



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

Statement of Deficiencies	License #: 751596	Completion Date
Plan of Correction	ST JUDE THADDEUS ADULT FAMILY HOME LLP	January 22, 2016
Page 1 of 3	Licensee: ST JUDE THADDEUS	

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:
1/12/2016

ST JUDE THADDEUS ADULT FAMILY HOME LLP
4212 191ST ST SW
LYNNWOOD, WA 98036

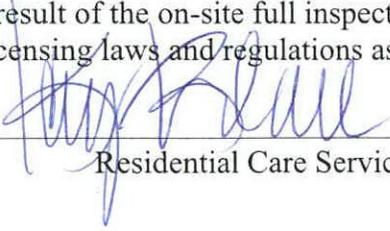
The department staff that inspected the adult family home:
Megan Wylie, BSN, Licensor

From:

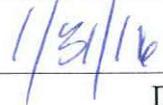
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2, Unit B
3906-172nd St NE, Suite #100
Arlington, WA 98223
(360)651-6872

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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

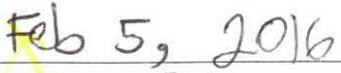


Date

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)



Date

WAC 388-76-10430 Medication system.

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

(d) Receives medications as required.

This requirement was not met as evidenced by:

Based on observation, record review and interviews, the facility failed to ensure 1 of 2 sampled residents received medications as prescribed. This failure resulted in medication errors for Resident 3.

Findings include:

Resident 3 was admitted to the facility in August of 2015 with Dementia and blindness related to Diabetes. The residents assessment, dated 7/29/15, and Negotiated Care Plan, dated 8/25/15, states the resident requires assistance with medications.

On 1/12/16, during the facility's full inspection, the provider and the licensor reviewed the residents medications together. The Medications were reviewed and matched to the MAR (Medication Administration Record) and the doctors orders. The residents Orders and Mar directed caregivers to give multiple medications including:

Magnesium 64mg at bedtime

Calcium 500mg twice a day

Folic Acid 0.8mg daily

A review of the medication bottle showed that the Magnesium, which was being purchased over the counter by the family, included 71.5 mg of magnesium, 119 mg of calcium and 208mg of chloride in one pill. The calcium pill, sent by the pharmacy, was 500mg. The Caregiver A stated he was given 1 magnesium pill daily in addition to the calcium tablet. Caregiver A and the provider were not aware that the magnesium in the pill was over the prescribed dose and that it also included calcium. This failure caused the resident to exceed the prescribed doses of both the calcium (was receiving 619mg total) and magnesium.

The folic acid the family provided was a .4mg tablet. Caregiver A stated she was giving the resident 1 tablet as directed in the MAR and she was not aware that the pills the family provided were half of the residents prescribed dose.

During an interview with Resident 3's family member, who purchases the residents over the counter medications, she stated she was not aware that the doses she provided were not correct.

Failure to check the medications with the MAR caused the resident to receive the wrong dose of medication which may have caused health complications.

The provider stated he would contact the residents physician for notification and directions.



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3906-172nd St NE, Suite #100, Arlington, WA 98223

April 26, 2016

ST JUDE THADDEUS AFH LLP
ST JUDE THADDEUS ADULT FAMILY HOME LLP
4212 191ST ST SW
LYNNWOOD, WA 98036

RE: ST JUDE THADDEUS ADULT FAMILY HOME LLP License #751596

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on April 21, 2016 for the deficiency or deficiencies cited in the report/s dated January 22, 2016 and found no deficiencies.

The Department staff who did the inspection:
Megan Wylie, Licensor

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

Sincerely,

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