STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032

3 Tree Vista Adult Family Home LLC

3 Tree Vista Adult Family Home LLC
4701 SW Admiral Way PMB 47
Seattle, WA 98116

RE: 3 Tree Vista Adult Family Home LLC License # 753954

Dear Provider:

This letter addresses Compliance Determination(s) 57074 (Completion Date 03/28/2025) and 53271 (Completion Date 02/13/2025).

The Department completed a follow-up inspection of your Adult Family Home on 03/28/2025 and found that you have corrected the violations listed in the Full report dated 02/13/2025. Your home is back in compliance as of 02/18/2025 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 388-76-10895-1, WAC 388-76-10895-1-a, WAC 388-76-10895-1-b, WAC 388-76-10895-2, WAC 388-76-10895-2-a, WAC 388-76-10895-2-b, WAC 388-76-10895-2-c, WAC 388-76-10201, WAC 388-76-10201-1, WAC 388-76-10201-2, WAC 388-76-10130-3, WAC 388-76-10165-1, WAC 388-76-10165-1-a, WAC 388-76-10165-1-b, WAC 388-76-10320-10-a, WAC 388-76-10320-10-b, WAC 388-76-10320-10, WAC 388-76-10198-2-a

The Department staff who did the on-site verification:
Angelica Rios, ALF Licensor

If you have any questions, please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong, Community Field Manager

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

Region 2, Unit G
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

20425 72nd Avenue S, Suite 400, Kent, WA 98032

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 01/17/2025 of:

3 Tree Vista Adult Family Home LLC
15809 23rd Ave SW
Burien, WA 98166

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:

Angelica Rios, ALF Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit G
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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

Statement of Deficiencies	License #: 753954	Compliance Determination # 53271
Plan of Correction	3 Tree Vista Adult Family Home LLC	Completion Date
Page 2 of 8	Licensee: 3 Tree Vista Adult Family Home LLC	02/13/2025

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.

Dahl Kim
Residential Care Services

02/13/2025
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)

8/17/2025
Date

WAC 388-76-10895 Emergency evacuation drills Frequency and participation.

(1) There are two types of emergency evacuation drills:

(a) A full evacuation is evacuation from the home to the designated safe location; and

(b) A partial evacuation is evacuation to the designated emergency exit.

(2) The adult family home must conduct:

(a) Partial emergency evacuation drills which occur during random staffing shifts at least every sixty days, with each resident participating in at least one each calendar year;

(b) A full emergency evacuation drill at least once each calendar year, with all residents participating in the drill together and at the same time; and

(c) Emergency evacuation drills even if there are no residents living in the home for the purpose of staff practice.

This requirement was not met as evidenced by:

Based on observation, interview and record review the Adult Family Home (AFH) failed to conduct partial and full emergency evacuation drills as required. These failures placed 1 of 1 resident (Resident 1) at risk of harm or serious injury in the event of an emergency requiring evacuation from the AFH.

Findings included...

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH.

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

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 | 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 388-76-10895 Emergency evacuation drills Frequency and participation.

(1) There are two types of emergency evacuation drills:

(a) A full evacuation is evacuation from the home to the designated safe location; and

(b) A partial evacuation is evacuation to the designated emergency exit.

(2) The adult family home must conduct:

(a) Partial emergency evacuation drills which occur during random staffing shifts at least every sixty days, with each resident participating in at least one each calendar year;

(b) A full emergency evacuation drill at least once each calendar year, with all residents participating in the drill together and at the same time; and

(c) Emergency evacuation drills even if there are no residents living in the home for the purpose of staff practice.

This requirement was not met as evidenced by:

Based on observation, interview and record review the Adult Family Home (AFH) failed to conduct partial and full emergency evacuation drills as required. These failures placed 1 of 1 resident (Resident 1) at risk of harm or serious injury in the event of an emergency requiring evacuation from the AFH.

Findings included…

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH.

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

Resident 1's records show Resident 1 was admitted to the AFH on [redacted]/2023.

Review of emergency evacuation drill records showed no evacuation drill logs for 2023, 2024 or 2025.

