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

ALINA BESHTEA
NEVER LONELY ADULT FOSTER HOME
10609 SE 2ND ST
VANCOUVER, WA 98664

RE: NEVER LONELY ADULT FOSTER HOME License # 750363

Dear Provider:

This letter addresses Compliance Determination(s) 62577 (Completion Date 07/15/2025) and 60221 (Completion Date 05/29/2025).

The Department completed a follow-up inspection of your Adult Family Home on 07/15/2025 and found that you have corrected the violations listed in the Full report dated 05/29/2025. Your home is back in compliance as of 07/08/2025 with the cited requirements of the Washington Administrative Code or the Revised Code of Washington or both.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10430, WAC 388-76-10430-1, WAC 388-76-10430-2, WAC 388-76-10430-2-a, WAC 388-76-10430-2-b, WAC 388-76-10430-2-c, WAC 388-76-10430-2-d

The Department staff who did the on-site verification:
Kyle Gehlen, ALF Licensor - LTC

If you have any questions, please contact me at (360)450-1218.

Sincerely,

Clinton Fridley

Clinton Fridley, Adult Family Home Nurse Field Manager
Region 3, Unit F
Residential Care Services

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You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for the unannounced on-site full inspection on 05/27/2025 of:
NEVER LONELY ADULT FOSTER HOME
10609 SE 2ND ST
VANCOUVER, WA 98664

The following sample was selected for review during the unannounced on-site visit: 2 of 3 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Olga Goyzman

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit F
800 NE 136th Ave, Suite 200
Vancouver, WA 98684

As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Jody Just
Residential Care Services

06/02/2025
Date

I understand that to maintain an Adult Family Home license, I must be in compliance with all the licensing laws and regulations at all times.

Alina Beshtea
Provider (or Representative)

7-10-2025
Date

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident

(a) Assessment indicates the amount of medication assistance needed by the resident;

(b) Negotiated care plan identifies the medication service that will be provided to the resident;

(c) Medication log is kept current as required in WAC 388-76-10475 ;

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on observation, record review and interview, the adult family home (AFH) failed to ensure that Resident 1 (R1) medication services is done by a legally authorized person to ensure the needs of the resident and meet all laws and rules relating to medications. This failure resulted in R1 not getting his topical medications administered properly.

Findings included...

During an unannounced licensing visit,
on 05/27 /2025 at 1:30 PM,

Observation of R1 medication administration records showed
that R1 was initialing his Lidocaine ointment 5% (a topical cream to treat
pain) , 4 times a day as independent.

Record review of R1 Assessment done on
03/12/2025 showed that all medications including topical creams must be administered
by caregiver.

Record review of nurse delegation records, showed that caregivers were delegated to administer the cream on
R1.

Interview with the provider at 01:35 PM,
they stated that they were not aware that resident was not able to administer
the topical medications on his own if he wanted to do this independently. Provider
stated they will be applying it on R1 from now on.

I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, NEVER LONELY ADULT FOSTER HOME is or will be in compliance with this law and / or regulation on (Date) 7-8-2025.

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Alina Beshtea
Provider (or Representative)

7-10-2025
Date

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

06/02/2025

ALINA BESHTEA
NEVER LONELY ADULT FOSTER HOME
10609 SE 2ND ST
VANCOUVER, WA 98664

RE: NEVER LONELY ADULT FOSTER HOME # 750363

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 05/29/2025 and found that your home does not meet the Adult Family Home Licensing requirements.

The Department:

- Wrote the enclosed report; and
- May take licensing enforcement action based on many deficiency listed on the enclosed report; and
- May inspect the home to determine if you have corrected all deficiencies; and
- Expects all deficiencies to be corrected within the timeframe accepted by the department.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);

- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
  - o Sign and date the enclosed report;
  - o For each deficiency, indicate the date you have or will correct each deficiency;
  - o Return the Plan/Attestation Statement and report with signatures to:

Jody Just, Field Services Administrator
Residential Care Services
Region 3, Unit F
Preferred methods:

eFax: (360) 992-7969
Email: rcsregion3email@dshs.wa.gov
Optional method:
800 NE 136th Ave, Suite 200
Vancouver, WA 98684

• Complete correction(s) within 45 days, or sooner if directed by the Department, after review of your proposed correction dates.
• Have your plan approved by the Department.

Consultation(s):
In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 388-76-10405 Nursing care. If the adult family home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must:

(1) Contract with a nurse currently licensed in the state of Washington to provide the nursing care and service; or

(2) Hire or contract with a nurse to provide nurse delegation.

The Adult Family Home failed to obtain written consent for Nurse Delegation for Resident 3 . The consent form was signed by Residents 3's guardian before the licensor left.

You Are Not:
• Required to submit a plan of correction for the consultation deficiency or deficiencies stated in this letter and not listed on the enclosed report.

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:
• Please contact me at (360)397-9556.

Sincerely,

Jody Just

Jody Just, Field Services Administrator
Region 3, Unit F

Residential Care Services

Enclosure

Plan
(Plan of Correction)

You Must:
Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

Include the following in your plan for each deficiency:
- The date you have or will correct each deficiency; and
- Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:
Jody Just, Field Services Administrator
Residential Care Services
Region 3, Unit F
Preferred methods:
eFax: (360) 992-7969
Email: rcsregion3email@dshs.wa.gov
Optional method:
800 NE 136th Ave, Suite 200
Vancouver, WA 98684

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

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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:

Email: RCSIDR@dshs.wa.gov; or
Fax: (360) 725-3225