereavement care education and support;

(iii) Documented training and supervision of all personnel involved in bereavement care program; and

(iv) Follow-up available for at least one year, after death of the patient.

(g) Provide scheduled support for staff.

(3) The agency shall provide services consistent with an authorized plan of treatment or plan of care and:

(a) Accept the patient unit only if the agency is capable of providing or arranging for needed hospice care at the level of intensity required by the patient unit; and

(b) Inform the patient unit of alternate services, if available, if the agency is unable to meet identified needs of the patient.

(4) Agency personnel shall communicate in a language or form of communication the patient can reasonably be expected to understand. Whenever possible, the agency shall assist in obtaining:

(a) Special devices;

(b) Interpreters; or

(c) Other aids to facilitate communication.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-065, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-065, filed 6/7/89.]

WAC 246-331-077 Patient bill of rights. Hospice agencies shall provide each patient unit with a written bill of rights affirming each patient's rights to:

- (1) Be informed of aspects of his or her condition necessary to make decisions regarding his or her care;
- (2) Refuse treatment or services to the extent permitted by law and be informed of the potential consequences of such action;
- (3) Be informed of the services offered by the agency, including those services provided in his or her home;
- (4) Participate in development of the hospice plan of care;
- (5) Be informed of any responsibilities the patient may have in the care process, including the requirement for medical supervision when required for the hospice plan of care;
- (6) Be informed of the name of the person supervising the hospice care and how to contact that person;
- (7) Be informed of the process for submitting and addressing complaints to both the agency and department;
- (8) Receive an explanation of the agency's charges and policy concerning billing and payment for services including, to the extent possible, insurance coverage and other methods for payment, unless services are reimbursed through a managed care plan;
- (9) Upon request, receive a fully itemized billing statement at least monthly including the date of each service and the charge, unless service is reimbursed through a managed care plan;
- (10) Access the department's directory of licensed agencies;
- (11) Upon request, be informed of who owns and controls the agency;
- (12) Personnel properly trained to perform assigned tasks;
- (13) Coordinated services;
- (14) Courteous and respectful treatment, privacy, and freedom from abuse and discrimination;
- (15) Confidential management of patient records and information;
- (16) Access information in the patient's own record upon request;
- (17) Be informed of the nature and purpose of care, as well as name and discipline of the person performing the care;
- (18) Be informed of any care provided by the agency which has experimental or research aspects with documentation of voluntary informed consent; and
- (19) Be informed of the reason for impending discharge, transfer to another agency and/or level of care, ongoing care requirements, and other available services and options if needed.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-077, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-077, filed 6/7/89.]

WAC 246-331-085 Governing body—Administration. (1) The governing body of the agency shall establish a mechanism to:

- (a) Approve a quality assurance plan whereby problems are identified, monitored, and corrected;
- (b) Approve written policies and procedures related to safe, adequate patient care, and operation of the agency;

- (c) Assure an annual review of the agency by health professionals to evaluate the scope and quality of the services provided;
 - (d) Appoint an administrator and provide for an alternate in the administrator's absence;
 - (e) Adopt and periodically review written bylaws;
 - (f) Oversee the management and fiscal affairs of the agency; and
 - (g) Obtain regular reports on patient unit satisfaction.
- (2) Each agency shall have an administrator to:
- (a) Organize and direct the agency's ongoing functions;
 - (b) Arrange for professional services;
 - (c) Maintain ongoing liaison between the governing body and personnel;
 - (d) Employ qualified personnel and ensure adequate education and supervision of personnel and volunteers;
 - (e) Ensure the accuracy of public information materials and activities;
 - (f) Implement a budget and accounting system;
 - (g) Ensure the presence of an alternate to act in the administrator's absence.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-085, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-085, filed 6/7/89.]

WAC 246-331-095 Personnel and volunteers. (1) The agency shall establish minimal written personnel and volunteer policies including, but not limited to:

- (a) Personnel and volunteer qualifications commensurate with anticipated job responsibilities;
 - (b) Employment criteria without regard to sex, race, age, creed, handicap, national origin, or sexual orientation;
 - (c) Orientation and in-service training related to safe care, appropriate to each classification of personnel and volunteer and the tasks he or she is expected to perform;
 - (d) Evidence of prehire screening; and
 - (e) Annual or more frequent performance evaluations including:
 - (i) Assessment of safe performance of job responsibilities; and
 - (ii) Conformance with agency policies and procedures.
- (2) The agency shall maintain records including:
- (a) Qualifications of personnel and direct patient care volunteers;
 - (b) Evidence of current licensure, certification, or registration when applicable to job requirements;
 - (c) Evidence of review of agency policy and procedures related to abuse and neglect of children and adults for all personnel and volunteers providing services in the home consistent with chapters 26.44 and 74.34 RCW;
 - (d) Performance evaluations and evidence of pre-hire screening; and
 - (e) Health records including evidence of at least one tuberculin skin test by the Mantoux method at the time of employment unless medically contraindicated, and meeting specifications under subsection (3) of this section.
- (3) The agency shall ensure personnel and volunteers expected to provide direct patient care have a tuberculin skin test by the Mantoux method prior to patient contact and meeting the following requirements:

(a) When a skin test is negative, less than ten millimeters of induration read at forty-eight to seventy-two hours:

(i) Personnel and volunteers under thirty-five years of age require no further testing; and

(ii) Personnel and volunteers thirty-five years of age or over require a second test in one to three weeks.

(b) Positive reactors, reaction of ten millimeters or more of induration, shall have a chest x-ray within ninety days of the first day of employment. Exceptions and specific requirements are as follows:

(i) The hospice agency shall maintain results of skin tests, report of x-ray findings, or exemptions to such in the agency; and

(ii) New personnel and volunteers providing documentation of a significant Mantoux skin test reaction in the past are excluded from screening.

(c) New personnel and volunteers currently and consistently employed by or volunteering in another agency or facility with similar required screening, meeting the requirements under this subsection, may use the previous screening as documentation; and

(d) In the event of personnel or volunteers exposure to an infectious case of tuberculosis, the agency shall supply the names and identifying information to the local health department sufficient for screening to occur.

(4) The agency shall assure observance of appropriate precautions when personnel and volunteers show signs or report symptoms of a communicable disease.

(5) The agency shall assume responsibility for personnel providing agency services included in the hospice plan of care.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-095, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-095, filed 6/7/89.]

WAC 246-331-105 AIDS education and training.

Hospice agencies shall:

(1) Verify or arrange for appropriate education and training of personnel and volunteers on the prevention, transmission, and treatment of HIV and AIDS consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - AIDS Education for Health Care Facility Employees*, January 1991, published by the department office on HIV/AIDS.

[Statutory Authority: RCW 70.127.120, 70.127.260 and 70.24.310, 92-02-018 (Order 224), § 246-331-105, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-105, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-105, filed 6/7/89.]

WAC 246-331-115 Patient care policies and procedures. (1) The agency shall:

(a) Establish and implement written policies and procedures appropriate to the services offered by the agency; and

(b) Make policies and procedures available to all personnel and volunteers including:

(i) Treatments, procedures, and services carried out in providing patient unit care;

(ii) Any special qualifications of persons performing the services;

(iii) Infection control principles and practices;

(iv) Emergency care, patient safety, and death;

(v) Maintenance of supplies and equipment;

(vi) Admission, transfer, and discharge of patients;

(vii) Abuse and neglect consistent with chapters 26.44 and 74.34 RCW;

(viii) Coordination of services;

(ix) Clinical records; and

(x) Management and handling of patient-owned drugs consistent with applicable state laws;

(xi) Spiritual counseling services;

(xii) Bereavement care counseling;

(xiii) Volunteer services; and

(xiv) Respite care services.

(2) The agency shall provide patient unit teaching:

(a) Consistent with agency policies and procedures; and

(b) Including demonstration, supervision, and evaluation.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-115, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-115, filed 6/7/89.]

WAC 246-331-125 Supervision and coordination of patient care. The hospice agency shall employ a registered nurse to supervise and coordinate patient care services who:

(1) Is available, or replaced by a similarly qualified person, at all times;

(2) Participates in the development and revision of written patient care policies and procedures related to each service provided;

(3) Is responsible for assignment and supervision of all personnel and volunteers providing direct patient care services; and

(4) Participates in coordination of interdisciplinary services and interagency services.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-125, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-125, filed 6/7/89.]

WAC 246-331-135 Hospice plan of care. (1) The agency shall provide an individualized plan of care for every hospice patient unit which:

(a) Includes identification of current problems pertaining to the health of the patient with specific interventions and expected outcomes; and

(b) Is reviewed and revised in a case planning conference as necessary and every two weeks by three or more members of the interdisciplinary team including:

(i) Registered nurse, social worker, and one other discipline; and

(ii) Documented contact with all disciplines involved with hospice care of the patient unit.

(2) The agency shall ensure drugs and treatments are:

(a) Ordered by a physician;

(b) Verified by a registered nurse, licensed practical nurse, therapist, or pharmacist with:

(i) Recording of the order documented in the patient record as soon as possible; and

(ii) Countersignature by physician within a reasonable length of time.

(c) Administered by legally authorized agency personnel or volunteers.

(3) The agency shall ensure prompt reporting of suspected drug allergies, adverse reactions to drugs, or other problems related to patient use or drugs to the physician.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-135, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-135, filed 6/7/89.]

WAC 246-331-155 Functions, duties, and responsibilities of direct care personnel. (1) Agencies shall describe functions, duties, and responsibilities of personnel and volunteers in direct contact with the patient unit including:

(a) Initial and ongoing assessment and reassessment evaluation;

(b) Participation in development and revision of the hospice plan of care;

(c) Provision of appropriate services in accordance with agency policy and procedures;

(d) Participation in case conferences or other processes used to coordinate patient care;

(e) Teaching and counseling patient unit to meet needs identified in the hospice plan of care;

(f) Preparation of clinical notes;

(g) Development of written directions for use by home health aide or appropriate therapy assistant; and

(h) Supervision and orientation of home health aide, appropriate therapy assistant, and others to assure safe, therapeutic patient care.

(2) Agencies utilizing the services of licensed practical nurses shall follow agency policies, provide supervision by a registered nurse, and comply with chapter 18.78 RCW.

(3) The agency shall utilize the services of therapy assistants:

(a) Only as defined under WAC 246-331-010;

(b) Under supervision of an appropriately qualified therapist; and

(c) Following a plan of care which is approved by the qualified therapist.

(4) Home health aide services, when utilized, shall:

(a) Be included in the hospice plan of care;

(b) Follow a specific written plan of care; and

(c) Be under the supervision of the agency and a registered nurse, or therapist with:

(i) Orientation of the home health aide to the specific hospice care of each patient prior to care given;

(ii) Evidence of an in-home supervisory visit at least every two weeks; and

(iii) Direct supervisory observation of each home health aide during care at least one time every two months.

(5) The agency shall define the functions and duties of home health aides including the ability to:

(a) Observe and recognize changes in patient's condition and report changes to the supervisor;

(b) Initiate emergency procedures under the agency policy;

(c) Assist with medications ordinarily self-administered by the patient, with assistance limited to:

(i) Communication of appropriate information to the patient regarding self-administration including:

(A) Reminding a patient of when it is time to take a prescribed medication; and

(B) Reading the label of the medication container.

(ii) Handing a patient-owned medication container to the patient;

(iii) Opening the medication container; or

(iv) Application or installation of skin, nose, eye, and ear preparations only under specific direction of the supervisor.

(d) Record pertinent information in the patient's clinical record.

[Statutory Authority: RCW 70.127.120 and 70.127.260. 92-02-018 (Order 224), § 246-331-155, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-155, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-155, filed 6/7/89.]

WAC 246-331-165 Clinical records. (1) The agency shall maintain clinical records under agency policies and procedures. Records shall be:

(a) Legibly written in ink suitable for photocopying;

(b) On standardized agency forms;

(c) Written in a legally acceptable manner;

(d) In chronological order in entirety or by service;

(e) Fastened together to avoid loss of pages;

(f) Considered as property of the agency;

(g) Available in one integrated document in one place, except:

(i) A copy may be kept in the home or in the agency office; and

(ii) More than one volume may be necessary.

(h) Available and retrievable during operating hours either in the agency or by electronic means; and

(i) Stored following discharge from service:

(i) Preventing loss of information;

(ii) Protecting the record from damage due to water, mildew, or fire; and

(iii) Preventing access by unauthorized persons.

(2) The agency shall include as contents of the clinical record:

(a) Patient-identifying information;

(b) Patient service/treatment consent and agreement;

(c) Pertinent past and current clinical findings including:

(i) Assessment of patient's physical and mental status as well as social and environmental problems affecting care; and

(ii) Clinical notes describing specific observations including, but not limited to, observations of patient condition.

(d) The hospice plan of care; and

(e) Physician orders.

(3) Agencies shall maintain, retain, and preserve records:

(a) For adults, a period of no less than five years following the date of termination of services; and

(b) For minors, a period of no less than three years following attainment of eighteen years of age, or five years following discharge, whichever is longer.

(4) Agencies shall establish policies and procedures specific to retention and disposition of clinical records including:

(a) A method of disposal of clinical records or patient care data assuring prevention of retrieval and subsequent use of information; and

(b) A means to transmit a copy of the clinical record or an abstract and copy of most recent summary report with the patient in the event of patient transfer to another agency or health care facility. When patients are transferred without notification of the receiving agency, a copy of the abstract shall be forwarded upon notification and as soon as possible.

(5) Agencies shall safeguard clinical record information and patient care data against loss or unauthorized use including:

(a) Adherence to written procedures governing use and removal of records and conditions for release of information; and

(b) Requirement for prior written consent of the patient for release of information unless authorized by law.

(6) Agencies discontinuing operation shall:

(a) Notify the department prior to cessation of operation; and

(b) Obtain department approval of a plan to preserve or destroy clinical records prior to disposition.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-331-165, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-31-165, filed 6/7/89.]

WAC 246-331-175 Parenteral product services. (1)

If the agency provides parenteral and/or hyperalimentation services, the agency shall define the scope of the services, in writing, with contracts specifying the responsibilities of the contractor and the contractee for:

(a) Services;

(b) Equipment; and

(c) How reimbursement occurs.

(2) If the agency provides parenteral services, the agency shall have written policies and procedures including:

(a) Preparation of parenteral solutions, medications, and mixing of previously dispensed parenteral drugs including:

(i) Use of aseptic technique when mixing previously dispensed parenteral drugs; and

(ii) If the circumstances require a registered nurse to mix two or more parenteral drugs or reconstitute drugs prior to administration, requirements for the registered nurse to place:

(A) An auxiliary label modifying existing label on the mixture with initials of the registered nurse; or

(B) A label prepared under the supervision of a pharmacist with the initials of the registered nurse on the container.

(b) Consultation available by a dietitian if hyperalimentation services are provided.

(3) Agencies shall establish written policies and procedures for parenteral administration including:

(a) Administration of parenteral solutions, medications, admixtures, blood, and blood products;

(b) Infection control, including:

(i) Site preparation;

(ii) Tubing and dressing management;

(iii) Site assessment and rotation;

(iv) Use of aseptic technique; and

(v) Use of sterile equipment as indicated by the label.

(c) Use and control of parenterally administered investigational drugs;

(d) Administration of parenterally administered drugs causing tissue necrosis upon extravasation;

(e) Safe handling and disposal of biohazardous materials including antineoplastic agents and infectious materials;

(f) Documentation requirements;

(g) Patient and family teaching;

(h) Appropriate labeling of precision volume chambers, if used, so labeling accurately reflects each medication or solution administered via the precision volume chamber; and

(i) Use of electronic infusion control devices.

(4) The agency shall ensure:

(a) Personnel inserting parenteral devices are:

(i) Legally authorized to penetrate skin and insert intravenous devices; and

(ii) Appropriately trained with demonstrated and documented skills in intravenous insertion techniques.

(b) Personnel administering parenteral medications are:

(i) Legally authorized to administer medications;

(ii) Appropriately trained;

(iii) Able to demonstrate and provide evidence of documented skill in parenteral administration;

(iv) Knowledgeable of procedures and equipment; and

(v) Approved by the agency.

(c) Availability of drug compatibility reference material to individuals who administer parenteral medications;

(d) Parenteral solutions are administered only upon the order of a physician; and

(e) All orders and prescriptions for parenteral solutions, medications, and mixtures of previously dispensed drugs include:

(i) Identification and quantity of solution or medication;

(ii) Route;

(iii) Rate of flow or frequency;

(iv) Duration of administration;

(v) Amount of additive;

(vi) Identification of patient; and

(vii) Identification of prescribing physician.

(5) The agency shall ensure documentation in the clinical record including:

(a) Solution, medication or medications, route, modifications, and/or additions made to parenteral products, time, date, amount administered, and rate;

(b) Site and site assessment;

(c) Date and time of insertion and removal of cannula, catheter, or needle;

(d) Device used, including gauge, length and type of needle, cannula, or catheter;

(e) Condition of cannula or catheter and site at the time removed from patient;

(f) Use of electronic infusion devices;

(g) Observed complications and treatment of complications;

(h) Management of tubing and dressing; and

(i) Signature and discipline of the administering individual.

(6) If parenteral preparations are administered to pediatric patients, the agency shall establish written policies for:

(a) Amounts of parenteral fluid infants, children, and adolescents should receive determined by age, body surface area, and weight;

(b) Required use of rate control devices;

(c) Documentation requirements specified for parenteral therapy to include intake, output, weight, and height;

(d) The type of parenteral preparations which may be administered at home;

(e) Conditions requiring a registered nurse to be in attendance; and

(f) A plan for emergency services.

(7) The agency shall ensure, if blood or blood products are administered in the patient's residence, there is:

(a) A registered nurse or physician continuously in attendance;

(b) A plan for emergency services; and

(c) A method of delivery ensuring temperature stability, prevention of contamination, and viability.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-175, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-175, filed 6/7/89.]

WAC 246-331-185 Medical supplies or equipment services. (1) An agency providing medical supplies or equipment services shall provide:

(a) A written description of the scope of the services including:

(i) The types of supplies and/or equipment provided; and

(ii) Policies and procedures for cleaning, maintenance, calibration, or replacement of equipment.

(b) Records of the services provided, date, time, and by whom; and

(c) Documentation of approval of patient unit for service, cost, and method of payment unless under a managed care plan.

(2) If provided, the agency shall maintain immediate availability of replacement supplies or equipment essential for the comfort and safety of the patient.

(3) The agency shall provide knowledgeable, trained personnel to:

(a) Initiate service;

(b) Maintain supplies and equipment; and

(c) Instruct patients or caregivers in the use and maintenance of supplies and equipment. Instructions shall be given:

(i) In writing;

(ii) Verbally; and

(iii) By demonstration and redemonstration as necessary.

(4) The agency shall document the training and qualifications of personnel.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-331-185, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-31-185, filed 6/7/89.]

WAC 246-331-990 Fees. (1) Hospice agencies licensed under chapter 70.127 RCW shall submit an annual license fee as follows:

(a) Agencies with fifty or more employees, one thousand two hundred dollars;

(b) Agencies with less than fifty but more than fifteen employees, one thousand dollars; and

(c) Agencies with fifteen or less employees, eight hundred dollars.

(2) An agency applying for additional home health, hospice, or home care licenses shall receive a fee reduction of two hundred fifty dollars for each additional license in accordance with the provisions of RCW 70.127.110.

[Statutory Authority: RCW 43.70.250. 92-15-084 (Order 288), § 246-331-990, filed 7/16/92, effective 8/16/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-331-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-333 WAC APPROVAL OF EYE BANKS

WAC

246-333-010	Definitions.
246-333-020	Approval process.
246-333-030	HIV/AIDS education and training.
246-333-040	Records.

WAC 246-333-010 Definitions. As used herein the following terms shall have the meaning set forth in this section unless the context clearly indicates otherwise:

(1) "Accepted medical standards" shall mean those standards relating to the removal and storage of eye tissue which preserve that tissue in a state wherein the tissue may be successfully transplanted.

(2) "Approved eye bank" shall mean a facility approved by the secretary wherein eye tissue may be received and stored in accordance with accepted medical standards for future transplantation or research.

(3) "Department" shall mean the department of health.

(4) "Developmental loss" shall mean the loss of developmental opportunities including, but not limited to, hand-eye coordination, small muscle development and dexterity and large muscle coordination which would occur in the normal course of development if the loss of vision had not occurred.

(5) "Economic loss" shall mean the loss of wages from employment and the loss of services within a home requiring the replacement of those services to provide for the care of dependent children and adults.

(6) "Educational loss" shall mean the loss of educational opportunities by virtue of an inability to perceive visual images.

(7) "Emergency" shall mean a situation which occurs as a result of trauma to the eyes necessitating the replacement of corneal tissue within 48 hours to prevent the loss of sight.

(8) "Secretary" shall mean the secretary of the department of health and his or her designee.

[Statutory Authority: RCW 43.70.040 and 68.50.280. 92-02-018 (Order 224), § 246-333-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-333-010, filed 12/27/90, effective 1/31/91; Order 134, § 248-33-020, filed 10/21/76.]

WAC 246-333-020 Approval process. (1) A facility which seeks to qualify as an approved eye bank must submit a written request for approval to the secretary. The request must include a statement of the arrangements made for the storage of tissue received, the name and availability of

ophthalmologists and the policies to be followed for the distribution of tissue.

(2) Approval may be granted by the secretary when:

(a) The eye bank meets accepted medical standards for the preservation of eye tissue in a condition suitable for transplantation including, but not limited to, the provision of a storage area for the tissue which is maintained at an appropriate temperature and in which the tissue may be protected from contamination and/or damage, and

(b) There are one or more board certified or board qualified ophthalmologists on the staff of a hospital which seeks approval for its eye bank who are able to, and express a willingness to, perform corneal transplants, and

(c) The director or administrator of the eye bank declares it to be the intention of those who direct and/or administer the eye bank to distribute available corneal tissue to recipients in a fair and reasonable manner, which means the distribution of corneal tissue to recipients requiring such tissue:

(i) Without discrimination based on race, creed, ethnic origin, sex, or age, and

(ii) With consideration of the length of time that the potential recipient has had a medically defined need to receive corneal tissue, and

(iii) With consideration of the impact of waiting to receive such tissue on the recipient and the resulting economic, educational, or developmental loss to the potential recipient, and

(iv) With provision made for emergency requests for corneal tissue.

(3) The department shall deny, suspend, modify, or revoke approval of an eye bank when a facility fails or refuses to comply with legal requirements, including the criteria set forth in chapter 246-08 WAC.

(4) The secretary may, in the secretary's discretion, reinstate the approval of an eye bank when the facility has corrected the conditions which led to the suspension, modification, or revocation of approval.

(5)(a) The department's notice of a denial, suspension, modification, or revocation of approval shall be consistent with RCW 43.70.115. An applicant or approval holder has the right to an adjudicative proceeding to contest the decision.

(b) An approval applicant or holder contesting a department approval decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 43.70.040, 68.50.280 and 34.05.220. 92-02-018 (Order 224), § 246-333-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-333-020, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050 and chapter 34.05 RCW. 90-05-038 (Order 034), § 248-33-040, filed 2/14/90, effective 3/17/90; Order 134, § 248-33-040, filed 10/21/76.]

