WSR 26-02-045
PERMANENT RULES
DEPARTMENT OF
SOCIAL AND HEALTH SERVICES
(Home and Community Living Administration)
[Filed January 2, 2026, 12:30 p.m., effective February 2, 2026]

Effective Date of Rule: Thirty-one days after filing.

Purpose: The adopted rules implement SHB 1218 (chapter 159, Laws of 2021). Amending WAC 388-78A-2700 Emergency and disaster preparedness, 388-97-1740 Disaster and emergency preparedness, and 388-107-1600 Emergency disaster preparedness. These rules were originally proposed under WSR 25-10-071 with a number of other new rules and amendments, which the department of social and health services (department) previously adopted under WSR 25-16-099. The department had decided not to proceed with these sections at that time.

Citation of Rules Affected by this Order: Amending WAC 388-78A-2700, 388-97-1740, and 388-107-1600.

Statutory Authority for Adoption: RCW 18.20.090, 18.51.070, 70.97.230, and chapters 70.129 and 74.42 RCW.

Other Authority: Chapter 74.39 RCW.

Adopted under notice filed as WSR 25-21-132 on October 21, 2025.

A final cost-benefit analysis is available by contacting Colleen Jensen, P.O. Box 45600, Olympia, WA 98504, phone 360-725-2300, TTY 711 relay services, email rcspolicy@dshs.wa.gov.

Number of Sections Adopted in Order to Comply with Federal Statute: New 0, Amended 0, Repealed 0; Federal Rules or Standards: New 0, Amended 0, Repealed 0; or Recently Enacted State Statutes: New 0, Amended 3, Repealed 0.

Number of Sections Adopted at the Request of a Nongovernmental Entity: New 0, Amended 0, Repealed 0.

Number of Sections Adopted on the Agency's own Initiative: New 0, Amended 0, Repealed 0.

Number of Sections Adopted in Order to Clarify, Streamline, or Reform Agency Procedures: New 0, Amended 0, Repealed 0.

Number of Sections Adopted using Negotiated Rule Making: New 0, Amended 3, Repealed 0; Pilot Rule Making: New 0, Amended 0, Repealed 0; or Other Alternative Rule Making: New 0, Amended 0, Repealed 0.

Date Adopted: January 2, 2026.

Katherine I. Vasquez
Rules Coordinator

SHS-5114.1

AMENDATORY SECTION (Amending WSR 20-02-104, filed 12/31/19, effective 1/31/20)

WAC 388-78A-2700 Emergency and disaster preparedness. (1) The assisted living facility must:

(a) Maintain the premises free of hazards;

(b) Maintain any vehicles used for transporting residents in a safe condition;

(c) Provide, and tell staff persons of a means of emergency access to resident-occupied bedrooms, toilet rooms, bathing rooms, and other rooms;

(d) Provide emergency lighting or flashlights in all areas accessible to residents of the assisted living facility((~~.~~));

(e) Make sure first-aid supplies are:

(i) Readily available and not locked;

(ii) Clearly marked;

(iii) Able to be moved to the location where needed; and

(iv) Stored in containers that protect them from damage, deterioration, or contamination.

(f) Make sure first-aid supplies are appropriate for:

(i) The size of the assisted living facility;

(ii) The services provided;

(iii) The residents served; and

(iv) The response time of emergency medical services.

((~~(g) Develop~~)) (2) The assisted living facility must develop and maintain a ((~~current disaster plan describing~~)) written emergency preparedness plan that describes measures to take in the event of ((~~internal or external~~)) emergencies or disasters, including, but not limited to:

((~~(i) On-duty staff persons' responsibilities;~~

~~(ii) Provisions for summoning emergency assistance;~~

~~(iii) Coordination with first responders regarding plans for evacuating residents from area or building;~~

~~(iv) Alternative resident accommodations;~~

~~(v) Provisions for essential resident needs, supplies and equipment including water, food, and medications; and~~

~~(vi) Emergency communication plan.~~))

(a) Fires;

(b) Earthquakes;

(c) Floods;

(d) Infectious disease outbreaks;

(e) Loss of power or water; and

(f) Other events that may require sheltering in place, evacuations, or other emergency measures to protect the health and safety of residents.

