



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

September 26, 2019

Belen Ortiz
Steven Ortiz
French Road Springs C
10030 SE French Rd
Vancouver, WA 98664

RE: French Road Springs C License #752521

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on September 23, 2019 for the deficiency or deficiencies cited in the report/s dated July 26, 2019 and found no deficiencies.

The Department staff who did the inspection:
Alixandria Cortez, LTC- MH Community Licensor

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

Sincerely,

A handwritten signature in cursive that reads "Karyl Ramsey".

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



**Residential Care Services
Investigation Summary Report**

Provider/Facility: French Road Springs C (790017) **Intake ID(s):** 3660508
License/Cert. #: AF752521
Investigator: Cortez, Alixandria **Region/Unit:** RCS HQ/HQ **Investigation Date(s):** 07/25/2019 through 07/26/2019
Complainant Contact Date(s):

Allegations:

Dietary Services

Investigation Methods:

Sample: 4 residents

Observations: General environment, resident rooms, noon meal, medications, general appearance of residents and staff-to-resident interactions.

Interviews: Named and sampled residents, staff, and others not associated with the home.

Record Reviews: Resident Records.

Allegation Summary:

An onsite investigation was conducted for allegations identified in the intake related to Quality of Care and Treatment. There was insufficient evidence to support failed facility practice for Quality of Care and Treatment. Additional residents were interviewed for the allegations identified without concerns.

Unalleged Violation(s): **Yes** **No**

Additional deficiencies not originally not related to the original complaint were identified. Please refer to the Statement of Deficiencies dated 07/25/2019.

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

WAC 388-76-10415 Food Services was identified as failed practice. Please refer to the Statement of Deficiencies dated 07/25/2019.



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Statement of Deficiencies	License #: 752521	Completion Date
Plan of Correction	French Road Springs C	July 26, 2019
Page 1 of 3	Licensee: Belen Ortiz and Steven Ortiz	

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: 7/25/2019
French Road Springs C
10030 SE French Rd
Vancouver, WA 98664

This document references the following complaint number: 3660508

The department staff that inspected and investigated the adult family home:
Alixandria Cortez, LTC- MH Community 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

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 Bongh Ramsey
Residential Care Services

08/06/2019
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.

Bongh Ramsey
Provider (or Representative)

8-21-19
Date

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

09/09/19

Statement of Deficiencies	License #: 752521	Completion Date
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WAC 388-76-10415 Food services. The adult family home must:

- (1) Ensure that the safe food handling training requirements of chapter 388-112A WAC are met; and
- (2) Serve meals:
 - (a) In the home where each resident lives; and
 - (b) That accommodate each resident's:
 - (i) Preferences;
 - (ii) Food allergies and sensitivities;
 - (iii) Caloric needs;
 - (iv) Cultural and ethnic background; and
 - (v) Physical condition that may make food intake difficult such as being hard for the resident to chew or swallow.

This requirement was not met as evidenced by:

Based on observation, interview and record review the home failed to meet the preferences of all residents in the home when food preferences for two of four sampled residents (Resident #4 and #6) were not met. This failure caused two residents to go without healthy food alternatives at their request.

Findings included...

On 07/25/19 at 10:13 AM Resident #6 stated that they have not had fresh fruit for approximately two weeks. Resident #6 explained that fresh fruit is never given with meals, it is only given upon request. Resident #6 stated that they have told Caregiver A that they wanted fresh fruit and juice, and Caregiver A told Resident #6 that they put it on the grocery list but it has not been delivered to the home. Resident #6 stated that there are no alternative meals available if they do not like what is being served. Resident #4 stated that in the last two weeks they had asked for an alternative meal and there was not one available.

On 07/25/19 at 1:20 AM Resident #4 stated that the home runs out of basic foods like bread, eggs, fruit and milk often. Resident #4 stated that canned fruit is served in the home and it is very rare that fresh fruit is available. Resident #4 stated that this morning they asked Caregiver A for an alternative meal to oatmeal and rye bread, and Caregiver A informed Resident #4 there was nothing else available. Caregiver A responded by telling Resident #4 to dunk the rye bread into their coffee to make it taste better. Resident #4 stated that they asked for peanut butter in the home two weeks ago and when they asked Caregiver A yesterday if there was any peanut butter, Caregiver A responded no that they never received the requested peanut butter.

On 07/25/19 at 11:50 AM the food pantry and refrigerator were inspected. No fresh fruit or juice were observed in the home. Observed in the pantry was one loaf of bread, seven boxed meals, one cake mix, three cans of chicken, oatmeal and one box of cereal. Observed in the refrigerator and freezer were one head of lettuce, one tomato, eggs, two bags of frozen berries, a bag of frozen meatballs and two and a half gallons of milk.

On 07/25/19 at 12:15 PM during record review of Resident #6's negotiated care plan the section labeled food showed that the caregiver must provide nutritious meals and bring them to the client. At 12:36 PM during record review of Resident #4's negotiated care plan, the section for

Statement of Deficiencies

License #: 752521

Completion Date

Plan of Correction

French Road Springs C

July 26, 2019

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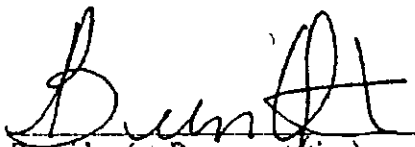
food, showed "SPECIAL DIET REQUESTED BY DR: Low carb (carbohydrates), high protein, fruits/ veggies, no simple sugars or sweets due to weight and diabetes."

On 07/25/19 at 12:56 PM Caregiver A stated that the groceries are ordered by sending a text to the Provider a list of groceries. Caregiver A stated that they are still learning how to cook and sometimes struggles with what to make for meals. Caregiver A also stated that sometimes they do run out of fruit in the house.

On 07/25/19 at 12:50 PM the Provider stated that there is no fresh fruit in the home. The Provider also stated that the home is scheduled to get groceries delivered on Thursdays weekly. At 1:15 PM the Provider stated that if fruit is left out in the home it will be gone quickly. The Provider stated that the residents in the home will request up to seven different fruits but they (the Provider) will not buy all seven fruits, stating that the Provider does not have seven fruits in their personal home. The Provider also stated that there are alternatives in the home if a resident does not like a meal. The Provider stated that examples of those alternatives would be a peanut butter sandwich or a boiled egg.

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, French Road Springs C is or will be in compliance with this law and / or regulation on (Date) 7-29-19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.


Provider (or Representative)

8-21-2019
Date

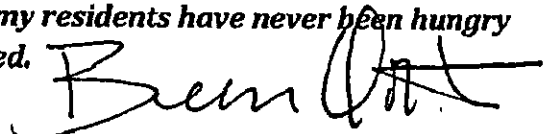
8/22/2019

In regard the complaints and accusations' of no food or not enough of, I like to remind you all that, most of these residents suffer from some form of mental issues, and they all suffer from high levels of anxiety clearly stated on their assessments.

Furthermore I am amazed that the government has ample resources to have an investigation initiated based on a call from a resident claiming that the house was out of ketchup that morning.

I also find it somewhat unfair, that the clients comments and opinions, are taken at face value and carries more weight than, the actually evidence of real food present at time of the inspections, and information coming from us caregivers and provider.

As a final statement I like to re-assured you, that my residents have never been hungry or in any way deprived from been properly and feed.



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