WAC 246-333-030 HIV/AIDS education and training. Eye banks shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care Facility Employees*, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040, 68.50.280 and 70.24.310. 92-02-018 (Order 224), § 246-333-030, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-333-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310. 89-21-038 (Order 3), § 248-33-090, filed 10/12/89, effective 11/12/89.]

WAC 246-333-040 Records. Every approved eye bank shall keep a record of requests made to county coroners or medical examiners for corneal tissue on forms provided by the department. Information recorded shall include the initial request, the tissue received and its condition (acceptable for transplant or not acceptable for transplant), the name of the person who removed the tissue from the donor, the date and time of the removal of tissue, the date and time of the donor's death (observed or otherwise determined), the age of the donor (if known), the age, sex and racial or ethnic group identity of the recipient, the name of the physician who performed the transplant, the date of the transplant and the hospital where the transplant was performed.

This information shall be kept at the approved eye bank for a period of five years and made available to the secretary or his or her designee upon request.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-333-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050. 78-03-060 (Order 156), § 248-33-100, filed 2/22/78; Order 134, § 248-33-100, filed 10/21/76.]

Chapter 246-336 WAC HOME CARE AGENCY RULES

WAC

246-336-001	Purpose.
246-336-010	Definitions.
246-336-025	Licensure of the home care agency.
246-336-035	License denials—Suspensions—Modifications—Revocations.
246-336-045	Civil fines.
246-336-055	License action and/or civil fine—Notice—Adjudicative proceeding.
246-336-065	General requirements.
246-336-077	Participant bill of rights.
246-336-085	Governing body—Administration.
246-336-095	Personnel and volunteers.
246-336-105	AIDS education and training.
246-336-115	Participant care policies and procedures.

246-336-125	Supervision and coordination of services.
246-336-135	Home care plan of care.
246-336-165	Records and documentation of participant care.
246-336-990	Fees.

WAC 246-336-001 Purpose. The purpose of these rules is to administratively implement chapter 70.127 RCW by establishing minimum licensing standards related to safety and well-being of participants in home care agencies.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-336-001, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-36-005, filed 6/7/89.]

WAC 246-336-010 Definitions. For the purpose of chapter 70.127 RCW and chapter 246-336 WAC, the following words and phrases shall have the following meaning unless the context clearly indicates otherwise.

(1) "Administrator" means a person managing and responsible for the day-to-day operation of each licensed agency.

(2) "Agency" means a home care agency as defined under this section and chapter 70.127 RCW.

(3) "AIDS" means acquired immunodeficiency syndrome defined under WAC 246-100-011.

(4) "Branch office" means a location or site from which an agency provides services within a portion of the total geographic area served by the parent agency. The branch office is part of the agency, included in the license of the agency, and located sufficiently close to share administration, supervision, and services.

(5) "Bylaws" means a set of rules adopted by an agency for governing the agency operation.

(6) "Department" means the department of health.

(7) "Family" means an individual or individuals who are important to and designated by the participant, and who may or may not be relatives.

(8) "Governing body" means the person, who may be the owner or a group, with responsibility and authority to establish policies related to operation of the agency.

(9) "HIV" means human immunodeficiency virus as defined under RCW 70.24.017(7).

(10) "Home care agency" means a private or public agency or organization administering or providing home care services directly or through a contract arrangement to ill, disabled, or infirm persons in places of temporary or permanent residence unless:

(a) Included as an exclusion under RCW 70.127.040; or

(b) A licensed home health agency or hospice agency delivers home care as an integral part of delivery of home health or hospice care; or

(c) The organization provides home care through volunteers without compensation as defined in this section; or

(d) An individual provides home care through direct agreement with the recipient of care; or

(e) An individual provides home care through a direct agreement with a third-party payor where comparable services are not readily available through a home care agency.

(11) "Home care plan of care" or "care plan" means a written personalized plan established and periodically reviewed by a home care agency describing the home care

to be provided and requiring consent of the participant or the participant's designated representative.

(12) "Home care services" means personal care services, homemaker services, respite care services, or any other nonmedical services provided to ill, disabled, or infirm persons enabling these persons to remain in their own residences consistent with their desires, abilities, and safety.

(13) "Homemaker services" means services assisting ill, disabled, or infirm persons with household tasks essential to achieving adequate household and family management, including transportation, shopping, and maintenance of premises.

(14) "Ill, disabled, or infirm persons" means persons needing home health, hospice, or home care services in order to maintain themselves in their places of temporary or permanent residence.

(15) "Managed care plan" means a plan controlled by the terms of the reimbursement source.

(16) "May" means permissive or discretionary on the part of the department.

(17) "Other nonmedical services" means noninvasive procedures, such as assistance with toileting, applying nonsterile dry dressing, ambulation, transfer, positioning, bathing, reminding about medication, or other services unless such service must be delivered by a licensed or certified individual under Washington state law.

(18) "Owner" means the individual, partnership, or corporate entity legally responsible for the business requiring licensure as a home care agency under chapter 70.127 RCW.

(19) "Participant" means an individual receiving home care services.

(20) "Personal care services" means services assisting ill, disabled, or infirm persons with dressing, feeding, and personal hygiene to facilitate self-care.

(21) "Personnel" means individuals employed or under contract in a home care agency.

(22) "Respite care services" means services assisting or supporting the primary caregiver on a scheduled basis.

(23) "Shall" means compliance is mandatory.

(24) "Supervisor" means an individual qualified by training, education, and demonstrated skills and/or experience in home care service delivery who assumes the responsibility for the accomplishment of a function or activity and who provides initial direction and ongoing monitoring of performance.

(25) "Volunteer" means an individual providing assistance to the home care agency and:

(a) Oriented, trained, and supervised to perform specific assigned tasks; and

(b) Working without compensation.

(26) "Without compensation" means:

(a) A recipient of care is not charged a fee for any service delivered by the volunteer; and

(b) An individual delivering care receives no pay, except reimbursement for personal mileage incurred to deliver home care services.

[Statutory Authority: RCW 70.127.120 and 70.127.270, 92-02-018 (Order 224), § 246-336-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-336-010, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040, 89-12-077 (Order 2790), § 248-36-015, filed 6/7/89.]

WAC 246-336-025 Licensure of the home care agency. (1) After June 30, 1989, persons operating home care agencies as defined under chapter 70.127 RCW, shall submit application and fees to the department.

(2) After July 1, 1990, no person shall:

(a) Advertise, operate, manage, conduct, open, or maintain a home care agency without first obtaining an appropriate license from the department; or

(b) Use the words "home care agency" or "home care services" in its corporate or business name, or advertise using such words unless licensed as a home care agency under chapter 70.127 RCW.

(3) Applicants for a home care agency license shall:

(a) Submit a completed application and fee for initial license or renewal to the department on forms furnished by the department, including signature of the owner or legal representative of the owner; and

(b) Furnish to the department full and complete information as required by the department for the proper administration of department requirements including:

(i) Evidence of current insurance including:

(A) Professional liability insurance coverage specified under RCW 70.127.080; and

(B) Public liability and property damage insurance coverage as specified under RCW 70.127.080.

(ii) Information on organizational and governing structure and the identity of the applicant, officers, directors, partners, managing employees, or owners of ten percent or more of the applicant's assets;

(iii) A list of counties where the applicant will operate;

(iv) A list of branch offices; and

(v) A list of services provided or offered.

(4) Agencies requesting license renewal shall submit a renewal application and fee to the department.

(5) If the applicant or owner meets the requirements of this chapter and chapter 70.127 RCW, the department shall issue or renew a license for the agency, including branch offices.

(6) The department shall:

(a) Deny a license if in the last five years the owner, applicant, officers, directors, partners, managing employees, or owners of ten percent or more of the applicant's assets are found in a civil or criminal proceeding to have committed any act reasonably relating to the fitness of any of the above persons to:

(i) Establish, maintain, or administer an agency; or

(ii) Provide care in the home of another.

(b) Provide a combination of applications and licenses and the reduction of individual license fees if an applicant applies for more than one category of license under chapter 70.127 RCW;

(c) Establish fees to be paid as required under RCW 43.70.110 and WAC 246-336-990, including providing for the reduction of individual license fees if an applicant applies for more than one category of license under RCW 70.127.110;

(d) Prohibit transfer or reassignment of a license without a thirty-day prior notice to the department and department approval;

(e) Issue a license following approval of a new or current owner's application;

(f) Conduct on-site reviews of the agency, which may include in-home visits with the consent of the participant, in order to determine compliance;

(g) Examine and audit records of the agency if the department has reason to believe persons are providing care without an appropriate license;

(h) Provide for combined licensure inspections and audits for owners holding more than one license under RCW 70.127.110;

(i) Give written notice of any violations, including a statement of deficiencies observed;

(j) Inform the owner or applicant of the requirement to:

(i) Present a plan of correction to the department within ten working days; and

(ii) Comply within a specified time not to exceed sixty days.

(k) Allow the owner a reasonable period of time, not to exceed sixty days, to correct a deficiency prior to assessing a civil penalty unless:

(i) The deficiency is an immediate threat to life, health, or safety; or

(ii) The owner fails to comply with any of the provisions of WAC 246-336-045 (3)(a), (b), (c), (d), (e), (f), (g), (h), (i), and (j).

(l) Initiate disciplinary action, under RCW 70.127.170 and this chapter, if the owner or applicant fails to comply.

(7) The department may:

(a) Issue a license effective for one year unless the license is suspended or revoked;

(b) Inspect an agency and examine records at any time to determine compliance with chapter 70.127 RCW and this chapter; and

(c) Deny, suspend, modify, or revoke an agency license for failure to comply with chapter 70.127 RCW or this chapter.

(8) When a change of ownership is planned, the owner shall notify the department, in writing, at least thirty days prior to the date of transfer, including:

(a) Full name and address of the current owner and prospective new owner;

(b) Name and address of the agency and new name under which the agency will be operating, if known; and

(c) The date of the proposed change of ownership.

(9) The prospective new owner shall submit a new application for an agency license with the fee at least thirty days prior to the change of ownership.

(10) The agency shall inform the department in writing at the time of opening or closing of the agency or branch offices.

[Statutory Authority: RCW 70.127.120 and 70.127.270. 92-02-018 (Order 224), § 246-336-025, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-025, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040. 90-06-019 (Order 039), § 248-36-025, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-025, filed 6/7/89.]

WAC 246-336-035 License denials—Suspensions—Modifications—Revocations. (1) The department may deny, suspend, modify, or revoke a license or assess civil penalties, or both, against the agency if an applicant, owner, officer, director, or managing employee:

(a) Fails or refuses to comply with the provisions of chapter 70.127 RCW or this chapter;

(b) Continues to operate after the license is revoked or suspended for cause and not subsequently reinstated by the department;

(c) Makes false statement of a material fact in the application for the license or data attached or in any record required by this chapter or matter under investigation by the department;

(d) Refuses to allow representatives of the department to inspect any part of the agency or books, records, or files required by this chapter;

(e) Willfully prevents or interferes with or attempts to impede in any way the work of any representative of the department in the lawful enforcement of chapter 70.127 RCW and this chapter;

(f) Willfully prevents or interferes with any representative of the department in the preservation of evidence of a violation under chapter 70.127 RCW or this chapter;

(g) Fails to pay or make arrangements to pay a civil monetary penalty assessed by the department within ten days after the assessment becomes final, as provided under WAC 246-336-045, Civil fines;

(h) Uses false, fraudulent, or misleading advertising;

(i) Has repeated incidents of personnel performing services beyond those authorized by the agency or law; or

(j) Misrepresents, or is fraudulent in an aspect of, the conduct of the applicant's or owner's business.

(2) If the department finds the public health, safety, or welfare imperatively require emergency action, a license may be summarily suspended pending proceedings for revocation or other action.

[Statutory Authority: RCW 70.127.120, 70.127.270 and 34.05.220. 92-02-018 (Order 224), § 246-336-035, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-035, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040. 90-06-019 (Order 039), § 248-36-035, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-035, filed 6/7/89.]

WAC 246-336-045 Civil fines. (1) Following an on-site review, in-home visit, or audit, the department shall give written notice either in person or by personal service or certified mail, return receipt requested, of any violation under chapter 70.127 RCW or this chapter. The notice shall inform the owner or applicant as appropriate including:

(a) Describing the conditions of noncompliance;

(b) Specifying a reasonable time of compliance not to exceed sixty days;

(c) Explaining the possibility of a violation subjecting the owner or applicant to denial, revocation, modification, or suspension of the license and/or civil fines; and

(d) Explaining the right of the owner or applicant to appeal.

(2) The department may assess civil monetary penalties in addition to or in lieu of denial, suspension, modification, or revocation of a license if the owner fails to comply with a notice of violation.

(3) The department may assess civil monetary penalties not to exceed one thousand dollars per violation in any case when the department finds the owner, applicant, officer,

director, partner, managing employee, or owner of ten percent or more of the applicant's or owner's assets:

(a) Failed or refused to comply with requirements of chapter 70.127 RCW or this chapter;

(b) Continued to operate after the license was revoked or suspended for cause and not subsequently reinstated by the department;

(c) Has knowingly or with reason to know made a false statement of a material fact in the:

(i) Application for the license; or

(ii) Data attached; or

(iii) Record required under chapter 70.127 RCW; or

(iv) Matter under investigation by the department.

(d) Refused to allow representatives of the department to inspect any book, record, file or part of the agency required under this chapter;

(e) Willfully prevented, interfered with, or attempted to impede the work of any representative of the department in the lawful enforcement of a provision under chapter 70.127 RCW and this chapter;

(f) Willfully prevented or interfered with a representative of the department in the preservation of evidence of a violation under chapter 70.127 RCW or this chapter;

(g) Failed to pay or make arrangements to pay any civil monetary penalty assessed by the department under chapter 70.127 RCW within ten days after the assessment became final;

(h) Used false, fraudulent, or misleading advertising;

(i) Has repeated incidents of personnel performing services beyond services authorized by the agency or law; or

(j) Misrepresented or was fraudulent in any aspect of the conduct of the home care business.

(4) Failure to pay or make arrangements to pay civil monetary penalties within ten days from the time the assessment becomes final may result in denial, suspension, modification, or revocation of the license, in addition to the assessment of the penalties or to the assessment of additional penalties.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-045, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040. 90-06-019 (Order 039), § 248-36-045, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-045, filed 6/7/89.]

WAC 246-336-055 License action and/or civil fine—Notice—Adjudicative proceeding. (1) The department's notice of a denial, suspension, modification, or revocation of a license shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(2) The department's notice of imposition of a civil fine shall be consistent with RCW 43.70.095. A person the department imposes a civil fine on has the right to an adjudicative proceeding to contest the decision.

(3) A license applicant or holder or a person the department imposes a civil fine on contesting a department decision shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300

Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved;

(ii) The grounds for contesting the department decision; and

(iii) A copy of the contested department decision.

(4) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.127.120, 70.127.270 and 34.05.220. 92-02-018 (Order 224), § 246-336-055, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-055, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW, RCW 34.05.220 (1)(a) and 70.126.040. 90-06-019 (Order 039), § 248-36-055, filed 2/28/90, effective 3/1/90. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-055, filed 6/7/89.]

WAC 246-336-065 General requirements. (1) The agency shall have a written plan of operation including:

(a) An organizational chart showing ownership and lines of delegation of responsibility to the participant care level;

(b) The services offered, including hours of operation and service availability;

(c) Criteria for participant acceptance, referral, transfer, and termination;

(d) Evidence of direct administrative and supervisory control and responsibility for all services including services provided by branch offices;

(e) An annual budget approved by the governing body; and

(f) Provisions for informing each participant of other community resources if the agency ceases operation.

(2) The agency shall provide services for the participant consistent with the care plan and:

(a) Accept participants only when the agency is capable of providing the specific services or level of care requested by the participant or the participant's authorized representative and appropriate to the participant needs; and

(b) Inform the participant of other services when the home care agency is unable to meet identified needs.

(3) Agency personnel shall communicate in a language or form of communication the participant and family can reasonably be expected to understand. Whenever possible, the agency shall assist in obtaining:

(a) Special devices;

(b) Interpreters; or

(c) Other aids to facilitate communication.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-065, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-065, filed 6/7/89.]

WAC 246-336-077 Participant bill of rights. The agency shall provide each participant and family with a written bill of rights affirming each participant's right to:

(1) Be informed of the services offered by the agency and those being provided;

(2) Refuse services;

(3) Request a change of service;

(4) Participate in development of the care plan;

(5) Receive an explanation of any responsibilities the participant may have in the care process;

(6) Be informed of the name of the person supervising the care and how to contact that person;

(7) Be informed of the process for submitting and addressing complaints to the agency and department;

(8) Receive an explanation of the agency's charges and policy concerning billing and payment for services, including, to the extent possible, insurance coverage and other payment options unless services are reimbursed through a managed care plan;

(9) Receive, upon request, a fully itemized billing statement at least monthly, including the date of each service and the charge unless service is reimbursed through a managed care plan;

(10) Have access to the department's registry of licensed agencies and who to contact in the community for financial resource information;

(11) Upon request, be informed of who owns and controls the agency;

(12) Personnel properly trained to perform assigned tasks;

(13) Coordinated services;

(14) Courteous and respectful treatment, privacy, and freedom from abuse and discrimination;

(15) Confidential management of participant records and information;

(16) Access information in the participant's own record upon request; and

(17) Receive prior notice and an explanation for reasons of termination, referral, transfer, discontinuance of service, or change in the care plan.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-077, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-077, filed 6/7/89.]

WAC 246-336-085 Governing body—Administration. (1) The governing body of the agency shall establish a mechanism to:

(a) Approve a quality assurance plan whereby problems are identified, monitored, and corrected;

(b) Adopt and periodically review written bylaws or an acceptable equivalent;

(c) Approve written policies and procedures related to safe, adequate services and operation of the agency with annual or more frequent review by administrative and supervisory personnel;

(d) Appoint an administrator and approve a plan for an alternate in the administrator's absence;

(e) Oversee the management and fiscal affairs of the agency; and

(f) Approve a method of obtaining regular reports on participant satisfaction.

(2) Each agency shall have an administrator to:

(a) Organize and direct the agency's ongoing functions;

(b) Maintain ongoing liaison between the governing body and the personnel;

(c) Employ qualified personnel and ensure appropriate ongoing education and supervision of personnel and volunteers;

- (d) Ensure the accuracy of public information materials and activities;
- (e) Implement a budgeting and accounting system; and
- (f) Ensure the presence of an alternate administrator to act in the administrator's absence.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-085, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-085, filed 6/7/89.]

WAC 246-336-095 Personnel and volunteers. (1)

The agency shall establish written personnel and volunteer policies including, but not limited to:

- (a) Personnel and volunteer qualifications commensurate with anticipated job responsibilities;
- (b) Employment criteria without regard to sex, race, age, creed, handicap, national origin, or sexual orientation;
- (c) Orientation and in-service training appropriate to each classification of personnel and volunteer and the tasks he or she is expected to perform, including information about safety and emergency procedures;
- (d) Evidence of pre-hire screening; and
- (e) Annual or more frequent performance evaluations including:
 - (i) Knowledge of safety pertinent to job assignment;
 - (ii) Conformance with agency policies and procedures;

and

- (iii) Observation of performance of personnel in the environment appropriate to job expectations.

(2) The agency shall maintain records including:

- (a) Qualifications of personnel and direct participant care volunteers;
- (b) Evidence of current licensure, certification, or registration when applicable to job requirements;
- (c) Documentation of orientation and training required to perform assigned tasks, consistent with this chapter;
- (d) Evidence of review of agency policy and procedures related to reporting any suspected abuse and neglect of children and adults consistent with chapters 26.44 and 74.34 RCW;

(e) Performance evaluations;

(f) Evidence of pre-hire screening prior to working with the agency; and

(g) Evidence of notification of the local health department when personnel are exposed to an infectious case of tuberculosis, as required in subsection (3) of this section.

(3) In the event of personnel or volunteer exposure to an infectious case of tuberculosis, the agency shall supply the names and identifying information to the local health department sufficient for screening to occur.

(4) The agency shall:

(a) Assure observance of appropriate precautions when personnel and volunteers are known to have a communicable disease in an infectious stage; and

(b) Assume responsibility for personnel providing all services included in the care plan.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-095, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-095, filed 6/7/89.]

WAC 246-336-105 AIDS education and training.

Home care agencies shall:

(1) Verify or arrange for appropriate education and training of personnel and volunteers on the prevention, transmission, and treatment of HIV and AIDS consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know-AIDS Education for Health Care Facility Employees*, January 1991, published by the department office on HIV/AIDS.

[Statutory Authority: RCW 70.127.120, 70.127.270 and 70.24.310. 92-02-018 (Order 224), § 246-336-105, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-105, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-105, filed 6/7/89.]

WAC 246-336-115 Participant care policies and procedures. (1) The home care agency shall establish and implement policies and procedures appropriate to the specific services provided and available in writing to all personnel and volunteers, including:

- (a) All tasks carried out in providing services and implementing the care plan;
- (b) Observations to be reported to the supervisor;
- (c) Coping with difficult situations;
- (d) Transporting of participants by licensed insured drivers;

(e) Any special qualifications of persons performing the services;

(f) Infection control principles and practices;

(g) Emergency procedures, participant safety, and death;

(h) Safe handling and use of supplies, equipment, and toxic or hazardous substances;

(i) Safe handling and preparation of food products;

(j) Abuse and neglect consistent with chapters 26.44 and 74.34 RCW;

(k) Coordination of inter- and intra-agency services;

(l) Participant records; and

(m) Restriction on personnel assisting with participant-owned medications only as provided in the care plan and restricted to:

(i) Reminding the participant of when it is time to take a prescribed medication;

(ii) Handing the medication container to the participant;

(iii) Opening the medication container; and

(iv) Assistance with application of skin, nose, eye, and ear preparations according to label when a participant is mentally oriented and able to supervise application.

(n) Limitations regarding handling of participant-owned money and property.

(2) Agencies shall review participant care policies and procedures annually and revise as necessary.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-115, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-115, filed 6/7/89.]

WAC 246-336-125 Supervision and coordination of services. The agency shall employ a supervisor responsible for:

(1) Assessment of participant/family needs except under managed care plans;

(2) Development of care plan, except under managed care plans;

- (3) Implementing the care plan;
- (4) Referral to other community resources;
- (5) Explaining resources the participant may access;
- (6) Performance evaluations as indicated under WAC 246-336-095, Personnel and volunteers;
- (7) Regular monitoring of effectiveness of the care plan, including:
 - (a) The participant's satisfaction with care received;
 - (b) Participant's health and safety;
 - (c) Periodic contact with participant to re-assess effectiveness and appropriateness of home care plan of care;
 - (d) Participating in development and review of agency policies for coordination; and
 - (e) Coordination or arrangement of home care services.

[Statutory Authority: RCW 70.127.120 and 70.127.270. 92-02-018 (Order 224), § 246-336-125, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-125, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-125, filed 6/7/89.]

WAC 246-336-135 Home care plan of care. Agencies shall:

- (1) Ensure personnel follow an approved written care plan;
- (2) Include all services to be provided in the care plan; and
- (3) Ensure review and revision of care plan, as necessary:
 - (a) Whenever reports by the participant, family, or caregiver indicate substantial change in services needed;
 - (b) Based upon assessment by the supervisor, unless done through a managed care plan; and
 - (c) At least every six months for personal care services.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-135, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-135, filed 6/7/89.]

