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

Blessed Home Inc

Blessed Home Inc
8301 Onyx Dr SW
Lakewood, WA 98498

RE: Blessed Home Inc License # 756783

Dear Provider:

This letter addresses Compliance Determination(s) 56921 (Completion Date 04/03/2025) and 54190 (Completion Date 02/04/2025).

The Department completed a follow-up inspection of your Adult Family Home on 04/03/2025 and found that you have corrected the violations listed in the Full report dated 02/04/2025. Your home is back in compliance as of 03/17/2025 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 388-76-10430, WAC 388-76-10430-1, WAC 388-76-10430-2, WAC 388-76-10430-2-c, WAC 388-76-10430-2-d, WAC 388-76-10430-3, WAC 388-76-10198, WAC 388-76-10198-1, WAC 388-76-10198-2, WAC 388-76-10198-2-b, WAC 388-76-10198-2-c, WAC 388-76-10198-4

The Department staff who did the on-site verification:
Daphne Gill, LTC Surveyor

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

Sincerely,

Jennifer LeMaster

Jennifer LeMaster, Community Nurse Field Manger
Region 3, Unit G
Residential Care Services

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Statement of Deficiencies	License #: 756783	Compliance Determination # 54190
Plan of Correction	Blessed Home Inc	Completion Date
Page 1 of 5	Licensee: Blessed Home Inc	02/04/2025

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 01/29/2025 of:
Blessed Home Inc
8301 Onyx Dr SW
Lakewood, WA 98498

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 inspected the Adult Family Home:

Daphne Gill, 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

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Page 2 of 5	Licensee: Blessed Home Inc	02/04/2025

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.

Clinton Fridley — Residential Care Services

02/07/2025 — 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.

Ernestina Bucaro — Provider (or Representative)

2/11/25 — Date

WAC 388-76-10430 Medication system.

(1) If the adult family home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications.

(2) When providing medication assistance or medication administration for any resident, the home must ensure each resident:

(c) Medication log is kept current as required in WAC 388-76-10475 ;

(d) Receives medications as required.

(3) Records are kept which include a current list of prescribed and over-the-counter medications including name, dosage, frequency and the name and phone number of the practitioner as needed.

This requirement was not met as evidenced by:

Based on record review, observations and interview, the adult family home (AFH) failed to have a system in place to meet the medication needs of residents and to ensure residents received medications as required for 3 of 3 residents (Resident 1 [R1], Resident 2 [R2] and Resident 3 [R3]). This failure placed R1, R2 and R3 at risk for a medication errors.

Findings included...

<Resident 3>

Record review on 01/29/2025 at 11:54 A.M., of Resident 3's (R3) Medication

Administration Record (MAR), dated January 2025, did not show signatures of administration for metoprolol succinate (for hypertension) and diphenhydramine (for allergy) as a daily dose.

An observation of R3's medication supply, on 01/29/2025, showed that metoprolol succinate and diphenhydramine was included in R3's medication supply.

During an interview on 01/29/2025 at 12:05 P.M., the Resident Manager (RM) reported forgetting to sign the MAR from 01/01/2025 through 01/29/2025 for both medications.

RM confirmed metoprolol succinate was given in the mornings and diphenhydramine was given before bedtime.

<Resident 1>

Record review on 01/29/2025 at 12:17 P.M., of Resident 1's (R1) Medication Administration Record (MAR), dated January 2025, showed Ferrous Sulfate (for low blood level) and Acetaminophen (for pain) as a daily dose and a as needed dose.

An observation of R1's medication supply, on 01/29/2025, showed that ferrous sulfate and acetaminophen was not included in the medication supply. Banophen (for allergy), and Ergocalcif (for calcium supplement) were included in R1's medication supply and not listed on the MAR. Omeprazole (for acid reflex) showed a dosage of 40 milligrams/one capsule daily on the bottle and the MAR showed the dosage as 20 milligrams/one capsule daily.

During an interview on 01/29/2025 at 12:35 P.M., the Resident Manager (RM) reported being unsure why ferrous sulfate and acetaminophen was missing from R1's medication supply. RM explained Banophen and Ergocalcif prescriptions came from the Veterans Administration (VA) hospital and are not included on the MAR that comes from Lincoln Pharmacy. RM reported being unsure why omeprazole has two different dosage amounts and would need to verify with the pharmacy.

<Resident 2>

Record review on 01/29/2025 at 12:42 P.M., of Resident 2's (R2) MAR, dated January 2025, showed Vitamin B-12 (for heart disease) administered as a daily dose.

An observation of R2's medication supply, on 01/29/2025, showed that Vitamin B-12 was not included in R2's medication supply.

During an interview on 01/29/2025 at 12:50 P.M., the Resident Manager (RM) reported being unsure why Vitamin B-12 was missing from R2's medication supply. RM did not confirm if Vitamin B-12 was given to R2 as a daily dose.

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, Blessed Home Inc is or will be in compliance with this law and / or regulation on (Date) 3/17/25.

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

Ernestina Quasas — Provider (or Representative)

2/11/25 — Date

WAC 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

(1) Staff information such as address and contact information.

(2) Staff orientation and training records pertinent to duties, including, but not limited to:

(b) Cardiopulmonary resuscitation;

(c) First aid; and

(4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on record review and interview, the adult family home failed to ensure staff had a current Washington state name and date of birth background check on file for 3 of 3 staff (Provider, Resident Manager, and Staff A) and required training documents for 1 of 3 staff (Staff A). These failure placed all residents at risk of harm by receiving care and services from individuals whose criminal history is unknown and determining CPR/First Aid training history for caregiving staff.

Findings included...

During an administrative/staff record review on 01/29/2025 at 1:15 P.M., for Provider, Resident Manager (RM) and Staff A, records contained no evidence of a current

Statement of Deficiencies	License #: 756783	Compliance Determination # 54190
Plan of Correction	Blessed Home Inc	Completion Date
Page 5 of 5	Licensee: Blessed Home Inc	02/04/2025

Washington state name and date of birth background check report. Staff A records contained no evidence of current CPR/First Aid certification.

During an interview on 01/29/2025 at 2:00 P.M., the Provider reported being unsure where the Washington state name and date of birth background check reports and current CPR/First Aid documents were and did not know why they were not in the staff records.

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, Blessed Home Inc is or will be in compliance with this law and / or regulation on (Date) 3/17/25

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

Ernestine Beasley — Provider (or Representative)

2/11/25 — Date