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

Dorotea Ristig
CARLSON CARE AFH II
10425 NE 201ST STREET
BOTHELL, WA 98011

RE: CARLSON CARE AFH II License # 751142

Dear Provider:

This letter addresses Compliance Determination(s) 70922 (Completion Date 01/13/2026) and 67655 (Completion Date 11/07/2025).

The Department completed a follow-up inspection of your Adult Family Home on 01/13/2026 and found that you have corrected the violations listed in the Complaint report dated 11/07/2025. Your home is back in compliance as of 12/18/2025 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 388-76-10475-1, WAC 388-76-10475-3-a, WAC 388-76-10475-3-b, WAC 388-76-10530-2, WAC 388-76-10530-1-a, WAC 388-76-10530-1-b, WAC 388-76-10530-1-c, WAC 388-76-10530-1-e, WAC 388-76-10530-1-f, WAC 388-76-10530-1-g, WAC 388-76-10530-1-h

The Department staff who did the on-site verification:
Theresia Karundeng, NCI

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee' Bourque

Renee Bourque, Field Manager
Region 2, Unit I
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
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20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

Statement of Deficiencies	License #: 751142	Compliance Determination #67655
Plan of Correction	CARLSON CARE AFH II	Completion Date
Page 1 of 7	Licensee: Dorotea Ristig	11/07/2025

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 10/22/2025 of:

CARLSON CARE AFH II
20205 107th Ave NE
Bothell, WA 98011

This document references the following complaint number(s): 199278, 199642, 199637, 200247, 199938

The following sample was selected for review during the unannounced on-site visit: 3 of 3 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Theresia Karundeng, NCI

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

Renee' Bourque
Residential Care Services

11/12/2025
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.

Dorotea D. Ristig
Provider (or Representative)

12-03-2025
Date

WAC 388-76-10475 Medication Log. The adult family home must:

(1) Keep an up-to-date daily medication log for each resident except for residents assessed as medication independent with self-administration.

(3) Ensure the medication log includes:

(a) Initials of the staff who assisted or gave each resident medication(s);

(b) If the medication was refused and the reason for the refusal; and

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure 2 of 2 residents (Resident 1 and 2) received medications per physician's orders, and documentation in medication log was up to date. This failure placed Resident 1 and 2 at risk for harm related to medical complications, and unmet care needs.

Findings included...

RESIDENT 1
Review of Resident 1's Negotiated Care Plan (NCP), dated 04/08/2025, showed Resident 1 was admitted to the AFH on [redacted]/2024, with multiple medical diagnoses. Further review showed Resident 1 required caregiver assistance with medication administration.

Review of Resident 1's Medication Logs (ML), dated October 2025, showed the following:

-Resident 1 did not receive their morning, afternoon, and bedtime medication on

10/02/2025, which included the following medications: amlodipine (medication for blood pressure), atorvastatin (medication for cholesterol), bupropion (medication for depression), carbamazepine (medication for seizures), divalproex sodium (medication for seizures and/or mood), folic acid (vitamin supplement), gabapentin (medication for nerve pain or seizures), januvia (medication to manage blood sugars), ketoconazole cream (medication for skin infection), lisinopril (medication for blood pressure), nystatin powder (medication for skin infection), blood sugar checks, risperidone (medication for mental health), fluconazole (medication for fungal infection). The October 2025 ML on 10/02/2025 showed it was blank with no initials.

-Nystatin powder apply to affected area twice a day with a start date of 06/12/2025. The October 2025 ML showed Resident 1 did not receive nystatin powder from 10/21/2025- 10/23/2025 and 10/24/2025 evening dose (three and a half day). The October 2025 ML showed it was blank with no initials from 10/21/2025-10/23/2025 and on 10/24/2025 morning dose.

-Risperidone daily at bedtime with a start date of 04/17/2025. The October 2025 ML showed Resident 1 did not receive risperidone from 10/12/2025-10/15/2025 (three days). The October 2025 ML from 10/12/2025-10/15/2025 showed it was blank with no initials.

RESIDENT 2
Review of Resident 2's NCP, dated 05/01/2025, showed Resident 2 was admitted to the AFH on [redacted]/2017, with multiple medical diagnoses. Further review showed Resident 2 required caregiver assistance with medication administration.

Review of Resident 2's ML, October dated 2025, showed the following:

-Calcitriol (form of vitamin D) capsules take one capsule on Monday, Wednesday, and Friday with start date of 06/08/2017. The October ML showed Resident 2 did not receive calcitriol on 10/01/2025 and 10/15/2025 (two days). The October ML on 10/01/2025 and 10/15/2025 showed it was blank with no initials.

-Fiber powder (supplement) drink by mouth twice a day with a start date of 09/25/2020. The October ML showed Resident 2 did not receive fiber powder on 10/20/2025 evening dose, and from 10/21/2025-10/28/2025 (eight and a half days). The October ML on 10/20/2025 evening, and from 10/21/2025-10/28/2025 showed it was blank with no initials.

-Tadalafil (medication for enlarged prostate) take one tablet with a start date of 12/05/2024. The October ML showed Resident 2 did not receive tadalafil from 10/21/2025-10/28/2025 (eight days). The October ML from 10/21/2025-10/28/2025 showed it was blank with no initials.

-Tamsulosin (medication for enlarged prostate) take one tablet with a start date 06/08/2017. The October ML showed Resident 2 did not receive tamsulosin from 10/21/2025-10/28/2025 (eight days). The October ML from 10/21/2025-10/28/2025 showed it was blank with no initials.

