STATE OF WASHINGTON
DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES
1500 Jefferson Street, SE ● P.O. Box 40975 ● Olympia WA 98504-0975

November 19, 2025

TO: Interested Persons

FROM: Kyler McGee, Foster Care Policy Program Manager

SUBJECT: CONCISE EXPLANATORY STATEMENT *(RCW 34.05.325)*

For rules proposed under notice filed as WSR 25-11-095 on May 21, 2025:

Title of rule and other identifying information: The DCYF Licensing Division (LD) is adding the following new sections to chapter 110-145 WAC Licensing Requirements for Group Care Facilities (GCFs):

PURPOSE, DEFINITIONS, AND NONDISCRIMINATION
110-145-2300 Purpose and legal basis for group care facilities (GCFs).
110-145-2320 Nondiscrimination.
REQUIRED LICENSES
110-145-2330 License required to care for children and youth.
110-145-2340 Multiple licenses in the same building.
110-145-2350 Licensing and contract requirements.
LICENSING PROCESS
110-145-2370 Determining applicants' and licensees' suitability.
110-145-2380 Disqualification of applicants and licensees.
110-145-2390 Determining license capacity.
110-145-2400 License renewal requirements.
110-145-2410 Department access to facilities.
ENVIRONMENT, SPACE, AND FURNISHINGS
110-145-2430 Building and premises general requirements.
110-145-2440 Firearms, ammunition, and other weapons.
110-145-2450 Storing dangerous chemicals and toxic substances.
110-145-2470 Time-delay mechanisms on windows and doors.
110-145-2480 Water, garbage, and sewer.
110-145-2490 Laundry and clothing.
110-145-2500 Bathrooms and bathing facilities.
110-145-2520 Shared bedrooms.
110-145-2530 Sleeping equipment and bedding.
110-145-2540 Indoor areas for recreation, informal educational activities, and physical or occupational therapy.
110-145-2550 Outdoor recreation areas.
110-145-2560 Swimming pools and other bodies of water on the premises.
110-145-2570 Pets and animals.
EMERGENCY PRACTICES AND FIRE SAFETY

110-145-3460 Care and services for medically fragile children and youth.
110-145-3470 Dietary needs of medically fragile children and youth.
110-145-3480 Diaper use for medically fragile children.
110-145-3490 Medical records for medically fragile children and youth.
Pregnant and parenting services
110-145-3500 Pregnant and parenting services.
110-145-3510 Pregnant and parenting health education.
110-145-3520 Determining capacity when providing pregnant and parenting services.
110-145-3530 Building and premises general requirements when providing pregnant and parenting services.
COMPLIANCE AND ENFORCEMENT
110-145-3540 Compliance agreements and exceptions.
110-145-3550 Probationary licenses.
110-145-3560 Enforcement actions, notices, and appeals.

The following sections of chapter 110-145 WAC will be repealed:

110-145-1300 What is the purpose of this chapter?
110-145-1305 What definitions do I need to know to understand this chapter?
110-145-1310 Am I required to have a license to provide care to children?
110-145-1315 When will the department grant me a license?
110-145-1320 How old do I have to be to apply for a license to provide care to children?
110-145-1325 What is required to apply for a group care facility license?
110-145-1330 How does the department determine my suitability to become a licensed provider, or a staff member, intern, or volunteer of a licensed provider?
110-145-1335 What additional steps must I complete prior to licensing?
110-145-1340 How long do I have to complete the licensing application process?
110-145-1345 How long is my license valid?
110-145-1350 Who shall have access to my facility?
110-145-1355 Am I required to comply with local ordinances?
110-145-1360 What children may I serve in my group care program?
110-145-1365 How does the department decide which children will be placed in my care?
110-145-1370 Do I have to admit or retain all children?
110-145-1375 What happens when licensing requirements differ from contract requirements?
110-145-1380 May a group care facility be issued more than one type of license?
110-145-1385 When may I be certified to provide care to children?
110-145-1390 Will you license or continue to license me if I violate licensing regulations?
110-145-1395 Are there exceptions made if I do not meet the licensing regulations?
110-145-1400 Must prospective and current staff and volunteers be disqualified from having access to the children in my facility?
110-145-1405 What may I do if I disagree with your decision to modify, deny, suspend or revoke my license, or to disqualify my background check?
110-145-1410 How do I appeal the decision of the office of administrative hearings' administrative law judge?
110-145-1415 Can I be issued a probationary license?
110-145-1420 Who must I employ at my facility?
110-145-1425 What are the duties and qualifications of an executive director or administrator?
110-145-1430 What are the duties and qualifications of a program manager?
110-145-1435 What if my on-site program manager must be off-site temporarily when youth are present?

