STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Soul Winner Adult Family Home LLC

Soul Winner Adult Family Home LLC
1415 E 61st Street
Tacoma, WA 98404

RE: Soul Winner Adult Family Home LLC License # 752994

Dear Provider:

This letter addresses Compliance Determination(s) 44192 (Completion Date 07/16/2024) and 41535 (Completion Date 05/29/2024).

The Department completed a follow-up inspection of your Adult Family Home on 07/16/2024 and found that you have corrected the violations listed in the Full report dated 05/29/2024. Your home is back in compliance as of 06/20/2024 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 388-76-10430-1, WAC 388-76-10430-2-c, WAC 388-76-10430-2-d

The Department staff who did the on-site verification:
Emily Vincent, AFH Licensor

If you have any questions, please contact me at (253)983-3826.

Sincerely,

Lisa Cramer

Lisa Cramer, Field Manager
Region 3, Unit A
Residential Care Services

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

PO Box 99250, Lakewood, WA 98496

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 05/17/2024 and 05/17/2024 of:

Soul Winner Adult Family Home LLC
1415 E 61st Street
Tacoma, WA 98404

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:

Emily Vincent, AFH Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit A
PO Box 99250
Lakewood, WA 98496

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.

Lisa Cramer — Residential Care Services

05/30/2024 — 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.

Ezabella Gathua
Provider (or Representative)

06/03/2024
Date

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:

(c) Medication log is kept current as required in WAC 388-76-10475 ;

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on observation, interviews and record reviews, the adult family home (AFH) failed to ensure a safe medication system for 1 of 6 residents (Resident 4) when Resident 4 did not receive medications, vitamins and supplements as ordered. In addition, caregivers misplaced Resident 4's original medication administration record (MAR) and made documentation errors when they created a new one. These failures placed Resident 4 at risk for health complications.

Findings included...

On 05/17/2024 at 12:15 PM, an observation of Resident 4's medication supply, showed no evidence of five routine medications/vitamins/supplements listed as scheduled daily on Resident 4's most recent medication orders from 04/19/2024, including Ascorbic Acid (Vitamin C, an anti-oxidant that protects the body from free radicals/molecules produced when the body breaks down toxins), Famotidine (Pepcid, a stomach acid-reducing treatment for heartburn and ulcers), Melatonin (a hormone used as a supplement to control sleep-regulation), Metamucil (a fiber supplement used to treat constipation by increasing stool bulk and movement through the bowels), and Refresh eye drops (an eye lubricant used to treat dry and/or irritated eyes).

Review of Resident 4's May 2024 MAR, showed the AFH used two separate MARs during the month to document Resident 4's medication administration: one provided by their pharmacy and one created by the AFH. On both May 2024 MARs, caregivers circled their initials to show the Ascorbic Acid, Famotidine, Melatonin, Metamucil, and Refresh eye drops were not administered between 05/01/2024 and 05/16/2024. Review of Resident 4's April 2024 MAR showed circled initials beginning 4/19/2024 (when Resident 4's primary care provider/PCP ordered the Ascorbic Acid, Famotidine, Melatonin, Metamucil, and Refresh eye drops) through the end of April 2024, indicating Resident 4 had not received

the Ascorbic Acid, Famotidine, Melatonin, Metamucil or Refresh eye drops since they were prescribed.

On 05/17/2024 at 12:30 PM, in an interview, the AFH Provider said after Resident 4's appointment with their PCP in 04/2024, the Provider received Famotidine 20 milligram (mg) tablets from Resident 4's pharmacy, but Resident 4's representative told the Provider they did not want Resident 4 to take the Famotidine. After the Provider reviewed the new medication orders, they requested Resident 4's representative get an order to discontinue the Famotidine and other vitamins/supplements that the representative did not want Resident 4 to receive, because the AFH needed to verify the PCP approved their discontinuation.

