



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

June 14, 2019

A Blissful Haven AFH LLC
A Blissful Haven AFH LLC
3031 S Jefferson St
Spokane, WA 99203

RE: A Blissful Haven AFH LLC License #753087

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on June 11, 2019 for the deficiency or deficiencies cited in the report/s dated April 30, 2019 and found no deficiencies.

The Department staff who did the inspection:
Connie Davis, Licensor

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

Sincerely,

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



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 316 W Boone Ave., Suite 170, Spokane, WA 99201

| | | |
|---------------------------|------------------------------------|-----------------|
| Statement of Deficiencies | License #: 753087 | Completion Date |
| Plan of Correction | A Blissful Haven AFH LLC | April 30, 2019 |
| Page 1 of 4 | Licensee: A Blissful Haven 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 full inspection of:
 4/26/2019

A Blissful Haven AFH LLC
 3031 S Jefferson St
 Spokane, WA 99203

The department staff that inspected the adult family home:
 Scott Sorensen, RN, BSN, AFH Licenser

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

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 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.

[Signature] Residential Care Services 5/3/19 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.

X *Adenale*
 Provider (or Representative)

X 5/14/19
 Date

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

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
- (2) Adult family home.

This requirement was not met as evidenced by:

Based on observation, interview and, record review, the home failed to ensure care plans were signed and dated by residents or representatives for four of four residents reviewed for care plans (#1, 2, 3, and 4), in a sample of six. This deficient practice placed the residents at risk for receiving care and services not agreed to by the resident or representative. Findings included...

Intermittent Observation on 04/26/19 between 9:55 AM - 4:15 PM, showed Residents #1, 2, 3, and 4 received care and services from the adult family home staff.

Review of Resident #1's negotiated care plan, dated 09/20/18, showed no signature or date by the resident or representative.

Review of Resident #2's negotiated care plan, dated 06/15/18, showed no signature or date by the resident or representative.

Review of Resident #3's negotiated care plan, dated 05/31/18, showed no signature or date by the resident or representative.

Review of Resident #4's negotiated care plan, dated 07/10/18, showed no signature or date by the resident or representative.

During an interview on 04/26/19 at 4:15 PM, Staff A, Provider, stated that she had reviewed the negotiated care plans with the residents and the representatives, but forgot to obtain the signatures and dates.

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, A Blissful Haven AFH LLC is or will be in compliance with this law and / or regulation on (Date) ~~5/18/19~~ 5/31/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Q A Desale
Provider (or Representative)

5/14/19
Date

WAC 388-76-10191 Liability insurance required. The adult family home must:

- (1) Obtain liability insurance upon licensure and maintain the insurance as required in WAC 388-76-10192 and 388-76-10193 ; and

This requirement was not met as evidenced by:

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

Based on observation, interview, and record review, the home failed to maintain general liability insurance. This deficient practice resulted in the residents (#1, 2, 3, 4, 5, and 6) not being covered in case of an injury or property damage caused by an act or omission of the home. Findings included...

The adult family home was licensed in April of 2016 to care for six residents and had specialty designations including dementia, mental health, and developmental disabilities.

Intermittent observations on 04/26/19 between 9:55 AM - 4:15 PM showed Residents #1, 2, 3, 4, 5, and 6 received care and services from the adult family home staff.

Review of the home's liability insurance policy, dated 04/11/18, showed the policy expired on 04/11/19.

During an interview on 04/26/19 at 3:10 PM, Staff A, Provider, stated that she was aware the policy had 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, A Blissful Haven AFH LLC is or will be in compliance with this law and / or regulation on (Date) 5/18/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

Q Adelaide
Provider (or Representative)

5/14/19
Date

WAC 388-76-10585 Resident rights Examination of inspection results.

- (1) The adult family home must place the following documents in a visible location in a common use area where they can be examined by residents, resident representatives, the department and anyone interested without having to ask for them.
- (b) A copy of all complaint investigation reports, and any related cover letters received since the most recent inspection or not less than the last twelve months.

This requirement was not met as evidenced by:

Based on observation, interview, and record review, the home failed to ensure the home's most recent complaint investigation results were available in an area accessible for review. This deficient practice limited access to individuals interested in the investigation results without having to ask. Findings included...

Review of the home's licensing file showed a Statement of Deficiencies from the most recent inspection dated 01/09/18 and complaint investigation dated 06/01/18.

Observation on 04/26/19 at 11:45 AM showed one Statement of Deficiency from an inspection dated 01/09/18. There was no Statement of Deficiencies for the complaint investigation dated

06/01/18.

During an interview on 04/26/19 at 11:45 AM, Staff A, Provider, stated that she did not know the complaint investigation results were supposed to be in the notebook.

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, A Blissful Haven AFH LLC is or will be in compliance with this law and / or regulation on (Date) 5/18/19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.

W Adewale
Provider (or Representative)

5/14/19
Date

The plan of correction to the deficiencies have been corrected or will be corrected as dated on the papers submitted.

Thanks



Olamide Adewale

A Blissful Haven AFH LLC

5/17/19