AGING AND LONG-TERM SUPPORT ADMINISTRATION (ALTSA)
ADULT FAMILY HOME (AFH)

AFH Initial Inspection Preparation Checklist

This checklist is designed to assist the applicant in preparation for the initial inspection. You are responsible for meeting the requirements of the current Washington Administrative Code (WAC) and Revised Code of Washington (RCW). WACs are listed for reference only and are subject to revision. The onsite initial inspection usually takes between three and five hours depending on the size of the home, the organization of the applicant and any unforeseen on-site environmental challenges. The home should be move in ready on the day of initial inspection. **Please only schedule your initial inspection when you have confirmed your home meets all minimum licensing requirements.**

Interior Physical Environment	WAC 388-76:
Posting: In a visible location for staff, visitor, and residents to view	
☐ Post the ALTSA / Complaint Resolution Unit (CRU) hotline abuse / neglect contact information. Use poster at link here.	10525
☐ Post the WA State Ombudsman contact information. The above poster includes State Ombuds program toll free phone number.	10525
☐ Post Disability Rights of Washington poster (formerly Washington Protection and Advocacy System) to order poster click here Disability Rights of Washington poster.	10525
☐ Place in a visible location in common use area a copy of all complaint and inspection reports, follow-up reports and related cover letters from the last 12 months. For purposes of initial inspection, its only required to provide a location where these reports will be kept.	10585
☐ Post a statement that the past three years of inspection and complaint reports are available upon request.	10585
☐ Have an area designated to post your AFH License.	10584
☐ Post your emergency evacuation floor plan on each level of the house (the floor plan for each level of the home should be specific to that level). Indicate route from each bedroom out of home, the location of the doors, windows, and the outdoor meeting place. This is required for all levels of the home.	10885 / 10890
Common Area(s)	
☐ Each space identified as a common area for residents must be homelike with furnishings that each resident may use and large enough for all residents to use at the same time.	10705
☐ Common area(s) must not be used as a bedroom or sleeping area.	10705
☐ Adequate light fixtures for each task a resident or staff does.	10740
☐ Fireplaces that will be used must prevent the possibility of a resident being burned. A sturdy flame-resistant barrier will need to be installed that will prevent all access points to any hot surface of the fireplace. If fireplace will not be used, plan to provide residents with some type of notice that the home does not plan to utilize the fireplace. Also, plan to demonstrate for the Licensor how you plan to prevent usage of the fireplace.	10825 / 10750
☐ Home must have ventilation.	10750
Bedroom(s)	
☐ Resident privacy must be maintained in the bedroom, i.e., curtains or blinds on windows, bedroom door that closes securely. Pocket, bi-fold, side-hinged, and barn-style doors are all acceptable provided the minimum door width opening is 27 inches and the door allows for visual and auditory privacy for residents.	10575
☐ Each bedroom is an outside room that allows natural light and must have direct access to hallways and corridors, and unrestricted access to common use area. All resident bedrooms must have a window or a door that leads directly to the outside that allows for emergency evacuation.	10685
☐ Bedrooms must meet minimum requirement of usable floor space (**80** usable sq. ft. for one resident and at least **120** usable sq. ft. for two residents). **NOTE: See WAC definition section – "usable floor space."**	10685 / 10690

For additional information, refer to: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers.