On 05/29/2024 at 4:30 PM, in an interview, when asked whether the Provider had contacted Resident 4's PCP themselves to get a discontinuation order, the Provider said they had not because Resident 4's representative was the one who took Resident 4 to their appointments and communicated with their PCP. The Provider said they reminded Resident 4's representative each time they visited the home (weekly or at least 3 times) to get an order to discontinue Resident 4's Famotidine, Melatonin, and Metamucil, but the Provider never received a discontinuation order.

Review of Resident 4's April 2024 and May 2024 MARs showed caregivers initialed Resident 4's order for Energen-C (a daily immune support packet with 1000 mg of Vitamin C and other anti-oxidants) each morning between 4/19/2024 and 5/16/2024. Caregivers initialed Resident 4's order for Ascorbic Acid (Vitamin C) 500 mg, 2 tablets every morning (1000 mg total) between 4/19/2024 and 5/16/2024, but there was no Ascorbic Acid found in Resident 4's medication supply.

On 05/29/2024 at 4:30 PM, in an interview, when asked about Resident 4's Ascorbic Acid order, the Provider was unsure of whether Resident 4 received their Ascorbic Acid as prescribed because there may have been confusion about the Ascorbic Acid order. Caregivers gave Resident 4 a packet of Emergen-C each morning, but Resident 4's representative had not supplied additional Ascorbic Acid tablets. The Provider said they requested Resident 4's representative purchase a new bottle of Refresh eye drops because the drops provided by Resident 4's representative were expired. The Provider said this was why caregivers had not administered Resident 4's Refresh eye drops.

Review of Resident 4's May 2024 MARs (the pharmacy MAR and AFH MAR), showed Resident 4 received a Dulcolax 10 mg suppository once daily at 8:00 AM and once daily at 8:00 PM between 05/01/2024 and 05/16/2024. Review of Resident 4's 04/19/2024 medication orders showed Resident 4 had an order for one suppository daily at 8:00 AM, but the order noted it was okay to give the suppository at bedtime instead (not in addition).

Review of Resident 4's May 2024 MARs, showed duplicated administration of several of Resident 4's vitamins and supplements between 05/01/2024 and 05/16/2024, including Emergen-C, Vitamin D3 (used to assist the body's absorption of Calcium and Phosphate

from food), Doterra Terrazyme (a digestive enzyme), Balance of Nature Fiber and Spice (a dietary supplement), Balance of Nature Veggie capsules (a dietary supplement), Balance of Nature Fruit capsules (a dietary supplement), and coconut oil (a skin softener).

On 05/29/2024 at 4:30 PM, in an interview, when asked about the rationale for two MARs in May 2024, the Provider said the caregivers misplaced the original pharmacy MAR and did not find it again until 05/16/2024. The Provider created the AFH MAR to document Resident 4's May 2024 medication administration, which they used daily until they found the pharmacy MAR. On 05/16/2024, the Provider had caregivers initial the pharmacy MAR between 05/01/2024 and 05/16/2024 to record the medications they administered, because the Provider felt it was a more accurate MAR with more detailed information than the AFH MAR. When addressing the documentation errors created by the duplicated MAR, the Provider said they did not recognize that Resident 4's Dulcolax suppository was documented as administered twice a day (once in the morning on the AFH MAR and once in the evening on the pharmacy MAR) because caregivers administered it in the morning each day. The Provider did not recognize that the double documentation of Resident 4's medications created an erroneous record of the actual amount of medication, vitamins and supplements that Resident 4 received each day.

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, Soul Winner Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 06/20/2024.

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

EZABELLA GATHUA — Provider (or Representative)

06/03/2024 — Date

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Soul Winner Adult Family Home LLC
Soul Winner Adult Family Home LLC
1415 E 61st Street
Tacoma, WA 98404

RE: Soul Winner Adult Family Home LLC # 752994

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 05/29/2024 and found that your home does not meet the Adult Family Home Licensing requirements.

