

Chapter 388-101D WAC
REQUIREMENTS FOR PROVIDERS OF RESIDENTIAL SERVICES AND SUPPORTS

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WAC

388-101D-0020 Residential services contract.
388-101D-0025 Service provider responsibilities.
388-101D-0030 Staffing requirements.
388-101D-0035 Liability insurance required.
388-101D-0040 Liability insurance required—Commercial general liability insurance or business liability insurance coverage.
388-101D-0045 Liability insurance required—Professional liability insurance coverage.
388-101D-0050 Administrative documents.
388-101D-0055 Administrator responsibilities and training.
388-101D-0060 Policies and procedures.
388-101D-0065 Background check—General.
388-101D-0070 Background checks—National fingerprint background checks.
388-101D-0075 Background checks—Requirements for service providers.
388-101D-0080 Background checks—Provisional hire—Pending results.
388-101D-0085 Training requirements.
388-101D-0087 Long-term care worker requirements.
388-101D-0090 Staff training.
388-101D-0095 Staff training before working alone with clients.
388-101D-0100 Staff training within four weeks of employment.
388-101D-0105 Staff training within six months of employment.
388-101D-0110 Staff training to be current.
388-101D-0115 Certified community residential services and supports—General training requirements.
388-101D-0125 Client rights.
388-101D-0130 Treatment of clients.
388-101D-0135 Subcontracting.
388-101D-0140 Residential guidelines.
388-101D-0145 Client services.
388-101D-0150 Client health services support.
388-101D-0155 Medical devices.
388-101D-0160 Nurse delegation.
388-101D-0165 Client transportation.
388-101D-0170 Physical and safety requirements.
388-101D-0175 Services to nonclients.
388-101D-0180 Community protection clients and other clients in the same household.
388-101D-0185 Client refusal to participate in services.
388-101D-0190 What must a provider do if a client experiences a change in support needs?
388-101D-0195 What must a provider do when a client's support needs remain unmet?
388-101D-0196 What is the client critical case protocol?
388-101D-0197 Who may request a client critical case protocol and when is it initiated?
388-101D-0198 Who must attend a critical case conference and when must the conference occur?
388-101D-0200 When may a provider terminate a client's services?
388-101D-0201 When may the provider suspend a client's services?
388-101D-0205 Individual support plan.
388-101D-0210 Development of the individual instruction and support plan.
388-101D-0215 Documentation of the individual instruction and support plan.
388-101D-0220 Implementation of the individual instruction and support plan.
388-101D-0225 Accessibility of the individual instruction and support plan.
388-101D-0230 Ongoing updating of the individual instruction and support plan.
388-101D-0235 Shared expenses and client related funds.
388-101D-0240 Individual financial plan.
388-101D-0245 Managing client funds.
388-101D-0250 Using client funds for health services.
388-101D-0255 Reconciling and verifying client accounts.
388-101D-0260 Combining service provider and client funds.
388-101D-0265 Client bankbooks and bankcards.
388-101D-0270 Client financial records.
388-101D-0275 Transferring client funds.
388-101D-0280 Client loans.
388-101D-0285 Client reimbursement.
388-101D-0290 Client payment.
388-101D-0295 Medication services—General.
388-101D-0300 Medication—Types of support.
388-101D-0305 Medication—Self-administration.
388-101D-0310 Medication assistance.
388-101D-0315 Medication administration—Nurse delegation.
388-101D-0320 Medication administration.
388-101D-0325 Medication refusal.
388-101D-0330 Storage of medications.
388-101D-0335 Medication organizers.
388-101D-0340 Medications—Documentation.
388-101D-0345 Disposal of medications.
388-101D-0350 Psychoactive medication assessment.
388-101D-0355 What must a client record contain if the client is prescribed a psychotropic medication?
388-101D-0365 Psychoactive medications—Other.
388-101D-0370 Confidentiality of client records.
388-101D-0375 Charging for searching and duplicating records.
388-101D-0380 Retention of client records.
388-101D-0385 Contents of client records.

388-101D-0390 Client's property records.
 388-101D-0395 Record entries.
 388-101D-0400 Positive behavior support.
 388-101D-0405 When is a functional assessment required?
 388-101D-0410 When is a positive behavior support plan required?
 388-101D-0415 Client protection.
 388-101D-0420 Group home providers.
 388-101D-0425 Restrictive procedures.
 388-101D-0430 Restrictive procedures approval.
 388-101D-0435 Physical intervention systems.
 388-101D-0440 Physical interventions.
 388-101D-0445 Restrictive physical interventions.
 388-101D-0450 Physical intervention training.
 388-101D-0455 Mechanical and chemical restraints.
 388-101D-0460 Monitoring physical and mechanical restraints.
 388-101D-0465 Community protection—Approval.
 388-101D-0470 Community protection—Policies and procedures.
 388-101D-0475 Community protection—Treatment team meetings.
 388-101D-0480 Community protection—Staff training.
 388-101D-0485 Community protection—Treatment plan.
 388-101D-0490 Community protection—Client records.
 388-101D-0495 Community protection—Client transportation.
 388-101D-0500 Community protection—Client home location.
 388-101D-0505 Community protection—Reducing a client's restrictions.
 388-101D-0510 Community protection—Leaving the program against treatment team advice.
 388-101D-0515 Crisis diversion—Access to services.
 388-101D-0520 Crisis diversion bed services—Location.
 388-101D-0525 Crisis diversion bed services—Services and activities.
 388-101D-0530 Crisis diversion bed services—Treatment plan.
 388-101D-0535 Crisis diversion bed and support service providers—Client records.
 388-101D-0540 Crisis diversion bed services—Client records.
 388-101D-0545 Crisis diversion support services—Location.
 388-101D-0550 Crisis diversion support services—Services and activities.
 388-101D-0560 What is a group training home?
 388-101D-0565 What are the physical requirements for a group training home bedroom?
 388-101D-0570 What are the physical requirements for a group training home bathroom?
 388-101D-0575 How must a group training home manage food and maintain its kitchen?
 388-101D-0580 Must the group training home adapt the home to suit a client's needs?
 388-101D-0585 What building codes apply to group training homes?
 388-101D-0590 When must a group training home be inspected by a local building official?
 388-101D-0595 What steps must be taken before moving a client out of the home during construction?
 388-101D-0600 Who is responsible for cleaning and maintaining a group training home?
 388-101D-0605 How must a group training home protect clients from risks associated with bodies of water?
 388-101D-0610 What requirements must a group training home's fireplaces, heaters, and stoves meet?
 388-101D-0615 What requirements must the group training home's smoke detectors and fire extinguishers meet?
 388-101D-0620 How must a group training home prepare for emergency evacuations?
 388-101D-0625 How much emergency food and drinking water must be kept in the group training home?
 388-101D-0630 What must a group training home consider when providing nutritional services?
 388-101D-0635 What requirements must an employee or volunteer meet to prepare meals and snacks in a group training home?
 388-101D-0640 When may a pet live in a group training home?
 388-101D-0645 What infection control practices must a group training home implement?
 388-101D-0650 What must a group training home do to detect and manage tuberculosis?
 388-101D-0655 What type of tuberculin test must a group training home employee complete?
 388-101D-0660 When is a group training home employee not required to complete a tuberculin test?
 388-101D-0665 When must a group training home employee complete a one-step tuberculin test?
 388-101D-0670 When must a group training home employee complete a two-step tuberculin test?
 388-101D-0675 What happens if a group training home employee receives a positive tuberculin test result?
 388-101D-0680 Must a group training home employee complete follow-up testing?
 388-101D-0685 What must a group training home do when a client or employee has tuberculosis symptoms or receives a positive chest X-ray result?
 388-101D-0690 What records must a group training home maintain related to tuberculin testing?
 388-101D-0695 What rights and protections does a client living in a group training home have?
 388-101D-0700 What notice requirements must a group training home meet?
 388-101D-0705 What requirements under this chapter is a group training home provider exempt from?

DISPOSITION OF SECTIONS FORMERLY CODIFIED IN THIS CHAPTER

388-101D-0120 Approval of staff-coverage schedules. [WSR 16-14-058, recodified as § 388-101D-0120, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3310, filed 12/21/07, effective 2/1/08.] Repealed by WSR 19-09-033, filed 4/10/19, effective 5/11/19. Statutory Authority: RCW 71A.12.030, 71A.12.120 and 2018 c 299.
 388-101D-0360 Psychoactive medication monitoring. [WSR 16-14-058, recodified as § 388-101D-0360, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3760, filed 12/21/07, effective 2/1/08.] Repealed by WSR 21-12-061, filed 5/27/21, effective 6/27/21. Statutory Authority: RCW 71A.12.030 and 71A.12.120.

WAC 388-101D-0020 Residential services contract. (1) The service provider may request a department residential services contract after approval for initial certification or for change of ownership.

(2) The service provider must have a separate contract for each region where they receive referrals to serve clients.

(3) The service provider's residential services contract will be terminated by the department upon termination of certification.

[WSR 16-14-058, recodified as § 388-101D-0020, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3040, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0025 Service provider responsibilities. (1) Service providers must meet the requirements of:

(a) This chapter;

(b) Each contract and statement of work entered into with the department;

(c) Each client's individual support plan when the individual support plan identifies the service provider as responsible; and

(d) Each client's individual instruction and support plan.

(2) The service provider must:

(a) Have a designated administrator and notify the department when there is a change in administrator;

(b) Ensure that clients have immediate access to staff, or the means to contact staff, at all times;

(c) Provide adequate staff to meet the needs of clients as identified in their person-centered service plans;

(d) Not routinely involve clients in the unpaid instruction and support of other clients;

(e) Not involve clients receiving crisis diversion services in the instruction and support of other clients; and

(f) Retain all records and other material related to the residential services contract for six years after expiration of the contract.

[Statutory Authority: RCW 71A.12.030, 71A.12.120 and 2018 c 299. WSR 19-09-033, § 388-101D-0025, filed 4/10/19, effective 5/11/19. WSR 16-14-058, recodified as § 388-101D-0025, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3190, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0030 Staffing requirements. (1) The provider must ensure each of its employees:

(a) Has a high school diploma or GED equivalent, unless the employee was hired before September 1, 1991 or is exempt under subsection (2) of this section;

(b) Is age 18 or older when employed as a direct support professional who provides support services to a client;

(c) Is age 21 or older when employed as an administrator;

(d) Has a clear understanding of job responsibilities and knowledge of individual support plans and client needs; and

(e) Satisfies department background check requirements under chapter 388-825-WAC.

(2) The provider may hire a person without a high school diploma or GED if while working directly with clients the employee has access to another employee or a volunteer who:

(a) Has a high school diploma or GED; or

(b) Was hired before September 1, 1991.

(3) If the provider hires a person under subsection (2) of this section, the provider must have a written plan that states when and how the person must contact another employee for assistance.

[Statutory Authority: RCW 71A.12.030, 28 C.F.R. § 20.33(d), RCW 74.39A.056, 71A.12.040, and 71A.12.110. WSR 22-23-022, § 388-101D-0030, filed 11/4/22, effective 12/5/22. WSR 16-14-058, recodified as § 388-101D-0030, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3200, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0035 Liability insurance required. The service provider must:

(1) Obtain liability insurance upon certification and maintain the insurance as required in WAC 388-101-3206 and 388-101-3207; and

(2) Have evidence of liability insurance coverage available if requested by the department.

[WSR 16-14-058, recodified as § 388-101D-0035, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.080. WSR 10-03-065, § 388-101-3205, filed 1/15/10, effective 2/15/10.]

WAC 388-101D-0040 Liability insurance required—Commercial general liability insurance or business liability insurance coverage. The service provider must have commercial general liability insurance or business liability insurance that includes:

(1) Coverage for the acts and omissions of any employee and volunteer;

(2) Coverage for bodily injury, property damage, and contractual liability;

(3) Coverage for premises, operations, independent contractors, products-completed operations, personal injury, advertising injury, and liability assumed under an insured contract; and

(4) Minimum limits of:

(a) Each occurrence - One million dollars;

(b) General aggregate - Two million dollars; and

(c) For community protection service providers—Three million dollars general aggregate.

[WSR 16-14-058, recodified as § 388-101D-0040, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.080. WSR 10-03-065, § 388-101-3206, filed 1/15/10, effective 2/15/10.]

WAC 388-101D-0045 Liability insurance required—Professional liability insurance coverage. If the service provider employs professional staff, the service provider must have professional liability insurance or errors and omissions insurance. The insurance must include:

(1) Coverage for losses caused by errors and omissions of the service provider, its employees, and volunteers; and

(2) Minimum limits of:

- (a) Each occurrence - One million dollars; and
- (b) General aggregate - Two million dollars.