Bedroom(s) (continued)	
☐ Every bedroom must have a closet or place to store resident clothing. Resident bedroom closets are not required to have doors, but if the closet does have a door, it must open easily from the inside and outside. Slider style closet doors must have a floor guide installed at the bottom to ensure the slider doors stay securely in place while sliding each direction. Slider style closet doors must allow enough space when closed to allow for a resident to get their fingers in to slide the door open from the inside or the outside, or graspable handles must be placed on the inside and the outside of each slider closet door.	10715
☐ Lighting must be adequate for each task a resident or staff does.	10740
☐ Staff must have means of rapid access to locked bedrooms, toilet rooms, shower rooms, closet, and other resident room. **Please note locks are not required on resident bedroom and bathroom doors for initial inspection.**	10750, 10401
☐ Bedrooms must have a source of heat. If the room has a baseboard / wall heater, it must have a flame resistant and sturdy barrier to prevent resident access all the way around the heater.	10825
☐ Windows must open easily and without a key or tool. Window egress must not be blocked from the inside or from outside. **Please note resident bedroom windows must have a minimum opening area of 5.7 sq. ft. except a grade level floor window opening may have a minimum clear opening of 5.0 sq. ft. Resident bedroom windows must also have a minimum opening height of 24 inches and a minimum opening width of 20 inches.** Resident bedroom windowsills cannot exceed 44 inches from the bedroom floor. **Please be aware the minimum listed height of 24 inches and the minimum listed width of 20 inches will only result in a 3.33 sq. ft. opening and will not meet the minimum required 5.7 and 5.0 sq. ft. opening. Please review** AFH Information Sheet Window Requirements.docx (live.com).	10795
☐ Windows must not have any obstructions blocking the window opening from the inside or the outside.	10795
☐ Windows must have some form of privacy such as curtains or blinds.	10795, 10575
☐ Screens must be intact on doors and windows, and installed securely in a way that will not allow the entry of insects. Window glass, window tracks and sills must be clean and free from anything that could harbor bacteria.	10685 / 10750
☐ Resident bedroom doorway widths must be a minimum of 27 inches. **This is a requirement by Residential Care Services and cannot be found in regulation.** If you choose to add locks to resident bedroom doors, you must have an unlocking device nearby to demonstrate the lock can be quickly opened.	10715
☐ Each resident bedroom must have adequate storage space for clothing and personal belongings. If the home will utilize an armoire, dresser, or something similar in lieu of a closet, the armoire / dresser must be in the resident bedroom at the time of inspection. The armoire / dresser or similar item being used in lieu of the resident room having a closet will be measured and subtracted from the useable floor space of the bedroom. **Please note: Resident bedrooms do not otherwise need to be furnished at time of initial inspection.**	10765
Bathroom(s)	
☐ There must be securely fastened grab bars at the toilet, and in bathing facilities, such as tubs and showers to be utilized by residents. Effective August 1, 2022, the local building official will be solely responsible for measuring the placement of toilet and tub / shower grab bars. Residential Care Services initial inspection Licensors will be responsible for ensuring grab bars that are installed are secure and safe. Licensors will also inspect and address any safety issues such as a toilet and/or shower / tub requiring additional grab bars to ensure resident safety. Bathrooms not intended for resident use will not be required to meet the toilet and bathing unit grab bar requirements. Applicants will need to demonstrate during initial inspection the plan to ensure residents do not access bathrooms not meeting toilet and bathing unit grab bar requirements. **See WAC 51-51-0330 for specific grab bar requirements.**	10695 / WAC 51-51-0330

For additional information, refer to: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers.

