



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

Abundant Life Lynnwood Inc
Abundant Life Lynnwood Inc
2009 144th PI SW
Lynnwood, WA 98087

RE: Abundant Life Lynnwood Inc License # 753301

Dear Provider:

This letter addresses Compliance Determination(s) 33970 (Completion Date 12/14/2023) and 30592 (Completion Date 10/30/2023).

The Department completed a follow-up inspection of your Adult Family Home on 12/14/2023 and found that you have corrected the violations listed in the Full report dated 10/30/2023. Your home is back in compliance as of 12/14/2023 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 388-76-10530, WAC 388-76-10530-1, WAC 388-76-10530-1-a, WAC 388-76-10530-1-b, WAC 388-76-10530-1-c, WAC 388-76-10530-1-d, WAC 388-76-10530-1-e, WAC 388-76-10530-1-f, WAC 388-76-10530-1-g, WAC 388-76-10530-2, WAC 388-76-10532-2, WAC 388-76-10532-2-a, WAC 388-76-10532-2-b, WAC 388-76-10532-2-c, WAC 388-76-10650, WAC 388-76-10650-1, WAC 388-76-10650-2, WAC 388-76-10650-2-a, WAC 388-76-10650-2-b, WAC 388-76-10650-2-c, WAC 388-76-10650-2-d, WAC 388-76-10480-3, WAC 388-76-10480-4, WAC 388-76-10480-4-a, WAC 388-76-10480-4-b, WAC 388-76-10480-4-c, WAC 388-76-10480-4-d, WAC 388-76-10480-5, WAC 388-76-10490-1, WAC 388-76-10485-1, WAC 388-76-10485-2, WAC 388-76-10485, WAC 388-76-10485-3, WAC 388-76-10475-1, WAC 388-76-10430-2-d, WAC 388-76-10750-7, WAC 388-76-10750-8

The Department staff who did the on-site verification:
Twyla Robinson, AFH Licenser

If you have any questions, please contact me at (206)914-5042.

Abundant Life Lynnwood Inc # 753301

12/14/2023

Page 2 of 2

Sincerely,

Renee' Bourque

Renee Bourque, Field Manager

Region 2, Unit I

Residential Care Services

RECEIVED

NOV 15 2023



DSHS/ALISA/RCS

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

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

Statement of Deficiencies	License #: 753301	Compliance Determination # 30592
Plan of Correction	Abundant Life Lynnwood Inc	Completion Date
Page 1 of 20	Licensee: Abundant Life Lynnwood Inc	10/30/2023

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 10/04/2023 and 10/06/2023 of:

Abundant Life Lynnwood Inc
2009 144th PI SW
Lynnwood, WA 98087

The following sample was selected for review during the unannounced on-site visit: 6 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Twyla Robinson, AFH Licenser

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' Bourgeois
Residential Care Services

11/03/2023
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.

This document was prepared by Residential Care Services for the Locator website.



Provider (or Representative)

11/11/2023

Date

WAC 388-76-10530 Resident rights Notice of rights and services.

(1) The adult family home must provide each resident written notice of the resident's rights and services provided in the home in a language the resident understands and before the resident is admitted to the home. The notice must be reviewed at least once every twenty-four months from the date of the resident's admission and must include the following:

- (a) Information regarding resident rights, including rights under chapter 70.129 RCW;
- (b) A complete description of the services, items, and activities customarily available in the home or arranged for by the home as permitted by the license;
- (c) A complete description of the charges for those services, items, and activities, including charges for services, items, and activities not covered by the home's per diem rate or applicable public benefit programs;
- (d) The monthly or per diem rate charged to private pay residents to live in the home;
- (e) Rules of the home, which must not violate resident rights in chapter 70.129 RCW;
- (f) How the resident can file a complaint concerning alleged abandonment, abuse, neglect, or financial exploitation with the state hotline; and
- (g) If the home will be managing the resident's funds, a description of how the home will protect the resident's funds.

(2) Upon receiving the notice of rights and services at admission and at least every twenty-four months, the home must ensure the resident and a representative of the home sign and date an acknowledgement stating that the resident has received the notice of rights and services as outlined in this section. The home must retain a signed and dated copy of both the notice of rights and services and the acknowledgement in the resident's record.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure a written Notice of Services was provided to 3 of 6 sampled residents (Resident 3, 5, and 6) every 24 months. This failure placed Resident 3, 5, and 6 at risk of being unaware of house rules, services, and costs.