[WSR 16-14-058, recodified as § 388-101D-0045, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.080. WSR 10-03-065, § 388-101-3207, filed 1/15/10, effective 2/15/10.]

WAC 388-101D-0050 Administrative documents. The service provider must prepare and maintain written documents as follows:

- (1) A mission statement;
- (2) A program description;
- (3) An organizational chart and description showing all supervisory relationships;
- (4) Description of staff roles and responsibilities, including the person designated to act in the absence of the administrator; and
- (5) Staffing schedules.

[WSR 16-14-058, recodified as § 388-101D-0050, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3210, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0055 Administrator responsibilities and training.

(1) The service provider must ensure that the administrator delivers services to clients consistent with this chapter, and the department's residential services contract. This includes but is not limited to:

- (a) Overseeing all aspects of staffing, such as recruitment, staff training, and performance reviews;
- (b) Developing and maintaining policies and procedures that give staff direction to provide appropriate services and support as required by this chapter and the department contract; and
- (c) Maintaining and securely storing client, personnel, and financial records.

(2) Before assuming duties, an administrator must complete required instruction and support services staff training if the administrator may provide instruction and support services to clients or may supervise instruction and support services staff.

[WSR 16-14-058, recodified as § 388-101D-0055, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 12-02-048, § 388-101-3220, filed 12/30/11, effective 1/30/12. Statutory Authority: RCW 71A.12.080, chapter 74.39A RCW. WSR 10-16-084, § 388-101-3220, filed 7/30/10, effective 1/1/11. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3220, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0060 Policies and procedures. (1) The service provider must develop, implement, and train staff on policies and procedures to address what staff must do:

- (a) Related to client rights, including a client's right to file a complaint or suggestion without interference;
- (b) Related to soliciting client input and feedback on instruction and support received;
- (c) Related to reporting suspected abuse, neglect, financial exploitation, or abandonment;

- (d) To protect clients when there have been allegations of abuse, neglect, financial exploitation, or abandonment;
 - (e) In emergent situations that may pose a danger or risk to the client or others, such as in the event of death or serious injury to a client;
 - (f) In responding to missing persons and client emergencies;
 - (g) Related to emergency response plans for natural or other disasters;
 - (h) When accessing medical, mental health, and law enforcement resources for clients;
 - (i) Related to notifying a client's legal representative, and/or relatives in case of emergency;
 - (j) When receiving and responding to client grievances; and
 - (k) To respond appropriately to aggressive and assaultive clients.
- (2) The service provider must develop, implement, and train staff on policies and procedures in all aspects of the medication support they provide, including but not limited to:
- (a) Supervision;
 - (b) Client refusal;
 - (c) Services related to medications and treatments provided under the delegation of a registered nurse consistent with chapter 246-840 WAC;
 - (d) The monitoring of a client who self-administers their own medications;
 - (e) Medication assistance for clients needing this support; and
 - (f) What the service provider will do in the event they become aware that a client is no longer safe to take their own medications.
- (3) The service provider must maintain current written policies and procedures and make them available to all staff; and to clients and legal representatives upon request.

[WSR 16-14-058, recodified as § 388-101D-0060, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3240, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0065 Background check—General. (1) A provider must follow background check requirements under this chapter and chapters 388-113 and 388-825 WAC.

(2) Nothing in this chapter requires the employment of a person against the better judgment of the provider.

[Statutory Authority: RCW 71A.12.020, 71A.12.030, 71A.12.040, 71A.12.050, 71A.12.110, 71A.12.161, 43.20A.710, and 43.43.837. WSR 23-07-130, § 388-101D-0065, filed 3/22/23, effective 4/22/23. WSR 16-14-058, recodified as § 388-101D-0065, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 14-14-030, § 388-101-3245, filed 6/24/14, effective 7/25/14. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 12-02-048, § 388-101-3245, filed 12/30/11, effective 1/30/12. Statutory Authority: RCW 71A.12.080, chapter 74.39A RCW. WSR 10-16-084, § 388-101-3245, filed 7/30/10, effective 1/1/11.]

WAC 388-101D-0070 Background checks—National fingerprint background checks. (1) An applicant as defined in WAC 388-113-0010 hired on or after January 1, 2016, who is not disqualified by the Washington state name and date of birth background check, must complete a national fingerprint background check and follow department procedures.

(2) After receiving the results of the national fingerprint background check the provider must prevent an administrator, employee, volunteer, student, or subcontractor from having unsupervised access to a client if the person has a:

(a) Disqualifying criminal conviction or pending charge for a disqualifying crime under chapter 388-113 WAC; or

(b) Disqualifying negative action under WAC 388-78A-2470 or WAC 388-76-10180.

[Statutory Authority: RCW 71A.12.030, 28 C.F.R. § 20.33(d), RCW 74.39A.056, 71A.12.040, and 71A.12.110. WSR 22-23-022, § 388-101D-0070, filed 11/4/22, effective 12/5/22. WSR 17-03-062, reclassified as § 388-101D-0070, filed 1/10/17, effective 2/1/17. Statutory Authority: Chapters 71A.12, 74.34, and 74.39A RCW. WSR 16-18-040, § 388-101-3202, filed 8/30/16, effective 9/30/16.]

WAC 388-101D-0075 Background checks—Requirements for service providers. (1) Service providers must follow the background check requirements described in chapter 388-113 WAC and in this chapter. In the event of an inconsistency, this chapter applies.

(2) The service provider must obtain background checks from the department for all administrators, employees, volunteers, students, and subcontractors who may have unsupervised access to clients.

(3) The service provider must not allow the following persons to have unsupervised access to clients until the service provider receives the department's background check results:

(a) Administrators;

(b) Employees;

(c) Volunteers or students; and

(d) Subcontractors.

(4) If the department's background check results show that an administrator, employee, volunteer, student, or subcontractor has any of the following, then the service provider must prevent that person from having unsupervised access to clients:

(a) A disqualifying conviction or pending criminal charge under chapter 388-113 WAC; or

(b) A disqualifying negative action under chapter 388-113 WAC.

(5) If the background check results show any of the following, then the service provider must conduct a character, suitability, and competence review before allowing the person unsupervised access to clients:

(a) The person has a conviction or pending criminal charge, but the conviction or criminal charge is not disqualifying under chapter 388-113 WAC;

(b) The person has a conviction or pending criminal charge that meets one of the exceptions listed in WAC 388-113-0025; or

(c) Any of the circumstances described in WAC 388-101-3080 apply to the individual.

(6) When a service provider receives the results of a person's background check, the service provider must:

- (a) Inform the person of the results of the background check;
 - (b) Inform the person that they may request a copy in writing of the results of the background check. If requested, a copy of the background check results must be provided within 10 working days of the request; and
 - (c) Notify the department and other appropriate licensing or certification agency of any person resigning or terminated as a result of having a conviction record.
- (7) The service provider must renew the Washington state background check for each administrator, employee, volunteer, student, or subcontractor of a service provider. The service provider must at least every 36 months keep current background check results for each administrator, employee, volunteer, student, or subcontractor of a service provider.
- (8) Licensed assisted living facilities or adult family homes must adhere to the current regulations in this chapter and in the applicable licensing laws.
- (9) All applicants for certification must have a background check.

[Statutory Authority: RCW 71A.12.030, 28 C.F.R. § 20.33(d), RCW 74.39A.056, 71A.12.040, and 71A.12.110. WSR 22-23-022, § 388-101D-0075, filed 11/4/22, effective 12/5/22. WSR 17-03-062, redefined as § 388-101D-0075, filed 1/10/17, effective 2/1/17. Statutory Authority: Chapter 71A.12 RCW. WSR 14-14-030, § 388-101-3250, filed 6/24/14, effective 7/25/14. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 12-02-048, § 388-101-3250, filed 12/30/11, effective 1/30/12. Statutory Authority: RCW 71A.12.080, chapter 74.39A RCW. WSR 10-16-084, § 388-101-3250, filed 7/30/10, effective 1/1/11. Statutory Authority: RCW 71A.12.080. WSR 10-03-065, § 388-101-3250, filed 1/15/10, effective 2/15/10. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3250, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0080 Background checks—Provisional hire—Pending results. Each provider applicant or employee who has lived in Washington state less than three years, or who is otherwise required to complete a national fingerprint-based background check, may be hired for a 120-day provisional period when:

- (1) The person is not disqualified based on the initial results of the background check from the department; and
- (2) A national fingerprint-based background check is pending.

[Statutory Authority: RCW 71A.12.030, 28 C.F.R. § 20.33(d), RCW 74.39A.056, 71A.12.040, and 71A.12.110. WSR 22-23-022, § 388-101D-0080, filed 11/4/22, effective 12/5/22. WSR 17-03-062, redefined as § 388-101D-0080, filed 1/10/17, effective 2/1/17. Statutory Authority: Chapter 71A.12 RCW. WSR 14-14-030, § 388-101-3255, filed 6/24/14, effective 7/25/14. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 12-02-048, § 388-101-3255, filed 12/30/11, effective 1/30/12. Statutory Authority: RCW 71A.12.080, chapter 74.39A RCW. WSR 10-16-084, § 388-101-3255, filed 7/30/10, effective 1/1/11.]

WAC 388-101D-0085 Training requirements. The service provider must ensure that individuals identified under WAC 388-101-3302 have

met the training requirements under WAC 388-101-3260 through 388-101-3300.

[WSR 16-14-058, recodified as § 388-101D-0085, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 12-02-048, § 388-101-3258, filed 12/30/11, effective 1/30/12. Statutory Authority: RCW 71A.12.080, chapter 74.39A RCW. WSR 10-16-084, § 388-101-3258, filed 7/30/10, effective 1/1/11.]

WAC 388-101D-0087 Long-term care worker requirements. Beginning January 1, 2016, all staff employed as long-term care workers as defined by RCW 74.39A.009 (17)(a) are required to meet all the training requirements in the following:

(1) Chapter 388-112 WAC, if the service provider is also licensed as an adult family home or assisted living facility.

(2) Chapter 388-829 WAC, if the service provider is certified only.

[WSR 17-03-062, recodified as § 388-101D-0087, filed 1/10/17, effective 2/1/17. Statutory Authority: Chapters 71A.12, 74.34, and 74.39A RCW. WSR 16-18-040, § 388-101-3259, filed 8/30/16, effective 9/30/16.]

WAC 388-101D-0090 Staff training. The service provider must:

(1) Provide and document required training to staff;

(2) Within the first six months, ensure that staff receives a minimum of thirty-two total hours of training that meets the training requirements of this chapter;

(3) Provide staff training sooner if required by the client's identified needs; and

(4) Meet state and federal laws regarding training; such as, bloodborne pathogens training referenced in WAC 296-823-120.

[WSR 16-14-058, recodified as § 388-101D-0090, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3260, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0095 Staff training before working alone with clients. The service provider must train staff in the following before the employee works alone with clients:

(1) Current individual instruction and support plans of each client with whom the employee works;

(2) Emergency procedures for clients;

(3) The reporting requirements for abuse and neglect under chapter 74.34 RCW; and

(4) Client confidentiality.

[WSR 16-14-058, recodified as § 388-101D-0095, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3270, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0100 Staff training within four weeks of employment. The service provider must provide training within the first four weeks of employing a staff person to include:

- (1) The service provider's mission statement;
- (2) Policies and procedures; and
- (3) On-the-job training.

[WSR 16-14-058, recodified as § 388-101D-0100, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3280, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0105 Staff training within six months of employment. The service provider must provide training within the first six months of employing a staff person, to include:

- (1) First aid and CPR;
- (2) Bloodborne pathogens with HIV/AIDS information;
- (3) Client services;
- (4) Residential guidelines; and
- (5) Positive behavior support.

[WSR 16-14-058, recodified as § 388-101D-0105, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3290, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0110 Staff training to be current. The service provider must ensure that each employee keeps their first-aid training, CPR certification, and bloodborne pathogens training current.

[WSR 16-14-058, recodified as § 388-101D-0110, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3300, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0115 Certified community residential services and supports—General training requirements. (1) The service provider must ensure the following instruction and support services staff meet the training requirements of this chapter:

(a) Administrators who may provide instruction and support services to clients or may supervise instruction and support services staff; and

(b) Instruction and support services staff including their supervisors.

(2) Applicants for initial certification and applicants for change of ownership that are not current providers, who may provide instruction and support services to clients or may supervise instruction and support services staff must meet the training requirements of this chapter.

