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

CASA DE ALEGRE LLC

CASA DE ALEGRE LLC
11509 88th Avenue Ct SW
Lakewood, WA 98498

RE: CASA DE ALEGRE LLC License # 702600

Dear Provider:

This letter addresses Compliance Determination(s) 41162 (Completion Date 05/20/2024) and 38608 (Completion Date 04/02/2024).

The Department completed a follow-up inspection of your Adult Family Home on 05/20/2024 and found that you have corrected the violations listed in the Follow up report dated 04/02/2024. Your home is back in compliance as of 04/30/2024 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 388-76-10430-2-c

The Department staff who did the on-site verification:
Daphne Gill, LTC Surveyor

If you have any questions, please contact me at (360)450-1218.

Sincerely,

Michael Burdick, Field Manager
Region 3, Unit G
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

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 an unannounced on-site follow-up on 03/20/2024 and 03/20/2024 of:
CASA DE ALEGRE LLC
11509 88th Avenue Ct SW
Lakewood, WA 98498

This document references the following SOD dated: 04/02/2024

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

The department staff that inspected the Adult Family Home:

Daphne Gill, 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.

Jennifer LeMaster
Residential Care Services

04/04/2024
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) 4/5/2024 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.

(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 ;

This requirement was not met as evidenced by:

Based on record review, observation and interview, the adult family home (AFH) failed to ensure all ordered medications were available for 4 of 6 residents (Resident 3 [R3], Resident 4 [R4], Resident 5 [R5], and Resident 6 [R6]) and failed to ensure medication logs were kept up to date for 3 of 6 residents (R4, R5, and R6). This failure resulted in R3, R4, R5 and R6 not having accurate medication logs and placed R3, R4, R5 and R6 at risk for receiving inaccurate medication administration.

Findings included.

R3
Record review R3's Medication Administration Record (MAR) dated March 2024 showed they were prescribed as-needed (PRN) medications including Imodium (for diarrhea), Robitussin (for cough), and MiraLAX (for constipation).

Observations on 03/20/2024 at 12:09 P.M. of R3's medication supply showed these medications were missing from R3's medication supply.

In an interview on 03/20/2024 at 12:23 P.M. the Provider said they had contacted the pharmacy about these medications on 01/17/2024 with no result. The Provider confirmed they did not have these medications available in supply for R3.

R6
Record review of R6's MAR dated March 2024 showed they were prescribed PRN medications including Docusate Sodium (for constipation), Tussin (for cough), Nyamyc (for rash), and Zofran (for nausea).

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.

(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 ;

This requirement was not met as evidenced by:

Based on record review, observation and interview, the adult family home (AFH) failed to ensure all ordered medications were available for 4 of 6 residents (Resident 3 [R3], Resident 4 [R4], Resident 5 [R5], and Resident 6 [R6]) and failed to ensure medication logs were kept up to date for 3 of 6 residents (R4, R5, and R6). This failure resulted in R3, R4, R5 and R6 not having accurate medication logs and placed R3, R4, R5 and R6 at risk for receiving inaccurate medication administration.

Findings included...

R3
Record review R3's Medication Administration Record (MAR) dated March 2024 showed they were prescribed as-needed (PRN) medications including Imodium (for diarrhea), Robitussin (for cough), and MiraLAX (for constipation).

Observations on 03/20/2024 at 12:09 P.M. of R3's medication supply showed these medications were missing from R3's medication supply.

In an interview on 03/20/2024 at 12:23 P.M., the Provider said they had contacted the pharmacy about these medications on 01/17/2024 with no result. The Provider confirmed they did not have these medications available in supply for R3.

R6
Record review of R6's MAR dated March 2024 showed they were prescribed PRN medications including Docusate Sodium (for constipation), Tussin (for cough), Nyamyc (for rash), and Zofran (for nausea).

Observations on 03/20/2024 at 12:26 P.M. of R6's medication supply showed these medications were missing from R3's medication supply. Observations also showed a bottle of fish oil (supplement) was included in R6's medication supply, but was not documented on their March 2024 MAR.

In an interview on 03/20/2024 at 12:33 P.M., the Provider said they contacted the pharmacy about these PRN medications on 01/17/2024 with no result. The Provider confirmed they did not have these PRN medications available in supply for R6. The Provider said they were unsure why the fish oil was not documented on their March 2024 MAR but R6 was receiving it as prescribed.

R4
Record review of R4's MAR dated March 2024 showed they were prescribed PRN medications including Lorazepam (for anxiety), Ramelteon (for insomnia), Flonase (for allergies), Atarax (for allergies), Ketoconazole Cream (for rash), and Permethrin Cream (for rash).