Findings included...

Record review showed the AFH admitted Resident 3 on [REDACTED]/2017. Resident 3's Notices of Services was last signed and dated on 05/18/2021.

Resident record review showed the AFH admitted Resident 5 on [REDACTED]/2017. Resident 5's Notices of Services was last signed and dated on 06/23/2021.

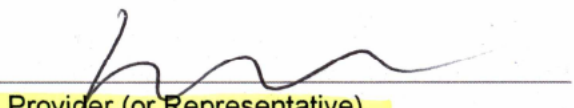
Resident record review showed the AFH admitted Resident 6 on [REDACTED]/2020. Resident 6's Notices of Services was last signed and dated on 02/08/2020.

In an interview, on 10/06/2023 at 2:55 p.m., when asked the about the timeframe to renew the Notice of Services, Staff A (Provider) stated every two years.

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 12/14/2023

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


Provider (or Representative)

11/11/2023
Date

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:

- (a) Provide a copy to each resident prior to or upon admission to the home;
- (b) Provide a copy upon resident request; and
- (c) Keep a copy that has been signed and dated by the resident in the resident's record.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure a completed disclosure of fees and charges was provided to 4 of 4 sampled residents (Resident 1, 2, 4, and 6) for review and signature. This failure placed Resident 1, 2, 4, and 6 at risk of violating resident right to know the AFH fees.

Findings included...

Record review showed that the AFH admitted Resident 1 on [REDACTED]/2022; Resident 2 on [REDACTED]/2019; Resident 4 on [REDACTED]/2022; and Resident 6 on [REDACTED]/2020.

Record review showed the Department of Social and Health Services' Adult Family Home Disclosure of Charges form was not signed, dated, and a copy retained in the residents' files.

Record review showed a signature page was signed and dated by Resident Representatives for Resident 1, 2, 4, and 6. The completed Disclosure of Charges form was not in the file.

In an interview, on 10/04/2023 at 3:12 p.m. when questioned why the Disclosure of Charges was not completed with charges for services, signed, dated, and copied for the file, Staff A (Provider) stated that resident representatives were given a Disclosure of Charges form with "vary" on the charges line. Staff A reported that the signature pages were retained in resident files.

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 12/14/2023.

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


Provider (or Representative)

11/11/2023
Date

WAC 388-76-10650 Medical devices.

- (1) The adult family home must not use a medical device with a known safety risk as a restraint or for staff convenience.
- (2) Before a medical device with a known safety risk is used by a resident, the home must:
 - (a) Ensure an assessment has been completed that identifies the resident's need and ability to safely use the medical device;
 - (b) Provide the resident and his or her family or legal representative with information about the device's benefits and safety risks to enable them to make an informed decision about whether to use the device;
 - (c) Ensure the resident's negotiated care plan includes how the resident will use the medical device; and
 - (d) Ensure the medical device is properly installed.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure before a medical device [REDACTED] was used, the resident was assessed for [REDACTED]

use. This failure placed Resident 4 at risk of injury including entanglement and death.

Findings included...

In an interview, on 10/04/2023 at 10:10 a.m., Staff B (Caregiver) stated that Resident 4 required two-person assistance with transfers.

Observation, on 10/04/2023 at 11:03 a.m. during the environmental tour, showed quarter-sized [REDACTED] in down position attached to Resident 4's bed.

Resident record review showed the AFH admitted Resident 4 on [REDACTED]/2022. Resident 4's Negotiated Care Plan (NCP), dated 10/06/2023, showed that the AFH would provide care. Review of Resident 4's file showed no medical assessment for [REDACTED] use.

In an interview, on 10/04/2023 at 4:56 p.m., when asked if there was medical assessment obtained prior to [REDACTED] use, Staff A (Provider) stated, "No, it's always down... The family wants it there to hold onto."

Record review, on 10/06/2023 at 2:26 p.m., Staff A submitted medical authorization for [REDACTED] use signed and dated on 10/05/2023.

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 10/05/2023.

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



Provider (or Representative)

11/11/2023

Date

WAC 388-76-10480 Medication organizers. The adult family home must ensure:

(3) Each resident and anyone giving care to a resident can readily identify medications in the medication organizer;

(4) Medication organizer labels clearly show the following:

(a) The name of the resident;

(b) A list of all prescribed and over-the-counter medications;

(c) The dosage of each medication;

(d) The frequency which the medications are given.

