

Instructions for Completing Room List for Assisted Living Facilities (ALF), DSHS 10-389

- For initial licensing inspections, verify or reconcile the information provided by Construction Review Services, Department of Health on this form according to the instructions below.
- For updating a room list for currently licensed assisted living facilities, complete this form according to the instructions below.
- The instructions in FMS are specific to the FMS System. The printed version includes further instruction for the field. See Construction Services SOP, section-Room lists for further instructions.

Enter the following information in the corresponding spaces.

A. ASSISTED LIVING FACILITY NAME

- The name of the assisted living facility as it appears on the assisted living facility license
- Automatically populated from license

B. LICENSE / APPLICATION NUMBER

- The assisted living facility license number
- If no assisted living facility license number exists, then application number
- Automatically populated from license

C. STREET ADDRESS

- The street address of the assisted living facility building, including:
- Street address,
- City,
- State, and
- Zip code
- Values are automatically populated from license

D. TOTAL SLEEPING ROOMS

- The total number of sleeping rooms described on the form in column "N"
- Automatically populated based on number of rows for column "N"
- Defined in Chapter 388-78A-2020 WAC, means a room where a resident is customarily expected to sleep and contains a resident's bed.

E. TOTAL LICENSED RESIDENT BED CAPACITY

- Manually entered value
- Value cannot exceed total of "G"
- Required for saving
- Automatic verification to check if entered value matches the related value in FMS
 - FMS value is located in related provider's "Facility Features" page, "Bed Count" group box, "Licensed" column
 - If entered value does not match value in FMS "Licensed" column, then two error messages will appear:
 - Error message when a full visit is changed to "Ready for Review" status
 - Error message when a full visit is changed to "Approved" status
- Defined in Chapter 388-78A-2020 WAC, means the resident occupancy level requested by the licensee and approved by the department. All residents receiving domiciliary care or the items or services listed under general responsibility for the safety and well-being of the resident as defined in this section count towards the licensed resident bed capacity. Adult day service clients do not count towards the licensed resident bed capacity.

F. TOTAL REPORTED LICENSED BEDS

- The total number of beds described on the form in column "Q"
- Automatically populated based on number of beds for column "Q"
- These are the beds **reported by the facility / provider** that must meet licensing requirements under chapters 388-78A WAC and 388-110 WAC.
 - Include beds in which the facility has an AL contract for a resident
 - Include beds in which the facility reports a non-resident resides that is receiving AL services.
 - Include beds in which the facility reports the bed(s) are to be licensed even though there is no resident on AL services occupying the room or vacant, may be referenced by the facility/provider as 'stand by'.

G. TOTAL "RCS APPROVED BEDS

- The total number of RCS approved beds as determined by adding all of the approved beds listed in column "R"
- Automatically populated based on number of approved bed spaces in column "R"
- See R below for definition of approved beds.

H. MINIMUM REQUIRED SQUARE FEET - The minimum required square feet of day room area(s)

- Manually entered value
- Required for saving
 - Determined as prescribed in Chapter 388-78A-3050(2) as follows:
 - Multiplying the total number of approved bed spaces listed in space "G" by ten square feet for assisted living facilities licensed on or before December 31, 1988, or 150 square feet, whichever is greater (E x 10 square feet = minimum required square feet of day room area(s) for older construction, but not less than 150 square feet);
 - Multiplying the total number of approved bed spaces listed in space "G" by twenty square feet for assisted living facilities licensed after December 31, 1988, or 150 square feet whichever is greater (E x 20 square feet = minimum required square feet of day room area(s) for newer construction, but not less than 150 square feet).

I. TOTAL AVAILABLE SQUARE FEET

- The total available square feet of day room area(s).
- Manually entered value.
- Required for saving
- Determined as prescribed in Chapter 388-78A-3050, by calculating the combined square feet in area(s) designated by the assisted living facility as areas in which residents may participate in social and recreational activities, including but not limited to solariums, enclosed sun porches, recreation rooms, dining rooms and living rooms.

J. DATE FIRST LICENSED

- The earliest date the home was currently licensed without a break in the licensed status.
- If no license number exists, then this value is left blank (for licensing applications not yet issued)
- Automated value

K. MAXIMUM CONTRACTED ASSISTED LIVING CAPACITY

- The maximum contracted Assisted Living capacity
- The total number of rooms determined by adding all of the rooms listed in column "S"
- Required for saving
- Physical plant requirements prescribed in Chapter 388-110-140(1)(b) through (2).

