



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

NORTH RIDGE HOUSE INC
NORTH RIDGE HOUSE
745 N 180TH ST
SHORELINE, WA 98133

RE: NORTH RIDGE HOUSE License # 96800

Dear Provider:

This letter addresses Compliance Determination(s) 28458 (Completion Date 08/24/2023) and 24875 (Completion Date 07/18/2023).

The Department completed a follow-up inspection of your Adult Family Home on 08/24/2023 and found that you have corrected the violations listed in the Full report dated 07/18/2023. Your home is back in compliance as of 06/12/2023 with the cited requirements of the Washington Administrative Code or the Revised Code of Washington or both.

The Department found that deficiencies for the following licensing laws and regulations were corrected:

WAC 388-76-10530, WAC 388-76-10530-1, WAC 388-76-10530-1-a, WAC 388-76-10530-1-b, WAC 388-76-10530-1-c, WAC 388-76-10530-1-d, WAC 388-76-10530-1-e, WAC 388-76-10530-1-f, WAC 388-76-10530-1-g, WAC 388-76-10530-2, WAC 388-76-10175-1, WAC 388-76-10165-1, WAC 388-76-10165-1-a, WAC 388-76-10165-1-b, WAC 388-76-10161-2, WAC 388-76-10161-2-a, WAC 388-76-10161-2-b, WAC 388-76-10750-7, WAC 388-76-10750-8

The Department staff who did the on-site verification:

Twyla Robinson, AFH Licenser

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee' Bourque

Renee Bourque, Field Manager

NORTH RIDGE HOUSE # 96800

08/24/2023

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Region 2, Unit I

Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 96800	Compliance Determination # 24875
Plan of Correction	NORTH RIDGE HOUSE	Completion Date
Page 1 of 7	Licensee: NORTH RIDGE HOUSE INC	07/18/2023

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for the unannounced on-site full inspection on 06/02/2023 and 06/02/2023 of:

NORTH RIDGE HOUSE
745 N 180TH ST
SHORELINE, WA 98133

The following sample was selected for review during the unannounced on-site visit: 4 of 4 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Twyla Robinson, AFH Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

As a result of the on-site visit(s), 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

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.

RUSSELL PHELPS

Provider (or Representative)

07/26/2023

Date

WAC 388-76-10530 Resident rights Notice of rights and services.

(1) The adult family home must provide each resident written notice of the resident's rights and services provided in the home in a language the resident understands and before the resident is admitted to the home. The notice must be reviewed at least once every twenty-four months from the date of the resident's admission and must include the following:

- (a) Information regarding resident rights, including rights under chapter 70.129 RCW;
- (b) A complete description of the services, items, and activities customarily available in the home or arranged for by the home as permitted by the license;
- (c) A complete description of the charges for those services, items, and activities, including charges for services, items, and activities not covered by the home's per diem rate or applicable public benefit programs;
- (d) The monthly or per diem rate charged to private pay residents to live in the home;
- (e) Rules of the home, which must not violate resident rights in chapter 70.129 RCW;
- (f) How the resident can file a complaint concerning alleged abandonment, abuse, neglect, or financial exploitation with the state hotline; and
- (g) If the home will be managing the resident's funds, a description of how the home will protect the resident's funds.

(2) Upon receiving the notice of rights and services at admission and at least every twenty-four months, the home must ensure the resident and a representative of the home sign and date an acknowledgement stating that the resident has received the notice of rights and services as outlined in this section. The home must retain a signed and dated copy of both the notice of rights and services and the acknowledgement in the resident's record.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure a written Notice of Services was provided to 1 of 4 sampled residents (Resident 2) every 24 months. This failure placed Resident 2 at risk of being unaware of house rules, services, and costs.

Findings included...

Record review showed the AFH admitted Resident 2 on [REDACTED]/2021. Resident 2's Notices of Services was last signed and dated on [REDACTED]/2021.

RECEIVED**JUL 31 2023****DSHS/ALTSA/RCS**

In interview, on 06/02/2023 at 4:15 p.m., when asked the about the timeframe to renew the Notice of Services, Staff B (Resident Manager) stated the Notice of Services should be revised every two years. Staff B stated that Resident 2's power of attorney failed to return the agreement to the AFH.

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, NORTH RIDGE HOUSE is or will be in compliance with this law and / or regulation on (Date) 02/20/2023 **WAS DUE:**

*** COMPLETED 06/17/2023**

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Russell J. Melpt
Provider (or Representative)

07/28/2023
Date

*** WAC 388-76-10175 Background checks Employment Conditional hire Pending results of Washington state name and date of birth background check. An adult family home may conditionally employ a person directly or by contract, pending the result of a Washington state name and date of birth background check, provided the home:**

(1) Submits the Washington state name and date of birth background check no later than one business day after conditional employment;

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to have 1 of 11 staff (Staff K, Caregiver) members complete Washington State Name and Date of Birth Background Check (BGC) within one business day of employment. This failure placed 4 of 4 residents (Resident 1, 2, 3, and 4) at risk of exposure to staff with unknown backgrounds.