(5) The person filling the medication organizer updates the labels on the medication organizer when the practitioner changes a medication.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure that the medication organizer for Resident 4 was properly labeled with details of the medications. This failure placed Resident 4 at risk for complications of not taking medications as prescribed.

Findings included...

Record review showed that the AFH admitted Resident 4 on [REDACTED]/2022 with a diagnosis of [REDACTED]

[REDACTED] Resident 4's Negotiated Care Plan (NCP), signed and dated on 10/06/2023, indicated that the AFH would provide medication management and some activities of daily living.

Observation, on 10/04/2023 at 4:46 p.m., showed that Resident 4's locked medication supply contained an inappropriately labeled pill organizer. The 7-day medication organizer contained 28 compartments filled with unknown pills. The medication organizer showed Resident 4's name and administration time of 8:00 a.m.

In an interview, on 10/04/2023 at 4:46 p.m., when asked about the Washington Administrative Code regarding medication organizer labels, Staff A (Provider) stated "label it."

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 10/05/2023.

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



Provider (or Representative)

11/11/2023

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) did not dispose of expired medications for 4 of 6 sampled residents (Resident 3, 4, 5, and 6). This failure placed Resident 3, 4, 5, and 6 at risk of health complications from expired medication.

Findings included...

Record review showed that the AFH's Disposal of Medication Policy for Resident 3, signed and dated on 08/05/2016, stated that "Medications that have been discontinued or expired will be disposed of" by the AFH "within 72 hours of... expiration date or written Doctor's order to discontinue use."

Resident record review showed the AFH admitted Resident 3 on [REDACTED]/2017. Record review of Resident 3's negotiated care plan (NCP) indicated that the AFH would provide medication management and some activities of daily living. Resident 3's NCP was last signed and dated on 06/30/2023.

Observation, on 10/04/2023 at 6:11 p.m., showed Resident 3's locked medication supply contained Clonidine (a medication is used alone or with other medications to treat high blood pressure). The medication expired in 08/05/2021.

Observation, on 10/04/2023 at 6:11 p.m., showed Resident 3's locked medication supply contained two packages of Quetiapine Fumarate (a medication used to treat certain mental/mood conditions such as schizophrenia, bipolar disorder, sudden episodes of mania or depression associated with bipolar disorder), as needed (PRN). The medications expired on 11/10/2022.

Observation, on 10/04/2023 at 6:15 p.m., showed Resident 3's locked medication supply contained Albuterol (a medication used to treat wheezing and shortness of breath caused by breathing problems such as asthma or chronic obstructive pulmonary disease).

In an interview, on 10/04/2023 at 6:15 p.m., when asked about the Albuterol, Staff A (Provider) stated the Albuterol was prescribed by the hospital for one-time use.

Record review showed that the AFH's Disposal of Medication Policy for Resident 4, signed and dated on 10/05/2022, stated that "Medications that have been discontinued or expired will be disposed of" by the AFH "within 72 hours of... expiration date or written

Doctor's order to discontinue use."

Resident record review showed the AFH admitted Resident 4 on [REDACTED]/2022. Record review of Resident 4's NCP indicated that the AFH would provide medication management and some activities of daily living. Resident 4's NCP was last signed and dated on 10/06/2023.

Observation, on 10/04/2023 at 4:34 p.m., showed Resident 4's locked medication supply contained Potassium Chloride (a mineral supplement necessary for the heart, kidneys, and other organs to work normally). The medication expired in 01/07/2023.

Observation, on 10/04/2023 at 4:37 p.m., showed Resident 4's locked medication supply contained Vitamin D3 (a fat-soluble vitamin that helps the body absorb calcium and phosphate). The medication expired in 05/2023.

Observation, on 10/04/2023 at 4:56 p.m., showed Resident 4's locked medication supply contained Mature Multivitamins (a medication formulated with vitamins and minerals to supplement overall nutritional needs for general well-being). The medication expired in 06/2022.

In an interview, on 10/04/2023 at 4:41 p.m., when asked about the expired medications, Staff B (Caregiver) stated Resident 4's representative told the AFH to continue using the expired medications.

