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

FERN'S CARE, LLC
Fern's Care, LLC
PO Box 489
Eatonville, WA 98328

RE: Fern's Care, LLC License # 756817

Dear Provider:

This letter addresses Compliance Determination(s) 66131 (Completion Date 09/24/2025) and 61437 (Completion Date 08/28/2025).

The Department completed a follow-up inspection of your Adult Family Home on 09/24/2025 and found that you have corrected the violations listed in the Complaint report dated 08/28/2025. Your home is back in compliance as of 09/30/2025 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 388-76-10225-1-b-ii, WAC 388-76-10166-2-a, WAC 388-76-10166-2-b, WAC 388-76-10200-5-d

The Department staff who did the on-site verification:
Alexander Ulbrickson, NCI AFH Complaint Investigator

If you have any questions, please contact me at (360)664-8421.

Sincerely,

Jennifer LeMaster

Jennifer LeMaster, Community Nurse Field Manager
Region 3, Unit G
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

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 06/24/2025 and 08/28/2025 of:

Fern's Care, LLC
133 Mashell Ave S
Eatonville, WA 98328

This document references the following complaint number(s): 181285, 191455

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 investigated the Adult Family Home:

Alexander Ulbrickson, NCI AFH Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit G
6639 Capitol Blvd SW, Floor 1
Tumwater, WA 98501

Statement of Deficiencies	License #: 755617	Compliance Determination #: 51437
Plan of Correction	Fern's Care, LLC	Completion Date
Page 2 of 6	Licensee: FERN'S CARE, LLC	08/28/2025

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.

Jennifer LeMaster
Residential Care Services

09/05/2025
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)

9/12/2025
Date

WAC 388-76-10225 Reporting requirement.

(1) The adult family home must ensure all staff:

(b) Report the following to the department by calling the complaint toll-free hotline number or completing an online report:

(ii) Conditions that threaten the provider's or entity representative's ability to continue to provide care or services to each resident; and

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home (AFH) failed to ensure that the department was notified using the complaint toll-free hotline number when conditions existed that threatened the provider's ability to continue to provide care or services for 5 of 5 residents (Resident 1 [R1], Resident 2 [R2], Resident 3 [R3], Resident 4 [R4], Resident 5 [R5]). This failure placed all residents at risk of losing their placements at the AFH.

Findings included...

Review of department records showed that on 05/30/2025 at 11:02 AM, the department received a report of concern that the AFH was in foreclosure and a notice of foreclosure had been posted on the AFH's front door.

On 06/23/2025 at 1:34 PM a review of department records showed no reports were received from the AFH about the foreclosure notice.

On 6/24/2025 at 11:40 AM Caregiver A (CA) stated that the AFH property had been in

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.

Jennifer LeMaster
Residential Care Services

09/05/2025
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)

Date

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(1) The adult family home must ensure all staff:

(b) Report the following to the department by calling the complaint toll-free hotline number or completing an online report:

(ii) Conditions that threaten the provider's or entity representative's ability to continue to provide care or services to each resident; and

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home (AFH) failed to ensure that the department was notified using the complaint toll-free hotline number when conditions existed that threatened the provider's ability to continue to provide care or services for 5 of 5 residents (Resident 1 [R1], Resident 2 [R2], Resident 3 [R3], Resident 4 [R4], Resident 5 [R5]). This failure placed all residents at risk of losing their placements at the AFH.

Findings included...

Review of department records showed that on 05/30/2025 at 11:02 AM, the department received a report of concern that the AFH was in foreclosure and a notice of foreclosure had been posted on the AFH's front door.

On 06/23/2025 at 1:24 PM a review of department records showed no reports were received from the AFH about the foreclosure notice.

On 6/24/2025 at 11:40 AM Caregiver A (CA) stated that the AFH property had been in

probate after the death of the previous owner.

On 07/22/2025 at 1:11 PM the AFH Provider stated they had received a foreclosure notice and that they had also received two previous foreclosure notices. The AFH Provider stated that for the previous two foreclosure notices, the AFH had paid off the amount due. The AFH Provider stated that they were waiting for the bank to give them a reinstatement amount so they could pay. The AFH Provider stated that the issue was due to the previous owner's debts.

