



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
3906-172nd St NE, Suite #100, Arlington, WA 98223

August 5, 2016

Lisa A Anderson
JOSHUAS HOUSE
1809 TOWNSHIP ST
SEDRO WOOLLEY, WA 98284

RE: JOSHUAS HOUSE License #750071

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on July 19, 2016 for the deficiency or deficiencies cited in the report/s dated April 19, 2016 and found no deficiencies.

The Department staff who did the inspection:
Megan Wylie, Licensors

If you have any questions please, contact me at (360) 651-6872.

Sincerely,

Kay Randall, Field Manager
Region 2, Unit B
Residential Care Services



STATE OF WASHINGTON
 DEPARTMENT OF SOCIAL AND HEALTH SERVICES
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 3906-172nd St NE, Suite #100, Arlington, WA 98223

| | | |
|---------------------------|-------------------------|-----------------|
| Statement of Deficiencies | License #: 750071 | Completion Date |
| Plan of Correction | JOSHUAS HOUSE | April 19, 2016 |
| Page 1 of 8 | Licensee: LISA ANDERSON | |

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:
 4/19/2016

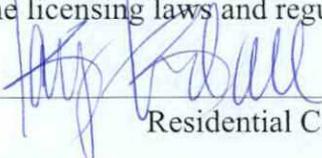
JOSHUAS HOUSE
 1809 TOWNSHIP ST
 SEDRO WOOLLEY, WA 98284

The department staff that inspected the adult family home:
 Megan Wylie, BSN, Licensor

RECEIVED
 MAY 26 2016
 ADSA/RCS
 Smokey Point

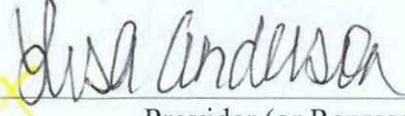
From:
 DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 2, Unit B
 3906-172nd St NE, Suite #100
 Arlington, WA 98223
 (360)651-6872

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

5/4/16
 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)

5/23/16
 Date

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;

WAC 388-112-0110 What is specialty training and who is required to take specialty training?

(5) For long-term care workers who have completed the seventy-five hour training and do not have a specialty training certificate which indicates completion and competency testing, the long-term care worker must complete specialty training when employed by the adult family home or assisted living facility that serves residents with special needs.

This requirement was not met as evidenced by:

Based on interview and record review the provider failed to ensure 1 of 1 staff hired in 2015 (Caregiver B) had their dementia and mental health specialty certificates. This failure placed 4 of 6 residents at risk for unmet needs and being cared for by unqualified staff.

Findings include:

Caregiver B had been employed at the home for over a year. The provider stated she believed Caregiver B was hired in January of 2015. The provider and the licensor reviewed the staff records together. Caregiver B's record did not contain specialty certificates for Dementia and Mental Health as required. The following residents were admitted with a Mental Health diagnosis and/or Dementia:

- Resident 1, admitted to the home on [redacted] 16, had a diagnosis of [redacted]
- Resident 2, admitted to the home on [redacted] 14, had a diagnosis of [redacted]
- Resident 5, admitted to the home on [redacted] 15, had a diagnosis of [redacted]
- Resident 6, admitted to the home on [redacted] 11, had a diagnosis of [redacted]

The provider stated she was not aware that population specific training, included in the home care aid training, was not the same as specialty training.

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, JOSHUAS HOUSE is or will be in compliance with this law and / or regulation on (Date) July 5, 2016 In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Lisa Anderson

Provider (or Representative)

May 23, 2016
Date

WAC 388-76-10146 Qualifications Training and home care aide certification.

(6) The adult family home must ensure that all staff receive the orientation and training necessary to perform their job duties.

This requirement was not met as evidenced by:

Based on record review and interview, the provider failed to ensure facility orientation and training was completed and documented for 4 of 4 staff members currently providing care and services to vulnerable adults (Caregivers A, B, C and D). This placed 5 of 5 residents at risk for abuse, neglect, unmet care needs and a decrease in quality of life.