[WSR 16-14-058, recodified as § 388-101D-0115, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 12-02-048, § 388-101-3302, filed 12/30/11, effective 1/30/12. Statutory Authority: RCW 71A.12.080, chapter 74.39A RCW. WSR 10-16-084, § 388-101-3302, filed 7/30/10, effective 1/1/11.]

WAC 388-101D-0125 Client rights. Clients have the same legal rights and responsibilities guaranteed to all other individuals by the

United States Constitution, federal and state law unless limited through legal processes. Service providers must promote and protect all of the following client rights, including but not limited to:

- (1) The right to be free from discrimination;
- (2) The right to be reasonably accommodated in accordance with state and federal law;
- (3) The right to privacy, including the right to receive and send private mail and telephone calls;
- (4) The right to participate in an appropriate program of publicly supported education;
- (5) The right to be free from harm, including unnecessary physical restraint, isolation, excessive medication, abuse, neglect, abandonment, and financial exploitation; and
- (6) The right to refuse health services, medications, restraints, and restrictions.

[WSR 16-14-058, recodified as § 388-101D-0125, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3320, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0130 Treatment of clients. Service providers must treat clients with dignity and consideration, respecting the client's civil and human rights at all times.

[WSR 16-14-058, recodified as § 388-101D-0130, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3330, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0135 Subcontracting. The service provider must not subcontract any service without prior written approval from the department. The service provider must ensure that all required terms, conditions, assurances and certifications are included in all subcontracts.

[WSR 16-14-058, recodified as § 388-101D-0135, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3340, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0140 Residential guidelines. The service provider must use the following department residential guidelines when providing services to each client:

- (1) Health and safety;
- (2) Personal power and choice;
- (3) Competence and self-reliance;
- (4) Positive recognition by self and others;
- (5) Positive relationships; and
- (6) Integration in the physical and social life of the community.

[WSR 16-14-058, recodified as § 388-101D-0140, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3350, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0145 Client services. Service providers must provide each client instruction and/or support to the degree the individual support plan identifies the service provider as responsible. Instruction and/or support to the client may include but are not limited to the following categories:

- (1) Home living activities;
- (2) Community living activities;
- (3) Life-long learning activities;
- (4) Health and safety activities;
- (5) Social activities;
- (6) Employment;
- (7) Protection and advocacy activities;
- (8) Exceptional medical support needs; and
- (9) Exceptional behavioral support needs.

[WSR 16-14-058, recodified as § 388-101D-0145, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3360, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0150 Client health services support. The service provider must provide instruction and/or support as identified in the individual support plan and as required in this chapter to assist the client with:

- (1) Accessing health, mental health, and dental services;
- (2) Medication management, administration, and assistance;
- (3) Maintaining health records;
- (4) Arranging appointments with health professionals;
- (5) Monitoring medical treatment prescribed by health professionals;
- (6) Communicating directly with health professionals when needed; and
- (7) Receiving an annual physical and dental examination unless the appropriate medical professional gives a written exception.

[WSR 16-14-058, recodified as § 388-101D-0150, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3370, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0155 Medical devices. (1) For purposes of this section the term "medical device" means any piece of medical equipment used to treat a client's assessed need.

(2) Use of some medical devices poses a safety risk for clients. Examples of medical devices with known safety risks are transfer poles, helmets, straps and belts on wheelchairs or beds, and bed side rails.

(3) Medical devices with known safety risks must not be used by the service provider:

- (a) As a restraint; or
- (b) For staff convenience.

(4) Before using medical devices with known safety risks for any client, the service provider must:

- (a) Review the client's assessment to identify the client's need;
- (b) Identify and implement interventions that might decrease the need for the use of a medical device;

- (c) Document the use of less restrictive and less invasive options, successful or not;
- (d) Provide the client and client's family or legal representative with information about the anticipated benefits and safety risks of using the device to enable them to make an informed decision about whether or not to use the device;
- (e) Obtain a current physician's order that describes the medical necessity for use of the device and the anticipated duration of use; and
- (f) Provide written instructions to staff regarding safe and proper use of the device.

[WSR 16-14-058, recodified as § 388-101D-0155, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.080. WSR 10-03-065, § 388-101-3372, filed 1/15/10, effective 2/15/10.]

WAC 388-101D-0160 Nurse delegation. (1) Service provider staff must not perform a delegated nursing task for the client before the delegating nurse has obtained consent from the client or person authorized to give consent.

(2) The service provider must not allow an employee to perform any nursing task that violates applicable statutes and rules, including:

- (a) Chapter 18.79 RCW, Nursing care;
- (b) Chapter 18.88A RCW, Nursing assistants;
- (c) Chapter 246-840 WAC, Practical and registered nursing;
- (d) Chapter 246-841 WAC, Nursing assistants; and
- (e) Chapter 246-888 WAC, Medication assistance.

[WSR 16-14-058, recodified as § 388-101D-0160, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3375, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0165 Client transportation. (1) The service provider must meet the client's transportation needs by:

- (a) Not charging the client for transportation costs except as specified in the client's individual support plan;
- (b) Using the client's medicaid coupons for covered transportation, if available; and
- (c) Ensuring that other transportation is provided as specified in the client's individual support plan.

(2) The service provider must provide transportation or ensure that clients have a way to get to and from:

- (a) Emergency medical care;
- (b) Medical appointments; and
- (c) Therapies.

(3) As specified in the client's individual support plan, the service provider must provide necessary assistance with transportation to and from:

- (a) School or other publicly funded services;
- (b) Work;
- (c) Leisure or recreation activities; and
- (d) Client-requested activities.

(4) A vehicle that the service provider uses to transport clients must be insured as required by chapters 46.29 and 46.30 RCW.

(5) The service provider must maintain a business automobile insurance policy on service provider owned vehicles used to transport clients.

(6) The service provider must maintain nonowned vehicle insurance coverage for vehicles not owned by the service provider but used to transport clients.

(7) Service providers, employees, subcontractors, and volunteers who transport clients must have a valid driver's license as required by chapter 46.20 RCW.

[WSR 16-14-058, recodified as § 388-101D-0165, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3380, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0170 Physical and safety requirements. (1) Crisis diversion support service providers are exempt from the requirements in this section.

(2) The service provider must ensure that the following home safety requirements are met for each client unless otherwise specified in the client's individual support plan:

- (a) A safe and healthy environment;
- (b) Accessible telephone equipment and a list of emergency contact numbers;
- (c) An evacuation plan developed and practiced with the client;
- (d) Unblocked door and window for emergency exit;
- (e) A safe storage area for flammable and combustible materials;
- (f) An operating smoke detector, with a light alarm for clients with hearing impairments;
- (g) An accessible flashlight or other safe accessible light source in working condition; and
- (h) Basic first-aid supplies.

(3) The service provider must assist clients in regulating household water temperature unless otherwise specified in the client's individual support plan as follows:

- (a) Maintain water temperature in the household no higher than one hundred and twenty degrees Fahrenheit;
- (b) Check water temperature when the client first moves into the household and at least once every three months from then on; and
- (c) Regulate water temperature for clients who receive twenty-four hour support, and for other clients as specified in the individual support plan.

(4) The service provider must document and keep records that indicate that physical safety requirements are met for each client.

(5) A client may independently document these requirements are met when the client's individual support plan specifies this level of client involvement.

[WSR 16-14-058, recodified as § 388-101D-0170, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3390, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0175 Services to nonclients. Before providing services to nonclients in the same household with clients, the service provider must:

- (1) Provide the department with a written description of the household composition;
- (2) Obtain written approval from the division of developmental disabilities; and
- (3) Obtain written consent from each client in the household or the client's legal representative if the client is unable to consent.

[WSR 16-14-058, recodified as § 388-101D-0175, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3400, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0180 Community protection clients and other clients in the same household. Before allowing a community protection program client to live in the same household with supported living clients who are not in the community protection program, the service provider must:

- (1) Provide the department with a written description of the household composition;
- (2) Participate with the treatment team during the household composition review;
- (3) Obtain written approval from the division of developmental disabilities; and
- (4) Obtain written consent from each client in the household or the client's legal representative if the client is unable to consent.

[WSR 16-14-058, recodified as § 388-101D-0180, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3410, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0185 Client refusal to participate in services.

- (1) The service provider must notify the case manager if the client's health and safety is adversely affected by the client's refusal to participate in services.
- (2) Service providers must document each client's refusal to participate in:
 - (a) Physical and safety requirements, as outlined in WAC 388-101-3390; and
 - (b) Client health services support under WAC 388-101-3370.
- (3) Service providers must document the following:
 - (a) A description of events relating to the client's refusal to participate in these services;
 - (b) That the client was informed of the benefits of these services and the possible risks of refusal;
 - (c) A description of the service provider's efforts to give or acquire the services for the client; and
 - (d) Any health or safety concerns that the refusal may pose.
- (4) The service provider must:
 - (a) Review this documentation with the client or the client's legal representative at least every six months; and
 - (b) Request that the client or client's legal representative sign and date the document after reviewing it.

[WSR 16-14-058, recodified as § 388-101D-0185, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3420, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0190 What must a provider do if a client experiences a change in support needs? If a client experiences a change in support needs, the provider must:

- (1) Coordinate with the client to the maximum extent possible to:
 - (a) Review the client's individual instruction and support plan (IISP) to determine whether the IISP meets the client's needs and requirements under chapter 388-101D WAC, and update if needed;
 - (b) Review the client's positive behavior support plan (PBSP), if the client has one, to determine whether the PBSP meets the client's needs and requirements under chapter 388-101D WAC, and update if needed;
 - (c) Review the client's person-centered service plan (PCSP) and, if necessary, notify DDA that changes to the PCSP may be needed;
 - (d) Participate in a significant change assessment, if one occurs, unless requested by the client not to do so; and
 - (e) Implement the new PCSP, if updated.
- (2) Contact the resource manager if the provider believes additional resources or a rate assessment are needed.

[Statutory Authority: RCW 71A.12.030 and 71A.26.030. WSR 24-02-042, § 388-101D-0190, filed 12/27/23, effective 1/27/24. WSR 16-14-058, re codified as § 388-101D-0190, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3430, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0195 What must a provider do when a client's support needs remain unmet? (1) If the client's support needs remain unmet after following the procedures in WAC 388-101D-0190, the provider must submit a written request to the client's case manager for assistance with addressing the unmet need.

- (2) No more than five working days after receipt of the provider's request, DDA must respond to address the unmet need, which might include identification of a critical case.

[Statutory Authority: RCW 71A.12.030 and 71A.26.030. WSR 24-02-042, § 388-101D-0195, filed 12/27/23, effective 1/27/24. WSR 16-14-058, re codified as § 388-101D-0195, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3440, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0196 What is the client critical case protocol?

- (1) The client critical case protocol is a formal, person-centered process for addressing unmet residential support needs for a client receiving services from a contracted supported living provider, which, if unaddressed might result in a disruption in residential services.
 - (2) DDA must include in the client critical case protocol:
 - (a) The client, if they choose to participate;
 - (b) The client's legal representative, if the client has one, and if they choose to participate;
 - (c) A representative from the client's current supported living agency; and
 - (d) DDA.
 - (3) The steps of the client critical case protocol include DDA:
 - (a) Identifying the client's unmet need as a critical case;

- (b) Notifying parties in subsection (2) of this section that a critical case has been identified;
- (c) Conducting a critical case conference under WAC 388-101D-0198;
- (d) Identifying action steps through a critical case conference; and
- (e) Distributing an outcome summary to participants for review and correction.

[Statutory Authority: RCW 71A.12.030 and 71A.26.030. WSR 24-02-042, § 388-101D-0196, filed 12/27/23, effective 1/27/24.]

WAC 388-101D-0197 Who may request a client critical case protocol and when is it initiated? (1) A client, the client's legal representative, or the provider may request a critical case protocol if:

- (a) The client is at risk of losing their home;
- (b) The client is at risk of losing their supported living provider;
- (c) The client is medically cleared for discharge from a hospital but does not have a discharge plan;
- (d) The client's person-centered service plan or positive behavior support plan cannot be implemented as written; or
- (e) There is other indication of a critical case.

(2) DDA must respond to the request for a critical case protocol no more than five working days after receiving the request.

(3) A client critical case protocol may be initiated by DDA when requested by:

- (a) The client or legal representative, if the client has one; or
- (b) The supported living provider.

(4) DDA must initiate a client critical case protocol if the provider suspends the client's services or DDA learns that the client is at risk of losing residential supports from the provider.