WAC 246-336-165 Records and documentation of participant care. (1) The home care agency shall maintain records which are orderly, intact, and:

- (a) Legibly written in ink suitable for photocopying;
- (b) In an agency-approved format;
- (c) Written in a legally acceptable manner;
- (d) Considered as property of the home care agency;
- (e) Include observations about the participant's physical condition;
- (f) Available and retrievable either in the agency or by electronic means during business hours; and
- (g) Stored following discontinuance from service in a manner which:
 - (i) Prevents loss or manipulation of information;
 - (ii) Protects the record from damage; and
 - (iii) Prevents access by unauthorized persons.
- (2) Records shall include:
 - (a) Appropriate participant identifying information;
 - (b) Appropriate service consent and agreement, including payment source;
 - (c) Pertinent past and current information, including:
 - (i) Documentation of a participant assessment by a supervisor on acceptance and when conditions change extensively;

- (ii) Notation of all services provided and recorded in the record or in another file maintained by the agency; and
- (iii) Documentation of significant observations.
- (d) Care plan; and
- (e) Termination statement.

(3) Agencies shall ensure documentation, including:

- (a) Recording of the service on the day it is provided;
- (b) Immediate incorporation of reports of unusual events or incidents with date, time, and signature or valid initials of the recorder; and

(c) Entries incorporated within a month from the day service is rendered if the record is maintained in the agency.

(4) Agencies shall maintain, retain, and preserve records:

(a) For adults, a period of no less than five years following the date of discontinuation of service; and

(b) For minors, a period of no less than three years following attainment of eighteen years of age or five years following discontinuance of agency services, whichever is longer.

(5) Agencies shall establish policies and procedures specific to retention and disposition of records, including:

(a) Arrangements for preservation of participant records if the agency discontinues operation with a plan approved by the department; and

(b) A method of disposal of records assuring prevention of retrieval and subsequent use of information.

(6) Agencies shall safeguard recorded participant information against loss or unauthorized use, including:

(a) Adherence to written procedures governing use and removal of records and conditions for release of information; and

(b) Requirement for prior written consent of the participant for release of information unless authorized by law.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-336-165, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.126.040. 89-12-077 (Order 2790), § 248-36-165, filed 6/7/89.]

WAC 246-336-990 Fees. (1) Home care agencies licensed under chapter 70.127 RCW shall submit an annual license fee as follows:

(a) Agencies with fifty or more employees, one thousand twenty-five dollars;

(b) Agencies with less than fifty but more than fifteen employees, eight hundred twenty-five dollars; and

(c) Agencies with fifteen or less employees, six hundred sixty dollars.

(2) An agency applying for additional home health, hospice, or home care licenses shall receive a fee reduction of two hundred fifty dollars for each additional license in accordance with the provisions of RCW 70.127.110.

[Statutory Authority: RCW 43.70.250. 92-15-084 (Order 288), § 246-336-990, filed 7/16/92, effective 8/16/92. Statutory Authority: RCW 43.70.040. 91-02-050 (Order 122), § 246-336-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-338 WAC
MEDICAL TEST SITE RULES

WAC

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WAC 246-338-001 Purpose. The purpose of this chapter is to implement chapter 70.42 RCW, by establishing minimum licensing standards for medical test sites, consistent with federal law and regulation, related to quality control, quality assurance, recordkeeping, personnel requirements, proficiency testing, and licensure waivers.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-001, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-001, filed 9/21/90, effective 10/22/90.]

WAC 246-338-010 Definitions. For the purpose of chapter 70.42 RCW and this chapter, the following words and phrases have these meanings unless the context clearly indicates otherwise.

(1) "Accreditation body" means a public or private organization or agency which accredits, certifies, or licenses medical test sites, by establishing and monitoring standards judged by the department to be consistent with federal law and regulation, and this chapter.

(2) "Authorized person" means any individual allowed by Washington state law or rule to order tests or receive test results.

(3) "Case" means any slide or group of slides, from one patient specimen source, submitted to a medical test site, at one time, for the purpose of cytological or histological examination.

(4) "Certificate of waiver" means a medical test site performing one or more of the tests listed under WAC 246-338-030(10), and no other tests.

(5) "Days" means calendar days.

(6) "Department" means the department of health.

(7) "Designated specialty test site supervisor" means an available individual, designated in writing by the owner of the medical test site, meeting the qualifications and performing the duties of a designated test site supervisor, as described in this chapter for an assigned specialty or subspecialty.

(8) "Designated test site supervisor" means the available individual responsible for the technical functions of the medical test site and meeting the department qualifications under this chapter.

(9) "Disciplinary action" means license or certificate of waiver denial, suspension, condition, revocation, civil fine, or any combination of the preceding actions, taken by the department against a medical test site.

(10) "Facility" means one or more locations where tests are performed, within one campus or complex, under one owner.

(11) "Federal law and regulation" means Public Law 100-578, Clinical Laboratory Improvement Amendments of 1988, Public Health Service Act, and regulations implementing the federal amendments.

(12) "Forensic" means investigative testing in which the results are never used for health care or treatment, or referral to health care or treatment, of the individual.

(13) "May" means permissive or discretionary on the part of the department.

(14) "Medical test site" or "test site" means any facility or site, public or private, which analyzes materials derived from the human body for the purposes of health care, treatment, or screening. A medical test site does not mean:

(a) A facility or site, including a residence, where a test approved for home use by the Federal Food and Drug Administration is used by an individual to test himself or herself without direct supervision or guidance by another and where this test is not part of a commercial transaction; or

(b) A facility or site performing tests solely for forensic purposes.

(15) "Owner" means the person, corporation, or entity legally responsible for the business requiring licensure or a certificate of waiver as a medical test site under chapter 70.42 RCW.

(16) "Person" means any individual, public organization, private organization, agent, agency, corporation, firm, association, partnership, or business.

(17) "Principle health care provider" means the attending physician or other health care provider recognized as primarily responsible for diagnosis and treatment of a patient or, in the absence of such, the health care provider initiating diagnosis, testing or therapy for a patient.

(18) "Provisional license" or "provisional certificate of waiver" means an interim approval issued by the department to the owner of a medical test site.

(19) "Recordkeeping" means books, files, or records necessary to show compliance with the quality control and quality assurance requirements under this chapter.

(20) "Shall" means compliance is mandatory.

(21) "Site" or "mobile site" means one or more locations where tests are performed, under one owner, changing or extending location to perform tests on a regular or intermittent basis.

(22) "Specialty" means a group of similar subspecialties or tests. The specialties for a medical test site are as follows:

- (a) Chemistry;
- (b) Cytogenetics;
- (c) Diagnostic immunology;
- (d) Immunohematology;
- (e) Hematology;
- (f) Histocompatibility;
- (g) Microbiology;
- (h) Pathology; and
- (i) Radiobioassay.

(23) "Subspecialty" means a group of similar tests. The subspecialties of a specialty for a medical test site are as follows, for:

(a) Chemistry, the subspecialties are routine chemistry, endocrinology, toxicology, and other chemistry;

(b) Diagnostic immunology, the subspecialties are syphilis serology, general immunology, HIV, and alpha fetoprotein;

(c) Immunohematology, the subspecialties are blood group and Rh typing, antibody identification, crossmatching, transfusion services and blood banking, and other immunohematology;

(d) Hematology, the subspecialties are routine hematology, coagulation, and other hematology;

(e) Microbiology, the subspecialties are bacteriology, mycology, parasitology, virology, and mycobacteriology; and

(f) Pathology, the subspecialties are histopathology, diagnostic cytology, and oral pathology.

(24) "Supervision" means authoritative procedural guidance by a qualified individual, assuming the responsibility for the accomplishment of a function or activity by technical personnel.

(25) "Technical personnel" means individuals employed to perform any test or part of a test.

(26) "Test" means any examination or procedure conducted on a sample taken from the human body, including screening.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-010, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-010, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-010, filed 9/21/90, effective 10/22/90.]

WAC 246-338-020 Licensure of the medical test sites. (1) After July 1, 1990, no person shall advertise, operate, manage, own, conduct, open, or maintain a medical test site without first obtaining from the department, a license or a certificate of waiver as described under chapter 70.42 RCW and this chapter.

(2) Applicants requesting a medical test site license or renewal shall:

(a) Submit a completed application and fee to the department on forms furnished by the department, including signature of the owner; and

(b) Furnish full and complete information to the department in writing, as required for proper administration of rules implementing chapter 70.42 RCW including:

(i) Name, address, and phone number of the medical test site;

(ii) Name, address, and phone number of the owner of the medical test site;

(iii) Number and types of tests performed, planned, or projected;

(iv) Names and qualifications including educational background, training, and experience of the designated test site supervisor, and any designated specialty test site supervisor;

(v) Names and qualifications including educational background, training, and experience of technical personnel, if requested by the department, in order to determine consistency with federal law and regulation;

(vi) Name and type of proficiency testing program or programs used by the medical test site;

(vii) Other information as required to implement chapter 70.42 RCW; and

(viii) Methodologies for tests performed, when the department determines the information is necessary, consistent with federal law and regulation.

(3) The department shall also issue a license for a medical test site if the medical test site:

(a) Is accredited, certified, or licensed by an accreditation body under WAC 246-338-040; and

(b) Submits the following to the department for department approval:

(i) Information defined under subsection (2)(a) and (b) of this section; and

(ii) Proof of accreditation, certification, or licensure by an accreditation body including a copy of the most recent:

(A) On-site inspection results;

(B) Statement of deficiencies;

(C) Plan of correction for the deficiencies cited; and

(D) Any disciplinary action and results of any disciplinary action taken by the accreditation body against the medical test site; or

(iii) Authorization for an accreditation body to submit to the department such records or other information about the medical test site required for the department to determine whether or not standards are consistent with chapter 70.42 RCW and this chapter.

(4) The owner or applicant shall submit an application and fee to the department thirty days prior to the expiration date of the current license.

(5) The department shall:

(a) Issue or renew a license for the medical test site, valid for two years, when the applicant or owner meets the requirements of chapter 70.42 RCW and this chapter, subject to subsection (6) of this section;

(b) Terminate a provisional license, at the time a two-year license for the medical test site is issued;

(c) Establish fees to be paid under WAC 246-338-990;

(d) Prohibit transfer or reassignment of a license without thirty days prior written notice to the department and the department's approval;

(e) Examine records of the medical test site, if the department believes a person is conducting tests without an appropriate license;

(f) Give written notice of any violations to the medical test site, including a statement of deficiencies observed and requirements to:

(i) Present a written plan of correction to the department within fourteen days following the date of postmark; and

(ii) Comply within a specified time, not to exceed sixty days, after department approval of a written plan of correction;

(g) Allow the owner a reasonable period of time, not to exceed sixty days, to correct a deficiency unless the deficiency is an immediate threat to life, health, or safety.

(6) The department may:

(a) Issue, to a medical test site applying for licensure for the first time a provisional license valid for a period of time not to exceed two years from date of issue;

(b) Conduct on-site review of a medical test site at any time to determine compliance with chapter 70.42 RCW and this chapter; and

(c) Initiate disciplinary action, as described under chapter 70.42 RCW and this chapter, if the owner or applicant fails to comply with chapter 70.42 RCW and this

chapter, consistent with chapter 34.05 RCW, Administrative Procedure Act.

(7) The owner shall notify the department, in writing, at least thirty days prior to the date of a proposed change of ownership and provide the following information:

(a) Full name, address, and location of the current owner and prospective new owner, if known;

(b) Name and address of the medical test site and the new name of the medical test site, if known;

(c) Changes in technical personnel and supervisors, if known; and

(d) The date of the proposed change of ownership.

(8) The prospective new owner shall submit the information required under subsection (2)(a) and (b) of this section, at least thirty days prior to the change of ownership.

(9) The owner shall inform the department, in writing, of:

(a) The date of opening or closing the medical test site; and

(b) Any change in the information related to license application, excluding tests which would not affect category change, within thirty days after the change, unless specifically stated otherwise under chapter 70.42 RCW or this chapter.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-020, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-020, filed 9/21/90, effective 10/22/90.]

WAC 246-338-030 Waiver from licensure of medical test sites. (1) The department shall grant a certificate of waiver to a medical test site performing only the tests listed under this section.

(2) Applicants requesting a certificate of waiver or renewal shall:

(a) Submit a completed application and fee for initial certificate of waiver or renewal to the department on forms furnished by the department, including signature of the owner; and

(b) Furnish full and complete information to the department in writing, as required for proper administration of rules to implement chapter 70.42 RCW including:

(i) Name, address, and phone number of the medical test site;

(ii) Name, address, and phone number of the owner of the medical test site;

(iii) Number and types of tests performed, planned or projected;

(iv) Names and qualifications including educational background, training and experience of the designated test site supervisor;

(v) Names and qualifications including educational background, training, and experience of technical personnel, if requested by the department, in order to determine consistency with federal law and regulation;

(vi) Other information as required to implement chapter 70.42 RCW; and

(vii) Methodologies for tests performed, when the department determines the information is necessary consistent with federal law and regulation.

(3) The owner or applicant shall submit an application and fee to the department thirty days prior to the expiration date of the current certificate of waiver.

(4) The department shall:

(a) Grant a certificate of waiver or renewal of a certificate of waiver for the medical test site valid for two years when the applicant or owner meets the requirements of chapter 70.42 RCW and this chapter, subject to subsection (5) of this section;

(b) Terminate a provisional certificate of waiver at the time a two-year certificate of waiver for the medical test site is issued;

(c) Establish fees to be paid under WAC 246-338-990; and

(d) Prohibit transfer or reassignment of a certificate of waiver without thirty days prior written notice to the department and the department's approval.

(5) If the department has reason to believe a waived site is conducting tests requiring a license, the department shall:

(a) Conduct on-site reviews of the medical test site;

(b) Examine records of the medical test site;

(c) Give written notice of any violations to the medical test site, including a statement of deficiencies observed and requirements to:

(i) Present a written plan of correction to the department within fourteen days following the date of postmark; and

(ii) Comply within a specified time not to exceed sixty days after department approval of a written plan of correction;

(d) Allow the owner a reasonable period of time, not to exceed sixty days, to correct a deficiency unless the deficiency is an immediate threat to life, health, or safety.

(6) The department may:

(a) Grant a provisional certificate of waiver to a medical test site, applying for a certificate of waiver for the first time, valid for a period of time not to exceed two years from date of issue;

(b) Conduct on-site review of a medical test site at any time to determine compliance with chapter 70.42 RCW and this chapter; and

(c) Initiate disciplinary action, as described under chapter 70.42 RCW and this chapter, if the owner or applicant fails to comply with chapter 70.42 RCW and this chapter, consistent with chapter 34.05 RCW, Administrative Procedure Act.

(7) The owner shall notify the department, in writing, at least thirty days prior to the date of a proposed change of ownership and provide the following information:

(a) Full name, address, and location of the current owner and prospective new owner, if known;

(b) Name and address of the medical test site and the new name of the medical test site, if known;

(c) Changes in technical personnel and supervisors, if known; and

(d) The date of the proposed change of ownership.

(8) The prospective new owner shall submit the information required under subsection (2)(a) and (b) of this section, at least thirty days prior to the change of ownership.

(9) The owner shall inform the department, in writing of:

(a) The date of opening or closing the medical test site; and

(b) Any change in the information related to certificate of waiver application, excluding tests which would not effect category change or licensure, within thirty days after the change, unless specifically stated otherwise under chapter 70.42 RCW and this chapter.

(10) The department shall grant a certificate of waiver if the medical test site performs only the tests listed in this section and no other tests unless specifically disallowed or allowed under federal law and regulation:

(a) Microscopic examination:

(i) For pinworms by adhesive method;

(ii) Of urine sediment;

(iii) Of wet mounts;

(iv) Of potassium hydroxide (KOH) preparations;

(v) For fern tests;

(vi) Of gram stains, limited to discharges and exudates;

(vii) Of nasal smears by Hansel or Wright-Giemsa stain;

(b) Any microscopic examination by an individual meeting the qualifications of a designated test site supervisor, only when the same individual diagnoses and treats his or her own patients;

(c) Examination of urine by reagent strip or tablet methods;

(d) Urine specific gravity;

(e) Examination of whole blood, limited to whole blood glucose, by visual reading of reagent strip, tablet method or using instrumentation approved for home use by the Federal Food and Drug Administration;

(f) Group A strep screen by direct antigen test;

(g) Qualitative serum and urine pregnancy test kits, excluding instrumentation methods;

(h) Micro hematocrit, spun hematocrit;

(i) Erythrocyte sedimentation rate;

(j) Qualitative examination of stool specimens for occult blood;

(k) Primary inoculation of bacteriological or mycological media for visual reading of a color reaction only for presence or absence of growth, not including identification and susceptibility testing;

(l) Semen analysis;

(m) Screening tests for Sickle cell, other than electrophoresis methods;

(n) Ovulation test using visual color test for human luteinizing hormone;

(o) Whole blood clotting time;

(p) Antistreptolysin O (ASO) screen by slide agglutination test or equivalent;

(q) C reactive protein (CRP) screen by slide agglutination test or equivalent;

(r) Rheumatoid factor screen by slide agglutination test or equivalent;

(s) Infectious mononucleosis screen by slide agglutination test or equivalent; and

(t) Culture for colony counts for urinary tract infections, not including identification and susceptibility testing.

(11) The department may make additions or deletions to the list of waived tests under subsection (10) of this section, by rule, when requests are received:

(a) In compliance with the department's established protocol, available upon request from the department; and

(b) On or before each May 31.

(12) Requests for additions or deletions to the list of waived tests shall include:

(a) Evidence that the test meets the criteria in subsection (13) (a), (b), or (c) of this section; and

(b) A written agreement to pay the department a fee based on the cost of direct staff time, as defined in WAC 246-338-990 (1)(h)(iii).

(13) The department shall use the following criteria when determining additional waived tests not listed under subsection (10) of this section, which are determined to have insignificant risk of an erroneous result, including those which:

(a) Pose no reasonable risk of harm to the patient if performed incorrectly;

(b) Are approved by the Federal Food and Drug Administration for home use; or

(c) Are so simple and accurate as to render the likelihood of erroneous result negligible, and judged by the department to require three or less of the following functions:

(i) Calculation;

(ii) Specimen or reagent preparation;

(iii) Six or more steps in the test procedure;

(iv) Calibrated or volumetric measurement;

(v) Independent judgment other than a single observation and recording of results;

(vi) External calibration;

(vii) External quality control; and

(viii) Equipment maintenance.

(14) If the medical test site performs tests not included under subsection (10) of this section, the owner shall apply for licensure as defined under chapter 70.42 RCW and this chapter.

[Statutory Authority: Chapter 70.42 RCW, 91-21-062 (Order 205), § 246-338-030, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-338-030, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW, 90-20-017 (Order 090), § 248-38-030, filed 9/21/90, effective 10/22/90.]

WAC 246-338-040 Approval of accreditation bodies. (1) The department recognizes the following accreditation bodies under RCW 70.42.040:

(a) United States Department of Health and Human Services, Health Care Financing Administration (HCFA);

(b) National Institute on Drug Abuse (NIDA);

(c) United States Food and Drug Administration (FDA), limited to the manufacture of blood and blood products;

(d) College of American Pathologists (CAP);

(e) Joint Commission on Accreditation of Healthcare Organizations (JCAHO); and

(f) Commission on Office Laboratory Accreditation (COLA).

(2) If the owner or applicant of a medical test site requests the department to consider accreditation bodies not currently approved by the department under this section, the owner or applicant shall:

(a) Apply for acceptance of a specified accreditation body for a medical test site with the department;

(b) Require the accreditation body to submit to the department a copy of the rules, regulations, and standards used by the accreditation body;

(c) Agree to and request on-site inspections of the medical test site by the accrediting body, at a frequency similar to department inspections of medical test sites; and

(d) Agree to submit to the department within thirty days of application for licensure or renewal of licensure, information required under WAC 246-338-020 (3)(b)(i) through (iii).

(3) The department shall:

(a) Require the accreditation body to demonstrate to the department the use of accreditation, certification, or licensure standards consistent with federal law and regulations, and this chapter;

(b) Require department-approved accreditation bodies to submit changes in standards to the department at least thirty days before changes are effective;

(c) Review accreditation standards of bodies approved under subsection (1) of this section when changes are made in standards;

(d) Require the accreditation body to demonstrate to the department the use of on-site inspectors with qualifications meeting or exceeding the requirements as follows:

(i) Qualifies as a designated test site supervisor or specialty test site supervisor as defined under chapter 70.42 RCW and this chapter; or

(ii) Qualifies with any of the requirements in 42 CFR 493.1427;

(e) Require the accreditation bodies to agree in writing to allow the department to have jurisdiction to investigate complaints, do random on-site inspections and take disciplinary action against a medical test site if indicated.

(4) The department may deny or terminate the license for a medical test site, if the owner or applicant fails to authorize the accreditation body to notify the department of the test site's compliance with the standards of the accreditation body.

(5) The department shall notify the medical test site if an accreditation body loses department acceptance of approval as an accreditation body for the medical test site.

(6) The owner or applicant of a medical test site shall reapply for licensure within thirty days, if the acceptance of approval of the accreditation body for the medical test site is denied or terminated.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-040, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-040, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-040, filed 9/21/90, effective 10/22/90.]

WAC 246-338-050 Proficiency testing. (1) Except where there is no available proficiency test, each licensed medical test site shall demonstrate satisfactory participation in a department-approved proficiency testing program appropriate for the test or tests performed on-site, excluding waived tests as listed under WAC 246-338-030(10).

(2) The department, upon request, shall furnish a list of the approved proficiency testing programs under RCW 70.42.050.

(3) The department may approve the owner or applicant's use of a specific proficiency testing program when the program:

(a) Assures the quality of test samples;

(b) Appropriately evaluates the testing results;

(c) Identifies performance problems in a timely manner;

(d) Has the technical ability required to prepare and distribute samples;

(e) Uses methods assuring samples mimic actual patient specimens when possible and where applicable;

(f) Uses homogenous samples if applicable;

(g) Maintains stability of samples within the time frame specified in written instructions for analysis by proficiency testing participants;

(h) Provides necessary documentation to establish requirements under this section;

(i) Uses an appropriate process for determining the correct answer for each sample; and

(j) Uses at least two samples per test each quarter if applicable.

(4) The medical test site shall:

(a) Assure testing of proficiency testing samples in a similar manner as patient specimens are tested, unless otherwise specifically requested by the proficiency testing program;

(b) Assure testing of proficiency testing samples on-site by the technical personnel performing examinations on patient specimens;

(c) Maintain documentation of the:

(i) Test methodology;

(ii) Identification of technical personnel performing the tests; and

(iii) Reporting of results of the proficiency testing samples; and

(d) Request that the proficiency testing program provide a copy of the graded proficiency testing results to the department.