110-145-1440 What are the duties and qualifications of a case manager?
110-145-1445 What are the duties and qualifications of direct care staff?
110-145-1450 What are the duties and additional qualifications for crisis residential center direct care staff?
110-145-1455 If I have health care staff, what qualifications are required?
110-145-1460 What are the duties and qualifications for case management consultants?
110-145-1465 What additional supports do I need for my group care facility?
110-145-1470 Can one staff person have different responsibilities?
110-145-1475 What are the requirements for volunteers working directly with children and youth at my facility?
110-145-1480 What are the general ratios of staff to children under care?
110-145-1485 May I have more than one licensed program at my facility?
110-145-1490 What are the preservice training requirements for staff, interns, and volunteers who directly care for children?
110-145-1495 What is the in-service training requirement for staff and volunteers having responsibility to provide care to children?
110-145-1500 What first-aid and cardiopulmonary resuscitation (CPR) training is required?
110-145-1505 What bloodborne pathogens training is required?
110-145-1510 What personnel records must I submit to the department?
110-145-1515 What are the requirements for information kept in facility shift logs for group care facilities?
110-145-1520 What are the requirements for children's records?
110-145-1525 How long should my facility keep the child records?
110-145-1530 What information can be shared about a child or a child's family?
110-145-1535 What incidents involving children must I report?
110-145-1540 What are my reporting responsibilities when a child is missing from care, except for overnight youth shelters?
110-145-1545 What are my reporting requirements in my licensed facility serving runaway or homeless youth?
110-145-1550 What changes must I report to my licensor?
110-145-1555 What does the department require for my buildings and property?
110-145-1560 What toilet and bathing facilities are required?
110-145-1565 What is the ratio of persons normally on the premises to bathrooms at my facility?
110-145-1570 What are the requirements for indoor recreation areas?
110-145-1575 What are the requirements for outdoor recreation areas?
110-145-1580 What are your requirements for storing dangerous chemicals or other substances?
110-145-1585 What are the requirements for water, garbage, and sewer?
110-145-1590 How must I keep children safe around bodies of water?
110-145-1595 Are there room requirements for a group care facility?
110-145-1600 What are the general requirements for bedrooms?
110-145-1605 What are the requirements for sharing bedrooms?
110-145-1610 What are the requirements for beds in a facility?
110-145-1615 What are the requirements for laundering and storage of clothing and linen?
110-145-1620 What are the requirements for diapers and diaper changing areas?
110-145-1625 What are the requirements for the use of electronic monitors to monitor children?
110-145-1630 Are time-delay mechanisms allowed on windows and doors?
110-145-1635 What are the requirements for the prevention of the spread of infections and communicable disease?
110-145-1640 Am I required to keep first-aid supplies?
110-145-1645 What are the requirements regarding pets and animals in my facility?
110-145-1650 Are alcoholic beverages, marijuana or illegal drugs allowed on a facility's property?
110-145-1655 Is smoking permitted around children?

110-145-1660 Are guns allowed on a licensed facility's property?
110-145-1665 What are the fire safety requirements for all group residential facilities?
110-145-1670 Do I need a written emergency plan?
110-145-1675 What requirements must be followed for smoke detectors?
110-145-1680 What requirements must be followed for carbon monoxide detectors?
110-145-1685 What are the requirements for fire drills?
110-145-1690 What are the requirements for fire extinguishers?
110-145-1695 Are there different construction and fire safety requirements for facilities that have multiple licenses in the same building?
110-145-1700 What must I include in a child's orientation to my facility?
110-145-1705 How does my agency meet the religious needs of children in care?
110-145-1710 What are the requirements about nondiscrimination?
110-145-1715 Are there additional considerations in service to Native American children?
110-145-1720 Do I need a social summary for children under my care (except for interim facilities)?
110-145-1725 When do I need a treatment plan for children in care and what must be included in the plan?
110-145-1730 What are the educational and vocational instruction requirements for children placed by the department, except interim facilities?
110-145-1735 What are the requirements for an activity program?
110-145-1740 Can children in my care receive services through the extended foster care program?
110-145-1745 What are the general well-being requirements for a group care program?
110-145-1750 What are the requirements for supervising children?
110-145-1755 What requirements must I follow when I transport children?
110-145-1760 What are the travel requirements for children in care?
110-145-1765 Can children be assigned work in a facility or work outside the facility?
110-145-1770 Can a child earn allowance while in care?
110-145-1775 What belongings must be provided to a child leaving my facility?
110-145-1780 Do I have responsibility for a child's personal hygiene?
110-145-1785 What are the requirements for privacy for children in out-of-home placements?
110-145-1790 What are the food and meal guideline requirements?
110-145-1795 How often do children need to be provided meals?
110-145-1800 What are the requirements for handling a child's special diet?
110-145-1805 Are there special requirements for serving milk?
110-145-1810 Are there special requirements for infants and young children?
110-145-1815 Are written policies and procedures required describing a facility's discipline methods?
110-145-1820 When may a child be restrained?
110-145-1825 What must I do following an incident that involved using physical restraint?
110-145-1830 Are there requirements for time-out or quiet rooms?
110-145-1835 Am I required to assess a child's need for immediate medical attention?
110-145-1840 When must I get an early and periodic screening, diagnosis, and treatment (EPSDT) exam for a child?
110-145-1845 What are the requirements for obtaining consent for emergency and routine medical care?
110-145-1850 What requirements are there for the storage of medications?
110-145-1855 What are the general requirements for managing a child's medication?
110-145-1860 How do I manage a child's nonprescription medications?
110-145-1865 Can I give a child nonprescription medications with prescription medications?
110-145-1870 How do I dispose of medications?
110-145-1875 Can I accept medication from a child's parent or guardian?
110-145-1880 When may children take their own medicine?

