



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

Home Again AFH LLC
Home Again AFH LLC
18504 2nd Ave NW
Shoreline, WA 98177

RE: Home Again AFH LLC License # 753709

Dear Provider:

This letter addresses Compliance Determination(s) 54933 (Completion Date 02/19/2025) and 53313 (Completion Date 01/22/2025).

The Department completed a follow-up inspection of your Adult Family Home on 02/19/2025 and found that you have corrected the violations listed in the Complaint report dated 01/22/2025. Your home is back in compliance as of 01/27/2025 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 388-76-10430-2-c, WAC 388-76-10430-2-d

The Department staff who did the on-site verification:
Theresa Karundeng, NCI

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

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



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Statement of Deficiencies	License #: 753709	Compliance Determination # 53313
Plan of Correction	Home Again AFH LLC	Completion Date
Page 1 of 3	Licensee: Home Again AFH LLC	01/22/2025

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 01/21/2025 and 01/21/2025 of:

Home Again AFH LLC
18504 2nd Ave NW
Shoreline, WA 98177

This document references the following complaint number(s): 160180

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 1 former residents.

The department staff that investigated the Adult Family Home:

Theresia Karundeng, NCI

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' Bourque
Residential Care Services

01/24/2025
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.

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

Provider (or Representative)

Date

WAC 388-76-10430 Medication system.

- (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 record review and interview, the Adult Family Home (AFH) failed to ensure 1 of 2 residents (Resident 1) received medications per physician's orders, and documentation in medication log was up to date. This failure placed Resident 1 at risk for harm related to medication errors, medical complications, and unmet care needs.

Findings included...

Review of Resident 1's Negotiated Care Plan (NCP), dated 05/20/2024, showed Resident 1 was admitted to the AFH on [REDACTED]/2024, with multiple medical diagnoses including [REDACTED] ([REDACTED]). Further review showed Resident 1 required caregiver assistance with medication administration.

Review of Resident 1's Medication Logs (ML), dated December 2024, showed the following:
-Olanzapine (a medication used to treat mental or mood conditions) take one tablet every night at bedtime. The ML showed that Olanzapine was discontinued. The ML showed Resident 1 did not receive Olanzapine from 12/01/2024-12/20/2024.

Review of Resident 1's Physician Orders, dated December 2024, showed an active order of Olanzapine.

Review of an email, dated 01/21/2025 at 9:18 PM, sent by Staff A, Provider, showed Resident 1 did not have a discontinuing order of their Olanzapine. Further review showed Resident 1's Olanzapine was a current medication during the month of December 2024. Staff A noted that Olanzapine was given to Resident 1, but they had not signed it in the ML.

Statement of Deficiencies

License #: 753709

Compliance Determination # 53313

Plan of Correction

Home Again AFH LLC

Completion Date

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Licensee: Home Again AFH LLC

01/22/2025

Review of Resident 1's Physician notes, dated 12/03/2024, showed to continue Olanzapine every night at bedtime.

In an interview, on 01/22/2025 at 2:31 PM, Staff A acknowledged that Resident 1's ML was not up to date. Staff A stated that they were confused due to the multiple changes in Resident 1's medication at the time.

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, Home Again AFH LLC is or will be in compliance with this law and / or regulation on (Date) 1/27/25.

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


Provider (or Representative)1/28/25
Date

Review of Resident 1's Physician notes, dated 12/03/2024, showed to continue Olanzapine every night at bedtime.

In an interview, on 01/22/2025 at 2:31 PM, Staff A acknowledged that Resident 1's ML was not up to date. Staff A stated that they were confused due to the multiple changes in Resident 1's medication at the time.

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, Home Again AFH LLC 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

To: Renee Bourque, field Manager

Residential Care services

Region 2, Unit 1

From: Home Again AFH LLC License # 753709

Damaris Ramirez, owner and provider

01/27/2025

Home Again AFH LLC will ensure that all medications are reviewed, signed, and copies of all discontinuations and new orders will be kept in the MAR beginning 01/23/2025. Home again will ensure that all discontinued orders will immediately be documented in the MAR and signed/dated. Home again will confirm with PCP and pharmacies in case of any questions or concerns. Home Again has educated our caregivers and will continue educating, focusing on the issues founded at the time of the investigation. Based on our educational session, the main goal was making sure that communication is the most important key to avoid mistakes in the future. Also, caregivers were trained to make sure MARs are checked daily and supervised by resident manager Damaris Ramirez.

Home Again will ensure the WAC 388-76-10430 Medication system will be current and meet all the rules relating to medication.

Home Again will ensure that these types of mistakes will not occur in the future.

Sincerely,



Home Again AFH LLC

Damaris Ramirez