Observations on 03/20/2024 at 12:22 P.M. of R4's medication supply showed these PRN medications were missing from R4's medication supply. Observations also showed a bottle of a stool softener was included in R4's medication supply, but was not documented on their March 2024 MAR.

In an interview on 03/20/2024 at 12:40 P.M., the Provider said they contacted the pharmacy about these PRN medications on 01/17/2024 with no result. The Provider confirmed they did not have these PRN medications available in supply for R4. The Provider said they were unsure why the stool softener was not documented on their March 2024 MAR but R4 was receiving it as prescribed.

R5
Record review of R5's MAR dated March 2024 showed they were prescribed PRN medications including Albuterol (for wheezing), Lorazepam (for pain), and Senna (for constipation).

Observations on 03/20/2024 at 12:49 P.M. of R5's medication supply showed these medications were missing from R5's medication supply. Observations also showed Vitamin B-12 (supplement) was included in R5's medication supply but was not documented on their March 2024 MAR.

In an interview on 03/20/2024 at 12:54 P.M., the Provider said they contacted the pharmacy about these PRN medications on 01/17/2024 with no result. The Provider confirmed they did not have these PRN medications available in supply for R5. The Provider said they were unsure why the Vitamin B-12 was not documented on their March 2024 MAR but R5 was receiving it as prescribed.

Observations on 03/20/2024 at 12:26 P.M. of R6's medication supply showed these medications were missing from R3's medication supply. Observations also showed a bottle of fish oil (supplement) was included in R6's medication supply, but was not documented on their March 2024 MAR.

In an interview on 03/20/2024 at 12:33 P.M., the Provider said they contacted the pharmacy about these PRN medications on 01/17/2024 with no result. The Provider confirmed they did not have these PRN medications available in supply for R6. The Provider said they were unsure why the fish oil was not documented on their March 2024 MAR but R6 was receiving it as prescribed.

R4

Record review of R4's MAR dated March 2024 showed they were prescribed PRN medications including Lorazepam (for anxiety), Ramelteon (for insomnia), Flonase (for allergies), Atarax (for allergies), Ketoconazole Cream (for rash), and Permethrin Cream (for rash).

Observations on 03/20/2024 at 12:22 P.M. of R4's medication supply showed these PRN medications were missing from R4's medication supply. Observations also showed a bottle of a stool softener was included in R4's medication supply, but was not documented on their March 2024 MAR.

In an interview on 03/20/2024 at 12:40 P.M., the Provider said they contacted the pharmacy about these PRN medications on 01/17/2024 with no result. The Provider confirmed they did not have these PRN medications available in supply for R4. The Provider said they were unsure why the stool softener was not documented on their March 2024 MAR but R4 was receiving it as prescribed.

R5

Record review of R5's MAR dated March 2024 showed they were prescribed PRN medications including Albuterol (for wheezing), Lorazepam (for pain), and Senna (for constipation).

Observations on 03/20/2024 at 12:49 P.M. of R5's medication supply showed these medications were missing from R5's medication supply. Observations also showed Vitamin B-12 (supplement) was included in R5's medication supply but was not documented on their March 2024 MAR.

In an interview on 03/20/2024 at 12:54 P.M., the Provider said they contacted the pharmacy about these PRN medications on 01/17/2024 with no result. The Provider confirmed they did not have these PRN medications available in supply for R5. The Provider said they were unsure why the Vitamin B-12 was not documented on their March 2024 MAR but R5 was receiving it as prescribed.

Statement of Deficiencies	License #: 702600	Compliance Determination # 38308
Plan of Correction	CASA DE ALEGRE LLC	Completion Date
Page 4 of 4	Licensee: CASA DE ALEGRE LLC	04/02/2024

This is an uncorrected deficiency previously cited on 01/31/2024.

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, CASA DE ALEGRE LLC is or will be in compliance with this law and / or regulation on (Date) 30 April 2024

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

Provider (or Representative) — 4/5/2024 Date

This is an uncorrected deficiency previously cited on 01/31/2024.

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, CASA DE ALEGRE LLC 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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

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 01/17/2024 and 01/17/2024 of:

CASA DE ALEGRE LLC
11509 88th Avenue Ct SW
Lakewood, WA 98498

The following sample was selected for review during the unannounced on-site visit: 6 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Daphne Gill, 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 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) Date

WAC 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

(2) Staff orientation and training records pertinent to duties, including, but not limited to:

(b) Cardiopulmonary resuscitation;

(c) First aid; and

(3) Tuberculosis testing results.

(4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on record review and interview, the adult family home (AFH) failed to ensure staff had a Name and Date of Birth Background Check on file for 4 of 4 caregivers (Provider, Caregiver A [CG A], Caregiver B [CG B], and Caregiver C [CG C]); Fingerprint background check reports for 2 of 4 caregivers (CG A and CG B); Tuberculosis testing results for 1 of 4 caregivers (CG B); and Cardiopulmonary resuscitation (CPR)/First Aid certification results for 2 of 3 caregivers (CG B and CG C). This failure prevented the Department from determining required testing results and criminal history for caregiving staff.

