



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032-2388

December 30, 2019

Josefina Ulit
J&M ADULT FAMILY HOME
937 4TH AVE N
KENT, WA 98032

RE: J&M ADULT FAMILY HOME License #641500

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on December 23, 2019 for the deficiency or deficiencies cited in the report/s dated October 23, 2019 and found no deficiencies.

The Department staff who did the inspection:
Julie Miranda, Nursing Consultant Institutional/AFH Licensor

If you have any questions please, contact me at (253) 234-6007.

Sincerely,

Elena Atanasova, Field Manager
Region 2, Unit G
Residential Care Services



STATE OF WASHINGTON
 DEPARTMENT OF SOCIAL AND HEALTH SERVICES
 AGING AND LONG-TERM SUPPORT ADMINISTRATION
 20425 72nd Avenue S, Suite 400, Kent, WA 98032-2388

RECEIVED

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DSHS/ALTSA/RCS

Statement of Deficiencies	License #: 641500	Completion Date
Plan of Correction	J&M ADULT FAMILY HOME	October 23, 2019
Page 1 of 4	Licensee: JOSEFINA ULIT	

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:
 10/18/2019

J&M ADULT FAMILY HOME
 937 4TH AVE N
 KENT, WA 98032

The department staff that inspected the adult family home:

Julie Miranda, BSN, RN, Nursing Consultant Institutional/AFH Licenser

From:

DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 2, Unit G
 20425 72nd Avenue S, Suite 400
 Kent, WA 98032-2388
 (253)234-6007

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.

Elu. A. Tom

Residential Care Services

11/15/2019

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.

Josefina A. Ulit

Provider (or Representative)

11/15/19

Date

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

WAC 388-76-10485 Medication storage. The adult family home must ensure all prescribed and over-the-counter medications are stored:

(1) In locked storage;

This requirement was not met as evidenced by:

Based on observation, interview and record review, the adult family home (AFH) failed to ensure insulin injectable medications were placed in a locked storage inside the refrigerator on one of two sampled residents (Resident #1). This placed Resident #1 and #2's safety at risk for accidental access and use of the medications.

Findings included...

On 10/18/19 at 11:00 AM during environmental tour with Staff A, Provider, the AFH refrigerator was found with injectable insulin pens placed in a plastic bag placed on the top shelf for Resident #1;

- 1. Lantus Solostar 100 units- 3 milliliters (ml.) x one pen
- 2. Novolog 100 units 3 ml. x two pens.

On 10/18/19 at 11:05 AM during interview with Staff A she stated, "I didn't have time to buy a locked box for the insulin pens."

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, J&M ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 10/18/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency. *AFH will ensure all unused insulin be place in a lock box inside the refrigerator.*

Josefina P. Ulit

Provider (or Representative)

11/15/19

Date

WAC 388-76-10475 Medication Log. The adult family home must:

- (1) Keep an up-to-date daily medication log for each resident except for residents assessed as medication independent with self-administration.
- (3) Ensure the medication log includes:
 - (a) Initials of the staff who assisted or gave each resident medication(s);

This requirement was not met as evidenced by:

Based on interview and record review, the adult family home (AFH) failed to ensure a medication ordered for one of two sampled residents (Resident #1) was initialed by staff as given in the current Medication Administration Record (MAR). Another medication ordered by the physician was not transcribed and written on the current MAR to be given to Resident #1 at bedtime. This placed Resident #1 at risk for potential medication errors and its complications.

Findings included...

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

On 10/18/19 at 12:15 PM during review of Resident #1's records, the AFH admitted Resident #1 on [REDACTED] 19 with multiple diagnoses. On further review of Resident #1's records showed Aspirin (anticoagulation) 81 milligrams (mg.) one tablet by mouth daily was ordered on 10/17/19 by the physician. On review of Resident #1's MAR dated 10/14/19, no initial was found documented in the MAR if the ordered medication was given by staff or not.

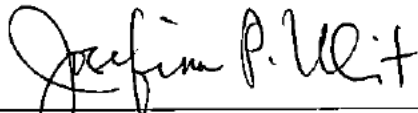
On 10/18/19 at 12:30 PM during interview with Staff A, Provider she stated, "I gave [Resident #1] the Aspirin, but i forgot to sign the MAR record."

On 10/18/19 at 01:00 PM on further review of Resident #1's records, another medication Quetiapine Fumarate (for depression) 25 mg. one tablet at bedtime was ordered on 10/17/19 by the physician. Resident #1's MAR record dated 10/14/19, did not show the Quetiapine Fumarate was written on the MAR nor a staff initial was not found if it was given on 10/17/19 or not.

On 10/18/19 at 01:15 PM during interview with Staff A she stated, "I forgot to write the medication on the resident's MAR and I did not sign it that I gave it."