Durin an interview on 01/17/2025 at 11:25 AM, Staff A, Entity Representative/Resident Manager stated that they had not conducted an emergency evacuation drill in over 2 years. Staff A further stated that they had never conducted a full or partial emergency evacuation drill with Resident 1. Additionally, Staff A stated that they would conduct a full emergency evacuation drill on 01/18/2025.

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, 3 Tree Vista Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 2/5/2025.

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

Provider (or Representative) 2/17/2025 Date

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.

(2) If an emergency or other exceptional circumstance requires a change of ownership due to the inability of a provider to continue to operate the home, an applicant who meets the qualifications to be a provider may apply for a provisional license that would allow the home to continue to operate. The applicant must also apply for a change of ownership at the same time. The department will have the discretion to determine if the circumstances warrant a provisional license.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to have a succession plan. This failure placed all residents at risk at displacement if the provider was no longer able to fulfill their oversight duties for the AFH due to emergencies.

Findings included...

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

Resident 1's records show Resident 1 was admitted to the AFH on [redacted]/2023.

Review of emergency evacuation drill records showed no evacuation drill logs for 2023, 2024 or 2025.

Durin an interview on 01/17/2025 at 11:25 AM, Staff A, Entity Representative/Resident Manager stated that they had not conducted an emergency evacuation drill in over 2 years. Staff A further stated that they had never conducted a full or partial emergency evacuation drill with Resident 1. Additionally, Staff A stated that they would conduct a full emergency evacuation drill on 01/18/2025.

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, 3 Tree Vista Adult Family Home 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 388-76-10201 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.

(2) If an emergency or other exceptional circumstance requires a change of ownership due to the inability of a provider to continue to operate the home, an applicant who meets the qualifications to be a provider may apply for a provisional license that would allow the home to continue to operate. The applicant must also apply for a change of ownership at the same time. The department will have the discretion to determine if the circumstances warrant a provisional license.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to have a succession plan. This failure placed all residents at risk at displacement if the provider was no longer able to fulfill their oversight duties for the AFH due to emergencies.

Findings included…

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

Statement of Deficiencies	License #: 753954	Compliance Determination # 53271
Plan of Correction	3 Tree Vista Adult Family Home LLC	Completion Date
Page 4 of 8	Licensee: 3 Tree Vista Adult Family Home LLC	02/13/2025

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH.

During an interview on 01/17/2025 at 11:37 AM, Staff A, Entity Representative/Resident Manager, stated that they were not aware of the requirement to create a succession plan. Staff A further stated that they would work on creating a succession plan and email it to the department.

As of 1/31/2024 a succession plan for the AFH had not been received by the department.

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, 3 Tree Vista Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 2/18/2025.

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

Provider (or Representative) — Date: 2/17/2025

WAC 388-76-10130 Qualifications Provider, entity representative, and resident manager. The adult family home must ensure that the provider, entity representative on behalf of an entity provider, and resident manager have the following minimum qualifications:

(3) Completion of the training requirements that were in effect on the date they were hired or became licensed providers, including the requirements described in chapter 388-112A WAC;

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 1 staff (Staff A), had a valid cardiopulmonary resuscitation (CPR) and first-aid certification. Additionally, the AFH failed to ensure Staff A had a valid food handler card or food safety continuing education credit. This failure placed 1 of 1 resident (Resident 1) at risk of receiving incorrect care in the event of a medical emergency that requires CPR and at risk of food borne illnesses.

Findings included...

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

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH.

During an interview on 01/17/2025 at 11:37 AM, Staff A, Entity Representative/Resident Manager, stated that they were not aware of the requirement to create a succession plan. Staff A further stated that they would work on creating a succession plan and email it to the department.

As of 1/31/2024 a succession plan for the AFH had not been received by the department.

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, 3 Tree Vista Adult Family Home 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 388-76-10130 Qualifications Provider, entity representative, and resident manager. The adult family home must ensure that the provider, entity representative on behalf of an entity provider, and resident manager have the following minimum qualifications:

(3) Completion of the training requirements that were in effect on the date they were hired or became licensed providers, including the requirements described in chapter 388-112A WAC;

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 1 staff (Staff A), had a valid cardiopulmonary resuscitation (CPR) and first-aid certification. Additionally, the AFH failed to ensure Staff A had a valid food handler card or food safety continuing education credit. This failure placed 1 of 1 resident (Resident 1) at risk of receiving incorrect care in the event of a medical emergency that requires CPR and at risk of food borne illnesses.

