



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

June 5, 2015

5 STONES INC
ABOVE WOODINVILLE ADULT FAMILY HOME
16011 148th Northeast
woodinville, wa 98072

RE: ABOVE WOODINVILLE ADULT FAMILY HOME License #751935

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on June 5, 2015 for the deficiency or deficiencies cited in the report/s dated January 13, 2015 and found no deficiencies.

The Department staff who did the inspection:
Sonia Coleman, Licensor

If you have any questions please, contact me at (253) 234-6033.

Sincerely,

A handwritten signature in cursive script that reads "Bennetta Shoop".

Bennetta Shoop, Field Manager
Region 2, Unit C
Residential Care Services



STATE OF WASHINGTON
 DEPARTMENT OF SOCIAL AND HEALTH SERVICES
 AGING AND LONG-TERM SUPPORT ADMINISTRATION
 PO Box 45600, Olympia, Washington 98504-5600

Statement of Deficiencies	License #: 751935	Completion Date
Plan of Correction	ABOVE WOODINVILLE ADULT FAMILY HOME	January 13, 2015
Page 1 of 7	Licensee: 5 STONES INC	AMENDED

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:
 1/6/2015

ABOVE WOODINVILLE ADULT FAMILY HOME
 14906 NE WOODINVILLE-DUVALL RD
 WOODINVILLE, WA 98072

The department staff that inspected the adult family home:
 Sonia Coleman, RN, MN, Licenser

From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 2, Unit C
 20425 72nd Avenue S, Suite 400
 Kent, WA 98032-2388
 (253)234-6033

As a result of the on-site visit(s) 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.

M. Ke *T. Inquist for Region 2, Unit C*
 Residential Care Services

5/2/15
 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 388-76-10135 Qualifications Caregiver. The adult family home must ensure each caregiver has the following minimum qualifications:

- (4) Completion of the training requirements that were in effect on the date they were hired including requirements described in chapter 388-112 WAC;
- (7) Have a current valid first-aid and cardiopulmonary resuscitation (CPR) card or certificate as required in chapter 388-112 WAC; and
- (8) Have tuberculosis screening to establish tuberculosis status per this chapter.

This requirement was not met as evidenced by:

Based on interview and record reviews the Provider failed to ensure 2 of 3 caregivers completed the training requirements that were in effect on the date they were hired including orientation to the home, background checks, a current valid first-aid and cardiopulmonary resuscitation (CPR) card or certificate, and had tuberculosis screening to establish tuberculosis status. This failure placed all residents at risk for receiving care from untrained caregivers and for receiving care from caregivers with disqualifying crimes. Findings included:

Observation, interview and record reviews were conducted on 01/06/14 unless otherwise noted.

In the entrance the Provider said she had two caregivers. One of the caregivers (Staff #A) was on site for a few hours during the inspection. *false* *Cleaning lady*

Review of staff records revealed:

Staff #A had no orientation to the home, background check, finger printing, cardiopulmonary resuscitation or first aid card, mental health or dementia, tuberculosis testing, food safety training or continuing education training records. *Cleaning lady*

Staff #B had no orientation to the home, or food safety training. *Wasn't handling food. New Hire - orienting*

In interview the Provider said Staff #A was a housekeeper training to become a caregiver and that Staff #A just started working in the home.

This is a repeat citation previously cited on 11/04/13.

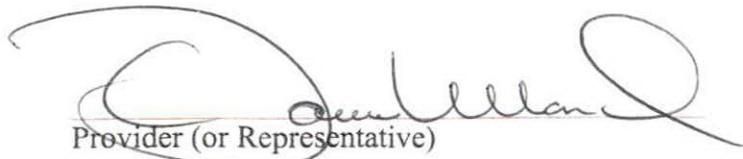
Attestation Statement

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, ABOVE WOODINVILLE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) *Jan 10, 2015* In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

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Provider (or Representative)

May 11, 2015
Date

WAC 388-76-10161 Background checks Who is required to have.

(2) The adult family home must ensure that all caregivers, entity representatives, and resident managers who are employed directly or by contract after January 7, 2012, have the following background checks:

- (a) A Washington state name and date of birth background check; and
- (b) A national fingerprint background check.

