



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
Aging and Disability Services

Aging and Long-Term Support Administration

PO Box 45600, Olympia, WA 98504-5600

December 5, 2013

CERTIFIED MAIL 7007 1490 0003 4201 6750

Serenity Manor AFH LLC, Licensee
Serenity Manor AFH LLC
P.O. Box 586
Yelm WA 98597

Adult Family Home License #751231
Entity Representative: Evelyn Barbero

IMPOSITION OF CONDITIONS ON A LICENSE

Dear Licensee:

On November 19, 2013, the Department of Social and Health Services (DSHS), Residential Care Services conducted an inspection/investigation at your facility. This letter is formal notice of the imposition of conditions on the license for your adult family home, located at 7501 77th Avenue SW, Lakewood, by the State of Washington, Department of Social and Health Services, pursuant to the Revised Code of Washington (RCW) 70.128.160 and Washington Administrative Code (WAC) 388-76-10940.

The conditions are based on the following violations of the RCW and/or WAC determined by the department in your adult family home and described in the attached Statement of Deficiencies (SOD) report dated **November 19, 2013**.

WAC 388-76-10430(1)(2)(c)(d) Medication system.

The licensee failed to ensure one resident who required insulin received the medication as ordered by her medical practitioner.

WAC 388-76-10455(1) Medication—Administration.

The licensee failed to ensure nurse delegation was completed for administration of a topical patch for one resident.

WAC 388-76-10470(1)(b)(i-iv) Medication—Timing—Special directions.

The licensee failed to ensure medication ordered three times a day for a resident was given approximately six hours apart.

The department has determined that the following conditions shall be placed on your adult family home license:

- *The licensee will not admit any residents with diagnoses who require insulin.*
- *Medication administration that requires nurse delegation must be done only by qualified staff.*
- *By December 10, 2013, the licensee, at own expense, must hire a registered nurse consultant not associated with the Adult Family Home, who also is a registered nurse delegator, to assist the licensee in developing and implementing a safe medication system that meets the needs of all residents. The nurse consultant will:*
 - *Be familiar with Adult Family Home laws and regulations related to medication systems.*
 - *Assess all resident medication orders, medication records, and pharmacy records, and make changes to resident records to ensure they are in compliance with Adult Family Home rules and regulations, including that there are physician orders for all medications to be administered, residents received medications and blood glucose monitoring as ordered, specifically insulin administration, including sliding scale administration.*
 - *Train the licensee and staff on the developed system and ensure they have the knowledge and skills ongoing for safe medication administration and nurse delegation, specifically insulin administration, sliding scale administration, and blood glucose monitoring.*
 - *Assist the licensee in developing and implementing an ongoing quality assurance monitoring system to identify medication errors and any medications not given as ordered.*
 - *Monitor the Adult Family Home medication system every day for one week, then once a week for one month, then twice a month for one month to ensure residents received medication as ordered and there are no medication errors.*
- *The licensee must maintain documentation of completion of training in staff files.*

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- *The licensee must give the consultants a copy of the November 19, 2013 Statement of Deficiencies and review areas of noncompliance in need of correction.*
- *The licensee must post this Notice of Conditions with the license in a visible location in a common use area.*

The effective date of the conditions on your license is **December 5, 2013**. As provided in RCW 70.128.162(b), WAC 388-76-10990 (6), the effective date of the conditions on your license will not be postponed pending an administrative hearing or informal dispute resolution review.

Attestation (Plan of Correction):

Return the enclosed SOD within 10 calendar days with the following:

- The date you have or will have each deficiency corrected;
- A signature and date attesting that you are taking actions to correct and maintain correction for each cited deficiency.

Return the signed and dated SOD to:

Dahl Kim, Field Manager
District 3, Unit A
P.O. Box 45819
MS: N27-24
Olympia WA 98504-5819
Phone: (253) 983-3826/ Fax: (253) 589-7240

Appeal Rights:

You have two appeal rights: Informal Dispute Resolution (IDR) and an Administrative Hearing. Each has a different request timeline.

Informal Dispute Resolution [RCW 70.128]

You have an opportunity to challenge the deficiencies and/or enforcement actions through the state's IDR process. **All IDR requests must be in writing and include:**

- The deficiencies you are disputing; and
- The method of review you prefer (face-to-face, telephone conference or documentation review).

The written request must be received by the 10th working day from receipt of this letter.

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During the IDR process you will have the opportunity to present written and/or oral evidence to dispute the deficiencies.

Send your written request to:

Informal Dispute Resolution Program Manager
Residential Care Services
PO Box 45600
Olympia, Washington 98504-5600
Fax (360)725-3225

Formal Administrative Hearing

You may contest the conditions by requesting a formal administrative hearing to challenge the deficiencies which resulted in the conditions. **All hearing requests must be in writing and include:**

- A copy of this letter; and
- A copy of the Statement of Deficiencies.

The written request must be received within twenty-eight (28) calendar days of receipt of this letter.

Send your **written** request to:

Office of Administrative Hearings
PO Box 42489
Olympia, Washington 98504-2489

If you have any questions, please contact Dahl Kim, Field Manager, at (253) 983-3826.

Sincerely,



Lori Melchiori, Ph.D.
Assistant Director
Residential Care Services

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Enclosure

cc: Bett Schlemmer, Compliance Specialist
Field Manager, District 3, Unit A
RCS District Administrator, District 3
HCS District Administrator, District 3
DDD District Administrator, District 3
WA LTC Ombuds
Office of Financial Recovery, Vendor Program Unit
Judy Plesha, HCS
BAM

NOTICE OF CONDITIONS ON LICENSE

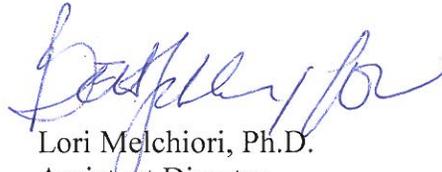
December 5, 2013

Based on the Statement of Deficiencies dated November 19, 2013, the Department of Social and Health Services imposes the following conditions on the license of *Serenity Manor AFH, LLC, License #751231, located at 7501 77th Avenue SW, Lakewood, Washington.*

- *The licensee will not admit any residents with diagnoses who require insulin.*
- *Medication administration that requires nurse delegation must be done only by qualified staff.*
- *By December 10, 2013, the licensee, at own expense, must hire a registered nurse consultant not associated with the Adult Family Home, who also is a registered nurse delegator, to assist the licensee in developing and implementing a safe medication system that meets the needs of all residents. The nurse consultant will:*
 - *Be familiar with Adult Family Home laws and regulations related to medication systems.*
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 - *Train the licensee and staff on the developed system and ensure they have the knowledge and skills ongoing for safe medication administration and nurse delegation, specifically insulin administration, sliding scale administration, and blood glucose monitoring.*
 - *Assist the licensee in developing and implementing an ongoing quality assurance monitoring system to identify medication errors and any medications not given as ordered.*

- *Monitor the Adult Family Home medication system every day for one week, then once a week for one month, then twice a month for one month to ensure residents received medication as ordered and there are no medication errors.*
- *The licensee must maintain documentation of completion of training in staff files.*
- *The licensee must give the consultants a copy of the November 19, 2013 Statement of Deficiencies and review areas of noncompliance in need of correction.*
- *The licensee must post this Notice of Conditions with the license in a visible location in a common use area.*

These conditions are effective on December 5, 2013, and remain in effect until lifted by formal Department of Social and Health Services notice.



Lori Melchiori, Ph.D.
Assistant Director
Residential Care Services