



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, Washington 98504-5600

March 17, 2020
Amended April 8, 2020

AL TSA: ALF #2020-010
COVID-19 INFORMATION AS OF APRIL 8, 2020

Dear Assisted Living Facility Administrator:

This letter is amended to reflect the governor's latest proclamations 20-32 and 20-38, share guidance from the Washington State Department of Health (DOH) and the Centers for Disease Control and Prevention (CDC) on health care workers returning to work after COVID-19 infection or exposure, and clarify information previously provided about Governor Proclamation 20-10. The information in this letter is current as of April 3, 2020. Some of this is new and supersedes previous guidance given, while other information repeats and reinforces previous guidance.

We understand you have received a lot of information about COVID-19. The links and materials below will help you find critical information quickly.

New Information

Governor Proclamation 20-32

[Proclamation 20-32](#) waives multiple Department of Health (DOH) statutes and rules concerning licensing requirements for many healthcare providers licensed by DOH, including nursing assistants and home care aides. The waiver relieves some healthcare providers of the obligation to complete education requirements prior to obtaining an initial or a renewed license, and extends all health profession license expiration dates to September 30, 2020 for licenses up for renewal between April 1 and September 30, 2020.

Governor's Proclamation 20-38

On March 31, 2020, Governor Inslee issued [Proclamation 20-38](#), waiving and suspending specific Assisted Living Facility physical plant requirements in RCW 18.20.110 and related rules in chapter 388-78A WAC.

Pursuant to RCW 43.06.220(1)(h), these waivers and suspensions may be applied only to facilities in order to assist with the COVID-19 crisis and the surge capacity within the health care system. The waived and suspended statutes and rules are:

- [RCW 18.20.110](#) – the following language only: “The department may prescribe by rule that any licensee or applicant desiring to make specified types of alterations or additions to its facilities or to construct new facilities shall, before commencing such alteration, addition, or new construction, submit plans and specifications therefor to the agencies responsible for plan review for preliminary inspections and approval or recommendations with respect to compliance with the rules and standards herein authorized.”
- [WAC 388-78A-2810\(1\)](#)
- [WAC 388-78A-2821\(2\)](#)
- [WAC 388-78A-2850\(1\)](#)
- [WAC 388-78A-2851\(2\)\(a\) and \(6\)](#)
- [WAC 388-78A-2853\(1\)\(a\) and \(b\)](#)
- [WAC 388-78A-2853\(2\)\(a\), \(b\), and \(c\)](#) – the following language only: “Construction review services has approved the construction, and”

- [WAC 388-78A-2880](#)
- [WAC 388-78A-2900](#)

For existing buildings, the RCS Director has authorization to waive some physical plant requirements. For Assisted Living Facilities interested in increasing capacity or utilizing alternate spaces to assist with the surge capacity, please send RCS a letter outlining what space will be used, a brief description of the space, how licensing requirements in the new spaces will be met, and how resident privacy during care will be provided. If a waiver of physical requirements is needed to increase the capacity or utilize alternate space, the facility will need to outline in the letter what requirements need to be waived and how the facility will meet the needs of clients in an alternate way. Given the nature of the current crisis, RCS also asks that the home clearly outline how the space will allow for quality infection control processes (for example, is there a sink located in the space?). If the Assisted Living Facility is not at full capacity, please outline how many currently licensed rooms are available to be filled before the alternate option would need to be used.

For new Assisted Living Facility buildings, an application to the Business Application and Analysis Unit (BAAU) is still required. Please submit the application with the above information.

Send all requests to Trish Harmon (Tricia.Harmon@dshs.wa.gov), Candy Goehring (Candace.Goehring@dshs.wa.gov) and Amy Abbott (amy.abbott@dshs.wa.gov). RCS is aware of the urgency of the issue in our state, and will work as quickly as possible to review these requests and provide a response.

Return to Work Criteria for Healthcare Workers with Exposure to or Confirmed COVID-19

We have received a number of questions about caregivers returning to work after a confirmed or suspected infection with COVID-19, or after exposure to someone with a confirmed or suspected diagnosis of COVID-19. DOH and CDC have issued guidance for these scenarios. The guidance from DOH can be found [here](#). The guidance from the CDC can be found [here](#).