Findings included...

Record review showed the AFH hired Staff K on 04/11/2021; the BGC for Staff K was completed on 04/15/2021.

In interview, on 07/18/2023 at 10:54 a.m., when asked about the time frame to complete the Name and Date of Birth BGC, Staff B (Resident Manager) stated that BGCs were usually completed prior to date of hire. When asked why the BGC was completed late, Staff B stated that they did not know.

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, NORTH RIDGE HOUSE is or will be in compliance with this law and / or regulation on (Date) 04/15/2023 **WAS DONE**

*** WAS COMPLETED ON 4/15/2023**
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Russell J. McLean
Provider (or Representative)

07/26/2023
Date

*** WAC 388-76-10165 Background checks Washington state name and date of birth background check Valid for two years National fingerprint background check Valid indefinitely.**

(1) A Washington state name and date of birth background check is valid for two years from the initial date it is conducted. The adult family home must ensure:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for each individual listed in WAC 388-76-10161 ;

(b) There is a valid Washington state background check for all individuals listed in WAC 388-76-10161 .

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have 1 of 11 staff (Staff F, Cook) complete the Washington State Name and Date of Birth Background Checks (BGC) every two years. This failure placed 4 of 4 residents at risk of exposure to staff with unknown backgrounds.

Findings included...

Record review of staff BGCs showed Staff F's BGC expired on 01/13/2023.

In interview, on 07/18/2023 at 10:52 a.m., when questioned how often BGCs should be completed, Staff B (Resident Manager) stated every twenty-four months. When asked why Staff F's BGC was late, Staff B reported that they missed the deadline.

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, NORTH RIDGE HOUSE is or will be in compliance with this law and / or regulation on (Date) **WAS DUE 1/13/2023**

***COMPLETED 3/3/2023**

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Russell J. McPherson
Provider (or Representative)

07/26/2023
Date

WAC 388-76-10161 Background checks Who is required to have.

(2) The adult family home must ensure that all caregivers, entity representatives, and resident managers who are employed directly or by contract after January 7, 2012, have the following background checks:

- (a) A Washington state name and date of birth background check; and
- (b) A national fingerprint background check.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have 1 of 11 staff (Staff G, Caregiver) complete the Washington State Name and Date of Birth Background Check (BGC). This failure placed 4 of 4 residents (Resident 1, 2, 3, and 4) at risk of exposure to staff with an unknown background.

Findings included...

Record review of Staff G's file showed a BGC was completed on 01/28/2023.

In interview, on 06/12/2023 at 10:58 a.m., when asked about Staff G's two hire dates on 01/20/2023 and 05/15/2023, Staff B (Resident Manager) stated that Staff G was hired in January 2023 and Staff G did not work until May 2023.

In interview, on 07/18/2023 at 10:54 a.m., when asked about the time frame to complete the Name and Date of Birth BGC, Staff B stated that BGCs were usually completed prior to date of hire.

On 07/03/2023 at 7:37 a.m. in an email, Staff B stated that Staff G was rehired on 05/03/2023 within a 120-day period and did not believe it was necessary to obtain a new BGC.

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, NORTH RIDGE HOUSE is or will be in compliance with this law and /or regulation on (Date) **1/28/23 WITH NO PRIOR NEGATIVE**

REC'D - RETIRE PLACED HER
In addition, I will implement a system to monitor and ensure continued compliance with this requirement. **IN THE 120 DAY GRACE PERIOD**

Russell J. Melw
Provider (or Representative)

07/26/2023
Date

WAC 388-16-10176

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

(7) Keep all toxic substances and hazardous materials in locked storage and in their original containers;

(8) Grant a resident access to and use of toxic substances and hazardous materials only with direct supervision, unless the resident has been assessed as safe to use the substance or material without direct supervision and if the use is documented in the negotiated care plan;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure that all toxic substances and hazardous materials were retained in locked storage. This failure placed 4 of 4 residents (Resident 1, 2, 3, and 4) at risk of harm from accidental ingestion or misuse of harmful substances.

Findings included...

Observation, on 06/02/2023 at 9:55 a.m., showed 4 residents resided in the facility.

Observation, on 06/02/2023 at 11:08 a.m., showed during the environmental tour several containers of cleaning supplies placed underneath the kitchen sink in a cabinet unsecured.

In interview, on 06/02/2023 at 11:11 a.m., when asked if there was a lock on the cabinets, Staff B (Resident Manager) stated "No" and reported that the Washington Administrative Code stated that all cleansers should be in locked cabinets.

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, NORTH RIDGE HOUSE is or will be in compliance with this law and / or regulation on (Date) 06/04/2023

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Russell Phelps

Provider (or Representative)

07/26/23

Date

* LOCK WAS PRESENT
BUT HAD NOT BEEN
SECURED.