STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

From The Heart AFH Inc

From The Heart AFH Inc
4411 Segovia Dr
Pasco, WA 99301

RE: From The Heart AFH Inc License # 752703

Dear Provider:

This letter addresses Compliance Determination(s) 36431 (Completion Date 02/07/2024) and 32464 (Completion Date 01/02/2024).

The Department completed a follow-up inspection of your Adult Family Home on 02/07/2024 and found that you have corrected the violations listed in the Complaint report dated 01/02/2024. Your home is back in compliance as of 10/31/2023 with the cited requirements of the Washington Administrative Code or the Revised Code of Washington or both.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10175-3

The Department staff who did the on-site verification:
Tamera Lapierre, Community Complaint Investigator

If you have any questions, please contact me at (509)572-7394.

Sincerely,

Michelle Closner

Michelle Closner, Field Manager
Region 1, Unit C
Residential Care Services

Residential Care Services
Investigation Summary Report

Provider/Facility: From The Heart AFH Inc **Provider Type:** Adult Family Home
License/Cert.#: 752703
Compliance Determination #: 32464 **Intake ID:** 104705
Investigator: Tamera Lapierre **Region/Unit #:** RCS Region 1 / Unit C
Investigation Date(s): 11/15/2023 through 01/02/2024
Complainant Contact Date(s): 01/03/2024

Allegation(s):
1) The Adult Family Home (AFH) hot water tank was not working.
2) AFH did not provide basic cares to residents when on outing.
3) The named caregiver working while smelling of alcohol.
4) AFH had caregivers working alone with residents prior to background check clearance.

Investigation Methods:

Sample:	Total residents: 6 Resident sample size: 2 Closed records sample size: 0
Observations:	Residents Resident rooms Staff to resident interactions Resident to resident interactions
Interviews:	Residents Maintenance staff Business office manager Identified resident Identified staff
Record Reviews:	Personnel files Maintenance logs

Investigation Summary:

1) After interviews, record review and observation showed the hot water tank in the AFH was replaced in a timely manner. No failed practice identified.

2) Following interviews and observation with named staff showed that during scheduled outing all basic care needs were met and appropriate supplies were available for residents. The Named resident stated their needs were met during the outing. No failed practice identified.

3) Following interviews, and observations of named staff and record review of staff records showed the named staff member did not have disciplinary action in the records and no odor was present at the time of the interview. There was no failed practice identified.

4) Following interviews and record reviews the named staff member was working alone with residents prior to the facility receiving their background check results.
Failed practice identified at 388-76-10175. Reference STATEMENT OF DEFICIENCIES DATED 01/02/2024.

Conclusion / Action:

- [x] Failed Provider Practice Identified / Citation(s) Written
- [ ] Failed Provider Practice Not Identified / No Citation Written
- [ ] N/A

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

1200 Alder Street, Union Gap, WA 98903

Statement of Deficiencies	License #: 752703	Compliance Determination # 32464
Plan of Correction	From The Heart AFH Inc	Completion Date
Page 1 of 3	Licensee: From The Heart AFH Inc	01/02/2024

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for an unannounced on-site complaint investigation on 11/15/2023 and 11/15/2023 of:

From The Heart AFH Inc
4411 Segovia Dr
Pasco, WA 99301

This document references the following complaint number(s): 104705

The following sample was selected for review during the unannounced on-site visit: 2 of 6 current residents and 0 former residents.

The department staff that investigated the Adult Family Home:

Tamera Lapierre, Community Complaint Investigator
Sarah Clark, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Michelle Closner
Residential Care Services

01/10/2024
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 388-76-10175 Background checks Employment Conditional hire Pending results of Washington state name and date of birth background check. An adult family home may conditionally employ a person directly or by contract, pending the result of a Washington state name and date of birth background check, provided the home:

(3) Does not allow the individual to have unsupervised access to any resident;

This requirement was not met as evidenced by:

Based on interviews, and record review the Adult Family Home (AFH) failed to ensure that Background Check (BGC) results were returned prior to allowing staff to work unsupervised of 1 of 1 staff (Staff A). This failure placed residents in the direct care of a disqualified caregiver.

Findings included…

Record review of staffing schedule dated October 2023 showed Staff A, Caregiver, was scheduled to work in the AFH a total of nine days, from 10/20/2023 through 10/31/2023.

Record review of Staff A's, BGC dated 10/26/2023 showed to be disqualifying to work in the AFH.

On 11/15/2023 at 12:30 PM, Staff B, Administrator, stated that they placed Staff A on the schedule beginning 10/20/2023 thru 10/31/2023 prior to BGC results being received. Staff B stated that Staff A may have worked alone prior to being removed from the schedule on 10/30/2023 following disqualifying BGC results received on 10/26/2023. Staff B then stated they knew they should not have placed Staff A on the schedule prior to receiving results.

On 11/16/2023 at 08:40 AM, Staff C, House Manager, stated they had seen Staff A working independently prior to the BGC return.

Interview on 01/02/2024 at 10:30 AM, Staff A stated they had been trained from 10/20/2023 thru 10/21/2023. Staff A further stated they then worked independently as caregiver on 10/23/2023, 10/24/2023, 10/25/2023, 10/26/2023, 10/28/2023, and 10/29/2023.

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, From The Heart AFH Inc is or will be in compliance with this law and / or regulation on (Date)________________ .

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

______________________________ ______________________

Provider (or Representative) Date