



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

August 30, 2019

Divine Mercy Adult Family Home LLC
Divine Mercy Adult Family Home LLC
7711 Dean St W
Lakewood, WA 98499

RE: Divine Mercy Adult Family Home LLC License #753693

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on August 29, 2019 for the deficiency or deficiencies cited in the report/s dated August 1, 2019 and found no deficiencies.

The Department staff who did the inspection:
Gary Fuentebella, Licensor

If you have any questions please, contact me at (253) 983-3826.

Sincerely,

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



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

Statement of Deficiencies	License #: 753693	Completion Date
Plan of Correction	Divine Mercy Adult Family Home LLC	August 1, 2019
Page 1 of 3	Licensee: Divine Mercy 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:
 7/26/2019

Divine Mercy Adult Family Home LLC
 7711 Dean St W
 Lakewood, WA 98499

The department staff that inspected the adult family home:
 Gary Fuentebella, Licensor

RECEIVED

AUG 28 2019

DSHS RCS
 REGION 3


From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 3, Unit A
 PO Box 98907
 Lakewood, WA 98496
 (253)983-3826

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

8/9/19
 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)

8/23/19
 Date

This document was prepared by Residential Care Services for the Locator website.

WAC 388-76-10790 Water supply. The adult family home must:

- (1) Obtain local health authority approval to use a private water supply;
- (2) Provide a clean and healthy drinking water supply for the home; and

This requirement was not met as evidenced by:

Based on interview and record review the home failed to ensure the private water supply was inspected according to local health authority recommendations. This failure placed all future residents at risk for waterborne diseases.

Findings included...

On 07/26/19 at approximately 10:20 AM, the Licensor arrived at the home and observed that the Entity Representative (ER) was the only person in the home.

On 07/26/19 at approximately 10:30 AM, during interview the Licensor asked the ER if the home's water supply source was from the city/county or from a private well. The ER said the water supply source was from a private well. When asked if the local health authority had inspected the private well, the ER said no. The ER added the Department did not ask for the well to be inspected when he applied for licensing. The ER said the home had not had any resident admissions since being licensed.

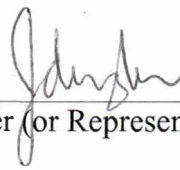
On 07/30/19 at approximately 8:00 AM, review of Department records revealed the ER (at the time of license application) submitted a county health department document showing the home's private well was inspected on 12/07/15. The same document stated, "Water quality test for bacteria should be conducted on a yearly basis, and the water should be tested for nitrate every three years".

The home's private well was not inspected yearly for bacteria and every three years for nitrate by the local health department.

On 07/30/19 at approximately 10:20 AM, during telephone interview the ER said he would have the private well tested.

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, Divine Mercy Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 8/23/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



 Provider (or Representative)

8/23/19

 Date

This document was prepared by Residential Care Services for the Locator website.

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(5) Ensure water temperature does not exceed one hundred twenty degrees Fahrenheit at all fixtures used by or accessible to residents, such as:

(c) Sinks.

This requirement was not met as evidenced by:

Based on observation and interview the home failed to ensure the kitchen sink water temperature did not exceed one hundred twenty (120) degrees Fahrenheit (F). This failure placed future residents at risk for accidental burns.

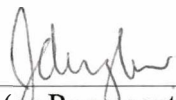
Findings included...

On 07/26/19 at approximately 10:30 AM, the kitchen sink water temperature was checked and had a temperature of one hundred thirty two (132) F. During interview, the Entity Representative (ER) said the home did not have any resident admissions since being licensed. The ER then adjusted the hot water tank thermostat control.

On 07/26/19 at approximately 11:30 AM, the Licensors again checked the kitchen sink water temperature. The temperature remained at 132 F.

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, Divine Mercy Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 8/23/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)

8/23/19

Date

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