Record review showed that the AFH's Disposal of Medication Policy for Resident 5, signed and dated on 08/08/2016, stated that "Medications that have been discontinued or expired will be disposed of" by the AFH "within 72 hours of... expiration date or written Doctor's order to discontinue use."

Resident record review showed the AFH admitted Resident 5 on [REDACTED]/2017. Record review of Resident 5's NCP indicated that the AFH would provide medication management and some activities of daily living. Resident 5's NCP was last signed and dated on 04/28/2023.

Observation, on 10/04/2023 at 6:37 p.m., showed Resident 5's locked medication supply contained Sucralfate (a medication is used to treat and prevent ulcers in the intestines). The medication expired in 01/03/2023.

Observation, on 10/04/2023 at 6:42 p.m., showed Resident 5's locked medication supply contained Diclofenac (a nonsteroidal anti-inflammatory drug used to treat mild-to-moderate pain, and helps to relieve symptoms of arthritis such as inflammation, swelling, stiffness, and joint pain). The medication expired in 09/01/2022.

Record review showed that the AFH's Disposal of Medication Policy for Resident 6, signed and dated on 02/08/2016, stated that "Medications that have been discontinued or expired will be disposed of" by the AFH "within 72 hours of... expiration date or written Doctor's order to discontinue use."

Resident record review showed the AFH admitted Resident 6 on [REDACTED]/2020. Record review of Resident 6's NCP indicated that the AFH would provide medication management and some activities of daily living. Resident 6's NCP was last signed and dated on 03/12/2023.

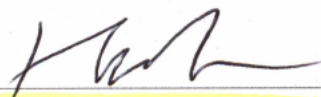
Observation, on 10/04/2023 at 10:59 a.m., during the environmental tour, showed Resident 6's unsecured medication supply contained Lorazepam (a medication used to treat serious seizures that do not stop and before surgeries or procedures to cause drowsiness, decrease anxiety, and cause forgetfulness about the procedure or surgery). The medication expired in 05/23/2023.

In an interview, on 10/04/2023 at 4:41 p.m., when asked how often the medication reconciliation was conducted, Staff B stated monthly. When asked how expired or discontinued medications were disposed of, Staff A reported that the AFH used a chemical drug buster or return expired medications to the pharmacy.

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 10/05/2023.

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



Provider (or Representative)

11/11/2023

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;
- (2) In the original container with legible and original labels; and
- (3) Appropriately for each medication, such as if refrigeration is required for a medication and the medication is kept in refrigerator in locked storage.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure that 2 of 6 sampled residents' (Resident 5 and 6) medication was legibly labeled and refrigerated medication was placed in locked storage. This failure placed Resident 1, 2, 3, 4, 5, and 6 at risk of potential medical complications.

Findings included...

Observation, on 10/04/2023 at 9:56 a.m., showed 6 residents resided in the facility.

Observation, on 10/04/2023 at 10:55 a.m., during the environmental tour, showed unsecured medication in the refrigerator bin.

Record review showed that the AFH admitted Resident 6 on [REDACTED]/2020 with a diagnosis of [REDACTED] Resident 6's Negotiated Care Plan (NCP), signed and dated on 03/12/2023, showed the AFH would manage and "[k]eep medications in a locked area."

Observation, on 10/04/2023 at 10:59 a.m., showed Resident 6's Lorazepam (a medication used to treat serious seizures that do not stop and before surgeries or procedures to cause drowsiness, decrease anxiety, and cause forgetfulness about the procedure or surgery), stored unsecured in the refrigerator bin.

In interview, on 10/04/2023 at 10:59 a.m., when asked what the Washington Administrative Code stated about medication storage, Staff A (Provider) stated medications need to be locked up.

Record review showed the AFH admitted Resident 5 on [REDACTED]/2017. Resident 5's Negotiated Care Plan, signed and dated on 03/11/2023, indicated that the AFH would provide care including medication management.

Record review of Resident 5's October 2023 Medication Log listed Nyamyc (a medication used to treat fungal skin infections), 100,000 units/grams powder, apply topically to affected area three times daily as needed for irritation.

Observation, on 10/04/2023 at 6:24 p.m., showed Resident 5's locked medication supply contained a bottle with an illegible label.

In interview, on 10/04/2023 at 6:24 p.m., when asked about the bottle, Staff A identified the bottle as Nyamyc.

