



STATE OF WASHINGTON  
 DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
 AGING AND LONG-TERM SUPPORT ADMINISTRATION  
 3906-172nd St NE, Suite #100, Arlington, WA 98223

RECEIVED  
 FEB 18 2016  
 ADAS RCS  
 Social Services

Statement of Deficiencies	License #: 409500	Completion Date
Plan of Correction	ZINCAS ADULT FAMILY HOME INC	January 21, 2016
Page 1 of 8	Licensee: ZINCAS AFH INC	

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.

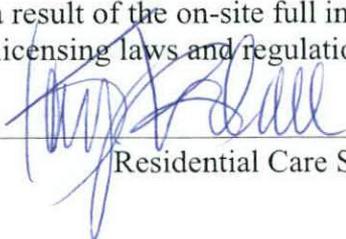
The department has completed data collection for the unannounced on-site full inspection of:  
 12/18/2015

ZINCAS ADULT FAMILY HOME INC  
 3213 104TH PL SE  
 EVERETT, WA 98208

The department staff that inspected the adult family home:  
 Patricia Johnson, BA, Licensor

From:  
 DSHS, Aging and Long-Term Support Administration  
 Residential Care Services, Region 2, Unit B  
 3906-172nd St NE, Suite #100  
 Arlington, WA 98223  
 (360)651-6872

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.

  
 Residential Care Services

1/31/16  
 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.

  
 Provider (or Representative)

2.10.16  
 Date

**WAC 388-76-101632 Background checks National fingerprint background check.**

(1) Individuals specified in WAC 388-76-10161 (2) who are hired after January 7, 2012 and are not disqualified by the Washington state name and date of birth background check, must complete a national fingerprint background check and follow department procedures.  
(3) The provider may accept a copy of a national fingerprint background check result letter and any additional information from the department's background check central unit from an individual who previously completed a national fingerprint background check through the background check central unit, provided the national fingerprint background check was completed after January 7, 2012.

**WAC 388-76-10176 Background checks Employment Provisional hire Pending results of national fingerprint background check. The adult family home may provisionally employ individuals hired after January 7, 2012 and listed in WAC 388-76-10161 for one hundred twenty-days and allow those individuals to have unsupervised access to residents when:**

- (1) The individual is not disqualified based on the results of the Washington state name and date of birth background check; and
- (2) The results of the national fingerprint background check are pending.

**This requirement was not met as evidenced by:**

Based on interview and record review, the provider failed to have a system in place to ensure that 1 of 2 sampled staff had a national fingerprint background check within 120 days of hire as required. This failure placed the residents at risk of receiving care from someone with a negative criminal history.

Findings include:

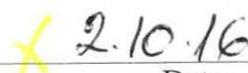
Record review on 12/18/15 revealed Caregiver C was employed on 7/18/15. The results for the Washington State, name and date of birth, background check were dated 8/26/15. There was no evidence that a fingerprint background check was completed for Caregiver C.

When interviewed on 12/18/15, the provider did not know that Caregiver C needed a finger print check done. The provider thought Caregiver C was exempt because she had worked as a caregiver before all the new training and qualification rules went into affect.

**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, ZINCAS ADULT FAMILY HOME INC is or will be in compliance with this law and / or regulation on (Date) 3.01.16. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

  
\_\_\_\_\_  
Provider (or Representative)

  
\_\_\_\_\_  
Date

**WAC 388-76-10335 Resident assessment topics. The adult family home must ensure that each resident's assessment includes the following minimum information:**

(6) Significant known behaviors or symptoms that may cause concern or require special care, including:

(a) The need for and use of medical devices;

**WAC 388-76-10650 Medical devices. Before the adult family home uses medical devices for any resident, the home must:**

(1) Review the resident assessment to determine the resident's need for and use of a medical device;

(2) Ensure the resident negotiated care plan includes the resident use of a medical device or devices; and

**This requirement was not met as evidenced by:**

Based on observation, interview and record review, the provider failed to to have a system in place to ensure that all medical devices for 1 of 2 sampled residents (Resident [REDACTED] were assessed and care planned. This failure placed the resident at risk of harm from entrapment if all caregivers were not aware of the precautions and proper use of bed side rails.

