NEW SECTION. Sec. 24. This act shall take effect January 1, 1980, and shall be effective with respect to gifts made after December 31, 1979. The administrative provisions of sections 1 through 20 of this act shall apply to collections of taxes due on gifts made before January 1, 1980.

Passed the Senate May 24, 1979.
Passed the House May 14, 1979.
Approved by the Governor May 29, 1979.
Filed in Office of Secretary of State May 29, 1979.

CHAPTER 211

[Engrossed Substitute Senate Bill No. 2336]
NURSING HOMES—RESIDENT CARE, OPERATING STANDARDS

AN ACT Relating to resident care and nursing homes; amending section 8, chapter 117, Laws of 1951 and RCW 18.51.070; amending section 11, chapter 117, Laws of 1951 as amended by section 1, chapter 85, Laws of 1971 ex. sess. and RCW 18.51.100; amending section 12, chapter 117, Laws of 1951 and RCW 18.51.110; amending section 1, chapter 244, Laws of 1977 ex. sess. and RCW 18.51.310; adding a new chapter to Title 74 RCW; adding a new section to chapter 18.51 RCW; repealing section 10, chapter 117, Laws of 1951, section 6, chapter 160, Laws of 1953, section 2, chapter 213, Laws of 1975 1st ex. sess. and RCW 18.51.090; prescribing penalties; providing an effective date; and declaring an emergency.

Be it enacted by the Legislature of the State of Washington:

<u>NEW SECTION.</u> Section 1. Unless the context clearly requires otherwise, the definitions in this section apply throughout sections 1 through 62 of this act.

- (1) "Department" means the department of social and health services and the department's employees.
 - (2) "Facility" refers to a nursing home as defined in RCW 18.51.010.
- (3) "Licensed practical nurse" means a person licensed to practice practical nursing under chapter 18.78 RCW.
- (4) "Medicaid" means Title XIX of the Social Security Act enacted by the social security amendments of 1965 (42 U.S.C. Sec. 1396; 79 Stat. 343), as amended.
- (5) "Nursing care" means that care provided by a registered nurse, a licensed practical nurse, or a nursing assistant in the regular performance of their duties.
 - (6) "Qualified therapist" means:
- (a) An activities specialist who has specialized education, training, or experience specified by the department.
- (b) An audiologist who is eligible for a certificate of clinical competence in audiology or who has the equivalent education and clinical experience.
 - (c) A mental health professional as defined in chapter 71.05 RCW.
- (d) A mental retardation professional who is a qualified therapist or a therapist approved by the department and has specialized training or one

year experience in treating or working with the mentally retarded or developmentally disabled.

- (e) An occupational therapist who is a graduate of a program in occupational therapy or who has equivalent education or training.
 - (f) A physical therapist as defined in chapter 18.74 RCW.
 - (g) A social worker who is a graduate of a school of social work.
- (h) A speech pathologist who is eligible for a certificate of clinical competence in speech pathology or who has equivalent education and clinical experience.
- (7) "Registered nurse" means a person practicing nursing under chapter 18.88 RCW.
- (8) "Resident" means an individual recipient of medical benefits pursuant to chapter 74.09 RCW, except as to sections 3 through 13 of this 1979 act which shall apply to all patients.
- (9) "Physician's assistant" means a person practicing pursuant to chapters 18.57A and 18.71A RCW.
- (10) "Nurse practitioner" means a person practicing such expanded acts of nursing as are authorized by the board of nursing pursuant to RCW 18.88.030.

NEW SECTION. Sec. 2. The standards in sections 3 through 57 of this 1979 act are the minimum standards for facilities receiving reimbursement under chapter ... (Senate Bill No. 2335), Laws of 1979: PROVIDED, HOWEVER, That sections 4, 14 through 28, 30, 36, 37, 38, 42 (2) (4) (5) (6) (7), 43(3), 45 (2) (3), 52, 53, 54, 57, and 58 of this act shall not apply to Christian Science sanatoria facilities operated and listed or certified by The First Church of Christ, Scientist, in Boston, Massachusetts.

<u>NEW SECTION.</u> Sec. 3. Each resident or guardian, if any, shall be fully informed and receive in writing the following:

- (1) The resident's rights and responsibilities in the facility;
- (2) Rules governing resident conduct;
- (3) Services available in the facility; and
- (4) Charges for services not included in the facility's basic daily rate or not paid by medicaid.