110-145-1885 What are the immunization regulations?
110-145-1890 What type of crisis residential center (CRC) facilities may be licensed?
110-145-1895 What hours must I be available to receive youth?
110-145-1900 What residents are admitted to a semi-secure CRC?
110-145-1905 What residents are admitted to a secure CRC?
110-145-1910 What are the ratio requirements of staff to youth in crisis residential centers?
110-145-1915 What are the requirements for secure CRCs?
110-145-1920 What are additional physical requirements for secure CRCs?
110-145-1925 May a juvenile detention center operate as a separate secure CRC program?
110-145-1930 What steps must be taken after a youth is admitted into any CRC?
110-145-1935 What additional steps must be taken after a youth is admitted into a secure CRC?
110-145-1940 How long may a youth stay in a CRC?
110-145-1945 What happens when no space exists in a secure CRC?
110-145-1950 How is a youth transferred from one type of CRC to another?
110-145-1955 What intervention services must I provide or arrange for at a CRC?
110-145-1960 What additional recordkeeping is required for all CRCs?
110-145-1965 What is the purpose of a CRC multidisciplinary team?
110-145-1970 When should I convene a CRC multidisciplinary team?
110-145-1975 How is a CRC multidisciplinary team convened?
110-145-1980 May a parent disband the CRC multidisciplinary team?
110-145-1985 Who is eligible to attend my day treatment program?
110-145-1990 What are the required ratios of staff to children in day treatment centers?
110-145-1995 What consultants must I use for my day treatment program?
110-145-2000 Can my emergency respite center have more than one type of license?
110-145-2005 What are the required ratios of staff to children in an ERC?
110-145-2010 Who are the residents served at my emergency respite center?
110-145-2015 Who may place children at my emergency respite center?
110-145-2020 What information must I obtain before accepting a child for care at my emergency respite center?
110-145-2025 May services I provide at my emergency respite center substitute for other types of care?
110-145-2030 Are there additional bed requirements at my emergency respite center?
110-145-2035 What are the required ratios of staff to children in group homes?
110-145-2040 Who are the residents at my group receiving center?
110-145-2045 What are the required ratios of staff to children in group receiving centers?
110-145-2050 When do I accept placements at my group receiving center?
110-145-2055 What services must I provide at my group receiving center?
110-145-2060 What are the requirements for supervision of children at my group receiving center?
110-145-2065 What services must I provide for medically fragile children?
110-145-2070 What recordkeeping requirements exist for medically fragile children?
110-145-2075 What are additional food requirements if I care for medically fragile children?
110-145-2080 What age groups may I serve in my overnight youth shelter?
110-145-2085 How are youth admitted to my overnight youth shelter?
110-145-2090 What are the required ratios of staff to children under care in overnight youth shelters?
110-145-2095 What steps must I take when a youth first enters an overnight youth shelter?
110-145-2100 What services must be offered at an overnight youth shelter?
110-145-2105 What are the additional requirements for bedrooms in overnight youth shelters?
110-145-2110 What are additional bedding requirements in my overnight youth shelter?
110-145-2115 Do I need a citizens' board for my overnight youth shelter?
110-145-2120 What services shall be provided to pregnant and parenting youth?

