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

NJERI WAIHARO
COZIE ADULT FAMILY HOME
30732 58TH CT S
AUBURN , WA 98001

RE: COZIE ADULT FAMILY HOME License # 752223

Dear Provider:

This letter addresses Compliance Determination(s) 54464 (Completion Date 02/12/2025) and 51875 (Completion Date 12/27/2024).

The Department completed a follow-up inspection of your Adult Family Home on 02/12/2025 and found that you have corrected the violations listed in the Complaint report dated 12/27/2024. Your home is back in compliance as of 01/08/2025 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 388-76-10315-1-g

The Department staff who did the off-site verification:
Olga Petrov, NCI

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

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20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies	License #: 752223	Compliance Determination # 51875
Plan of Correction	COZIE ADULT FAMILY HOME	Completion Date
Page 1 of 3	Licensee: NJERI WAIHARO	12/27/2024

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 an unannounced on-site complaint investigation on 12/16/2024 and 12/16/2024 of:

COZIE ADULT FAMILY HOME
30732 58TH CT S
AUBURN , WA 98001

This document references the following complaint number(s): 157880

The following sample was selected for review during the unannounced on-site visit: 2 of 4 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Olga Petrov, NCI

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

12-30-2024
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.

Njeri Waiharo
Provider (or Representative)

1-8-2025
Date

WAC 388-76-10315 Resident record Required. The adult family home must:

(1) Create, maintain, and keep records for residents in the home where the resident lives and ensure that the records:

(g) Be available so that department staff may review them when requested; and

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to a have a system of keeping Nurse Delegation documentations for 2 of 2 sampled residents (Residents 1 and 2) readily available in the home. This delayed the department staff in determining if all ND documentations were completed as required.

Findings included...

Observation on 12/16/2024 at 10 :33 AM, showed Staff C, Caregiver, Staff D, Caregiver, and Staff E, Caregiver were in the home with four residents (Residents 1, 2, 3 and 4). Staff B, AFH designee arrived shortly after.

In an interview, on 12/16/2024 at 10:40 AM, Staff C stated that Residents 1 and 2 were nurse delegated for topical (application of medicine to the skin), and oral medication administration. Staff C stated that Nurse delegator (ND) visited the AFH every other month and as needed, when there is a new doctor's order. Staff C stated that ND visited Resident 1 when they were discharged from the hospital [redacted] to complete nurse delegation.

Review of records showed resident 1 and 2's nurse delegation documentations dated 05/01/2024 and 10/08/2024. No ND documentations were found for 05/01/2024-10/08/2024 and/or after [redacted]/2024 (date of Resident 1's discharge from the hospital) in the residents' records.

In an interview, on 12/16/2024 at 11:34 AM, Staff B, stated Resident 1 was discharged from the hospital on [redacted]/2024 with home health (HH-visiting nurse services) in place for the wound care. Staff B stated that Resident 1 needed three times a day intermittent catheterization (the insertion and removal of a catheter several times a day to empty the bladder). Staff B stated that, Staff F, AFH nurse notified ND of Resident 1's discharge from the hospital. When asked if the home had ND visits' documentation, Staff B stated they need to look for them.

On 12/17/2024, department staff received email from the AFH showing Resident 1 and 2's ND documentations dated 07/30/2024.

In an interview, on 12/17/2024 at 1:42 PM, ND stated that they visited the home every 90 days and when the residents had change of condition. ND stated that they delegated Resident 1's wound care on 11/26/2024. ND stated that they delegated Resident 1's intermittent catheterization to caregivers on 12/02/2024 after they received a new doctor's order. ND stated that they emailed ND's documentations to the home after their visits. ND added that the AFH should have printed them out and keep them in the Resident 1's records. ND stated that they did not send Resident 1's 11/26/2024's ND document to the AFH.

Email received on 12/18/2024, from ND showed ND Resident 1's ND documentation dated 11/26/2024.

In an interview, on 12/18/2024 at 2:45 PM, Staff B stated that ND emailed their documentations to the AFH. Staff B stated that they did not print the ND's documentations from their email. They stated that they would made change in their administrative practice of printing and filling documentations into residents' records.

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, COZIE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 1-8-2025 .

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

Njeri Waiharo — Provider (or Representative)

1-8-2025 — Date