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

1st Brier Senior and Adult Care Home LLC

1st Brier Senior and Adult Care Home LLC
2640 232nd St SW
Brier, WA 98036

RE: 1st Brier Senior and Adult Care Home LLC License # 754627

Dear Provider:

This letter addresses Compliance Determination(s) 29826 (Completion Date 09/20/2023) and 27829 (Completion Date 08/11/2023).

The Department completed a follow-up inspection of your Adult Family Home on 09/20/2023 and found that you have corrected the violations listed in the Full report dated 08/11/2023. Your home is back in compliance as of 08/17/2023 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 388-76-10165-1-b, WAC 388-76-10161-3, WAC 388-76-10375-1, WAC 388-76-10375-2, WAC 388-76-10375, WAC 388-76-10198-2-a, WAC 388-76-10198-3, WAC 388-76-10198-4

The Department staff who did the off-site verification:
Hang Lu, Licensor

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

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 08/08/2023 and 08/08/2023 of:

1st Brier Senior and Adult Care Home LLC
2640 232nd St SW
Brier, WA 98036

The following sample was selected for review during the unannounced on-site visit: 2 of 3 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Hang Lu, Licensor

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.

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: 8/28/23

WAC 388-76-10161 Background checks Who is required to have.

(3) All household members over the age of eleven, volunteers, students, and noncaregiving staff who may have unsupervised access to residents must have a Washington state name and date of birth background check. They are not required to have a national fingerprint background check.

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:

(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 record review and interview, the Adult Family Home (AFH) failed to have a valid Washington State Name and Date of Birth Background Check (BGC) for 2 of 2 household members (Household Members 1 and 2). This failure placed Residents 1, 2, and 3 at potential risk for living in the home with individuals with unknown criminal backgrounds.

Findings included...

In an interview, on 08/08/2023 at 11:30 AM, Staff A, Entity Representative, stated that two household members (HHMs) lived in the home with them and Staff B, Caregiver.

Review of AFH records showed HHM 1 and HHM 2 did not have any BGC on file.

In an interview, on 08/08/2023 at 2:16 PM, Staff A stated that they would look for copies of the HHMs' BGCs.

Review of documents, received by the Department on 08/09/2023, showed the AFH did not send proof that the HHMs had valid BGCs.

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, 1st Brier Senior and Adult Care Home LLC is or will be in compliance with this law and / or regulation on (Date) 8/17/23 .

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

Provider (or Representative) — Date: 8/28/23

WAC 388-76-10375 Negotiated care plan Signatures Required. The adult family home must ensure that the negotiated care plan is agreed to and signed and dated by the:

(1) Resident; and

(2) Adult family home.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure the Negotiated Care Plan (NCP) for 1 of 2 sampled residents (Resident 1) was agreed to, signed, and dated by the home and the resident. This failure placed Resident 1 at risk for unrecognized or unmet care needs.

Findings included...

Review of Resident 1's record showed the AFH admitted Resident 1 on [redacted]/2021 with multiple medical diagnoses. Record review showed Staff A, Entity Representative, and Resident 1 last signed and dated the NCP on 04/01/2022. Record review showed the date "4/1/2022" was written in again in the next "Review/ Revise Date" column on the signature page of Resident 1's NCP.

In an interview, on 08/08/2023 at 11:15 AM, Staff A stated that they thought they already had the NCP signed this year. Staff A stated that they would make sure to have the NCP signed again.

Review of an email correspondence, dated 08/09/2023, showed Staff A reporting that they had written "2022" instead of "2023" by mistake on the signature page of Resident 1's NCP.

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, 1st Brier Senior and Adult Care Home LLC is or will be in compliance with this law and / or regulation on (Date) 8/17/23.

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

Provider (or Representative) — Date: 8/28/23

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;

(3) Tuberculosis testing results.

(4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have the personnel records for 2 of 2 caregivers (Staff A and B) and a former caregiver (Staff C) readily available for review. This failure delayed verification of staff qualifications to work in the home and placed Residents 1, 2, and 3 at risk of being cared for by staff who may not be fully qualified.

Findings included...

Review of staff record showed Staff A, Entity Representative, did not have copies of their Washington State Name and Date of Birth Background Check (BGC), Tuberculosis (TB) skin test results, and 12 hours of Continuing Education (CE) credits.

In an interview, on 08/08/2023 at 2:08 PM, Staff A stated that Staff B, Caregiver, started working in the home in October 2020.

Review of Staff B's record showed Staff B did not have the following documents on file: Orientation form (with date of hire and date of orientation), Fingerprint Background Check

(FP BGC), TB skin test results, First Aid training, Nurse (RN) Delegation training, RN Delegation-Focus on Diabetes training, Nursing Assistant (CNA) training certificate, and 12 hours of CE including Food Safety training.

Review of staff record showed Staff C, Former Caregiver, worked in the home from 08/16/2021 to 01/23/2023. Review of Staff C's record showed Staff C did not have copies of their BGC and FP BGC on file.

In an interview, on 08/08/2023 at 2:08 PM, Staff A stated that they would look for all the missing documents.

Review of documents, received by the Department on 08/09/2023, showed the AFH was still missing Staff C's final FP BGC.

Review of an email correspondence, dated 08/09/2023, showed Staff A indicating that the Federal Bureau of Investigation report, dated 08/13/2019, that they had sent to the Department on 08/09/2023, was based on Staff C's FP BGC.

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, 1st Brier Senior and Adult Care Home LLC is or will be in compliance with this law and / or regulation on (Date) 8/17/23 .

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

Provider (or Representative) — Date: 8/28/23