Record review of an email, on 10/12/2023 at 9:35 a.m., showed Resident 5's Nyamyc

medication bottle legibly labeled.

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 10/05/2023.

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


Provider (or Representative)

11/11/2023
Date

WAC 388-76-10475 Medication Log. The adult family home must:

(1) Keep an up-to-date daily medication log for each resident except for residents assessed as medication independent with self-administration.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure Medication Logs (ML) were current for 6 of 6 sampled residents (Resident 1, 2, 3, 4, 5, and 6). This failure placed Resident 1, 2, 3, 4, 5, and 6 at risk of harm from medication errors.

Findings included...

Record review showed that the AFH admitted Resident 1 on [REDACTED]/2022. Resident 1's Negotiated Care Plan (NCP), signed and dated on 05/01/2023, indicated that the AFH would provide care, including medication management.

Record review of Resident 1's October 2023 ML listed Cranberry (a supplement taken to support urinary tract health and may prevent urinary tract infections), 1,000 milligrams (mg), take one capsule by mouth twice daily.

Observation, on 10/04/2023 at 5:46 p.m., showed Resident 1's locked medication supply contained Cranberry, 4,800 mg, take four capsules per serving.

Record review of an email, on 10/12/2023 at 9:35 a.m., showed on 10/11/2023 Resident 1's doctor changed the Cranberry dosage to 1,200 mg by mouth twice a day.

Record review of Resident 1's October 2023 ML listed Seroquel (a medication used to treat certain mental/mood conditions such as schizophrenia, bipolar disorder, sudden episodes of mania or depression associated with bipolar disorder), Voltaren (a nonsteroidal anti-inflammatory drug used to treat mild-to-moderate pain, and helps to relieve symptoms of arthritis such as inflammation, swelling, stiffness, and joint pain), Lorazepam (a medication used to treat serious seizures that do not stop and before surgeries or procedures to cause drowsiness, decrease anxiety, and cause forgetfulness about the procedure or surgery), Simethicone (a medication used to relieve symptoms of extra gas such as belching, bloating, and feelings of pressure/discomfort in the stomach/gut), and Zofran (a medication used to prevent nausea and vomiting).

Observation, on 10/04/2023 at 5:49 p.m., showed Resident 1's medication supply did not contain Simethicone, Voltaren, Zofran, Lorazepam, and Seroquel.

In an interview, on 10/04/2023 at 5:49 p.m., when asked about the medications, Staff A (Provider) stated the medications were no longer used.

Record review of an email, on 10/12/2023 at 9:35 a.m., showed on 10/11/2023 Resident 1's doctor discontinued prior prescriptions for Simethicone, Voltaren, Zofran, Lorazepam, and Seroquel.

Record review of Resident 1's October 2023 ML listed Acetaminophen (a medication used to treat mild to moderate pain from headaches, menstrual periods, toothaches, backaches, osteoarthritis, or cold/flu aches and pains and/or reduce fever), 325 mg, take one tablet by mouth every six hours PRN for pain.

Observation, on 10/04/2023 at 5:52 p.m., of the AFH locked medication supply for Resident 1, showed there was no Acetaminophen for Resident 1.

In an interview, on 10/04/2023 at 5:52 p.m., when asked about the Acetaminophen, Staff A stated that the Acetaminophen was no longer used.

In an interview, on 10/30/2023 at 9:59 a.m., the Pharmacist reported that the Acetaminophen was last filled on 04/28/2022 and record showed that the family would supply the medication.

Resident record review showed the AFH admitted Resident 2 on [REDACTED]/2019. Resident 2's NCP, signed and dated 03/11/2023, showed that the AFH would provide care including, medication management.

Record review of Resident 2's October 2023 ML listed Polyethylene Glycol (a laxative solution that increases the amount of water in the intestinal tract to stimulate bowel

movement).

Record review of Resident 2's October 2023 ML listed Melatonin (a hormonal supplement used to help with trouble sleeping).

Record review of Resident 2's October 2023 ML listed Acetaminophen, 500 mg.

Record review of Resident 2's October 2023 ML listed Enema Mineral Oil (a medication used to treat constipation).

Record review of Resident 2's October 2023 ML listed Hydrocortisone (a topical medication used to treat mild inflammatory skin conditions, commonly referred to as dermatitis).

