



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

LILIANA AND PETRUFLORIN PETRESCU
SERENITY HEIGHTS
17016 40TH AVE W
LYNNWOOD, WA 98037

RE: SERENITY HEIGHTS License # 752293

Dear Provider:

This letter addresses Compliance Determination(s) 34303 (Completion Date 12/22/2023) and 33218 (Completion Date 12/06/2023).

The Department completed a follow-up inspection of your Adult Family Home on 12/22/2023 and found that you have corrected the violations listed in the Full report dated 12/06/2023. Your home is back in compliance as of 12/11/2023 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 388-76-10465-2, WAC 388-76-10465-2-a, WAC 388-76-10465-2-b, WAC 388-76-10465-2-c, WAC 388-76-10465-3, WAC 388-76-10465-3-a, WAC 388-76-10465-3-b

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

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



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Statement of Deficiencies	License # 752293	Compliance Determination # 33218
Plan of Correction	SERENITY HEIGHTS	Completion Date
Page 1 of 4	Licensee: LILIANA AND PETRUFLORIN PETRESCU	12/06/2023

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 11/29/2023 and 11/29/2023 of:
SERENITY HEIGHTS
17016 40TH AVE W
LYNNWOOD, WA 98037

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.

Renee Bourque
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.

Statement of Deficiencies License #: 752293 Compliance Determination # 33218
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Page 2 of 4 Licensee: LILIANA AND PETRUFLORIN PETRESCU 12/06/2023

LILIANA PETRESCU OWNER
Provider (or Representative)

12/11/2023
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 9:17 a.m., showed 6 residents resided and received care from the AFH.

In an interview, on 11/27/2023 at 9:50 a.m., Staff A, Provider, reported that Residents 1 and 5 ambulated independently. Staff A stated that Resident 6 operated their wheelchair independently throughout the AFH.

Observation during an environmental tour, on 11/27/2023 at 10:40 a.m., showed toxic substances stored unsecured underneath the kitchen sink. Inside the kitchen cabinet were several cleaners and disinfectant that included: two oven cleaners, one Go Gone adhesive remove, one Easy Off cooktop cleaner, one Comet kitchen cleaner bleach, and one stainless cleaner and polish.

In an interview, on 11/27/2023 at 10:45 a.m., Staff A stated that AFH staff should have been aware that all cleaners and toxic substances needed to be kept in a locked storage.

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, SERENITY HEIGHTS is or will be in compliance with this law and / or regulation on (Date) 12/11/2023

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

Statement of Deficiencies License # 752293 Compliance Determination # 33218
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LILIANA PETRESCU OWNER
Provider (or Representative)

12/11/2023
Date

WAC 388-76-10465 Medication Altering Requirements.

(2) The adult family home must consult with the practitioner or pharmacist before altering a medication and if the practitioner or pharmacist agrees with altering a medication, record the:

- (a) Time;
 - (b) Date; and
 - (c) Name of the person who provided the consultation.
- (3) The home must ensure the resident is aware that a medication is:
- (a) Altered; and/or
 - (b) Put in the resident's food or drink.

This requirement was not met as evidenced by:

Based on observation, interview, and records review, the Adult Family Home (AFH) failed to consult with a physician or a pharmacist before crushing medications for 1 of 2 sampled residents (Resident 6). This failure placed Resident 6 at risk of not getting the full effect of their medications in the event the medications were not supposed to be crushed.

Finding included...

Resident record review showed the AFH admitted Resident 6 on [REDACTED] 2016. Resident 6's Assessment and Negotiated Care Plan (NCP), signed and dated on 02/17/2023, showed the AFH would provide medication management and nurse delegation, which follows the doctor's "order regarding use of prescribed medications." Resident 6's NCP marked "Swallows pill in whole with liquid." Further review showed that Resident 6's NCP did not indicate "needs pill crushed (requires) doctor order."

Observation, on 11/29/2023 at 12:35 p.m., showed Staff C, Caregiver, crushed Resident 6's Magnesium (a mineral supplement used to treat constipation, lowering blood pressure and blood sugar). Further observation showed Staff C mixed the crushed Magnesium tablet in apple sauce and provided Resident 6 with the medication for self-administration.

Record review of Resident 6's November 2023 Medication Log (ML) showed Magnesium Oxide, 400 milligram tablets, take 1 tablet every day at noon. Resident 6's ML did not state to crush the Magnesium.

Statement of Deficiencies

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Licensee: LILIANA AND PETRU FLORIN PETRESCU

12/06/2023

In an interview, on 11/29/2023 at 12:55 p.m., when asked about an order to crush the medication, Staff A, Provider, stated that they crushed Resident 6's medications last year due to Resident 6's swallowing issues. Staff A reviewed Resident 6's current NCP and stated that Resident 6 no longer needed to have their medications crushed.

In an interview, on 11/29/2023 at 1:20 p.m., Staff C stated that they made a mistake and forgot that Resident 6's medication should not be crushed.

In an interview, on 11/29/2023 at 1:45 p.m., Resident 6 stated that they can take a whole pill and they preferred their medications not be crushed.

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, SERENITY HEIGHTS is or will be in compliance with this law and / or regulation on (Date) 12/11/2023.

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

LILIANA PETRESCU OWNER

Provider (or Representative)

12/11/2023

Date