[Statutory Authority: RCW 71A.12.030 and 71A.26.030. WSR 24-02-042, § 388-101D-0197, filed 12/27/23, effective 1/27/24.]

WAC 388-101D-0198 Who must attend a critical case conference and when must the conference occur? (1) The client's critical case conference must be attended by:

- (a) The client, if the client chooses to attend;
- (b) The client's legal representative, if the client has one, and if the legal representative chooses to attend;
- (c) A representative from the client's current supported living agency; and
- (d) DDA.

(2) If requested, DDA must invite other people identified by the client or the client's legal representative, if the client has one.

(3) The client may identify people whom the client does not want to attend a critical case conference.

(4) The critical case conference must occur no more than 10 business days after identification of a critical case.

(5) If the client, or the client's legal representative, if the client has one, does not attend the first critical case conference within the 10-day timeframe:

- (a) The conference may occur as scheduled;

(b) A follow-up conference must be offered to the client and their legal representative, if the client has one; and

(c) The outcome summary must be shared with the client and their legal representative, if the client has one, for review and correction.

[Statutory Authority: RCW 71A.12.030 and 71A.26.030. WSR 24-02-042, § 388-101D-0198, filed 12/27/23, effective 1/27/24.]

WAC 388-101D-0200 When may a provider terminate a client's services? (1) A provider must not terminate a client's services unless the provider determines and documents that:

(a) The provider cannot meet the client's needs;

(b) The client's safety or the safety of other people in the residence is endangered;

(c) The client's health or the health of other people in the residence would otherwise be endangered; or

(d) The provider ceases to operate.

(2) Before a provider may terminate a client's services, the provider must:

(a) Engage in the client critical case protocol and attend a critical case conference if the client receives services from a contracted supported living provider; and

(b) At least 60 days before the termination date, send written notice to:

(i) The client and the client's legal representative or necessary supplemental accommodation; and

(ii) DDA.

(3) The notice to the client must state the:

(a) Reason for the termination;

(b) Circumstances that led to the termination;

(c) Steps taken to prevent the termination; and

(d) Effective date of the termination.

(4) The terminating provider must participate in transition meetings when requested by DDA, the client, or the new provider.

(5) Crisis diversion service providers are exempt from the requirements in this section.

[Statutory Authority: RCW 71A.12.030 and 71A.26.030. WSR 24-02-042, § 388-101D-0200, filed 12/27/23, effective 1/27/24. WSR 16-14-058, re-codified as § 388-101D-0200, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3450, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0201 When may the provider suspend a client's services? (1) A contracted supported living provider may immediately suspend a client's services if:

(a) The provider cannot safely meet the client's needs;

(b) The actions or continued presence of the client endangers the health or safety of the client, other clients, those working with the client, or member of the public; and

(c) The client is in a:

(i) Hospital;

(ii) Jail;

(iii) Health care facility; or

(iv) Other setting that can address the client's needs.

(2) The provider must give written notice to the client, their legal representative, if they have one, and DDA before suspending the client's services.

(3) The notice must specify the provider's reasons for suspending the client's services.

(4) While the client's services are suspended, the provider must engage in the client critical case protocol to determine the client's support needs and if the client will choose to:

(a) Resume services with the provider and the provider agrees;

(b) Transition to a new provider; or

(c) Transition to another service.

(5) The suspension status must be addressed at a critical case conference. The provider must inform the client and DDA if the status of the suspension changes.

(6) Crisis diversion service providers are exempt from the requirements in this section.

[Statutory Authority: RCW 71A.12.030 and 71A.26.030. WSR 24-02-042, § 388-101D-0201, filed 12/27/23, effective 1/27/24.]

WAC 388-101D-0205 Individual support plan. The service provider must use the client's current individual support plan in the development of the individual instruction and support plan.

[WSR 16-14-058, recodified as § 388-101D-0205, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3460, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0210 Development of the individual instruction and support plan. (1) The service provider must develop and implement an individual instruction and support plan for each client that incorporates the department's residential guidelines in developing instruction and support activities.

(2) In developing the individual instruction and support plan, the service provider must:

(a) Work with the client to develop goals based on the individual support plan that will be worked on during the implementation of the individual instruction and support plan for the upcoming year;

(b) Identify how the instruction and/or support activities will be provided to meet the assessed needs of the client as described in the individual support plan;

(c) Ensure that the individual instruction and support plan contains or refers to other applicable support and/or service information; and

(d) Include the participation and agreement of the client and other individuals the client wants included.

(3) The service provider must send a copy of the individual instruction and support plan goals together with a list of applicable support and service information and where the information is located to the case manager for review.

[WSR 16-14-058, recodified as § 388-101D-0210, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3470, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0215 Documentation of the individual instruction and support plan. For each client the service provider must:

- (1) Develop and keep a written record of the individual instruction and support plan that includes the elements required in WAC 388-101-3470;
- (2) Include a section or page in the individual instruction and support plan that provides or references all applicable support or service information pertaining to the client;
- (3) Review and update the plan to reflect changes in the assessed needs as described in the individual support plan;
- (4) Sign and date the plan's documents; and
- (5) Document the client's agreement with the plan as well as the client's legal representative if applicable.

[WSR 16-14-058, recodified as § 388-101D-0215, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3480, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0220 Implementation of the individual instruction and support plan. The service provider must:

- (1) Oversee the progress made on each client's individual instruction and support plan;
- (2) Coordinate with other staff, and other providers serving the client, and other interested persons as needed, in implementing the individual instruction and/or support plan; and
- (3) Revise and update the plan as the client's assessed needs change.

[WSR 16-14-058, recodified as § 388-101D-0220, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3490, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0225 Accessibility of the individual instruction and support plan. The service provider must make the individual instruction and support plan accessible at all times to:

- (1) Staff to provide direction on what they are to do to instruct and/or support the client;
- (2) The client receiving service;
- (3) The client's legal representative; and
- (4) Representatives of the department.

[WSR 16-14-058, recodified as § 388-101D-0225, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3500, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0230 Ongoing updating of the individual instruction and support plan. The service provider must:

- (1) Review and revise the individual instruction and support plan as goals are achieved or as client assessed needs change in order to reflect the client's current needs, goals, and preferences:
 - (a) At least semi-annually; and
 - (b) At any time requested by the client or the client's legal representative.

(2) Send an updated copy of the instruction and support goals of the individual instruction and support plan and the list of applicable support and service information and where the information is located to the case manager for review.

[WSR 16-14-058, recodified as § 388-101D-0230, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3510, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0235 Shared expenses and client related funds. (1) For purposes of this section "common household expenses" means costs for rent, shared food and household supplies, and utilities, including but not limited to water, garbage, cable television/radio, telephone, and electricity.

(2) The service provider must ensure that common household expenses are shared equitably among all clients living in the household.

(3) If the service provider receives funds for the client from any source, the service provider must be able to show that all the funds received are:

- (a) Given to the client or the client's legal representative;
- (b) Deposited to the client's account; or
- (c) Used only for the client.

[WSR 16-14-058, recodified as § 388-101D-0235, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.080. WSR 10-03-065, § 388-101-3520, filed 1/15/10, effective 2/15/10. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3520, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0240 Individual financial plan. (1) The service provider must develop and implement an individual financial plan with client participation when the client's individual support plan:

- (a) Identifies that the client needs support to manage funds; and
- (b) Designates the service provider as responsible for that support; or
- (c) Indicates the service provider manages any portion of the client's funds.

(2) The service provider must obtain signatures from the client and the client's legal representative on the individual financial plan.

(3) The service provider must include the following in the client's individual financial plan:

- (a) Client funds and income managed by the service provider;
- (b) Client funds and income managed by the client and the client's legal representative;
- (c) The type of accounts containing client funds;
- (d) A description of how the client's funds will be spent during a typical month;
- (e) Money management instruction or support provided to the client; and
- (f) If applicable, asset management including such things as personal property, burial plan, retirement funds, stock, and vehicles.

(4) The service provider must review the individual financial plan with the client at least every twelve months.

(5) The service provider must send a copy of each client's individual financial plan to:

- (a) The client's legal representative; and
- (b) The client's case manager upon request.

[WSR 16-14-058, recodified as § 388-101D-0240, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3530, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0245 Managing client funds. (1) Before managing a client's funds the service provider must either:

(a) Obtain written consent from the client or the client's legal representative; or

(b) Become the representative payee.

(2) For any client funds managed by the service provider, the service provider must:

(a) Separately track each client's money, even when several clients reside together;

(b) Maintain a current running balance of each client account;

(c) Make deposits to the client's bank account within one week of receiving the client's money;

(d) Prevent the client's bank account from being overdrawn;

(e) Ensure that client cash funds do not exceed seventy-five dollars per client unless specified differently in the individual financial plan; and

(f) Retain receipts for each purchase over twenty-five dollars.

(3) Social Security Administration requirements for managing the client's Social Security income take precedence over these rules if:

(a) The service provider is the client's representative payee; and

(b) The Social Security Administration requirement conflicts with these rules.

(4) When the service provider manages the client's funds and receives a check made out to the client, the service provider must:

(a) Get the client's signature and designation "for deposit only"; or

(b) Get the client's "x" mark in the presence of a witness and cosign the check with the designation "for deposit only"; and

(c) Deposit the check in the client's bank account as required under subsection (2)(c) of this section.

(5) If a check for the client is made out to a payee other than the client, the service provider must ask the payee to sign the check.

(6) The service provider must not ask the client to sign a blank check.

(7) The service provider may only assist the client to make purchases by check when the client signs the check at the time of the purchase unless:

(a) Otherwise specified in the client's individual financial plan; or

(b) The service provider is the client's representative payee.

(8) The service provider must document in the client's record the name of each staff that may assist the client with financial transactions.

[WSR 16-14-058, recodified as § 388-101D-0245, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3540, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0250 Using client funds for health services. The service provider must document all denials for client health services from the health care authority, the department, and medical insurance companies. The service provider:

- (1) Must notify the case manager of the denial in writing; and
- (2) May use client funds for the client's health services if no other funding is available.

[WSR 16-14-058, recodified as § 388-101D-0250, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 12-02-048, § 388-101-3545, filed 12/30/11, effective 1/30/12. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3545, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0255 Reconciling and verifying client accounts.

(1) For any client funds managed by the service provider, the service provider must:

(a) Reconcile the client's bank accounts to the client's bank statements each month;

(b) Reconcile the client's cash account each month; and

(c) Verify the accuracy of the reconciliation.

(2) The service provider must not allow the same staff person to do both the verification and reconciliation of the client's account.

(3) The service provider must ensure that the verification or reconciliation is done by a staff person who did not:

(a) Make financial transactions on the client's behalf; or

(b) Assist the client with financial transactions.

[WSR 16-14-058, recodified as § 388-101D-0255, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3550, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0260 Combining service provider and client funds.

The service provider must not combine client funds with any service provider funds, such as agency operating funds.

[WSR 16-14-058, recodified as § 388-101D-0260, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3560, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0265 Client bankbooks and bankcards. (1) For clients who manage their own funds, the service provider must document in the client's record when the client asks the provider to hold the client's bankbooks and bankcards.

(2) When the service provider holds the client's bankcards or bankbooks as requested by the client:

(a) It is not assumed that the service provider is managing the client's funds; and

(b) The client must continue to have access to his or her own funds.

[WSR 16-14-058, recodified as § 388-101D-0265, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3570, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0270 Client financial records. (1) For client funds that the service provider manages, the service provider must retain documentation including documentation for bank and cash accounts.

(2) The service provider must also keep the following documentation for client financial transactions:

- (a) Monthly bank statements and reconciliations;
- (b) Checkbook registers and bankbooks;
- (c) Deposit receipts;
- (d) Receipts for purchases over twenty-five dollars;
- (e) A ledger showing deposits, withdrawals, and interest payments to each client; and
- (f) A control journal for trust accounts.

(3) The service provider must keep the following documentation for cash and debit transactions:

- (a) A detailed ledger signed by the staff who withdrew any of the client's money;
- (b) A detailed accounting of the funds received on behalf of the client including:
 - (i) Cash received from writing checks over the purchase amount; and
 - (ii) A list of where the money was spent.
- (c) Receipts for purchases over twenty-five dollars when service provider staff withdrew the money.

[WSR 16-14-058, recodified as § 388-101D-0270, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3580, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0275 Transferring client funds. (1) When the service provider manages a client's funds and the client changes service providers, the previous service provider must transfer all of the client's funds, except funds necessary to pay unpaid bills, to the client or designee as soon as possible but no longer than thirty days.