(5) The department shall evaluate proficiency testing results by using the following grading criteria:

(a) An evaluation of scores for the last four shipments of proficiency testing samples including:

(i) Tests;

(ii) Subspecialties; and

(iii) Specialties;

(b) Maintenance of a minimum acceptable score for satisfactory participation as follows:

(i) Seventy-five percent for all tests, subspecialties, and specialties except for human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) and immunohematology; and

(ii) One hundred percent for all tests, subspecialties, and specialties for HIV/AIDS and immunohematology;

(c) A grade of marginal performance occurs when:

(i) An unsatisfactory score is obtained on any single test in a shipment for immunohematology or HIV/AIDS; or

(ii) For all other tests, subspecialties, or specialties if:

(A) Unsatisfactory scores are obtained in any specialty or subspecialty on two of any three successive shipments; or

(B) An unsatisfactory score is obtained on a single test on two of any three successive shipments;

(d) A grade of unsatisfactory performance occurs when unsatisfactory shipment scores are obtained on a single test or in a specialty or subspecialty on three of any four successive shipments.

(6) For marginal performance on proficiency testing samples the following department and medical test site actions shall occur:

(a) The department shall mail a cautionary letter to the designated test site supervisor; and
 (b) The medical test site shall:

(i) Determine the cause of the marginal proficiency testing performance; and
 (ii) Keep records at the medical test site showing what action was taken to correct the problem.

(7) In addition the department may require the owner of the medical test site demonstrating marginal performance in any identified test, subspecialty or specialty, to:

(a) Submit a plan of correction to the department within fifteen days from receipt of notice; and

(b) Provide or ensure:

(i) Additional training of personnel;
 (ii) Necessary technical assistance to meet the requirements of the proficiency testing program and the department;
 (iii) Participation in a program of additional proficiency testing, if available; or

(iv) Any combination of training, technical assistance, or testing described under (b)(i), (ii), and (iii) of this subsection.

(8) For unsatisfactory performance on proficiency testing samples the department shall send to the owner and designated test site supervisor by certified mail:

(a) A letter identifying the particular problem;

(b) Acknowledgement of previous contacts; and

(c) A notice to the medical test site to cease performing the identified test, subspecialty, or specialty.

(9) The owner shall notify the department within fifteen days of the receipt of the notice of the decision to voluntarily stop performing tests on patient specimens for the identified test, subspecialty, or specialty.

(10) The owner may petition the department for reinstatement of approval to perform tests on patient specimens after demonstrating satisfactory performance on two successive shipments of proficiency testing samples for the identified test, subspecialty, or specialty.

(11) The department shall notify the owner in writing, within fifteen days of receipt of petition, of the decision related to the request for reinstatement.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-050, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-050, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-050, filed 9/21/90, effective 10/22/90.]

WAC 246-338-060 Personnel. (1) Owners shall ensure medical test sites have:

(a) A designated test site supervisor responsible for:

(i) The overall technical supervision and management of the test site personnel; and

(ii) Performing and reporting of testing procedures;

(b) Technical personnel, competent to perform tests and report test results.

(2) Owners of medical test sites shall:

(a) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(b) Use infection control standards and educational material consistent with the approved curriculum manual

"Know - HIV/AIDS prevention education for health care facility employees," January 1991, published by the department office on HIV/AIDS.

(3) Designated test site supervisors shall:

(a) Establish and approve policies for:

(i) Performing, recording, and reporting of tests;

(ii) Maintaining an ongoing quality assurance program;

(iii) Supervision of testing; and

(iv) Compliance with chapter 70.42 RCW and this chapter;

(b) Evaluate, verify, and document the following related to technical personnel:

(i) Education, experience, and training in test performance and reporting tests results;

(ii) Sufficient numbers to cover the scope and complexity of the services provided;

(iii) Access to training appropriate for the type and complexity of the test site services offered; and

(iv) Maintenance of competency to perform test procedures and report test results;

(c) Be present, on call, or delegate the duties of the designated test site supervisor to a designated specialty test site supervisor or an on-site technical person during testing.

(4) The designated test site supervisor shall meet one or more of the following qualifications:

(a) A licensed professional under chapter 18.71 RCW Physicians; chapter 18.57 RCW, Osteopathy—Osteopathic medicine and surgery;

(b) A licensed professional under chapter 18.32 RCW, Dentistry; chapter 18.22 RCW, Podiatry; chapter 18.36A RCW, Naturopathy; chapter 18.50 RCW, Midwifery; and advanced registered nurse practitioner, recognized under chapter 18.88 RCW, Registered Nurses, when they are functioning as the principle health care provider, limited to the tests performed on patients within the legal scope of their practice; or

(c) Individuals meeting the requirements consistent with 42 CFR 493.1415 (b)(1-5).

(5) The designated test site supervisor or designated specialty test site supervisor shall meet the appropriate requirements under 42 CFR 493.1421 if the medical test site performs tests in any of the following specialties or subspecialties:

(a) Cytology;

(b) Histopathology, excluding dermatopathology;

(c) Oral pathology;

(d) Histocompatibility;

(e) Cytogenetics; or

(f) Transfusion services and blood banking.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-060, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-060, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-060, filed 9/21/90, effective 10/22/90.]

WAC 246-338-070 Recordkeeping. The medical test site shall:

(1) Unless specified otherwise in subsection (2)(a), (b), and (c) of this section, maintain documentation for two years of:

(a) Test requisitions or equivalent;

(b) Test reports;

- (c) Quality control; and
- (d) Quality assurance.
- (2) Maintain documentation of:
 - (a) The items listed in subsection (1)(a), (b), (c), and (d) of this section for transfusion services and blood banking for five years;
 - (b) Abnormal cytology and all histology reports for ten years; and
 - (c) Normal cytology reports for three years.
- (3) Request the following written information to accompany a test requisition:
 - (a) Patient's name or other method of specimen identification;
 - (b) Name or other suitable identifier of the authorized person ordering the test;
 - (c) Date of specimen collection, and time if appropriate;
 - (d) Source of specimen, if appropriate;
 - (e) Type of test ordered;
 - (f) Sex and age of the patient, if appropriate; and
 - (g) For cytology and histology specimens:
 - (i) Pertinent clinical information; and
 - (ii) For pap smears:
 - (A) The last menstrual period; and
 - (B) Indication whether the patient has history of cervical cancer or its precursors.
 - (4) Assure specimen records include:
 - (a) A medical test site identification;
 - (b) The patient's name or other method of specimen identification;
 - (c) The date the specimen was received at the medical test site, and time if appropriate; and
 - (d) The reason for specimen rejection or limitation.
 - (5) Assure that test reports:
 - (a) Are maintained in a manner permitting identification and reasonable accessibility;
 - (b) Are released only to authorized persons or designees;
 - (c) Include the name of the medical test site, or where applicable, the name and address of each medical test site performing each test;
 - (d) Include the date reported; and
 - (e) Include the time reported, if appropriate.
 - (6) Assure cytology reports:
 - (a) Distinguish between unsatisfactory specimen and negative results; and
 - (b) Contain narrative descriptions for any abnormal results, such as the Bethesda system of terminology as published in the Journal of the American Medical Association, 1989, Volume 262, pages 931-934, for any abnormal results.
 - (7) Establish and make available reference ranges for use by authorized persons ordering or utilizing the test results.
 - (8) Issue corrected reports when indicated.
 - (9) Maintain appropriate documentation of:
 - (a) Temperature-controlled spaces and equipment;
 - (b) Preventive maintenance activities;
 - (c) Equipment function checks;
 - (d) Procedure calibrations;
 - (e) Validation, precision, and accuracy checks;
 - (f) Expiration date, lot numbers, and other pertinent information for:

- (i) Reagents;
- (ii) Solutions;
- (iii) Culture media;
- (iv) Controls, as defined in WAC 246-338-090;
- (v) Calibrators, as defined in WAC 246-338-090;
- (vi) Standards, as defined in WAC 246-338-090;
- (vii) Reference materials, as defined in WAC 246-338-090; and
- (viii) Other testing materials;
- (g) Testing of quality control samples; and
- (h) Any remedial action taken in response to quality control, quality assurance, personnel, and proficiency testing.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-070, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-070, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-070, filed 9/21/90, effective 10/22/90.]

WAC 246-338-080 Quality assurance. (1) The medical test site shall establish and implement a written quality assurance plan, including policies and procedures, designed to:

- (a) Monitor, evaluate, and review quality control, proficiency testing data, and test results;
- (b) Identify and correct problems;
- (c) Establish and maintain accurate, reliable, and prompt reporting of test results;
- (d) Verify all tests performed and reported by the medical test site conform to specified performance criteria in quality control under WAC 246-338-090; and
- (e) Establish and maintain the adequacy and competency of the technical personnel.
- (2) The quality assurance plan shall include mechanisms or systems to:
 - (a) Establish and apply criteria for specimen acceptance and rejection;
 - (b) Notify the appropriate individuals as soon as possible when test results indicate potential life-threatening conditions;
 - (c) Assess problems identified during quality assurance reviews and discuss them with the appropriate staff;
 - (d) Evaluate all test reporting systems to verify accurate and reliable reporting, transmittal, storage, and retrieval of data;
 - (e) Document all corrective actions taken to:
 - (i) Identify problems or potential problems; and
 - (ii) Implement corrective actions; and
 - (f) Make available appropriate instructions for specimen collection, handling, preservation, and transportation.
- (3) The owner shall maintain adequate space, facilities, and essential utilities for the performance and reporting of tests.
- (4) The medical test site shall establish policies and procedures for infectious and hazardous medical wastes consistent with local, state, and federal authorities.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-080, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-080, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-080, filed 9/21/90, effective 10/22/90.]

WAC 246-338-090 Quality control. (1) For the purpose of this section, the following words and phrases have the following meanings, unless the context clearly indicates another meaning:

(a) "ABO, A, A₁, B, O, anti-A, anti-B, anti-D, anti Rh₀, Rh₀ (D), HLA, HLA-A, B, and DR" means taxonomy classifications for blood groups, types, cells, sera, or antisera;

(b) "Calibrator" means a material, solution, or lyophilized preparation designed to be used in calibration. The values or concentrations of the analytes of interest in the calibration material are known within limits ascertained during its preparation or before use;

(c) "Control" means a material, solution, lyophilized preparation, or pool of collected serum designed to be used in the process of quality control. The concentrations of the analytes of interest in the control material are known within limits ascertained during its preparation or before routine use;

(d) "Control slide" means a preparation fixed on a glass slide used in the process of quality control;

(e) "Reference material" means a material or substance, calibrator, control or standard where one or more properties are sufficiently well established for use in calibrating a process or for use in quality control;

(f) "Standard" means a reference material of fixed and known chemical composition capable of being prepared in essentially pure form, or any certified reference material generally accepted or officially recognized as the unique standard for the assay regardless of level or purity of the analyte content.

(2) The medical test site shall use quality control procedures providing and assuring accurate and reliable test results and reports, meeting the requirements of this chapter.

(3) The medical test site shall have written procedures and policies available in the work area including:

- (a) Analytical methods used by the technical personnel;
- (b) Specimen processing procedures;
- (c) Preparation of solutions, reagents, and stains;
- (d) Calibration procedures;
- (e) Proper maintenance of equipment;
- (f) Quality assurance policies;
- (g) Quality control procedures;
- (h) Corrective actions when quality control results deviate from expected values or patterns;
- (i) Procedures for reporting test results;
- (j) Limitations of methodologies; and
- (k) Alternative or backup methods for performing tests including the use of a reference facility if applicable.

(4) The medical test site shall perform quality control complying with the requirements of this section for each specialty and subspecialty as follows:

- (a) At least as frequently as specified in this section;
- (b) More frequently if recommended by the manufacturer of the instrument or test procedure;
- (c) More frequently if specified by the medical test site;

or

(d) Less frequently only when the medical test site documents satisfactory performance and receives prior approval from the department.

(5) The medical test site shall:

- (a) Perform procedural calibration or recalibration, if applicable, to instrument or method used, when:

(i) A new lot number of reagents for a procedure is introduced;

(ii) There is major preventive maintenance or replacement of critical parts of equipment or instrumentation;

(iii) Controls begin to reflect an unusual trend or are outside acceptable range limits;

(iv) Recommended by the manufacturer; or

(v) Specified by the medical test site's established schedule;

(b) If patient values are above the maximum or below the minimum calibration point or the linear range:

(i) Report the patient results as greater than the upper limit or less than the lower limit or an equivalent designation; or

(ii) Use an appropriate procedure to rerun the sample allowing results to fall within the established linear range;

(c) For quantitative tests:

(i) Include two reference materials of different concentrations each day of testing unknown samples, if these reference materials are available; or

(ii) Have an equivalent mechanism to assure the quality, accuracy, and precision of the test, if reference materials are not available;

(d) For qualitative tests, include positive and negative reference material each day of testing unknown samples;

(e) Determine the statistical limits for each lot number of unassayed reference materials through repeated testing;

(f) Use the manufacturer's reference material limits for assayed material, provided they are:

(i) Verified by the medical test site; and

(ii) Appropriate for the methods and instrument used by the medical test site;

(g) Report patient results only when reference materials are within acceptable limits;

(h) Establish and make readily available reference material limits;

(i) Use materials within their documented expiration date, unless the test site provides evidence the materials are stable and reliable beyond the expiration date;

(j) For microbiology:

(i) Check each batch or shipment of reagents, discs, stains, antisera, and identification system for reactivity with positive and negative reference organisms including:

(A) Each time of use for fluorescent stains and Deoxyribonucleic Acid (DNA) probes based on radioisotope methods;

(B) Each week of use for reagents and stains;

(C) Each month of use for antisera; and

(D) Each week of use for direct antigen detection systems, using positive and negative controls that evaluate both the extraction and reaction phase;

(ii) Check each new batch of media and each new lot of antimicrobial discs or other testing systems, before initial use and each week of testing using approved reference organisms, when testing antimicrobial susceptibility;

(iii) Document zone sizes or minimum inhibitory concentration for reference organisms are within established limits;

(iv) Have available and use appropriate stock organisms for quality control purposes;

(v) Have available a collection of slides, photographs, gross specimens, or text books for reference sources to aid in identification of microorganisms;

(vi) Document appropriate steps in the identification of microorganisms on patient specimens;

(vii) Check each batch or shipment of noncommercial media for sterility, ability to support growth, and if appropriate, selectivity, inhibition, or biochemical response;

(viii) If commercially manufactured media quality control results are used:

(A) Keep records of the manufacturer's quality control results;

(B) Document visual inspection of the media before use; and

(C) Follow the manufacturer's specifications for using the media;

(ix) When performing parasitology:

(A) Use a calibrated ocular micrometer for determining the size of ova and parasites, if size is a critical parameter; and

(B) Check permanent stains using reference materials, each month of use;

(k) For syphilis serology:

(i) Use equipment, glassware, reagents, reference materials, and techniques conforming to manufacturers' specifications;

(ii) Perform serologic tests on unknown specimens concurrently with a positive serum reference material with known titer or graded reactivity and a negative reference material; and

(iii) Employ reference materials for all test components to ensure reactivity;

(l) For general immunology:

(i) Perform serologic tests on unknown specimens with a positive and a negative reference material;

(ii) Employ reference materials for all test components to ensure reactivity; and

(iii) Report test results only when the predetermined reactivity pattern of the reference material is observed;

(m) For chemistry, when performing blood gas analysis, include:

(i) A two-point calibration and a reference material each eight hours of testing; and

(ii) A one-point calibration or reference material each time patient samples are tested; or

(iii) Another calibration and reference material schedule, approved by the department as equivalent to this subsection;

(n) For hematology and coagulation:

(i) Use one level of reference material each day of testing patient samples for manual blood counts; and

(ii) Use two levels of reference materials each day of testing for:

(A) Instrumentation methods; and

(B) Manual tilt tube method for coagulation.

(o) For immunohematology, for the services offered:

(i) Perform ABO grouping by testing unknown red cells with Federal Food and Drug Administration approved anti-A and anti-B grouping sera;

(ii) Confirm ABO grouping of unknown serum with known A₁ and B red cells;

(iii) Determine the Rh₀(D) group by testing unknown red cells with anti-D (anti Rh₀) blood grouping serum;

(iv) Employ a control system capable of detecting false positive Rh test results, when required by the manufacturer; and

(v) Perform quality control checks of cells and antisera each day of use;

(p) For transfusion services:

(i) Perform ABO grouping, Rh₀ (D) typing, antibody detection, and identification and compatibility testing as described by the Food and Drug Administration under 21 CFR Part 606, with the exception of 21 CFR Part 606.20a, Personnel, and 21 CFR Part 640; and

(ii) Collect, store, process, distribute and date blood and blood products as described by the Food and Drug Administration under 21 CFR Parts 606, 610.53 and 640;

(q) For histopathology:

(i) Use positive control slides for each special stain to check for intended level of reactivity;

(ii) Retain stained slides at least ten years and specimen blocks at least two years from the date of examination; and

(iii) Retain remnants of tissue specimens in an appropriate preserved state until the portions submitted for microscopic examination have been examined and diagnosed;

(r) For cytology:

(i) Develop criteria for submission of material and the assessment of the adequacy of the sample submitted, including notifying the physician;

(ii) Retain all negative slides for three years from the date of examination of the slide;

(iii) Retain all abnormal slides for ten years from the date of examination;

(iv) Include in quality control the rescreening and documentation of benign gynecological slides as follows:

(A) One hundred percent of slides from patient with a known history of cervical cancer or its precursors;

(B) Selection of benign slides for a total rescreening of a minimum of ten percent of all benign slides including patients identified in (r)(iv)(A) of this subsection; or

(C) Another method demonstrating equivalent effectiveness in discovering errors;

(v) Review prior cytologic specimens or records of previous reviews, if available, for each abnormal cytology result;

(vi) Correlate abnormal cytology reports with prior cytology reports and with histopathology reports, if available, and determine the cause of any discrepancies;

(vii) Document reviews of negative slides from cases known to have a history of abnormal slides;

(viii) Evaluate and document technical personnel slide examination performance; and

(ix) Evaluate and document significant discrepancies in examination of cytology slides;

(s) For histocompatibility:

(i) Use applicable quality control standards for immunohematology, transfusion services, and diagnostic immunology as described in this chapter;

(ii) For renal allotransplantation:

(A) Have available and follow criteria for:

(I) Selecting appropriate patient serum samples for crossmatching;

(II) The technique used in crossmatching;

(III) Preparation of donor lymphocytes for crossmatching;

- (IV) Reporting crossmatch results;
- (V) The preparation of lymphocytes for Human Leukocyte Antigen HLA-A, B and DR typing;
- (VI) Selecting typing reagents; and
- (VII) The assignment of HLA antigens;
- (B) Have available serum specimens for all potential transplant recipients at initial typing, for periodic screening, for pretransplantation crossmatch, and following sensitizing events;
- (C) Have appropriate storage and maintenance of both recipient sera and reagents;
- (D) Indicate, when applicable:
 - (I) Source;
 - (II) Bleeding date;
 - (III) Identification number; and
 - (IV) Volume remaining for reagent typing sera inventory;
- (E) Properly label and store:
 - (I) Cells;
 - (II) Complement;
 - (III) Buffers;
 - (IV) Dyes; and
 - (V) Reagents;
- (F) Type all potential transplant recipient cells and cells from organ donors referred to the medical test site;
- (G) Have adequate reagent trays for typing recipient and donor cells to define all HLA-A, B, and DR specificities as required to determine splits and cross-reactivity;
- (H) Have a written policy establishing when antigen redefinition and retyping are required;
- (I) Screen recipient sera for preformed antibodies with a suitable lymphocyte panel;
- (J) Use a suitable cell panel for screening patient sera containing all the major HLA specificities and common splits;
- (K) Use the mixed lymphocyte culture, or equivalent, to determine cellularly defined antigens;
- (L) Include positive and negative reference materials on each tray; and
- (M) Participate in at least one national or regional cell exchange program, if available, or develop an exchange system with another medical test site;
 - (iii) When performing only transfusions, other nonrenal transplantation, excluding bone marrow transplants, or disease-associated studies, meet all the requirements specified in this section except for the requirements for the performance of mixed lymphocyte cultures; and
 - (iv) Test donor for HIV reactivity;
 - (t) For cytogenetics:
 - (i) Document the number of:
 - (A) Metaphase chromosome spreads and cells counted and karyotyped; and
 - (B) Chromosomes counted for each metaphase spread;
 - (ii) Assure an adequate number of karyotypes are prepared for each patient, according to the indication given for performing cytogenetics study;
 - (iii) Use an adequate patient identification system for:
 - (A) Patient specimens;
 - (B) Photographs, photographic negatives, or computer stored images of metaphase spreads and karyotypes;
 - (C) Slides; and
 - (D) Records;

- (iv) Include in the final report:
 - (A) The number of cells counted and karyotyped; and
 - (B) An interpretation of the karyotypes findings;
 - (v) Use appropriate nomenclature on final reports;
 - (u) For radiobioassay and radioimmunoassay:
 - (i) Check the counting equipment for stability each day of use with radioactive standards or reference sources; and
 - (ii) Meet Washington state radiation standards described under chapter 70.98 RCW, and chapter 402-10 through 402-24, 402-32 through 402-34, 402-62, and 402-70 WAC.
 - (6) If a medical test site performs cytology examinations, the designated test site supervisor or designated specialty test site supervisor shall:
 - (a) Confirm all gynecological smears interpreted to be outside normal limits;
 - (b) Review all nongynecological cytological preparations; and
 - (c) Sign or initial all reports from (a) or (b) of this subsection.
 - (7) Technical personnel shall examine, unless federal law and regulation specify otherwise, no more than one hundred and twenty cytological slides in a twenty-four hour period and in no less than a six hour period, consisting of:
 - (a) No more than eighty unevaluated cytological slides per day; and
 - (b) No more than forty slides for quality control purposes.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-090, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-090, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-090, filed 9/21/90, effective 10/22/90.]

WAC 246-338-100 Disciplinary action. (1) The department may take disciplinary action against a medical test site if the medical test site fails to meet the requirements of chapter 70.42 RCW or this chapter; or if an applicant, owner, designated test site supervisor, designated specialty test site supervisor, or any technical personnel of the medical test site violates any provision of chapter 70.42 RCW or this chapter.

