STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

Aspire Care Adult Family Home LLC
Aspire Care Adult Family Home LLC
1917 184th Street Ct E
Spanaway, WA 98387

RE: Aspire Care Adult Family Home LLC # 756349

Dear Provider:

This document references Compliance Determination 33450 (12/28/2023), which included complaint number(s) 107294.

The Department completed a complaint investigation of your Adult Family Home on 12/28/2023 and found that your home does not meet the Adult Family Home Licensing requirements.

The department staff who did the inspection and provided consultation:

Laura Newberry

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 388-76-10198 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:

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

The adult family home (AFH) failed to keep staff background checks accessible to department staff when requested. The AFH made immediate correction to provide records timely to the department, consultation was provided.

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 (360)664-8421.

Sincerely,

Jennifer LeMaster, Field Manager
Region 3, Unit G
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: Aspire Care Adult Family Home LLC
License/Cert.#: 756349
Compliance Determination #: 33450
Investigator: Laura Newberry
Provider Type: Adult Family Home
Intake ID: 107294
Region/Unit #: RCS Region 3 / Unit G
Investigation Date(s): 12/06/2023 through 12/28/2023
Complainant Contact Date(s): 12/28/2023

Allegation(s):

Abuse – Quality of care/treatment – The named resident (NR) was allegedly given the wrong medications, slapped, verbally shamed, and had their personal conversations monitored by the adult family home (AFH) staff.

Investigation Methods:

Sample:	Total residents: 3 Resident sample size: 3 Closed records sample size: 1
Observations:	AFH residents, AFH staff, staff interactions with residents, AFH environment
Interviews:	AFH residents, AFH staff, others not associated with the AFH
Record Reviews:	NR and other AFH residents negotiated care plan (NCP) and assessment, staff records, NR medication administration record (MAR)

Investigation Summary:

Abuse – Quality of care/treatment – Interview with AFH residents and AFH resident's responsible party stated no concerns with care and service, felt safe in the AFH and had private conversations as desired. Review of records showed NR MAR was completed as required. Observations showed medication administration completed as required. Observations showed AFH staff spoke appropriately to AFH residents. Review of records showed the AFH failed to keep personnel records accessible to the department. Consultation was provided.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A