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

ESKADAR GEMETYLLEW
MARTHA LAKE ADULT FAMILY HOME
809 167TH PL SW
LYNNWOOD, WA 98037

RE: MARTHA LAKE ADULT FAMILY HOME License # 752352

Dear Provider:

This letter addresses Compliance Determination(s) 40948 (Completion Date 05/07/2024) and 38345 (Completion Date 04/17/2024).

The Department completed a follow-up inspection of your Adult Family Home on 05/07/2024 and found that you have corrected the violations listed in the Complaint report dated 04/17/2024. Your home is back in compliance as of 04/24/2024 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 388-76-10445-1, WAC 388-76-10445-2, WAC 388-76-10445, WAC 388-76-10485-1

The Department staff who did the on-site verification:
Spomenka Hodzic, 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

Residential Care Services
Investigation Summary Report

Provider/Facility: MARTHA LAKE ADULT FAMILY HOME
License/Cert.#: 752352
Compliance Determination #: 38345
Investigator: Spomenka Hodzic
Provider Type: Adult Family Home
Intake ID: 119434
Region/Unit #: RCS Region 2 / Unit I
Investigation Date(s): 03/14/2024 through 04/17/2024
Complainant Contact Date(s): 04/17/2024

Allegation(s):

1. The Adult Family Home (AFH) failed to answer call lights and provide care and services to residents in a timely manner.

Investigation Methods:

Sample:	Total residents: 4 Resident sample size: 2 Closed records sample size: 0
Observations:	Adult Family Home Environment, Resident Appearance, Resident to Staff Interaction, Direct Resident Care.
Interviews:	Residents, Staff, Provider, Resident Representatives.
Record Reviews:	Resident Records, AFH Policies and Procedures, Medications, Third Party Provider Notes, Department's records.

Investigation Summary:

1. Observation showed AFH had four residents in their care. Interaction between residents and AFH was caring and appropriate. Most residents were observed being in the common area with the caregiver where their calls and requested were immediately addressed by the AFH staff. In an interview the Sample Resident (SR) reported that their call light was answered by the caregivers and in a timely manner (few minutes). In an interview, the AFH staff member reported that they always answered call lights as soon as they were able. In an interview, the Provider, reported that call system for their AFH and next door AFH did not interfere any longer and because their radio frequency had been adjusted. Please refer to the Statement of Deficiency (SOD) written on 4/17/2024.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

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20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

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 03/14/2024 and 03/14/2024 of:

MARTHA LAKE ADULT FAMILY HOME
809 167TH PL SW
LYNNWOOD, WA 98037

This document references the following complaint number(s): 119434

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:

Spomenka Hodzic, 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

04/18/2024
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.

Eskadar Gemetyllew
Provider (or Representative)

4/24/24
Date

WAC 388-76-10445 Medication Independent Self-administration. The adult family home must ensure residents who have medication assistance assessed as independent self-administration:

(1) Administer their own medications; and

(2) Are allowed to keep their prescribed and over-the-counter medications securely locked in either their room or another agreed upon area if documented in the resident negotiated care plan.

This requirement was not met as evidenced by:

Based on observation, interviews, and record review Adult Family Home (AFH) failed to ensure 1 of 4 residents (Resident 1) medications were kept in the locked storage and inaccessible to other residents, as required. This failure placed 3 of 4 Residents (Resident 2, 3, and 4) at risk of harm from having access to medications that were not prescribed to them.

Findings included...

Observation, on 03/14/2024 at 10:30 AM, showed four residents lived in the AFH and were receiving care and various services from the AFH staff.

Record review of Resident 1's negotiated care plan (NCP), dated 04/29/2024, showed Resident 1 was admitted to the AFH on [redacted]/2023 with multiple medical diagnoses including [redacted] ([redacted]) and [redacted] ([redacted]). Resident 1's NCP showed Resident 1 required assistance with medications (oral, topical, eye drops and inhalers).

Record review of "Registered Nurse Referral and Communication note" and assessment, dated 04/14/2023 and 04/20/2023, indicated Resident 1 was able to "independently take medications, topical cream, and nasal spray" and Registered Nurse delegation (RND) was not needed for Resident 1.

Observation, on 03/14/2024 at 10:30 AM, during general tour showed Resident 1 kept some of their medications unlocked by their bedside.

The following medications were observed by Resident 1's bedside:

- Incruse Ellipta 62.5mcg inhale one puff into the lungs every morning (given for lung disease)
- Diclofenac Sodium 1% gel apply 4g daily four times to affected areas (given for pain)
- Fluticasone Propionate 50mcg nasal spray to each nostril twice a day (giver for runny nose)
- Cal-Gest 500mg chew tables two tablets once a day (indigestion and calcium supplement)

Record review of Resident 1's Medication log, dated March 2024, showed AFH Staff had been signing that they had assisted Resident 1 with all their medications.

In an interview, on 03/14/2024 at 11:09 AM, Resident 1 stated that they had these medications by their bedside for a long time and that they were able to take these medications on their own without any issues.

In an interview, on 03/14/2024 at 11:58 AM, Staff B, Co-Provider, stated that they would work with their RND to get a lock box for Resident 1 to keep their medications locked in their room. Staff B stated that they would also work with Resident 1's medical prescriber to get orders from them so that Resident 1 could keep their medications in the room by their bedside.

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, MARTHA LAKE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 4/24/24 .

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

Eskadar Gemetyllew — Provider (or Representative)

4/24/24 — 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, interviews, and record review the Adult Family Home (AFH) failed to ensure 1 of 4 residents (Resident 4) medications were kept in the locked storage and inaccessible to other residents, as required. This failure placed 3 of 4 Residents (Resident

1, 2, and 3) at risk of harm from having access to medications that were not prescribed to them.

Findings included...

Observation, on 03/14/2024 at 10:30 AM, showed four residents lived in the AFH and were receiving care and various services from the AFH staff.

Record review of Resident 4's negotiated care plan (NCP), dated 10/02/2023, showed that Resident 4 was admitted to the AFH on [redacted]/2018 with multiple medical diagnoses including [redacted] and [redacted]. Resident 4's NCP showed Resident 4 required assistance with medications.

Record review of Registered Nurse Delegator (RND), dated 12/27/2023, showed Resident 4 required assistance with topical cream application.

Observation, on 03/14/2024 at 10:30 AM, during a general tour showed the AFH staff kept some of Resident 4's medications unlocked in Resident 4's room.

The following medications were observed in Resident 4's room:
- Asper-cream-Lidocaine 4% apply topically twice a day to affected areas (for pain).

In an interview on 03/14/24 at 10:50 AM Staff D, Caregiver, reported that they had not known why Resident 4's prescription medication was kept unlocked in their room. Staff D stated that they were new employee and still learning. Staff D immediately stood up and removed observed medication and placed it into the 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, MARTHA LAKE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 4/24/24 .

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

Eskadar Gemetyllew — Provider (or Representative)

4/24/24 — Date