The facility shall provide this information before or at the time of admission and as changes occur during the resident's stay. The resident or legal guardian shall acknowledge in writing receipt of this information and any changes in the information.

<u>NEW SECTION.</u> Sec. 4. The facility shall insure that each resident and guardian, if any:

(1) Is fully informed by a physician about his or her health and medical condition unless the physician decides that informing the resident is medically contraindicated and the physician documents this decision in the resident's record;

- (2) Has the opportunity to participate in his or her total care and treatment;
 - (3) Has the opportunity to refuse treatment; and
- (4) Gives informed, written consent before participating in experimental research.

<u>NEW SECTION.</u> Sec. 5. (1) Residents shall be treated with consideration, respect, and full recognition of their dignity and individuality. Residents shall be encouraged and assisted in the exercise of their rights as residents of the facility and as citizens.

(2) A resident or guardian, if any, may submit complaints or recommendations concerning the policies of the facility to the staff and to outside representatives of the resident's choice. No facility may restrain, interfere, coerce, discriminate, or retaliate in any manner against a resident who submits a complaint or recommendation.

NEW SECTION. Sec. 6. The facility shall allow a resident or the resident's guardian to manage the resident's financial affairs. The facility may assist a resident in the management of his or her financial affairs if the resident requests assistance in writing and the facility complies with the record-keeping requirements of section 13 of this act and the provisions of chapter ... (Senate Bill No. 2335), Laws of 1979.

NEW SECTION. Sec. 7. Residents shall be given privacy during treatment and care of personal needs. Married residents shall be given privacy during visits with their spouses. If both husband and wife are residents of the facility, the facility shall permit the husband and wife to share a room, unless medically contraindicated.

NEW SECTION. Sec. 8. Residents' records, including information in an automatic data bank, shall be treated confidentially. The facility shall not release information from a resident's record to a person not otherwise authorized by law to receive the information without the resident's or the resident's guardian's written consent.

<u>NEW SECTION.</u> Sec. 9. No resident may be required to perform services for the facility; except that a resident may be required to perform work tasks specified or included in the comprehensive plan of care.

<u>NEW SECTION.</u> Sec. 10. The facility shall not open the personal mail that residents send or receive.

<u>NEW SECTION</u>. Sec. 11. Residents shall be allowed to communicate, associate, meet privately with individuals of their choice, and participate in social, religious, and community group activities unless this infringes on the rights of other residents.

<u>NEW SECTION.</u> Sec. 12. The facility shall allow residents to have personal possessions as space or security permits.

NEW SECTION. Sec. 13. The facility shall keep a current, written financial record for each resident. The record shall include written receipts for all personal possessions and funds received by or deposited with the facility and for all disbursements made to or for the resident. The resident or guardian and the resident's family shall have access to the financial record.

<u>NEW SECTION.</u> Sec. 14. The facility shall care for residents by providing residents with authorized medical services which shall include treatment, medication, and diet services, and any other services contained in the comprehensive plan of care or otherwise prescribed by the attending physician.

NEW SECTION. Sec. 15. (1) Under the attending physician's instructions, qualified staff will establish and maintain a comprehensive plan of care for each resident which shall be kept on file by the facility and be approved by the department. The comprehensive plan contains:

- (a) Goals for each resident to accomplish;
- (b) An integrated program of treatment, therapies and activities to help each resident achieve those goals; and
 - (c) The persons responsible for carrying out the programs in the plan.
- (2) Qualified staff shall review the comprehensive plan of care at least quarterly.

<u>NEW SECTION.</u> Sec. 16. The facility shall provide the nursing care required for the classification given each resident. The nursing care shall help each resident to achieve and maintain the highest possible degree of function, self—care, and independence to the extent medically possible.

<u>NEW SECTION.</u> Sec. 17. (1) The facility shall provide rehabilitative services itself or arrange for the provision of rehabilitative services with qualified outside resources for each resident whose comprehensive plan of care requires the provision of rehabilitative services.

- (2) The rehabilitative service personnel shall be qualified therapists, qualified therapists' assistants, or mental health professionals. Other support personnel under appropriate supervision may perform the duties of rehabilitative service personnel.
- (3) The rehabilitative services shall be designed to maintain and improve the resident's ability to function independently; prevent, as much as possible, advancement of progressive disabilities; and restore maximum function.

