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

NERRO BASS
LIFE ADULT FAMILY HOME
8148 14TH AVE SW
SEATTLE , WA 98106

RE: LIFE ADULT FAMILY HOME License # 595800

Dear Provider:

This letter addresses Compliance Determination(s) 39363 (Completion Date 04/05/2024) and 35864 (Completion Date 02/22/2024).

The Department completed a follow-up inspection of your Adult Family Home on 04/05/2024 and found that you have corrected the violations listed in the Full report dated 02/22/2024. Your home is back in compliance as of 03/13/2024 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 388-76-10430-1, WAC 388-76-10490-1, WAC 388-76-10750-7

The Department staff who did the on-site verification:
Jimmie Jordan, NCI

If you have any questions, please contact me at (253)312-1446.

Sincerely,

Jamie Singer

Jamie Singer, Field Manager
Region 2, Unit K
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

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 01/26/2024 and 01/26/2024 of:

LIFE ADULT FAMILY HOME
8148 14TH AVE SW
SEATTLE , WA 98106

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Jimmie Jordan, NCI

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit K
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.

Statement of Deficiencies Plan of Correction Page 2 of 5	License # 595800 LIFE ADULT FAMILY HOME Licensee: NERRO BASS	Compliance Determination # 35864 Completion Date 02/22/2024

Nerro Bass 3-12-2024
Provider (or Representative) Date

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure that 1 of 2 sampled residents' (Resident 2) medications were available in the facility. This failure placed Resident 2 at risk for not receiving medications as prescribed.

Findings included

Record review showed the AFH admitted Resident 2 on [redacted]/2008. Resident 2's assessment, dated 02/07/2023, showed that assistance with medication management was needed.

Record review of Resident 2's January 2024 Medication Log showed physician orders written on 11/28/2023 for Ondansetron ODT (medication to treat nausea) 4 milligram tablet every 8 hours as needed.

In a joint observation, on 01/26/2024 at 3:12 PM, with Staff A(Provider), of Resident 2's medication supply showed the Ondansetron ODT was not available in the AFH.

During an interview, on 01/26/2024 at 3:12 PM, Staff A stated that this medication had been gone for quite a while. Staff A stated that they would contact the pharmacy to follow-up

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 LIFE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 3/13/2024

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

Provider (or Representative) _____ Date _____

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure that 1 of 2 sampled residents' (Resident 2) medications were available in the facility. This failure placed Resident 2 at risk for not receiving medications as prescribed.

Findings included...

Record review showed the AFH admitted Resident 2 on [redacted]/2008. Resident 2's assessment, dated 02/07/2023, showed that assistance with medication management was needed.

Record review of Resident 2's January 2024 Medication Log showed physician orders written on 11/28/2023 for Ondansetron ODT (medication to treat nausea) 4 milligram tablet every 8 hours as needed.

In a joint observation, on 01/26/2024 at 3:12 PM, with Staff A(Provider), of Resident 2's medication supply showed the Ondansetron ODT was not available in the AFH.

During an interview, on 01/26/2024 at 3:12 PM, Staff A stated that this medication had been gone for quite a while. Staff A stated that they would contact the pharmacy to follow-up.

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, LIFE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date)_____ .

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

Nerro Bass
Provider (or Representative)

3/12/2024
Date

WAC 388-76-10490 Medication disposal Written policy Required. The adult family home must have and implement a written policy addressing the disposal of unused or expired resident medications. Unused and expired medication must be disposed of in a safe manner for:

(1) Current residents living in the adult family home, and

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to develop a Medication Disposal Policy and failed to dispose of unused or expired medications for 1 of 2 sampled residents (Resident 2). This failure placed Resident 2 at risk for medication errors.

Findings included:

Record review of Resident 2's January 2024 Medication Log showed an order on 03/23/2021 for Banophen 25 milligram capsules take 1-2 capsules by mouth as needed for allergies, itching, or rhinitis, and an order on 10/11/2022 for Triamcinolone 0.1% ointment apply topically twice daily as needed to active areas with psoriasis (red and itchy skin patches).

