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

Amboseli Adult Family Home LLC

Amboseli Adult Family Home LLC
29813 20th Ave S
Federal Way, WA 98003

RE: Amboseli Adult Family Home LLC License # 755707

Dear Provider:

This letter addresses Compliance Determination(s) 35943 (Completion Date 01/29/2024) and 32767 (Completion Date 12/01/2023).

The Department completed a follow-up inspection of your Adult Family Home on 01/29/2024 and found that you have corrected the violations listed in the Complaint report dated 12/01/2023. Your home is back in compliance as of 12/20/2023 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 388-76-10200-1, WAC 388-112A-0080-3

The Department staff who did the on-site verification:
Mavis Downing, NCI

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

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Residential Care Services
Investigation Summary Report

Provider/Facility: Amboseli Adult Family Home LLC **Provider Type:** Adult Family Home
License/Cert.#: 755707
Intake ID: 106690
Compliance Determination #: 32767
Region/Unit #: RCS Region 2 / Unit G
Investigator: Mavis Downing
Investigation Date(s): 11/14/2023 through 12/01/2023
Complainant Contact Date(s):

Allegation(s):
The Adult Family Home (AFH) hired a staff member who had not completed the minimum caregiver training and allowed the staff member to provide resident care including incontinence care, transfers and feeding assistance without supervision.

Investigation Methods:

Sample:	Total residents: 3 Resident sample size: 3 Closed records sample size:
Observations:	Residents Staff Environment
Interviews:	Residents Staff
Record Reviews:	Assessments Negotiated Care Plan (NCP) Background check and finger print Staffing schedule

Investigation Summary:
Observation on 11/14/2023 showed three residents and one staff, Staff C who was responsible for the resident care. There was no other staff in the home.
Observation showed, all the residents in the home had multiple diagnoses and required extensive assistance of staff for Activities of Daily Living (ADLs).
In an interview, Staff C was unable to provide the resident medical records when requested by the complaint investigator.
In the interview, Staff C was unable to state the specific care needs of the residents in the home.
In an interview, Staff C stated they were hired the day before on (11/12/2023).
In an interview, Staff C stated they had not completed the minimum caregiver training in the state of Washington, but they were registered to start the caregiver training anytime. The staff member provided the said registration issued by the department of Health.

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Observation showed Staff C preparing and serving all the three residents the lunch meal.
Observation on 11/14/2023 at 1:58 PM (45 minutes after investigator's entry in the home), showed another staff, Staff B, Caregiver enter the home. Staff B stated that, Staff C was not an employee of the AFH, but a volunteer. Staff B stated that, Staff C was ok to be in the home and provide resident care as long as Staff C had a registration to start caregiver training soon.
Observation showed Staff C providing resident care including transferring Residen1 from the bed to the wheelchair and vise versa, assisting resident 1 to eat and assisting Resident 2 with incontinence care and including helping the resident to sit at the edge of the bed.
Observation showed, Staff C transfer Resident 1 from the bed to the wheel chair and wheeled the resident outside of the home to smoke. Staff C then wheeled the resident back in the home after the resident was done smoking.
In an interview, Staff A, Entity Representative, confirmed Staff C was not an employee of the AFH, but was a volunteer. Staff C confirmed Staff C had not completed the minimum care giver training.
This constituted failed practice.
The AFH was cited.
Please refer to citation;
WAC 388 -76-(10200)(1)
WAC 388-112A(0080)(3)
The citation is dated 12/01/2023.

Conclusion / Action:

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

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DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

20425 72nd Avenue S, Suite 400, Kent, WA 98032

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 11/14/2023 and 11/14/2023 of:

Amboseli Adult Family Home LLC
29813 20th Ave S
Federal Way, WA 98003

This document references the following complaint number(s): 106690

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

The department staff that investigated the Adult Family Home:

Mavis Downing, NCI

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

12/06/2023 — 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.

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Provider (or Representative) Date 12/15/2023

WAC 388-76-10200 Adult family home Staff Availability Contact information. In addition to other licensing requirements for staff availability, the adult family home must:

(1) Ensure at least one qualified caregiver is present in the home whenever one or more residents are present in the home, except as provided in subsection (2). For purpose of this subsection, a qualified caregiver means someone who has completed orientation and basic training as required by chapter 388-112A WAC;

WAC 388-112A-0080 Who is required to complete the seventy-hour long-term care worker basic training and by when? The following individuals must complete the seventy-hour long-term care worker basic training unless exempt as described in WAC 388-112A-0090 : Adult family homes.