This requirement was not met as evidenced by:

Based on record reviews and interview the Provider failed to ensure background checks were obtained for 1 of 2 staff members (Staff #A) working in the home. This failure placed all residents at risk for harm if the staff had disqualifying crimes. Findings included:

Record reviews and interview were conducted on 01/06/15 unless otherwise noted.

In the entrance interview the Provider named Staff #A as a ~~caregivers~~ ^{false} working in the home. Later on during the inspection, she said that Staff #A was a housekeeper whom she was training to become a caregiver. When asked what date Staff #A was hired, the Provider said she did not know when she was hired. The Provider did not have documented evidence of the date when the Staff #A was hired.
↳ doc at other home where hired as a housekeeper

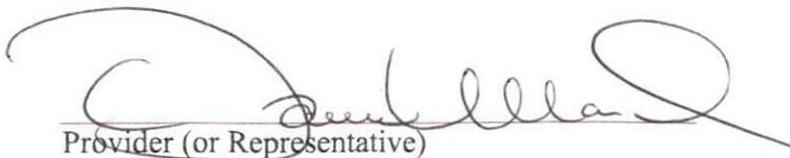
Background inquiry records reviewed found that Staff #A had not had a background check. In interview the Provider said that a request for background inquiry was submitted for Staff #A, but she had been informed that the adult family home's license number was incorrect so the background inquiry could not be processed.

During the inspection on 01/06/15, the Provider said that her representative contacted the background check unit for Staff #A's background check, and that the representative was told Staff #A's background check would be processed. A background check letter for Staff #A arrived by fax on 01/12/15.

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, ABOVE WOODINVILLE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 1/12/15. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

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Provider (or Representative)

May 12, 2015
Date

WAC 388-76-10265 Tuberculosis Testing Required.

- (1) The adult family home must develop and implement a system to ensure the following persons have tuberculosis testing within three days of employment:
- (d) Caregiver;

This requirement was not met as evidenced by:

Based on observation, record reviews and interview the Provider failed to ensure 1 of 2 caregivers (Staff #A) had evidence of tuberculosis testing before hire or within three days of hire and placed all residents at risk for exposure to communicable disease. Findings included:

*False
House
Cleaner*

Observation, interview and record reviews were conducted on 01/07/15 unless otherwise noted.

In the entrance interview the Provider said Staff #A worked as an on-call on caregiver on Fridays, Saturdays and Sundays. *Never said this!*

Observation found Staff #A was on site during the morning of the inspection (01/06/15). Staff #A was observed [redacted] Resident #1 to the dining table late in the morning after the Provider said the resident had a shower. Staff #A sat at the dining table with Resident #1 and #3 during breakfast. The Provider said Staff #A was cueing Resident #1 to eat [redacted] breakfast.

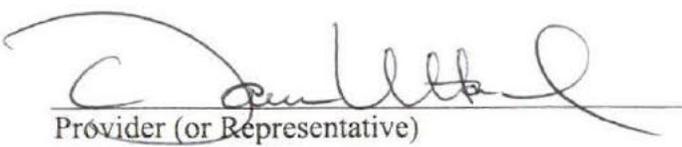
Review of tuberculosis records for the caregivers revealed Staff #A had no tuberculosis testing records in her personnel file.

In interview with the Provider she said Staff #A was only a housekeeper who she was training to become a caregiver and that Staff #A was not providing care for the residents.

Staff #A was not interviewed because she left early.

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Provider (or Representative)

May 12, 2015
Date

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

- (2) Include in each medication log the:
 - (b) Name of all prescribed and over-the-counter medications;
 - (c) Dosage of the medication;
 - (d) Frequency which the medications are taken; and
 - (e) Approximate time the resident must take each medication.

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This requirement was not met as evidenced by:

Based on record record reviews the Provider failed to ensure all medications belonging to 1 of 2 sampled resident's were listed on the resident's medication log. This failure placed Resident #3 at risk for not receiving prescribed medications. Findings included:

Record reviews and interview were conducted on 01/06/15 unless otherwise noted.

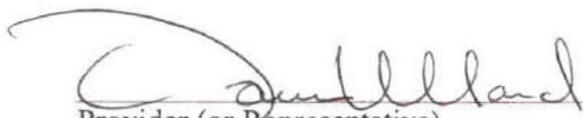
Record review revealed Resident #3's medications included [redacted] and [redacted] 325 mg daily. Review of the resident's medication log revealed neither [redacted] nor [redacted] were recorded. Also medications were listed but no instructions were written for how the medications were taken. For example, only the name of the medications and times they were given were documented, but not the route or frequency which they were taken.

