



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 45819, Suite 220, Olympia, WA 98504-5819

RECEIVED
MAR 24 2016

DSHS RCS
Region3

Statement of Deficiencies	License #: 751577	Completion Date
Plan of Correction	Welcome Home, Adult Family Home	March 10, 2016
Page 1 of 3	Licensee: KS Barker Inc	

You are required to be in compliance with all of the licensing laws and regulations at all times to maintain your adult family home license.

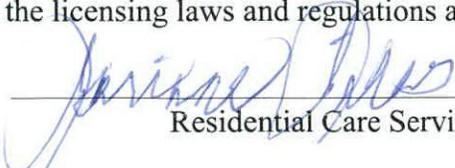
The department has completed data collection for the unannounced on-site full inspection of:
3/9/2016

Welcome Home, Adult Family Home
1750 SW Armstrong Ct
Chehalis, WA 98532

The department staff that inspected the adult family home:
Carol Smith, Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3, Unit D
PO Box 45819
Olympia, WA 98504-5819
(360)664-8421

As a result of the on-site full inspection 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


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

WAC 388-76-10161 Background checks Who is required to have.

(3) All household members over the age of eleven, volunteers, students, and noncaregiving staff who may have unsupervised access to residents must have a Washington state name and date of birth background check. They are not required to have a national fingerprint background check.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Provider failed to ensure all persons frequenting the home completed a name and date of birth background check. This failure placed 6 of 6 current Residents (Resident's # 1,2,3,4,5,6) at risk for being around persons with potentially disqualifying histories.

Findings include:

Observation, record review and interviews were taken on 3/09/2016, unless otherwise specified.

The Provider's husband did not have a name and date of birth background check on file. When the Provider was questioned about why this was not completed she reported her husband only comes by the home occasionally to fix things. The husband also is part owner in the physical home and part of the corporation. This licenser received a fax the next day with confirmation that the BCCU background had been submitted for the Provider's husband.

The Provider's father was working in the AFH at the time of inspection touching up paint on the interior walls of the home. When the Provider was asked for his background check, she reported that she never thought about him needing one. The Provider faxed over a copy of the BCCU request for a name and date of birth check during the inspection.

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, Welcome Home, Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 3-14-16. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)

3-20-16

Date

WAC 388-76-10181 Background checks Employment Nondisqualifying information.

(1) If any background check results show that an employee or prospective employee has a criminal conviction or pending charge for a crime that is not disqualifying under chapter 388-113 WAC, then the adult family home must:

- (a) Determine whether the person has the character, competence and suitability to work with vulnerable adults in long-term care; and
- (b) Document in writing the basis for making the decision, and make it available to the department upon request.

This requirement was not met as evidenced by:

Based on record review and interview, the Provider failed to complete the character, competence, and suitability (CC&S) for all Caregivers with a negative action or a pending charge. This failure to determine CC&S review for all qualifying Caregivers placed all Residents (Resident's # 1,2,3,4,5,6) at risk for being cared for by persons with potentially disqualifying histories.

Findings include:

Record review and interviews were taken on 3/09/2016, unless otherwise specified.

Caregiver's # 3, 5 and 9 did not have a character, competence and suitability review (CC&S) completed and readily available to the Department at the annual licensing inspection. When the Provider was questioned about not having the forms completed, she reported that the BCCU check did not state it needed them and they were hired before the requirement. Caregiver # 3 was hired on 9/5/2014, Caregiver # 5 was hired on 3/17/2012 and Caregiver # 9 was hired on 5/28/2015. The CC&S policy was implemented on 8/31/2012 requiring all current and past Caregiver to have a CC&S review in order to work in the AFH with vulnerable adults. The Provider agreed to get them completed as soon as possible.

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, Welcome Home, Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 3-14-16. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)



Date



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 45819, Olympia, WA 98504-5819

April 20, 2016

KS Barker Inc
Welcome Home, Adult Family Home
145 Oak Point Rd
Chehalis, WA 98532

RE: Welcome Home, Adult Family Home License #751577

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on April 18, 2016 for the deficiency or deficiencies cited in the report/s dated March 10, 2016 and found no deficiencies.

The Department staff who did the inspection:
Carol Smith, Licensors

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

Sincerely,

Janice Jiles, Field/Manager
Region 3, Unit D
Residential Care Services