



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

Tsedale Habtemariam
Bright Adult Family Home
21807 76th PI W
Edmonds, WA 98026

RE: Bright Adult Family Home License # 752575

Dear Provider:

This letter addresses Compliance Determination(s) 39548 (Completion Date 04/10/2024) and 38378 (Completion Date 03/18/2024).

The Department completed a follow-up inspection of your Adult Family Home on 04/10/2024 and found that you have corrected the violations listed in the Full report dated 03/18/2024. Your home is back in compliance as of 03/20/2024 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 388-76-10265-1-d, WAC 388-76-10198-3, WAC 388-76-10198-4

The Department staff who did the off-site verification:

Hang Lu, Licenser

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



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Statement of Deficiencies	License #: 752575	Compliance Determination # 38378
Plan of Correction	Bright Adult Family Home	Completion Date
Page 1 of 4	Licensee: Tsedale Habtemariam	03/18/2024

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 03/14/2024 and 03/14/2024 of:

Bright Adult Family Home
21807 76th Pl W
Edmonds, WA 98026

The following sample was selected for review during the unannounced on-site visit: 2 of 4 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Hang Lu, Licenser

From:

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

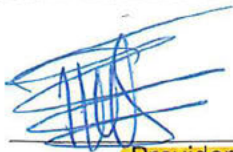
As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report.

Renee' Bourque
Residential Care Services

03/19/2024
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.

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



Provider (or Representative)

3/29/24
Date**WAC 388-76-10265 Tuberculosis Testing Required.**

(1) The adult family home must develop and implement a system to ensure the following persons have tuberculosis testing within three days of employment:

(d) Caregiver;

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 3 caregivers (Staff C) obtained Tuberculosis (TB) testing within three days of hire. This failure placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk for potential exposure to a communicable disease.

Findings included...

Observation and interview, on 03/14/2024 at 10:15 AM, showed Staff C, Caregiver, was working in the AFH. Staff C stated that they had been working in the home for about four months.

Review of Staff C's record showed the AFH hired Staff C on 11/15/2023. Record review showed Staff C had a negative TB skin test, dated 10/30/2023. Record review showed Staff C did not have evidence of obtaining a TB skin test (to complete the two step TB testing) within three days of hire.

In an interview, on 03/14/2024 at 1:58 PM, Staff A, Provider, asked if Staff C needed to have a second TB skin test.

Observation and interview, on 03/14/2024 at 2:00 PM, showed Staff C stating that they did not obtain a TB test when they were hired. Staff A was observed telling Staff C to call the clinic anyway to ask about their second TB skin test and if the clinic would do TB blood testing.

Observation and interview, on 03/14/2024 at 3:40 PM, showed Staff C stating that the clinic confirmed they (Staff C) did not return for another TB skin test one to three weeks after the first TB skin test. Staff C stated that the clinic told them they would have to restart the two-step TB testing. Staff A was observed telling Staff C to go to the clinic to get the TB blood test instead of doing the two-step TB skin tests.

In a phone interview, on 03/18/2024 at 3:15 PM, Staff A stated that Staff C had already done the TB blood test. Staff A stated that they (Staff C) were now waiting for the TB blood test results.

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, Bright Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 3/14/24

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



Provider (or Representative)

3/29/24

Date

taken action &
Corrected
See all documents
Thanks

WAC 388-76-10198 Adult family home Personnel records. The adult family home must keep documents related to staff in a place readily accessible to authorized department staff. These documents must be available during the staff's employment, and for at least two years following employment. The documents must include but are not limited to:

- (3) Tuberculosis testing results.
- (4) Criminal history disclosure and background check results as required.

This requirement was not met as evidenced by:

Based on observation, record review, and interview, the Adult Family Home (AFH) failed to have the personnel record for 2 of 3 caregivers (Staff B and C) readily available for review. This failure delayed verification of staff's qualifications to work in the home and placed 4 of 4 residents (Residents 1, 2, 3, and 4) at risk of being cared for by staff who were not fully qualified.

Findings included...

Review of personnel records showed the AFH hired Staff B, Resident Manager, on 08/24/2014. Review of Staff B's record showed Staff B had documentation of a negative chest X-ray, dated 06/08/2013. Record review showed Staff B did not have documentation of a positive Tuberculosis (TB) skin test (prior to the chest X-ray) on file.

Observation and interview, on 03/14/2024 at 1:30 PM, showed Staff B stating that they were sure they had a positive skin test and that was why the chest X-ray was done in 2013. Staff A, Provider, was observed telling Staff B to call the clinic to request documentation of their positive TB skin test.

Review of personnel records showed the AFH hired Staff C, Caregiver, on 11/15/2023. Review of Staff C's record showed Staff C was missing the Fingerprint Background Check (FP BGC) results.

Observation and interview, on 03/14/2024 at 1:45 PM, showed Staff C presenting proof of their FP appointment, dated 11/07/2023, on their phone. Staff A stated that they had Staff C's FP BGC results, but they were not able to access their AFH's BGC account to show proof and print a copy of Staff C's FP BGC during the inspection.

Review of document, received by the Department on 03/15/2024, showed Staff C had proof of a FP BGC, dated 11/07/2023.

Review of document, received by the Department on 03/18/2024, showed Staff B had a positive TB skin test, dated 03/18/2024.

In a phone interview, on 03/18/2024 at 3:15 PM, Staff A stated that they could not find Staff B's old TB skin test results from 2013. Staff A stated that Staff B would have a chest X-ray done soon.

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, Bright Adult Family Home is or will be in compliance with this law and / or regulation on (Date) 3/20/24, and

3/14/24 taken all
action
Please
See attached
Documents
Thank

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

Provider (or Representative)

3/29/24

Date