



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

December 26, 2019

Happiness AFH, LLC
Happiness AFH LLC
2308 E 61st Ave
Spokane, WA 99223

RE: Happiness AFH LLC License #754094

Dear Provider:

The Department completed a follow-up inspection of your Adult Family Home on December 23, 2019 for the deficiency or deficiencies cited in the report/s dated October 28, 2019 and found no deficiencies.

The Department staff who did the inspection:
Rose Anderson, Licensor
Raleigh Stowe, AFH 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



**Residential Care Services
Investigation Summary Report**

Provider/Facility: Happiness AFH LLC (1163034) **Intake ID(s):** 3671836
License/Cert. #: AF754094
Investigator: Shauvin, Sylvia **Region/Unit:** RCS Region 1/Unit B **Investigation Date(s):** 10/17/2019 through 10/28/2019
Complainant Contact Date(s): 10/15/2019, 10/21/2019

Allegations:

- #1- Several staff do not have required qualifications
 - #2- Care plan(s) not completed timely
 - #3- Nurse delegation forms not completed
-

Investigation Methods:

Sample: Four of four total residents

Observations: Residents' safety and well-being
Care of residents
Staffing composition

Interviews: Four residents
Provider
Home and Community Services Case Manager

Record Reviews: Sample residents' assessments and care plans
Nurse Delegation forms
Sample two staff's files (qualifications and training)

Allegation Summary:

- #1- Residents had no complaints about the Provider and relief caregiver's qualifications to provide care to residents. Provider and relief caregiver had the required qualifications. No failed facility practice.
- #2- Provider was in the process of completing two care plans. He was aware of the requirement to complete care plans in a timely manner and was in the process of hiring staff to ensure they were completed in the required time frame. No failed facility practice.
- #3- For two sample residents, Provider did not obtain nurse delegation for medications requiring administration and judgment. Failed practice was found.



**Residential Care Services
Investigation Summary Report**

Unalleged Violation(s): Yes No

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

The violation was documented in 10/28/19 Statement of Deficiencies under:
Washington Administrative Code (WAC) 388-76-10400(4) Care and services

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



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Statement of Deficiencies	License #: 754094	Completion Date
Plan of Correction	Happiness AFH LLC	October 28, 2019
Page 1 of 3	Licensee: Happiness 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: 10/17/2019

Happiness AFH LLC
 2308 E 61st Ave
 Spokane, WA 99223

This document references the following complaint number: 3671836

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

Sylvia Chauvin, RN, Complaint Investigator
 Richard Woodrum, RN, BSN, Complaint Investigator

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 DSHS ADSA RCS
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From:

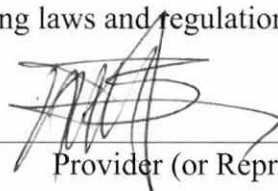
DSHS, Aging and Long-Term Support Administration
 Residential Care Services, Region 1, Unit B
 316 W Boone Ave., Suite 170
 Spokane, WA 99201
 (509)323-7324

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.


 Residential Care Services

10/28/19
 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 
 Provider (or Representative)

X 10-28-19
 Date

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WAC 388-76-10400 Care and services. The adult family home must ensure each resident receives:

(4) Services by the appropriate professionals based upon the resident's assessment and negotiated care plan, including nurse delegation if needed.

This requirement was not met as evidenced by:

Based on observations, interviews, and record reviews the facility failed to obtain nurse delegation for medications requiring administration and nursing judgment for two of four sample residents (Residents #1 and #4). Failure to obtain the nurse delegation placed residents at risk for medication errors. Findings included...

Two Residential Care Services (RCS) investigators made an unannounced visit to the adult family home (AFH) on 10/17/19.

Resident #1:

The investigators interviewed Resident #1 on 10/17/19 at 10:10 AM. Resident #1 said Staff A, Provider, gave her medications and kept track of the medications she needed. She said she had memory problems. As observed on 10/17/19 at 10:10 AM, the resident had difficulty with recall and was unable to provide details about medication(s) she took for pain.

