STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Carla Staley
Staley Adult Family Home
7824 147th St E
Puyallup, WA 98375

RE: Staley Adult Family Home License # 756867

Dear Provider:

This letter addresses Compliance Determination(s) 67697 (Completion Date 10/23/2025) and 66097 (Completion Date 09/25/2025).

The Department completed a follow-up inspection of your Adult Family Home on 10/23/2025 and found that you have corrected the violations listed in the Full report dated 09/25/2025. Your home is back in compliance as of 10/24/2025 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 388-76-10191, WAC 388-76-10191-1, WAC 388-76-10191-1-a, WAC 388-76-10191-1-b, WAC 388-76-10191-2, WAC 388-76-10191-2-a, WAC 388-76-10191-2-b, WAC 388-76-10191-3, WAC 388-76-10191-4, WAC 388-76-10285, WAC 388-76-10285-1, WAC 388-76-10285-2

The Department staff who did the on-site verification:
Hung Bui, Adult Family Home RN Licensor

If you have any questions, please contact me at (253)208-3090.

Sincerely,

Rathana Duong, AFH Field Manager
Region 3, Unit A
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Statement of Deficiencies	License #: 756867	Compliance Determination #66097
Plan of Correction	Staley Adult Family Home	Completion Date
Page 1 of 4	Licensee: Carla Staley	09/25/2025

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 09/23/2025 of:
Staley Adult Family Home
7824 147th St E
Puyallup, WA 98375

The following sample was selected for review during the unannounced on-site visit: 2 of 4 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Hung Bui, Adult Family Home RN Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit A
PO Box 99250
Lakewood, WA 98496

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 — 10/02/2025 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.

CMS
carla M. Staley — Provider (or Representative) — 10/24/25 Date

Requested IDR

WAC 388-76-10191 Liability insurance required. The adult family home must:

(1) Obtain and maintain both:

(a) Commercial general liability insurance or business liability insurance covering the adult family home; and

(b) Professional liability insurance or errors and omissions insurance covering the adult family home.

(2) Obtain the liability insurance required in subsection (1) of this section before whichever of the following events happens first:

(a) Admitting the first resident after issuance of a new adult family home license; or

(b) 10 working days have passed since the issuance of the license.

(3) Have evidence of liability insurance coverage available if requested by the department.

(4) Notify the department's complaint resolution unit if there is any lapse in required liability insurance coverage.

This requirement was not met as evidenced by:

Based on interview and record review the Adult Family Home (AFH) failed to have current business liability insurance and professional liability insurance coverage. This failure placed 4 of 4 residents (Resident 1, Resident 2, Resident 3, and Resident 4) at risk for being unable to obtain financial restitution in the event of injury resulting from acts or omissions of an employee or volunteer.

Findings included...

On 9/23/2025, record review showed no documentation of current business liability insurance and professional liability insurance from the Provider.

On 9/23/2025 at 12:32 PM, in an interview, the Provider acknowledged the lack of insurance and stated that it had been difficult to find insurance providers.

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, Staley Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 10/24/25 .

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

CMS
Carla M. Staley
Provider (or Representative)

10/24/25
Date

WAC 388-76-10285 Tuberculosis Two step skin testing. Unless the person meets the requirement for having no skin testing or only one test, the adult family home, choosing to do skin testing, must ensure that each person has the following two-step skin testing:

(1) An initial skin test within three days of employment; and

(2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 3 staff members (Provider) completed a second tuberculosis ([TB], a communicable disease) skin test done one to three weeks after the first test. This failure placed all residents at risk of exposure to a communicable disease.

Findings included...

On 9/23/2025, record review showed no documentation that the Provider completed a second TB skin test one to three weeks after the first test which was completed on 5/28/2023 (5/26/2023 administered with a negative reading on 5/28/2023).

On 9/23/2025 at 12:30 PM, in a interview, the Provider stated they had completed one TB skin test because they misunderstood the requirement and believed the follow-up

reading on May 28, 2023, was considered the second skin test.

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, Staley Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 10/12/25 .

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

CMSt

carla M Staley
Provider (or Representative)

10/12/25
Date

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Carla Staley
Staley Adult Family Home
7824 147th St E
Puyallup, WA 98375

RE: Staley Adult Family Home # 756867

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 09/25/2025 and found that your home does not meet the Adult Family Home Licensing requirements.