<u>NEW SECTION.</u> Sec. 18. (1) The facility shall provide social services, or arrange for the provision of social services with qualified outside resources, for each resident whose comprehensive plan of care requires the provision of social services.

(2) The facility shall designate one staff member qualified by training or experience to be responsible for arranging for social services in the facility

or with qualified outside resources and integrating social services with other elements of the plan of care.

<u>NEW SECTION</u>. Sec. 19. The facility shall have an activities program designed to encourage each resident to maintain normal activity and help each resident return to self care. A staff member qualified by experience or training in directing group activities shall be responsible for the activities program. The facility shall provide adequate recreation areas with sufficient equipment and materials to support the program.

<u>NEW SECTION</u>. Sec. 20. The health care of each resident shall be under the continuing supervision of a physician. The physician, physician's assistant, or nurse practitioner shall see the resident whenever necessary, but not less than once every sixty days, unless the physician decides that it is not necessary to see the resident once every sixty days and a written report of the decision signed by the physician is included in the resident's record.

<u>NEW SECTION</u>. Sec. 21. The facility shall either employ a licensed pharmacist responsible for operating the facility's pharmacy or have a written agreement with a licensed pharmacist who will advise the facility on ordering, storage, administration, disposal, and recordkeeping of drugs and biologicals.

NEW SECTION. Sec. 22. (1) If the facility does not employ a qualified professional to furnish required services, the facility shall have a written contract with a qualified professional or agency outside the facility to furnish the required services. The terms of the contract, including terms about responsibilities, functions, and objectives, shall be specified. The contract shall be signed by the administrator, or the administrator's representative, and the qualified professional.

- (2) Programs of self-administration of medications are to be implemented for all residents unless contraindicated in writing in the resident's records.
- (3) All contracts for these services shall require the standards in sections 1 through 57 of this act to be met.

<u>NEW SECTION.</u> Sec. 23. (1) The resident's attending or staff physician shall order all medications for the resident. The order may be oral or written.

(2) An oral order shall be given only to a licensed nurse, pharmacist, or another physician. The oral order shall be recorded and signed immediately by the person receiving the order. The attending physician shall sign the record of the oral order in a manner consistent with good medical practice within forty-eight hours.

<u>NEW SECTION.</u> Sec. 24. (1) No staff member may administer any medication to a resident unless the staff member is licensed to administer medication.

- (2) The facility may only allow a resident to give himself or herself medication with the attending physician's permission.
- (3) Medication shall only be administered to or used by the resident for whom it is ordered.

NEW SECTION. Sec. 25. (1) When the physician's order for medication does not include a specific time limit or a specific number of dosages, the facility shall notify the physician that the medication will be stopped at a date certain unless the medication is ordered continued by the physician. The facility shall so notify the physician every thirty days.

(2) A facility for the developmentally disabled shall have an automatic stop order on all drugs, unless such stoppage will place the patient in jeopardy.

NEW SECTION. Sec. 26. (1) The facility shall store drugs under proper conditions of sanitation, temperature, light, moisture, ventilation, segregation, and security. Poisons, drugs used externally, and drugs taken internally shall be stored on separate shelves or in separate cabinets at all locations. When medication is stored in a refrigerator containing other items, the medication shall be kept in a separate compartment with proper security. All drugs shall be kept under lock and key unless an authorized individual is in attendance.

- (2) The facility shall meet the drug security requirements of federal and state laws that apply to storerooms, pharmacies, and living units.
- (3) If there is a drug storeroom separate from the pharmacy, the facility shall keep a perpetual inventory of receipts and issues of all drugs from that storeroom.

<u>NEW SECTION.</u> Sec. 27. Any drug that is discontinued or outdated and any container with a worn, illegible, or missing label shall be properly disposed.

<u>NEW SECTION.</u> Sec. 28. Medication errors and adverse drug reactions shall be recorded and reported immediately to the practitioner who ordered the drug. The facility shall report adverse drug reactions consistent with good medical practice.

<u>NEW SECTION.</u> Sec. 29. (1) The facility shall serve at least three meals, or their equivalent, daily at regular times with not more than fourteen hours between a substantial evening meal and breakfast on the following day and not less than ten hours between breakfast and a substantial evening meal on the same day.

