STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
***20425 72nd Avenue S, Suite 400, Kent, WA 98032***

"Bright Rose" AFH LLC

"Bright Rose" AFH LLC
26308 185TH AVE SE
COVINGTON, WA 98042

RE: "Bright Rose" AFH LLC License # 755908

Dear Provider:

This letter addresses Compliance Determination(s) 31187 (Completion Date 10/25/2023) and 25757 (Completion Date 07/05/2023).

The Department completed a follow-up inspection of your Adult Family Home on 10/25/2023 and found that you have corrected the violations listed in the Full report dated 07/05/2023. Your home is back in compliance as of 08/20/2023 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 388-76-10400-4, WAC 388-76-10400, WAC 388-76-10290, WAC 388-76-10290-1, WAC 388-76-10290-2, WAC 388-76-10135-3, WAC 388-76-10135-3-a, WAC 388-76-10135-3-b, WAC 388-76-10135-3-b-i, WAC 388-76-10135-3-b-ii

The Department staff who did the on-site verification:
Susan Aromi, Licensor

If you have any questions, please contact me at (253)234-6007.

Sincerely,

Lydia Owusu-Acheampong, Field Manager
Region 2, Unit G
Residential Care Services

STATE OF WASHINGTON

# DEPARTMENT OF SOCIAL AND HEALTH SERVICES

AGING AND LONG-TERM SUPPORT ADMINISTRATION

***20425 72nd Avenue S, Suite 400, Kent, WA 98032***



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 the unannounced on-site full inspection on 06/22/2023 and 06/22/2023 of:

"Bright Rose" AFH LLC
26308 185TH AVE SE
COVINGTON, WA 98042

The following sample was selected for review during the unannounced on-site visit: 2 of 3 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Susan Aromi, Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit G
20425 72nd Avenue S, Suite 400
Kent, WA 98032

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

7-11-2023
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.

| Statement of Deficiencies | License #: 755908 | Compliance Determination # 25757 |
|---|---|---|
| Plan of Correction | "Bright Rose" AFH LLC | Completion Date |
| Page 2 of 6 | Licensee: "Bright Rose" AFH LLC | 07/05/2023 |

Provider (or Representative)

07/11/2023
Date

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

(4) Services by the appropriate professionals based upon the resident's assessment and negotiated care plan, including nurse delegation if needed.

**This requirement was not met as evidenced by:**

Based on observation, interview and record review, the Adult Family Home (AFH) failed to have nurse delegation (a state program that allows nursing assistants working in certain settings, like AFH, to perform certain tasks, like administration of prescribed medicines, normally performed only by licensed nurses) for medication administration for 1 of 3 residents (Resident 2). This failure placed Resident 2 at risk of a decline in medical condition from unmet medication needs and medication errors.

Findings included...

Observation on 06/22/2023 at 10:18 AM showed one staff (Staff A, Entity Representative/Resident Manager) and Residents 1, 2 and 3 in the AFH.

In an interview on 06/22/2023 at 10:19 AM, Staff A said they had only one other staff, Staff B, Caregiver, working at the AFH. Staff B arrived at the AFH at 10:57 AM [on 06/22/2023].

In an interview on 06/22/2023 at 11:10 AM, Staff A said Resident 2 had a diagnosis that caused weakness and sometimes prevented Resident 2 from putting oral medications in their mouth. Staff A said that they were a Registered Nurse and did not need nurse delegation to administer Resident 2's medications. Staff A said that they had nurse delegation for Staff B to administer Resident 2's medications.

Review of Resident 2's June 2023 medication log showed 16 daily routine medications and three as needed oral medications. Staff A had initialed Resident 2's routine medications as given on some days, and Staff B had initialed Resident 2's routine medications as given on the rest of the days, from 06/01/2023 to 06/22/2023.

Review of Staff B's administrative records, showed they were a Nursing Assistant Registered. Staff B require nurse delegation for administration of Resident 2's routine oral medications.

| Statement of Deficiencies | License #: 755908 | Compliance Determination # 25757 |
|---|---|---|
| Plan of Correction | "Bright Rose" AFH LLC | Completion Date |
| Page 3 of 6 | Licensee: "Bright Rose" AFH LLC | 07/05/2023 |

Review of Resident 2's 05/19/2023 nurse delegation records showed that Staff B was delegated to administer Resident 2's as needed (PRN) oral medications. There was no delegation record for Staff B to administer Resident 2's daily routine oral medications.

On 06/22/2023 at 3:42 PM, the AFH's nurse delegator phoned and talked to the department staff. The nurse delegator said that they did not delegate Staff B to administer Resident 2's routine oral medications because the time they [nurse delegator] were last at the AFH on 05/19/2023, Resident 2 was able to put their medications in their mouth. The nurse delegator said the AFH staff did not inform them [nurse delegator] that the AFH staff placed the routine oral medications in Resident 2's mouth when the resident was feeling weak.

**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, "Bright Rose" AFH LLC is or will be in compliance with this law and / or regulation on (Date) 08/20/2023

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

Provider (or Representative) — Date: 07/11/2023

**WAC 388-76-10290 Tuberculosis Positive test result. When there is a positive result to tuberculosis skin or blood testing the adult family home must:**

(1) Ensure that the person has a chest X-ray within seven days;

(2) Ensure each resident or employee with a positive test result is evaluated for signs and symptoms of tuberculosis; and

**This requirement was not met as evidenced by:**

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 2 staff (Staff B, Caregiver) who tested positive for tuberculosis [(TB), a communicable disease affecting the lungs] had a chest X ray within seven days. This failure placed the residents at risk of contracting TB.