(3) The assisted living facility's emergency preparedness plan must include procedures for:

(a) Staff roles and responsibilities;

(b) Identifying and locating residents;

(c) Summoning emergency assistance and coordinating with first responders;

(d) Communicating emergency information to staff and residents as well as external partners, including emergency contacts for residents, state and local agencies, developmental disability ombuds, and long-term care ombuds;

(e) How resident care and treatment needs will be maintained;

(f) Provision of essential resident needs and supplies, including water, food, medications, and personal care items; and

(g) Alternative resident accommodations.

(4) The assisted living facility must incorporate infection prevention and control capability into its emergency preparedness plan. At minimum, the plan must:

(a) Include procedures for the procurement, inventory, tracking, safe storage, and rotation of personal protective equipment to ensure

supplies remain within manufacturer recommended shelf life and are available for use; and

(b) Describe how the facility will ensure adequate staffing and implement isolation or cohorting procedures during an infectious disease emergency.

(5) In addition to the plan requirements, the assisted living facility must:

(a) Maintain an adequate supply of personal protective equipment appropriate to the facility size and resident population, including, but not limited to: gloves, gowns, surgical masks, eye protection, and NIOSH-approved respirators;

(b) Train all employees in the comprehensive emergency preparedness plan and staff procedures upon hire and reviewed annually thereafter;

(c) Review the comprehensive emergency preparedness plan and procedures and update at least annually;

(d) Communicate the location of the emergency preparedness plan to residents and staff to ensure access as needed during emergencies; and

(e) Comply with WAC 388-78A-3140.

AMENDATORY SECTION (Amending WSR 24-07-008, filed 3/7/24, effective 4/7/24)

WAC 388-97-1740 Disaster and emergency preparedness. The department amended or suspended portions of this section from June 23, 2020, through June 7, 2022, in response to the state of emergency related to the COVID-19 pandemic. For requirements in place during that time, see WAC 388-97-17401.

(1) The nursing home must develop and implement detailed written plans and procedures to meet potential emergencies and disasters. At a minimum the nursing home must ensure these plans provide for:

(a) Fire or smoke;

(b) Flood;

(c) Severe weather;

((~~(e)~~)) (d) Loss of power or water;

((~~(d)~~)) (e) Earthquake;

((~~(e)~~)) (f) Explosion;

((~~(f)~~)) (g) Missing resident, elopement;

((~~(g)~~)) (h) Loss of normal water supply;

((~~(h)~~)) (i) Bomb threats;

((~~(i)~~)) (j) Armed individuals;

((~~(j)~~)) (k) Gas leak, or loss of service; ((~~and~~))

((~~(k)~~)) (l) Loss of heat supply((~~.~~));

(m) Infectious disease outbreak; and

(n) Any other events that may require sheltering in place, evacuations, or other emergency measures to protect the health and safety of residents.

(2) The nursing home emergency preparedness plan must ((~~train all employees in emergency procedures when they begin work in the nursing home, periodically review emergency procedures with existing staff, and carry out unannounced staff drills using those procedures.~~)):

(a) Be developed and maintained with the assistance of qualified fire, safety, and other appropriate experts as necessary;

(b) Include procedures for:

(i) Staff roles and responsibilities;

(ii) Accounting for residents;

(iii) Summoning emergency assistance and coordinating with first responders;

(iv) Plans for evacuation of the facility;

(v) Communicating emergency information to staff and residents as well as external partners, including emergency contacts for residents, state and local agencies, developmental disability ombuds, and long-term care ombuds;

(vi) How resident care and treatment needs will be maintained; and

(vii) Provision of essential resident needs and supplies, including water, food, medications, and personal care items.

(3) The nursing home must ((~~ensure emergency plans:~~)) incorporate infection prevention and control capabilities into its emergency preparedness plan. At a minimum, the plan must:

((~~(a) Are developed and maintained with the assistance of qualified fire, safety, and other appropriate experts as necessary;~~

~~(b) Are reviewed annually; and~~

~~(c) Include evacuation routes prominently posted on each unit.~~))

(a) Include procedures for the procurement, inventory, tracking, safe storage, and rotation of personal protective equipment to ensure supplies remain within manufacturer recommended shelf life and are available for use; and

(b) Describe how the facility will ensure adequate staffing and implement isolation or cohorting procedures during an infectious disease emergency.

