STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

KINDRED CARE SERVICES PLLC
VALLEY ROAD RESIDENTIAL CARE
3072 Valley Road NE
Moses Lake, WA 98837

RE: VALLEY ROAD RESIDENTIAL CARE License # 751743

Dear Provider:

This letter addresses Compliance Determination(s) 66148 (Completion Date 09/25/2025) and 63772 (Completion Date 08/12/2025).

The Department completed a follow-up inspection of your Adult Family Home on 09/25/2025 and found that you have corrected the violations listed in the Follow up report dated 08/12/2025. Your home is back in compliance as of 09/02/2025 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-b, WAC 388-76-10475-3-a

The Department staff who did the on-site verification:
Brittney Shull, Community Complaint Investigator

If you have any questions, please contact me at (509)572-7394.

Sincerely,

Selena Clemons for

Michelle Yarbrough, Adult Family Home Field Manager
Region 1, Unit C
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

1200 Alder Street, Union Gap, WA 98903

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 follow-up on 08/01/2025 of:
VALLEY ROAD RESIDENTIAL CARE
3072 Valley Road NE
Moses Lake, WA 98837

This document references the following SOD dated: 08/12/2025

The following sample was selected for review during the unannounced on-site visit: 3 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Brittney Shull, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Michelle Ann Garbrough
Residential Care Services

08/25/2025
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.

Provider (or Representative)

09/02/25
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 the medication log was kept up to date for 3 of 3 residents (Resident 1, 2, & 3). This failure resulted in undocumented medication receipt and placed residents at risk for potential medication errors.

Findings included...

Review of the facility "Medication Policy" dated 02/19/2024, showed that all resident medication records would be kept up to date.

Resident 1

Review of Resident 1's Department Assessment dated 11/07/2024, showed Resident 1 required assistance with medication due to not following frequency or dosage, needing psychotropic medications monitored, and forgetting to take medications. The assessment showed that Resident 1 required delegation of eye drops and insulin (a medication used to lower blood sugar).

Review of Resident 1's Negotiated Care Plan (NCP) dated 12/09/2024, showed Resident 1:

-Was admitted to the AFH on [redacted]/2021.
-Required medication assistance with oral medications.
-Required medication administration for topical medications, eye drops, insulin injections, and blood sugar monitoring.

Review of Resident 1's Nurse Delegation Nursing Visit form dated 05/16/2025 showed that Resident 1 required administration of insulin, eye medication, and blood sugar monitoring due to an inability to administer to themselves.

Review of Physician Orders dated 08/12/2025 showed:
-Brimonidine 0.2% (blood pressure in the eyes) was ordered on 05/23/2025 twice daily.
-Haloperidol (antipsychotic) 5 milligram (mg) one 12/27/2021 once daily.
-Lamotrigine (seizures of antipsychotic) 25mg was ordered on 03/02/2024 at bedtime.
-Lantus Solostar (long-acting blood sugar lowering injection) was ordered twice daily, 20 units in the morning, 25 units in the evening, on 03/20/2025.
-Latanoprost (high blood pressure in the eye) was ordered on 12/27/2021 at bedtime.
-Lyumjev (blood sugar lowering injection) was ordered on 12/19/2024, 10 units after breakfast, 10 units after lunch, 8 units after dinner.
-Metformin (blood sugar medication) 1000mg was ordered on 12/23/2022 twice a day.
-Olanzapine (antipsychotic) 10mg was ordered on 01/27/2024 at bedtime.
-Rouvastatin Calcium (cholesterol) 5mg was ordered on 01/01/2025 at bedtime.
-Trazodone (insomnia) 150mg was ordered on 01/24/2025 at bedtime.

Review of Resident 1's July 2025 Medication Log showed missing documentation for 17 scheduled medication tasks. The following scheduled medications were not documented as given or not given:
-Brimonidine on 07/03/2025, 07/04/2025, 07/15/2025, 07/16/2025, 07/29/2025, 6 doses.
-Haloperidol on 07/24/2025, 1 dose.
-Lamotrigine on 07/24/2025, 1 dose.
-Lantus Solostar on 07/24/2025, 07/28/2025, 2 doses.
-Latanoprost on 07/24/2025, 1 dose.
-Lyumjev on 07/21/2025, 07/26/2025, 2 doses.
-Metformin on 07/24/2025, 1 dose.
-Olanzapine on 07/24/2025, 1 dose.
-Rouvastatin Calcium on 07/24/2025, 1 dose.
-Trazodone on 07/04/2025, 07/24/2025, 2 doses.

