



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
**20425 72nd Avenue S, Suite 400, Kent, WA 98032**

WILLOW GLEN AFH  
WILLOW GLEN AFH  
110 CEDAR LN  
PACIFIC, WA 98047

RE: WILLOW GLEN AFH License # 750989

Dear Provider:

This letter addresses Compliance Determination(s) 36826 (Completion Date 02/13/2024) and 34060 (Completion Date 12/18/2023).

The Department completed a follow-up inspection of your Adult Family Home on 02/13/2024 and found that you have corrected the violations listed in the Complaint report dated 12/18/2023. Your home is back in compliance as of 12/22/2023 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 388-76-10430-1, WAC 388-76-10490-1

The Department staff who did the on-site verification:

Michele Grumke, AFH Licensors  
Angelica Rios, ALF Licensors

If you have any questions, please contact me at (253)234-6007.

Sincerely,

*Dahl Kim*

Dahl Kim, Field Manager  
Region 2, Unit G  
Residential Care Services



## Residential Care Services Investigation Summary Report

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|                                                             |                                             |
|-------------------------------------------------------------|---------------------------------------------|
| <b>Provider/Facility:</b> WILLOW GLEN AFH                   | <b>Provider Type:</b> Adult Family Home     |
| <b>License/Cert.#:</b> 750989                               |                                             |
| <b>Compliance Determination #:</b> 34060                    | <b>Intake ID:</b> 110729                    |
| <b>Investigator:</b> Michele Grumke                         | <b>Region/Unit #:</b> RCS Region 2 / Unit G |
| <b>Investigation Date(s):</b> 12/15/2023 through 12/18/2023 |                                             |
| <b>Complainant Contact Date(s):</b> 12/15/2023, 12/18/2023  |                                             |

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### Allegation(s):

Named Resident (NR) had expired medication in their medication storage container in the Adult Family Home (AFH).

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### Investigation Methods:

|                        |                                                                                |
|------------------------|--------------------------------------------------------------------------------|
| <b>Sample:</b>         | Total residents: 6<br>Resident sample size: 1<br>Closed records sample size: 0 |
| <b>Observations:</b>   | NR, Resident to Staff Interactions, Living Environment                         |
| <b>Interviews:</b>     | Staff, Collateral Contact (CC)                                                 |
| <b>Record Reviews:</b> | NR Medication Administration Record (MAR)                                      |

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### Investigation Summary:

Review of NR's medication storage container found two expired medications. Staff stated that they had not been using the expired medications. Review of NR's December 2023 MAR showed one of the expired medications had been given on 12/07/2023. Staff stated that they reviewed resident medication every three months and must have overlooked NR's medication. CC had no concerns of NR's safety or care.

Deficiencies identified and cited under WAC 388-76-10430(1) and WAC 388-76-10490(1).  
Statement of Deficiency dated 12/18/2023.

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### Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A

12.21.2023 14:51:45

State of Washington

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STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies

License #: 750989

Compliance Determination # 34080

Plan of Correction

WILLOW GLEN AFH

Completion Date

Page 1 of 4

Licensee: WILLOW GLEN AFH

12/18/2023

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 an unannounced on-site complaint investigation on 12/15/2023 and 12/15/2023 of:

WILLOW GLEN AFH  
110 CEDAR LN  
PACIFIC, WA 98047

This document references the following complaint number(s): 110729

The following sample was selected for review during the unannounced on-site visit: 1 of 6 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Michele Grumke, AFH Licenser

From:

DSHS, Aging and Long-Term Support Administration  
Residential Care Services, Region 2, Unit G  
20425 72nd Avenue S, Suite 400  
Kent, WA 98032

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

12/21/2023

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.

This document was prepared by Residential Care Services for the Locator website.

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Statement of Deficiencies

License #: 750989

Compliance Determination # 34060

Plan of Correction

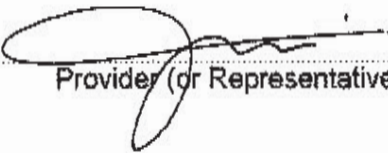
WILLOW GLEN AFH

Completion Date

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Licensee: WILLOW GLEN AFH

12/18/2023



Provider (or Representative)

12/21/2023  
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 systems were in place to prevent 1 of 6 residents (Resident 1) from receiving an expired medication. This failure placed Resident 1 at risk of continued or worsening symptoms from potentially not receiving the full effect of the expired medication.