(3) Long-term care workers in adult family homes within one hundred twenty days of date of hire. Long-term care workers must not provide personal care without direct supervision until they have completed the seventy-hour long-term care worker basic training. Assisted living facilities.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure the AFH staff had acquired minimum training requirements for AFH Caregivers for resident care, when Staff C, Caregiver was found providing care for 3 of 3 residents (Resident 1, 2, and 3) without supervision of a trained staff member. This failure placed all the residents at risk for unsafe care provision and unmet needs.

Findings included...

Observation on 11/14/2023 at 01:03 PM, showed three residents (Residents 1, 2 and 3) in the AFH with Staff C.

Review of Resident 1's assessment dated 02/28/2023, showed, Resident 1 had multiple

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medical diagnoses, and used a wheelchair for mobility. This assessment showed, Resident 1 required extensive assistance of two staff for transfers and extensive assistance for activities of daily living including toileting, feeding, medication administration and bathing.

Review of Resident 2's Negotiated Care Plan (NCP) dated 08/27/2023, showed that Resident 2 had multiple diagnoses including [redacted] and required extensive assistance of staff to get out of bed. This care plan showed that Resident 2 was identified as a fall risk and had wandering and exit seeking behaviors. The resident required assistance of staff with medication administration.

Review of Resident 3's NCP dated 10/26/2023, showed, Resident 3 had multiple major medical diagnoses including [redacted]. This NCP showed Resident 3 required assistance of staff with medication assistance, used a walker for mobility, was incontinent and required cueing and redirecting.

On 11/14/2023 at 01:05 PM, in an interview, Staff C stated that they were alone in the home and responsible for all resident care. Staff C stated that Staff A, Provider, had gone out. When Staff C, called Staff A on the speaker phone, to notify Staff A about the department's staff's presence in the home, Staff A was heard stating that, they were far away from the home and were unable to return to the home and assigned Staff B, Caregiver to come to the home and provide requested investigative materials to the department staff.

On 11/14/2023 at 01:05 PM in a continuous interview, Staff C stated that they did not know where the residents' records were, as they were just hired two days ago on 11/12/2023. Staff C added that they had not completed the minimum caregiver training requirements. Staff C stated that they were registered with the department of health to start a Certified Nursing Assistant (CNA) course and provided a copy of their registration.

In a continuous interview on 11/14/2023 at 01:05 AM Staff C stated that they were being trained on the job by Staff A and Staff B.

Observation on 11/14/2023 at 01:10 PM showed, Staff C assisted Resident 1 with changing incontinence briefs and assisting the resident from the lying position in bed to sitting at the edge of the bed to eat lunch.

Observation on 11/14/2023 at 01:20 PM, showed Staff C assisted Resident 2 to transfer from the bed to the wheelchair. Staff C then wheeled Resident 2 outside of the home to smoke a cigarette. Staff C then wheeled Resident 2 inside the home and transferred the Resident 2 back into the bed.

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Observation on 11/14/2023 at 01:25 PM showed Staff C prepared the lunch meal for all other residents.

Observation on 11/14/2023 at 01:40 PM, showed Staff C assisting Resident 2 to eat lunch.

Observation on 11/14/2023 at 01:45 PM showed Staff C preparing lunch meal for Resident 3. In the interview, Staff C stated that, Resident 3 ate their meals in the dining room. Staff C then went to Resident 3's bedroom to notify the resident that the lunch meal was ready.

On 11/14/2023 at 01:58 PM, Staff B, Caregiver, whom Staff A had sent to the home and assigned to provide the department staff with all required documents for the visit, entered the home (45 minutes after the department staff's entry into the home).

In an interview on 11/14/2023 at 01:59 PM, Staff B stated that Staff C was not an employee of the home but a volunteer. Staff B confirmed that Staff C had not completed the required minimum caregiver training. Staff B added that it was okay for Staff C to provide care in the home independently without supervision if Staff C was registered to start their CNA training.

On 11/14/2023, at 02:15 PM, Staff A entered the home. In an interview, Staff A said that Staff C was a volunteer, and provided all resident care. Staff A confirmed that Staff C had not completed the required training to provide resident care.

Attestation Statement

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Statement of Deficiencies	License #: 755707	Compliance Determination # 32767
Plan of Correction	Amboseli Adult Family Home LLC	Completion Date
Page 5 of 5	Licensee: Amboseli Adult Family Home LLC	12/01/2023

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, Amboseli Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 12/20/2023.

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

Provider (or Representative) — Date: 12/15/2023

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