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, Fern's Care, LLC is or will be in compliance with this law and / or regulation on (Date) 9/30/25.

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

Provider (or Representative) 9/16/25 Date

WAC 388-76-10168 Background checks - Household members, noncaregiving and unpaid staff - Unsupervised access.

(2) If the background check results show that an individual specified in WAC 388-76-10161 has a criminal conviction or pending charge for a crime that is not automatically disqualifying under chapter 388-113 WAC, then the adult family home must:

(a) Determine whether or not the person has the character, competence and suitability to have unsupervised access to residents; and

(b) Document in writing the basis for making the decision.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the adult family home (AFH) failed to ensure that a determination regarding character, competence and suitability was made and documented in writing for two household members (Household Member 1, Household Member 2). This failure placed 5 of 5 residents (Resident 1 [R1], Resident 2 [R2], Resident 3 [R3], Resident 4 [R4], Resident 5 [R5]) at risk of living with potentially disqualified household members.

Findings included...

On 08/24/2025 at 11:28 AM, observation showed that the front living area of the AFH

probate after the death of the previous owner.

On 07/22/2025 at 1:11 PM the AFH Provider stated they had received a foreclosure notice and that they had also received two previous foreclosure notices. The AFH Provider stated that for the previous two foreclosure notices, the AFH had paid off the amount due. The AFH Provider stated that they were waiting for the bank to give them a reinstatement amount so they could pay. The AFH Provider stated that the issue was due to the previous owner's debts.

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, Fern's Care, LLC 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

WAC 388-76-10166 Background checks Household members, noncaregiving and unpaid staff Unsupervised access.

(2) If the background check results show that an individual specified in WAC 388-76-10161 has a criminal conviction or pending charge for a crime that is not automatically disqualifying under chapter 388-113 WAC, then the adult family home must:

(a) Determine whether or not the person has the character, competence and suitability to have unsupervised access to residents; and

(b) Document in writing the basis for making the decision.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the adult family home (AFH) failed to ensure that a determination regarding character, competence and suitability was made and documented in writing for two household members (Household Member 1, Household Member 2). This failure placed 5 of 5 residents (Resident 1 [R1], Resident 2 [R2], Resident 3 [R3], Resident 4 [R4], Resident 5 [R5]) at risk of living with potentially disqualified household members.

Findings included...

On 06/24/2025 at 11:38 AM, observation showed that the front living area of the AFH

had been blocked off for personal use for family of the AFH Provider. One of the family members was observed in the AFH.

On 06/24/2025 at 11:40 AM Caregiver A (CA) stated that two members of the AFH Provider's family were living at the AFH due to a temporary emergency situation and that they didn't have access to background checks for the two family members who were living at the AFH due to the temporary emergency situation.

On 07/16/2025 at 2:15 PM the AFH Provider was called on their mobile phone and a voicemail was left requesting call back. This call received no response.

On 07/22/2025 at 1:11 PM the AFH Provider stated they had just received the background checks for the two family members who were living at the AFH and they hadn't opened them yet. The AFH Provider stated they would send the background checks by 5:00 PM on 07/22/2025.

On 07/22/2025 at 1:28 PM the AFH Provider emailed the background checks to the department, which showed "review required" for both family members. The AFH Provider stated in their email that they would send the character, competence and suitability statements to the department by the end of the day. As of 08/28/2025, no documentation had been received.

On 07/24/2025 at 10:23 AM an email was sent to the AFH Provider stating that the character statements had not been received. This email did not receive a response.

On 08/06/2025 at 3:57 PM an email was sent to the AFH Provider following up on the request for the requested character statements. This email did not receive a response.

On 8/28/2025 at 12:34 PM Caregiver A stated that they didn't have access to background checks or character statements for two family members living at the AFH.

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, Fern's Care, LLC is or will be in compliance with this law and / or regulation on (Date) 9/11/2025.

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

Provider (or Representative) — Date: 9/10/2025

WAC 388-76-10200 Adult family home Staff Availability Contact information. In addition to other licensing requirements for staff availability, the adult family home must:

(5) Ensure the provider, entity representative or resident manager is readily available to:

(a) Authorized state staff.

