



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

Alpine Drive AFH LLC
Alpine Drive AFH
2738 Alpine Dr SE
Auburn, WA 98002

RE: Alpine Drive AFH License # 755659

Dear Provider:

This letter addresses Compliance Determination(s) 40050 (Completion Date 04/19/2024) and 38414 (Completion Date 03/22/2024).

The Department completed a follow-up inspection of your Adult Family Home on 04/19/2024 and found that you have corrected the violations listed in the Full report dated 03/22/2024. Your home is back in compliance as of 04/02/2024 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 388-76-10175-1, WAC 388-76-10420-7-b, WAC 388-76-10485-3, WAC 388-76-10485-1

The Department staff who did the on-site verification:
Michele Grumke, AFH Licenser

If you have any questions, please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong, Field Manager
Region 2, Unit G
Residential Care Services



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
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20425 72nd Avenue S, Suite 400, Kent, WA 98032

Statement of Deficiencies	License #: 755659	Compliance Determination # 38414
Plan of Correction	Alpine Drive AFH	Completion Date
Page 1 of 5	Licensee: Alpine Drive AFH LLC	03/22/2024

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 the unannounced on-site full inspection on 03/18/2024 and 03/18/2024 of:

Alpine Drive AFH
2738 Alpine Dr SE
Auburn, WA 98002

The following sample was selected for review during the unannounced on-site visit: 2 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Michele Grumke, AFH Licenser

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit G
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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.

Dahl Kim

Residential Care Services

03/27/2024

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.

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

Jacqueline Kimani
Provider (or Representative)

04/02/2024
Date

WAC 388-76-10175 Background checks Employment Conditional hire Pending results of Washington state name and date of birth background check. An adult family home may conditionally employ a person directly or by contract, pending the result of a Washington state name and date of birth background check, provided the home:

(1) Submits the Washington state name and date of birth background check no later than one working day after conditional employment;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to submit a name and date of birth background check no later than one business day for 1 of 3 current staff (Staff C, Caregiver). This failures resulted in staff working with residents (Residents 1, 2, 3, 4, and 5) with an unknown background.

Findings included...

During a visit on 03/15/2024 at 9:14 am, observation showed Resident 1, 2, 3, 4, and 5 lived in and received care from the AFH.

Review of Staff C's personnel records showed a hire date of 01/09/2024. Further review of Staff C's records found a name and date of birth background check completed on 01/17/2024.

Review on 03/26/2024 of Background Check Central Unit (BCCU) records showed Staff C submitted a Washington state name and date of birth background check on 01/16/2024, 7 days after their date of hire.

In an interview on 03/15/2024 at 11:55 AM, Staff A, Entity Representative/Resident Manager, stated that they thought staff not having a background check was okay while they were completing orientation and always had another staff with them.

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, Alpine Drive AFH is or will be in compliance with this law and / or regulation on (Date) 04/02/2024.

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

Jacqueline Kimani

Provider (or Representative)

04/02/2024

Date

WAC 388-76-10420 Meals and snacks. The adult family home must:

(7) Ensure food is:

(b) Safe, sanitary, and uncontaminated.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the Adult Family Home (AFH) failed to ensure food handling procedures were followed by 1 of 2 staff (Staff B) when they prepared lunch for 5 of 5 residents (Resident 1, 2, 3, 4, and 5). This failure placed all 5 residents at risk of food borne illness.

Findings included...

During a visit on 03/15/2024 at 9:14 am, observation showed Resident 1, 2, 3, 4, and 5 lived in and received care from the AFH.

On 03/15/2024 at 11:48 AM observation showed Staff B was preparing lunch for the residents. Further observation showed Staff B was washing grapes at the kitchen sink and placed them in a small bowl with bare ungloved hands.

In an interview on 03/15/2024 at 11:49 AM, Staff B stated that they had forgotten to put on gloves.

Review of "Food Safety is Everybody's Business; Your Guide to Preventing Foodborne Illnesses" dated, May 2013 from the Washington Department of Health, showed that staff were not allowed to touch ready-to-eat foods with their bare hands, this was to keep germs from getting onto ready-to-eat foods.

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, Alpine Drive AFH is or will be in compliance with this law and / or regulation on (Date) 04/02/2024.

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

Jacqueline Kimani

Provider (or Representative)

04/02/2024

Date

WAC 388-76-10485 Medication storage. The adult family home must ensure all prescribed and over-the-counter medications are stored:

(1) In locked storage;

(3) Appropriately for each medication, such as if refrigeration is required for a medication and the medication is kept in refrigerator in locked storage.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to keep medication found in the medication storage closet, a medication storage container found in the refrigerator in the garage, and medication found in 1 of 6 residents (Resident 3) bedroom in locked storage. These failures placed both ambulatory residents (Resident 2 and Resident 5) at risk of harm or injury if they accessed and inappropriately took unlocked medications.

Findings included...

During a visit on 03/15/2024 at 9:14 am, observation showed Resident 1, 2, 3, 4, and 5 lived in and received care from the AFH. Observation also showed Resident 2 and Resident 5 ambulated independently in the AFH.

On 03/15/2024 at 9:23 AM observation showed Staff B, Caregiver, in the medication storage closet and a resident standing within 4 feet of the door of the closet. Further observation showed Staff B left the medication closet door wide open and walked into the kitchen with her back to the medication storage closet door. Additionally, Staff B returned to the medication storage closet within 1 minute.

In an interview on 03/15/2024 at 9:23 AM, Staff B stated that they were just at the medication storage closet giving medication.

On 03/15/2024 at 10:20 AM observation showed the door to the garage was unlocked.

In an interview on 03/15/2024 at 10:21 AM, Staff A, Entity Representative/Resident Manager, stated that the garage was unlocked as caregivers were going in and out of the garage. Staff A further stated that staff were providing resident care and cleaning in the morning, and the garage was unlocked for those reasons. Additionally, Staff A stated that the garage was otherwise kept locked.

On 03/15/2024 at 10:30 AM observation showed the garage refrigerator had a lockable storage box with a combination code. Further observation showed Staff A took the storage box out of the refrigerator and was able to open it without entering a code. Additionally, observation showed the storage box contained; 1 box of Insulin Glargine (liquid injection for control of high blood sugar), inject 14 units subcutaneously (under the skin) daily at bedtime and 5 boxes of Insulin Lispro 100 units, inject subcutaneously three times daily per sliding scale for Resident 1.

In an interview on 03/15/2024 at 10:31 AM, Staff A stated that they had lost the code to the lock box.

On 03/15/2024 at 2:52 PM observation showed in the bottom left drawer of Resident 3's dresser the following prescribed medications: Antifungal 2 percent (%) powder, apply topically to affected areas of the skin twice daily for fungal infection and Destin 40 % paste, apply to the affected areas four times daily for diaper rash.

In an interview on 03/15/2024 at 2:53 PM, Staff B, Caregiver, stated that the medication was kept in Resident 3's bedroom because they used it several times a day.

In an interview on 03/15/2024 at 4:27 PM, Staff A stated that they had told staff not to do that [keep resident medication in resident bedrooms].

Attestation Statement

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

Jaqueline Kimani
Provider (or Representative)

04/02/2024
Date