In a joint observation, on 01/26/2024 at 3:20 PM, with Staff A (Provider) of Resident 2's medication supply showed Banophen capsules expired 01/21/2022, the Triamcinolone 0.1% ointment expired 01/17/2022

During an interview on 01/26/2024 at 3:20 PM, Staff A stated that they don't have a Medication Disposal Policy

In a joint observation, on 01/26/2024 at 3:20 PM, Staff A showed the following medications in Resident 2's medication supply, but not on the January 2024 Medication Log: Nystatin (medication used to treat fungal infections) topical powder, Bacitracin Zinc (medication used to treat skin infections) ointment, and Clindamycin Phosphate (medication used to treat psoriasis) gel 1%.

During an interview on 01/26/2024 at 03:25 PM, Staff A stated that Resident 2 had not received the Nystatin topical powder, Bacitracin Zinc ointment, and Clindamycin Phosphate gel 1% for several months. Those medications were ordered by Resident 2's previous doctor, and their current primary doctor had not ordered those medications.

Provider (or Representative) Date

WAC 388-76-10490 Medication disposal Written policy Required. The adult family home must have and implement a written policy addressing the disposal of unused or expired resident medications. Unused and expired medication must be disposed of in a safe manner for:

(1) Current residents living in the adult family home; and

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to develop a Medication Disposal Policy and failed to dispose of unused or expired medications for 1 of 2 sampled residents (Resident 2). This failure placed Resident 2 at risk for medication errors.

Findings included…

Record review of Resident 2's January 2024 Medication Log showed an order on 03/23/2021 for Banophen 25 milligram capsules take 1-2 capsules by mouth as needed for allergies, itching, or rhinitis, and an order on 10/11/2022 for Triamcinolone 0.1% ointment apply topically twice daily as needed to active areas with psoriasis (red and itchy skin patches).

In a joint observation, on 01/26/2024 at 3:20 PM, with Staff A (Provider), of Resident 2's medication supply showed Banophen capsules expired 01/21/2022, the Triamcinolone 0.1% ointment expired 01/17/2022.

During an interview, on 01/26/2024 at 3:20 PM, Staff A stated that they don't have a Medication Disposal Policy.

In a joint observation, on 01/26/2024 at 3:20 PM, Staff A showed the following medications in Resident 2's medication supply, but not on the January 2024 Medication Log: Nystatin (medication used to treat fungal infections) topical powder, Bacitracin Zinc (medication used to treat skin infections) ointment, and Clindamycin Phosphate (medication used to treat psoriasis) gel 1%.

During an interview on 01/26/2024 at 03:25 PM, Staff A stated that Resident 2 had not received the Nystatin topical powder, Bacitracin Zinc ointment, and Clindamycin Phosphate gel 1% for several months. Those medications were ordered by Resident 2's previous doctor, and their current primary doctor had not ordered those medications.

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

Nerro Bass — Provider (or Representative)

4/4/2024 — Date

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:

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to keep the cleaning supplies in a locked storage and in the original containers. This failure placed 5 of 5 residents (Resident 1, 2, 3, 4, and 5) at risk of harm from exposure to toxic and hazardous materials.

Finding included:

A joint observation, on 01/26/2024 at 10:45 AM, with Staff A (Provider) showed a 16-ounce unlabeled plastic container partially filled with blue solution on the kitchen sink.

During an interview, on 01/26/2024 at 10:45 AM, Staff A stated that the plastic container was filled with Dawn detergent, and it was used to clean the dishes. Staff A stated that they had not known that the container had to be labeled and kept in locked storage.

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 LIFE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 3/12/2024.

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

Nerro Bass — Provider (or Representative)

3/12/2024 — Date

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, LIFE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Provider (or Representative) Date

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;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to keep the cleaning supplies in a locked storage and in the original containers. This failure placed 5 of 5 residents (Resident 1, 2, 3, 4, and 5) at risk of harm from exposure to toxic and hazardous materials.

Finding included…

A joint observation, on 01/26/2024 at 10:45 AM, with Staff A (Provider), showed a 16-ounce unlabeled plastic container partially filled with blue solution on the kitchen sink.

During an interview, on 01/26/2024 at 10:45 AM, Staff A stated that the plastic container was filled with Dawn detergent, and it was used to clean the dishes. Staff A stated that they had not known that the container had to be labeled and kept in locked storage.

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

_____ _____

Provider (or Representative) Date