The Department:

- Wrote the enclosed report; and
- May take licensing enforcement action based on many deficiency listed on the enclosed report; and
- May inspect the home to determine if you have corrected all deficiencies; and
- Expects all deficiencies to be corrected within the timeframe accepted by the department.

You Must:

- Begin the process of correcting the deficiency or deficiencies immediately;
- Contact the Field Manager for clarifications related to the Statement of Deficiencies (SOD);

- Within 10 calendar days after you receive this letter, complete and return the enclosed 'Plan/Attestation Statement';
  - o Sign and date the enclosed report;
  - o For each deficiency, indicate the date you have or will correct each deficiency;
  - o Mail the Plan/Attestation Statement and report with original signatures to:

Lisa Cramer, Field Manager
Residential Care Services
Region 3, Unit A
PO Box 99250

Lakewood, WA 98496

• Complete correction(s) within 45 days, or sooner if directed by the Department, after review of your proposed correction dates.
• Have your plan approved by the Department.

Consultation(s):
In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 388-76-10255 Infection control. The adult family home must develop and implement an infection control system that:

(1) Uses nationally recognized infection control standards;

(3) Follows the requirements of chapter 49.17 RCW, Washington Industrial Safety and Health Act to protect the health and safety of each resident and employees; and

The adult family home (AFH) had sufficient personal protective equipment (PPE) and caregivers had basic knowledge of infection prevention and control practices, but the home did not have a written Respiratory Protection Program (RPP). Some AFH caregivers were not fit-tested for N-95 respirators as required by the Occupational Health and Safety Administration (OSHA). The AFH Provider completed a written RPP and ensured all caregivers were fit-tested for respirators before the completion of the licensing inspection.

WAC 388-76-10265 Tuberculosis Testing Required.

(1) The adult family home must develop and implement a system to ensure the following persons have tuberculosis testing within three days of employment:

(d) Caregiver;

The adult family home (AFH) did not ensure Caregiver C, who was hired while tuberculosis (TB, an infectious respiratory disease) testing requirements were waived, was tested for TB before the waiver expired. Caregiver C had a negative QuantiFERON (QFN) blood test result less than a year before their employment, but did not have an additional TB test until nine months after the waiver expired.

WAC 388-76-10320 Resident record Content. The adult family home must ensure that each resident record contains, at a minimum, the following information:

(10) A current inventory of the resident's personal belongings dated and signed by:

(a) The resident; and

The adult family home (AFH) did not ensure the AFH Provider signed and dated Resident 6's personal belongings inventory when Resident 6 moved into the AFH. The Provider signed and dated Resident 6's personal belongings inventory before the completion of the licensing inspection.

WAC 388-76-10375 Negotiated care plan Signatures Required. The adult family home must ensure that the negotiated care plan is agreed to and signed and dated by the:

(1) Resident; and

The adult family home (AFH) did not ensure Resident 6's negotiated care plan (NCP) was signed within 30 days of Resident 6's admission to the AFH, because Resident 6 was unable to read and comprehend the NCP and did not have a legal representative in place to do so. The AFH Provider documented the reason why the NCP was not signed next to the signature line on the NCP before the completion of the licensing inspection.

WAC 388-76-10532 Resident rights-Department standardized disclosure forms.

(2) The adult family home must complete the disclosure of charges form as provided by the department. The home must:

(c) Keep a copy that has been signed and dated by the resident in the resident's record.

The adult family home (AFH) did not ensure Resident 6 signed the home's standardized Disclosure of Charges form before Resident 6 moved into the home, because Resident 6 was unable to read and comprehend the disclosure and did not have a legal representative in place to do so. The AFH Provider documented the reason why the Disclosure of Charges was not signed on the form before the completion of the licensing inspection.

WAC 388-112A-0610 Who in an adult family home is required to complete continuing education training each year, how many hours of continuing education are required, and when must they be completed?

(1) The continuing education training requirements that apply to certain individuals working in adult family homes are described below.

