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

MCAFH INCORPORATED
MACADAM COURT 2
13534 MACADAM RD S #100
TUKWILA, WA 98168

RE: MACADAM COURT 2 License # 752537

Dear Provider:

This letter addresses Compliance Determination(s) 60094 (Completion Date 05/23/2025) and 56859 (Completion Date 04/09/2025).

The Department completed a follow-up inspection of your Adult Family Home on 05/23/2025 and found that you have corrected the violations listed in the Full report dated 04/09/2025. Your home is back in compliance as of 04/30/2025 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, WAC 388-76-10490-1, WAC 388-76-10490-2, WAC 388-76-10430-1, WAC 388-76-10430-2-d, WAC 388-76-10355-1, WAC 388-76-10355-2, WAC 388-76-10355-3

The Department staff who did the on-site verification:
Angelica Rios, ALF 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

Statement of Deficiencies	License #: 752537	Compliance Determination # 56859
Plan of Correction	MACADAM COURT 2	Completion Date
Page 1 of 6	Licensee: MCAFH INCORPORATED	04/09/2025

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 the unannounced on-site full inspection on 03/25/2025 of:
MACADAM COURT 2
13534 MACADAM RD S #100
TUKWILA, WA 98168

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Angelica Rios, ALF 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

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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

4-11-2025
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)

4/16/2025
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

(2) Residents who have left the home.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to have a written policy to address the disposal of unused or expired medications for 1 of 2 sampled residents (Resident 1). This failure placed Resident 1 at risk for side effects or decreased action from taking an expired medication.

Findings included...

Review of the undated AFH medication disposal policy showed there was no plan for the disposal of expired resident medications. Further review showed the medication disposal policy did not address the disposal of unused medication for current residents.

Review of Resident 1's March 2025 pharmacy-generated MAR, showed that Resident 1 was prescribed Geri-Tussin 100 mg cough syrup, take 10 milliliters (ml) by mouth every 4 hours as needed for cough.

Observation on 03/25/2025 at 2:45 PM, showed Resident 1's medication container contained a bottle of Geri-Tussin cough syrup with an expiration date of 03/22/2025. Further observation showed there was not another bottle of Geri-Tussin available.

During an interview on 03/25/2025 at 2:50 PM, Staff A, Entity Representative, stated that they did not realize the medication was expired because Resident 1 had not used the medication recently. Staff A further stated that they would discard the expired bottle of cough syrup and place an order with the pharmacy for a new bottle to be delivered.

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, MACADAM COURT 2 is or will be in compliance with this law and / or regulation on (Date) 4/30/2025 .

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

Provider (or Representative) Date 4/16/2025

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident:

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure 1 of 2 sampled residents (Resident 1) had their prescribed medications available. Additionally, the AFH failed to ensure medications were received as prescribed for 1 of 2 sampled residents (Resident 5). These failures placed Resident 1 at risk of worsening conditions from missing prescribed medication and placed Residents 5 at risk of medication errors.

Findings included...

During a visit on 03/25/2025 at 10:40 AM, observation showed Resident 1 and Resident 5 lived in and received medication assistance from the AFH.

Resident 1

Review of Resident 1's March 2025 pharmacy-generated MAR, showed that Resident 1 was prescribed Geri-Tussin 100 milligram (mg) cough syrup, take 10 milliliters (ml) by mouth every 4 hours as needed for cough.

Observation on 03/25/2025 at 2:45 PM, showed Resident 1's medication container contained a bottle of Geri-Tussin cough syrup with an expiration date of 03/22/2025. Further observation showed there was no other bottle of Geri-Tussin available.

During an interview on 03/25/2025 at 2:50 PM, Staff A stated that they did not realize the medication was expired. Staff A further stated that they would discard the expired bottle of cough syrup and place an order with the pharmacy for a new bottle to be delivered.

Resident 5

Review of Resident 5's March 2025 Pharmacy-generated Medication Administration Record (MAR), showed Resident 5 was prescribed Latanoprost 0.005 percent (%) eye drops, instill 1 drop into both eyes every evening for Glaucoma (an eye disease that can lead to vision loss), discard bottle 42 days after opening.

Observation on 03/25/2025 at 2:50 PM, showed Resident 5's medication storage container contained one opened bottle of Latanoprost 0.005% eye drops that had no record of when it was opened. Further observation of Resident 5's medication storage container showed six unopened bottles of Latanoprost 0.005% eye drops.

During an interview on 03/25/2025 at 3:01 PM, Staff A, Entity Representative, stated that they did not know how long the opened bottle of Resident 5's Latanoprost eye drops was being used. Staff A further stated that medication open date should have been written on the bottle.

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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, MACADAM COURT 2 is or will be in compliance with this law and / or regulation on (Date) 4/30/2025.

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

Provider (or Representative) — Date: 4/14/2025

WAC 388-76-10355 Negotiated care plan. The adult family home must use the resident assessment and preliminary care plan to develop a written negotiated care plan. The home must ensure each resident's negotiated care plan includes:

(1) A list of the care and services to be provided;

(2) Identification of who will provide the care and services;

(3) When and how the care and services will be provided;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure the Negotiated Care Plan (NCP) for 1 of 2 sampled residents (Resident 1) included all care and services they required. This failure placed Resident 1 at risk of unmet care needs.

Findings included...

During a visit on 03/25/2025 at 10:40 AM, observation showed Resident 1 lived in and received care from the AFH.

Review of Resident 1's most recent annual assessment dated 02/24/2025, showed that Resident 1 was in the Meaningful Day program (a program that offers individualized activities to reduce challenging behaviors). Further review of Resident 1's assessment showed the AFH staff needed to assist Resident 1 with walking and band exercises three times a day.

Review of Resident 1's NCP dated 02/27/2025, showed no information that Resident 1 was in the Meaningful Day program. Further review showed no information on daily exercises for Resident 1.

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During an interview on 03/25/2025 at 1:51 PM, Staff C, Caregiver, stated that they did not know Resident 1 was in the Meaningful Day program. Staff C further stated that they had not seen a meaningful day schedule for Resident 1.

During an interview on 03/25/2025 at 4:30 PM, Staff A, Entity Representative, stated that they would update Resident 1's NCP to include information on the Meaningful Day program and the daily exercises included in Resident 1's assessment. Staff A further stated they would ensure the meaningful day calendars were available to staff.

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, MACADAM COURT 2 is or will be in compliance with this law and / or regulation on (Date) 4/30/2025.

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

Provider (or Representative) — Date: 4/14/2025