



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20816 44th Ave West, Suite 240, Lynnwood, WA 98036-7744

May 17, 2019

Giulian I Milascon
GIULIANS ADULT FAMILY HOME
2733 168TH ST SE
BOTHELL, WA 98012

RE: GIULIANS ADULT FAMILY HOME License #312804

Dear Provider:

On May 17, 2019 the Department completed a review of communication and / or documents from you indicating that you have corrected the deficiency or deficiencies cited in the report/s dated April 2, 2019.

Based on the review of this information the Department finds the deficiency or deficiencies have been corrected. Your home meets the adult family home licensing requirements.

The Department staff who did the off-site verification:
Lyra Ouano, AFH Licensor

If you have any questions please, contact me at (425) 670-6061.

Sincerely,

Brenda Mooney, Field Manager
Region 2, Unit I
Residential Care Services



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RECEIVED
 APR 19 2019
 DSHS/AL TSA/RCS

Statement of Deficiencies	License #: 312804	Completion Date
Plan of Correction	GIULIANS ADULT FAMILY HOME	April 2, 2019
Page 1 of 5	Licensee: GIULIAN MILASCON	

You are required to be in compliance with all of the licensing laws and regulations at all times to maintain your adult family home license.

The department has completed data collection for the unannounced on-site full inspection of:
 3/20/2019

GIULIANS ADULT FAMILY HOME
 2733 168TH ST SE
 BOTHELL, WA 98012

The department staff that inspected the adult family home:
 Lyra Ouano, AFH Licensors

From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 2, Unit I
 20816 44th Ave West, Suite 240
 Lynnwood, WA 98036-7744
 (425)670-6061

As a result of the on-site full inspection 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.

Brenda McCreary
 Residential Care Services

04/05/2019
 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.

[Signature]
 Provider (or Representative)

4-17-19
 Date

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

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.

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This requirement was not met as evidenced by:

DSHS/ALTA/RCS

Based on observation, interview and record review, the adult family home (AFH) failed to develop a negotiated care plan (NCP) for one of two residents (R) (R#1) within thirty days of R#1's admission. This placed the R#1 at risk of unmet needs.

Findings included...

On 03/20/19, at about 01:00 PM in the dining room, observation showed Staff A and Staff B serving lunch to four residents, including R#1.

On 03/20/19, review of R#1's record showed the AFH admitted R#1 on [REDACTED] 18. Review of R#1's NCP dated 06/05/18 showed on page ten was the signature page with Staff A and R#1's signatures dated 06/01/8. R#1's NCP signature page also showed a "Review/Revised" date of 09/01/18 and signed by Staff A and R#1. R#1's NCP was not developed within 30 days of admission. There was no other NCP found for R#1.

On 03/20/19, at 02:50 PM interview, Staff B said R#1 came from another facility prior to the AFH admission. When asked, Staff B said during R#1's admission, R#1 was not sure if R#1 would continue to stay in the AFH past the 30 days. When asked about the NCP was not developed within 30 days of admission, Staff B said she missed the 30 days window.

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, GIULIANS ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 3-15-19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Provider (or Representative)

4-17-19

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:

- (2) Staff orientation and training records pertinent to duties, including, but not limited to:
 - (a) Training required by chapter 388-112A WAC, including as appropriate for each staff person, orientation, basic training or modified basic training, specialty training, nurse delegation core training, and continuing education;

WAC 388-112A-0610 Who is required to complete continuing education training each

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year, how many hours of continuing education are required, and when must they be completed?

(1) Adult family homes.

(b) If exempt from certification as described in RCW 18.88B.041, long-term care workers must complete twelve hours of continuing education by their birthday each year.

(i) Unless voluntarily certified as a home care aide under chapter 18.88B RCW, the continuing education does not apply to registered nurses and licensed practical nurses licensed under chapter 18.79 RCW.

(ii) Continuing education requirements under subsection (1)(b) of this section do not apply to certified nursing assistants and persons with special education training and an endorsement granted by the superintendent of public instruction, as described in RCW 28A.300.010.

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home (AFH) failed to ensure two of two staff (Staff A and Staff B) had a complete set of staff records readily available to review. This failure delayed the Department from determining if Staff A and Staff B were qualified to care for the five residents (R) (R#1, R#2, R#3, R#4, and R#5).

Findings included...

On 03/20/19, at 11:50 AM interview, Staff A, the Provider, said both Staff A and Staff B were the only caregivers in the home. When asked, Staff A said Staff A and Staff B opened the AFH on 08/24/2005.

Staff A

On 03/20/19 Staff A's record review showed a birthday of February 28. Review of Staff A's continuing education (CE) records showed the following:

-From 02/28/17 to 02/28/18 (2017), did not show any CE certificates.

-From 02/28/18 to 02/28/19 (2018), eight hours of CE credits.

-From 02/28/19 to 02/28/20 (2019), 12.5 hours of CE certificates.

Staff A's record review showed Staff A was missing four hours of CE certificates in 2018, did not have CE records in 2017, and did not show enough CE hours for two birthday cycles.

Staff B

On 03/20/19 Staff B's record review showed a birthday of November 20. Review of Staff B's CE records showed the following:

-From 11/20/16 to 11/20/17 (2017), did not show any CE certificates.

-From 11/20/17 to 11/20/18 (2018), 20 hours of CE certificates.

Staff B's record review did not show enough CE hours for two birthday cycles.

On 03/20/19, at 02:50 PM interview, Staff B said both Staff A and Staff B attended CE courses in 2017 and 2018. When asked about previous year's CE certificates, Staff B said, "I think I threw it away".

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Attestation Statement

DSHS/AL TSA/RCS

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, GIULIANS ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 3-25-19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

4-17-19

Provider (or Representative)

Date

WAC 388-76-10230 Pets. The adult family home must ensure any animal visiting or living on the premises:

(3) Has proof of up-to-date rabies vaccinations.

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home failed to ensure one of one dog living in the home had a record of up-to-date rabies vaccinations. This placed five of five residents (R) (R#1, R#2, R#3, R#4, and R#5) at risk of possible disease exposure.

Findings included...

On 03/20/19, at 11:50 AM interview, Staff B said there was one dog living in the home. When asked, Staff B said the dog was old and stayed mostly in the staff's private area.

On 03/20/19 record review of the dog's rabies vaccination showed expiration date of 03/11/2018.

On 03/20/19, at 03:40 PM interview, Staff B said the dog could not have rabies vaccination anymore due to age. When asked about rabies vaccination exemption record, Staff B said, "It was only over the phone with the vet" (meaning the veterinarian).

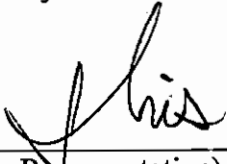
On 04/02/19, at 04:15 PM phone interview, the dog's veterinary clinic staff said the dog's rabies vaccination record expired on 03/11/18. When asked, the veterinary clinic staff said, there was no rabies vaccination exemption in the dog's file.

The AFH had a dog without current rabies vaccination since 03/11/18 up to present (12 months).

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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, GIULIANS ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 4-17-19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)

4-17-19

Date