STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Home and Community Living Administration
Residential Care Services • P.O. Box 45600 • Olympia, Washington 98504

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HCLA: AFH #2026-027
Medical Device Use in Adult Family Homes (AFH)

Dear Adult Family Home Provider:

The Department of Social and Health Services (DSHS) is writing to clarify the regulations for use of medical devices in AFH. Residents in AFHs may use medical devices. State laws and rules are in place that protect resident rights and provide limits for the use of a medical devices with known safety risks. It's important to know the difference between a medical device and a restraint. This letter will help clarify the regulations and what to consider when using a medical device.

WAC 388-76-10000 defines "medical device", as used in chapter 388-76 WAC, as "any piece of medical equipment used to treat a resident's assessed need. (1) A medical device is not always a restraint and should not be used as a restraint; (2) Some medical devices have considerable safety risks associated with use; and (3) Examples of medical devices with known safety risks when used are transfer poles, Posey or lap belts, and side rails".

Ensure the resident is using the medical device in accordance with the regulations. If the resident is using a medical device with known safety risks the elements of WAC 388-76-10650 Medical devices must be in place:

- The device must not be used as a restraint or for staff convenience.
- The resident must have an assessment **which includes the resident's ability to safely use the device.*
- The resident and their family member or legal representative must be informed of the risks and benefits of the device so they can make an informed decision about whether to use the device.
- The resident's negotiated care plan (NCP) must include documentation of how the resident will use the device.
- Ensure the device is properly installed.

The medical device assessment must be conducted by a person who meets the qualifications of an assessor under WAC 388-76-10150. The assessment can be part of the resident assessment or a stand-alone document, as long as it addresses the resident's need for the device and their ability to safely use the device.

"Mechanical restraint" means any device attached or adjacent to the vulnerable adult's body that they cannot easily remove and restricts freedom of movement or normal access to the vulnerable adult's body. "Mechanical restraint" does not include the use of devices, materials, or

equipment that are: (a) Medically authorized, as required; and (b) Used in a manner that is consistent with federal or state licensing or certification requirements for facilities, hospitals, or programs authorized under Chapter 71A.12 RCW. (WAC 388-76-10000).

Ensure the medical device is not being used as a restraint. Look to WAC 388-76-10655 Physical and mechanical restraints for the presence of all of these elements:

- The AFH must not use restraints for staff convenience or discipline.
- The AFH must have documentation in the NCP of less restrictive alternatives they tried first.
- The restraints must be medically necessary to treat a medical symptom(s) and addressed in the assessment and NCP.
- **A licensed RN, LPN or physician must apply and immediately supervise onsite any use of a physical or mechanical restraint; they must be in the home and quickly and easily available during use.*

*These elements are often missing.

Examples:

- A bed rail could be used by a resident who can safely use the bed rail to help them reposition themselves, if consistent with WAC 388-76-10650.
- A bed rail cannot be used to keep a resident who cannot safely use the bed rail in bed.
- A mitten could be used to protect the resident from pulling out their feeding tube when all elements of WAC 388-76-10655 are met.

For questions related to medical devices in AFH please contact your Field Manager.

Sincerely,

Amy Abbott, Director
Residential Care Services
DSHS: *"Partnering with People"*