L. COMMENTS / PURPOSE FOR CHANGE

- Manually entered value
- Not required for saving
- This section can be used to denote information related to the designated room, such as: increase/decrease in bed capacity, annual inspection revealed new information, unapproved construction reported by provider, does not meet a specific requirement, exemption on record, change of ownership, shared bathroom does not meet requirements, or any other pertinent information.

M. WING / FLOOR OR BUILDING UNIT

- The wing, floor or building unit to identify what section of the assisted living facility each sleeping room is in.
- Manually entered values

N. ROOM IDENTIFIER (NUMBER, COLOR, ETC.)

- The identifier for each sleeping room, such as room number or name.
- Manually entered values

O. ROOM TYPE

- Manually selected dropdown value:
 - "Single Room" One bed space
 - "Double Room" Two bed spaces
 - "Multiple Room" Three or more bed spaces
 - "Studio"
 - "Apartment" Bed Space is a separate room
- Required for saving

P. USEABLE SQ FT

- Manually entered values
- Required for saving
- **Do not measure all rooms or measure rooms at every inspection.**
- Square footage will be calculated as follows: If not previously recorded on an updated FMS room list from the last annual inspection obtain the measurement as described in the ALF Room List Training, posted on the <http://intra.altsa.dshs.wa.gov/rcs/bhinfo.htm>. This is the number to be entered into the FMS system.

Q. REPORTED LICENSED BEDS

- Manually entered values
- Enter the number of beds within the room **reported by the facility/provider** that should be licensed. Reported as 0, 1, 2, or 3
- These are the beds **reported by the facility/provider** that must meet licensing requirements under chapters 388-78A WAC and 388-110 WAC.
 - Include beds in which the facility has an AL contract for a resident
 - Include beds in which the facility reports a non-resident resides that is receiving AL services.
 - Include beds in which the facility reports the bed(s) are to be licensed even though there is no resident on AL services occupying the room or vacant, may be referenced by the facility or provider as 'stand by'.

R. NUMBER OF APPROVED BEDS

- The number of approved bed spaces for each resident room.
- Manually entered value
- Required for saving
- In FMS, the Facility Features page records the 'approved beds'. These beds were approved to have met the licensing requirements under Chapter 388-78A but were not licensed at the time of construction.
- Defined under Chapter 388-78A-2810, before the licensed bed capacity may be increased the facility must obtain constructions review services review and approval of the additional rooms or beds; and meet contract requirements.
- Defined under Chapter 388-110-140, the room must also meet the physical requirements at the time of initial contracting; or if there is a break in contract (i.e. CHOW) meet the requirements in effect at the time of the new contract.

S. ROOM APPROVED FOR AL CONTRACT

- Mark whether or not the room meets Assisted Living contract standards
- Manually selected checkbox
- Asterisk (*) to appear after title
- Asterisk explanation to appear at bottom of Room List
 - Text on asterisk explanation: "Check to ensure that the room is consistent with WAC 388-110."
- Make a notation in the comments section if the room does not meet the requirements under 388-110-140(1) through (2).

T. REMARKS

- Any explanatory comments (examples: does not have the required roll in shower, shared bathroom, etc.)
- Manually entered value
- Not required for saving

U. DATA COLLECTION DATE

- Manually entered value
- Required for saving

V. DATA COLLECTION STAFF NAME(S)

- Name of staff member or members who collected the data
- Capability of listing multiple staff names
- Manually selected from list of staff with applicable FMS security profiles
- Required for saving

Usage of this form:

- List of "Bed Count" will be displayed in related provider's "Facility Features:"
 - "Actual Licensed Beds" are the number of beds requested by the facility versus any updated room list information. (Determined by facility at original time of application for licensure with RCS.)
 - "Reported Licensed Beds" see 'F' above, automatically updates from last entered FMS room list.
 - "CRS Beds", historically reported by DOH-CRS as "Approved Beds", prior to the November 2016 Room Lists entered in FMS. (Determined by CRS at original time of application for DOH review.)
 - "RCS Approved Beds" see 'G' above, automatically updates from last entered FMS Room List, data collected from annual inspection room list as updated.
- List of "ALF Room Lists" will be displayed in related provider's "Facility Features:"
 - "Room List Summary."