Findings included...

Observation on 06/22/2023 at 10:18 AM showed Staff A, Entity Representative/Resident Manager, with Residents 1, 2 and 3 in the home.

| Statement of Deficiencies | License #: 755908 | Compliance Determination # 25757 |
|---|---|---|
| Plan of Correction | "Bright Rose" AFH LLC | Completion Date |
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In an interview on 06/22/2023 at 10:19 AM, Staff A said they had only one other staff, Staff B, Caregiver, working at the AFH.

On 06/22/2023 at 10:20 AM, Staff A phoned someone, and at 10:57 AM, Staff B arrived.

In an interview on 06/22/2023 at 11:10 AM, Staff A said that they were a Registered Nurse.

Review of staff records showed the AFH hired Staff B as a housekeeper on 12/08/2022, and the AFH hired Staff B as a caregiver on 02/04/2023.

In an interview on 06/22/2023 at 3:41 PM, Staff A said that Staff B had a TB skin test in their country on 09/01/2022, a week before Staff B arrived in the United States. Staff A said that Staff B arrived in the United States on 09/06/2022 with their arm all swollen. Staff A said they did not give Staff B the record of their TB skin test done in their native country, which as a Registered Nurse, Staff A knew Staff B had a positive TB skin test result (according to WAC 388-76-10275, a positive result is 10 or more millimeters induration) from the swelling on Staff B's arm.

Review of staff records showed Staff B had a chest x-ray on 02/07/2023, 160 days after they tested positive for TB.

On 06/22/2023 at 3:45 PM, Staff A said the reason Staff B had a chest x-ray only on 02/07/2023 was Staff B was hired as a caregiver on 02/04/2023

**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, "Bright Rose" AFH LLC is or will be in compliance with this law and / or regulation on (Date) 08/28/2023

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

Provider (or Representative) — Date: 07/11/2023

**WAC 388-76-10135 Qualifications Caregiver. The adult family home must ensure each caregiver has the following minimum qualifications:**

(3) Has basic communication skills to:

(a) Be able to communicate or make provisions to communicate with the resident in his or her primary language; and

(b) Understand and speak English well enough to:

(i) Respond appropriately to emergency situations; and

(ii) Read, understand, and implement resident negotiated care plans;

**This requirement was not met as evidenced by:**

Based on observation, interview and record review, the Adult Family Home (AFH) failed to ensure 1 of 2 staff (Staff B, Caregiver) understood and spoke adequate English to communicate with three English-speaking residents (Residents 1, 2 and 3) and respond appropriately to emergency situations. This failure placed all three residents at risk of not getting their needs met and/or not getting immediate emergency care when needed.

Findings included...

Observation on 06/22/2023 at 10:18 AM showed Staff A, Entity Representative/Resident Manager, with Residents 1, 2 and 3 in the home.

In an interview on 06/22/2023 at 10:19 AM, Staff A said they had only one other staff, Staff B, Caregiver, working at the AFH.
On 06/22/2023 at 10:20 AM, Staff A phoned someone, and at 10:57 AM, Staff B arrived.

During the staff interview on 06/22/2023 at 1:06 PM, Staff B was unable to express themselves adequately in English. The department staff repeated each of the listed questions two or more times and used simpler words to get Staff B to understand the questions. Staff B answered in incomplete sentences and/or gave inappropriate answers. When asked, "Give an example of physical abuse," Staff B responded, "No, no, no. I say, 'Sorry' to the resident and tell my manager." The department staff had to tell Staff A three times, to leave the dining room for the department staff to have a private interview with Staff B, because Staff A kept walking to the dining room and coached Staff B, in their native language, after which, Staff B responded with a correct answer.

In an interview on 06/22/2023 at 2:22 PM, Resident 2 said that they sometimes understood Staff B, "but not all the time." Resident 2 said that Staff B did not understand a lot of what Resident 2 said. Resident 2 said that they repeated themselves, and Staff B still did not understand them. Resident 2 said that they doubted if Staff B would be able to explain to emergency personnel if Resident 2 needed emergency care.

In an interview on 06/22/2023 at 1:43 PM, Resident 3 said, Staff A worked at the AFH with Staff B sometimes, and Staff B worked by themselves other times. Resident 3 said Staff A used to work at a local health facility about twice a week. Resident 3 also said that Staff A went home to their country once, for several days, and Staff B worked by themselves with

the residents. Resident 3 said that there were times they did not understand Staff B. Resident 3 said that they got frustrated and gave up trying to have Staff B find something or do something for Resident 3 because Staff B did not understand them. Resident 3 said that they had to repeat themselves, "quite a bit" and still, Staff B did not understand them. Resident 3 said that Staff B got agitated when they did not understand everything Resident 3 said. Resident 3 added that they were afraid that Staff B would have trouble calling emergency services if something happened to them or the other residents.

In a further interview on 06/22/2023 at 4:42 PM, Staff A said that Staff B had been in the country for only nine months and was still learning English.

Review of staff records showed the AFH hired Staff B as a caregiver on 02/04/2023.

**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, "Bright Rose" AFH LLC is or will be in compliance with this law and / or regulation on (Date) 08/20/2023

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

Provider (or Representative) — Date: 07/11/2023