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

Novelty Hill Adult Family Home LLC
Novelty Hill Adult Family Home LLC
18446 NE 95th St
Redmond, WA 98052

RE: Novelty Hill Adult Family Home LLC License # 753900

Dear Provider:

This letter addresses Compliance Determination(s) 29905 (Completion Date 09/21/2023) and 27626 (Completion Date 08/16/2023).

The Department completed a follow-up inspection of your Adult Family Home on 09/21/2023 and found that you have corrected the violations listed in the Complaint report dated 08/16/2023. Your home is back in compliance as of 08/23/2023 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 388-76-10340, WAC 388-76-10340-1, WAC 388-76-10340-2, WAC 388-76-10340-3, WAC 388-76-10340-4, WAC 388-76-10340-5

The Department staff who did the on-site verification:
Ywen Dah Liou, AFH Complaint Investigator

If you have any questions, please contact me at (253)341-2633.

Sincerely,

Ann Lee-Hunter

Ann Lee-Hunter, Field Manager
Region 2, Unit K
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: Novelty Hill Adult Family Home LLC
License/Cert.#: 753900
Compliance Determination #: 27626
Investigator: Ywen Dah Liou
Provider Type: Adult Family Home
Intake ID: 88916
Region/Unit #: RCS Region 2 / Unit K
Investigation Date(s): 08/03/2023 through 08/16/2023
Complainant Contact Date(s): 08/02/2023, 08/18/2023

Allegation(s):

1. Named Resident (NR) had a fall and significant physical injuries in the Adult Family Home (AFH).

Investigation Methods:

Sample:	Total residents: 3 Resident sample size: 3 Closed records sample size: 1
Observations:	Residents Resident rooms Staff to resident interactions
Interviews:	Identified staff Residents Family members Other department's staff
Record Reviews:	Assessments Face sheets Facility policies Incident logs Negotiated care plans Progress notes Preliminary service plan Staff training records

Investigation Summary:

1. Observations showed the AFH had an environment that mitigated fall risk hazards. Interviews indicated that the AFH addressed NR's fall incident and notified designated personnel in accordance with the department's codes. Record reviews exhibited that the AFH had required fall prevention and reporting policy and procedures. AFH provider/staff completed the training of these policy and procedures. Further record reviews exhibited that AFH did not develop preliminary service plan for one of the sampled residents by required time frame. A failed practice identified.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

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Statement of Deficiencies	License #: 753900	Compliance Determination # 27626
Plan of Correction	Novelty Hill Adult Family Home LLC	Completion Date
Page 1 of 3	Licensee: Novelty Hill Adult Family Home LLC	08/16/2023

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 an unannounced on-site complaint investigation on 08/03/2023 and 08/03/2023 of:

Novelty Hill Adult Family Home LLC
18446 NE 95th St
Redmond, WA 98052

This document references the following complaint number(s): 88916

The following sample was selected for review during the unannounced on-site visit: 3 of 3 current residents and 1 former residents.

The department staff that investigated the Adult Family Home:

Ywen Dah Liou, AFH Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit K
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.

Ann Lee-Hunter
Residential Care Services

08/18/2023
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.

Statement of Deficiencies	License #: 753900	Compliance Determination # 27626
Plan of Correction	Novelty Hill Adult Family Home LLC	Completion Date
Page 2 of 3	Licensee: Novelty Hill Adult Family Home LLC	08/16/2023

~~Provider (or Representative)~~ ~~Date~~

WAC 388-76-10340 Preliminary service plan. The adult family home must ensure that each resident has a preliminary service plan that includes:

(1) The resident's specific problems and needs identified in the assessment;

(2) The needs for which the resident chooses not to accept or refuses care or services;

(3) What the home will do to ensure the resident's health and safety related to the refusal of any care or service;

(4) Resident defined goals and preferences; and

(5) How the home will meet the resident's needs.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to develop a Preliminary Service Plan (PSP) for 1 of 4 Residents (Resident 2). This failure placed Resident 2 at risk for unmet care needs.

Findings included...

Review of the AFH's record titled, "Adult Family Home Resident Information Sheet," dated on [redacted]/2023, exhibited Resident 2 admitted to the AFH on [redacted]/2023.

Observation on 08/03/2023 at 8:42 AM, showed Resident 2 resided in the AFH.

Review of the AFH's records for Resident 2 exhibited the AFH did not develop a PSP for Resident 2.

During an interview on 08/07/2023 at 4:35 AM, Staff A (AFH Provider) stated that they did not develop a PSP for Resident 2 before or by the admission date, [redacted]/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, Novelty Hill Adult Family Home LLC is or will be in compliance with this law and / or regulation on

~~(Date)~~ 08-23-2023

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

Statement of Deficiencies	License #: 753900	Compliance Determination # 27626
Plan of Correction	Novelty Hill Adult Family Home LLC	Completion Date
Page 3 of 3	Licensee: Novelty Hill Adult Family Home LLC	08/16/2023

JASJEET BHATTI

Provider (or Representative) [signature] Date 08-23-2023