Resident 2

Review of Resident 2's Department Assessment dated 10/16/2024, showed Resident 2 required assistance with medication due to fluctuating abilities, inability to follow frequency or dosage, and forgetfulness.

Review of Resident 2's Negotiated Care Plan (NCP) dated 11/10/2024, showed Resident 2:
-Was admitted to the AFH on [redacted]/2024.
-Required medication administration with all oral medications.

Review of Resident 2's Nurse Delegation Nursing Visit form dated 05/16/2025 showed that Resident 2 required administration of oral medications due to an inability to administer to themselves.

Review of Resident 2's Physician Orders dated 08/12/2025 showed:
-Budesonide (inflammation in the lungs) 0.5mg/2 milliliter (ml) was ordered on 02/25/2025 twice daily.
-Depakote (seizures or mood) 500 mg was ordered on 04/18/2025 daily.
-Duoneb (increase airflow in the lungs) 2.5mg/3ml was ordered on 10/28/2024 twice daily before Budesonide
-Geodon (antipsychotic) 6mg was ordered on 10/28/2024 at bedtime.
-Spironolactone (diuretic) was ordered on 10/28/2024 daily.

Review of Resident 2's July 2025 Medication Log showed missing documentation for 9 scheduled medication tasks. The following scheduled medications were not documented as given or not given:
-Budesonide on 07/03/2025, 07/10/2025, 2 dose.
-Depakote on 07/11/2025, 1 dose.
-Duoneb on 07/03/2025, 07/10/2025, 07/18/2025, 3 doses.
-Geodon on 07/10/2025, 1 dose.
-Spironolactone on 07/05/2025, 1 dose.

Resident 3

Review of Resident 3's Department Assessment dated 06/05/2025, showed Resident 3 required assistance with medication due to fluctuating abilities and forgetfulness.

Review of Resident 3's Negotiated Care Plan (NCP) dated 04/07/2025, showed Resident 3:
-Was admitted to the AFH on [redacted]/2025.
-Required medication assistance with medications.

Review of Resident 3's Physician Orders dated 08/12/2025 showed:
-Clonazepam (anxiety) 0.5mg was ordered on 04/05/2025 twice a day.
-Depakote (antipsychotic) 125mg was ordered on 06/22/2025 three times a day.
-Lipitor (cholesterol) 20mg was ordered on 03/26/2025 daily.
-Lisinopril (blood pressure) 20mg was ordered on 03/26/2025 daily.
-Vitamin B12 (supplement) 1000mg on 03/26/202 daily.

Review of Resident 3's July 2025 Medication Log showed missing documentation for 5 scheduled medication tasks. The following scheduled medications were not documented as given or not given:
-Clonazepam on 07/31/2025, 1 dose.
-Depakote on 07/17/2025, 1 dose.
-Lipitor on 07/07/2025, 1 dose.
-Lisinopril on 07/07/2025, 1 dose.
-Vitamin B12 on 07/07/2025, 1 dose.

On 08/12/2025 at 2:46pm, Staff A, Provider, stated that the missing documentation was due to the computer mouse not working properly while attempting to document on the electronic medication log.

This is an uncorrected deficiency previously cited on 06/10/2025 and 02/02/2024.

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, VALLEY ROAD RESIDENTIAL CARE is or will be in compliance with this law and / or regulation on (Date) 09/02/25.

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

Provider (or Representative) — Date: 09/02/25

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

1200 Alder Street, Union Gap, WA 98903

Statement of Deficiencies	License #: 751743	Compliance Determination # 58888
Plan of Correction	VALLEY ROAD RESIDENTIAL CARE	Completion Date
Page 1 of 9	Licensee: KINDRED CARE SERVICES PLLC	06/10/2025

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 05/01/2025 of:

VALLEY ROAD RESIDENTIAL CARE
3072 Valley Road NE
Moses Lake, WA 98837

This document references the following complaint number(s): 176082

The following sample was selected for review during the unannounced on-site visit: 3 of 6 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Brittney Shull, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Michelle Ann Garbrough
Residential Care Services

06/23/2025
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.

Provider (or Representative)

06/28/2025
Date

WAC 388-76-10455 Medication Administration. For residents assessed with requiring the administration of medications, the adult family home must ensure medication administration is:

(2) By nurse delegation per WAC 246-840-910 through 246-840-970 ; unless

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure that nurse delegation was obtained prior to administering medications to 1 of 3 residents (Resident 1). This failure placed residents at risk for medications errors.

Findings included...

