



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Angel Guard Homecare B LLC
Angel Guard Homecare B LLC
7518 76th Ave SW
Lakewood, WA 98498

RE: Angel Guard Homecare B LLC # 755743

Dear Provider:

This document references Compliance Determination 58068 (Completion Date 04/16/2025).

The Department completed a full inspection of your Adult Family Home on 04/16/2025 and found that your home does not meet the Adult Family Home licensing requirements.

The department staff who did the inspection and provided consultation:

Lindsay Trent, Adult Family Home Licensors

A licenser may consult with a provider when a violation of the Washington Administrative Code (WAC) or Revised Code of Washington (RCW) is found, but it is not cited in the Statement of Deficiencies. Violations may not be cited when it is a first-time violation of statute or rule with minimal or no harm to residents. A consult does not require a follow-up visit.

Consultation:

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.

On 04/14/2025, review of Resident 1's records showed the negotiated care plan dated 10/01/2024, was not signed and dated by the Resident and Adult Family Home (AFH). The Entity Representative sent documentation showing the negotiated care plan was updated on 04/14/2025, and included Resident 1's signature and the AFH's signature to correct the deficiency prior to completion of the inspection.

WAC 388-76-10522 Resident rights Notice Policy on accepting medicaid as a payment source. The adult family home must fully disclose the home's policy on accepting medicaid or other public funds as a payment source. The policy must:

(6) Be signed and dated by the resident and kept in the resident record after signature.

On 04/14/2025, review of the Adult Family Home's (AFH) records for Resident 1 and Resident 5 showed the AFH's policy on accepting Medicaid was not included in the residents' records. The Entity Representative sent documentation showing Resident 1 signed the AFH's Medicaid policy on 09/11/2024, and Resident 5 signed the AFH's Medicaid policy on 09/15/2024, to correct the deficiency prior to completion of the inspection.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction as soon as possible.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies found.

The Department May:

- Inspect the home to determine if you have corrected all deficiencies.

You May:

- Ask for a 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.
- Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:

- Please contact me at (253)983-3826.

Sincerely,

Lisa Cramer, Adult Family Home Field Manager

Region 3, Unit A

Residential Care Services

INFORMAL DISPUTE RESOLUTION [RCW 70.128]

You May:

Request an Informal Dispute Resolution (IDR) meeting within 10 working days after the date 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 web page at: <https://www.dshs.wa.gov/altsa/idr>

Provider Process for Choosing a Panel or Traditional IDR:

You may only choose a **Panel IDR** if you are disputing **three or fewer** citations or enforcement actions. You may choose a **Traditional IDR** regardless of the number of citations or enforcement actions you intend to dispute. If you choose a **Panel IDR**, all documents supporting your dispute must be submitted within **20 working days** after the date you receive this letter. For **Panel IDRs** the program will not consider any documents submitted after the **20 working day deadline**. For **Traditional IDRs** you should submit documents supporting your dispute at least **seven** days prior to the date of the IDR meeting.

Send your request and supporting documents to:

Email: RCSIDR@dshs.wa.gov; or

Fax: (360) 725-3225