Findings include:

Resident [REDACTED] was admitted to the home on [REDACTED] 14 with diagnoses that include [REDACTED] advanced [REDACTED] with an open wound on the [REDACTED]

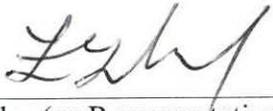
During a tour of the home on 12/18/15, the licensor observed Resident [REDACTED] in a hospital bed with two 1/4 bed side rails, both in the up position. The hospice nurse had just finished wound care and the resident was asleep due to the [REDACTED] (pain reliever) that was given her before the wound care was started.

Record review on 12/18/15 revealed no evidence that an assessment had been done for the ability of Resident [REDACTED] to use the bed side rails safely. In addition, the bed side rails were not mentioned in Resident [REDACTED]'s negotiated care plan. No caregiver directives were found in the care plan.

In an interview on 12/18/15, the provider said she didn't realize that an assessment was required for the use of the bed side rails and thought she had met the requirements since the risks and benefits were explained and Resident [REDACTED]'s durable power of attorney had signed the consent form.

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\_\_\_\_\_  
Provider (or Representative)

2.10.16  
\_\_\_\_\_  
Date

**WAC 388-76-10750 Safety and maintenance. The adult family home must:**

- (1) Keep the home both internally and externally in good repair and condition with a safe, comfortable, sanitary, homelike environment that is free of hazards;
- (2) Ensure that there is existing outdoor space that is safe and usable for residents;

**This requirement was not met as evidenced by:**

Based on observation and interview, the provider failed to ensure the exterior of the home was maintained in a safe useable condition and free of hazards for the residents. This failure placed the residents at risk of physical harm from an environment that was not safe.

**Findings include:**

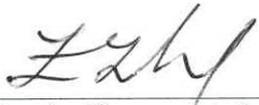
During a tour of the home on 12/18/15, the licensor observed two decks at the back of the home on the upper level. The home had a level entry and a daylight basement on the lower level which was the personal living quarters for the provider and her spouse. The upper floor was licensed for resident use. One deck was off the living room and the second deck was off the master bedroom which was occupied by a resident who was capable of ambulation with the use of a walker. According to the provider, both decks were recently replaced, however, neither deck had railing to prevent a resident from falling off. The provider had placed a stick in the track of the sliding glass door of the master bedroom to prevent the current resident from going out onto the deck. The other two residents were not capable of mobility without assistance from the provider or a caregiver.

When interviewed on 12/18/15, the provider said the decks were replaced and the hand railing was ordered but had not arrived. The provider said the railing would be installed as soon as it was delivered. The provider was informed that the window could not be obstructed with a stick in the track. The provider said she had the stick in the sliding glass door as a safety measure.

During a telephone interview on 1/05/16, the provider said the hand rails for the two decks had not arrived due to the weather. When the provider was asked how long the decks had been without the railing, she replied, "About a month". The provider said she could not order the railing until after the decks were done because they had to be measured and now the weather was not cooperating for the delivery.

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X   
Provider (or Representative)

X 2.10.16  
Date

**WAC 388-76-10795 Windows.**

(6) The home must ensure that each basement and each resident bedroom window, that meets the requirements of subsection (1), (2) and (3) of this section, are kept free from obstructions that might block or interfere with access for emergency escape or rescue.

**This requirement was not met as evidenced by:**

Based on Observation and interview, the provider failed to ensure that the bedroom windows of Residents 1 and 2 were kept free of obstructions that would block or interfere with access for emergency escape or rescue. This failure placed the residents at risk of harm in the event of a fire or other emergency that required rescue.