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home (AFH) failed to ensure that the provider was readily available to authorized state staff. This failure placed 5 of 5 residents (Resident 1 [R1], Resident 2 [R2], Resident 3 [R3], Resident 4 [R4], Resident 5 [R5]) at risk of not receiving the required department (DSHS) oversight for reported care concerns.

Findings included:

On 08/24/2025 at 11:34 AM observation showed the AFH Provider was not at the AFH.

On 08/24/2025 at 11:40 AM Caregiver A (CA) stated that they didn't have access to background checks for two family members who were living at the AFH.

On 07/16/2025 at 2:15 PM the AFH Provider was called on their mobile phone and a voicemail was left requesting call back. This call received no response.

On 07/22/2025 at 1:11 PM the AFH Provider was instructed to send the background checks for the family members living in the AFH. The AFH Provider was also instructed to send financial statements regarding the AFH's financial situation.

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, Fern's Care, LLC 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

WAC 388-76-10200 Adult family home Staff Availability Contact information. In addition to other licensing requirements for staff availability, the adult family home must:

(5) Ensure the provider, entity representative or resident manager is readily available to:

(d) Authorized state staff.

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home (AFH) failed to ensure that the provider was readily available to authorized state staff. This failure placed 5 of 5 residents (Resident 1 [R1], Resident 2 [R2], Resident 3 [R3], Resident 4 [R4], Resident 5 [R5]) at risk of not receiving the required department (DSHS) oversight for reported care concerns.

Findings included...

On 06/24/2025 at 11:34 AM observation showed the AFH Provider was not at the AFH.

On 06/24/2025 at 11:40 AM Caregiver A (CA) stated that they didn't have access to background checks for two family members who were living at the AFH.

On 07/16/2025 at 2:15 PM the AFH Provider was called on their mobile phone and a voicemail was left requesting call back. This call received no response.

On 07/22/2025 at 1:11 PM the AFH Provider was instructed to send the background checks for the family members living in the AFH. The AFH Provider was also instructed to send financial statements regarding the AFH's financial situation.

Statement of Deficiencies	License #: 758617	Compliance Determination #: 61437
Plan of Correction	Fern's Care, LLC	Completion Date
Page 6 of 6	Licensee: FERN'S CARE, LLC	08/28/2025

On 07/23/2025 at 1:28 PM the AFH Provider emailed the background checks, which showed "review required" results for both of the two family members. The AFH Provider stated in their email that they would send the required character, competence and suitability statements to the department by the end of the day. As of 07/23/2025, the AFH Provider had not sent any of the documentation requested on 07/22/2025.

On 07/24/2025 at 10:23 AM an email was sent to the AFH Provider stating that the character statements had not been received, nor had financial statements requested from the AFH. This email did not receive a response.

On 08/06/2025 at 3:57 PM an email was sent to the AFH Provider following up on the request for the requested character statements and financial statements. This email did not receive a response.

On 08/28/2025 at 1:06 PM, the AFH Provider stated they hadn't sent any financial records because they didn't know what to send and that they didn't remember receiving either email.

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, Fern's Care, LLC is or will be in compliance with this law and / or regulation on (Date) 9/30/25

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

Provider (or Representative) 9/16/25 Date

On 07/22/2025 at 1:28 PM the AFH Provider emailed the background checks, which showed "review required" results for both of the two family members. The AFH Provider stated in their email that they would send the required character, competence and suitability statements to the department by the end of the day. As of 07/23/2025, the AFH Provider had not sent any of the documentation requested on 07/22/2025.

On 07/24/2025 at 10:23 AM an email was sent to the AFH Provider stating that the character statements had not been received, nor had financial statements requested from the AFH. This email did not receive a response.

On 08/06/2025 at 3:57 PM an email was sent to the AFH Provider following up on the request for the requested character statements and financial statements. This email did not receive a response.

On 08/28/2025 at 1:06 PM, the AFH Provider stated they hadn't sent any financial records because they didn't know what to send and that they didn't remember receiving either email.

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

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Provider (or Representative) Date