



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

January 15, 2020

Adonis Adult Family Home LLC  
Adonis Adult Family Home LLC  
28211 28th Ave S  
Federal Way, WA 98003

RE: Adonis Adult Family Home LLC License #753988


Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on January 6, 2020 for the deficiency or deficiencies cited in the report/s dated November 27, 2019 and found no deficiencies.

The Department staff who did the inspection:  
Olga Petrov, 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



RECEIVED  
DEC 17 2019  
CCHS/ALTSA/RCS

**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 observations, interview and record reviews, and the adult family home (AFH) failed to keep medications in locked storage for two of two sampled residents (Residents #1 and Resident #2). This failure placed both residents (Residents #1 and #2) at risk for harm if they accessed and inappropriately had taken medications not prescribed for them.

**Findings included...**


Observations on 11/26/19 at 09:30 AM showed Residents #1 and #2 wheeled themselves in their wheelchairs in the home.

Observation during the environmental tour accompanied by Staff A, Entity Representative (ER) on 11/26/19 at 10:05 AM showed bedroom D was a shared bedroom occupied by Resident #1 and #2. There was a bottle of medication used to treat upset stomach that was left on a shelf next to Resident #1's bed. There was two more bottles of medication used to treat upset stomach in the lower dresser drawer and were unlocked. On the top of Resident #2's nightstand there were over the counter nasal spray used to treat nasal congestion, and multiple pills in the bottle with handwritten label "extra medications."

During an interview, on 11/26/19 at 10:30 AM, Staff A stated she understand that the medications must be locked. Staff A stated that she was not aware that medications were unlocked.

**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, Adonis Adult Family Home LLC is or will be in compliance with this law and / or regulation on (Date) 11/26/2019. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Elisabeth-T-Shepen   
Provider (or Representative)

12/12/2019  
Date

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