Review of the facility "Medication Policy" dated 02/19/2024, showed that the AFH was required to notify the Registered Nurse Delegator (RND) of all staff changes.

Resident 1

Review of Resident 1's Department Assessment dated 11/07/2024, showed Resident 1 required assistance with medications due to not following frequency or dosage, needing psychotropic (mood altering) medications monitored, and forgetting to take medications. The assessment showed that Resident 1 required delegation of eye drops and insulin injections (a medication used to lower blood sugar).

Review of Resident 1's Negotiated Care Plan (NCP) dated 12/09/2024, showed Resident 1:

-Was admitted to the AFH on [redacted]/2021.
-Required medication assistance with oral medications.
-Required delegation for eye drops, insulin injections, and blood sugar monitoring.

Review of Resident 1's Nurse Delegation Nursing Visit form dated 02/16/2025, showed that Resident 1 required administration of insulin, eye medication, and blood sugar monitoring due to an inability to perform the tasks themself. The form showed Staff C, Caregiver, was not delegated for the required tasks. The delegation form included instructions for staff on what to do if Resident 1's blood sugar was below or above the normal range.

Review of Resident 1's Physician Orders dated 03/20/2025, showed that Resident 1 was ordered to receive:
-Lyumjev (fast-acting insulin, blood sugar) injection 10 units after breakfast and lunch, 8 units after dinner. Hold if the resident does not eat a meal.
-Lantus Solostar (long-acting insulin, blood sugar) 20 units in the morning, 25 units in the evening.
-Latanoprost (high blood pressure in the eye) 0.005% 1 drop in each eye at bedtime.
-Check blood sugar before breakfast, lunch, and dinner.

Review of Resident 1's April 2025 Medication Log showed that there were 46 occurrences of undocumented administrations of scheduled delegated medications. The log also showed 11 documented undelegated administrations of medications:
-Staff C administered Latanoprost eye drops on 04/24/2025, 04/30/2025, 2 occurrences.
- Staff C administered Lyumjev insulin on 04/22/2025, 04/24/2025, 04/29/2025, 04/30/2025, 4 occurrences.
-Staff C took Resident 1's blood sugar on 04/22/2025, 04/24/2025, 04/29/2025, 04/30/2025, 5 occurrences.

On 05/01/2025 at 8:02 AM, Staff B, Caregiver, stated that Resident 1 required delegation of insulin.

On 05/01/2025 at 8:10 AM, Staff A, Provider, stated that there was one caregiver on duty for each shift.

On 05/01/2025 at 8:16 AM, observation showed Staff B administered Lyumjev insulin to Resident 1's abdomen.

On 05/01/2025 at 11:49 AM, Staff A stated that Staff C was hired two weeks prior to the interview. Staff A stated that Staff C had previously been delegated when they had worked for the facility in the past. Staff A acknowledged that Staff C had been administering insulin in the month of April 2025. Staff A did not acknowledge that Staff C had not been delegated again since they had recently been rehired.

On 05/09/2025 at 1:52 PM, Collateral Contact 1 (CC1), Registered Nurse Delegator, stated that they delegated Staff C for medication administration for Resident 1 on either 05/03/2025 or 05/04/2025.

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, VALLEY ROAD RESIDENTIAL CARE is or will be in compliance with this law and / or regulation on (Date) 06/28/25.

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

Provider (or Representative) — Date: 06/28/25

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 the medication log was kept up to date for 3 of 3 residents (Resident 1, 2, & 3). This failure resulted in undocumented medication receipt and placed residents at risk for potential medication errors.

Findings included...

Review of the facility "Medication Policy" dated 02/19/2024, showed that all resident medication records would be kept up to date.

Resident 1

Review of Resident 1's Department Assessment dated 11/07/2024, showed Resident 1 required assistance with medication due to not following frequency or dosage, needing

psychotropic medications monitored, and forgetting to take medications. The assessment showed that Resident 1 required delegation of eye drops and insulin (a medication used to lower blood sugar).

Review of Resident 1's Negotiated Care Plan (NCP) dated 12/09/2024, showed Resident 1:
-Was admitted to the AFH on [redacted]/2021.
-Required medication assistance with oral medications.
-Required delegation for topical medications, eye drops, insulin injections, and blood sugar monitoring.

Review of Resident 1's Nurse Delegation Nursing Visit form dated 02/16/2025 showed that Resident 1 required administration of insulin, eye medication, and blood sugar monitoring due to an inability to administer to themselves.

