













STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
*3611 River Road, Suite 200, Yakima, WA 98902*

October 7, 2019  
**CERTIFIED MAIL**  
7019 1120 0002 2759 0626

TP Hernandez LLC  
Rosewood Cottage at Lake Chelan  
P.O. Box 1034  
CHELAN, WA 98816

RE: Rosewood Cottage at Lake Chelan License #753015

Dear Provider:

The Department completed a full inspection of your Adult Family Home on October 3, 2019 and found that your home does not meet the adult family home licensing requirements.

The Department:

- Found a deficiency or deficiencies which resulted or may result in harm to residents; and
- Wrote the enclosed report; and
- May take enforcement action based on any deficiency listed on the enclosed report.

You Must:

- Within 10 calendar days after you receive this letter, provide a written plan on the enclosed report, according to the attached "Plan":
  - Begin the process of correcting the deficiency or deficiencies immediately; and
  - Complete correction within 45 days, or sooner if directed by the Department; and
  - Sign and date the first page of the enclosed report; and
  - Return the first page with your plan; and
  - Have your plan approved by the Department.

Consultation:

In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

**WAC 388-76-10315 Resident record Required. The adult family home must:**

- (1) Create, maintain, and keep records for residents in the home where the resident lives and ensure that the records:
  - (g) Be available so that department staff may review them when requested; and

On 09/17/19, Resident #6's record did not include the notice of services provided to the

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resident representative for date and signature. The Entity Representative/Provider stated she had the documents elsewhere. The documents were provided on 10/03/19.

**WAC 388-76-10450 Medication Self-administration with assistance.**

(3) The home must:

(a) Provide set-up assistance just before the resident takes or applies the medication;  
or

On 09/17/19 at approximately 4:30 PM, cups of medication tablets were observed in the medication storage bins for two residents. Staff A stated she would assist the residents with medication administration at approximately 7:00 PM.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies not listed on the enclosed report.

The Department:

- Expects all deficiencies to be corrected within the timeframe accepted by the department; and
- May inspect the home to determine if you have corrected all deficiencies.

You May:

- Receive a letter of enforcement action based on any deficiency listed on the enclosed report.
- Ask for an 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.

**If You Have Any Questions:**

- Please contact me at (509) 225-2823.

Sincerely,



Chana White, Field Manager  
Region 1, Unit C  
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: Chana White, Field Manager  
Residential Care Services  
Region 1, Unit C  
3611 River Road, Suite 200  
Yakima, WA 98902

**Informal Dispute Resolution [RCW 70.128]**

**You May:**

Request an Informal Dispute Resolution (IDR) meeting within 10 working days after 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 Pilot page at:

<https://www.dshs.wa.gov/altsa/informal-dispute-resolution-adult-family-home-pilot-project>

All documents supporting your dispute must be included with the corresponding form. **The IDR will not consider any documents submitted after the 10 working day deadline.**

Send your request to: Adult Family Home IDR Program  
Residential Care Services  
PO Box 45600  
Olympia, WA 98504-5600

You may also scan and/or e-mail materials within 10 working days to  
[rcsidr@dshs.wa.gov](mailto:rcsidr@dshs.wa.gov)





## Plan of Correction

### 1. Personnel Records

- a. Provider will always keep all records on site to be available to authorized department staff for unannounced visits.
- Explanation of deficiency: Provider had taken records home to review and organize and did not have them available for that reason. Provider will promptly review and organize records at that facility and not take records home to avoid forgetting to put them back in the files.

### 2. Fire Extinguishers

- a. Provider will assure that fire extinguishers are inspected and serviced annually and to assure that this will happen the provider has put a reminder on the phone calendar as well as wrote it on the physical calendar to remind the provider that the servicing must be done annually.

## Explanation of consultation:

1. Maintain records for residents in the home.
  - a. Again, this is the result of taking files home to review and organize and did not have them available when licensor came unannounced. Provider will review and organize resident records in the facility instead of bringing them home to avoid not having them accessible to the licensor.
2. Medication
  - a. The caregiver in this incident had pre-set medications for the residents and this is not allowed according to WAC 388-76-10450, the explanation the caregiver gave was that it had been chaotic and busy due to the inspection and normally she would never pre-set any medications but "thought" that it was ok to do since it was busy. Provider has since this incident informed **ALL** caregivers that pre-setting medications are not allowed and that the medications must be set up at the time that the resident is ready to take the medication. This ensures that no mistakes are being made.