



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

Bountiful Grace AFH LLC
Bountiful Grace AFH LLC
6419 88th St NE Apt A
Marysville, WA 98270

RE: Bountiful Grace AFH LLC # 754935

Dear Provider:

This document references Compliance Determination 30042 (10/03/2023), which included complaint number(s) 99605.

The Department completed a complaint investigation of your Adult Family Home on 10/03/2023 and found that your home does not meet the Adult Family Home Licensing requirements.

The department staff who did the inspection and provided consultation:

Patricia Young, Community Complaint Investigator

A licensor 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 388-76-10020 License Ability to provide care and services. The provider must have the:

(2) Ability to meet all personal and business financial obligations.

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

The AFH representative (AFHR) and resident manager (RM) stated that they paid the electric bill as soon as they received the disconnection notice. Record review showed the electricity bill was paid 09/26/2023 and other utility bills were current.

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 (206)348-9350.

Sincerely,

Nichollette Flynn, Field Manager
Region 2, Unit B
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:

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



Residential Care Services Investigation Summary Report

Provider/Facility: Bountiful Grace AFH LLC **Provider Type:** Adult Family Home
License/Cert.#: 754935
Compliance Determination #: 30042 **Intake ID:** 99605
Investigator: Patricia Young **Region/Unit #:** RCS Region 2 / Unit B
Investigation Date(s): 09/26/2023 through 10/03/2023
Complainant Contact Date(s): 09/26/2023, 10/02/2023

Allegation(s):

1. The Adult Family Home (AFH) failed to pay their electricity bills for four months which resulted in a disconnection notice.

Investigation Methods:

Sample:	Total residents: 4 Resident sample size: 2 Closed records sample size: 0
Observations:	Internal/external environments Emergency food and water Residents Dining Resident rooms Freezers/refrigerator Cabinets
Interviews:	Identified staff Residents Family members
Record Reviews:	Facility records Electricity records

Investigation Summary:

1. The AFH representative (AFHR) and resident manager (RM) stated that they paid the electric bill as soon as they received the disconnection notice. Record review showed the electricity bill was paid 09/26/2023. The AFHR and RM stated that the autopay on the electricity account was interrupted because the credit card number on file at the Public Utilities District was changed because the card was stolen. Record review showed utilities bills were current and on autopay. Record review showed electricity bills were on autopay. One sampled resident and one sampled caregiver stated the electricity was never turned off. Observations showed an adequate emergency water and food supply and general food supply. Consultation issued.

Conclusion / Action:

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

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A