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, J&M ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 10/18/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)

11/15/19

Date

WAC 388-76-10135 Qualifications Caregiver. The adult family home must ensure each caregiver has the following minimum qualifications:

(4) Has completed the training requirements in effect on the date the caregiver was hired, including the requirements applicable to the caregiver under chapter 388-112A WAC;

WAC 388-112A-0610 Who is required to complete continuing education training each year, how many hours of continuing education are required, and when must they be completed?

(1) Adult family homes.

(a) Certified home care aides must complete twelve hours of continuing education by their birthday each year after obtaining certification as required by the Washington department of health as described in RCW 74.39A.341 .

(d) Continuing education must include one half hour per year on safe food handling in adult family homes as described in RCW 70.128.250 when the long-term worker does not maintain a food handler's permit.

This requirement was not met as evidenced by:

Based on observation, interview and record review, the adult family home (AFH) failed to renew food safety handler training requirements by their birth date on two of five sampled staff (Staff A, Provider and Staff B, Caregiver). This failure placed two current residents (R#1 and R#2) at risk for food borne illness and it's complications.

Findings included...

STAFF A

On 10/18/19 at 11:15 AM during review of Staff A, Provider's records, her food safety handler's certificate was completed dated 08/14/18. No document was found if her food safety handler training was completed for the year 2019 by her birthday dated September 11th.

On 10/18/19 at 11:25 AM during observation, Staff A performed food preparation such as broccoli, salmon and rice for lunch for R#1 and R#2.

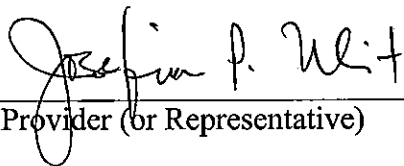
STAFF B

On 10/18/19 at 11:45 AM during review of Staff B, Caregiver's records, her food safety handler's certificate was completed dated 08/14/18. No document was found if her food safety handler training was completed for the year 2019 by her birthday dated September 13th.

On 10/18/19 at 12:00 PM during interview with Staff A stated that she acknowledged that her's and Staff B's food safety handler training were not completed by their birthday dates for this year 2019.

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, J&M ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 10/18/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)

11/15/19

Date



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20425 72nd Avenue S, Suite 400, Kent, WA 98032-2388

November 5, 2019

CERTIFIED MAIL

9489 0090 0027 6077 9211 69

Josefina Ulit
J&M ADULT FAMILY HOME
937,4TH AVE N
KENT, WA 98032

RE: J&M ADULT FAMILY HOME License #641500

Dear Provider:

The Department completed a full inspection of your Adult Family Home on October 23, 2019 and found that your home does not meet the adult family home licensing requirements.

The Department:

- Found a deficiency or deficiencies which resulted or may result in harm to residents; and
- Wrote the enclosed report; and
- May take enforcement action based on any deficiency listed on the enclosed report.

You Must:

- Within 10 calendar days after you receive this letter, provide a written plan on the enclosed report, according to the attached "Plan":
 - Begin the process of correcting the deficiency or deficiencies immediately; and
 - Complete correction within 45 days, or sooner if directed by the Department; and
 - Sign and date the first page of the enclosed report; and
 - Return the first page with your plan; and
 - Have your plan approved by the Department.

Consultation:

In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 388-76-10275 Tuberculosis No testing. The adult family home is not required to have a person tested for tuberculosis if the person has:

(1) A documented history of a previous positive skin test, with ten or more millimeters induration;

The adult family home (AFH) failed to ensure a copy of two sampled staff (Staff C,

Josefina Ulit
J&M ADULT FAMILY HOME License #641500
November 5, 2019
Page 2

Caregiver's induration records of his positive Tuberculosis (TB) testing result as written on a chest x ray document dated 09/13/13 was obtained by the AFH to determine if Staff C needed more TB testing or not.

WAC 388-76-10810 Fire extinguishers.

- (2) The home must ensure the fire extinguishers are:
- (a) Installed according to manufacturer recommendations;

The adult family home (AFH) did not ensure the fire extinguisher placed in a triangular container in the hallway of the home was installed under manufacturer's recommendations as stated in the equipment information.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies not listed on the enclosed report.

The Department:

- Expects all deficiencies to be corrected within the timeframe accepted by the department; and
- May inspect the home to determine if you have corrected all deficiencies.

You May:

- Receive a letter of enforcement action based on any deficiency listed on the enclosed report.
- Ask for an informal dispute resolution meeting, according to the attached "Informal Dispute Resolution" instructions; and
- Ask questions and provide written information to help clarify or dispute the deficiencies.

If You Have Any Questions:

- Please contact me at (253) 234-6007.

Sincerely,



Elena Atanasova, Field Manager
Region 2, Unit G
Residential Care Services

Enclosure