- (2) When transferring funds, the previous provider must:
 - (a) Have an agreement with the client regarding the amount of money to be withheld to pay bills;
 - (b) Inform the client's case manager about any agreement in subsection (2)(a) of this section;
 - (c) Give the client and the client's legal representative a written accounting of all known client funds;
 - (d) When applicable, give the new service provider a written accounting of all transferred client funds;
 - (e) Obtain a written receipt from the client and legal representative for all transferred funds; and
 - (f) When applicable, obtain the new service provider's written receipt for the transferred funds.
- (3) When the client moves to another living arrangement without supported living services or the client's whereabouts are unknown, the

service provider must transfer the client's funds within one hundred eighty days to:

- (a) The client's legal representative;
- (b) The department; or
- (c) The requesting governmental entity.

(4) When the client dies, the service provider must transfer the client's funds within ninety days to:

- (a) The client's legal representative;
- (b) The requesting governmental entity; or
- (c) The department if the client does not have a legal heir.

(5) Social Security Administration requirements for managing the client's Social Security income take precedence over these rules for transferring client funds if:

- (a) The service provider is the client's representative payee; and
- (b) The Social Security Administration requirement conflicts with these rules.

[WSR 16-14-058, recodified as § 388-101D-0275, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3590, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0280 Client loans. (1) The service provider may loan funds to a client from the service provider's funds and collect the debt from the client in installments.

- (2) The client's service provider must not:
 - (a) Charge the client interest for any money loaned; or
 - (b) Borrow funds from the client.

(3) The provider must keep the following loan documentation for each loan:

- (a) A loan agreement signed by the client or the client's legal representative;
- (b) Amount of the loan;
- (c) Payments on the loan balance; and
- (d) The current balance owed.

[WSR 16-14-058, recodified as § 388-101D-0280, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3600, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0285 Client reimbursement. The service provider must pay the client the total amount involved when:

- (1) The service provider or staff has stolen, misplaced, or mismanaged client funds; or
- (2) Service charges are incurred on a trust account that the service provider manages for the client.

[WSR 16-14-058, recodified as § 388-101D-0285, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3610, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0290 Client payment. When the client performs work for the service provider, the service provider must pay the client:

- (1) At least the current minimum wage; and

(2) According to state and federal requirements.

[WSR 16-14-058, recodified as § 388-101D-0290, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3620, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0295 Medication services—General. (1) If the service provider supports a client with a prescribed or over-the-counter medication, as identified in the client's person-centered service plan, the service provider must do all of the following:

(a) Have systems in place to ensure that medications are given as ordered and in a manner that safeguards the client's health and safety.

(b) Ensure that each client receives their medication as prescribed, except as provided for in the medication refusal section or in the medication assistance section regarding altering medication.

(c) Ensure each medication has a legible:

(i) Pharmacist-prepared label; or

(ii) Manufacturer label with the name of the client for whom the medication is prescribed added to the container.

(2) Group homes licensed as an assisted living facility or adult family home must meet the medication management requirements of chapter 388-78A or 388-76 WAC. For any difference in requirements the assisted living facility or adult family home medication rules take precedence over the medication rules of this chapter.

[Statutory Authority: RCW 71A.12.030 and 71A.12.120. WSR 24-13-066, § 388-101D-0295, filed 6/14/24, effective 7/15/24. WSR 16-14-058, recodified as § 388-101D-0295, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 14-10-028, § 388-101-3630, filed 4/28/14, effective 5/29/14. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3630, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0300 Medication—Types of support. The service provider must provide medication support as specified in the client's individual support plan. Types of client support include:

(1) Self-administration of medication;

(2) Medication assistance;

(3) Nurse delegated medication administration; and

(4) Medication administration by a practitioner.

[WSR 16-14-058, recodified as § 388-101D-0300, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3640, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0305 Medication—Self-administration. If a client is assessed as independent in self-administration of medications the service provider must inform the client's case manager if they have a reason to suspect that the client is no longer safe to self-administer medications.

[WSR 16-14-058, recodified as § 388-101D-0305, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3650, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0310 Medication assistance. If the client is assessed as needing assistance with medication, the service provider may assist the client to take medications in any of the following ways:

- (1) Communicating the prescriber's order to the client in such a manner that the client self-administers his/her medication properly;
- (2) Reminding or coaching the client when it is time to take a medication;
- (3) Opening the client's medication container;
- (4) Handing the client the medication container;
- (5) Placing the medication in the client's hand;
- (6) Transferring medication from one container to another for the purpose of an individual dose (e.g., pouring a liquid medication from the container to a calibrated spoon or medication cup or using adaptive devices);
- (7) Altering a medication by crushing or mixing:
 - (a) Only if the client is aware that the medication is being altered or added to food or beverage; and
 - (b) A pharmacist or other qualified practitioner has determined it is safe to alter medication; and
 - (c) It is documented on the prescription container or in the client's record.
- (8) Guiding or assisting the client to apply or instill skin, nose, eye and ear preparations. Hand-over-hand administration is not allowed; and
- (9) For group homes that have an assisted living facility or adult family home license, refer to chapter 388-78A or 388-76 WAC for additional tasks that may be allowed.

[WSR 16-14-058, recodified as § 388-101D-0310, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 14-10-028, § 388-101-3660, filed 4/28/14, effective 5/29/14. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3660, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0315 Medication administration—Nurse delegation. If a client is assessed as requiring medication administration and the service provider is not a practitioner, the service provider must ensure the assistance is provided by a licensed health care professional or under nurse delegation as per chapters 246-840 WAC and 18.79 RCW.

[WSR 16-14-058, recodified as § 388-101D-0315, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3670, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0320 Medication administration. (1) If a service provider is a licensed health care professional, the licensed professional may administer the client's medication.

(2) Service providers may only administer medication under the order of a physician or a health care professional with prescriptive authority.

[WSR 16-14-058, recodified as § 388-101D-0320, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3680, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0325 Medication refusal. (1) When a client who is receiving medication support from the service provider chooses to not take his or her medications, the service provider must:

(a) Respect the client's right to choose not to take the medication(s) including psychoactive medication(s); and

(b) Document the time, date and medication the client did not take.

(2) The service provider must take the appropriate action, including notifying the prescriber or primary care practitioner, when the client chooses to not take his or her medications and the client refusal could cause harm to the client or others.

[WSR 16-14-058, recodified as § 388-101D-0325, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3690, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0330 Storage of medications. (1) The service provider must keep a client's medications so they are not readily available to other clients.

(2) The service provider must store medications:

(a) Under proper conditions for sanitation, temperature, moisture, and ventilation, and separate from food or toxic chemicals; and

(b) In the original medication container with a pharmacist-prepared label, a manufacturer's label in accordance with WAC 388-101D-0295, or in a medication organizer clearly labeled with the:

(i) Name of the client for whom the medication is prescribed;

(ii) Name of each medication;

(iii) Medication dose and frequency to be given; and

(iv) Route each medication is to be administered.

(3) Group homes must:

(a) Keep all medications in locked storage; and

(b) Use medication organizers only when filled by a pharmacist.

[Statutory Authority: RCW 71A.12.030 and 71A.12.120. WSR 24-13-066, § 388-101D-0330, filed 6/14/24, effective 7/15/24. WSR 16-14-058, recodified as § 388-101D-0330, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3700, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0335 Medication organizers. (1) Service providers may allow medication organizers maintained by the individual when the organizers are filled by:

(a) The client;

(b) A licensed pharmacist;

(c) An RN; or

(d) The client's legal representative or a family member.

(2) Service providers providing medication assistance or administration to a client must ensure that the medication organizers are labeled.

(3) The client, a pharmacist, an RN, or the client's legal representative or family member may label the medication organizer.

(4) When there is a change in medications by the prescriber, the individual filling the medication organizers must replace labels with required updated information immediately.

[WSR 16-14-058, recodified as § 388-101D-0335, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3710, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0340 Medications—Documentation. The service provider must maintain a written record of all medications administered to, assisted with, monitored, or refused by the client.

[WSR 16-14-058, recodified as § 388-101D-0340, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3720, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0345 Disposal of medications. (1) The service provider or his/her designee must properly dispose of all medications that are discontinued, out of date, or superseded by another.

(2) When disposing client medications the service provider must list the:

- (a) Medication;
- (b) Amount; and
- (c) Date that it was disposed.

(3) Two people, one of whom may be the client, must verify the disposal by signature.

(4) For group homes that have an assisted living facility or adult family home license, refer to chapters 388-78A or 388-76 WAC for medication disposal requirements.

[WSR 16-14-058, recodified as § 388-101D-0345, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 14-10-028, § 388-101-3730, filed 4/28/14, effective 5/29/14. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3730, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0350 Psychoactive medication assessment. If a client displays symptoms of mental illness and/or persistent challenging behavior, the service provider must:

(1) Refer the client for a professional assessment;

(2) Prior to the referral, prepare a psychiatric referral summary, including the frequency and severity of the symptoms or behaviors, and take or send this document to the treatment professional conducting the assessment;

(3) Respect the client's preference to visit the treatment professional independently; and

(4) If drugs are prescribed, have the prescribing professional assess the client at least annually to review the continued need for the medication(s) and possible dosage reduction.

[WSR 16-14-058, recodified as § 388-101D-0350, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3740, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0355 What must a client record contain if the client is prescribed a psychotropic medication? (1) If the client is prescribed psychotropic medication, the client's record must contain:

- (a) The date the client met with the prescriber;
- (b) Whether the provider was present when the prescriber examined the client;
- (c) Any medical or behavioral information the provider conveyed to the prescriber;
- (d) Any instructions the provider received from the prescriber;
- (e) The drug information sheet obtained from the prescriber or dispensing pharmacy for the psychotropic medication prescribed;
- (f) The date the provider sent the client's legal representative a copy of the psychotropic drug information sheet, if requested; and
- (g) Any documentation required under WAC 388-101D-0340.

(2) If the provider does not attend the appointment, the provider must document in the client record whether the client attended the appointment independently or with a third party.

(3) The provider must report to the prescriber if:

- (a) The medication does not appear to have the prescriber's intended effects; or
- (b) Any changes in the client's behavior or health might be an adverse side effect of the medication.

[Statutory Authority: RCW 71A.12.030 and 71A.12.120. WSR 21-12-061, § 388-101D-0355, filed 5/27/21, effective 6/27/21. WSR 16-14-058, recodified as § 388-101D-0355, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3750, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0365 Psychoactive medications—Other. If psychoactive medications are used for diagnoses other than mental illness or persistent challenging behavior, the service provider must follow the general medication requirements in WAC 388-101-3630 through 388-101-3730.

[WSR 16-14-058, recodified as § 388-101D-0365, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3770, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0370 Confidentiality of client records. (1) The service provider must:

- (a) Keep all client record information confidential;
- (b) Ensure the department's right to have access to and copies of any records as requested or needed; and

(c) Provide access to and copies of client records to the client, or the client's legal representative upon their request.

(2) The service provider must have an authorized release of information form for any transfer or inspection of records, other than those specified in subsection (1) of this section. The authorization form must:

(a) Be specific to the type of information about the transfer or inspection; and

(b) Be signed by the client or client's legal representative.

(3) A signed release of information is valid for up to one year from the date of signature.

[WSR 16-14-058, recodified as § 388-101D-0370, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3780, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0375 Charging for searching and duplicating records. (1) The service provider:

(a) Must not charge the department or the client for any searching or duplication of records requested or needed; and

(b) May charge the client's legal representative acting on behalf of the client for searching and duplication of records at a cost not to exceed twenty-five cents a page.

(2) The service provider must not charge the client's legal representative acting on behalf of the client for searching and duplication of records if the client is incapable of making the request.

[WSR 16-14-058, recodified as § 388-101D-0375, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3790, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0380 Retention of client records. (1) While supporting a client, a service provider must keep all of the client's records for at least four years.

(2) After a client's participation with a service provider ends, the service provider must keep the client's records for at least six years.

[WSR 16-14-058, recodified as § 388-101D-0380, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3800, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0385 Contents of client records. (1) Crisis diversion service providers are exempt from the client record requirements specified in this section.