Review of Resident 1's Physician Orders dated 03/20/2025, showed that Resident 1 was ordered to receive:
-Metoprolol tartrate (blood pressure) 25 milligram (mg) twice a day.
-Metformin (blood sugar) 1,000 mg twice a day.
-Olanzapine (antipsychotic) 10 mg at night.
-Fenofibrate (cholesterol reduction) 54 mg daily.
-Amlodipine Besylate (blood pressure)10 mg daily.
-Haloperidol (antipsychotic) 10 mg at bedtime.
-Trazodone (insomnia) 150 mg at bedtime.
-Lamotrigine (seizure or antipsychotic) 50 mg in the morning, 200mg at bedtime.
-Latanoprost (high blood pressure in the eye) 0.005% 1 drop in each eye at bedtime.
-Calcium Carbonate (Antacid) 500 mg daily.
-Lyumjev (fast-acting insulin, blood sugar) injection 10 units after breakfast and lunch, 8 units after dinner. Hold if the resident does not eat a meal.
-Multivitamin (supplement) 1 tablet in the morning.
-Lantus Solostar (long-acting insulin, blood sugar) 20 units in the morning, 25 units in the evening.
-Rosuvastatin Calcium (cholesterol reduction) 5 mg at night.
-Amantadine (uncontrolled movements) 100 mg daily.

Review of Resident 1's April 2025 Medication Log showed missing documentation for 198 scheduled medication doses. The following scheduled medications were not documented as given or not given
-Metoprolol on 04/03/2025,04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, 04/25/2025, and 04/27/2025, 19 doses.
-Metformin on 04/03/2025,04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, 04/25/2025, and 04/27/2025, 16 doses.
-Olanzapine on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 11 doses.
-Fenofibrate on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/20/2025,

04/25/2025, and 04/27/2025, 7 doses.
-Amlodipine Besylate on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/20/2025, 04/25/2025, and 04/27/2025, 7 doses.
-Haloperidol was not documented as given or not given 04/03/2025,04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 18 doses.
-Trazodone was not documented as given on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, 04/25/2025, 11 doses.
-Lamotrigine on 04/03/2025,04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, 04/25/2025, and 04/27/2025, 18 doses.
-Latanoprost was not documented as given on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, 04/25/2025, 11 doses.
-Calcium Carbonate on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/20/2025, 04/25/2025, and 04/27/2025, 7 doses.
-Lyumjev injection on 04/02/2025, 04/03/2025,04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, 04/25/2025, and 04/29/2025, 24 doses.
-Multivitamin on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/20/2025, 04/25/2025, and 04/27/2025, 8 doses.
-Lantus Solostar injection on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/25/2025, 04/27/2025 and 04/29/2025, 23 doses.
-Rosuvastatin calcium was not documented as given on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/20/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 11 doses.
-Amantadine on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/20/2025, 04/25/2025, and 04/27/2025, 8 doses.

Resident 2

Review of Resident 2's Department Assessment dated 01/13/2025, showed Resident 2 required assistance with medication due to a fluctuating ability, forgetfulness, inability to follow frequency or dosage, poor coordination, and inability to open containers.

Review of Resident 2's Negotiated Care Plan (NCP) dated 02/15/2024, showed Resident 2:
-Was admitted to the AFH on [redacted]/2023.
-Required medication assistance with medications.

Review of Resident 2's Physician Orders dated 04/24/2025, showed that Resident 2 was ordered to receive:
-Tamsulosin (enlargement of prostate gland) 0.4 mg daily.
-Severent Diskus (relaxes airway muscles in the lungs) inhaler 50 micrograms (mcg) twice a day.

-Senna 8.6mg and Docusate 50 mg combination (constipation) twice a day.
-Imdur (prevents chest pain) 120 mg daily.
-Amiodarone (heart rhythm) 200 mg twice a day.
-Eliquis (blood thinner) 5 mg twice a day.
-Budesonide Inhaler (inflammation in lungs, asthma) 0.5 mg at bedtime.
-Bupropion (antidepressant) 300 mg daily.
-Escitalopram (antidepressant/anti-anxiety) 10 mg daily.
-Fluticasone (nasal congestion) 50 mcg daily.
-Gabapentin (anticonvulsant or nerve pain) 300 mg at night.
-Lidocaine Patch (pain) to the right knee daily.
-Oxycodone (pain) 10mg twice a day.
-Chlorhexidine mouth rinse (antiseptic) 0.12% in 15 milliliters (mL) twice a day.
-Metformin (lowers blood sugar) 500 mg daily.
-Omeprazole (antacid) 20 mg daily.
-Olanzapine (antipsychotic) 5 mg daily.
-Lisinopril (blood pressure) 10 mg daily.
-Atorvastatin (cholesterol reduction) 40 mg in the evening.

