



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

*Dynamic Care Adult Family Home LLC
*Dynamic Care Adult Family Home LLC
11614 SE 52nd St
Bellevue, WA 98006

RE: *Dynamic Care Adult Family Home LLC License # 754401

Dear Provider:

This letter addresses Compliance Determination(s) 51580 (Completion Date 12/11/2024) and 47884 (Completion Date 10/23/2024).

The Department completed a follow-up inspection of your Adult Family Home on 12/11/2024 and found that you have corrected the violations listed in the Complaint report dated 10/23/2024. Your home is back in compliance as of 12/07/2024 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 388-76-10225-2-c, WAC 388-76-10250, WAC 388-76-10250-1, WAC 388-76-10250-1-a, WAC 388-76-10250-1-b, WAC 388-76-10250-1-b-i, WAC 388-76-10250-1-b-ii, WAC 388-76-10250-1-b-iii, WAC 388-76-10250-2, WAC 388-76-10250-2-a, WAC 388-76-10250-2-b, WAC 388-76-10250-3, WAC 388-76-10250-4, WAC 388-76-10250-4-a, WAC 388-76-10250-4-b

The Department staff who did the on-site verification:
Alina Zaharie, NCI

If you have any questions, please contact me at (253)341-7376.

Sincerely,

Alfredo Brown

Alfredo Brown, Field Manager
Region 2, Unit K

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

*Dynamic Care Adult Family Home LLC # 754401

12/11/2024

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Residential Care Services

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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 #: 754401	Compliance Determination # 47884
Plan of Correction	*Dynamic Care Adult Family Home LLC	Completion Date
Page 1 of 5	Licensee: *Dynamic Care Adult Family Home LLC	10/23/2024

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 09/27/2024 and 09/27/2024 of:

*Dynamic Care Adult Family Home LLC
11614 SE 52nd St
Bellevue, WA 98006

This document references the following complaint number(s): 148239, 149957

The following sample was selected for review during the unannounced on-site visit: 3 of 6 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Alina Zaharie, NCI

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.

Alfredo Brown
Residential Care Services

10/28/2024
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.

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Page 2 of 5	Licensee: *Dynamic Care Adult Family Home LLC	10/23/2024



Provider (or Representative)

11-12-2024

Date

WAC 388-76-10225 Reporting requirement.

(2) When there is a significant change in a resident's condition, or a serious injury, trauma, or death of a resident, the adult family home must immediately notify:

(c) The resident's health care provider;

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to report a significant change in a resident's health condition to that resident's health care provider when the resident had a fall. This failure resulted in delay of treatment for 1 of 6 residents (Resident 5) with a significant physical injury.

Findings included...

Record review of undated Adult Family Home (AFH) record named "Daily Communication Progress Note" showed Resident 5 had sustained an unwitnessed fall on 09/14/2024 at 7:32 AM. The progress note showed Resident 5 was found on the ground in their bedroom. The named "Daily Communication Progress Note" was not signed by any specific caregiver. The record showed the incident was reported by Staff C, Caregiver, to Staff A, Entity Representative. The record showed no information about who, when and to whom Resident's 5 fall injury was reported to. The record did not show what actions the AFH had taken to address Resident's 5 fall.

Record review of Resident 5's Assessment and Care Plan, dated 07/12/2024, stated that Resident 5 can transfer independently, but was a fall risk and required safety checks. Resident's 5 Assessment and Care Plan states, "Always notify the Primary MD when a resident has fallen. Even if there is no injury".

Record review of Resident 5's Negotiated Care Plan (NCP), dated 07/12/2024, showed that Resident 5 had been diagnosed with [REDACTED]. Resident's 5 NCP stated Resident 5 required supervision and cueing. Resident's 5 NCP showed, "Caregivers are required to monitor the resident during the ADL (activity of daily living), report concerns and significant changes immediately to relevant individuals (Health Care Provider, Power of Attorney, Case Manager, etc.)".

During an interview on 09/27/2024 at 3:58 PM, Staff A stated that had not reported Resident's 5 fall incident to Resident's 5 Primary Care Provider.

Provider (or Representative)

Date

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Page 3 of 5	Licensee: *Dynamic Care Adult Family Home LLC	10/23/2024

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, *Dynamic Care Adult Family Home LLC is or will be in compliance with this law and / or regulation on

(Date) 11-12-2024

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


Provider (or Representative)

11/12/2024
Date

WAC 388-76-10250 Medical emergencies Contacting emergency medical services Required.

