



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

February 25, 2019

1st Choice Senior Care Adult Family Home LLC
**1st Choice Senior Care Adult Family Home LLC
9332 64th Ave NE
Marysville, WA 98270

RE: **1st Choice Senior Care Adult Family Home LLC License #753559

Dear Provider:

On February 22, 2019 the Department completed a review of communication and / or documents from you indicating that you have corrected the deficiency or deficiencies cited in the report/s dated February 8, 2019.

Based on the review of this information the Department finds the deficiency or deficiencies have been corrected. Your home meets the adult family home licensing requirements.

The Department staff who did the off-site verification:
Patricia Johnson, Licenser

If you have any questions please, contact me at (360) 651-6872.

Sincerely,

Jennifer Witman, Field Manager
Region 2, Unit B
Residential Care Services



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Statement of Deficiencies	License #: 753559	Completion Date
Plan of Correction	**1st Choice Senior Care Adult Family Home LLC	February 8, 2019
Page 1 of 2	Licensee: 1st Choice Senior Care Adult Family Home LLC	

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.

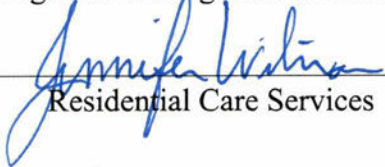
The department has completed data collection for the unannounced on-site full inspection of:
 2/7/2019

**1st Choice Senior Care Adult Family Home LLC
 9332 64th Ave NE
 Marysville, WA 98270

The department staff that inspected the adult family home:
 Patricia Johnson, BA, Licensors

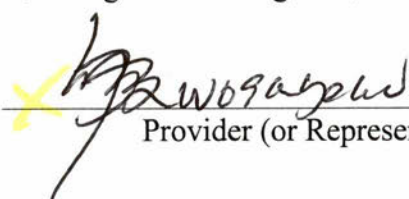
From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 2, Unit B
 3906-172nd St NE, Suite #100
 Arlington, WA 98223
 (360)651-6872


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

2/13/19
 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)

 2/18/19
 Date

WAC 388-76-10375 Negotiated care plan Signatures Required. The adult family home must ensure that the negotiated care plan is agreed to and signed and dated by the:

- (1) Resident; and
- (2) Adult family home.

This requirement was not met as evidenced by:

Based on record review and interview, the provider failed to ensure the negotiated care plan (NCP) for 1 of 2 sampled residents (Resident 3) was signed by the resident or their representative. This failure placed Resident 3 at risk of having unrecognized or unmet care needs and did not ensure the care plan was agreed to.

Findings included:

Record review revealed the NCP dated 09/10/18 was not signed by Resident 3 or his representative. When interviewed, the Provider said he didn't realize the care plan was not signed. The provider said the representative was at the adult family home every weekend and he would have him sign it.

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, **1st Choice Senior Care Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) X 2/10/19 . In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

X [Signature]
Provider (or Representative)

X 2/13/19
Date