

TITLE:	SAFE OPERATIONS OF TROUVES HEALTH CARE	Policy 23.01
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Authority: [RCW 7.70, Actions for injuries resulting from health care](#)  
[RCW 11.88, Guardianship](#)  
[RCW 11.92, Guardianship, powers and duties](#)  
[RCW 11.94, Power of attorney](#)  
[RCW 18.20, Assisted living facilities](#)  
[RCW 18.79, Nursing Care](#)  
[RCW 69.14, Food, Drug](#)  
[RCW 70.122, Natural Death Act](#)  
[RCW 74.34, Abuse of Vulnerable Adults](#)  
[WAC 388.78A, Assisted Living Facilities Licensing Rules](#)

**PURPOSE:**

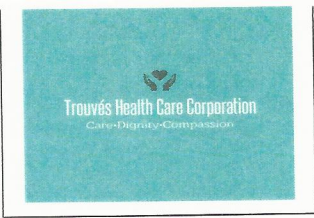
This policy describes the safe operations of Trouves Health Care facilities.

**SCOPE:**

This policy applies to all Trouves employees, volunteers, students, and contractors.

**POLICY:**

- A. Trouves Health Care supports safety of operations through following all applicable RCW, WAC and federal law as it applies to residents of assisted living facilities.
- B. Trouves maintains a safe and secure resident care environment for all residents and employees.
- C. The service plan team has the authority to provide restrictions or exceptions to resident items based on the safety risk of the individual. These individual situations must be reflected in the resident’s service plan.
- D. Policies and procedures are used to instruct staff on safe practices and ways to support our residents. Policies and procedures are located in nursing stations as well as on the Trouves Health Care web page.



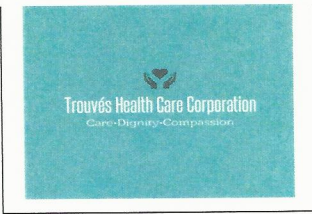
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- E. Our robust training program is designed to teach and update staff on safe operations, best practices, and evidence based treatment for the populations we serve. Employees attend New Employee Orientation, in-services, and annual training to ensure their skills and abilities support safe operations.

**PROCEDURE:**

- A. Trouves follows fire code regulations. These standards area as follows:
  - 1. Nothing hangs from any portion of a sprinkler system.
  - 2. Nothing hangs from the ceiling which could, in any manner, impede the throw or spray pattern of a sprinkler system.
  - 3. Combustible decorations that are not flame retardant are limited by the facility. The exception is combustible decorations, such as photographs, paintings, and artwork. If used, these items must:
    - a. Be at least 18 inches from the ceiling;
    - b. Not exceed 20% of the wall surface aggregate area; and
    - c. Be spaced apart to not present a hazard to fire development or the spread of fire.
  - 4. No decorations/artwork is hung on or around egress (e.g., exit, in/out) doors.
  - 5. Hallways must have at least 8 feet in the path of egress. No items shall be stored in hallways. This includes medical equipment and furniture.
  - 6. For privacy, the exterior windows may not be covered with any material that is not fire retardant or treated with fire retardant.

Note: Any fire retardant material must be approved by Chief Operations Office and requires a Safety Data Sheet (SDS).



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- 7. In bedrooms, all personal belongings must be able to fit into the patient's assigned closet/drawers/footlocker/nightstand and desk.
  - a. Residents are accountable for securing all personal items when not in use in their closets, footlockers, etc.
  - b. Plastic garbage liners are not allowed in resident rooms or care areas due to safety risk.

**EXCEPTIONS:**

No exceptions to this policy may be granted without the prior written approval of the Director.

**SUPERCEDES:**

None