



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
316 W Boone Ave., Suite 170, Spokane, WA 99201

March 6, 2019

Deloris I Proctor
MARAVILLA AFH
3281 WILLMS RD
ELK, WA 99009

RE: MARAVILLA AFH License #153000

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on March 5, 2019 for the deficiency or deficiencies cited in the report/s dated January 2, 2019 and found no deficiencies.

The Department staff who did the inspection:
Brooke Reese, Complaint Investigator

If you have any questions please, contact me at (509) 323-7324.

Sincerely,

Susan Bergeron, Field Manager
Region 1, Unit B
Residential Care Services



STATE OF WASHINGTON
 DEPARTMENT OF SOCIAL AND HEALTH SERVICES
 AGING AND LONG-TERM SUPPORT ADMINISTRATION
 316 W Boone Ave., Suite 170, Spokane, WA 99201

Statement of Deficiencies	License #: 153000	Completion Date
Plan of Correction	MARAVILLA AFH	January 2, 2019
Page 1 of 4	Licensee: Deloris Idamae Proctor	

You are required to be in compliance with all of the licensing laws and regulations at all times to maintain your adult family home license.

The department has completed data collection for the unannounced on-site full inspection of:
 12/20/2018

MARAVILLA AFH
 3281 WILLMS RD
 ELK, WA 99009

The department staff that inspected the adult family home:
 Brooke Reese, RN, BSN, Complaint Investigator


From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 1, Unit B
 316 W Boone Ave., Suite 170
 Spokane, WA 99201
 (509)323-7324

RECEIVED

JAN 17 2019


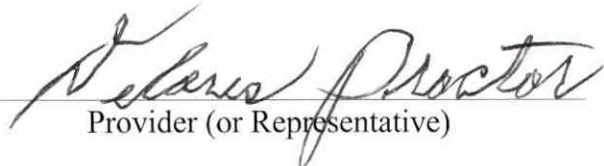
DSHS ADSA RCS
 SPOKANE WA


As a result of the on-site full inspection 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.

 
 Provider (or Representative)

 1-14-19
 Date

WAC 388-76-10165 Background checks Washington state name and date of birth background check Valid for two years National fingerprint background check Valid indefinitely.

(1) A Washington state name and date of birth background check is valid for two years from the initial date it is conducted. The adult family home must ensure:

(a) A new DSHS background authorization form is submitted to the department's background check central unit every two years for each individual listed in WAC 388-76-10161 ;

(b) There is a valid Washington state background check for all individuals listed in WAC 388-76-10161 .

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the home failed to update background check results for three of three sample staff (A, B and C) who worked and/or lived in the home more than two years. This failure resulted in all residents (#1, 2, 3 and 4) receiving care from and sharing a home with potentially disqualified staff members. Findings included:

Intermittent observations on 12/20/18 between 10:02 AM- 4:00 PM showed Staff A, Provider, and Staff B, caregiver, lived in the home and provided care and services to Residents #1, 2, 3 and 4.

During an interview on 12/20/18 at 10:24 AM, Staff A stated that she and Staff B lived in the home and worked most shifts. Staff A stated that Staff C, caregiver, was employed as a relief staff member and last worked in the home approximately six months prior.

Review of Staff A, B and Cs' Washington state name and date of birth background checks, dated 06/03/16, showed all of the background checks expired on 06/03/18 (over six months prior to inspection).

During an interview on 12/20/18 at 12:32 PM, Staff A stated that she fell behind on things recently, and did not realize the background checks were expired.

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, MARAVILLA AFH is or will be in compliance with this law and / or regulation on (Date) 1-9-19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

X Deloris Proctor
Provider (or Representative)

X 1-14-19
Date

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(6) Provide storage for toxic substances, poisons, and other hazardous materials that is only accessible to residents under direct supervision, unless the resident is assessed for and the negotiated care plan indicates it is safe for the resident to use the materials unsupervised;

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the home failed to store cleaning supplies in an inaccessible area for three of three sample residents (#1, 2, and 4). This failure placed the residents at risk for harm. Findings included:

Observation on 12/20/18 at 10:02 AM showed a container of Clorox cleaning wipes on the kitchen counter.

Observation on 12/20/18 at 1:12 PM showed an unlocked closet next to the home's front entrance contained all purpose household oil/lubricant, spray paint, primer, varnish remover, insulating foam sealant, waste digester for RV's/boats, water repellent spray, and carpet cleaner. During an interview at that time, Staff B, caregiver, stated that he opened the cabinet that morning and forgot to lock it.

Observations on 12/20/18 at 1:18 PM and 1:20 PM showed two unlocked closets in the home's hallway between the front entrance and Resident #1's bedroom. The first closet contained carpet cleaner, bleach, and multipurpose cleaner. The second closet contained Clorox cleaning wipes. During interviews at those times, Staff B, stated that he normally kept the closets locked, and was unaware Clorox cleaning wipes were toxic.

Observation on 12/20/18 at 1:22 PM showed a key inside a lock on a wall mounted cabinet near the laundry room. The cabinet contained laundry detergent, bleach, and carpet cleaner. At that time, Staff B stated that he did not realize the key was in the lock.