Findings included…

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

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH. Further observation showed that Staff A, Entity Representative/Resident Manager, provided all care for Resident 1. Additional observation on 01/17/2025 at 11:30 AM, showed Staff A cooked and served all meals to Resident 1.

Review of Staff A's personnel records showed a cardiopulmonary resuscitation (CPR) certificate that expired on 06/16/2020. Further review of Staff A's record showed a first-aid certificate that expired on 06/16/2020. Additional review of Staff A's records showed no food handler card or food safety education credit.

During an interview on 01/17/2025 at 1:05 PM, Staff A stated that they did not have a valid CPR or first-aid certification. Staff A further stated that they would get a new first-aid and CPR certification. Additionally, Staff A stated that they had not taken a food safety class or renewed their food handler card in more than a year.

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, 3 Tree Vista Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 2/8/2025.

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

Provider (or Representative) 2/17/2025 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 observation, interview, and record review, the Adult Family Home (AFH) failed

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

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH. Further observation showed that Staff A, Entity Representative/Resident Manager, provided all care for Resident 1. Additional observation on 01/17/2025 at 11:30 AM, showed Staff A cooked and served all meals to Resident 1.

Review of Staff A's personnel records showed a cardiopulmonary resuscitation (CPR) certificate that expired on 06/16/2020. Further review of Staff A's record showed a first-aid certificate that expired on 06/16/2020. Additional review of Staff A's records showed no food handler card or food safety education credit.

During an interview on 01/17/2025 at 1:05 PM, Staff A stated that they did not have a valid CPR or first-aid certification. Staff A further stated that they would get a new first-aid and CPR certification. Additionally, Staff A stated that they had not taken a food safety class or renewed their food handler card in more than a year.

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, 3 Tree Vista Adult Family Home 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 observation, interview, and record review, the Adult Family Home (AFH) failed

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

to ensure 1 of 1 current staff (Staff A, Entity Representative/Resident Manager) had a valid name and date of birth background check every two years. This failure resulted in Staff A working with vulnerable adults with an unknown background.

Findings included...

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH. Further observation showed Staff A, Entity Representative/Resident manager, provided all care to Resident 1.

Review of Staff A's personnel records showed a name and date of birth background check that expired on 12/05/2021. Further review of Staff A's records showed no other valid name and date of birth background check.

During an interview on 01/17/2025 at 11:25 AM, Staff A stated that they did not have a recent background check. Staff A stated that they forgot they needed to complete a background check every two years. Additionally, Staff A stated that they would complete a name and date of birth background check for their records.

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, 3 Tree Vista Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 2/18/2025

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

Provider (or Representative) — 2/18/2025 Date

WAC 388-76-10320 Resident record Content. The adult family home must ensure that each resident record contains, at a minimum, the following information:

(10) A current inventory of the resident's personal belongings dated and signed by:

(a) The resident; and

(b) The adult family home.

This requirement was not met as evidenced by:

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

to ensure 1 of 1 current staff (Staff A, Entity Representative/Resident Manager) had a valid name and date of birth background check every two years. This failure resulted in Staff A working with vulnerable adults with an unknown background.

Findings included…

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH. Further observation showed Staff A, Entity Representative/Resident manager, provided all care to Resident 1.

Review of Staff A's personnel records showed a name and date of birth background check that expired on 12/05/2021. Further review of Staff A's records showed no other valid name and date of birth background check.

During an interview on 01/17/2025 at 11:25 AM, Staff A stated that they did not have a recent background check. Staff A stated that they forgot they needed to complete a background check every two years. Additionally, Staff A stated that they would complete a name and date of birth background check for their records.

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, 3 Tree Vista Adult Family Home 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 388-76-10320 Resident record Content. The adult family home must ensure that each resident record contains, at a minimum, the following information:

(10) A current inventory of the resident's personal belongings dated and signed by:

(a) The resident; and

(b) The adult family home.

