



**Residential Care Services
Investigation Summary Report**

Provider/Facility: ORCHARDS PLACE FOR ELDERLY CARE (687609) **Intake ID(s):** 3190094
License/Cert. #: AF708100
Investigator: Swanstrom, Shawn **Region/Unit:** RCS Region 3/Unit E **Investigation Date(s):** 03/07/2016 through 03/11/2016
Complainant Contact Date(s): 03/04/2016, 03/09/2016

Allegations:

- # 1 - The provider does not send completed Negotiated Care Plans (NCP) to the Department.
 - # 2 - An unnamed caregiver had very poor English.
-

Investigation Methods:

- | | | | |
|--|---|--|--|
| <input checked="" type="checkbox"/> Sample: | 2 residents | <input checked="" type="checkbox"/> Observations: | General environment, general appearance of residents, resident rooms, and staff-to-resident interaction. |
| <input checked="" type="checkbox"/> Interviews: | Sampled residents, the provider, Legal Guardian, and others not associated with the home. | <input checked="" type="checkbox"/> Record Reviews: | Resident records. |
-

Allegation Summary:

- # 1 - The provider stated she sent the NCP to the Department, though had a hard time with the FAX machine. The Department verified they had received the NCPs.
 - # 2 - The unnamed caregiver was not qualified to be left alone with the residents. The provider stated this was a one-time occurrence.
-

Unalleged Violation(s): Yes No

Conclusion: Failed Provider Practice Identified Failed Provider Practice Not Identified

Failed provider practice identified.

03/23/16
Ombud



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Avenue, Suite#220, Vancouver, WA 98684

Statement of Deficiencies	License #: 708100	Completion Date
Plan of Correction	ORCHARDS PLACE FOR ELDERLY CARE	March 11, 2016
Page 1 of 2	Licensee: MAGDALENA MAN	

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 complaint investigation of: 3/7/2016

ORCHARDS PLACE FOR ELDERLY CARE
14705 NE 81ST ST
VANCOUVER, WA 98682

This document references the following complaint number: 3190094

The department staff that inspected and investigated the adult family home:

Shawn Swanstrom, RN, BSN, Licensor

From:

DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 3, Unit E
800 NE 136th Avenue, Suite#220
Vancouver, WA 98684
(360)397-9549

RECEIVED
APR 20 2016
DSHS/ADSA/RCS

As a result of the on-site complaint investigation 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.

C. Burensky for Karly Ramsey
Residential Care Services

03/18/2016
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.

Magdalena Man
Provider (or Representative)

3/18/2016
Date

Statement of Deficiencies	License #: 708100	Completion Date
Plan of Correction	ORCHARDS PLACE FOR ELDERLY CARE	March 11, 2016
Page 2 of 2	Licenses: MAGDALENA MAN	

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

- (4) Completion of the training requirements that were in effect on the date they were hired including requirements described in chapter 388-112 WAC;
- (5) Have no disqualifying criminal convictions or pending criminal charges under chapter 388-113 WAC;
- (7) Have a current valid first-aid and cardiopulmonary resuscitation (CPR) card or certificate as required in chapter 388-112 WAC; and

This requirement was not met as evidenced by:

Based on interview and employee record review it was determined the provider had an unqualified caregiver stay with the residents (Resident # 1 - # 3). This deficient practice caused three of three residents to be at risk of care needs not being met.

All interviews and employee record reviews occur on 3/7/2016 unless otherwise noted.

The provider stated she did not currently have a back -up caregiver employed at the home. The provider stated she and her husband were the only caregivers for the residents.

The provider reported she went to do an errand and left a family member at home with the three residents for a short time. Record review revealed the family member did not have the necessary qualifications to be left alone with residents including: a current background inquiry, current first aid and CPR Training, documentation of basic training and dementia caregiver training.

Three residents lived at the home. Two of the three residents required assistance with transfers and all three residents had cognitive issues. Three of three assessments were reviewed and did not identify residents could be left home alone.

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, ORCHARDS PLACE FOR ELDERLY CARE is or will be in compliance with this law and / or regulation on (Date) 3/12/16. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Magdalena Man
 Provider (or Representative)

4/20/16
 Date



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
800 NE 136th Avenue, Suite#220, Vancouver, WA 98684

May 9, 2016

Magdalena Man
ORCHARDS PLACE FOR ELDERLY CARE
14705 NE 81ST ST
VANCOUVER, WA 98682

RE: ORCHARDS PLACE FOR ELDERLY CARE License #708100

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on May 9, 2016 for the deficiency or deficiencies cited in the report/s dated March 11, 2016 and found no deficiencies.

The Department staff who did the inspection:
Shawn Swanstrom, Licensor

If you have any questions please, contact me at (360) 397-9549.

Sincerely,

Karyl Ramsey, Field Manager
Region 3, Unit E
Residential Care Services