STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
***8517 E Trent Ave, Ste 102, Spokane Valley, WA 99212***

CANDLELIGHT HOMES INC
CANDLELIGHT HOMES
2021 S Rebecca St
Spokane, WA 99223

RE: CANDLELIGHT HOMES License # 349000

Dear Provider:

This letter addresses Compliance Determination(s) 27663 (Completion Date 08/04/2023) and 25720 (Completion Date 07/12/2023).

The Department completed a follow-up inspection of your Adult Family Home on 08/04/2023 and found that you have corrected the violations listed in the Full report dated 07/12/2023. Your home is back in compliance as of 07/21/2023 with the cited requirements of the Washington Administrative Code or the Revised Code of Washington or both.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-76-10015-1

The Department staff who did the on-site verification:
Jacqueline Block, AFH Licensor

If you have any questions, please contact me at (509)323-7321.

Sincerely,

Tamara Tredo

Tamara Tredo, Field Manager
Region 1, Unit E
Residential Care Services

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|---|---|---|
| Statement of Deficiencies | License #: 349000 | Compliance Determination # 25720 |
| Plan of Correction | CANDLELIGHT HOMES | Completion Date |
| Page 1 of 3 | Licensee: CANDLELIGHT HOMES INC | 07/12/2023 |

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Adult Family Home license.

The department completed data collection for the unannounced on-site full inspection on 06/22/2023 and 06/28/2023 of:
CANDLELIGHT HOMES
S 2021 REBECCA
SPOKANE, WA 99223

The following sample was selected for review during the unannounced on-site visit: 5 of 5 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Jacqueline Block, AFH Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1 , Unit E
8517 E Trent Ave, Ste 102
Spokane Valley, WA 99212

As a result of the on-site visit(s), 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.

Tamara Tredo
Residential Care Services

07/17/2023
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.

Carl Williams 7/21/23

| Statement of Deficiencies | License #: 349000 | Compliance Determination # 25720 |
|---|---|---|
| Plan of Correction | CANDLELIGHT HOMES | Completion Date |
| Page 2 of 3 | Licensee: CANDLELIGHT HOMES INC | 07/12/2023 |

Provider (or Representative) 7/21/23 Date

**WAC 388-76-10015 License Adult family home Compliance required.**

(1) The licensed adult family home must comply with all the requirements established in chapters 70.128 , 70.129, 74.34 RCW, this chapter and other applicable laws and regulations including chapter 74.39A RCW; and

**This requirement was not met as evidenced by:**

WAC 296-842-12005
Develop and maintain a written program.

(1) Develop a complete worksite-specific written respiratory protection program that includes the applicable elements listed in Table 3. The program must cover each employee required by this section to use a respirator.

Based on interview and record review, the Adult Family Home (AFH) failed to develop a written respiratory protection program (RPP) that included information and training on the use of N95 respirators worn by 5 of 5 staff (Staff A, B, C, D & E). This failure placed residents at risk of exposure to communicable respiratory diseases by not ensuring staff were trained on use of N95 respirators.

Findings included...

Review of Dear Provider Letter dated 04/30/2021 "Employer Responsibilities for Respiratory Protection Program and Provision of Personal Protective Equipment" showed the AFH is required to develop and maintain a Respiratory Protection Program.

Review of Dear Provider Letter dated 11/05/2021 "Respirator Fit Testing and Respiratory Protection Program Resource" provided resources for the AFH to develop a Respiratory Protection Program.

Review of infection control documentation on 06/28/2023 showed there was no written respiratory protection program or no documentation that training for use of personal protective equipment had occurred for Staff A, Provider, Staff B, Caregiver, Staff C, Caregiver, Staff D, Caregiver and Staff E, Caregiver.

In an interview on 06/28/2023 at 11:38 AM, Staff A stated they did not have a respiratory

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|---|---|---|
| Plan of Correction | CANDLELIGHT HOMES | Completion Date |
| Page 3 of 3 | Licensee: CANDLELIGHT HOMES INC | 07/12/2023 |

protection program in place and thought they heard something about an RPP being required.

**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, CANDLELIGHT HOMES is or will be in compliance with this law and / or regulation on (Date) 7-21-23 .

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Provider (or Representative) 7/21/23 Date

7/21/23

A written program has been put into place. However, staff have been trained on the use of N95/KN95 masks, donning and doffing PPE, and all staff have been fit tested annually and appropriate PPE is in stock, in abundance, for staff use. Each employee will review the written Respiratory Protection Program, demonstrate proficiency in using N95 masks and sign appropriate documentation by 7/28/23.

We have printed materials from the CDC which we have used to demonstrate appropriate use of PPE and these printed materials, along with visual guides have been in place and in use for 3 years.

Staff have demonstrated proficiency in the use of N95s during last Covid outbreak where a few residents were [redacted], a few were negative, all staff were negative and we provided care to both groups, keeping the staff and negative residents negative throughout the quarantine period.