Observation, on 10/04/2023 at 5:54 p.m., showed Resident 2's locked medication supply did not contain Polyethylene Glycol, Melatonin, Acetaminophen, Enema Mineral Oil, nor Hydrocortisone.

In an interview, on 10/04/2023 at 5:59 p.m., when asked about the medications, Staff A stated the medications were no longer used.

Record review of a medical note, dated 10/06/2023, showed that the Polyethylene Glycol, Melatonin, Acetaminophen, Enema Mineral Oil, and Hydrocortisone were discontinued.

Resident record review showed the AFH admitted Resident 3 on [REDACTED]/2017. Resident 3's NCP, signed and dated 06/30/2023, showed that the AFH would provide care including, medication management.

Record review of Resident 3's October 2023 ML listed Polyethylene Glycol.

Record review of Resident 3's October 2023 ML listed Cough Dextromethorphan (a medication is used for temporary relief of coughs without phlegm that are caused by certain infections of the air passages such as sinusitis, common cold).

Record review of Resident 3's October 2023 ML listed Nyamyc powder (a medication used to treat fungal skin infections).

Record review of an email, on 10/12/2023 at 9:35 a.m., showed on 10/11/2023 Resident 3's doctor discontinued prior prescriptions for Polyethylene Glycol, Cough Dextromethorphan, and Nyamyc.

Observation, on 10/04/2023 at 6:15 p.m., showed Resident 3's locked medication supply contained an Albuterol Sulfate inhaler (a medication used to treat wheezing and shortness of breath caused by breathing problems such as asthma or chronic obstructive pulmonary disease).

Record review of Resident 3's October 2023 ML did not list Albuterol Sulfate.

In an interview, on 10/04/2023 at 6:15 p.m., when asked about the Albuterol, Staff A stated the medication was dispensed from the hospital for one-time use.

Resident record review showed the AFH admitted Resident 4 on [REDACTED]/2022. Resident 3's NCP, signed and dated 10/06/2023, showed that the AFH would provide care including, medication management.

Record review of Resident 4's October 2023 ML listed Calcium (a supplement used to prevent low calcium levels, muscle cramps, osteoporosis, and softening of the bones), 600 mg, take one tablet by mouth.

Observation, on 10/04/2023 at 4:50 p.m., showed Resident 4's locked medication supply contained Calcium Citrate Magnesium and Zinc, take two tablets for a Calcium total of 500 mg.

Resident record review showed the AFH admitted Resident 5 on [REDACTED]/2017. Resident 5's NCP, signed and dated 04/28/2023, showed that the AFH would provide care including, medication management.

Record review of Resident 5's October 2023 ML listed Bisacodyl (an over-the-counter medication used to treat constipation and irregular bowel movements).

Record review of Resident 5's October 2023 ML listed Gas-X (a medication used to relieve symptoms of extra gas such as belching, bloating, and feelings of pressure/discomfort in the stomach/gut).

Record review of Resident 5's October 2023 ML listed Guaifenesin (a medication used to treat coughs and congestion caused by the common cold, bronchitis, and other breathing illnesses).

Record review of Resident 5's October 2023 ML listed Haloperidol (a medication used to treat certain mental/mood disorders such as schizophrenia, schizoaffective disorders).

Record review of Resident 5's October 2023 ML listed Hydroxyzine (a medication used to relieve itching caused by allergic skin reactions).

Record review of Resident 5's October 2023 ML listed Hemorrhoidal ointment (a medication used to relieve swelling, burning, pain, and itching caused by hemorrhoids, swollen veins in the anus and lower rectum).

Record review of Resident 5's October 2023 ML listed Fleet Enema (a medication may be used to relieve occasional constipation).

Observation, on 10/04/2023 at 6:24 p.m., showed Resident 5's medication supply did not contain Bisacodyl, Gas-X, Guaifenesin, Haloperidol, Hydroxyzine, Hemorrhoidal ointment, nor Fleet Enema.

In an interview, on 10/04/2023 at 6:37 p.m., when asked about the medications, Staff A stated the medications were no longer used.

Record review of an email, on 10/12/2023 at 9:35 a.m., showed on 10/11/2023 Resident 5's doctor discontinued prior prescriptions for Bisacodyl, Gas-X, Guaifenesin, Haloperidol, Hemorrhoidal ointment, Hydroxyzine, and Fleet Enema.