(2) Service providers must keep, in each client's record, information including but not limited to the following:

(a) Client's name, address, and Social Security number;

(b) Name, address, and telephone number of the client's involved family members, guardian or legal representative;

(c) Copies of legal guardianship papers, if provided;

(d) Client health records, including:

- (i) Name, address, and telephone number of the client's physician, dentist, mental health service provider, and any other current health care service provider;
- (ii) Current health care service providers' instructions about health care needed, including appointment dates and date of next appointment if appropriate;
- (iii) Written documentation that the health care service providers' instructions have been followed; and
- (iv) Record of major health events and surgeries when known.
- (e) Copy of the client's most recent individual support plan;
- (f) Client's individual instruction and support plan including:
 - (i) Instruction and support activities for each client as a basis for review and evaluation of client's progress;
 - (ii) Semiannual review of the individual instruction and support plan;
 - (iii) Consultation with other service providers and other interested persons;
 - (iv) Individual instruction and support plan revisions and changes; and
 - (v) Other activities relevant to the client that the client wants included.
- (g) Progress notes and incident reports;
- (h) The client's financial records for funds managed by the service provider, including:
 - (i) Receipts, ledgers and records of the client's financial transactions; and
 - (ii) Client's related bankbooks, checkbooks, bank registers, tax records and bank statements.
- (i) Burial plans and wills.

[WSR 16-14-058, recodified as § 388-101D-0385, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3810, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0390 Client's property records. (1) Crisis diversion support service providers are exempt from the requirements in this section.

- (2) The service provider must assist clients in maintaining current, written property records unless otherwise specified in the individual support plan. The record must consist of:
 - (a) A list of personal possessions with a value of at least twenty-five dollars that the client owns when moving into the program;
 - (b) A list of personal possessions with a value of seventy-five dollars or more per item after the client moves into the program;
 - (c) Description and identifying numbers, if any, of the property;
 - (d) The date the client purchased the items after moving into the program;
 - (e) The date and reason for addition or removal from the record;
- and
- (f) The signature of the staff or client making the entry.

[WSR 16-14-058, recodified as § 388-101D-0390, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3820, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0395 Record entries. The service provider must ensure that all record entries are:

- (1) Documented in ink;
- (2) Written legibly at the time of or immediately following the occurrence of the event recorded; and
- (3) Signed and dated by the person making the entry.

[WSR 16-14-058, recodified as § 388-101D-0395, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3830, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0400 Positive behavior support. Positive behavior support means a recognized approach to supporting clients with challenging behaviors. Positive behavior support focuses on changing the client's environment, skills, and other factors that contribute to the client's challenging behavior(s). Positive behavior support uses a functional assessment to help build respectful plans for clients with challenging behavior(s).

[WSR 16-14-058, recodified as § 388-101D-0400, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3840, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0405 When is a functional assessment required? (1) The provider must complete a functional assessment of a client's behavior if:

(a) The exceptional behavior support needs section of the client's person-centered service plan indicates extensive support is necessary to prevent:

- (i) Self-injury;
- (ii) Sexual aggression;
- (iii) Suicide attempt;
- (iv) Emotional outburst;
- (v) Property destruction;
- (vi) Assault or injury to others; or

(vii) A behavior identified in the client's person-centered service plan under "prevention of other serious behavior problem(s)-specify";

(b) The client is prescribed a psychotropic medication on a *pro re nata* (PRN or as needed) basis to change a target behavior; or

(c) The provider uses—or plans to use—restrictive procedures or physical restraints as defined in WAC 388-101-3000.

(2) Target behavior means a behavior identified by the provider that needs to be modified or replaced to meet the client's health and safety needs.

(3) The client's functional assessment must:

(a) Be based on two or more of the following:

- (i) Direct observation;
- (ii) Interview with anyone who has personal knowledge of the client;

(iii) Questionnaire; or

(iv) Record review;

(b) Describe:

- (i) Client history and antecedents pertinent to the target behavior;
- (ii) The client's current status;
- (iii) The target behavior; and
- (iv) The apparent function of the target behavior; and
- (c) Exist:
 - (i) In draft form before the effective date of the client being added to the provider's contract; and
 - (ii) In final form no later than forty-five calendar days after the effective date of the client being added to the provider's contract.
- (4) A draft functional assessment must define the target behavior and its apparent function.
- (5) The provider may revise a functional assessment written by another provider. The provider must identify the adapted functional assessment as its own.
- (6) If the provider identifies a new target behavior for a client, the provider must complete a functional assessment for that behavior within forty-five days.
- (7) The provider may use a community protection participant's risk assessment in place of a functional assessment if it was completed in the past eighteen months and describes:
 - (a) The client's history pertinent to the target behavior;
 - (b) The client's current status;
 - (c) The target behavior; and
 - (d) The apparent function of the target behavior.
- (8) A functional assessment is required for any target behavior not included in the client's community protection program risk assessment.

[Statutory Authority: RCW 71A.12.030 and 71A.12.120. WSR 21-12-061, § 388-101D-0405, filed 5/27/21, effective 6/27/21. WSR 16-14-058, recodified as § 388-101D-0405, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3850, filed 12/21/07, effective 2/1/08.]

- WAC 388-101D-0410 When is a positive behavior support plan required?**
- (1) If a client requires a functional assessment under WAC 388-101D-0405, the provider must train to and implement a written individualized positive behavior support plan based on that functional assessment.
 - (2) The client's positive behavior support plan must:
 - (a) Describe:
 - (i) The target behavior;
 - (ii) Actions that may be taken to prevent the target behavior;
 - (iii) Actions that may be taken in response to the target behavior;
 - (iv) Actions that may be taken if the target behavior increases in frequency, duration, or impact;
 - (v) The replacement behavior that matches the target behavior's function;
 - (vi) How to teach the replacement behavior;
 - (vii) How to respond to the replacement behavior; and
 - (viii) Benchmarks to evaluate the positive behavior support plan's effectiveness; and
 - (b) Exist:

- (i) In draft form before the effective date of the client being added to the provider's contract; and
 - (ii) In final form no later than sixty calendar days after the effective date of the client being added to the provider's contract.
- (3) A draft positive behavior support plan must include direction to direct-support professionals on how to respond to target behaviors.
- (4) The provider may revise a positive behavior support plan written by another provider. The provider must identify the adapted positive behavior support plan as its own.
- (5) If the provider identifies a new target behavior for a client, the provider must implement a positive behavior support plan addressing that behavior within sixty days.
- (6) The provider must collect data on:
- (a) The target behavior's:
 - (i) Frequency;
 - (ii) Duration;
 - (iii) Impact; and
 - (b) The replacement behavior's:
 - (i) Frequency;
 - (ii) Duration; and
 - (iii) Impact.
- (7) The provider must analyze the data collected under subsection (6) of this section at least every six months to determine the effectiveness of the positive behavior support plan.
- (8) If the analysis under subsection (7) of this section indicates the target behavior is not decreasing in frequency, duration, or impact, the provider must:
- (a) Revise the positive behavior support plan; or
 - (b) Document the reason revising the support plan is not indicated.

[Statutory Authority: RCW 71A.12.030 and 71A.12.120. WSR 21-12-061, § 388-101D-0410, filed 5/27/21, effective 6/27/21. WSR 16-14-058, recodified as § 388-101D-0410, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3860, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0415 Client protection. While the functional assessment and positive behavior support plan are being developed, the service provider must:

- (1) Protect the client and others; and
- (2) Document in the client's record how the protection is being done.

[WSR 16-14-058, recodified as § 388-101D-0415, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3870, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0420 Group home providers. (1) When considering restrictive procedures, group home providers licensed as assisted living facilities must comply with all requirements in chapter 388-78A WAC regarding restraints.

(2) When considering restrictive procedures, group home providers licensed as adult family homes must comply with all requirements in chapter 388-76 WAC regarding restraints.

[WSR 16-14-058, recodified as § 388-101D-0420, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.030 and [71A.12].080. WSR 14-10-028, § 388-101-3880, filed 4/28/14, effective 5/29/14. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3880, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0425 Restrictive procedures. (1) The service provider may:

(a) Only use restrictive procedures for the purpose of protecting the client, others, or property; and

(b) Not use restrictive procedures for the purpose of changing behavior in situations where no need for protection is present.

(2) The service provider must have documentation on the proposed intervention strategy before implementing restrictive procedures including:

(a) A description of the behavior(s) that the restrictive procedures address;

(b) A functional assessment of the challenging behavior(s);

(c) The positive behavior support strategies that will be used;

(d) A description of the restrictive procedure that will be used including:

(i) When and how it will be used; and

(ii) Criteria for termination of the procedure; and

(e) A plan to document the use of the procedure and its effect.

(3) The service provider must terminate implementation of the restrictive procedures as soon as the need for protection is over.

[WSR 16-14-058, recodified as § 388-101D-0425, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3890, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0430 Restrictive procedures approval. (1) The service provider must have documentation of the proposed intervention strategy that:

(a) Lists the risks of the challenging behavior(s);

(b) Lists the risks of the proposed restrictive procedure(s);

(c) Explains why less restrictive procedures are not recommended;

(d) Indicates nonrestrictive alternatives to the recommendation that have been tried but were unsuccessful; and

(e) Includes space for the client and/or the client's legal representative to write comments and opinions regarding the plan and the date of those comments.

(2) The service provider must consult with the division of developmental disabilities if:

(a) The client and/or the client's legal representative disagree with parts of the proposed restrictive procedure; and

(b) An agreement cannot be reached.

(3) Before the service provider implements restrictive procedures they must be approved in writing by:

(a) The service provider's administrator; or

(b) Someone designated by the service provider to have approval authority; and

(c) Someone designated by the division of developmental disabilities, when required by the residential services contract.

[WSR 16-14-058, recodified as § 388-101D-0430, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3900, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0435 Physical intervention systems. Service providers who are using physical interventions with clients must have a physical intervention techniques system that includes at least the following:

- (1) Discussion of the need for positive behavior support;
- (2) Communication styles that help the client to calm down and resolve problems;
- (3) Techniques to prevent escalation of behavior before it reaches the stage of physical assault;
- (4) Techniques for staff to use in response to clients and their own fear, anger, aggression, or other negative feelings;
- (5) Cautions that physical intervention technique(s) may not be changed except as needed for individual disabilities, medical, health, and safety issues. A health care professional and a program trainer must approve all modifications;
- (6) Evaluation of the safety of the physical environment;
- (7) Issues of respect and dignity of the client;
- (8) Use of the least restrictive physical interventions depending upon the situation;
- (9) Identification of division of developmental disabilities approved and prohibited physical intervention techniques;
- (10) The need to release clients from physical restraint as soon as possible;
- (11) Instruction on how to support physical interventions as an observer, recognizing signs of:
 - (a) Distress by the client; and
 - (b) Fatigue by the staff; and
- (12) Discussion of the importance of complete and accurate documentation.

[WSR 16-14-058, recodified as § 388-101D-0435, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3910, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0440 Physical interventions. (1) The service provider must use the least restrictive intervention needed to protect each client, others, and property.

(2) The service provider may only use physical interventions with a client when positive or less restrictive techniques have been tried and determined to be insufficient to:

- (a) Protect the client;
 - (b) Protect others; or
 - (c) Prevent property damage.
- (3) The service provider must:
- (a) Terminate the intervention for the client as soon as the need for protection is over; and
 - (b) Only use restrictive physical interventions for the client as part of a positive behavior support plan except:

(i) In an emergency when a client's behavior presents an immediate risk to the health and safety of the client or others, or a threat to property; or

(ii) When an unknown, unpredicted response from a client jeopardizes the client's or others safety.

[WSR 16-14-058, recodified as § 388-101D-0440, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3920, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0445 Restrictive physical interventions. Prior to implementing restrictive physical interventions with a client, the provider must:

- (1) Provide documentation to the division of developmental disabilities regarding the proposed intervention;
- (2) Involve the client and the client's legal representative in discussion regarding the need for physical intervention;
- (3) Determine the kind of notification the client's legal representative wants to receive when physical interventions are used; and
- (4) Comply with the requirements defined under WAC 388-101-3890.

[WSR 16-14-058, recodified as § 388-101D-0445, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3930, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0450 Physical intervention training. (1) Before using physical interventions with a client, the provider must train all staff who will be implementing those interventions in:

- (a) The use of physical interventions;
 - (b) Crisis prevention techniques; and
 - (c) Positive behavior support.
- (2) Each staff designated to supervise or observe restraint use must be trained in:
- (a) The observation and supervision of physical restraints; and
 - (b) The recognition of potential risks or negative outcomes related to the use of physical restraints.
- (3) The service provider must ensure that staff receiving physical intervention techniques training:
- (a) Complete the course of instruction;
 - (b) Demonstrate competency before being authorized to use the techniques with clients; and
 - (c) Review deescalation and physical intervention techniques annually.