Bathroom(s) (continued)	
☐ If a tub / shower or toilet will not be used by residents and does not meet the minimum grab bar requirements, the tub / shower or toilet must be made inaccessible to residents. This includes during initial inspection.	10750
☐ Tub and/or showers intended for resident use must have a non-slip surface.	10750
☐ Staff must have a means of rapid access to locked bathroom if door has a lock on it. Bathroom vanity drawers must not block door when they are open.	10750
☐ There must be access to a toilet, shower / tub without going through another resident's bedroom, including **one** flushing toilet per **five** persons. **Please note: When calculating toilet to people ratio, any person living in the home to include residents, applicant, caregiver etc. will be counted when determining how many toilets will be required.**	10780
☐ Every toilet must have a toilet paper holder.	10750
☐ Residents must have visual and auditory privacy in the bathroom, with no gaps at the door and privacy coverings or glass at the windows.	10575
☐ Bathrooms must have sufficient lighting.	10740
☐ Main bathroom water temperature must not be less than 105°F and must not exceed 120°F.	10750
☐ Bathroom lighting must be adequate.	10750
☐ Bathrooms must be free from toxins.	10750
Kitchen and Laundry Area	
☐ A plan must be in place for providing laundry service as needed, if laundry passes through the kitchen, there must be a written infection control plan outlining how the home will prevent cross contamination. This plan must be emailed to the assigned initial licensor.	10410
☐ Kitchen must be stocked with pots / pans, dishes, silverware, and glasses. The kitchen should be stocked as if residents were moving in on inspection day.	10750
☐ Kitchen and kitchen equipment must be maintained in a clean and sanitary state.	10735
☐ Kitchen sink temperature must not be less than 105°F and must not exceed 120°F.	10750
☐ Kitchen lighting must be adequate.	10750
Medications	
☐ All prescribed, over the counter, and refrigerated medications must be kept in locked storage. Be sure to consider a storage method that ensures resident medications are kept separate.	10485
☐ Must have system to demonstrate a lockable storage plan for refrigerated medications.	10485
Other Items	
☐ If using electronic monitoring equipment, review this WAC section carefully. **Please note: Security style cameras can be utilized at entrances and exits of the home but may not show the view of any resident gathering area at the time of initial inspection.**	10720 / 10725
☐ Call bell system for residents to acquire care and services **IF** caregiver's bedroom not within hearing distance.	10400 / 10685
☐ If the garage contains hazards to the residents, you must have a plan as to how you will keep residents safe from these hazards.	10750
☐ Working smoke detectors must be installed on each level of the home, in each resident bedroom, caregiver / staff sleeping area, and in the immediate vicinity of resident bedrooms and sleeping areas used by adult family home staff. **Smoke detectors MUST be interconnected per the International Residential Code.** Each resident bedroom, hallways in the immediate vicinity of resident and staff sleeping areas and each level of the home. Smoke detector will not be tested during initial inspection but will be verified by your local building official.	10805
☐ Space heaters must be certified by an organization listed as a nationally recognized testing laboratory.	10825
☐ If you have individual wall mounted (cadet) heaters, you need to follow manufactures instructions and safety information. If the heating unit is hot to the touch, the hot surface will be required to be made inaccessible.	10750

For additional information, refer to: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers.

Other Items (continued)	
☐ Baseboard heaters must be made inaccessible if unit is hot to the touch and poses a burn risk to residents.	10750
☐ Ensure hot water temperature is at least 105°F and does not exceed 120°F at all fixtures used by or accessible to residents (bathrooms and kitchen).	10750
☐ Room temperature must be at least 68°F during waking hours and not less than 60°F at night.	10775
☐ A telephone for resident(s) to use in private; must be activated and in service at time of inspection. This does not have to be a landline.	10770
☐ Provide storage for toxic substances.	10750
☐ All windows that can be opened must have screens to prevent flies and/or bugs from entering the home when the window is open.	10750
Exterior Physical Environment	**WAC 388-76:**
☐ The main entrance / exit door must have a lever handle that unlocks inside and outside mechanisms and opens the door, from inside of the house, with a single press of the lever handle, and allows for reentry without the use of a key, tool, or special knowledge. The door must also have a lever handle on the outside. This door must be side hinged, shall provide a clear opening width of not less than 32 inches when measured between the face of the door and the stop and the clear height of the door opening shall not be less than 78 inches when measured from the top of the door threshold to the bottom of the door stop. This door must exit into a public way, yard, or courtyard. **See WAC 51-51-0330.4** and International Residential Code (IRC) sections R311.1 and R311.2 for all emergency egress door requirements	10695
☐ Step or stairs to be utilized by resident, must have handrails on both sides extending the full length of the step or stairs. If stairs will not be utilized by residents, applicant must show on day of inspection how they plan to make the steps inaccessible to residents. **See WAC 51-51-0330.10.**	10695
☐ Ramps must have a safe slope (8.3% or less). All ramps must be inspected by building official. Effective August 1, 2022, the local building official will be solely responsible for measuring ramp and landing slopes. Residential Care Services initial inspection Licensors will be responsible for ensuring all ramps have graspable handrails that extend the full length of the ramp slope and that they are securely installed. Licensors will also inspect and address any safety issues such as uneven or abrupt edges and drop off areas that may pose a trip / fall risk to residents. **See WAC 51-51-0330-9.**	10695
☐ Ramps must have graspable handrails on both sides extending the full length of ramp, 3 x 3 ft. landings at top, bottom and any change in direction, a safe slope, and non- slip surface. **Please note: Required ramp landing average measurements may not exceed 2% in slope.** Effective Effective August 1, 2022, the local building official will be solely responsible for measuring ramp and landing slopes. Residential Care Services initial inspection Licensors will be responsible for ensuring all ramps have graspable handrails that extend the full length of the ramp slope and that they are securely installed. Licensors will also inspect and address any safety issues such as uneven or abrupt edges and drop off areas that may pose a trip / fall risk to residents.	10730 / 10745
☐ Doorways must have smooth transitions on bottom of door threshold to maintain a safe, non-trip hazard.	10750
☐ Decks must be safe including having a non-slip surface, sturdy barriers as required, and edges cannot be a trip hazard.	10750
☐ An outdoor resident area must be safe (from hazards, i.e., busy roads, trip hazards, yard tools, chemicals etc.), usable and accessible to all residents. This space must be large enough to accommodate all AFH residents at the same time. Please note: This area does not have to be furnished on day of inspection.	10750
☐ If you have water hazards as described in WAC 388-76-10783, you must ensure resident safety per this WAC. Water hazards over twenty-four inches deep must be enclosed by fences and gates at least 48 inches high, equipped with an audible alarm that sounds when any door, screen or gate that directly leads to or surrounds the water hazard is opened and secured by locking any doors, screens or gates that lead directly to or surround the water hazard.	10783 / 10784