Review of Resident 2's April 2025 Medication Log showed missing documentation for 186 scheduled medication doses. The following scheduled medications were not documented as given or not given:
-Tamsulosin was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Severent Diskus inhaler was not documented as given on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025, through 04/18/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 16 doses.
-Senna and Docusate combination was not documented as given on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025, through 04/18/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 16 doses.
-Imdur was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Amiodarone was not documented as given on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025, through 04/18/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 16 doses.
Eliquis was not documented as given on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025, through 04/18/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 16 doses.
-Budesonide Inhaler was not documented as given on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/22/2025, 04/23/2025 and 04/25/2025, 10 doses.
-Bupropion was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Escitalopram was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Fluticasone nasal spray was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Gabapentin was not documented as given on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/22/2025, 04/23/2025 and 04/25/2025, 10 doses.
-Lidocaine Patch was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses. It was not documented as removed

on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/22/2025, 04/23/2025 and 04/25/2025, 10 doses.
-Oxycodone was not documented as given on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025, through 04/18/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 16 doses.
-Chlorhexidine mouth rinse was not documented as given on 04/03/2025, 04/05/2025, 04/06/2025, 04/08/2025, 04/11/2025, 04/12/2025, 04/15/2025, through 04/18/2025, 04/22/2025, 04/23/2025, and 04/25/2025, 16 doses.
-Metformin was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses
-Omeprazole was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Olanzapine was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Lisinopril was not documented as given on 04/05/2025, 04/06/2025, 04/08/2025, 04/15/2025, 04/22/2025, and 04/25/2025, 6 doses.
-Atorvastatin was not documented as given on 04/03/2025, 04/11/2025, 04/12/2025, 04/15/2025 through 04/18/2025, 04/22/2025, 04/23/2025 and 04/25/2025, 10 doses.

Resident 3

Review of Resident 3's Department Assessment dated 03/06/2025, showed Resident 3 required assistance with medication due to fluctuating abilities and forgetfulness.

Review of Resident 3's Negotiated Care Plan (NCP) dated 04/07/2025, showed Resident 3:
-Was admitted to the AFH on [redacted]/2025.
-Required medication assistance with medications.

Review of Resident 3's Physician Orders dated 03/25/2025 showed that Resident 3 was ordered to receive:
-Atorvastatin (cholesterol reduction) 20 mg daily.
-Vitamin B12 (supplement) 1000 mcg daily.
-Lisinopril (blood pressure) 20 mg daily.

Review of Resident 3's Physician Orders dated 04/05/2025 showed that Resident 3 was ordered to receive:
-Rivastigmine (dementia, a neurocognitive disorder affecting memory) 1.5 mg twice a day.
-Clonazepam (seizures, anxiety) 0.25 mg daily.

Review of Resident 3's April 2025 Medication Log showed missing documentation for scheduled medications. The following scheduled medications were not documented as given or not given:
-Atorvastatin was not documented as given on 04/03/2025, 04/06/2025, 04/15/2025,

04/18/2025, 04/20/2025, and 04/25/2025, 6 doses.
-Vitamin B12 was not documented as given on 04/03/2025, 04/06/2025, 04/15/2025, 04/18/2025, 04/20/2025, and 04/25/2025, 6 doses.
-Lisinopril was not documented as given on 04/03/2025, 04/06/2025, 04/15/2025, 04/18/2025, 04/20/2025, and 04/25/2025, 6 doses.
-Rivastigmine was not documented as given on 04/06/2025, 04/11/2025, 04/12/2025, 04/15/2025 through, 04/20/2025, 04/22/2025, 04/23/2025, 04/25/2025, and 04/28/2025, 17 doses.
-Clonazepam was not documented as given on 04/06/2025, 04/12/2025, 04/15/2025, 04/18/2025, 04/20/2025, 04/25/2025, 04/26/2025, and 04/28/2025, 8 doses.

On 05/01/2025 at 11:49 AM, Staff A, Provider, stated that they were responsible for the medications that had not been documented. Staff A stated that they gave the medications at the appropriate times and did not have time to document them.

This is an uncorrected deficiency previously cited on 02/02/2024.

I hersby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, VALLEY ROAD RESIDENTIAL CARE is or will be in compliance with this law and / or regulation on (Date) 06/28/25.

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

Provider (or Representative) — Date: 06/28/25