



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

Burnt Bridge Creek LLC
Burnt Bridge Creek AFH
15006 SE Meadow Park Dr
Vancouver, WA 98683

RE: Burnt Bridge Creek AFH # 755810

Dear Provider:

This document references Compliance Determination 66128 (Completion Date 10/07/2025).

The Department completed a full inspection of your Adult Family Home on 10/07/2025 and found that your home does not meet the Adult Family Home licensing requirements.

The department staff who did the inspection and provided consultation:

Sarah Bjork, Licensors

A licensors 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

The provider did not have the Medical Test Site Waiver certificate. Documentation was received on 09/24/2025 which showed the provider completed the application for certification.

WAC 388-76-10475 Medication Log. The adult family home must:

(2) Include in each medication log the:

(c) Dosage of the medication;

Resident 4 was prescribed insulin (a medication used to control blood sugar) twice daily, which was to be given as either a full dose or half dose, depending on the resident's blood sugar. The log was initialed indicating the medication had been given, but the dose the resident received was not noted. An updated medication log showed the home implemented a new system of recording the doses given, which was received on 09/26/2025.

WAC 388-76-10265 Tuberculosis Testing Required.

(1) The adult family home must develop and implement a system to ensure the following persons have tuberculosis testing within three days of employment:

(a) Provider;

The provider was licensed on 08/24/2022. Staff record review showed the provider completed skin tests for Tuberculosis (TB) on 12/16/2007, 01/16/2008, and 02/03/2010 (all of which were negative). No additional test records were found for the provider. Evidence of a completed (negative) TB blood test for the provider (dated 09/24/2025) was received on 09/26/2025.

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.

10/07/2025

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If You Have Any Questions:

- Please contact me at (360)450-1218.

Sincerely,



Clinton Fridley, Adult Family Home Nurse Field Manager
Region 3, Unit F
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:

Email: RCSIDR@dshs.wa.gov; or

Fax: (360) 725-3225