**Findings included...**

During a follow-up visit on 12/15/2023 at 10:05 AM, observation showed Resident 1 lived in and received medication from the AFH.

A review of Resident 1's December 2023 pharmacy-generated Medication Administration Record (MAR) showed they were prescribed, Glucose 4-gram, chew, and swallow 4 tablets (16 gram) by mouth 3-4 times daily as needed for low blood sugar. Please give for any blood sugar less than 70 and recheck blood sugar in 15 minutes.

Observation on 12/15/2023 at 10:30 AM, showed Resident 1's Glucose 4-gram had expired in August 2022.

Additional review of Resident 1's December 2023 pharmacy-generated MAR showed Resident 1's blood sugar level on 12/07/2023 was 52 and Glucose 4-gram had been provided to the resident.

In an interview on 12/15/2023 at 11:46 AM, Staff A, Entity Representative/Resident Manager, who is also a Registered Nurse, stated that they had not noticed Resident 1's Glucose 4-gram had expired. Staff A further stated that they had not used Resident 1's Glucose 4-gram.

In a follow up phone interview on 12/18/2023 at 2:00 PM, Staff A stated that they realized Resident 1 was given an expired medication. Further, Staff A stated that they reviewed

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|---------------------------|---------------------------|----------------------------------|
| Statement of Deficiencies | License #: 750989         | Compliance Determination # 34060 |
| Plan of Correction        | WILLOW GLEN AFH           | Completion Date                  |
| Page 3 of 4               | Licensee: WILLOW GLEN AFH | 12/18/2023                       |

resident medications at least every 3 months but had overlooked Resident 1's Glucose 4-gram.

#### 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, WILLOW GLEN AFH is or will be in compliance with this law and / or regulation on (Date) 12/22/2023.

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

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 implement their medication disposal policy for 1 of 6 residents (Resident 1). This failure led to Resident 1 receiving an expired glucose, for treatment of low blood sugar, and placed Resident 1 at risk of harm from low blood sugar and worsened condition from taking expired medications.

#### Findings included...

During a follow-up visit on 12/15/2023 at 10:05 AM, observation showed Resident 1 lived in and received medication from the AFH.

A review of Resident 1's December 2023 pharmacy-generated Medication Administration Record (MAR) showed they were prescribed, Glucose 4-gram, chew, and swallow 4 tablets (16 gram) by mouth 3-4 times daily as needed for low blood sugar. Please give for any blood sugar less than 70 and recheck blood sugar in 15 minutes. Further review of Resident 1's December 2023 pharmacy-generated MAR showed they were also prescribed, Miralax 17-gram, a capful by mouth daily as needed for constipation.

Observation on 12/15/2023 at 10:30 AM, showed Resident 1's Glucose 4-gram had

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|                           |                           |                                  |
|---------------------------|---------------------------|----------------------------------|
| Statement of Deficiencies | License #: 750989         | Compliance Determination # 34080 |
| Plan of Correction        | WILLOW GLEN AFH           | Completion Date                  |
| Page 4 of 4               | Licensee: WILLOW GLEN AFH | 12/18/2023                       |

expired in August 2022 and Miralax 17 gram expired in July 2023.

In an interview on 12/15/2023 at 11:46 AM, Staff A, Entity Representative/Resident Manager, stated that they had not been using Resident 1's Glucose 4-gram and Miralax 17 gram and had not noticed they were expired.

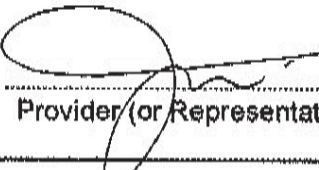
Review of the AFH's undated "Medication Disposal Policy" showed that expired medication should be returned to the pharmacy.

This is a repeated deficiency previously cited on 10/26/2023 for Subsection (1).

#### 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, WILLOW GLEN AFH is or will be in compliance with this law and / or regulation on (Date) 12/22/2023.

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

  
Provider (or Representative)

12/21/2023  
Date