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

FOREST PARK ADULT FAMILY HOME INC

FOREST PARK ADULT FAMILY HOME INC
17522 SE 338TH ST
AUBURN, WA 98092

RE: FOREST PARK ADULT FAMILY HOME INC License # 752403

Dear Provider:

This letter addresses Compliance Determination(s) 57192 (Completion Date 03/31/2025) and 55270 (Completion Date 02/24/2025).

The Department completed a follow-up inspection of your Adult Family Home on 03/31/2025 and found that you have corrected the violations listed in the Full report dated 02/24/2025. Your home is back in compliance as of 03/10/2025 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 388-76-10490-1, WAC 388-76-10810-1, WAC 388-76-10810-2-e, WAC 388-76-10840-1-d

The Department staff who did the on-site verification:
Michele Grumke, AFH Licensor

If you have any questions, please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong, Community Field Manager
Region 2, Unit G
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

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

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 02/24/2025 of:

FOREST PARK ADULT FAMILY HOME INC
17522 SE 338TH ST
AUBURN, WA 98092

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 inspected the Adult Family Home:

Michele Grumke, AFH Licensor

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.

Dahl Kim — Residential Care Services

03/04/2025 — 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.

Florica Mihaila — Provider (or Representative)

3-10-25 — Date

WAC 388-76-10490 Medication disposal Written policy Required. The adult family home must have and implement a written policy addressing the disposal of unused or expired resident medications. Unused and expired medication must be disposed of in a safe manner for:

(1) Current residents living in the adult family home; and

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to implement their own medication disposal policy for 1 of 2 sampled residents (Resident 3). This failure placed Resident 3 at risk of a negative reaction or worsening of condition.

Findings included...

A review of the AFH's undated "Negotiated Care Plan" showed the expired medication was returned to the pharmacy.

During a visit on 02/24/2025 at 8:45 AM, observation showed Resident 3 lived in and received medication assistance from the AFH.

Observation on 02/24/2025 at 11:57 AM showed Staff A, Entity Representative/Resident Manager, provided department staff with a refrigerated bottle of Florodix 20 milliliters (ml), take 20 ml by mouth every other day for iron deficiency for Resident 3. Further observation showed Florodix 20 ml had an expiration date of 06/2024.

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.

Provider (or Representative) _____ Date _____

WAC 388-76-10490 Medication disposal Written policy Required. The adult family home must have and implement a written policy addressing the disposal of unused or expired resident medications. Unused and expired medication must be disposed of in a safe manner for:

(1) Current residents living in the adult family home; and

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to implement their own medication disposal policy for 1 of 2 sampled residents (Resident 3). This failure placed Resident 3 at risk of a negative reaction or worsening of condition.

Findings included…

A review of the AFH's undated "Negotiated Care Plan" showed the expired medication was returned to the pharmacy.

During a visit on 02/24/2025 at 8:45 AM, observation showed Resident 3 lived in and received medication assistance from the AFH.

Observation on 02/24/2025 at 11:57 AM showed Staff A, Entity Representative/Resident Manager, provided department staff with a refrigerated bottle of Florodix 20 milliliters (ml), take 20 ml by mouth every other day for iron deficiency for Resident 3. Further observation showed Florodix 20 ml had an expiration date of 06/2024.

In an interview on 02/24/2025 at 11:58 AM, Staff A stated that Resident 3's family provided the Florodix 20 ml for the resident's use. Staff A further stated they were unaware the medication had expired.

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, FOREST PARK ADULT FAMILY HOME INC is or will be in compliance with this law and / or regulation on (Date) 3-10-25 .

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

Florica Mihaela Flora Quilcot — Provider (or Representative)

3-10-25 — Date

WAC 388-76-10810 Fire extinguishers.

(1) The adult family home must have an approved five pound 2A:10B-C rated fire extinguisher on each floor of the home.

(2) The home must ensure fire extinguishers are:

(e) Not located behind a locked door.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure the fire extinguisher was not located behind a locked door. This failure placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk of harm or serious injury in the event of a fire.

Findings included...

During a visit on 02/24/2025 at 8:45 AM, observation showed Residents 1, 2, 3, and 4 lived in and received care from the AFH.

Observation on 02/24/2025 at 9:45 AM showed Staff A, Entity Representative/Resident Manager, unlocked a door that led to a storage area and the back door. Further observation showed a fire extinguisher was mounted on the wall.

In an interview on 02/24/2025 at 9:46 AM, Staff A stated that they had been told it was okay to keep the fire extinguisher behind the locked door. Staff A further stated that it

In an interview on 02/24/2025 at 11:58 AM, Staff A stated that Resident 3's family provided the Florodix 20 ml for the resident's use. Staff A further stated they were unaware the medication had expired.

