STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

Nelia Vinluan
VINLUAN AFH
2473 RUDDELL RD SE
LACEY, WA 98503

RE: VINLUAN AFH License # 343300

Dear Provider:

This letter addresses Compliance Determination(s) 29145 (Completion Date 09/19/2023) and 23402 (Completion Date 06/23/2023).

The Department completed a follow-up inspection of your Adult Family Home on 09/19/2023 and found that you have corrected the violations listed in the Full report dated 06/23/2023. Your home is back in compliance as of 07/30/2023 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 388-76-10380-4, WAC 388-76-10360, WAC 388-76-10540-1, WAC 388-76-10320-10, WAC 388-76-10320-10-a, WAC 388-76-10320-10-b, WAC 388-76-10430-2-c, WAC 388-76-10430-3

The Department staff who did the on-site verification:
Andria Underwood, LTC Surveyor

If you have any questions, please contact me at (360)664-8421.

Sincerely,

Jennifer LeMaster

Jennifer LeMaster, Field Manager
Region 3, Unit G
Residential Care Services

STATE OF WASHINGTON
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6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

Statement of Deficiencies	License #: 343300	Compliance Determination # 23402
Plan of Correction	VINLUAN AFH	Completion Date
Page 1 of 6	Licensee: Nelia Vinluan	06/23/2023

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 05/02/2023 and 05/08/2023 of:
VINLUAN AFH
2473 RUDDELL RD SE
LACEY, WA 98503

The following sample was selected for review during the unannounced on-site visit: 2 of 3 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Andria Underwood, LTC Surveyor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit G
6639 Capitol Blvd SW, Floor 1
Tumwater, WA 98501

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

06/23/2023
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.

Nelia A. Vinluan
Provider (or Representative)

7/7/2023
Date

WAC 388-76-10380 Negotiated care plan Timing of reviews and revisions. The adult family home must ensure that each resident's negotiated care plan is reviewed and revised as follows:

(4) At least every twelve months.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have current Negotiated Care Plans (NCP) for 2 of 3 residents (Resident 2 and Resident 3). This failure placed both residents at risk for not receiving care needs as assessed.

Finding included...

During record review on 05/02/2023 , Resident 2's NCP had not been updated or reviewed since 02/14/2022. Resident 3's NCP had not been reviewed or updated since 02/20/2022.

During interview with Provider on 05/02/2023 at 11:50 AM, they stated those were the most current NCPs, and they had not updated or reviewed them with Resident 2 or 3 since those dates.

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, VINLUAN AFH is or will be in compliance with this law and / or regulation on (Date) 7/30/2023 .

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

Nelia A. Vinluan
Provider (or Representative)

7/7/2023
Date

WAC 388-76-10360 Negotiated care plan Timing of development Required. The adult family home must ensure the negotiated care plan is developed and completed within thirty days of the resident's admission.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to complete a Negotiated Care Plan (NCP) for 1 of 3 residents (Resident 3) within 30 days of admission. This failure placed Resident 3 at risk for not receiving care as assessed.

Findings included...

Record review on 05/02/2023, showed Resident 3's admission date was [redacted]/2022, and their NCP was not completed until 02/10/2022. This was [redacted] days after Resident 3 was admitted.

During interview with the Provider on 05/02/2023 at 12:00 PM, they stated it was their mistake and they did not realize it was over 30 days before completing Resident 3's NCP.

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, VINLUAN AFH is or will be in compliance with this law and / or regulation on (Date) 7/30/2023.

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

Nelia M. Vinluan — Provider (or Representative)

7/7/2023 — Date

WAC 388-76-10540 Resident rights Disclosure of charges Notice requirements Deposits.

(1) If the adult family home requires an admission fee, deposit, prepaid charges, or any other fees or charges, by or on behalf of a person seeking admission, the home must include this information on the disclosure of charges form in writing in a language the resident understands prior to its receipt of any funds.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to complete a Disclosure of Charges form for 1 of 3 residents (Resident 3). The failure placed Resident 3 at risk for not being informed about AFH charges.

Findings included...

Record review on 05/02/2023, showed a Disclosure of Charges form was not found in Resident 3's file.

During interview with the Provider on 05/02/2023 at 11:45 AM, they stated they thought they had completed a Disclosure of Charges form but did not know where it was. The Provider searched during the rest of the inspection but could not find the document. The Provider was given until 05/05/2023, to find and send the document to the Department.

As of 05/06/2023, the Provider had not provided a Disclosure of Charges form.

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, VINLUAN AFH is or will be in compliance with this law and / or regulation on (Date) 7/30/2023 .

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

Nelia A. Vinluan — Provider (or Representative)

7/7/2023 — Date

WAC 388-76-10320 Resident record Content. The adult family home must ensure that each resident record contains, at a minimum, the following information:

(10) A current inventory of the resident's personal belongings dated and signed by:

(a) The resident; and

(b) The adult family home.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to complete a Personal Belongings Inventory for 1 of 3 residents (Resident 3). This failure placed Resident 3 at risk for not having documentation verifying their belongings.

Findings included...

Record review on 05/02/2023, showed a Personal Belongings Inventory was not found in Resident 3's file.

During interview with the Provider on 05/02/2023 at 11:45 AM, they stated they thought they had completed a Personal Belongings Inventory for Resident 3 but did not know where it was. The Provider searched during the rest of the inspection but could not find the document. The Provider was given until 05/05/2023 to find and send the document to the Department.

As of 05/06/2023, the Provider had not provided Resident 3's Personal Belongings Inventory documentation.

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, VINLUAN AFH is or will be in compliance with this law and / or regulation on (Date) 7/30/2023.

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

Nelia V. Vinluan — Provider (or Representative)

7/7/2023 — Date

WAC 388-76-10430 Medication system.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident:

(c) Medication log is kept current as required in WAC 388-76-10475 ;

(3) Records are kept which include a current list of prescribed and over-the-counter medications including name, dosage, frequency and the name and phone number of the practitioner as needed.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to keep current medication records for 2 of 3 residents (Resident 2 and Resident 3). This failure placed both residents at risk for not receiving medications as prescribed.

Findings included...

Record review on 05/02/2023, showed Resident 2's Medication Administration Record (MAR) had three vitamins (zinc, c, and multivitamin) that were handwritten on the form. Resident 2 did not have a physician's order verifying current medications that were listed on their MAR.

Record review on 05/02/2023, showed Resident 3's Medication Administration Record (MAR) did not match the medication list from their doctor's visit on 01/03/2023.

During interview with the Provider on 05/02/2023 at 12:35 PM, they stated Resident 2 had

a doctor's visit last week but they could not find the visit summary notes with the current medication list. The Provider said Resident 3 had vitamins (D3 and C) added and was not taking some of the medication from the doctor's visit on 01/01/2023. The Provider said they would reach out to Resident 3's doctor for up-to-date medication lists and provide this to the Department.

As of 05/06/2023 there has been no medication documentation sent from Provider.

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, VINLUAN AFH is or will be in compliance with this law and / or regulation on (Date) 7/30/2023 .

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

Nelia N. Vinluan — Provider (or Representative)

7/7/2023 — Date

ALTA/DSHS/RCS
REGION3-TUMWATER
RECEIVED: 7/7/2023