The 10/17/19 care plan for Resident #1 showed she had Alzheimer's [REDACTED] and [REDACTED]

Per the medication administration records (MARS) for August 2019, September 2019, and October 2019, the prescriber ordered Oxycodone, a narcotic pain medication, five milligrams (mgs) every 8 hours as needed for pain.

According to an interview with Staff A on 10/17/19 at 11:00 AM, Resident #1 was inconsistent in her ability to rate her pain and ask for medication for it, which placed the duty on staff to exercise judgment about when to give the Oxycodone.

Review of the MARS mentioned above showed Staff A gave the resident Oxycodone on 08/9/19 and 09/5/19. Review of Resident #1's file showed the nurse-delegator did not delegate Staff A to provide Oxycodone to Resident #1.

Resident #4:

The investigators interviewed Resident #4 on 10/17/19 at 10:45 AM. As observed on 10/17/19 at 10:45 AM, Resident #4 had difficulty with recall and Staff A had to provide her with cues to complete tasks, such as transfers out of a chair. She was unable to provide details about the type of medications she took. Resident #4 stated she had pain but was unable to provide details about the nature of her pain and the medication(s) she took for it. Per Resident #4, she relied on Staff A to provide her medications and keep track of them.

The 08/27/19 care plan for Resident #4 showed she had [REDACTED] and [REDACTED]. Per this care plan, the resident needed nurse-delegation to administer her medications before moving into the AFH because of memory problems.

According to the September 2019 and October 2019 MARS, the prescriber ordered Morphine

Sulfate, a narcotic pain medication 15 mgs every four hours as needed for pain, Naprosyn, anti-inflammatory to treat pain, 500 mgs twice daily as needed for pain, Seroquel, anti-psychotic, 50 mgs at bedtime as needed for agitation, and Desyrel, anti-depressant, 50 mgs as needed at bedtime for insomnia. Additionally, the prescriber ordered Bisacodyl suppository, laxative, 10 mgs rectally as needed daily for constipation.

Per interview on 10/17/19 at 12:30 PM with Staff A, Resident #4 did not rate her pain and was unable to specify which medication she wanted for it. Per Staff A, Resident #4 also did not ask for medications for agitation and difficulty sleeping, which placed the duty on staff to exercise judgment about giving her the medications for pain, agitation, and insomnia. Staff A also had to administer the Bisacodyl suppository because the resident was unable to insert it herself.

Review of the September 2019 MAR showed Staff A gave Resident #4 Morphine Sulfate on 09/26/19 and 09/28/19. He gave her Naprosyn on 09/27/19, 09/28/19, and 09/29/19. Staff A gave her Seroquel on 09/26/19, 09/27/19, 09/28/19, and 09/29/19. Staff A gave her Desyrel on 09/25/19, 09/26/19, 09/27/19, 09/28/19, 09/29/19, and 09/30/19. He gave her Bisacodyl on 09/27/19.


Review of the October 2019 MAR showed Staff A gave Resident #4 Morphine Sulfate on 10/1/19, 10/3/19, 10/4/19, 10/12/19, and 10/13/19. He gave the resident Seroquel on 10/1/19, 10/2/19, and 10/3/19. Staff A gave Resident #4 Desyrel on 10/1/19 through 10/12/19, and 10/14/19 through 10/16/19.

Review of Resident #4's file on 10/17/19 showed Staff A was not nurse-delegated to give the Morphine Sulfate, Seroquel, Desyrel, or Bisacodyl.


Per telephone interview with Staff A on 10/21/19 at 8:15 AM, all four residents in the AFH including Residents #1 and #4 were Department-supported. He stated it was the responsibility of the Home and Community Services Case Manager to determine if medications for the residents required staff to be nurse-delegated to give them. Staff A also stated if he learned prospective residents took any medications that needed delegation by a nurse, he wouldn't admit them into the AFH.

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, Happiness AFH LLC is or will be in compliance with this law and / or regulation on (Date) 10-31-19. In addition, I will implement a system to monitor and ensure continued compliance with this cited deficiency.



Provider (or Representative)



Date

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