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, FOREST PARK ADULT FAMILY HOME INC is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____
Provider (or Representative) Date

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Findings included…

During a visit on 02/24/2025 at 8:45 AM, observation showed Residents 1, 2, 3, and 4 lived in and received care from the AFH.

Observation on 02/24/2025 at 9:45 AM showed Staff A, Entity Representative/Resident Manager, unlocked a door that led to a storage area and the back door. Further observation showed a fire extinguisher was mounted on the wall.

In an interview on 02/24/2025 at 9:46 AM, Staff A stated that they had been told it was okay to keep the fire extinguisher behind the locked door. Staff A further stated that it

used to be kept in the kitchen.

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, FOREST PARK ADULT FAMILY HOME INC is or will be in compliance with this law and / or regulation on (Date) 3-10-25 .

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

Monica Mihalko Jessica Quitoriano 3-10-25

Provider (or Representative) Date

WAC 388-76-10840 Emergency food supply.

(1) The adult family home must have an on-site emergency food supply that:

(d) Is sufficient, safe, sanitary, and uncontaminated.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure their emergency food supply was safe for 4 of 4 residents (Residents 1, 2, 3, and 4) and 3 of 3 staff (Staff A, Entity Representative/Resident Manager, Staff B, Caregiver, and Staff C, Caregiver). This failure placed all residents and staff at risk of food borne illness from consuming unsafe food items in an emergency.

Findings included...

During a visit on 02/24/2025 at 8:45 AM, observation showed Residents 1, 2, 3, and 4 lived in and received care from the AFH. Further review showed Staff A, Staff B, and Staff C worked in the AFH.

Observation on 02/24/2025 at 9:55 AM showed, 5 cans of simply Campbell's chicken noodle soup with expiration dates of 07/25/2024. Further observation showed 3 cans of simply Campbell's chicken noodle soup with expiration dates of 08/12/2023.

In an interview on 02/24/2025 at 9:56 AM, Staff A stated that they had just bought the soup and could not believe it was expired. Staff A further stated that they checked the emergency food regularly for expired items.

used to be kept in the kitchen.

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, FOREST PARK ADULT FAMILY HOME INC is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____
Provider (or Representative) Date

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This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure their emergency food supply was safe for 4 of 4 residents (Residents 1, 2, 3, and 4) and 3 of 3 staff (Staff A, Entity Representative/Resident Manager, Staff B, Caregiver, and Staff C, Caregiver). This failure placed all residents and staff at risk of food borne illness from consuming unsafe food items in an emergency.

Findings included…

During a visit on 02/24/2025 at 8:45 AM, observation showed Residents 1, 2, 3, and 4 lived in and received care from the AFH. Further review showed Staff A, Staff B, and Staff C worked in the AFH.

Observation on 02/24/2025 at 9:55 AM showed, 5 cans of simply Campbell's chicken noodle soup with expiration dates of 07/25/2024. Further observation showed 3 cans of simply Campbell's chicken noodle soup with expiration dates of 08/12/2023.

In an interview on 02/24/2025 at 9:56 AM, Staff A stated that they had just bought the soup and could not believe it was expired. Staff A further stated that they checked the emergency food regularly for expired items.

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

Florica Mihaila Florica Mihaila 3-10-25

Provider (or Representative) Date

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, FOREST PARK ADULT FAMILY HOME INC is or will be in compliance with this law and / or regulation on (Date)_____ .

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

_____ _____

Provider (or Representative) Date

Forest Park Adult Family Home

Negotiated Care Plan

When a resident is discharged from Forest Park AFH, all of the medication must be destroyed in the presence of a medical professional (RN). They are then crushed and fused into cat litter or coffee grinds. Otherwise, they will be given to the family aiong with there belongins, document all the medication Sign and dlate. Even if the medication is Expired. Ready Med. Pharmacy will pick up the remain medication and disposed them too.

Florica Mihaila
Provider

2/26/25 - The expired medication (vitamin) was return back to the family POA dougtter of the resident [redacted] [redacted] She requested to have the medication D/C. We have a DR. orden in place.

Provider FLORICA Mihaile

POA - Daughter [redacted]

I [redacted] P.O.A. FOR [redacted], PICKED UP THIS EXPIRED MEDICATION (VITAMIN) ON 2/26/25 [redacted]

I Florica Mihaila provider at Forest Park AFH corrected the citation on the date 2-24-25 while the licensor was still present..

1. The fire extinguisher was mounted in place in the kitchen
2. I went throw my emergenay food supply and made sure nothing else was expired
3. I contacted [redacted] daughter (PoA) on 2-24-25 that her vitamin supplement was expired and she picked it up on 2-26-25 and signed the Negotiated Care plan. An order for D/C the vitamin supplement is in place.

Best regards,

FLORICA MIHAILA
Florica Mihaila 3/10/25