110-145-2125 How are services for pregnant and parenting youth delivered?
110-145-2130 What types of health education must a facility offer to pregnant and parenting mothers?
110-145-2135 How is capacity determined for a facility that provides services to pregnant and parenting youth?
110-145-2140 What are the required ratios of staff to children in pregnant and parenting youth programs and programs providing maternity services?
110-145-2145 What are the facility and room requirements for programs offering services for pregnant and parenting youth?
110-145-2150 What is the purpose of a resource and assessment center (RAC)?
110-145-2155 What must I demonstrate to be licensed for an RAC?
110-145-2160 What is the ratio of direct care staff/volunteers to children at an RAC?
110-145-2165 Who are the residents at my RAC?
110-145-2170 How long can a child stay at an RAC?
110-145-2175 When am I required to be available for services?
110-145-2180 Who may place children at an RAC?
110-145-2185 What services are provided or arranged for at an RAC?
110-145-2190 How many children may be served in my staffed residential home?
110-145-2195 What are the required ratios of staff to children under care in an SRH?
110-145-2200 Who is eligible to manage my staffed residential home?

REASON FOR ADOPTION: The LD is amending the rules regarding the licensing standards for group care facilities. LD engaged in negotiated rule making (NRM) for this rule project. This amended chapter 110-145 WAC allows the department to be more developmentally appropriate and flexible to meet the individual children's and youth's needs. LD believes these changes will empower GCFs to provide high quality care that supports the health, safety, and well-being of the children and youth they serve.

SUBSTANTIVE CHANGES MADE SINCE THE RULE WAS PROPOSED: No substantive changes.

Several comments were received, and they were all reviewed in a coordinated effort. The department's actions are noted below. There were no substantive changes made to the WACs included in this CR-103P filing. There are 16 WACs from the original CR-102 filing WSR 25-11-095, that did have substantive changes and those will be going through a second CR-102 filing process.

cc: DCYF Rules Coordinator

SUMMARY OF COMMENTS RECEIVED	**THE DEPARTMENT CONSIDERED ALL THE COMMENTS. THE ACTIONS TAKEN IN RESPONSE TO THE COMMENTS, OR THE REASONS NO ACTIONS WERE TAKEN, FOLLOW.**
The department received comments on the following WACs: • 110-145-2310 Definitions. • 110-145-2360 License application requirements. • 110-145-2420 Certificates, zoning, and codes regulations.	Action taken. Based on the public comment received the department made substantive changes to these WACs and another CR-102 will be filed on November 19, 2025 to allow for an additional public comment review.

• 110-145-2600 Fire safety. • 110-145-2610 Smoke detectors. • 110-145-2680 Duties and qualifications for care coordinators in GCFs. • 110-145-2690 Duties and qualifications of direct care staff and direct care volunteers in GCFs. • 110-145-2770 First-aid and CPR training. • 110-145-2780 Reporting incidents. • 110-145-2950 Immunization requirements for children and youth. • 110-145-2980 Medication administration and documentation. • 110-145-3030 Maintaining connections with family and supportive individuals.	
The department received comments that noted there were no requirements related to: • Education, training, and coaching to families of origin and other potential placements. • Service or discharge planning, except for extended foster care and crisis residential centers.	No action taken. The service and discharge planning for the youth and the education, training, and coaching for families or placements will be integrated into provider contracts and is outside the scope of these WACs.
Commenter requested the Developmental Disabilities Administration (DDA) within DSHS be changed to Developmental disabilities community services (DDCS) as the name has changed.	Action taken. The department made changes to: • WAC 110-145-2940 Evaluating children's and youth's medical needs at admission; • WAC 110-145-3090 Allowance, chores, and employment; and • WAC 110-145-3490 Medical records for medically fragile children and youth.
110-145-1495 What is the in-service training requirement for staff and volunteers having responsibility to provide care to children? Commenter requested information on this WAC.	No action taken. This section will be repealed. In-service training requirements will be in WAC 110-145-2750.
110-145-1625 What are the requirements for the use of electronic monitors to monitor children? Commenter asked what the requirements to use electronic monitors to monitor children?	No action taken. This section will be repealed. Electronic monitoring requirements will be in WAC 110-145-2460.
110-145-2330 License required to care for children and youth. Commenter requested further clarification to include the specific behavior management classes approved by LD.	No action taken. Outside of scope of WACs. Training requirements to be discussed with LD licensor.