This guidance can be used to create or amend, and implement policies related to preventing and limiting the spread of infections in accordance with WAC 388-78A-2600(2)(k). It is up to the facility to determine how to use this guidance in their specific scenarios. For questions about a specific scenario, contact your local health jurisdiction. [Local Health Jurisdiction interactive directory map](#)

Clarification

RCS previously announced that certain training and certification requirements were waived (see Governor's Proclamations 20-05, 20-06, 20-10, and 20-16 below). Governor's [Proclamation 20-10](#) waived and suspended [chapter 388-112A WAC](#).

Previous Information Still in Effect

Infection Control Focused Reviews and Personal Protective Equipment

The COVID-19 Long-Term Care Incident Command has directed Residential Care Services (RCS) to complete focused reviews of all long-term care facility infection control procedures and assess current Personal Protective Equipment (PPE) supplies. Survey staff will assess facility readiness to prevent the spread of COVID-19. The authority to complete these inspections is granted in [RCW 18.20.110](#)

The Infection Prevention Tool used by survey staff to assess facilities is linked below and includes the following domains:

- Visitor restrictions
- Education, monitoring, and screening of Healthcare Personnel (HCP)
- Education, monitoring, and screening of residents
- Availability of PPE and other supplies
- Infection prevention practices including hand hygiene, use of PPE and cleaning and disinfection of environmental surfaces and resident care equipment

These strategies are the most current information available from the CDC for preventing COVID-19 and the spread of COVID-19 in long-term care facilities. We encourage you to use this tool to complete a self-assess of your facility at any time.

[Access the Infection Prevention Tool](#)

Governor’s Proclamation 20-18

On March 18, 2020, Governor Inslee issued [Proclamation 20-18](#), waiving and suspending the following Assisted Living Facility requirements:

- Full licensing inspections (RCW 18.20.110)
- To ensure the administrator and all caregivers employed directly or by contract have a national fingerprint background check (WAC 388-78A-2462(2)(b))
- To prevent unsupervised access to residents by caregivers or administrators beyond one hundred twenty days of hire when not disqualified based on the results of the Washington state name and date of birth background check, and when the results of the national fingerprint background check are pending (WAC 388-78A-24681 and WAC 388-06-0500 through WAC 388-06-0540)
- Washington State Patrol fingerprint background checks, Federal Bureau of Investigation fingerprint background checks, and national sex offenders registry background checks (RCW 74.39A.056(1)(b)(i), RCW 43.20A.710(2), and RCW 43.43.837(1))
- To reasonable access by their representative, an entity or individual that provides health, social, legal, or other services (RCW 70.129.090(2))

Governor’s Proclamations 20-05, 20-06, 20-10, and 20-16

On February 29, 2020, Governor Inslee issued [Proclamation 20-05](#), declaring a state of emergency for Washington State due to the COVID-19 outbreak. On March 10, 2020, the governor issued [Proclamation 20-06](#), which amends 20-05 to add significant prohibitions for nursing homes and assisted living facilities to protect residents against COVID-19. On March 13, 2020, the governor issued [Proclamation 20-10](#), which extended those prohibitions to adult family homes.

On March 16, 2020, the governor issued [Proclamation 20-16](#), which amended Proclamation 20-06 to include all long-term care facilities, and prohibits visitation by any person, including friends or family, to enter a facility to visit a resident. The prohibition on visitation does not apply to:

- End of life situations
- Visits by attorneys, administrative law judges, advocates or similar persons who represent a resident
- Vendors or volunteers who supply or work in a facility
- Health care teams such as doctors, behavioral health providers, and home health nurses so that care and service needs of residents are met
- Department of Social and Health Services staff, including staff from the Developmental Disabilities Administration and Aging and Long-Term Support Administration

All visitors who enter a facility, **excluding emergency responders who are screened when they start work and are wearing PPE, and need immediate access to the facility,** must meet the following prohibitions and requirements set out in Proclamation 20-06:

- Persons visiting in end of life situations must be screened and may not be allowed to enter a long-term care facility if they show *symptoms* or *signs* of COVID-19.
- Visitors who meet the prohibition exemptions above must show identification, sign into a visitor's log that includes date, time in and time out, and provide their name and contact information, including phone number and email address if available.
- Operators and staff are prohibited from destroying each day's visitor log for 30 days.
- Staff and volunteers are prohibited from working or volunteering unless screened at the start of every shift and do not show *symptoms* associated with COVID-19.
- Residents under a recommendation or order from the Washington State Department of Health (DOH) or the local health jurisdiction for isolation or quarantine for COVID-19 must be isolated in their rooms. A resident can choose to discharge from the facility at any time.
- Staff and volunteers are prohibited from disclosing protected and confidential information except as provided by law or with the consent of the resident.