- (2) Food shall be procured, stored, transported, and prepared under sanitary conditions in compliance with state and local regulations.
- (3) Food of an appropriate quantity at an appropriate temperature shall be served in a form consistent with the needs of the resident;
- (4) Special eating equipment and utensils shall be provided for residents who need them; and

(5) Food served and uneaten shall be discarded.

<u>NEW SECTION.</u> Sec. 30. (1) The facility shall have a staff member trained or experienced in food management and nutrition responsible for planning menus that meet the requirements of subsection (2) of this section and supervising meal preparation and service to insure that the menu plan is followed.

- (2) The menu plans shall follow the orders of the resident's physician.
- (3) The facility shall:
- (a) Meet the nutritional needs of each resident;
- (b) Have menus written in advance;
- (c) Provide a variety of foods at each meal;
- (d) Provide daily and weekly variations in the menus; and
- (e) Adjust the menus for seasonal changes.
- (4) If the facility has residents who require medically prescribed special diets, the menus for those residents shall be planned by a professionally qualified dietitian or reviewed and approved by the attending physician. The preparation and serving of meals shall be supervised to insure that the resident accepts the special diet.

<u>NEW SECTION.</u> Sec. 31. (1) A facility for the developmentally disabled shall have sufficient personnel in the dining rooms to supervise the residents, direct self-help dining skills, and to insure that each resident receives enough food.

(2) A facility for the developmentally disabled shall provide table service for all residents, including residents in wheelchairs, who are capable and willing to eat at tables.

<u>NEW SECTION.</u> Sec. 32. Facilities shall have effective sanitary procedures for the food preparation staff including procedures for cleaning food preparation equipment and food preparation areas.

<u>NEW SECTION</u>. Sec. 33. The facility shall store dry or staple food items at an appropriate height above the floor in a ventilated room not subject to sewage or waste water backflow or contamination by condensation, leakage, rodents or vermin. Perishable foods shall be stored at proper temperatures to conserve nutritive values.

<u>NEW SECTION.</u> Sec. 34. (1) The facility shall provide adequate, modern administrative support to efficiently meet the needs of residents and facilitate attainment of the facility's goals and objectives.

- (2) The facility shall:
- (a) Document the purchasing process;
- (b) Adequately operate the inventory control system and stockroom;
- (c) Have appropriate storage facilities for all supplies and surplus equipment; and
- (d) Have enough trained and experienced personnel to do purchase, supply, and property control functions.

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<u>NEW SECTION.</u> Sec. 35. The facility shall have and keep current an organization chart showing:

- (1) The major operating programs of the facility;
- (2) The staff divisions of the facility;
- (3) The administrative personnel in charge of the programs and divisions; and
- (4) The lines of authority, responsibility, and communication of administrative personnel.

<u>NEW SECTION</u>. Sec. 36. The facility shall have staff on duty twenty-four hours daily sufficient in number and qualifications to carry out the provisions of sections 1 through 57 of this act and the policies, responsibilities, and programs of the facility.

NEW SECTION. Sec. 37. The facility shall have an administrator who is a licensed nursing home administrator under chapter 18.52 RCW. The administrator is responsible for managing the facility and implementing established policies and procedures.

<u>NEW SECTION.</u> Sec. 38. (1) The facility shall have a director of nursing services. The director of nursing services shall be a registered nurse.

- (2) The director of nursing services is responsible for:
- (a) Coordinating the plan of care for each resident;
- (b) Permitting only licensed personnel to administer medications; and
- (c) Insuring that the licensed practical nurses comply with chapter 18-.78 RCW and the registered nurses comply with chapter 18.88 RCW.

NEW SECTION. Sec. 39. The facility shall have a communication system, including telephone service, that insures prompt contact of on-duty personnel and prompt notification of responsible personnel in an emergency.

<u>NEW SECTION.</u> Sec. 40. The facility shall have sufficient trained and experienced personnel for necessary engineering and maintenance functions.

<u>NEW SECTION</u>. Sec. 41. The facility shall manage laundry services to meet the residents' daily clothing and linen needs. The facility shall have available at all times enough linen for the proper care and comfort of the residents.