110-145-2430 Building and premises general requirements. Commenter noted conflicting information in (B) regarding privacy and (2) regarding the type of room providers should offer. Commenter asked why this does not address storing former client's information off site and wants to know if this should read as current clients.	 No action taken. The WAC is structured and written to keep those sections separated and not having them be contingent upon one another. No action taken. The language allows storage for current and former clients.
110-145-2480 Water, garbage, and sewer. Commenter proposed the exclusion of washing machines and dishwashers when addressing running water temperatures.	 No action taken. LD will address in training.
110-145-2520 Shared bedrooms. Commenter shared concerns with their agency being able to meet the revised WAC. They noted their concerns with their floor plan and design, the requirement of having an awake staff in each of their sleep rooms, and shared bedroom requirements. They also requested that instead of consulting both the child and caregiver about sleep options, they only consult the child.	 No action taken. The language allows for licensees to submit an exception in subsection (2). The department revised this WAC based on the NRM process that included lived experts, department, and group care facilities' representatives, and parents.
110-145-2620 Carbon monoxide detectors. Commenter provided examples and proposed to modify or remove the word single-station from carbon monoxide alarms so that the requirement can accommodate carbon monoxide detectors that are not considered single station alarms.	 Action taken. The department removed the word "single-station".
110-145-2650 General requirements for licensees. Commenter noted that they agree with the language, but request language to include religious accommodations or medical exceptions for the COVID vaccine. Commenter said this reads that the department will have an approved tuberculosis screening tool for providers. They requested that LD develop the screening tool and enforce compliance.	 No action taken. Exceptions can be requested as outlined in WACs 110-145-2650 110-145-2950. No action taken. The department provides GCFs with the TB screening tool.

110-145-2670 Duties and qualifications for program managers in GCFs. Commenter would like to know if social workers constitute care coordinators and do they fall under the supervision of program managers? Commenter would like to know if supervisory experience is now required for a program manager.	 No action taken. This section states coordinators can be social workers if they meet the specified duties and qualifications. No action taken. The answer to this question is "yes."
110-145-2720 Personnel fulfilling roles in multiple positions. Commenter recommends department oversight for individuals serving multiple roles in group care settings. Two commenters asked what it means to serve one role at a time and what reporting is required if the program manager and care coordinator are the same person.	 Action taken. The department agrees and changed language to include LD approval prior to fulfilling the assigned roles. No action taken. LD will address in training.
110-145-2730 Personnel fulfilling roles in multiple positions. Commenter requested clarification that Direct Care staff may still prepare and serve meals under 2(b).	 No action taken. Yes, direct care staff may prepare and serve meals when they have adequate staff to meet the supervision needs of the children and youth.
110-145-2740 Preservice training. Commenter raised concerns about training overload in pre-service, requests changes or clarifications on approved trainings, and recommends adjustments to in-service hours and CPR staffing requirements. Commenter recommends language and requirements changes to include: • Separate preservice training from all staff vs direct care staff. • For all staff, require behavior management training within 60 days of hire in addition to the 16 hours of preservice. Allow the training to be counted towards in-service. Require culturally responsive care, LGBTQIA+ affirming care and trauma informed care to be completed within 6 months. • For direct care staff, require behavior management, first aid, CPR, and bloodborne pathogens training.	 No action taken. The department declines as these WACs are based on child safety, health, and well-being. In addition, these proposed WACs are based on input during the NRM process that included lived experts, department and group care facilities' representatives, and parents.

110-145-2750 In-service training.	
Commenter requested WAC 110-145-2750 In-service training be relabeled to "Direct Care In-service training" and add specific required annual in-service trainings for direct care staff only.	No action taken. The department declines as these WACs are based on input during the NRM process that included lived experts, department and group care facilities' representatives, and parents.
Commenter states that non-direct volunteers work in isolated areas handling cleaning, laundry, and donations, without contact or unsupervised access to children. They believe related requirements are unnecessary for these roles.	Action taken. The department revised the language to clarify that the personnel training requirements in section (4) apply only to individuals providing direct care.
Commenter requested the department include nonphysical strategies and requirements for learning the appropriate physical restraint when needing to safely restrain a child.	No action taken. The requirement is addressed in Section 2(a)(iii), with additional details in WAC 110-145-2300 on physical restraints.
110-145-2790 Reporting children and youth missing from care.	
Commenter requested changing the reporting timeframe from "immediately" to "within 6 hours," aligning with prior DCYF guidance. They note that immediate reporting could overwhelm law enforcement and intake.	No action taken. The referenced six hour reporting requirement in WAC 110-145-1540 will be repealed. "Immediate" reporting requirements are necessary for compliance with federal law.
Commenter asked if residents not in DCYF care need to be reported to DCYF or when their representatives cannot be contacted.	No action taken. The proposed language in WAC requires a response plan.
Commenter indicated they felt 2(a) was redundant of 2(b).	Action taken. Department agrees.
110-145-2820 Staffing ratios	
Commenter stated the new requirements strain RAC facilities, noting challenges with overnight shifts and limited staff and volunteer resources.	No action taken. The department declines as child and youth safety and support are fundamental to the requirements listed.
Commenter sought clarification on whether providers serving only 3-6 youth are still required to have at least one care coordinator.	No action taken. Yes, providers serving 3-6 youth are required to have at least one care coordinator.

