



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

August 15, 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:

On August 12, 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 July 17, 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:
Michael Goulet, Complaint Investigator

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

Sincerely,

A handwritten signature in black ink, appearing to read "Lisa Cramer".

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



**Residential Care Services
Investigation Summary Report**

Provider/Facility: Divine Mercy Adult Family Home LLC **Intake ID(s):** 3655425
(1129536)

License/Cert. #: AF753693

Investigator: Goulet, Michael

Region/Unit: RCS Region 3/Unit A

Investigation Date(s): 07/08/2019 through
07/17/2019

Complainant Contact Date(s): 06/25/2019, 07/17/2019

Allegations:

- 1) Non-payment of facility licensing fee.

Investigation Methods:

Sample: 0 of 0 residents, no named residents (no residents at facility and per provider there have never been any residents at the facility since the facility was licensed 05/15/18)

Observations: General environment
Power and function of facility in general

Interviews: Provider

Record Reviews: Facility Renewal Invoice History

Allegation Summary:

1) Per provider interview and record review of Renewal Invoice History, the facility licensing fee due on 05/15/19 remained unpaid as of 07/17/19. Provider stated he was not aware that this fee was due and that he would take steps to pay this immediately. No issues related to care and services noted as no residents have ever resided at the facility since it was licensed 05/14/19.

Unalleged Violation(s): Yes No

Conclusion / Action: **Failed Provider Practice Identified / Citation(s) Written**

Failed Provider Practice Not Identified / No Citation Written

License Annual Fee 388-76-10025 (3)



**Residential Care Services
Investigation Summary Report**



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

RECEIVED

AUG 01 2019

DSHS RCS
 REGION 3

Statement of Deficiencies	License #: 753693	Completion Date
Plan of Correction	Divine Mercy Adult Family Home LLC	July 17, 2019
Page 1 of 2	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 complaint investigation of: 7/8/2019 and 7/17/2019

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

This document references the following complaint number: 3655425

The department staff that inspected and investigated the adult family home:
 Michael Goulet, Complaint Investigator

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 complaint investigation 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

7/17/19
 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)

8/7/19
 Date

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

WAC 388-76-10025 License annual fee.

(3) The home must ensure that the department receives the annual license fee when it is due.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) did not pay the facility's annual licensing fee when due. This failure placed the home at risk of being an unlicensed AFH.

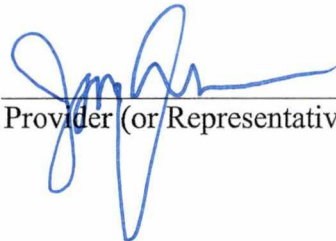
Findings Included...

During an interview on 07/17/19, provider (Staff A) stated that he had not known that the licensing fee was due. No residents were living in the AFH since the home was licensed.

Record review showed the AFH was licensed 05/14/18. Review of facility Renewal Invoice History on 07/17/19, showed that the annual facility licensing fee of \$900 due 05/15/19 had not been paid.

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) July 30 2019. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)

8/1/19

Date

PLAN OF CORRECTION FOR DIVINE ADULT FAMILY HOME

COMPLIANT NUMBER 3655425 –Failure to pay bed fee

*Divine Mercy Adult Family Home LLC corrected the deficiency by issuing a 900 dollar check payment to DSHS on July 25,2019 and was debited from our account on July 30,2019.

*Our due date for bed fee is MAY. We make sure we remind ourselves through calendar alarms and mark our main calendar to remind us of its oncoming deadline on March and pay in April to prevent us from having this deficiency again

Plan to be sent to :
Lisa Cramer, Field Manager
Resident care services
Region 3, Unit a
PO box 98907
Lakewood , Wa 98496

John R. Dinglasan 8/1/19