(2) The department may take the following disciplinary actions individually or in any combination:

- (a) Denial of a license to a medical test site applicant when the applicant:
 - (i) Refused to comply with the requirements of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;
 - (ii) Had a license revoked for cause and never reissued under chapter 70.42 RCW;
 - (iii) Knowingly or with reason to know made a false statement of a material fact in the application for a license or in any data attached or in any record required by the department;
 - (iv) Refused to allow representatives of the department to examine any book, record, or file required under this chapter;
 - (v) Willfully prevented, interfered with, or attempted to impede in any way, the work of a representative of the department; or
 - (vi) Misrepresented or was fraudulent in any aspect of the owner's or applicant's business;

(b) Place conditions on a license limiting or cancelling a test site's authority to conduct any test or group of tests when the owner or applicant:

(i) Failed or refused to comply with the requirements of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;

(ii) Knowingly or with reason to know made a false statement of a material fact in the application for a license or in any data attached or in any record required by the department;

(iii) Refused to allow representatives of the department to examine any book, record, or file required under this chapter;

(iv) Willfully prevented, interfered with, or attempted to impede in any way, the work of a representative of the department;

(v) Willfully prevented or interfered with preservation of evidence of a known violation of this chapter or the rules adopted under chapter 70.42 RCW; or

(vi) Misrepresented or was fraudulent in any aspect of the owner's or applicant's business;

(c) Suspend a medical test site license when the owner or applicant:

(i) Failed or refused to comply with the requirements of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;

(ii) Knowingly, or with reason to know, made a false statement of a material fact in the application for a license or in any data attached or in any record required by the department;

(iii) Refused to allow representatives of the department to examine any book, record, or file required by this chapter;

(iv) Willfully prevented, interfered with, or attempted to impede in any way, the work of a representative of the department;

(v) Willfully prevented or interfered with preservation of evidence of a known violation of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;

(vi) Misrepresented or was fraudulent in any aspect of the owner or applicant's business;

(vii) Used false or fraudulent advertising; or

(viii) Failed to pay any civil monetary penalty assessed by the department under chapter 70.42 RCW within twenty-eight days after the assessment becomes final;

(d) Revoke a medical test site license when the owner or applicant:

(i) Failed or refused to comply with the requirements of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;

(ii) Knowingly, or with reason to know, made a false statement of a material fact in the application for a license or in any data attached or in any record required by the department;

(iii) Refused to allow representatives of the department to examine any book, record, or file required by this chapter;

(iv) Willfully prevented, interfered with, or attempted to impede in any way, the work of a representative of the department;

(v) Willfully prevented or interfered with preservation of evidence of a known violation of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;

(vi) Misrepresented or was fraudulent in any aspect of the owner's or applicant's business;

(vii) Used false or fraudulent advertising; or

(viii) Failed to pay any civil monetary penalty assessed by the department under chapter 70.42 RCW within twenty-eight days after the assessment becomes final;

(e) Impose monetary penalties of up to ten thousand dollars per day that a owner or applicant:

(i) Failed or refused to comply with the requirements of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;

(ii) Knowingly, or with reason to know, made a false statement of a material fact in the application for a license or in any data attached or in any record required by the department;

(iii) Refused to allow representatives of the department to examine any book, record, or file required under this chapter;

(iv) Willfully prevented, interfered with, or attempted to impede in any way, the work of any representative of the department;

(v) Willfully prevented, or interfered with, preservation of evidence of any known violation of chapter 70.42 RCW or the rules adopted under chapter 70.42 RCW;

(vi) Misrepresented or was fraudulent in any aspect of the owner's or applicant's business; or

(vii) Used false or fraudulent advertising.

(3) The department may summarily suspend or revoke a license when it finds continued licensure of a test site immediately jeopardizes the public health, safety, or welfare.

(4) The department shall give written notice of any disciplinary action taken by the department to the owner or applicant for licensure, including notice of the opportunity for a hearing.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-100, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-100, filed 9/21/90, effective 10/22/90.]

WAC 246-338-110 Adjudicative proceedings. (1) A license owner or applicant contesting a disciplinary action shall, within twenty-eight days of receipt of the department's decision, file a written application for an adjudicative proceeding with the Legal Support Section, P.O. Box 2245, Olympia, WA 98507-2245. The application shall include or have attached:

(a) A specific statement of the issue or issues and law involved;

(b) The grounds for contesting the department decision; and

(c) A copy of the contested department decision.

(2) The adjudicative proceeding is governed by chapter 34.05 RCW, the Administrative Procedure Act, this chapter, and chapter 246-08 WAC.

If a provision of this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

(3) Any test site in receipt of a denial, condition, suspension, or revocation of its license, or a civil monetary penalty upheld after administrative review may, within sixty days of the administrative determination, petition the superior court for review of the decision.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-110, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-110, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-110, filed 9/21/90, effective 10/22/90.]

WAC 246-338-990 Fees. (1) For the purpose of this section, the following words and phrases have the following meanings:

(a) "Accredited by organization" means a testing site is accredited, certified, or licensed by an organization meeting the requirements of WAC 246-338-040, Approval of accreditation bodies;

(b) "Category A" means a medical test site performing less than ten thousand licensed tests per year and two or less specialties;

(c) "Category B" means a medical test site performing less than ten thousand licensed tests per year and three specialties;

(d) "Category C" means a medical test site performing ten thousand to twenty-five thousand licensed tests per year and three or less specialties;

(e) "Category D" means a medical test site performing less than twenty-five thousand licensed tests per year and four or more specialties;

(f) "Category E" means a medical test site performing greater than twenty-five thousand licensed tests per year and three or less specialties;

(g) "Category F" means a medical test site performing greater than twenty-five thousand licensed tests per year and four or more specialties;

(h) "Direct staff time" means all state employees' work time, including travel time and expenses involved in;

(i) Functions associated with medical test site licensure or complaint investigation including:

(A) On-site follow up visit; and

(B) Telephone contacts and staff or management conferences in response to a deficiency statement or complaint;

(ii) Preparation and participation in a continuing education or training event for a medical test site; and

(iii) Evaluation of evidence submitted under WAC 246-338-030(12), with a request for addition or deletion to the tests listed under WAC 246-338-030(10), including actual costs for supplies, printings and mailings;

(i) "Licensed test" means all tests not specifically listed as waived under WAC 246-338-030(10), or defined as forensic under WAC 246-338-010(12);

(j) "Temporary" means a medical test site performing licensed tests at locations separate from the medical test site's permanent location with a frequency of five times a year or less.

(2) The department shall assess and collect biennial fees for medical test sites as follows:

(a) Charge fees, based on the requirements authorized under RCW 70.42.090 and this section;

(b) Prorate fees for the remainder of the biennial period, when the owner or applicant applies for a license or certificate of waiver during a biennium;

(c) Adjust fees when a medical test site increases or decreases the complexity or volume of testing;

(d) Determine fees according to criteria below:

- (i) Certificate of waiver \$50 per year or \$100 per biennium;
- (ii) Category A 400 per year or 800 per biennium;
- (iii) Category B 450 per year or 900 per biennium;
- (iv) Category C 500 per year or 1000 per biennium;
- (v) Category D 600 per year or 1200 per biennium;
- (vi) Category E 700 per year or 1400 per biennium;
- (vii) Category F 850 per year or 1700 per biennium;
- (viii) Mobile site 200 per year or 400 per biennium;
- (ix) Temporary 50 per year or 100 per biennium;
- (x) Accredited by:
 - (A) Organization other than HCFA 125 per year or 250 per biennium;
 - (B) HCFA 50 per year or 100 per biennium;
 - (xi) Follow up survey for deficiencies direct staff time;
 - (xii) Complaint investigation direct staff time;
 - (xiii) Continuing education direct staff time;
 - (xiv) Evaluation of requests for additions or deletions to the list of waived tests direct staff time.

(3) The department shall exclude from fee charges the women, infant, and children (WIC) programs performing hematocrit testing only for food distribution purposes and the Washington state migrant council performing hematocrit testing only for nutritional evaluation.

[Statutory Authority: Chapter 70.42 RCW. 91-21-062 (Order 205), § 246-338-990, filed 10/16/91, effective 10/16/91. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-338-990, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 70.42 RCW. 90-20-017 (Order 090), § 248-38-120, filed 9/21/90, effective 10/22/90.]

Chapter 246-340 WAC

SECOND TRIMESTER ABORTION FACILITIES

WAC

246-340-001	Purpose.
246-340-010	Definitions.
246-340-020	Facilities approved for termination of pregnancy.
246-340-030	Certificate of approval required.
246-340-040	Application for certificate of approval.
246-340-050	Issuance, duration, and assignment of certificate of approval.
246-340-060	Form of application for certificate of approval and inspection.
246-340-070	Notice of decision—Adjudicative proceeding.
246-340-080	Nonhospital facilities approved for termination of pregnancy during the second trimester.
246-340-090	HIV/AIDS education and training.
246-340-100	Reporting of pregnancy terminations.
246-340-110	Disclosure of information.
246-340-990	Fees.

WAC 246-340-001 Purpose. It is the purpose of the department to establish guidelines to assure the safe and adequate care of patients undergoing termination of pregnancy, by means of rules and regulations setting standards for medical facilities at which pregnancies are terminated, in accordance with chapter 9.02 RCW.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-340-001, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-140-010, filed 3/20/86; Order 53, § 248-140-010, filed 2/8/71.]

WAC 246-340-010 Definitions. Unless the context clearly indicates otherwise, the following terms, whenever used in this chapter, shall be deemed to have the following meanings:

(1) "Certificate of approval" means a certificate issued by the department to a nonhospital facility approved for the performance of induction and/or termination procedures during the second trimester.

(2) "Certified nurse anesthetist" means a registered nurse whose application for certified registered nurse designation has been approved by the Washington state board of nursing pursuant to RCW 18.88.080 and WAC 246-839-300.

(3) "Clean" when used in reference to a room or area means space and/or equipment for storage and handling of supplies and/or equipment which are in a sanitary or sterile condition.

(4) "Department" means the Washington state department of health.

(5) "Facility" means any nonhospital institution, place, building, or agency or portion thereof in which induction and/or termination is conducted during the second trimester.

(6) "Induction" means the procedure used to initiate termination of pregnancy.

(7) "Observation unit" means a room or rooms for the segregation, close or continuous observation, and care of a patient before or after a termination procedure.

(8) "Patient" means a woman undergoing induction and/or termination of pregnancy.

(9) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association.

(10) "Physician" means an individual licensed under provisions of chapter 18.71 RCW, Physicians, or chapter 18.57 RCW, Osteopathy—Osteopathic medicine and surgery.

(11) "Registered nurse" means an individual licensed under the provisions of chapter 18.88 RCW, Registered nurses.

(12) "Second trimester" means the second three-month period of pregnancy.

(13) "Secretary" means the secretary of the department of health or his or her designee or authorized representative.

(14) "Soiled," when used in reference to a room or area, means space and equipment for collection and/or cleaning of used or contaminated supplies and equipment and/or disposal of wastes.

(15) "Termination" means ending of a pregnancy.

[Statutory Authority: RCW 43.70.040, 9.02.005 and 9.02.070. 92-02-018 (Order 224), § 246-340-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-340-010, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-140-140, filed 3/20/86. Statutory Authority: RCW 9.02.070 and 43.20.050. 83-01-066 (Order 251), § 248-140-140, filed 12/15/82; Order 87, § 248-140-140, filed 6/12/73.]

WAC 246-340-020 Facilities approved for termination of pregnancy. For the purpose of preserving and protecting maternal health, all abortions performed during the second trimester of pregnancy shall be performed in hospitals licensed pursuant to chapter 70.41 RCW or in a medical facility approved for that purpose by the department, as set forth in chapter 246-340 WAC.

[Statutory Authority: RCW 43.70.040, 9.02.005 and 9.02.070. 92-02-018 (Order 224), § 246-340-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-340-020, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213. 86-08-002 (Order 2348), § 248-140-150, filed 3/20/86. Statutory Authority: RCW 9.02.070 and 43.20.050. 83-01-066 (Order 251), § 248-140-150, filed 12/15/82; Order 87, § 248-140-150, filed 6/12/73.]

WAC 246-340-030 Certificate of approval required.

No person shall establish, maintain, or operate a facility in which any means are employed or actions taken for the purpose of induction and/or termination of a pregnancy during the second trimester without a certificate of approval from the department: *Provided*, That this provision shall not apply to licensed hospitals.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-340-030, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 9.02.070 and 43.20.050. 83-01-066 (Order 251), § 248-140-160, filed 12/15/82; Order 87, § 248-140-160, filed 6/12/73.]

WAC 246-340-040 Application for certificate of approval. An application for a certificate of approval shall be made to the department by facilities upon forms provided by the department and shall contain such information as the department reasonably requires and which shall include affirmative evidence of ability to comply with these standards, rules and regulations. An application for renewal of certificate shall be made to the department upon forms provided by the department and submitted thirty days prior to the date of expiration of the certificate of approval.

[Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-340-040, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 9.02.070 and 43.20.050. 83-01-066 (Order 251), § 248-140-170, filed 12/15/82; Order 87, § 248-140-170, filed 6/12/73.]

WAC 246-340-050 Issuance, duration, and assignment of certificate of approval. (1) Upon receipt of an application for a certificate of approval, the department shall issue a certificate of approval if the person and the facility meet the requirements, standards, rules and regulations established herein. Each certificate of approval shall be issued for the premises and persons named in the application and no certificate of approval shall be transferable or assignable. No certificate of approval shall exceed twelve months duration.

(2) If there be failure to comply with the standards, rules and regulations, the secretary may, when, in his or her judgment, the well-being and safety of patients would not be jeopardized, issue to an applicant for an initial or renewed certificate of approval, a provisional certificate of approval which will permit the operation of the facility for a specific, determined period of time. A provisional certificate of approval may be issued only when, after thorough investigation, it has been determined that time can be allowed for the facility to correct existing deficiencies without placing in jeopardy the safety or health of women receiving services for the induction and/or termination of pregnancy in second trimester. In no case shall provisional approval exceed six months without review and sanction by the secretary.

(3) Any action to deny, suspend or revoke a certificate of approval shall comply with chapter 34.05 RCW, Administrative Procedure Act, and chapter 246-08 WAC, Practice and procedure.

[Statutory Authority: RCW 43.70.040, 9.02.005, 9.02.070 and 34.05.220. 92-02-018 (Order 224), § 246-340-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040. 91-02-049 (Order 121), recodified as § 246-340-050, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 9.02.070 and 43.20.050. 83-01-066 (Order 251), § 248-140-180, filed 12/15/82; Order 87, § 248-140-180, filed 6/12/73.]

WAC 246-340-060 Form of application for certificate of approval and inspection. The secretary shall prescribe the form upon which applications for approval shall be made, shall prior to the approval, within a reasonable time after application, evaluate the findings of inspections and issue a certificate of approval if the findings demonstrate conformity to the law and to these rules and regulations. A certificate of approval shall be valid immediately and for twelve months following the first day of the month following issuance, unless revoked for cause, and may be renewable. The secretary shall have access at any reasonable time, to the premises for which approval has been requested or has been issued, for purposes of ascertaining conformance to the law or to these rules and regulations.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-340-060, filed 12/27/90, effective 1/31/91; Order 87, § 248-140-190, filed 6/12/73.]

WAC 246-340-070 Notice of decision—Adjudicative proceeding. (1) The department's notice of a denial, suspension, modification, or revocation of a certificate shall be consistent with RCW 43.70.115. An applicant or certificate holder has the right to an adjudicative proceeding to contest the decision.

(2) A certificate applicant or holder contesting a department certificate decision shall within twenty-eight days of receipt of the decision:

(a) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(b) Include in or with the application:

(i) A specific statement of the issue or issues and law involved;

(ii) The grounds for contesting the department decision; and

(iii) A copy of the contested department decision.

(3) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 43.70.040, 9.02.005, 9.02.070 and 34.05.220, 92-02-018 (Order 224), § 246-340-070, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-340-070, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 42.20.050 and chapter 34.05 RCW, 90-05-038 (Order 034), § 248-140-200, filed 2/14/90, effective 3/17/90; Order 87, § 248-140-200, filed 6/12/73.]

WAC 246-340-080 Nonhospital facilities approved for termination of pregnancy during the second trimester. Any facility not an integral organizational part of a licensed hospital and not located within its premises, must meet the following requirements to be approved for the induction and/or termination of pregnancy during the second trimester.

(1) There shall be an agreement with a licensed hospital, or with a physician who has admitting privileges at a licensed hospital, for transfer of patients for medical emergencies. There shall be written plans for consultation,

backup services, transfer, and transport of the patient to a licensed hospital where appropriate care is available. This hospital shall be located no further than thirty minutes by ambulance from the facility.

(2) There shall be a procedure room which shall meet the following requirements:

(a) A usable floor area with a minimum dimension of at least eight feet and a minimum area of eighty square feet, provided the room arrangement allows for required equipment being readily accessible during the procedure and allows for free movement of personnel performing the procedure.

(b) Well-lighted.

(c) An examination or surgical table or equivalent.

(d) Located and designed to provide easy access and egress for emergency transport of a patient.

(3) The facility shall provide the following equipment, supplies, and storage readily available to procedure room(s).

(a) Portable or built-in suction;

(b) Portable or built-in oxygen;

(c) Intravenous stand, support, or equivalent;

(d) A device to assist breathing;

(e) Sterile surgical supplies, equipment, and emergency drugs needed during the procedure;

(f) Equipment for collection of soiled linens and waste.

(4) Instruments, equipment, and supplies used in induction and/or termination procedures shall be thoroughly cleaned, disinfected, and appropriately sterilized, when sterilization is indicated.

(5) The facility shall have storage space for sterile surgical supplies, drugs, linens, anesthesia equipment, solutions, instruments, utensils, and equipment.

(6) The facility shall have a utility room or clean-up area which includes a work counter, a sink, storage cabinet, and space for linen hampers and waste containers. Soiled areas shall be separated from clean areas.

(7) If the practice of sterilizing unwrapped trays of instruments and other equipment is followed, the autoclave shall be located to provide access to the procedure room(s) without contamination of sterilized supplies and equipment. The autoclave may be in either a clean or soiled room wherein the arrangement and workflow is such that separation of contaminated items from sterile items is maintained. Standard procedures for sterilization of various types of supplies, equipment, utensils, and solutions shall be established and carried out. These procedures shall be written and readily available to all personnel responsible for sterilization procedures. The facility shall adopt a recognized method of checking the sterilizer's performance, in accordance with manufacturer specifications, including but not limited to spore counts and sterilizer indicators with documentation of spore count at least monthly. If sterile supplies are obtained from another source, this source and method of transport shall meet the approval of the department.

(8) The facility shall have an area designated as an observation unit where the patient may be observed until the physician determines the patient may be released.

(9) Other requirements in the performance of the induction and/or termination procedure:

(a) The procedure shall be performed by a licensed physician.

(b) Appropriate, qualified personnel or staff shall be present in the facility at all times when a patient is present.

(c) No termination of pregnancy in the third trimester may be induced in an approved facility defined in these rules and regulations.

(d) General anesthesia shall be administered only by a separate physician or certified nurse anesthetist.

(e) Flammable anesthesia shall not be used.

(f) When induction during second trimester occurs in a certified medical facility with intent to terminate the pregnancy in the certified facility, (other than a licensed hospital), there shall be a physician and/or registered nurse present at all times until termination is successfully accomplished and the patient is discharged.

(g) All sewage, garbage, refuse, and wastes shall be disposed of in a manner to prevent creation of an unsafe or insanitary condition or nuisance.

(10) The facility, its component parts, facilities, and equipment shall be kept clean and in good repair and maintained with consideration for the safety and well-being of patients, staff, and visitors.

(11) The secretary may exempt an applicant from one or more of the requirements of this section where, in his or her judgment the well-being and safety of the patients would not be jeopardized thereby: *Provided*, That such action is taken only after thorough inspection and evaluation of all relevant circumstances and conditions.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-340-080, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 9.02.070 and 43.20.050, 83-01-066 (Order 251), § 248-140-210, filed 12/15/82; Order 87, § 248-140-210, filed 6/12/73.]

WAC 246-340-090 HIV/AIDS education and training. Abortion facilities shall:

(1) Verify or arrange for appropriate education and training of personnel on the prevention, transmission, and treatment of human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS) consistent with RCW 70.24.310; and

(2) Use infection control standards and educational material consistent with the approved curriculum manual *Know - HIV/AIDS Prevention Education for Health Care Facility Employees*, January 1991, published by the office on HIV/AIDS.

[Statutory Authority: RCW 43.70.040, 9.02.005, 9.02.070 and 70.24.310, 92-02-018 (Order 224), § 246-340-090, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-340-090, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 70.24.310, 89-21-038 (Order 3), § 248-140-215, filed 10/12/89, effective 11/12/89.]

WAC 246-340-100 Reporting of pregnancy terminations. In order for the department to evaluate the effect of the rules and regulations in assuring safe and adequate care and treatment of patients, each hospital and facility where lawful induced abortions are performed during either the first, second, or third trimester of pregnancy in accordance with chapter 9.02 RCW and these rules and regulations shall, on forms prescribed and supplied by the secretary, report to the department during the following month the number and dates of induced abortions performed during the previous month, giving for each abortion the age of the patient,

geographic location of patient's residence, patient's previous pregnancy history, the duration of the pregnancy, the method of abortion, any complications such as perforations, infections, and incomplete evacuations, the name of the physician or physicians performing or participating in the abortion and such other relevant information as may be required by the secretary. All physicians performing abortions in nonapproved facilities, when the physician has determined that termination of the pregnancy was immediately necessary to meet a medical emergency, shall also report in the same manner, and shall additionally provide a clear and detailed statement of the facts upon which he or she based his or her judgment of medical emergency.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-340-100, filed 12/27/90, effective 1/31/91. Statutory Authority: 1985 c 213, 86-08-002 (Order 2348), § 248-140-220, filed 3/20/86. Statutory Authority: RCW 43.20.050, 80-14-063 (Order 202), § 248-140-220, filed 10/1/80; Order 87, § 248-140-220, filed 6/12/73.]

WAC 246-340-110 Disclosure of information. To assure accuracy and completeness in reporting, as required to fulfill the purposes for which abortion statistics are collected, information received by the board or the department through filed reports, inspections or as otherwise authorized, shall not be disclosed publicly in such a manner as to identify any individual without their consent, except by subpoena, nor in such a manner as to identify any facility except in a proceeding involving issues of certificates of approval.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-340-110, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20.050, 80-14-063 (Order 202), § 248-140-230, filed 10/1/80.]

WAC 246-340-990 Fees. Pregnancy termination facilities certified under chapter 9.02 RCW shall submit an annual fee of two hundred fifty dollars to the department for licensing and certification of facilities for induction or termination of pregnancy in the second trimester.

[Statutory Authority: RCW 43.70.040, 91-02-050 (Order 122), § 246-340-990, filed 12/27/90, effective 1/31/91.]

Chapter 246-358 WAC TEMPORARY WORKER HOUSING (Formerly Labor Camps)

WAC

246-358-001	Purpose.
246-358-010	Definitions.
246-358-025	Permit—Administration—Enforcement—Exemptions.
246-358-035	Supervision and responsibility.
246-358-045	Location and maintenance.
246-358-055	Water supply.
246-358-065	Sewage disposal.
246-358-075	Construction of new facilities and maintenance of existing dwelling units, dormitories, and other facilities used for temporary-worker housing.
246-358-085	Worker-supplied housing—Spaces and sites.
246-358-095	Toilets, handwashing, bathing, and laundry facilities.
246-358-105	Heating.
246-358-115	Lighting.
246-358-125	Cooking and foodhandling facilities.
246-358-135	Beds and bedding.
246-358-145	Health and safety provisions.
246-358-155	Refuse disposal.

246-358-165	Rodent and insect control.
246-358-175	Disease prevention and control.
246-358-990	Labor camp health and sanitation permit and survey fees.

WAC 246-358-001 Purpose. Chapter 246-358 WAC establishes the Washington state board of health minimum health and sanitation requirements for temporary-worker housing or labor camps as specified in RCW 70.54.110. These rules implement chapter 253, Laws of 1990, to establish a set of standards for farmworker housing and the intent of RCW 70.54.110.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-001, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-001, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-001, filed 5/2/88; 84-18-034 (Order 273), § 248-63-001, filed 8/30/84. Formerly WAC 248-61-001.]

WAC 246-358-010 Definitions. (1) "Construction" means building of new temporary-worker housing and additions, or alterations to existing temporary-worker housing when the housing started on or after May 3, 1969, or changing the use of a building to temporary-worker housing (reference chapter 70.54 RCW).