[WSR 16-14-058, recodified as § 388-101D-0450, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3940, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0455 Mechanical and chemical restraints. (1) The service provider must protect each client's right to be free from mechanical and chemical restraints and involuntary seclusion.

(2) The service provider must use the least restrictive alternatives needed to protect the client, others, or property.

(3) If needed, mechanical restraints may only be used for needed medical or dental treatment and only under the direction of a licensed physician or dentist.

(4) Restraints used as allowed by subsection (3) of this section must be justified and documented in the client's record.

[WSR 16-14-058, recodified as § 388-101D-0455, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3950, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0460 Monitoring physical and mechanical restraints.

(1) The service provider must ensure that any client who is being physically or mechanically restrained is continuously observed to ensure that risks to the client's health and safety are minimized.

(2) The service provider must keep documentation that includes:

(a) A description of events immediately preceding the client's behavior which led to the use of the restraint;

(b) The type of restraint used;

(c) Length of time the client was restrained;

(d) The client's reaction to the restraint;

(e) Staff that were involved; and

(f) Injuries sustained by anyone during the intervention.

[WSR 16-14-058, recodified as § 388-101D-0460, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3960, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0465 Community protection—Approval. In order to provide support to community protection clients, the community protection service provider must, in addition to the other requirements in this chapter:

(1) Be approved by the division of developmental disabilities to serve community protection clients;

(2) Have security precautions reasonably available to enhance protection of neighbors, children, vulnerable adults, animals, and others;

(3) Have for each client an integrated treatment plan with goals, objectives, and therapeutic interventions to assist the client to avoid offending or reoffending; and

(4) Collaborate and coordinate between division of developmental disabilities staff, the treatment team, and community agencies and members.

[WSR 16-14-058, recodified as § 388-101D-0465, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3970, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0470 Community protection—Policies and procedures.

A community protection service provider must, in addition to other policy and procedure requirements listed in this chapter, develop, train to, and implement the following procedures:

(1) Client security and supervision;

(2) Use of a chaperone agreement that describes who will supervise the client when the client is not under the direct supervision of the community protection service provider;

(3) Compliance with state laws requiring sex offender registration with law enforcement;

(4) Reporting to the division of developmental disabilities the client's refusal to comply with the treatment plan; and

(5) Reporting to the division of developmental disabilities and law enforcement client actions that violate the law or a court order.

[WSR 16-14-058, recodified as § 388-101D-0470, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3980, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0475 Community protection—Treatment team meetings.

The community protection service provider must participate in treatment team meetings quarterly or more frequently as needed.

[WSR 16-14-058, recodified as § 388-101D-0475, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-3990, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0480 Community protection—Staff training.

In addition to the staff training requirements in this chapter and the residential services contract, the community protection service provider must ensure that community protection program staff receive training specific to:

(1) Community protection within ninety calendar days of working with a community protection client; and

(2) The needs, supports, and services for clients to whom they are assigned.

[WSR 16-14-058, recodified as § 388-101D-0480, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4000, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0485 Community protection—Treatment plan.

The community protection service provider must implement the client's treatment plan as written by a qualified professional/therapist in accordance with any procedures published by the department.

[WSR 16-14-058, recodified as § 388-101D-0485, filed 6/30/16, effective 8/1/16. Statutory Authority: RCW 71A.12.080. WSR 10-03-065, § 388-101-4010, filed 1/15/10, effective 2/15/10. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4010, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0490 Community protection—Client records.

In addition to all other client record requirements in this chapter community protection service providers must include the following in the client's record:

- (1) Psychosexual and/or psychological evaluations and risk assessments;
- (2) Plans and assessments including:
 - (a) The written individual plan;
 - (b) The functional assessment;
 - (c) The positive behavior support plan; and
 - (d) A therapist approved treatment plan.
- (3) The client's sex offender registration with law enforcement authorities when required by law;
- (4) Notice to the division of developmental disabilities of the client's sex offender registration; and
- (5) Agreements, requirements, and plans, including the chaperone agreement, with individuals who support the client.

[WSR 16-14-058, recodified as § 388-101D-0490, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4020, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0495 Community protection—Client transportation.

In addition to the other client transportation requirements defined in this chapter, community protection service providers must provide or ensure supervised transportation as needed, including but not necessarily limited to, medical emergencies, appointments, to and from the day program site, and community activities.

[WSR 16-14-058, recodified as § 388-101D-0495, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4030, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0500 Community protection—Client home location.

- (1) When assisting a client in selecting a home, the provider must conduct and document site checks of the proposed residence at different days and times of the week.
- (2) After selecting a home, and before the client moves into the home, the provider must document and provide to DDA:
 - (a) The address of the home;
 - (b) The reasons the home is appropriate considering the client's specific risk factors;
 - (c) Restrictive procedures and security precautions the provider will implement; and
 - (d) Approval from the provider's administrator.

[Statutory Authority: RCW 71A.12.030 and 71A.12.280. WSR 21-19-050, § 388-101D-0500, filed 9/13/21, effective 11/1/21. WSR 16-14-058, recodified as § 388-101D-0500, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4040, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0505 Community protection—Reducing a client's restrictions. The community protection service provider must participate in any treatment team meetings held to review and consider a reduction in client restrictions.

[WSR 16-14-058, recodified as § 388-101D-0505, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4050, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0510 Community protection—Leaving the program against treatment team advice. (1) The community protection service provider must immediately notify the division of developmental disabilities when the client leaves the community protection program against treatment team advice; and

(2) Document the client's departure in the client's record.

[WSR 16-14-058, recodified as § 388-101D-0510, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4060, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0515 Crisis diversion—Access to services. The crisis diversion services provider must:

(1) Be approved by the department to provide crisis diversion services; and

(2) Make crisis diversion services available to clients twenty-four hours per day.

[WSR 16-14-058, recodified as § 388-101D-0515, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4070, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0520 Crisis diversion bed services—Location. The crisis diversion bed services provider must:

(1) Provide those services in a residence that is maintained by the crisis diversion bed services provider;

(2) Provide a private, furnished bedroom for each crisis diversion client; and

(3) Support only one client in each residence.

[WSR 16-14-058, recodified as § 388-101D-0520, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4080, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0525 Crisis diversion bed services—Services and activities. The crisis diversion bed services provider must provide the following services and activities:

(1) Support staff, twenty-four hour per day, seven days a week, to meet the client's needs as identified in the client's assessment;

(2) Access to the instruction and support services identified in the client's individual support plan;

(3) Three meals per day plus snacks;

(4) The following items at no cost to the client:

(a) Toiletries and personal care items;

(b) Bedding and towels;

(c) Access to laundry facilities; and

(d) Access to local telephone calls.

- (5) Therapeutic interventions aimed at improving the client's functioning;
- (6) Medication monitoring as needed;
- (7) Transportation to and from the crisis diversion bed location and other necessary appointments or services;
- (8) Referral to health care services as needed;
- (9) Supports for performing personal hygiene routines and activities of daily living if needed by the client; and
- (10) An accessible site for clients with physical disabilities.

[WSR 16-14-058, recodified as § 388-101D-0525, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4090, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0530 Crisis diversion bed services—Treatment plan.

- (1) Crisis diversion bed services providers must develop a crisis services treatment plan within forty-eight hours of the client's placement.
 - (2) The treatment plan must include:
 - (a) The supports and services that must be provided; and
 - (b) Client discharge goals.

[WSR 16-14-058, recodified as § 388-101D-0530, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4100, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0535 Crisis diversion bed and support service providers—Client records.

- (1) Crisis diversion bed and support service providers must keep the following information in client records:
 - (a) Client's name, address, and Social Security number;
 - (b) Name, address, and telephone number of the client's relative or legal representative; and
 - (c) Progress notes and incident reports on clients.

[WSR 16-14-058, recodified as § 388-101D-0535, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4110, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0540 Crisis diversion bed services—Client records.

- (1) Crisis diversion bed services providers must maintain a record for each client admitted to the crisis diversion bed.
 - (2) The client record must include the following information when available:
 - (a) Basic demographic information;
 - (b) Referral process and intake information;
 - (c) Medication records;
 - (d) Psychiatric records;
 - (e) Crisis diversion bed services provider notes;
 - (f) The crisis services treatment plan;
 - (g) Cross systems crisis plan;
 - (h) Disposition at the client's discharge;
 - (i) Dates of admission and discharge;
 - (j) Incident reports;

- (k) Copies of legal representative and guardianship papers;
- (l) Health records including the name, address, and telephone number of the client's:
 - (i) Physician;
 - (ii) Dentist;
 - (iii) Mental health service provider; and
 - (iv) Any other health care service providers.
- (m) Health care service providers' instructions, if any, about health care tasks and date of next appointment;
- (n) Written documentation that the health care service providers' instructions have been followed; and
- (o) A record of known major health events, including surgeries.

[WSR 16-14-058, recodified as § 388-101D-0540, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4120, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0545 Crisis diversion support services—Location.

The crisis diversion support services provider must provide those services in the client's own home.

[WSR 16-14-058, recodified as § 388-101D-0545, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4130, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0550 Crisis diversion support services—Services and activities. The crisis diversion support services provider must provide the following services and activities:

- (1) Therapeutic interventions to help stabilize the client's behavioral symptoms;
- (2) Assistance with referral to mental health services if needed; and
- (3) Technical assistance to the client's caregivers on support strategies.

[WSR 16-14-058, recodified as § 388-101D-0550, filed 6/30/16, effective 8/1/16. Statutory Authority: Chapter 71A.12 RCW. WSR 08-02-022, § 388-101-4140, filed 12/21/07, effective 2/1/08.]

WAC 388-101D-0560 What is a group training home? "Group training home" means a nonprofit facility certified under this chapter and chapter 388-101 WAC. A group training home provides twenty-four-hour community-based instruction and support services to two or more adults.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0560, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0565 What are the physical requirements for a group training home bedroom? (1) The group training home must ensure each client's bedroom:

- (a) Is a private room, unless the client requests to share a room;
 - (b) Has a window or door that provides natural light, is covered with a screen, and allows for emergency exit;
 - (c) Has a closet or wardrobe, which must not be considered part of the usable square footage;
 - (d) Has a locking door, unless the client's person-centered service plan indicates that it is unsafe for the client to have a locking door;
 - (e) Has direct, unrestricted access to common areas;
 - (f) Has adequate space for mobility aids, such as a wheelchair, walker, or lifting device; and
 - (g) Is at least eighty square feet of usable floor space for a single-occupancy room, one hundred and forty square feet for a double-occupancy room.
- (2) For a group training home licensed as an adult family home January 1, 2019, a double bedroom must be at least one hundred and twenty square feet of usable floor space.
- (3) Unless the client chooses to provide their own bed, the home must provide each client:
- (a) A clean, comfortable bed that meets the client's needs; and
 - (b) A waterproof mattress cover if needed or requested by the client.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0565, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0570 What are the physical requirements for a group training home bathroom? (1) The group training home must provide handwashing sinks with hot and cold running water in the ratio of one for every five clients.

(2) The group training home must provide toilets in the ratio of one for every five clients.

(3) The group training home must provide bathing options, with hot and cold running water, for clients that meet the needs identified in their person-centered service plans.

(4) A client must have access to a toilet and shower or tub without going through another client's room.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0570, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0575 How must a group training home manage food and maintain its kitchen? A group training home must manage food and maintain its kitchen under chapter 246-215 WAC if the group training home:

- (1) Supports more than six clients; and
- (2) Was certified after January 1, 2019.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0575, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0580 Must the group training home adapt the home to suit a client's needs? If a client's needs change, the group training home must make a reasonable attempt to adapt the home to meet the needs identified in the client's person-centered service plan.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0580, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0585 What building codes apply to group training homes? (1) A group training home must meet state and local building codes in effect at the time of their:

(a) Initial licensure as an adult family home or assisted living facility; or

(b) Initial certification as a group training home.

(2) A group training home may be required to modify the home to meet current building code requirements if the building poses a health or safety risk to a client.

(3) If a group training home makes any construction changes to the home, the construction must meet current state and local building codes.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0585, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0590 When must a group training home be inspected by a local building official? The group training home must be inspected by a local building official:

(1) Before initial certification; and

(2) After any construction that:

(a) Affects a client's ability to enter or exit the home; or

(b) Makes a significant structural change to the home.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0590, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0595 What steps must be taken before moving a client out of the home during construction? (1) Before moving a client out of the group training home during planned construction, the home must provide thirty days' written notice to the client, the client's guardian if they have one, DDA, and residential care services.

