STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
PO Box 99250, Lakewood, WA 98496

Hussien Ahmedein
Aysha's Loving Care AFH
13107 110th Avenue Ct E
Puyallup, WA 98374

RE: Aysha's Loving Care AFH License # 754275

Dear Provider:

This letter addresses Compliance Determination(s) 28019 (Completion Date 08/21/2023) and 23574 (Completion Date 06/12/2023).

The Department completed a follow-up inspection of your Adult Family Home on 08/21/2023 and found that you have corrected the violations listed in the Complaint report dated 06/12/2023. Your home is back in compliance as of 07/07/2023 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 388-76-10400-2

The Department staff who did the on-site verification:
Tabitha Tubbs, AFH Complaint Investigator

If you have any questions, please contact me at (253)983-3826.

Sincerely,

Lisa Cramer, Field Manager
Region 3, Unit A
Residential Care Services

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

Residential Care Services
Investigation Summary Report

Provider/Facility: Aysha's Loving Care AFH **Provider Type:** Adult Family Home
License/Cert.#: 754275
Compliance Determination #: 23574 **Intake ID:** 80591
Investigator: Tabitha Tubbs **Region/Unit #:** RCS Region 3 / Unit A
Investigation Date(s): 05/08/2023 through 06/12/2023
Complainant Contact Date(s): 05/08/2023

Allegation(s):
The reporter stated two residents were seen by the adult family home (AFH) doctor and had to be transported to the emergency department (ED) due to the AFH provider not following the doctor's recommendations.

Investigation Methods:

Sample:
Total residents: 6
Resident sample size: 2
Closed records sample size: 0

Observations:
Identified resident
Residents
Dining
Resident care equipment
Resident rooms
Kitchen
Food preparation

Interviews:
Residents
Staff
Provider

Record Reviews:
Negotiated care plan (NCP)
Medication administration record (MAR)
Medical records
Department records
Assessment

Investigation Summary:
Based on observations, record review, and interviews, the AFH failed to provide recommended medical attention to a resident who experienced pain. Failed facility practice was identified.

Conclusion / Action:

[X] Failed Provider Practice Identified / Citation(s) Written

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☐ Failed Provider Practice Not Identified / No Citation Written

☐ N/A

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Residential Care Services
Investigation Summary Report

Provider/Facility: Aysha's Loving Care AFH **Provider Type:** Adult Family Home
License/Cert.#: 754275
Compliance Determination #: 23574 **Intake ID:** 79912
Investigator: Tabitha Tubbs **Region/Unit #:** RCS Region 3 / Unit A
Investigation Date(s): 05/08/2023 through 06/12/2023
Complainant Contact Date(s): 05/08/2023

Allegation(s):
The reporter stated two residents were seen by the adult family home (AFH) doctor and had to be transported to the emergency department (ED) due to the AFH provider not following the doctor's recommendations.

Investigation Methods:

Sample:
Total residents: 6
Resident sample size: 2
Closed records sample size: 0

Observations:
Identified resident
Residents
Dining
Resident care equipment
Resident rooms
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Food preparation

Interviews:
Residents
Staff
Provider

Record Reviews:
Negotiated care plan (NCP)
Medication administration record (MAR)
Medical records
Department records
Assessment

Investigation Summary:
Based on observations, record review, and interviews, the AFH failed to provide recommended medical attention to a resident who experienced pain. Failed facility practice was identified.

Conclusion / Action:

[X] Failed Provider Practice Identified / Citation(s) Written

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☐ Failed Provider Practice Not Identified / No Citation Written

☐ N/A

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PO Box 99250, Lakewood, WA 98496

Statement of Deficiencies	License #: 754275	Compliance Determination # 23574
Plan of Correction	Aysha's Loving Care AFH	Completion Date
Page 1 of 4	Licensee: Hussien Ahmedein	06/12/2023

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 05/08/2023, 05/08/2023 and 06/12/2023 of:

Aysha's Loving Care AFH
13107 110th Avenue Ct E
Puyallup, WA 98374

This document references the following complaint number(s): 80591, 79912

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:

Tabitha Tubbs, AFH Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3 , Unit A
PO Box 99250
Lakewood, WA 98496

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.