<u>NEW SECTION.</u> Sec. 42. The facility shall maintain an organized record system containing a record for each resident. The record shall contain:

- (1) Identification information;
- (2) Admission information, including the resident's medical and social history;
- (3) A comprehensive plan of care and subsequent changes to the comprehensive plan of care;
- (4) Copies of initial and subsequent periodic examinations, assessments, evaluations, and progress notes made by the facility and the department;

- (5) Descriptions of all treatments, services, and medications provided for the resident since the resident's admission;
- (6) Information about all illnesses and injuries including information about the date, time, and action taken; and
 - (7) A discharge summary.

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

<u>NEW SECTION.</u> Sec. 43. The facility shall develop written guidelines governing:

- (1) All services provided by the facility;
- (2) Admission, transfer or discharge;
- (3) The use of chemical and physical restraints, the personnel authorized to administer restraints in an emergency, and procedures for monitoring and controlling the use of the restraints;
- (4) Procedures for receiving and responding to residents' complaints and recommendations:
- (5) Access to, duplication of, and dissemination of information from the resident's record;
 - (6) Residents' rights, privileges, and duties;
- (7) Procedures if the resident is adjudicated incompetent or incapable of understanding his or her rights and responsibilities;
- (8) When to recommend initiation of guardianship proceedings to the department under chapter 11.88 RCW; and
 - (9) Emergencies;
 - (10) Procedures for isolation of residents with infectious diseases;
- (11) Procedures for residents to refuse treatment and for the facility to document informed refusal.

The written guidelines shall be made available to the staff, residents, members of residents' families, and the public.

NEW SECTION. Sec. 44. The facility may only admit individuals when the facility's rated capacity will not be exceeded and when the facility has the capability to provide adequate treatment, therapy, and activities.

NEW SECTION. Sec. 45. (1) The facility shall admit as residents only those individuals whose needs can be met by:

- (a) The facility;
- (b) The facility cooperating with community resources; or
- (c) The facility cooperating with other providers of care affiliated or under contract with the facility.

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- (2) The facility shall transfer a resident to a hospital or other appropriate facility when a change occurs in the resident's physical or mental condition that requires care or service that the facility cannot provide. The resident, the resident's guardian, if any, the resident's next of kin, the attending physician, and the department shall be consulted at least fifteen days before a transfer or discharge unless the resident is transferred under emergency circumstances. The department shall use casework services or other means to insure that adequate arrangements are made to meet the resident's needs.
- (3) A resident shall be transferred or discharged only for medical reasons, the resident's welfare or request, the welfare of other residents, or nonpayment. A resident may not be discharged for nonpayment if the discharge would be prohibited by the medicaid program.

NEW SECTION. Sec. 46. The facility shall have a written staff organization plan and detailed written procedures to meet potential emergencies and disasters. The facility shall clearly communicate and periodically review the plan and procedures with the staff and residents. The plan and procedures shall be posted at suitable locations throughout the facility.

<u>NEW SECTION.</u> Sec. 47: No employee with symptoms of a communicable disease may work in a facility. The facility shall have written guidelines that will help enforce this section.

<u>NEW SECTION.</u> Sec. 48. The facility shall design and equip the resident living areas for the comfort and privacy of each resident.

NEW SECTION. Sec. 49. Each resident's room shall:

- (1) Be equipped with or conveniently located near toilet and bathing facilities;
 - (2) Be at or above grade level;
- (3) Contain a suitable bed for each resident and other appropriate furniture;
- (4) Have closet space that provides security and privacy for clothing and personal belongings;
 - (5) Contain no more than four beds;
 - (6) Have adequate space for each resident; and
 - (7) Be equipped with a device for calling the staff member on duty.

The department may waive the space and occupancy requirements of this section for an existing building constructed prior to the effective date of this 1979 act for as long as the department considers appropriate if the department finds that the requirements would result in unreasonable hardship on the facility, the waiver serves the particular needs of the residents, and the waiver does not adversely affect the health and safety of the residents.

NEW SECTION. Sec. 50. Toilet and bathing facilities shall be located in or near residents' rooms and shall be appropriate in number, size, and

design to meet the needs of the residents. The facility shall provide an adequate supply of hot water at all times for resident use. Plumbing shall be equipped with control valves that automatically regulate the temperature of the hot water used by residents.