-Check blood sugar twice weekly with a start date of 09/01/2025. The October ML showed Resident 2 did not get their blood sugars checked on 10/02/2025, 10/06/2025, 10/09/2025, 10/13/2025, 10/20/2025, 10/23/2025, and 10/27/2025 (seven days). The October ML on 10/02/2025, 10/06/2025, 10/09/2025, 10/13/2025, 10/20/2025, 10/23/2025, and 10/27/2025 showed it was blank with no initials.

-Vitamin D3 (supplement) tablet once daily with a start date of 01/07/2019. The October ML showed Resident 2 did not receive vitamin D3 from 10/21/2025-10/28/2025 (eight days). The October ML from 10/21/2025-10/28/2025 showed it was blank with no initials.

-Cefdinir (medication to treat infection) twice daily for seven days (no start date noted). The October ML showed Resident 2 received cefdinir for four and a half days starting from 10/16/2025 until 10/20/2025. The October ML showed Resident 2 did not receive cefdinir for seven days.

-Ziprasidone (medication to treat psychosis) twice daily with a start date of 05/29/2019. The October ML showed Resident 2 did not receive ziprasidone on 10/20/2025 evening, 10/21/2025, 10/22/2025, 10/23/2025 evening, and from 10/24/2025-10/28/2025 (8 days). The October ML on 10/20/2025 evening, 10/21/2025, 10/22/2025, 10/23/2025 evening, and from 10/24/2025-10/28/2025 showed it was blank with no initials.

In an interview, on 10/28/2025 at 3:14 PM, Staff B, Resident Manager, stated that Resident 1's and Resident 2's October 2025 ML should be up to date. Staff B stated that there should not be holes in the medication log. Staff B stated that the medication log should have been signed/initialed when the medication was given.

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, CARLSON CARE AFH II is or will be in compliance with this law and / or regulation on (Date) 12-18-2025

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

Dorotea D. Ristig
Provider (or Representative)

12-03-2025
Date

WAC 388-76-10530 Resident rights Notice of rights and services.

(1) The adult family home must provide each resident written notice of the resident's rights and services provided in the home in a language the resident understands and before the resident is admitted to the home. The notice must be reviewed at least once every 24 months from the date of the resident's admission and must include the following:

(a) Information regarding resident rights, including rights under chapter 70.129 RCW;

(b) A complete description of the services, items, and activities customarily available in the home or arranged for by the home as permitted by the license;

(c) A complete description of the charges for those services, items, and activities, including charges for services, items, and activities not covered by the home's per diem rate or applicable public benefit programs;

(e) Rules of the home, which must not violate resident rights in chapter 70.129 RCW;

(f) How the resident can file a complaint concerning alleged abandonment, abuse, neglect, or financial exploitation with the state hotline;

(g) If the home will be managing the resident's funds, a description of how the home will protect the resident's funds; and

(h) If the home does not serve residents who require assistance with evacuation due to a limit on their license, notice that residents living in the home whose status changes to require assistance will be discharged from the facility.

(2) Upon receiving the notice of rights and services at admission and at least every 24 months, the home must ensure the resident and a representative of the home sign and date an acknowledgement stating that the resident has received the notice of rights and services as outlined in this section. The home must retain a signed and dated copy of both the notice of rights and services and the acknowledgement in the resident's record.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure the admission agreement was available in resident's records for 1 of 3 residents (Resident 1). Additionally, the AFH failed to ensure that 2 of 3 residents (Resident 2, and 3) had disclosure of services forms that were signed and dated at least once every twenty-four months from the date of the residents' admission. This failure placed the residents at risk of not being fully informed of their rights and the care and services provided by the AFH.

Findings included...

RESIDENT 1
Review of Resident 1's Negotiated Care Plan (NCP), dated 04/08/2025, showed Resident 1 was admitted to the AFH on [redacted]2024, with multiple medical diagnoses.

Review of Resident 1's records showed Resident 1's records did not contain documentation of the AFH's admission agreement, notice of rights, and services.

RESIDENT 2
Review of Resident 2's NCP, dated 05/01/2025, showed Resident 2 was admitted to the AFH on [redacted]2017, with multiple medical diagnoses.
Review of Resident 2's records showed their admission agreement included a financial agreement, house rules and resident's rights. Review Resident 2's financial agreement was last reviewed, signed, and dated on 07/17/2017. Review of Resident 2's resident rights form was last reviewed, signed, and dated on 11/13/2019. Resident 2's admission agreement was due in 2019, 2021, 2023 and 2025.

RESIDENT 3
Review of Resident 3's NCP, dated 05/01/2025, showed Resident 3 was admitted to the AFH on [redacted]2016, with multiple medical diagnoses.

Review of Resident 3's records showed their admission agreement included a financial agreement, policies and resident's responsibilities and resident's rights. Review Resident 3's financial agreement was last reviewed, signed, and dated on [redacted]2016. Review of Resident 3's resident rights form was last reviewed, signed, and dated on [redacted]2016. Resident 3's admission agreement was due in 2018, 2020, 2022, and 2024.

In an interview, on 11/07/2025 at 1:30 PM, Staff B, Resident Manager, was not aware how often the admission agreement which includes the financial agreement, house rules/policies and resident's rights should be updated.

In an interview on 11/07/2025 at 2:25 PM, Staff A, Provider, stated that the admission agreement should be updated every three years and resident rights should be updated every two years. Staff A acknowledged that Resident 1 should've had their admission

agreement in their records. Staff A acknowledged that Resident 2 and 3's admission records should have been updated every two years.

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, CARLSON CARE AFH II is or will be in compliance with this law and / or regulation on (Date) 12 18 2025

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

Dorotea D. Ristig
Provider (or Representative)

12-03-2025
Date