



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

ROHOBOOT LLC
Welcome Home
10918 140th Street E
Puyallup, WA 98374

RE: Welcome Home # 754008

Dear Provider:

This document references Compliance Determination 33196 (Completion Date 12/05/2023).

The Department completed a full inspection of your Adult Family Home on 12/05/2023 and found that your home does not meet the Adult Family Home licensing requirements.

The department staff who did the inspection and provided consultation:

Gary Fuentebella, Licensors

A licenser may consult with a provider when a violation of the Washington Administrative Code (WAC) or Revised Code of Washington (RCW) is found, but it is not cited in the Statement of Deficiencies. Violations may not be cited when it is a first-time violation of statute or rule with minimal or no harm to residents. A consult does not require a follow-up visit.

Consultation:

WAC 388-76-10015 License Adult family home Compliance required.

- (1) The licensed adult family home must comply with all the requirements established in chapters 70.128 , 70.129, 74.34 RCW, this chapter and other applicable laws and regulations including chapter 74.39A RCW; and
- (2) The provider is ultimately responsible for the day-to-day operation of each licensed

home.

(3) The provider must promote the health, safety, and well-being of each resident residing in each licensed adult family home.

The Adult Family Home (AFH) applied for a Medical Test Site Waiver (WTSW) during the COVID-19 pandemic but did not get a license from the Department of Health (DOH). The Provider stated they will follow-up on their MTSW license.

WAC 388-76-10850 Emergency medical supplies. The adult family home must:

(1) Have emergency medical supplies on-hand for the application of basic first aid during an emergency or disaster in a sufficient amount for the number of residents living in the home;

(2) Replenish the emergency medical supplies as they are used; and

The Adult Family Home (AFH) did not have sufficient first-aid supplies for six (6) residents. The AFH Provider obtained additional first-aid supplies to correct the issue.

WAC 388-76-10845 Emergency drinking water supply. The adult family home must have an on-site emergency supply of drinking water that:

(2) Is at least three gallons for the home's licensed capacity, every household member, and caregiving staff;

The Adult Family Home (AFH) had twenty (20) gallons of emergency drinking water supply for six (6) residents and three (3) live-in staff (Provider, Caregiver A and Caregiver C) instead of the required twenty seven (27) gallons. The Provider added ten (10) gallons of emergency drinking water, for a total of thirty (30) gallons to correct the issue.

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.

The Adult Family Home (AFH) did not have a written succession plan. The Provider immediately wrote a succession plan and designated their spouse to be in-charge of providing care and services to residents in the event the Provider was unable to do so, to correct the issue.

WAC 388-76-10255 Infection control. The adult family home must develop and implement an infection control system that:

(1) Uses nationally recognized infection control standards;

The Provider's medical clearance to use an N-95 respirator mask expired on October 2023. The Provider stated that they will get a new medical clearance for N-95 respirator use.

WAC 388-76-10715 Doors Ability to open. The adult family home must ensure:

- (1) Every bedroom and bathroom door opens from the inside and outside;

The doors of shared Bathroom B, each coming from Bedroom B (used by Resident 2) and Bedroom C (used by Resident 4), did not have a key to unlock the door locks. Both residents were unable to use the bathroom by themselves. The Provider removed the door knobs of both doors making them ununlockable, and stated they will replace the knobs with ones that cannot be locked.

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.

Resident 1's personal belongings inventory was not completed while Resident 3's was not signed by the Adult Family Home (AFH). The Provider immediately completed Resident 1's personal belongings inventory, and signed Resident 3's personal belongings inventory, to correct the issue.

WAC 388-76-10650 Medical devices.

- (2) Before a medical device with a known safety risk is used by a resident, the home must:

- (a) Ensure an assessment has been completed that identifies the resident's need and ability to safely use the medical device;
- (b) Provide the resident and his or her family or legal representative with information about the device's benefits and safety risks to enable them to make an informed decision about whether to use the device;
- (c) Ensure the resident's negotiated care plan includes how the resident will use the medical device; and

Resident 1's [REDACTED] were not assessed for safe use, were not incorporated in their Negotiated Care Plan (NCP), and risk and benefits information were not provided to Resident 1. The Provider stated the [REDACTED] were to assist Resident 1 in bed mobility. The Provider [a Registered Nurse (RN)] immediately assessed the [REDACTED] for safe use, incorporated the [REDACTED] in Resident 1's NCP, and provided Resident 1 (own decision-maker, who was alert and oriented) risks and benefits information, to correct the issue.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:

- Inspect the home to determine if you have corrected all deficiencies.

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 (253)983-3826.

Sincerely,



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

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:

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

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