Symptoms of COVID-19

- Fever of 100.4 or higher
- Cough
- Difficulty breathing

Transmission Risks

- Contact with a person with a confirmed diagnosis of COVID-19 in the last 14 days
- Contact with a person under investigation for COVID-19

Facilities should be checking with employees regarding any confirmed or suspected outbreaks at any other potential place of employment.

The proclamations also waive and suspend certain training and certification requirements that prevent, hinder, or delay necessary action in coping with the long-term care worker shortage. Training and certification requirements for Assisted Living Facility administrators or administrator designees, long-term care workers, and volunteers are waived and suspended including requirements for completing long-term care worker training within one hundred twenty calendar days of being hired, and long-term care worker minimum qualifications and continuing education requirements.

In addition to the preceding facility activities affected by the Governor's proclamations, Home and Community Services (HCS) is advising that all assessments conducted by HCS assessors in all programs should be done telephonically or by using other technology in place of in-person visits wherever possible.

Inspection, Certification, and Investigation Guidelines

Effective immediately, licensing inspections, certification visits, and complaint investigation activities are limited to the following (in priority order):

- All complaints that constitute imminent danger or immediate threat (cases in which serious physical harm to or death of a resident/client has occurred, or there is a serious threat to the resident/client's life, health or safety) and allegations of abuse and neglect.
- Complaints alleging infection control concerns, including facilities with potential COVID-19 or other respiratory illnesses.
- Any re-visits necessary to resolve current enforcement actions.

- Initial licensing visits.

Residential Care Services (RCS) is committed to the health and safety of all residents and staff. If a surveyor exhibits signs of illness, they will not be deployed to a facility. RCS will assess facility visits on a case-by-case basis following the DOH quarantine guidelines (Infection Prevention, Control & Immunizations) and the availability of Personal Protective Equipment. Facilities are encouraged to continue to monitor for compliance with standard hand hygiene practices, using alcohol-based hand rub/hand sanitizer (ABHR/ABHS) as the preferred method of hand hygiene in most clinical situations. If hands are visibly soiled, wash with soap and water for at least 20 seconds. Facilities should ensure that hand hygiene supplies are readily available. Continue to ensure supplies for appropriate personal protective equipment use are available, such as gloves, gowns, respirators, and eye protection. RCS recommends notifying the local health jurisdiction if the facility is having difficulty accessing personal protective equipment (PPE).

Links

- [ALISA Assisted Living Facilities](#)
- [Provider Letters](#)
- [ALISA COVID-19 Guidance and Resources](#)
- [Department of Health](#)
 - DOH Hotline: 1-800-525-0127
 - [COVID-19 Outbreak](#)
 - [DOH COVID-19 Infection Prevention and Control webinar \(registration required\)](#)
 - [DOH Recommendations for LTC Facilities during COVID-19 Outbreak](#)
 - [Local Health Jurisdiction interactive directory map](#)
- [CDC COVID-19](#)
- [CDC Personal Protective Equipment](#)

Reporting Suspected or Confirmed Cases of COVID-19

You must report suspected or confirmed cases of COVID-19 to your local health jurisdiction and to the Residential Care Services Complaint Resolution Unit (CRU).

For information on how and when to report to your local health jurisdiction, please use this link: <https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/NotifiableConditions>

For more information about how to best protect residents, staff, and yourself, and to get the most current guidance for your facility, please visit the web sites listed above frequently as the situation is changing rapidly.

If you have any questions about the regulations, please contact Jeanette Childress at (360) 764-9804 or Jeanette.Childress@dshs.wa.gov.

Sincerely,



Candace Goehring, Director
Residential Care Services

DSHS: "Transforming Lives"