Observation on 12/20/18 at 1:23 PM showed an unlocked cabinet under the sink in Resident #1's bathroom contained Clorox cleaning wipes.

Observation on 12/20/18 at 1:31 PM showed an unlocked cabinet under the kitchen sink contained window cleaner.

Review of Resident #1, 2, and 4s' assessments, dated 07/09/18, 07/13/18, and 07/13/18 respectively, showed the residents walked independently in the home, had impaired cognitive abilities, made poor decisions, and were not assessed for their abilities to safely use toxic chemicals unsupervised.

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, MARAVILLA AFH is or will be in compliance with this law and / or regulation on (Date) 2-15-2019. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Deloris Proctor
Provider (or Representative)

1-15-2019
Date



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
316 W Boone Ave., Suite 170, Spokane, WA 99201

January 9, 2019

CERTIFIED MAIL

7018 0680 0002 0148 1699

Deloris I Proctor
MARAVILLA AFH
3281 WILLMS RD
ELK, WA 99009

RE: MARAVILLA AFH License #153000

Dear Provider:

The Department completed a full inspection of your Adult Family Home on January 2, 2019 and found that your home does not meet the adult family home licensing requirements.

The Department:

- Found a deficiency or deficiencies which resulted or may result in harm to residents; and
- Wrote the enclosed report; and
- May take enforcement action based on any deficiency listed on the enclosed report.

You Must:

- Within 10 calendar days after you receive this letter, provide a written plan on the enclosed report, according to the attached "Plan":
- Begin the process of correcting the deficiency or deficiencies immediately; and
- Complete correction within 45 days, or sooner if directed by the Department; and
- Sign and date the first page of the enclosed report; and
- Return the first page with your plan; and
- Have your plan approved by the Department.

Consultation:

In addition, the Department provided consultation on the following deficiency or deficiencies not listed on the enclosed report.

WAC 388-76-10129 Qualifications Adult family home personnel. The adult family home must ensure that the following are qualified and meet all of the applicable requirements of this chapter and chapter 388-112 WAC:

- (1) Any person employed or used by the adult family home, directly or by contract, by an adult family home; including but not limited to:
- (f) Caregivers.

WAC 388-112A-0610 Who is required to complete continuing education training each year, how many hours of continuing education are required, and when must they be completed?

(1) Adult family homes.

(d) Continuing education must include one half hour per year on safe food handling in adult family homes as described in RCW 70.128.250 when the long-term worker does not maintain a food handler's permit.

The home failed to ensure staff completed safe food handler training annually. The Provider stated that she is an approved trainer for the course, and will ensure staff receive the training immediately. Residents did not voice concerns related to food services.

WAC 388-76-10130 Qualifications Provider, entity representative and resident manager. The adult family home must ensure that the provider, entity representative and resident manager have the following minimum qualifications:

(11) Obtain and keep valid cardiopulmonary resuscitation (CPR) and first-aid card or certificate as required in chapter 388-112 WAC; and

The Provider failed to maintain her First Aid/CPR training when her certificate expired. The Provider's certificate expired one month prior to the inspection. The Provider stated that she had an appointment to take the required training the following week.

WAC 388-76-10575 Resident rights Privacy.

(1) The adult family home must ensure the right of each resident to personal privacy that includes:

(c) Clinical or resident records;

The home failed to place resident medication logs in an area not visible to others. The Provider stated that she understood the importance of keeping resident records confidential. Staff immediately placed the logs in a private location. Residents did not voice concerns related to privacy.

WAC 388-76-10845 Emergency drinking water supply. The adult family home must have an on-site emergency supply of drinking water that:

(1) Will last for a minimum of seventy-two hours for the home's licensed capacity, every household member, and caregiving staff;

(2) Is at least three gallons for the home's licensed capacity, every household member, and caregiving staff;

(3) Is stored in well-sealed food grade or glass containers;

(4) Is chlorinated or commercially bottled;

The home failed to ensure emergency drinking water was stored in approved bottles/containers. Staff stated that the home had some commercially bottled water, but not the required amount. The Provider stated that the home planned to use natural well

Deloris I Proctor
MARAVILLA AFH License #153000
January 9, 2019
Page 3

water in the event of an emergency, that she was unaware of the storage requirements, and that she would correct the deficiency immediately.

You Are Not:

- Required to submit a plan-of-correction for the deficiency or deficiencies not listed on the enclosed report.

The Department:

- Expects all deficiencies to be corrected within the timeframe accepted by the department; and
- May inspect the home to determine if you have corrected all deficiencies.

You May:

- Receive a letter of enforcement action based on any deficiency listed on the enclosed report.
- Ask for an informal dispute resolution meeting, according to the attached "Informal Dispute Resolution" instructions; and
- Ask questions and provide written information to help clarify or dispute the deficiencies.

If You Have Any Questions:

- Please contact me at (509) 323-7324.

Sincerely,



Susan Bergeron, Field Manager
Region 1, Unit B
Residential Care Services

Enclosure