STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

SHALOM ADULT FAMILY HOME LLC
SHALOM ADULT FAMILY HOME LLC
14522 52ND PL W
EDMONDS, WA 98026

RE: SHALOM ADULT FAMILY HOME LLC License # 752264

Dear Provider:

This letter addresses Compliance Determination(s) 25735 (Completion Date 06/22/2023) and 24291 (Completion Date 05/24/2023).

The Department completed a follow-up inspection of your Adult Family Home on 06/22/2023 and found that you have corrected the violations listed in the Full report dated 05/24/2023. Your home is back in compliance as of 06/09/2023 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 388-76-10290-1, WAC 388-76-10285-2, WAC 388-76-10285-1, WAC 388-76-10750-1

The Department staff who did the on-site verification:
Hang Lu, Licensor

If you have any questions, please contact me at (206)914-5042.

Sincerely,

Renee' Bourque

Renee Bourque, Field Manager
Region 2, Unit I
Residential Care Services

STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
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20311 52nd Ave W, Suite 100, Lynnwood, WA 98036

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 05/18/2023 and 05/18/2023 of:
SHALOM ADULT FAMILY HOME LLC
14522 52ND PL W
EDMONDS, WA 98026

The following sample was selected for review during the unannounced on-site visit: 2 of 3 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Hang Lu, Licensor
Rodolfo Antonio Baylon, Adult Family Home Licensor

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 2 , Unit I
20311 52nd Ave W, Suite 100
Lynnwood, WA 98036

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.

Renee' Bourque
Residential Care Services

05/30/2023
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.

Provider (or Representative) 6/9/23 Date

WAC 388-76-10290 Tuberculosis Positive test result. When there is a positive result to tuberculosis skin or blood testing the adult family home must:

(1) Ensure that the person has a chest X-ray within seven days;

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to ensure 1 of 9 caregivers (Staff B) completed the Tuberculosis (a contagious infection that usually attacks the lungs) screening process by obtaining the chest X-ray within seven days of a positive Tuberculosis (TB) skin test. This failure placed Residents 1, 2, and 3 at risk for being exposed to a communicable disease.

Findings included...

Observation, on 05/18/2023 at 9:10 AM, showed Staff B was on duty at the AFH.

Review of the AFH's Personnel Records showed the AFH hired Staff B on 12/18/2022. Record review showed Staff B had documentation of the previous two step TB skin tests, dated 06/04/2022 and 06/15/2022, with negative results. There was no documentation of any TB skin test within three days of hire on file.

In an interview, on 05/18/2023 at 4:50 PM, Staff H, Caregiver, stated that Staff B had another TB skin test. Staff H stated that they would send Staff B's additional TB test to the department the next day.

Review of document, received by the Department on 05/19/2023, showed Staff B had a positive TB skin test, dated 12/22/2022, requiring a follow up chest X-ray. There was no documentation of a chest X-ray being done within seven days of the positive TB skin test.

In an interview, on 05/19/2023 at 2:40 PM, Staff H stated that Staff B did not have the chest X-ray done. Staff H stated that Staff B would go get the chest X-ray the next day (05/20/2022).

Review of document, received by the Department on 05/22/2023, showed a receipt for Staff B's chest X-ray, dated 05/20/2023.

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, SHALOM ADULT FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 6/9/23 .

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

Provider (or Representative) — Date: 6/9/23

WAC 388-76-10285 Tuberculosis Two step skin testing. Unless the person meets the requirement for having no skin testing or only one test, the adult family home, choosing to do skin testing, must ensure that each person has the following two-step skin testing:

(1) An initial skin test within three days of employment; and

(2) A second test done one to three weeks after the first test.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure 2 of 9 caregivers (Staff D and Staff E) completed the two-step Tuberculosis (a contagious infection that usually attacks the lungs) skin testing. This failure placed Residents 1, 2, and 3 at risk for exposure to a communicable disease.

Findings included...

Review of the AFH's Personnel Records showed the AFH hired Staff D on 10/31/2021. Record review showed Staff D had a Tuberculosis (TB) skin test on 09/29/2021 with negative result. There was no evidence Staff D completed the two step TB skin testing.

Review of the AFH's Personnel Records showed the AFH hired Staff E on 12/21/2019. Record review showed Staff E had two TB skin tests, dated 02/17/2020 and 04/24/2023, with negative results. There was no evidence Staff E had the two step TB skin tests that were one to three weeks apart.

In an interview, on 05/18/2023 at 4:51 PM, Staff H, Caregiver, stated that Staff D had not worked in the last three months. Staff H stated that Staff E would get another skin test the next day.

Review of document, received by the Department on 05/19/2023, showed Staff E had a TB skin test placed on this day with pending result.

In a phone interview, on 05/19/2023 at 2:40 PM, Staff H stated that Staff D did not have the second step TB skin test done. Staff H stated that Staff D was not interested in picking up any more shifts at the AFH. Staff H stated that they would send Staff E's TB skin test result to the Department on 05/22/2023.

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, SHALOM ADULT FAMILY HOME LLC is or will be in compliance with this law and / or regulation on (Date) 6/9/23 .

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

Provider (or Representative) — Date: 6/9/23

WAC 388-76-10750 Safety and maintenance. The adult family home must:

(1) Keep the home both internally and externally in good repair and condition with a safe, comfortable, sanitary, and homelike environment that is free of hazards;

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to keep the home environment clean and in good repair. This failure placed 3 of 3 residents (Residents 1, 2, and 3) at safety risk and a decreased quality of life.

Findings included...

Observation, on 05/18/2023 at 9:20 AM, showed the legs on a dining chair were loose. Two other dining chairs had loose arms. At 1:45 PM, Staff G, Caregiver, removed the dining chair with loose legs from the dining room. Staff G stated that they would make sure all the chairs were safe for residents to sit on.

Observation, on 05/18/2023 at 4:08 PM, showed dirty and rusty vents on the bathroom ceiling. The caulking in the shower stall and around the base of the toilet had deteriorated and cracked. The paint on the wall below the sink had peeled off from its surface. There were scuff marks on the bathroom door and on the wall near the sink.

In an interview, on 05/18/2023 at 4:20 PM, Staff H, Caregiver, stated that they would ask Staff E, Caregiver, to paint and re-caulk the bathroom.

Attestation Statement

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

Provider (or Representative) | Date 6/9/2023