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

Alina C. Schiopu
Zoe Adult Family Home
2091 Spruce Ave
Woodland, WA 98674

RE: Zoe Adult Family Home License # 750742

Dear Provider:

This letter addresses Compliance Determination(s) 46525 (Completion Date 09/11/2024) and 43472 (Completion Date 07/19/2024).

The Department completed a follow-up inspection of your Adult Family Home on 09/11/2024 and found that you have corrected the violations listed in the Full report dated 07/19/2024. Your home is back in compliance as of 08/07/2024 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 388-76-10146-2-b, WAC 388-76-10146, WAC 388-76-10191-1-a, WAC 388-76-10191-1-b, WAC 388-76-10191-1, WAC 388-76-10191, WAC 388-76-10650-2, WAC 388-76-10650-2-a, WAC 388-76-10650-2-b, WAC 388-76-10650-2-c, WAC 388-76-10430-2-d, WAC 388-76-10430-2

The Department staff who did the on-site verification:
Allen Baldaray, LTC ESF/AFH Licensor

If you have any questions, please contact me at (360)746-4675.

Sincerely,

Clinton Fridley

Clinton Fridley, Field Manager
Region 3, Unit G
Residential Care Services

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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 07/18/2024 and 07/18/2024 of:
Zoe Adult Family Home
2091 Spruce Ave
Woodland, WA 98674

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:

Allen Baldaray, LTC ESF/AFH Licensor

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.

Clinton Fridley RN — Residential Care Services

07/29/2024 — 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.

Alina Schiopu — Provider (or Representative)

8/9/2024 — Date

WAC 388-76-10146 Qualifications Training and home care aide certification.

(2) The adult family home must ensure all adult family home caregivers, entity representatives, and resident managers hired on or after January 7, 2012, meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(b) Basic;

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure the Home Care Aid (HCA) Training 70-hour basic training for Staff C (Caregiver) was completed. This failure resulted in 4 of 4 residents (Resident 1[R1], Resident 2, Resident 3, and Resident 4) receiving incomplete and/or inappropriate care from a caregiver.

Findings included...

On 07/18/2024 at 2:05 pm, the department conducted the Administrative Records Review and found Staff C, whose hire date was indicated as 08/12/2021, did not have the required 70-hour basic HCA training. Staff A (Provider/Caregiver) confirmed the training certification for Staff C was not found in the AFH records.

On 07/18/2024 at 3:31 pm, during the department AFH Exit Conference, Staff A re-reviewed the AFH and Staff C's records and confirmed the required 70-hour basic HCA training certification for Staff C were not found.

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, Zoe Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 7/26/2024

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

Alina Schiopu — Provider (or Representative)

8/9/2024 — Date

WAC 388-76-10191 Liability insurance required. The adult family home must:

(1) Obtain and maintain both:

(a) Commercial general liability insurance or business liability insurance covering the adult family home; and

(b) Professional liability insurance or errors and omissions insurance covering the adult family home.

This requirement was not met as evidenced by:

Based on record review, observation and interview, the Adult Family Home (AFH) and Staff A (Provider/Caregiver), failed to have current liability insurance, both commercial general liability and professional liability for the AFH. Failure to have the insurance for the AFH, placed 4 of 4 residents (Resident 1 [R1], R2, R3, and R4) at risk of harm from not having compensation in the case of an issue(s) that occurred in the AFH which impacted resident care.

Findings included...

On 07/18/2024 at 2:08 pm, during the Administrative Records Review, observations showed the AFH did not have documents that indicated current coverage for liability insurance, general liability and professional. Staff A (Provider/Caregiver) was present during records review and confirmed the record and the absence of the documents.

On 07/18/2024 at 3:31 pm, during the AFH Inspection Exit Conference, Staff A confirmed the AFH did not have current liability insurance and the previous insurance provider for the AFH did not renew the insurance policy over two years ago. Staff A stated a new insurance provider and coverage has not yet been located.

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, Zoe Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 8/7/2024.

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

Alina Schiopu — Provider (or Representative)

8/9/2024 — Date

WAC 388-76-10650 Medical devices.

(2) Before a medical device with a known safety risk is used by a resident, the home must:

(a) Ensure an assessment has been completed that identifies the resident's need and ability to safely use the medical device;

(b) Provide the resident and his or her family or legal representative with information about the device's benefits and safety risks to enable them to make an informed decision about whether to use the device;

(c) Ensure the resident's negotiated care plan includes how the resident will use the medical device; and

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to complete a safety and use assessment, document in the care plan, and review the risks and benefits with the resident related to the use of a [redacted] over the bed for 1 out of 4 residents reviewed (Resident 3[R3]) for medical devices. This failure placed the resident at risk of injury due to the potentially unsafe use of medical devices.

Findings included...

On 07/18/2024 at 2:24 pm, observation showed a [redacted] over R3's bed.

On 07/18/2024 at 2:55 pm, review of R3's medical record showed no identification or assessment of R3's need for [redacted]. R3's Negotiated Care Plan (NCP), dated 07/19/2024, did not document the use of, or direction related to, the [redacted]

On 07/18/2024 at 3:31 pm, during the AFH Inspection Exit Conference, Staff A confirmed R3's records were re-reviewed, but the required documents were not present. Staff A confirmed the understanding and need for the documents.

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, Zoe Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 7/23/2024

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

Alina Schiopu — Provider (or Representative)

8/9/2024 — Date

WAC 388-76-10430 Medication system.

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

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on record review, observation and interview, the Adult Family Home (AFH) failed to have prescribed PRN (as needed) medications in supply for 1 of 4 residents (Resident 4 [R4]). Failure to have the medication available in the AFH placed R4 at risk of harm from not receiving ordered medications as needed.

Findings included...

On 07/18/2024 at 3:16 pm, during the R4 Resident Medication Review, observations showed the PRN medication Loperamide (Imodium) for diarrhea, was listed on R4's Medication Administration Record (MAR) dated July 2024, but not present in the AFH. Staff A (Provider/Caregiver) was present during R4's Resident Medication Review and confirmed the record and the absence of the medication.

On 07/18/2024 at 3:31 pm, during the AFH Inspection Exit Conference, Staff A confirmed R4 was previously prescribed the Loperamide at the Emergency Room (ER), but the medication was not present in the AFH for an unknown reason.

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, Zoe Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 7/19/2024

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

Alina Schiopu — Provider (or Representative)

8/9/2024 — Date