NEW SECTION. Sec. 51. The facility shall provide one or more areas not used for corridor traffic for dining, recreation, and social activities. A multipurpose room may be used if it is large enough to accommodate all of the activities without the activities interfering with each other: PROVID-ED, That the department may waive the provisions of this section for facilities constructed prior to the effective date of this 1979 act.

NEW SECTION. Sec. 52. The facility's therapy area shall be large enough and designed to accommodate the necessary equipment, conduct an examination, and provide treatment: PROVIDED, That developmentally disabled facilities shall not be subject to the provisions of this section if therapeutic services are obtained by contract with other facilities.

<u>NEW SECTION.</u> Sec. 53. The facility shall have isolation areas for residents with infectious diseases or make other provisions for isolating these residents.

<u>NEW SECTION.</u> Sec. 54. (1) The facility shall be accessible to and usable by all residents, personnel, and the public, including individuals with disabilities: PROVIDED, That no substantial structural changes shall be required in any facilities constructed prior to the effective date of this 1979 act.

- (2) The facility shall meet the requirements of American National Standards Institute (ANSI) standard No. A117.1 (1961), or, if applicable, the requirements of chapter 70.92 RCW if the requirements are stricter than ANSI standard No. A117.1 (1961), unless the department waives the requirements of ANSI standard No. A117.1 (1961) under subsection (3) of this section.
- (3) The department may waive, for as long as the department considers appropriate, provisions of ANSI standard No. A117.1 (1961) if:
- (a) The construction plans for the facility or a part of the facility were approved by the department before March 18, 1974;
- (b) The provisions would result in unreasonable hardship on the facility if strictly enforced; and
- (c) The waiver does not adversely affect the health and safety of the residents.

<u>NEW SECTION.</u> Sec. 55. The facility shall have handrails that are firmly attached to the walls in all corridors used by residents: PROVIDED, That the department may waive the provisions of this section in developmentally disabled facilities.

<u>NEW SECTION</u>. Sec. 56. If a living unit of a facility for the developmentally disabled houses more than fifteen residents, the living unit shall have emergency lighting with automatic switches for stairs and exits.

<u>NEW SECTION.</u> Sec. 57. The facility shall meet all federal, state, and local laws, rules, regulations, and codes pertaining to health and safety.

<u>NEW SECTION</u>. Sec. 58. The department may deny, suspend, or revoke a license or provisional license or, in lieu thereof or in addition thereto, assess monetary penalties of a civil nature pursuant to the provisions of chapter 34.04 RCW not to exceed one thousand dollars for such violations when the department finds that the licensee, or any partner, officer, director, owner of five percent or more of the assets of the facility, or managing employee:

- (1) Failed or refused to comply with the requirements of sections 1 through 57 of this act or the standards and rules established by the department under sections 1 through 57 of this act;
- (2) Was the holder of a license issued under chapter 18.51 RCW, which was revoked for cause and never reissued by the department, or which license was suspended for cause and the terms of the suspension have not been fulfilled;
- (3) Has knowingly or with reason to know made a false statement of a material fact in any records required under sections 1 through 57 of this act:
- (4) Refused to allow representatives or agents of the department to inspect all books, records, and files required to be maintained under sections 1 through 57 of this act or any portion of the premises of the facility;
- (5) Wilfully prevented, interfered with, or attempted to impede in any way the work of any authorized representative of the department and the lawful enforcement of any provision of sections 1 through 57 of this act; or
- (6) Wilfully prevented or interfered with any representative of the department in the preservation of evidence of any violation of any of the provisions of sections 1 through 57 of this act or the standards and rules adopted pursuant to sections 1 through 57 of this act.

NEW SECTION. Sec. 59. (1) The department shall approve, within thirty days after each resident's admission to the facility, each resident's comprehensive plan of care.

- (2) The department shall review the comprehensive plan of care for each resident at least annually thereafter.
- (3) The facility shall submit any request to modify a resident's classification to the department for the department's approval. The approval shall not be given until the department has reviewed the resident.

NEW SECTION. Sec. 60. (1) In addition to the inspection required by chapter 18.51 RCW, the department shall inspect the facility for compliance with the standards in sections 1 through 57 of this act.

(2) If the facility has not complied with any of the standards in sections 1 through 57 of this act, the department shall notify the facility in writing that the facility is in noncompliance and describe the reasons for the facility's noncompliance. The notice shall inform the facility that, except for life—threatening situations which may be for a shorter period of time, the facility has three months from the date of notification to comply. The penalties in section 58 of this act may be imposed if, upon inspection after the three—month period, the department determines that the facility has not complied.