110-145-2830 Supervising children and youth.	
Commenter states there are significant impacts to RAC facilities, citing challenges with overnight staffing and limited direct care and volunteer resources.	No action taken. The department declines as child safety and support are fundamental to the requirements listed.
Commenter requested clarification on what "non-personnel contact" means and whether it includes greetings, conversations, privacy practices, or supervision.	No action taken. This will be clarified in GCF policies and procedures.
The commenter asked for periodic be defined when it comes to conducting periodic checks on children and youth in care.	No action taken. This will be clarified in GCF policies and procedures.
110-145-2840 Enhanced supervision for high-risk activities, including bodies of water.	
Commenter asked to define small shallow pools and provided examples for explanation.	No action taken. This will be clarified in GCF policies and procedures.
Commenter requested a change to the language in (b) regarding non-lifeguarded bodies of water.	Action taken. The department revised for more clarity.
Commenter wanted to know how (iii) would be documented on knowing how to swim and use rescue equipment.	No action taken. This will be clarified in GCF policies and procedures.

110-145-2850 Orientation for children, youth, and parents or guardians.	
Commenter requested the removal of the written orientation requirements. If this requirement cannot be changed, their request is for an exemption for community-placed children in care for less than 15 days.	No action taken. The department declines as the proposed language regarding orientation was requested and agreed to during the NRM process so that children and youth could refer to a written copy later.
Commenter wanted to know what kind of guide is available for providers to provide orientation on basic rules including personal boundaries.	No action taken. Guides are created by the GCFs, but assistance can be requested from the licensor.
Commenter requested adding "if applicable" to section (b), noting some individuals may not have an attorney or department caseworker	Action taken. The department added "if applicable" in section (b).
Commenter requested that visit requirements be addressed through the RHDY program's engagement plans rather than department requirements.	No action taken. The requirement is necessary in order for the department to verify RHDY engagement plans.
Commenter requests that a parent or legal representative be permitted to verify orientation documentation in the youth's well-being file under section (3).	No action taken. If children or youth are unable or unwilling to sign(b), GCFs may note that.
110-145-2860 Admission and general recordkeeping.	
The commenter requested the exclusion of ERC, interim care and community placed children in (1)(c) 2(c) 2(d).	Action taken. The department added "if applicable."
Commenter asked if providers need two plans for permanency planning and is permanency referring to placement/housing?	Action taken. The department has added "if applicable" to section (c) regarding the permanency plan and will provide clarification on the definition of permanency through training.
Commenter suggested consideration of a child or youth's reason for accessing the program, because previous placement history isn't always applicable.	Action taken. The department added "if applicable" and language to include the child or youth's reason for accessing the program in section (d).
Commenter suggested adding a requirement to maintain a well-being file for each child and youth that is easily accessible or shareable with the department, youth age 12 and older, and the child's or youth's tribe. They request clarification that this requirement does not apply to RACs or interim facilities due to the limited 72-hour timeframe.	No action taken. The department declines and the requirement for maintaining a well-being file remains as is for all licensed facilities.

110-145-2890 Children and youth's well-being files.	
Commenter requested raising the age requirement for access to children and youth's well-being files to 13, or alternatively exempting ERC, interim care, community placed children, or those in care for less than 15 days to better align with operational needs	No action taken. The department declines. The proposed language to meets the department's standard of care.
110-145-2910 Medical records requirements.	
Commenter noted they have historically been exempt from obtaining immunization records and notes there may be a lack of medical coverage or an assigned provider.	No action taken. The department declines. The proposed language meets the department's standard of care.
Commenter requested clarification on the threshold for documenting illnesses requiring medical care and asks whether a specific form is required or if a generic case log is acceptable.	No action taken. LD will address in training.
110-145-2920 Retention of children's and youth's records after facility closure.	
Commenter requested clarification on record retention requirements after a child or youth exits a program, either by changing providers or aging out.	No action taken. WAC 110-145-2890 requires GCFs provide children's and youth's records to the caseworker.
110-145-2930 Medical consent and care.	
Commenter requested the department require licensees to obtain parental consent for medical care for community children or youth, unless the youth has legal authority to consent independently. They also requested an exception to this requirement for interim facilities and RACs.	No action taken. The department declined both requests citing the legal authority in section (a) and its responsibility to maintain a standard of care for the children and youth it serves in all licensed facilities.
Commenter wanted to know if there are requirements missing from section (1) regarding medical consent and the directives.	No action taken. The WAC includes directives for the requirement in 1(a).
Commenter requested adding a provision to section (d)(ii) that exempts community children and youth from requiring consent in cases of emergent medical care.	No action taken. Emergency medical care requirements are addressed in WAC 110-145-2780.