(2) The notice must include:

(a) The client's temporary address;

(b) A plan for delivering services to the client while temporarily out of the home;

(c) A transition plan to support the client while moving out of and returning home; and

(d) The projected completion date for the construction project.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0595, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0600 Who is responsible for cleaning and maintaining a group training home? (1) The group training home's fixtures, furnishings, exterior, and interior, including the client's bedroom, must be safe, sanitary, and well maintained.

(2) The group training home staff must provide housekeeping instruction and support to a client in accordance with the client's person-centered service plan.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0600, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0605 How must a group training home protect clients from risks associated with bodies of water? (1) Any body of water at the group training home over twenty-four inches deep must be enclosed by a fence at least forty-eight inches high.

(2) Any door or gate that directly leads to the body of water must have an audible alarm.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0605, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0610 What requirements must a group training home's fireplaces, heaters, and stoves meet? (1) The group training home must not use a space heater unless it has an underwriters laboratories (UL) rating.

(2) Any hot surface, such as a fireplace or wood-burning or pellet stove, must have a stable barrier that prevents accidental client contact.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0610, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0615 What requirements must the group training home's smoke detectors and fire extinguishers meet? (1) The group training home must install approved automatic smoke detectors:

(a) In every client's bedroom;

(b) On every floor of the home; and

(c) In an interconnected manner so when one alarm is triggered, the whole system reacts.

(2) The approved smoke detectors must:

(a) Be in working condition at all times; and

(b) Meet the specific needs of all clients living in the home.

(3) The group training home must have a five-pound 2A:10B-C fire extinguisher on each floor of the home, unless the local fire authority requires a different type of fire extinguisher.

(4) Each fire extinguisher must be:

(a) Installed according to manufacturer recommendations;

(b) Annually replaced or inspected and serviced;

(c) In proper working order; and

(d) Readily available for use at all times.

(5) The group training home must be located in an area with public fire protection.

(6) A group training home that was a licensed assisted living facility before January 1, 2019 must:

(a) Meet requirements under subsections (1) through (5); or

(b) Annually demonstrate they have passed inspection by the state fire marshal.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0615, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0620 How must a group training home prepare for emergency evacuations? (1) The group training home must display an emergency evacuation plan in a common area on every floor of the home.

(2) The emergency evacuation plan must include:

(a) A floor plan of the home with clearly marked exits;

(b) Emergency evacuation routes; and

(c) The location for the clients to meet outside the home.

(3) The group training home must be able to evacuate all clients to a safe location outside the home in five minutes or less.

(4) A group training home that was a licensed assisted living facility before January 1, 2019 must:

(a) Meet requirements under subsection (3); or

(b) Annually demonstrate they have passed inspection by the state fire marshal.

(5) If a client requires assistance during an evacuation, the group training home must ensure the client's primary evacuation route does not require the client to evacuate:

(a) Through another person's bedroom; or

(b) Using stairs, an elevator, chairlift, or platform lift.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0620, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0625 How much emergency food and drinking water must be kept in the group training home? (1) The group training home must keep an emergency food supply on-site to meet the needs of the clients and staff for at least seventy-two hours. The food supply must meet the dietary needs of each client.

(2) The group training home must keep at least three gallons of water on-site for each client and staff member, which must be:

(a) In sealed, food-grade containers;

(b) Stored in a cool, dry location away from direct sunlight; and

(c) Chlorinated or commercially bottled.

(3) Chlorinated water must be replaced every six months.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0625, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0630 What must a group training home consider when providing nutritional services? (1) The group training home must:

- (a) Serve breakfast, lunch, and dinner each day;
 - (b) Provide twenty-four hour access to snacks and beverages, including nutritious options and options preferred by the client;
 - (c) Provide a special diet, if ordered by a healthcare professional, such as low sodium, general diabetic, and mechanical soft food diets;
 - (d) Provide prescribed nutrient concentrates and supplements when prescribed in writing by a healthcare practitioner; and
 - (e) Maintain a sufficient supply of food at all times.
- (2) The group training home must plan meals that accommodate the client's preferences and support the client's choice.
 - (3) The group training home must provide meals, snacks, and beverages that, if applicable, address each client's:
 - (a) Nutritional needs;
 - (b) Food allergies and sensitivities; and
 - (c) Need for altered diet due to a risk of choking or aspiration.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0630, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0635 What requirements must an employee or volunteer meet to prepare meals and snacks in a group training home? (1) If a group training home employee prepares food for clients, the employee must:

- (a) Complete safe food handling training requirements under chapter 388-829 WAC;
 - (b) Prepare food for clients in a safe and sanitary manner; and
 - (c) Have a food worker card under chapter 246-217 WAC.
- (2) If a group training home volunteer prepares food for clients, the volunteer must:
 - (a) Prepare food for clients in a safe and sanitary manner; and
 - (b) Have a food worker card under chapter 246-217 WAC.
 - (3) The group training home staff must provide meal preparation instruction and support to the client in accordance with the client's person-centered service plan.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0635, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0640 When may a pet live in a group training home? A pet living in the group training home must:

- (1) Not compromise any client rights, preferences, or medical needs;
- (2) Be clean and healthy with proof of current vaccinations; and
- (3) Pose no significant health or safety risks to any client residing in the home.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0640, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0645 What infection control practices must a group training home implement? (1) The group training home must implement occupational safety and health administration (OSHA) universal precautions to limit the spread of infections when:

- (a) Providing client care and services;
- (b) Cleaning the home;
- (c) Washing laundry; and
- (d) Managing infectious waste.

(2) The group training home must:

(a) Provide staff with the supplies, equipment, and protective clothing necessary for limiting the spread of infections;

(b) Restrict a staff person's contact with clients when the staff person has an illness that is likely to spread in the group training home by casual contact; and

(c) Report communicable diseases as required under chapter 246-100 WAC.

(3) If a client has a positive tuberculosis test result, the group training home must ensure the client:

(a) Has a chest X-ray no more than seven days after the positive test result;

(b) Is evaluated for signs and symptoms of tuberculosis; and

(c) Follows the recommendation of the client's healthcare provider.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0645, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0650 What must a group training home do to detect and manage tuberculosis? To detect and manage tuberculosis, a group training home must:

(1) Ensure each employee has a tuberculin test no more than three days after beginning to work with clients unless otherwise exempt under this chapter;

(2) Implement policies and procedures that comply with tuberculosis standards set by the Centers for Disease Control and Prevention and applicable state laws;

(3) Comply with the Washington Industrial Safety and Health Act (WISHA) standards for respiratory protection; and

(4) Comply with chapter 296-842 WAC requirements to protect the health and safety of clients who may come into contact with people who have infectious tuberculosis.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0650, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0655 What type of tuberculin test must a group training home employee complete? (1) A group training home employee required to complete a tuberculin test must complete:

(a) A tuberculin skin test with results read by a qualified medical professional between forty-eight and seventy-two hours after placing the test; or

(b) Another FDA-approved tuberculin test.

(2) A group training home employee must complete a blood test for tuberculosis if the employee declines a skin test.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0655, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0660 When is a group training home employee not required to complete a tuberculin test? (1) A group training home employee is not required to complete a tuberculin test if the employee:

(a) Has documentation of an FDA-approved tuberculin test with negative results from within the last twelve months;

(b) Has documentation of a positive FDA-approved tuberculin test with documented evidence of:

(i) Adequate therapy for active disease; or

(ii) Completion of treatment for latent tuberculosis infection preventive therapy;

(c) Self-reports a history of positive test results under subsection (2) or (3) of this section.

(2) If a group training home employee self-reports a history of positive test results with chest X-ray results from the last twelve months, the employee must:

(a) Provide a copy of the normal X-ray results to the group training home; and

(b) Be evaluated for signs and symptoms of tuberculosis.

(3) If a group training home employee self-reports a history of positive test results without chest X-ray results, the employee must:

(a) Be referred to a medical provider;

(b) Complete a chest X-ray within seven days; and

(c) Be cleared by a medical professional before returning to work if the X-ray is abnormal and consistent with tuberculosis.

(4) A group training home volunteer working less than four hours a month is exempt from tuberculin test requirements.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0660, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0665 When must a group training home employee complete a one-step tuberculin test? A group training home employee must complete a one-step tuberculin test if the employee:

(1) Has a documented history of a negative result from a previous two-step skin test; or

(2) Is tested using an FDA-approved tuberculin test that does not require a two-step testing process.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0665, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0670 When must a group training home employee complete a two-step tuberculin test? A group training home employee must complete a two-step tuberculosis skin test if the employee:

(1) Has never had a tuberculosis skin test;

- (2) Cannot demonstrate proof of a previous negative two-step skin test; or
- (3) Completed a one-step skin test more than twelve months ago.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0670, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0675 What happens if a group training home employee receives a positive tuberculin test result? If a group training home employee receives a positive result to tuberculosis skin or blood testing, the group training home must:

- (1) Ensure the employee completes a chest X-ray within seven days;
- (2) Evaluate the employee for signs and symptoms of tuberculosis immediately and annually thereafter; and
- (3) Follow the recommendations of the employee's medical provider.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0675, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0680 Must a group training home employee complete follow-up testing? A group training home employee with negative tuberculin test results may be required by a public health provider or licensing authority to complete follow-up testing:

- (1) After exposure to active tuberculosis;
- (2) When tuberculosis symptoms are present; or
- (3) Periodically as determined by the public health provider.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0680, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0685 What must a group training home do when a client or employee has tuberculosis symptoms or receives a positive chest X-ray result? If a group training home client or employee has tuberculosis symptoms or receives a positive chest X-ray result, the group training home must:

- (1) Report the client or employee with tuberculosis symptoms or a positive chest X-ray to an appropriate medical provider or public health provider;
- (2) Follow the infection control and safety measures ordered by the client or employee's medical provider or a public health provider;
- (3) Implement appropriate infection control measures;
- (4) Apply living or work restrictions if the client or employee poses an infection risk to others; and
- (5) Ensure an employee caring for a client who has active tuberculosis complies with the Washington Industrial Safety and Health Act (WISHA) standards for respiratory protection under chapter 296-842 WAC.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0685, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0690 What records must a group training home maintain related to tuberculin testing? A group training home must:

- (1) Keep the records of tuberculin test results, reports of X-ray findings, and any medical provider or public health provider orders in the group training home;
- (2) Provide the records to a public health provider or licensing agency upon request;
- (3) Retain the records for at least two years after the date the employee quits or is terminated; and
- (4) Provide an employee a copy of the employee's tuberculin test results.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0690, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0695 What rights and protections does a client living in a group training home have? (1) In addition to the client rights under WAC 388-101D-0125 and 388-823-1095, a client living in a group training home has the right to:

- (a) A locking bedroom door, unless it is unsafe for the client and is documented in their person-centered service plan;
 - (b) Share their bedroom only if they consent;
 - (c) Furnish and decorate their bedroom within the terms of their written agreement with the group training home;
 - (d) Retain and use personal possessions, including furniture and clothing, as space permits;
 - (e) Control their own schedule, with support if indicated in their person-centered service plan;
 - (f) Meet privately at any time with visitors of their choosing;
 - (g) Access and review the group training home's certification review results and corrective action plans;
 - (h) View copies of the group training home's policies and procedures at any time;
 - (i) View copies of the certification results, inspection reports, and the group training home's plans of correction at any time;
 - (j) Receive written notice from the group training home of enforcement action that places a hold on referrals for new clients or is related to provisional certification; and
 - (k) A setting that meets requirements under 42 C.F.R. 441.301 (c) (4).
- (2) Each client must sign a written agreement with the group training home. The written agreement must include the client's notice rights for termination of services. The notice rights must not conflict with requirements under WAC 388-101D-0200.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0695, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0700 What notice requirements must a group training home meet? If a client's group training home services are terminated and the client is evicted, before evicting the client the group training home must follow:

- (1) Notice requirements under WAC 388-101D-0200; and
- (2) Applicable legal processes, such as unlawful detainer under chapters 59.12 or 59.16 RCW.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0700, filed 11/20/18, effective 1/1/19.]

WAC 388-101D-0705 What requirements under this chapter is a group training home provider exempt from? A group training home provider contracted with DDA before January 1, 2019 is exempt from requirements under WAC 388-101D-0565, 388-101D-0575, 388-101D-0605, 388-101D-0615.

[Statutory Authority: RCW 71A.12.030, 71A.12.120, 71A.12.040 and 71A.22.010. WSR 18-23-101, § 388-101D-0705, filed 11/20/18, effective 1/1/19.]