NEW SECTION. Sec. 61. The department shall assess the needs of each resident within thirty days after the resident's admission. The department shall use the patient assessment system developed under RCW 18.51-.310, as now or hereafter amended. Based upon the assessment of the resident's needs, the department shall assign each resident to a classification reflecting the level of care required by that resident. The classification system has at least five but not more than seven levels of care.

This section shall apply to developmentally disabled residents as a separate system.

NEW SECTION. Sec. 62. The department shall adopt rules pursuant to chapter 34.04 RCW necessary to carry out the policies and provisions of sections 1 through 57 of this act. The department shall amend or repeal any rules that are in conflict with sections 1 through 57 of this act.

<u>NEW SECTION.</u> Sec. 63. There is added to chapter 18.51 RCW a new section to read as follows:

The department shall make or cause to be made at least a yearly inspection of all nursing homes. Every inspection may include an inspection of every part of the premises and an examination of all records, methods of administration, the general and special dietary and the stores and methods of supply. Following such inspection or inspections, written notice of any violation of this law or the rules and regulations promulgated hereunder, shall be given the applicant or licensee and the department. The department may prescribe by regulations that any licensee or applicant desiring to make specified types of alterations or additions to its facilities or to construct new facilities shall, before commencing such alteration, addition or new construction, submit its plans and specifications therefor to the department for preliminary inspection and approval or recommendations with respect to compliance with the regulations and standards herein authorized.

Sec. 64. Section 8, chapter 117, Laws of 1951 and RCW 18.51.070 are each amended to read as follows:

The ((board)) department, after consultation with the ((advisory)) nursing home advisory council and the board of health, shall adopt, amend, and promulgate such rules, regulations, and standards with respect to all nursing homes to be licensed hereunder as may be designed to further the

accomplishment of the purposes of this chapter in promoting safe and adequate medical and nursing care of individuals in nursing homes and the sanitary, hygienic and safe conditions of the nursing home in the interest of public health, safety, and welfare.

Sec. 65. Section 11, chapter 117, Laws of 1951 as amended by section 1, chapter 85, Laws of 1971 ex. sess. and RCW 18.51.100 are each amended to read as follows:

The ((director)) governor shall appoint an ((advisory)) nursing home advisory council ((to consult with the department)). The council shall be comprised of ((the director who shall serve as chairman ex officio, and ten members and shall include one representative of each of the following organizations or groups except, that the Washington association of licensed nursing homes shall have three members: State medical association, state hospital association, state nurses association, department of social and health services, Washington state fire marshal, association of Washington eities, association of counties)):

- (a) Five members of the general public who are not owners or employees of a nursing home or engaged by a nursing home. Of these five members, one shall be a representative of senior citizens, one shall be a representative of a health care consumer group, and one shall be a licensed certified public accountant;
- (b) Three members who are nursing home operators, one of whom shall operate a nonprofit nursing home;
 - (c) One member of the association of nursing home administrators;
 - (d) One member of the state medical association; and
 - (e) One member of the state nurses association.

The governor shall choose one of the five members from the general public to be chairman of the advisory nursing home council. Each member of the council shall receive twenty-five dollars per day as compensation for each day spent upon official business of the council and travel expenses in accordance with RCW 43.03.050 and 43.03.060 as now existing or hereafter amended. Each member shall hold office for a term of four years, except that any member appointed to fill a vacancy occurring prior to the expiration of the term for which his predecessor was appointed shall be appointed for the remainder of such term and the terms of office of the members first taking office shall expire, as designated at the time of appointment, two at the end of the first year, three at the end of the second year, three at the end of the third year, and two at the end of the fourth year after the date of appointment. Thereafter all appointments shall be for four years. The council shall meet as frequently as the chairman deems necessary, but not less than ((once)) quarterly each year. Upon request by four or more members, it shall be the duty of the chairman to call a meeting of the council.

