



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Family First LLC
Family First LLC
4700 Pt Fosdick Dr Ste 317
Gig Harbor, WA 98335

RE: Family First LLC License # 752902

Dear Provider:

This letter addresses Compliance Determination(s) 37135 (Completion Date 02/21/2024) and 35889 (Completion Date 02/05/2024).

The Department completed a follow-up inspection of your Adult Family Home on 02/21/2024 and found that you have corrected the violations listed in the Full report dated 02/05/2024. Your home is back in compliance as of 02/13/2024 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 388-76-10285, WAC 388-76-10285-1, WAC 388-76-10285-2

The Department staff who did the on-site verification:

Scotti Bower, AFH Licenser

If you have any questions, please contact me at (360)664-8421.

Sincerely,

Jennifer LeMaster

Jennifer LeMaster, Field Manager
Region 3, Unit A
Residential Care Services

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



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AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

DSHS RCS REG. 3
LAKEWOOD
FEB 21 2024
RECEIVED

Statement of Deficiencies	License #: 752902	Compliance Determination # 35889
Plan of Correction	Family First LLC	Completion Date
Page 1 of 3	Licensee: Family First LLC	02/05/2024

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 02/01/2024 and 02/01/2024 of:
Family First LLC
3512 38th Ave NW
Gig Harbor, WA 98335

The following sample was selected for review during the unannounced on-site visit: 2 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Scotti Bower, AFH Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit A
PO Box 99250
Lakewood, WA 98496

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

02/06/2024
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 #: 752902	Compliance Determination # 35889
Plan of Correction	Family First LLC	Completion Date
Page 2 of 3	Licensee: Family First LLC	02/05/2024


Provider (or Representative)

2/13/24
Date

WAC 388-76-10285 Tuberculosis Two step skin testing. Unless the person meets the requirement for having no skin testing or only one test, the adult family home, choosing to do skin testing, must ensure that each person has the following two-step skin testing:

- (1) An initial skin test within three days of employment; and
- (2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home (AFH) failed to complete the required tuberculosis (an infectious disease) testing for 3 of 10 staff (Caregiver A, Caregiver D and Caregiver F). This failure placed six residents at risk of exposure to an infectious disease.

Findings included...

On 02/01/2024, review of Caregiver A's (CG-A) personnel records showed CG-A was hired on 11/20/2023. Review of CG-A's TB testing showed they completed one tuberculosis (TB) skin test on 11/24/2023, with a negative result. There was no record of CG-A completing a second skin test.

On 02/01/2024, review of Caregiver D's (CG-D) personnel records showed CG-D was hired on 03/30/2022. Review of CG-D's TB testing showed they completed one tuberculosis skin test on 03/18/2022, with a negative result. There was no record of CG-D completing a second skin test.

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Statement of Deficiencies	License #: 752902	Compliance Determination # 35889
Plan of Correction	Family First LLC	Completion Date
Page 3 of 3	Licensee: Family First LLC	02/05/2024

On 02/01/2024, review of Caregiver F's (CG-F) personnel records showed CG-F was hired on 10/25/2023. Review of CG-F's TB testing showed they completed one tuberculosis skin test on 10/18/2023, with a negative result. There was no record of CG-F completing a second skin test.

On 02/01/2024 at 2:30 pm in an interview, the Quality Assurance Manager stated they were not aware why these staff did not complete the second skin 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, Family First LLC is or will be in compliance with this law and / or regulation on (Date) <u>2/13/24</u> .	
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.	
	<u>2-13-24</u>
Provider (or Representative)	Date

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