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

(3) "Dormitory" means a shelter, building, or portion of a building which:

(a) Is physically separated from dwelling units and common use areas;

(b) Is designated by the operator as a sleeping area for groups of temporary workers and/or those who accompany temporary workers;

(c) Houses at least five occupants; and

(d) Lacks cooking and eating facilities.

(4) "Dwelling unit" means a shelter, building, or portion of a building which:

(a) Is physically separated from other units, dormitories, and common-use areas;

(b) Is designated by the operator for use by temporary workers and/or those who accompany temporary workers as sleeping and/or living space; and

(c) May contain cooking and eating facilities.

(5) "Drinking fountain" means a product equal to a nationally recognized standard or a designed and drained faucet which provides potable drinking water under pressure.

(6) "Emergency" means a natural disaster or other sudden and unexpected occurrence demanding immediate action. An emergency condition would not include an unexpected demand for housing because additional workers are needed to harvest a crop larger than anticipated.

(7) "Exemption" means a written authorization from the Washington state board of health which excludes an operator from meeting a specific standard in this chapter.

(a) An exemption may be from:

(i) One or more subsections of this chapter;

(ii) A specific condition; and/or

(iii) A specific time limit.

(b) An exemption may not be granted for the permit requirements as defined in WAC 246-358-025(1).

(8) "Foodhandling facility" means a designated, enclosed area for preparation of food, either:

(a) "Central foodhandling facility," a cafeteria-type eating place with operator-furnished food prepared under the direction of the operator for consumption with or without charge by temporary workers; or

(b) "Common foodhandling facility," an area designated by the operator for temporary workers to store, prepare, cook, and eat their own food supplies.

(9) "Health and sanitation permit" or "operating license" means a document issued by the department or the health officer authorizing the use of temporary-worker housing under conditions specified in this chapter. An exemption shall not be granted for the permit requirement. A permit will specify:

(a) The length of time the permit is valid;

(b) Operator's name; and

(c) Number of persons authorized to occupy temporary-worker housing according to square footage requirements.

(10) "Health officer" means the individual appointed under chapter 70.05 RCW as the health officer for a local health department or appointed under chapter 70.08 RCW as the director of public health of a combined city-county health department.

(11) "Laundry" means an area or room with laundry sink and/or mechanical washing machines used to wash clothing.

(12) "Operator" means owner or the individual designated as the person responsible for the temporary-worker housing and whose name appears on the health and sanitation permit.

(13) "Person" means any individual, firm, partnership, corporation, association or the legal successor thereof, or any agency of the city, county, or state, or any municipal subdivision.

(14) "Refuse" means solid wastes or garbage.

(15) "Sink" means a properly trapped plumbing fixture which prevents back passage or return of air and includes:

(a) "Handwashing sink" or lavatory with hot and cold water under pressure and which is used for handwashing purposes; or

(b) "Laundry sink" of a size large enough to accommodate hand laundering of clothing with hot and cold water under pressure.

(16) "Single operation" means the common use of labor, equipment, and supervision.

(17) "Temporary worker" means a person employed intermittently and not residing year-round in the same place.

(18) "Temporary-worker housing" (formerly a labor camp) means all facilities provided by the operator managed as a single operation including:

(a) Five dwelling units;

(b) A combination of facilities, shelters, spaces, dwelling units, or dormitories for housing ten or more temporary workers and/or those who accompany temporary workers with a minimum square footage of five hundred twenty square feet;

(c) Food handling facilities, toilet, bathing, handwashing facilities, and laundry facilities; and

(d) Does not include housing which is covered by the Landlord Tenant Act.

(19) "Worker-supplied housing" means a shelter provided by the temporary worker and may include recreational vehicles or trailers. Tents shall be prohibited.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-010, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-010, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-010, filed 5/2/88; 84-18-034 (Order 273), § 248-63-010, filed 8/30/84. Formerly WAC 248-60A-010 and 248-61-010.]

WAC 246-358-025 Permit—Administration—Enforcement—Exemptions. (1) The operator shall:

(a) Submit a completed initial application to the department at least forty-five days prior to use of the temporary-worker housing;

(b) Submit a completed renewal notice to the department or health officer as required;

(c) Have a permit from the department or health officer prior to initial occupancy;

(d) Post the department's health and sanitation the permit in a place readily accessible to workers; and

(e) Notify the department or health officer of a transfer of ownership. There will be no fee charged for transferring ownership.

(2) The operator may:

(a) Allow the use of temporary-worker housing without a permit when:

(i) More than forty-five days have passed since a completed initial application was submitted and received by the department or health officer as evidenced by the post mark; and

(ii) The department or health officer has not inspected or issued a permit;

(iii) Other local, state, or federal laws, rules, or codes do not prohibit use of the temporary-worker housing; and

(iv) Request refund of fees if housing is not occupied during the year.

(b) Request in writing an exemption for one or more of the sections or a portion of a section of this chapter from the Washington state board of health except the requirement for a permit; and

(c) Appeal decisions of the department to an adjudicative proceeding governed by the Administrative Procedure Act (chapter 34.05 RCW) and chapter 388-08 WAC.

(3) The department:

(a) May establish an agreement with a health officer whereby the health officer assumes responsibility for inspections, issuing permits, and enforcing chapter 246-358 WAC excluding exemptions.

(b) Shall consult with local health, fire, safety, and building agencies to define each party's responsibilities in temporary worker housing with respect to complaints, on-site sewage, drinking water, solid waste, food service, and other related environmental health issues.

(4) The department or health officer shall:

(a) Survey each premises of temporary-worker housing to ensure standards of this chapter are met, including inspection:

(i) Prior to issuance of initial permit;

(ii) Upon request of operator or occupant; and

(iii) At least once every year or more frequently as determined by the department or health officer.

(b) Respond to complaints;

(c) Issue a permit to the operator when an on-site inspection reveals conditions meet or exceed the requirements in chapter 246-358 WAC;

(d) Include on each permit the duration for which the permit is valid not to exceed two years;

(e) Take appropriate enforcement action including any one or combination of the following:

(i) Develop corrective action including a compliance schedule;

(ii) Notify the operator concerning violations; and

(iii) Suspend or revoke the permit.

(f) Allow the operator to use temporary-worker housing without a permit as specified in subsection (2) of this section.

(g) Allow permit to continue under the new ownership or transfer owner.

(5) The department or health officer may:

(a) Issue a provisional permit when temporary-worker housing fails to meet the standards in this chapter if:

(i) A written corrective action plan including a compliance schedule is approved by the department or health officer; or

(ii) Pending the Washington state board of health's decision regarding an exemption request.

(b) Establish and collect fee as authorized in RCW 43.70.340;

(c) Refund all or part of a permit fee for housing not occupied during the year if requested by the operator.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-025, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-025, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW and RCW 43.20.050. 90-06-049 (Order 040), § 248-63-025, filed 3/2/90, effective 3/2/90. Statutory Authority: RCW 43.20.050. 88-10-027 (Order 309), § 248-63-025, filed 5/2/88.]

WAC 246-358-035 Supervision and responsibility. The operator shall:

(1) Ensure regular maintenance of occupied temporary-worker housing to meet standards in this chapter;

(2) Comply with this chapter prior to occupancy even if the department or health officer fails to issue a permit within forty-five days of application as described in WAC 246-358-025;

(3) Establish rules for users of temporary-worker housing consistent with health and sanitation requirements in this chapter;

(4) Post information regarding temporary-worker health and sanitation when available from the department or health officer; and

(5) Inform occupants of their responsibilities related to maintaining housing consistent with health and sanitation requirements of this chapter.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-035, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-035, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-035, filed 5/2/88.]

WAC 246-358-045 Location and maintenance. The operator shall:

(1) Provide well-drained sites for temporary-worker housing which prevents the existence of standing water becoming a nuisance;

(2) Locate and maintain temporary-worker housing to prevent the creation of a health or safety hazard; and

(3) Not locate temporary-worker housing:

(a) Within five hundred feet of a livestock operation unless the department or health officer determines that no health risk exists; or

(b) Within two hundred feet of swamps, pools, sink holes, or other surface collections of water unless provisions are taken to prevent the breeding of mosquitoes.

(4) Maintain all open areas surrounding the housing units and dormitories in a sanitary condition and free from garbage and other refuse.

(5) All sites shall be sufficient in size to prevent overcrowding of necessary structures.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-045, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-045, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-045, filed 5/2/88.]

WAC 246-358-055 Water supply. The operator shall:

(1) Provide an adequate, convenient water supply from an approved source as described in chapter 246-290 WAC;

(2) Submit a water sample to a department-certified laboratory for testing of bacteriological quality each year prior to opening temporary-worker housing as described in WAC 246-290-300;

(3) Delay opening housing until bacteriological quality meets requirements as described in WAC 246-290-310;

(4) Provide hot and cold running water under pressure twenty-four hours a day for bathing, laundry, and handwashing facilities adequate to meet needs of occupants served as defined by the department or health officer;

(5) Provide in existing facilities where drinking water is not available in individual housing units, one or more drinking fountains for every one hundred occupants;

(6) Prohibit the use of common drinking cups;

(7) Operate and maintain water service in accordance with chapter 246-290 WAC for temporary-worker housing existing prior to August 1984;

(8) Design, construct, and maintain a water supply system in accordance with chapter 246-290 WAC and this section for temporary-worker housing constructed after August 1984.

(9) When water is unsafe for drinking purposes and accessible to occupants at the temporary worker housing site, a sign shall be posted within three feet of the source as "do not drink" in English or marked with easily understood pictures or symbols. Outlets for nonpotable water shall be rendered inaccessible to occupants of the temporary worker housing site.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-055, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-055, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-055, filed 5/2/88.]

WAC 246-358-065 Sewage disposal. The operator shall:

(1) Provide on-site sewage disposal systems designed, constructed, and maintained as required in chapter 248-96 WAC, chapter 173-240 WAC, and local regulations; and

(2) Ensure connection and drainage of sewage and waste water from all temporary-worker housing to a sewage disposal system approved by the jurisdictional agency.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-065, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-065, filed 5/2/88.]

WAC 246-358-075 Construction of new facilities and maintenance of existing dwelling units, dormitories, and other facilities used for temporary-worker housing.

(1) Construction, as defined in WAC 246-358-010(1), of facilities shall be in accordance with applicable state and local ordinances, codes, and regulations.

(2) Maintenance of existing facilities.

(a) The operator shall provide structurally sound buildings and shelters which:

(i) Are maintained in good repair;

(ii) Are maintained in a sanitary condition; and

(iii) Protect temporary workers and those who accompany them against the elements.

(b) The operator shall follow the compliance schedule established with the department or health officer when existing temporary-worker housing fails to meet requirements in this section.

(c) All heating, cooking, water heating, and other electrical equipment shall be installed in accordance with state, local ordinances, codes, and regulations governing such installation.

(d) The operator shall provide temporary-worker housing with:

(i) Subfloors shall be constructed of wood, asphalt, or concrete and shall be of smooth and tight construction and kept in good repair;

(ii) Wood floors. If used, wood floors shall be at least twelve inches above the ground;

(iii) Clean, cleanable surfaces on interior walls and floors free of excessive peeling paint;

(iv) Cold, potable, running water under pressure within one hundred feet of each dwelling unit;

(v) A minimum of seventy square feet gross floor space for first occupant and fifty square feet for each additional occupant in each dwelling unit;

(vi) A minimum of fifty square feet for each occupant in each dormitory;

(vii) At least fifty square feet of floor space for each occupant in rooms used for sleeping purposes;

(viii) A minimum ceiling height of seven feet over at least one-half the floor area except for manufactured homes which may have six feet eight inches ceiling height;

(ix) Windows. A window area of one-tenth of the total floor area in each dwelling unit, dormitory, and other habitable rooms;

(x) An adequate mechanical ventilation system or natural ventilation including in the bathroom.

Openable windows or skylights used for ventilation shall open:

(A) To fifty percent of total window area; and

(B) Directly to the outside.

(xi) Electrical service including:

(A) Installation of wiring of fixtures consistent with the department of labor and industries, RCW 19.28.070 and local ordinances;

(B) Maintenance of wiring and fixtures in safe condition;

(C) One electrical ceiling fixture and one wall outlet in each room of each dwelling unit;

(D) One electrical ceiling or wall fixture and outlets as needed for each two hundred fifty square feet of space in each dormitory; and

(E) One electrical ceiling or wall fixture and outlets as needed in each central toilet, handwashing, bathing, and laundry room.

(xii) Sixteen-mesh screens on all exterior openings; and

(xiii) Screen doors shall be tight fitting, in good repair, and equipped with self-closing devices.

(e) The operator shall exclude floor space where ceiling height is under five feet when calculating minimum space requirements.

(f) Temporary-worker housing consisting of trailers and recreational vehicles manufactured after July 1968 shall have Washington state department of labor and industries insignia as required in chapters 296-150A and 296-150B WAC.

(g) For painted surfaces, nonlead based paint shall be applied in all temporary-worker housing facilities.

(h) Tents supplied by employer or emergency services agencies may be used for a limited time in emergency situations provided state board of health guidelines on the use of tents for temporary-worker housing are followed and with the department's written approval prior to set up and occupancy. The signatory agencies of the interagency agreement pertaining to farmworker housing shall be provided the opportunity to participate in the development of the guidelines.

[Statutory Authority: RCW 70.54.110, 92-04-082 (Order 242B), § 246-358-075, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-358-075, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-075, filed 5/2/88.]

WAC 246-358-085 Worker-supplied housing—

Spaces and sites. The operator providing spaces or sites to accommodate worker-supplied housing shall:

(1) Designate the area to be used for worker-supplied housing; and

(2) Provide centralized toilets, handwashing sinks, bathing, and laundry facilities for worker-supplied housing spaces or sites as specified in WAC 248-63-095.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-358-085, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-085, filed 5/2/88.]

WAC 246-358-095 Toilets, handwashing, bathing, and laundry facilities. (1) The operator shall:

(a) Provide toilets, handwashing, bathing, and laundry facilities as required in this section; and

(b) Construct urinals, when provided so that the floor from the wall and for a distance not less than fifteen inches measured from the outward edge of the urinal is constructed of materials impervious to moisture; and

(c) Provide toilets separate from habitable areas by walls.

(2) The operator providing centralized toilets, handwashing, and bathing facilities shall:

(a) Locate toilets and handwashing sinks within two hundred feet from temporary-worker housing lacking toilets;

(b) Locate bathing facilities within three hundred feet from temporary-worker housing;

(c) Provide means for individual privacy for toileting and bathing;

(d) Where the toilet rooms are shared such as in multifamily shelters and dormitories;

(i) Separate toilet rooms for each sex;

(ii) Distinctly mark each room for "men" and for "women" by signs printed in English or marked with easily understood pictures or symbols; and

(iii) If the facilities for each sex are in the same building, separate rooms by solid walls or partitions extending from the floor to the roof or ceiling;

(e) Maintain facilities in a clean and sanitary condition;

(f) Determine required number of centralized toilets, handwashing sinks, and bathing facilities by:

(i) Using the maximum occupancy permitted and recorded on the permit as a base; and

(ii) Excluding from the determination the numbers of occupants sheltered in operator-supplied dwelling units containing toilets, handwashing sinks, and bathing facilities.

(g) Toilets, handwashing sinks, and bathing units in centralized toilet facilities:

(i) The number of toilets or privy seats shall be in the ratio of one such unit for each fifteen persons with a minimum of two units for any facility shared by men and women;

(ii) The number of handwashing basins shall be one per six persons;

(iii) The number of shower heads shall be one for every ten persons.

(h) Provide water flush toilets unless privies or other methods are specifically approved by the department or health officer according to requirements in chapter 246-272 WAC when approved, privies must be located at least one hundred feet from any sleeping room, dining room, lunch area, or kitchen; and

(i) Provide adequate, accessible supplies of toilet tissue and holders;

(j) Ensure that the toilet facilities are cleaned at least daily;

(k) Provide sloped floors;

(l) Provide coved floors of nonslip impervious materials;

(m) Provide cleanable, nonabsorbent waste containers; and

(n) Provide walls and partitions of shower rooms which are smooth and water impervious.

(3) The operator having toilet facilities in dwelling units shall:

(a) Provide a handwashing sink in each dwelling unit; and

(b) Inform occupants of requirements to maintain toilets in clean and sanitary condition.

(4) The operator shall connect handwashing sinks, bathing, and laundry facilities through properly trapped floor drains to an approved disposal system.

(5) The operator shall provide centralized laundry facilities convenient to temporary-worker housing as follows:

(a) One laundry tub or sink and one mechanical washing machine for up to and including each thirty occupants as approved and listed on the permit; or

(b) Additional mechanical washing machines may be provided but each laundry facility shall have at least one laundry sink or tub; or

(c) Two laundry tubs or sinks to replace every required mechanical washing machine; and

(d) Facilities for drying clothes.

[Statutory Authority: RCW 70.54.110, 92-04-082 (Order 242B), § 246-358-095, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-358-095, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-095, filed 5/2/88.]

WAC 246-358-105 Heating. The operator shall:

(1) Provide means of maintaining temperature of at least seventy degrees Fahrenheit in dwelling units, dormitories and bathing facilities used during periods requiring artificial heating;

(2) Install, vent, and maintain heating facilities to prevent fire hazard and fume concentrations;

(3) Avoid placing heating facilities in locations obstructing exits from the dwelling unit;

(4) Prohibit use of portable kerosene heaters; and

(5) If providing wood burning devices in manufactured homes, or recreational vehicles used as temporary-worker housing, the Washington state department of labor and industries insignia in accordance with chapter 43.22 RCW shall be displayed.

[Statutory Authority: RCW 70.54.110, 92-04-082 (Order 242B), § 246-358-105, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-358-105, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-105, filed 5/2/88.]

WAC 246-358-115 Lighting. The operator shall provide:

(1) A minimum of thirty foot-candles of light measured thirty inches from the floor in dwelling units and dormitories and twenty foot-candles of light measured thirty inches from the floor in the toilets facility; and

(2) Adequate outdoor lighting for safe passage within the temporary-worker housing area.

[Statutory Authority: RCW 70.54.110, 92-04-082 (Order 242B), § 246-358-115, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-358-115, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-115, filed 5/2/88.]

WAC 246-358-125 Cooking and foodhandling facilities. (1) The operator shall provide cooking or foodhandling facilities for all temporary workers housed by the operator.

(2) The operator providing cooking facilities in each dwelling unit shall include:

(a) An operable cook stove or hot plate with a minimum of two cooking surfaces for two occupants or four cooking surfaces for two to ten occupants or two families;

(b) A sink with running water under pressure;

(c) Food storage areas and food preparation counters which are off the floor;

(d) Individual or centralized mechanical refrigeration, capable of maintaining temperature of forty-five degrees Fahrenheit or below, which has space for storing perishable food items of all affected temporary workers;

(e) Tables and chairs or equivalent seating;

(f) Fire resistant, nonabsorbent, nonasbestos, and easily cleanable wall coverings adjacent to cooking areas; and

(g) Floors which are nonabsorbent and easily cleanable.

(3) The operator providing central foodhandling facilities for temporary workers shall:

(a) Meet requirements of the state board of health in chapter 246-215 WAC food service sanitation;

(b) Ensure that there are no direct openings from living or sleeping areas into the central foodhandling facility; and

(c) Provide fire-resistant, nonasbestos, nonabsorbent, and easily cleanable wall coverings adjacent to the cooking area.

(4) The operator with common foodhandling facilities shall provide:

(a) A room or building separate from and convenient to dwelling units;

(b) An operable cook stove or hot plate with a minimum of two cooking surfaces for two occupants or four cooking surfaces for two to ten occupants or two families;

(c) Sinks with hot and cold running water under pressure;

(d) Food storage areas and food preparation counters which are off the floor;

(e) Mechanical refrigeration, capable of maintaining temperatures of forty-five degrees Fahrenheit or below, which has space for storing perishable food items for all affected temporary workers and those who accompany them;

(f) Tables and chairs or equivalent seating;

(g) Fire-resistant, nonabsorbent, nonasbestos, and easily cleanable wall coverings adjacent to cooking areas; and

(h) Nonabsorbent, easily cleanable floors.

[Statutory Authority: RCW 70.54.110, 92-04-082 (Order 242B), § 246-358-125, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-358-125, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-125, filed 5/2/88.]

WAC 246-358-135 Beds and bedding. The operator shall:

(1) Provide beds or bunks furnished with clean mattresses in good condition for numbers of occupants specified on the permit;

(2) If choosing to provide bedding, ensure bedding is clean and maintained in a sanitary condition;

(3) Provide a minimum of twelve inches between each bed or bunk and the floor;

(4) If single beds are used;

(a) Separate single beds, in dormitories, laterally and end to end by at least thirty-six inches;

(b) Separate single beds, in housing units, laterally and end to end by at least thirty-six inches.

(5) If bunk beds are used:

(a) Separate double-deck bunks, in dormitories, laterally and end to end by at least forty-eight inches;

(b) Separate double-deck bunks, in housing units, laterally and end to end by at least forty-eight inches;

(c) Maintain a minimum space of twenty-seven inches between the upper and lower bunks; and

(d) Prohibit triple bunks.

(6) Provide storage facilities for clothing and personal articles in dwelling units or dormitories.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-135, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-135, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-135, filed 5/2/88.]

WAC 246-358-145 Health and safety provisions.

The operator shall:

(1) Provide two means of escape in every sleeping and eating area of temporary-worker housing (e.g., doors, windows);

(2) Meet requirements of Washington state fire marshal chapter 212-10 WAC for smoke detection devices;

(3) Prevent potential health, safety, and fire hazards by:

(a) Storing and using dangerous materials away from the temporary-worker housing; and

(b) Prohibiting:

(i) Storing flammables or volatile liquids or materials other than those intended for use in the housing unit or adjacent to temporary-worker housing; and

(ii) Storing or mixing pesticides or other toxic substances in temporary-worker housing other than those substances intended for occupant use in the dwelling unit.

(c) Providing readily accessible, available first-aid equipment meeting requirements of WAC 296-24-060 (Part A-1); and

(d) Provide a person trained in basic first aid and cardiopulmonary resuscitation (CPR) who is accessible to occupants of the temporary-workers housing;

(e) Storing unused refrigerator units to prevent harm to children (e.g., crushing, suffocation).

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-145, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-145, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-145, filed 5/2/88.]

WAC 246-358-155 Refuse disposal. The operator shall establish and maintain refuse disposal systems including:

(1) Protecting against rodent harborage, insect breeding, and other health hazards while storing, collecting, transporting, and disposing of refuse;

(2) Storing refuse in sound fly-tight, rodent-tight, impervious, and cleanable enclosed containers;

(3) Providing an accessible container if necessary on a wooden, metal, or concrete stand within one hundred feet of all dwelling units or dormitories;

(4) Emptying refuse containers when full at least twice every week, if possible, or more often if necessary;

(5) Removing refuse from temporary-worker housing areas; and

(6) Properly disposing of all refuse consistent with sanitation codes approved by the local jurisdiction.

(7) Whenever the camp is closed for the season or permanently, all garbage, manure, and other refuse shall be collected and so disposed of as to prevent a nuisance.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-155, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-155, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-155, filed 5/2/88.]

WAC 246-358-165 Rodent and insect control. The operator shall take appropriate measures to control rodents and insects in and around temporary-worker housing.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-165, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-165, filed 5/2/88.]