Findings include:

A full licensing inspection was conducted on 4/19/16, the provider and licensor reviewed the facility's staff records together. The Provider was unable to provide facility orientation and training documentation for Caregivers A, B, C and D.

Caregiver A was rehired to provide care and services to vulnerable adults "around 2/24/16". Caregiver B was hired to provide care and services to vulnerable adults "possibly January of 2015".

Caregiver C was hired to provide care and services to vulnerable adults "possibly re-hired in January of 2016".

Caregiver D was hired to provide care and services to vulnerable adults "around January of 2016".

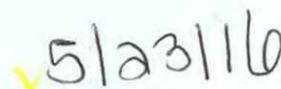
The Provider was not aware that she was required to document the facility orientation. She said she would ensure this was completed as soon as possible.

Attestation Statement

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Provider (or Representative)



Date

WAC 388-76-10350 Assessment Updates required. The adult family home must ensure each resident's assessment is reviewed and updated to document the resident's ongoing needs and preferences as follows:

(4) At least every twelve months.

This requirement was not met as evidenced by:

Based on interview and record review the Provider failed to ensure the assessment was updated annually for 1 of 2 sampled residents (Resident 2). This failure placed the residents at risk for

unidentified or unmet care needs.

Findings include:

Resident 2:

Resident 2 moved into the home on [REDACTED] 2014, with multiple diagnosis' including [REDACTED]. The resident's most recent assessment was last signed on 12/8/2014. At the time of the inspection on 4/19/16, the assessment was over 4 months late.

When the Provider was interviewed, on 4/19/16, she was unaware the residents assessment was overdue and she said she would contact home and community to receive a more current assessment.

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Lisa Anderson
Provider (or Representative)

May 23, 2016
Date

WAC 388-76-10355 Negotiated care plan. The adult family home must use the resident assessment and preliminary care plan to develop a written negotiated care plan. The home must ensure each resident's negotiated care plan includes:

- (1) A list of the care and services to be provided;
- (2) Identification of who will provide the care and services;
- (3) When and how the care and services will be provided;
- (4) How medications will be managed, including how the resident will get their medications when the resident is not in the home;
- (5) The resident's activities preferences and how the preferences will be met;
- (6) Other preferences and choices about issues important to the resident, including, but not limited to:
 - (a) Food;
 - (b) Daily routine;
 - (c) Grooming; and
 - (d) How the home will accommodate the preferences and choices.
- (7) If needed, a plan to:
 - (a) Follow in case of a foreseeable crisis due to a resident's assessed needs;
 - (b) Reduce tension, agitation and problem behaviors;
 - (c) Respond to resident's special needs, including, but not limited to medical devices and related safety plans;
 - (d) Respond to a resident's refusal of care or treatment, including when the resident's physician

or practitioner should be notified of the refusal;

(8) Identification of any communication barriers the resident may have and how the home will use behaviors and nonverbal gestures to communicate with the resident;

(9) A statement of the ability for resident to be left unattended for a specific length of time; and

(10) A hospice care plan if the resident is receiving services for hospice care delivered by a licensed hospice agency.

This requirement was not met as evidenced by:

Based on record review and interview, the provider failed to have a system in place to ensure the negotiated care plan (NCP) of 1 of 2 sampled residents (Resident 1) included all behavioral issues as addressed in the state assessment. This failure placed the resident at risk of having unmet/ unrecognized care needs.

Findings include:

On 4/19/16, record review revealed Resident 1 was admitted to the home on 2/29/16 with medically disabling diagnoses including [REDACTED]

[REDACTED] Review of the state assessment dated 9/1/2016 revealed [REDACTED] had multiple behavioral issues including: Easily irritable/agitated, inappropriate/unsafe sexual behavior and verbally agitated/aggressive. Review of the resident's negotiated care plan (NCP) revealed it did not address the behaviors included in the state assessment. When interviewed, the Provider said she would update the resident's NCP to include all behaviors and directives for caregivers to follow.

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, JOSHUAS HOUSE is or will be in compliance with this law and / or regulation on (Date) July 5. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

L. Anderson
Provider (or Representative)

July 23, 2016
Date

WAC 388-76-10375 Negotiated care plan Signatures Required. The adult family home must ensure that the negotiated care plan is agreed to and signed and dated by the:

(1) Resident; and

This requirement was not met as evidenced by:

Based on interview and record review the provider failed to ensure the Negotiated Care Plan (NCP) was signed and dated by the resident or the resident's representative for 2 of 3 residents diagnosed with dementia (Resident 2 and 6). This placed Residents 2 and 6 at risk for unmet/unidentified care needs and a decreased quality of life.

Findings include:

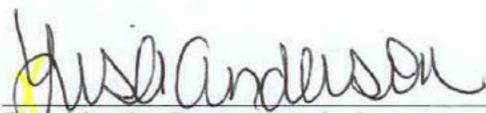
Resident 2 moved into the home on [REDACTED] 2014. The current NCP, dated 1/3/16, was not dated by the resident or the resident's representative.

Resident 6 moved into the home on [REDACTED] 2011. The current NCP in the record, dated 7/10/15, was not signed by the resident or the resident's representative.

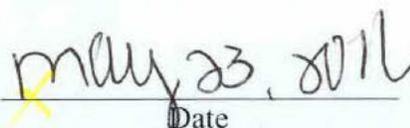
The provider said that she would ensure each NCP was signed by the resident or the resident's representative as soon as possible.

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, JOSHUAS HOUSE is or will be in compliance with this law and / or regulation on (Date) July 5 2016. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)



Date

WAC 388-76-10522 Resident rights Notice Policy on accepting medicaid as a payment source. The adult family home must fully disclose the home's policy on accepting medicaid payments. The policy must:

- (1) Clearly state the circumstances under which the adult family home provides care for medicaid eligible residents and for residents who become eligible for medicaid after admission;
- (2) Be provided both orally and in writing in a language that the resident understands;
- (3) Be provided to prospective residents, before they are admitted to the home;
- (4) Be provided to any current residents who were admitted before this requirement took effect or who did not receive copies prior to admission;
- (5) Be written on a page that is separate from other documents and be written in a type font that is at least fourteen point; and
- (6) Be signed and dated by the resident and be kept in the resident record after signature.

This requirement was not met as evidenced by:

Based on interview and record review, the provider failed to have a system in place to ensure 2 of 2 residents, (Residents 1 and 2), who had medicaid as a payment source, had signed and dated the homes policy on accepting Medicaid as a payment source as required.

Findings include:

Resident 1 was admitted to the home on [REDACTED] 2016. The provider did not provide a medicaid policy for the resident to sign upon admission or any time before or after admission.

Resident 2 was admitted to the home on [REDACTED] 2014. The provider did not provide a medicaid policy for the resident to sign upon admission or any time before or after admission.

The provider was unaware medicaid residents were also to receive a policy for accepting medicaid as a payment source upon admission.

Attestation Statement

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Lisa Anderson

Provider (or Representative)

July 23, 2016
Date

WAC 388-76-10530 Resident rights Notice of services. The adult family home must provide each resident notice in writing and in a language the resident understands before admission, and at least once every twenty-four months after admission of the:

- (1) Services, items, and activities customarily available in the home or arranged for by the home as permitted by the license;
- (2) Charges for those services, items, and activities including charges for services, items, and activities not covered by the home's per diem rate or applicable public benefit programs; and
- (3) Rules of the home's operations.

This requirement was not met as evidenced by:

Based on interview and record review, the provider failed to have a system in place to ensure 1 of 1 residents admitted to the home in 2015 (Resident 5) received a notice of services (Admission Agreement) on admission. This failure placed residents at risk of not knowing the rules of the home or understanding what care and services were provided and which had an additional charge.

Findings include:

Resident 5 moved into the home on [REDACTED] 15 with multiple diagnoses including [REDACTED]. During a review of the resident's record, on 4/18/16, a notice of services could not be found. The provider was unaware the resident had not been provided and stated she would ensure he, or his family, received one as soon as possible.

Attestation Statement

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Lisa Anderson
Provider (or Representative)

July 23, 2016
Date