



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Edmonds Vista AFH LLC
Edmonds Vista AFH LLC
22527 87th Ave W
Edmonds, WA 98026

RE: Edmonds Vista AFH LLC License # 752737

Dear Provider:

This letter addresses Compliance Determination(s) 26143 (Completion Date 07/03/2023) and 23220 (Completion Date 05/05/2023).

The Department completed a follow-up inspection of your Adult Family Home on 07/03/2023 and found that you have corrected the violations listed in the Full report dated 05/05/2023. Your home is back in compliance as of 05/13/2023 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 388-76-10685-11

The Department staff who did the on-site verification:
Twyla Robinson, AFH Licenser

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee' Bourque

Renee Bourque, Field Manager
Region 2, Unit I
Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 752737	Compliance Determination # 23220
Plan of Correction	Edmonds Vista AFH LLC	Completion Date
Page 1 of 3	Licensee: Edmonds Vista AFH LLC	05/05/2023

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 04/28/2023 and 04/28/2023 of:

Edmonds Vista AFH LLC
22527 87th Ave W
Edmonds, WA 98026

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

The department staff that inspected the Adult Family Home:

Twyla Robinson, AFH Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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.

Renee' Bourque
Residential Care Services

05/08/2023
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.



Provider (or Representative)

5/16/2023

Date

WAC 388-76-10685 Bedrooms. The adult family home must meet all of the following requirements:

(11) Provide each resident a call bell, or an alternative way of alerting staff in an emergency, that the resident can use, unless the bedroom of an AFH staff member is within hearing distance of the resident's bedroom and a staff member will be within hearing distance at all times.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure alerting devices were provided to residents in case of an emergency. This failure placed 1 of 2 sampled residents (Resident 2) at risk of harm from inability to notify AFH staff.

Findings included...

Record review showed that the AFH admitted Resident 2 on [REDACTED] 2018 with a diagnosis of

and [REDACTED]

Observation, on 04/28/2023 at 10:42 a.m., showed during the environmental tour there was a call button provided to Resident 2.

In interview, on 04/28/2023 at 11:37 a.m., when asked about the alerting device, Staff A (Provider) stated that Resident 2 did not use the call button. When asked to identify the most appropriate alerting device for Resident 2's conditions, Staff A stated Resident 2's voice.

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, Edmonds Vista AFH LLC is or will be in compliance with this law and / or regulation on (Date) 5/13/23.

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

Statement of Deficiencies

License #: 752737

Compliance Determination # 23220

Plan of Correction

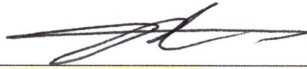
Edmonds Vista AFH LLC

Completion Date

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Licensee: Edmonds Vista AFH LLC

05/05/2023



Provider (or Representative)

5/16/2023

Date

RECEIVED
MAY 18 2023
DSHS/ALTSR/RCS



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

05/09/2023

CERTIFIED MAIL

9489009000276080784584

Edmonds Vista AFH LLC
Edmonds Vista AFH LLC
22527 87th Ave W
Edmonds, WA 98026

RE: Edmonds Vista AFH LLC # 752737

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 05/05/2023 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:

Renee Bourque, Field Manager
Residential Care Services
Region 2, Unit I
20311 52nd Ave W, Suite 100

Edmonds Vista AFH LLC # 752737

05/05/2023

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Lynnwood, WA 98036

- 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 388-76-10805 Automatic smoke alarms.

(3) The home must ensure the smoke alarms in all parts of the home are active and interconnected in such a manner that the activation of one alarm will activate them all. Physical interconnection of smoke alarms shall not be required where listed wireless alarms are installed and all alarms sound upon activation of one alarm.

The Adult Family Home (AFH) failed to ensure all smoke alarms were interconnected on both levels of the AFH and attached residential unit. This failure placed the residents at risk of harm from a fire.

WAC 388-76-10585 Resident rights Examination of inspection results.

(1) The adult family home must place a copy of the following documents in a common use area where they can be easily viewed by residents, resident representatives, the department, and anyone interested without having to ask for them:

- (a) The most recent inspection report, any related follow-up reports, and related cover letters; and

The Adult Family Home failed to post the most recent licensing inspection report. This failure placed residents at risk of being unaware of regulatory compliance issues.

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 (206)914-5042.

Sincerely,
Renee Bourque

Renee Bourque, Field Manager
Region 2, Unit I
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:

Renee Bourque, Field Manager
Residential Care Services
Region 2, Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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

Wudie Shifaw

Edmonds vista AFH LLC

22527 87 Ave west

Edmonds WA 98026

(425) 776-4606

Renee Bourque, Field Manger

Residential Care Service

Region 2, Unit 1

20311 52nd Ave West Suite 100

Lynnwood, WA 98036

PLAN OF CORRECTION

Please find responses and plans of correction as follow

WAC 388-76-10685 Bedrooms

RE: Page 2 of 3. Provide each resident a call bell, or an alternative way of alerting staff in an emergency

- On 5/13/2023, installed alerting devices (alarms) on Resident 2's bed and also wheelchair all the time to be alarmed in case of an emergency.
- A staff member (A) sleeps in bedroom to the right of Resident 2's room. Therefore Edmonds Vista AFH LLC is compliant with WAC 388-76-10685.

Consultations: WAC 388-76-10805 Automatic smoke alarms.

Page 2 of 4

The inspector consulted the home must ensure all smoke alarms are interconnected.

- On 5/5/2023, Energy Management Services Inc. completed the following service: smoke alarms in all parts of the home interconnected in the manner that the activation of one alarm activates all alarms as consulted. Invoice attached.
- Edmonds Vista AFH LLC is compliant with WAC 388-76-10805.

WAC 388-76-10585 Resident rights Examination of inspection results The Adult Family home must place a copy of the most recent licensing inspection report result

Page 2 of 4

- At the time of the home inspection, the most recent inspection result was stored in a folder while the older one was posted. The inspector consulted to post the most recent inspection report where they can be easily viewed by residents and their representatives, and anyone interested without having to ask for them so that same day (4/28/2023) staff member posted the most recent inspection as consulted. Therefore, this was corrected on the same day as the visit, 4/28/2023.
- Edmonds Vista AFH LLC is compliant with WAC 388-76-10585.

Sincerely,

Wudie Shifaw

Edmonds Vista AFH LLC

License #752737

 511612023