Observation, on 10/04/2023 at 6:32 p.m., showed Resident 5's locked medication supply contained an Albuterol Sulfate inhaler.

Record review of Resident 5's October 2023 ML did not list Albuterol Sulfate.

In an interview, on 10/30/2023 at 10:03 a.m., the Pharmacist reported that Albuterol was an active medication and last filled on 09/22/2023.

Resident record review showed the AFH admitted Resident 6 on [REDACTED]/2020. Resident 6's NCP, signed and dated on 03/12/2023, showed that the AFH would provide care including, medication management.

Record review of Resident 6's October 2023 ML listed Budesonide (a medication used to prevent and treat seasonal and year-round allergy symptoms such as stuffy/runny nose, itchy eyes/nose/throat, and sneezing) and Artificial Tears eyedrops (a medication used to relieve dryness and irritation of the eyes).

Observation, on 10/04/2023 at 5:26 p.m., showed Resident 6's locked medication supply did not contain Budesonide nor Artificial Tears.

In an interview, on 10/04/2023 at 5:26 p.m., when asked if the Artificial Tears were available, Staff A (Provider) stated "No" and medication was a PRN. When asked about the

Budesonide, Staff A reported the Nurse stated that Albuterol could be used.

Record review of a medical note, dated 10/06/2023, showed that the Budesonide and Artificial Tears were discontinued.

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 10/05/2023.

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



Provider (or Representative)

11/11/2023

Date

WAC 388-76-10430 Medication system.

(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 that 4 of 6 sampled residents' (Resident 1, 3, 5, and 6) medications were available for administration in the facility. This failure placed Resident 1, 3, 5, and 6 at risk of not receiving their medications and of potential health complications.

Findings included...

Resident record review showed the AFH admitted Resident 1 on [REDACTED]/2022. Resident 1's Negotiated Care Plan (NCP), signed and dated on 05/01/2023, showed that the AFH would provide care, including medication management.

Record review of Resident 1's October 2023 ML showed Triamcinolone (a medication used to relieve redness, itching, swelling, or other discomfort caused by skin conditions) 0.25%, apply sparingly to forehead topically daily as needed (PRN) for red, itchy, or flaking skin.

Observation, on 10/04/2023 at 5:49 p.m., of the AFH locked medication supply for Resident 1, showed there was no Triamcinolone for Resident 1.

In an interview, on 10/04/2023 at 5:49 p.m., when asked about the Triamcinolone, Staff A (Provider) stated that the Triamcinolone was no longer used.

In an interview, on 10/30/2023 at 9:58 a.m., the Pharmacist reported that the Triamcinolone medication was last filled on 10/05/2023.

Resident record review showed the AFH admitted Resident 3 on [REDACTED]/2017. Resident 3's NCP, signed and dated on 06/30/2023, showed that the AFH would provide care, including medication management.

Record review of Resident 3's October 2023 Medication Log (ML) listed Clonidine Hydrochloride (a medication is used alone or with other medications to treat high blood pressure), 0.1 milligrams (mg), take one tablet by mouth daily as needed (PRN).

Observation, on 10/04/2023 at 6:11 p.m., of the AFH locked medication supply for Resident 3, contained Clonidine. The medication expired on 08/05/2021.

In an interview, on 10/30/2023 at 9:50 a.m., the Pharmacist reported that the Clonidine was last filled on 10/06/2023.

Record review of Resident 3's October 2023 ML listed Senna (a medication used to treat constipation), 8.6 mg, take one tablet by mouth one to two times daily as needed for constipation.

Observation, on 10/04/2023 at 6:22 p.m., of the AFH locked medication supply for Resident 3, showed there was no Senna, PRN.

In an interview, on 10/04/2023 at 6:22 p.m., when asked about the Senna, PRN, Staff A stated that Resident 3 was not using the medication.

Record review of an email, on 10/12/2023 at 9:35 a.m., showed on 10/11/2023 Resident 3's doctor continued the Senna, one tablet by mouth twice a day, PRN, in addition to the scheduled dose.

In an interview, on 10/30/2023 at 9:53 a.m., the Pharmacist reported that Senna, PRN, was last filled on 10/11/2023.

Resident record review showed the AFH admitted Resident 5 on [REDACTED]/2017. Record review of Resident 5's NCP indicated that the AFH would provide medication management

and some activities of daily living. Resident 5's NCP was last signed and dated on 04/28/2023.

