STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

9/18/2023

SWEET GOLDEN YEARS INC
SWEET GOLDEN YEARS INCORPORATED
4952 HANNEGAN RD
BELLINGHAM, WA 98226

RE: SWEET GOLDEN YEARS INCORPORATED License # 751011

Dear Provider:

This letter addresses Compliance Determination(s) 29490 (Completion Date 09/13/2023) and 27879 (Completion Date 08/15/2023).

The Department completed a follow-up inspection of your Adult Family Home on 09/13/2023 and found that you have corrected the violations listed in the Full report dated 08/15/2023. Your home is back in compliance as of 08/28/2023 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 388-76-10015-1, WAC 388-76-10750-1, WAC 388-76-10795-1-d

The Department staff who did the on-site verification:
Toni Bolo, Complaint Investigator

If you have any questions, please contact me at (206)348-9350.

Sincerely,

Nicholette Flynn

Nicholette Flynn, Field Manager
Region 2, Unit B
Residential Care Services

STATE OF WASHINGTON
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Statement of Deficiencies	License #: 751011	Compliance Determination # 27879
Plan of Correction	SWEET GOLDEN YEARS INCORPORATED	Completion Date
Page 1 of 5	Licensee: SWEET GOLDEN YEARS INC	08/15/2023

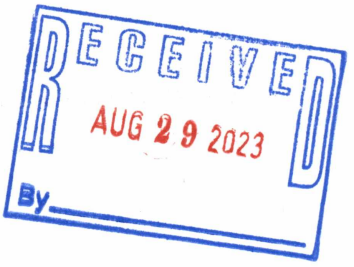
You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for the unannounced on-site full inspection on 08/09/2023 and 08/09/2023 of:
SWEET GOLDEN YEARS INCORPORATED
4952 HANNEGAN RD
BELLINGHAM, WA 98226

The following sample was selected for review during the unannounced on-site visit: 2 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Toni Bolo, Complaint Investigator



From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit B
3906-172nd St NE, Suite #100
Arlington, WA 98223

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.

Nicholetta Flynn
Residential Care Services

8/22/2023
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.

Statement of Deficiencies	License #: 751011	Compliance Determination # 27879
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Provider (or Representative)

9/26/23
Date

WAC 388-76-10015 License Adult family home Compliance required.

(1) The licensed adult family home must comply with all the requirements established in chapters 70.128 , 70.129, 74.34 RCW, this chapter and other applicable laws and regulations including chapter 74.39A RCW; and

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to comply with the laws and regulations as required when 2 of 3 staff (Staff A, Representative and Staff B, Caregiver's) respiratory fit tests were expired. This failure placed AFH residents and staff at risk for illness and infection.

Findings included...

Review of Dear Provider Letter, dated 11/05/2021, reviewed the requirements necessary in developing a respiratory protection program (RPP) in Long-Term Care setting. The Dear Provider Letter listed resources to access for fit testing N95 respirators and the Washington State Department of Health website link to the Respiratory Protection Program for Long-Term Care Facilities.

Review of, Washington State Department of Health, "Respiratory Protection Program for Long-Term Care Facilities", undated, showed healthcare employees must complete the facility's site-specific respirator training before their first use of the respirator (WAC 296-842-16005), then annually.

Record review of Staff A's undated employee file on 08/09/2023, showed a respirator fit test card that had an expiration date of 02/08/2023.

Record review of Staff B's employee file dated 01/01/2012, showed a respirator fit test card that had an expiration date of 02/08/2023.

In an interview on 08/09/2023 at 2:00 PM, Staff A stated that they were not aware that respirator fit tests were required to be renewed every twelve months.

Attestation Statement

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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, SWEET GOLDEN YEARS INCORPORATED is or will be in compliance with this law and / or regulation on (Date) Aug 28, 2023.

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

Provider (or Representative) 8/28/23 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;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure that the home was in good repair and free of hazards. These failures placed 6 of 6 residents' (Resident 1, 2, 3, 4, 5 and 6) safety at risk.

Findings included...

During a general tour on 08/09/2023 at 9:20 AM, observations showed several areas of the AFH laminate flooring was wrinkled, bubbled, or torn. Observations showed that the laminate flooring across the doorway thresholds of Resident 1 & 6's bedroom and Resident 5's bedroom were taped down with duct tape. Observations showed that the doorway thresholds leading from the hallway into the bathroom, the threshold between the living room and kitchen, and the threshold between the kitchen and dining room were also taped down by duct tape. Observations showed that the closet door near the front entrance to the AFH had no doorknob. The closet stored the AFH emergency water supply and miscellaneous linens. The closet door was duct taped to keep the closet accessible.

In an interview on 08/09/2023 at 2:00 PM, Staff A (Representative) stated that they were aware of the worn AFH flooring and the broken closet doorknob. Staff A stated the use of duct tape was a temporary repair of the areas.

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, SWEET GOLDEN YEARS INCORPORATED is or will be in compliance with this law and / or regulation on (Date) 8/26/23.

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

Provider (or Representative) 8/28/23 Date

WAC 388-76-10795 Windows.

(1) The adult family home must ensure at least one window in each resident bedroom meets the following requirements:

(d) The window must be free from obstructions that might block or interfere with access for emergency escape or rescue.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 6 resident (Resident 5) bedroom windows was free of obstructions. The clutter and number of belongings gathered in Resident 5's bedroom and in front of the window placed Resident 5 at risk for harm and delayed escape or rescue during an emergency.

Findings included...

Record review of Resident 5's assessment, dated 09/12/2022, showed Resident 5 was admitted to the AFH on [redacted]/2018. Review of Resident 5's Negotiated Care Plan, dated 09/12/2022, showed that Resident 5 required staff intervention for hoarding behaviors (difficulty throwing away or letting go of items because of the idea-need to save them) to clear their room of clutter and trash.

During a general tour on 08/09/2023 at 9:32 AM, observations showed that Resident 5's bedroom was filled with piles of clothes and personal items that covered most of Resident 5's bedroom floor. Resident 5's bedroom had no more than a two-foot-wide walkway between their bedroom door to their bed. Resident 5 had piles of clothes and personal items near their window making access to the window difficult.

In an interview on 08/09/2023 at 9:33 AM, Resident 5 stated that AFH staff helped them with cleaning their room and laundry.

In an interview on 08/09/2023 at 2:00 PM, Staff A (Representative) stated that they were aware of Resident 5's bedroom clutter and that staff have been working with Resident 5 on

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clearing some of their belongings.

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, SWEET GOLDEN YEARS INCORPORATED is or will be in compliance with this law and / or regulation on (Date) 8/21/23 .

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

Provider (or Representative) — Date: 8/21/23