(4) In addition to the plan requirements, the nursing home must:

(a) Maintain an adequate supply of personal protective equipment appropriate to the facility size and resident population, including, but not limited to: gloves, gowns, surgical masks, eye protection, and NIOSH-approved respirators;

(b) Train all employees in emergency procedures when they begin work in the nursing home, review emergency procedures with existing staff at least annually, and carry out unannounced staff drills using those procedures;

(c) Review and update the comprehensive emergency preparedness plan and procedures at least annually;

(d) Communicate the location of the emergency preparedness plan to residents and staff to ensure access as needed during emergencies;

(e) Prominently post evacuation route(s) throughout the facility, and at minimum on every floor, if applicable; and

(f) Comply with WAC 388-97-4360.

AMENDATORY SECTION (Amending WSR 14-19-071, filed 9/12/14, effective 10/13/14)

WAC 388-107-1600 Emergency disaster plan. (1) The enhanced services facility must develop and implement detailed written plans and procedures to meet potential emergencies and disasters. At a minimum, the enhanced services facility must ensure these plans provide for:

(a) Fire or smoke;

(b) Severe weather;

(c) Loss of power;

(d) Earthquakes;
(e) Explosion;
(f) Missing resident, elopement;
(g) Loss of normal water supply;
(h) Bomb threats;
(i) Armed individuals;
(j) Gas leak, or loss of service;
(k) Loss of heat supply;
(l) Floods;
((~~Accounting for residents during a disaster~~)) (m) Infectious disease outbreaks; and
((~~(m) Plans for evacuation of the facility~~)) (n) Other events that may require sheltering in place, evacuations, or other emergency measures to protect the health and safety of residents.

(2) The enhanced services ((~~facility must train all employees in emergency procedures when they begin work in the enhanced services facility, periodically review emergency procedures with existing staff, and carry out unannounced staff drills using those procedures.~~)) facility's emergency preparedness plan must:

(a) Be developed and maintained with the assistance of qualified fire, safety, and other appropriate experts as necessary; and

(b) Include procedures for:

(i) Staff roles and responsibilities;

(ii) Accounting for residents;

(iii) Summoning emergency assistance and coordinating with first responders;

(iv) Plans for evacuation of the facility;

(v) Communicating emergency information to staff and residents as well as external partners, including emergency contacts for residents, state and local agencies, developmental disability ombuds, and long-term care ombuds;

(vi) How resident care and treatment needs will be maintained; and

(vii) Provision of essential resident needs and supplies, including water, food, medications, and personal care items.

(3) The enhanced services facility must ((~~ensure emergency plans~~)) incorporate infection prevention and control capabilities into its emergency preparedness plan. At minimum, the plan must:

((~~(a) Are developed and maintained with the assistance of qualified fire, safety, and other appropriate experts as necessary;~~

~~(b) Are reviewed annually;~~

~~(c) Include plans to continue to serve and meet the needs of the residents during the emergency; and~~

~~(d) Include evacuation routes prominently posted on each unit.~~))

(a) Include procedures for the procurement, inventory, tracking, safe storage, and rotation of personal protective equipment to ensure supplies remain within manufacturer recommended shelf life and are available for use; and

(b) Describe how the facility will ensure adequate staffing and implement isolation or cohorting procedures during an infectious disease emergency.

(4) In addition to the plan requirements, the enhanced services facility must:

(a) Maintain an adequate supply of personal protective equipment appropriate to the facility size and resident population, including, but not limited to: gloves, gowns, surgical masks, eye protection, and NIOSH-approved respirators;

(b) Train all employees in emergency procedures when they begin work in the enhanced services facility, annually review emergency procedures with existing staff, and carry out unannounced staff drills using those procedures;

(c) Review and update the comprehensive emergency preparedness plan and procedures at least annually;

(d) Communicate the location of the emergency preparedness plan to residents and staff to ensure access as needed during emergencies;

(e) Prominently post evacuation route(s) throughout the facility, at minimum on every floor, if applicable; and

(f) Comply with WAC 388-107-1420.