



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
HOME AND COMMUNITY LIVING ADMINISTRATION
800 NE 136th Ave, Suite 200, Vancouver, WA 98684

AST Gentle Home Care LLC
AST Gentle Home Care
14011 NE 30th Ave
Vancouver, WA 98686

RE: AST Gentle Home Care # 751368

Dear Provider:

This document references Compliance Determination 71798 (Completion Date 02/06/2026).

The Department completed a full inspection of your Adult Family Home on 02/06/2026 and found that your home does not meet the Adult Family Home licensing requirements.

The department staff who did the inspection and provided consultation:

Sarah Bjork, Licenser

A licenser 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 388-76-10522 Resident rights Notice Policy on accepting medicaid as a payment source. The adult family home must fully disclose the home's policy on accepting medicaid or other public funds as a payment source. The policy must:

(6) Be signed and dated by the resident and kept in the resident record after signature.

A signed Medicaid policy was not found for Resident 6. A signed Medicaid policy (dated 01/30/2026) for Resident 6 was received by fax on 02/03/2026.

WAC 388-76-10161 Background checks Who is required to have.

(2) The adult family home must ensure that all caregivers, entity representatives, and resident managers who are employed directly or by contract after January 7, 2012, have the following background checks:

(b) A national fingerprint background check.

Staff B (caregiver) had an undated hire and orientation checklist that showed Staff B was hired 03/29/2024. No evidence of a national fingerprint background check was found for Staff B. A national fingerprint background check for Staff B (dated 01/31/2026 with no findings) was received by fax on 02/06/2026.

WAC 388-76-10265 Tuberculosis Testing Required.

(1) The adult family home must develop and implement a system to ensure the following persons have tuberculosis testing within three days of employment:

(d) Caregiver;

Staff C, caregiver, had an undated hire and orientation checklist which showed Staff C was hired 10/2025. Staff C had records which showed Staff C completed one blood test for Tuberculosis (TB) on 05/06/2025, which was negative. No evidence of testing upon hire was found for Staff C. A negative TB blood test for Staff C (dated 02/02/2026) was received on 02/06/2026.

WAC 388-76-10201 Succession plan.

(1) The adult family home must have a written plan addressing how they will continue to meet the requirements of this chapter and provide care and services to residents in the event that the provider or entity representative is unable to fulfill their duties in the home and make it available upon request of the department.

A succession plan was not found for the adult family home. A succession plan was received by fax on 02/06/2026.

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

The adult family home did not have a Medical Test Site Waiver certification, required to conduct and interpret testing for medical tests such as blood sugar. Verification of application was received by fax on 02/06/2026.

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.

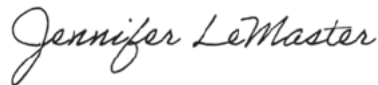
You May:

- 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:

- Please contact me at (360)664-8421.

Sincerely,



Jennifer LeMaster, Community Nurse 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 make an IDR request and find directions on the IDR 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 supporting documents to:

Email: RCSIDR@dshs.wa.gov; or

Fax: (360) 725-3225