STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

#1st Seniors Hope Adult Family Home LLC

#1st Seniors Hope Adult Family Home LLC
4020 61st Ct SW
Olympia, WA 98512

RE: #1st Seniors Hope Adult Family Home LLC License # 755028

Dear Provider:

This letter addresses Compliance Determination(s) 28420 (Completion Date 09/13/2023) and 24198 (Completion Date 07/10/2023).

The Department completed a follow-up inspection of your Adult Family Home on 09/13/2023 and found that you have corrected the violations listed in the Full report dated 07/10/2023. Your home is back in compliance as of 08/10/2023 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 388-76-10475-3-a, WAC 388-76-10265-1-d

The Department staff who did the on-site verification:
Andria Underwood, LTC Surveyor

If you have any questions, please contact me at (360)664-8421.

Sincerely,

Jennifer LeMaster

Jennifer LeMaster, Field Manager
Region 3, Unit G
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
6639 Capitol Blvd SW, Floor 1, Tumwater, WA 98501

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 05/17/2023 and 05/17/2023 of:
#1st Seniors Hope Adult Family Home LLC
4020 61st Ct SW
Olympia, WA 98512

The following sample was selected for review during the unannounced on-site visit: 2 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Andria Underwood, LTC Surveyor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit G
6639 Capitol Blvd SW, Floor 1
Tumwater, WA 98501

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.

Jennifer LeMaster
Residential Care Services

07/13/2023
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.

Plan of Correction
Page 2 of 3

Provider (or Representative) 07/20/23
Date

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

(3) Ensure the medication log includes:

(a) Initials of the staff who assisted or gave each resident medication(s).

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure the medication log for 1 of 6 residents (Resident 5) included the initials of staff who administered medications. This failure put Resident 5 at risk for not receiving medications as prescribed.

Findings included:

During record review, Resident 5's Medication Administration Record (MAR) for the month of May 2023 was missing a page of records which included 8 daily medications.

During interview with the Provider on 05/17/2023 at 12:30 PM, they said they had been giving the medications and knew they have been signing off on the MAR but must have misplaced the form.

At 12:36 PM, the Provider produced the missing MAR page. Review of the page showed medication administration had not been signed off by AFH staff from 05/13/2023 – 05/17/2023 for the 8 daily medications.

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, #1st Seniors Hope Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 08/10/23

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

Provider (or Representative) 07/20/23
Date

Provider (or Representative) Date

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Provider (or Representative) Date

License #: 755038 | #1st Seniors Hope Adult Family Home LLC | Licensee: #1st Seniors Hope Adult Family Home

Compliance Determination # 24195
Completion Date
07/10/2023

WAC 388-76-10265 Tuberculosis Testing Required.

(1) The adult family home must develop and implement a system to ensure the following persons have tuberculosis testing within three days of employment:

(d) Caregiver;

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have Tuberculosis testing completed within three days of employment for 2 of 3 caregivers (Caregiver 1 and Caregiver 3). This failure placed 6 of 6 residents (Residents 1, 2, 3, 4, 5, and 6) at risk for being cared for by caregivers with unknown tuberculosis status.

Findings included...

During staff record review, Caregiver 1's date of hire was 02/16/2023 and Caregiver 3's date of hire was 01/01/2022. Caregiver 1's Tuberculosis test was not in their file and Caregiver 3's Tuberculosis blood test was completed on 04/13/2022.

During interview with Provider on 05/17/2023 at 1:15 PM, they said Caregiver 1 had completed the Tuberculosis test and would send the records. Provider confirmed Caregiver 3's test was completed on 04/13/2022.

On 05/19/2023 at 5:46 PM, the Provider sent copy of Caregiver 1's Tuberculosis testing which showed Caregiver 1 completed step one of the skin test on 03/31/2023.

Attestation Statement

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07/20/23

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Provider (or Representative) _____ Date _____

st Seniors Hope AFH
Licence # 755028
4020 61st Ct SW,
Olympia, WA 98512
07/20/2023

Jennifer LeMaster,
Field Manager ,
RCS
Region 3 Unit G
6639 Capital Blvd SW Floor 1
Tumwater, WA 98501
360-664-6421

RE: PLAN OF CORRECTION

Dear Jennifer LeMaster/ whom it may concern,

1.TB Testing Requirement deficiency
I plan to correct this deficiency in future by making sure all my employs are TB tested by the third day of employment. I will come up with a list to check for all employees employment requirements.
I will forward my sample check list by 8/10/2023 .
This deficiency has since been corrected and ppd skin test results forwarded to my inspector.
I intend to mail them too upon request.

Joan Kagimbi 07/20/23

2. Medication log not being signed
I Will ensure that the medication log has been initialed on time and with each medication administration.
All my caregivers will get in services / house education reminding them to complete daily tasks and especially on medicating giving.
This deficiency has been corrected
Joan Kagimbi. 07/20/23