Dear Provider / Administrator / Superintendent:

This letter is amended to clarify when the facility must provide a resident roster to any ombuds, to clarify the information sharing requirements of the new statute in relation to Adult Family Home rule requirements, and to rescind the CCRSS letter as these requirements in SHB 1218 do not apply to them.

This letter is to inform you of changes in law related to resident rosters, aggregated contact information, communication, long-term care ombuds, and the definitions of a resident representative and essential support persons.

Substitute House Bill 1218 was passed during the 2021 legislative session. The purpose of the bill is to improve health, safety and quality of life for residents in long-term care facilities. The following is a detailed explanation of these changes, which are effective immediately.

Note to Adult Family Home Providers: The requirements in this legislation supersede WAC requirements. Providing the information below to the ombuds without resident approval does not violate WAC 388-76-10315(3). Requests for resident records beyond what is listed below do require resident consent.

Resident Roster
The facility must:
- Create and maintain a current Resident Roster that includes each resident's name and room number.
- Immediately provide a written copy of the Resident Roster to any long-term care ombuds after an in-person request.

Aggregated Contact Information
The facility must:
- Create a current and accurate Aggregated Contact Information document for each resident and their resident representative, if any.
- Aggregated Contact Information document must include:
  - Resident's name (required),
  - Room number (required),
  - Phone number (required if available),
  - Email address (required if available), and
o Resident Representative's name (required), relationship to resident (required), phone number (required), email address (required if available), and mailing address (required if available).

- Regularly maintain the Aggregated Contact Information document by recording and updating it upon receipt of new or updated information from resident or resident representative.
- Provide a copy of the Aggregated Contact Information document to any long-term care ombuds who requests it in writing, within 48 hours, or a reasonable time if agreed to by requesting long-term care ombuds. The copy must be in electronic format and sent to the secure email address or facsimile number included in the request.

Communication
The facility must:
Be responsive to incoming communications and respond within a reasonable time to phone and electronic messages.
- Have a communication system with enough working telephones and other communications equipment to ensure that residents have 24-hour access to communications with family, medical providers, and others, and to allow for emergency contact to and from facility staff.
- Have a communication system that provides for auditory privacy, is not located in a staff office or station, is accessible and usable by persons with hearing loss and other disabilities and does not require payment for local calls.

Essential Support Person (ESP)
ESP means an individual at least 18 years old, designated by a resident (or resident's representative), and necessary for the resident's emotional, mental, or physical well-being during situations that include, but are not limited to:
- Compassionate care,
- End-of-life care,
- Circumstances when visitation from a familiar person will assist with important continuity of care or reduction of confusion and anxiety for residents with cognitive impairments,
- Other circumstances when the ESP's presence will prevent or reduce significant emotional distress to the resident.

The facility must:
- Allow residents access to an ESP even in circumstances when limitations must be placed on visitation due to public health emergency or other threat to the health and safety of residents and staff.
- Develop and implement reasonable conditions on access by the ESP tailored to protecting the health and safety of the ESP, residents, and staff based upon the particular public health emergency or other health or safety threat.
- Allow private, in-person access to the resident by the ESP in the resident's room. For shared rooms, the roommate (or representative) must consent to the ESP's visit.
- Designate a substitute location in the facility for the visit if the visit cannot be conducted safely in resident's room, or the resident's roommate (or representative) does not consent.
A facility may temporarily suspend a person’s ESP designation, if the person does not comply with health and safety conditions established by the long-term care facility or adult family home.

Resident Representative

The term "representative," as used in the context of resident rights under Chapter 70.129 RCW, is changed to "resident representative." The definition is changed from persons able to provide informed consent for a patient who is not competent to:

- A court-appointed guardian or conservator of the resident,
- An individual authorized under state or federal law to act on behalf of the resident to support the resident in decision-making, to access medical, social, or other personal information, to manage financial matters, or receive notification, or
- If there no person available under the first two options, an individual chosen by the resident to act on behalf of the resident to support the resident in decision-making, to access medical, social, or other personal information, to manage financial matters, or to receive notifications.

The term "resident representative" does not include any individual described above who is affiliated with the facility where the resident lives (or the licensee or management company) unless the individual is also a family member of the resident.

If you have any questions, please contact the RCS Policy Unit at rcspolicy@dshs.wa.gov.

Sincerely,

Mike Anbesse, Director
Residential Care Services

DSHS: “Transforming Lives”