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

Shangri-La Home Care AFH, LLC

Shangri-La Home Care AFH, LLC
5520 FIRWOOD DR
LYNNWOOD, WA 98036

RE: Shangri-La Home Care AFH, LLC License # 754210

Dear Provider:

This letter addresses Compliance Determination(s) 25638 (Completion Date 06/22/2023) and 24364 (Completion Date 05/26/2023).

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 05/26/2023. Your home is back in compliance as of 06/02/2023 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 388-76-101632-1, WAC 388-76-10265-1-d, WAC 388-76-10285-2, WAC 388-76-10198-3, WAC 388-76-10198-2-a

The Department staff who did the off-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

AGING AND LONG-TERM SUPPORT ADMINISTRATION

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 05/23/2023 and 05/23/2023 of:

Shangri-La Home Care AFH, LLC
5520 FIRWOOD DR
LYNNWOOD, WA 98036

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, 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.

Catherine Manlo — Provider (or Representative)
6/5/2023 — Date

WAC 388-76-101632 Background checks National fingerprint background check.

(1) Individuals specified in WAC 388-76-10161 (2) who are hired after January 7, 2012 and are not disqualified by the Washington state name and date of birth background check, must complete a national fingerprint background check and follow department procedures.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to ensure 1 of 5 caregivers (Staff E) had a national Fingerprint (FP) Background check (BGC). This failure placed Residents 1, 2, 3, and 4 at risk of being cared for by someone with an unknown criminal background.

Findings included...

Review of staff records showed the AFH hired Staff E on 04/10/2022. Record review showed Staff E had a valid Washington State name and date of birth BGC. There was no evidence Staff E had completed a FP BGC.

In an interview, on 05/23/2023 at 2:19 PM, Staff A, Entity Representative, stated that Staff E did not have a FP BGC yet. Staff A stated that they would make an appointment for Staff E to do the FP.

Review of an email correspondence, dated 05/24/2023, showed Staff A reporting that Staff E had an appointment for the FP on 06/02/2023.

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, Shangri-La Home Care AFH, LLC is or will be in compliance with this law and / or regulation on
(Date) 6/2/2023. - Staff E went to her FP appt

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

Provider (or Representative)
6/5/2023 — 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 observation, record review, and interview, the Adult Family Home (AFH) failed to ensure 2 of 5 caregivers (Staff B and C) obtained the Tuberculosis (a contagious infection that usually attacks the lungs) testing within three days of hire. This failure placed Residents 1, 2, 3, and 4 at risk for potential exposure to a communicable disease.

Findings included...

Review of a Department database, on 05/23/2023, showed the AFH Change of Ownership (CHOW) occurred on 08/28/2019.

Observation, on 05/23/2023 at 10:05 AM, showed Staff B and Staff C working in the AFH.

Review of staff records showed Staff B's original date of hire was 05/26/2014. When the CHOW took place in August 2019, the current AFH hired Staff B to continue to work in the home. Review of Staff B's record showed Staff B had two Tuberculosis (TB) skin tests, dated 03/09/2014 and 03/21/2014, with negative results. There was no evidence Staff B obtained a one step TB skin test within three days of hire (either in 2014 or in 2019).

Review of staff records showed the AFH hired Staff C on 03/15/2023. Review of Staff C's record showed Staff C had two TB skin tests, dated 11/18/2022 and 01/13/2023, with negative results. There was no evidence Staff C obtained a one step TB skin test within 3 days of hire.

In an interview, on 05/23/2023 at 1:55 PM, Staff A, Entity Representative, stated that they would make sure Staff B and Staff C obtained a TB skin test right away.

Review of an email correspondence, dated 05/24/2023, showed Staff A reporting that Staff B and Staff C would get the TB skin test on the following week.

Attestation Statement

Staff B went to Clinic appt on 5/31/2023
Staff C went to Clinic appt on 6/05/2023

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, Shangri-La Home Care AFH, LLC is or will be in compliance with this law and / or regulation on (Date) 5/31/2023.

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

Provider (or Representative) — Date: 6/5/2023

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:

(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 1 of 5 caregivers (Staff D) completed the two-step Tuberculosis (a contagious infection that usually attacks the lungs) skin testing. This failure placed Residents 1, 2, 3, and 4 at risk for potential exposure to a communicable disease.

Findings included...

Review of staff records showed the AFH hired Staff D on 02/17/2020. Review of Staff D's record showed Staff D had a Tuberculosis (TB) skin test, dated 02/19/2020, with negative result. There was no evidence Staff D had another TB skin test done one to three weeks after the first test.

In an interview, on 05/23/2023 at 2:09 PM, Staff A, Entity Representative, stated that Staff D did not have the second TB skin test. Staff A stated that they would tell Staff D to do the two-step TB skin testing right away.

Review of an email correspondence, dated 05/24/2023, showed Staff A reporting that Staff D had an appointment for TB testing on this day.

Attestation Statement

Staff D went to Clinic appt on 5/24/2023

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, Shangri-La Home Care AFH, LLC is or will be in compliance with this law and / or regulation on (Date) 5/24/2023.

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

Provider (or Representative) — Date: 6/5/2023

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:

(2) Staff orientation and training records pertinent to duties, including, but not limited to:

(a) Training required by chapter 388-112A WAC, including as appropriate for each staff person, orientation, basic training or modified basic training, specialty training, nurse delegation core training, and continuing education;

(3) Tuberculosis testing results.

This requirement was not met as evidenced by:

Based on record review and interview, the Adult Family Home (AFH) failed to have the personnel records for 2 of 5 caregivers (Staff A and E) readily available for review. This failure delayed verification of staff's qualifications to work in the home and placed Residents 1, 2, 3, and 4 at risk of being cared for by staff who were not fully qualified.

Findings included...

Review of staff records showed Staff A, Entity Representative, did not have a valid Safety and Orientation training certificate on file. There was a blank training certificate in their file.

Review of staff records showed the AFH hired Staff E on 04/10/2022. Record review showed Staff E had documentation of a negative chest X-ray, dated 04/19/2022. There was no documentation of a Tuberculosis (a contagious infection that usually attacks the lungs) skin test (done prior to the chest X-ray) on file for review.

Observation, on 05/23/2023 at 2:12 PM, showed Staff A calling Staff E on the phone to ask about the Tuberculosis (TB) skin test document. Staff A directed Staff E to call the clinic to get the TB test document.

Review of an email correspondence, dated 05/24/2023, showed Staff A reporting that they could not find their original Safety and Orientation training certificate. Staff A stated that they would take the training as part of their continuing education. Staff A stated that Staff E would go to the clinic on 05/25/2023 to get their TB skin test result.

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, Shangri-La Home Care AFH, LLC is or will be in compliance with this law and / or regulation on

(Date) 5/26/23 . - Staff E received original TB result from clinic and sent email to Licensor.

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

Provider (or Representative) — Date 6/5/2023