Lisa Cramer — 06/13/2023

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.

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Provider (or Representative)

07-07-23
Date

WAC 388-76-10400 Care and services. The adult family home must ensure each resident receives:

(2) The necessary care and services to help the resident reach the highest level of physical, mental, and psychosocial well-being consistent with resident choice, current functional status and potential for improvement or decline.

This requirement was not met as evidenced by:

Based on observation, interviews, and record reviews the home failed to ensure 1 of 6 Residents (Resident 1) was further evaluated by the emergency department (ED) after an x-ray showed a possible hip fracture. This failure placed Resident 1 at risk for a decline in their health, resulted in Resident 1 having pain, and prevented the Primary Care Physician (PCP) from having an accurate picture of Resident 1's current health status.

Findings included...

On 05/08/2023 at 11:12 AM, an unannounced onsite visit was conducted. Resident 1 was observed in their bedroom laying in bed on the right side. Resident 1 appeared to be having some discomfort based on grimacing and they were rubbing their right leg.

On 05/08/2023 at 11:36 AM, during an interview, Resident 1 verified that they had right-sided hip pain, but was unable to say how long it had been hurting. Resident 1 stated they did go to the hospital, but they did not remember when that was. Resident 1 stated they fell about 5 months ago but did not remember what happened.

On 05/08/2023, record review of Resident 1's negotiated care plan (NCP) showed Resident 1 was a fall risk and was a one-person assist with activities of daily living.

On 05/08/2023, record review showed a medical record from a local hospital dated 02/04/2023, stating Resident 1 was seen for leg pain and bruising of the knees and lower legs. An x-ray was done and showed no broken bones.

On 05/08/2023, record review showed a medical record from a local hospital dated 04/25/2023, noting Resident 1 was seen for right hip pain and an x-ray showed a fracture that looked to be many weeks old.

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On 05/08/2023, record review showed an order dated 05/05/2023, for physical therapy from a local orthopedic clinic and stated no surgery was recommended.

On 05/08/23 at 12:21 PM, during an interview, the Provider stated Resident 1 did not fall and they were unaware of how they broke their hip. The Provider stated they did not have a car when the PCP wanted Resident 1 to go to the ED. The provider stated they should have called 911 but did not.

On 05/09/2023 at 11:19 AM, during an interview with Resident 1's PCP, they stated Resident 1 was seen during an in-home visit on 03/22/2023, and reported new onset right hip pain and was unable to bear weight. An x-ray was ordered on 03/25/2023, which results showed as a possible fracture. The provider was notified by the PCP office on 03/26/2023, and it was recommended that Resident 1 be taken to the ED for further evaluation. During another onsite in-home visit on 04/25/2023, the Provider stated to the PCP that they did not take Resident 1 to the ED, and Resident 1 was still having right hip pain and was unable to bear weight. The PCP called 911 and had Resident 1 transported non-emergently to the hospital.

On 06/07/2023, record review showed that Resident 1's Case Manager conducted an in-home visit on 04/18/2023, and Resident 1 stated their major complaint on that day was in regard to the ongoing pain they experienced in their right /weak leg.

On 06/07/2023, record review of Resident 1's assessment dated 06/09/2022, showed Resident 1 was an extensive physical one-person assist with all activities of daily living (ADL), and had diagnoses of [redacted], and [redacted].

On 06/07/2023, record review of Resident 1's assessment dated 04/18/2023, showed an addition of pain daily to the right leg due to a fracture. Local home health occupational therapy was working with Resident 1 on maintaining their strength and endurance 2-3 times a week.

Attestation Statement

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

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, Aysha's Loving Care AFH is or will be in compliance with this law and / or regulation on (Date) 07-07-23

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

Provider (or Representative) — Date: 07-07-23

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