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

Lucys House LLC

Lucys House LLC
15305 NE 89th St
Vancouver, WA 98682

RE: Lucys House LLC License # 751774

Dear Provider:

This letter addresses Compliance Determination(s) 43813 (Completion Date 07/09/2024) and 42495 (Completion Date 06/11/2024).

The Department completed a follow-up inspection of your Adult Family Home on 07/09/2024 and found that you have corrected the violations listed in the Full report dated 06/11/2024. Your home is back in compliance as of 07/07/2024 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 388-76-10135-4, WAC 388-112A-0700

The Department staff who did the off-site verification:
Shawn Swanstrom, Licensor

If you have any questions, please contact me at (253)983-3826.

Sincerely,

Lisa Cramer

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

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

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

Statement of Deficiencies	License #: 751774	Compliance Determination # 42495
Plan of Correction	Lucys House LLC	Completion Date
Page 1 of 3	Licensee: Lucys House LLC	06/11/2024

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 06/10/2024 and 06/10/2024 of:
Lucys House LLC
15305 NE 89th St
Vancouver, WA 98682

The following sample was selected for review during the unannounced on-site visit: 1 of 1 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Shawn Swanstrom, Licensor

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.

Residential Care Services

06/13/2024
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.

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Statement of Deficiencies	License #: 751774	Compliance Determination # 42495
Plan of Correction	Lucys House LLC	Completion Date
Page 2 of 3	Licensee: Lucys House LLC	06/11/2024

Provider (or Representative) 6/23/24 Date

WAC 388-76-10135 Qualifications Caregiver. The adult family home must ensure each caregiver has the following minimum qualifications:

(4) Has completed the training requirements in effect on the date the caregiver was hired, including the requirements applicable to the caregiver under chapter 388-112A WAC.

WAC 388-112A-0700 What is CPR training? Cardiopulmonary resuscitation training is training provided by an authorized CPR instructor. Trainees must successfully complete the written and skills demonstration tests.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure two of two sampled caregivers (The Provider and Caregiver A) completed Cardiopulmonary Resuscitation (CPR) with skills demonstration component. This deficient practice placed Resident 1 and future residents at risk for harm in an emergent situation and resulted in care being provided by unqualified staff members.

An unannounced licensing inspection was initiated on 6/10/2024 at 8:45 AM.

Employee record review showed the Provider's training certificate for CPR and first aid training was dated 09/09/2023. Caregiver A's training for CPR and first aid was dated 07/13/2023.

The Provider stated on 06/10/2024 at 10:50 AM, both trainings were obtained online. Online training does not meet the regulatory requirement to have a skills demonstration test.

Attestation Statement

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, Lucys House LLC is or will be in compliance with this law and / or regulation on (Date) 7/1/24.

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

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Provider (or Representative) _____ Date _____

WAC 388-76-10135 Qualifications Caregiver. The adult family home must ensure each caregiver has the following minimum qualifications:

(4) Has completed the training requirements in effect on the date the caregiver was hired, including the requirements applicable to the caregiver under chapter 388-112A WAC;

WAC 388-112A-0700 What is CPR training? Cardiopulmonary resuscitation training is training provided by an authorized CPR instructor. Trainees must successfully complete the written and skills demonstration tests.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure two of two sampled caregivers (The Provider and Caregiver A) completed Cardiopulmonary Resuscitation (CPR) with skills demonstration component. This deficient practice placed Resident 1 and future residents at risk for harm in an emergent situation and resulted in care being provided by unqualified staff members.

An unannounced licensing inspection was initiated on 6/16/2024 at 9:45 AM.

Employee record review showed the Provider's training certificate for CPR and first aid training was dated 09/09/2023. Caregiver A's training for CPR and first aid was dated 07/13/2023.

The Provider stated on 06/10/2024 at 10:50 AM, both trainings were obtained online. Online training does not meet the regulatory requirement to have a skills demonstration test.

Attestation Statement

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, Lucys House LLC is or will be in compliance with this law and / or regulation on (Date)_____ .

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Statement of Deficiencies	License #: 751774	Compliance Determination # 42495
Plan of Correction	Lucys House LLC	Completion Date
Page 3 of 3	Licensee: Lucys House LLC	06/11/2024

Provider (or Representative)

6/23/24
Date

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Provider (or Representative) Date

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

06/13/2024

Lucys House LLC
Lucys House LLC
15305 NE 89th St
Vancouver, WA 98682

RE: Lucys House LLC # 751774

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 06/11/2024 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 Mail the Plan/Attestation Statement and report with original signatures to:

Michael Burdick, Field Manager
Residential Care Services
Region 3, Unit F
800 NE 136th Ave, Suite 200

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

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 388-76-10430 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.

(3) Records are kept which include a current list of prescribed and over-the-counter medications including name, dosage, frequency and the name and phone number of the practitioner as needed.

The Adult Family Home (AFH) did not have a current list of prescribed medications for one of one sampled resident (Resident 1). Resident 1's medication supply revealed expired as needed medications including -Anti diarrheal medication expired 01/2023, Benophen (allergy) 25 milligrams (mg) expired 05/2024, Acetaminophen (pain) 325 mg expired 02/2024, Baclofen (pain) 10 mg expired 09/2023, and Albuterol inhaler (shortness of breath) expired 11/2023. Resident1's medication log did not show the medications had been given in June 2024.

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)450-1218.

Sincerely,

Michael Burdick, Field Manager

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Vancouver, WA 98684

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• Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:

• Please contact me at (360)450-1218.

Sincerely,

Michael Burdick, Field Manager

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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:
Michael Burdick, Field Manager
Residential Care Services
Region 3, Unit F
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 IDR**s 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

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

rcsidr@dshs.wa.gov:

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

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