110-145-2940 Medical records for medically fragile children and youth.	
Commenter requested adding a requirement for licensees to consult a child's or youth's established licensed health care provider for medical advice unless exceptions apply. They also request that interim facilities and RACs be exempt from this requirement.	No action taken. The department declined due to its responsibility to maintain a standard of care for the children and youth it serves in all licensed facilities.
Commenter requested an exemption from the requirement to obtain dental and optometry information for ERC and GRC programs, citing the burden of collecting such data during short-term placements, especially when children and youth arrive in the middle of the night with limited available information.	No action taken. The department declined due to its responsibility to maintain a standard of care for the children and youth it serves in all licensed facilities.
Commenter asked for clarification on whether licensees will not be in compliance if youth requiring specialty or sedation dentistry receive dental exams at intervals longer than six months.	No action taken. Section (3) requires that optometry and dental needs be arranged as necessary.
Commenter seeks clarification on whether the EPSDT exam exception for interim facilities also applies to community children and youth.	No action taken. The department declines. The proposed language meets the department's standard of care in all licensed facilities.
Commenter requests a language change from voluntary placement agreement be changed to out-of-home services.	Action taken. The department adopted the proposed language change.
110-145-2960 Prevention of communicable disease	
Commenter sought clarification on whether the periodic reviews of policies and procedures described in section (d) apply to the individual household or to the provider organization.	No action taken. The reviews are for the provider.
110-145-3000 Communication privacy for children and youth.	
Commenter requested to add a requirement that smoking and vaping paraphernalia not be on the person while on shift (kept in their car, office).	No action taken. This will be clarified in GCF policies and procedures.
110-145-3010 Records for each shift.	
Commenter asked if providers need to now document medications on both the shift log and the medication administration record?	No action taken. This will be clarified in GCF policies and procedures.

110-145-3020 Communication privacy for children and youth. Commenter asked if email and app messages such as TikTok and Snapchat would constitute an electronic message.	No action taken. LD will provide technical assistance on this topic.
110-145-3040 Supporting peer relationships and participating in activities. Commenter requested clarifications on what is the written activity plan is and if it is similar to a calendar of scheduled events?	No Action taken. The written activity plan is specific to the child or youth and activities they are participating in.
110-145-3050 Cultural Needs. Two commenters addressed concerns regarding cultural needs and written plans for short-term care. They requested additional requirements be added to include a written plan outlining how information about children's and youth's cultural needs will be gathered, including details on what must be included in the plan. They also suggested allowing off-site options for fulfilling cultural needs. They requested more clarity on what the plan should contain for short stays, interim facilities, ERCs, and RACs or that they be exempt from the requirements in sections (4) and (5).	No action taken. The requirement for gathering cultural needs and developing a written plan meet the department's standard of care, even in short-term placement.

110-145-3070 Technology use.	
Commenter requested there be no expectation for technology for children 12 and under in short term placements. The commenter notes that there is significant research on damaging effects of technology on young children and that a plan be developed in writing and be age specific birth to 6 but strongly recommended from age 12 and under.	No action taken. This will be clarified in GCF policies and procedures.
Commenter asked if the department can include something about the use of technology for communication devices such as an augmentative and alternative communication device designed to assist individuals with speech and language impairments.	No action taken. Technology communication devices are allowed in (a).
Commenter asked what type of technology training is to be expected. They also wanted to know who the training is for, who would be conducting the training, and is there a WAC for room searches? Commenter wanted to know where the training will come from? They asked if it is developed by themselves or would it be through existing resources such as Alliance?	No action taken. These two comments were similar. The GCF will provide training to their staff. Room search protocols will be in the GCFs policies or procedures.
110-145-3080 Education and vocational requirements.	
Commenter is concerned with the requirement of notifying a child's or youth's representative if in (a)(i) there is no immediate plan for them to attend school. The commenter would like language to include securing support so that youth can attend in the near future as the children and youth they serve are typically not attending school within the first two days.	No action taken. This will be clarified in GCF policies and procedures.

