



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

Sanwa Healthcare LLC
Elmwood Cottage Adult Family Home
1511 Elmwood St
Wenatchee, WA 98801

RE: Elmwood Cottage Adult Family Home License # 756255

Dear Provider:

This letter addresses Compliance Determination(s) 31760 (Completion Date 10/27/2023) and 30048 (Completion Date 10/03/2023).

The Department completed a follow-up inspection of your Adult Family Home on 10/27/2023 and found that you have corrected the violations listed in the Complaint report dated 10/03/2023. Your home is back in compliance as of 10/08/2023 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 388-76-10360, WAC 388-76-10355-7-c

The Department staff who did the on-site verification:
Brittney Shull, Community Complaint Investigator

If you have any questions, please contact me at (509)572-7394.

Sincerely,

Michelle Closner

Michelle Closner, Field Manager
Region 1, Unit C
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: Elmwood Cottage Adult Family Home

License/Cert.#: 756255

Compliance Determination #: 30048

Investigator: Michelle Closner

Investigation Date(s): 09/26/2023 through 10/03/2023

Complainant Contact Date(s):

Provider Type: Adult Family Home

Intake ID: 96055

Region/Unit #: RCS Region 1 / Unit C

Allegation(s):

1) The named resident had an unwitnessed fall and was found during rounds.

Investigation Methods:

Sample:	Total residents: 5 Resident sample size: 2 Closed records sample size: 0
Observations:	Environment, Residents, Staff to resident interaction, Staff availability and response to Residents' needs.
Interviews:	Residents, Staff, Other's not associated with the home.
Record Reviews:	Resident records, Policies, Incident Log.

Investigation Summary:

Interview and record review showed that the named resident had an unwitnessed fall without injury. It further showed that interventions were in place to prevent further falls and all notifications were made. The Adult Family Home (AFH) failed to ensure a negotiated care plan was developed within thirty days of an admission. Failed Practice Identified, WAC 388-76-10360 reference Statement of Deficiencies dated 10/04/2023.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



Residential Care Services Investigation Summary Report

Provider/Facility: Elmwood Cottage Adult Family Home

License/Cert.#: 756255

Compliance Determination #: 30048

Investigator: Michelle Closner

Investigation Date(s): 09/26/2023 through 10/03/2023

Complainant Contact Date(s):

Provider Type: Adult Family Home

Intake ID: 97700

Region/Unit #: RCS Region 1 / Unit C

Allegation(s):

- 1) The named resident had an unwitnessed fall and was found while calling for help.

Investigation Methods:

Sample:	Total residents: 5 Resident sample size: 2 Closed records sample size: 0
Observations:	Environment, Residents, Staff to resident interaction, Staff availability and response to Residents' needs.
Interviews:	Residents, Staff, Other's not associated with the home.
Record Reviews:	Resident records, Policies, Incident Log.

Investigation Summary:

Interview and record review showed that the named resident had an unwitnessed fall without injury. It further showed that interventions were in place to prevent further falls and all notifications were made. The Adult Family Home (AFH) failed to ensure the named resident's negotiated care plan included related safety plans. Failed Practice Identified, WAC 388-76-10355 reference Statement of Deficiencies dated 10/04/2023.

Conclusion / Action:

- ☒ 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
1200 Alder Street, Union Gap, WA 98903

Statement of Deficiencies	License #: 756255	Compliance Determination # 30048
Plan of Correction	Elmwood Cottage Adult Family Home	Completion Date
Page 1 of 4	Licensee: Sanwa Healthcare LLC	10/03/2023

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 09/26/2023 and 09/26/2023 of:

Elmwood Cottage Adult Family Home
1511 Elmwood St
Wenatchee, WA 98801

This document references the following complaint number(s): 98055, 97700

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 investigated the Adult Family Home:

Brittney Shull, Community Complaint Investigator
Michelle Closner, Complaint Nurse Field Manager

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1, Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Michelle Closner
Residential Care Services

10/06/2023
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.

