



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Long-Term Support Administration
PO Box 45600, Olympia, WA 98504-5600

December 14, 2015

CERTIFIED MAIL 7007 1490 0003 4197 1203

Licensee, Group Action for Peninsula People
Gapp AFH
PO Box 1003
Wauna, WA 98395

Adult Family Home License #**531102**

**RESCIND REVOCATION OF LICENSE,
IMPOSITION OF STIPULATIONS FOR LIFTING
STOP PLACEMENT ORDER PROHIBITING
ADMISSIONS, AND IMPOSITION OF CONDITIONS
ON A LICENSE**

Dear Licensee:

On February 17, 2015, the Department of Social and Health Services (DSHS), Residential Care Services conducted an inspection/investigation at your facility. In an Enforcement Notice dated March 3, 2015, DSHS gave you formal notice of the revocation of the adult family home license and continued stop placement of admissions for your adult family home, also known as **Gapp AFH**, located at **8725 State Road 302 NW, Gig Harbor, WA** by the State of Washington, Department of Social and Health Services. These actions are taken under the authority granted in Revised Code of Washington (RCW) 70.128.160, chapter 43.20A RCW, and Washington Administrative Code (WAC) 388-76-10940.

Pursuant to the terms of a Stipulations, Agreed Motion and Order to Dismiss entered on December 10, 2015 DSHS hereby rescinds the revocation of the adult family home license, imposes stipulations for lifting the stop placement of admissions, and the department is also imposing conditions on a license for your adult family home.

The conditions are based on the following violations of the RCW and/or WAC determined by the department in your adult family home and described in the **original** attached Statement of Deficiencies (SOD) report dated **February 17, 2015**.

WAC 388-76-10225(2)(a)(c) – Reporting requirement.

The licensee failed to notify the family and health care provider of one resident when the resident had significant changes in condition.

WAC 388-76-10400(2) – Care and services.

The licensee failed to ensure one resident received the care necessary to obtain the resident's highest level of physical well-being when the resident began to exhibit a significant decline in health.

WAC 388-76-101631(2) – Background checks—Washington state name and date of birth background check.

The licensee failed to ensure five residents were protected from unsupervised access from an individual with a disqualifying criminal conviction.

NOTE: These are the violations which resulted in the conditions on the license; see the attached Statement of Deficiencies for any additional violations.

The department has determined that the following conditions shall be placed on your adult family home license:

The licensee, at the licensee's expense, must hire a consultant not affiliated with the home, to assist the licensee review, revise (if necessary) and implement a system to ensure resident safety by educating all staff regarding identifying, reporting, and responding to changes in a resident's condition and worsening of a resident's medical condition. This will include but not be limited to:

- 1. Reviewing the facility policy;*
- 2. Identification of possible signs of medical emergency;*
- 3. Reporting any substantial changes of a resident's condition;*
- 4. A system to ensure that staff are available to transport residents to scheduled doctors' appointments and to summons Emergency Medical Services in all emergency situations;*
- 5. A system to ensure that parent's, guardians, and other decision-makers are informed of changes in a resident's condition in a timely manner;*
- 6. A system to ensure that doctors, nurses and other medical professionals are consulted regarding a change and/or worsening of a resident's medical condition;*
- 7. Clarification of policies regarding the summoning of emergency medical assistance; and*
- 8. Training all staff.*

The licensee will provide the consultant with a copy of the February 17, 2015 Statement of Deficiencies (SOD).

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The consultant must be hired within thirty (30) days of the dismissal of the matter docketed at 03-2015-L-0659 with the Office of Administrative Hearings;

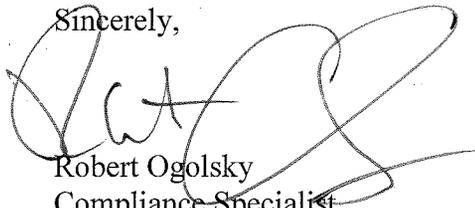
The consultant must be available to the department to answer questions;

Licensee must post the Notice of Conditions of Operation in a location accessible to residents and visitors.

These conditions are effective on **December 10, 2015**, and remain in effect until lifted by formal Department of Social and Health Services notice.

If you have any questions, please contact Lisa Cramer, Field Manager at (253) 983-3826.

Sincerely,



Robert Ogolsky
Compliance Specialist
Residential Care Services

Enclosure

cc: Field Manager, Region 3, Unit A
RCS Regional Administrator, Region 3
HCS Regional Administrator, Region 3
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
HQ Central Files
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