WAC 246-358-175 Disease prevention and control.

The operator shall:

(1) Make reasonable efforts to know if disease is present among occupants of temporary-worker housing;

(2) Report immediately the name(s) and address(es) of individuals suspected of having infectious or communicable diseases such as food poisoning or other unusual prevalence of fever, diarrhea, sore throat, vomiting, jaundice, productive cough, or weight loss among occupants of temporary-worker housing to the local health officer; and

(3) Assist temporary workers to obtain medical diagnosis and treatment when ill.

[Statutory Authority: RCW 70.54.110. 92-04-082 (Order 242B), § 246-358-175, filed 2/5/92, effective 3/7/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-358-175, filed 12/27/90, effective 1/31/91; 88-10-027 (Order 309), § 248-63-175, filed 5/2/88.]

WAC 246-358-990 Labor camp health and sanitation permit and survey fees. Starting December 1, 1987, owners or operators of labor camps, as defined in chapter 248-63 WAC, shall pay fees to the department as follows:

(1) A state health and sanitation permit of fifty dollars plus one dollar and fifty cents for each dwelling unit intended for occupancy by temporary workers.

(2) A labor camp survey charge of:

(a) Five dollars per dwelling unit up to and including twenty-nine units intended for occupancy by temporary workers, or

(b) One hundred fifty dollars for each camp with thirty or more dwelling units intended for occupancy by temporary workers.

(3) Owners or operators of labor camps shall submit the health and sanitation fee with initial application for permit or upon receipt of a renewal notice.

(4) Owners or operators of labor camps shall submit the labor camp survey fee:

(a) With initial application for new labor camps, or

(b) Within thirty days after the department completes each survey for existing labor camps.

(5) The department shall:

(a) Issue the health and sanitation permit for two calendar years, and

(b) Collect no more than one survey fee from each labor camp annually.

(6) Labor camps regulated by local health officers in accordance with WAC 248-63-020 are excluded from the requirements in this section.

[Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-358-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055, 87-24-074 (Order 2564), § 440-44-100, filed 12/2/87; 86-05-029 (Order 2342), § 440-44-100, filed 2/19/86.]

Chapter 246-360 WAC TRANSIENT ACCOMMODATIONS

WAC

246-360-001	Purpose.
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246-360-030	Supervision and responsibility.
246-360-040	Water supply and temperature control.
246-360-050	Sewage.
246-360-060	Swimming pools, spas, hot tubs, wading pools, bathing beaches.
246-360-070	Refuse and solid waste.
246-360-080	Construction and maintenance.
246-360-090	Lodging units.
246-360-100	Toilet, handwashing, and bathing facilities.
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246-360-120	Heating and cooling.
246-360-130	Lighting.
246-360-140	Ventilation.
246-360-150	Beds and bedding.
246-360-160	Food and beverage services.
246-360-170	Travel trailers and mobile homes.
246-360-180	Laundry.
246-360-190	Housekeeping equipment and procedures.
246-360-200	Safety, chemical, and physical hazards.
246-360-210	Separability.
246-360-990	Transient accommodations licensing and inspection fees.

WAC 246-360-001 Purpose. Chapter 246-360 WAC establishes the Washington state board of health minimum health and sanitation requirements for transient accommodations implementing chapter 70.62 RCW, to protect and promote the health and welfare of individuals using such accommodations. Chapter 246-360 WAC establishes uniform, statewide standards for maintenance and operation, including light, heat, ventilation, cleanliness, and sanitation. Any person operating a transient accommodation, as defined under RCW 70.62.210, shall have a current license for such accommodation from the department.

[Statutory Authority: RCW 70.62.240, 92-02-019 (Order 225B), § 246-360-001, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-360-001, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-010, filed 5/17/89; Order 71, § 248-144-010, filed 4/11/72.]

WAC 246-360-010 Definitions. (1) "Adequate" means sufficient to meet the intended purpose and consistent with accepted public health standards, principles, or practices.

(2) "Bathing facility" means a shower, bathtub, or combination bathtub shower.

(3) "Board" means the Washington state board of health established under chapter 43.20 RCW.

(4) "Compliance schedule" means a department-prepared document which lists both the violations and the time schedule the licensee shall follow in correcting the violations.

(5) "Department" means the Washington state department of health.

(6) "Dormitory" means any room, building, or part of a building containing beds, cots, pads, or other furnishings intended for sleeping and use by a number of individuals.

(7) "Exemption" means a written authorization from the department releasing a licensee from complying with a specific rule in this chapter or allowing an optional method for meeting a specific rule when the department determines the intent of chapter 70.62 RCW and this chapter is met and the health or safety of the guests will not be jeopardized.

(8) "Feasibility survey" means an on-site visit conducted by the department and the state office of fire protection to determine if a structure proposed for use as a transient accommodation meets or could meet the board's rules concerning transient accommodations and the rules of the state office of fire protection.

(9) "Gross floor area" means the total floor area within a lodging unit.

(10) "Guest" means any individual registering to occupy a lodging unit, excluding an individual provided the use of a lodging unit under RCW 70.54.110, New housing for agricultural workers to comply with board of health regulations.

(11) "Homeless shelter" means any facility offering sleeping and/or eating areas for individuals on a short-term, as-needed basis not to exceed one month; except, a medical, psychological, drug/alcohol facility, or a related service is not included.

(12) "Hostel" means a transient accommodation offering dormitory or lodging units and limited services for guests on a daily or weekly basis.

(13) "Imminent health hazard" means a condition or situation presenting a serious or life-threatening danger to a guest's health and safety.

(14) "Kitchen" means an area designed and equipped for guests to prepare and cook food.

(15) "Laundry" means an area or room equipped for the cleaning and drying of bedding, linen, towels, and other items provided to the guests.

(16) "Licensee" means any person required under chapter 70.62 RCW to have a transient accommodation license.

(17) "Local health officer" means the legally qualified physician appointed to that position by a city, town, county, or district public health department as authorized under chapters 70.05 and 70.08 RCW or the authorized representative.

(18) "Lodging unit" means one self-contained unit designated by number, letter, or other means of identification.

(19) "New construction" means:

(a) The building of any new transient accommodation; or

(b) Any construction of, or in, a building never licensed as a transient accommodation, if seeking licensure; or

(c) An addition or major structural alteration to an existing transient accommodation built or remodeled after the effective date of this chapter. Major structural alterations include construction intended to change the functional use of a unit, room, or area.

(20) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association, and the legal successor thereof.

(21) "Retreat" means a transient accommodation intended to provide seclusion, meditation, contemplation, religious activities, training, or similar activities.

(22) "Rustic resort" means a rural transient accommodation lacking many modern conveniences.

(23) "Sanitary" or "sanitize" means efforts to control or limit the presence of germs, bacteria, and dirt.

(24) "Secretary" means the secretary of the state department of health or authorized designee.

(25) "Self-contained unit" means an individual room or group of interconnected rooms intended for sleeping and/or cooking and/or eating purposes for rent or use by a guest.

(26) "Transient accommodation" means any facility, such as a hotel, motel, condominium, resort, or any other facility or place offering three or more lodging units to guests for periods of less than one month.

[Statutory Authority: RCW 70.62.240, 92-02-019 (Order 225B), § 246-360-010, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-360-010, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-020, filed 5/17/89; Order 71, § 248-144-020, filed 4/11/72.]

WAC 246-360-020 Licensing, administration, enforcement, exemption. (1) Licensees or prospective licensees shall:

(a) Complete and submit an application along with the appropriate fee at least thirty days before:

(i) Opening a new transient accommodation;

(ii) Adding new units to an existing transient accommodation; or

(iii) Changing the license of a transient accommodation.

(b) Request the department to complete a feasibility survey before applying for a license whenever an existing structure or property was not previously used or licensed as a transient accommodation;

(c) Secure a valid license issued by the department before initially opening and by January 1 each year thereafter;

(d) Submit a license renewal with the annual fee by December 10 of each year;

(e) Conspicuously display the license in the lobby or office;

(f) Comply with a plan of corrective action if issued by the department; and

(g) Allow the department to inspect the transient accommodation at any reasonable time.

(2)(a) Licensees may request, in writing, an exemption from the department if:

(i) The health and safety of the occupant is not jeopardized;

(ii) Strict enforcement of this chapter will create undue hardship for the licensee.

(b) Exemption decisions shall be treated as licensing decisions under subsection (5) of this section.

(3) Under chapter 70.62 RCW, the department shall have the authority to:

(a) Inspect transient accommodations including unoccupied lodging units:

(i) Annually;

(ii) As needed; and

(iii) Upon request.

(b) Issue licenses annually upon receipt of the appropriate fee;

(c) Issue a license for the person and premises named in the application when the applicant or licensee is in compliance with:

(i) Chapter 70.62 RCW and this chapter;

(ii) The rules and regulations of the state director of fire protection; and

(iii) All applicable local codes and ordinances.

(d) Respond within thirty days to application requests;

(e) Respond to complaints;

(f) Charge fees, authorized under chapters 43.20B and 70.62 RCW, to recover all or a portion of the costs of administering this chapter.

(4) The department shall have the authority to:

(a) Deny, revoke, or suspend the license of a transient accommodation which fails to comply with chapter 70.62 RCW and this chapter;

(b) Take one or more of the following enforcement actions:

(i) Notify the licensee of violations;

(ii) Establish a corrective action plan and compliance schedule;

(iii) Issue a department order;

(iv) Revoke or suspend the license; and/or

(v) Initiate legal action.

(c) Issue a provisional license when a transient accommodation does not meet the standards in this chapter under the following conditions:

(i) The department has approved a written correction action plan, including a compliance schedule; or

(ii) An application for change of licensure of an existing, currently licensed transient accommodation is pending; or

(iii) The licensee is awaiting the board's decision regarding an exemption request; or

(iv) The licensee is awaiting the final order in an adjudicative proceeding under chapter 34.05 RCW.

(d) Grant an exemption under subsection (2)(a)(i) and (ii) of this section.

(5)(a) The department's notice of a denial, suspension, modification, or revocation of a license or a request for an exemption under subsection (2) of this section shall be consistent with RCW 43.70.115. An applicant or license holder has the right to an adjudicative proceeding to contest the decision.

(b) A license applicant or holder contesting a department license or exemption decision shall within twenty-eight days of receipt of the decision:

(i) File a written application for an adjudicative proceeding by a method showing proof of receipt with the Administrative Hearings Unit, Department of Health, 1300 Quince Street S.E., P.O. Box 47851, Olympia, WA 98504-7851; and

(ii) Include in or with the application:

(A) A specific statement of the issue or issues and law involved;

(B) The grounds for contesting the department decision; and

(C) A copy of the contested department decision.

(c) The proceeding is governed by the Administrative Procedure Act (chapter 34.05 RCW), this chapter, and chapter 246-08 WAC. If a provision in this chapter conflicts

with chapter 246-08 WAC, the provision in this chapter governs.

[Statutory Authority: RCW 70.62.240. 92-02-019 (Order 225B), § 246-360-020, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-020, filed 12/27/90, effective 1/31/91. Statutory Authority: Chapter 34.05 RCW and RCW 42.20.050. 90-06-049 (Order 040), § 248-144-031, filed 3/2/90, effective 3/2/90. Statutory Authority: RCW 43.20.050. 89-11-058 (Order 328), § 248-144-031, filed 5/17/89.]

WAC 246-360-030 Supervision and responsibility. Licensees shall:

- (1) Comply with the requirements under chapter 70.62 RCW, Transient Accommodations—Licensing—Inspections, chapter 212-52 WAC, Transient Accommodations, Standards for Fire Protection, and this chapter;
- (2) Provide supervision of the employees so the transient accommodation facility is maintained:
 - (a) Clean, safe, and sanitary;
 - (b) In good repair; and
 - (c) Free from insects, rodents, and other pests.
- (3) Consult with the department or local health officer regarding any suspected imminent health hazard.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-030, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-041, filed 5/17/89.]

WAC 246-360-040 Water supply and temperature control. Licensees shall:

- (1) Provide a water supply system conforming to state board of health standards for public water systems, chapter 246-290 WAC;
- (2) Regulate hot water to a temperature of at least 110 degrees Fahrenheit, but not more than 130 degrees Fahrenheit;
- (3) When laundry facilities are present, maintain wash water temperature of at least 130 degrees Fahrenheit unless at least 110 degrees Fahrenheit water is used in combination with:
 - (a) An appropriate low temperature detergent and effective use of a chemical disinfectant; or
 - (b) An industrial-type washing machine with multiple rinse cycles.
- (4) Label nonpotable water supplies used for irrigation, fire protection, and/or other purposes at all accessible connections and valves.

[Statutory Authority: RCW 70.62.240. 92-02-019 (Order 225B), § 246-360-040, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-040, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-051, filed 5/17/89.]

WAC 246-360-050 Sewage. Licensees shall:

- (1) Ensure all liquid waste is discharged to a public sewage system or a disposal system approved under chapter 246-272 WAC;
- (2) Maintain the sewage disposal system to prevent creation of a nuisance or public health hazard; and
- (3) Ensure alterations, repairs, or replacement of a sewage disposal system are in compliance with requirements of the board and the local health officer.

[Statutory Authority: RCW 70.62.240. 92-02-019 (Order 225B), § 246-360-050, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-050, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-061, filed 5/17/89.]

WAC 246-360-060 Swimming pools, spas, hot tubs, wading pools, bathing beaches. Licensees shall comply with chapter 70.90 RCW governing the safety and sanitation of swimming pools, spas, hot tubs, wading pools, and bathing beaches.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-060, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-071, filed 5/17/89.]

WAC 246-360-070 Refuse and solid waste. Licensees shall:

- (1) Provide at least one washable, leakproof refuse container in each lodging unit;
- (2) Ensure all refuse is:
 - (a) Handled in a manner preventing unsanitary or unsafe conditions and nuisances;
 - (b) Collected at least twice a week or more often as necessary to maintain a clean and sanitary environment in lodging units and areas used by guests;
 - (c) Stored following collection in washable, leakproof, and covered containers outside the lodging units until removed for disposal; and
 - (d) Removed and disposed under applicable state and local ordinances.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-070, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-081, filed 5/17/89.]

WAC 246-360-080 Construction and maintenance. Licensees and prospective licensees shall ensure:

- (1) All new construction meets the requirements of:
 - (a) Chapter 70.62 RCW and this chapter as determined by the department;
 - (b) Chapter 19.27 RCW state building code; and
 - (c) All other applicable city and county codes and ordinances.
- (2) All buildings, facilities, fixtures, and furnishings are structurally sound, safe, clean, and sanitary.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-080, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-091, filed 5/17/89.]

WAC 246-360-090 Lodging units. Licensees shall provide lodging units with:

- (1) At least fifty square feet of gross floor area for each guest. The licensee shall exclude space with less than a five-foot ceiling when calculating this area requirement.
- (2) Beds or sleeping areas spaced according to the following requirements:
 - (a) An area adequate to move easily between beds, cots, mats, or mattresses; and
 - (b) A minimum of three feet of clear vertical space between each bed and the ceiling.
- (3) Floors and walls which are:
 - (a) Cleanable;
 - (b) Kept in good repair, and

(c) Cleaned as necessary.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-090, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-101, filed 5/17/89.]

WAC 246-360-100 Toilet, handwashing, and bathing facilities. (1) Licensees shall provide adequate toilet, handwashing, and bathing facilities for guests.

(2) Licensees shall:

(a) Maintain clean and sanitary toilets, handwashing sinks, and bathing facilities including the floors, walls, ceilings, and fixtures;

(b) Maintain an uncarpeted area around the toilet and adjacent to a bathtub and/or shower;

(c) Ensure all fixtures, drains, and bathing facilities are safe and work properly;

(d) Provide one toilet, handwashing sink, and bathing facility for every fifteen or fewer guests who do not have such facilities in their lodging unit;

(e) Provide for privacy in toilet and bathing facilities;

(f) Provide water flush toilets unless the department or a local health officer approved an alternative device;

(g) Provide handwashing sinks or equivalent facilities with acceptable single-use drying devices within, or adjacent to, each common toilet room;

(h) Provide and conveniently locate toilet tissue for each toilet;

(i) Provide soap for each handwashing and bathing facility;

(j) Provide clean towels, washcloths, and floor mats for guests between occupancies and at least twice a week for guests who stay longer than three days; and

(k) Assure clean towels, washcloths, and floor mats stored in lodging units are kept off the floor and in a clean area.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-100, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-111, filed 5/17/89.]

WAC 246-360-110 Lodging unit kitchens. (1) Licensees offering kitchens in lodging units shall provide each kitchen with:

(a) Clean and durable floors and walls;

(b) Adequate ventilation required under WAC 246-360-140;

(c) A sink, other than the handwashing sink, suitable for washing dishes;

(d) Hot running water under WAC 246-360-040;

(e) A refrigeration device capable of maintaining a temperature of 45 degrees Fahrenheit or lower;

(f) Cooking equipment acceptable to the state director of fire protection;

(g) A clean food storage area;

(h) Tables, counters, chairs, or equivalent; and

(i) A washable, leakproof waste food container.

(2) Licensees providing eating and/or cooking utensils shall provide guests with single-use disposable or multiple-use clean and sanitized utensils in good condition and free from cracks.

[Statutory Authority: RCW 70.62.240. 92-02-019 (Order 225B), § 246-360-110, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW

43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-110, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-121, filed 5/17/89.]

WAC 246-360-120 Heating and cooling. (1) Licensees shall provide a safe, adequate source of heat capable of maintaining an ambient air temperature of at least 65 degrees Fahrenheit in each lodging unit.

(2) Licensees providing a cooling system shall maintain a safe, clean, adequate system in good working condition.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-120, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-131, filed 5/17/89.]

WAC 246-360-130 Lighting. (1) Licensees shall provide a lighting system to maintain a minimum light intensity adequate for the guest's safety and cleaning by staff and measured in foot candles at a height of three feet above the floor as follows:

Toilet and Bathing Facilities	Lodging Unit 20 Foot Candles
Lodging Unit Kitchen	20 Foot Candles
Laundry Room Work Areas	30 Foot Candles
Corridors, Stairways, and Entryways	5 Foot Candles
Elevators, Walkways	5 Foot Candles
Swimming Pools	As required under chapter 248-98 WAC

(2) Licensees shall provide all parking lots and exterior passages with a minimum light intensity of two foot candles measured three feet above the ground.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-130, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-141, filed 5/17/89.]

WAC 246-360-140 Ventilation. (1) Licensees shall provide ventilation in all lodging units, kitchen areas, bathrooms, toilet rooms, and laundry rooms.

(2) Licensees providing only natural ventilation in lodging units shall have windows, vents, and/or ducts opening directly to the out-of-doors.

(3) Licensees providing only mechanical ventilation systems in lodging units shall:

(a) Install a system capable of supplying at least two air exchanges per hour to each lodging unit and all corridors; and

(b) Maintain a system circulating air to and from out-of-doors.

(4) Licensees providing only natural ventilation in kitchen areas, bathrooms, toilet rooms, and laundry rooms shall have windows, skylights, or ceiling vents opening directly to the out-of-doors sufficient to allow five air exchanges per hour.

(5) Licensees providing only mechanical ventilation in kitchen areas, bathrooms, toilet rooms, and laundry rooms shall:

(a) Install a system capable of at least five air exchanges per hour; and

(b) Maintain a system circulating air to and from the out-of-doors.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-140, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-151, filed 5/17/89.]

WAC 246-360-150 Beds and bedding. Licensees providing beds and/or bedding shall:

- (1) Provide clean, sanitary bedding in good repair;
- (2) Maintain clean and safe beds, cots, bunks, or other furniture for sleeping;
- (3) Supply each bed, cot, or bunk with a mattress or pad, top and bottom sheets, mattress pads, pillows and pillowcases, and blankets unless the facility is:
 - (a) A rustic resort;
 - (b) A homeless shelter; or
 - (c) A hostel.
- (4) Provide clean spreads, blankets, and mattress pads as needed;
- (5) Provide clean pillowcases and sheets for guests:
 - (a) Between occupancies; and
 - (b) At least twice a week for guests staying longer than three days.
- (6) Ensure clean bedding kept in the lodging units is stored off the floor and in a clean area.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-150, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-161, filed 5/17/89.]

WAC 246-360-160 Food and beverage services. (1) Licensees shall ensure food provided to guests is prepared and served under:

- (a) Chapter 246-215 WAC, state board of health standards for food service sanitation and local ordinances;
- (b) Chapter 246-217 WAC, state board of health standards for food and beverage service workers permits; and
- (c) Chapter 246-217 WAC, state board of health standards for food workers.

(2) Between guest occupancies, licensees providing multiple-use or reusable drinking glasses, cups, ice buckets, and other food utensils shall ensure the utilities are:

- (a) Washed and sanitized outside the lodging unit, toilet, or bathing facilities; or
- (b) Washed and sanitized in an approved lodging unit kitchen defined under WAC 246-360-110;
- (c) Handled and stored in a safe and sanitary manner;
- (d) Protected from contamination; and
- (e) Maintained in good repair.

(3) Licensees shall:

- (a) Ensure single-use drinking glasses, cups, ice buckets, and other food utensils are discarded after each guest occupancy;
- (b) Clean and sanitize ice machines at least twice a year and as needed;
- (c) Store and dispense ice provided for guests in a sanitary manner including sanitization of the ice scoop when used;
- (d) Control or eliminate the dispensing of unprotected bulk ice by January 1, 1995; and
- (e) Clean, maintain, and properly adjust drinking fountains.

[Statutory Authority: RCW 70.62.240. 92-02-019 (Order 225B), § 246-360-160, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-160, filed

12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-171, filed 5/17/89.]

WAC 246-360-170 Travel trailers and mobile homes. Licensees providing travel trailers and/or mobile homes as lodging units shall:

- (1) Comply with chapters 296-150A and 296-150B WAC rules and regulations of the department of labor and industries for factory-built housing, mobile homes, commercial coaches, and recreational vehicles; and
- (2) Ensure all travel trailers and mobile homes used as lodging units are connected to approved water, sewer, and electrical utilities.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-170, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-181, filed 5/17/89.]

WAC 246-360-180 Laundry. Licensees shall:

- (1) Provide a means for cleaning and sanitizing bedding, linens, towels, washcloths, and other items intended for guest use by:
 - (a) Maintaining a laundry under WAC 246-360-040 and 246-360-180; or
 - (b) Sending items to a commercial laundry or other laundry meeting requirements under WAC 246-360-040 and this section.

(2) Store the clean and sanitized bedding, linens, towels, washcloths, and other items:

- (a) In an area designated for clean items only;
- (b) Off the floor;
- (c) Protected from contamination; and
- (d) Without access to guests, pets, or other animals.

(3) Provide a means for handling, transporting, and separating soiled bedding, linens, towels, washcloths, and other items to prevent contamination of clean items.

[Statutory Authority: RCW 70.62.240. 92-02-019 (Order 225B), § 246-360-180, filed 12/23/91, effective 1/23/92. Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-180, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-191, filed 5/17/89.]

WAC 246-360-190 Housekeeping equipment and procedures. Licensees shall:

- (1) Establish policies and procedures requiring all employees cleaning and servicing lodging units and other units used by guests to:
 - (a) Exercise good personal hygiene; and
 - (b) Properly store and label all cleaning products.
- (2) Maintain all facilities in a sanitary and safe condition.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-360-190, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-201, filed 5/17/89.]

