



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

PURITY KAPEEN

Purity Adult Family Home Enterprises
11709 E Lenora Dr
Spokane Valley, WA 99206

RE: Purity Adult Family Home Enterprises License # 753335

Dear Provider:

This letter addresses Compliance Determination(s) 29892 (Completion Date 09/21/2023) and 26463 (Completion Date 07/31/2023).

The Department completed a follow-up inspection of your Adult Family Home on 09/21/2023 and found that you have corrected the violations listed in the Full report dated 07/31/2023. Your home is back in compliance as of 09/14/2023 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, WAC 388-76-10890, WAC 388-76-10890-1, WAC 388-76-10890-2, WAC 388-76-10285-2, WAC 388-76-10265-1-d

The Department staff who did the on-site verification:

Valorie Bradley, AFH/ALF Licensors

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



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

Statement of Deficiencies	License #: 753335	Compliance Determination # 26463
Plan of Correction	Purity Adult Family Home Enterprises	Completion Date
Page 1 of 5	Licensee: PURITY KAPEEN	07/31/2023

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 07/11/2023 and 07/11/2023 of:

Purity Adult Family Home Enterprises
11709 E Lenora Dr
Spokane Valley, WA 99206

The following sample was selected for review during the unannounced on-site visit: 6 of 6 current residents and 0 former residents.

The department staff that inspected the Adult Family Home:

Valorie Bradley, AFH/ALF Licenser

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

08/09/2023

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.

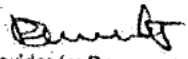
This document was prepared by Residential Care Services for the Locator website.

State of Washington

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License #: 753335
Purity Adult Family Home Enterprises
Licensee: PURITY KAPEEN

Compliance Determination # 26403
Completion Date
07/31/2023


Provider (or Representative)

08/18/2023
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 296-842-15005 - Conduct fit testing.

(1) Provide, at no cost to the employee, fit tests for all tight-fitting respirators on the following schedule:

(a) Before employees are assigned duties that may require the use of respirators.

Based on record review and interview, the Adult Family Home (AFH) failed to ensure fit testing for an N95 mask was completed for 5 of 5 staff (Staff A, B, C, D & E). This failure placed residents at risk for exposure to communicable disease.

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 fit test health care workers with a N95 mask for protection against communicable diseases.

Review of infection control records showed there was no documentation that staff who provide direct resident care had been fit tested for N95 masks.

During an interview on 07/13/2023 at 2:37 PM Staff A, Provider, stated the AFH is on a waiting list to have a company come to the home to fit test staff for N95 masks.

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, Purity Adult Family Home Enterprises is or will be in compliance with this law and / or regulation on:
(Date) 09/14/2023

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

Statement of Deficiencies

License #: 753335

Compliance Determination # 26463

Plan of Correction

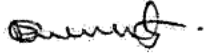
Purity Adult Family Home Enterprises

Completion Date

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Licensee: PURITY KAPEEN

07/31/2023



Provider (or Representative)

08/18/2023
Date

WAC 388-76-10890 Posting the emergency evacuation floor plan Required. The adult family home must display an emergency evacuation floor plan on each floor of the home and the plan must:

- (1) Be posted in a visible location commonly used by residents, staff, and visitors alike; and
- (2) Illustrate the evacuation route from the rooms on that floor to the designated safe location outside the home.

This requirement was not met as evidenced by:

Based on observation and interview, the Adult Family Home (AFH) failed to display an emergency evacuation floor plan on the basement level of the home for 3 of 3 staff (Staff B, C & D) who care for 5 of 5 residents (Residents 1, 2, 3, 4 & 5). This failure placed residents at risk for staff not being familiar with how to evacuate from the home.

Findings included....

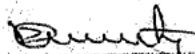
Observation on 07/11/2023 at 12:19PM showed no emergency evacuation floor plan in the basement level of the home where three employees live.

In an interview on 07/11/2023 at 12:20PM Staff B, Resident Manager, stated they did not know an emergency evacuation floorplan map was required in the basement since residents do not have access.

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, Purity Adult Family Home Enterprises is/ or will be in compliance with this law and / or regulation on
(Date) 09/14/2023

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



Provider (or Representative)

08/18/2023
Date

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,

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Compliance Determination # 25463

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Purity Adult Family Home Enterprises

Completion Date

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07/31/2023

choosing to do skin testing, must ensure that each person has the following two-step skin testing:

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

This requirement was not met as evidenced by:

Based on interview and record review, the Adult Family Home (AFH) failed to ensure a second tuberculosis (TB) test was completed for 1 of 5 staff (Staff C). This failure placed residents at risk for exposure to respiratory illness.

Findings included....

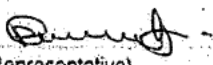
Review of employee records on 07/11/2023 showed Staff C, Caregiver, obtained an initial TB skin test on 04/24/2023. There was no documentation to show they completed a second TB skin test as required.

In an interview on 07/13/2023 at 2:39 PM Staff A, Provider, stated they just became aware that Staff C did not obtain their second TB skin test as 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, Purity Adult Family Home Enterprises is or will be in compliance with this law and / or regulation on
(Date) 09/14/2023

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


Provider (or Representative)

08/18/2023
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 interview and record review, the Adult Family Home (AFH) failed to ensure tuberculosis (TB) testing was completed by the required reinstatement date for 1 of 5 staff (Staff C). This failure put residents at risk of exposure to respiratory illness.

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License # 753335
Purity Adult Family Home Enterprises
Licensee: PURITY KAPEEN

Compliance Determination # 20491
Completion Date
07/31/2023

Findings included...

Review of Dear Provider letter dated 05/26/2022 "Reinstatement of Tuberculosis Testing Requirements July 1, 2022" showed the rules that suspended the tuberculosis testing for health care workers ended on 07/01/2022.

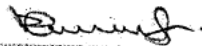
Review of employee records showed Staff C, Caregiver, was hired on 06/09/2022 and obtained an initial TB skin test on 04/24/2023.

During an interview on 07/31/2023 at 2:39 PM Staff B, Resident Manager, stated they were unsure why Staff C did not complete their initial TB test by 07/01/2022 as 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, Purity Adult Family Home Enterprises is or will be in compliance with this law and / or regulation on
(Date) 09/14/2023

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



Provider (or Representative)

08/18/2023
Date