**Findings include:**

During a tour of the home on 12/18/15, the licenser observed a wooden stick in the sliding glass door track in Resident 1's bedroom. The deck off the sliding glass door was recently replaced, but the hand rails had not been installed so the deck was not safe for resident use. There was also a stick in the window of the attached bathroom. Resident 2's bedroom window also had a stick in the track to prevent it from being opened.

During an interview on 12/18/15, the provider said the sticks were in the windows for safety reasons and to protect the residents from anyone trying to break in. The provider said the hand railing had not been installed on the two outside decks and it would not be safe if the residents went out there. The provider removed the sticks from the windows before the licenser left the home.

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X   
Provider (or Representative)

X 2.10.16  
Date

**WAC 388-76-10865 Emergency evacuation from adult family home. The adult family home must be able to evacuate all people living in the home:**

(2) In five minutes or less.

**WAC 388-76-10900 Documentation of emergency evacuation drills Required. The adult family home must document in writing the emergency evacuation drills which must include:**

(3) Date and time of the drill; and

(4) The length of time it took to evacuate all residents.

**This requirement was not met as evidenced by:**

Based on interview and record review, the provider failed to have a system in place to ensure that all residents in the home were evacuated in less than 5 minutes during the evacuation drills conducted every 2 months. This failure placed the residents at risk of harm if they were not evacuated timely in the event of a fire.

Findings include:

Record review on 12/18/15 revealed documentation of an evacuation drill conducted on 8/22/15 that took 7 minutes to evacuate all of the residents. Another drill conducted on 10/22/15 did not have the start time and end time of the drill or the length of the drill documented. Those areas of the form were blank.

When interviewed on 12/18/15, the provider was not aware that all drills needed to be completed in less than 5 minutes. The provide said the 10/22/15 drill was completed but she must have forgot to write the time and length of the drill on the form.

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 Provider (or Representative)

2.10.16  
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**WAC 388-112-0205 Who is required to complete continuing education training, and how many hours of continuing education are required each year?**

(1) Adult family homes

(d) Continuing education must include one-half hour per year on safe food handling in adult family homes described in RCW 70.128.250 .

**This requirement was not met as evidenced by:**

Based on interview and record review, the provider failed to have a system in place to ensure that 1 of 2 sampled staff (Caregiver C) completed 0.5 hours of safe food handling training as part of her 12 hours of continuing education in 2015. This failure placed the residents at risk of food borne illnesses.

**Findings include:**

Record review on 12/18/15 revealed Caregiver C was hired on 7/18/15 and provided evidence of 12 hours of continuing education completed before her birthday in February 2015. However, there was no evidence that Caregiver C completed 0.5 hours of safe food handling training as part of her continuing education requirements or had a current Department of Health food worker card.

During an interview on 12/18/15, the provider said she would have Caregiver C bring in all of her training certificates to verify if safe food handling training was included in one of the courses completed in February 2015. The licensor received faxed copies of the training certificates on 12/29/15 but none of them included food safety training.

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Provider (or Representative)

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Date



STATE OF WASHINGTON  
DEPARTMENT OF SOCIAL AND HEALTH SERVICES  
AGING AND LONG-TERM SUPPORT ADMINISTRATION  
**3906-172nd St NE, Suite #100, Arlington, WA 98223**

April 4, 2016

ZINCAS AFH INC  
ZINCAS ADULT FAMILY HOME INC  
3213 104TH PL SE  
EVERETT, WA 98208

RE: ZINCAS ADULT FAMILY HOME INC License #409500

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on March 29, 2016 for the deficiency or deficiencies cited in the report/s dated January 21, 2016 and found no deficiencies.

The Department staff who did the inspection:  
Patricia Johnson, Licensors

If you have any questions please, contact me at (360) 651-6872.

Sincerely,

Kay Randall, Field Manager  
Region 2, Unit B  
Residential Care Services