WAC 246-360-200 Safety, chemical, and physical hazards. Licensees shall:

- (1) Ensure all chemical agents, such as cleaners, solvents, disinfectants, and insecticides, except for small amounts of household cleaners stored in kitchen units, are:
 - (a) Kept isolated from guests;
 - (b) Stored to prevent contamination of clothing, towel-ing, and bedding materials; and

- (c) Used under the manufacturer's recommendations.
- (2) Provide adequate and safe handrailing for all stairways, porches, and balconies.
- (3) Ensure every gas-fired and oil-fired space heater and/or water heater is vented to the exterior of the building.
- (4) Eliminate known physical hazards.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-360-200, filed 12/27/90, effective 1/31/91; 89-11-058 (Order 328), § 248-144-211, filed 5/17/89.]

WAC 246-360-210 Separability. If any provision of these regulations or their application to any person is held invalid, the remainder of the regulations or the application of the provision to other persons or circumstances is not affected.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-360-210, filed 12/27/90, effective 1/31/91; Order 71, § 248-144-250, filed 4/11/72.]

WAC 246-360-990 Transient accommodations licensing and inspection fees. (1) The annual license and survey fee shall be:

Size of Facility (No. of Rooms)	License Fee
3 - 4	\$ 102
5 - 10	\$ 118
11 - 24	\$ 140
25 - 49	\$ 243
50 - 74	\$ 330
75 - 99	\$ 440
100 - 199	\$ 560
200 - 399	\$ 690
over 400	\$ 800

(2) The fee for new facilities constructed during the year shall be prorated as shown below based upon the date of application.

(3) The fee for a change in ownership or name of a facility shall be fifty dollars.

Size of Facility (No. of Rooms)	Prorated License Fee											
	J	F	M	A	M	J	J	A	S	O	N	D
3 - 4	102	94	85	77	68	60	51	43	34	26	17	9
5 - 10	118	109	99	89	79	69	60	50	40	30	20	10
11 - 24	140	128	117	105	93	82	70	58	47	35	23	12
25 - 49	243	222	202	182	162	141	121	101	81	61	40	20
50 - 74	330	303	275	248	220	193	165	138	110	83	55	28
75 - 99	440	404	367	330	294	257	220	184	147	110	74	37
100 - 199	560	514	467	420	374	327	280	234	187	140	94	47
200 - 399	690	633	575	518	460	403	345	288	230	173	115	58
over 400	800	734	667	600	534	467	400	334	267	200	134	67

(4) Persons planning to convert an existing structure to a transient accommodation shall:

(a) Request a feasibility survey by the department to determine modifications required to meet chapter 246-360 WAC, and

(b) Pay a nonrefundable fee of one hundred dollars for the department conducted feasibility survey.

(5) Licenses not renewed by January fifteenth of each calendar year shall be considered past due. The department shall charge a late fee of twenty-five dollars for each two months a license is past due.

(6) For transient accommodations in noncompliance with chapter 246-360 WAC, there shall be a one hundred fifty dollar fee assessed for the third survey and three hundred dollars for each additional survey in any calendar year.

[Statutory Authority: RCW 70.62.220, 70.62.230 and 43.70.250, 92-21-089 (Order 312), § 246-360-990, filed 10/21/92, effective 11/21/92. Statutory Authority: RCW 43.70.040, 91-02-049 (Order 121), recodified as § 246-360-990, filed 12/27/90, effective 1/31/91. Statutory Authority: RCW 43.20A.055, 87-17-045 (Order 2524), § 440-44-075, filed 8/17/87; 85-12-029 (Order 2236), § 440-44-075, filed 5/31/85. Statutory Authority: 1982 c 201, 82-13-011 (Order 1825), § 440-44-075, filed 6/4/82.]

Chapter 246-366 WAC

PRIMARY AND SECONDARY SCHOOLS

WAC

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246-366-010	Definitions.
246-366-020	Substitutions.
246-366-030	Site approval.
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246-366-050	Buildings.
246-366-060	Plumbing, water supply and fixtures.
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246-366-110	Sound control.
246-366-120	Lighting.
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246-366-150	Exemption.

WAC 246-366-001 Introduction. These rules and regulations are established as minimum environmental standards for educational facilities and do not necessarily reflect optimum standards for facility planning and operation.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-366-001, filed 12/27/90, effective 1/31/91; Order 55, § 248-64-210, filed 6/8/71.]

WAC 246-366-010 Definitions. The following definitions shall apply in the interpretation and the enforcement of these rules and regulations:

(1) "School" - Shall mean any publicly financed or private or parochial school or facility used for the purpose of school instruction, from the kindergarten through twelfth grade. This definition does not include a private residence in which parents teach their own natural or legally adopted children.

(2) "Board of education" - An appointive or elective board whose primary responsibility is to operate public or private or parochial schools or to contract for school services.

(3) "Instructional areas" - Space intended or used for instructional purposes.

(4) "New construction" - Shall include the following:

(a) New school building.

(b) Additions to existing schools.

(c) Renovation, other than minor repair, of existing schools.

(d) Schools established in all or part of any existing structures, previously designed or utilized for other purposes.

(e) Installation or alteration of any equipment or systems, subject to these regulations, in schools.

(f) Portables constructed after the effective date of these regulations.

(5) "Occupied zone" - Is that volume of space from the floor to 6 feet above the floor when determining temperature and air movement, exclusive of the 3 foot perimeter on the outside wall.

(6) "Site" - Shall include the areas used for buildings, playgrounds and other school functions.

(7) "Portables" - Any structure that is transported to a school site where it is placed or assembled for use as part of a school facility.

(8) "Health officer" - Legally qualified physician who has been appointed as the health officer for the city, town, county or district public health department as defined in RCW 70.05.010(2), or his authorized representative.

(9) "Secretary" - Means secretary of the Washington state department of health or the secretary's designee.

(10) "Department" - Means Washington state department of health.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-366-010, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-366-010, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-220, filed 3/9/82; Order 131, § 248-64-220, filed 8/5/76; Order 55, § 248-64-220, filed 6/8/71.]

WAC 246-366-020 Substitutions. The secretary may allow the substitution of procedures or equipment for those outlined in these regulations, when such procedures or equipment have been demonstrated to be equivalent to those heretofore prescribed. When the secretary judges that such substitutions are justified, he shall grant permission for the substitution in writing. Requests for substitution shall be directed to the jurisdictional health officer who shall immediately forward them, including his recommendations, to the secretary. All decisions, substitutions, or interpretations shall be made a matter of public record and open to inspection.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-020, filed 12/27/90, effective 1/31/91; Order 55, § 248-64-230, filed 6/8/71.]

WAC 246-366-030 Site approval. (1) Before a new school facility is constructed, an addition is made to an existing school facility, or an existing school facility is remodeled, the board of education shall obtain written approval from the health officer that the proposed development site presents no health problems. The board of education may request the health officer make a survey and submit a written health appraisal of any proposed school site.

(2) School sites shall be of a size sufficient to provide for the health and safety of the school enrollment.

(3) Noise from any source at a proposed site for a new school, an addition to an existing school, or a portable classroom shall not exceed an hourly average of 55 dBA (Leq 60 minutes) and shall not exceed an hourly maximum (Lmax) of 75 dBA during the time of day the school is in session; except sites exceeding these sound levels are acceptable if a plan for sound reduction is included in the new construction proposal and the plan for sound reduction is approved by the health officer.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-030, filed 12/27/90, effective 1/31/91; 89-20-026 (Order 333), § 248-64-240, filed 9/28/89, effective 10/29/89; Order 88, § 248-64-240, filed 10/3/73; Order 55, § 248-64-240, filed 6/8/71.]

WAC 246-366-040 Plan review and inspection of schools. (1) Any board of education, before constructing a new facility, or making any addition to or major alteration of an existing facility or any of the utilities connected with the facility, shall:

(a) First submit final plans and specifications of such buildings or changes to the jurisdictional health officer;

(b) Shall obtain the health officer's recommendations and any required changes, in writing;

(c) Shall obtain written approval from the health officer, to the effect that such plans and specifications comply with these rules and regulations.

(2) The health officer shall:

(a) Conduct a preoccupancy inspection of new construction to determine its conformity with the approved plans and specifications.

(b) Make periodic inspections of each existing school within his jurisdiction, and forward to the board of education and the administrator of the inspected school a copy of his findings together with any required changes and recommendations.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-040, filed 12/27/90, effective 1/31/91; Order 55, § 248-64-250, filed 6/8/71.]

WAC 246-366-050 Buildings. (1) Buildings shall be kept clean and in good repair.

(2) Instructional areas shall have a minimum average ceiling height of 8 feet. Ceiling height shall be the clear vertical distance from the finished floor to the finished ceiling. No projections from the finished ceiling shall be less than 7 feet vertical distance from the finished floor, e.g., beams, lighting fixtures, sprinklers, pipe work.

(3) All stairway[s] and steps shall have handrails and nonslip treads.

(4) The floors shall have an easily cleanable surface.

(5) The premises and all buildings shall be free of insects and rodents of public health significance and conditions which attract, provide harborage and promote propagation of vermin.

(6) All poisonous compounds shall be easily identified, used with extreme caution and stored in such a manner as to prevent unauthorized use or possible contamination of food and drink.

(7) There shall be sufficient space provided for the storage of outdoor clothing, play equipment and instructional equipment. The space shall be easily accessible, well lighted, heated and ventilated.

(8) Schools shall be provided with windows sufficient in number, size and location to permit students to see to the outside. Windows are optional in special purpose instructional areas including, but not limited to, little theaters, music areas, multipurpose areas, gymnasiums, auditoriums, shops, libraries and seminar areas. No student shall occupy an instructional area without windows more than 50 percent of the school day.

(9) Exterior sun control shall be provided to exclude direct sunlight from window areas and skylights of instructional areas, assembly rooms and meeting rooms during at least 80 percent of the normal school hours. Each area shall be considered as an individual case. Sun control is not required for sun angles less than 42 degrees up from the horizontal. Exterior sun control is not required if air conditioning is provided, or special glass installed having a total solar energy transmission factor less than 60 percent.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-050, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-260, filed 3/9/82; 79-08-078 (Order 183), § 248-64-260, filed 7/26/79; Order 124, § 248-64-260, filed 3/18/76; Order 55, § 248-64-260, filed 6/8/71.]

WAC 246-366-060 Plumbing, water supply and fixtures. (1) Plumbing: Plumbing shall be sized, installed, and maintained in accordance with the state building code. However, local code requirements shall prevail, when these requirements are more stringent or in excess of the state building code.

(2) Water supply: The water supply system for a school shall be designed, constructed, maintained and operated in accordance with chapter 246-290 WAC.

(3) Toilet and handwashing facilities.

(a) Adequate, conveniently located toilet and handwashing facilities shall be provided for students and employees. At handwashing facilities soap and single-service towels shall be provided. Common use towels are prohibited. Warm air dryers may be used in place of single-service towels. Toilet paper shall be available, conveniently located adjacent to each toilet fixture.

(b) The number of toilet and handwashing fixtures in schools established in existing structures, previously designed or utilized for other purposes shall be in accordance with the state building code. However, local code requirements shall prevail, when these requirements are more stringent or in excess of the state building code.

(c) Toilet and handwashing facilities must be accessible for use during school hours and scheduled events.

(d) Handwashing facilities shall be provided with hot water at a maximum temperature of 120 degrees Fahrenheit. If hand operated self-closing faucets are used, they must be of a metering type capable of providing at least ten seconds of running water.

(4) Showers:

(a) Showers shall be provided for classes in physical education, at grades 9 and above. An automatically controlled hot water supply of 100 to 120 degrees Fahrenheit shall be provided. Showers with cold water only shall not be permitted.

(b) Drying areas, if provided, shall be adjacent to the showers and adjacent to locker rooms. Shower and drying areas shall have water impervious nonskid floors. Walls shall be water impervious up to showerhead heights. Upper walls and ceiling shall be of smooth, easily washable construction.

(c) Locker and/or dressing room floors shall have a water impervious surface. Walls shall have a washable surface. In new construction, floor drains shall be provided in locker and dressing areas.

(d) If towels are supplied by the school, they shall be for individual use only and shall be laundered after each use.

Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-366-060, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-366-060, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-270, filed 3/9/82; 79-08-078 (Order 183), § 248-64-270, filed 7/26/79; Order 124, § 248-64-270, filed 3/18/76; Order 55, § 248-64-270, filed 6/8/71.]

WAC 246-366-070 Sewage disposal. All sewage and waste water from a school shall be drained to a sewerage disposal system which is approved by the jurisdictional agency. On-site sewage disposal systems shall be designed, constructed and maintained in accordance with chapters 246-272 and 173-240 WAC.

[Statutory Authority: RCW 43.20.050. 92-02-019 (Order 225B), § 246-366-070, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-366-070, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-280, filed 3/9/82; Order 55, § 248-64-280, filed 6/8/71.]

WAC 246-366-080 Ventilation. (1) All rooms used by students or staff shall be kept reasonably free of all objectionable odor, excessive heat or condensation.

(2) All sources producing air contaminants of public health importance shall be controlled by the provision and maintenance of local mechanical exhaust ventilation systems as approved by the health officer.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-080, filed 12/27/90, effective 1/31/91; 80-03-044 (Order 192), § 248-64-290, filed 2/20/80; 79-08-078 (Order 183), § 248-64-290, filed 7/26/79; Order 124, § 248-64-290, filed 3/18/76; Order 88, § 248-64-290, filed 10/3/73; Order 75, § 248-64-290, filed 7/11/72; Order 55, § 248-64-290, filed 6/8/71.]

WAC 246-366-090 Heating. The entire facility inhabited by students and employees shall be heated during school hours to maintain a minimum temperature of 65 degrees Fahrenheit except for gymnasiums which shall be maintained at a minimum temperature of 60 degrees Fahrenheit.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-090, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-300, filed 3/9/82; Order 55, § 248-64-300, filed 6/8/71.]

WAC 246-366-100 Temperature control. Heating, ventilating and/or air conditioning systems shall be equipped with automatic room temperature controls.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-100, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-310, filed 3/9/82; Order 55, § 248-64-310, filed 6/8/71.]

WAC 246-366-110 Sound control. (1) In new construction, plans submitted under WAC 246-366-040 shall specify ventilation equipment and other mechanical noise sources in classrooms are designed to provide background sound which conforms to a noise criterion curve or equivalent not to exceed NC-35. The owner shall certify equipment and features are installed according to the approved plans.

(2) In new construction, the actual background noise at any student location within the classroom shall not exceed 45 dBA (Leq) and 70 dB (Leq) (unweighted scale) where

x is thirty seconds or more. The health officer shall determine compliance with this section when the ventilation system and the ventilation system's noise generating components, e.g., condenser, heat pump, etc., are in operation.

(3) Existing portable classrooms, constructed before January 1, 1990, moved from one site to another on the same school property or within the same school district are exempt from the requirements of this section if the portable classrooms meet the following:

(a) Noise abating or noise generating features shall not be altered in a manner that may increase noise levels;

(b) The portable classrooms were previously in use for general instruction;

(c) Ownership of the portable classrooms will remain the same; and

(d) The new site is in compliance with WAC 246-366-030(3).

(4) In new construction, the maximum ambient noise level in industrial arts, vocational agriculture and trade, and industrial classrooms shall not exceed 65 dBA when all fume and dust exhaust systems are operating.

(5) The maximum noise exposure for students in vocational education and music areas shall not exceed the levels specified in Table 1.

TABLE 1
MAXIMUM NOISE EXPOSURES PERMISSIBLE

Duration per day (hours)	Sound Level (dBA)
8 hours	85
6 hours	87
4 hours	90
3 hours	92
2 hours	95
1-1/2 hours	97
1 hour	100
1/2 hour	105
1/4 hour	110

Students shall not be exposed to sound levels equal to or greater than 115 dBA.

(6) Should the total noise exposure in vocational education and music areas exceed the levels specified in Table 1 of subsection (5) of this section, hearing protectors, e.g., ear plugs, muffs, etc., shall be provided to and used by the exposed students. Hearing protectors shall reduce student noise exposure to comply with the levels specified in Table 1 of subsection (5) of this section.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-366-110, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-366-110, filed 12/27/90, effective 1/31/91; 89-20-026 (Order 333), § 248-64-320, filed 9/28/89, effective 10/29/89; Order 124, § 248-64-320, filed 3/18/76; Order 88, § 248-64-320, filed 10/3/73; Order 55, § 248-64-320, filed 6/8/71.]

WAC 246-366-120 Lighting. (1) The following maintained light intensities shall be provided as measured 30 inches above the floor or on working or teaching surfaces. General, task and/or natural lighting may be used to maintain the minimum lighting intensities.

	Minimum Foot - candle Intensity
General instructional areas including: Study halls, lecture rooms and libraries.	30
Special instructional areas where safety is of prime consideration or fine detail work is done including: Sewing rooms, laboratories (includes chemical storage areas), shops, drafting rooms and art and craft rooms.	50
Kitchen areas including: Food storage and preparation rooms.	30
Noninstructional areas including: Auditoriums, lunch rooms, assembly rooms, corridors, stairs, store-rooms, and toilet rooms.	10
Gymnasiums: Main and auxiliary spaces, shower rooms and locker rooms.	20

(2) Excessive brightness and glare shall be controlled in all instructional areas. Surface contrasts and direct or indirect glare shall not cause excessive eye accommodation or eye strain problems.

(3) Lighting shall be provided in a manner which minimizes shadows and other lighting deficiencies on work and teaching surfaces.

[Statutory Authority: RCW 43.20.050, 91-02-051 (Order 124B), recodified as § 246-366-120, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-330, filed 3/9/82; Order 124, § 248-64-330, filed 3/18/76; Order 55, § 248-64-330, filed 6/8/71.]

WAC 246-366-130 Food handling. (1) Food storage, preparation, and service facilities shall be constructed and maintained and operated in accordance with chapters 246-215 and 246-217 WAC.

(2) When central kitchens are used, food shall be transported in tightly covered containers. Only closed vehicles shall be used in transporting foods from central kitchens to other schools.

[Statutory Authority: RCW 43.20.050, 92-02-019 (Order 225B), § 246-366-130, filed 12/23/91, effective 1/23/92; 91-02-051 (Order 124B), recodified as § 246-366-130, filed 12/27/90, effective 1/31/91; Order 55, § 248-64-340, filed 6/8/71.]

WAC 246-366-140 Safety. (1) The existence of unsafe conditions which present a potential hazard to occupants of the school are in violation of these regulations. The secretary in cooperation with the state superintendent of public instruction shall review potentially hazardous conditions in schools which are in violation of good safety practice, especially in laboratories, industrial arts and vocational instructional areas. They shall jointly prepare a guide for use by department personnel during routine school inspections in identifying violations of good safety practices. The guide should also include recommendations for safe facilities and safety practices.

(2) In new construction, chemistry laboratories shall be provided with an eyewash fountain and a shower head for

flushing in cases of chemical spill and clothing fires. If more than one laboratory is provided, one of each fixture will be adequate if the laboratories are in close proximity.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-140, filed 12/27/90, effective 1/31/91; Order 55, § 248-64-350, filed 6/8/71.]

WAC 246-366-150 Exemption. The board of health may, at its discretion, exempt a school from complying 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 placing the health or safety of the students or staff of the school in danger and that strict enforcement of the regulation would create an undue hardship upon the school.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-366-150, filed 12/27/90, effective 1/31/91; 82-07-015 (Order 225), § 248-64-360, filed 3/9/82; Order 55, § 248-64-360, filed 6/8/71.]

Chapter 246-374 WAC OUTDOOR MUSIC FESTIVALS

WAC

246-374-001	Purpose.
246-374-010	Definitions.
246-374-030	Submission of plans.
246-374-040	Site.
246-374-050	Water supply.
246-374-060	Sewage disposal.
246-374-070	Toilet facilities.
246-374-080	Solid waste.
246-374-090	Insect and rodent control.
246-374-100	Food service.
246-374-110	Dust control.
246-374-120	Lighting.
246-374-130	Bathing areas.
246-374-140	General.

WAC 246-374-001 Purpose. The following rules and regulations are established as the minimum sanitation requirements for outdoor music festivals, in accordance with chapter 302, Laws of 1971 ex. sess.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-374-001, filed 12/27/90, effective 1/31/91; Order 59, § 248-73-010, filed 8/16/71.]

WAC 246-374-010 Definitions. (1) "Outdoor music festival" or "music festival" or "festival" means an assembly of persons gathered primarily for outdoor, live, or recorded music entertainment, where the predicted attendance is 2,000 or more and where the duration of the program is five hours or longer: *Provided*, That this definition shall not be applied to any regularly established permanent place of worship, athletic stadium, athletic field, arena, auditorium, coliseum, or other similar permanently established places of assemblies which do not exceed by more than 250 people the maximum seating capacity of the structure where the assembly is held: *Provided further*, That this definition shall not apply to government sponsored fairs held on regularly established fairgrounds nor to assemblies required to be licensed under other laws or regulations of the state.

(2) "Local health officer" means the legally qualified physician who has been appointed as the health officer of the

city, town, county or district public health department as defined in RCW 70.05.010(2), or his authorized representative.

(3) "Applicant" means the promoter who has the right of control of the conduct of an outdoor music festival who applies to the appropriate legislative authority for a license to hold an outdoor music festival.

(4) "Issuing authority" means the legislative body of the local governmental unit where the site for an outdoor music festival is located.

[Statutory Authority: RCW 43.20.050. 91-02-051 (Order 124B), recodified as § 246-374-010, filed 12/27/90, effective 1/31/91; Order 59, § 248-73-020, filed 8/16/71.]

WAC 246-374-030 Submission of plans. The applicant shall submit plans for site and development to the local health officer not less than 30 days prior to the time the applicant must file his application with the issuing authority. The plan shall include the name of the festival, its physical location, dates of operation, the name, address and phone number of the applicant, a list of other individuals responsible for all phases of construction and operation, and shall include the following information:

- (1) Projected attendance at the outdoor music festival.
 - (a) Maximum day attendance.
 - (b) Maximum overnight attendance.
 - (c) Total attendance for the duration of the festival.
- (2) Site characteristics:
 - (a) The area, dimensions, legal description and ownership of the tract of land.
 - (b) Physical characteristics of the site, including but not limited to bodies of water, existing structures, topographical data, current land use of site and contiguous property.
 - (c) Location, and the width of all offsite access roads and onsite service roads.
 - (d) Location of facilities including parking, camping sites, food concessions, medical services, entertainment area, water source and distribution system, sewage disposal, solid waste collection and disposal, bathing areas, communication facilities and administrative accommodations.
- (3) Method and design of water supply and distribution system.
- (4) Method and design of sewage and waste water collection and disposal systems.
- (5) Method and design of toilet facilities, their number and location.
- (6) Method of solid waste collection and disposal, including number and location of containers.
- (7) Method of insect and rodent control.
- (8) Design of food service facilities and information including source, storage, preparation and types of foods.
- (9) Design and location of all facilities providing shelter including overnight accommodations for festival patrons.
- (10) Method of dust control.
- (11) Plan of electrical service, including type, location and number of lighting fixtures, communications facilities and electrical outlets.
- (12) Description of bathing areas and facilities.
- (13) Transportation and facilities for emergency medical service.