STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave, Suite 200, Vancouver, WA 98684

Advanced Adult Care, LLC
Advanced Adult Care
10503 NE 21st Street
Vancouver, WA 98664

RE: Advanced Adult Care License # 755550

Dear Provider:

This letter addresses Compliance Determination(s) 64271 (Completion Date 08/12/2025) and 55369 (Completion Date 03/11/2025).

The Department completed a follow-up inspection of your Adult Family Home on 08/12/2025 and found that you have corrected the violations listed in the Complaint report dated 03/11/2025. Your home is back in compliance as of 02/19/2025 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 388-76-10430-2-d

The Department staff who did the on-site verification:
Robert Hennig, NCI ALF Complaint Investigator

If you have any questions, please contact me at (360)450-1218.

Sincerely,

Clinton Fridley

Clinton Fridley, Adult Family Home Nurse Field Manager
Region 3, Unit F
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Ave, Suite 200, Vancouver, WA 98684

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 an unannounced on-site complaint investigation on 02/26/2025 of:

Advanced Adult Care
10503 NE 21st Street
Vancouver, WA 98664

This document references the following complaint number(s): 168775, 168189

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Robert Hennig, NCI ALF Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit F
800 NE 136th Ave, Suite 200
Vancouver, WA 98684

Statement of Deficiencies	License #: 755550	Compliance Determination #: 55369
Plan of Correction	Advanced Adult Care	Completion Date
Page 2 of 3	Licensee: Advanced Adult Care, LLC	03/11/2026

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.

Clinton Fridley
Residential Care Services

07/09/2025
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)

7/16/2025
Date

WAC 388-76-10430 Medication system.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident:

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on interviews and record review, the Adult Family Home (AFH) failed to ensure all residents received their medications as ordered. This failure resulted in one of two sampled residents, Resident 1 (R1), not receiving medications as prescribed.

Findings included...

Record review showed R1 was admitted to the AFH on [redacted]2025 after a hospital stay. The record showed R1 had a diagnosis of [redacted]

Record review of R1's Assessment, dated 02/13/2025, showed R1's medications must be administered by staff daily per physician's orders and nurse delegation.

Record review of R1's physician orders, dated [redacted]2025, showed orders for Apixaban (Eliquis), (blood thinner) 5 MG Tablet by mouth twice daily. The orders showed Ezetimibe (Zetia), (cholesterol medication) 10 MG Tablet by mouth Daily.

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 388-76-10430 Medication system.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident:

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on interviews and record review, the Adult Family Home (AFH) failed to ensure all residents received their medications as ordered. This failure resulted in one of two sampled residents, Resident 1 (R1), not receiving medications as prescribed.

Findings included…

Record review showed R1 was admitted to the AFH on [redacted]/2025 after a hospital stay. The record showed R1 had a diagnosis of [redacted], and [redacted].

Record review of R1's Assessment, dated 02/13/2025, showed R1's medications must be administered by staff daily per physician's orders and nurse delegation.

Record review of R1's physician orders, dated [redacted]/2025, showed orders for Apixaban (Eliquis), (blood thinner) 5 MG Tablet by mouth twice daily. The orders showed Ezetimibe (Zetia), (cholesterol medication) 10 MG Tablet by mouth Daily.

Record review of R1's Medication Administration Record (MAR) showed Apixaban (Eliquis) 5 MG Tablet by mouth twice daily was not recorded as given on [redacted]/2025, 02/16/2025, 02/17/2025, 02/18/2025, and 02/19/2025. The MAR reviewed also showed Ezetimibe (Zetia) 10 MG Tablet Daily by mouth not recorded as given on [redacted]/2025, 02/16/2025, 02/17/2025, 02/18/2025, and 02/19/2025.

During an interview on 02/26/2025 at 9:00 AM, Collateral Contact 1 (CC1), Nurse Delegator, stated while at the AFH to conduct delegations, it was discovered that multiple medications had not been recorded as given between the dates of [redacted]/2025 and 02/19/2025, which included medications to prevent blood clots that could lead to poor outcomes for the resident.

During an interview on 02/26/2025 at 1:30 PM, Staff 1 (S1) stated R1 was admitted to the AFH on [redacted]/2025, earlier than expected due to the hospital insisting on discharging to the AFH. S1 stated the home did not have all of R1's medications to administer, including Apixaban (Eliquis) 5MG Tablet by mouth twice daily, and Ezetimibe (Zetia) 10 MG Tablet daily by mouth, until sometime on 02/19/2025.

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, Advanced Adult Care is or will be in compliance with this law and / or regulation on (Date) 02/19/2025 corrected

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

Provider (or Representative) — Date: 7/16/2025

Record review of R1's Medication Administration Record (MAR) showed Apixaban (Eliquis) 5 MG Tablet by mouth twice daily was not recorded as given on [redacted]/2025, 02/16/2025, 02/17/2025, 02/18/2025, and 02/19/2025. The MAR reviewed also showed Ezetimibe (Zetia) 10 MG Tablet Daily by mouth not recorded as given on [redacted]/2025, 02/16/2025, 02/17/2025, 02/18/2025, and 02/19/2025.

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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, Advanced Adult Care 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