For additional information, refer to: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers.

☐ If home is located on a busy street, you must be able to demonstrate a plan to ensure resident safety. This plan may include a safety barrier to prevent street access.	10750
☐ If residents will have access to any drop off areas such as rock walls, a barrier must be in place to prevent residents from accessing the fall hazard.	10750
☐ Front, back and side yards accessible to residents must be free from hazards and toxic materials.	10750
☐ Yard must be maintained.	10750
☐ Outdoor buildings will need to be accessed to ensure safety.	10750
☐ If the home has window wells in a resident bedroom, please review the window well requirements located in the International Residential Code sections R310.2.3 and R310.2.3.1.	International Residential Code
Sample Resident Record Review	**WAC 388-76:**
☐ You must have a system to maintain confidential resident records so you can provide the needed care to the residents. During initial inspection, you will be required to demonstrate you have a location (i.e., binder) to house all the areas listed below. The only actual documents listed below you will be required to have at time of inspection is the Personal Inventory Sheet, Resident Information Sheet, Disclosure of Charges and Medication Log.	10315

Your system must be organized so there is a place for the following documents:

☐ Medication Log (388-76-10475)	☐ Resident Information Sheet (388-76-10320)
☐ Financial Record Keeping (388-76-10320)	☐ Personal Inventory Sheet (388-76-10320)
☐ Medical Professional Orders (388-76-10320)	☐ Legal Documents (388-76-10325)
☐ Resident Assessment (388-76-10335)	☐ Preliminary Service Plan (388-76-10320)
☐ Negotiated Care Plan (388-76-103355)	☐ Nurse Delegation (388-76-10315)
☐ Disclosure of Charges (388-76-10540) must be filled-out	☐ Notice of Rights and Services

Administrative Records	**WAC 388:**
☐ Provide a staff orientation checklist. This is the checklist the home will use to orient new staff to specific processes and requirements for the home. Please note this is not a checklist of all required staff trainings.	WAC-112A-0240
☐ Have a process and system to ensure employees meet caregiver qualifications, including First Aid / CPR. **See also (388-112A).**	10130 / 10135
☐ The adult family home must complete the department's disclosure of charges form and provide a copy to each resident admitted to the home.	10540
☐ For any pets, living or visiting, in the home: proof of updated rabies vaccination **is required**. If a pet will live in the AFH, the pet must be available during inspection for the licensor to evaluate the temperament.	10230
☐ Provide proof of type of sewage disposal system (public sewer or independent sewage system). **NOTE:** If you have a septic system, please be sure to obtain a document from your local health / inspecting authority showing that the system has been inspected and approved, that the septic system will be utilized in an AFH, and how many total people (not bedrooms) can be accommodated with the system. **If you have questions about this requirement please discuss with assigned Licensor, or call (360) 725-2575**	10755
☐ Provide proof of your water system (public or private well water). **NOTE:** If you have a private well, please be sure to obtain a document from your local health / inspecting authority showing the system has been inspected, approved and what type of water rating the well has. **If you have questions about this requirement please discuss with assigned Licensor, or call (360) 725-2575**	10790
☐ Well water systems must be tested for Group B. Please check with your local health authority for more information on this testing requirement.	10790
☐ If home is on public water / sewer, must show a current bill listing the AFH address as the services address. The bill must show no past due balance at time of initial inspection.	10790

For additional information, refer to: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers.