The Department:

- Wrote the enclosed report; and
- May take licensing enforcement action based on many deficiency listed on the enclosed report; and
- May inspect the home to determine if you have corrected all deficiencies; and
- Expects all deficiencies to be corrected within the timeframe accepted by the department.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);

- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
  - o Sign and date the enclosed report;
  - o For each deficiency, indicate the date you have or will correct each deficiency;
  - o Return the Plan/Attestation Statement and report with signatures to:

Rathana Duong, AFH Field Manager
Residential Care Services
Region 3, Unit A
Preferred methods:

eFax: (253) 589-7240
Email: rcsregion3email@dshs.wa.gov
Optional method:
PO Box 99250
Lakewood, WA 98496

• Complete correction(s) within 45 days, or sooner if directed by the Department, after review of your proposed correction dates.
• Have your plan approved by the Department.

Consultation(s):
In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 388-76-10810 Fire extinguishers.

(2) The home must ensure fire extinguishers are:

(b) Inspected and serviced annually;

On 9/23/2025, observation showed that the fire extinguisher in the kitchen was last serviced in June 2024 (15 months prior) and the extinguisher at the front entrance was last serviced on 10/18/2023 (23 months prior). The Provider purchased a new replacement unit and submitted a proof of purchase receipt to correct this issue by the end of the inspection.

WAC 388-76-10895 Emergency evacuation drills Frequency and participation.

(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;

(c) Emergency evacuation drills even if there are no residents living in the home for the purpose of staff practice.

On 09/23/2025, record review showed that the Adult Family Home (AFH) was licensed to start providing services on 11/28/2023. The first evacuation drill was conducted on July 14, 2024 (8 months after licensure). The Provider stated that their first resident was admitted in [redacted] of 2024 and were not aware of the policy to conduct evacuation drills even if there are no residents living in the home. The Provider corrected the issue by conducting evacuation drills every 60 days starting in November 2024.

WAC 388-112A-0610 Who in an adult family home is required to complete continuing education training each year, how many hours of continuing education are required, and when must they be completed?

(1) The continuing education training requirements that apply to certain individuals

working in adult family homes are described below.

(f) Continuing education must include one half hour per year on safe food handling in adult family homes as described in RCW 70.128.250 for a long-term worker who does not maintain a food handler's permit, and completed basic or modified basic caregiver training before June 30, 2005. A long-term* care worker who completed basic or modified basic training after June 30, 2005 is not required to have a food handler's permit.

WAC 388-76-10415 Food services. The adult family home must:

(1) Ensure that the safe food handling training requirements of chapter 388-112A WAC are met; and

On 09/23/2025, record review showed that Caregiver B's (CGB) food handler card had expired on 6/25/2025. The Provider and CGB acknowledged the issue. On 09/24/2025, the Provider corrected the issue by submitting a new food handler card via email with an expiration date of 9/23/2027.

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:

(2) Staff orientation and training records pertinent to duties, including, but not limited to:

(c) First aid; and

On 09/23/2025, administrative record review showed Caregiver B (CGB) had no First Aid certificate available for review. CGB stated that they believed First Aid was automatically included as part of their Cardiopulmonary Resuscitation course. CGB completed the First Aid training on 09/24/2025 and the Provider emailed a copy of the certificate to the Department to correct the issue.

WAC 388-112A-0610 Who in an adult family home is required to complete continuing education training each year, how many hours of continuing education are required, and when must they be completed?

(1) The continuing education training requirements that apply to certain individuals working in adult family homes are described below.

(a) The following long-term care workers must complete 12 hours of continuing education by their birthday each year:

(iv) An adult family home provider, entity representative, and resident manager as provided under WAC 388-112A-0050 .

WAC 388-76-10130 Qualifications Provider, entity representative, and resident manager. The adult family home must ensure that the provider, entity representative on behalf of an entity provider, and resident manager have the following minimum qualifications:

(3) Completion of the training requirements that were in effect on the date they were hired or became licensed providers, including the requirements described in chapter 388-112A WAC;

On 9/23/2025, an administrative records review showed that the Provider completed 10 hours of continuing education (CE) from 2/15/2024 to 2/15/2025 (a full birthday year). The Provider was short of 2 hours to fulfill the required twelve (12) hours of CE credits. On 9/24/2025, the Provider emailed a copy of 2 additional hours of CE credits, completed on 9/23/2025, to correct the issue.

You Are Not:

• Required to submit a plan of correction for the consultation deficiency or deficiencies stated in this letter and not listed on the enclosed report.

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 (253)208-3090.

Sincerely,

Rathana Duong, AFH Field Manager
Region 3, Unit A
Residential Care Services

Enclosure

Plan
(Plan of Correction)

You Must:

Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

Include the following in your plan for each deficiency:

• The date you have or will correct each deficiency; and
• Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:
Rathana Duong, AFH Field Manager
Residential Care Services
Region 3, Unit A
Preferred methods:
eFax: (253) 589-7240
Email: rcsregion3email@dshs.wa.gov
Optional method:
PO Box 99250
Lakewood, WA 98496

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

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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