



PROPOSED RULE MAKING

CR-102 (June 2012)

(Implements RCW 34.05.320)

Do NOT use for expedited rule making

Agency: Department of Social and Health Services, Children's Administration

- Preproposal Statement of Inquiry was filed as WSR:15-15-083; or
- Expedited Rule Making--Proposed notice was filed as WSR:___; or
- Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1).

- Original Notice
- Supplemental Notice to WSR:
- Continuance of WSR:

Title of rule and other identifying information: (Describe Subject)

WAC 388-148-1320 "When will the department grant me a foster family license?"

WAC 388-145-1335 "What additional steps must I complete prior to licensing?"

The Department is proposing new WAC language to WAC 388-148-1320 (4) and WAC 388-145-1332 (4) to provide further instructions on how to proceed with foster care applicants and their household members over the age of eighteen years or agency staff that have a positive TB test due to latent TB.

This update will also include changes to WAC 388-148-1320 (6) and WAC 388-145-1335 (5) to allow for a medical exemption to the requirement for proof of the influenza vaccination if the vaccination would result in a severe medical consequence to the person and there is no other form of influenza vaccine that would not cause severe medical consequences. This will allow these applicants and agencies that otherwise meet all other licensing regulations to be licensed for birth to two years of age with a medical doctor's (MD) statement.

Hearing location(s):

Office Building 2
DSHS Headquarters
1115 Washington
Olympia, WA 98504

Public parking at 11th and Jefferson. A map is available at:
<http://www1.dshs.wa.gov/msa/rpau/RPAU-OB-2directions.html>

Date: October 27, 2015 Time: 10:00 a.m.

Submit written comments to:

Name: DSHS Rules Coordinator
Address: PO Box 45850
Olympia, WA 98504
e-mail: DSHSRPAURulesCoordinator@dshs.wa.gov
fax: (360) 664-6185

by: 5:00 p.m. October 27, 2015

Assistance for persons with disabilities: Contact:

Jeff Kildahl, DSHS Rules Consultant by October 13, 2015
Phone: (360) 664-6092 or TTY: (360) 664-6178
Email: KildaJA@dshs.wa.gov

Date of intended adoption: Not earlier than October 28, 2015
(Note: This is **NOT** the **effective** date)

Purpose of the proposal and its anticipated effects, including any changes in existing rules:

The current WAC does not allow for exemptions for the influenza vaccination or for a positive TB result. The requested WAC revisions for WAC 388-148-1320 (4, 6) and WAC 388-145-1335 (4, 5) will allow the Department to license these homes or agencies that otherwise meet the minimum licensing requirements with a medical doctor's (MD) statement.

Reasons supporting proposal:

The proposal will allow the Department to license these homes and agencies that otherwise meet the minimum licensing requirements with a medical doctor's (MD) statement.

Statutory authority for adoption:

RCW 74.15.010, RCW 74.15.030, RCW 74.15.040, RCW 74.15.090, RCW 74.13.031

Statute being implemented:

Is rule necessary because of a:

- Federal Law? Yes No
- Federal Court Decision? Yes No
- State Court Decision? Yes No

If yes, CITATION:

DATE

September 15, 2015

NAME (type or print)

Katherine Vasquez

SIGNATURE

TITLE

DSHS Rules Coordinator

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: September 15, 2015

TIME: 2:26 PM

WSR 15-19-082

Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:

Name of proponent: (person or organization) Department of Social and Health Services

- Private
 Public
 Governmental

Name of agency personnel responsible for:

Name	Office Location	Phone
Drafting: Kristina Wright	Olympia, WA OB2	360-902-8349
Implementation: Kristina Wright	Olympia, WA OB2	360-902-8349
Enforcement: Kristina Wright	Olympia, WA OB2	360-902-8349

Has a small business economic impact statement been prepared under chapter 19.85 RCW or has a school district fiscal impact statement been prepared under section 1, chapter 210, Laws of 2012?

Yes. Attach copy of small business economic impact statement or school district fiscal impact statement.

A copy of the statement may be obtained by contacting:

Name: Kristina Wright

Address: 1115 Washington Street, Olympia, WA 98504-5710

Phone: (360) 902-8349

Fax: (360) 902-7903

e-mail: wrighks@dshs.wa.gov

No. Explain why no statement was prepared.

The proposed rule amendments will not impose more than minor costs on businesses in an industry (foster care homes or group homes).

Is a cost-benefit analysis required under RCW 34.05.328?

Yes A preliminary cost-benefit analysis may be obtained by contacting:

Name: Kristina Wright

Address: 1115 Washington Street, Olympia, WA 98504-5710

Phone: (360) 902-8349

fax: (360) 902-7903

e-mail: wrighks@dshs.wa.gov

No: Please explain: