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

July 3, 2019

Sunrise Valley AFH LLC
Sunrise Valley AFH LLC
3411 E 29th St
Vancouver, WA 98661

RE: Sunrise Valley AFH LLC License #752194

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on June 27, 2019 for the deficiency or deficiencies cited in the report/s dated March 5, 2019 and found no deficiencies.

The Department staff who did the inspection:
Rochelle Bobbe, NCI AFH/ALF CI

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

Sincerely,

B. McCoy FR

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

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

Residential Care Services

Investigation Summary Report

Provider/Facility: Sunrise Valley AFH LLC (689179) **Intake ID(s):** 3617223

License/Cert. #: AF752194

Investigator: Bobbe, Rochelle **Region/Unit:** RCS Region 3/Unit E **Investigation Date(s):** 03/01/2019 through 03/05/2019

Complainant Contact Date(s): 03/05/2019

Allegations:

1. Resident/Patient/Client Rights
2. Quality of Care/Treatment

Investigation Methods:

- [X] **Sample:** 3 residents
- [X] **Observations:** General environment, bathroom, named residents, general appearance of residents, staff to resident interactions, smoking area, and resident rooms.
- [X] **Interviews:** Named, sampled residents, and staff.
- [X] **Record Reviews:** Resident records.

Allegation Summary:

#1 and #2. An onsite investigation was conducted for allegations identified in the intake related to Resident/Patient/Client Rights and Quality of Care/Treatment. The home failed to develop a negotiated care plan addressing how the home will accommodate residents preference and choices and failed to implement a safety plan after it was determined a Named Resident had been locked out of the home on multiple occasions. Additional residents were interviewed for the allegations identified with concerns related to the Named Resident.

Unalleged Violation(s): [ ] **Yes** [X] **No**

Conclusion / Action: [X] **Failed Provider Practice Identified / Citation(s) Written** [ ] **Failed Provider Practice Not Identified / No Citation Written**

WAC 388-76-10620 Resident rights Quality of life was identified as failed practice.
WAC 388-76-10355 Negotiated Care Plan was identified as failed practice.

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

Please refer to the Statement of Deficiency dated 03/01/2019.

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Statement of Deficiencies	License #: 752194	Completion Date
Plan of Correction	Sunrise Valley AFH LLC	March 5, 2019
Page 1 of 4	Licensee: Sunrise Valley AFH LLC	

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: 3/1/2019 and 3/5/2019

Sunrise Valley AFH LLC
3411 E 29th St
Vancouver, WA 98661

This document references the following complaint number: 3617223

The department staff that inspected and investigated the adult family home:
Rochelle Bobbe, MSN, RN, NCI AFH/ALF CI

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

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APR 3 - 2019
DSHS RCS
REGION 3

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. Burinsky for Karyl Ramsey — 03/13/2019
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.

Susan L Vaughan — 04/01/2019
Provider (or Representative) — Date

received 4/4/19 RO

04/19/19

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

WAC 388-76-10620 Resident rights Quality of life General.

(2) Within reasonable home rules designed to protect the rights and quality of life of residents, the home must ensure the resident's right to:

(a) Choose activities, schedules, and health care consistent with his or her interests, assessments, and negotiated care plan;

This requirement was not met as evidenced by:

Based on interview and record review, the facility failed to promote quality of life and ensure resident rights when one of four residents (Resident #1) was not allowed to enter the adult family home (AFH) after certain hours designated by the Provider. This deficient practice diminished Resident #1's quality of life and denied him the right to choose his own schedule.

Findings included:

Interviews and record reviews occurred on 03/01/2019 unless noted otherwise.

Resident #1, a resident of this AFH since [redacted]2016, assessed on 05/18/2018 as independent inside and outside of the home.

On 03/05/2019 Resident #1 shared his concern with the AFH's curfew of 10:00 PM on weeknights and 11:00 PM on weekends. Resident #1 preferred to have control of his own schedule and not worry of being locked out of AFH. Resident #1 stated he was locked out of the AFH approximately six times since he was admitted to the home. According to Resident #1, five out of those six times the Provider left a sleeping bag outside for him to use. Resident #1 stated he refrained from knocking or ringing the doorbell because the Provider's dogs (three small dogs) started barking. Resident #1 stated he was unable to use own key because a security alarm is set at 10:00 PM, which could wake up other residents. Resident #1 stated he the Provider would let him into the AFH past curfew if he remembered to notify the Provider via phone call or text message.

Record review of Resident #1's service agreement signed 04/01/2018 indicated "Curfew is at 10 PM during weeknights (Monday through Friday) and 11 PM during weekends (Saturday and Sunday)."

Interview with Resident #2 confirmed Resident #1's on going issue with curfew. Resident #2 stated the Provider and Resident #1 always argue about tardiness. Resident #2 stated he was aware the Provider left a sleeping bag for Resident #1, but was unable to recall the dates that occurred.

On 03/05/2019 the Provider stated Resident #1 is independent, and goes out of the home to visit family and friends. The Provider shared Resident #1 visits his girlfriend, and goes to school and work as part of his daily activities. The Provider confirmed Resident #1's ongoing issue with AFH's curfew. Provider also confirmed occasions when Resident #1 slept outside in a sleeping bag she provided. According to Provider, Resident #1 verbally agreed to call of text message if he unable to be home on time. The Provider stated Resident #1 had been compliant recently but on occasions of noncompliance, Resident #1 was encouraged to look for place to spend the night (friends or girlfriend's house). WAC 388-76-10620-2-a was reviewed with the Provider.

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

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, Sunrise Valley AFH LLC 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 cited deficiency.

IDR Requested ______________________ 04/01/2019 ______________
Provider (or Representative) 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:

(6) Other preferences and choices about issues important to the resident, including, but not limited to:

(d) How the home will accommodate the preferences and choices.

(7) If needed, a plan to:

(c) Respond to resident's special needs, including, but not limited to medical devices and related safety plans;

This requirement was not met as evidenced by:

Based on interview and record review, the provider failed to create a safety plan for one of four residents (Resident #1) who had to sleep on a sleeping bag outside of the adult family home (AFH) because the door was locked when he returned home. This failure placed the resident at risk for harm and decreased quality of life.

Findings included:

Interviews and record reviews occurred on 03/01/2019 unless noted otherwise.

Resident #1, admitted to this AFH on [redacted]/2016, shared his concern regarding home's curfew of 10:00 PM on weeknights and 11:00 PM on weekends. Resident #1 stated he is assessed to go out on his own to visit friends, go to church, school and work. According to Resident #1, for the first two years living at this AFH, he had been locked out five to six times and slept in a sleeping bag placed by the Provider at the door. Resident #1 stated the Provider requested for him to provide early notice (verbal or text) if he is not able to come home before curfew. Per Resident #1, there had bee occasions when he was unable to text the Provider as planned. Resident #1 stated that he did not feel safe sleeping outside of the home. Resident stated he has a cellphone and is able to call 911 on his own.

Interview with the Provider on 03/05/2019 confirmed Resident #1's issue with AFH's curfew. The Provider also confirmed occasions when Resident #1 slept outside on a sleeping bag she provided. According to the Provider, Resident #1 verbally agreed to call of text message if he was unable to be home on time. The Provider stated she is concerned about neighborhood safety and has an alarm at the front door during the hours of 10:00 PM to 8:00 AM.

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

Record review of Resident #1's assessment dated 05/18/2018 indicated he is independent inside and outside of the home. Review of Resident #1's service agreement signed 04/01/2018 indicated "Curfew is at 10 PM during weeknights (Monday through Friday) and 11 PM during weekends (Saturday and Sunday)." Resident #1's negotiated care plan (NCP), dated 05/01/2018, indicated his goal for friendship with peers and his preference to spend a lot of time with his girlfriend at her house. Resident #1's NCP mentioned "current issues surround his ability to get to places on time, specifically classes, appointment and curfew." Provider did not indicate strategies to resolve current issues in the NCP.

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, Sunrise Valley AFH LLC 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 cited deficiency.

IDR REQUESTED
Provider (or Representative)

04/01/2019
Date

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