



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

Nataliya G. Gorinchoy
Desert Wind Gardens AFH
8606 W Bruneau Ave
Kennewick, WA 99336

RE: Desert Wind Gardens AFH License # 752806

Dear Provider:

This letter addresses Compliance Determination(s) 33700 (Completion Date 12/12/2023) and 30052 (Completion Date 10/13/2023).

The Department completed a follow-up inspection of your Adult Family Home on 12/12/2023 and found that you have corrected the violations listed in the Complaint report dated 10/13/2023. Your home is back in compliance as of 10/13/2023 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 388-76-10535-1-a, WAC 388-76-10535-1-b

The Department staff who did the off-site verification:
Tamera Lapierre, Community Complaint Investigator
Sarah Clark, 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: Desert Wind Gardens AFH **Provider Type:** Adult Family Home

License/Cert. #: 752806

Intake ID: 100593

Compliance Determination #: 30052

Region/Unit #: RCS Region 1 / Unit C

Investigator: Sarah Clark

Investigation Date(s): 09/26/2023 through 10/13/2023

Complainant Contact Date(s):

Allegation(s):

- 1.) A Named Resident (NR) was left alone and was not turned enough.
 - 2.) A NR representative was not given adequate written notice prior to services increase.
 - 3.) The Adult Family Home (AFH) has hidden cameras in the living room.
-

Investigation Methods:

Sample:	Total residents: 4 Resident sample size: 2 Closed records sample size: 1
Observations:	Residents, Dining room, living room, Resident rooms, Staff to resident interactions, Resident to resident interactions
Interviews:	Residents, Staff, others not associated to the facility, Family members
Record Reviews:	Residents records, facility emails, letter of increase in services, resident list.

Investigation Summary:

- 1.) Interviews and record reviews showed that the NR no longer resides in the facility. Staff stated that the NR was turned frequently and as needed as per their negotiated service agreement. Interviewed residents stated that current staff provided good care, they felt safe, and staff treated them with respect and dignity. They feel safe and well taken care of at the AFH. Observations showed staff interactions with residents to be timely and respectful. No failed practice identified.
 - 2.) Interviews and record reviews showed that the Provider gave notice of increased cares and services to a resident family. Failed practice identified at WAC 388-76-10535.
 - 3.) Interviews and record reviews showed that the facility does not use cameras in any areas. Residents were not aware of any camera usage in the home. Observations showed that no cameras were seen to be in use in the AFH. No failed practice identified.
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Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



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Statement of Deficiencies	License #: 752806	Compliance Determination # 30052
Plan of Correction	Desert Wind Gardens AFH	Completion Date
Page 1 of 3	Licensee: Natallya G. Gorinchoy	10/13/2023

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 09/26/2023 and 09/26/2023 of:

Desert Wind Gardens AFH
8606 W Bruneau Ave
Kennewick, WA 99336

This document references the following complaint number(s): 96070, 100593

The following sample was selected for review during the unannounced on-site visit: 2 of 4 current residents and 1 former residents.

The department staff that investigated the Adult Family Home:

Sarah Clark, Community Complaint Investigator

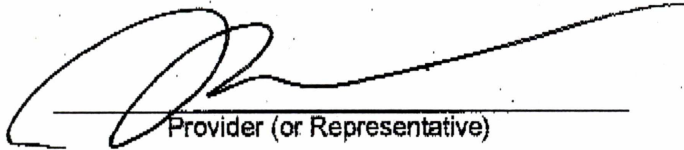
From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1, Unit C
1200 Alder Street
Union Gap, WA 98903

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.

Michella Clooner
Residential Care Services

10/17/2023
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)

11-2-23

Date**WAC 388-76-10535 Resident rights Notice of change to services.**

(1) The adult family home must inform each resident in advance of changes to services, items, activities, scope of care, or home rules as follows:

(a) In writing;

(b) At least fourteen days before the effective date of a change due to a substantial and continuing change in the resident's condition that necessitates substantially greater or lesser services, items, or activities;

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to give 14 day notification for change in services for 1 of 2 sampled residents (Resident 1). This failure placed residents at risk for financial hardship and psychosocial distress.

Findings included...

Review of Resident 1 admission agreement, signed by Collateral Contact 1 (CC1), Resident Representative, dated 02/01/2023 showed on page eight that notice for rate adjustments resulting from extreme situations regarding resident care needs will be provided 14 days in advance of the rate change.

Record review of a letter dated on 08/17/2023, from Staff A, Provider, to CC1, identified Resident 1's admission assessment was not accurate and the AFH had done everything possible to resolve challenging behaviors of Resident 1. It further stated that the behaviors are most likely not going to be resolved no matter what they did. The letter also identified increase in daily rates. These service changes and price increase would take effect on 09/01/2023.

Review of emails sent between Staff A and CC1 showed that the letter was not emailed until 08/21/2023, which was eleven days before the change in services and rate would begin.

During an interview on 10/02/2023 at 10:29 AM, CC1 stated that the first time they received the letter was on 08/21/2023, the date it was sent by email, that gave them less than eleven full days to find alternative placement for Resident 1. CC1 stated they were shocked upon receiving the letter regarding the services and rate changes.

During an interview on 10/02/2023 at 11:15 AM, Staff A stated that the changes in

Statement of Deficiencies	License #: 752806	Compliance Determination # 30052
Plan of Correction	Desert Wind Gardens AFH	Completion Date
Page 3 of 3	Licensee: Nataliya G. Gorinchoy	10/13/2023

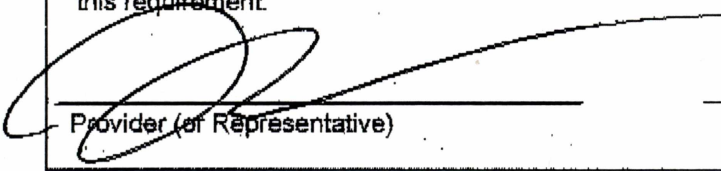
services were going to start 09/01/2023.

During an interview on 10/11/2023 at 11:18 AM, Staff A stated they did realize that the date they sent the letter was short a few days then the required fourteen days.

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, Desert Wind Gardens AFH is or will be in compliance with this law and / or regulation on (Date) 10-13-2023

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



Provider (or Representative)

11-3-23

Date