This requirement was not met as evidenced by:

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

Statement of Deficiencies	License #: 753954	Compliance Determination # 53271
Plan of Correction	3 Tree Vista Adult Family Home LLC	Completion Date
Page 7 of 8	Licensee: 3 Tree Vista Adult Family Home LLC	02/13/2025

Based on observation, interview and record review the Adult Family Home (AFH) failed to complete a current inventory of the resident's personal belongings for 1 of 1 resident (Resident 1). This failure placed the resident at risk of losing personal belongings with no accountability on the part of the AFH.

Findings included...

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH.

Review of Resident 1's records showed Resident 1 was admitted to the AFH on [redacted]/2023. Further review of Resident 1's records showed no personal belongings inventory.

During an interview on 01/17/2025 2:00 PM, Staff A, Entity Representative/Resident Manager, stated that they could not find a personal belongings inventory for Resident 1. Staff A further stated that if they could not find Resident 1's personal belonging inventory, they would complete a new one.

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, 3 Tree Vista Adult Family Home LLC is or will be in compliance with this law and / or regulation on
(Date) 2/18/2025

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

Provider (or Representative) 2/18/2025 Date

WAC 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

(2) Staff orientation and training records pertinent to duties, including, but not limited to:

(a) Training required by chapter 388-112A WAC, including as appropriate for each staff person, orientation, basic training or modified basic training, specialty training, nurse delegation core training, and continuing education;

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

Based on observation, interview and record review the Adult Family Home (AFH) failed to complete a current inventory of the resident's personal belongings for 1 of 1 resident (Resident 1). This failure placed the resident at risk of losing personal belongings with no accountability on the part of the AFH.

Findings included…

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH.

Review of Resident 1's records showed Resident 1 was admitted to the AFH on [redacted]/2023. Further review of Resident 1's records showed no personal belongings inventory.

During an interview on 01/17/2025 2:00 PM, Staff A, Entity Representative/Resident Manager, stated that they could not find a personal belongings inventory for Resident 1. Staff A further stated that if they could not find Resident 1's personal belonging inventory, they would complete a new one.

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, 3 Tree Vista Adult Family Home 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 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

(2) Staff orientation and training records pertinent to duties, including, but not limited to:

(a) Training required by chapter 388-112A WAC, including as appropriate for each staff person, orientation, basic training or modified basic training, specialty training, nurse delegation core training, and continuing education;

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

Statement of Deficiencies	License #: 753954	Compliance Determination # 53271
Plan of Correction	3 Tree Vista Adult Family Home LLC	Completion Date
Page 8 of 8	Licensee: 3 Tree Vista Adult Family Home LLC	02/13/2025

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to have all required training records available to department staff. This failure delayed the department from determining if Staff A (Entity Representative/Resident Manager) was qualified to care for 1 of 1 resident (Resident 1).

Findings included...

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH. Further observation showed Staff A, Entity Representative/Resident manager, was the only staff who provided care to Resident 1.

Review of staff A's personnel records showed no dementia or mental health training certifications.

Department record review showed the AFH was designated to provide specialty care in the areas of Dementia and Mental Health.

During an interview on 01/17/2025 at 1:25 PM, Staff A stated that they could not find their mental health and dementia training certificates. Staff A further stated they had unorganized personnel records and needed to work on filing paperwork. Additionally, Staff A stated they would email their training certificates to the department.

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, 3 Tree Vista Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 2/18/2025

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

Provider (or Representative) Date 2/18/2025

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

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to have all required training records available to department staff. This failure delayed the department from determining if Staff A (Entity Representative/Resident Manager) was qualified to care for 1 of 1 resident (Resident 1).

Findings included…

During a visit on 01/17/2025 at 9:40 AM, observation showed Resident 1 lived in and received care from the AFH. Further observation showed Staff A, Entity Representative/Resident manager, was the only staff who provided care to Resident 1.

Review of staff A's personnel records showed no dementia or mental health training certifications.

Department record review showed the AFH was designated to provide specialty care in the areas of Dementia and Mental Health.

During an interview on 01/17/2025 at 1:25 PM, Staff A stated that they could not find their mental health and dementia training certificates. Staff A further stated they had unorganized personnel records and needed to work on filing paperwork. Additionally, Staff A stated they would email their training certificates to the department.

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, 3 Tree Vista Adult Family Home 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

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