



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

ACACIA CARE SERVICES INC
ACACIA SENIOR HOME
9904 240TH PL SW
EDMONDS, WA 98020

RE: ACACIA SENIOR HOME License # 751267

Dear Provider:

This letter addresses Compliance Determination(s) 36138 (Completion Date 01/31/2024) and 34451 (Completion Date 01/05/2024).

The Department completed a follow-up inspection of your Adult Family Home on 01/31/2024 and found that you have corrected the violations listed in the Full report dated 01/05/2024. Your home is back in compliance as of 12/28/2023 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 388-76-10750-7, WAC 388-76-10485-1, WAC 388-76-10430-1, WAC 388-76-10430-2-d

The Department staff who did the on-site verification:
Farrah Sirous, Long Term Care Surveyor

If you have any questions, please contact me at (253)341-2633.

Sincerely,

Ann Lee-Hunter

Ann Lee-Hunter, Field Manager
Region 2, Unit I
Residential Care Services

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



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

Statement of Deficiencies	License #: 751267	Compliance Determination # 34451
Plan of Correction	ACACIA SENIOR HOME	Completion Date
Page 1 of 5	Licensee: ACACIA CARE SERVICES INC	01/05/2024

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 12/27/2023 and 12/27/2023 of:

ACACIA SENIOR HOME
9904 240TH PL SW
EDMONDS, WA 98020

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:

Farrah Sirous, Long Term Care Surveyor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

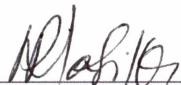
As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Residential Care Services

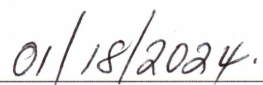
Date

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.

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



Provider (or Representative)



Date

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(7) Keep all toxic substances and hazardous materials in locked storage and in their original containers;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure all toxic substances and hazardous materials were properly stored in a locked storage. This failure placed 6 of 6 residents (Resident 1, 2, 3, 4, 5, and 6) at risk of harm from exposure to toxic or hazardous materials.

Findings included...

Observation, on 11/27/2023 9:23 AM, showed 6 residents resided and received care from the AFH.

In an interview, on 11/27/2023 at 9:55 AM, Staff A, Entity Representative, reported that Residents 3 ambulated independently. Staff A stated that Resident 6 operated their wheelchair independently throughout the AFH.

Observation, on 12/27/2023 at 11:35 AM, showed unlocked paint containers kept in the storage area next to the water heater in Resident's 6 bedroom (Bedroom D). The water heater storage in the bedroom D had an unlocked pocket door.

In an interview, on 12/27/2023 at 11:40 AM, Staff A stated that paints should kept in the room temperature, and they were going to paint the chips on the door and walls in Resident's 6 bedroom.

In an interview, on 11/27/2023 at 3:40 PM, Resident 6 and their representative (spouse) stated that they were unaware of stored paint in their bedroom. Resident's 6 representative stated that they were unaware the AFH planning to paint the door and walls.

In an interview, on 12/27/2023 at 3:50 PM, Staff A state they would discuss about painting in bedroom D with Resident's 6 representative later.

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, ACACIA SENIOR HOME is or will be in compliance with this law and / or regulation on (Date) 12/28/2023.

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

[Signature]
 Provider (or Representative)

01/18/2024
 Date

WAC 388-76-10485 Medication storage. The adult family home must ensure all prescribed and over-the-counter medications are stored:

(1) In locked storage;

This requirement was not met as evidenced by:

Based on observation and interview the Adult Family Home (AFH) failed to ensure the medications was kept in locked and inaccessible to 6 of 6 residents (Resident 1, 2, 3, 4, 5 and 6). This failure placed Resident 1, 2, 3, 4, 5 and 6 at risk of harm or injury if they accessed and inappropriately took unlocked medications.

Finding included...

Observation, on 12/27/2023 at 9:23 AM, showed Resident 1, 2, 3, 4, 5 and 6 lived in and received care from the AFH. Observation further showed Resident 3 ambulated independently and Resident 6 operated their wheelchair independently throughout the AFH.

Observation, on 12/27/2023 at 10:55 AM, showed PeriGuard skin protectant ointment, Calazime zinc oxide paste, and two tubes of Sooth and Cool Skin Protectant Barrier Ointments kept unsecured in the basket on the shelf in the unlocked laundry room .

Observation, on 12/27/2023 at 11:20 AM, showed one tube of Sooth and Cool Skin Protectant Barrier Ointments in the second bathroom (located in bedroom B).

In an interview on 12/27/2023 at 11:25 AM, Staff A stated they were unaware to keep skin protectant ointments in the locked storage. Staff A promptly moved the ointments to the locked cabinet in the laundry room.

Attestation Statement

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

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, ACACIA SENIOR HOME is or will be in compliance with this law and / or regulation on (Date) 12/27/2023.

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

[Signature]
Provider (or Representative)

01/18/24
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:
 - (d) Receives medications as required.

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to ensure 1 of 2 sampled residents (Residents 6) had all prescribed medications available on site and an up-to-date Medication Log (ML). This failure placed Resident 6 at risk for health complications and medications errors.

Finding included...

Review of Resident 6's record showed the AFH admitted Resident 6 on [REDACTED]/2023 with multiple medical diagnoses.

Review of Resident 6's December 2023 ML showed a medication entry that read, "Bisacodyl 10 mg suppository: insert one suppository once daily as needed for constipation (if no bowel movement in 3 days)." This medication entry on the ML matched the doctor's order, dated 02/03/2023.

Review of Resident 6's December 2023 ML showed a medication entry that read, "Milk of Magnesium: Give 30 ML once daily as needed for constipation if no bowel movement in 3 days." This medication entry on the ML matched the doctor's order, dated 02/03/2023.

Observation of Resident's 6 medications, on 12/27/2023 at 2:10 PM, showed the AFH did

not have supplies for Resident's 6 Bisacodyl and Milk of Magnesium PRN medications.

In an interview, on 12/27/2023 at 2:20 PM, Staff A, Entity Representative, stated that they ordered Resident's 6 PRN medications before holiday (Christmas), and they had not received it.

In an interview, on 12/27/2023 at 2:40 PM, Staff A contacted pharmacy and stated that pharmacy had no refills for Resident's 6 PRN medications, and they had to call the provider.

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, ACACIA SENIOR HOME is or will be in compliance with this law and / or regulation on (Date) 12/28/2023.

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

R/Ch B.
Provider (or Representative)

01/18/2024
Date