(1) The adult family home must develop and implement policies and procedures which require immediate contact of the local emergency medical services when a resident has a medical emergency. This requirement applies:

(a) Unless the caregiver, present at the time of the emergency, is a licensed physician or registered nurse acting within his or her scope of practice;

(b) Whether or not:

(i) Any order exists directing medical care for the resident;

(ii) The resident has provided an advance directive for medical care; or

(iii) The resident has expressed any wishes involving medical care.

(2) If available, the home must immediately give arriving emergency medical services personnel a copy of:

(a) Any order that exists directing medical care for the resident; and

(b) The resident's advance directive for medical care.

(3) The home must inform the resident of the requirements in this section.

(4) The home is not required to contact emergency medical services when a resident is receiving hospice care by a licensed hospice agency and the:

(a) Emergency relates to the expected hospice death; and

(b) Situation is monitored by the hospice agency.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to contact

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Attestation Statement

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Date

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(i) Any order exists directing medical care for the resident;

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(4) The home is not required to contact emergency medical services when a resident is receiving hospice care by a licensed hospice agency and the:

(a) Emergency relates to the expected hospice death; and

(b) Situation is monitored by the hospice agency.

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to contact

emergency medical services for 1 of 6 residents (Resident 5). This failure resulted in physical injuries and delayed treatment for Resident 5.

Findings included...

Record review of AFH Policy named "Contacting Emergency Medical Services," dated 07/05/2024, showed that AFH would call 911 in the event of an emergency unless the caregiver present at the time of emergency was a licensed physician or registered nurse acting within their scope of practice.

Record review of Resident's 5 undated Adult Family Home (AFH) record named "Daily Communication Progress Note", showed Resident 5 had sustained an unwitnessed fall on 09/14/2024 at 7:32 AM. The progress note showed Resident 5 was found on the ground in their bedroom. The named "Daily Communication Progress Note" was not signed by any specific caregiver. The record showed that the incident was reported by Staff C, Caregiver, to Staff A, Entity Representative. The record showed no information about who, when and to whom Resident's 5 fall injury was reported to. The record did not show what actions the AFH had taken to address Resident's 5 fall.

Record review on 09/27/2024 of text correspondences between Staff A and Resident 5's Family Representative (CC1) showed that Staff A reported to CC1 on 09/14/2024 at 9:17 AM that Resident 5 had a fall. The text correspondences from Staff A to CC1 showed that Resident 5 was unable to walk without the aid of an assistive device. The text messages stated that Resident 5 had complained of hip pain when they tried to walk.

Record review on 09/27/2024 of text correspondence between Staff A and CC1 on 09/14/2024 at 12:54 PM, showed Staff A stated that Resident 5's right leg hip pain was still present and had resulted in Resident 5 refusing to walk. The text correspondences stated that Resident 5 was now utilizing a wheelchair.

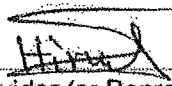
Record review of Resident 5's Assessment and Care Plan, dated 07/12/2024, stated Resident 5 can transfer independently, but is a fall risk and requires safety checks. Resident's 5 assessment and care plan stated, "Always notify the Primary MD when a resident has fallen. Even if there is no injury."

During an interview on 09/27/2024 at 9:41 AM, Staff C, stated that on 09/14/2024 at 7:32 AM, they heard Resident's 5 bed pad alarm. Staff C stated that from Resident 4's bedroom they heard Resident 5 crying and yelling for help. Staff C stated that they ran to Resident's 5 bedroom. Staff C stated that they found Resident 5 on the floor in their bedroom.

During an interview, on 09/27/2024 at 11:57 AM, Staff A stated that they wanted to call 911 but CC1 had told them to not call 911. Staff A stated that they had no others falls in the AFH that had resulted in injury and that they did not know what to do.

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During an interview on 10/08/2024 at 1:30 PM, CC1 stated that Resident 5 had a fall in the AFH. The CC1 stated that the AFH had not gotten Resident 5 medically evaluated after their fall.

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(Date) <u>12/07/2024</u>	
In addition, I will implement a system to monitor and ensure continued compliance with this requirement.	
 _____ Provider (or Representative)	<u>11/12/2024</u> _____ Date

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During an interview on 10/08/2024 at 1:30 PM, CC1 stated that Resident 5 had a fall in the AFH. The CC1 stated that the AFH had not gotten Resident 5 medically evaluated after their fall.

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