STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

CSL Yakima WA Tenant LLC
Fieldstone Adult Family Home Yakima
4206 Englewood Ave
Yakima, WA 98908

RE: Fieldstone Adult Family Home Yakima License # 756546

Dear Provider:

This letter addresses Compliance Determination(s) 53844 (Completion Date 01/30/2025) and 50594 (Completion Date 12/03/2024).

The Department completed a follow-up inspection of your Adult Family Home on 01/30/2025 and found that you have corrected the violations listed in the Full report dated 12/03/2024. Your home is back in compliance as of 01/17/2025 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 388-76-10165-1, WAC 388-76-10165-1-a, WAC 388-76-10165-1-b, WAC 388-76-10900, WAC 388-76-10900-1, WAC 388-76-10900-2, WAC 388-76-10900-3, WAC 388-76-10900-4, WAC 388-76-10900-5

The Department staff who did the on-site verification:
Jo Whitney, AFH Licensor

If you have any questions, please contact me at (509)598-0182.

Sincerely,

Selena Clemons

Selena Clemons, Interim Community Field Manager
Region 1, Unit C
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

1200 Alder Street, Union Gap, WA 98903

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 11/19/2024 and 11/19/2024 of:
Fieldstone Adult Family Home Yakima
4206 Englewood Ave
Yakima, WA 98908

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

The department staff that inspected the Adult Family Home:

Jo Whitney, AFH Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Selena Clemons
Residential Care Services

12/09/2024
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)

12-21-24
Date

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:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for each individual listed in WAC 388-76-10161 ;

(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 ensure staff with unsupervised access to residents did not have a background result over 2 years old for 1 of 13 staff (Staff L). This failed practice placed the residents at risk from an unqualified person.

Findings included...

Employee record review on 11/19/2024 showed:
Staff L, Life Enrichment Director, had a background result dated 09/01/2022 expiring 09/01/2024. The current result was dated 09/30/2024, 29 days late.

Interviewed 11/19/2024 at 2:35 PM, Collateral Contact 1, Human Resources, stated they submitted authorizations for background renewals based on the employees first result date. Staff L was hired 09/24/2028. Records showed background results dated 09/18/2018, 09/03/2020, 09/01/2022 and the current result of 09/30/2024.

At 2:35 PM, Collateral Contact 1, Executive Director, stated results expired at 2 years; a new authorization and result should show not over 2 years old.

Attestation Statement

Provider (or Representative) Date

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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, Fieldstone Adult Family Home Yakima is or will be in compliance with this law and / or regulation on (Date) 1-17-25 .

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

Provider (or Representative) — Date: 12-21-24

WAC 388-76-10900 Documentation of emergency evacuation drills Required. The adult family home must document the following for all emergency evacuation drills:

(1) Names of each resident and staff involved in the drill;

(2) Name of the person conducting the drill;

(3) Date and time of the drill;

(4) Whether the drill was a full or partial emergency evacuation; and

(5) The length of time it took to complete the evacuation.

This requirement was not met as evidenced by:

WAC 388-76-10895 - Emergency evacuation drills—Frequency and participation.
(1) There are two types of emergency evacuation drills:
(a) A full evacuation is evacuation from the home to the designated safe location; and
(b) A partial evacuation is evacuation to the designated emergency exit.
(2) The adult family home must conduct:
(a) Partial emergency evacuation drills which occur during random staffing shifts at least every sixty days, with each resident participating in at least one each calendar year;
(b) A full emergency evacuation drill at least once each calendar year, with all residents participating in the drill together and at the same time; and

Based on record review and interview, the Adult Family Home (AFH) failed to ensure the evacuation drills conducted were recorded/logged to show resident and staff participation in a partial drill at least every 60 days and a full evacuation to the designated safe meeting location annually. This failed practice placed the residents at risk from unprepared staff in the event of an emergency.

Findings included...

On 11/19/2024, 6 residents occupied the AFH; each required the assistance of staff to

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Findings included...

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evacuate.

The drill logs for the previous year were requested for review. A single evacuation drill log was provided showing a full evacuation drill was performed in less than 5 minutes on 04/21/2023.

On 11/19/2024 at 2:40 PM, Collateral Contact 1 (CC1), Executive Director, stated Staff M, Maintenance Director, regularly checked the smoke detector alarm system and would do the drills. CC1 was new in their position and would look for logs. CC1 stated they recognized there was a problem with the system for completing and recording drills.

On 11/19/2024 at 1:50 AM, Staff C, Caregiver, stated they had participated in an evacuation drill in August 2024. Staff B, Martha, Caregiver, stated they had also participated in an evacuation drill in 2024. Staff C described how staff moved residents in wheelchairs from their rooms to the exit door for a partial drill.

On 11/22/2024, CC1 sent the logs for drills performed 11/20 and 11/21/2024. The AFH did not have records of completed drills between April 2023 and November 2024 a time frame of 19 months.

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Provider (or Representative) 12-21-24 Date

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_____ _____

Provider (or Representative) Date

PLAN OF CORRECTIONS

Community Name: Fieldstone Adult Family Home #756546 **Survey/Investigation Date:** 12/03/2024

Plan of Correction

Regulation #	Deficient System or Standard	Action Plan	Team Member's Name	Estimated date of completion	Signature/Date
WAC 388-76-10165 Background Checks	Background checks past 2 years	The community ED/BOM to complete on-going audits on all staff files and run new backgrounds on any staff that have fallen outside of state guidelines. Administrator and or Business Office Manager will audit all files monthly for a period of time not to exceed 5 months to make sure we are complying with current WAC 388-76-10161. Business Office Manager will do a manual spread sheet on all staff with current and future background dates. This will also continue to be audited over the next 5 months until pattern of compliance is established. **Audit weekly**	ED/BOM	1/17/25 & Ongoing	

FIELDSTONE COMMUNITIES

PLAN OF CORRECTIONS

WAC 388-76-10900 Documentations of emergency evacuation drills	Full and Partial Evacuation Drills	The community Executive Director / Maintenance Director to complete both full and partial Evacuation Drills during the course of this next year. In addition to the full Evacuation Drill completed on November 21, 2024, we have schedule drills every two months with a full drill being done before November 2025. These drills will consist of residents and noted any resident that my refuse and substituted with staff. Fieldstone Adult Family Home will continue to be in compliance moving forward as we have noted dates for completion of future Evacuation Drills (both full and partial) on our Outlook Calendar. **Audit monthly**	ED/Maintenance Director	1/17/25 On going	

FIELDSTONE COMMUNITIES

PLAN OF CORRECTIONS

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

FIELDSTONE COMMUNITIES