Statement of Deficiencies

License #: 756255

Compliance Determination # 30048

Plan of Correction

Elmwood Cottage Adult Family Home

Completion Date

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Licensee: Sanwa Healthcare LLC

10/03/2023

Nellius Stern, R. Scali
 Provider (or Representative)

10/08/23
 Date

WAC 388-76-10360 Negotiated care plan Timing of development Required. The adult family home must ensure the negotiated care plan is developed and completed within thirty days of the resident's admission.

This requirement was not met as evidenced by:

Based on interview and record review the Adult Family Home (AFH) failed to ensure that the Negotiated Care Plan (NCP) was developed within 30 days of the resident's admission for 1 of 1 resident (Resident 1). This failure placed residents at risk for unmet needs.

Findings included...

A record review of Resident 1's Face Sheet showed that Resident 1 was admitted on [REDACTED]/2023.

A record review of Resident 1's chart on 09/26/2023 showed that the NCP was not found in the record.

In an interview on 09/26/2023 at 1:02 PM Staff A, Provider, stated that Resident 1 was admitted on [REDACTED]/2023. They further stated that they were still working on the care plan and did not know the time frame that the NCP should be completed by after an admission.

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, Elmwood Cottage Adult Family Home is or will be in compliance with this law and / or regulation on
 (Date) 10/08/23.

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

R. Scali
 Provider (or Representative)

10/08/23
 Date

WAC 388-76-10355 Negotiated care plan. The adult family home must use the resident assessment and preliminary care plan to develop a written negotiated care plan. The home must ensure each resident's negotiated care plan includes:

(7) If needed, a plan to:

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Plan of Correction
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License #: 756255
Elmwood Cottage Adult Family Home
Licensee: Sanwa Healthcare LLC

Compliance Determination # 30048
Completion Date
10/03/2023

(c) Respond to resident's special needs, including, but not limited to medical devices and related safety plans;

This requirement was not met as evidenced by:

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure the Negotiated Care Plan (NCP) included a plan to respond to the resident's risk for falls for 1 of 1 resident (Resident 2). This failure placed residents at risk for falls.

Findings included...

A record review of Resident 2's Face Sheet showed that the resident had admitted to the home on [REDACTED] 2023.

A record review of Resident 2's NCP dated 07/13/2023 showed that there was nothing written about Resident 2's risk for falls, enablers (a device that makes something possible), or how to keep Resident 2 safe.

An interview on 09/26/2023 at 12:30 PM, Staff B, Caregiver, stated that they had been placing a pillow under Resident 2 to prevent them from getting out of bed without assistance. It further showed that they use a bed alarm to alert staff that Resident 2 is getting out of bed, and they also place a mattress under the bed at night to prevent injury from falls.

An observation on 09/26/2023 at 12:35PM showed Staff B demonstrating how they place a wedge-shaped pillow (typically used to position a person to alleviate points of pressure and prevent pressure injuries) under Resident 2's mattress.

In an interview on 09/26/2023 at 12:43PM, Staff A, Provider, stated that Resident 2 had a history of falling related to their medical condition and did not think preventing falls entirely was possible. They further stated that they had been using a mattress on the floor, bed alarms, a wedge pillow and performing additional nighttime checks to try to minimize fall occurrence and injuries.

In an interview on 09/26/2023 at 1:42PM, Staff A stated that they were still working on Resident 2's NCP and that is why there were sections that were blank.

Attestation Statement

Statement of Deficiencies

License #: 756255

Compliance Determination # 30048

Plan of Correction

Elmwood Cottage Adult Family Home

Completion Date

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Licensee: Sanwa Healthcare LLC

10/03/2023

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, Elmwood Cottage Adult Family Home is or will be in compliance with this law and / or regulation on

(Date) 10/08/23

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

Nellie Sen Bah

Provider (or Representative)

10/08/23

Date