(f) Continuing education must include one half hour per year on safe food handling in adult family homes as described in RCW 70.128.250 for a long-term worker who does not maintain a food handler's permit, and completed basic or modified basic caregiver training before June 30, 2005. A long-term* care worker who completed basic or modified basic training after June 30, 2005 is not required to have a food handler's permit.

WAC 388-76-10146 Qualifications Training and home care aide certification.

(2) The adult family home must ensure all adult family home caregivers, entity representatives, and resident managers hired on or after January 7, 2012, meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(e) Continuing education.

The adult family home (AFH) did not ensure Caregiver B completed 0.5 hour of safe food handling continuing education (CE) before their birthday in 2023, or had a valid Washington (WA) state food worker card. The AFH Provider ensured Caregiver B completed training for a WA state food worker card before the completion of the licensing inspection.

WAC 388-112A-0720 What are the CPR and first-aid training requirements?

(1) Adult family homes.

(c) Adult family home long-term care workers must obtain and maintain a valid CPR and first-aid card or certificate as follows:

(i) Within thirty days of beginning to provide care for residents if directly supervised by a fully qualified long-term care worker with a valid first-aid and CPR card or certificate; or

(ii) Before providing care for residents, if not directly supervised by a fully qualified long-term care worker with a valid first-aid and CPR card or certificate.

WAC 388-76-10146 Qualifications Training and home care aide certification.

(2) The adult family home must ensure all adult family home caregivers, entity representatives, and resident managers hired on or after January 7, 2012, meet the long-term care worker training requirements of chapter 388-112A WAC, including but not limited to:

(d) Cardiopulmonary resuscitation and first aid; and

The adult family home (AFH) did not ensure Caregiver C maintained their cardio-pulmonary resuscitation (CPR) and first aid certification as required. The AFH Provider ensured Caregiver C renewed their CPR/first aid certification before the completion of the licensing inspection.

You Are Not:

• Required to submit a plan of correction for the consultation deficiency or deficiencies stated in this letter and not listed on the enclosed report.

You May:

• Ask for a informal dispute resolution meeting, according to the attached 'Informal Dispute Resolution' instructions; and
• Ask questions and provide written information to help clarify or dispute the deficiencies.

• Contact me for clarification of the deficiency or deficiencies found.

If You Have Any Questions:

• Please contact me at (253)983-3826.

Sincerely,

Lisa Cramer

Lisa Cramer, Field Manager
Region 3, Unit A
Residential Care Services

Enclosure

Plan
(Plan of Correction)

You Must:
Return the plan, on the enclosed report, within 10 calendar days after you receive this letter.

Include the following in your plan for each deficiency:
• The date you have or will correct each deficiency; and
• Provide a signature and date certifying that you have or will take corrective measures to correct each cited deficiency.

Send your plan to:
Lisa Cramer, Field Manager
Residential Care Services
Region 3, Unit A
PO Box 99250
Lakewood, WA 98496

INFORMAL DISPUTE RESOLUTION [RCW 70.128]

You May:
Request an Informal Dispute Resolution (IDR) meeting within 10 working days after the date you receive this letter. You **must** use an **'IDR Request Form'** for **each** citation or enforcement you plan to dispute. You can find this form and directions on the IDR Adult Family Home web page at: https://www.dshs.wa.gov/altsa/idr

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Provider Process for Choosing a Panel or Traditional IDR:

You may only choose a **Panel IDR** if you are disputing **three or fewer** citations or enforcement actions. You may choose a **Traditional IDR** regardless of the number of citations or enforcement actions you intend to dispute. If you choose a **Panel IDR**, all documents supporting your dispute must be submitted within **20 working days** after the date you receive this letter. For **Panel IDRs** the program will not consider any documents submitted after the **20 working day deadline**. For **Traditional IDRs** you should submit documents supporting your dispute at least **seven** days prior to the date of the IDR meeting.

Send your request and supporting documents to the address below or email to rcsidr@dshs.wa.gov:

Adult Family Home IDR Program
Residential Care Services

PO Box 45600
Olympia, WA 98504-5600