In interview the Provider acknowledged [redacted] and [redacted] were omitted off the medication log. She did not say whether the resident received the two medications. She said that the reason for not writing the instructions for giving the medications was because she was busy during the holidays.

This is a repeat citation previously cited on 11/04/13.

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, ABOVE WOODINVILLE ADULT FAMILY HOME is or will be in compliance with this law and / or regulation on (Date) 1/16/2015. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.


Provider (or Representative)

May 12 2015
Date

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

(6) Provide storage for toxic substances, poisons, and other hazardous materials that is only accessible to residents under direct supervision, unless the resident is assessed for and the negotiated care plan indicates it is safe for the resident to use the materials unsupervised;

This requirement was not met as evidenced by:

Based on observation and record review and interview the Provider failed to ensure hazardous materials that were stored and was only accessible to residents under direct supervision, unless the residents were assessed for and their negotiated care plans indicated it is safe for the residents to use the materials unsupervised. This failure placed 2 of 3 residents (Resident #1 and #2) at risk for accessing harmful substances. Findings included:

Observation and interview were conducted on 01/06/15 unless otherwise noted.

During the inspection the Provider worked alone for most of the day. She was observed going downstairs several times to care for her elderly family member and [redacted]. During these times Resident #1 and #3 were left unsupervised upstairs for periods of time.

Both Resident #1 and #3 were [redacted] mobile. They were not observed [redacted]

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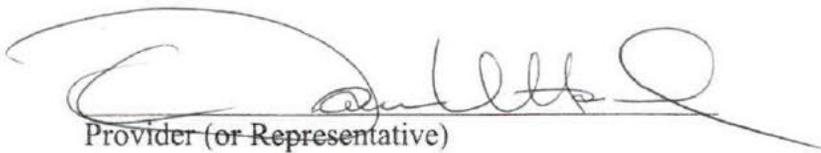
and it is not known if they were able to do so. Observation, record review and interview revealed Resident #1 had periods of agitation during the afternoon hours.

During the environmental tour, Mop Glow rug cleaner, dish washing soaps and other household cleaning supplies were observed in the cupboard under the kitchen sink cupboard. The baby locks on the cupboard doors gave way when the doors were slightly tugged. The Provider said she stored toxic substances in the garage but her staff stored them under the sink.

The residents' assessments did not state that they could use hazardous materials unsupervised.

Attestation Statement

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Provider (or Representative)

May 12/2015
Date

WAC 388-112-0015 What is orientation training, who should complete it, and when should it be completed? There are two types of orientation training - Facility orientation training and long-term care worker orientation training.

(1) Facility orientation. Individuals who are exempt from certification described in RCW 18.88B.041 and volunteers are required to complete facility orientation training before having routine interaction with residents. This training provides basic introductory information appropriate to the residential care setting and population served. The department does not approve this specific orientation program, materials, or trainers. No test is required for this

This requirement was not met as evidenced by:

Based on record review and interview the Provider failed to provide evidence that Staff #A and Staff #B received facility orientation before having routine interaction with the residents. This failure placed residents at risk for receiving care from caregivers with basic information appropriate to their care setting and population served. Findings include:

Record reviews and interview were conducted on 01/06/15 unless otherwise noted.

In the entrance interview the Provider reported that Staff #A and Staff #B were caregivers. She said Staff #B was recently hired and that Staff #A worked on-call on Fridays, Saturdays and Sundays.

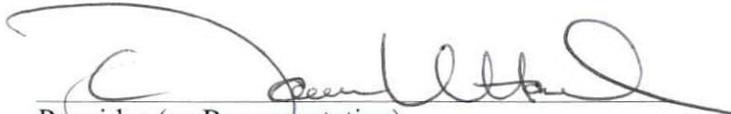
Review of personnel records found neither Staff #A nor #B had documented dates of hire or documentation of orientation to the home and it's special needs residents. When asked for the dates Staff #A and #B were hired, the Provider said she did not know when Staff #A or #B were hired. The Provider said she did not document the dates the caregivers were hired. She said she

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generally documented staff orientation after she trained the staff; not during the orientation period.

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Provider (or Representative)

May 12, 2015
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