



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
PO Box 98907, Lakewood, WA 98496

December 28, 2018

**CERTIFIED MAIL**

7016 2070 0000 6702 6404

ST NINO INC  
ST NINO ADULT FAMILY HOME II  
19724 8TH AVE E  
SPANAWAY, WA 98387

RE: ST NINO ADULT FAMILY HOME II License #702900

Dear Provider:

The Department completed a full inspection of your Adult Family Home on December 27, 2018 and found that your home does not meet the adult family home licensing requirements listed below.

The Department staff who did the inspection and provided consultation:  
Gary Fuentebella, Licenser

**Consultation:**

**WAC 388-76-10715 Doors Ability to open. The adult family home must ensure:**

(4) Other external exit doors not designated as the primary egress, must open without any special skills or knowledge and they remain accessible to residents unless doing so poses a risk to the health or safety of at least one resident.

Resident #2's bed was blocking the french door exit leading to the back porch. Resident #2's bedroom (shared with his [REDACTED] Resident #3) had no exit window. The Entity Representative (ER) immediately moved Resident #2's bed away from french door exit to correct the issue.

**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 an informal dispute resolution meeting, according to the attached "Informal

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Dispute Resolution" instructions; and

- Ask questions and provide written information to help clarify or dispute the deficiencies.

**If You Have Any Questions:**

- Please contact me at (253) 983-3826.

Sincerely,

A handwritten signature in black ink, appearing to read "Lisa Cramer". The signature is fluid and cursive, with a large initial "L" and a long horizontal stroke at the end.

Lisa Cramer, Field Manager  
Region 3, Unit A  
Residential Care Services

Enclosure

### Informal Dispute Resolution

**You May:**

Request an Informal Dispute Resolution (IDR) meeting within 10 working days after you receive this letter.

Your request **must** include:

- What specific deficiency or deficiencies you disagree with; and
- Why you disagree with each deficiency; and
- What type of meeting you want (in person, telephone, paper review).

Send your request to:

IDR Program Manager  
Department of Social and Health Services  
Aging and Long-Term Support Administration  
Residential Care Services  
PO Box 45600  
Olympia, WA 98504-5600