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) 34908 (Completion Date 01/18/2024) and 30482 (Completion Date 12/01/2023).

The Department completed a follow-up inspection of your Adult Family Home on 01/18/2024 and found that you have corrected the violations listed in the Complaint report dated 12/01/2023. Your home is back in compliance as of 01/02/2024 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 #: 30482 **Intake ID:** 99093
Investigator: Tabitha Tubbs **Region/Unit #:** RCS Region 3 / Unit A
Investigation Date(s): 10/04/2023 through 12/01/2023
Complainant Contact Date(s):

Allegation(s):

1. The reporter stated the adult family home (AFH) has not scheduled appointments for the Identified Resident (IR) to been seen by specialty physicians after referrals were made last year.
2. The reporter stated the IR has not been assisted in guardianship.

Investigation Methods:

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

Observations:
Residents
Identified resident
Activities
Dining
Resident care equipment
Resident rooms
Staff to resident interactions
Resident to resident interactions
Kitchen
Food preparation

Interviews:
Identified resident
Provider
Resident
Primary care physician
Other department member

Record Reviews:
Negotiated care plan
Medication administration record
Medical records
Other department records

Investigation Summary:

1. Based on observations, record review, and interviews, the AFH failed to schedule and help the IR to referred medical appointments for specialty care. Failed facility practice identified.

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

2. Based on record review and interviews, the AFH has not made any attempts to obtain guardianship for the IR. The State AFH regulations do not require AFH Providers to obtain guardianship for residents. No failed facility practice was identified.

Conclusion / Action:

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

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

STATE OF WASHINGTON

DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

PO Box 99250, Lakewood, WA 98496

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 10/04/2023 and 12/01/2023 of:

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

This document references the following complaint number(s): 99093

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.

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.

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

Provider (or Representative) 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 Adult Family Home (AFH) failed to ensure 1 of 6 Residents (Resident 1) was evaluated by specialty physicians when Resident 1's primary care physician (PCP) made referrals. This failure resulted in Resident 1 having pain, and placed Resident 1 at risk for a decline in their health, and prevented the PCP from having an accurate picture of Resident 1's current health status.

Findings included…

On 10/04/2023, review of Resident 1's negotiated care plan (NCP) dated 07/15/2023, showed that they needed assistance to get to appointments and appointments needed to be made for them.

On 10/04/2023, review of medical records from Resident 1's PCP showed a referral for diabetic cataracts and ophthalmology was made on 11/09/2022. A referral for podiatry was made on 12/28/2022. Medical records from the ophthalmology clinic showed the Provider had contacted the clinic and PCP for assistance with Resident 1's insurance on 06/28/2023, Resident 1's first appointment was 08/21/2023, a second appointment was on 09/20/2023.

On 10/04/2023 at 12:55pm in an interview, Resident 1 said they were supposed to see an eye doctor and a foot doctor last year. Resident 1 said they saw an eye doctor about a month and a half ago for the first time. Resident 1 said they felt very frustrated because they cannot see or read anything. Resident 1 said they never saw a foot doctor. They stated they had a lot of pain in their feet and this made them angry.

On 10/04/2023 at 12:55pm, Resident 1 was observed having a difficult time reading a phone number. The numbers had to be written about two inches tall in order for Resident 1 to read the numbers. Resident 1 still had to squint and struggled to read the numbers.

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

On 10/04/2023 at 7:46am in an interview, Resident 1's PCP stated they referred Resident 1 to specialists, specifically in podiatry (a doctor who provides treatment to feet) and in ophthalmology (a doctor who deals with diagnosis and treatment of eye disorders), within the last year several times, but Resident 1 was not seen by them. The PCP stated they reminded the AFH staff at every visit (approximately every 4 weeks) regarding this, but it was not addressed. The PCP stated Resident 1 had progressive debilitating concerns that only specialists can address. These conditions were greatly impairing Resident 1's quality of life, independence, and ability to participate in activities of daily living (ADL). The PCP said they originally placed the ophthalmology referral on 11/09/2022, and the podiatry referral on 12/28/2022.

On 10/04/2023 at 1:04pm in an interview, the Provider stated the first time they spoke with a podiatrist was last month, but the Provider did not made an appointment because there was an issue with Resident 1's medical insurance. The Provider stated that they did not remember ever receiving a referral from Resident 1's PCP for podiatry or ophthalmology. They stated Resident 1 went to an ophthalmology appointment at the beginning of the year, but there was a problem with Resident 1's insurance at that time, so they went back to the ophthalmologist last month.

On 11/03/2023 10:17am in a telephone interview, the podiatry clinic stated they did not have any records for Resident 1.

This is a repeated deficiency previously cited on 06/12/2023, 03/17/2023, and 01/27/2023.

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, Aysha's Loving Care AFH 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.

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

Provider (or Representative) Date

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