Findings included...

During an administrative/staff record review on 01/07/2024, at 1:45 P.M. staff records for the Provider, CG A, CG B, and CG C contained no evidence of current Name and Date of Birth Background Check Results.

Staff records for CG A and CG B contained no evidence of Fingerprint background check results.

Staff records for CG B contained no evidence of Tuberculosis testing results.

Staff records for CG B and CG C contained no evidence of CPR/First Aid certification.

On 01/07/2024 at 1:50 P.M., the Provider said they would keep looking for the missing

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, CASA DE ALEGRE LLC 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:

(1) Keep the home both internally and externally in good repair and condition with a safe, comfortable, sanitary, and homelike environment that is free of hazards;

(6) Ensure hot water temperature is at least one hundred five degrees and does not exceed one hundred twenty degrees Fahrenheit at all fixtures used by or accessible to residents, such as:

(a) Tubs;

(b) Showers; and

(c) Sinks;

This requirement was not met as evidenced by:

Based on observation and interview, the adult family home failed to ensure the water temperature of the home was between 105 degrees and 120 degrees Fahrenheit. This failure decreased the quality of life for 6 of 6 residents (Resident 1 [R1], Resident 2 [R2], Resident 3 [R3], Resident 4 [R4], Resident 5 [R5] and Resident 6 [R6]).

Findings included...

During an environmental tour on 01/07/2024 at 10:32 A.M., the water temperature for two sinks in the resident hallway bathroom were below 105 degrees Fahrenheit. The right-side sink was 101.5 degrees Fahrenheit at 10:40 A.M. The left-side sink was 100.2 degrees Fahrenheit at 10:44 A.M. An additional resident bathroom (down the hallway) water temperature was 100.0 degrees Fahrenheit at 10:48 A.M.

On 01/07/2024 at 10:49 A.M. the Provider stated she was unaware the temperature was low and would turn up the temperature on the home's hot water heater.

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, CASA DE ALEGRE LLC 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 388-76-10430 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.

(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 ;

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure all ordered medications were available for 4 of 6 residents (Resident 3 [R3], Resident 4 [R4], Resident 5 [R5], and Resident 6 [R6]) and failed to ensure medication logs were kept current for 1 of 6 residents (R4). This failure placed R3, R4, R5 and R6 at risk for not receiving accurate medication administration.

Findings included...

Record review of R3's Medication Administration Record (MAR) dated January 2024 showed they were prescribed as-needed (PRN) medications including an Anti Diarrheal (bowel medication), Polyethylene Glycol (for constipation), and Robitussin (for cough).

Observations on 01/17/2024 at 11:40 A.M. of R3's medication supply showed these medications were missing from R3's medication supply.

On 01/17/2024 at 11:48 A.M. the Provider stated she was not aware that these PRN medications needed to be in R3's medication supply.

Record review of R6's MAR dated January 2024 showed they were prescribed PRN medications including Acetaminophen (for pain); Docusate Sodium (for constipation); Geri-Tussin syrup (for cough); Nyamyc (for rash); Ondansetron HCL (for nausea); and Senna (for constipation).

Observations on 01/17/2024 at 12:05 P.M. showed these medications were missing from R3's medication supply.

On 01/17/2024 at 12:17 P.M. the Provider stated she was not aware that these PRN medications needed to be in R6's medication supply.

Record review of R4's MAR dated January 2024 showed they were prescribed PRN medications including Lorazepam (for anxiety); Clobetasol (for dermatitis); Flonase (for allergies); Hydroxyzine HCL (for anxiety); Ketoconazole Cream (for rash); Ketoconazole Shampoo (for rash), and Permethrin Cream (for rash).

Observations on 01/17/2024 at 12:22 P.M. showed these medications were missing from R4's medication supply. Observations also showed a bottle of Magnesium Caltrate (supplement) was included in R4's medication supply, but was not included on their January 2024 MAR.

On 01/17/2024 at 12:29 P.M. the Provider stated she was not aware that these PRN medications needed to be in R4's medication supply.

Record review of R5's MAR dated January 2024 showed they were prescribed PRN medications including Acetaminophen (for pain); Albuterol (for wheezing); Fexofenadine (for allergies); Lorazepam (for pain); and Senna (for constipation).

Observations on 01/17/2024 at 12:30 P.M. showed these medications were missing from R5's medication supply.

On 01/17/2024 at 12:41 P.M. the Provider stated she was not aware that these PRN medications needed to be in R5's medication supply.

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, CASA DE ALEGRE LLC 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