Sec. 66. Section 12, chapter 117, Laws of 1951 and RCW 18.51.110 are each amended to read as follows:

The advisory nursing home council shall:

- (1) Consult with the <u>legislature and the</u> department in matters of policy affecting administration of ((this chapter)) <u>nursing homes</u>, and in the development of rules, regulations, ((provided for hereunder)) <u>pertaining to nursing homes</u>; and
- (2) Review and make recommendations with respect to rules, regulations, and standards ((authorized hereunder)) pertaining to nursing homes prior to their adoption and promulgation by the ((board)) department as specified herein.
- Sec. 67. Section 1, chapter 244, Laws of 1977 ex. sess. and RCW 18-.51.310 are each amended to read as follows:
- (1) No later than September 30, 1977, the secretary shall implement and operate a patient assessment system whereby the characteristics of patients supported by the department under RCW 74.09.120, as now or hereafter amended, shall be computerized for the purpose of setting appropriate levels of staffing and reimbursement for nursing homes in accordance with the documented needs of the client population in each home.
- (2) No later than ((November 30, 1977)) December 31, 1980, the ((board of health)) department shall adopt revised licensing standards for nursing homes ((after the fiscal impact of each revised standard has been assessed by the department)). The licensing standards shall be suitable for((:
- (a))) implementing the civil penalty system authorized under this chapter((;
- (b) Identifying and measuring the outcomes of services delivered by the nursing home;
- (c) Assessing the fiscal impact on health care delivered under the licensing standards; and
- (d) Determining rates to meet client needs)) and chapter ... (Senate Bill No. 2335) Laws of 1979.
- (3) ((No later than January 1, 1978, all payments made to nursing homes by the department shall meet the reasonable cost of:
 - (a) Complying with the revised licensing standards;
 - (b) Complying with federal standards; and
 - (c) Meeting client needs;
- as the reasonable costs are determined under federal regulations.)) The department, the board of health, the school of medicine, the University of Washington, and the schools of nursing within the state shall jointly submit to the legislature, not later than December 20, 1980, alternative methods of identifying and measuring the results of services delivered by the nursing home.
- (4) No later than July 1, ((1978)) 1980, the department shall adopt all those regulations which meet all conditions necessary to fully implement the

civil penalty system authorized by this chapter and chapter ... (Senate Bill No. 2335) Laws of 1979.

NEW SECTION. Sec. 68. Section 10, chapter 117, Laws of 1951, section 6, chapter 160, Laws of 1953, section 2, chapter 213, Laws of 1975 1st ex. sess. and RCW 18.51.090 are each repealed.

NEW SECTION. Sec. 69. If any provision of this act or its application to any person or circumstance is held invalid, the remainder of the act or the application of the provision to other persons or circumstances is not affected.

NEW SECTION. Sec. 70. If any part of this act is found to be in conflict with federal requirements which are a prescribed condition to the allocation of federal funds to the state, the conflicting part of this act is hereby declared to be inoperative solely to the extent of the conflict and with respect to the agencies directly affected, and such finding or determination shall not affect the operation of the remainder of this act in its application to the agencies concerned. The rules under this act shall meet federal requirements which are a necessary condition to the receipt of federal funds by the state.

NEW SECTION. Sec. 71. Section 64 of this 1979 act is necessary for the immediate preservation of the public peace, health, and safety, the support of the state government and its existing public institutions, and shall take effect immediately.

NEW SECTION. Sec. 72. Except for section 64 of this 1979 act, this 1979 act shall take effect on January 1, 1980.

NEW SECTION. Sec. 73. Sections 1 through 62, 69, and 70 of this 1979 act shall constitute a new chapter in Title 74 RCW.

Passed the Senate May 24, 1979.
Passed the House May 23, 1979.
Approved by the Governor May 30, 1979.
Filed in Office of Secretary of State May 30, 1979.

CHAPTER 212

[Engrossed Substitute Senate Bill No. 3034]
COLUMBIA RIVER TOLL BRIDGE, HORN RAPIDS——CONSTRUCTION, BONDS
AUTHORIZATION——APPROPRIATION

AN ACT Relating to a toll bridge across the Columbia river in the vicinity of the Horn Rapids Road and a state highway connecting thereto; providing for the financing thereof by bonds and anticipation notes; amending section 47.56.220, chapter 13, Laws of 1961 as amended by section 8, chapter 131, Laws of 1979 and RCW 47.56.220; adding new sections to chapter 47.56 RCW; creating new sections; making an appropriation; and declaring an emergency.

Be it enacted by the Legislature of the State of Washington: