



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave, Suite 200, Vancouver, WA 98684

WHIPPLE CREEK SENIOR ESTATE
WHIPPLE CREEK SENIOR ESTATE LLC
819 NE 155TH CIRCLE
VANCOUVER, WA 98685

RE: WHIPPLE CREEK SENIOR ESTATE LLC # 750136

Dear Provider:

This document references Compliance Determination 43234 (Completion Date 07/17/2024).

The Department completed a full inspection of your Adult Family Home on 07/17/2024 and found that your home does not meet the Adult Family Home licensing requirements.

The department staff who did the inspection and provided consultation:

Olga Goyzman

A licensor may consult with a provider when a violation of the Washington Administrative Code (WAC) or Revised Code of Washington (RCW) is found, but it is not cited in the Statement of Deficiencies. Violations may not be cited when it is a first-time violation of statute or rule with minimal or no harm to residents. A consult does not require a follow-up visit.

Consultation:

WAC 388-76-10165 Background checks Washington state name and date of birth background check Valid for two years National fingerprint background check Valid indefinitely.

(1) A Washington state name and date of birth background check is valid for two years from the initial date it is conducted. The adult family home must ensure:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for each individual listed in WAC 388-76-10161 ;

(b) There is a valid Washington state background check for all individuals listed in WAC 388-76-10161 .

Background checks for Caregiver 1, Caregiver 2 and Caregiver 3 expired on 6/6/2024. The Provider conducted a new background check for all three caregivers same day as inspection to correct the issue.

WAC 388-76-10015 License Adult family home Compliance required.

(1) The licensed adult family home must comply with all the requirements established in chapters 70.128 , 70.129, 74.34 RCW, this chapter and other applicable laws and regulations including chapter 74.39A RCW; and

(2) The provider is ultimately responsible for the day-to-day operation of each licensed home.

(3) The provider must promote the health, safety, and well-being of each resident residing in each licensed adult family home.

The Adult Family Home (AFH) staff performed blood glucose monitoring for Resident 5. When asked to view the medical test site waiver (MTSW), the Provider stated they were unaware they needed the MTSW. The Dear Provider letter dated 04/01/2022, informed AFH Providers if medical testing was occurring at the AFH (i.e., blood glucose monitoring), the home was required to have an MTSW per WAC 248-338-020 (1). The Provider applied for a MTSW same day as inspection to correct the issue.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:

- Inspect the home to determine if you have corrected all deficiencies.

You May:

- Ask for a informal dispute resolution meeting, according to the attached 'Informal Dispute Resolution' instructions; and
- Ask questions and provide written information to help clarify or dispute the deficiencies.
- Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:

07/17/2024

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- Please contact me at (253)983-3826.

Sincerely,

Lisa Cramer

Lisa Cramer, Field Manager
Region 3, Unit F
Residential Care Services

INFORMAL DISPUTE RESOLUTION [RCW 70.128]

You May:

Request an Informal Dispute Resolution (IDR) meeting within 10 working days after the date you receive this letter. You **must** use an 'IDR Request Form' for **each** citation or enforcement you plan to dispute. You can find this form and directions on the IDR Adult Family Home web page at: <https://www.dshs.wa.gov/altsa/idr>

Provider Process for Choosing a Panel or Traditional IDR:

You may only choose a **Panel** IDR if you are disputing **three or fewer** citations or enforcement actions. You may choose a **Traditional** IDR regardless of the number of citations or enforcement actions you intend to dispute. If you choose a **Panel** IDR, all documents supporting your dispute must be submitted within **20 working days** after the date you receive this letter. For **Panel** IDRs the program will not consider any documents submitted after the **20 working day deadline**. For **Traditional** IDRs you should submit documents supporting your dispute at least **seven** days prior to the date of the IDR meeting.

Send your request and supporting documents to the address below or email to rcsidr@dshs.wa.gov:

Adult Family Home IDR Program
Residential Care Services
PO Box 45600
Olympia, WA 98504-5600

This document was prepared by Residential Care Services for the Locator website.