Logs	
☐ Must have accident / Incident / Injury Log.	10220
☐ Must have emergency Evacuation Drill Log	10900
☐ Must have medication Log – this log can be a separate log or contained in resident record	10475
Emergency Preparedness	**WAC 388:**
☐ Emergency lighting must be readily available for residents and staff. Please have enough emergency lighting available for each resident and ready to demonstrate it is in good working condition.	10740
☐ **5-pound 2-A: 10-B:C minimum-rated** fire extinguisher **mounted** on each level of home. Must be mounted or securely fastened in a stationary position at a minimum of four inches from the floor and a maximum of 60 inches from the floor; including visible proof of purchase or service within one year. When measuring the mounted fire extinguisher, it will be measured four inches from the bottom and 60 inches from the top handle.	10810
☐ Emergency medical supplies including first aid supplies and a first aid manual	10850
Multiple Home Providers must have: These plans must be provided for each home under the MHP management.	
☐ A ”24/7” staffing plan for each home to include the unlicensed home.	10036
☐ A daily operation plan for all homes. This plan must include details about how each home will be run daily and have a list of who the Resident Manager, Entity Representative (if they applied as an entity) are and what role they will play in the homes day to day operations.	10035
☐ A parking plan for each individual home which includes a plan for accessibility of emergency service vehicles, staff, and visitor parking.	10035

Resources

Refer to this web site: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers **for the following:**

- Regulations

  WACs: Chapter 388-76 WAC Minimum Licensing Requirements, Chapter 388-112A WAC, Chapter 246-840 WAC Nurse Delegation, Chapter 388-105 WAC Medicaid Supplementation and Chapter 70.128 RCW Adult Family Homes, Chapter 70.129 RCW Resident Rights; Chapter 74.34 RCW Abuse of Vulnerable Adults
- AFH initial inspection process slideshow PowerPoint Presentation (wa.gov)
- International Residential Code (IRC) WAC 51-51-0330 WAC 51-51-0330.
- A Department of Health Medical Test Site (MTS) waived license is required if you will be performing, interpreting, or acting upon simple medical tests such as Covid 19 or blood glucose tests. Provider Letter AFH number 2022-041 explains the requirements and includes a link to the MTS application. You can find additional information on the Prospective Provider page under "Now that I have met the qualifications."

Refer to this web site: https://www.dshs.wa.gov/altsa/home-and-community-services/training-requirements-and-classes **for the following:**

- Training Requirements for Adult Family Homes (AFH)
- Food Safety
- Finding community educators in your area
- Administrator Training Classes
- AFH Providers minimum instructor requirements

Calculations used when subtracting door swings for resident bedrooms

Door Width in inches = sq. ft. for ¼ of circle swing

DR Width”	Sq. Ft. ¼ Swing	DR Width”	Sq. Ft. ¼ Swing
25”	3.41 sq. ft.	33”	5.94 sq. ft.
26”	3.69 sq. ft.	34”	6.30 sq. ft.
27”	3.98 sq. ft.	35”	6.68 sq. ft.
28”	4.28 sq. ft.	36”	7.07 sq. ft.

For additional information, refer to: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers.

29”	4.59 sq. ft.	37”	7.47 sq. ft.
30”	4.91 sq. ft.	38”	7.88 sq. ft.
31”	5.24 sq. ft.	39”	8.30 sq. ft.
32”	5.59 sq. ft.	40”	8.73 sq. ft.

For additional information, refer to: https://www.dshs.wa.gov/altsa/residential-care-services/information-afh-prospective-providers.