Record review of Resident 5's October 2023 ML showed Acetaminophen (a medication used to treat mild to moderate pain from headaches, menstrual periods, toothaches, backaches, osteoarthritis, or cold/flu aches and pains and/or reduce fever), 500 mg, may take an additional tablet by mouth one time PRN for pain.

Observation, on 10/04/2023 at 6:37 p.m., of the AFH locked medication supply for Resident 5, showed there was no Acetaminophen, PRN.

In an interview, on 10/04/2023 at 6:37 p.m., when asked about the Acetaminophen, Staff A stated that Resident 5 was not using the medication.

In an interview, on 10/30/2023 at 10:02 a.m., the Pharmacist reported that Acetaminophen, 500 mg, PRN was filled on 10/05/2023.

Resident record review showed the AFH admitted Resident 6 on [REDACTED]/2020. Resident 6's NCP, signed and dated on 03/12/2023, showed that the AFH would provide care, including medication management.

Record review of Resident 6's October 2023 ML showed Acetaminophen, 650 milligrams mg suppository, unwrap and insert one suppository rectally every six hours as needed (PRN).

Observation, on 10/04/2023 at 5:40 p.m., of the AFH locked medication supply for Resident 6, showed there was no Acetaminophen, PRN.

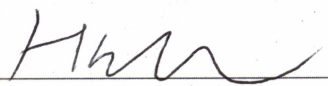
In an interview, on 10/04/2023 at 5:40 p.m., when asked about the Acetaminophen, Staff A stated that Resident 6 was not using the Acetaminophen and was taking another pain medication.

In an interview, on 10/30/2023 at 9:54 a.m., the Pharmacist reported that Acetaminophen, PRN, was last filled on 10/05/2023.

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 10/05/2023.

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


Provider (or Representative)

11/11/2023
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;

(8) Grant a resident access to and use of toxic substances and hazardous materials only with direct supervision, unless the resident has been assessed as safe to use the substance or material without direct supervision and if the use is documented in the negotiated care plan;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to ensure that all toxic substances and hazardous materials were retained in locked storage. This failure placed Resident 1, 2, 3, 4, 5, and 6 at risk of harm from accidental ingestion or misuse of harmful substances.

Findings included...

Observation, on 10/04/2023 at 9:56 a.m., showed 6 residents resided in the facility.

Observation, on 10/04/2023 at 10:55 a.m., showed during the environmental tour, a container of oven cleaner stored in the cabinet underneath the kitchen sink.

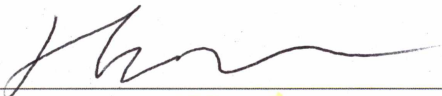
Observation, on 10/04/2023 at 11:43 a.m., showed the garage door lock was inappropriately installed allowing unrestricted access to floor cleansers, disinfectants, and laundry detergents.

In an interview, on 10/04/2023 at 10:56 a.m., when asked about the Washington Administrative Code regulation on securing toxins, Staff A (Provider) stated "lock it."

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, Abundant Life Lynnwood Inc is or will be in compliance with this law and / or regulation on (Date) 10/05/2023.

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



Provider (or Representative)

11/11/2023

Date

RECEIVED

NOV 15 2023

DSHS/ALISA/RCS



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

11/03/2023

CERTIFIED MAIL

9489009000276072996964

Abundant Life Lynnwood Inc
Abundant Life Lynnwood Inc
2009 144th PI SW
Lynnwood, WA 98087

RE: Abundant Life Lynnwood Inc # 753301

Dear Provider:

The Department completed a full inspection of your Adult Family Home on 10/30/2023 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:

Renee Bourque, Field Manager
Residential Care Services
Region 2, Unit I
20311 52nd Ave W, Suite 100

Lynnwood, WA 98036

- 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;
- (2) Emphasizes frequent hand washing and other means of limiting the spread of infection;
- (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 failed to develop a written Respiratory Protection Program. This failure placed residents and staff at risk of exposure to a communicable disease.

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 (206)914-5042.

Sincerely,

Renee Bourque

Renee Bourque, Field Manager
Region 2, Unit I
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:

Renee Bourque, Field Manager

Residential Care Services

Region 2, Unit I

20311 52nd Ave W, Suite 100

Lynnwood, WA 98036

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>

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

Abundant Life Lynnwood Inc # 753301

10/30/2023

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