STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

Graceland AFH LLC

Graceland AFH LLC
505 NW Darrow St
Pullman, WA 99163

RE: Graceland AFH LLC License # 752796

Dear Provider:

This letter addresses Compliance Determination(s) 43204 (Completion Date 06/25/2024) and 41406 (Completion Date 05/23/2024).

The Department completed a follow-up inspection of your Adult Family Home on 06/25/2024 and found that you have corrected the violations listed in the Full report dated 05/23/2024. Your home is back in compliance as of 05/23/2024 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 388-76-10176-1, WAC 388-76-10176-2, WAC 388-76-10176, WAC 388-76-10165-1-a, WAC 388-76-10165-1-b, WAC 388-76-10165-1, WAC 388-76-10810-2-b

The Department staff who did the on-site verification:
Jacqueline Block, AFH Licensor

If you have any questions, please contact me at (509)598-0182.

Sincerely,

Selena Clemons, Field Manager
Region 1, Unit E
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212

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 05/16/2024 and 05/16/2024 of:

Graceland AFH LLC
505 NW Darrow St
Pullman, WA 99163

The following sample was selected for review during the unannounced on-site visit: 5 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Jacqueline Block, AFH Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit E
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

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.

Selena Clemons — Residential Care Services

05/23/2024 — 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.

Provider (or Representative) Date

WAC 388-76-10176 Background checks Employment Provisional hire Pending results of national fingerprint background check. The adult family home may provisionally employ individuals hired after January 7, 2012 and listed in WAC 388-76-10161 for one hundred twenty-days and allow those individuals to have unsupervised access to residents when:

(1) The individual is not disqualified based on the results of the Washington state name and date of birth background check; and

(2) The results of the national fingerprint background check are pending.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure a national fingerprint background check was completed within 120 days for 1 of 5 staff (Staff C). This failure resulted in staff with potentially disqualifying crimes having unsupervised access to the residents.

Findings included…

Review of employee records shows Staff C, Caregiver, was hired on 10/10/2023. There was no record of a national fingerprint background check on 05/16/2024 (219 days after hire) when employee records were reviewed.

On 05/23/2024 at 12:00 PM, Staff A, Provider, stated Staff C did have a national fingerprint background check from a previous employer and was unable to locate the documentation.

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

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

Provider (or Representative) Date

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 .

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure a Washington state name and date of birth (NDOB) background check was completed once every two years for 1 of 6 staff (Staff D). This failure placed residents at risk for receiving care or contact with persons not qualified to have access to vulnerable adults.

Findings included...

Review of staff records on 05/16/2024 showed Staff D, Caregiver, had a Washington state NDOB background check that expired on 03/11/2024 (66 days overdue).

In an interview on 05/16/2024 at 9:38 AM, Staff A, Provider stated they were unsure why a new NDOB was not completed for Staff D.

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

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

_____ _____

Provider (or Representative) Date

WAC 388-76-10810 Fire extinguishers.

(2) The home must ensure fire extinguishers are:

(b) Inspected and serviced annually;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure 2 of 2 fire extinguishers (Upper Level & Lower Level) were inspected and serviced annually. This placed the residents at risk for harm in the event of a fire.

Findings included…

Observations on 05/16/2024 at 11:29 AM and 11:30 AM showed fire extinguishers on the upper and lower level of the home.

Review of the attached annual certification tags showed the fire extinguishers on the upper and lower level of the AFH were last serviced in April 2022. Both fire extinguishers were 13 months overdue for inspection and service.

During an interview on 05/16/2024 at 11:31 AM, Staff A, Provider, stated they were unaware the fire extinguishers were overdue for inspection and servicing.

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

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

_____ _____

Provider (or Representative) Date