110-145-3080 Education and vocational requirements.	
Commenters concerns and questions regarding education and vocation requirements are below: • Some children and youth do not directly access a foster care liaison as part of (B)(II). • They don't attend "best interest determination meetings" for their type of care. They note that the licensees attend with signed consent from a legal representative. • Requests clarification on what providing technology in (d)(i) means, do they provide them with internet access or are they required to provide the actual device? Providing school supplies such as a laptop or tablet would be the responsibility of the family if not provided by the school district. • Commenter wants to verify that providers know they are responsible for providing the education and that home-based instruction should be given by the school directly.	No action taken on comments. This will be clarified in GCF policies and procedures.
Commenter said that not all youth will purchase school pictures as that is the responsibility of the parent.	Action taken. Added "if applicable" to address situations where these can't be documented in a child's or youth's well-being file.

110-145-3090 Allowance, chores and employment.	
Commenter said this is a bad policy. We are teaching youth that they can break things and have no responsibility for replacing them.	No action taken. The department declined as the NRM workgroup requested that allowance be considered separate and not repayment.
Commenter suggests adding exemptions for community placed children.	No action taken. This will be clarified in GCF policies and procedures.
The department received two similar comments. Commenters are concerned with sections being misinterpreted that youth may re-earn their own money and that these opportunities need to specify that it cannot be the youth's own funds. Commenters also want to know what type of things would serve as a money substitute and if the providers are the ones to assign the chores?	No action taken. This will be clarified in GCF policies and procedures.
Commenter wants to know how to develop an employment plan for youth seeking employment off-site and how that is documented in their well-being file as part of their transition (age 18-22) service? Commenter states that they would create their plan, not the licensee.	No action taken. This will be clarified in GCF policies and procedures.
110-145-3100 Personal Hygiene	
Commenters want to ensure that youth's and family's personal allowance would cover the personal hygiene requirements, particularly for DDCS youth.	No action taken. This is outside of the scope of these WACs.
110-145-3110 Food storage and preparation.	
Commenter requested to remove the requirement for training on safe food handling practices for DDCS services for children and youth. The commenter also suggests that most youth in their care would not be able to pass a food handlers test but they need the skills and always have supervision while they meet their food prep goals and cooked meals**.**	No action taken. Children and youth can prepare food for themselves. If they prepare food for others they must be trained in safe food handling practices from personnel, they do not need a food handler's permit unless they are doing this regularly.
110-145-3390 Sleeping areas and equipment in OYSs.	
Commenter expressed concerns for OYSs and opposes the requirement to provide physical barriers for youth privacy during sleeping hours. They express concern that such barriers reduce staff visibility, compromise supervision, and may negatively impact youth safety and emotional well-	No action taken. The department declines as the requirements for OYSs were developed through the NRM process which OYSs were represented. The proposed language reflects the best approach to ensuring youth safety and emotional well-being.

being, particularly for youth with trauma. The commenter argues this approach conflicts with trauma-informed care and emphasizes the need to balance privacy with continuous oversight.	
110-145-3400 Storage of ammunition and other weapons in OYSs Commenter asked if OYS employees are expected to know if a resident is legally allowed to possess a gun? Also wanting to know if the residents don't disclose that they aren't allowed to possess a firearm. They want to know when a child is allowed to possess a gun.	No action taken. This will be clarified in GCF policies and procedures.
110-145-3440 SRH capacity Commenter requested clarification on whether SRH's with five or fewer youth are exempt from inspections.	No action taken. This is not addressed in this section but action was taken in WAC 110-145-2390.
110-145-3490 Medical records for medically fragile children and youth. Commenter requested clarification on whether medically fragile providers are to follow their treatment plans for residents or follow the treatment plan from the youth's licensed health care providers. Commenter stated they advocated for this through the NRM process and believe documenting care for medically fragile children should fall under the responsibility of the DOH. They assert that the department's scope should be limited to only verifying that a current DOH license is in place. Commenter requested language revisions for youth in out of home services for them to remain eligible for group care based on public school enrollment rather than a fixed age cutoff. They advocate for extending eligibility through the full duration of K–12 education, including IDEA transition programs, and request a minimum 60-day transition period after school ends. The commenter highlights the trauma and disruption caused by forced transitions at age 21, especially for youth with intensive support needs to be eligible, receive care, and consistent educational services.	No action taken. Coordination with the licensed health care provider is outlined in WAC 110-145-3460. No action taken. The facilities are responsible for meeting documentation requirements. No action taken. The department revised the eligibility for group care services to the age of 22 for DDCS youth enrolled in education as required by Senate Bill 5253.