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

Angel Haven Estates Inc
Angel Haven II
1402 Auburn Way N #453
Auburn, WA 98002

RE: Angel Haven II License # 753657

Dear Provider:

This letter addresses Compliance Determination(s) 61800 (Completion Date 06/27/2025) and 59522 (Completion Date 05/13/2025).

The Department completed a follow-up inspection of your Adult Family Home on 06/27/2025 and found that you have corrected the violations listed in the Complaint report dated 05/13/2025. Your home is back in compliance as of 05/14/2025 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 388-76-10490-2-b-i

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

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Statement of Deficiencies	License #: 753657	Compliance Determination # 59522
Plan of Correction	Angel Haven II	Completion Date
Page 1 of 4	Licensee: Angel Haven Estates Inc	05/13/2025

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 an unannounced on-site complaint investigation on 05/07/2025 of:

Angel Haven II
1711 4TH ST NE
AUBURN, WA 98002

This document references the following complaint number(s): 179015

The following sample was selected for review during the unannounced on-site visit: 1 of 5 current residents and 0 former residents.

The department staff that investigated 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

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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 — 5-14-2025 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) — 5-14-2025 Date

WAC 388-76-10490 Medication disposal Written policy Required.

(1) For the purposes of this section, "discontinued" means medication that is no longer prescribed or being used to treat a condition, as directed by the resident's physician or health care professional with prescriptive authority.

(2) The adult family home must develop and implement a written policy addressing the safe disposal of resident medications that have been discontinued, have expired, or were refused by the resident. The policy must:

(b) Address the safe disposal of medications for current residents, deceased residents, and residents who have discharged from the facility; and

(i) For current residents the facility must safely dispose of discontinued medications, expired medications, and refused medications within 30 calendar days of discontinuation, expiration, or resident refusal;

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 1 sampled resident's (Resident 2) discontinued medication. This failure placed Resident 2 at risk of medication errors.

Findings included...

A review of the AFH's one page undated "Procedure on How to Dispose of Expired or Discontinued Medication," provided by Staff B, Resident Manager, during the visit, showed the AFH used the Rx Destroyer a "chemical destruction container that converts solid and liquid medications into a non-retrievable form." Further review of the AFH's undated "Procedure on How to Dispose of Expired or Discontinued Medication", showed

no documentation that current resident expired medication would be disposed within 30 calendar days of expiration.

During a visit on 05/07/2025 at 1:37 PM, observation showed Resident 2 lived in and received medication assistance from the AFH.

A review of Resident 2's May 2025 electronically generated Medication Administration Record (MAR) showed Resident 2 was prescribed, Acetaminophen 325 milligram (mg), take 2 tablets (650 mg) by mouth every six hours as needed (PRN) for pain/fever.

Observation on 05/07/2025 at 1:43 PM showed Resident 2's medication contained 3 bubble packs of Acetaminophen 325 mg, take 2 tablets (650 mg) by mouth every six hours PRN and each bubble pack had an expiration date of 12/14/2024.

In an interview on 05/07/2025 at 1:44 PM, Staff B confirmed that Resident 2's Acetaminophen 325 mg had expired on 12/14/2024 and that there was no medication missing from the bubble packs.

Observation on 05/07/2025 at 1:50 PM showed Resident 2 had a bubble pack of Hydromorphone 4 mg, take 0.5 tablet (2 mg total) by mouth every 6 hours PRN for severe pain not relieved by Tylenol, a pain reliever.

A review of Resident 2's May 2025 electronically generated MAR showed no entry for Hydromorphone 4 mg, take 0.5 tablet (2 mg total) by mouth every 6 hours PRN.

In an interview on 05/07/2025 at 1:53 PM, Staff B stated that Resident 2's expired medications must have been put with resident overstock medication by mistake instead of where expired medication was kept for destruction. Staff B further stated that the AFH used the Rx Destroyer to dispose of expired medication monthly. Staff B stated that, regarding questions concerning the AFH's undated "Procedure on How to Dispose of Expired or Discontinued Medication", the one-page document was the current medication disposal policy for the AFH. In addition, Staff B stated that between themselves, Staff A, Entity Representative, and the AFH's Registered Nurse (RN), resident medication was reviewed a couple of times a month. Staff B stated that they would locate the discontinuation order for Resident 2's expired Hydromorphone 4 mg, take 0.5 tablet (2 mg total) by mouth every 6 hours PRN.

In an interview on 05/07/2025 at 2:36 PM, Staff B presented a copy of an After Visit Summary (AVS) dated 12/06/2024 for Resident 2 and stated that Resident 2's Hydromorphone 4 mg, take 0.5 tablet (2 mg total) by mouth every 6 hours PRN, was not listed as a current medication.

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A review of another record received by the department on 05/07/2025 at 3:59 PM from Staff B showed, an AVS dated 12/06/2024 for Resident 2. Further review showed Resident 2's Hydromorphone 4 mg, take 0.5 tablet (2 mg total) by mouth every 6 hours PRN had been discontinued on 12/06/2024.

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, Angel Haven II is or will be in compliance with this law and / or regulation on (Date) 5/14/25 .

In addition, I will implement a system to monitor and ensure continued compliance with this requirement. Every monday staff will go through all medications to ensure current orders are updated.

Provider (or Representative) — Date: 5/14/25